



## CAMBRIDGE LOCAL HEALTH PARTNERSHIP

**Date:** Thursday, 25 June 2015  
**Time:** 12.00 pm  
**Venue:** Committee Room 1 - Guildhall  
**Contact:** Graham Saint **Direct Dial:** 01223 457044

### AGENDA

**1 Apologies**

**2 Election of Chair and Welcome**

**3 Public Questions**

This is an opportunity for members of the public to ask a question or make a statement to the Partnership. Please refer to the Public Participation section at the end of this agenda.

**4 Minutes and Matters Arising** (*Pages 7 - 12*)

To approve the minutes of the meeting held on 29 January 2015.

**5 Presentation: Cambridge Sustainable Food**

Bev Sedley, Chair of Cambridge Sustainable Food, will talk about a project being run by the group in the North of Cambridge to promote good cooking skills and healthy eating. Bev will also talk about the wider work of the group, including its Sustainable Fish Campaign and WW2 Nutrition Challenge, and the process of making Cambridge an accredited Sustainable Food City. You can find out more about Cambridge Sustainable Food here: <http://www.cambridgesustainablefood.org/>

**6 Updates**

**6a Health and Wellbeing Board (HWB)** (*Pages 13 - 22*)

Adrian Lyne, Policy and Projects Officer at Cambridgeshire County Council, will outline some of the issues to be discussed at the forthcoming **2 July 2015** HWB meeting.

An agenda and supporting papers can be found here: <http://www2.cambridgeshire.gov.uk/CommitteeMinutes/Committees/Meeting.aspx?meetingID=994s>

This will include reference to the Director of Public Health's recently published Annual Report and the latest Health Profile for Cambridge.

A draft agenda and forward plan for HWB is attached.

## 6b **Health Committee**

Kate Parker, Head of Public Health Programmes at Cambridgeshire County Council will outline some of the issues to be discussed at the forthcoming 18 July 2015 Health Committee meeting. An agenda and supporting papers can be found here:

<http://www2.cambridgeshire.gov.uk/CommitteeMinutes/Committees/Committee.aspx?committeeID=76>

This is an opportunity for the partnership to consider issues arising from this meeting.

## 7 **Setting Out Our Priorities** (*Pages 23 - 26*)

The recent publication of the 2015 Health Profile for Cambridge and the Director of Public Health's Annual Public Health Report (2014/15) on the health of local people provides an opportunity for the Cambridge Local Health Partnership (CLHP) to review its priorities and to shape its Forward Plan and work for the year.

Members are asked to give their views about where the CLHP should focus over its next few meetings.

## 8 **Review of our Terms of Reference** (*Pages 27 - 30*)

Consideration of our priorities may impact on what we want to do. The Partnership has also sought to inform debates within the HWB, as a part of its network, and met near to when the HWB meets.

The HWB has now moved to meet 6 times a year and this may offer the opportunity to review the partnership's own terms of reference.

## **9 Areas of Focus**

- i. Falls Prevention for Older People
- ii. Fuel Poverty
- iii. Cambridge CAB Outreach project at East Barnwell Medical Practice

## **10 Date of Next Meeting**

10 September 2015, 1.00pm, The Guildhall.

## Information for the Public

### Location

The meeting is in the Guildhall on the Market Square (CB2 3QJ).

Between 9 a.m. and 5 p.m. the building is accessible via Peas Hill, Guildhall Street and the Market Square entrances.

After 5 p.m. access is via the Peas Hill entrance.

All the meeting rooms (Committee Room 1, Committee 2 and the Council Chamber) are on the first floor, and are accessible via lifts or stairs.

### Public Participation

Some meetings may have parts that will be closed to the public, but the reasons for excluding the press and public will be given.

Most meetings have an opportunity for members of the public to ask questions or make statements.

To ask a question or make a statement please notify the Committee Manager (details listed on the front of the agenda) prior to the deadline.

- For questions and/or statements regarding items on the published agenda, the deadline is the start of the meeting.
- For questions and/or statements regarding items NOT on the published agenda, the deadline is 10 a.m. the day before the meeting.

