

MINUTES of the meeting of the Health and Care Partnership held at Brockington, 35 Hafod Road, Hereford on 23rd January 2006 at 10.30 a.m.

Present:

Chairman: Mr E.G. Willmott
Vice-Chairman: Mrs L.O. Barnett

Herefordshire Council Elected Members:

Ms M.D. Lloyd-Hayes, R.J. Phillips

Officers:

Ms S. Fiennes (Director of Children's Services)
Mr G. Hughes (Director of Adult and Community Services)

Herefordshire Primary Care Trust:

Mr P. Bates (Chief Executive), Ms F Howie (Associate Director of Public Health),
Dr I. Tait (Chair of the Executive Committee)

Hereford and Worcester Ambulance Trust:

Ms J. Newton (Chair)

Other Member Representatives:

Ms J. Francis (Chair of the Alliance), Dr P. Soilleux (Chair of HHT PPI Forum), Mr J. Wilkinson (Chair of PCT PPI Forum)

In Attendance:

Mr A. Blundell (Herefordshire Council), Ms Y. Clowsley (PCT), Ms S. Doheny (PCT), Mr S. Hairsnape (PCT), Ms J. Howard (PCT), Ms L. Selfe (Herefordshire Council),
Councillor W.J.S. Thomas.

22. APOLOGIES FOR ABSENCE

Apologies were received from Mr R. Hamilton (Chief Executive of Hereford and Worcester Ambulance Trust) Mrs C. Moore (Chair of Hereford Hospitals Trust), Mr D. Rose (Chief Executive of Hereford Hospitals Trust), Councillor D. Rule MBE, and Councillor R.V. Stockton.

23. NAMED SUBSTITUTES

None.

24. DECLARATIONS OF INTEREST

None.

25. MINUTES

RESOLVED: that the minutes of the meeting held on 13th October 2006 be approved as a correct record and signed by the Chairman.

26. JOINT HEALTH AND CARE COMMISSIONING GROUP BRIEFING NOTES

The Partnership received a report on issues dealt with by the Joint Health and Care Commissioning Group, and the report indicated where further information could be obtained.

During the ensuing discussion, the following additional or key points were raised:

- **Public Services Trust:** Mr P. Bates apprised the Partnership of issues relating to the proposal for a Public Services Trust (PST). Within the framework of the national consultation, the Strategic Health Authority would be assessing how the various health trusts would cope with proposed management cost reductions and whether they were fit for their purpose. The PCT and Management Team had focussed on the issues from an early stage, and were agreeing a way forward. To this end, a joint workshop had been arranged with the Council, which would present an opportunity to look at the issues in detail. In addition, Ms S. Fiennes and Mr G. Hughes had drafted a paper on the PCT's proposals, written from a Local Authority perspective, to be presented to the Corporate Management Team. The paper highlighted issues surrounding the Local Strategic Partnership and the various Trusts and how they would fit into the model, and it also presented a process for engaging Members of the Council. It was envisaged that, after completion of these two pieces of work, all involved parties would have formed a much clearer picture of what might form the basis of a local PST model.

Ms S. Fiennes confirmed that the Children and Young People's Partnership Board would also form part of the model, and that careful thought was being given to the most effective way of achieving this.

Councillor Mrs M.D. Lloyd-Hayes indicated that Herefordshire Councillors would benefit from a brief resume of meetings and discussions on the model, so that they could feed information to the public as a way to assist the consultation process.

Councillor R. Phillips stated that the consultation process was an important opportunity to explore issues relating to the SHA. He reassured the Partnership that Cabinet would be involved in the process, and stressed the importance of developing an effective local model that addressed the fundamental issues and the differences presented by a rural area. It was a unique opportunity to develop an efficient joint-working model which provided the best possible health outcomes for the local community.

Ms J. Newton reported that the Ambulance Trust Board was due to discuss the issues during the next week, and in particular the possibility of merging four local Ambulance Trusts. She said that the Hereford and Worcester Ambulance Trust would continue to stress the importance of addressing rural issues, which had a unique and significant impact on the way the service was geared.

Mr S. Hairsnape added that the Section 31 Agreements would continue to be developed as part of the PST model, due to the benefits that they had provided locally. This would present certain challenges, particularly relating to pooled funding and ensuring it met the right needs, and risk management (getting a clear understanding of who was responsible for what).

RESOLVED: that the report be noted.

27. REVIEW OF EXPENDITURE AGAINST THE PARTNERSHIP FUND 2005-2006

The chairman agreed to consider an additional report on the Partnership Fund 2005-2006 on the grounds of urgency.

Ms Y Clowsley presented information on the spend and commitments for the main schemes for 2006-2007, which included:

- The Alliance;
- Children with Disabilities;
- The Community Equipment Store;
- Small Schemes;
- The Hereford Partnership;
- Occupational Therapist – Housing.

She also indicated the agreed developments carried over from 2005-2006, and new developments funded for 2006-2007 (which were both to be ratified by the Joint Health and Care Commissioning Group - JHCCG). She also provided information on the National health and social care priorities issue by the Department of Health.

She reported that these matters, managed through the Health and Care Partnership, had been complicated by the fact that the JHCCG was not responsible for the remit of the Children and Young People's Partnership Board. She said that the Partnership had an opportunity to comment on the various proposals and issues in her report through the JHCCG, which would meet on 23rd March 2006.

RESOLVED: that the report be noted.

