

# Ashford Health and Wellbeing Board

Minutes of a Meeting of the Ashford Health & Wellbeing Board held on the **18th October 2017.**

## Present:

Councillor Brad Bradford - Portfolio Holder for Highways, Wellbeing and Safety, ABC (Chairman)

Dr Navin Kumta – Clinical Lead and Chair, Ashford CCG (Vice-Chairman)

Sheila Davison – Head of Health, Parking and Community Safety, ABC

John Bridle – HealthWatch

Chris Morley – Patient and Public Engagement (PPE) ( Ashford CCG)

Roy Isworth – KALC

Julie Thain – Sense Interactive

Debbie Walters – Intelligent Health

Dr William Bird – Intelligent Health

Allison Duggall – Public Health, KCC

Deborah Smith – Public Health, KCC

Sharon Williams – Head Of Housing, ABC

Christina Fuller – Head of Culture, ABC

Alex Waller – Sports and Activity Project Officer, ABC

Keith Fearon – Member Services Manager, ABC

## Apologies:

Helen Anderson, Ashford Local Children’s Partnership, Faiza Khan, Public Health KCC, Karen Cook, Strategic Partnerships, KCC, Tracey Kerly, Chief Executive, ABC,

## 1 Declaration of Interest

1.1 Roy Isworth made a Voluntary Announcement as he was a practising GP and Chairman of the Tenterden Day Centre.

## 2 Notes of the Meeting of the Board held on 18 July 2017

The Board agreed that the notes were a correct record, subject to it being noted that Chris Morley was present at the meeting.

## 3 Update on the Kent Health and Wellbeing Board Meeting – 20<sup>th</sup> September 2017

3.1 The Minutes of the Kent Health and Wellbeing Board meeting held on 20<sup>th</sup> September 2017 could be accessed using the link provided under item 4 on

the agenda. There were no specific actions to be addressed by the Ashford Health and Wellbeing Board.

## **4 Update on Ashford Health and Wellbeing Board Priorities**

### **(a) Stop Smoking Action Plan report 2016-2017: One Year On**

- 4.1 Debbie Smith introduced this item. She advised that Ashford had seen a reduction in smoking prevalence of 8.9% in the last year but was still 1.9% higher than the England average. The One You shop had been a huge success and now operated a dedicated weekly stop smoking clinic. Debbie Smith also explained that the National Tobacco Control Plan had a target to reduce smoking to 12% by 2022. The current figure for Kent was 15.2% and 17.4% for Ashford.
- 4.2 Debbie Smith then took the Board through the list of actions as set out in the report and said that the Task Group would develop these further in conjunction with the CCG and through work with GP surgeries. On the later point she clarified that the Kent and Medway STP was looking to commission a pilot scheme whereby GP's and other professional staff would be given brief intervention training and each GP provided with a CO monitor . There was also the option of providing the stop smoking service direct from surgeries. It was noted that the level of referrals by GP of patients into the Stop Smoking Service was low compared to other areas in Kent.
- 4.3 In response to a question about work undertaken with schools, Debbie Smith explained that primary schools were visited, but secondary schools had to decide whether the subject was part of the curriculum. It was sometimes challenging to get schools to engage. The Board considered that it would be appropriate for the Chairman to write to secondary schools to explain the work being undertaken on smoking cessation and provide information on the current levels of smoking in school age children.

### **Resolved:**

#### **The Board agreed that:**

- (i) the content of the report be received and noted.**
- (ii) it be noted that the 2017 Action Plan is in place following previous recommendations of the Board.**
- (iii) the continued delivery of the 2017 Action Plan be approved.**
- (iv) further work be piloted with GP's to increase referrals into the Stop Smoking Service.**
- (v) The Chairman write a letter to all secondary schools explaining the work being undertaken by the Stop Smoking Task and Finish Group**

