

CAMBOURNE TOWN COUNCIL  
District of South Cambridgeshire

**CAMBRIDGESHIRE SOUTH CARE PARTNERSHIP**

Council Meeting 5<sup>th</sup> September 2023

To receive a presentation from Anita Howard and Vicky Lawrence, Cambridgeshire South Care Partnership regarding health care provisions in Cambourne and an update on the Meridian Primary Care Network, that includes Towns and villages such as Cambourne, Bourn and Comberton.

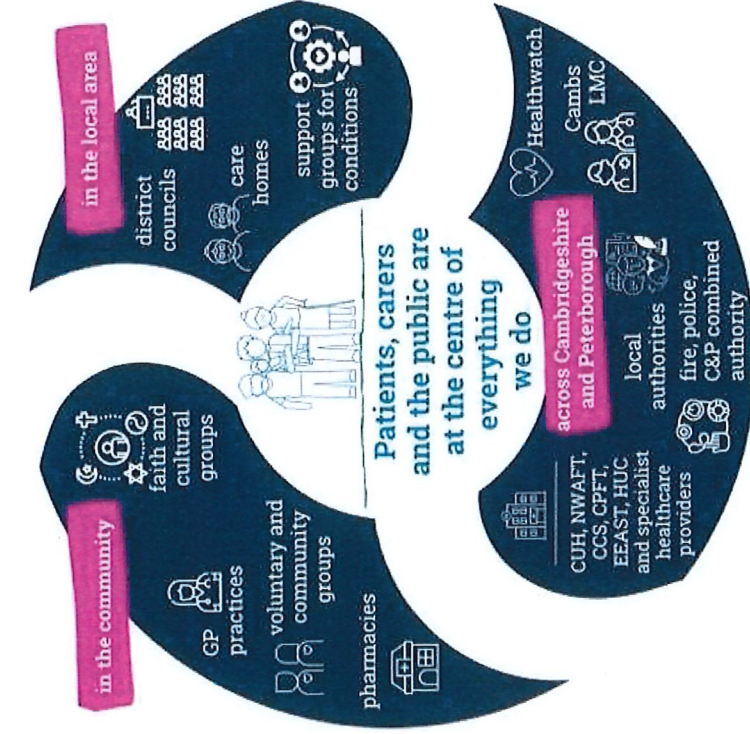
It is  
**RECOMMENDED** to receive the report.

# Introducing the South Cambridgeshire Integrated Neighbourhood Team

**Anita Howard, IN Programme Manager**  
**Roz Kearney & Sara Hodge, IN Project Manager**



# Cambridgeshire & Peterborough Integrated Care System



By working together under one umbrella organisation, different parts of the health and care system are better able to improve the health and wellbeing of local communities, reduce health inequalities and put the patients at the heart of everything we do.

Rather than providing healthcare and social care in separate, and sometimes isolated parts of the system, we will approach each person's health and social care needs as a whole.

We will:

- Deliver care as close as possible to homes of the communities we serve – local services will be empowered to design and deliver care on a local level
- Introduce a shared care record which will enable us to understand patient's needs as a whole
- Use data to help target interventions to local communities and inform decisions across the system

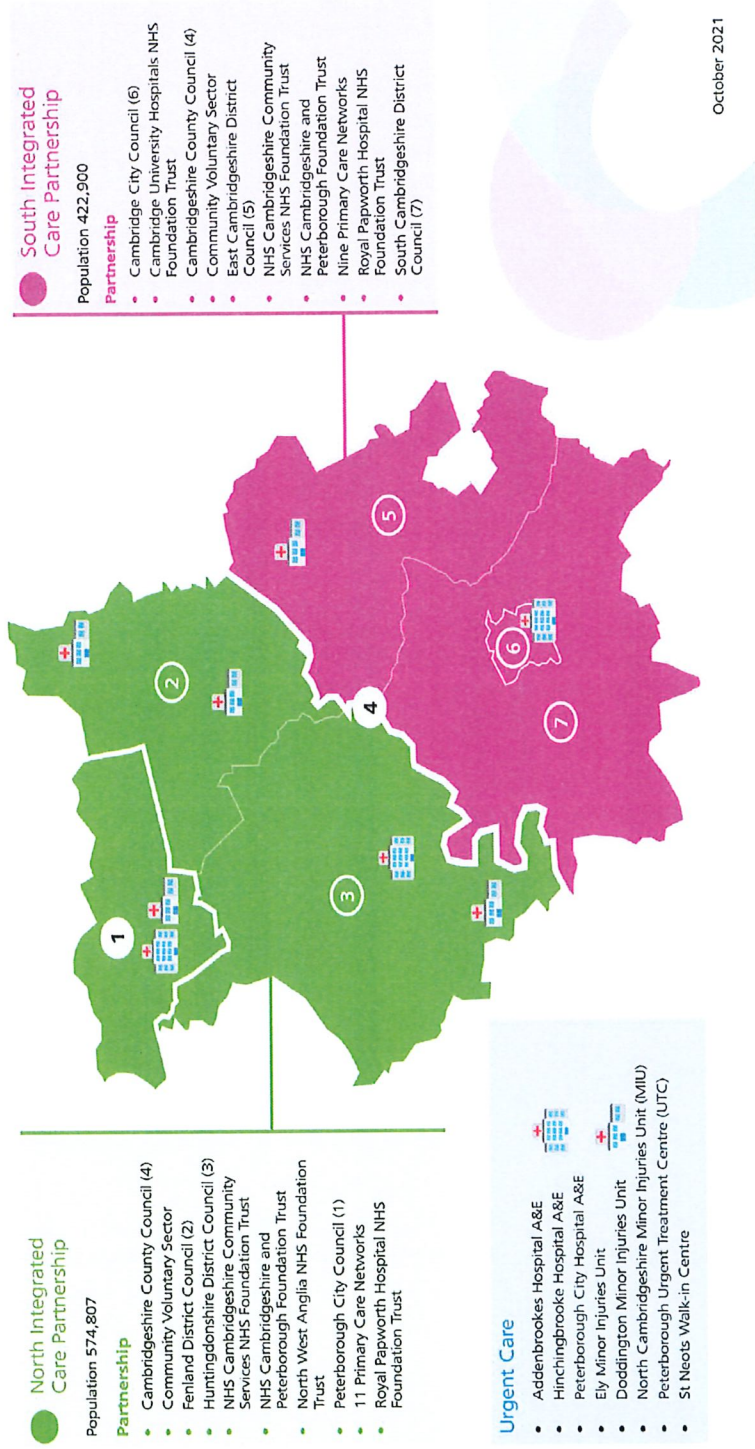
Please watch our Integrated Case System video: [\\_Introducing\\_your\\_ICS](#)



