

CAMBRIDGE LOCAL HEALTH PARTNERSHIP

11 February 2016

2.30 - 4.00 pm

Present: Councillors Johnson (Chair), Price

Val Thomas: Consultant in Public Health, Cambridgeshire County Council

Lisa Smith: Contract Manager, Everyone Health

Dr Joyti Sharma

Lorraine Bald: Locality Manager for South Cambridgeshire and Cambridge City, Everyone Health

Sally Roden: Neighbourhood Community Development Manager, Cambridge City Council

Frank Harrison: Team Manager

Daryl Emes: Partnership Manager for GLL

Dan Hooper: GLL

Karen Begg: Health Watch Cambridgeshire

Mark Freeman: Cambridge CCV

Rachel Talbot: Cambridgeshire Citizens Advice Bureau

Graham Saint: Strategy Officer, Cambridge City Council

Yvonne O' Donnell: Environmental Health Manager, Cambridge City Council

James Goddard: Committee Manager, Cambridge City Council

FOR THE INFORMATION OF THE COUNCIL

16/37/CLHP Apologies

Apologies were received from County Councillor Nethsingha, Kate Parker, Dr Liz Robin, Dr Rachel Harmer, Mike Hay, Frances Swan and Antoinette Jackson.

16/38/CLHP Public Questions

There were no public questions.

16/39/CLHP Minutes and Matters Arising

The minutes of the meeting held on 12 November 2015 were approved as a correct record and signed by the Chair subject to Councillor Johnson being listed as the Chair instead of Councillor Price.

16/40/CLHP Update on Progress With Priority 3 of the Health and Wellbeing Strategy

Val Thomas (Consultant in Public Health, Cambridgeshire County Council) gave a presentation on priority 3 of the Cambridgeshire Health and Wellbeing Strategy 2015 to 2018 'Encouraging Health Lifestyles and Behaviours in all Actions and Activities While Respecting People's Personal Choices':

- i. The focus was on lifestyles and preventative work in collaboration with the private, public and voluntary sectors.
- ii. The pump priming of programs would be evaluated for tie-in to the Healthy Weight Strategy.
- iii. Work being undertaken through partnerships was summarised in the Officer's report.

The following comments were made in response to the report:

- i. A lot of work was being undertaken between the City and County Councils, which should lead to people having healthier lives.
- ii. There was a lack of join up between some services. Frank Harrison attended a regional clinicians group on 10 February 2016. He expressed concern at the lack of knowledge in the clinician's group about local authority services. The focus in the meeting appeared to be on medical services rather than complementary and preventative local authority services eg providing sport facilities.

In response to questions Val Thomas said the following:

- i. Psychology was key to changing people's behaviour regarding food and exercise in order to become healthier as part of priority 3 work. This was a long term initiative.
- ii. Short term goals were also in place. Actions such as decreasing smoking rates were commissioned through ChangePoint Lifestyle Services.
- iii. The NHS was trying to join up agendas and share information about services (health and local authority). Better collaboration could help join up different organisational initiatives.

16/41/CLHP ChangePoint Lifestyle Service

Lorraine Bald (Locality Manager for South Cambridgeshire and Cambridge City, Everyone Health) gave a presentation:

- i. Services were provided from 3 hubs in Fenland, East Cambridgeshire and South Cambridgeshire/City.
- ii. Health inequalities were being addressed through a patient centred approach.

- iii. Patients could be referred to services through their GP or self-referral. The focus was on prevention rather than cure.
- iv. Patients had a single point of contact/access by phone/email. A business support contact would refer patients to an appropriate service (tier 1 – 3).
- v. Services provided:
 - Health Trainer (to refer patients to appropriate services in an area).
 - (Extended) Health Trainer.
 - Behaviour change training (for NHS staff).
 - Lifestyle activities for community usage.
 - Falls prevention programme.
 - Adult weight management.
 - Child weight management.

Lisa Smith (Contract Manager, Everyone Health) gave a short presentation on the services that Everyone Health had recently been commissioned to deliver. The service had robust data collection that was reported back to Val Thomas.

The following comments were made in response to the report:

- i. It was appropriate to focus the service on areas of deprivation.
- ii. Frank Harrison undertook to liaise with Lorraine Bald and Lisa Smith regarding cycle services that could be factored into their programme.
- iii. Suggested providing GP surgeries with leaflets regarding health coach services etc.

