


Agenda Item No:	5	
Committee:	Overview & Scrutiny	
Date:	23 February 2015	
Report Title:	Fenland Health & Wellbeing Partnership Update	

Cover sheet:

1 Purpose / Summary

The main purpose is to provide an update on the progress of the Fenland Health & Wellbeing Partnership, now in its second year since it was refreshed following the changes created by the Health and Social Care Act (2012).

2 Key issues

- The Health & Wellbeing Partnership, in its refreshed form, brought together a range of new partners that had not worked together as a partnership previously.
- Although the Partnership has evolved over the past year, there is still an ongoing need to further develop a shared language and culture to encourage and enhance collaborative working between these partners.
- The Partnership will be key to making improvements to the health and wellbeing of the people of Fenland.
- There are some immediate challenges that confront some of the work in the Task and Finish Groups.

3 Recommendations

- To consider and discuss the progress of the Fenland Health & Wellbeing Partnership.

Wards Affected	All
Forward Plan Reference	N/A
Portfolio Holder(s)	Cllr Mike Cornwell, Portfolio Holder for Communities Cllr Michelle Tanfield, Portfolio Holder for Leisure and Children & Young People
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Background Paper(s)	

Report:

1 Background / Introduction

1.1 The Cambridgeshire Health and Well-Being Board and Strategy

- 1.2 The Fenland Health and Well-Being Partnership is part of the wider Cambridgeshire Health and Well-Being Network which links to the Cambridgeshire Health and Wellbeing Board.
- 1.3 The Health and Wellbeing Board (HWB) became a statutory committee in April 2013. Following County Council elections in May 2013 its membership was changed to include member representation from all the City and District Councils. There is an ongoing programme of development for Board members. Over the course of the past year the HWB has taken forward its statutory duties of reviewing and responding to major health and wellbeing strategic developments.
- 1.4 The Chairman of the Health and Wellbeing Board is now Councillor Tony Orgee.
- 1.5 The Health and Well Being Strategy produced in its first year is being taken forward through the Action plans. The Board has acknowledged the work and leadership contributed by a range of partner agencies to the Strategy.
- 1.6 The Fenland Health and Well Being Partnership has the Health and Well Board and Health and Well Being Strategy as standing items on its meeting agendas reflecting the value placed on good communication between the Health and Well-Being Board and the wider Network. The Board development days have also provided the opportunity for more detailed feedback from the local Health and Well Being Partnerships.

2 Health & Wellbeing Partnership Update

- 2.1 The Fenland Health and Well Being Partnership has been continuing to meet quarterly throughout the past year. There is regular communication and collaboration continues to increase across partners with joint working across new and existing health and well-being activities.
- 2.2 Partnership meetings have received presentations from a range of partners that includes Cambridgeshire and Peterborough Clinical Commissioning Group (CCG) Cambridgeshire County Council, Community Navigator Programme and from academics. This has given members the opportunity to discuss and respond to such key issues as the current CCG Older People's Services Procurement and the Better Care Fund.

3 Partnership Infrastructure

- 3.1 The new Partnership was launched in March 2012 with a revised membership that brought together for the first time local GP commissioners with other non-health partners. As it has evolved its membership has been broadening to include the voluntary sector and Cambridgeshire County Council Adult Education Services.
- 3.2 The Partnership currently includes the following members:
- Adrian Loades, Executive Director, Cambridgeshire County Council representing the Health and Well Being Board
 - GP representation from the 4 Local Commissioning Groups (LCGs): Isle of Ely, Wisbech, Hunts Care Partners and Borderline
 - Cambridgeshire County Council Public Health, Adult Social Care, Children's Services and Learning Services

- Fenland District Council (FDC) Member representation, including Portfolio Holders for Health & Well Being, Health Inequalities & Vulnerable People, Children and Young People & Golden Age and Leisure and Tourism, as well as Corporate Director and leads for key areas
- Healthwatch
- GP Practice Patient representatives – Wisbech and Isle of Ely
- Local Chief Officer from Isle of Ely and Wisbech LCG
- Cambridge CVS
- Local Pharmacy Committee