Speaking on Planning Applications or Licensing Hearings is subject to other rules. Guidance for speaking on these issues can be obtained from Democratic Services on 01223 457013 or [democratic.services@cambridge.gov.uk](mailto:democratic.services@cambridge.gov.uk).

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**Fire Alarm**

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**Facilities for disabled people**

Level access to the Guildhall is via Peas Hill.

A loop system is available in Committee Room 1, Committee Room 2 and the Council Chamber.

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## **CAMBRIDGE LOCAL HEALTH PARTNERSHIP**

29 January 2015

12.00 - 1.50 pm

Present

Cllr. Peter Roberts;

Cllr. Kevin Price;

Cllr. Joan Whitehead;

Dr Liz Robin: Cambridgeshire County Council Public Health;

Rachel Harmer: GP Representative of Cam.Health/CATCH;

Mark Freeman: Cambridge CVS;

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

Frances Swann, Housing Support Manager, Cambridge City Council;

R. Calloway; and

Toni Birkin: Committee Manager

### **FOR THE INFORMATION OF THE COUNCIL**

#### **15/1/CLHP Apologies**

Apologies were received from Antoinette Jackson, Tim Moore, Mike Hay, Katy Parker, Rachel Talbot, Elizabeth Locke Graham Saint and Kate Parker

#### **15/2/CLHP Public Questions**

There were no public questions.

#### **15/3/CLHP Minutes and Matters Arising**

The minutes of the meeting of the 23rd October 2014 were agreed and signed as a correct record.

#### **15/4/CLHP Falls Prevention: Opportunities for Partnership Working**

The Partnership received a report from Jackie Riglin, Falls Prevention Co-ordinator.

Jackie outlined the work of her small, specialist department which encompasses training and partnership working to mainstream falls prevention which she stated, was everyone's business.

A simple set of questions and prompts had been developed to help workers, from a range of agencies, identify those at risk of falls. Individuals were then signposted to appropriate interventions to reduce further falls.

Jackie Riglin said the following in response to questions from the Partnership:

- i. The impact of changes to Care Pathways from the 1<sup>st</sup> April 2015 was as yet unclear.
- ii. The Falls Prevention Service used a telephone triage process to follow up reported falls.
- iii. The service had no direct contact with discharge planning services. These would initially go to the locality team.
- iv. Whilst providing service users with information on other services appeared to be a good idea, it was important that vulnerable people were not overloaded with information. The key was to keep it simple.
- v. Work to develop a partnership with the Fire Service regarding domestic fire alarms was on-going.
- vi. The falls pathways system sometimes identified the home environment as a factor in falls. However, it was outside the remit of the NHS to make changes to the homes. Referrals could be made to other agencies for home safety work which may involve a cost to the individual.

The Partnership made the following comments:

- vii. Councillor Whitehead stated that the public were resistant toward tarmacked pavements which were less likely to become a trip hazard. Tree root damage was also a big problem.
- viii. Linking student volunteers to community groups was suggested.
- ix. Bus drivers, under timetable pressures and pulling off before passengers were seated, were cited as a cause of falls.
- x. The Partnership suggested that there was a good business case for raising awareness of falls prevention.
- xi. The work of Green Fingers and the Handy Man Service were highlighted.
- xii. Councillor Whitehead stated that elderly or less able people struggle to change batteries in smoke detectors. Councillor Roberts undertook to look into what could be done to address this problem.

The Partnership thanked Jackie Riglin for her presentation.

**15/5/CLHP Developing and Anti-Poverty Strategy for Cambridge**



Councillor Owers gave an introduction to the development of the Anti-Poverty Strategy for Cambridge. He suggested that the name may change as there was a stigma attached to the word poverty.

Councillor Owers stated that whilst the strategy was a long term project, he was keen for some initial action to be taken as soon as possible. These would include some food related projects, social isolation of the elderly and housing issues.

Initial projects for this year:

- Pilot debt advice service linked to the GP surgery in Barnwell. It was hoped that this would free up GP time and, if successful, might attract additional external funding.
- Targeted exercise referral.
- Free Swimming.
- Work to reduce the availability of high strength alcohol.

Projects were also under consideration to tackle water and fuel poverty. Approaches to tackle this included; community energy switching schemes, the Winter Warmth project and the Green Deal.