# There are two "Places" in the CPICs



## Cambridgeshire & Peterborough Integrated Care System



### North Integrated Care Partnership

Population 574,807

#### Partnership

- Cambridgeshire County Council (4)
- Community Voluntary Sector
- Fenland District Council (2)
- Huntingdonshire District Council (3)
- NHS Cambridgeshire Community Services NHS Foundation Trust
- NHS Cambridgeshire and Peterborough Foundation Trust
- North West Anglia NHS Foundation Trust
- Peterborough City Council (1)
- 11 Primary Care Networks
- Royal Papworth Hospital NHS Foundation Trust

### Urgent Care

- Addenbrookes Hospital A&E
- Hinchingsbrooke Hospital A&E
- Peterborough City Hospital A&E
- Ely Minor Injuries Unit
- Dodington Minor Injuries Unit
- North Cambridgeshire Minor Injuries Unit (MIU)
- Peterborough Urgent Treatment Centre (UTC)
- St Neots Walk-in Centre

### South Integrated Care Partnership

Population 422,900

#### Partnership

- Cambridge City Council (6)
- Cambridge University Hospitals NHS Foundation Trust
- Cambridgeshire County Council (4)
- Community Voluntary Sector
- East Cambridgeshire District Council (3)
- NHS Cambridgeshire Community Services NHS Foundation Trust
- NHS Cambridgeshire and Peterborough Foundation Trust
- Nine Primary Care Networks
- Royal Papworth Hospital NHS Foundation Trust
- South Cambridgeshire District Council (7)

October 2021



# Our Vision For Healthier Futures & A Thriving South Place



## Enjoying healthy lives in strong, connected communities

We are working in partnership to connect support and care with the people living in our communities so that they experience the health and wellbeing outcomes that matter to them.

### We will focus on delivering better, more equitable outcomes:

#### WITH OUR PEOPLE, FAMILIES & CARERS

People are actively involved in directing their own wellbeing, and can easily access support and care when needed, as close to home as possible.

#### WITH OUR SERVICE PROVIDERS, WORKFORCE AND CARERS

Community, public and private service providers are empowered to work together to provide high quality, safe care with a focus on wellbeing, integration, continuous improvement.

