

# **Cambridge City Council**

**Item** 

17 January

To: Community Services Scrutiny Committee

Report by: Director of Customer and Community Services

Relevant scrutiny

COMMUNITY SERVICES

committee:

2013

Wards affected: All Wards

#### UPDATE ON STRATEGIC PARTNERSHIPS AND OUR INVOLVEMENT

#### Non- Key Decision

## 1. Executive summary

- 1.1 The Executive Councillor for Community Development and Health's remit covers the work of the Cambridge Local Health Partnership, which is a part of the network of Cambridgeshire's Shadow Health and Wellbeing Board, and the Cambridge and South Cambridgeshire Children and Young People's Area Partnership, which is a part of Cambridgeshire's Children's Trust.
- 1.2 This report gives scrutiny members a feel for the direction these partnerships are moving in and their developing priorities. It is part of a commitment given in the Council's "Principles of Partnership Working" that the lead member in each partnership provide his or her scrutiny committee with an annual account of their work.

#### 2. Recommendations

- 2.1 The Executive Councillor for Community Development and Health is recommended to:
  - a) Continue to work with the emerging Health and Wellbeing Board (including the **Cambridge Local Health Partnership**) for Cambridgeshire and the Children's Trust for Cambridgeshire (including the **Area Partnership**) to ensure high quality services are available to Cambridge citizens and to press for the continuing application of our partnership principles as a part of the emerging partnership arrangements.

#### 3. Overview

- 3.1 Strategic partnerships in the county have begun to settle after a radical shake up that took place following the end of Cambridgeshire's Local Area Agreement and in response to national legislative and policy changes and a drive towards more efficient ways of working.
- 3.2 The new partnerships covering the county, on the whole, involve one representative of the 5 district councils, to keep their Boards to a manageable size. District Councillors are more likely to be involved in locality arrangements, which will form part of their network, inform their decisions and carry out some local action and commissioning.
- 3.2 The strategic partnerships that are covered in this paper include:
  - Shadow Health and Wellbeing Board and its locality body, the Cambridge Local Health Partnership
  - S Children's Trust and its locality body, the Cambridge City and South Cambridgeshire Children and Young People's Area Partnership.
- 3.3 The Council's "Principles of Partnership Working" are intended to help guide our participation and provide aims that we wish to see achieved. The partnerships we are involved with should deliver benefits to local people and help achieve our vision for our communities. The principles also commit the Council's lead member within the partnership to providing an annual report giving an account of the work of the partnership to their scrutiny committee and for officers, where necessary, to bring 'in principle' decisions back through the City Council's own decision making and scrutiny processes to be confirmed (or otherwise). It is likely, therefore, that scrutiny committees may have discussed the work of partnerships more than once in a given year, depending on their work.
- 3.3 There are other significant partnerships that the Council is involved with, outside of the partnerships referred to in section 3.2, which will be the subject of other reports. These include: the Greater Cambridgeshire and Peterborough Local Enterprise Partnership, Cambridgeshire Horizons, Cambridge Community Safety Partnership, and the Cambridgeshire and Peterborough Waste Partnership (RECAP).

## 4. Shadow Health and Wellbeing Board

**4.1** The Government's reforms to he NHS included proposals for Health and Well-being boards to bring together the NHS (via GP consortia),

public health and local authorities (upper tier) to work strategically and in partnership. These included a new duty for county councils and unitary local authorities to take steps to improve the health of their populations.

- 4.2 Cambridgeshire was accepted as an early implementer and work began to transfer public health responsibilities to the county council and to put in place joint commissioning arrangements ahead of the legislation being put in place. There is some flexibility about the membership of Health and Well-being Boards and the model the County Cabinet chose provided the Shadow Board with a small membership of nine, with one member representing the district councils, operating as a "hub" in a wider network.
- 4.3 A district council member's group meets before each Shadow Board meeting to help inform and guide the contributions of the district representative. The Council also has a representative in the county's Adults Wellbeing and Health Overview and Scrutiny Committee but its relationship with the Shadow Board and the emerging Healthwatch is still being defined.
- 4.4 The Shadow Board met for the first time on 14 October 2011. It looked at its proposed functions and possible priorities, what a picture of success for the Board might look like, draft terms of reference and the roles and responsibilities of partner organisations. The statutory responsibility for public health and responsibility for the commissioning of NHS services in Cambridgeshire will rest with NHS Cambridgeshire until April 2013.
- 4.5 A Clinical Commissioning Group was established for Cambridgeshire and Peterborough. This is presently a sub-committee of the NHS Cambridgeshire Board and will build the elements of a new system of clinical commissioning, taking decisions that cannot be taken appropriately at locality commissioning level, ready for the transfer on 1 April 2013.
- 4.6 The new Clinical Commissioning Group (CCG) will develop a close working relationship with the Health and Wellbeing Board, and its network, to take forward the wider health and wellbeing of localities and partnership working. It will be informed by the local commissioning plans of Local Commissioning Groups and by Cambridgeshire's Health and Wellbeing Strategy.
- 4.7 Local Commissioning Groups (LCGs) are smaller groups of GP practices with more of a focus on local issues than the CCG. There will be 8 LCGs within the Cambridgeshire and Peterborough CCG.

