SOUTH CAMBRIDGESHIRE DISTRICT COUNCIL

Minutes of a meeting of the Cambridge City and South Cambridgeshire Local Strategic Partnership

Board held on

Tuesday, 25 January 2011 at 2.00 p.m.

PRESENT: Councillor Ray Manning – Chairman

Councillor S Reid - Vice-Chairman

Members: D Ball (Business Sector), P Barlow (Faith Groups), N Buckley (Cambridge

University), Tom Bygott (District Council), T Cracknell (GET Group), Michael Farrar (CPALC), C Gohler (Cambridge Past Present & Future), A Jackson (City Council),

S Johnson (Cambridgeshire ACRE), M Lawrence (Cambridgeshire and

Peterborough Fire & Service Service), S Moir (Cambridgeshire County Council), R Needle (Cambridgeshire Constabulary), Ms I O'Meara (NHS Cambridgeshire), Gill Prangnell (Business Sector), J Reeve (Voluntary Sector), John Reynolds (County Council), I Sandison (Love Cambridge Partnership) and T West (Anglia

Ruskin University)

Officers: PJ Adams (Clerk), G Barron (District Council), Ms L Browne (District Council),

I Green (District Council), SJ Hampson (District Council), P Howes (District Council), Jean Hunter (District Council), G Saint (City Council), A Speed

(Cambridgeshire County Council) and T Woollams (City Council)

External: Dr P Bailey (CATCH) A Ray (Little Shelford Parish Council)

22. INTRODUCTION AND APOLOGIES

Apologies were received from Jon Maxwell, Tony Orgee and David Spreadbury.

23. DECLARATIONS OF INTERESTS

None.

24. PUBLIC QUESTIONS

None.

25. PARISH PLAN PRESENTATION: LITTLE SHELFORD (2.10PM)

Andrew Ray of Little Shelford Parish Council presented the newly completed Little Shelford Parish Plan. The Board congratulated the Parish Council on securing a return rate of 66% of the questionnaires sent to all the parish's households.

It was suggested that a map of the parish would improve the Plan. Andrew Ray recommended the use of a computer programme to analyse the survey results.

It was noted that traffic noise had been a big concern and road improvements had partly addressed that problem. It was understood that fear of crime was an issue, although the actual level of reported crime in the parish was very low. It was noted that there was considerable support for the green belt in the parish.

The Chairman thanked Mr Ray for his informative presentation and hoped that Partners would be able to work with Little Shelford Parish Council in delivering the Plan's actions.

The Board **NOTED** the report.

26. MINUTES AND MATTER ARISING

The minutes of the meeting held on 23 July 2010 were agreed as a correct record.

Health representative

It was noted that Mary Gyte had been replaced by Inger O'Meara as the Board's Health representative.

Letter to Government

It was noted that the Government had not responded positively to the Board's representations regarding the withholding of the LPSA Reward Grant.

Forward Plan

It was noted that the Orwell Parish Plan was not yet ready to be presented to the Board and that events had overtaken the issue of Hospital transport and transfers of care from hospital.

27. GP CLUSTERS/CONSORTIA (2.25PM)

Dr Peter Bailey <u>Vice Chair</u> of CATCH (, <u>Cambridgeshire Association to Commission Health</u>) a General Practitioners' (GP) Consortia covering most of Cambridge City and <u>South Cambridgeshire</u>, gave a presentation on <u>a GPs view of the challenges of the proposed health reforms.</u>

CATCH was set up as a practice based commissioning group back in 2006 and is now a wave one pathfinder commissioning consortium that facing public healthcare in this country includes the majority of the GP practices based in the Cambridge City and South Cambs areas. There are also clusters of practices within the consortium.

In his presentation. Dr Bailey provided a flow diagram of the structure of the new NHS and also demonstrated the number of meetings/relationships that the consortium would need to attend/ maintain. As part of the overall changes, NHS public health budgets had been ringfenced and were to be transferred to the local authority (County Council). The presentation gave quotes of concerns on the NHS Reforms that have been raised by organisations such as the NHS Federation; King's Fund; NICE; Royal College of Practitioners, Royal College of Physicians; Royal College of Surgeons; BMA and other unions.

<u>Dr Bailey</u> He expressed concern that GPs were being asked to be budget managers on top of their practitioner role. To illustrate this point Dr Bailey explained that he <u>would be standing down had resigned</u> as Vice-Chairman of CATCH as he did not feel that he had the available time to help <u>organise manage an organisation with a £250 million budget.</u>
<u>organisation</u>. It was noted that for this year CATCH was within budget.

Dr Bailey went on to propose practical steps that could be taken by agencies to help secure good patient outcomes. These steps included planning service models around patient needs; focusing on admission avoidance; GPs working with councils and Public Health on Joint Needs Assessment; working in partnership to improve efficiency; sharing physical locations and back office functions, and testing working practices with emergency scenarios.

In response to questioningdiscussion, Dr Bailey explained that it was currently illegal for the public health service to charge in return for a betterfor additional -services. He stated

that nationally £20 billion had to be saved and that it was likely that part of the service would be privatised. He expressed concern that private organisations would only bid for the most lucrative contracts, leaving the public sector to provide the most expensive and difficult services.

