

Cambridgeshire and Peterborough Health and Wellbeing Board Whole System Joint Sub-Committee - Minutes

Date: 25 March 2022

Time: 9.15-10.45am

Venue: Engine Shed, Sand Martin House, Peterborough

Present:

Members:

Councillor Susan van de Ven (Chair)- Cambridgeshire County Council

Councillor Lucy Nethsingha (substituting for Councillor Edna Murphy) - Cambridgeshire County Council

Councillor Anne Hay - Cambridgeshire County Council

Councillor Richard Howitt - Cambridgeshire County Council

Councillor Irene Walsh – Peterborough City Council

Councillor Gavin Elsey – Peterborough City Council (until 10.15am)

Councillor Ray Bisby – Peterborough City Council

Councillor Bill Handley – South Cambridgeshire District Council

Councillor Nicky Massey – Cambridge City Council

Councillor Simon Bywater – Huntingdonshire District Council

Councillor Mairead Healy – Cambridge City Council

Councillor Sam Clark – Fenland District Council

Jan Thomas - Cambridgeshire and Peterborough Clinical Commissioning Group (CCG)

Sandy Smith (substituting for Stewart Francis) – Healthwatch

Jyoti Atri - Director of Public Health

Officers:

Kate Parker- Head of Programmes Team

Emmeline Watkins - Deputy Director of Public Health – Peterborough

Caroline Townsend – Head of Commissioning Partnerships and Programmes

Iain Green – Team Manager Health in all Policies

Rhiannon Leighton – Democratic Services Assistant

Monika Balazs – Democratic Services Assistant

Daniel Snowdon - Deputy Democratic Services Manager

Observers:

John Peberdy (substituting for Matthew Winn) – Cambridgeshire Community Services NHS Trust

Stephen Posey – Papworth Hospital NHS Foundation Trust

Charlotte Black – Executive Director: People and Communities, Cambridgeshire County Council

John O'Brien – Chair, Integrated Care Board

Apologies:

Councillor Shabina Qayyum – Peterborough City Council

Councillor Kevin Reynolds - Cambridgeshire County Council

Councillor Julia Huffer- East Cambridgeshire District Council

Louis Kamfer - Cambridgeshire and Peterborough Clinical Commissioning Group (CCG)

Dr Gary Howsam - Cambridgeshire and Peterborough Clinical Commissioning Group (CCG)
Joanne Proctor - Head of Service- Cambridgeshire and Peterborough Safeguarding
Julie Farrow- Hunts Forum
Ian Walker – Cambridge University Hospitals NHS Foundation Trust
Caroline Walker - North West Anglia Foundation Trust
Alison Clarke – Representative of NHS England
Scott Haldane – Acting Chief Executive Cambridgeshire and Peterborough NHS Foundation Trust

1. Appointment of Chair

The Democratic Services Assistant confirmed that Councillor van de Ven was appointed to chair this meeting of the Whole System Health and Wellbeing Board Joint Sub-Committee as set out in the Constitution.

2. Election of the Vice-Chair

With the consent of the meeting, given that it was likely to be the final meeting prior to reconstitution, the Chair proposed that a Vice-Chair would not be elected for the duration of this meeting.

3. Apologies For Absence and Declarations of Interest

Apologies were noted as recorded above. There were no declarations of interest.

4. Chair Address

The Chair addressed the meeting as set out in Appendix A.

5. Minutes from the meeting on 29 June 2020

The minutes of the meeting on 29 June 2020 were agreed as an accurate record and signed by the Chair.

6. Approval of Minutes from the Cambridgeshire and Peterborough Health and Wellbeing Boards

The minutes of the Cambridgeshire Health and Wellbeing Board meeting on 30th January 2020 and the Peterborough Health and Wellbeing Board meeting on 7th December 2020 were agreed as an accurate record and signed by the Chair.

7. Integrated Care Partnership Development

The Board received a verbal update on the Integrated Care Partnership Development.

