

High time for districts to weigh in on ICSs

There is potentially a lot to like in the recent Department of Health and Social Care White Paper. I think my district council colleagues will join me in welcoming a flexible approach to decisions at the local level and an increased role for key local stakeholders.

District councils have a big part to play, given their responsibilities for key determinants of health, from leisure and parks to housing and placemaking, and the myriad other community services we provide. We certainly agree with the Good Governance Institute that districts are England's secret weapon in beating poor health.

Unfortunately, despite the call for a collaborative approach we still need to make the arguments for district councils' involvement in integrated care systems, and our contribution to the health and wellbeing of our communities.

At the District Councils' Network (DCN) we have long said that districts need a stronger voice when it comes to public health; we could be the missing piece joining social care and health. However, we've not had a consistent level of engagement in terms of working with health and wellbeing boards, NHS trusts and commissioners. This seems to have permeated current conversations about ICSs. The focus is on the social care role played by our local government partners, with less discussion on the preventative power of district councils.

Demonstrate return on investment

We need to continue to demonstrate the return on investment of preventative health activities, and we need to do it now with real and meaningful

Guest blog by Councillor Dan Humphreys, leader of Worthing District Council and chair of the District Councils' Network's enhancing quality of life workstream.



representation for districts in the governance of ICSs as they emerge as well as through on-the-ground delivery work.

If we are thinking about health holistically then let's consider what determines most people's health and wellbeing. We should take a preventative view of health – not seeing the NHS as the whole picture, but the emergency response when other measures aren't enough.

The DCN has previously commissioned research from the King's Fund that demonstrated how factors such as housing, leisure and green spaces were key determinants of people's health. In fact, consensus seems to be that it is these types of wider factors, rather than the traditional concept of 'health care' that truly determines the health of the population.

Fighting against health inequalities

We need to start pressing our position and evidencing our importance, particularly as key weapons in the fight against health inequalities – such as leisure services – are under strain. A recent DCN survey found that 94% of districts' leisure centres had been used in programmes tackling health inequalities and 79% had been utilised in specific social prescription schemes.

We will be making the case for these services to be properly resourced to offer a vital preventative measure in an integrated health system. The King's Fund found that up to £23 in value is created for every £1 invested into free access to leisure and with 30% of people using social prescription in Worthing not having to visit their GP, there is a saving of valuable time and energy for the NHS.

There are other district services that link less obviously to good health. For example, our research underlined that access to good quality housing is critical. Poor housing is estimated to cost the NHS £2 billion every year and cost the wider economy even more.

Aspects of environmental health, such as air and noise pollution, also have an impact on wellbeing; this is very much the province of district councils.

I could go on to cover more district services that have a direct impact on the health of a community: sustainable economic development, sound local planning, strengthening social networks; all have a part to play in a properly functioning integrated health care system.

All these factors will also provide real savings to the NHS and the public purse. The charity Fields in Trust for instance, has produced research that shows that frequent usage of green spaces alone could save the NHS £111million per annum in reduced GP visits.

We have been called 'secret weapons' and 'sleeping giants' in the context of the public health agenda for too long. It's high time we started showing everyone just what we're doing to improve our communities' health.

The King's Fund research also suggests ways in which districts can engage in the economics of health and I again urge colleagues to do this. That evidence will be key in demonstrating our role in integrated health care.