**and the schools be asked to consider promoting the initiatives as part of their curriculum.**

**(b) Healthy Weight Action Plan report 2016-2017 – One Year On**

- 4.4 Debbie Smith drew attention to the progress report. The report advised that although there had been a slight decline in adults with excess weight in Ashford, the data showed an increase in childhood obesity at a local and national level over the last three years. She advised that mapping work would be further developed and it was proposed to use Insight data from the Victoria Ward when it became available. In terms of the One You Shop from its opening in February 2017 a total of 843 people had visited by July which had led to 1400 interventions. Of those over 50% had asked about healthy weight and had been signposted to other services for assistance. Debbie Smith also explained the work being undertaken with local primary schools and engaging with parents.
- 4.5 In response to a question, Debbie Smith said that she was happy to take the suggestion that school governors be made aware of the initiatives to the Task and Finish Group. She also considered that undertaking an audit of catering vending machines in schools would be useful.
- 4.6 The Chairman said that he wished to thank Debbie for all of the work she undertook on behalf of the Board for both the smoking and healthy weight task groups.

**Resolved:**

**The Board agreed that:**

- (i) the report be received and noted.**
- (ii) the continued success of the One You Shop be supported.**

**(c) Housing & Health**

- 4.7 Sharon Williams advised that it had been her intention to organise a workshop in October on the issue, however she was still trying to obtain feedback from other partners to be able to take this forward. It was also her intention to produce an Action Plan with relevant outputs. Sharon Williams asked partners for assistance in taking this forward.
- 4.8 In terms of homelessness it was suggested that it might be worth involving both the professionals who worked within this field and former homeless people who could contribute from their own personal experiences.
- 4.9 Allison Duggell said that NHS England had produced a useful piece of work on health in the new towns and explained that this contained good examples of best practice in other areas.

- 4.10 Alison Duggell was asked if she could help identify a contact in Adult Health Services and Navin Kumta a contact in the CCG and they work with Sharon Williams in developing proposals for a workshop.

**Resolved:**

**The Board agreed that the report be received and noted and Alison Duggell and Navin Kumta be asked to provide contact details for representatives from KCC Adult Health and the CCG respectively to assist in developing proposal for a workshop.**

**(d) Diabetes**

- 4.11 This was deferred as Neil Fisher was not present and no covering report had been provided.

## **5 Presentation: Vulnerable Adults; Frail Elderly and Universal 55+ Health and Wellbeing Resources**

- 5.1 Julie Thain, of Sense Interactive Ltd explained that her company had over 15 years experience in the Health and Social Care Sector and delivered resources which could be used to assist local communities. Attached to the report were copies of information produced for Hartlepool and Stockton-on-Tees and South Tees CCG's. Julie Thain explained that one of the principal aims of the publications was to reduce unnecessary attendance at GP surgeries and A&E. Her company had worked with 120 groups across the country including NHS Trusts and Health Boards.
- 5.2 Julie Thain also explained that the company was also able to provide the information via a web site which had voice over facilities and also by an app. The hard copy of the handouts would be available for distribution via GP surgeries or pharmacists.
- 5.3 In response to a question, Julie Thain explained that the content of the booklet and the subjects covered was flexible and could be adapted to meet any particular local need and to also incorporate local contact details. Dependent upon the number of topics covered a run of 5000 copies of the handbook would be in the region of £9500, with additional costs of £8500 for web site access and £14,000 for a dedicated app.
- 5.4 The Board considered that the booklet and the other applications would be useful for both the frail elderly and their carers but said that the Communications Team of the East Kent NHS Trust and CCG should be asked to consider the proposal prior to any further consideration by the Board.
- 5.5 The Chairman thanked Julie Thain for attending the meeting.

**Resolved that:**

- (i) consideration of the proposal be referred to the Communications Teams of the East Kent NHS Trust and the CCG.**
- (ii) An update report be presented to the next meeting.**

