



## Halton Strategic **PARTNERSHIP**

### HALTON HEALTH PARTNERSHIP BOARD MINUTES OF THE MEETING held on 10<sup>th</sup> March 2011

**Present:** Debbie Ainsworth (DA)  
Cllr Ellen Cargill (EC)  
Glenda Cave (GC)  
Dympna Edwards (DE) (Chair)  
Cllr Ann Gerrard (AG)  
Diane Lloyd (DL)  
Eileen O'Meara (EO'M)  
Sue Parkinson (SP)  
Dave Sweeney (DS)  
Yeemay Sung (YS)  
Karen Tonge (KT)

**In attendance:** Clare Myring  
Collette Walsh  
Audrey Williamson

**In Support:** Margaret Janes

<b>1.</b>	<b>Apologies</b>  Jim Wilson, Gerald Meehan, Dwayne Johnson, Emma Bragger
<b>2.</b>	<b>Minutes of the Meeting 4 November 2010</b>  The minutes were agreed as a correct record.
<b>3.</b>	<b>Matters Arising</b>  LIT Group – DL had checked previous minutes and advised matters had moved on. Policy Options Paper – Used to inform the Sustainable Community Strategy – goes live 1 <sup>st</sup> April. Halton 2000 Survey Safeguarding – update on progress next agenda. PH White Paper – information being fed into Older People's LIT. Spending Review – Discussed at LSP and how we can work collaboratively. N150 – There will be no new LAA targets for 2011/12. Outcome framework being consulted on at national level. DE understood some targets will need formalising. With regard to targets we need to continue performance managing targets or choose sub set of them.
<b>4.</b>	<b>Joint Strategic Needs Assessment</b>  DL presented the JSNA on behalf of Emma Bragger who had worked in conjunction with the Council Research team and Sharon McAteer from the PCT.  The implementation of the JSNA Communications Plan was planned for June 2011. In terms of going forward the JSNA will be refreshed on an annual basis. It will be a key document for the GP Commissioning Consortia and will form the basis of the development of the Health and Wellbeing Strategy, a responsibility of the Health and Wellbeing Boards.  Cllr Gerrard believed this was a useful baseline, there was a lot of information from partners that needed to be picked up by the JSNA in order to provide prevention. It was agreed the JSNA needed to be a rolling document, with information added as necessary. There was a need to use the softer information provided by partners as an early warning system. Liverpool University were currently looking at predicted problems,



	<p>ie housing, as a result of the economic downturn.</p> <p>DE wished to record her thanks to Emma Bragger for her efforts in producing this document.</p>
5.	<p><b>Community/Link Feedback</b></p> <p>Sue Parkinson briefed the meeting on activities since the last meeting.</p> <p>Karen Tonge advised Melissa Critchley was supporting the provider forum on Personalisation – a further newsletter will be produced. She advised there had been organisational changes and a report will be available at the next meeting.</p> <p>Cllr Gerrard expressed concern over community groups and projects having a voice in relation to feedback to these groups. Karen Tonge advised there were sub groups that any groups were welcome to join. Cllr Cargill advised there was a community forum and also area forums. D Edwards felt it may be useful to map as much as possible to see if we have routes for the majority through community forums etc; there may be an opportunity through Health and Wellbeing Boards to look at how these engagement links work.</p> <p>Following further discussion it was agreed that any ideas should be forwarded to Audrey Williamson. D Lloyd to forward a copy of Community Engagement Strategy.</p>
6.	<p><b>Public Health White Paper</b></p> <p>DE referred to the PCT's response to the White Paper and advised that the deadline had been extended. The main responses were around Policy, Wider Determinants of Health and Structure.</p> <p>Following discussion it was agreed that the Health Partnership should produce a response. DE requested people forward additions/changes to her within the next week.</p>
7.	<p><b>Health Partnership Development and Feedback</b></p> <p>A Williamson had been requested to produce a report for Halton with regard to the Health and Wellbeing Board; the report would be distributed to the Council's Management Team, PCT and PBCs (GPs). This will be a statutory Board that will be Council led and chaired by elected members. The membership would include Director of Children's Services, Director of Adult Services and Director of Public Health.</p> <p>The principles agreed at the Away Day need to be fed in, AW asked for views on what should be incorporated into the report. Cllr Gerrard advised the views of GPs needed to be included; the views of other parties, ie volunteer groups, etc, needed to be fed into the group. She asked whether consideration should be given to a wider membership. DE pointed out that if people were not on the main board they would be on other committees feeding into the H&amp;W Board. A Williamson referred to the Children's Safeguarding Board and its subgroups and suggested that model be used. This proposal was agreed.</p> <p>Any further comments should be emailed to Audrey Williamson.</p>
8.	<p><b>Performance Group Feedback and Health Priority Update</b></p> <p>Health Priority Update – DL/EO'M were preparing a paper for COG on 15 March, a copy would be forwarded to the group.</p> <p>EO'M gave an update from the last Performance Group:</p> <p><b>Mortality</b> – it was noted there was a lag in the data. The unverified data (from PH Analyst team) showed men were expected to live an additional 2.3 years (75 years) and women an extra 2.2 years (79.2 years). In recent years life expectancy had increased; by 2011/12 we should be able to meet the Local Area Mortality Indicator.</p> <p><b>Obesity</b> – Child Health Profile was not significantly above national average for</p>



