

CAMBRIDGESHIRE HEALTH AND WELLBEING PRIORITIES: PROGRESS REPORT

To: **Health and Wellbeing Board**

Meeting Date: **November 22nd 2018**

From: **Dr Liz Robin, Director of Public Health**

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

- a) note progress against the HWB Board priorities for 2018/19**

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1.0 PURPOSE

- 1.1 The purpose of this paper is to update the HWB Board on progress against its three agreed priorities for 2018/19. Progress is reported separately against each priority.

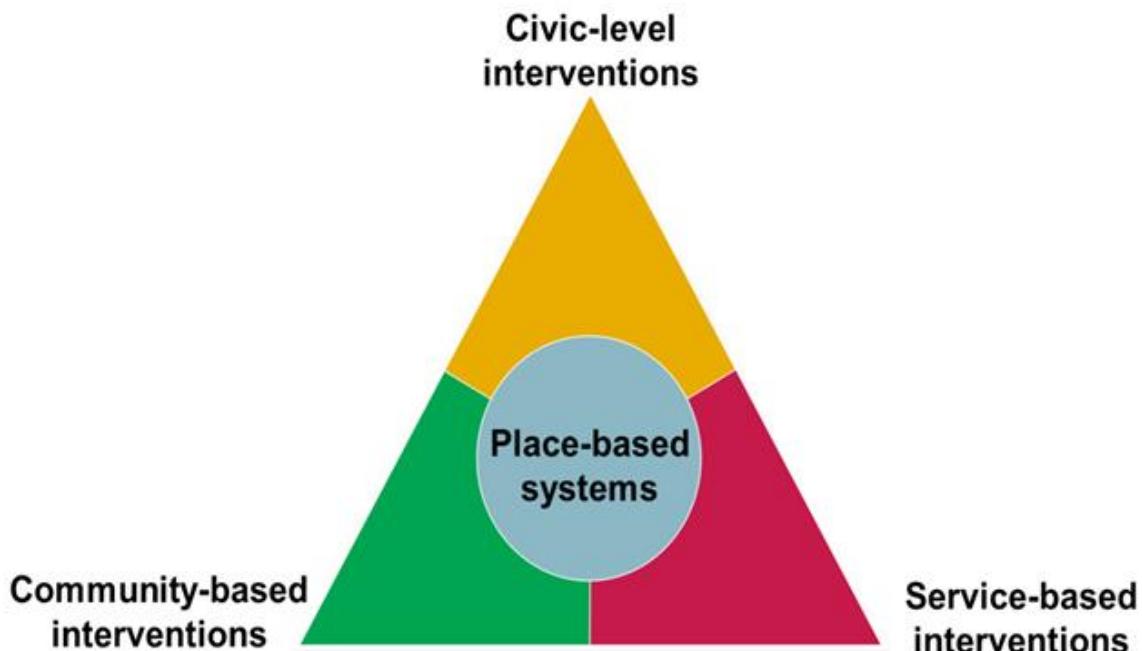
2 PRIORITY 1: HEALTH INEQUALITIES INCLUDING THE IMPACT OF DRUG AND ALCOHOL MISUSE ON LIFE CHANCES

Background

- 2.1 In April, the HWB Board agreed that the multi-agency Public Health Reference Group (PHRG), working closely with the place based Living Well Partnerships, would be an appropriate officer group to scope and develop the Health and Wellbeing Board's priority to address health inequalities in Cambridgeshire. Action on the impact of drug and alcohol misuse specifically, would be overseen by the multi-agency Cambridgeshire & Peterborough Drug and Alcohol Misuse delivery board, working with Living Well Partnerships and district-based Community Safety partnerships.

