

EXTRAORDINARY MEETING OF THE CAMBRIDGESHIRE HEALTH AND WELLBEING BOARD: MINUTES

Date: 27 April 2017

Time: 11.30am-12.40pm

Venue: Kreis Viersen Room, Shire Hall, Cambridge

Present: Cambridgeshire County Council (CCC)
Councillors T Orgee (Chairman), D Jenkins and J Whitehead
Dr L Robin, Director of Public Health (PH)
C Black, Service Director – Older People’s Services and Mental Health
(substituting for Wendi Ogle-Welbourn)
T Kelly, Strategic Finance Manager (substituting for C Malyon, Deputy Chief Executive and Chief Finance Officer)

City and District Councils

Councillors M Abbott (Cambridge City) and S Ellington (South Cambridgeshire)

Cambridgeshire and Peterborough Clinical Commissioning Group (CCG)

J Bawden, Director of Corporate Affairs (substituting for Tracy Dowling) and Dr S Pai

Healthwatch

V Moore, Chair

NHS Providers

None present

Voluntary and Community Sector (co-opted)

J Farrow, Chief Executive Officer, Hunts Forum of Voluntary Organisations

Also in attendance:

G Hinkins, Transformation Manager, CCC
R Greenhill, Democratic Services Officer, CCC

Apologies:

T Dowling, Chief Officer, CCG (substituted by J Bawden); J Farrow, Hunts Forum (co-opted member); C Malyon, Deputy Chief Executive and Chief Finance Officer (CCC) (substituted by Tom Kelly); W Ogle-Welbourn, Interim Executive Director, Children Families and Adults (CCC) (substituted by C Black); Cllr J Palmer, Huntingdonshire District Council; S Posey, Papworth Hospital NHS Foundation Trust; Cllr J Schumann, East Cambridgeshire District Council and M Winn, Cambridgeshire Community Services NHS Trust

273. APOLOGIES FOR ABSENCE AND DECLARATIONS OF INTEREST

Apologies were noted as recorded above. Cllr Whitehead asked that her belated apologies for the meeting on 30 March 2017 should also be noted as she had been unable to attend due to ill health. Cllr Ellington declared a non-statutory interest in Item 2: Cambridgeshire Better Care Fund Planning as a Trustee of the Care Network.

274. CAMBRIDGESHIRE BETTER CARE FUND PLANNING 2017-19

The Board received a report and presentation from the Transformation Manager, Cambridgeshire County Council which set out the work which had been completed to date on the Better Care Fund (BCF) plan. It had been intended to circulate further detailed information to members in advance of the meeting once planning guidance and funding allocation information for 2017-19 had been received, but this had not yet been issued by central government. Given that it was now clear that there would be the opportunity for the Board to meet again prior to final sign-off of the plan the proposal to delegate authority for the sign-off to the Director of Public Health had been withdrawn. Instead, members were invited to review the performance of the BCF to date and offer an initial steer on the way forward in the light of the policy framework guidance which was currently available.

The BCF was designed to improve integration between services with a particular focus on health and social care. During 2016-17 BCF expenditure had totalled £48,464k. This sum was drawn from existing funds and did not represent new money coming into the area. The majority of expenditure had remained within front-line health (£25,803k) and social care (£17,430k) services, but £3,480k had been allocated to the Disabled Facilities Grant (DFG) and £1,702k to transformation projects which focused on delivering better outcomes to those receiving services.

Evaluation of the BCF in 2016-17 showed some performance improvements, particularly in long-term care, but challenges remained in areas such as non-elective admissions and managing transfers of care. Similarly, some transformation investments had proved effective, but others had struggled to progress due to issues elsewhere within the system. On balance, the BCF was felt to have been helpful in articulating a shared vision for the integration of services. However, it was recognised that it could not operate in isolation from the initiatives and challenges existing within the wider context of health and social care delivery, including the local Sustainability and Transformation (STP) Plan.

