

HEALTH AND WELLBEING BOARD	AGENDA ITEM No. 9b
24 JUNE 2019	PUBLIC REPORT

Report of:	Wendi Ogle-Welbourn, Executive Director People and Communities Dr Liz Robin, Director of Public Health	
Cabinet Member(s) responsible:	Cllr Wayne Fitzgerald, Cabinet Member for Adult Social Care, Health and Public Health	
Contact Officer(s):	Helen Gregg, Partnership Manager	Tel. 863618

HWB STRATEGY PERFORMANCE REPORT

R E C O M M E N D A T I O N S	
FROM: Executive Director People and Communities and Director of Public Health	Deadline date: N/A
<p>It is recommended that the Health and Wellbeing Board:</p> <ol style="list-style-type: none"> 1. Note the report, consider the content and raise any questions 2. Members to challenge performance and agree future actions to address 	

1. ORIGIN OF REPORT

1.1 This report is presented to the Health & Wellbeing Board at the request of Wendi Ogle-Welbourn, Executive Director and Dr Liz Robin, Director of Public Health.

2. PURPOSE AND REASON FOR REPORT

2.1 The purpose of this report is to provide Board members with a summary of progress against the Future Plans identified for each of the focus areas outlined in the Health & Wellbeing Strategy 2016-2019. .

2.2 This report is for the Health and Wellbeing Board to consider under its Terms of Reference Numbers:

2.8.3.1 To develop a Health and Wellbeing Strategy for the city which informs and influences the commissioning plans of partner agencies

2.8.3.2 To develop a shared understanding of the needs of the community through developing and keeping under review the Joint Strategic Needs Assessment and to use this intelligence to refresh the Health and Wellbeing Strategy

3. TIMESCALES

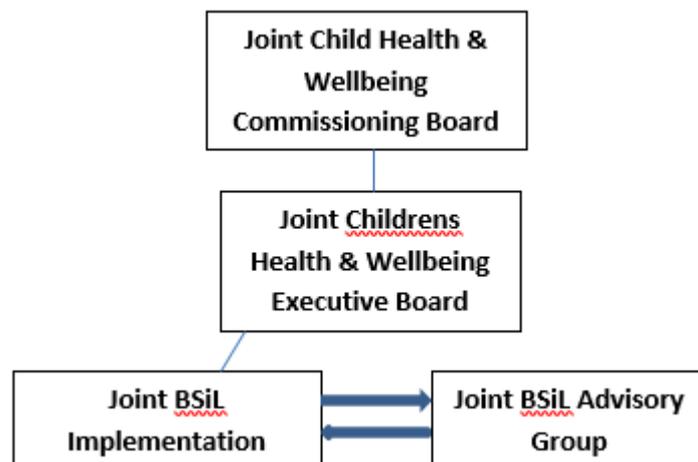
Is this a Major Policy Item/Statutory Plan?	NO	If yes, date for Cabinet meeting	
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4. BACKGROUND AND KEY ISSUES

4.1 The 2016-19 Health & Wellbeing Strategy identified a number of key focus areas. Below is a summary of key highlights / activities during January to March 2019.

Children and Young People

- Following the Peterborough CC and Cambridgeshire CC Early Years Social Mobility Peer Review (July 2018), a Joint Best Start in Life (BSiL) strategy has been developed and will be presented to the Health & Wellbeing Board in September for consultation. The strategy focuses on three key outcomes which represent our ambition for children in Cambridgeshire and Peterborough.
 - Children live healthy lives
 - Children are safe from harm
 - Children are confident and resilient with an aptitude and enthusiasm for learning
- A new governance structure has been established, as shown in the image below:



- New mothers in Peterborough received a New Birth Visit Improved – 98% of all new mothers received this contact in Q4. This is greater than the average for England
- Families had a 12 month development check by 15 month Improved – 96% of families had this check by the time they turn 15 months old (Q4). This is greater than the average for England
- 46% of infants were being fully or partially breastfed at 6-8 weeks, which is better than the national average for England and has improved significantly over the past two years
- The provider is struggling to meet some targets due to workforce issues but is working hard to improve the current position. The two providers of the Healthy Child Programme across Cambridgeshire and Peterborough, are undergoing service redesign to implement a new integrated service specification based on a holistic 0-19 model, which includes reviewing current delivery and shift towards a skill mix model to best meet the needs of families.
- Parentline will be implemented from September 2019, offering parents a text based advice service for a range of information and support.
- Emotional Health and Wellbeing concerns continue to be the most prominent issue school nurses are dealing with. 507 pupils were seen for mental health/wellbeing issues during the quarter which is an increase against 389 in Q3.

