



Report to the Cumberland Health Overview and Scrutiny Committee

Meeting Date – 16 September 2024

Key Decision – N/A

Public/Private – Public

Portfolio – Public Health and Communities

Directorate – Public Health and Communities

Lead Officer – Colin Cox

Feedback from Deputy Chief Medical Officer (DCMO) - Dr Jeanelle De Gruchy (Department of Health and Social Care (DHSC) / Office of Health Improvement and Disparities (OHID)) on her visit to Cumberland.

Summary

The DCMO for England visited the newly formed Cumberland Council to better understand the opportunities and challenges of the new Local Authority, as well as to observe and gather best practice, and a greater understanding of the area.

Recommendations:

1. That the Committee acknowledges the visit of the DCMO, her observations and note any recommendations and ideas for future areas of work.
2. The Committee consider exploring some of these observations and recommendations – either through the Scrutiny programme of work, or/and through the Health at the Heart working group.
3. The Committee note, recognise and build on the good work identified to date.

Tracking

Executive:	
Scrutiny:	
Council:	

Background

- 1.1. Dr Jeanelle De Gruchy, England's Deputy Chief Medical Officer (DCMO) and colleagues, visited Cumberland on 17 May 2024 following a series of Place Making & Health activities in Cumberland, including the Health in Planning workshop and Place Standard work, which had come to the Department of Health and Social Care (DHSCs) and the Office of Health Improvement (OHIDs) attention and generated interest.
- 1.2. The key aims of the visit were too:
 - *Showcase Cumberland Council - our ambitions, work, team, and amazing staff and members,*
 - *Put Cumberland (and its vast geography) on the map,*
 - *Discuss our challenges (and opportunities) and how OHID and other governmental departments can help us address/deliver these,*
 - *To highlight some of our community and healthy place-based working,*
 - *Connect opportunities for funding, pilot pieces of work and test and learn openings, etc.*
- 1.3. The agenda for the day was generated by a mixture of items that were of interest to regional and national DHSC / OHID, and work that Cumberland wanted to showcase.

To help understand the opportunities and challenges of Cumberland as a new Authority the day took place in two geographic locations – Carlisle and Maryport (see agenda below). The intention for this was to (within the limited time available) provide some insight into the size / scale of the new authority, whilst also showing that we have many diverse places within it.



Agenda

The Reality of Cumberland - the opportunities and challenges of Cumberland as a new area, as well as insight into our work.

Friday 17 May 2024

9.45am - 10am	Arrival - Civic Centre, Rickergate, Carlisle, CA3 8QG
10am - 10.30am	Cumberland Council Plan
10.30am - 11.15am	Your Place Pilot
11.15am - 11.45am	The Pears Medical School and Cumberland Health Determinants Research Collaboration (HDRC)
11.45am - 1pm	Travel to Maryport Town Hall, CA15 6BH
1pm - 1.30pm	Working Lunch: "The Reality of Cumberland - the opportunities and challenge of Cumberland as a new area"
1.30pm - 2.20pm	Maryport Costal Communities Regeneration Projects, Community Panels and Health and Wellbeing Coaches
2.20pm - 3pm	Travel back to Carlisle

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A number of people and partners were involved in sessions during the day:

1.3.1. Cumberland Council Plan

Leader of the Council (Cllr Mark Fryer), Deputy Leader (Cllr Lisa Brown), Director of Public Health and Communities (Colin Cox) and Consultant in Public Health (Claire King) welcomed the DCMO and provided an overview of the Council Plan, the Councils ambitions; as well as discussing issues and opportunities of the new Local Authority area. A number of asks were presented (section 1.4), which included reflections from her visit to aid future work.

1.3.2. Your Place Pilot

The Strategic Partnership Manager (Emma Dixon) and internal officers provided an overview of the "Your Place Project" and Place Standard pilot work. The session highlighted learning, outcomes, opportunities and next steps. This work has been recognised regionally and nationally.

1.3.3. **The Pears Medical School and Cumberland Health Determinants Research Collaboration**

Deputy Vice Chancellor of the University of Cumbria (Professor Brian Webster-Henderson), Vice Dean (Education) at Imperial College London and Interim Head of Pears Cumbria School of Medicine (Martin Lupton) provided an update an overview of the partnership between Imperial College London and the University of Cumbria around the aspirations for Carlisle's new medical school.

The Local Authority Research Operations Officer (Rebecca Clarke) highlighted that Cumberland are committed to increasing research and evidence-based practice through the Health Determinants Research Collaboration (HDRC) and discussed the ambitions for the programme.