#### WITH OUR POPULATION

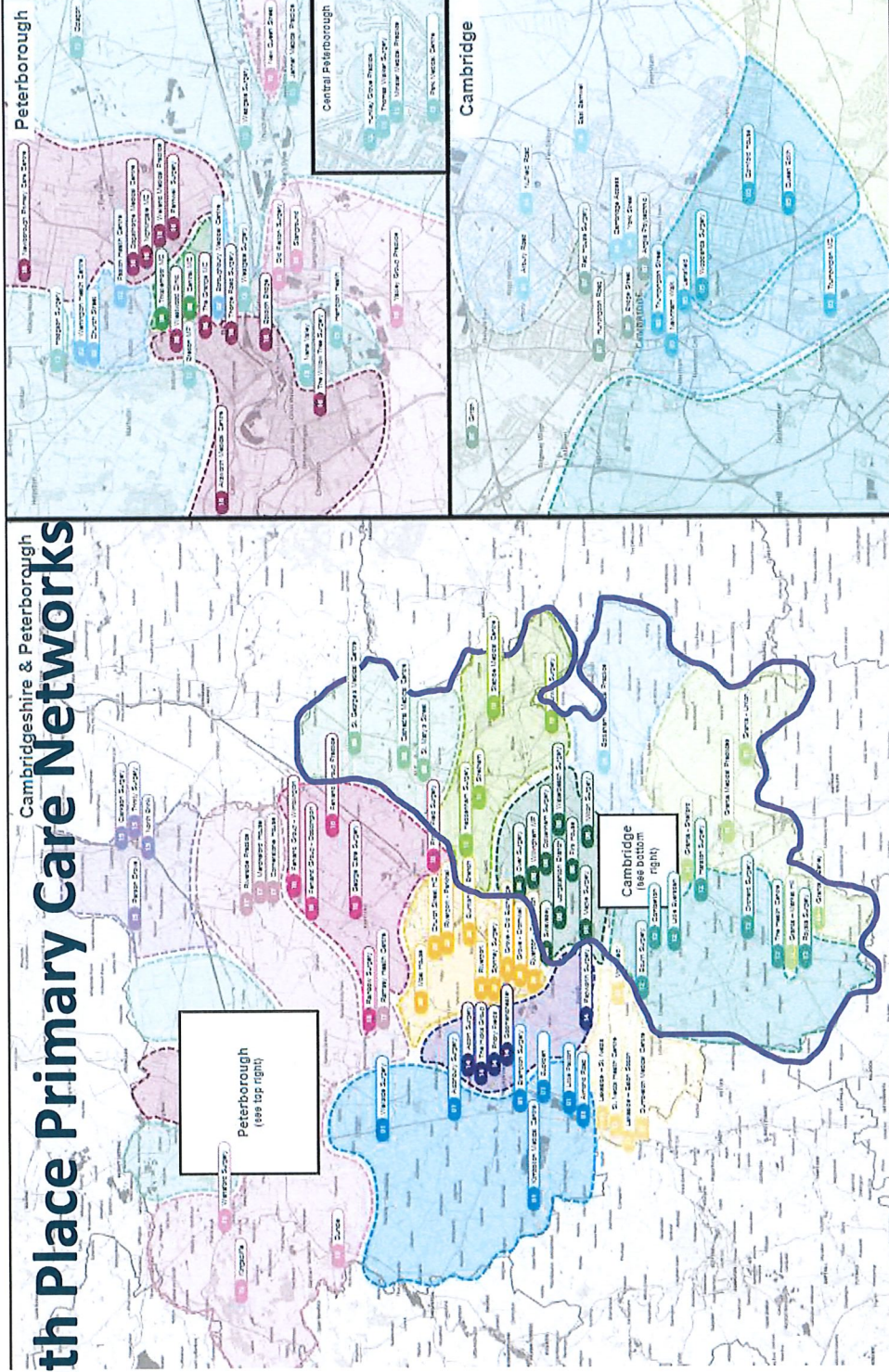
We actively address health and care inequalities. The independence, resilience and health of our population improves as a result of a more proactive, integrated and local approach to care.

#### WITH OUR INTEGRATED CARE SYSTEM

The Integrated Care System is more effective, sustainable and achieves better value care for our people.



