

COMMUNITY RESILIENCE

To: Health and Wellbeing Board

Date: 15th September 2016

From: Sarah Ferguson, Service Director - Enhanced and Preventative Services, Children Families and Adults, Cambridgeshire County Council

1.0 PURPOSE

To share the plans for the delivery of our Community Resilience Strategy and the partnership work being undertaken with a view to considering the implications for the Health and Wellbeing Strategy.

2.0 BACKGROUND

2.1 *Stronger Together – our strategy for building resilient communities* represents a culmination of work that has been happening across the County Council. It proposes a fundamental shift in the way that service provision and local communities interact; essentially, repositioning the Council as part of the wider community, with a real focus on building the capacity of local people to help us to meet local needs together. The full strategy can be accessed [here](#).

2.2 The concepts and actions within this strategy have been informed by officers and Members across the County Council, from a series of meetings, workshops, discussions, Member seminars and more latterly a more formal Programme Board with membership drawn from each directorate. There have also been discussions with statutory sector partners, both individually and through Cambridgeshire’s Public Services Board.

2.3 The County Council’s General Purposes Committee agreed to adopt this strategy at its meeting in October 2015. Since then officers and Members across the County Council have been developing activity to make this strategy a reality.

3.0 DELIVERING THE STRATEGY

3.1 Our strategy proposes six areas of activity. Each represents a specific part of the work we need to take forward, and there are action plans for each area. The six areas are:

- Communication
- People helping people
- Council members
- Our workforce
- Community Hubs
- Partnerships

3.2 Further detail on each of these areas can be found within the strategy document itself, together with a clear articulation of what the County Council aims to achieve by 2020.

3.3 Communication

- 3.31 Work started last year in raising awareness of the challenge being faced by the County Council and ways we and the community can help one another as part of the County Council's Budget Challenge Campaign. A structured Communication Plan is under development, with key milestones planned around the deliverables outlined in this paper.
- 3.32 A regular update is now being sent to parish councils and a letter has also been sent with supporting materials that they can use themselves or in local publications. A menu of ideas and support offers, case studies and online resources are now being developed to help Parish Councils, the community and other organisations to develop their own local activity that will mitigate the impact of our budget and service reductions. Communications to staff have begun and will increase with official launch of the Community Resilience Strategy and the Innovation Fund. We are increasingly publicising the good work that is already happening in local communities, with or without our support.
- 3.33 The way the County Council is using social media has been changing in order to better place the Council and its services as part of the wider community rather than a centralised provider of services. This means the County Council can actively target communities in a geographic location but also communities who share an interest or need. This in turn allows a much more targeted and cost efficient approach as well as engaging with people where they are having the conversations rather than expecting them to come to the council.

3.4 People helping People

- 3.41 This workstream aims to facilitate people helping people in a range of capacities across the county. People help people in a broad range of ways – from very informal help for a neighbour, through to more facilitated volunteering such as peer-to-peer support. Within this workstream we are looking at how the County Council can support people helping people in both formal and informal ways. We aim to build on existing good practice across the County Council, for example, in libraries, and develop the links between service provision where this is needed.
- 3.42 Activity planned includes:
- The delivery of three pilot learning sites aiming specifically to build community capacity. These are taking place in Godmanchester, Ely and Littleport, and the Abbey area of Cambridge. The Godmanchester site builds upon the “mini-patches” work happening through Transforming Lives.
 - Work on building peer support mechanisms across the county.
 - Aligning the County Council's contracts with the voluntary sector around our Community Resilience strategy.
 - Making available a toolkit for staff and Members, providing advice on sources of funding, support and training that community groups can access, useful tools, tips and techniques for building capacity in communities, and examples of successful activities and case studies.
 - Identifying occasions where staff working for the County Council may not feel they are able to link vulnerable people with sources of support from within the community

– and making sure our policies and processes facilitate this whilst also keeping people safe from harm.

- Further development of Time Banks and Time Credits.