CATCH is the largest LCG and covers parts of Cambridge and South Cambridgeshire. It comprises of 28 practices with a patient population of 217,783. The other LCG that covers parts of Cambridge City (including practices in the north and north east) is Cam Health, which comprises of 9 practices with a patient population of 83,215.

- 4.8 Cambridgeshire's Health and Wellbeing Strategy was published on 28 October 2012. It shows six priorities to improve the physical and mental health and wellbeing of Cambridgeshire's residents. In particular, with each of the priorities, work will be carried out to improve the health of the poorest first. The partnership is presently developing an action plan to identify where additional partnership and collaborative work can make a difference. A summary of the strategy is shown in Appendix 1.
- 4.9 The Shadow Board sees itself as a being the centre of a wider network of local stakeholder "hubs" across Cambridgeshire. These "hubs" are the **Local Health Partnerships**, which build on the former local Improving Health Partnerships and are based on each of the five district council boundaries.
- 4.10 The Cambridge Local Health Partnership held its first formal meeting on 3 July 2012 and agreed a terms of reference to guide its work. It has since met twice, with the last meeting on 29 November 2012. It involves representatives form the local GP Commissioning Groups, Director of Public Health and representatives from the Council, including the then Executive Member for Community Development and Health, who chairs the meeting. The meetings are held in public and agenda and minutes are published on the Council's website.
- 4.11 The Cambridge Local Health Partnership will be looking at how it can provide local actions to support Cambridgeshire's Health and Wellbeing Strategy. In the short-term it has identified a few actions where it feels it can add value. These include:
  - a. Improving the flow of information and the quality of communication between local GP's and local Housing Officers, so that people presenting can receive a service appropriate to their needs.
  - b. Looking at how the "Aging Well" initiative, including Community Navigators, can be best supported in Cambridge, taking advantage of the existing networks and support available.
- 4.12 The partnership will take into account work carried out by the county Adults Wellbeing and Health Overview and Scrutiny Committee, and

aim help improve local service delivery. It is still relatively early days for the partnership and it will develop its work programme more fully over the coming months. The Head of Refuse and Environment, is the Council's lead officer for health work.

## 5. Cambridgeshire Children's Trust

- 5.1 The Cambridgeshire Children's Trust is a partnership between organisations with a role in improving outcomes for children and young people in the area. The Trust Board gives strategic direction, commissions county-wide activity and supports the work of the Local Safeguarding Children's Board. Jackie Hanson, from Community Development is the City Council's Safeguarding lead for children and young people and she represents the District Councils on the Local Safeguarding Children's Board. The Area Partnerships inform the decisions of the Trust Board about the priorities in their area and commission local activity.
- 5.2 The Children and Young people's Plan (Big Plan 2) operated until the end of March 2011. The Council was identified as a partner within this plan. This has now been replaced by a more strategic plan setting out the key priorities of the Trust Board, which is informing partners providing or commissioning services for children and young people in Cambridgeshire. The present priorities for the Trust include:
  - a. Together for **Families** (High Demand Families). The Government's Troubled families Unit (TFU) has allocated up to £3m of support for Cambridgeshire to "turn around the lives" of troubled families, which meet their set criteria, in the county by 2015. Direct funding will be provided in the form of an "attachment fee" for beginning to work with these families and a subsequent payment-by-results based on getting children back into school; reducing criminal and anti-social behaviour; getting parents on the road back to work and reducing costs to the local authorities. A Steering Group has been established to jointly commission the project until 2014 and a first cohort of families living in the county have been identified (162 families who meet the payment by results criteria for year 1). Locality based multi-agency meetings have been arranged to check data and engage local partners and stakeholders. The Director of Customer and Community Services is the City Council's lead officer for this work.
  - b. Eastern European Families. It has been recognised that this group make a positive contribution but that there is a challenge to existing services in understanding and meeting the needs of Eastern European families. A working group has been set up to

begin to gather and examine data and talk to specialists and families to identify how improvements can be made that will help them participate in local community life.