Progress

- 2.2 The PHRG reviewed a paper on health inequalities, attached at Annex A, which provides an overview of the complexity of health inequalities issues, and a set of frameworks, brought together by Public Health England, that can be used to start to address them. The PHRG focussed particularly on the framework for intervening at **civic, community and service levels**, which can separately impact on population health. In combination, the impact will be greater.
- **Civic interventions** – healthy public policy, including legislation, taxation, welfare and campaigns can mitigate against the structural obstacles to good health. Adopting a Health in All Policies approach can support local authorities to embed action on health inequalities across their wide ranging functions.
 - **Community level** - encouraging communities to be more self-managing and to take control of factors affecting their health and wellbeing is beneficial. It is useful to build capacity by involving people as community champions, peer support or similar. This can develop strong collaborative/partnership relationships that in turn support good health.
 - **Service level** – Effective service based interventions work better with the combined input of civic and community interventions, eg a tobacco control strategy will include civic regulation on smoking in public spaces, and contraband sales; support to community campaigns and smoking policies in workplaces; as well as smoking cessation services.



Credit: PHE Public Health Data Science based on the original concept created by Chris Bentley.

- 2.3 The PHRG identified a range of existing local work at the community-based and service-based levels of intervention to address health inequalities. The main issue for this wide range of work, is to ensure that inequalities identified in the Joint Strategic Needs Assessment (JSNA) are taken into account when developing services and community based activities. This has been progressed by developing a wider range of presentation materials for the JSNA – at STP, upper tier local authority and second tier local authority geographies and ensuring that these are well disseminated.
- 2.4 Work on civic-level interventions to address health inequalities was felt to be less ‘joined up’ between local organisations, with scope for the PHRG to contribute by reviewing best practice both locally and nationally. The public health team agreed to prepare a review of policies which could be used across the public sector to address health inequalities, and to bring this back for discussion in January, with the aim of prioritising a small number of policy areas to work up further.
- 2.5 The Cambridgeshire and Peterborough Drug and Alcohol Misuse Strategy and Action Plan was presented to the previous HWB Board meeting. The priorities for this year are outlined in the table overleaf. An abridged paper to the Cambridgeshire County-wide Community Safety partnership is attached as Annex B, which updates on progress.

Cambridgeshire & Peterborough Drug and Alcohol Misuse Strategy: Current Priorities

1) Prioritising early help interventions to children, young people and families most at risk of substance misuse
2) Reducing drug related deaths and implementing the recommendations of the drug related deaths review
3) Improving outcomes by addressing barriers in:
a) Housing and homelessness and substance misuse (including linking in with the local homelessness pathfinder)
b) Education, training, volunteering and employment and substance misuse (including embedding the work and health programme and work with Job Centre Plus).
c) Mental health pathways and substance misuse
d) Criminal justice system (across all relevant criminal justice pathways and interventions).

3. PRIORITY 2: NEW AND GROWING COMMUNITIES AND HOUSING

Background

- 3.1 A discussion was held on New and Growing Communities and Housing at July's Cambridgeshire Health and Well Board. Key points from the discussion included:
- Recognition this is a complex issue which was not always particularly well understood;
 - Large developments such as Northstowe are not required to take account of the impact of the new community on wider health care services and infrastructure such as midwifery services and hospital care. It was felt this was a policy issue as much as a practical one.
 - The impact on health services of the additional demand created by those living in smaller, infill developments was also not yet taken into account when proposals for these types of developments were considered;
 - HWB Board members questioned whether Health and Care Executive Group was the right place for current discussion;
 - Welcomed the issues being raised as it demonstrated some dysfunctional ways of working.
 - There was a need to share more information.

3.2 HWB Recommendations resulting from this discussion were:

- There is a need for a careful analytical look at the system and to get some strong analysis done to take this forward.

- Recognise that issues go wider than chief executives and asked that the flavour of this discussion should be fed back to them. The Board really wanted to know how they would engage.
- There was also a role for District and City Council representatives in raising this issue with their respective Councils.

Progress

3.3 Sustainable Transformation Partnership (STP) Estates Strategy

The recently published STP Estates Strategy identified working with planning authorities as one of the key enablers. In order to progress, the STP Estates Group has formed a sub-group which is pulling together resources across the Local NHS Estates function to plan how the system responds to growth and the need for estate in the short term and longer term.