3.5 Council Members

3.51 Both Councillors as Community Connectors cohorts are now complete. This County Council programme engaged pro-active County Council Members to work together to mutually improve knowledge of how to help build capacity within the communities in their divisions. The material they have covered includes: community engagement techniques, discussions with service leads regarding how the councillors' community role can support services, and practical ideas to take forward. There are plans in place to hold occasional sessions at County Council Members Seminars for Members to share learning and stay up-to-date with this agenda. The guidance on the role of County Council Members has been revised to give a clearer emphasis on Members' roles in building community resilience, and a session is also being planned as part of new Members' induction in 2017.

3.52 The programme has been a conduit for the Cultivating Communities Small Grants pilot through which communities can work with their County Councillor to apply for a grant to fund local community-led partnership projects.

3.53 **Stronger Together** has stimulated positive conversations with local parish councils. Some have approached the council to ask what they could do to help mitigate the impact of any service reductions, and a number of County Members have started discussions with their parishes to stimulate ideas. Examples of activity include:

- Histon and Impington parish proactively working with a county officer to further develop their already substantial community offering
- Development of a Parish menu outlining examples and suggestions of ways parish and county councils can work together
- An invitation to officers to attend Huntingdonshire Joint Rural Forum to discuss 'Where will the axe fall and how can towns and parishes help?'
- One County Councillor has convened parish cluster meetings where parishes are now collaborating on projects
- Another Councillor convened a Village Meeting explaining the situation and ideas raised there are now coming forward through their Community Plan.
- Monthly briefings of relevant information to all Local Councils from the County Council Communications team

3.54 At this early stage the approach we are adopting is to work with the willing, engaging with proactive local councils who approach us.

3.55 There is a need to understand the different nature of the geographical communities the County Council serves, particularly in relation to Cambridge City where this local community based work takes on a different complexion, and the task for Members as Community Connectors is highly likely to be different.

3.6 Our workforce

3.61 The County Council's Workforce Strategy has now been revised to incorporate the requirements of our work on community resilience.

3.62 A working group is now meeting regularly to support staff to gain the skills and expertise they will need for this new way of working. The group will plan and deliver a programme of workforce development to equip staff with the skills they will need to work more closely alongside local communities and other local service providers. It will also consider the fundamental way that we develop job roles so that we recruit staff with the key skills to work differently.

3.7 Community Hubs

3.71 We will be rationalising our property and staffing in local areas in order to provide a network of community hubs, co-locating our face-to-face information and advice provision, creating a hub for the delivery of local preventative and early help services for all age groups, and creating a forum for local services to network and plan together.

3.8 Partnerships

3.81 A series of individual meetings have taken place with partners to explore the resonance of the strategy with their own objectives. Discussions are also taking place at partnership boards to establish any cross-cutting strategic links which need to be made. From these discussions, any countywide actions and goals will be developed as well as any specific local activity to take the work forward. In Fenland, initial discussions have been taking place under the auspices of the Fenland Strategic Partnership to look at whether rethinking the totality of the resource being allocated across agencies in a community through the lens of community resilience could assist the process of re-focussing services.

3.82 Plans are underway for the establishment of the County Council's Innovation Fund. This will be a fund for small groups and organisations/businesses with big ideas for transformative preventative work which will make a positive impact on County Council expenditure. The County Council will encourage bids for funds which will demonstrably make an impact on our priority outcomes – particularly in relation to working with vulnerable people, and thereby diverting children and adults from needing high-cost council services.

3.83 We are considering how we can develop a shared narrative across the public sector – a shared communications plan or agreed set of principles. We are now linking with public service colleagues to lead a piece of work which will be presented to the public services board with regard to bringing all public services together to reposition how, as a group, we can manage key community resilience messages, and coordinate communications strategies.

3.84 Our strategy identified social prescribing as a systematic way of linking people who need support with sources of this support within their local communities. Using investment from the Better Care Fund, both Cambridgeshire and Peterborough plan to deliver pilots implementing two different models of social prescribing. The Cambridgeshire pilot will see the voluntary sector (via the Health and Wellbeing Network) working with NHS and Local Authority commissioners to implement models of self-sustainable GP practices, recognising that GPs have to deal with many issues that are social rather than health related. The pilot is planned to be delivered in four GP practices within one of the Trailblazer Neighbourhood teams. The Social Prescribing Business Case is currently being prepared and is subject to approval by the Better Care Fund Delivery Board.

