

Title: Health and Wellbeing Partnership		Meeting No:
Date: Monday 27.07.2009	Location: Tristar Homes, Stockton On Tees	Duration: 12.30-2.30 2 hours

Present:

Chris Willis Chair, Chief Executive Stockton On Tees
Elizabeth Shassere Director Public Health NHS Stockton
Mike Batty Head of community Protection, Stockton Borough Council
Ann McCoy Councillor
Jenny Beaumont Councillor
Graham Prest Stockton on Tees PCT
Carole Langrick Director of Strategic Services Development North Tees & Hartlepool NHS Trust
Jane Humphreys Corporate Director, Children, Education & Social Care, Stockton Borough Council
David Levy Tees Esk and Wear Trust
Ann Cains Councillor
Suzanne Fletcher Councillor
Annabel Turpin Chief Executive Stockton ARC

In attendance:

Gemma McDonald Analyst, Stockton DAAT
Claire Spence Health Improvement Specialist NHS Stockton On Tees
Joe Chidanyika Health Improvement Specialist NHS Stockton On Tees
Laura Flynn Administration Assistant NHS Stockton On Tees
Trish McPartland Joint Strategic Commissioning Manager (MH)
Natalie Hanchard SBC
Lesley King Head of Policy, Performance, and Partnerships, SBC

Apologies:

Richard M Poundford
Ruth Hill
Peter Seller
Simon Wilson
Dave Brunskill
Ian Harrington
Ingrid Ablett-Spence

Para No		Action
1	Introduction/Apologies CW welcomed the visiting presenters to the meeting.	
2	Notes from previous meeting/Matters arising The notes were agreed as an accurate record of the last meeting.	
3/4	Joint Strategic Needs Assessment/The Health and Wellbeing Strategy – Elizabeth Shassere ES reminded the group of the statutory duty of the JSNA that the Health and Wellbeing Partnership management team had completed	

	<p>last year with the support of the Partnership. A refresh of the JSNA is required each year and a first draft of the document was shared with the materials prior to this meeting. It has been restructured to reflect the 6 priority areas identified in the Health and Wellbeing Strategy. Any comments or suggestions regarding the document are to be sent to ES prior to 12 August. AC remarked that she preferred the bulleted style but that it would make references to specific bullets easier if they were numbered. All agreed. The final draft will be taken to various forums through September by the members of the HWPMT for final feedback. The finalised version will go through the usual final approval processes within the PCT and Council.</p> <p>AMc remarked that it had been discussed that learning disabilities would have a specific focus in the JSNA and this did not appear in this draft. ES will flag this up with RH and PS for inclusion.</p> <p>ES presented the final version of the Health and Wellbeing Strategy. It will be printed and distributed as per the usual channels. The structure of the remainder of the meeting has been designed to update members on each of the 6 priority areas in the strategy to show the tremendous progress that has been made in those areas in the time the strategy has been developed.</p> <p>ES explained that presentations will follow. Many refer to needs assessments and action plans and if people would like the documents referred to emailed out to them to let ES know or fill in the sign up sheet circulated.</p>	<p>ALL</p>
<p>5</p>	<p>Mental health and emotional wellbeing needs assessment – Joe Chidanyika and Natalie Hanchard JC and NH presented on the current structure of forums that address mental health and emotional wellbeing. They gave an overview of recent needs assessment and described the next steps to address gaps identified. Some of the key areas for development are signposting services, health promotion, continuing professional development for staff, social prescribing, mental health first aid training and volunteering opportunities.</p>	
<p>6</p>	<p>Stockton Alcohol Needs Assessment and Strategy- Jo Heaney and Gemma McDonald JH presented on overview of the findings of a recent extensive needs assessment and draft objectives that will drive the subsequent action plan. The key drivers to the alcohol agenda have been an alcohol scrutiny report, the appointment of a modernisation manager for alcohol, a key stakeholders event, and the needs assessment. The importance of signposting services and for services to work together to ensure robust referral pathways has been highlighted, as well as the relative low level of funding for alcohol compared to other</p>	

	areas.	
7	<p>Healthy Weight, Healthy Lives Strategy Development – Claire Spence</p> <p>CS gave an overview of the current obesity profile for Stockton, based on the National Child Measurement Programme as well as GP based BMI information for adults. Key documents that are informing this agenda include the DH Healthy Lives, Healthy Weight (HWHL) guidance and the Foresight report. The Young People’s Health Select Committee has recently produced a scrutiny report on obesity across the whole life span that will help drive this agenda, and this will take place in the strategic framework of HWHL. An event is due to take place 28 July with key stakeholders to discuss the way forward. Gaps will be identified and topic areas will be discussed to see if new forums are to be introduced or if key actions can be taken forward in existing forums.</p>	
8	<p>Stockton Smokefree Alliance Action plan- Mike Batty</p> <p>MB presented an overview of the action plan and explained the context for it. It works in conjunction with the prevention and cessation services as well as on tobacco control.</p>	
9	<p>Developing integrated Sexual Health Services- Ali Wilson</p> <p>AW explained the recent key activities for addressing gaps and issues in sexual health services in Stockton and across Teesside. Following a National Support Team for Sexual Health visit, an extensive needs assessment was carried out across Teesside. This has resulted in a comprehensive service specification for Integrated Sexual Health Services being developed. It is currently in the tendering and procurement process. This will ensure a coordinated approach to providing the highest quality and most accessible sexual health services for the people of Teesside.</p>	
10	<p>Comprehensive area assessment focus on inequalities- Lesley King</p> <p>LK explained the role of the Comprehensive Area Assessment. It aims to be “a catalyst for better local outcomes” focusing on</p> <ul style="list-style-type: none"> • Local priorities • Outcomes • People and places-not organisations • A comprehensive and joined up approach • Rationalising and reducing inspection. <p>Some key challenges to health inequalities identified by the process to date include alcohol, breastfeeding, substance misuse, childhood obesity, teenage conceptions, and inequalities in life expectancy. The information from the CAA report will assist with identifying cross-cutting work on health outcomes and health inequalities – building on previous</p>	

	work of national support team visits and audit commission reports.	
11	<p>Any other business</p> <p>CW informed members that this meeting is the last for Elizabeth Shassere, DPH, who will be going to Barnsley Primary Care Trust and Barnsley Metropolitan Borough Council to take up the post of executive DPH.</p> <p>ES pointed out that the latest edition of the Health Improvement Team newsletter "HIT for Health" as well as copies of the summary business plan were available.</p> <p>Next meeting will be held 26th October 2009, 1215-230, venue tbc.</p>	

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