

Newcastle Children's Be Healthy Partnership

Notes of meeting held on Thursday 10 September 2009

Present

Andy Roberts
Aileen Fitzgerald
Pat Thompson
Danny Ruta
Jan Cole

In Attendance

Simon Eadle
Jamie Spence

1. Apologies for absence

Tony McKenna, Linda Mason, Jane Johnston, Ruth Rogan

2. Young Carers

Simon Eadle spoke to a previously circulated paper and DVD. The purpose of the discussion was to raise awareness of the needs of young carers across the health system. Nationally, although young carers are high on the Governments agenda, it has been difficult to engage health professionals in particular General Practitioners. The DVD was developed by young people to show the positive aspects of their lives but also some of the challenges that they face. It has been a challenge to identify the numbers of young carers in the city. GP's records are tagged to identify adult carers but responses proved variable.

There is also a need to increase awareness across adult services in particular adult mental health and drug and alcohol services. In acute children's hospitals it is often necessary to identify young carers who care for siblings for example those with disabilities. A team is available to help deliver awareness training and it was also noted that carers are entitled to their own health assessment if they're over 16 or have their needs assessed at the point that the adult who they're caring for is assessed. The opportunity for increasing awareness through the targeted mental health in schools project was also noted.

The Partnership acknowledged the importance of recognising young carers as a vulnerable group and a number of action points were identified to raise awareness and identify more accurately the number of young carers in the city.

Action: Liaise with Peter Berry in relation to GP tag system (AF)

Contact David Jones – lead GP to link with lead GP’s for children in practice (SE)

Promote awareness across Newcastle Hospitals directorate (SN)

Increase awareness with children’s directorate (SN)

Link to adult mental health services via Gary O’Hare (SE)

Contact Margaret Orange with regards to alcohol services (SE)

Link awareness to CAMHS (AR)

Review progress in 6 months (AF)

3. Notes of previous meeting

Agreed as a true record with the following amendment in 10.2 – penultimate paragraph should read NHS mental health lead.

4. Matters Arising:

4.1 Changes in Community Paediatrics

Susan Nelson reported that the Consultant Paediatrician to work alongside accident and emergency services had now been appointed and that Community Paediatric Services currently provided at Geoffrey Rhodes Centre will move to a base in Walkergate Hospital on 1st October as an interim measure for 2 years.

4.2 Thomas Bewick School

Aileen Fitzgerald reported that some interim funding had been agreed by the NHS North of Tyne Executive Team to support the

provisions of a school nurse into Thomas Bewick School pending the identification of a long term sustainable solution.

Action: Link with Jane Johnston and school (AR)

4.3 Teenage Pregnancy

It was noted that quarter 2 in-house statistics suggest that the figures have decreased further.

5. Assess and Decide

Jamie Spence reported that the Assess and Decide Project was part of the Newcastle local authority corporate transformation programme. This programme was intended to make £20 million worth of savings and the Assess and Decide Project will contribute towards that. This initiative is viewed as an opportunity to do things more effectively across the whole system and it was important to engage all stakeholders including health partners. The goal of the project is to ensure consistency of processes and pathways across the city, to introduce 3 locality based multi-disciplinary integrated service delivery teams and to implement common processes across the locality. CAF will be central to the approach and the main process for assessment.

Jamie circulated a leaflet that will be available to all practitioners across the city outlining the role of CAF lead professional information sharing. The timeframe for the project is tight but there is a need to understand the potential risks across agencies. It was suggested that a representative from the health sector be part of the strategic steering group. The group agreed that the Assess and Decide Project was a driver for helping achieve children's trust goals of getting people working closely together at ground level. Two workshops have been arranged for frontline practitioners and health staff who are involved in this.

Aileen outlined the Quality Innovation Productivity and Prevention project (QIPP) that was currently underway in the NHS that had similarities to the Assess and Decide Project.

Action: Request health membership of the steering group via Martin Surtees (JS)

Identify appropriate representative from this partnership (All)

6. Obesity Strategy Update

Defer until October when Tony McKenna is present.

7. Smoking Group Update

Defer until October meeting when all partners present.

8. Any other business

8.1 Key Worker Role

Pat Thompson informed the group that there had been some difficulties in recruiting a worker to this role which will delay roll out. It was agreed that the vacancy should be re-advertised and that it should be widely advertised across all partner agencies.

8.2 Performance Management of Services for Disabled Children

Aileen reported that the Strategic Health Authority had produced a template that required completion by the end of September. Once completed, it will be shared with this group.

8.3 Voluntary Sector Representation

Andy reported that the Voluntary Sector Partnership was still considering this request.

8.4 Loan Equipment

Andy reported there is a national drive to increase choice in purchase of equipment. How this will relate to children's services is uncertain given that most of the equipment is bespoke to individual children. It is thought that a social enterprise model is being progressed.

Action: Agenda for November (AF)

8.5 Performance Management

Andy shared a draft performance report that included all 16 indicators for Be Healthy alongside some comparative data from other areas, including statistical neighbours. He suggested that some of the targets should be reported annually for example Teenage Pregnancy and that this report could form the basis of the report due to the Children's Trust Board in October. Information will now be requested from partnership leads where the indicator is amber or red.

Action: Agenda for October meeting prior to Children's Trust Board presentation (AF/AR)

8.6 Child Health Mapping

It was noted that this exercise was due to start again in November and a training session will be held soon.

8.7 Bereavement Support for families following child death in hospital

Jan Brown brought to the attention of the group that funding for the current service is no longer available and the impact of this needs to be assessed across the system. Aileen reported that community based bereavement services were currently under review across North of Tyne.

9. Date and time of next meeting

Thursday 8 October 2009, 3.00pm-5.00pm, Bevan House.