Concern was expressed that as <u>local authority</u> funding declined for sport/<u>leisure</u> -and other activities which that helped to promote healthy living, there would be an adverse impact on the local population's health.e strain on public health would increase. Dr Bailey felt there was a risk that GP commissioning resources would not be used for public health and preventative work.explained that there was unlikely to be any resources in public health for preventative medicine. He also explained that it was crucial to ensure that there was a system in place to ensure that finite resources were allocated to provide the best possible health careoutcomes, and that a population needs based approach was used to plan services.

It was noted that the Bill proposing these changes was not law and so it was suggested that representatives from the Board lobby the MPs of Cambridge and South Cambridgeshire.

The Board

AGREED

To arrange an extraordinary meeting to discuss the challenges <u>arising from</u> the NHS Reforms facing public health provision, which the Health Secretary and South Cambridgeshire MP Andrew Lansley would be invited to.

28. FUTURE ROLE OF THE LOCAL STRATEGIC PARTNERSHIP (2.50PM)

The Chairman presented this report regarding what the Board can offer and the role it should play in the future.

Reason for having a Local Strategic Partnership

It was noted that a Local Strategic Partnership was required to prepare a Sustainable Community Strategy. It was <u>also</u> suggested that it would be beneficial to have a forum to discuss big changes that affected all Partners such as the Localism Bill <u>and to provide</u> <u>challenge to the emerging partnerships, such as the LEP, to ensure the voice of the area was properly represented</u>.

Frequency of meetings

It was agreed that as the Board had no funding or a role in monitoring the LAA there was little reason for it to continue to meet four times a year. There was a discussion on how often the Board should meet. Some members suggested that the Board should meet either once or twice a year, with active working groups that would report to the main Board. It was suggested that initiatives could be more easily assessed if they were monitored after six months and so the Board should meet twice a year. It was suggested that full meetings of the Board should be replaced with smaller themed meetings, only attended by those with the relevant expertise.

The Board **agreed** to set up a Task and Finish Group to define a role for the LSP and to propose an appropriate meeting cycle, which would report back to the next LSP Board meeting.

Greater Cambridgeshire & Greater Peterborough Local Enterprise Partnership It was noted that the LEP covered a wider area than the Board and focussed on promoting economic development.

Voluntary Sector

The Board meetings were seen as an ideal forum for the voluntary sector to raise wider concerns with Partners.

Developing a Community Transport Working Party Fund

Jonathan Barker volunteered to lead a <u>Task and Finish Group Community Transport</u>

Working Party made up of representatives from both the city of Cambridge and the District of South Cambridgeshire, which will work with voluntary groups and seek funding from local businesses to develop a proposal for a community fund, which will be submitted to the next LSP Board meeting. The Board agreed to support this initiative.

The Board AGREED

To discuss the following two options at its next meeting:

(A)The Local Strategic Partnership holds one or two full meetings a year, to review plans, set priorities and targets.

(B)(A) The Local Strategic Partnership becomes a network that maintains contact with a wide range of stakeholders and holds events around issues or topics.

29. DRAFT SUSTAINABLE COMMUNITY STRATEGY (3.35PM)

This item was discussed after agenda item 6, GP Clusters/Consortia.

Gemma Barron presented this item on the draft new Sustainable Community Strategy. The Board made the following suggestions:

- The Strategy should be written in plain English.
- The Strategy should focus on promoting its priorities.
- The priorities needed to be targeted to ensure the Board maximised its limited resources.
- The Strategy should be shorter and focus on what it will achieve.
- There should be more detail in the Executive Summary.
- The Strategy should include something on Well-Being.
- Promoting sustainable transport should be one of the Strategy's priorities.

It was noted that the survey had shown that crime was not a major concern amongst residents.

Mobile Wardens

It was noted that improving the independence of older people was one of the Strategy's priorities. It was understood that Mobile Warden Schemes allowed people to remain in their own homes, which is what they wanted and cost far less than residential care.

The Board **NOTED** the report.

30. PRESENTATION: JOBCENTRE PLUS (4.00PM)

Val Rickson gave a presentation on the work of Jobcentre Plus and asked that the organisation be given full membership of the Board.

The Board

AGREED To appoint Jobcentre Plus as a full member of the Board.

31. LPSA REWARD GRANT UPDATE (4.15PM)

Graham Saint presented this report on the status of projects that were supported by the Board. It was noted that there was no available money for projects in South Cambridgeshire and that there was no prospect of any new funds.

The Board **NOTED** the report.

32. FORWARD PLAN (4.25PM)

The Board **AGREED** to meet on the following dates:

- Monday 11 April 2011 at 2pm
- Monday 11 July 2011 at 2pm

It was noted that an extra meeting to discuss the future of health provision would also have to be scheduled.

The Forward Plan was amended to include:

- Discussion on future of the Partnership included in April's Forward Plan.
- Update on Local Enterprise Partnerships and Infrastructure Strategy in April.
- Hospital transport and transfers of care from hospital in April.
- Election of Chairman and Vice-Chairman moved from April's meeting to July.

The Chairman expressed the Board's thanks to Gemma Barron, Partnerships Manager, who was about to go on maternity leave.