

**SOUTH EAST ENGLAND REGIONAL ASSEMBLY  
EXECUTIVE COMMITTEE**

Date: 11 April 2008

Subject: **Report from the Regional Health Summit - 22 January 2008**

Report of: Head of Policy

**Recommendation:**

That the Committee notes the contents of this report.

**Purpose of Report:**

To update members on the issues raised at the Assembly's Regional Health Summit, held on 22 January 2008.

**Key Issues:**

Partners from a range of regional organisations, including senior representatives from the Assembly, SEEDA, GOSE, the Strategic Health Authorities and RAISE, met to consider strategic issues:

- Health partners' engagement with Local Area Agreements in the region.
- The NHS Operating Framework 2008/09.
- The NHS Integrated Care Record 'Connecting for Health'.

# **SOUTH EAST ENGLAND REGIONAL ASSEMBLY REGIONAL HEALTH SUMMIT**

**Note of Meeting on Tuesday 22 January 2008 10.30am-12.30pm  
Institute of Civil Engineers, Westminster**

## **1. Welcome and introductions by the Chairman**

- 1.1 Cllr Keith Mitchell welcomed everyone to the meeting.
- 1.2 Keith conveyed the Summit's thanks to Rolande Anderson who is leaving her post at GOSE.

## **2. Sub-National Review of Economic Development and Regeneration (SNR) - Update**

- 2.1 Paul Bevan introduced this item and explained that Government's consultation on the SNR now seems unlikely to be published before late February 2008. Communities and Local Government (CLG) and the Department for Business Enterprise and Regulatory Reform issued a holding statement on 21 December 2007. Despite the delay with the consultation, the Assembly, SEEDA and GOSE are continuing to work closely together considering possible future regional structures.
- 2.2 Keith Mitchell highlighted that it is important to understand the unique political geography of the South East, which is predominately two-tier with 61 out of the 74 councils Conservative. He explained that a recent meeting with council leaders had resulted in a degree of consensus on a way forward for the region.
- 2.3 Members discussed views on possible ways forward in the region. In discussion, the following points were raised:
  - Members noted that the Assembly, SEEDA and GOSE had worked well together and must continue to do so. Greater alignment of policy in the region is important.
  - The central role of sustainable development in policy development should be maintained in the future, particularly in the new single regional strategy proposed in the SNR.

## **3. Local Area Agreements (LAAs)**

- 3.1 Yvonne Arthurs, Regional Public Health Group, introduced this item. This is a fast moving area of work. She explained that many of the 19 authorities developing LAAs in the region have submitted their indicators. So far there is generally good consistency between the indicators submitted and the issues the SHAs and public health team have identified in each area. Negotiations on the sets of indicators submitted will now begin along with work on translating indicators into targets. The indicators will also be mapped against Government department and national priorities.

3.2 Guidance is awaited on the finance and funding arrangements as well as the technical definitions for indicators. A user manual should be published by the end of February 2008.

3.3 In discussion, the following points were raised:

- Further clarification was sought on the performance reward grant. Details of the grant will become clearer from the CLG guidance expected at the end of February.
- The challenge of getting agreement and buy-in to the indicators from the Local Strategic Partnerships was recognised. The issue of the number of targets required in an LAA was raised; fewer targets could make it easier to track progress.
- Across Government departments there is increasing buy-in to the LAA process. However, members stressed that departmental involvement needs to be reflected in the Government's wider policy developments and spending.
- The possibility of delivering economic development in the future through LAAs in the region was considered.

#### **4. The NHS Operating Framework**

4.1 Mike Daly, South East Coast SHA, gave a presentation on the NHS Operating Framework 2008/09. The framework sets out priorities for the next year, outlines progress and next steps in reform and the financial regime of the NHS. The Framework also stresses the need for Primary Care Trusts to work with local authorities to improve health and well-being, through mechanisms such as LAAs.

4.2 In discussion, the following points were raised:

- Improved access to dental care is a priority, and pharmacy is seen as increasingly important.
- NHS capital budget is allocated through a business planning bidding process, although the majority of capital is provided by public-private partnerships.

#### **5a. Introduction to Social Care**

5.1 Oliver Mills, Chair of Association of Directors of Social Services - South East (ADSS), gave an introduction to key strategic issues relating to social care. In December 2007 Government signed a concordat with local authorities called 'Putting people first'. The concordat will mean that each local authority will work with partners to create a new high quality care system by 2011. Two other key elements in the care agenda are the NHS Darzi review and the forthcoming green paper on social care. A key part of preparing for these changes will be the development of workforce development plans to determine what skills are needed locally to deliver care. At a regional level ADSS are working with others, such as the SHAs and the Care Improvement Partnership, to develop care capacity through a joint implementation partnership.

- 5.2 The Health Summit will continue to develop its links with the social care sector to help develop understanding on key strategic issues.

## **5b. Strengthening the Department of Health's Regional Presence**

- 5.3 Mike Daly, South East Coast SHA, gave an update on the ongoing work by the Department of Health (DH) to build on the capacity and capability located within the nine Regional Public Health Groups and the Eight Regional Development Centres. The next key step will be the appointment of a Deputy Regional Director of Social Care for the region. Members welcomed the appointment as bringing vital regional leadership to social care.

## **6. Integrated Care Record 'Connecting for Health'**

- 6.1 Tad Matus, South East Coast SHA, gave a presentation on the Integrated Care Record. The aim is to create a single electronic record of a patient's health and social care. A discussion followed about the difficulties of finding the right technology and suppliers to develop the system and the issues surrounding its implementation.

## **7. South East England Health Strategy - Update**

- 7.1 John Newton, South Central SHA, introduced this item. The substantive changes since the Summit last met are that there are now six themes in the Health Strategy, compared to the previous five, and that more detail has been added to the objectives, actions and indicators. The Strategy will be launched on 7 February 2008 at the Regional Public Health conference. Developing an Implementation Plan for the Strategy is the next step, and the Regional Public Health Team will be appointing a Programme Manager as part of this. A high level group is required to steer implementation and the role of the Health Summit in this was considered. It was agreed that this will be discussed in more detail at the next meeting of the Health Summit.

## **8. Future meetings**

- 8.1 Members discussed the Summit's strategic importance. Workplace health was agreed as an issue of significance for all partners to explore further. Workforce skills, including developing the right skills to care for an ageing population, were also raised. These were noted as key issues for the region and were agreed as topics for future meetings. The next Summit meeting will also explore the role of the Summit in relation to the Health Strategy.

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