Partnership members made the following comments:

- i. The clear priorities provided by the report were welcomed.
- ii. Financial stress was on the increase and work needed to be done to promote credit unions and to encourage savings.
- iii. Food Banks were not the best approach to poor nutrition and other approaches such as cooking and budgeting lessons were suggested.
- iv. Encouraging and supporting community shops was suggested.
- v. A Love Food / Hate Waste event would be taking place and further details would be circulated to partnership members.
- vi. Providing starter pack for vulnerable tenants moving into tenancies was under consideration.
- vii. It was suggested that many young people moving into tenancies had poor budgeting skills and needed help to access grants and training opportunities.
- viii. Housing in multiple occupation should be provided with information on healthy eating.
- ix. Encouraging student to recycle electrical items when they moved on from Cambridge was suggested.

Councillor Owers thanked the Partnership for their comments. He confirmed that a big part of the strategy would be coordination and information sharing. Cambridge Matters would be used to share information.

### **15/6/CLHP Updates**

Dr Liz Robin updated the Partnership on the recent meetings of the Health and Wellbeing Board and the Health Committee.

Health and Wellbeing Board:

- Considered the membership of the Board and agreed to appoint a member from the voluntary sector.
- Reviewed the current strategy and adopted a number of joint strategies.
- Work was on-going to co-ordinate and join up the multiple mental health strategies.
- Agreed future areas for joint strategic needs assessment (JSNA) including alcohol and drug use, new communities including migrants.
- Agreed to set up a Public Health Reference Group.
- Considered an update on the Better Care Fund

Health Committee:

- Agreed to enter into a Section 75 agreement for school nursing services
- Agreed the budget for Falls prevention.
- The issues around Hinchingsbrooke Hospital were raised and would be fully considered in March.

### **15/7/CLHP Developing Local Actions**

The Partnership noted the progress on the Citizens Advice Bureau outreach project at East Barnwell Medical Practice.

### **15/8/CLHP Pressures on Our Local Health Care System**

The Partnership discussed the pressures on Health Care Systems and raised the following point:

- i. Immunisation uptake in Cambridge was below the national average. This was thought to be linked to the population churn. Visitors from overseas was also said to be a factor as many families choose to stick with the immunisation program of their home nation. Members asked if it was

possible to drill down into the statistics. Dr Liz Robin confirmed that it was possible at an individual GP level but would be labour intensive.

- ii. The loss of the Citizen's Advice Bureau at Addenbrooke's Hospital due to funding cuts was discussed. The Partnership suggested that a representation be made to Addenbrooke's to retain the service. Developing and business case and linking lack of advice to bed blocking was suggested. Councillor Whitehead suggested this be raised with Adrian Loades.
- iii. The initiative regarding the use of public toilets as a location for public health information posters was welcomed. Using council vehicles and buses to promote health messages was discussed.
- iv. Councillor Roberts outlined a proposal to make underused private open space accessible to the public.

### **15/9/CLHP Date of Next Meeting**

Dates for a meeting in early June would be circulated shortly.

The meeting ended at 1.50 pm

**CHAIR**

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**Meeting:** HEALTH AND WELLBEING BOARD SUPPORT GROUP  
**Date:** TUESDAY, 9<sup>TH</sup> JUNE 2015  
**Time:** 14:00 to 16:00  
**Chair:** LIZ ROBIN  
**Venue:** SHIRE HALL OCTAGON BOARD ROOM 2L1, CAMBRIDGE

