

20 June 2011



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Richmond House
79 Whitehall
London
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TO:

All Leaders of Local Authorities
All Local Authority Chief Executives

Dear Colleagues,

Last week, the NHS Future Forum made its recommendations to the Prime Minister, Deputy Prime Minister and Secretary of State for Health. The Government accepted all of their core recommendations. Today, we have published a more detailed response, and alongside David Nicholson's letter to the NHS, I am writing to summarise how the recommendation will affect local authorities.

I would also like to take this opportunity to thank you for your contributions to the listening exercise. Many of your suggestions resonated strongly with both the NHS Future Forum and the Government, and helped to shape the overall direction of modernisation. The emphasis the Forum placed on integration reflects the contribution you made.

These refinements mean that the leadership role for councils will be at the very heart of the reforms in driving forward our vision for integrated services tailored to the needs of local communities. I would urge you all to read the detailed Government response as a basis for continuing the discussions I know have already been taking place around the country. You can read it at <http://healthandcare.dh.gov.uk/>

Increased integration and strengthened health and wellbeing boards

Health and wellbeing boards will have a stronger role in driving a genuinely collaborative approach to commissioning across health and social care. We will make clear that health and wellbeing boards are not just about assessments and strategies. They can be the vehicle for "lead commissioning" for particular services, for example learning disabilities or dementia – with clinical commissioning groups able to delegate responsibilities to local authorities. This way, not only can they support better integration on the commissioner side, they can also promote more integrated provision for patients and care users – joining up social care, public health and NHS services.

A core part of encouraging more integrated commissioning is the joint strategic needs assessment and the joint health and wellbeing strategy, which will encourage a shared understanding of local priorities across public health, health and social care. Health and wellbeing boards will now also be subject to a new duty to involve patients and the public when developing the joint strategic needs assessment and the joint health and wellbeing strategy.

We have accepted the Future Forum's recommendation, that to support integration around the needs of service users boundaries of clinical commissioning groups should not normally cross those of local authorities. Any departure from this will need to be clearly justified. Clinical commissioning groups seeking establishment on the basis of boundaries that cross those of local authorities, will be expected to demonstrate a clear rationale in terms of benefit to patients. For example, to reflect local patient flows, or to enable groups to take on practices where, overall, this would secure a better service for patients – and provide a clear account of how they would expect better integration between health and social care services to be achieved. The NHS Commissioning Board will need to agree proposed boundaries as part of the establishment process. Before establishing any clinical commissioning group, the Board will be required to seek the views of emerging health and wellbeing boards. If a health and wellbeing board has specific objections, the NHS Commissioning Board will have to satisfy itself that any such objections have been properly considered.

The changes to the Bill seek to establish balanced, reciprocal and mutual local partnership arrangements, which are stronger than the previous provisions. The revised clauses in the Bill will make clear that health and wellbeing boards should be involved throughout the process as clinical commissioning groups develop their commissioning plans, and this will be in addition to the existing duty to co-operate with the health and wellbeing board. There will also be a stronger expectation, set out in statutory guidance, for the plans to be in line with the joint health and wellbeing strategy. Though they will not have a veto, health and wellbeing boards will have a right to refer plans back to the group or to the NHS Commissioning Board for further consideration.

Clinical Commissioning Groups will also have a requirement, if challenged, to publicly explain and justify significant variance between commissioning plans and the joint health and wellbeing strategy, and health and wellbeing boards will have a formal role in authorising clinical commissioning groups and in their annual assessment.

We know that the real challenge is not to establish a board, but in leading cultural and behavioural change to support a joint approach to meeting local need. I am therefore delighted that 137 of the 152 top-tier councils are involved in the early implementer network for health and wellbeing boards – this will be an essential tool for councils and their partners to develop thinking and share learning about what works as you look to develop your own vision for joint working.

Public Involvement

The Future Forum recognised the importance of HealthWatch as the consumer voice for health and social care and confirmed the direction set out in the Health and Social Care Bill. In doing so, it underlined the importance of representative membership for HealthWatch and the continued evolution of LINKs as part of local authority plans for the new health and social care system.

We will also give health and wellbeing boards a new duty to involve users and the public in line with the recommendations of the Future Forum. We plan to establish HealthWatch England and local HealthWatch from October 2012.

Public Health England

At the national level, the Future Forum endorsed the importance of building a strong, integrated public health service. They emphasised, however, the critical importance of staff in the new body being able to give independent scientific advice and to enjoy

the trust and confidence of the public. The Government has therefore announced its intention to, subject to the usual approvals procedures for creating new bodies, establish Public Health England as an executive agency of the Department of Health. As an agency, Public Health England will be a distinct organisation headed by a chief executive with clear accountability for carrying out its functions. Its status will underline its responsibility for offering scientifically rigorous and impartial advice.

I appreciate that the last few weeks have been a period of significant uncertainty for local government as well as the NHS and I hope that the document published today provides a stable basis for you to drive forward transition planning locally.

While we should not underestimate the challenges ahead in implementing the refined reforms, I relish the opportunity to work with you to build more integrated, efficient and effective services for each area of the country.

Yours Sincerely,

A handwritten signature in black ink, appearing to read 'David Behan'. The signature is fluid and cursive, with a large loop at the end of the last name.

David Behan
Director General for Social Care, Local Government and Care Partnerships