4 Community impact

- 4.1 The Partnership identified its priorities, found below following its re- launch and they are based on the Joint Strategic Needs Assessment along with partner information that was presented to the Partnership. This enabled the Partnership to review a range of issues and initiatives to identify where collaborative working could be targeted to meet the priorities.
- 4.2 It was agreed that there were many existing health and well- being issues that were already being addressed in Fenland. However the key aim of the Partnership is to provide “added value” to health and well- being initiatives. A key challenge for the Partnership was to identify a small number of focused areas where the Partnership could bring added value and support the delivery of positive outcomes in the priority areas.
1. Prevention of ill health
 - Establish a strategic focus upon prevention
 - Identify a number of local priorities where joint action can prevent ill health.
 2. Engage the local population
 - Increase the engagement of Fenland residents in their communities and support them to take responsibility for their own health
 3. Increase and Improve Communication
 - Avoid duplication of communications and improve the knowledge of health professionals and the public about available services
 - Provide communities with appropriate information about current services
 4. Increase the effectiveness of services
 - Improve the integration of actions across a wider range of organisations i.e. health, non-health, statutory and voluntary organisations.

5 Addressing the Priorities

- 5.1 Task and finish groups were established and are continuing to take work forward to address these priorities.

6 To Prevent the Hazardous and Harmful Alcohol Consumption and Drug Misuse

- 6.1 A multi agency workshop was held in November 2014 to explore how concerns relating to the affects excessive alcohol in relation to the Community Safety of the district and the Health & Well Being of the districts residents could be tackled across both partnership agendas in a coordinated manner.
- 6.2 Partners representing Public Health, CCG/Wisbech LCG, Cambs and Peterborough LPC (Pharmacy services), FDC teams (Housing, Streetscene and Community Safety), CCC (Drug Alcohol Action Team), Ferry Project, Inclusion (the provider of support services for residents suffering from alcohol misuse) and Cambridgeshire Police attended.
- 6.3 From that meeting it was agreed that 4 strategic themes should be prioritised for coordinated action:
- Theme 1 – Improve recording of street drinking to better understand local need and focus
 - Theme 2 – Reduce the impact on the community where alcohol is a key factor through multi agency support work
 - Theme 3 – Increase front line officer and local business training to improve confidence, advice and sign posting
 - Theme 4 – Improved promotion activity to help reduce the risk of alcohol misuse and harm
- 6.4 An action plan is being developed around those 4 themes to deliver the outcomes:
- Theme 1:
 - a) Increased reporting to improve data on street drinker profiles for partnership engagement
 - b) Improved reporting of street drinking in areas outside areas of CCTV coverage
 - c) Increase in dependant drinkers working towards rehabilitation
 - d) Improved partnership information sharing and management of identified need
 - Theme 2:
 - e) Reduction of incidents in the chosen location and improved perceptions of this area by local residences
 - f) Effective and timely intervention on street drinkers with clear and focussed action plans to help breakdown chaotic lifestyle and risk of alcohol harms
 - Theme 3:
 - g) Front line officers will have improved awareness and understanding to identify alcohol misuse and offer advice
 - h) Businesses will have better confidence to engage with customers on the risks of alcohol misuse
 - i) Improved sign posting of vulnerable persons to relevant support services
 - Theme 4
 - j) Increase in employer guidance and support in relation to the harmful effects of alcohol
 - k) Increase in health checks undertaken
 - l) Improved support for residents without GP support

- 6.5 The specific projects and actions to help deliver the outcomes proposed is currently being agreed across the multi-agency taskforce with the aim of a finalised action plan being ready for April 2015.

