Agenda Item No: 13b

Health Committee priorities and approach: update for 20th November 2014

То	pic	Public Health	Scrutiny of NHS	Agre	eed approach	Update
a)	1. Priority Topic: Mental Health Overview of what is currently happening in mental health, and what overall strategy the Clinical Commissioning Group (CCG) is developing as part of its 5-year plan, including how people access the mental health system and how people are discharged from it		√	n n u e	Committee set up an ongoing nental health working group, which neets initially with the CCG for an update on the position and emerging strategy, in order that the Committee can identify the most effective way of taking this forward	a)Working group met with CCG on 29/9/14. Next meeting scheduled for 8/12/14
b)	Public mental health strategy – and its relationship to the overall mental health strategy	V		Ć	Committee consider scope. Committee consider draft for approval Cross reference 6.e)	b) Committee considered scope on 16/10/14 Draft strategy to be approved for consultation 12/03/15
c)	Cambridgeshire and Peterborough Suicide prevention strategy (already in progress)	V	V	Ć	Vorking group comment on draft; Committee then consider draft for approval	c) Working group commented. Committee considered with recommendations 11/9/14 Completed
d)	Mental health of people in prison, including provision for female offenders resident in Cambridgeshire		V	ĺΝ	Committee obtain information from NHS about current provision/gaps, hen agree how to take forward	d)Information awaiting collation to be forwarded to members

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 2. Priority Topic: Health Inequalities Updating and reviewing the health inequalities strategy with a focus on the following areas which inter-relate a) Reducing health inequalities in Fenland b) Improving children's' health in early years, to reduce health inequalities among children at school reception stage c) Reducing smoking, particularly among groupings where the prevalence is high. 	√ √		 a), b) and c): Committee consider progress reports. Committee endorsed further development work on the proposals outlined in the paper. b) Committee liaise with Children and Young People Committee 	Timescales to be confirmed Paper presented Committee 1/9/14 Revenue proposals developed for 2015/16 business plan Update report for March 2015
 3. Transport and Health a) Access to hospitals and other health services, particularly in relation to specialised services, and access from rural and some outlying urban parts of the County b) The need for a more integrated and interagency approach to transport – including making better use of resources, reducing gaps in provision, reducing road accidents, encouraging walking and cycling 	√	√	Committee set up a working group, to promote closer working between the Economy and Environment(E&E) and Highways and Community Infrastructure Committees on transport issues. The Committee encourage the E&E Committee to appoint a health champion to promote joined up working on transport issues.	Joint Seminar between Health Ctte & E&E Ctte agreed for reserve date of 11/12/14 Confirmed Cllr Schumann as Joint Transport & Health Champion appointed by both Heath Ctte & E&E Ctte on 16/10/14 Ongoing

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 4. Effectiveness of Public Health a) Examining areas where Cambridgeshire is underperforming, including childhood immunisation and screening b) Examine the effectiveness of 2014/15 investments, such as health trainers, and training of staff in mental health 	√ √		Committee consider reports from officers.	Committee to consider childhood immunisation/screening Jan 2015 Ongoing: For evaluation once the services have been implemented for sufficient time to evaluate effectiveness
5. Public Health Business Plan 2015/16	V		Committee: a) consider draft revenue proposals b) review final draft budget	a) Considered on 16/10/14 b) Scheduled for 20/11/14
 6. Other suggestions a) Examining the implications for Cambridgeshire residents of the financial situation of Peterborough Hospital b) Examining the availability of primary care services c) How hospitals and crematoria deal with the remains following a miscarriage or stillbirth 	√	√ √ √	a) Committee keep position under review via liaison with the CCG b) Committee request information from NHS England and the CCG about any identified gaps in provision. Further details requested to obtain weighted practice population data from systems transformation team CCG c) Committee request information from NHS and crematoria about good practice and what happens locally	 a) Liaison meeting scheduled for January 2015. b) Information circulated to members August 2014. Awaiting second information request. c) Information Hinchingbrooke, Peterborough and QEH King's Lynn hospitals circulated to members August 2014. Still waiting for Information from Addenbrooke's

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d)	Identification of and provision for people with post-traumatic stress disorder		V	d) Committee request information from CPFT (the mental health trust) b), c) and d): once information received, Committee agree how to take forward	d) Information circulated to members Sept 2014 Completed
e)	Bullying in schools and workplaces	$\sqrt{}$		e) Issue to be explored as part of public mental health strategy	e) Addressed under priority1 b
f)	Ensuring NHS organisations consult properly			f) Members to be provided with good practice guidelines	f) Councillors Guide to Heath Scrutiny circulated
g)	Should the Committee scrutinise forward plans of various health providers and whether they align?			g) Approach to be discussed at committee 20/11/14	to members. To agree next action.
h)	NHS England are about to commission "liaison and diversion" services which are designed to identify health issues in people when they come into contact with police – does the Committee wish to find out more about this?			h)) Approach to be discussed at committee 20/11/14	g) & h) Questions raised by a Committee member – to consider at Health Committee on 20/11/14
i)	To review implications of NHS 5 year Forward View around "radical upgrade in prevention and public health" and role of local authority in system transformation.	√	V	i) Plan circulated to Health Committee members. Health Committee to agree approach	i) Raised at spokes to discuss and agree an approach 20/11/14
j)	Follow up on "delayed discharge" work to be tabled into forward plan for March 2015		√	j) Health Committee to agree approach	j) Raised at spokes to discuss and agree an approach 20/11/14
k)	Explore Local Government Association good practice around Local Authorities becoming Public Health Organisations	V		k) Health Committee to agree approach	k) Raised at spokes to discuss and agree an approach 20/11/14