- 3.85 Social prescribing now has a strong evidence base nationally. Outcomes include marked improvements in self-reported wellbeing amongst the practice populations as well as with practice staff themselves. Reductions in GP appointments and reductions in attendance / admission to hospitals have also been observed due to the increased informal support delivered by citizens of the practice.
- 3.9 A report on Public Health activity in relation to community resilience was discussed at the County Council's Health Committee in March 2016. An extract from this report is attached at Appendix A.

4.0 ALIGNMENT WITH THE CAMBRIDGESHIRE HEALTH AND WELLBEING STRATEGY

- 4.1 The Strategy aligns with the with the Cambridgeshire Health and Wellbeing Strategy

Priority 3: Encourage healthy lifestyles and behaviours in all actions and activities while respecting people's personal choices

- There is evidence that community engagement and resilience supports the adoption of a healthy lifestyle as a community norm and engagement in health improving initiatives
- The benefits to those supported by volunteer s include improvement in health, wellbeing and independence
- Supporting community resilience builds increased social capital; cohesion, empowerment, and improved relationship with organisations.

5.0 IMPLICATIONS

5.1 Supporting and protecting vulnerable people

- The County Council, along with other partners in the public sector, will have to make reductions in front line services in order to meet the significant financial challenges ahead. This strategy is a key aspect of the Council's approach to mitigating the impact of those cuts on those who need support but could manage without the intervention of statutory services.

5.2 Resource Implications

- There are no significant additional costs incurred in the delivery of the overall strategy, though some actions may require short-term revenue input in order to achieve identified savings (invest to save).

5.3 Statutory, Risk and Legal Implications

- The strategy is designed to mitigate the impact of reductions in local government funding, and as such should help to guard against the risks identified in its corporate risk register around failure to deliver the business plan.

- There will be a continuing legal duty on local authorities to ensure that vulnerable people are not exposed to additional or unreasonable levels of risk as a result of the implementation of these strategic objectives.

5.4 Equality and Diversity Implications

The following bullet point sets out details of significant implications identified by officers:

- Evidence indicates that services delivered by local people within local communities can be successful at reaching people who do not access Council or statutory services but who may need support.

5.5 Engagement and Consultation Implications

- Delivery of this strategy cannot be undertaken unless there is collaboration with agencies across the system. Successful delivery will hinge upon the relationships with other agencies in local communities – at a strategic planning level as well as between people working in local areas. There have been some early discussions with voluntary sector organisations and other statutory agencies further develop a partnership approach to developing and supporting community resilience.

6.0 RECOMMENDATION/ DECISION REQUIRED

- 6.1 The Health and Wellbeing Board is asked to consider the implementation of the Community Resilience Strategy and in particular the partnership work being undertaken and the implications for the delivery of the Health and Wellbeing Strategy.

7.0 SOURCE DOCUMENTS

7.1

Source Documents	Location
<i>Stronger Together – Cambridgeshire County Council's strategy for building resilient communities</i>	Box OCT 1210 Shire Hall Cambridge http://www.cambridgeshire.gov.uk/downloads/file/4176/community_resilience_strategy

PUBLIC HEALTH SERVICES

Many public health services have been using the principles and practice of community resilience for some years. The Council's Community Resilience Strategy provides a positive opportunity to potentially build further links, particularly through Member training and Parish Councils.

The following are examples of Public Health interventions that involve engaging individuals and communities to develop the knowledge, skills and resilience to enable them to take responsibility for their health and well being. The interventions are delivered by members of the Public Health Directorate or through commissioned services. They include working with a range of different ages and communities in a variety of settings.

Healthy Fenland Fund

Public Health staff have worked to establish the Healthy Fenland Fund to build community resilience and reduce health inequalities in Fenland through engaging communities to take responsibility for their health and well-being. Communities in Fenland are able to access small grants that will enable them to develop local projects and interventions to address their health and wellbeing needs.

