Agenda Item No: 12

## **HEALTH COMMITTEE WORKING GROUPS: REPORTBACK**

To: HEALTH COMMITTEE

Meeting Date: 15<sup>th</sup> January 2015

From Dr. Liz Robin, 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 progress made on health scrutiny by the working groups.

2) To consider nominations for an additional member of the Commissioning Older People's Healthcare Working Group to replace Cllr Rylance.

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#### 1. BACKGROUND

- 1.1 The Health Committee received an update report on the Health Scrutiny activities of the working groups at the last health committee meeting held on 20<sup>th</sup> November 2014
- 1.2 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 met.
- 1. 3 This report updates the Committee on the activities and progress of the following working groups.

Mental Health Working Group Commissioning of Older People's Healthcare Services

1.4 Liaison meetings with the following organisations have been scheduled (see Appendix A- Health Scrutiny meeting calendar).

HealthWatch Cambridgeshire & Peterborough Clinical Commissioning Group Peterborough City Hospital

### 2. MAIN ISSUES

# Mental Health Working Group

- 2.1 The working group members are Councillors Bourke, P Brown, Orgee, Sales, Scutt, Smith and South Cambridgeshire District Councillor Ellington with Councillor Brian Rush from Peterborough City Council in attendance for the latter meeting.
- 2.2 The working group is currently reviewing Cambridgeshire & Peterborough Clinical Commissioning Group's (CCG) development of a 5 year Mental Health Strategy. A scoping meeting was held on the 25<sup>th</sup> November and was followed up with a working group meeting with representatives from the CPCCG held on 8<sup>th</sup> December 2014. The main issues discussed at the working group meeting were around:
  - Capacity around hospital beds
  - Psychological treatments in secondary care
  - Life Expectancy of Patients with Mental Health Problems
  - Reducing acute hospital admissions
  - Improving Mental Health Crises response
  - Prevention & Promotion
- 2.3 It was discussed that as part of the CPCCG's Decide & Design phase this would also take account of the developing Public Mental Health Strategy. It was resolved to hold a further Mental Health Working Group once the National NHS Benchmarking data is released to assist members in assessing the local position for mental health services.

## Commissioning of Older People's Healthcare Services

2.4 Following a presentation to members of the Health Committee and Health & Wellbeing Board from Keith Spencer, Chief Executive – UnitingCare Partnership (UCP) on the development of the Older People's Healthcare contract a scrutiny meeting with UCP has been scheduled for Thursday 22<sup>nd</sup> January 2015.

2.5 The working group members are Councillors Bourke, Carter, Ellington, Orgee, Schumann, Rylance. The committee is to note that Cllr Rylance is no longer a standing member of the Health Committee and unable to continue on this working group. It is proposed that the committee consider selected a further member to participate on this working group.

## Further Liaison visits 2015

## 2.6 Please see Appendix A for Health Scrutiny Meeting Calendar

A liaison visit with Peterborough City Hospital is scheduled for February 27<sup>th</sup> and a joint liaison meeting with Cambridgeshire & Peterborough Clinical Commissioning Group and HealthWatch is scheduled for Thursday 22<sup>nd</sup> January 2015.

Discussions with Cambridgeshire & Peterborough NHS Foundation Trust have resulted in agreement to establish regular bi-monthly liaison meetings that will also commence in 2015.

### 3. 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

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

Source Documents	Location
None	