# South Place Primary Care Networks



In the **South Place** we work alongside 8 Primary Care Networks

## East Cambridgeshire

- **Ely PCN**

## South Cambridgeshire

- Northern Villages PCN

- **Granta PCN**

- **Meridian PCN**

## Cambridge City

- **Cam Medical PCN**

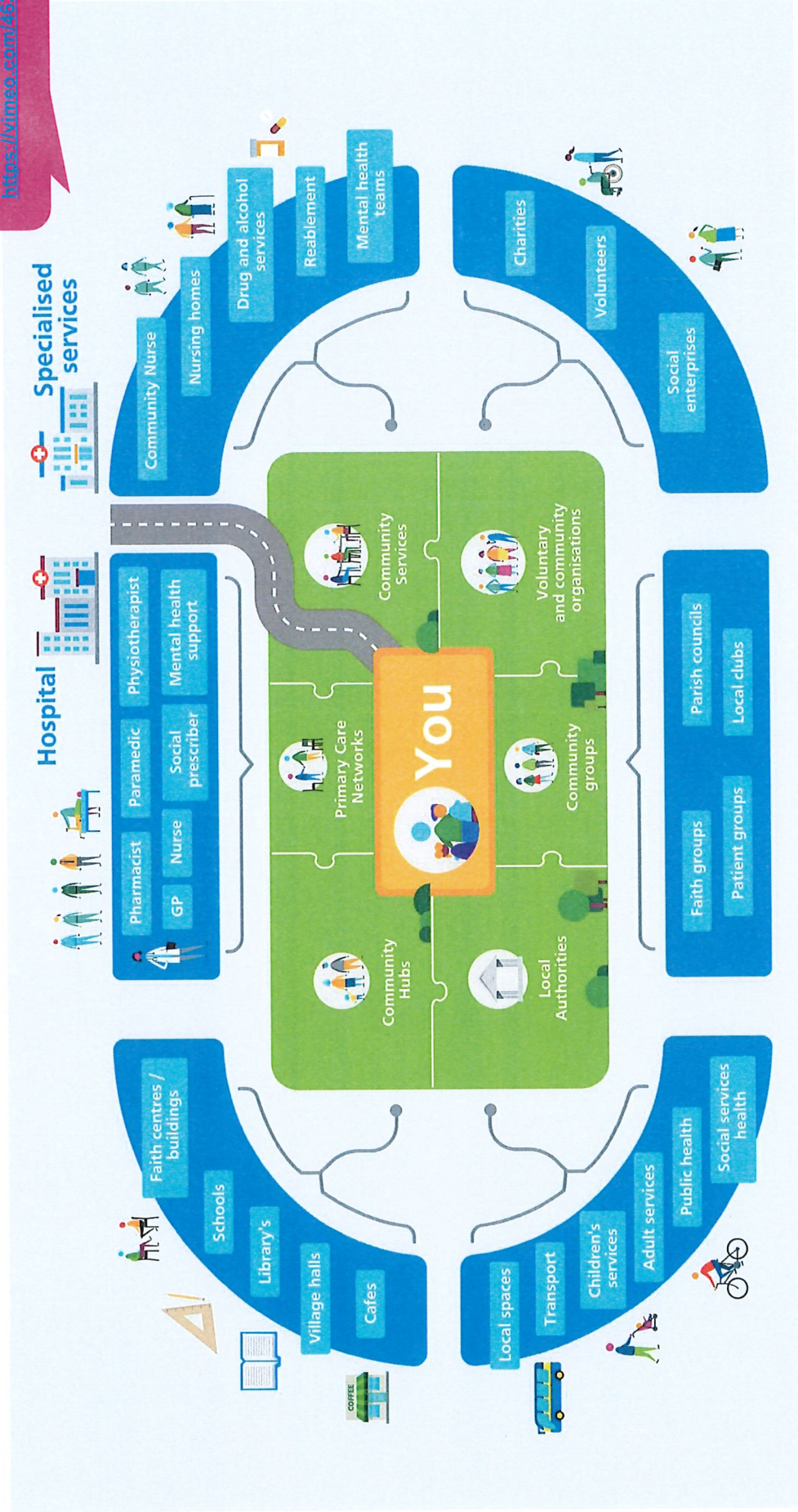
- **Camb City PCN**

- **Camb City 4 PCN**

- **Cantab PCN**



# Concept of an Integrated Neighbourhood



Please watch our integrated Neighbourhoods animation: <https://vimeo.com/453488980>



# The Aim Of The Integrated Neighbourhood Team



Working closely with the PCN's and the wider partnerships the team will:

- Collaborate on projects which focus on the preventing common health conditions & and address health inequalities.
- Work with partners to address some of the wider determinates of health locally
- Look for opportunities to better join up the system for the benefit of patients with complex conditions

To do this the team will:

- Use population health data from across the system, encouraging sharing of data
- Engage and listen to what matter most locally and learning how best to support people thrive in their community
- Provide additional capacity to the neighbourhood to turn the ideas into a reality



# Co-Production at the heart of what we do



Our way of working will be about **involving people** who use health and care services, carers and communities in equal partnership; we will always aim to **engaged** groups of people at the earliest stages of service design, development and evaluation. Co-production acknowledges that people with **lived experience** of a particular condition are often best placed to advise on what support and services will make a positive difference to their lives. By taking a co-production approach we can ground discussions in reality and maintain a **person-centred perspective**.

*Co-production is part of a range of approaches that includes citizen involvement, participation, engagement, and consultation using techniques such as **Appreciative Enquiry**. For Co-production to become the way that we work, we will work to create a culture where these values & behaviours are the norm*



*Five Values of Coproduction – Coalition of Personalised Care*



# Addressing Health Inequalities

Using the national CORE20PLUS5 approach to take targeted action to reduce health inequalities



There are 3 LSOAs in the South of the patch which are in the national CORE20. These are in the Barnwell and Kings Hedges areas of Cambridge city (pop = ??)

We have higher prevalence of:

- Asthma
- Atrial Fibrillation
- Osteoporosis
- Rheumatoid Arthritis

Emergency admissions due to falls are also a concern.



## REDUCING HEALTHCARE INEQUALITIES

The Core20PLUS5 approach is designed to support Integrated Care Systems to drive targeted action in health inequalities improvement

**CORE20**  
The most deprived 20% of the national population as identified by the Index of Multiple Deprivation

**Target population**

# CORE20 PLUS 5

**Key clinical areas of health inequalities**

**PLUS**  
ICS-chosen population groups experiencing poorer-than-average health access, experience and/or outcomes, who may not be captured within the Core20 alone and would benefit from a tailored healthcare approach e.g. inclusion health groups



**1 MATERNITY**  
ensuring continuity of care for 75% of women from BAME communities and from the most deprived groups



**2 SEVERE MENTAL ILLNESS (SMI)**  
ensuring annual health checks for 60% of those living with SMI (bringing SMI in line with the success seen in Learning Disabilities)



**3 CHRONIC RESPIRATORY DISEASE**  
a clear focus on Chronic Obstructive Pulmonary Disease (COPD), driving up uptake of Covid, Flu and Pneumonia vaccines to reduce infective exacerbations and emergency hospital admissions due to those exacerbations



