

- Attendance of Executive Partnership Board members and their deputies should be reviewed to ensure maximum attendance to meetings

Amendments to the final draft paper and action points were agreed as follows:

- 1) It was agreed that the proposed date of '2010' quoted for the transformation of services to deliver a world class mental health service, should be deleted from the document.

ACTION: Janice

- 2) Frequency of Partnership Board meetings every two months and (with immediate effect) to include a ten minute break.

- 3) A review of Executive Partnership Board members and their nominated deputies to ensure maximum attendance to future meetings.

ACTION: Richard

- 4) Develop the Partnership Board action plan.

ACTION: Janice and the LPB Team

2. Crisis and Respite Project update

Paul gave members an update on the Crisis and Respite Service Development Project advising that service user/carer and staff questionnaires had been received and were in currently being data loaded for analysis. Paul is working with the University of Central Lancashire (UCLAN) on how this data should be presented. The information and recommendations will then be developed further with the Mental Health Leads.

The information was also being shared with Lancashire Care Trust in respect of their work on 'transformation' and Paul will be meeting with Frances McKinney from Lancashire Care Trust.

Richard cited this as an excellent piece of work already being undertaken, and of the value of the Partnership Board in co-ordinating this.

3. Local Area Agreements (LAA)/Outcomes update

A paper 'Focus on mental health and wellbeing outcomes' prepared by Janice giving an update for the LAA's had been circulated to members prior to the meeting. Richard explained to members that there are three 'Local Area Agreements' (LAA) in Lancashire and that these will become a vehicle for what will be put into place. Mental health currently is not featured strongly other than in respect of suicide prevention and every local authority in the country has to review their agreement and find ways of raising the awareness of mental health.

Janice advised that she had made connections with all three of the Lancashire LAA Leads and had discovered that each local authority's agreements were different. However she had been looking at negotiating with them in respect of the Partnership Board's work and how outcomes could be influenced. Comments on the approach were made as follows:

- Stephen Sloss suggested a small brochure could be produced to help overcome prejudices around mental health issues and to assist with engagement.
- A discussion took place around the need for focus on not just health but also social care.
- To link with Local Strategic Partnerships on how to involve all people, in mental health from the age of 16 and over, not just specific groups i.e. older adults or people with learning disabilities.
- There is an opportunity to build in a multi area strategic partnership with flexibility for local area requirements. The Partnership Board can help to influence the LAA agenda.

It was agreed that this was an important area of work in looking at the best routes for planning. Richard advised that the LAA presentation given at the last Partnership Board meeting had included relevant data on issues such as people on long term benefits. This needed to be extracted and collated into a localised report. Steve Pullan noted that the word 'monitoring' should be removed from the last paragraph of the paper, this was agreed by all members.

ACTION: Janice

4. Knowledge Transfer Partnership (KTP) Research Project

Janice advised that the Partnership Board's bid for the KTP Research Project had been approved. KTP is a Department of Trade and Industry project in order for grants to be awarded to research organisations such as UCLAN, to work with business partners to help improve systems and outcomes. The approved bid is the first of its kind to be agreed and awarded in health and social care in this area. The project will look at different ways of commissioning with the third sector. Paul will be meeting with UCLAN next week and the vacancy for a graduate KTP worker is to be advertised. Steve Pullan will be chairing the project steering group.

The chair of the meeting was handed over to Stephen Sloss as Richard gave his apologies for having to leave at this point.

5. Smoking ban

Daniel raised his concerns over the national smoking ban to be enforced in England from 1st July 2007 and the impact this would have on mental health service users confined to inpatient units. A broad and lengthy discussion took place around the associated issues on how this will affect every person and every organisation in society, and whether mental health service users should be treated differently. Organisations including Lancashire Care Trust will be obliged to follow legislation which will provide challenges and implications for mental health services.

Stephen Sloss summarised the following points:

- The Partnership Board noted that there were challenges ahead
- Any further discussion should be directed to Lancashire Care Trust

6. Lancashire Care Trust revised service user and carer policies

Revised copies of Lancashire Care Trust service user and carer recognition, recruitment and selection, and code of behaviour policies had been circulated to members prior to the meeting. The revised policies had been approved by the board of Lancashire Care Trust. Wendy noted that the code of behaviour policy header had been amended to specify the Lancashire Mental Health and Social Care Partnership Board. It was agreed that the original copy of the policy showing Lancashire Care Trusts headed logo should be used, to be consistent.

ACTION: LPB Team

A broad and lengthy discussion took place in respect of the policies set out, with Daniel raising several concerns over the content and how the policies were produced. The Partnership Board had already agreed to adopt these policies and unless a viable alternative was put forward, could not continue without this policy in place.

It was agreed that the policies would continue to be adopted by the Lancashire Mental Health and Social Care Partnership Board. Any individual issues raised in respect of the policies should be directed to Lancashire Care Trust for consideration at their next review in February 2008.

7. Recruitment of Service User and Carer Members update

Paul advised members that the recruitment process was underway and twenty interviews had been arranged to take place during May. The deadline for receiving applications had been extended as there had been few applications from carers received so far. Wendy requested that a service user and carer resident from each locality of Lancashire should be appointed as representatives, where at all possible.

8. Any other business

Janice advised that an action plan and presentation was being prepared to bring to the Partnership Board meeting in June in respect of BME engagement and involvement. Information and suggestions on how to improve engagement will be brought to the meeting.

Daniel gave information on the current situation around the development of an alcohol strategy and that a needs assessment is required for each area. Blackburn with Darwen PCT had already agreed to be involved and Daniel extended an invitation to all the remaining Primary Care Trusts to become involved in helping to move this forward. Wendy suggested that Daniel issue information regarding this, through Janice and Paul, as a way of networking with the PCT's and seeking their response.

ACTION: Daniel, Janice and Paul

Date and time of next meeting – Friday, 15th June 2007, 1.30pm-3.30pm to be held in the Boardroom at Central Lancashire PCT, Jubilee House, Centurion Way, Leyland.