This funding may be used to strengthen the community by supporting the "building blocks" or for a specific project that addresses a community issue. Care Network in collaboration with Cambridgeshire Community Foundation has been commissioned to administer the Fund and to engage communities. It has employed community workers who will be responsible for identifying "enablers" and supporting them to work with their communities to realise their assets and manage their own needs. Enablers are community members who identify and use their community strengths, physical and social assets and make connections in their communities to develop resilience and strengthen their communities. The Healthy Fenland Fund acts as an incentive and the community workers will work with communities and advise them how best to access and best use the Fund.

Breastfeeding Peer Support Programme

Members of the Public Health Directorate facilitate a Peer Breastfeeding Programme that currently has Peer Breastfeeding Support Groups in Fenland, East Cambridgeshire and Huntingdonshire where there are lower rates of breastfeeding. There is evidence that breastfeeding has considerable health benefits for the child and mother. Peer support groups are acknowledged as being an effective means for initiating and increasing the length of time women breastfeed. Peer supporters are voluntary lay women, recruited from the local community who have breastfed themselves and successfully completed additional accredited breastfeeding training that is provided by Public Health. Trained peer supporters go on to recruit new members and form their own peer support groups.

In addition to supporting mothers to breastfeed, the peer programme also increases social networking opportunities, provides opportunities for the peer supporters to undertake further education or training and other voluntary roles in the community. It also builds relationships with professionals making them more aware of the contribution that the peer supporters make to the number of women who successfully breastfeed.

KickAsh

Kick Ash Cambridgeshire is a health promotion programme that aims to reduce the prevalence of smoking amongst young people who are 16 and under. It is a school based programme that engages young people in promoting the no-smoking message with young mentors being recruited who represent a wide cross section of students from different social groups. The programme is currently active within 10 schools with over 150 mentors being trained this year (2015/16) and in excess of 500 during the life of the programme.

It is facilitated by Public Health, CAMQUIT (Stop Smoking Services), Personal Social Health Education (PSHE), Communications and Trading Standards. The mentors working with staff from these Departments influence the design and development of the programme within their school and in the wider community.

The Programme is led by mentors from Year 10 (15/16 yrs. olds) who deliver bespoke PSHE units of work to year 8 (13 yrs. old) and year 5/6 (10/11 yrs. old) students. The units focus upon what influences their decision making around smoking and related risk taking behaviour. In addition they undertake a number of events in the community, raising awareness of the issues e.g. flash mob appearances in busy areas, training and workshop activities and communication that includes social media and press releases.

The mentors have expressed the following benefits: acquired new skills, gave them responsibilities which helped build their confidence, gave them leadership opportunities, good for their CVs, made them feel valued and gave them an understanding of the smoking related issues.

Schools have reported the following benefits: opportunities to work with other schools including primaries and the wider community with professional support from an outside agency, provides a focus upon health which is a priority for schools, participation in a high profile programme is good for school reputations and credibility. Those schools which are involved report that that the programme is now a school priority.

Gypsy and Traveller Health Team

The Public Health Directorate includes the Traveller Health Team that works to improve the life chances of Gypsies and Travellers across Cambridgeshire. As the largest ethnic minority group in Cambridgeshire, their life expectancy is approximately 10-12 years less than that of the non-Traveller residents and they are 5 times more likely to experience ill health (Travellers Joint Strategic Needs Assessment [JSNA], 2010). Activities focus on providing the communities with the knowledge and skills to improve their health and wellbeing. Other funding has been secured by the team for specific projects. The Travellers Literacy Project targets those who have none or few literacy skills. The project enables learners to become more aware of how to access GP and other services. Improved literacy also helps with making health choices and the services that will help them with these choices. Literacy tutors report that participant mental health has improved through increasing their self-esteem and confidence building. A number of participants have progressed to employment or transferred to other skills development courses, which for many will be their first experience of achieving a qualification and a route to employability and independence

Health Explorers

A high smoking rate is one of the factors associated with the high numbers of smoking related deaths and illness in Fenland. In 2014 the voluntary organisation Our Life was commissioned by Public Health to facilitate a Citizen's Investigation into Smoking in Fenland.

Our Life specialise in community engagement and carry out high-quality public participation processes, research and training designed to involve local people in local decisions around issues that directly affect them and the areas in which they live. The starting point in Our Life's work was to discover the assets that the local communities already have and how to build on the existing strengths in the communities.