## Halton Strategic **PARTNERSHIP**

	<p>Reception age obesity. Government guidance is a reduction of 0.5%, we have reduced by 1% for Reception age group and 0.6% for Year 6.</p> <p>Cllr Gerrard referred to the successes around the community – the bottom up approach from community groups have fed into national award winning pieces of work. The “New Shoots” campaign is growing rapidly and spreading across the Runcorn area.</p> <p>Hospital Admissions for alcohol related harm – it was noted we are now in the mid range as opposed to the top.</p> <p>A copy of the Child Health Profile to be circulated with the minutes.</p>
9.	<p><b>SSP Chairs Meeting Feedback/WNF Transition Fund 11/12 Health Priorities</b></p> <p>DE confirmed the group had prioritised the Voluntary Sector Counselling Partnership and Accessible Transport for WNF Transition Fund 2011/12.</p> <p>Collette Walsh gave a presentation on Alcohol and providing psycho-social intervention for adults affected by drug or alcohol use by funding the Halton Family Service. They hoped to secure funding of £50k which would give support to 55 families. She advised there were changing patterns for substance misuse in the area having more poly substance users – alcohol, powdered cocaine and ecstasy – these people would not see themselves using a traditional service. They hoped to fund a website so that advice was available and individuals could get self-help through a screening tool and new providers would have a link into the website to enable users to be aware of all services available to them.</p> <p>During discussion KT felt it may be useful to contact Halton Youth Council to support this. Cllr Gerrard advised the Local Authority Marketing group may be able to help.</p> <p>It was agreed to work with Collette Walsh around young people being admitted to hospital and if the LSP agree funding this will be moved forward given time restrictions.</p>
10.	<p><b>Drug Strategy – joint working protocol between treatment providers and JobCentre Plus</b></p> <p>Debbie Ainsworth gave an update, including new protocol from April and discussion took place around identifying referrals to treatment providers. It was noted that whilst customers are in the “live in” facility they will be able to claim income support straight away. S Parkinson asked how this would affect the homeless. D Ainsworth advised the same process would apply, if they are not looking for work there will be harsher penalties - details awaited. DE requested FAQ information to be included with the meeting notes.</p> <p>Due to the potential increase in patients consideration needs to be given to raising awareness with GPs. DE advised there is a monthly GP Bulletin and requested D Ainsworth to provide highlights of changes so that GPs can be made aware of the situation.</p>
11.	<p><b>Any Other Business</b></p> <p><b>Transport Board</b> – Diane Lloyd advised the Transport Board sits under the LSP, however there is no health representation on the Board. The next meeting is 23 March at 3pm. There was a need to have representation on a regular basis and D Lloyd requested a nominee from the Health SSP. If no one is nominated D Lloyd agreed to attend if available. If anyone would like to put themselves forward for the group they should contact Diane direct. D Ainsworth advised she was a member but was not always able to attend.</p> <p><b>JobCentre Plus</b> – Debbie Ainsworth advised they would be going to 4 districts (formerly 5) and Halton would be part of Merseyside. Cheshire West, Cheshire East and Warrington would be part of Manchester.</p> <p><b>July Meeting</b> – A venue is needed for the next meeting on 14<sup>th</sup> July. Debbie Ainsworth</p>



## Halton Strategic **PARTNERSHIP**

	advised there were conference facilities in Runcorn. DL to send details to her to check availability
<b>12.</b>	<b>Date and time of next Meeting</b>
	The next meeting will take place on 12th May 9.30-11.30 – Conference Room 2, Municipal Building, Widnes