

Adults and Health Committee Training Plan 2021/22

Agenda Item 5b

Below is an outline of topics for potential training committee sessions and visits for discussion with the new Adults and Health Committee.

The Adults & Health Committee induction recording can be sent to Members by contacting democraticservices@cambridgeshire.gov.uk

GREEN training is suggested to be priority

BLUE training is suggested options to be selected by Members

| Suggested dates | Timings | Topic | Presenter | Location | Notes |
|--|----------------------|---|--|---|--------------|
| | 1 hour | Introduction of Public Health Intelligence (PHI) – information for Public Health | Deputy Director of Public Health (PCC) PHI lead and Team | Virtual Interactive | |
| Thursday 7 October 2021 9.30am – 12pm Amundsen House 1pm – 4.30pm Scott House Thursday 25 November 2021 9.30am – 12pm Amundsen House 1pm – 4.30pm Scott House | 1 day or 2 half days | Overview of the Adult Social Care Customer Journey including Prevention & Early Intervention Services and Long-Term Complex Services. | Head of Prevention & Early intervention, Head of Assessment & Care Management, Social Work Teams | At this session you will start the day at Amundsen House and be introduced to our Prevention & Early Intervention services, where many of our customers start their journey. You will have the opportunity to listen into live calls and get to know more about Adult Early Help, Reablement and Technology. In the afternoon, you will visit our Social Work Teams for Older People and the Learning Disability partnership in Scott House and have the opportunity to experience case work. | |

| Suggested dates | Timings | Topic | Presenter | Location | Notes |
|----------------------------|----------------|--|---|---|---|
| September / October | 1 hour | Public Health and the COVID-19 pandemic – roles and responsibilities Local Outbreak Management Plan | Deputy Director of Public Health (CCC) and consultant leads | This will be an interactive session in relation to Outbreak Management In addition, in this session you have the opportunity to talk to staff involved in outbreak control including the contact centre staff who provide support to those self-isolating. | |
| On request | 2 hours | Introduction to Health Improvement and Public Health Commissioning | Deputy Director of Public Health (CCC) Public Health Joint Commissioning Unit (JCU) PH Commissioning Team Leads | In this session, you will start at Scott House Lifestyle Services. You will have the opportunity to talk to staff and if possible, talk to service users about their experiences. | To be arranged on request with a maximum of three Members at a time |
| On request | 2 hours | Introduction to Health Improvement and Public Health Commissioning | Deputy Director of Public Health (CCC) Public Health Joint Commissioning Unit (JCU) PH Commissioning Team Leads | In this session, you will start at Scott House prior to visiting the Drug and Alcohol Service. | To be arranged on request with a maximum of three Members at a time |

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|---------------------------|--------|---|---|---------------------|------------------------------------|
| | 1 hour | Introduction to Children and Young People's Public Health Commissioning | Public Health Consultant lead – Children and Young People | Virtual | Children's Committee to be invited |
| TBC | 1 hour | Introduction Public Health and Prevention Primary Prevention Healthy Aging and Falls Prevention Mental Health | Deputy Director of Public Health (CCC) Public Health Consultant leads Adults & Social Care, Mental Health. Team Manager (Health in All Policies) Senior Public Health Manager Partnerships | Virtual | |
| TBC | 1 hour | Introduction to Health Protection and Emergency Planning | Deputy Director of Public Health (PCC) Public Health Consultant lead TBC Senior Public Health Manager (Emergency Planning and Health Protection) | Virtual Interactive | |
| August / September | 1 hour | Introduction to Scrutiny | Director of Public Health Head of Public Health Business Programmes | Virtual | |
| TBC | 1 hour | Overview of Public Mental Health and Mental Health Services and the role of Social Care including an overview of commissioning related to Mental Health. Some examples of the current people we support | Trust Professional Lead for Social Work, CPFT Senior Commissioner: Prevention, Early Intervention and Mental Health Public Health Consultant lead for Mental Health | Virtual | |

