

CAMBRIDGE LOCAL HEALTH PARTNERSHIP

3 July 2014
12.00 - 1.40 pm

Present:

Attendance

Cllr. Peter Roberts

Cllr. Kevin Price

Cllr. Lucy Nethsingha

Graham Saint: Strategy Officer, Cambridge City Council;

Jas Lally: Head of Refuse and Environment, Cambridge City Council;

Kate Parker: Cambridgeshire County Council, Public Health

Liz Robin: Director of Public Health, Cambridgeshire County Council

Mark Freeman: Cambridge Council for Voluntary Services

Frances Swann, Housing Support Manager, Cambridge City Council (Guest Speaker).

FOR THE INFORMATION OF THE COUNCIL

14/18/CLHP Election of Chair and Vice-Chair

Councillor Peter Roberts was elected as Chair and Councillor Kevin Price was elected as Vice Chair for the ensuing year.

14/19/CLHP Apologies

Apologies were received from Councillor Joan Whitehead and Antoinette Jackson.

14/20/CLHP Minutes and Matters Arising

The minutes of the meeting held on 27 March 2014 were approved as a correct record.

14/21/CLHP Public Questions

No public questions were received.

14/22/CLHP Presentation

Frances Swann, Housing Support Manager at the City Council, gave a short presentation about the newly commissioned Housing Related Support Service for Older People Service in Cambridge providing details about what is available and how to access it. Frances said this is a needs based service that will be available to all residents in the city and not just those living in the City's sheltered accommodation. The starting point will be a reassessment of local need, which will be taking place over the next 6 months, with emphasis on more targeted and preventative work.

Some of the issues discussed by the Partnership were:

- Older people seem to like living in sheltered accommodation and there is a big demand for this type of housing – additional investment is required
- Older people with assets should be encouraged to spend more of their money on looking after themselves, such as purchasing community alarms.
- More older people should be involved in social events to help combat isolation – sheltered accommodation events were now open to local people.
- There was probably more room for people to begin to manage their own health and care – so approaches like tele-care were being investigated.
- Continuing need for better dialogue for hospital discharges – some recent problems had arisen that could have been avoided.
- Referral routes to the services came from a variety of sources, mostly from GPs and Social Care professionals but early assessments seemed to offer the best way forward.
- The contract is for 3 years and then will be subject to renegotiation, so budgets were secure over the next few years.

14/23/CLHP Updates

Health and Wellbeing Board

Liz Robin, Director of Public Health gave an update on the work of the Board, including discussions at its last meeting on 11 June 2014.

NHS Cambridgeshire and Peterborough CCG had succeeded in achieving most of the local quality premium indicators for 2013/14 it had previously negotiated. It should be eligible to the reward attached to this success but had been told this could not be drawn down because the CCG was presently running a deficit. The HWB felt that this was unfair and was lobbying to have this reward was released.

In the HWB's discussions about the local health economy and the CCG's new 5 year strategic plan the pressures across the health care system were noted. The CCG was having difficulty in matching the increased activity in the local NHS hospitals and consequently was running up a deficit. The CCG had been recognised as being a challenged commissioning group and was working with national bodies to create a more stable health care system. A "blue-print" for change had been developed by PWC and a concordat agreed with providers.

Liz said that the HWB would be lobbying NHS England and others to alter the present payment by results arrangements as it felt these were preventing sufficient investment in community services to break the cycle of crisis management.

Liz outlined the main messages from her Annual Public Health report and members discussed the PHOF indicators for Cambridge that had got worse over the past year. It was felt that reducing falls and reducing fuel poverty were the areas where the Partnership should focus, although members in the meeting did not think they had sufficient knowledge of the reasons why these were high, such as the location of the falls or why fuel poverty occurred, or existing activity to reduce them.

Liz was asked to look into providing additional statistics that might provide additional insight into the reasons why the indicators had worsened.

Liz also set out the main conclusions of the summary report on the findings of the Joint Strategic Needs Assessment (JSNA) on autism, personality disorders and dual diagnosis. Liz said that the report showed high rates of diagnosis for autism in Cambridge. Members thought that dual diagnosis presented some of the bigger challenges, especially around personality disorders, drugs and alcohol.

14/24/CLHP Looking Forward

Members said that they wanted to focus on two areas, derived from the PHOF indicators, at the next CLHP meeting. These were: reducing the number of falls, and; reducing fuel poverty. It was felt the biggest gains could be made from partnership work in these areas.

Partners will be asked to consider their contributions in advance of the meeting, particularly how low income (and inequalities), poor mental health, homelessness and lack of physical activity, influenced these indicators. These

are issues that the Partnership has previously identified as being important to good health and wellbeing in the city.

14/25/CLHP Progress on Outstanding Actions from the Last Meeting

1. The proposal to hold a workshop to help explore how local advice services can contribute an improvement in well-being locally, based on the evidence provided by the CAB Health Outreach Service in Sefton, was agreed. This will take place on 30 July 2014.
2. A Housing Officer from the Council would be attending a CamHealth GP committee on 10 July to help improve the local links between housing and health and social care services.

14/26/CLHP Date of Next Meeting

12.00 Noon on the 23rd October 2014

The meeting ended at 1.40 pm

CHAIR