# CABINET MEMBER FOR ADULT INDEPENDENCE HEALTH AND WELLBEING 31st January, 2011

Present:- Councillor Doyle (in the Chair); Councillors Gosling and P. A. Russell.

Apologies for absence were received from Councillors Steele and Walker.

#### H49. TRANSITION FROM ALIVE BOARD TO HEALTH AND WELLBEING BOARD

Dr. John Radford, Director of Public Health gave a brief outline background to the public health white paper and consultations taking place. He gave a presentation and highlighted points from the submitted report covering:-

- Healthy Lives, Healthy People : Department of Health Strategy for public health in England
- Health Lives, Healthy People : Consultation Overview
- Consultation process
- Consultation questions
- Outcomes framework for public health: consultation questions
- Funding and commissioning for public health: consultation guestions
- Consultation process for outcomes framework
- The Health Background
- The New Approach
- Health and Wellbeing throughout life
- A New Public Health System
- Public Health England
- Proposed Role The Director of Public Health
- Public health funding and commissioning
- Defining commissioning responsibilities examples
- Public Health and the NHS
- Allocations and the health premium
- Accountability
- Public Health Outcomes Framework : Vision
- The Indicators
- Public Health Outcomes Framework : Alignment with NHS and ASC
- Summary Timetable
- Overall Transition
- Healthy Lives, Healthy People A Consultation

#### Also submitted were:-

- HM Government Leaflet : Healthy Lives, Healthy People The Government's plans for public health
- Department of Health Factsheets : Local Democratic Legitimacy

: Commissioning for patients

Discussion and a question and answer session ensued and the following issues were covered:-

- consultee range
- importance of Health and Social Wellbeing Board
- Joint accountability of local authorities and the Secretary of State
- Surgery follow up work by GP's.
- Migration from the Alive Board to the Health and Social Wellbeing Board
- Need to review the JSNA
- consultation deadline and resulting proposals timescale
- support for carers
- composition of Health and Social Wellbeing Board
- holding the GP consortium to account

Resolved:- That the information be noted and John Radford be thanked for his informative presentation.

#### H50. ROTHERHAM AIDS AND ADAPTATIONS POLICY

Consideration was to given to the submitted report detailing proposals for the Council's Aids and Adaptations Policy within the borough. It highlighted key implications for customers living within the borough.

The Aids and Adaptations (A&A) Team currently operated the statutory function of the Council to administer the Disabled Facilities Grant (DFG) and arranged relevant adaptations to properties within the Borough.

The policy was principally aimed to help people remain in their own homes through the provision of equipment and adaptations. However, adaptations were a last resort and as such all alternatives would be reviewed. The Council must therefore decide whether the applicants needs could best be met through:

- Adaptations within reasonable cost boundaries
- Issue of equipment, or
- Re-housing to an alternative adapted accommodation

Adaptations were split into three categories:

- Minor fixings (non means tested and under £1000 in value)
- Minor adaptations (non means tested and under £1000 in value, requiring some structural work)
- o Major adaptations (means tested over £1000 in value)

A major adaptation could be made up of several minor adaptations.

The report set out more detailed information relating to:-

- Main Proposals
- Eligibility for Customers Requesting an Adaptation:
- Agency Fees:
- Decisions (customer choice):
- Grounds for Refusing an Adaptation
- Under Occupancy
- Mutual exchanges
- Reports not Submitted
- Split Households

Resolved:- That the Rotherham Aids and Adaptations Policy be noted.

### H51. EXCLUSION OF THE PRESS AND PUBLIC

Resolved:- That, under Section 100A(4) of the Local Government Act 1972 the press and public be excluded from the meeting for the following items of business on the grounds that they involve the likely disclosure of exempt information as defined in Paragraph 3 of Part 1 of Schedule 12A to the Local Government Act 1972 (business/financial affairs.)

