

## Minutes

### Health & Wellbeing Partnership

Tuesday, 12th June, 2012, 1.00pm at Jim Cooke Conference Suite, Stockton Central Library, The Square, Stockton on Tees,  
TS18 1TU

#### **Chair:**

Mr Alan Foster (Chairman)

#### **Members:**

Darren Best, Cllr Mohammed Javed, Cllr Ken Lupton, Cllr Mrs Maureen Rigg, Paul Whittingham, Emma Champley, Mark Eltringham, Dianne Gage, Peter Clark, Jim Scollen, Paul Thomas, Mike Batty, Dave King, Allison Agius, Ruth Hill, Leon Green..

#### **Apologies**

#### **Members:**

Lesley King, Victoria Cooling, Khalid Azam, Jane Harvey, David Brown, Tony Churchill, Ali Wilson, Bhadresh Contractor, Dr Paul Williams, Cllr Barbara Inman, Reuben Kench, Richard Poundford, Chris Willis.

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ITEM/ISSUE	ACTION
<b>HWP</b> <b>18/12. Welcome and Introductions</b>	
<b>HWP</b> <b>19/12. Declarations of Interest</b>	
<b>HWP</b> <b>20/12. Draft Minutes of Previous Meeting - 12th April 2012</b>  Members were provided with the draft minutes of the meeting held on 12th April, 2012.  <b>Comments and Decisions</b> AGREED that the minutes of 12th April 2012 were agreed as a correct record.	
<b>HWP</b> <b>21/12. National Policy Updates</b>  Members were provided with the highlights of recent updates around national guidance for the NHS reforms and any relevant policy changes for health and wellbeing issues.  <b>Comments and Decisions</b> AGREED that the content of the report be noted.	
<b>HWP</b> <b>22/12. Clinical Commissioning Group Authorisation Update</b>  Members were provided with an update on the CCG authorisation. It had been confirmed that we would be operating as the Hartlepool & Stockton on Tees CCG with a strong locality focus. There would also be a South Tees CCG. The constitution for the Hartlepool & Stockton CCG was currently being produced and would be available shortly.	

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<p>A small project group had been established to ensure that everything was on track, as it was a national requirement that CCG's be established by April 2013. All of the required evidence needed to be submitted by 3rd September 2012. A decision would be received by January 2013 indicating one of the following three outcomes:-</p> <p>Authorised and meets all criteria Authorised with conditions Established but not authorised</p> <p>Members requested that they receive a copy of the schematic indicating the progression of roles and responsibilities from the PCT and SHA into the CCG and other NHS structures.</p> <p><b>Comments and Decisions</b> AGREED that the update be noted and a copy of the schematic be forwarded to Members.</p>	RH
<p><b>HWP</b> <b>23/12. Progress on Public Health Transition</b></p> <p>Members were provided with progress on the Public Health Transition Plans. A copy of the Local Authority Level of Preparedness was provided for information purposes.</p> <p><b>Comments and Decisions</b> AGREED that the update be noted.</p>	
<p><b>HWP</b> <b>24/12. Obesity Presentation</b></p> <p>Members were provided with a presentation by Ruth Hill on Obesity.</p> <p>An overview of obesity structures and current service provision was provided. The recommendations from the</p>	

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<p>Joint Strategic Needs Assessment (JSNA) 2012 were provided. Members held discussion on the National Child Measurement Programme (NCMP).</p> <p>Members considered what needs were unmet and the following questions for discussion:-</p> <ul style="list-style-type: none"><li>- What key issues are a concern for you/your organisation?</li><li>- What way can you help support this agenda?</li><li>- What additional elements/information do you need?</li></ul> <p>Members raised the following points/issues:-</p> <ul style="list-style-type: none"><li>- Opening of school facilities and grounds</li><li>- Healthy eating education in schools</li><li>- Encourage more take up in school meals</li><li>- Improve breastfeeding figures</li><li>- More play areas and outdoor gym equipment</li><li>- Voluntary sector activities</li><li>- What are Employers doing to encourage exercise/healthy eating?</li><li>- Consideration of the psychological factors/many obese or underweight people have mental health issues</li><li>- Access to services</li><li>- Child Protection issues</li></ul> <p><b>Comments and Decisions</b> AGREED that the presentation and comments be noted.</p>	
<p><b>HWP</b> <b>25/12. Health and Wellbeing Strategy Update</b></p> <p>Members were provided with a copy of the Health and Wellbeing Strategy structure. The paper outlined the work that was being undertaken around the Joint Health and Wellbeing Strategy. There had been a general endorsement at the last Joint Board and Partnership meeting that the Strategy should broadly mirror the Marmot</p>	