**4 EARLY CANCER DIAGNOSIS**  
75% of cases diagnosed at stage 1 or 2 by 2028



**5 HYPERTENSION CASE-FINDING**  
to allow for interventions to optimise blood pressure and minimise the risk of myocardial infarction and stroke

- There are LSOAs in the South of the patch with 40 - 50% of residents classed as having Health Challenges (smoking, isolation, mental health).
- There are LSOAs in the South of the patch with 50 - 60% of residents classed as being "At Risk" (unhealthy behaviours, alcohol, unemployment, debt)
- Neighbourhood design is also highlighted red for noise complaints and premises licensed to sell alcohol.
- Overcrowded households is also red for Cambridge City



# Our Foundations in the Wider Determinants Of Health

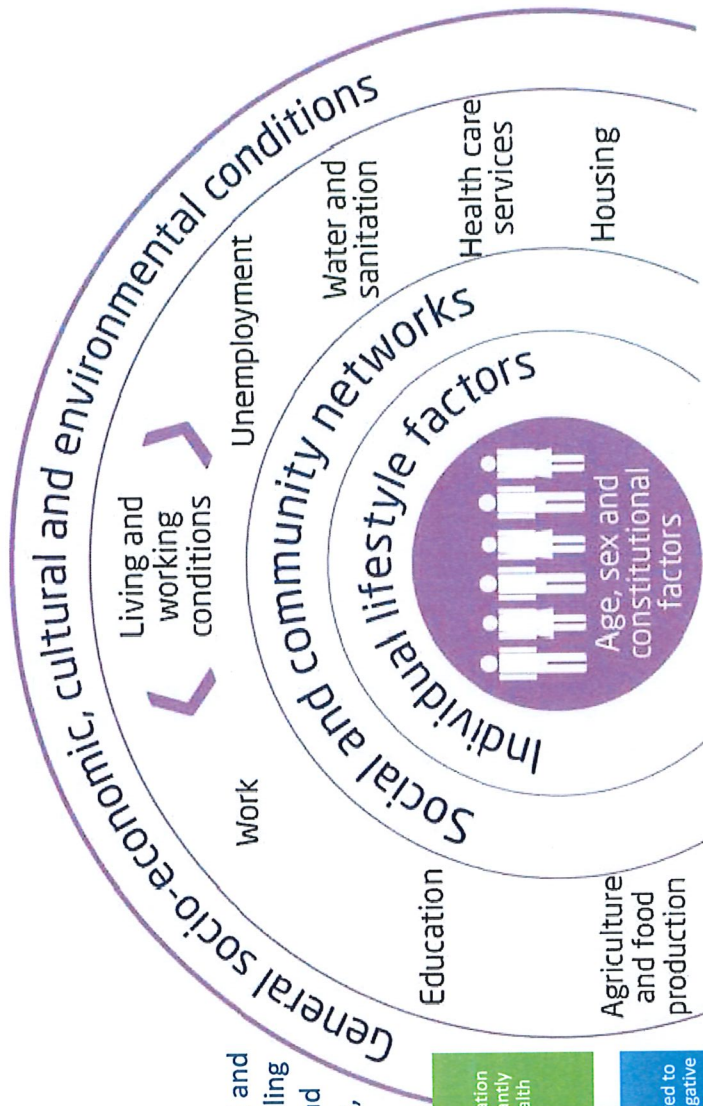


The environments in which we live, work and play have profound impacts on our health and wellbeing.

We know, for example, that substandard housing increases the likelihood of respiratory, cardiovascular and communicable diseases, as well as mortality.

Our neighbourhoods are also crucially important to our physical and mental health. Areas that discourage walking and have poor cycling infrastructure can negatively impact residents' mental health and can increase the risk of type-2 diabetes, cardiovascular diseases, and musculoskeletal condition .

Health is determined by a complex interaction between individual characteristics, lifestyle and the physical, social and economic environment	Increased levels of education are strongly and significantly related to improved health	Climate change is predicted to have both positive and negative implications for health in England
Work-related illness is decreasing, particularly among people with manual occupations	Economic hardship is highly correlated with poor health	Improved housing conditions and greater access to green spaces should have a positive impact on health



