

ACTION SHEET FROM HEALTHIER COMMUNITIES PROGRAMME BOARD
3rd June 2008

Agenda Item	Action	Responsible
Item 1 – Notes of Previous Meeting	Annual Performance Review – Smoking Tobacco Control Lorna Payne and Katherine Gronqvist to meet with Ian Wake to take forward and determine what other actions partners can take to reinforce the good work of PCT.	Lorna Payne/ Katherine Gronqvist/Ian Wake
Item 2 – Annual Performance Review	Further discussion is needed on how delivery groups will deliver on the actions in the LAA.	Lorna Payne/Katherine Gronqvist/ Delivery Leads
	Board to receive a briefing note for the next meeting giving the status of all LAA Performance Indicator's (2007 and 2008) and advising on any proposals to review which Performance Indicator's are subject to continuous monitoring.	New HCPB Manager with Delivery Leads
	Board Balanced Scorecard developed.	New HCPB Manager
	LAA Delivery Leads to provide information on missing LAA 07 Annual Performance Review.	LAA Delivery Leads
Item 3 -Health and Well-being Implementation Plan	Roger Harris, Ian Wake and Delivery Group chairs to provide guidance on draft 2 of the Health and Well-being Implementation Plan.	Roger Harris/Ian Wake/Delivery Group Chairs
	Fola Agoro to co-ordinate meeting in June.	Fola Agoro
	Jana Burton to send information on older people to be used as part of the plan.	Jana Burton
	Mary Low to be added to Health and Well-being Group.	Fola Agoro
Item 4 – CSCI Action Plan	Updated CSCI Action Plan Report to be brought back to September meeting to be discussed in further detail.	Roger Harris
Item 5 – Putting People First Consultation	Members to take back to their organisations and come back with their responses to the consultation document	All
	To be brought back in September meeting for further discussion to a consultation response being made on behalf of the Board	Roger Harris/Jana Burton

Agenda Item	Action	Responsible
Item 6 – Delivery Group TOR	Delivery groups to meet in July to review membership	All Delivery Group Leads
	Katherine Gronqvist to confirm membership and chair of the Health and Well-Being group.	Katherine Gronqvist
	Simon Black to confirm that we have the right TOR for the Older People's Partnership.	Simon Black/Fola Agoro
	Learning Disabilities – No PCT representation as of April. Roger Harris to speak to Barbara Stuttle about this.	Roger Harris/Barbara Stuttle
	Safeguarding Group – Updated TOR to be circulated.	Fola Agoro
	Lorna Payne/Katherine Gronqvist to meet and discuss gap in delivery around long-term conditions and disabilities and what is needed around this.	Lorna Payne/Katherine Gronqvist
	Mental Health – Roger Harris meeting with Barbara Stuttle and to bring back joint paper on TOR.	Roger Harris/Barbara Stuttle
	Capital Infrastructure – Proposal to create new delivery group agreed. Selena Bolingbroke to consult with Pam Court on chair and membership.	Selena Bolingbroke
Item 7 – ISTC and Grays Community Hospital	Mel Porter to provide a progress report on Grays NGCH at the next meeting.	Mel Porter
Item 8 – Building Capacity in the third sector	Roger Harris and Katherine Gronqvist to meet up to discuss issue of capacity raising in the third sector and the need to co-ordinate joint funding for new actions and link into the Health and Well-Being Implementation Plan.	Roger Harris/Katherine Gronqvist
Item 9 - LINKS	Commissioners ensure that providers are encouraged to attend workshop. Darlene Martin to arrange this.	Darlene Martin/Levi Hinds

Attendees:	Job Title	Member/Observer	Attended?
Barbara Ward	Voluntary Sector Representative	Member	Yes
Jana Burton	Interim Head of Adult Social Care	Member	Yes
Fola Agoro	Interim Policy Officer	Observer (Minutes)	Yes
Katherine Gronqvist	Director of Public Health, South West Essex Primary Care Trust and Thurrock Council	Member (Co-Chair)	Yes
Levi Hinds	Directorate Strategy Officer, Community Well-Being	LAA Block Lead	Yes
Lorna Payne	Corporate Director, Thurrock Council	Member (Co-Chair)	Yes
Mary Low	SW Essex PCT OEC representative on behalf of Dr. Robin Bell.	Member	Yes
Megan Mitchell	PA to Katherine Gronqvist	Observer	Yes
Mel Porter	Non Executive Director, SW Essex PCT	Member	Yes
Roger Harris	Head of Strategic Commissioning and Resources	Member	Yes
Rachel Woods	Tilbury & Corringham Inspector	Member	Yes
Richard Price	Chair, PPI Forum	Member	Yes
Selena Bolingbroke	Partnership Director, Shaping Thurrock.	Member	Yes
Simon Eatherton	Essex Ambulance Service	Member	Yes
Apologies received:			
Cllr A Arnold	Portfolio Holder, Health & Well Being	Member	No
Tom Gardiner	Director of Delivery, Thurrock Thames Gateway Development Corporation	Member	No
Laura Mhlanga	Locality Commissioning Director	Member	No
Mandy Ansell	Head of Strategic Commissioning and Market Development	Member	No
Stuart McArthur	Head of CYP and women's Commissioning, SW Essex PCT	Member	No
Robin Bell	PEC Chair	Member	No
Colin Slasberg,	Community Well Being and Head of Business Support	Member	No
Dr Kishor Padki	Associate Director/Consultant in Public Health Medicine	Member	No
Mark Ansell	Head of Policy, Public Health Directorate, SW Essex PCT	LAA Block Lead	No
Olga Benson	Vol. Sector Representative, Thurrock Over Fifties Forum/Better Government for Older People	Member	No