The Accountable officer, Cambridgeshire and Peterborough Clinical Commissioning Group (CCG) drew attention to the following points:

- The Integrated Care Strategy (ICS) would be expected to launch on the 1 July 2022
- The ICS included two main parts:
 1. Integrated Care Partnership (ICP) which included the governance arrangements with the main aim to drive the health and wellbeing strategy and would align with the four joint priorities that were set out during previous development sessions.
 2. Statutory accountabilities and the management of the NHS requirements for performance and delivery.
- The overall approach included four design principles which would build on how to deliver care services and improvement within the NHS. The four principles were identified as:
 1. Localised care services that would bring health care closer to residents.
 2. Simplified healthcare and support services to enable ease of access.
 3. Integration and partnership working.
 4. Evidence and data-based proof of delivering better value for healthcare, which would demonstrate the benefit of previous design principles.

Key areas of delivery:

- Population health management
- Provide the right services to allow early intervention
- Building a workforce strategy with employees thriving in their role and provide clear career path to open wider opportunities and increase staff retention and satisfaction
- Innovate digital agenda and enhance digital services whilst being aware of the barriers of digital exclusion and poverty
- Best use of fixed assets
- Transforming areas to become more sustainable for the future

Improvement areas:

- Community Pharmacy and dentistry issues to be addressed
- Reduce waiting list
- Improve access to services for people with learning disabilities
- Mental health services
- Vaccinations
- Simplifying access to services

Members raised the following points in discussion of the update:

- Whether there were any plans in place to make access to healthcare simple and accessible to all and how residents would be made aware of the changes. The Accountable Officer CCG advised that the technical infrastructure would be enhanced which would lead to better information flow. Furthermore, work was already underway to identify how to provide tools and deliver culture change within the organisation to better inform residents where to seek help.

- Whether there were any plans on how to improve new staff retention and linking in career development. The Accountable Officer CCG advised that there were plans in place that would aim to improve work environment and conditions as well as reinvigorate people within the workforce.
- Noted that the Covid vaccination numbers presented were outstanding, however members expressed concern whether this would mean that other vaccinations would fall behind. The Accountable Officer CCG advised that the forward vaccination programme would use different delivery methods and would become more targeted to aid the take up of all vaccinations offered.

It was resolved to note the verbal update.

8. Covid Impact Assessment

The Board received a [presentation](#) on the Covid Impact Assessment. The presentation gave an overview of:

- The review of emerging evidence of needs and impacts on the residents of Cambridgeshire and Peterborough.
- The impact types and topics, including the direct and indirect health impacts, mental health and wellbeing, social and educational, economic, environmental, crime and safeguarding impacts of Covid-19.
- The broader impacts of Covid-19.
- The existing inequalities exposed and exacerbated by the pandemic.

Members raised the following points in discussion of the report:

- Whether the pandemic had impacted on suicide amongst young people. The Deputy Director of Public Health – Peterborough explained that national data did not indicate any increase.
- Whether those people who were already disadvantaged pre-pandemic were more severely impacted within Cambridgeshire and Peterborough to the extent that they would probably not be on any waiting lists for the care service they needed. The Deputy Director of Public Health – Peterborough acknowledged that there was a proportion of the population that found it very difficult to access healthcare during the pandemic, however she advised that the learnings acquired during Covid regarding the improvement of access to services would provide a basis for improvement and for reaching out to those in need.
- Whether the childhood obesity issue was included in the government's catch-up plan for children and whether any communications had been sent to schools regarding this matter. The Director of Public Health explained that due to the ongoing difficulties experienced since the pandemic, communications regarding this issue were not consistent, however she acknowledged the importance of the matter and stressed that promoting active lifestyles and addressing the shortcomings of a healthy food offering at schools were important issues to address.
- Whether the data regarding the life expectancy for the residents of Peterborough would cover the city only or the whole area of Peterborough as an authority. It was confirmed that the data related to the area covered by Peterborough as an authority.

- Whether the projected figures within the mental health data projections accounted for the natural improvement of mental health. The Deputy Director of Public Health – Peterborough explained that the analysis was generated by using retrospective data and a review should be carried out on a regular basis to give an accurate projection.

It was resolved to note the Covid Impact Assessment.

