

**MINUTES OF THE MEETING OF THE PUBLIC HEALTH
FUNCTIONS PROJECT TEAM
THURSDAY 1ST JUNE 2006, 2.30 PM – 4.30 PM
D2 CONFERENCE ROOM, CASTLE BUILDINGS**

ATTENDEES:

Dr E Mitchell (Chairperson)
Mr A Elliott
Mr W Francey
Dr B Gaffney
Dr J Little
Mrs E O'Doherty
Dr B Smyth
Dr R Smithson

IN ATTENDANCE:

Dr N Chada
Mr Damien Martin
Mr Nigel McMahon
Dr C Harper
Mrs S Tallentire
Mrs J Todorov (secretariat)

1. WELCOME/APOLOGIES

Dr Mitchell welcomed all members to the meeting. Apologies were received from Dr M Donaldson, Mrs C Harrison, Mrs P Osborne, Mrs A McLernon and Dr AM Telford.

2. MINUTES AND MATTERS ARISING FROM THE MEETING

The minutes of the last meeting were agreed, with one amendment – Mrs Angela McLernon's apologies to be recorded for the meeting held on 16th May 2006.

MATTERS ARISING

- **Meeting of Health Promotion Professionals**
Dr Gaffney to advise the Project Manager whether there are notes of the discussion which took place at this meeting.

ACTION: DR GAFFNEY

3. UPDATE FROM CHAIRPERSON

Dr Mitchell invited Mr Elliott to provide members with feedback from meetings that he had attended recently.

- **RPA Roadshow**
Mr Elliott advised that he had attended the RPA workshop on 17th May 2006 on behalf of the Project Team. He informed members that there had been no detailed discussion at the workshop of Public Health issues.
- **Community Planning Conference**
Mr Elliott reported that he had attended a community planning conference on 30th May 2006. The importance of Health and Social Services Trusts being involved in community planning had been highlighted to participants.

It was noted that Pat Osborne and Stephanie Tallentire have been nominated to participate in the project team on community planning, established by the Department of the Environment as part of the Local Government Taskforce.

- **Health Improvement Local Options (Paper 19/06)**
Members were advised that at a recent meeting of the Management Structures Project Team clarification had been sought on whether proposals being developed by the Public Health Project Team would breach the principle that there should be a clear organisational split in relation to responsibility for commissioning and providing services.

Project Team members discussed whether it was necessary to review the current proposal for local delivery of health improvement functions in light of such considerations. Dr Mitchell reminded members that the model proposed by the Project Team should help deliver the best health and well-being outcomes for the population of Northern Ireland.

Key issues raised during discussion included:-

- The definition and scope of commissioning and the need for a clear distinction between the roles to be undertaken by commissioners and providers.
- Concerns about locating staff in the LCG whose principal role would not be about commissioning.
- The importance of having reliable information on the current public health workforce.

- The importance of co-terminosity for co-ordination purposes.
- Recognition that partnerships need to be formed and operated at local level as well as at the level of the LCG.
- The importance of robust performance systems, including incentives and sanctions which can be applied to Public Health.

Following further discussion it was agreed that the proposals for Health Improvement should be revised. The Project team agreed that, subject to robust performance management systems for public health being in place, the LCG would host staff with responsibility for commissioning local health improvement programmes and services and for supporting partnership working and multi-sectoral co-operation. Health improvement staff in Trusts (with appropriate management support) would continue to deliver health improvement programmes and services

It was agreed that the sections of the Project Team's report on health improvement should be revised to reflect the above considerations. A reference is also to be included on the importance of information sharing in developing a partnership approach to health improvement planning and delivery.

ACTION: DAMIEN MARTIN

4. DISCUSSION OF DRAFT REPORT (Paper 20/06)

Dr Mitchell referred Project Team members to the amended draft report (Paper 20/06) and asked members for substantive comments.

The following amendments/additions were agreed:-

- Inclusion of an appropriate reference to the report on the review of specialist commissioning.
- Paragraphs 8-15 to be deleted and if necessary replaced with an appended flow chart.
- Inclusion of a definition of knowledge management, preferably with an example to support it.
- Inclusion of a further example of service development and an example on health protection.

- The example on sexual health to be revised to draw out more explicitly the need to address wider determinants as part of integrated effort to improve sexual health.
- Revision of references to public health specialists.
- Inclusion of a reference to the need for a screening lead and revision of paragraphs 77 and 92.
- Inclusion of a line advising that statutory functions should not be included as a cost when calculating management costs.

Members suggested that it would be helpful if the report could be proofed by someone from outside the Project Team to ensure that it could be readily understood by non experts.

ACTION POINT: MEMBERS TO FORWARD PROPOSED REVISIONS AND ANY FURTHER AMENDMENTS BY 7TH JUNE.

5. LEGISLATIVE IMPLICATIONS (Paper 21/06)

Project Team members were asked for their views on the proposed process for identifying legislative implications as outlined in Paper 21/06 (tabled). Members agreed that it would be helpful if the paper could be forwarded to the Directors of Public Health to help ensure that significant pieces of legislation have not been omitted.

Damien Martin undertook to liaise with the Project Manager of the Legislation Project Team in relation to wider stakeholder involvement.

ACTION POINT: DAMIEN MARTIN TO:

- **ISSUE LEGISLATIVE PAPER TO DPHs.**
- **LIAISE WITH PROJECT MANAGER OF THE LEGISLATION PROJECT TEAM.**

6. FORWARD PLAN (Papers 18/06 revised)

Project Team members were referred to updated version of paper 18/06 which set out the revised Public Health Functions Project Plan. Damien Martin highlighted the tasks which have been completed and informed members that the plan had been submitted to the Programme Board. A number of members again highlighted the importance of public health involvement in developing the performance measures to be used as part of the new performance management framework.

It was agreed there may be a need to revise the Project Teams method of working and to consider forming sub-groups to take forward work on discrete areas of implementation such as performance management, finance, human resources, and community planning.

7. ANY OTHER BUSINESS

Dr Mitchell informed members that she would be meeting with Tracey Power to speak about proposals for the delivery of information functions.

Dr Gaffney informed members that he had arranged to meet with the Communications Project Team.

It was agreed that a further meeting would be held on Friday 23rd June if considered necessary for the purpose of agreeing any further substantive revisions to the draft report.