Katherine Gronqvist opened the meeting as chair.

1. Notes of last meeting and matters arising

Outstanding Action Points from previous meetings

Item 3 LAA Local indicators and target setting

Barbara Ward confirmed that MIND has agreed and are happy to partner with Thurrock in the delivery of LAA 149.

Notes of Last meeting

Item 3 – Performance Review Update - Smoking

The bigger picture is to reduce smoking by regulatory and non-regulatory means – Lorna Payne and Katherine Gronqvist to meet with Ian Wake to take forward and determine what other actions partners can take to reinforce the good work of PCT.

Item 9 - LINKs

Should read Darlene Martin and not Darlene Smith.

Matters Arising

Laura Mhlanga should come off membership list as there is no longer a Locality Director position at South West Essex PCT. Barbara Stuttle Director of Quality and Nursing to join HCPB.

Transformation Group TOR amended and agreed by HCPB chairs between meetings.

2. LAA 2007 Annual Performance Review

Selena Bolingbroke presented the draft report, which had been compiled using performance information supplied by LAA Delivery Leads. It was noted that there was information outstanding and LAA Delivery Leads were urged to provide detail required to complete report before it is submitted for review by the LSP Executive group on June 9th.

Action: LAA Delivery Leads to provide information
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It was reported that no information was available on the PI *'% of people who say that the method of commissioning their care worked for them (includes numbers of people on Direct Payments, Individual Budgets and Council commissioned services using outcome based approach'*. This Performance Indicator was a local Performance Indicator, which required baseline development. The national indicator set, from which the new LAA is largely drawn, has a different but comparable Performance Indicator concerning independent and direct payments and this is included in the new LAA. Therefore, it was proposed to the board that the original Performance Indicator from LAA2007 be dropped.

Mel Porter proposed that future performance information reports clearly include named Delivery Leads and Performance Indicator owners. This was agreed by the board. Selena Bolingbroke advised that when Performance Indicator's are confirmed, a new Balanced Scorecard for HCPB should be compiled to aid quarterly performance monitoring.

Action: Board to receive a briefing note for the next meeting giving the status of all LAA Performance Indicator's (2007 and 2008) and advising on any proposals to review which Performance Indicator's are subject to continuous monitoring.

Board Balanced Scorecard developed.

3. Health and Well-being Implementation Plan

Katherine Gronqvist tabled the letter received in response to the letter sent by the HCPB regarding changes to the Pan-Essex JSNA (from Kathy Mitchell from the Steering Group). Most of the changes were accepted, however it was noted that Thurrock representation on the steering group had not been consistent. We need to ensure for future that we commission the right representative with a clear remit. We must also be clear from the outset what expectations are in relation to sub regional initiatives.

The Board reviewed the draft Health and Well being implementation plan and it was agreed that Roger Harris, Ian Wakeing and Chairs of the delivery groups should meet to develop draft 2 of the plan.

Action: Roger Harris, Ian Wake and Delivery Group chairs to provide guidance on draft 2 of the Health and Well-being Implementation Plan.

Fola Agoro to co-ordinate meeting in June.

Mary Low to be added to Health and Well-being group

Jana Burton to send information on older people to be used as part of the plan.

Agreed Board to review a final draft at next meeting in September.

4. CSCI Action Plan

Roger Harris briefly discussed the Commission for Social Care Inspection Action Plan, which was circulated for the Boards attention. Roger Harris advised that the next CSCI assessment visit was scheduled for September 9th.

Lorna Payne advised that we should focus on completing actions and aim to do remaining work over the summer with partners. This requires partners completing inputs to be endorsed by the Board in early September.

Action: Updated CSCI Action Plan Report to be brought back to September meeting to be discussed in further detail.

5. Putting People First

Roger Harris and Jana Burton gave an update on the 'Putting People First' Consultation Policy document. A series of regional workshops have been organised as part of the submission. Jana Burton will be circulating with the minutes a short presentation.

The paper is to be brought back for discussion at the September meeting to be looked at in more detail. Colleagues were encouraged to consider in their own organisations what their own responses to the consultation will be.

Action: Members to find out if their own organisation will be making a response to the consultation document.

Action: To be brought back to September meeting for further discussion with a view to a consultation response being made on behalf of the Board.

