

Title: Health and Wellbeing Partnership Board		Meeting No:
Date: 25 th October 2010	Location: Castlegate Quay Watersports Centre	Duration: 12.30 pm – 2.30 pm
<p>Attendance Chair – Graham Prest, Chair, NHS Stockton-on-Tees Mike Batty – Head of Community Protection, Stockton Borough Council Councillor Jenny Beaumont – Cabinet Member, Stockton Borough Council Councillor Ann Cains – Chair of Health Select, Stockton Borough Council Councillor Suzanne Fletcher – Stockton Borough Council Leon Green – Public Health, NHS Tees Liz Hanley – Interim Head of Adult Strategy, Stockton Borough Council / NHS Stockton Ruth Hill – Assistant Director of Health Improvement, NHS Stockton / Stockton Borough Council Jane Humphreys – Corporate Director, CESC / SBC David Levy – Director of HR & OD, Tees, Esk and Wear Valley NHS Trust Richard Poundford – Head of Regeneration and Economic Development, Stockton Borough Council Maureen Rigg – Chair, Western Area Partnership Board Paul Thomas – Chair, Central Area Partnership Board Simon Willson – Head of Performance, Stockton Borough Council (CESC)</p> <p>In Attendance Louise Southern – Note Taker</p>		
Para No		Action
1.	<p>Welcome and introductions:</p> <p>GP welcomed members to the meeting.</p>	
2.	<p>Apologies:</p> <p>Apologies were received from Lesley Cannon, Annabel Turpin, Jim Beall, Jonathan Berry, Ingrid Ablett-Spence, Chris Wills, Peter Seller, Carole Langrick, Melanie Howard, Reuben Kench, Ian Harrington and Susan Clelland.</p>	
3.	<p>Minutes of the last Meeting:</p> <p>The notes of the meeting held on 26th July were agreed as a true and accurate record subject to the following amendment:</p> <p>Jane Humphreys omitted from list of apologies.</p>	
4.	<p>Matters Arising</p> <p>Item 7 - Tobacco Alliance - launch event planned. Health Improvement representatives are currently attending Area Partnerships to discuss illicit smoking.</p> <p>Item 9 – Housing Contribution of Health - slides were circulated.</p> <p>Item 10 - Fair Access to Care – consultation now complete with</p>	

	report to Cabinet in November.	
5.	<p>Stock Take of Health White Paper</p> <p>RH gave an overview of the feed back which was fed into the consultation process. As part of various discussions and facilitated work there were a number of comments around managing the transition. This included the awareness and input of health improvement and connectivity with partners. There were key issues around training and support and ensuring dialogue with key people takes place.</p> <p>RH suggested that the Health Wellbeing Management Team would be the appropriate forum to look at key areas for review, looking at next steps and managing the transition. The group were asked to consider running another Partnership session once the White Paper is published at the beginning of December. It was agreed this would be held in January.</p> <p>SF queried LINKs and the Care Quality Commission and asked what the rebranding would involve. RH reported that there is currently lack of clarity around how LINKs would move to Health Watch however there would probably be a new specification to go out to the marketplace. There will be additional functions for Health Watch around advocacy, enabling people to undertake choice (GP practice etc) and a widening of focus to include children.</p> <p>AC gave feedback from Health Overview and Scrutiny around concerns on the lack of accountability of the Health and Wellbeing Board and highlighted that there needs to be clarity between delivery, commissioning and the role of Health Overview and Scrutiny.</p> <p>RH reported that there were further consultations around choice and information that had been published in light of Equality and Excellence: Liberating the NHS.</p>	RH
6.	<p>Quarter 2 Performance Report</p> <p>SW updated that this was a joint Health / Local Authority report.</p> <p>The report provides a mid-year update on available data and SW gave overview of emerging issues.</p> <p>JB suggested it would be interesting, through the National Childhood Measurement programme work, to track cohorts through schools. MR asked the group to consider attendance from a school representative to review targeting etc. RH updated that the Healthy Weight, Healthy Lives Group includes attendance from a range of stakeholders including school representation which provides a forum for these discussions.</p> <p>SF raised the following:</p> <ul style="list-style-type: none"> • The Select Committee is looking at the provision of school meals. One of the schools visited indicated that healthy school meal provision and healthy school activities had had a positive impact on obese children. 	

