

HALTON HEALTH PARTNERSHIP BOARD MINUTES OF THE MEETING held on THURSDAY, 14TH JULY 2011

Present: Debbie Ainsworth (DA)

Emma Bragger (EB) Cllr Ellen Cargill (EC) Glenda Cave (GC)

Dympna Edwards (DE) (Chair)

Dwayne Johnson (DJ)
Diane Lloyd (DL)
Eileen O'Meara (EO'M)
Dave Sweeney (DS)
Karen Tonge (KT)
Jim Wilson (JW)

Cllr Marie Wright (MW) Lorraine Crane (LC) Steve Burrows (SB)

In attendance:

Hazel Coen (HC) Steve Dooré (SD)

Marina Nistotskaya (MN)

Sue Scott (SC)

| | | ACTION |
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| 1. | Apologies Gerald Meehan, Sue Wallace-Bonner, Mike Kenny, Ian Stewardson, Sue Parkinson, Yeemay Sung | |
| 2. | Minutes of the Previous Meeting (12 May 2011) Page 3 Item 6 – Child Health Profile: the obesity figure of 21.6% related to 2009. | |
| | The minutes were agreed as a correct record. | |
| 3 | Matters Arising H&WBB Presentation – copy of presentation forwarded to EB. NEDs in H&WB Board – DJ/JW discussed and recommendations will be taken forward and presented to the Council Exec Board in September. The first meeting will be established in October. DJ to amend and forward document to DE for distribution to members of the Board. Performance Sub Group – Agenda item. SLA – Still outstanding from C Walsh. Receipt anticipated in the next few days. Resident Survey- Agenda item. Target Wellbeing Questionnaire – complete. | |
| 4 | Community/LinK Feedback KT referred to the tabled report and advised current work under Health Engagement Project included: - Health 'e' Times newsletter - Information guide for commissioning, quality assurance and specific quality standards Organising third sector event in partnership with the PCT Development of Here to Help catalogue - Piloting the EVOLVE project | |



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| | Laura Neilson was the contact person for any queries relating to the above. | DL |
| | Following discussion DL advised she would forward an email to LC who would ensure the children's voluntary sector were represented. | |
| | DL advised SP had forwarded an update; this was circulated with papers, any comments or queries to be directed to Sue Parkinson. | |
| 5 | NHS Transition Update: NHS Future Forum DE provided an update following of NHS changes following the NHS Listening Exercise. There would be a greater role for Health and Wellbeing boards, a staggered implementation of reforms and Public Health England would be independent of the Department of Health. | |
| | JW stated they were currently awaiting an announcement from David Nicholson who had met with Cluster Chief Executives on 12 th July. | |
| 6 | Performance Group Update JW advised meetings had taken place and target areas were suggested in the report. | |
| | Alcohol – document tabled showed the Actual for 2011. DS to work on validation before next Performance Group meeting. | |
| | Breastfeeding- Look at Halton specific information. | |
| | Obesity – Year 6 final target 13/14 cannot be reduced by 1% as this will be under the national average. Reception – PCT figures as opposed to Halton figures. EO'M to amend. | EO'M |
| | HC tabled paper showing comparison of Halton with national averages and local rates. | |
| | All Age All Cause Mortality – This has been modelled on a 1% reduction year on year. | |
| | Under 18 Conception – HC advised that we needed to report actual conceptions as well as rates as the base population varied. | |
| | Smoking – EO'M advised need to look at quit rate per 100,000 to have a correct reflection of progress made. | |
| | Mental Health – DS highlighted ideas from performance group, they now have baseline and trajectory. The 2010 target of 800 would be used. | |
| | Following discussion it was agreed the targets would be taken for one year and revised. | |
| | Social Care – HC advised it had been agreed to target older people as a group, this had been agreed with S Wallace-Bonner on the basis of past performance. This was agreed. | |
| | Drugs and Alcohol – DS advised they were looking at 2 indicators – a good indicator of recovery is employment, currently looking at this. DA advised Ashley House have referrals to JobCentrePlus, it was felt this indicator could be measured. LC requested discussion continue on a second indicator. | |
| | JW advised to performance manage targets information was required; unfortunately the partnership were not receiving the information and leads should be actively | |