Teleconference available:  
 Tel. 01223 699000 Access Code: 102030

## DRAFT AGENDA

<b>1.</b>	<b>Introductions and Apologies</b>	<b>LR</b>
<b>2.</b>	<b>Minutes of the previous meetings held on 10<sup>th</sup> April 2015</b>	<b>LR (Attached)</b>
<b>3.</b>	<b>Action List</b>	<b>LR (Attached)</b>
<b>4.</b>	<b>Papers for Health and Wellbeing Board – 2<sup>nd</sup> July 2015 (themed part of agenda)</b>	
<b>4.1.</b>	Patient Story	<b>SS (Oral)</b>
<b>4.2.</b>	Long Term Conditions JSNA Report	<b>Angelique Mavrodaris (To Follow)</b>
<b>4.3.</b>	Better Care Fund Update [standing item]	<b>Geoff Hinkins (Attached)</b>
<b>5.</b>	<b>Papers for Health and Wellbeing Board – 2<sup>nd</sup> July 2015 (general business section of meeting)</b>	
<b>5.1.</b>	Cambridgeshire and Peterborough Health and Care System Transformation Programme (standing item)	<b>JB (Attached)</b>
<b>5.2.</b>	Libraries Transformation Consultation	<b>Jon Anderson (Attached)</b>
<b>5.3.</b>	Annual Public Health Report	<b>LR (Attached)</b>
<b>5.4.</b>	CCG's Choice of Local Quality Premium Indicators	<b>JB (Attached)</b>



	<b>5.5.</b>	Joint Strategic Needs Assessment (JSNA)		
		5.5.1	JSNA Summary Report 2014/15	<b>Wendy Quarry (Attached)</b>
		5.5.2.	Addressing the findings of the Transport and Health JSNA	<b>Angelique Mavrodaris (Attached)</b>
		5.5.3.	CFA priorities and JSNA insight	<b>Sue Nix (Attached)</b>
		5.4.4.	Alcohol and Drugs JSNA Scoping Paper	<b>Val Thomas (To Follow)</b>
<b>6.</b>	<b>Themed Meeting Update – Template</b>			<b>LR/AL (Attached)</b>
<b>7.</b>	<b>Communications Plan</b>			<b>AL(Attached)</b>
<b>8.</b>	<b>Newsletter</b>			<b>AL (Oral)</b>
<b>9.</b>	<b>Forward Agenda Plans</b>			
	<b>9.1</b>	Health & Wellbeing Board		<b>RY/AL (Attached)</b>
	<b>9.2</b>	Health & Wellbeing Support Group		<b>AL (Attached)</b>
<b>10.</b>	<b>Any Other Business</b>			
<b>11.</b>	<b>Date of Next Meeting</b>			
	Thursday, 20 <sup>th</sup> August 2015 from 13:00 to 15:00 being held in Shire Hall Octagon Conference Room 1L1			

**Future Meetings:**

Date	Time	Venue
<b>2015</b>		
Thursday, 22 <sup>nd</sup> October	14:00 to 16:00	Shire Hall Room 128
Monday, 14 <sup>th</sup> December	Ditto	Shire Hall Room 022ab
<b>2016</b>		
Thursday, 25 <sup>th</sup> February	14:00 to 16:00	Shire Hall Room 022ab
Thursday, 5 <sup>th</sup> May	14:00 to 16:00	Ditto

**Contact details:**

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<b>Distribution of agenda and papers to attendees</b>	
<b>Name</b>	<b>Job Title and Organisation</b>
Jessica Bawden	Director of Corporate Affairs – NHS Cambridgeshire and Peterborough Clinical Commissioning Group
Sue Beecroft	Sub-Region's Housing Co-Ordinator – Cambridge City Council
Claire Bruin	Service Director, Adult Social Care – Cambridgeshire County Council
Richard Cassidy	Corporate Director – Fenland District Council
Jacky Dixon	Business Manager - NHS England
Sarah Ferguson	Service Director – Enhanced & Preventative Services, Cambridge County Council <b>(corresponding member only)</b>
Iain Green	Environmental Health Officer (Public Health Specialist) – South Cambridgeshire District Council
Matthew Hall	Community Engagement Communications Manager– Cambridgeshire County Council
Mike Hill	Director – Health & Environmental Services – South Cambridgeshire District Council
Liz Knox	Environmental Services Manager – East Cambridgeshire District Council
Jas Lally	Head of Refuse and Environment – Cambridge City Council
Adrian Lyne	Policy and Projects Officer, Cambridgeshire County Council
Sue Nix	Programme and Partnership Manager, CYPS - Cambridge County Council
Cllr Tony Orgee	Cabinet Member – Health & Wellbeing
Dr Liz Robin	Director of Public Health – Cambridgeshire County Council
Sandie Smith	Chief Executive – Healthwatch Cambridgeshire
Val Thomas	Consultant in Public Health – Cambridgeshire County Council
Jayne Wisely	Head of Leisure and Health – Huntingdonshire District Council
Ruth Yule	Democratic Services Officer - Cambridge County Council