7 Reducing Health Inequalities - Coronary Heart Disease

- 7.1 The Fenland Health and Well Being Partnership, the Cambridgeshire and Peterborough Clinical Commissioning Group have identified the reduction in health inequalities amongst those suffering from coronary heart disease as a priority area. The inequality is most marked in the Wisbech area and an action plan has been developed and taken forward by partners from the Fenland District Council, Cambridgeshire County Council, Health Trainer Service, Community Pharmacy and the voluntary sector.
- 7.2 Central to addressing this is the need to provide people with appropriate information, identifying if they are at risk, supporting them to make healthy lifestyle choices and referring them to appropriate services. An information booklet has been developed primarily for GP practices that will help health professional signpost patients to appropriate lifestyle services
- 7.3 Motivational Interviewing (MI) is a recognised evidence based tool for supporting people to make healthy lifestyle choices. This training has continued to be rolled out across different agencies with staff being trained in MI to a level appropriate to their role and opportunities. This will enable them to make brief intervention and refer to lifestyle services. See above for FDC staff.
- 7.4 The NHS Health Checks Programme is a risk assessment offered to 40-74 year olds. It identifies those at risk of heart disease, provides advice and referrals. This has been mostly undertaken in GP surgeries. However. Cambridgeshire County Council Public Health Team has developed a Workplace Programme and is targeting Fenland employers working closely with Fenland District Council. A mobile service using an FDC vehicle is visiting local employers and other sites such as supermarkets offering NHS health Checks to those eligible and a “ mini health check” to others. The Stop Smoking Service CAMQUIT is also involved and offers advice about stop smoking at the sessions. The initiative has been recognised as an example of good practice in accessing hard to reach and vulnerable groups by the National NHS Health Checks Programme and is on the national website and will be promoted at the national conference in February.
- 7.5 Reducing the number of people who smoke is a key intervention for reducing coronary heart disease. The latest Public Health Outcome Framework information (2013) indicates that smoking prevalence has fallen throughout the county, including Fenland. In Cambridgeshire as a whole the estimated smoking prevalence in 2013 dropped from 19.5% to 13.5% and this decrease was replicated across the districts. However smoking prevalence varies between its five districts, the highest estimated prevalence is in Fenland at 21.9%, a drop from 29.5% from 2012 and the lowest in Cambridge (9.5%). Currently nearly a fifth of the population of England smokes (18.4%).
- 7.6 The Stop Smoking Service is continuing to focus upon high prevalence areas in the District. However the number of smokers accessing services is decreasing which reflects the national situation and is attributed to the impact of e cigarettes. Social marketing research has been commissioned to try and understand why fewer smokers are accessing services. The Report will be available in March/April.

8 Future Action

- 8.1 In October the Partnership held a well- attended Workshop to review the Partnership’s priorities and the actions that need to be developed. This was in response to the latest Cambridgeshire Annual Public Health Report that highlights the ongoing health inequalities in Fenland and the health behaviours which could increase health inequalities

in the future. The Action Plan that was developed from the discussion at this event was approved at the subsequent Partnership meeting and is attached (Appendix 1).

9 Challenges

- 9.1 The partnership has brought together for the first time a diverse range of agencies that have previously not worked together. The legal changes that have driven the new Health and Well-Being Partnership provide an opportunity to create new collaborative and innovative ways of working that will have a positive effect on the health and Well-Being of the Fenland communities.
- 9.2 However there are still challenges for collaborative working that reflect language and cultural differences but also practical issues such as sharing data that could greatly enhance how different organisations could work together to make preventative intervention and to better support people in need.
- 9.3 The challenge for the Partnership is to facilitate and support collaborative working and to ensure that Partners continue to actively engage with the Partnership and work together to deliver improvements.

10 Community Impact

- 10.1 The Fenland Health and Well-being Partnership brings together a wide range of partners to address key health and well- being issues in Fenland.

Fenland Health & Wellbeing Partnership
Strategic Priorities

Common themes emerging from the workshop held in October 2014:

1. There is an opportunity for us to work together more effectively.

Key examples include coordinating similar activities, information and data sharing and joining up our work where possible.

