

HEALTH SCRUTINY PANEL

A meeting of the Health Scrutiny Panel was held on 12 January 2005

PRESENT: Councillor Dryden (Chair), Councillors Biswas, McIntyre, Mrs H Pearson and K Walker.

OFFICIALS: J Bennington and J Ord.

****PRESENT BY INVITATION:** The Mayor (R Mallon).
Prof. P Kelly (Director of Health Improvement) and J Malone
Head of Public Affairs) Middlesbrough Primary Care Trust).

****APOLOGIES FOR ABSENCE** were submitted on behalf of Councillors Lancaster and Regan.

**** DECLARATIONS OF INTEREST**

No declarations of interest were made at this point of the meeting.

**** MINUTES**

The minutes of the meeting of the Health Scrutiny Panel held on 21 December 2004 were submitted and approved.

HEALTHY LIVING REVIEW

In a report of the Scrutiny Support Officer the Panel was appraised of the evidence received so far in respect of its Healthy Living Review.

The Chair welcomed the Mayor and representatives from Middlesbrough PCT to the meeting and reiterated that the main purpose of the current discussions was to receive further evidence as to what extent healthy living initiatives were co-ordinated in terms of evaluative practices and assessing the impact of particular schemes.

The main points arising from the ensuing deliberations were as follows:-

Evaluation

- agreed that evaluation was of critical importance;
- from the PCT's perspective it was noted that certain circumstances may arise which may hinder the evaluation process such as financial constraints; new method of collection of data needed; lack of required expertise and capacity to undertake such work;

'Dash for Cash' Approach

- it was considered that current mechanisms for Government funding packages had encouraged such an approach which had sometimes resulted in duplication;
- although it was suggested that such an approach had been pursued especially with regard to small voluntary sector projects it was considered that the recent trend as demonstrated by bids for NRF funds was for more thematically focussed projects;

Co-ordination

- although it was noted that most projects were partnership based, the recent decision to merge the Local Authority's current Healthy Living Co-ordinator post and the PCT's Health Inequalities Managers post to create a Partnership Manager post using PCT core funding would help to ensure the continuation and greater co-ordination of current and future projects;

- although a view was expressed for this to be located in one unit to ensure efficiency and cohesion it was acknowledged that healthy living initiatives was just one element of the PCT's wide role in public health;
- it was acknowledged that in order to achieve improved co-ordination greater use could be made of existing mechanisms such as the Local Strategic Partnership, Social Care Theme Group to give further strategic direction and provide more stringent accountability;
- the Mayor referred to the introduction of a Reduction Strategy which consisted of a series of 15 primary reduction priorities , six of which were public health related and referred to the importance of ensuring the links between the Executive portfolios with those of the Chair of the Local Strategic Partnership thematic groups;

Strategic role in promoting Healthy Living Initiatives

- recognition that the Local Authority had a massive role and with increased budget provision could be more proactive in terms of education and leisure but it was of crucial importance that such work was co-ordinated and public awareness was raised to such activities;
- the Mayor outlined the need for a master plan encompassing public health issues and to what should be achieved in the short, medium and long term;

The main conclusions of the Panel were as follows:-

- a) recognition that there was co-ordination but at varying levels across organisations;
- b) there was a need for greater co-ordination at a strategic level across all agencies with improved levels of accountability;
- c) the importance of maximising the effectiveness of existing structures such as the Local Strategic Partnership was agreed and should be reinforced.

AGREED that all be thanked for the information provided and contribution to the subsequent deliberations which would be incorporated into the overall review.

**** OVERVIEW AND SCRUTINY BOARD UPDATE**

In a report of the Chair of the Health Scrutiny Panel Members were advised of the key matters considered and action taken in respect of the meeting of the Overview and Scrutiny Board held on 14 December 2004.

NOTED