Agenda Item No: 7

### CAMBRIDGESHIRE HEALTH AND WELLBEING STRATEGY

To: Health and Wellbeing Board

Meeting Date: 24<sup>th</sup> April 2017

From: Dr Liz Robin, Director of Public Health

Recommendations: The Health and Wellbeing Board is asked to:

a) Confirm the preferred option for taking forward the Cambridgeshire Health and Wellbeing Strategy as outlined in paragraph 3.2.

b) Confirm the three priorities agreed at the Health and Wellbeing Board on 23 November 2017.

c) Endorse the proposed approach to action planning for the three Health and Wellbeing Board priorities.

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#### 1.0 PURPOSE

- 1.1 The purpose of this paper is
  - To propose new options for taking forward the Joint Health and Wellbeing Strategy for Cambridgeshire;
  - To confirm the strategic priorities selected by the Health and Wellbeing Board on 23 November 2017 and to propose an approach to action planning against these priorities

## 2 BACKGROUND

- 2.1 Health and Wellbeing Boards (HWBs) have a statutory duty under the Health and Social Care Act (2012) to agree a Joint Health and Wellbeing Strategy to meet the need identified in the Joint Strategic Needs Assessment. HWB Board member organisations are required to have regard to the Joint Health and Wellbeing Strategy in their commissioning and service plans.
- 2.2 The Joint Health and Wellbeing Strategy for Cambridgeshire was initially approved to cover the period 2012-2017. A comprehensive high-level strategy was produced, following public consultation. In July 2017, the HWB Board agreed to extend the period covered by Joint Health and Wellbeing Strategy until a new one was produced.
- 2.3 At the HWB Board meeting in November 2017, priorities were proposed for the Cambridgeshire HWB Strategy, building on feedback from a stakeholder workshop. Following further discussion by the HWB Board members, the following three priorities were selected:
  - Health inequalities, including the impact of drug and alcohol misuse on life chances
  - New and growing communities and housing
  - Integration including the Better Care Fund and delayed transfers of care.
     This would also cover monitoring the impact of developing place based care models.

### 3. MAIN ISSUES

### Change in strategic landscape

- 3.1 The creation of a Combined Authority for Cambridgeshire and Peterborough, together with a health and care Sustainable Transformation Partnership (STP) covering the same footprint, have increased the strategic importance of joint work across Cambridgeshire and Peterborough. In recognition of this the Cambridgeshire and Peterborough Health and Wellbeing Boards agreed to hold a joint workshop facilitated by the LGA in January 2018. At the joint workshop it was recognised that there were many common issues across the two HWB Boards, and potential to reduce duplication and increase strategic impact through working together. This is the subject of a separate paper on the meeting agenda. Common issues identified were:
  - Growing Populations
  - New Housing Development Sites
  - Ageing Populations
  - Health Inequalities
  - Rising demand including mental health.

# Options for renewing the Joint Health and Wellbeing Strategy

3.2 An issue for the renewal of the Cambridgeshire Joint Health and Wellbeing Strategy is that there is a tension between the statutory requirement – that is, for the Strategy to meet the needs identified in the Joint Strategic Needs Assessment, and the national evidence that HWB Boards are most effective when they focus on a small number of priorities. The Cambridgeshire JSNA covers a much wider range of health and wellbeing needs than the three priorities identified by the HWB Board in November 2017. This issue, together with the changing strategic landscape outlined under 3.1, leads to a number of options for renewing the Joint Health and Wellbeing Strategy.

# **Option A**

Prepare a new Joint Health and Wellbeing Strategy for Cambridgeshire, to cover a period of up to five years (2018-23), focussed on the three strategic priorities identified by the HWB Board. Given the statutory requirements, this Strategy would also need to cover the wider range of needs identified in the JSNA, and go out to public consultation. This would be resource intensive and potentially distract from the three priorities agreed by the HWB Board, following November's stakeholder event.

## **Option B**

Recognising that the current Joint Health and Wellbeing Strategy is comprehensive, and continues to cover at a high level the needs outlined in the JSNA, the current Strategy could be extended for a period of up to three years (2018-21). An action plan could then be prepared to cover this period, focussed on the three priorities identified by the HWB Board. This would enable more rapid progress and focus on addressing the identified priorities, and would be in line with stakeholder views and Local Government Association (LGA) advice that the HWB Board should be focussed on a small number of priority areas where it can have maximum impact.