## **6 Beat the Street – Update Summary**

- 6.1 Dr William Bird and Debbie Walters, of Intelligent Health gave a presentation on the Beat the Street game and its possible application in Ashford. The presentation stemmed from the discussion at the previous meeting of the Board when the game was supported in principle subject to the provision of more information about cost and sustainability. The report and presentation had been published on the Council's web site under:  
<https://secure.ashford.gov.uk/committeesystem/ViewAgenda.aspx?MeetingId=3193>
- 6.2 Dr Bird explained that Sport England had a fund of £250m over 4 years and an initial joint bid for funding for Ashford had been submitted, and the outcome of that bid was still awaited.
- 6.3 In response to a question about sustainability, Debbie Walters explained that contact with the Community Groups was maintained following the conclusion of the game and the Team Leaders of those groups were encouraged to take responsibility for their teams in taking forward the experience gained from the initial game. Interest would also be maintained via Facebook and Twitter. In any event, Intelligent Health undertook a follow up survey after 6 months and used evidence based on self-reporting which was a World Health Organisation standard.
- 6.4 Debbie Walters also explained that several authorities had run the game again, with Hounslow having undertaken it 5 times and Belfast had had 7 programmes. In terms of take up by the local population, Dr Bird said that the average was 12% but he considered that the take up for Ashford could be between that figure and up to 18%. It was also possible to apply the game within the rural areas if they were large enough and suitable for its application. It was noted that the beat units were battery operated and it was considered that either February or April were the best months to commence games.
- 6.5 The Chairman thanked the presenters for attending the meeting and said that he looked forward to receiving the outcome of the initial bid proposal to Sport England.

**Resolved:**

**The Board agreed that the presentation be received and noted.**

## **7 Annual Update from Local Children's Partnership Group**

- 7.1 The report gave an overview of Local Children's Partnership Groups and the Ashford LCPG and aimed to encourage further partnership commitment to achieving outcomes against local priorities for children and young people.
- 7.2 As Helen Anderson had sent apologies it was agreed to defer the item to the next meeting in January 2018. The Board also wished for the report to contain information on the recent proposed changes to the troubled families and LCPG grant arrangements. Also to address the LCPG priorities as relevant to the health agenda.

### **Resolved:**

**That consideration of this item be deferred to the next meeting and the report to also include information on troubled families and the LCPG priorities.**

## **8 Partner Updates**

### **(a) Clinical Commissioning Group**

- 8.1 In response to a question about timescales for the various developments, Navin Kumta explained that they were within the 5 year forward view.
- 8.2 Roy Isworth referred to premises within Tenterden that were not used for health provision and expressed concern that no action had been taken to bring them into use. Navin Kumta explained that the nature of the facilities provided in Tenterden would be a matter for the Local Care agenda and the aim to place more services into the local community. Chris Morley also explained that the use of premises was part of a significant piece of work being undertaken by KCC and the NHS as part of the One Public Estates philosophy and for the Commissioners to determine what facilities were provided in each area.

### **(b) Kent County Council (Public Health)**

- 8.3 Update noted.

### **(c) Ashford Borough Council**

- 8.4 Update noted.

### **(d) Voluntary Sector**

- 8.4 Not provided as position currently vacant.

### **(e) Healthwatch**

8.5 John Bridle gave details of an issue raised with them regarding problems with the transfer of a patient from another part of the Country to the William Harvey Hospital.

**(f) Ashford Local Children's Partnership Group**

8.6 Update noted.

## **9 Forward Plan**

9.1 It was agreed that the following items would be on the agenda for the Board meeting on 17<sup>th</sup> January 2018.

- Ashford Vineyard
- Local Children's Partnership Partnership Group Yearly Update incorporating information from Headstart
- Ashford & Tenterden Estates strategy
- STP Local Care arrangements

9.2 In terms of the April meeting, representatives of Ashford Clinical Providers would be invited to present to the Board.

## **10 Dates of Future Meetings**

10.1 The next meeting would be held on 17<sup>th</sup> January 2018.

10.2 Subsequent dates:

18<sup>th</sup> April 2018

18<sup>th</sup> July 2018

17<sup>th</sup> October 2018

## **11 Exclusion of the Public**

**Resolved: That pursuant to Section 100A(4) of the Local Government Act 1972 as amended, the public be excluded from the meeting during consideration of the following item, namely Sustainability and Transformation Plan, as it is likely in view of the nature of the proceedings that if Members of the public were present there would be disclosure of exempt information hereinafter specified by reference to Paragraph 3 of Schedule 12A of the Act, where in the circumstances the public interest in maintaining the exemption outweighs the public interest in disclosing the information.**

## **12 Sustainability and Transformation Plan, Prevention**

12.1 The exempt report gave an update on the proposed initiatives being developed for the Prevention STP. Allison Duggall explained the background

to the proposals in terms of weight management and reducing smoking prevalence.

12.2 The Chairman thanked Allison Duggall for her presentation.

**Resolved:**

**The Board agreed that the report be received and noted**