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MEETING DATE	ITEM	REPORT AUTHOR	DEADLINE
<b>Thursday 20 August 2015</b>	<i>Review of Board papers for 17 September 2015 (indicated by *).</i>	N/a	Deadline for papers: Wednesday 12 August 2015
	<b>Themed</b>		
	*Patient story – TBC	Sandie Smith	
	*Priority 4 update	TBC	
	*Alcohol and Drugs JSNA scoping paper (if deferred from July HWB)	Val Thomas	
	*Adult and Older People Social Care Strategy for Mental Health	Kim Dodd / TBC	
	*Public Mental Health Strategy	Emma de Zoete	
	<b>General business</b>		
	*New Communities JSNA scoping paper (or possibly for November HWB)	Iain Green	
	*Better Care Fund Update [standing item]	Geoff Hinkins	
	*Cambridgeshire and Peterborough Health and Care System Transformation Programme [standing item]	Jess Bawden	
	*Annual report of Safeguarding Adults Board	Claire Bruin	

	*Annual report of the Local Safeguarding Children Board	Flick Schofield / TBC	
	*Annual Health Protection Report	Linda Sheridan / Liz Robin	
	Forward agenda plan: Health and Wellbeing Board	Ruth Yule	
	Forward agenda plan: Health and Wellbeing Board Support Group	Adrian Lyne	
<b>Thursday 22 October 2015</b>	<i>Review of Board papers for 19 November 2015 (indicated by *).</i>	N/a	Deadline for papers: Wednesday 14 October 2015
	<b>Themed</b>		
	*Patient story – TBC	Sandie Smith	
	*Children’s Trust update (TBC)	Meredith Teasdale / Denise Revens / Sue Nix	
	*Accelerating Achievement Strategy – progress update	Tom Barden / Rebecca Hudson	
	*Priority 1 update	Meredith Teasdale / Sue Nix	
	<b>General business</b>		
	*CCG’s Commissioning Intentions (or January HWB - TBC)	Jess Bawden	
	*New Communities JSNA scoping paper (or covered at September HWB)	Iain Green	

	*Better Care Fund Update [standing item]	Geoff Hinkins	
	*Cambridgeshire and Peterborough Health and Care System Transformation Programme [standing item]	Jess Bawden	
	Cambridgeshire Health and Wellbeing Strategy – development of new strategy	Liz Robin / Adrian Lyne	
	Forward agenda plan: Health and Wellbeing Board	Ruth Yule	
	Forward agenda plan: Health and Wellbeing Board Support Group	Adrian Lyne	
<b>Monday 14 December 2015</b>	<i>Review of Board papers for 14 January 2016 (indicated by *).</i>	N/a	Deadline for papers: Friday 4 December 2015
	<b>Themed</b>		
	*Patient story – TBC	Sandie Smith	
	* Public Health Reference Group update	Liz Robin	
	*Priority 3 update	Val Thomas	
	<b>General business</b>		
	*CCG's Operational Plan	Jess Bawden	
	*CCG's Commissioning Intentions (or at November HWB)	Jess Bawden	

	*Better Care Fund Update [standing item]	Geoff Hinkins	
	*Cambridgeshire and Peterborough Health and Care System Transformation Programme [standing item]	Jess Bawden	
	Forward agenda plan: Health and Wellbeing Board	Ruth Yule	
	Forward agenda plan: Health and Wellbeing Board Support Group	Adrian Lyne	
<b>Thursday 25 February 2015</b>	<i>Review of Board papers for 17 March 2016 (indicated by *).</i>	N/a	Deadline for papers: Wednesday 17 February 2016
	<b>Themed</b>		
	*Patient story – TBC	Sandie Smith	
	*New Communities JSNA (TBC)	TBC	
	*Priority 5 update	Iain Green	
	<b>General business</b>		
	*Better Care Fund Update [standing item]	Geoff Hinkins	
	*Cambridgeshire and Peterborough Health and Care System Transformation Programme [standing item]	Jess Bawden	
	Forward agenda plan: Health and Wellbeing Board	Ruth Yule	