1.3.4. **“The Reality of Cumberland – the opportunities and challenges of Cumberland as a new area”**

A range of stakeholders were invited to a meeting with the DCMO in Maryport to openly discuss the opportunities and challenges of Cumberland as a new Local Authority area from their perspectives. This also provided insight into the difference between Carlisle and Maryport as two examples of places within Cumberland. Key issues such as geography, rurality, deprivation, coastal communities, funding, resilience events/impact, skills and migration were discussed, as examples; which provided a true insight into the area.

1.3.5. **Maryport Coastal Communities regeneration Projects, Community Panels and Health and Wellbeing Coaches**

The final session of the day explored 3 elements:

1. *Maryport Coastal Regeneration Projects* – Programme Director (Kevin Kerrigan) led a tour around Maryport to showcase Maryport's regeneration projects and how they have put both Health and Communities at the heart of them. Several places were visited including the Town Hall, Harbour, Board walk, Town Centre, as examples.
2. *Community Panels* – Officers from the Community Development team provided an overview of how 8 Community Panels have been established across the new Local Authority area and how the panels have been working with communities to support health and wellbeing through networks and events.
3. *Wellbeing Coaches* – Officers from the Health and Wellbeing Team and service users described the role and support of the Health and Wellbeing Coaches (HAWCs) / Service, and how it has supported the local population.

2. **Outcomes of the Visit**

The DCMO will share her observations and any recommendations at the informal meeting on the 3rd September (which is after the deadline for this report).

However, during the sessions the DCMO, OHID colleagues and Cumberland colleagues agreed to move forward in a number of ways, to build on the day's success.

- Following a request from Councillors, the DCMO agreed to provide feedback on her observations and hold a discussion with the Cumberland Council Scrutiny Committee and/or Embedding Public Health group. This will take place on the 3rd September.
- During the sessions with Councillors and the Stakeholder discussion the challenges of employment and Work and Health were realised. OHID NW officers will connect with Cumberland, the DWP and explore opportunities around the agenda.
- It was agreed that the Place Standard work is an example of exemplary work carried out by Cumberland which could be replicated nationally. OHID NW and Cumberland will continue to work together to further develop this work through the North West pilot and evaluation. It was suggested that the “Your Place” pilot work could also support national OHID conversations around Health, Regeneration and place with Ministry of Housing, Communities and Local Government (MHCLG) – to maximise the links to health and influence public health improvement through other department activities and budgets.
- Cumberland asked that the DCMO consider using the authority as a test and learn or pilot-site for any future initiatives, funding opportunities or policy development.
- Additionally, Cumberland would be willing to be included in any policy or White Paper development and be included as a case study when appropriate.

2.1 Feedback and Thanks

The Director of Public Health and Communities thanked everyone for their contributions to an excellent day. He expressed his thanks to the DCMO for taking the time out of her busy schedule to come and find out what Cumberland was doing as a new council, whilst addressing Place as an important element of public health and placing health at the heart of everything the council does.

In response the DCMO repeated her thanks to everyone for organising a really informative and interesting day, stating it has been a week of receiving information and she has much to absorb, reflect on and take back from her visit.

3. Proposals

- 3.1. That members note the feedback session from the DCMO on the 3rd September and advise that it has been received by Scrutiny.
- 3.2. That members note the observations and recommendations of the DCMO and consider whether to forward these to the Executive for response, or where appropriate consider their adoption or action in future scrutiny work programmes.
- 3.3. That members note the significance of the visit, and good work highlighted and recognised during it.

4. Alternative options considered

4.1. None.

5. Conclusion and reasons for recommendations

5.1. The DCMO visit provided a unique opportunity to explore the opportunities, challenges and aspirations of the new Cumberland Local Authority. It allowed a senior health strategy government officer first hand insight into Cumberland as a Place, and to understand some of the work taking place.

The visit allows learning and development for Cumberland Council, as observations and reflections shared by the DCMO can be discussed and considered in, for example: council plans, policy and future work.

It is hoped that the visit further builds and strengthens a positive working relationship with national and regional DHSC / OHID colleagues, aids consideration of future 'test and learn', funding and case study opportunities – through sharing best practice and some of the Council's early work and achievements.

Implications:

Contribution to the Cumberland Plan Priorities –

Relevant Risks – None

Consultation / Engagement –

Legal –

Finance – N/A

Information Governance – N/A

Impact Assessments –

An Equality Impact Assessment has been considered.

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Appendices attached to report:

None