- School Nurses co-delivered 98 HYPA clinics with ICash. These are drop-ins held on a weekly basis at most secondary schools. Young people can access these drops in for a range of support and advice.

Growth, Health and the Local Plan

- The Local Plan, which contains specific health and wellbeing policies, has been found to be 'sound' through the examination process (subject to certain modifications) and the council will look to adopt at full council in the summer.
- Building on the Local Plan, Public health are working with the Peterborough planning team to scope the potential for a Supplementary Planning Document to control Hot Food Takeaways in Peterborough as part of a wider healthy weight strategy.

Health and Transport Planning

- On 1 April, Road Safety moved to Highways Services department, which will allow for stronger links to be developed between Sustainable Travel and Road Safety. As well as strengthening links with Cambridgeshire County Council
- The Cambridgeshire and Peterborough Road Safety Partnership has recently been relaunched and a new strategy is to be developed.
- During 2018, 72 people were killed or seriously injured on Peterborough Roads, this is down from 89 in the previous year. The number of people slightly injured on Peterborough roads during 2018 was 373 compared to 445 the previous year.
- Over 1,300 post-16 students and 13 out of 14 schools have signed up to take part in Drive IQ, which is aimed at pre and new drivers.
- 24 schools participated in a National Big Pedal competition. Over 94% of pupils took part and St Thomas More finished 9th nationally, out of nearly 800 large primary schools. Seven of our schools finished in the top 100 and Peterborough accounted for 81,730 total journeys. Peterborough schools made up 0.78% of all schools registered however they accounted for 2.11% of all the Big Pedal journeys made nationally.
- In 2017, the Government published its first Cycling and Walking Investment Strategy that sets out ambitions to make walking and cycling the natural choices for shorter journeys or as part of a longer journey. Peterborough successfully applied for technical support from DfT to develop a Local Walking and Cycling Infrastructure Plan (LCWIP). Cycling and walking network analysis and the auditing process to inform a prioritisation of schemes is progressing well. It's anticipated that the LCWIP will be completed in August in readiness for any funding opportunities that may become available.
- Public Health have been working with the Combined Authority to develop the draft Local Transport Plan. Input to date has led to an increased focus on the health and wellbeing impacts of transport including on air quality, physical inactivity (through active travel), social isolation and road safety.

Health and Wellbeing of Diverse Communities

- The Cohesion Team has been working with Dr Val Thomas and Public Health colleagues to establish closer collaboration on the child obesity project in the Central and North ward. This includes linkages through faith groups and other community groups. A good network has been further developed by the Public Health team.
- Dr.Liz Robin attended the last Joint Mosques Group meeting held in March 2019 and shared current work programmes in place to engage with the diverse community. Details are intended to be discussed at the next meeting in July 2019, which will be themed under the Public Health agenda.
- The Diverse Ethnic Communities JSNA – South Asian Communities Supplement has been approved by Peterborough Living Well Partnership and is included with the circulated HWB Board papers as an item for information.

Health Behaviours and Lifestyles

- Drug and Alcohol Services (provided by CGL Aspire Service)
 - Peterborough's successful completions for all client groups (except alcohol and non-opiates) are on an upward trajectory with opiate rates now sitting in the top national quartile range
 - Higher rates of criminal justice clients successfully engaging in community

treatment following release from prison, than national rates (local 53.6% versus national 32.9%)

