

**Manchester City Council
Report for Information**

Report to: Health Scrutiny Committee – 23 July 2015
Subject: Health and Wellbeing Update – Part 1
Report of: Strategic Director for Families, Health and Wellbeing

Summary

This report provides Members of the Committee with an overview of developments across Health and social care.

Recommendation

The Health Scrutiny Committee is asked to note the contents of this report.

Wards Affected: All

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Background documents (available for public inspection):

The following documents disclose important facts on which the report is based and have been relied upon in preparing the report. Copies of the background documents are available up to 4 years after the date of the meeting. If you would like a copy please contact one of the contact officers above.

None

1. Devolution¹

- 1.1 The Local Government Information Unit has published a briefing following the second reading of the Devolution Bill, setting out an overview of the Bill and key issues from the debate around governance and non-metro areas, financing, accountability, functions, engagement, and Secretary of State powers.
- 1.2 Greater Manchester, which is a pioneer in negotiating a deal, will take local control over the economy, and powers over transport, housing, planning and policing. It will also gain new powers to support business growth and skills, and to help join up health and social care budgets. It will have its first mayoral election in early 2017: until then an acting mayor has been agreed and appointed by the combined authority.
- 1.3 The areas in which combined authorities can collaborate are also extended and will no longer be limited to transport and economic regeneration.
- 1.4 An overview of the Greater Manchester Devolution agreement in relation to health and social care will be presented to the July Health Scrutiny Committee.

2. Applying the Social Model of Disability to Dementia – a proposed approach²

- 2.1 The Joseph Rowntree Foundation (JRF) has published a report that proposes using the social model of disability to meet dementia needs. With more people, their families and communities increasingly dealing with dementia, new approaches will be needed. Social model thinking suggests that it is society that needs to adjust, rather than the people who have dementia, a priority being to support the development of enabling environments. Supporting people to remain in their own homes for as long as possible helps to promote their sense of self and identity.
- 2.2 The paper explores the interaction between ageism and disablism running through the way people with dementia are treated now, medically and socially, and how the social model of disability could bring positive solutions to the increasing challenge of dealing with dementia.
- 2.3 In Manchester, the All Age Disability Strategy is being developed. This uses the social model of disability as its core approach to seeking inclusion and follows wide community engagement in informing the development of an action plan. The JRF paper could be helpful in looking at how the strategy incorporates approaches to dementia around the eight key themes, particularly Staying Safe, Choice and Control, Independence in Your Home and Community Opportunities.

¹ <http://www.lgiu.org.uk/briefing/devolution-2nd-reading-of-cities-and-local-government-devolution-bill-2/>

² <http://www.jrf.org.uk/sites/files/jrf/society-adjust-dementia-summary.pdf>

- 2.4 This will link to the new requirements of the Care Act, for example around the new duty of safeguarding adults by carrying out enquiries where there is a risk of abuse and neglect. It will support the Act's wellbeing principle and preventing, reducing and delaying needs requirement.

3. Public Health and Health Protection

- 3.1 Public Health England and NHS England are working with Local Authority Public Health departments to raise awareness that all new university entrants should be vaccinated with Meningococcal ACWY (MenACWY) vaccine before the beginning of the new academic term in 2015. This vaccination is being introduced into the national immunisation programme for England this year to respond to a rapid and accelerating increase in cases of meningococcal group W (MenW) disease, which has been declared a national incident.
- 3.2 Universities and their networks are asked to encourage first time university entrants to take up the offer of the MenACWY vaccine when offered by their GP from August 2015, as part of the new national immunisation programme. In Manchester the Director of Public Health and colleagues from Public Health England will ensure that the vaccine is promoted locally given the high student numbers in Manchester.

4 Transforming Adult Social Care (TASC)

- 4.1 A Peer Review was commissioned to provide an independent assessment of how well the council is delivering Adult Social Care (ASC).

This Peer Review occurred in March 2015 This model of Adults Peer Challenge intends to help local government to help itself to respond to the changing agenda in ASC.

The focus of the Peer Review was on ASC end to end delivery, Adult Safeguarding and Social Work practice. The outcome was that the council was on the "right track" but that a more consistent approach in the delivery of ASC needs to be developed and embedded within the organisation.

- 4.2 In response to the Peer Review and what was already known about the delivery of ASC, an Improvement / Development programme, known as Transforming Adult Social Care (TASC) has been set up designed to build sustainable improvement in relation to ASC delivery It is using as a blueprint the work being led by the local government association (LGA) in respect to the national improvement initiative to reform the delivery of adult social care. The Towards Excellence in Adult Care (TEASC) is designed to support councils to improve their performance in adult social care and improve outcomes for citizens.