28. THEME FOR THE MEETING – CHILDREN'S SERVICES

The following presentations were received:

Children's Services Development (Including Joint Area Review (JAR) Update)

Ms S. Fiennes presented in detail the Joint Area Review of Service for Children and Young people, and she explained its key outcomes. Some service areas had been deemed good (for example Education standards had achieved above the national average, outcomes for Children and Young People were good, and so was the Council's approach to securing the health of children)), and some adequate. One area of the Child Concern Model – "Staying Safe" - had been deemed inadequate. This meant that the measures taken to keep Children and Young People safe needed improvement. Specifically, in 2 out of the 12 measures used to assess Staying Safe, delivery was found to be ineffective. The concerns centred on the risk carried by professionals and organisations, and the support mechanisms in place at the Level 1/2 boundary (critical and substantial), particularly in relation to setting up Child in Need meetings. In addition, the JAR had highlighted a need to improve overall coverage of support for Children and Young People in certain areas of Herefordshire (e.g. those areas not covered by a support programme such as Sure Start).

Ms Fiennes said that these issues were being tackled in the following ways:

- Improvements to support and joint assessments (especially for children and families with disabilities);
- More staff training;
- Improving service management and capacity;
- Continued building on partnership working, because this had been a positive feature of the Child Concern Model;
- Improving performance management.

She provided the detailed timetable for improvement planning, which indicated each measure to be taken, and by when. The first step would be to agree priorities, and this would be done on 31st January 2006. The timetable went through to March 2006 and would be reviewed at the end of the period. The key goal was to achieve an evidenced improvement by the time of the Annual Performance Assessment, due in Summer 2006. She added that all parties were determined to assist in making the improvements.

Children's Services Plan

Ms L. Selfe, Change Manager, updated the Partnership on the progress made with developing the Children and young People's Plan (C&YPP). Central Government had indicated what it considered need to be included in the Plan, and also there had been significant input from involved organisations. At this stage, the key priorities were:

- Integrating services;
- Implementing the Herefordshire Child Concern Model;
- Addressing the outcomes of the JAR;
- Maintaining the services that were already good (e.g. Education);
- Improvements – for example, addressing needs of the Vulnerable, Mental Health, reducing ASBOs, provide more recreational opportunities.

The C&YPP was available on the Council's website, and consultation was continuing. The Council had also specifically involved Young People in the consultation, and Ms Selfe and Councillor D. Rule MBE had met with up to 70 of them to gather their views.

Local Area Agreements (Children's Section)

Ms A. Blundell, Change Implementation Officer, reported on the Local Area Agreements (LAA) relating to Children's Services, which had been devised to deliver both National and Local priorities over a 3 year period. The Agreements presented an opportunity to streamline funding, and in year one, to move towards using a single budget.

The LAA is designed to increase involvement of the Voluntary Sector. The approach was to build on existing initiatives, and complement priorities throughout Children's Services, in order to minimise bureaucracy. For this reason the LAA had closely shadowed the C&YPP, and had ensured a consistent approach to the JAR and the JAR Improvement Plan. Examples of LAA key priorities were:

- Focussing on family support from the Voluntary Sector, and highlighting levels of intervention;
- Improving academic outcomes;
- Providing greater training opportunities for Children and Young People, especially vocational training;
- Providing positive support for Youth Offenders.

Child and Adolescent Mental Health Services (CAMHS)/Health Development

Ms S. Doheny, Locality Manager, highlighted the work of CAMHS in Herefordshire. CAMHS were being managed in a variety of ways, specifically:

- Multi-agency CAMHS Strategy Group;
- Though a Joint Investment Plan, which fed into the Child Concern Model and the National Service Framework;
- CAMHS Management Group – again, multi-agency.

The Services were provided in 4 tiers:

1. Early intervention in schools;
2. Therapy;
3. Specialist Services (the Linden Team at Gaol street, Play Therapists, the Youth Offending Team, the Looked After system);
4. In-Patient unit. Commissioning at this level was currently out of county. This was because there had been insufficient inpatient demand in the past, although that demand was increasing through more referrals. The ultimate aim was to build a specialist unit to prevent the need for travelling long distances.

In addition to the above, Ms Doheny was looking to provide services in more effective and helpful ways, which addressed the issues most pertinent to Children and Young People. Specialist outreach teams were now in place to deal with the growing trends in eating disorders and depression. She said that she had arranged a Web cam meeting with Young People, to give them an opportunity to shape the Service and tell her what they thought was best for Herefordshire.

During the ensuing discussion on Children's Services, the Partnership made the following key points:

- There were specific targets in relation to 14-19 Year-olds, however, it was important to bear in mind that people younger than this were now also in need of support and children felt disenfranchised at an earlier age. Ms Fiennes assured members that the 14-19 targets were very specific, and that issues affecting younger people were also included in service provision and improvement. She reported on a recent telesurvey conducted amongst young people in relation to their views on safety in Herefordshire. She said that she would make it available to anyone requesting it.
- It was imperative to provide sufficient resources and skilled staff to detect problems and intervene as early as possible.
- In respect of the "Staying Safe" issues, it was important to realise that some of the improvements focussed on management action, not just resources.
- Ms Fiennes confirmed that Parish Plans were available and could provide information on local issues.
- Herefordshire had unique and significant problems caused by its rurality. It was vital to be able to evidence this, and its link to poverty.

RESOLVED: that the reports on Children's Services be noted, and the Partnership endorses the view that improving issues in relation to "Stating Safe" be given top priority.

29. DATE OF NEXT MEETING

Members noted that the date of the next meeting of the Health and Care Partnership would be held on Wednesday 26 April 2006 at 10:30 a.m. It was suggested that the following issues be discussed:

- Update on Children's Services and JAR
- Update on commissioning of Patient-led NHS;
- Update on Public Services Trust
- Update an Local Area Agreements

The following dates of future meetings were agreed (all at 10:30 a.m. in the Council Chamber at Brockington):

- Monday 24th July 2006
- Friday 27 October 2006
- Friday 26 January 2007
- Wednesday 11 April 2007

The meeting ended at 12:45 p.m.

CHAIRMAN