In response to questions Lorraine Bald and Lisa Smith said the following:

- i. Various methods were used in order to ensure high retention on schemes i.e. the patient stuck with the programme. For example, practioners contacted patients to find out why they were unable to attend a service/appointment. Practioners would look at individual's needs on an on-going basis to evaluate if they were on an appropriate programme or needed to change.
- ii. Triage was undertaken at the point of contact, evaluation was on-going to tailor a service to individual needs.
- iii. Health coaches were generally medically trained, volunteers could provide some services, such as health walks. These had been commissioned since June 2015.
- iv. Lisa/Lorraine had experienced difficulties contacting GP surgeries regarding leaflets regarding health coach services etc.
- iv. People could contact Everyone Health to volunteer their time/services. Advice, training and some equipment could be provided to volunteers.
- v. Everyone Health intended to link into the Citizen Advise Bureau's Outreach project in future and other local initiatives.

- vi. Forever Active were involved in Everyone Health falls prevention work.

16/42/CLHP Local Work Promoting Physical Activity and Health Eating

16/42/CHLPa Health Eating

Sally Roden (Neighbourhood Community Development Manager, Cambridge City Council) outlined work with local communities to support healthy eating and provide opportunities to eat healthily:

- i. A number of projects had been undertaken regarding food, cooking and healthy eating. The provision of meal events during half-term holidays were proving popular and in some cases these events were the only opportunities to have a good-meal outside of school for young people.
- ii. The focus on food attracted people to events where they could be given information on other topics such as healthy lifestyles.

Frank Harrison (Team Leader, City Council) gave a presentation on the Healthier Options campaign targeted at food businesses who were part of the lunch-time economy in the North of Cambridge. An evaluation report was pending from the University of Hertfordshire on the programme's effectiveness. The Healthier Options campaign:

- i. Programme is a partnership between various local authorities.
- ii. Was the only initiative in the eastern region.
- iii. The intention was to get healthier options on menus such as smaller portions and less salt.
- iv. Two local businesses had signed-up to the programme in the city and five were in the pipeline to sign up in the near future. It was hoped as criteria would change in future. The original pilot criteria was quite restrictive.
- v. The scheme would continue in 2016/17.
- vi. Various marketing products were available to publicise the scheme.

In response to questions Sally Roden said school children got hot meals during term time through activities such as the Red Hen Project. There was an intention to provide a similar service in school holidays. This would be marketed as a series of social activities to avoid stigmatising people.

16/42/CHLPb Physical Activity

Graham Saint tabled a presentation by Carrie Holbrook (Senior Sports Development Officer, City Council) outlining work with local communities to promote physical activity.

Councillor Johnson said the City Council was lucky to have a sports development service as most authorities did not. The Sports Strategy has been amended to tie into the Anti-Poverty Strategy. There was a need to reach out to the 10% of the population who did not undertake physical activity.

16/42/CHLPc Role of Local Clubs in to Promote Physical Activity

Daryl Emes (Partnership Manager, GLL) outlined local work to promote lifestyles fitness and the role of local clubs in promoting physical activity:

- i. GLL centres provided services for a diverse range of people. The key aim for GLL was to make them accessible for all including wheel chair users and people with low incomes.
- ii. Facilities could be hired out for others' use.
- iii. GLL aimed to be a long term partner to the City Council and provide a wider portfolio of services in future.

16/43/CLHP Ongoing Work

16/43/CHLPa East Barnwell Medical Practice

Rachel Talbot gave update on the Cambridge CAB Outreach Project at East Barnwell Health Centre:

- i. Whilst the host practice had been fully committed to supporting the implementation of the project, scarce resources in the NHS had meant that the practice was unable to offer any financial support in taking it forward. The "in-kind" contribution of the practice was highly valued and it was welcomed that it would continue to host the project in the future and that other practices were keen to support any extension of the project.
- ii. The project was seen as credible and having an impact. There were plans for CAB to meet up with GP training group, adult social care and health and wellbeing board representatives in future.
- iii. The project would cease in April 216 if alternative funding was not found.
- iv. The project model could be duplicated into other GP practices.

In response to questions Rachel Talbot said a more detailed evaluation report would be brought back to a future CLHP meeting to show how the project had benefited patients and the practice

CLHP expressed disappointment that the County Council were no longer funding Cambridge CAB.

Councillor Johnson expressed the City Council's support for the project and said that it was likely to look favourably on it when the next funding round for a grant from the Sharing Prosperity Fund took place.

16/44/CLHP Date of Next Meeting

The next meeting would be held 11AM on 10 March 2016.

The meeting ended at 4.00 pm

CHAIR