9. HWB Overarching Strategic Approach for Consultation

The Board received a report regarding the Health and Wellbeing Board (HWB) Strategic Approach for Consultation. The Director of Public Health drew attention to:

- The statutory requirements for the Joint Strategic Needs Assessment were fulfilled by the Covid Impact Assessment.
- The two development sessions held in 2021 and 2022 involving partners and working in collaboration with ICPS.
- The approach would encourage close partnership working and would set out a single plan with the same priorities.
- The CCG's mission statement would become the vision statement for all parties involved
- The overarching strategic ambition included:
 1. Increasing the number of years people would spend in good health.
 2. Reducing inequalities and premature death (before the age of 75) within the community.
 3. Achieve better outcomes for children.
- The first four priorities for delivery were identified as:
 1. Ensure that children were ready to enter education and exit prepared for the next phase in their lives.
 2. The establishment of a healthy environment that would give people the opportunities they needed to be as healthy as possible, to reduce poverty through better employment and housing, and the promotion of early interventions and prevention that would improve mental health and wellbeing.
 3. The promotion of better mental health and wellbeing

During discussion, Board members:

- Suggested to review the strategy on a regular basis and gather learnings to drive the strategy forward. The Director of Public Health explained that learning could be gathered by 'doing', engaging with the community to establish what they needed in order to thrive, thinking carefully how to conduct local interventions and to place healthcare as a top priority.

It was resolved to:

- a) Read the strategy and the set of priorities across the Health and Wellbeing Boards for Cambridgeshire and Peterborough, and the Cambridgeshire and Peterborough Integrated Care Partnership

- b) Agree the process for developing the overarching strategic approach and four priorities in two phases
- c) Agree the level of ambition and targets for the overarching strategic approach
- d) Agree the outline strategic approach presented to the Board on 25th March 2022 goes out to consultation in May 2022, with feedback from that consultation to be presented to the HWB in September 2022.

10. Establishment of a Joint Cambridgeshire & Peterborough Health and Wellbeing Board Proposals

The Board received a report detailing the plans to establish a Joint Cambridgeshire and Peterborough Health and Wellbeing Board. The Chair drew attention to some typos in the published papers and advised the Sub-Committee that these would be rectified by officers following the meeting. **Action**

The Head of Programmes Team highlighted the previous development sessions which included members from both Cambridgeshire and Peterborough Health and Wellbeing Boards and from the ICP which led to the establishment of the single system plan. Although there had been aspirations to merge both Health and Wellbeing Boards and the ICP, this was not possible due to the statutory requirements Health and Wellbeing Boards hold, and therefore the approach was taken to set up a Committee in Common which would include a Joint Cambridgeshire and Peterborough Health and Wellbeing Board and a separate ICP. This arrangement would allow for collaborative working where meetings would be divided into two parts. The first part would enable the Joint Cambridgeshire and Peterborough Health and Wellbeing Board and the ICP to discuss matters that were applicable to all, whilst the second part would allow the Health and Wellbeing Boards to deal with localised matters. The Head of Programmes Team highlighted that the current membership of the boards would be substantially reduced, however there was a possibility to increase the number of Members that would attend the second part of meetings to allow local authorities to respond to local needs and circumstances.

The Chair proposed with the consent of the Sub-Committee that the Chair of the Joint Cambridgeshire and Peterborough Health and Wellbeing Board would alternate each meeting.

It was resolved to:

- a) Read this report on the proposals to form a Joint Cambridgeshire & Peterborough Health & Wellbeing Board which works as an aligned board with the Integrated Care Partnership.
- b) Endorse the revised Terms of Reference set out in Appendix A.
- c) Recommend the changes to both Full Councils to enable the necessary changes to be made to the respective Councils' Constitution.

11. Better Care Fund

The Board received a report regarding the Better Care Fund. Under the terms of the Better Care Fund, the health and wellbeing boards had a statutory duty to submit agreed plans for Cambridgeshire and Peterborough. Due to the tight timelines for submission of local plans and the suspension of Health and Wellbeing Board meetings, the Chairs approved jointly agreed plans on behalf of both Health and Wellbeing Boards on the 16 November 2021.