	Forward agenda plan: Health and Wellbeing Board Support Group	Adrian Lyne	
<b>Thursday 5 May 2015</b>	<i>Review of Board papers for 26 May 2016 (indicated by *).</i>	N/a	Deadline for papers: Wednesday 27 April 2015
	<b>General business (no theme for this HWB meeting)</b>		
	*Patient story – TBC	Sandie Smith	
	*Alcohol and Drugs JSNA report	Val Thomas	
	*CCG’s Choice of Local Quality Premium Indicators	Jess Bawden	
	*Better Care Fund Update [standing item]	Geoff Hinkins	
	*Cambridgeshire and Peterborough Health and Care System Transformation Programme [standing item]	Jess Bawden	
	Forward agenda plan: Health and Wellbeing Board	Ruth Yule	
	Forward agenda plan: Health and Wellbeing Board Support Group	Adrian Lyne	

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## Cambridge Local Health Partnership

25 June 2015

### Reviewing Priorities and Setting out a Forward Plan for the Year

#### **1. Introduction**

The recent publication of the 2015 Health Profile for Cambridge and the Director of Public Health's Annual Public Health Report (2014 – 2015) on the health of local people provides an opportunity for the Partnership to review its priorities and to shape its Forward Plan and work for the year.

#### **2. Annual Public Health Report**

The Annual Public Health Report (APHR) for 2013/14 focused on a "cross-sectional view" of public health and made use of the findings of the national Public Health Outcomes Framework (PHOF), which provided detailed information on health in Cambridgeshire compared with other areas nationally, including the lifestyle and environmental factors that influence health.

The opportunities for partnership action identified in the APHR 2013/14 included:

- Targeted work to understand and address high rates of smoking in parts of the county.
- A focus across organisations on inequalities in the early years
- Work with communities in Fenland on health and lifestyles.
- Reviewing reasons for lower coverage of individual vaccination and screening programmes and taking action to address this.
- In addition, the APHR identifies that developing a preventive approach for mental health is a priority for several stakeholders in the county, although the PHOF does not show outcomes locally to be worse than average.

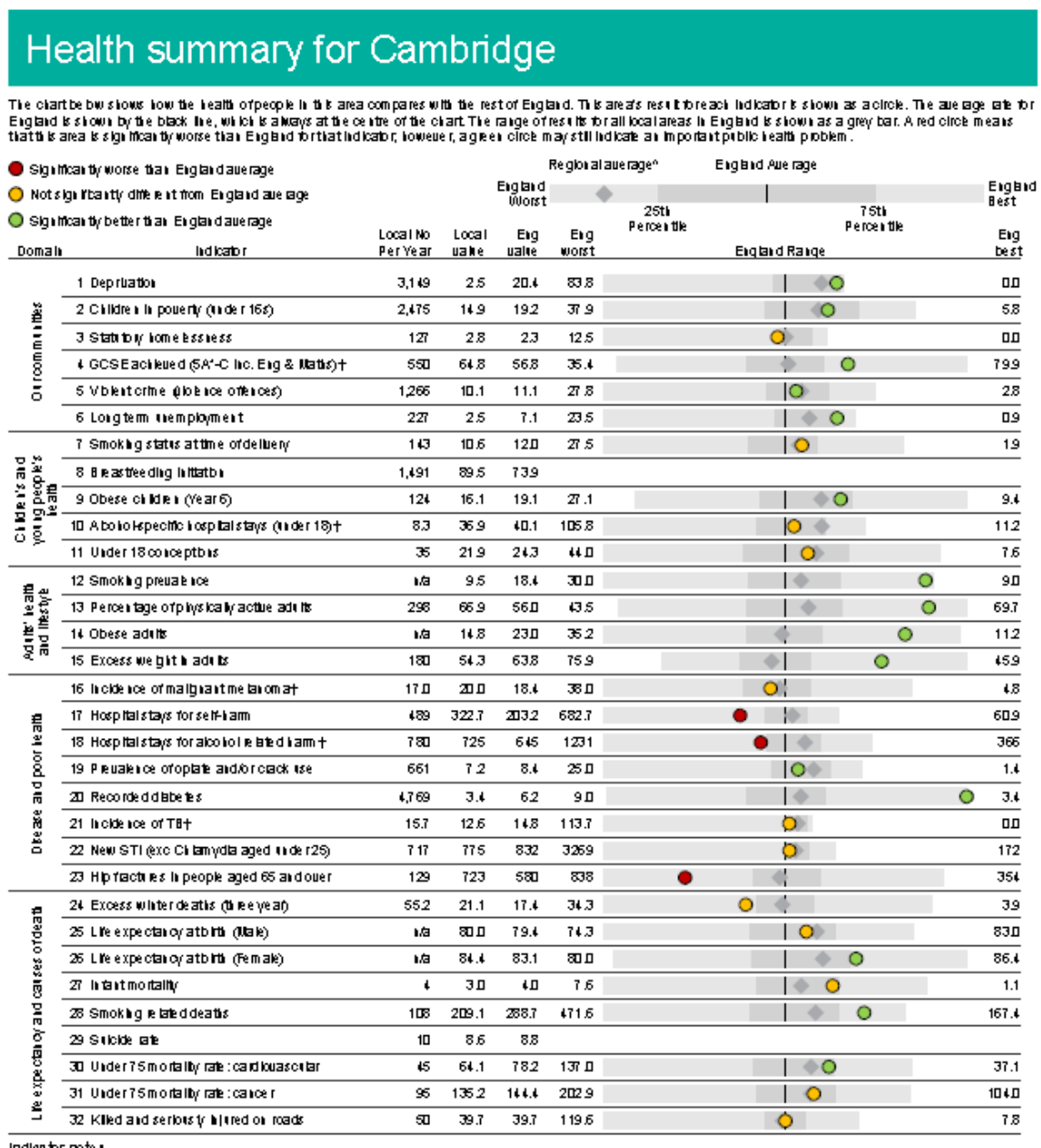
The Annual Public Health Report (APHR) for 2014/15 retains the above actions but also adds a broader focus, looking at changes and trends in public health outcomes over recent years. The report is structured around the "life course" starting with children and moving through to old