# Informed and shaped by Population Health Data

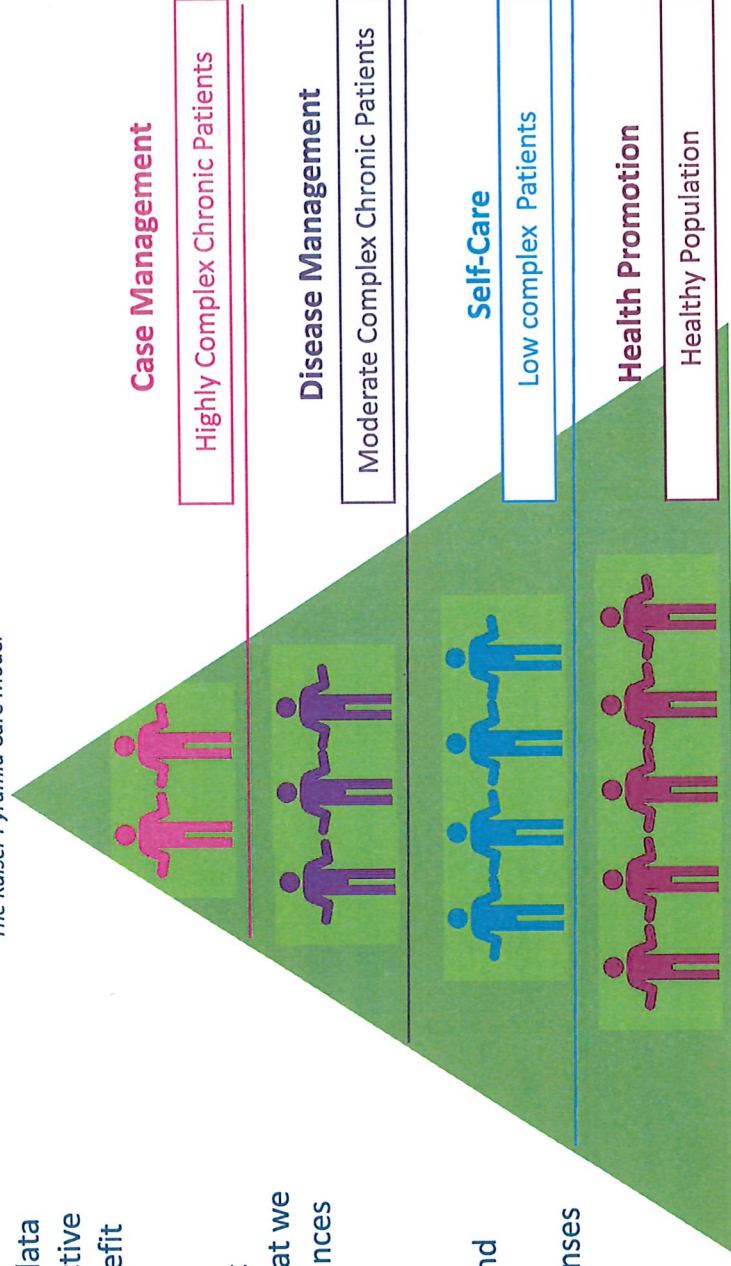


It is important that we are informed by data intelligence to help us target more proactive care to those who are most likely to benefit from preventative interventions.

Taking a Population Health management approach, at a place level, can ensure that we remain data led without missing the nuances and context that can be missed by the statistics alone.

It can help us to identify unmet needs and form the evidence that will enable us to prototype innovative multiagency responses in our neighbourhoods

*The Kaiser Pyramid Care Model*





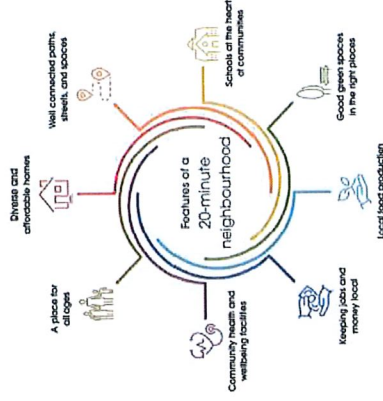
# Collaborating Internally & With Our Partners



## Exploring what could work

Around the world there is growing interest in creating places in which most of people's daily needs can be met within a short walk or cycle – 20 minute Neighbourhoods. In Cambridgeshire we have seen this model in **Neighbourhood Cares** (led by CCC)

The benefits of this approach are multiple and it clearly aligns well with the IN principles. However, to achieve this vision or even test it out in our geography would require a high level of cooperation across the system. Along with an appreciate of the time needed for the results to become apparent.



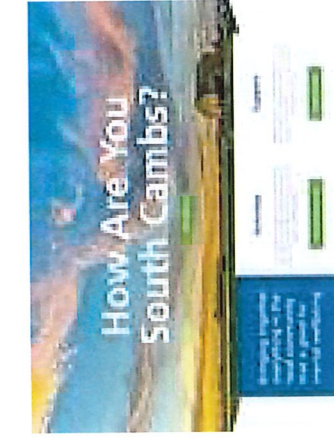
## Motivated by the successes nationally

We have access now to more evidence & national case studies on how intervention and integration projects have had a significant impact on community wellbeing, ultimately reducing the demand on Health services.

Not every project will work with our communities and we will come up with innovative projects of our own.

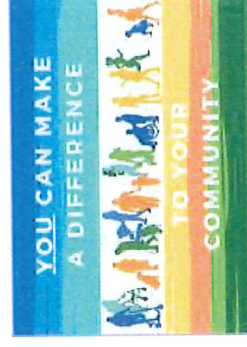


Across the system more and more organisations are recognising the need to work better together.



