

## **HEALTH LIAISON BOARD**

Minutes of the meeting held on 8 July 2015 commencing at 2.00 pm

Present: Cllr. Mrs. Bosley (Chairman)

Cllr. Brookbank (Vice Chairman)

Cllrs. Abraham, Brookbank, Dr. Canet, Clark, Dyball, McArthur and Parkin

### 1. Minutes

Resolved: That the minutes of the meeting held on 22 April 2015 be approved and signed by the Chairman as a correct record.

### 2. Declarations of Interest

There were no additional declarations of interest.

### 3. Actions From Previous Meeting

The Health and Communities Manager advised that the Care Quality Commission (CQC) report had been circulated for Sunrise Residential Care Home in Bessels Green. The CQC were responsible for inspecting private care homes and hospitals and this inspection had been brought to the Board's attention last year to inform Members of potential issues relating to an 'Inadequate' CQC rating. A further inspection was carried out in April and the care home had improved since the last inspection with most of the criteria requiring improvements rather than being 'inadequate'. A follow up inspection will be carried out by CQC to continue to monitor the progress to meet care standards.

### 4. Updates from Members

Cllr. Brookbank advised that he was the Chairman of the Kent County Council (KCC) Health and Overview Scrutiny Committee (HOSC). He reported that at the next meeting in July, NHS England and developing GP services would be discussed and the Board would be updated in September. He advised that there had been a HOSC area meeting where the CQC reported that there were 3 separate teams for General Practices (GPs), Hospitals and Care homes, not all procedures were in place yet as it had been a recent change.

He also informed the Board that Medway hospital was coming out of special measures and Pembury and Maidstone hospitals were showing signs of improvement. A further update would be provided in September.

Cllr. Dr. Canet expressed concern that Patient Transport Services were out to tender, led by West Kent CCG, and the difficulty people had getting to hospitals as the eligibility criteria was set nationally.

## Health Liaison Board - 8 July 2015

Cllr. Parkin advised that she was a representative for Age Concern in Darent Valley and they owned their own day care centre in Fawkham. It was hoped Dementia Training would be provided for the staff. The Health and Communities Manager advised that the training was something the District Council could help with. Cllr. Parkin informed Members there was a Dementia Café in West Kingsdown which had been running for 3 months. Cllr. Abraham informed the Board that he had attended the Dementia Friendly training and safeguarding training as part of the Member Inductions and there was a successful Dementia Friendly Café in Hartley.

Cllr. McArthur advised that she had been informed that a residential care facility in Edenbridge was to close in 3 weeks time. Cllr. Brookbank advised that if there were residents there under KCC's Social Care they would be re-housed to a different location.

Cllr. Clark advised that he was the Chairman of the Children's Centres steering group and expressed concern with the Children's Centre's due to the number of reorganisations that were taking place. He also advised that he attended a regional 'Health Watch' meeting which was a sub organisation of Health Watch England. Health Watch was the overarching organisation with statutory powers. They represent the views of patients and make sure patients comments are feed into strategic and operational decision which affect how health and social care services were delivered.

Members discussed whether the Chief Executive of Health Watch Kent should be invited to a future meeting of the Board to advise the role of Health Watch and what they do. They were struggling to raise their awareness amongst residents.

Cllr. Mrs. Bosley had attended the West Kent Clinical Commissioning Group (CCG) Governing Body meeting. There was a Clinical Strategic Group who were investigating mental health needs, in particular adult health. She reported that the extension of GP hours was discussed and response had been sent in support of not extending hours as the elderly and children could access surgeries Monday to Friday, and these make up the majority of GP visits. There were still concerns at the number of retiring GPs and the issues surrounding recruitment.

The Health and Communities Manager advised that the Chief Executive had received a letter from the Director of Public Health at KCC giving advance notice of possible funding reductions, in line with the national 7.4% in year and recurrent public health savings. She advised that KCC had also issued a contract tender for a Strategic Partnership to lead on Mental Health contracts across West Kent. West Kent MIND (previously Sevenoaks Area Mind) were one of four applying for this contract in West Kent.

