

Cambridgeshire and Peterborough Health and Wellbeing Board Core Joint Sub-Committee: Minutes

Date: 4 December 2020

Time: 10.00 a.m. – 10.23 a.m.

Present: Cambridgeshire County Council (CCC) & Peterborough City Council (PCC)

Councillor Roger Hickford – Chair CCC Health and Wellbeing Board (Chairman)

Councillor John Holdich – Chair PCC Health and Wellbeing Board

Dr Liz Robin - Director of Public Health

Wendi Ogle-Welbourn - Executive Director: People and Communities

Cambridgeshire and Peterborough Clinical Commissioning Group (CCG)

Jan Thomas - CCG Chief Executive

Healthwatch

Sandie Smith – Chief Executive of Healthwatch Cambridgeshire and Peterborough

28. Apologies for Absence and Declarations of Interest

Apologies were received from Charlotte Black, Gary Howsam, Louis Kamfer, Louise Mitchell and Val Moore.

No declarations of interest were received.

29. Minutes - 11th September 2020 and Action Log

The minutes of the meeting held on 11th September 2020 were approved as a correct record, subject to the following amendment:

Change Val Moore's title from Chair of Healthwatch Cambridgeshire to Chair of Healthwatch Cambridgeshire and Peterborough throughout the document.

The following updates were noted in relation to the action log:

- The Head of Commissioning Partnerships reported that the use of PPE masks with a visible mouth screen were being promoted to providers in order to help support communication for those with hearing loss.
- It was agreed that a report on the Care Home Support plan would be presented at the next Sub-Committee meeting. **Action required**
- It was agreed that the CCG's Chief Finance officer's update would be deferred until the next Sub-Committee meeting. **Action required**

Outstanding action from Jan
30. Better Care Fund Update

The Sub-Committee considered an update on the progress of the local Better Care Fund plans, including the recommended approach to 2020/21 plans. Since March 2020, during the COVID pandemic, Better Care Fund reporting was largely suspended and there had been no reporting for 2020/21 to date. The Head of Commissioning Partnerships advised that guidance regarding Better Care Fund reporting had been very limited throughout the year, however a Policy Statement released by the government on the 3rd December had provided some clarity. It was noted that there was no requirement to report against the national metrics, but a more streamlined report about the reconciliation of the Better Care Fund finances would be submitted at the end of the financial year. Attention was drawn to the fact that Health and Wellbeing Board were being advised to roll forward 2019-20 plans into 2020-21 in order to ensure continuity of service provision. It was hoped that early planning guidance would be available in early 2021.

It was resolved unanimously for:

- a) Note and comment on the contents of this report
- b) Approve the recommended approach for the Better Care Fund Plan 2020/21

31. Optimising Hospital Discharges through the implementation of Discharge to Assess (D2A)

The Sub-Committee agreed to defer this report to the next meeting due to the time constraint faced by the Clinical Commissioning Group. The Chief Executive Officer of Healthwatch England and Peterborough drew attention to the following report released by Healthwatch England detailing the experience of people leaving hospital during Covid-19, which could be considered alongside this report at the next meeting:

[590 people's stories of leaving hospital during COVID-19 | Healthwatch](#)

Action Required

It was acknowledged by Members that people across the health and care system worked incredibly well together under unprecedented circumstances.

32. Best Start in Life Programme Update

The Sub-Committee received a report providing an update on the progress of the Best Start in Life Programme. Members were reminded that the community-based programme was a five-year strategy with the aim of improving life chances of children

(pre-birth to 5 years) in Cambridgeshire and Peterborough bringing together all the agencies and organisations that delivered services to this age group.

The Executive Director, People and Communities reported that the programme had slowed down between March and the summer due to Covid but officers had now started to implement the strategy from September. She advised that three pilot workstreams had been launched in September in Cambridge city, Wisbech and Peterborough and these were providing tailored services to each area in order to respond to different needs. It was noted that the outcome of the pilots would be presented to the Sub-Committee after February 2021. **Action Required.** Attention was drawn to the overarching themes set out in Section 2.8 of the report including communications and branding and a digital platform.

Members welcomed the proposals relating to data sharing and queried whether a seamless way of achieving it had been identified. The Executive Director, People and Communities advised that the pandemic had encouraged organisations to be less risk adverse with regard to data sharing. She explained that people were working better together to understand the importance of this matter when it was in the best interests of the people they were trying to serve.

One Member welcomed the development of the integrated digital platform. The same Member also highlighted issues relating to the dental health programme and welcomed the work that had been done in relation to children's oral health within the programme. Members noted that Healthwatch was continuing to raise questions with NHS England regarding access to children's oral health services. Attention was drawn to Healthwatch data regarding the lonely journey of mums giving birth and whether this was being addressed by the programme. The Executive Director, People and Communities confirmed that it had been addressed by wider work in terms of the Children and Maternity Board, but she would need to draw this to the attention of the pilot leads. **Action Required**

It was resolved unanimously to:

- a) Note and comment on the contents of this report
- b) Approve the recommended approach for the Better Care Fund Plan 2020/21

33. Health and Wellbeing Board Core Joint Sub-Committee Forward Agenda Plan

Members noted the agenda plan and it was agreed that officers should review the agenda plan for the next six months/year in the context of the Covid recovery plans. **Action required**

Chairman