

APPENDIX B

Health and Wellbeing Board and Health Committee report

Clearly the Health Scrutiny Committee of the County Council has been very engaged over the last few months with the CQC reports for Hinchingbrooke and Addenbrooke's Hospitals as well as the development of the unique Older Persons Contract which came into force on April 1 2015. This has created a raft of new committees, subgroups and working parties which I have endeavoured to attend on behalf of South Cambs. You may feel that this has only a small relevance for the day to day activities of South Cambs District Council but I would argue that the Wellbeing of our residents, the environment in which they live and the quality of their lives is key to what the district authority is about. If our residents find that they are unable to access health services, their new homes are not served by a GP, or the waiting list for mental health service has been suspended, it has a dire impact on everyone but particularly our tenants and ethnic minority groups.

Health Committee 7 November 2015

The committee focused on the Care Quality Commission (CQC) report for Addenbrooke's. The CQC, Addenbrooke's Acting Chief Executive, Chief Nursing Officer, and Acting Finance Director, Monitor Senior Regional Manager, and Clinical Commissioning Group (CCG) Chief Operations Director, Vice Chairman, and Director of Nursing, all gave a brief presentation of events and the current position. As you would expect they have instituted a tight monitoring programme in relation to the affected areas but it was the overall governance which came in for most criticism.

Clearly it was the new IT system which had brought the CQC to inspect and there was wide ranging discussion about the effects of this system and how it had been introduced. The system had particularly affected pathology results from GPs, as well as internally, which had got lost and resulted in delayed treatment for many patients. But we were told there were other issues which resulted in the hospital failing to reach agreed targets that had resulted in the implementation of penalty clauses by the CCG. The committee was somewhat anxious that they had not been made aware of these issues prior to the inspection and felt that this increased the level of distrust between organisations. There will be follow up monitoring meetings and report backs

Setting a budget

As with all government sponsored organisations, Public Health is required to make in- year savings and their grant for 2016 will be cut by £1.6 million. In addition the County Council have incorporated their budgets into directorates, leaving relative few Public Health budgets ring fenced. It was decided to reduce funding for smoking cessation and also for long term reversible contraception. Other cuts were identified but a District council impact assessment had not been undertaken. There are clearly grounds for concern that Public Health funds will be used to support County Council services rather than to introduce or maintain preventative services which would improve health in the future.

Working Groups' reports

Uniting care Partnership (UCP) working group met with them, Healthwatch and the CCG to discuss progress in relation to the Older-persons contract.

UCP have taken over mental health for over 64 year olds as well as 2000 community staff. They now form 17 teams. These teams are skilling up to reduce hospital admissions with specialist therapist. Unfortunately the IT systems do not talk to each other so there is need for linking systems to develop one set of patient notes for all.

The One Call service provides advice, signposting and specific services and is now available for GPs, nursing, residential and care homes. The next step is to make it available to carers and patients who regularly need services e.g. Sheltered housing. The JET teams are joint emergency teams who are available 24 hours and will arrive within 2 hours.

Health and Wellbeing Board

The Health and Wellbeing Board has spent time reviewing their constitution and composition and feel that they have become a CCC committee which receives reports but actually fails to initiate actions which will improve health for residents. There are statutory members and strategies which have to be ratified but many of the papers received have already been through the county committee and can not be changed.

Since May the new district representatives have been fluctuating in identity and presence. The NHS England representative has not attended and other members have been inconsistent and the whole committee lacks continuity. A working party is currently addressing these concerns.

The Local Health Partnership

A seminar on Mental Health issues for staff and clients in October has demonstrated good working relationships with our partners across the public and private sectors.

Cllr Sue Ellington