age. The report recommends three new opportunities for public health action:

- A focus on promoting the health of school age children, including mental health.
- A whole system approach to healthy diet and physical activity – reversing the trend in obesity.
- Supporting a positive approach to healthy ageing.

### 3. Cambridge Health Profile 2015

The latest health profile, below, shows 3 PHOF indicators for Cambridge that are significantly worse than the national average.





These are:

- Hospital stays for self-harm.
- Hospital stays for alcohol related harm.
- Hip fractures in people aged 65 and over.

### **3. Short-term work of the Cambridge Local Health Partnership**

The Summary JSNA 2012 report, that accompanied the developing Health and Well-being Strategy, identified issues for Cambridge and the Partnership chose to adopt these as its priority areas. These were:

- Local inequalities in health,
- Mental health needs,
- Homeless people and maintaining a focus on prevention,
- Alcohol related harm,
- Smoking, and
- Lack of physical activity and obesity.

The Cambridge Local Health Partnership has recently considered the **PHOF outcomes shown to have got worse for Cambridge**, falling below average and indicating a potential opportunity for local action to improve outcomes by learning from good practice elsewhere, and chose to focus recent meetings on looking at work to address:

- **Households that experience fuel poverty** (PHOF 1.17), and
- **Falls for older people**, covering emergency hospital admissions due to falls (PHOF 2.24 iii) and hip fractures in people aged 65 and over (PHOF 4.14 i).

It has also looked at health and poverty, including how the partnership can contribute to the actions shown in the City Council's Anti-poverty Strategy, with the aim of supporting actions improving the standard of living and daily lives of those residents who are currently experiencing poverty.

Meetings of the Cambridge Local Health Partnership usually are timed to allow members to be briefed about issues being considered by the Health and Wellbeing Board and also put forward views. The HWB meetings now incorporate themes and it could be that the partnership may want to echo these themes in its future meetings.

