

**HEALTH COMMITTEE WORKING GROUP UPDATE AND MEMBERSHIP**

*To:* **HEALTH COMMITTEE**

*Meeting Date:* **5<sup>th</sup> November 2015**

*From* **Director of Public Health**

*Electoral division(s):* **All**

*Forward Plan ref:* **Not applicable**

*Purpose:* **To inform the Committee of the activities and progress of the Committee's working groups since the last Committee meeting.**

*Recommendation:* **The Health Committee is asked to:**

- 1) Note and endorse the recommendations made on health scrutiny by the liaison groups.**
- 2) Consider what working groups and liaison meetings should be continued or established in future**
- 3) Appoint members to the liaison groups**

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## **1. BACKGROUND**

- 1.1 The purpose of this report is to inform the Committee of the health scrutiny activities that have been undertaken or planned since the committee last discussed this at the meeting held on 16<sup>th</sup> July 2015.
- 1.2 This report updates the committee on the joint liaison meeting with Cambridgeshire & Peterborough Clinical Commissioning Group (CCG) and Cambridgeshire Healthwatch. Further liaison meetings and working groups scheduled are detailed in Appendix A.

## **2. MAIN ISSUES**

### Liaison Meeting with Cambridgeshire & Peterborough Clinical Commissioning Group & Healthwatch

- 2.1 The liaison group members in attendance were Councillors, Sales & Ellington. Apologies were received from Cllr Jenkins, Orgee and van De Ven. A meeting was held on 22<sup>nd</sup> October 2015 with representatives from Cambridgeshire & Peterborough CCG and Health Watch.
- 2.2 Liaison group meetings are precursors to formal scrutiny working groups. The purpose of a liaison group is to determine any organisational issues, consultations, strategy or policy developments that are relevant for the Health Committee to consider under their scrutiny function. It also provides the organisation with forward notice of areas that Health Committee members may want further information on or areas that may become part of a formal scrutiny.
- 2.3 The Health Committee members raised the following areas for discussion with representatives from CCG & Healthwatch
  - CQC Inspections resulting in two hospitals in special measures.
  - Forthcoming liaison meetings with CPfT
  - Forthcoming working group with UnitingCare Partnership
  - Health Committee's Forward Plan for scrutiny
- 2.4 Representatives from Health Watch updated members on the following activities.
  - 1) Access to Mental Health Crises services  
Healthwatch have been working to support the crises care concordat with vanguard money<sup>1</sup> attached to mental health. Healthwatch working with

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<sup>1</sup> In January 2015, the NHS invited individual organisations and partnerships to apply to become 'vanguard' sites for the new care models programme, one of the first steps towards delivering the Five Year Forward View and supporting improvement and integration of services. In March, the first 29 vanguard sites were chosen. There were three vanguard types – integrated primary and acute care systems; enhanced health in care homes; and, multispecialty community provider vanguards.

In July, eight urgent and emergency vanguards were announced.

Cambridgeshire Mind will be feeding back the patient perspective around access to crises services. CPfT are developing a whole new service that is not just crises support and longer than the initial IAPT (Improving Access to Psychological Treatment) six week service.

2) UnitedCare Partnership

Healthwatch is working with the voluntary sector in Cambridgeshire around their involvement in the developing well-being programme. Concerns were raised over the 50/50 allocation of funding across Cambridgeshire & Peterborough rather than allocation based on service need. Members agreed to raise at the next working group with UCP

3) CAMH Service Waiting List

Healthwatch updated members on the redesigned service that CPFT & CCG are developing and Healthwatch will be co-ordinating a young people's reference group to shape the proposals. This information supports the health committee in its scrutiny of this item and forthcoming liaison meeting with CPfT

4) NHS England Breast Cancer Screening.

Healthwatch have participated in the working group and recommendations on vulnerable groups will be fed back to the Health Committee in January 2016.

2.5 The CCG provided the following updates:

- 1) The CCG and acute trusts are working together to identify system savings and shared services. They are planning jointly for 16/17 finances (one system one budget) but working with three different regulators.
- 2) The CCG updated on forthcoming service changes i.e. Non Emergency Patient Transport, Emergency Care Access (Vanguard funding), Wheelchair services and minor ailments. These have now been incorporated into the Health Committee's forward plan.
- 3) The CCG is in receipt of National Vanguard funding which supports transformation in line with the NHS 5 year Forward View strategy. The focus for Cambridgeshire will be around admission avoidance, discharge planning, 111 and Out of Hours and some work around A&E.
- 4) The CCG reported back on work with NHS England around delegated commissioning of Primary Care. There is support within the CCG

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In September a further 13 vanguards were announced – known as acute care collaborations, they aim to link local hospitals together to improve their clinical and financial viability.

The 50 vanguards were selected following a rigorous process, involving workshops and the engagement of key partners and patient representative groups.

Each vanguard site will take a lead on the development of new care models which will act as the blueprints for the NHS moving forward and the inspiration to the rest of the health and care system

members but consideration around the caveats in the submission is required which address concerns around conflicts of interest. The CCG will apply to NHS England formally and include the caveats raised. Healthwatch has also submitted a response to the consultation. Members suggested that updates on this could form part of the February seminar around NHS systems.

### **3 LIAISON AND WORKING GROUP MEMBERSHIP ARRANGEMENTS**

#### **3.1 Health Committee Membership Changes – May 2015**

Following the Health Committee meeting on 16th July 2015, working group membership was confirmed but membership of liaison meetings was deferred. As some of these groups are now meeting the Health committee needs to consider additional representation to ensure that when meetings are scheduled enough members are available to attend.

##### Cambridgeshire & Peterborough Clinical Commissioning Group (CPCCG) & Health Watch Liaison group

Current membership Councillors: Orgee, Jenkins and Sales with district council representation from Councillor Ellington

##### Cambridgeshire & Peterborough Foundation Trust (CPfT) Liaison Group

Current membership Councillors: Brown, Orgee, Jenkins, Sales, Scutt and van De Ven

Members need to consider if additional working groups or liaison groups need to be established in future (Please see Appendix A for current activity.).

### **4. SIGNIFICANT IMPLICATIONS**

#### **4.1 Resource Implications**

Working group activities will involve staff resources in both the Council and in the NHS organisations that are subject to scrutiny.

#### **4.2 Statutory, Risk and Legal Implications**

These are outlined in a paper on the Health Committee powers and duties, which was considered by the Committee on 29<sup>th</sup> May 2014

#### **4.3 Equality and Diversity Implications**

There are likely to be equality and diversity issues to be considered within the remit of the working groups.

#### **4.4 Engagement and Consultation Implications**

There are likely to be engagement and consultation issues to be considered within the remit of the working groups.

#### **4.5 Localism and Local Member Involvement**

There may be relevant issues arising from the activities of the working groups.

#### **4.6 Public Health Implications**

The outcomes from the activities of the working groups are likely to impact on public health

<b>Source Documents</b>	<b>Location</b>
None	