- Unmet need rates across all substances are sitting below national rates indicating that local services are meeting higher levels of need
- There has been an overall drop in numbers in treatment in the past year since reaching a peak in 17/18, which is in line with the national picture
- Positive improvements in both Hepatitis B vaccination rates and Hepatitis C testing which both sit above national rates
- **Drug and Alcohol Service Development**
 - Public Health England invited bids for £10M of capital funding to improve access to alcohol misuse treatment. Local bids were developed with CGL (our specialist treatment provider) and submitted for both Cambridgeshire and Peterborough. The Peterborough bid was successful, securing £72k of capital funding to improve current service provision. The funding will be specifically used to extend the outreach and engagement capacity of the service, targeting problematic drinking in the community through the purchasing of a multi-purpose vehicle. The funding has already been used to undertake refurbishments to the CGL City Centre building to make it more welcoming, engaging and family friendly for those individuals and family members struggling with alcohol related issues.
 - CGL is working closely with Peterborough City Council to help address and provide outreach support to the increasing numbers of individuals who are rough sleeping, many of whom have substance misuse issues. Additional resourcing (secured from Central Government) have been committed by Peterborough City Council to enable outreach to be delivered by CGL Aspire staff directly to rough sleepers. The outreach will be undertaken jointly with the City Council Street Outreach Team and the vehicle (secured by the PHE alcohol capital monies) will enhance this work.
 - Positive strategic partnership work with HMP Peterborough has resulted in the distribution of take home naloxone (THN) to prisoners on release to help prevent drug related deaths. There are high rates of heroin/opioid overdoses amongst released prisoners nationally, particularly in the first few days and weeks back in the community when drug users revert to high levels of usage following months or years in prison, when heroin is generally less available and often of a much reduced purity. Naloxone is a useful medication for illicit drug users as it has no clear potential for abuse and is seen as part of a package of interventions. It has the advantage that it can be administered by individuals, family and friends after brief training.
- **Lifestyle Services provided by Solutions 4 Health (S4H) and Everyone Health**
 - The Integrated Lifestyle Service (S4H) continues to perform well against its Key Performance Indicators (KPIs). In 2018/19 it over achieved against all of its KPIs in terms of people assessed, receiving an intervention and having a positive outcome. It has a strong presence in the community with many of its services providing outreach through a mobile facility.
 - The Healthy Workplace Support Service was recommissioned and the new contract commenced in June 2018. The provider, Everyone Health, has started to gain traction with local employers and their workplaces.
 - The Healthy Schools Support Service which also receives funding from the Office of the Police and Crime Commissioner, has been tasked with developing a service that provides schools with information through a website and more intensive support in schools with high needs. Its overarching function however is to facilitate the joint working with the many organisations working in schools that will enable the better use of resources and avoid duplication. It has proved challenging but relationships with schools have now been formed and work is proceeding, overseen by a multi-agency Steering Group.

Housing and Health

- The First Time Central Heating project funded through the Warm Homes Fund is well underway. This funding provides a free gas connection, boiler and full central heating system to properties with expensive to run electric storage or panel heaters.

- Representatives from the Department for Business, Environment and Industrial Strategy (BEIS) recently visited Peterborough to look at the work being done in the city which utilises a combination of several funding streams to take households out of fuel poverty. Feedback from the visit has been extremely positive.
- Selective licencing - the council has to date received over 7,886 applications for licences, of which 6,504 have been granted. Housing standards are showing clear signs of improvement.
 - The licensing of HMO's (houses of multiple occupation) has been extended to include all dwellings that house 5 or more people. This has led to an additional 29 properties becoming licensed and having the appropriate fire and safety measures in place.
 - The Council secured £80,000 Rogue Landlord Funding for a project to identify and inspect 105 residential units of accommodation above and behind the shops in Lincoln Road. 51 unlicensed flats have been identified, 9 flats with EPC ratings of E referred into the First Time Central Heating project through the Warm Homes Fund, 29 flats are going through enforcement action for having no EPC, and 22 flats have been identified as being F&G rated and are being dealt with under the Minimum Energy Efficiency Standards (MEES).
 - The Council are working with PECT and Cambridge City Council on a BEIS sponsored Compliance & Enforcement Study on the MEES in the private rented sector. These standards prevent a landlord letting out a property which has an energy efficiency rating of F or G. Failure to comply results in a civil penalty notice. Peterborough & Cambridge CC's are one of 7 pilots for this study
 - The Local Energy Advice Partnership (LEAP) continues to assist households in fuel poverty and those households living on a low income and vulnerable to the effects of living in a cold home. 1,014 referrals were made into the scheme resulting in 731 home energy assessments. Energy advice in those visits (if taken up) would identify £125,000 of lifetime energy bill savings. 5,965 easy measures were installed (e.g. LED light-bulbs, radiator reflectors, standby plugs) equating to a further £470,878 of lifetime energy bill savings. 158 households were identified as being on the best energy tariff or were switched to a better one and 179 households had extra benefit entitlements identified amounting to £537,000 in total. Overall a total of £1,166,560 of bill savings and extra income was achieved last year. The scheme also referred 103 households back to the Council with high risk hazards in the home and 52 households to the Community Fire Safety Team for a Safe & Well visit.
 - Discretionary funding is being used to carry out work in homes to facilitate discharge from hospital when it has been deemed they cannot return home due to property condition. Several decluttering and deep cleans have been carried out with ongoing support being put in place. Work to prevent hospital admissions is also being carried out including heating systems and the mitigation of slip, trips and fall hazards.
 - As part of this work, an increasing number of homes occupied by vulnerable adults with extreme hoarding behaviours have been identified. A Multi-agency Hoarding Group has been formed with representation from Housing, Mental Health, Psychology, Social Care, Fire Service and Safeguarding which adopts a panel approach to co-ordinate professionals to deal with these cases. This group is dealing with some of the most complex cases at risk of serious injury, fire and eviction.
 - Housing Needs have been successful in securing additional funding from the MHCLG to support its ongoing work to tackle homelessness, the funding streams are as follows:
 - £280,968 – Rough Sleeping Initiative Funding – to continue supporting the ongoing work with partners in identifying rough sleepers early, providing them with emergency accommodation, health care, drug and alcohol misuse support, support to move towards permanent rehousing and help to maintain it once obtained.
 - £113,130 – Rapid Rehousing Pathway – funding to provide supported lettings in partnership with Cross Keys Homes and navigator roles to support rough sleepers once in accommodation
 - £326,000 – Flexible Homelessness Support Grant & Homelessness Prevention funding to increase capacity in the Housing Needs team to further support homelessness prevention and relieving pressures in Temporary Accommodation, including ending the use of B&B over 6 weeks.