### H52. BREASTFEEDING IN ROTHERHAM - UNICEF BABY FRIENDLY INITIATIVE

Anna Jones, Public Health Specialist, Children, Young People and Maternity, gave a presentation in respect of breastfeeding in Rotherham and the progress towards achieving the community Unicef Baby Friendly Initiative (BFI) in Rotherham (by 2013) and highlighted the risks of not achieving this quality standard.

Breast milk provided infants with the best start in life, it protected and reduced the risk of illness for both mother and child, which in turn reduced dependence on health services, resulting in short and long term NHS Savings.

Breastfeeding rates (both initiation in hospital and continuation at 6-8 weeks) in Rotherham had been steadily improving over the last 8 years. A range of robust systems were now in place to support women to continue to breastfeed as long as they wanted to. Whilst additional support, services and interventions were starting to show an impact on improved breastfeeding rates, Rotherham still had the poorest breastfeeding rates in Yorkshire and the Humber (and was in the bottom quintile nationally).

The presentation covered:-

- The UNICEF Baby Friendly Initiative and its implications for Rotherham
- What is the UNICEF Baby Friendly Initiative?
- seven point plan for sustaining breastfeeding in the community
- Implementing the UNICEF Baby Friendly Initiative means following and applying the set criteria laid down in their staged programme

- the breastfeeding policy
- staff education
- steps to attain UNICEF Baby Friendly Stages 2 and 3

Discussion and a question and answer session ensued and the following issues were covered:-

- evidenced savings
- need to continue the positive momentum
- maintaining staff training
- reasons for Rotherham lagging behind nationally
- initiatives to change attitudes towards breastfeeding

Resolved:- That the information be noted and Anna be thanked for an informative and interesting presentation.

### H53. ACTION ON INFANT MORTALITY IN ROTHERHAM

Anna Jones, Public Health Specialist, Children, Young People and Maternity, reported on infant mortality in Rotherham and gave a presentation which covered:-

- Infant mortality updated 2006/09
- infant mortality rate
- identifiable actions to reduce the 2002-04 gap in infant mortality
- key findings
- action plan and development
- further developments
- action on infant mortality in Rotherham

Also submitted was a background paper on action on infant mortality in Rotherham, infant mortality equity audit 2010 and an updated action plan regarding reducing health inequalities in infant mortality covering:-

- Knowledge of infant mortality and the current position
- Comprehensive Preconception Services
- Early Intervention/prevention for high risk pregnancies
- Comprehensive postnatal service support/interventions
- Wider determinants to be considered.

Discussion and a question and answer session ensued and the following issues were covered:-

- infant mortality equity audit 2010 breakdown by ward

- correlation between highest numbers of births and most deprived wards
- improvements in breastfeeding
- stillbirth review significance
- targeting resources
- low birth weight
- percentage of mothers smoking
- percentage of mothers breastfeeding

Resolved:- That the information be noted and Anna be thanked for an interesting and informative presentation.

# H54. FEE SETTING - INDEPENDENT SECTOR RESIDENTIAL AND NURSING CARE 2011/12

Doug Parkes, Business Manager, Neighbourhood and Adult Services presented the submitted report which sought agreement to the increase in fees to Independent Sector Residential and Nursing Care Providers for 2011/2012 in accordance with the established inflation formula.

This inflation linked formula was a contractual commitment. Last year there was no increase in the contract price due to low rates of inflation.

The funding for these fee increases was included within the Directorate's budget requirements for 2011/12.

Resolved:- That the fee for Residential and Nursing Care Homes be increased, as now set out, with effect from April, 2011.

## H55. LOCAL AUTHORITY CIRCULAR ON THE PERSONAL CARE AT HOME ACT 2010 AND CHARGING FOR RE-ABLEMENT LAC (DH) (2010) 7

Doug Parkes, Business Manager, Neighbourhoods and Adult Services presented the submitted report which set out the potential implications to the Council and recommended actions following the issue of Local Authority Circular LAC (DH) (2010) 7 – Personal Care Home Act and Charging for Reablement.

Resolved:- That, with effect from April, 2011, re-ablement be provided free of charge for the first six weeks.