

## Minutes and Actions

Monday 18 July 2011

### Attendees

Jeff Hurst (Vice Chair)	JH	Chief Executive, YMCA
Ruth Rogan	RR	Director of Strategic Partnerships, NCC
Susan Nelson	SN	Directorate Operational Services Manager, Children's Services, Newcastle upon Tyne Hospitals Foundation Trust
Phil Joyce	PJ	Director of Area Based Regeneration, Area Based Regeneration, NCC
Martin Surtees	MS	Director of Performance and Commissioning, NCC
Louise Appleby	LA	Children's Trust Officer, NCC
Paul Brownlee	PB	Youth Offending Team Manager, NCC
Cllr Michael Burke	MB	Deputy Cabinet Member (Integrated Targeted Services)
Dr Fu-Meng Khaw	FMK	Director of Public Health, NHS North of Tyne
Linda Moore	LM	Newcastle College
Sue Kirkley	SK	Newcastle Safeguarding Children Board Co-ordinator, NCC
Margaret Kerridge	MK	Head Teacher, St Michael's RC Primary School
Julia Young	JY	Associate Director of Commissioning – Newcastle, NHS North of Tyne
Sue Atkinson Millmoor	SA	NCH Action for Children

### Apologies


John Collings (Chair)	JC	Executive Director of Children's Services, NCC
Jan Brown	JBr	Northumberland, Tyne and Wear Mental Health Trust
Neil Munslow	NM	Housing Service Manager, NCC
Laura Young	LY	Northumbria Police
Bee Adeyeba	BA	Sports for Youth CIC

**In Attendance**

Andy Roberts

AR

Joint Health Commissioner

No.	Item	Action
<b>260</b>	<b>Welcome and apologies</b>	
260.1	In JC absence JH as chair welcomed everyone to this meeting of the Children's Trust Board (CTB) and thanked them for their attendance. Introductions were made and apologies were given as listed above.	
260.2	There was a new agenda handed out to the Board with a slight amendment to the original.	
<b>261</b>	<b>Health Focus</b>	
261.1	Julia Young & Meng Khaw, Andy Roberts, delivered a presentation to the CTB updating on local health developments, and the following was noted.	
261.1.1	<p><b>Action: JY to circulate presentation &amp; Link of the information used.</b></p>  <p>Health presentation CTB 18 July</p> <p><a href="#">Link is here</a></p>	
261.2	<p>JY took the lead and made the Board aware of the key changes to health, which are noted below:</p> <ul style="list-style-type: none"> <li>• Health care commissioning to become responsibility of: <ul style="list-style-type: none"> <li>➤ NHS Commissioning Board</li> <li>➤ Clinical Commissioning groups</li> </ul> </li> <li>• Health improvement leadership and commissioning to become responsibility of Local Authorities</li> <li>• Other domains of Public Health to a new Public Health England</li> <li>• Introduction of local HealthWatch and HealthWatch England</li> <li>• Statutory Health and Wellbeing Board</li> </ul>	
261.3	JY made the Board aware of the new NHS structure and went through the linkages in the NHS Commissioning Board and its key relationships. This is due to be set up and running by April 2013.	