- The Housing Needs team were successful in bringing all homeless households, who were placed into temporary accommodation out of Peterborough, back into the city before Christmas 2018. This was maintained through the first quarter of 2019.

Mental Health for Adults of Working Age

- Excellent progress with implementation of the Crisis Concordat Action Plan by the MH Delivery Board continues, with the Board following a process of continuous improvement. Current developments include:
 - Piloting a national approach to improving crisis response and support for people with a personality disorder
 - Contributing to research on the role of the voluntary sector in crisis response
 - A strategy to support to victims of crime and terrorism
 - Improvement to MH Act assessment by improving access to Section 12 doctors
 - Information sharing between agencies remains the biggest single barrier to effective joint working. This continues to be a barrier and is being raised with the STP.
- The work to develop an effective pathway to employment for people with mental health problems initiated in 2017 has continued:
 - The CPFT has secured NHS England investment in Individual Placement Support
 - Engagement with communities to identify and address barriers to employment is continuing
 - Priority is being given by commissioners to supporting employers to offer employment to people with mental health problems. This includes seeking employment opportunities within PCC and CCC
- The joint community mental health delivery plan has delivered the following improvements:
 - Peri-natal mental health - a successful bid was made by the CCG to NHS England for investment in a commissioner to lead the work and a range of improvements to services and the peri-natal mental health pathway
 - Increased numbers of physical health care checks being undertaken in Primary Care
 - Improvements to and achievement of targets related to psychological services and wellbeing
 - Completion of the re-procurement of the joint Recovery and Community Inclusion service which will now be mobilised in September. This will enable the next phase of development of the Primary Enhanced MH Service (previously known as PRISM) to commence
 - Improved support for carers of people with mental health problems following inclusion of a specialist lot within the carers service specification.
- The MH Housing and Accommodation review has been completed and is moving to procurement for mobilisation on 1 April 2020. This will make housing and support more accessible, including ensuring that accommodation that meets need is available. Variation in the pathway between PCC and CCC will be reduced.
- The aligned model of commissioning health and social care for Mental Health has continued, with the development of a joint plan for both acute and community mental health services. It means that that 'the Right Support, the First Time, at the Right Place, by the Right People' is more likely and that, where support in the community rather than in acute settings is appropriate, support to remain at home is more likely to be provided.
- Partnership and co-production approaches particularly inform improvement in the following areas: suicide prevention, mental health employment, the Recovery and Community Inclusion service and Information about mental health services

Protecting Health

- **National Screening programmes:**
 - Bowel cancer screening: uptake for the North West Anglia Foundation Trust (NWAFT) programme has improved. NHS England and NHS improvement is working with the screening centre to address diagnostic waiting times, and with GP practices with low uptake to pilot text reminders.

