

## JOINT CHILDREN AND YOUNG PEOPLE & HEALTHY HALTON POLICY AND PERFORMANCE BOARDS

*At a meeting of the Joint Children and Young People & Healthy Halton Policy and Performance Boards on Wednesday, 4 October 2006 in the Marketing Suite, Municipal Building*

Present: Councillors E. Cargill (Chairman), Dennett, Blackmore, Hodgkinson, Loftus and Stockton

Apologies for Absence: Councillor Jones and Marlow

Absence declared on Council business: Councillor (none)

Officers present: K. O'Dwyer, A. Williamson, C. Halpin, M. Loughna and M. Chaplin

Also in attendance: Councillor Gerrard (in accordance with Standing Order No. 33) and Mr T. Windle (Liverpool Children's NHS Trust).

### ITEM DEALT WITH UNDER DUTIES EXERCISABLE BY THE BOARD

		Action
CH1	APPOINTMENT OF CHAIRMAN	
	RESOLVED: That Councillor E. Cargill be appointed Chairman.	
	<b>Councillor E. Cargill took the Chair and welcomed everyone to the meeting.</b>	
CH2	CONSULTATION ON ROYAL LIVERPOOL CHILDREN'S NHS TRUST APPLICATION FOR FOUNDATION STATUS	
	The Board received a presentation by Mr. T Windle on the application for foundation status by the Royal Liverpool Children's NHS Trust. The presentation outlined:	
	<ul style="list-style-type: none"><li>▪ the vision for the Royal Liverpool Children's NHS Trust;</li><li>▪ the difference between an NHS Trust and a Foundation Trust (FT);</li><li>▪ the reasons for wanting to become a FT;</li></ul>	

- the benefits for children, young people and their families;
- governance arrangements, including details of the Council of Governors;
- the future of services; and
- how the Trust would be run and the consultation process.

It was noted that Foundation Trusts would be at the cutting edge of a wider programme of public sector reform with the intention of offering more diversity and patient choice, enabling leadership, innovation and initiative to flourish as part of the local health economy, and replacing central control from Whitehall with accountability to the local community.

In addition the report gave details of the general context of the proposal, the number of demands on Primary Care Trusts (PCT), the freedoms and privileges Foundation status would allow, key issues arising from the proposal and the possible impact on patients from Halton.

Arising from the discussion the Boards sought clarification on a number of issues and concerns such as:

- whether the high cost and low case load interventions would be under threat in the context of a market driven by choice and competition;
- what basis the business plan had been produced on;
- whether there would be the ability to have control of finance matters in relation to Private Finance Initiative (PFI) funding;
- the criteria and process for selecting members of the Council of Governors; and
- how the process for selecting members would be managed to ensure it was open and fair.

Mr T. Windle responded to each of the above comments, giving further information to support the proposals.

In addition the Boards felt that there should be wider consultation in relation to the Council of Governors, that the lower age limit of 7 was appropriate and that mail shooting of schools for members within the catchment area may increase take up of appointments.

Mr T. Windle was thanked for attending the meeting, giving an informative presentation and responding to

concerns raised.

RESOLVED: That

- (1) Halton Borough Council welcomes the commitment to “develop a workforce which is sensitive to the needs of the different communities”;
- (2) reassurance be sought that high cost and low caseload interventions will not be under threat in the context of a market driven by choice and competition;
- (3) clarification should be sought as to whether the funding arrangements, assessment of need and the range of provision will change as a result of Foundation status;
- (4) the Trust should make clear their policy on generating income; and
- (5) the impact of this policy (i.e. to foster innovation and change in acute hospitals) on the ability of PCTs to invest in preventive, primary, community and intermediate care should be carefully monitored by the Healthy Halton Policy and Performance Board.

*Meeting ended at 7.54 p.m.*