

Minutes of the Public Health Partnership Board Held on Monday 4 September 2006, Town Hall

Present: Dr Dorothy Birks (Chair), SW PCT
Cllr Ian Ashmore, Sheffield City Council
Frances Burton, Sheffield Wildlife Trust
Frances Cuning, SE PCT
Nick Pearson, SOHAS
Dr Jeremy Wight, N PCT

In Attendance: Andrea Kanaris, Health Partnership Team
Karen Webster, Health Partnership Team

Apologies: Liz Cook, Sheffield City Council
Evelyn Milne, Sheffield City Council
Dr Graham Davies, Sheffield Teaching Hospitals
Kieron Williams, Sheffield City Council

1. Welcome & Introductions

The Chair welcomed Andrea Kanaris to the group who was attending for Kieron Williams. Introductions were made.

2. Matters Arising

- 1 The new Chair for the single PCT had not yet been appointed, nor has a Chief Executive. The transition project is still underway and there will be an interim Chief Executive during this time.
- 2 The Joint Director of Public Health post has been discussed and informal feedback suggests that there is serious commitment to this position and consultation will be taken further by PCT and SCC Chief Executives.
- 3 It was noted that domestic abuse is included in the full version of the Children & young People plan. The final document would contain the briefing plan and the summary combined with the inclusion of some demographics. The completed document would go to the PHPB for discussion. Important to focus on links with Enhanced Public Health Programmes for work within the LAA.

Minutes

- § Ian Ashmore did not attend the last meeting and should have been listed in the apologies. The minutes will be corrected to reflect this.
- § Clarity was sought on the action point on page 2 of the last minutes. The minutes were in error and Frances Burton, not Frances Cuning was supposed to act on this point with Nigel and Nick. The minutes will be corrected to reflect this.

1.	Ian Ashmore to be moved to apologies list and Frances Burton to replace Frances Cuning for action point on page 2 of June minutes. Future minutes to be page numbered.	ACTION KW
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3. LAA Healthy Communities Program 6 Month Review

Jeremy Wight presented the review paper, which gave a brief overview of the roll out areas in Appendix 2. It also showed the proposed performance management arrangements in Appendix 5, which required agreement. The group was also asked to acknowledge that the mandatory health indicators for LAAs had been changed and to approve the proposed expenditure of NRF funding in Appendix 7. There were also some comments on the mid year review in Appendix 8. Any further comments on the paper to Jeremy Wight by noon 5th September 2006, in order for it to go to the Sheffield First Health & Well-Being Board.

The Performance Management Framework was discussed with the following comments:

Appendix 5

- § The basket of indicators includes educational attainment, so it is not necessary to include this in the third tier.
- § Measures are only included if data is available for them
- § Representatives from all LAAs should meet before the mid year review to ensure that all points are properly covered.
- § Surestarts and Children Centres could possibly provide information on nutrition, etc.
- § There are many social issues targeted as well as medical issues.
- § Accident figures at a neighbourhood level are not robust enough for inclusion within these measures.
- § It was agreed to expand the introduction to include the reasons why some measures have not been included.
- § Emergency Admission rates cover all ages, but this will be changed to cover adults only.
- § The rehabilitation areas should be named.
- § There is an absence of resource to take forward the smoke free homes area. There is currently a bid in for more funding, but this may not be enough for any useful work.
- § All workplaces will be smoke free from next year. The group will work to raise awareness of this.

2.	It will be recommended to SFWH Board that LAA representatives meet before the mid year review to ensure points are covered.	ACTION JW
3.	The introduction will be expanded to explain why some measures have not been included.	ACTION JW
4.	The paper will be amended by noon of 6 th Sept for inclusion in the SFWH Board.	ACTION JW

Appendix 7

- § PHPB will commit itself to a November deadline on life expectancy and all age all cause mortality rates.
- § NRF funding: from the original allocation of £200,000 for each of 06/07 and 07/08, £150,000 in each year had been allocated to three of the trailblazer

areas. This left £100,000 (£50,000 in each year) allocated for the development of EPHPs. In addition to this, there is an additional £180,000 available in 07/08. It was agreed that these funds should be used to support the development of phase 2 and 3 areas, across both years.

5.	Ann Allen would be asked to provide feedback on NRF and the decisions that have been agreed.	ACTION AK
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Appendix 8

- § It was agreed that the template should be completed by 30th September 2006.
- § There are finance and capacity problems in this area. The record of resources is incomplete.

The Performance Management framework with minor amendments would go to the SFWH Board.

4. Health Impact Assessment

The report recommends two approaches:

- To develop recommendations and mitigation strategies that are designed to enhance positive impacts and minimise negative impacts of policies, programmes and projects.
- That PHPB arrange to scope potential HIAs and recommend appropriate HIAs to the SFHW Board.

The PHPB agreed these recommendations.

6.	Health Impact Assessment will become a standard agenda item.	ACTION KW
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Any information required about the current HIAs can be obtained from Andrea Kanaris.

5. Smoking Cessation

A brief overview of the action plan to deliver 4 week smoking quits was given and members were asked if they had any major concerns. The paper was ratified by the Board.

6. Public Health and the Voluntary Community & Faith Sector

Nick Pearson gave a brief overview of the paper, which identified the strengths and range of the voluntary sector, what it can offer, and how it can work in partnership with the health sector to help reduce health inequalities.

It was agreed that more could be achieved in partnership and the paper went on to outline how joint working could be achieved, eg, more collaboration at the planning stage of a piece of work and more information collection at community level.

It was noted that priority setting is a political process for the NHS. There is scope for joint working, especially at the planning stage of a piece of work where the VCF sector could exercise some influence.

The PHPB endorsed the progression of joint strategic work and service delivery between Health and the Voluntary Sector, outlined in the Health Compact, which has already been signed by the current 4 PCTs. It was suggested to take the Compact to the single Sheffield PCT so it can sign up to it.

Thanks were given to Nick and Frances for the paper, which was very informative and it was hoped that its aims would be taken up.

7. Any Other Business

The Communities for Health funding bid, delayed from last year, has been amended and resubmitted, as there is now a reduced amount of money on offer - £100,000 for this year with no further monies after that. Although the bid has already been submitted, any comments to Jeremy Wight would still be welcomed.

7.	Copies of the amended Communities for Health bid will be circulated to members.	ACTION JW KW
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8. Date of Next Meeting

18th October 2006, 1.30-3.30pm at the Town Hall.