

MSDC - Council – 19th December 2018 Leaders Report

1. **Removal of HRA Borrowing Cap** – The removal of the Housing Revenue Account (HRA) borrowing cap delivers a game changing opportunity for many councils to deliver much needed homes. The LGA has recently contacted us to offer us the opportunity to access additional skills we need to develop a sector-led offer that can help us to deliver the new homes that our communities need, and have created the opportunity to access grant of up to £50,000 to support this.
2. **Environmental Strategy** – we have commissioned some external support to get this in place as soon as possible. A cross-party sounding board will also be set up shortly.
3. **Community Strategy** – a couple of stakeholder events have now been carried out and a cross-party Member event was held on the 5th December. It is envisaged that a draft paper will come to Cabinet on 7th January, followed by a consultation period before it comes back to Council for adoption in March 2019. (Overview and Scrutiny have agreed the engagement process).
4. **Annual Canvas** – as Members are aware, the latest electoral registers are now available. I'm pleased to advise Members, that the annual canvas achieved a 96.6% return rate with 46.4% being electronic. The registers will be re-published in February once the final announcement of ward changes is confirmed.
5. **Social prescribing:** At the recent Public Sector Leader meeting, a bid of £183,260 was approved to put in place a full one-year social prescribing model testing the approach across Babergh, Mid Suffolk and Suffolk Coastal Districts. The bid is part of a multi-sector and multi-agency bid which has already secured £549,507 from the Ipswich and East Suffolk CCG Transformation Award. The CCG has also agreed a separate investment of £250,000 for social prescribing across the two INT areas in Ipswich.

The money would enable partners to establish and embed social prescribing across the whole area covered by the CCG and to demonstrate the outcomes that can be achieved – for individuals, communities, VCSE organisations and the public sector. The longest running social prescribing pilot in Suffolk, Lowestoft Solutions, has seen reductions of 44% in GP appointments and 21% in A and E visits across the first cohort of 100 patients (comparing the 6 months prior to and after intervention).

Social Prescribing is a person-centred approach that connects people to sources of support, often provided by the voluntary, community and social enterprise (VCSE) sector. A dedicated 'community connector' has the time to get to know individuals and help them to access practical, emotional and community support to improve their health and wellbeing.

The ultimate aim of Social Prescribing is to ensure better outcomes for individuals and more appropriate use of NHS and social care resources. This releases capacity across the system to enable those who require specialist/clinical support to access it sooner. This proposal is part of a wider transformation programme to streamline patient flows, build a more diverse and responsive local provider base and tackle local demographic challenges e.g. the ageing population and hidden needs (including loneliness and social isolation).