- Breast cancer screening: acceptable uptake levels are being achieved. Service workforce issues is improving.
- Cervical cancer screening: the decline in coverage observed recently appears to have levelled off with small improvements being observed, but coverage remains below acceptable level. NHS England and NHS improvement are leading a project to increase uptake. The Council and partners have been supporting a national campaign to promote uptake of cervical screening.
- Diabetic eye screening and abdominal aortic aneurysm screening programmes are generally performing well. NWAFT is implementing an action plan to address capacity issues in the eye services.
- Antenatal and newborn screening programmes are generally working well. NWAFT are implementing an action plan following the quality assurance visit in September 2018.
- **Immunisations:**
 - Childhood vaccinations: a number of childhood vaccination programmes have below optimal uptake rates. NHS England and NHS improvement and the council are working in partnership to address this including working with GP practices with low uptake, a local #VaccinesWork campaign in April 2019 and planned focus groups with parents who have declined a vaccination.
 - Rotavirus vaccination: uptake rates have improved. NHS England and NHS improvement are completing their investigation into reasons for poor uptake.
 - Shingles vaccination: NHS England and NHS improvement have extended their project working with participating GP practices to improve uptake.
 - Flu vaccination: provisional data for the 2018/19 flu vaccination programme shows that:
 - There was low uptake in primary school children which is thought to be due to issues with a new e-consent system and Muslim parents declining due to porcine content. The provider will work to address these issues for the 2019/20 season.
 - Adult uptake has decreased from last year. This is thought to be due to the phased delivery of a new vaccine which affected how GPs planned their clinics. The delivery of vaccines will return to normal for 2019/20.
 - Uptake rates in pre-school children increased which is thought to be due to invites being sent to parents.
 - The Council will continue to support the promotion of flu vaccination in 2019/20.
- **Sexual health**
 - **The Cambridgeshire and Peterborough Sexual Health Delivery Board** has been formed with representation from commissioners and providers of sexual health, contraception and reproductive services along with children's social care services. It is also supported by Public Health England. The Group is tasked with informing the development and commissioning of services and fostering collaborative working across organisations to improve outcomes. A Delivery Plan has been produced and priority areas identified.
 - **Teenage pregnancy** is a priority of the Sexual Health Delivery Board. The latest under 18 years of age conception rate for Peterborough is at its lowest level since 1998 when monitoring commenced. Although there has been a substantial decrease since 1998, it is now statistically similar to England. This decrease from 185 conceptions in 1998 to 74 in 2017 represents the ongoing collaborative efforts of organisations across Peterborough, that have worked together to put in place preventative interventions to ensure that young people have access to service and appropriate support.(Public Health Outcome Framework 2017)
 - **Late HIV Diagnosis** – Rates of late HIV diagnosis have been persistently statistically significantly higher than national average. People diagnosed and starting treatment early can expect a normal life expectancy. There is ongoing work to address this which includes a campaign to increase awareness in the population of HIV which will be targeted to certain high risk groups which includes sexworkers.
 - **Public Health England Collaborative Commissioning Pilot** - The

Cambridgeshire and Peterborough system has been asked by Public Health England to be one of two sites nationally to undertake a feasibility study for developing a model that will better align commissioning of sexual health services across the local authorities, the Clinical Commissioning Group and NHS England. Five priorities were identified through a multi-agency workshop which are being explored with the Clinical Commissioning Group and NHS England. The three that are being focused upon are “Women’s” Hubs where women are able to access sexual health, contraception, gynaecological and termination of pregnancy services in one location; access to contraception post-partum as part of the maternity pathway and late HIV diagnosis

Health and Wellbeing of People with Disability and/or Sensory Impairment

- The charity, Little People UK, have recently joined the Physical Disability Partnership Board. The charity was set up by actor, Warwick Davis and his wife and is based in Peterborough.
- The Peterborough Downs Syndrome Group has also expressed an interest in joining the board.
- The Peterborough Physical Disability Partnership Board will combine with the Cambridgeshire Partnership Board by April 2020, as a result of a recent review by Healthwatch Peterborough and Cambridgeshire
- The Peterborough Information Network (PIN), which launched in February 2018, is a comprehensive information, advice and guidance platform. In April 2019, a brand new suite of [Easy Read pages](#) was launched. These have been co-produced with young people and adults with learning disabilities and autism. Pages include Easy Read leaflets, Your Health, Your Work and Training, Your Money and Benefits, Being Safe, Your Home, Getting Out and About and Your Rights and Choices.
- New pages have been created on the main site including Personal Budgets and Direct Payments, End of Life Care and Autism
- A new leaflet aimed at [self funders leaving hospital](#) has been created and copies have been delivered to all hospitals across Cambridgeshire and Peterborough. It has also been uploaded to the PIN
- As part of the Adults Positive Challenge Programme with Cambridgeshire County Council, a review is taking place of early intervention and prevention services including sensory services, which will aim to improve provision across Peterborough and Cambridgeshire