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| On request | 90 mins | <p>Overview of the Learning Disability Partnership (LDP) including an overview of commissioning related to Learning Disability including:</p> <ul style="list-style-type: none"> - Adults & Autism - 0-25 Young Adults Team - Preparation for Adulthood - Housing and Accommodation - Day Opportunities- in house provision and external - Carers - Direct Payments and Personal Health Budgets | Head of Learning Disability Partnership, Head of Commissioning Adults Social Care, Mental Health and Learning Disabilities, Senior Commissioner LDP | Scott House or Virtual, this could also include a visit to one of our In-House Provider settings | To be arranged on request – maximum of three Members at a time |
| On request | 1 hour + visit | Adult Safeguarding and Making Safeguarding Personal. An overview of how Safeguarding works and the role of the Multi Agency Safeguarding Hub (MASH) | Assistant Director of Safeguarding, Quality & Practice | Virtual or Stanton House and could include a visit to the MASH in God-Manchester | To be arranged on request – maximum of three Members at a time. 1 st session will be virtual in August. |
| Thursday 11 November 9.00am – 10.00am | 1 hour | <p>Overview of Transfers of Care, the role of the Transfers of Care Team and an overview of Brokerage:</p> <ul style="list-style-type: none"> - What is 'discharge to assess'? - How the service works - how many people we support and some case examples? | Head of Transfers of Care, Head of Brokerage, Contracts & Quality Improvement | Virtual or Stanton House | 1 session in September |
| Tuesday 12 October 11.30am – 12.30pm | 1 hour | An overview of Adult Social Care Finance to include Charging policy and Direct Payments | Strategic Finance Manager, Head of Adults Operational Finance | Virtual | 1 session in September |

GLOSSARY OF TERMS / TEAMS ACROSS ADULTS & COMMISSIONING

More information on these services can be found on the Cambridgeshire County Council Website:

<https://www.cambridgeshire.gov.uk/residents/adults/>

| ABBREVIATION/TERM | NAME | DESCRIPTION |
|---|--|---|
| COMMON TERMS USED IN ADULTS SERVICES | | |
| Care Plan | Care and Support Plan | A Care and Support plan are agreements that are made between service users, their family, carers and the health professionals that are responsible for the service user's care. |
| Care Package | Care Package | A care package is a combination of services put together to meet a service user's assessed needs as part of a care plan arising from a single assessment or a review. |
| DTOC | Delayed Transfer of Care | These are when service users have a delay with transferring them into their most appropriate care (I,e, this could be from hospital back home with a care plan or to a care home perhaps) |
| KEY TEAMS | | |
| AEH | Adults Early Help Services | This service triages requests for help for vulnerable adults to determine the most appropriate support which may be required |
| TEC | Technology Enabled Care | TEC team help service users to use technology to assist them with living as independently as possible |
| OT | Occupational Therapy | |
| ASC | Adults Social Care | This service assesses the needs for the most vulnerable adults and provides the necessary services required |
| Commissioning | Commissioning Services | This service provides a framework to procure, contract and monitor services the Council contract with to provide services such as care homes etc. |
| TOCT | Transfer of Care Team (sometimes Discharge Planning) | This team works with Hospital staff to help determine the best care package / care plan for individuals being discharged from hospital back home or an appropriate placement elsewhere |
| LDP | Learning Disability Partnership | The LDP supports adults with learning disabilities to live as independently as possible |
| MASH | Multi-agency Safeguarding Hub | This is a team of multi-agency professionals (i.e. health, Social Care, Police etc) who work together to assess the safeguarding concerns which have been reported |