- 5.3 The Trust's work also includes contributing to the developing action plan for the Cambridgeshire Health and Wellbeing Strategy, looking at the role voluntary and community organisations can play in the provision of universal services and moving forward with a Child Poverty Action Plan.
- 5.4 The Executive Councillor and the Head of Community Development attend Area Partnership meetings. Area Partnerships have now prepared local commissioning plans that will run until 2014. Priorities for the Cambridge and South Cambridgeshire Area Partnership include support for vulnerable children (5 to 13 years of age); children in Traveller and migrant families; and, children with mental health issues. A local officer group is overseeing this plan. This work has been funded through one-off pooled funding of £86,000 from the 3 Local Authorities (including £20,000 from the City Council). The Area Partnership is also advising on service provision for children and young people in the growth site areas and will be looking at the impact of the welfare reforms on children and young people. Further pooled funding of £46,000 (including £10,000 from the City Council) will enable more work to be commissioned in the coming year.
- 5.5 The City Council's Children and Young People's Participation Service (ChYpPS) teamed up with Romsey Mill to successfully bid to run 3 neighbourhood projects with vulnerable young people in the City and South Cambridgeshire and a pilot project with a group of girls from Abbey ward. Other projects have been commissioned to take forward work with children and families from the Traveller communities in Fen Road and children with mental health problems.
- The open access and preventative nature of most of the City Council's ChYpPS' work is important in the context of the Children's Trust. It helps to build self-esteem, confidence and social skills in children and young people through play but also identify those young people who are more vulnerable and who need more specialist and targeted help.
- 5.7 Meetings of the Children's Trust Board are **open and accessible** to the public with agenda, reports and minutes are available for inspection and on the County Council's website. The Area Partnership provides an account to the Board.

## 6. Implications

## (a) Financial Implications

The partnerships are responsible for commissioning significant levels of services for local people and their effectiveness and efficiency will be vital in achieving good value for money. The City Council does have interdependencies with the partnerships and could face additional pressures if some fail to deliver or redirect resources. For example if people fail to receive sufficient health and social care they may find it difficult to live independently, placing pressure on appropriate housing supply.

## (b) **Staffing Implications** (if not covered in Consultations Section)

## (c) Equal Opportunities Implications

The partnerships will identify ways of involving all communities, including those who are more disadvantaged. The emphasis for the Children and Young People's Area Partnership is likely to be on targeting services to support vulnerable young people, whilst the Health and Wellbeing Board will be looking at addressing health inequalities between different groups and localities. EqIAs will be carried out when the Council looks to change policies or service delivery in response to the plans or strategies of the partnerships.

## (d) Environmental Implications

Environmental infrastructure, such as the provision of community and children's centres that support vulnerable families, can improve the wellbeing of local people. The partnerships will deploy the assets, such as buildings, of organisations and it is important that they contribute to reducing their carbon use.

#### (e) **Procurement**

The lead partnerships will help shape the procurement or commissioning of services to achieve their aims either by influencing others by setting out priorities in plans and strategies or by directly bending mainstream work. The scrutiny committee will be advised in cases where the Council is looking to commit resources to a partnerships work.

#### (f) Consultation and Communication

The individual partnerships have their own consultation mechanisms, in part directed by legislation, which give guidance on who should be involved in consultations and how changes are managed and implemented.

## (g) Community Safety

Some of the partnerships have community safety as a core part of their remit and actively consider how they can improve the safety of local communities.

## 7. Background papers

These background papers were used in the preparation of this report:

i). Papers to Shadow Health and Wellbeing Board on 28 October 2012. These can be found here:

http://www.cambridgeshire.gov.uk/CMSWebsite/Apps/Committees/Meeting.aspx?meetingID=547

ii). Papers to Cambridge Local Health Partnership.

These can be found here:

http://www.cambridge.gov.uk/democracy/ieListMeetings.aspx?Cld=347&Year=2012

iii) Papers to Children's Trust meeting on 10 September 2012.

These papers can be found here:

http://www.cambridgeshire.gov.uk/CMSWebsite/Apps/Committees/Committee.aspx?committeeID=29

# 8. Appendices

1. Cambridgeshire's Health and Wellbeing Strategy: An Executive Summary

# 9. Inspection of papers

To inspect the background papers or if you have a query on the report please contact:

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