261.4	It was noted that Newcastle Bridges and TyneHealth are both 'Pathfinders' and are working towards authorisation, and have joined the early implementer network for Health and Wellbeing Boards.	
261.5	The Health and Social Care Bill instates the Health and Wellbeing Board as a committee of the local authority. It was noted that the minimum membership specified: at least one elected member nominated by the Leader, the Leader can be a member in his own right alongside another councillor if they choose to; three statutory director posts from Adult Services, Children's Services and Public Health; also there must be a rep from each commissioning consortium. The Board can agree one person can represent more than one Commissioning Consortium.	
261.6	<p>AR then asked the Board to split into small groups to discuss the following questions:</p> <ul style="list-style-type: none"> <li>• How will the creation of the Health and Wellbeing board impact on the work of the Children's Trust Board?</li> <li>• What actions should the Children's Trust Board take to ensure the impact is positive?</li> </ul> <p>The Board noted that our voice will be heard on the Health &amp; Wellbeing Board and we should make sure that the meeting is not over powered by the Adult agenda. JC will sit on the Board representing the Children's Trust Board as well as the LA.</p>	
261.7	<p>FMK then discussed the Public Health Strategy - healthy lives, healthy people, with the following four principles:</p> <ul style="list-style-type: none"> <li>• Representative – owned by communities and shaped by their needs</li> <li>• Resourced – with ring-fenced funding and incentives to improve</li> <li>• Rigorous – professionally-led, focused on evidence, efficient and effective</li> <li>• Resilient – strengthening protection against current and future threats to health</li> </ul>	
261.8	FMK then went through the next steps to achieving the health reforms, and it was noted that they need to establish the reformed public health (PH) system and that we need to clarify the role of local authorities and DsPH in the three	

	domains of PH practice. Also we need to clarify commissioning responsibilities for PH services, including mandatory services for LA and the conditions of the PH grant.	
261.9	<p>AR then asked the Board to split into small groups to discuss the following question:</p> <ul style="list-style-type: none"> <li>• How can the Children's Trust Board contribute to the effective transfer of Public Health to local authorities?</li> </ul> <p>It was noted that the CTB can add key messages, but we will have to think about and discuss what we can contribute and influence.</p>	
261.10	<p>AR went through some of the local developments which included:</p> <ul style="list-style-type: none"> <li>• The Health and Wellbeing summit to be held on the 19th July 2011</li> <li>• Children's health services in Newcastle are assessed as good or better but Health outcomes for children remain lower than average</li> <li>• Child poverty and health inequalities underpin the health priorities for children and young people, which are obesity, teenage pregnancy, smoking, dental decay, alcohol and drugs</li> <li>• It was noted that there has been an increased use of accident and emergency services, and by looking at previous data it seems that the trend is going up and is continuing to rise</li> <li>• Great North Children's Hospital</li> <li>• Health Visitor Review</li> <li>• TAMHS expansion</li> </ul>	
261.11	<p>Sir David Nicholson said recently that in 5 years time he expected the NHS:</p> <ul style="list-style-type: none"> <li>▪ To be focussed on outcomes</li> <li>▪ More independent (de-centralised) organisations (Foundation, private, commissioning)</li> <li>▪ The relationship with patients will change and they will know more and demand more. They will have more power</li> <li>▪ We will know more about the demographic needs and be better at delivering services.</li> </ul>	

	<ul style="list-style-type: none"> <li>▪ There will be a stronger relationship with partners and be better at working in partnership.</li> </ul>	
<b>262</b>	<b>Draft Children's Trust Performance Report</b>	
262.1	MS went through the draft Children's Trust performance report and the following was noted. The summary of performance indicates that 12% of all children's services indicators are red and are priority areas. These relate to child obesity rates at age 5 and 11, also children becoming subject to a child protection plan for a second or subsequent time.	
262.2	MS then went through the new individual report cards for the NI and it was noted that it is just a summary of the data and that we can request more information if needed. The Board welcomed this change as it seems much clearer and easier to manage. It was mentioned that the YOT compares their data with other LA areas and it might be worth looking into doing that for these NI to see how we are doing against other cities.	
262.3	It was asked if we knew the length of time a NI has been red for as it does not indicate that on the report. It was mentioned that it might be worth adding comments to the ones that are red stating that we are improving and using good practice.	
262.4	It was asked who monitors serious incidents and near misses. The NSCB reports into the CTB, but we need to be clear on the reporting system that's in place and who takes responsibility on reporting.	
262.5	<b>Action: SK to look at reporting system from the NSCB to the CTB</b>	SK
262.6	<b>Action: All members to look at the performance report and email MS if you have got any comments. To be put on the agenda for the next meeting</b>	All
<b>253</b>	<b>Safe / Equal / Achieve Groups Terms of Reference</b>	
263.1	MS made the Board aware of the three strategic priorities which are below <ul style="list-style-type: none"> <li>• Safe – Keeping children and young people safe and supporting families</li> <li>• Equal – Reducing inequalities and promoting equality</li> <li>• Achieving – Raising aspirations, achievements and opportunities</li> </ul>	