The contract would be for 5 years to the value of 700,000 per annum. The lead Strategic Partner would be responsible for overseeing the commissioning of mental health providers and linking new and existing services to provide a comprehensive community mental health service. The Council would work with the organisation who was awarded this contract, which will commence from April 2016, to ensure strategic links are made with partners across the District.

### 5. Young People's Sexual Health Services

The Chairman welcomed Wendy Jeffreys, Sexual Health Public Health Specialist from KCC and Wendy Glazier Clinical Service Manager for Sexual Health at Maidstone &

## Health Liaison Board - 8 July 2015

Tunbridge Wells NHS Trust to the meeting. Wendy Jeffreys gave a [presentation](#) on the new contracts and services that would be provided since new contracts had been awarded for integrated sexual health services. These services aim to provide a more holistic approach such as providing services for contraception and Sexual Transmitted Infections (STIs). The model would provide a central point for users in each district and it was hoped that by being more flexible it would make positive changes on the way people viewed their sexual health.

In response to questions Members were advised that the rate of conception stated in the presentation was per 1,000 of 15–17 year olds. Rates and Percentages were used as using specific numbers could mean that people were identifiable. She advised that there were low numbers of conception but a higher rate of those being aborted, compared to other Kent districts. It was emphasised that overall numbers were low in this district and continued to decrease.

Members were informed that they were exploring locations in the District for Sexual Health integrated services for conception and STI screening in Sevenoaks and Edenbridge. In Edenbridge the services would be provided on an a weekly basis but at alternate locations within the Eden Centre and GP Surgery. In response to questions, the Board was informed that there were problems trying to find suitable locations across the rest of the District as a clinical and waiting room space were required.

Members were advised that not all areas in the District had trained Pharmacists, especially the larger companies in supermarkets who operate privately. However these companies were being worked with to enable Chlamydia screening, and contraception. Outreach teams would be placed at locations to respond to the need of areas and were working to prevent STIs and encourage safe sex. They hoped to work with outreach nurses and youth workers to prevent overlapping of areas, however this was work in progress.

Members thanked Wendy Jeffreys and Wendy Glazier for attending.

### 6. Health and Wellbeing Prevention Programmes

The Health and Communities Manager presented a report which provided details of the health and wellbeing prevention work undertaken by the District Council. The Council received annual funding from KCC Public Health of £130,741 to co-ordinate and deliver a schedule of targeted interventions across the District based on local needs. Members were also shown a [presentation](#) of the wider health agenda and details of how the healthy living programmes link to this work.

Members were informed that the biggest healthy living programme was the 'Why Weight' scheme which was for people with a Body Mass Index (BMI) between 28 and 40. The scheme ran over a 12 week programme which was over subscribed and always had a waiting list. The Council was commissioned to run 12 courses and last year ran 15. Once the course had been completed, support continued for a 2 year period to help them loose 5–10% of their body weight and maintain weight lose through healthier living. Participants attend both exercise and nutritional classes to provide a holistic approach and to sustain longer term change. Many often went on to continued weight loss without the help of the monthly support but were contacted every 6 months to check on progress.

## Health Liaison Board - 8 July 2015

The Health and Communities Manager advised that all of the outreach team supporting participants were trained in motivational interviewing and were able to refer users of the services to other health projects such as NHS stop smoking service. The Healthy Living Project Officer advised Members of the other health living programmes which were run in the District and the 'Be Inspired Be Active' programmes, funded for two years by Sport England and KCC.

The Chairman encouraged the Board to support the initiatives by promoting them to their residents and visiting some of the programmes the Council was offering to promote health and report back to the Board. Members were informed that the initiatives were funded by KCC so these could be at risk of funding cuts in future years.

In response to a question the Health and Communities Manager advised that there was a high proportion of older people in the District and this is a priority as the numbers are forecasted to continue to rise.

*Action1: For the Health and Communities Manager to circulate data relating to older people in the District.*

Resolved: That the report be noted.

### 7. Work plan

The work plan was discussed and the Health Priorities Better Care Fund would be moved to the meeting on the 25 November 2015 and Health Watch would be invited to the September 2015 meeting. The Chairman advised the Board that it was hoped to progress the health agenda across the Council's core business however the Terms of Reference for the Board would be looked into and an update would be provided at the next meeting.

THE MEETING WAS CONCLUDED AT 4.10 PM

CHAIRMAN