A "conversation" was held with 17 volunteers from Fenland (these were mainly made up from people who use the Rosmini Centre in Wisbech) about tobacco use in the local area. This informed the Fenland Explorer Project which recruited five volunteers from the community. They were trained and undertook street based research by interviewing over 150 local people from Fenland market towns. They used the findings to produce a final report which is being used for the ongoing engagement of communities in smoking prevention and the Stop Smoking Services. The volunteers became the Fenland Health Explorers who created their own identity, logo and reported that they had increased their knowledge, communication skills and confidence.

Health Walks

For a period of 12 years Public Health staff sometimes with partner agencies have trained and supported volunteers to lead Health Walks East Cambridgeshire.

Health Walks are evidence based interventions that support not only the promotion of physical activity but also psychological wellbeing. They bring together groups of up to 40 individuals who may have low levels of physical activity and/or be socially isolated. Local case studies have revealed the social impact of the walks with individuals not able to walk still meeting with the group for social gatherings.

4.8 Health Trainers

Public Health commissions Everyone Health to provide an integrated Lifestyles Service which includes Health Trainers. Historically in Cambridgeshire the Health Trainer Service was confined to the 20% most deprived areas but since 2015 the Service has been commissioned for the rest of the county.

Health Trainers offer tailored advice, motivation, skills and practical support to individuals who want help to adopt healthier lifestyles. They focus on those in greatest need and more disadvantaged communities. The Cambridgeshire Service also includes community engagement workers who develop links with communities to enable health trainers to work with them to develop their knowledge and skills for taking responsibility for their own health. For example they recruit and train volunteers to run Health Walks (expanding the East Cambridgeshire model to the rest of the county) and other community physical activity initiatives or provide cooking classes for mothers.

4.9 Workplace Health Programme

Public Health has a long standing Workplace Health programme which offers support to employers to improve the health of their workforces. There is evidence that workplace health programmes support improvements in employee health and provide financial savings through for example reduced sickness absence. Business in the Community (BITC) has been commissioned to develop the Programme, primarily with workplaces in the private sector in the more deprived areas over the next two years. Support is also being given to Local Authorities and the NHS by members of the Public Health Team.

Integral to the sustainability of the programme is ensuring that workplaces i.e. employers and employees are committed to and own their Programmes along with the securing the skills to ensure that they are sustainable. Volunteer Health Champions are recruited and trained. Their role is to engage the ongoing support of employers and employee, play a lead role in organising initiatives that promote health and wellbeing, as well as signposting to relevant, local services. Employer networks have also been formed where peer support is available for employers who are taking forward workplace health programmes.

Sexual Health Champions

Public Health commissions the a voluntary sector organisation DHIVERSE, to train community volunteers as Sexual Health Champions (SHCs) to work with their communities to promote sexual health and HIV prevention. The project has been especially successful with Black, Asian and Minority Ethnic (BAME) groups with the volunteers playing a key role in developing an awareness of HIV in their communities and ongoing sexual health promotion. More recent work has resulted in the recruitment of volunteers from the Men who have Sex with Men (MSM) communities.

Engaging Retailers - Healthy Options Project

The Healthier Options initiative engages local food businesses in Cambridgeshire to provide healthier food and drink options to customers. Environmental Health Teams from Cambridge, South Cambridgeshire and Fenland Councils have promoted the initiative to businesses in their areas and encouraged them to sign-up to the “Healthier Intention” pledge” to support their communities to make healthier food choices.

Social media, a website, a twitter account and a Facebook page are being used to engage not only with local businesses but also with the community. This has led to some local residents signing up to become Healthier Options Ambassadors and helping to promote the initiative to both local businesses and their communities.

Building Skills for Community Resilience - Public Health Training

Public Health provides various training courses for communities and professionals. These enable them to motivate and provide support for individuals and communities to take responsibility for their health and adopt healthier lifestyles. Examples of training are brief behavioural change interventions and motivational interviewing. More specifically Mental Health First Aid Training teaches people how to identify, understand and help a person who may be developing a mental health issue; this could be with their family, friends, workplaces or communities.