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<p>Review Fair Society Healthy Lives. Therefore, further work had been undertaken to align the issues identified from the JSNA into the strategy based on the Marmot themes. Members were provided with the proposed format and structure.</p> <p>Members were requested to submit any comments over the next week to enable a further draft to be circulated prior to the final submission on 2nd July 2012.</p> <p>Members requested to see statistics on take up of jobs through Job Centre Plus. Peter Clark would supply this information to Members.</p> <p><b>Comments and Decisions</b> AGREED that comments be submitted to Ruth Hill on the Strategy and Peter Clark supply further information from Job Centre Plus.</p>	PC
<p><b>HWP</b> <b>26/12. Finance</b></p> <p>Members were provided with a report that outlined the agreed investment in Public Health initiatives for 2012/13.</p> <p>Some discretionary non-recurrent investment was also identified by the PCT at year-end, which had supported some additional programmes of work aligned to the Health and Wellbeing Strategy and Needs Assessment.</p> <p>It should be noted that this was a high level assessment of the range of programmes commissioned by Public Health. Further detail around the potential risks, contract issues will be considered by the Health and Wellbeing arrangements following the detailed work. This would also align to the commissioning cycles so that there could be a clear plan/ timetable for investment or decommissioning dependent on the circumstances of the budgets and identified priorities.</p> <p>There was a sum of approx. £250,000 that was not allocated in this financial year. It was proposed that a bidding process be developed to enable organisations to progress non-recurrent schemes that match with the needs identified within the JSNA and emerging priorities within the Health and Wellbeing Strategy. The Health and</p>	

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<p>Wellbeing Management Team would agree the process and oversee this approach. Partners were requested to note this initiative and comment on any elements that needed to be considered as part of the plan. It was proposed that a process be developed over the next month to progress this initiative.</p> <p>There remained some programmes where there was some volatility in the contracts and elements such as prescribing or cost per case could make it difficult to accurately predict demand and impact on the financial year end position. It was proposed that if there was any slippage on these funding streams towards the year end, the process for bids undertaken in the summer months also identified schemes that may be “reserves” that could be progressed once the year end position was clearer.</p> <p>The Public Health allocation had been identified for 2013/14 but there remained risks in the long term allocation and potential changes to the funding formula. At this stage there was no further information on the funding formula beyond 2014. There would be further work in reviewing contract risks and liabilities.</p> <p>A health premium was also proposed within the White Paper but there remained little detail about how this would work in practice.</p> <p><b>Comments and Decisions</b> AGREED that:-</p> <ol style="list-style-type: none"><li>1. The funding allocations for 2012/13 be approved.</li><li>2. The non recurrent bidding process for non allocated funds be approved.</li><li>3. The Health and Wellbeing Management Team oversee the process for taking forward this funding allocation.</li></ol>	
<p><b>HWP</b> <b>27/12. Governance Arrangements</b></p> <p>With the introduction of Health and Wellbeing Board (HWB) and Health and Wellbeing Partnership (HWP) and the recent agreement to disband the Children’s Trust Board (CTB), the reporting and governance arrangements of the related substructures had changed and needed to be fit for purpose.</p> <p>There were a number of Council led structures that involved and engaged various partners and equally there</p>	

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<p>would be a number of CCG structures with input from LA representatives. The accountability of these structures was important. We also needed to ensure we do not duplicate arrangements nor exceed local delegated decision making limits or operate in a vacuum.</p> <p>Members were provided with a paper that outlined the proposed arrangements and notes where future changes may develop as further NHS changes were clearer with regard to their impact.</p> <p><b>Comments and Decisions</b> AGREED that the changes be noted and that further updates be received.</p>	
<p><b>HWP</b> <b>28/12. Any other business</b></p> <p>Disability Living Allowance</p> <p>Members were informed that as part of the proposed changes to DLA the process for vulnerable people may change. The consultation process would close on 30th June 2012. It was requested that Members visit the DWP website to provide their comments.</p>	
<p><b>HWP</b> <b>29/12. Date and Time of Next Meeting - Tuesday, 11th September at 1pm, Education Centre, Norton</b></p>	