| ABBREVIATION/TERM | NAME | DESCRIPTION |
|--------------------------|--|---|
| MCA DOLs Team | Mental Capacity Act Deprivation of Liberty Safeguards (DOLS) | When people are unable to make decisions for themselves, due to their mental capacity, they may be seen as being 'deprived of their liberty'. In these situations, the person deprived of their liberty must have their human rights safeguarded like anyone else in society. This is when the DOLS team gets involved to run some independent checks to provide protection for vulnerable people who are accommodated in hospitals or care homes who are unable to no longer consent to their care or treatment. |
| PD | Physical Disabilities | PD team helps to support adults with physical disabilities to live as independently as possible |
| OP | Older People | OP team helps to support older Adults to live as independently as possible |
| Provider Services | Provider Services | Provider Services are key providers of care which might include residential homes, care homes, day services etc |
| Reablement | Reablement | The reablement team works together with service-users, usually after a health set-back and over a short-period of time (6 weeks) to help with everyday activities and encourages service users to develop the confidence and skills to carry out these activities themselves and to continue to live at home |
| Sensory Services | Sensory Services | Sensory Services provides services to service users who are visually impaired, deaf, hard of hearing and those who have combined hearing and sight loss |
| FAT | Financial Assessment Team | The Financial Assessment Team undertakes assessments to determine a person's personal contribution towards a personal budget/care |
| AFT | Adult Finance Team | The Adult Finance Team are responsible for loading services and managing invoices and payments |
| D2A | Discharge to Assess | This is the current COVID guidance to support the transfer of people out of hospital. |
| Carers Triage | Carers Triage | A carers discussion to capture views and determine outcomes and interventions such as progress to a carers assessment, what if plan, information, and/or changes to cared for support |
| DP | Direct Payment | An alternative way of providing a person's personal budget |
| DPMO | Direct Payment Monitoring Officer | An Officer who audits and monitors Direct Payments |
| Community Navigators | Community Navigators | Volunteers who provide community-based advice and solutions |

GLOSSARY OF TERMS / TEAMS ACROSS PUBLIC HEALTH

| ABBREVIATION/TERM | DESCRIPTION |
|--|---|
| Common Terms Used in Public Health | |
| Accreditation | The development of a set of standards, a process to measure health department performance against those standards, and some form of reward or recognition for those agencies meeting the standards |
| Assessment | One of public health's three core functions. The regular collection, analysis and sharing of information about health conditions, risks, and resources in a community. Assessment is needed to identify health problems and priorities and the resources available to address the priorities |
| Assurance | One of the three core functions in public health. Making sure that all populations have access to appropriate and cost-effective care, including health promotion and disease prevention services. The services are assured by encouraging actions by others, by collaboration with other organizations, by requiring action through regulation, or by direct provision of services |
| Bioterrorism | The intentional use of any microorganism, virus, infectious substance, or biological product that may be engineered as a result of biotechnology, or any naturally occurring or bio-engineered component of any such microorganism, virus, infectious substance, or biological product, to cause death disease, or other biological malfunction in a human, an animal, a plant, or another living organism in order to influence the conduct of government or to intimidate or coerce a civilian population |
| Capacity | The ability to perform the core public health functions of assessment, policy development and assurance on a continuous, consistent basis, made possible by maintenance of the basic infrastructure of the public health system, including human, capital and technology resources. |
| Chronic Disease | A disease that has one or more of the following characteristics: it is permanent, leaves residual disability, is caused by a non-reversible pathological alteration, requires special training of the patient for rehabilitation, or may be expected to require a long period of supervision, observation or care. |
| Clinical Services/Medical Services/Personal Medical Services | Care administered to an individual to treat an illness or injury. |

| ABBREVIATION/TERM | DESCRIPTION |
|--------------------------|---|
| Determinants of health | The range of personal, social, economic and environmental factors that determine the health status of individuals or populations |
| Disease | A state of dysfunction of organs or organ systems that can result in diminished quality of life. Disease is largely socially defined and may be attributed to a multitude of factors. Thus, drug dependence is presently seen by some as a disease, when it previously was considered to be a moral or legal problem. |
| Disease management | To assist an individual to reach his or her optimum level of wellness and functional capability as a way to improve quality of health care and lower health care costs. |
| Endemic | Prevalent in or peculiar to a particular locality or people. |
| Entomologist | An expert on insects |
| Epidemic | A group of cases of a specific disease or illness clearly in excess of what one would normally expect in a particular geographic area. There is no absolute criterion for using the term epidemic; as standards and expectations change, so might the definition of an epidemic, such as an epidemic of violence. |
| Epidemiology | The study of the distribution and determinants of diseases and injuries in human populations. Epidemiology is concerned with the frequencies and types of illnesses and injuries in groups of people and with the factors that influence their distribution. |
| Foodborne Illness | Illness caused by the transfer of disease organisms or toxins from food to humans. |
| Health | The state of complete physical, mental, and social well-being, and not merely the absence of disease or infirmity. Health has many dimensions-anatomical, physiological and mental-and is largely culturally defined. Most attempts at measurement have been assessed in terms of morbidity and mortality |
| Health disparities | Differences in morbidity and mortality due to various causes experienced by specific sub-populations. |
| Health education | Any combination of learning opportunities designed to facilitate voluntary adaptations of behaviour (in individuals, groups, or communities) conducive to health. |
| Health promotion | Any combination of health education and related organizational, political and economic interventions designed to facilitate behavioural and environmental adaptations that will improve or protect health. |
| Health status indicators | Measurements of the state of health of a specific individual, group or population. |

