Agenda Item No: 10

#### **HEALTH COMMITTEE WORKING GROUP UPDATE**

To: HEALTH COMMITTEE

Meeting Date: 14<sup>th</sup> December 2017

From Head of Public Health Business Programmes

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 update.

Recommendation: The Health Committee is asked to:

1) Note and endorse the progress made on health scrutiny through the liaison groups

2) Note the forthcoming schedule of ¼ liaison meetings (Appendix 1)

3) Consider any items from the ¼ liaison meetings that my need be included on the forward agenda plan

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#### 1.0 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 7<sup>th</sup> September 2017.
- 1.2 This report updates the committee on the quarter2/3, joint liaison meeting with Cambridgeshire & Peterborough Clinical Commissioning Group (CPCCG) and Healthwatch Cambridgeshire & Peterborough, Cambridgeshire & Peterborough Foundation Trust (CPFT), and Cambridge University Hospitals NHS Foundation Trust (CUHFT) and North West Anglia NHS Foundation Trust (NWA)
- 1.3 Liaison group meetings are precursors to formal scrutiny and/ or 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. MAIN ISSUES

2.1 <u>Liaison meeting with Cambridgeshire and Peterborough Foundation Trust</u> (CPFT)

The liaison group members in attendance were County Councillors Lina Joseph, District Councillor Susan Ellington and Cambridge City Councillor Margery Abbott. A meeting was held on 9<sup>th</sup> November with Tracy Dowling (CEO) and Deborah Cohen (Director of Service Integration). Apologies were noted from Cllr Hudson, Harford and Cllr van de Ven.

- 2.1.1 The following topics were discussed at this meeting:
  - Update from CPFT on new management arrangements.
  - Investments in CPFT from STP
    - Expansion of Joint Emergency Team
    - Long Term Conditions
    - Case Management
  - Joining up of CCS / CPFT Children's services moving away from organisational silos working as a system.
  - Expansion of the PRISM (Primary Care Mental Health Service) completion of roll out to all GP practices
  - Update on service consultations
    - ➤ Learning Disabilities (no further development since last report)
- 2.1.2 Future potential items for the Health Committee's forward agenda plan were noted.
  - Expansion of PRISM service (Phase 1 overview / Phase 2 plans)
  - Development of First Response Service
  - Issues around East of England Ambulance Service Trust

The next liaison meeting date with CPFT is scheduled for 7<sup>th</sup> March 2018.

## 2.2 <u>Liaison Meeting with HealthWatch Cambridgeshire & Peterborough and the</u> Clinical Commissioning Group (CCG)

The liaison group members in attendance were Councillors Harford, Hudson Jones, van de Ven and District Councillors Ellington. A meeting was held on 20<sup>th</sup> October with Sandie Smith (CEO) of Healthwatch, and Jessica Bawden (Director of Corporate Affairs, CCG)

- 2.2.1 An update from the CCG was received on the following areas.
  - Update on Out of Hours Relocation (discussion over content of paper for December Health Committee)
  - Chief Officer's Replacement
    - Appointment of Shelia Bremner (Interim Chief Officer)
  - Capped Expenditure Process
  - Social Prescribing
- 2.2.2 Sandie Smith provided members with an overview of Healthwatch Cambridgeshire & Peterborough.
  - Boards merged on 1<sup>st</sup> April bringing the governance together along with a joint workprogramme
  - Appointment of Sandie Smith as new CEO for Healthwatch Cambridgeshire & Peterborough (1st October 2017).
  - Looking at redesign of CAMH services

#### 2.2.3 Actions from this meeting:

- Consider Health Committee receiving an update on CCGs Financial position in 2018.
- Consider inviting Healthwatch Cambridgeshire & Peterborough to provider members with an overview on local issues being raised to Healthwatch.

The next liaison meeting is scheduled for 25<sup>th</sup> January 2018.

# 2.3 <u>Liaison Meeting with Cambridge University Hospitals NHS Foundation Trust</u> (CUHFT)

The Liaison group members in attendance were Councillors: Hudson, Jones and van de Ven and district Councillor Ellington. A meeting was held on 29th September with Roland Sinker (CEO) and Ian Walker (Director of Corporate Affairs). Apologies were received for Councillor Harford.

- 2.3.1 The following topics were raised by members and discussed at the meeting:
  - Relocation of Out of Hours Service (Addenbrookes perspective)
  - A & E Triage System
  - Delayed Transfers of Care (DTOCs)
  - Utilising Voluntary services
  - · Access to Hospital site

- Air Quality at Addenbrookes site.
- Healthy Weight Strategy How can Addenbrookes support the delivery of the strategy.
- 2.3.2 Updates were received from Addenbrookes on the following areas:
  - Emergency Care performance
  - Elective Care performance
  - Cancer performance
  - Forum Site development and Papworth Hospital move (Sept 2018)
  - Staffing updates
    - New Chief Finance Officer appointment Paul Scott.
    - New Non-Executive appointments

## 2.3.2 Actions from the meeting:

- Ian Walker to send DTOC A&E delivery board information and copy of letter sent to system from Roland Sinker & Tracy Dowling
- KP to arrange for Ian Walker & Val Thomas to meet to discuss Healthy Weight Strategy bring back to next liaison meeting.
- Consider items in Spring/ Summer from CUHFT to bring to Health committee on:
  - Performance & Patient Information on safeguarding
  - ➤ Life Science Strategy

The next liaison meeting date is 22<sup>nd</sup> December 2017.

- 2.4. <u>Liaison meeting with North West Anglia Foundation Trust (regarding</u> Hinchingbrooke Hospital) NWAFT
- 2.4.1 The liaison group members in attendance were County Council Lynda Harford, District Councillors Susan Ellington and Jill Tavener. Apologies were received from Cllr Hudson. A meeting was held on 7<sup>th</sup> November with Stephen Graves (CEO) and Caroline Walker (CFO)
- 2.4.2 The following topics were discussed at this meeting:
  - Workforce Planning Issues (including recruitment)
    - > Training into the nursing programme
    - Anaesthetist recruitment
  - A&E update on service
    - Issues around Recruitment to Consultant posts
    - STP concepts around A&E
  - Financial Position Update
  - Green Travel Plan Development
  - Update on Ambulance Service
    - Impact of Joint Emergency Teams (JET)
    - New Service standards for EEAST
- 2.4.3 Actions from the meeting:

- Jo Bennis (Chief Nurse) to be invited to attend next liaison meeting in regards to updates on nursing staffing in Hinchingbrooke Hospital.
- Consider Health Committee receiving an update from EEAST
- GP consortium development on next liaison meeting agenda.

#### 3.0 SIGNIFICANT IMPLICATIONS

#### 3.1 **Resource Implications**

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

## 3.2 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

## 3.3 Equality and Diversity Implications

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

## 3.4 Engagement and Consultation Implications

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

#### 3.5 Localism and Local Member Involvement

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

#### 3.6 **Public Health Implications**

Working groups will report back on any public health implications identified.

Source Documents	Location	
None		