6. Delivery Groups

Selena Bolingbroke presented 'Report on Terms of Reference for programme board and Delivery Groups'. The report gave an overview of:

- The Board's terms of reference and membership are fit for purpose
- To confirm the reporting schedule between the board and its delivery groups
- To confirm responsibility for the HWB plan work programme between delivery groups.

She requested HCPB agree the following proposals as detailed below:

3.1 'PCT to review and revise representation on HCPB and Delivery groups. HCPB members, especially current VCF representatives, advise on their view of how VCF membership of the Board should be taken forward.'

Agreed. Lorna Payne suggested that providers need to be part of the Delivery Group with commissioners. For future meetings, only commissioners and Chairs of Delivery Groups are to be invited to attend HCPB meetings. Health and Well Being stakeholders were proposed as a further group who should be members of HCPB Board. This should include the shadow Portfolio Holder, voluntary and community

sector representatives (to be confirmed when LINKs host in place), Police and TTGDC.

3.2 - Proposal: HCPB to confirm that there are no other partners who should be represented on the Board (or delivery groups) to aid delivery of LAA – Group Agreed.

Katherine Gronqvist to confirm membership of the Health and Well-Being group.
Transformation Delivery Group – Barbara Stuttle to chair
Older People – We need to check with Simon Black that we have the right TOR.
Mental Health – Roger Harris meeting with Barbara Stuttle and to bring back joint paper on TOR.
Safeguarding Group – Updated TOR to be circulated.
Learning Disabilities – No PCT representation as of April. Funding now comes to Local Authority. Roger Harris to speak to Barbara Stuttle about this.
There is still a gap in delivery around long-term conditions and disabilities and we would need something around this.

3.3 - Proposal: Thurrock Council are asked to advise whether any other elected members should be invited to join HCPB.

As agreed in 3.1, it was decided that the Shadow Health and Well-being portfolio holder to be added unto the group.

4.1 Proposal: HCPB members review and confirm that all Delivery Group Terms of Reference are fit for purpose. – Agreed

As agreed in 3.2.

4.2 Proposal: Delivery Group Chairs confirm which performance targets their delivery group will be responsible for.

To be further discussed as Health and Well Being Implementation Plan is developed.

4.3 Proposal: A new delivery group is established and named “HCPB Capital Infrastructure Development” HCPB to advise on Chair

Agreed. The group agreed to establish this new Delivery Group.

Action: Selena Bolingbroke to consult with Mel Porter and Pam Court.

7. ISTC and Grays New Generation Community Hospital

Mel Porter tabled a press release by Pam Court, Chief Executive of South West Essex Primary Care Trust '*Grays New Generation Community Hospital moves a step closer*'.

Lorna Payne requested that the project lead of this group needs to attend the HCPB to give an update on the project. So far, no formal report on the project has been received by the HCPB and it is critical that we receive regular reports for the board.

Mel Porter reported that a new agreement had been reached between the South West Essex PCT, the TTGDC and Thurrock Council regarding the location for the Grays New Generation Community Hospital. There will now be one facility on site and no Independent Sector Treatment Centre. There will be a project group established to oversee development of the project. Representatives include Laura Mhlanga for South West Essex PCT and Roger Harris for Thurrock Council. A chair for this group has yet to be confirmed.

The board will receive regular reports on service planning as well as the capital developments as the NGCH project progresses.

Selena Bolingbroke enquired how timelines for delivery might have been affected. Mel Porter confirmed delivery for NGCH was still anticipated as 2012. There would no longer be any delivery from an ISTC, this had been anticipated from 2009-10.

Action: Mel Porter to provide a progress report on Grays NGCH at the next meeting.

8. New Project: Building Capacity in the third sector for better health and social care outcomes

This report was tabled to advise the Board of a bid previously submitted to the South West Essex PCT. The Board noted that this bid raised the issue of capacity raising in the third sector but also the need to co-ordinate joint funding for new actions. Katherine Gronqvist confirmed that she would be happy to work with Roger Harris on these two points and link into the Health and Well-Being Implementation Plan.

It was suggested that Roger and others to bring some thinking and proposals back to the group and establish principle and funds for us to discuss further.

Action: Roger Harris and Katherine Gronqvist to meet up to discuss issue of capacity raising in the third sector and the need to co-ordinate joint funding for new actions and link into the Health and Well-Being Implementation Plan.

9. LINKS

Levi Hinds gave an update on the LINKs project. The process of appointing a host is moving on smoothly and all timescales are being met. The appointed host is due to begin in September 2008. The community development office has asked we provide workshop for providers and even though this was set up, not many attended. Commissioners need to meet with providers to let them know what it means to them.

Action: Commissioners ensure that providers are encouraged to attend workshop. Darlene Martin to arrange this.

10.Any Other Business

This meeting will be the last HCPB to be attended by Selena Bolingbroke and Jana Burton. The board expressed their sincere thanks for their effort and hard work over the years. The board also extended their appreciation to Colin Slasberg who was absent from the meeting.