2. In terms of health and health inequalities, our focus should be on:
 - Lifestyle and its effects on health, such as Coronary Heart Disease (CHD) and Diabetes:
 - Smoking
 - Physical Inactivity
 - Alcohol
 - Obesity
 - Mental Health
 - Sexual Health

Suggested Actions from the Partnership Identified at the Meeting

	Project	Actions	Who
Working Better Together			
1.	Multi-Disciplinary Teams (MDTs)	<ul style="list-style-type: none"> • Explore opportunities and map out potential opportunities. • Meeting to map out opportunities held on 11th December 2014. • Project group established to scope out project during February 2015. 	CCC, CCG, FDC, Care Network, Local Pharmacy Committee Uniting Care Partnership
2.	Making Every Contact Count	<ul style="list-style-type: none"> • Get partners to sign up to the concept / process of brief interventions • Identify staff to be trained by the Public Health team (motivational interviewing) • Identify customers and refer or signpost • Formal health checks (training) 	Public Health FDC Local Pharmacies
3.	Workplace programme	<ul style="list-style-type: none"> • Visiting people in their working environment – captive audience • Work Healthy Fenland: health checks / support for employer health policies. • Advice, signposting and health checks • Engaging partners and coordinating a joined up programme 	Public Health Team FDC – Environmental Health & Leisure Local Pharmacies
4.	Cross promotions / marketing of activities	<ul style="list-style-type: none"> • Winter Warmth campaign – referrals by all partners. 	All

	Project	Actions	Who
5.	Shared Service Directory	<ul style="list-style-type: none"> • Build on the one already produced for Wisbech • Signposting 	Public Health FDC Healthwatch
Lifestyle			
6.	Alcohol	<p>Action plan in development following November Multi agency meeting around 4 themes:</p> <ul style="list-style-type: none"> • Theme 1 – Improve recording of street drinking to better understand local need and focus • Theme 2 – Reduce the impact on the community where alcohol is a key factor through multi agency support work • Theme 3 – Increase front line officer and local business training to improve confidence, advice and sign posting • Theme 4 – Improved promotion activity to help reduce the risk of alcohol misuse and harm 	FDC CCC Police Wisbech LCG Inclusion
7.	Smoking	<ul style="list-style-type: none"> • Use information from social research and 'deep dive' study to identify actions • Community engagement / capacity building / resilience • Illicit tobacco project / tobacco control • Work Healthy Fenland • Upskill all front line staff to identify illicit tobacco sales and refer. • Brief intervention training and motivational interviewing. 	Public Health Public Health, FDC Trading Standards / Environmental Health/ Streetscene/ Operation Pheasant FDC Licensing

	Project	Actions	Who
8.	Take Away / Fast Food Planning Policy	<ul style="list-style-type: none"> • Restricting outlets – potential planning policy. • Identify research from other areas who have take away planning policy. • Re Licensing - to explore potential as part of the next review of Licensing Policy (timescale – dependent on changes in national regulatory requirements but likely to be in 2015/16) 	FDC Planning & Licensing
9.	Food for Life	<ul style="list-style-type: none"> • Schools providing healthy meals. • Support to families for healthy meals provision. • Explore health food award for caterers and employers. 	Public Health CCC
10.	Community Sport Activator Fund	<ul style="list-style-type: none"> • FDC is working with Sport England to develop a funding bid to secure £250k over three years to increase sporting and physical activity levels across Fenland. • Specific information should be available once the project plan has been developed in April 	FDC, Sport England

	Project	Actions	Who
Other Actions			
11.	Visibility of Healthwatch in the community	<ul style="list-style-type: none"> • How can we help engage them? • Improve links with healthwatch • Healthwatch to provide regular updates at partnership meetings 	Public Health FDC CCC
12.	GP registration	<ul style="list-style-type: none"> • Encourage registration to new communities • New resident welcome pack 	FDC – Council Tax, Refuse Communities