	<ul style="list-style-type: none"> The Mental Health and Wellbeing target does not cover the high number of male suicides. JH updated that target was a children's target around current performance Child, Adolescent Mental Health Services. There currently appears to be a lack of pre-diabetes testing - RH reported that through the Healthy Heart Programme / Life Check all GPs will be targeting those who are at high risk in the first cohort with a phased approach. RH to provide figures a programme of work with the BME community is also planned around awareness raising. <p>AC queried whether Chlamydia screening has to be carried out in a clinical setting. RH reported on the "pee in the pot" campaign as well as work undertaken in GP practices. RH to provide more in-depth information at the next meeting. JH highlighted the importance of capturing different age ranges with screening messages.</p> <p>JH highlighted that as details of the Comprehensive Spending Review become clearer there will be a need to revisit priorities.</p>	<p>RH</p> <p>RH</p>
<p>7.</p>	<p>Joint Strategic Needs Assessment</p> <p>LG gave a presentation on the current position regarding the JSNA.</p> <p>A copy of the paper "Extremes of Health in Stockton on Tees" was tabled.</p> <p>The final Reference and Summary documents will be available by 5th November and following submission to the PCT Boards and Cabinet will be available online.</p> <p>AC commended the inclusion of ex-service personnel against vulnerable groups and updated that the Regional Overview and Scrutiny are looking at the needs of ex-service personnel. RH confirmed that people with sensory loss are considered in the in the reference document.</p>	
<p>8.</p>	<p>Emerging Issues from Comprehensive Spending Review</p> <p>RH gave an overview of headlines.</p> <p>A copy of the Local Government briefing "The Spending Review 2010" was tabled.</p> <p>JH emphasised that there is a need to have more detail to understand the full implications.</p> <p>RP highlighted that the connections and correlations between financial inclusion and exclusion are apparent and the impact of the public sector cuts on employment will require even more focused work on assisting private employment.</p>	
<p>9.</p>	<p>Priorities for Partnership Group Work</p> <p>The meeting split into groups to consider priorities and areas of focus.</p>	

	Principles applied to reviewing priorities / opportunity to look at a framework on what is important, what we need to continue, what may not need to continue. (See attached facilitation notes).	
10.	<p>Agenda Items for Next Meeting:</p> <ul style="list-style-type: none"> • Health Everybodies Business – presentation on project work learning. Meeting to start at 12 noon with lunch provided. • Suicide Prevention Plans – Denise Colmer, Tees & Durham Suicide Prevention Co-ordinator to attend. • Sexual Health, Teenage Pregnancy • Alcohol NST Visit / Update – feedback on visit to Stockton, Redcar and Cleveland and Hartlepool w/c 18th October. 	
11.	<p>Any Other Business</p> <p>A Children's Inspection was undertaken by OFSTED in September. The PCT, NTHFT and TEWV will receive their own separate report. The team rated Looked After Children as 'good' and Safeguarding as 'adequate'.</p> <p>Adult Inspection took place in July, good across 3 outcomes. Report published on CQC website on Friday.</p> <p>MB highlighted the large scale consultation on community services priorities which received over 5,000 responses. Drug Related Offending dropped down from top two for first time down to number four. Alcohol relating Offending comes in at 2. Indicative of changes. Anti-social behaviour is number 1.</p> <p><u>Awards</u></p> <p>RH reported that the Celebrating Diversity Awards have taken place which cover the North East. Stockton Health Improvement Team won an award for "Contribution to Health". Ruby Poppleton won the award for "Contribution to the BME Community". Zumrat Khan won the "Best Woman Networker" award.</p> <p><u>PCT CEO</u></p> <p>Chris Willis is currently on sick leave. The four Chairs have appointed Stephen Childs in an Acting position from today until the end of February. JH asked for a formal note to be forwarded in order to inform Elected Members – GP to action. AC asked for best wishes to be given to Chris Willis.</p>	
12.	<p>Date and Time of Next Meeting</p> <p>The next meeting will be held on 24th January 2010 at 12.00 noon at Castlegate Quay.</p>	