

DRAFT MINUTES OF THE MEETING OF THE PUBLIC HEALTH FUNCTIONS

PROJECT TEAM

HELD ON FRIDAY 31ST MARCH 2006

9.30AM – 1.00PM

D2 LECTURE THEATRE, CASTLE BUILDINGS

ATTENDEES:-

Dr E Mitchell (Chairperson)

Dr B Gaffney

Mr W Francey

Dr J Little

Dr R Smithson

Dr B Smyth

Mrs E O'Doherty

IN ATTENDANCE:-

Mr A Elliott

Mr D Martin

Dr C Harper

Mrs C Harrison

Dr N Chada

Mrs P Osborne

Mrs S Tallentire

Dr W McConnell

Mrs J Todorov (Secretariat)

1. WELCOME/APOLOGIES

Dr Mitchell welcomed members to the seventh meeting of the Project Team. A particular welcome was extended to Mr Andrew Elliott who recently replaced Mrs Deirdre Kenny as Director of Health Development and to Dr Bill McConnell, Director

of Public Health, Western Health and Social Services Board, who was attending on behalf of Dr Anne-Marie. Telford.

Apologies were received from Mrs Angela McLernon, Mr Michael Donaldson, Dr Telford and Mr Nigel McMahon.

2. MINUTES OF THE MEETING HELD ON 15TH MARCH 2006

It was suggested that the minutes should be amended at item 3 to reflect the pilot nature of the survey of the public health workforce within the Northern Health & Social Services Board. The minutes were agreed subject to the above amendment.

Dr Brian Gaffney provided feedback to members of the Project Team on a meeting of health promotion professionals on the subject of the Review of Public Administration. Dr Gaffney advised that there wasn't consensus at the meeting on a preferred model for health improvement but that a number of those present emphasised the need for sufficient health improvement capacity within the new larger, integrated Trusts. Mrs Elaine O'Doherty highlighted that health promotion professionals were keen to have more clarity on where health improvement work will be done, by whom and where staff will be based. Dr Gaffney advised that no formal minute of the meeting had been taken but undertook to clarify whether notes of the discussions had been made and to make these available to the Project Team.

Action: Dr Gaffney

3. MATTERS ARISING FROM MEETING OF 15TH MARCH 2006

It was noted that most of the matters arising from the last meeting would be addressed as substantive items on the agenda. Project Team Members were, however, reminded to notify the Project Manager of Information Technology requirements arising from the proposed HPSS reforms.

Action: Project Team Members

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4. UPDATES FROM CHAIRPERSON

- **Meeting of the Project Team Chairs**

Dr Mitchell updated members on the recent meeting of the Project Team Chairs. She reported that several of the project teams were making good progress. It had been emphasised that, to ensure that the outcome of the reform project would be a coherent plan for delivering the reform objectives, there needed to be effective communication between project teams. In addition, project teams were being encouraged to move forward together, so that each project team could take account of emerging proposals from other projects. Dr Mitchell emphasised that the work of the Public Health Functions Project Team would be integral to the work of a number of other project teams.

Dr Mitchell advised that the Programme Board would be organising four workshops during May to update managers within the HPSS on the progress being made to deliver the reform programme. It was noted that these workshops were in addition to the workshop for the members of all the reform of the HPSS projects teams, scheduled to take place on 10 May 2006.

Dr Mitchell informed members of positive comments expressed at the meeting of Project Chairs on the importance of public health within the revised structures and, in particular, on the importance of public health to the planning, commissioning and performance management processes.

Dr Mitchell advised that she also had a very constructive meeting with Mr Andrew Hamilton, Chairperson of the Planning and Commissioning Project, to discuss the emerging thinking of the Planning and Commissioning and Public Health Project

Teams. Based on this meeting, it appeared that the proposals from the Public Health Project Team would be compatible with the vision being developed for planning and commissioning. It was noted that Dr Naresh Chada would endeavour to attend future meetings of the Planning & Commissioning Project Team.

Dr Janet Little emphasised the need to ensure during the transition period that structures, such as, the newly established Service Delivery Unit, take appropriate account of public health issues.

Dr Mitchell advised that a letter had been received from the BMA seeking representation on the Public Health Functions Project Team. It was agreed that Dr Mitchell would offer to meet with a representative of the BMA to discuss the emerging proposals from the Project Team.

Action: Dr Mitchell

- **Meeting with Directors of Public Health**

Members noted that Dr Mitchell had met with the Directors of Public Health (DPHs) on 20th March 2006 to update them on the progress of the Public Health Functions Project Team and to discuss the emerging options for reform. Dr Mitchell undertook to circulate a note of this meeting in due course.

