

**ASSOCIATION OF DIRECTORS OF ADULT SOCIAL SERVICES
(ADASS)**

**ASSOCIATION OF DIRECTORS OF CHILDREN'S SERVICES
(ADCS)**

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**Directors of adults and children's social care seek
'clarification' of Government public health White Paper**

DIRECTORS OF CHILDREN'S and Directors of Adult Social Services have welcomed the Government's intention to return to local authorities a leading role in improving, promoting and protecting the health of their communities. But it seeks further clarification of the means by which local government will be resourced to enable councils to meet Government expectations.

In their response to the Government's Public Health White Paper* DASSs and DCSs also express their concern regarding the structures emerging from the Health and Social Care Bill currently under debate in Parliament, and the 'potential dilution' of the priority that has been given to services to vulnerable children, families and adults in the past, and the further fragmentation of health services for children and families.

Directors say "we are not clear of the intended relationship between Public Health England, the NHS Commissioning Boards, Monitor, HealthWatch, the Health and Wellbeing Boards and, ultimately, GP Consortia ... We seek urgent clarification from Government on how different elements of the proposed system will relate to and work with each other," in the future.

Similarly, directors express fears that "the potential lack of alignment between different structures and layers within the new local public health system may present significant challenges to integrated approaches." Their concern centres on the extent to which Health and Wellbeing Boards will be 'critical to the dynamics of local commissioning', and Government is 'strongly urged' to give the HWBs statutory powers both to sign-off local commissioning plans from all partners, and to hold these commissioners to account.

Overall, both Associations believe that DPHs will provide "a critical role in straddling and brokering the professional relationships between health (GP Consortia, NHS) and local authorities to draw out the full advantages that each stakeholder can bring to improving health outcomes and tackling health inequalities."

The report is critical, too, of the way that looked after children and vulnerable children in general tend to be forgotten about in the revised arrangements – "We are particularly concerned that there appears to be potentially inadequate representation of the needs of children and young people in the planning and commissioning arrangements in the proposed system." And, concerned that these responsibilities may

become diluted and/or fragmented across the range of new structures and systems delivering health care, the two Associations “seek reassurance that this will not be the case.”

Their concern extends to the limited reference to the critical role of schools in the public health agenda, particularly in the health promotion and early intervention initiatives that are undertaken within the school environment, such as healthy eating, exercise and efforts to reduce teenage pregnancies and improve the sexual health of young people.

Other points covered include the place of the Director of Public Health within the local government team, the relationship between prevention and early intervention and specific problems which arise within the health inequalities debate.

For ADASS, National Lead on Public Health Sandie Keene said : “The decision by Central Government to return public health to Local Government in which it can be appropriately connected to a wide range of other issues and services is profound, and right. ADASS welcomes this move despite continuing concerns about the structural shape the NHS and local government will take in future. And, of course, important matters concerning the accountability and funding of this important service.”

Ann Baxter, Chair of the ADCS Health, Care and Additional Needs Policy Committee said: “There is a massive potential for local authorities and health partners to have an impact on some of the more intractable public health challenges within these new arrangements particularly in providing a renewed focus on the health needs of children.

Local authorities will want to make the most of the new health and wellbeing boards, and we believe that in order to do so, the boards must retain oversight of the commissioning of all health services to ensure coherence and consistency in services for children and young people and their families.

This would allow the Director of Children’s Services, alongside the Director of Public Health, to join up early intervention initiatives across health and social care agencies, ensure a focus on safeguarding in health services, and hold GP commissioners to account for the services they commission.”

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