The themes, in line with each of the Cambridgeshire Health and Wellbeing Strategy's six priorities, are:

Priority 1:	Ensure a positive start to life for <b>children, young people and their families</b>
Priority 2:	Support <b>older people</b> to be independent, safe and well
Priority 3:	Encourage <b>healthy lifestyles</b> and behaviours in all actions and activities while respecting people's personal choices
Priority 4:	Create a safe environment and help to build <b>strong communities, wellbeing and mental health</b>
Priority 5:	Create a <b>sustainable environment</b> in which communities can flourish
Priority 6:	<b>Work together</b> effectively - this priority should also be embedded within all HWB Board themed meetings

### Decision Required

Members are asked to consider the priorities from the Annual Public Health Report, Cambridge Health Profile, forward plan of the HWB and other aspects, when setting its own forward plan for the next year.

## CAMBRIDGE LOCAL HEALTH PARTNERSHIP

# Terms of Reference

Draft: 11 June 2012

### 1. Purpose

Set within the context of ongoing public health and other reforms, this partnership will provide strong local representation and accountability. It will help shape local policies and the delivery of local services and promote the health and wellbeing of Cambridge's residents.

The Cambridge Local Health Partnership will look to add value to existing partnerships, where it can, and choose to focus on local project delivery, where it can make a difference. Emphasis will be on getting things done, making the best use of the assets of partners and keeping the bureaucracy of the Partnership to a minimum.

### 2. Role

The role of the Cambridge Local Health Partnership is to:

- Be a place where knowledge about the local health and wellbeing needs of Cambridge citizens and the assets of service providers is shared and understood, so that local collaborative work is better informed
- Identify a small number of local priorities where joint action can improve the health and wellbeing of local people
- Commission Task and Finish Groups, involving a wide range of stakeholders with an interest in an identified priority, to develop, implement, monitor and review a work programme
- Inform and contribute to the developing **Health and Wellbeing Strategy** for Cambridgeshire
- Provide a brief annual report showing headline achievements over a year
- Represent the interests of local people and to utilise existing community engagement mechanisms, where possible, so that the plans and strategies of local agencies are better informed, and
- Maintain a two-way flow of communication with the **Shadow Cambridgeshire Health and Wellbeing Board** to develop joint working and to play a role in its network

### 3. Membership

Membership of the Cambridge Local Health Partnership will cover:

- Cambridge City Council Executive Member for Community Services and Health
- Cambridge City Council Executive Member for Housing
- Cambridge Council Opposition Spokesperson
- Cambridgeshire County Councillor
- GP representative of Cam. Health / CATCH
- Cam. Health / CATCH Manager
- Locality Public Health representative
- Representative of the Shadow Health and Wellbeing Board / Director of Public Health
- Representative of the community and voluntary sector
- Representative from Cambridgeshire Children's Trust
- Head of Refuse and Environment (City Council)
- Cambridgeshire HealthWatch

#### **4. Meeting Arrangements**

##### **Notice of Meetings**

Meetings of Cambridge Local Health Partnership will be convened by the City Council, who will also arrange the clerking and recording of meetings.

##### **Chair**

Cambridge Local Health Partnership will elect a Chair and Vice-Chair.

##### **Quorum**

The quorum for all meetings of the Board will be achieved when at least 3 different organisations are in attendance. The role of members will be to regularly attend meetings.

##### **Substitutes**

Nominating groups may appoint a substitute member for each position. These members will receive electronic versions of agendas and minutes for all meetings.

##### **Decision Making**

It is expected that decisions will be reached by consensus, however, if a vote is required it will be determined by a simple majority of those members present and voting. If there are equal numbers of votes for and against, the Chair will have a second or casting vote. There will be no restriction on how the Chair chooses to exercise a casting vote.

## **Meeting Frequency**

Cambridge Local Health Partnership will meet quarterly.

## **Status of meetings and reports**

Cambridge Local Health Partnership meetings shall be open to the press and public and the agenda, reports and minutes, will be available for inspection at the City Council's offices and website at least five working days in advance of each meeting. [This excludes items of business containing confidential information or information that is exempt from publication in accordance with Part 5A and Schedule 12A to the Local Government Act 1972 as amended.]

## **Officer Support**

Cambridge Council will offer procedural advice and the servicing of meetings.

## **5. Governance and Accountability**

Cambridge Local Health Partnership will be accountable for its actions to its individual member organisations. Representatives will be accountable through their own organisations for the decisions they take. It is expected that members will have delegated authority from their organisations to take decisions within the terms of reference. It is expected that decisions will be reached by consensus.

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