	We have agreed and identified 10 outcomes which are underpinned in these 3 areas.	
263.2	It was noted that each of these groups will link into individual commissioning partners who will then each report to the PMRG, then the reports will be presented at the CTB. A discussion then took place around who would be best suited to take the roles of Lead Officer and Champion. It was noted that the lead officer would manage the group and pull it together and the champion would Chair the group. It was agreed that we would need to build role descriptions into the groups TOR.	
263.3	<b>Action: Champion &amp; Lead Officer to meet up and organise the structure of their group and provide progress at the next CTB in August.</b>	
263.4	It was noted that the groups seem to be very LA led and would it not be a good thing to get more voluntary sectors involved. It was then discussed if we were clear on who the commissioning partners will be.	
263.5	<b>Action: MS will circulate a list of the commissioning partners to the board.</b>	
263.6	MS then asked the Board if they are happy with the TOR and if we feel that it can be signed off. It was noted that the TOR can be flexible and we can reflect any changes in government policy to the TOR. The Board were all in agreement and the TOR was signed off.	
<b>264</b>	<b>Children's Trust Equality Strategy</b>	
264.1	It was noted that at the last meeting there was a few minor amendments made to the strategy and it has come back to the Board so it can be signed off. A discussion took place regarding the length of the document, and the Board were reminded that originally it was a 50-page document and it has now been slimmed down to just six pages. The strategy was signed off.	
<b>265</b>	<b>NSCB Business Plan 2011-2012</b>	
265.1	SK brought the NSCB Business Plan to the Board for information and to make them aware that this is the finished plan.	
<b>266</b>	<b>Commitment to CYPP 2011-2014</b>	

266.1	The CYPP was brought to the table and it was asked if our partners would sign up to the plan and link up their service plans. A discussion took place around ambiguity of Board members 'signing up' as themselves or as a representative of organisations, which would also make it difficult to supply linked service Plans. It was agreed that the paperwork would be tweaked and re-distributed, and that members would not be expected to supply their Plans.	
<b>267</b>	<b>Minutes of Previous Meeting &amp; Matters Arising</b>	
267.1	<p>The minutes of the previous meeting were deemed a true and accurate account with the following amendments:</p> <ul style="list-style-type: none"> <li>• SK gave her apologies at the previous meeting</li> <li>• TyneHealth is one word, error is on page 7</li> </ul> <p>All actions were completed, except Action 323 'future reports to include information about those resident in Newcastle as well as educated in Newcastle', which is to be followed up again by LA.</p> <p>The Children's Trust Board Action List was updated.</p>	
<b>268</b>	<b>Any Other Business</b>	
268.1	No other business	

**Date of next meeting:** Monday 15 August 2011

**Actions Summary**

**Monday 18 July 2011**

Actions from Current Meeting						
Date Raised	Ref	Action	Action Owner	Progress	Completion	Status
18/07/11	261.1.1	JY to circulate presentation & Link of the information used.	JY			
18/07/11	262.5	SK to look at reporting system from the NSCB to the CTB	SK			
18/07/11	262.6	All members to look at the performance report and email MS if you have got any comments. To be put on the agenda for the next meeting	ALL			
18/07/11	263.3	Champion & Lead Officer to meet up and organise the structure of their group and provide progress at the next CTB in August.				
18/07/11	263.5	MS will circulate a list of the commissioning partners to the board.	MS			
18/07/11	267.1	Actions list ref 323 'future reports to include information about those resident in Newcastle as well as educated in Newcastle'	LA	LA mailed Jim Gaff 19/07/11 to clarify need for data to be presented in this way		