Long Term Conditions and Premature Mortality

- Cambridgeshire and Peterborough are rated as ‘Requires Improvement’ for diabetes in the CCG Improvement and Assessment Framework
- Dr Jessica Randall-Carrick has been appointed as the STP / CCG Clinical Lead for Diabetes. Dr Randall-Carrick is a GP based at Thistlemoor Practice, Peterborough and will work 1 ½ days per week to support improvements in diabetes care across Cambridgeshire and Peterborough.
- Virtual Clinic Reviews are now taking place across Peterborough.
- The demand for the Diabetes Prevention Programme is still high. To help manage demand, the CCG are working with practices to ensure appropriate patients are referred
- A system wide Diabetes and Obesity Clinical Community has formed to oversee and drive forward transformational change in diabetes and obesity management.
- Work is underway on the production of a Cambridgeshire and Peterborough Diabetes and Obesity Strategy.
- Final evaluation of the joint STP, LA, PH AF stroke prevention programme showed that the percentage of patients being treated with anticoagulants (blood thinners) increased from 74.7% to 82% over the two years of the programme leading to an additional 696 patients being anticoagulated. This could lead to an additional 28 strokes being prevented.

Sustainable Transformation 5 Year Plan (including BCF)

- Falls prevention: Further communications of the 'Stronger for Longer' strength and balance exercise campaign have been planned in partnership with districts and charity colleagues for launch in May 2019. Work to strengthen community falls prevention pathway with the acute hospital, Primary Care and Adult Social Care is underway.
- Investment in Housing for Vulnerable People: A cohort of service users with learning disabilities has been identified. They have very complex needs and require bespoke and specific accommodation and support. An initial property has been purchased and technology enabled care requirements for the property are being reviewed. Robust transition plans are in development for each service user.
- Development and implementation of local DTOC plans: a system wide evaluation of Improved Better Care Fund (IBCF) funded DTOC initiatives was undertaken and this has informed ongoing recommendations. A steering group has been established to oversee the ongoing monitoring of initiatives.
- Better Care Fund (BCF): NHS England national planning guidance for 2019/20 has been delayed and this is currently expected in June. There will be a once year planning cycle for 2019/20 and minimum change to the conditions of the BCF are anticipated. Local discussions are underway to inform agreement to the 2019/20 plans.
- Admissions Avoidance: The system is committed to the development of place based delivery and the Council has been working closely with NHS Partners around the development of local Integrated Neighbourhoods. This work sits alongside the development of Primary Care Networks with populations of 30,000 – 50,000 and is being aligned to the Council led Think Communities programme and Adults Positive Challenge. The model of delivery is driven by a neighbourhood, 'place based' approach, and success will mean that people have greater independence and better outcomes via a greater focus on prevention, empowerment and building self-sufficient and resilient communities.

Next Steps

The Peterborough and Cambridgeshire Public Health team are now beginning work to develop a joint health & wellbeing strategy. As part of the development phase, there will be a large programme of engagement and consultation with a number of staff / services, partners, councillors, local businesses/organisations, voluntary sector / community / charity organisations and the general public in order to gather information, data etc across the county.

5. CONSULTATION

5.1 Consultation has not been required.

6. ANTICIPATED OUTCOMES OR IMPACT

6.1 The Board is expected to review the information contained within this report and respond / provide feedback accordingly.

7. REASON FOR THE RECOMMENDATION

7.1 To ensure members are kept regularly informed of progress and any barriers/challenges that may be preventing progress so that members may assist in unblocking these.

8. ALTERNATIVE OPTIONS CONSIDERED

8.1 The Board must be kept informed of progress against the identified focus areas within the current Health & Wellbeing Strategy.

9. IMPLICATIONS

Financial Implications

9.1 There are no financial implications associated with this report.

Legal Implications

9.2 There are no legal implications associated with this report.

Equalities Implications

9.3 There are no equality implications associated with this report.

10. BACKGROUND DOCUMENTS

Used to prepare this report, in accordance with the Local Government (Access to Information) Act 1985

10.1 PCC Health & Wellbeing Strategy 2016-19

11. APPENDICES

11.1 N/A