Action: Dr Mitchell

Dr Mitchell invited Dr McConnell to update members on the discussions that took place. Dr McConnell then proceeded to highlight the key points raised at the meeting with DPHs, including:

- the importance of developing appropriate mechanisms to ensure accountability and a collective approach to the delivery of regional health protection functions;
- the benefits of delivering a strategic approach to service development;

- the need to ensure that future models for health improvement delivered an integrated approach, in line with the Investing for Strategy, which was more focused on the delivery of policy priorities.

5. DISCUSSION OF DRAFT REPORT:- PAPERS 15/06 & 16/06

- **Format and content**

Following a detailed discussion it was agreed that the description of current arrangements would remain as part of the domain papers and that the domain chapters should be preceded by a chapter summarising the key recommendations in relation to the Department, HSSA, LCG, Trusts and Councils.

- **Introduction**

In addition to making some minor changes to the content of the chapter, Damien Martin undertook to ensure that the source documents for the descriptions used in the introductory sections are explicitly referenced.

Action: Damien Martin

- **Structure Chart**

A number of amendments were proposed to the chart summarising lines of accountability within the HSSA. In particular, it was suggested that it should be made clear that the chart only represented arrangements for management accountability and did not reflect lines of professional accountability. It was also suggested that the chart should more clearly demonstrate the overlapping nature of many public health roles and should reflect the recommendations relating to the need, for example in health protection, for staff to have local

bases from which to operate. Following discussion it was recognised that it would be difficult to represent all the above issues on one chart and that some of the issues raised could only be addressed through specific recommendations made elsewhere with the report.

Action: Dr Harper and Damien Martin

- **Domain Papers**

Following discussion a small number of amendments were agreed to the papers on health protection, service development and screening.

- **Action: Dr Brian Smyth & Mr Nigel McMahon, Dr Harper, Dr Mitchell**

Dr Chada tabled a paper for discussion on the health improvement domain. Mr Willie Francey emphasised the need for the Project Team's report to fully recognise the role of the community planning process in supporting the delivery of the health improvement agenda and for the relevant section of the report to address how processes to profile communities will be effectively integrated. Project Team Members undertook to provide detailed comments on the paper to Dr Chada in advance of the next meeting of the Project Team.

Action: Project Team Members

Damien Martin undertook to circulate a paper on knowledge management, training and development and workforce planning to Project Team members for consideration and comment.

Action: Damien Martin

- **Transitional and Implementation Issues**

Dr Richard Smithson highlighted the need for the report of the Project Team to recognise the need for sufficient financial resources to be available to enable the effective implementation of the recommendations. The importance of seeking to minimise the potential of losing experienced staff and of the need for the effective training and development of staff during the transition period were also highlighted.

- **Summary of Key Recommendations**

Damien Martin advised that a chapter summarising the main recommendations for each of the public health domains was being developed and would be circulated in advance of the next meeting.

Action: Damien Martin

6. ACTION TO DEVELOP AGREED REPORT

Project Team members were advised that the next meeting of the Reconfiguration Programme Board would be held on 5th May 2006. In advance of this meeting it would be necessary for the Project Team to agree a draft report that could be shared with other Project Teams. This would help to identify gaps in the proposals for Public Health and to highlight any potential inconsistencies with proposals likely to come forward from other Project Teams.

Damien Martin advised that he had agreed to meet Health Promotion Commissioners to discuss the proposals of the Project Team.

7. FUTURE PROJECT PRIORITIES

Dr Mitchell advised the Project Team that a project plan, detailing the links with other Project Teams and providing a breakdown of the key tasks to be undertaken as part of the Project, was required by the Programme Board. It was noted that in the short term this would involve identifying the legislative base and the legislative implications of proposals, identifying research/information requirements to support implementation, including information on the public health workforce, and providing input to the performance management framework.

8. ANY OTHER BUSINESS

- **Letter from the Academic Department (previously circulated)**

Dr Mitchell referred to the letter received from the Academic Department, Queens University. Members were advised that a meeting would be organised with Dr Power to obtain a steer on the future arrangements for information management in the HSSA before specific work would be undertaken in relation to the future options for the cancer registry.

Action: Damien Martin

9. DATES OF FUTURE MEETINGS

- Monday 24th April 2.00pm in Lecture Theatre, Castle Buildings
- Members were asked to note the date of the Project Teams Workshop- 10th May 2006.

Dr Mitchell thanked everyone for their attendance and closed the meeting at 12:30pm.