In the course of discussion, Board members noted:

- Officers' advice that Cambridgeshire was not yet ready to apply to apply to 'graduate' from the Better Care Fund and be given greater freedom by central Government to manage its own integration plan, but that the position would be kept under review;
- Budgetary flexibility within the BCF remained limited;
- Greater alignment in the commissioning and delivery of services across Cambridgeshire and Peterborough offered improved efficiency and economies of scale. It was hoped to keep as close as possible to a narrative plan across the two areas, although the two areas' BCFs would remain separate;
- A clear recognition of the need to avoid as far as possible duplication of work being undertaken as part of the STP process;
- Some of the most significant progress had been made in areas which had received little or no additional funding, but which had benefitted from closer collaborative working. These included the Disabled Facilities

Grant review, Cambridgeshire Fire and Rescue partnership and the falls pathway re-design;

- Possible areas for focus going forward included neighbourhood team working, co-ordinating early intervention and prevention initiatives across the county, district and city councils and the Clinical Commissioning Group (CCG) and greater co-ordination of intermediate care and re-ablement services across health and social care;
- Some progress in relation to data sharing. The CCG had asked all GP practices to sign up to an information sharing protocol;
- The difficulty in recruiting community care staff in some areas. A member suggested developing a training programme or using 'taster days' which emphasised the importance of interaction and communication in carers' roles in addition to the practical aspects of care to encourage potential applicants to look again at careers within care delivery. It was noted that workforce planning was a major element of the STP and there was now the wider question of how this might be considered within the context of devolution;
- Officers had concentrated on issues which required joint working across multiple partner organisations rather than discrete projects which could be progressed by individual organisations or those already being addressed through other forums. There was also real recognition of the need to identify and address underlying causes to issues rather than provide short-term fixes;
- In response to a question from the Healthwatch representative, officers advised that there had been quite a lot of public engagement on specific issues by individual organisations, but said that it would be a helpful challenge going forward to see how this information could be pulled together;
- Members noted that the additional £8.3m Improved BCF funding for Cambridgeshire in 2017/18 represented a one-off sum and as such could not be used to fund recurring costs. Officers noted the Board's wish that this sum should be used as productively as possible, but emphasised that this additional funding was being provided to protect existing services and to reduce pressures on the NHS;
- Members discussed the need for intermediate levels of care between hospital at home and measures to support the independence and improve quality for life of residents. The Chairman stated that this was a recognised issue within health and social care services;
- One member stated that they found the whole idea of the BCF opaque and that they would like more information on numbers and to articulate exactly what the Board wanted the Fund to achieve. It should also acknowledge the role played by district, city, town and parish councils in achieving healthier communities and the importance of early intervention and support. The success of the Adult Early Help Team established in 2016 was noted and the Service Director for Older People's Services and

Mental Health stated that officers would be discussing with health service colleagues how this work might be further enhanced;

- Members discussed the role now being played by the Joint Emergency Teams (JET Teams);
- The Director of Public Health stated the importance of ensuring that services worked for users by properly understanding their needs and priorities and avoiding duplication and delay;
- Members discussed the importance of creating an appropriate environment to support healthy ageing. This required an holistic approach which recognised the importance of factors such as an accessible environment, housing needs, access to lifelong learning and the opportunity to continue to contribute to the community as well as more widely recognised factors such as health and social care needs;
- A member reported the difficulty and delay experienced by some patients in returning equipment provided by the health service. They felt that this created a perception that the equipment was not valued. The Service Director for Older People's Services and Mental Health stated that recycling targets were set in relation to collecting equipment and offered to put someone in touch to discuss this further;
(Action: Service Director – Older People's Services and Mental Health)
- A member reported that a change in personnel on a ward at Addenbrookes Hospital had resulted in a noticeable change in onward referral rates. The Director of Corporate Affairs (CCG) offered to follow this up outside of the meeting;
(Action: Director of Corporate Affairs (CCG))
- A member reported a positive personal experience of re-ablement support.

It was resolved to:

- a) Comment on the proposals for the Better Care Fund plan 2017-19.

275. VOTE OF THANKS

Councillor Ellington noted that this would be the Chairman's last meeting as he was stepping down as a county councillor at the forthcoming elections. She expressed her gratitude to Councillor Orgee for his excellent chairmanship of the Board, commenting that he had acted with sincerity, integrity and fairness. The Director of Public Health endorsed these comments and offered her personal thanks to Councillor Orgee for his support during the transfer of responsibility for Public Health to the local authority and for consistently and actively fostering collaboration and constructive working across the Board's member organisations and beyond.

It was resolved to:

- a) Record a vote of thanks to Councillor Orgee for his contribution as chairman of the Cambridgeshire Health and Wellbeing Board.

276. DATE OF NEXT MEETING

The Board is scheduled to meet next on Thursday 1 June at 10.00am in the Council Chamber, Shire Hall, Cambridge CB3 0AP. *(Clerk's note: The meeting on 1 June 2017 was subsequently cancelled. The Board will meet next on 6 July 2017 at 10.00am in the Kreis Viersen Room, Shire Hall, Cambridge).*

Chairman