## Learning from what is out there already and working well

CPFT's "How are you?" programme is a valuable asset in this work. Helping all within the neighbourhood know what is available, showcasing activities and groups that work and supporting people access the range of community and service-led activities which will improve their wellbeing  
[How Are You South Cambs?](#)

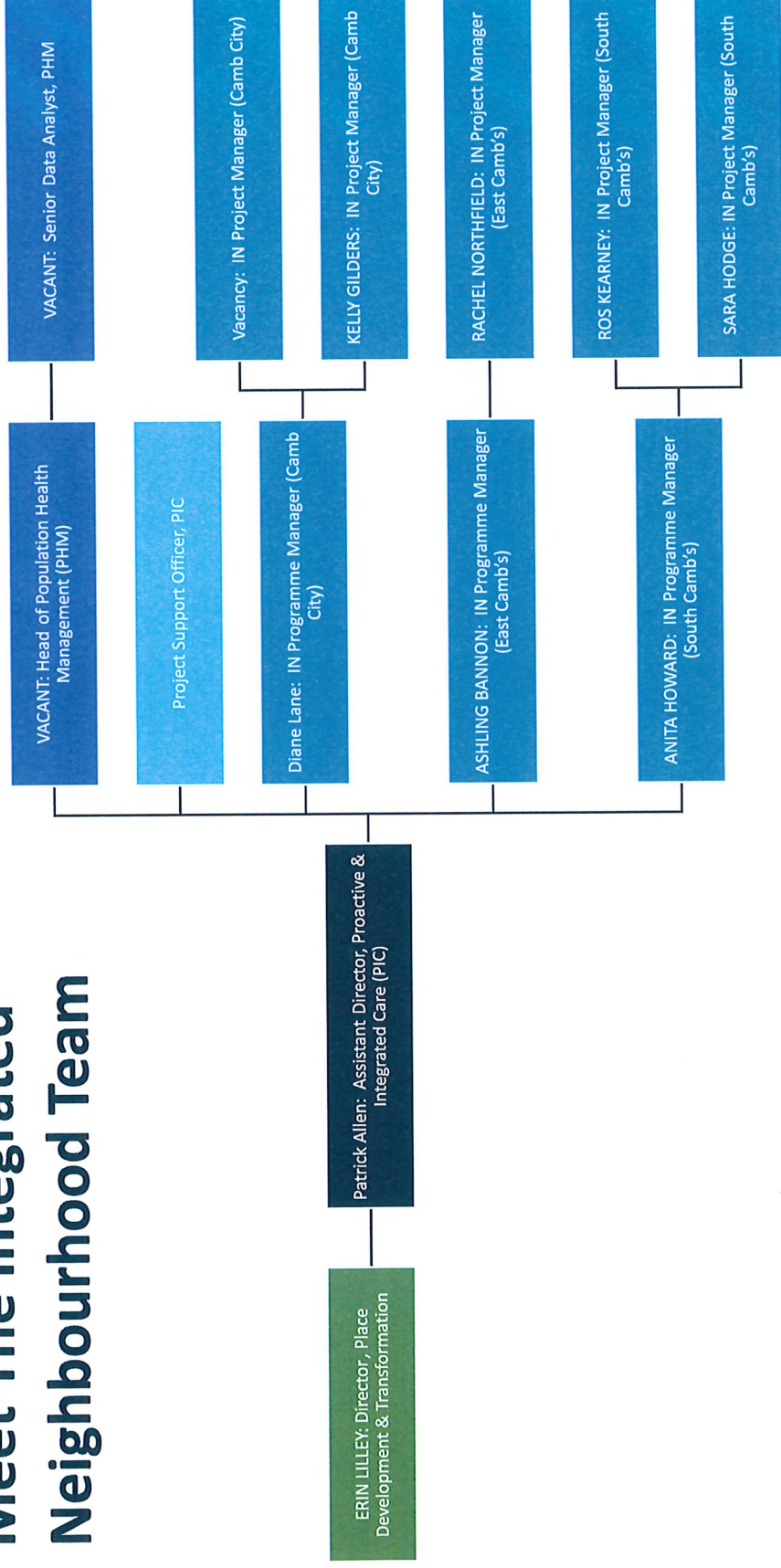


The South Integrated Neighbourhood Programme is already aligned with Cambridgeshire County Councils Think Communities programme, both closely share foundation principles .