## **Option C**

The Peterborough Joint Health and Wellbeing Strategy runs from 2016-2019. Given the changing strategic landscape and the importance of working across Cambridgeshire and Peterborough, a third option is to extend the Cambridgeshire Joint Health and Wellbeing Strategy so that it expires in 2019, at the same time as the Peterborough Strategy. This would allow the potential for preparing a Joint Health and Wellbeing Strategy for Cambridgeshire and Peterborough, commencing in 2019. An action plan to address the three priorities addressed by Cambridgeshire HWB Board could meanwhile be delivered during 2018-19, working jointly with Peterborough where priorities coincide.

The recommended option is **Option C**.

## **Action Planning for HWB Board priorities**

3.3 Whichever option for the HWB Strategy is chosen by the HWB Board, it is important to identify robust mechanisms and structures, which can work in partnership to deliver real change against the three HWB Board priorities. This can be challenging at a time when the local health and care system is under significant pressure, working to meet day to day demand. The most

effective route is likely to be use of existing partnership delivery boards which already cover aspects of these priorities – and agreement that these partnerships will report back regularly to the HWB Board. The three Living Well Partnerships in Cambridgeshire, working at local level, will be key to delivery against the strategic priorities. However in order to guide the work of the Living Well Partnerships and avoid duplication of effort, county-wide 'frameworks' for delivery of the three HWB Priorities are likely to be needed .

- 3.4 The following partnership boards could potentially develop and co-ordinate development of county-wide frameworks to support delivery, working with the Living Well Partnerships, and reporting to the Health and Wellbeing Board on a regular basis.
  - Priority 1: Health inequalities, including the impact of drug and alcohol misuse on life chances:
    - Cambridgeshire and Peterborough Public Health Reference Group a
      multi-agency partnership which is already constituted to report to the HWB
      Board, and includes input from Public Health England and academics in
      relevant research fields, as well as local organisations. This would be well
      placed to develop a framework for action on wider health inequalities
      issues, working closely with Living Well Partnership on their local priorities.
    - Cambridgeshire and Peterborough Drug and Alcohol Misuse Delivery
      Board which is already constituted to report to both the Health and
      Wellbeing Boards and the Strategic Community Safety Partnership, could
      play a specific role on addressing drug and alcohol impacts, working
      closely with Living Well Partnerships and Community Safety Partnerships.
  - Priority 2: New and growing communities and housing focus on health and wellbeing issues/services:
    - Delivery mechanisms for this priority are currently under discussion by the joint meeting of the Cambridgeshire Public Service Board (local authority, fire and police chief officers) and the Health Care Executive (NHS Chief Officers).
  - Priority 3: Integration including the Better Care Fund; progress on delayed transfers of care; and monitoring the impact of developing place based care models.
    - The Cambridgeshire & Peterborough Integrated Commissioning Board a multi-agency partnership tasked with delivery of the Better Care Fund and including a focus on delayed transfers of care, is already constituted to report to the HWB Board. It could lead on the first two elements of this priority.
    - Work on new place-based models of care, focussed on primary health and social care services, is more developmental. The appropriate way for the HWB Board to support and monitor the impact and effectiveness of this approach, will need to be developed as the work progresses.

# 4 ALIGNMENT WITH THE CAMBRIDGESHIRE HEALTH AND WELLBEING STRATEGY

- 4.1 This paper is relevant to priorities (1, 2, 3, 4, 5,6) of the Health and Wellbeing Strategy:
  - Priority1: Ensure a positive start to life for children, young people and their families.
  - Priority 2: Support older people to be independent, safe and well.
  - Priority 3: Encourage healthy lifestyles and behaviours in all actions and activities while respecting people's personal choices.
  - Priority 4: Create a safe environment and help to build strong communities, wellbeing and mental health.
  - Priority 5: Create a sustainable environment in which communities can flourish.
  - Priority 6: Work together effectively.

## 5 SOURCES

Source Documents	Location
Cambridgeshire Health and Wellbeing Strategy 2012-17 (now extended)	https://cambridgeshire.w pengine.com/wp- content/uploads/2018/01 /4-HWB-Strategy-Full- Document.pdf
Minutes of Cambridgeshire Health and Wellbeing Board 23 November 2017	https://cmis.cambridgesh ire.gov.uk/ccc_live/Meeti ngs/tabid/70/ctl/ViewMe etingPublic/mid/397/Mee ting/639/Committee/12/D efault.aspx