

**A 'WHOLE SYSTEM' PARTNERSHIP APPROACH TO HEALTH AND LIVING WELL  
ACROSS CAMBRIDGESHIRE AND PETERBOROUGH**

*To:* **Health and Wellbeing Board**

*Meeting Date:* **1 February 2018**

*From:* **Mike Hill  
Director, Health and Environmental Services, South  
Cambridgeshire District Council/ District Support Officer**

*Recommendations:* **The Health and Wellbeing Board is asked to:**

- a) Comment on the draft Living Well Concordat and Living Well Area Partnership Terms of Reference;**
- b) Seek formal agreement from their respective Councils and organisations to signing up to the 'Living Well Concordat'.**

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## 1. PURPOSE

- 1.1 To seek the Health & Wellbeing Board's comments on draft Living Well Area Partnership Terms of Reference and a "Living Well Concordat" to support a commitment to a "whole system approach" to health and wellbeing across Cambridgeshire and Peterborough.

## 2 BACKGROUND

- 2.1 The King's Fund paper, "Population Health Systems: Going Beyond Integrated Care" argues that "Improving population health is not just the responsibility of health and social care services, or of public health professionals...it requires co-ordinated efforts across population health systems...Making this shift will require action and alignment across a number of different levels, from central government and national bodies to local communities and individuals."
- 2.2 The NHS Five Year Forward View recognises the role of health organisations in ill-health prevention and lifestyle support. This aligns strongly with public services and local government's role delivering on the "wider determinants of health" including economic prosperity, housing, community safety & protection, education & skills, socio-economic inequalities, and public health.
- 2.3 The joint Health & Care Executive (HCE) and Public Service Board (PSB) has concluded that there are huge opportunities for closer working between the 18 organisations across Cambridgeshire & Peterborough comprising health commissioners, health providers, and local authority, community & voluntary and public service organisations. These opportunities were based on:
  - a) Serving shared people in a shared place
  - b) Shared "enablers" including workforce, skills, estate and ICT challenges
  - c) Similar financial sustainability challenges
  - d) A willingness to get better at working together
  - e) A history of policy initiatives designed to promote integrated working
  - f) Multiple shared programmes and projects (for example the Sustainability and Transformation Partnership (STP) and the Better Care Fund (BCF))
  - g) Commitment to building community resilience
- 2.4. The Cambridgeshire Health & Wellbeing Board Development session in March 2017 session asked officers to redesign current partnership delivery arrangements to improve efficiencies (less meetings), reduce duplication (join-up delivery and governance arrangements) and embed a "shared people and place-based" approach to delivering health & wellbeing outcomes for residents.
- 2.5. This paper outlines for discussion an approach to joining-up actions across the Health and Care Executive (HCE) and Public Services Board (PSB) organisations to improve Cambridgeshire & Peterborough's "Population Health System" working. Key changes proposed are:
  - a) **Collective Leadership & Governance** HCE & PSB, with the addition of the Community Voluntary Service (CVS), have now aligned their current meetings schedule every quarter to form a "whole system" programme sponsoring group to manage governance and oversee joint delivery.

- b) **Living Well Area Partnerships** The formation of 4 “Shared people and place-based” delivery groups is underway, covering Peterborough, Huntingdonshire, East Cambridgeshire & Fenland, and Cambridge City & South Cambridgeshire. These will form the “go-to” meetings to build relationships, take operational decisions to translate agreed policy into “on-the-ground” change, and ensure benefits are realised for local residents and communities. They will replace current Local Health Partnerships and CCG Area Executive Partnerships which will cease. Opportunities will be explored to also merge with Community Safety Partnership meetings.
  - c) **Aligning Budgets & Resources** Better use will be made of the huge, combined “mainstream” staff and budgets each Partner has, with clear links into STP, BCF and other funding streams.
5. The 4 Living Well Area Partnerships footprints are based on joining-up on current District Council boundaries. It is proposed that the 4 footprints are kept under local review to ensure no barriers to effective working are created with health system operational areas.
  6. The Living Well Area Partnerships will report into the joint HCE / PSB Chief Executives’ meeting to provide strategic leadership, planning and resourcing. The joint HCE / PSB meeting will agree papers to go forward to the Health & Wellbeing Boards.
  7. Formal decision-making and scrutiny will remain with individual partners and their legal responsibilities. The Cambridgeshire and the Peterborough Health & Wellbeing Boards will continue to provide partnership leadership and agreement and reflect a genuine partnership with health and other organisations.
  8. Membership of the Boards will comprise key local organisations engaged in the partnership delivery of health & wellbeing outcomes. This Membership will be kept under review to ensure the Partnerships are effective.
  9. Draft Terms of Reference for the Living Well Area Partnerships are attached at Appendix 1 for the Board’s comments.
  10. To show commitment to the “Whole System Population Approach” to joint working, all partners are asked to seek their individual organisations’ formal sign-up to the Living Well Concordat. This will streamline governance by replacing the multiple current MoUs and partnering commitments variously in existence. A draft “Living Well Concordat” is provided at Appendix 2 for discussion.

## **Resource Implications**

11. The new Living Well Area Partnerships will reduce the number of meetings that Councillors and officers must attend by joining-up and replacing Local Health Partnership and Area Executive Partnership meetings. It is anticipated that arrangement of Living Well Area Partnership meetings will be undertaken by District Councils with existing resources.

## 5 SOURCES

<b>Source Documents</b>	<b>Location</b>
King's Fund paper, "Population Health Systems: Going Beyond Integrated Care"	Contact: M Hill <a href="mailto:Mike.Hill@scams.gov.uk">Mike.Hill@scams.gov.uk</a>
The NHS Five Year Forward View	01954 713229