



Halton Strategic PARTNERSHIP

HALTON HEALTH PARTNERSHIP BOARD MINUTES OF THE MEETING held on THURSDAY, 13th OCTOBER 2011

Present: Emma Bragger (EB)
Cllr Ellen Cargill (EC)
Glenda Cave (GC)
Lorraine Crane (LC)
Dympna Edwards (DE) Chair
Dwayne Johnson (DJ)
Amanda Lewis (AL)
Diane Lloyd (DL)
Eileen O'Meara (EO'M)
Sue Parkinson (SP)
Yeemay Sung (YS)
Karen Tonge (KT)
Jim Wilson (JW)

In Attendance: Hazel Coen (HC)

In Support: Margaret Janes

		ACTION
1.	Apologies Sue Wallace-Bonner, Gerald Meehan, Ian Stewardson, Councillor Marie Wright.	
2.	Minutes of the Meeting The minutes were agreed as a correct record.	
3.	Matters Arising Item 4 – DL had forwarded information to Lorraine Crane. H&WBB to give consideration to communications with the voluntary sector going forward. Item 6 – Obesity – figures had been amended. Teenage Pregnancy Target – target set and included in paper. Item 8 – Social Enterprise – DS to provide.	
4.	Community/LinK Feedback SP provided an update to the Board. She advised LinK were currently looking at their effectiveness and planning for the transition to HealthWatch. A report from the Future NW Forum on Ageing had been circulated to the Board from Halton's representative Doreen Shotton. It was noted that the DWP will continue to provide funding for 2011/2012. KT had circulated a copy of E-Times. Any items for the November publication to be forwarded by the end of October. DE to forward the Public Health Annual Report summary.	DE/MJ
5.	Public Health Annual Report 2010/11	



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	<p>DE gave a presentation on the PHAR. The JSNA is a comprehensive assessment of the range of issues in the Borough; each year a key theme is picked up by the Director of Public Health to focus on certain areas within the PHAR. It was noted that</p> <ul style="list-style-type: none"> • Health is improving but inequalities persist • As Health improves in some areas other priorities come to the fore - eg cancers, suicides. • Thorough changes need to ensure continuity of focus on community development, prevention and early detection • Delivering these programmes makes a tangible difference to local communities. • There is room for improvement - specific recommendations in the report for particular agencies <p>DE confirmed health was improving year on year and efforts are making a difference. A four page summary document was available if this would help to publicise the key messages.</p>	
<p>6.</p>	<p>Feedback from HSPB Meeting on 21st September</p> <p>The Halton Strategic Partnership Board had presentations on the Public Health Annual Report and a voluntary sector update. It considered the Child and Family Poverty Strategy, health reforms, the Localism white paper and had updates on the Residents Survey and the proposed planning guidance on hot food take-aways.</p>	
<p>7.</p>	<p>NHS Transition Update</p> <p>DE advised there was a single management team across the Merseyside PCTs. A Voluntary redundancy scheme has been available to staff and this could reduce management costs by 15-20%. Over the coming months the cluster will work with the Clinical Commissioning Groups (CCG) to identify the staff they need and to integrate</p> <p>GP consortia are working through the authorisation process in order to apply and become Clinical Commissioning Groups. Widnes and Runcorn consortia have agreed to work together to form Halton CCG. There will be formal sub committees of the PCT Board to enable Clinical Commissioning Groups to start operating in shadow form.</p> <p>Over the coming months, Cluster Directors will work on the staff needed for their directorate; some staff will be aligned directly to Clinical commissioning Groups, some to the Commissioning Support Unit and some to the National Commissioning Board. These new arrangements should be operational by January 2012. Local arrangements will continue for Public Health with some collaborative work across Merseyside. There are plans to recruit a Director of Public Health for Halton.</p> <p>DJ referred to VR and whether this would affect the determining of shadow budgets for Public Health. DE advised the budget return had been based on the spend for 2010/11 which will help to form the baseline; she confirmed the money would still be included in the baseline spend.</p> <p>SP advised that LINKs had conducted a 360 degree appraisal to enable them to look at the transition to HealthWatch; they were currently consulting with members. EB advised she attend a LINK transition group, they will be looking to work up a HealthWatch specification early in the New Year.</p> <p>DE advised it was vital for people to continue to communicate in order to work</p>	



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	through the new situations and challenges we are facing.	
8.	<p>Performance Group Update</p> <p>HC referred to Performance Framework – Sustainable Community Strategy (2011 – 2016) and the Appendix and advised these were key measures that needed to be tracked over the next 5 years; she asked that this proposal be adopted. DL advised whilst the framework may be adopted by this committee it will need to go to the H&WB Board for adoption. DE confirmed as a strategic group these were key outcomes which need to be considered and managed, however it was for the H&WB Board to approve and they may wish to add to the framework; she requested the information be made available to the H&WB Board.</p> <p>DL asked whether there would be quarterly monitoring. HC advised that was up to the H&WB Board, they were happy to provide information on a quarterly basis depending on the level of detail required. DJ advised they work on the next 12-18 months and not a 5 year target as the Board may decide there is a different set of priorities.</p> <p>DE thanked the group for the work the performance group had carried out over the years.</p>	HC
9.	<p>Halton Health and Wellbeing Board Development</p> <p>DJ advised the group that key stakeholders had been consulted on the draft Terms of Reference for the Health and Wellbeing Board and all partners were signed up. The first meeting was scheduled for 5 December. A draft agenda was being prepared and biographies had been requested from participants.</p> <p>Some members would be attending an event in Bolton on 17 October to understand from other organisations how they have managed the transition to H&WB Boards.</p>	
10.	<p>Halton Senior Managers Meeting Next Steps</p> <p>DJ referred to the report and advised the aim is to link with existing structures and strategic approaches with a more co-ordinated approach to health on a locality level. Children’s services have delivered some very positive outcomes; in addition they now have seven area forums which overlay other children’s locality groups. It was proposed to follow some recommendations by Marmot and look at health and social re-engineering and the wider determinants of health, this will give a model to move towards health promotion/prevention. The JSNA already provides a comprehensive analysis of need across the borough; however, it is also proposed that locality profiles are produced to give a better understanding of need at ward/ Area Forum level. It was proposed that the locality model of health be taken to the first meeting of the new Health and Wellbeing Board.</p> <p>EO’M advised following that opportunity needs to be given to people in the community to become health champions. There was a need to look at multidisciplinary teams to make best use of resources available.</p> <p>After further discussion it was agreed to support the above proposal.</p>	
11.	<p>Halton Health Partnership Achievements/Legacy</p> <p>DE wished to acknowledge the scale of work and achievements made by HHP since it was established in 2001. All agreed that partnership working had been excellent and the investment had been very worthwhile. The Board acknowledged the achievements made and anything that could be taken forward to assist in the challenges ahead.</p>	



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12.	<p>Any Other Business</p> <p>Smoke Free Parks EO'M advised Halton were the first Borough Council to do this. Wardens will be trained so they are able to deal with questions from the public.</p> <p>Caring For Our Future DJ referred to the briefing note and advised adult social care will change fundamentally in 2012. The government had put forward a number of options, Louise Wilson was the lead for HBC and people should contact her direct with responses to the consultation questions. DJ was leading nationally on behalf of ADASS. Currently pulling together a policy response which will be circulated in the next 3 weeks.</p> <p>Responses to Louise Wilson by 21 October.</p> <p>In closing DE thanked everyone for their contributions over the years and in particular thanks to Diane Lloyd. JW added his thanks to the Chair and DL for their efforts over the years.</p>	All
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