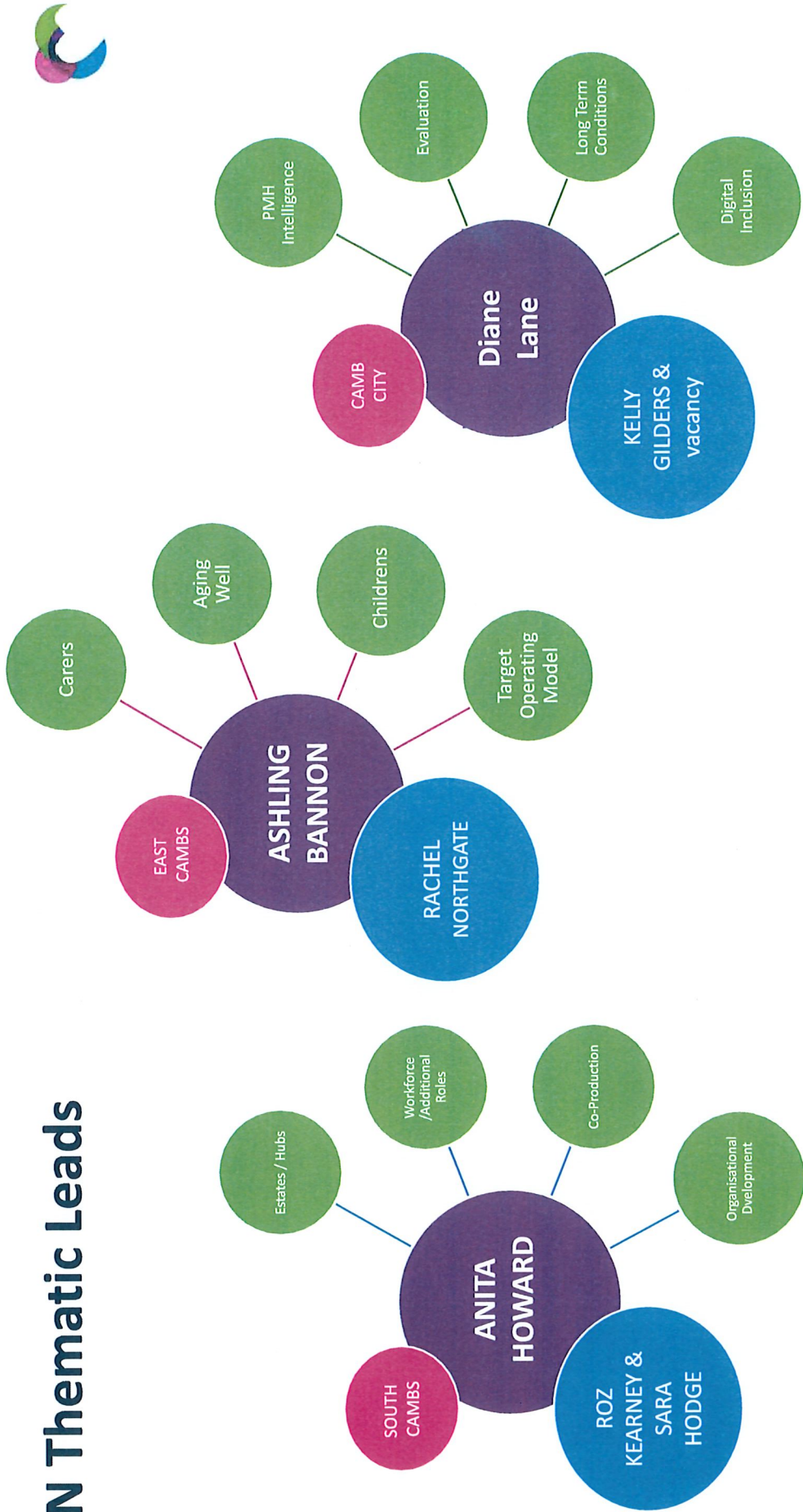
The place teams work hand in hand with their local district or City Council colleagues benefiting all with a wider reach and improved impact



# Meet The Integrated Neighbourhood Team



# IN Thematic Leads





## South Cambridgeshire Integrated Neighbourhoods

### Neighbourhood: Granta

**Menopause Group Consults**- providing education, treatment and lifestyle advice Linked to the community-led Royston Menopause Café

**Joint Menopause support plan** – accessible to Granta & Meridian patients led by Royston Leisure Centre

**Men's Health** – focused on inactive men with high BMI working with them to tackle loneliness, activity & diet started in Royston rolling out to Sawston & Linton

**Join the dots** – collaboration with VCS to avoid re-admission.

**Restarted with winter funding**

**Wellbeing Hub** - Ambition to develop a co-funded outreach mental health service



### Neighbourhood: North Villages

**Northstowe Support Partnership** - hyperlocal level to improve wellbeing a counteract poor outcomes often seen in new communities. Utilising S106 funding to run projects & initiatives to improve local wellbeing

**Craft Shed Bar Hill** – supporting the Bar Hill's version of Men's Shed, link with Social prescriber

**Gypsy Romany Traveller** – keen to work in this area to address health inequalities

**Walking football** – new groups in Bar Hill, Histon & Milton) in partnership with Living Sport, Cambridge United, Healthy You & PCN to create a space for social connections improve physical activity and provide additional mental health support via social prescribers and Cogwheel Counselling

**HI Friends** – Supporting two week wellbeing festival



### Neighbourhood: Meridian

**Melbourn Wellbeing Hub** - Moving health & wellbeing services out to the community delivering support alongside VCS including Timebank

**Joint Menopause support plan** – accessible to Granta & Meridian patients led by Royston Leisure Centre

**Worthwhile waiting** – utilising community activity (provided by VCS) to help improve wellbeing while waiting for surgery

**Priority Subgroups** – working groups (Multiagency) working on a specific focus (CYP mental health, loneliness, digital inclusion, older people, waiting lists) taking a collaborative event

**Peer Support** – Carers café, menopause Café, Long Covid Clinic