Public health are supporting this work with additional capacity commissioned through the STP. Discussions have already taken place with Cambridge City and South Cambridgeshire, the NHS Improvement Strategic Estates Planning Service, and the CCG primary care team, further discussion are scheduled with Huntingdonshire, Fenland and East Cambridgeshire Councils.

Output from this work will be used to deliver a series of workshops, the first focusing on the relevant health organisations to:

- outline where growth is happening, appreciating that much of the growth is small scale infill and may not attract planning gain (sec 106/CIL),
- Defining the need, acknowledging that Sec 106/CIL may not be the answer, and that the need for estate should follow the proposed model for health and care services,
- look at current “NHS” estate and where the gaps may be,
- explore the role of One Public Estate (OPE),
- understand how the “health system” can access “Planning Gain” by working more effectively together,
- Link with the “STP Workforce” workstream to ensure both estate and workforce have a coordinated approach to growth
- Develop a process for the Health System to respond to Local Planning Authorities with “one voice” and an evidence based approach to “need”

The second workshop will focus on the Local Planning Authorities and will be an opportunity for the Health System to test its proposal and process with the Planning teams.

Due to the level of growth in the area and the innovative use of Section 106 monies for revenue activity (facilitated by district planning colleagues) the NHSI Strategic Estates Planning function have offered to support some of this work going forward.

In the longer term the group will look to engage in the design principles of land use planning to design out poor health outcomes and build in positive health outcomes through the local plan making process.

3.3 STP South Alliance

The STP South Alliance (covering Cambridge City, South Cambridgeshire and East Cambridgeshire) has identified new communities as one of its 5 main priorities. This will build on the work and learning from Northstowe and look at how to plan effectively for upcoming developments such as Waterbeach, Bourne Airfield etc.

3.4 Cambridgeshire Public Service Board

Cambridgeshire Public Service Board (CPSB), which includes chief officers from all local authorities, fire, police, combined authority, and an NHS representative, has agreed to sponsor a programme of work looking at how taking a system-wide approach to themes and issues can change the way that the public sector operates in Cambridgeshire. To support this work, four grand challenges have been identified that cut across the work of all of the organisations represented on the board: 1. Giving people a good start in life; 2. Ensuring that people have good work; 3. Creating a place where people want to live; and 4. Ensuring that people are healthy through their lives. To take this work forward, one focus is New Communities as this could contribute to all of these grand challenges.

3.5 Cambridgeshire and Peterborough Combined Authority

The recently published Cambridgeshire and Peterborough Independent Economic Review identified that current projected job growth for Cambridgeshire and Peterborough is likely to be an underestimate and that future housing growth will need to be increased above and beyond the current trajectory to keep pace.

3.6 Further strategic analysis

A paper has been prepared for the joint meeting of the Cambridgeshire Public Service Board and the Health Care Executive, which includes a recommendation that further strategic analysis of future health and social care needs in new communities is commissioned, as recommended by the HWB Board. However the joint CPSB/HCE meeting planned for October was cancelled so the paper has not yet been presented.

4 PRIORITY 3: INTEGRATION – INCLUDING THE BETTER CARE FUND, DELAYED TRANSFERS OF CARE. THIS ALSO COVERS MONITORING THE IMPACT OF DEVELOPING PLACE BASED CARE MODELS.

Background

4.1 A deep dive into Delayed Transfers of Care was covered in depth at the joint meeting of Cambridgeshire HWB Board and Peterborough HWB Board in September.

Progress

4.2 Progress against this priority is covered in a number of other papers on the agenda for this HWB Board meeting:

- Better Care Fund update: iBCF Evaluation Report
- Better Care Fund update: Developing housing for residents currently placed out of county
- Cambridgeshire and Peterborough Health and Social Care System: Local Government Association (LGA) Peer Review Feedback
- Public Service Reform: Health and Social Care Proposal
- Living Well Partnership Update (Cambridge and South Cambridgeshire)

5 LINKS TO HEALTH AND WELLBEING STRATEGY PRIORITIES

5.1 The priorities for action described in this paper are cross-cutting and will impact on all six priorities of the overarching 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.wengine.com/wp-content/uploads/2018/01/4-HWB-Strategy-Full-Document.pdf