| ABBERRVIATION/TERM | DESCRIPTION |
|---------------------------|---|
| Incidence | The number of cases of disease that have their onset during a prescribed period of time. It is often expressed as a rate. Incidence is a measure of morbidity or other events that occur within a specified period of time. See related prevalence |
| Infant Mortality Rate | The number of live-born infants who die before their first birthday per 1,000 live births. |
| Infectious | Capable of causing infection or disease by entrance of organisms (e.g., bacteria, viruses, protozoan, fungi) into the body, which then grow and multiply. Often used synonymously with “communicable |
| Intervention | A term used in public health to describe a program or policy designed to have an effect on a health problem. Health interventions include health promotion, specific protection, early case finding and prompt treatment, disability limitation and rehabilitation. |
| Infrastructure | The human, organizational, information and fiscal resources of the public health system that provide the capacity for the system to carry out its functions. |
| Isolation | The separation, or the period of communicability, of known infected people in such places and under such condition as to prevent or limit the transmission of the infectious agent. |
| Morbidity | A measure of disease incidence or prevalence in a given population, location or other grouping of interest |
| Mortality | A measure of deaths in a given population, location or other grouping of interest |
| Non-infectious | Not spread by infectious agents. Often used synonymously with “non-communicable”. |
| Outcomes | Sometimes referred to as results of the health system. These are indicators of health status, risk reduction and quality of life enhancement. |
| Outcome standards | Long-term objectives that define optimal, measurable future levels of health status; maximum acceptable levels of disease, injury or dysfunction; or prevalence of risk factors. |
| Pathogen | Any agent that causes disease, especially a microorganism such as bacterium or fungus. |
| Police Power | A basic power of government that allows restriction of individual rights in order to protect the safety and interests of the entire population |
| Population-based | Pertaining to the entire population in a particular area. Population-based public health services extend beyond medical treatment by targeting underlying risks, such as tobacco, drug and alcohol use; diet and sedentary lifestyles; and environmental factors. |

| ABBREVIATION/TERM | DESCRIPTION |
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| Prevalence | The number of cases of a disease, infected people or people with some other attribute present during a particular interval of time. It often is expressed as a rate. |
| Prevention | Actions taken to reduce susceptibility or exposure to health problems (primary prevention), detect and treat disease in early stages (secondary prevention), or alleviate the effects of disease and injury (tertiary prevention). |
| Primary Medical Care | Clinical preventive services, first contact treatment services and ongoing care for commonly encountered medical conditions. |
| Protection | Elimination or reduction of exposure to injuries and occupational or environmental hazards. |
| Protective factor | An aspect of life that reduces the likelihood of negative outcomes, either directly or by reducing the effects of risk factors. |
| Public Health | Activities that society does collectively to assure the conditions in which people can be healthy. This includes organized community efforts to prevent, identify, preempt and counter threats to the public's health |
| Public Health Department | Local (county, combined city-county or multi-county) health agency, operated by local government, with oversight and direction from a local board of health, which provides public health services throughout a defined geographic area. |
| Public Health Practice | Organizational practices or processes that are necessary and sufficient to assure that the core functions of public health are being carried out effectively. |
| Quality assurance | Monitoring and maintaining the quality of public health services through licensing and discipline of health professionals, licensing of health facilities and the enforcement of standards and regulations |
| Quarantine | The restriction of the activities of healthy people who have been exposed to a communicable disease, during its period of communicability, to prevent disease transmission during the incubation period should infection occur. |
| Rate | A measure of the intensity of the occurrence of an event. For example, the mortality rate equals the number who die in one year divided by the number at risk of dying. Rates usually are expressed using a standard denominator such 1,000 or 100,000 people. |
| Risk Assessment | Identifying and measuring the presence of direct causes and risk factors that, based on scientific evidence or theory, are thought to directly influence the level of a specific health problem. |
| Risk Factor | Personal qualities or societal conditions that lead to the increased probability of a problem or problems developing. |

