Extract of Executive Board and Executive Board Sub Committee Minutes Relevant to the Healthy Halton Policy and Performance Board

## **EXECUTIVE BOARD MEETING HELD ON 15 OCTOBER 2009**

EXB46 OLDER PEOPLE'S JOINT COMMISSIONING STRATEGY - KEY DECISION

The Board received a report from the Strategic Director, Health and Community, which set out the draft Joint Commissioning Strategy for Older People for 2009-2014.

The new strategy updated the plans for Older People's Services and identified the commissioning priorities and key actions for the next five years. The main themes of the strategy reflected the various consultation exercises which had been undertaken with a range of commissioning staff, voluntary sector representatives, independent providers and service users and carers and one to one meetings, together with the outcome of scrutiny by the Council's Health Policy and Performance Board.

In the local context, a thorough analysis had been undertaken as part of the Commissioning Strategy and strategies identified to address a range of mental health, major illness and quality of life issues. The Council had already considered a range of strategies that would address some of these issues, including Extra Care Housing and Reablement Services. The Commissioning Strategy would now bring together the different strands into one coherent document.

The Board were advised that this was a joint Commissioning Strategy with NHS Halton and St Helens, with funding supported for the main major illnesses through the Primary Care Trust (PCT); the remaining areas would be contained within existing budget allocations set by the Council and the PCT.

RESOLVED: That the Board approve the Older People's Commissioning Strategy 2009-2014

## **EXECUTIVE BOARD MEETING HELD ON 5 NOVEMBER 2009**

EXB53 JOINT CARERS COMMISSIONING STRATEGY 2009-12

The Board received a report of the Strategic Director, Health and Community, on the Joint Carers Commissioning Strategy 2009/12.

The Strategy built upon the aims, objectives and activities outlined in the 2008/9 Carers Strategy, including an action plan, to support services in Halton move toward a more focused way of commissioning services for Carers over the next three years. It had been developed as a result of research carried out in terms of other local authority plans and ongoing consultations and contributions from stakeholders.

The Board were advised that the format of the commissioning strategy followed a similar one adopted with other Joint Commissioning Strategies within the Directorate and took account of the contents of the National Carers Strategy which had been published in June 2008.

The objectives of the Commissioning Strategy were to move towards a process for the commissioning of services, to continue to assist in the identification of hidden carers and improve information and access to support services. The Board were advised that the Care Quality Commission closely monitors the Council's performance on carer's services and had judged that Halton delivered a good service. The introduction of the Strategy would assist in maintaining that judgement.

RESOLVED: That the Board approve the Joint Carers Commissioning Strategy 2009/12 and associated action plan.

## **EXECUTIVE BOARD MEETING HELD ON 3 DECEMBER 2009**

## EXB69 DUAL DIAGNOSIS STRATEGY

The Board considered a report of the Strategic Director, Health and Community on the development of a Joint Dual Diagnosis Commissioning Strategy 2009-2012 for Halton and St Helens.

The Strategy documented the current services already in place for people with both substance misuse and mental health problems, with a view to identifying and analysing the gaps in services and any blockages to delivering a more integrated care pathway.

The Board was advised that a number of consultation meetings with all stakeholders in both mental health and substance misuse services had been undertaken early in 2009. In addition, a number of one to one interviews with key stakeholders were undertaken to gain views on current services and how services could be improved.

The Strategy recommended more integrated working, earlier identification and treatment in primary care and an increase in skills and knowledge for staff to enable them to provide care to people with dual diagnosis problems. It was designed to improve the care experience and reduce waiting times between services.

RESOLVED: That the Joint Dual Diagnosis Commissioning Strategy be endorsed.