It was resolved to:

- a) Read this report on the Better Care Fund (BCF) Plan Submission for 2021-22 and attached document and spreadsheets.
- b) Retrospectively approve the plan in order to comply with NHS England conditions.

12. Ely Pharmaceutical Consolidation

The Board received a report relating to the Ely Pharmaceutical Consolidation which sought the retrospective approval of the consolidation of two pharmacies in Ely. As the Cambridgeshire Health and Wellbeing Board was not scheduled to meet within 45 days of the application being received, a response was produced and agreed by the Chair and the Director of Public Health and submitted to NHS England in accordance with the agreed delegated authority.

It was resolved to:

Note the submitted response to the Ely Pharmacy Consolidation application approved by the Chair and the Director of Public Health on behalf of the Cambridgeshire Health and Wellbeing Board.

Chair

Chair's introduction, March 25th HWB

Welcome to the Cambridgeshire & Peterborough Health & Wellbeing Board Whole System Joint-Subcommittee meeting. This meeting brings together members from both the Cambridgeshire and Peterborough Health & Wellbeing Boards.

I would particularly like to welcome all new members to this meeting, as there have been some changes in elected member representation as well as officers in partner NHS organisations, since we last met. I'd also like to welcome those members of the public who are attending this meeting via live stream.

This is our first convening since June 2020, due to Covid pandemic disruption. As we meet today, we recognise that there is currently a high rate of Covid in Cambridgeshire and Peterborough and therefore we must take appropriate precautions throughout.

It is important and necessary that we reconvene today, for a number of reasons. We need to consider the impact of Covid both past and present on our local communities and what this means for our collective responsibilities going forward. We have worked effectively as a Cambridgeshire & Peterborough system in responding to the pandemic and this has brought us opportunities to build on.

Also, during this time legislation has been introduced for the creation of Integrated Care Systems (ICS), with the requirement for health and social care partners to work collaboratively to improve health and care for all. The Cambridgeshire and Peterborough ICS adopts its statutory footing on July 1st.

While formal meetings of the HWB boards have been in abeyance, in anticipation of the new ICS we have met regularly as Whole System partners along with our health colleagues in the developing ICS. Together we convened two very well-attended virtual development days in October 2021 and January 2022. Most of us here today will have been present at those gatherings and contributed to their outcomes. We considered how we wanted to work together and reached overwhelming consensus that we wanted a single system plan for health and wellbeing, which we would all sign up to and contribute to delivering.

We also agreed that we wanted Integrated Care Partnerships (ICP) and Health and Wellbeing Boards (HWBs) to work as closely as possible together. The two development days led to the formulation of the proposed strategic approach for our HWBs and the agreement of shared priorities which we will be considering further today. We will also be discussing some of the nuts and bolts for collaboration moving forward when we consider proposed terms of reference for a newly configured Joint HWB.

We're mindful of the imperative contributions of all layers of local government, without which our priorities cannot begin to be addressed. Speaking for Cambridgeshire, may I say that we look forward to consideration of the most effective ways of deploying the specialized knowledge, resources, and insights of our five districts, and of the parish, town, and city communities within

them. To that end Cambridgeshire district and county CEOs will be kicking off a discussion imminently.

So, this is a somewhat unique meeting of the Joint Subcommittee, reconvening in a world that has been altered by the pandemic and focusing on preparations for a new era of collaboration. The ICS in which we seek to play an active and effective role on behalf of all Cambridgeshire and Peterborough residents will take time to develop and evolve, and today marks one step in creating new structures to make this possible. I'd like to thank officers who have worked assiduously over a period of many months to help lay the groundwork.

Finally, while a lot of today will deal with essential business and paperwork, at the heart of our endeavour is improving healthy life chances for all people living in Cambridgeshire and Peterborough. Traditionally, the HWB would begin with a Person's Story, illustrating a particular set of circumstances and challenges that requires the bringing together of multiple services to improve someone's life and future chances. For me, this Person's Story introduction has always grounded proceedings in the reason for our being here in the first place. I look forward to anchoring our future meetings in that same way.

Once again, I would like to welcome you back and I look forward to developing our approach to collaborative working.