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| | encouraged to provide the information. DE suggested contact be made with leads, providing them with a schedule of when the information is required by. For the next meeting looking to have the performance data populated. | DL |
| 7 | Residents Survey SC and MN tabled a document. The government have withdrawn the need to carry out the Place Survey survey, however, Halton Borough Council would carry out it's own survey in September to 7,000 residents. Three main areas had been agreed – Alcohol/Smoking/Mental Health. Following discussion it was agreed a publicity campaign be carried out prior to the survey to promote uptake. It was also agreed questions around alcohol/weight be looked at giving consideration as to how the information would be used. In addition, EC suggested surveys be available at health centres. | SC, EOM |
| 8 | Community Engagement Strategy SD advised an audit had been conducted with 5 objectives: | |
| | Citizen focused local decision making Accessible and inclusive engagement Open, efficient and effective engagement Innovative engagement Using and responding to citizen initiated engagement. | |
| | The action plan had been populated and a further event would take place next year. EC suggested SD arrange to meet with the residents of Castlefields. KT advised people were frustrated that once consultations are held and suggestions put forward they receive no feedback. SD advised they would like sign up to the strategy and actions around mapping activity/providing strategic lead from each organisation, joint ownership needed to be developed. JW advised the strategy should go to partners individual Boards. SD advised the strategy had been accepted by the LSP Board with the proviso that having gone to the Partnership boards, amendments may be made. | |
| | DS advised Social Enterprise was not included and agreed to email information to S Dooré. | DS |
| 9 | Consultation on the new Healthy Weight Strategy EO'M referred to the document and advised they were looking to develop a new strategy. She referred to the Vision for the Future document and advised the vision was moving away from treatment, into the environment. The strategy objectives were: | |
| | Tackle the obesogenic environment Train service providers and community members Deliver a wide range of accessible physical activity and healthy eating and cooking options Implement NICE approved programme of weight management interventions commissioned in 2009/10. | |
| | Following discussion it was agreed the Board supported this strategy. | |
| 10 | Asset Based Approach to Improving Health and Wellbeing DE gave a presentation on the above (copy to be circulated with minutes). There is increasing emphasis in current policy on not just looking at the needs and deficits but taking a community development approach to identify and develop community strengths. Health profiles issued last week benchmark on: - Marmot Review of Health Inequalities – participation highlighted. | |
| | DE asked whether the balance was currently right. Discussion took place on how to | |



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| | move matters forward in our work programme. If community groups felt unable to participate there was a need to look at how this could be taken forward and build resilience. It was agreed to - look at opportunities to build this approach into the JSNA - delivery programmes reflect some of the work that is ongoing and how we strengthen Build community engagement and development approach into the working of the Health and Wellbeing board. | |
| 11 | Feedback from HBC Senior Managers Health Event 27.6.11. DJ gave feedback from the event to engage HBC staff in the public health agenda. This included - Opportunity for services to look at the Public Health agenda, work in partnership and look at efficiencies. - Professionally look at efficiencies/opportunities to deliver services in a different way through departments/organisations. - Share ideas going forward and have discussions with partner organisations. Hold similar events with voluntary organisations to prepare for 2013. | |
| | EB advised from the evaluation forms a number of individuals had stated they would take action immediately. DJ advised a further meeting was planned and an action plan developed. A wider series of events will be organised. An update would be given at the next meeting. | DJ |
| 12 | NWPHO Health Profile 2011 EO'M circulated two documents relating to the health profile. It was noted this information was a snapshot and did give year on year information. Discussion took place over profiles, DS advised self harm was being captured elsewhere. DE advised she had been asked to add to the profile by the PCT management team. | |
| | EO'M confirmed some of the data was out of date: excess winter deaths – this had actually improved but was not reflected in the data. | |
| | More up to date data was available in the Health JSNA. Please find the link to the JSNA below. | |
| | www.halton.gov.uk/jsna | |
| 13 | Any Other Business Safer Halton Budget Meeting – DJ advised it had been agreed due to a number of schemes coming to an end, business cases should be presented to the LSP for further funding. There could be slippage in the current budget; if this was the case the LSP will consider this for 2013. Consideration needed to be given to schemes that we wanted to continue beyond 31 March 2011. DL stressed the need to ensure that SLA's were in place as soon as possible for existing projects. | |
| 14 | Date of Next Meeting | |
| | The next meeting will take place on Thursday, 8 th September at 9.30-11.30 am, The Willow Room, First Floor, Municipal Building, Widnes | |
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