| ABBREVIATION/TERM | DESCRIPTION |
|---|--|
| Screening | The use of technology and procedures to differentiate those individuals with signs or symptoms of disease from those less likely to have the disease. |
| Social Marketing | A process for influencing human behavior on a large scale, using marketing principles for the purpose of societal benefit rather than for commercial profit. |
| Social Norm | Expectations about behaviour, thoughts or feelings that are appropriate and sanctioned within a particular society. Social norms can play a powerful role in the health status of individuals. |
| Standards | Accepted measure of comparison that have quantitative or qualitative value. |
| State Health Agency | The unit of state government that has leading responsibility for identifying and meeting the health needs of the state's citizens. State health agencies can be free standing or units of multipurpose health and human service agencies. |
| Surveillance | Systematic monitoring of the health status of a population. |
| Threshold Standards | Rate or level of illness or injury in a community or population that, if exceeded, call for closer attention and may signal the need for renewed or redoubled action. |
| Years of Potential Life lost | A measure of the effects of disease or injury in a population that calculates years of life lost before a specific age (often ages 64 or 75). This approach places additional value on deaths that occur at earlier ages. |
| Health and Care Organisations in Cambridgeshire & Peterborough | |
| CAMHS | Community Child and Adolescent Mental Health Services https://www.mind.org.uk/information-support/for-children-and-young-people/understanding-camhs/?qclid=EAlaIqobChMlr_P53PKW8QIV_4FQBh1GmgBYEAAAYASAAEgl_2Q_D_BwE |
| CAPCCG | Cambridgeshire and Peterborough Clinical Commissioning Group https://www.cambridgeshireandpeterboroughccg.nhs.uk |
| CCC | Cambridgeshire County Council https://www.cambridgeshire.gov.uk |
| CCS | Cambridgeshire Community Services NHS Trust http://www.cambscommunityservices.nhs.uk/ |
| CHUMS | Mental Health & Emotional Wellbeing Service for Children and Young People http://chums.uk.com/ |

| ABBREVIATION/TERM | DESCRIPTION |
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| CPFT | Cambridgeshire and Peterborough NHS Foundation Trust (Mental health, learning disability, adult community services and older people's services) http://www.cpft.nhs.uk/ |
| CQC | Care Quality Commission (The independent regulator of health and social care in England) http://www.cqc.org.uk/ |
| CUH | Cambridge University Hospitals NHS Foundation Trust (Addenbrooke's and the Rosie) https://www.cuh.nhs.uk |
| EEAST | East of England Ambulance Service NHS Trust http://www.eastamb.nhs.uk |
| HH | Hinchingsbrooke Hospital (Provided by North West Anglia NHS Foundation Trust - NWAFT) https://www.nwangliaft.nhs.uk |
| HUC | Herts Urgent Care (provide NHS 111 and Out of Hours) https://hucweb.co.uk/ |
| ICS | Integrated Care Systems |
| Helpful NHS Terminology Links | |
| https://www.nhsconfed.org/acronym-buster | The NHS uses a number of acronyms when describing services this acronym buster may be of some help. |
| https://www.kingsfund.org.uk/audio-video/how-does-nhs-in-england-work | The Kings Fund have produced a good video explaining how the NHS in England works. The Kings Fund website in general contains many resources which you may find helpful. |
| https://www.england.nhs.uk/learning-disabilities/ | NHS terms used in the field of disabilities |
| https://www.thinklocalactpersonal.org.uk/Browse/Informationandadvice/CareandSupportJargonBuster/ | Think Local Act Personal jargon buster search engine for health and social care. |