# Health Liaison Board

# Minutes of the meeting held on 10 January 2024 commencing at 2.00 pm

Present: Cllr. Harrison (Chairman)Harrison (Chairman)

Cllr. Perry Cole (Vice Chairman)

Cllrs. Ferrari, Manston, Scott, Shea and Streatfeild

Apologies for absence were received from Cllr. G. Darrington

#### 10. Minutes

Resolved: That the minutes of the meeting held 7 June 2023 be approved, and signed by the Chairman as a correct record.

### 11. Declarations of Interest

There were none.

## 12. Updates from Members

Cllr Streatfeild was a Member of the Health Overview and Scrutiny Committee at Kent County Council, and updated the board on the Integrated Care Strategy (ICS). It had been adopted, and a workshop had been conducted to align the priorities of the ICS and the Health & Wellbeing Action Plan.

#### 13. KCC Public Health Update

Members heard a presentation from Kent County Council (KCC) Public Health. The presentation provided a breakdown of the district's demographics, and outlined the strategy, production, and outputs of the Integrated Care Strategy (ICS). They further updated members of the future plans of KCC Public Health, and the upcoming opportunities and challenges. These included the cost-of-living crisis and the current economic climate.

Members asked questions of clarification. It was a priority to promote health solutions at scale, as there were insufficient resources for interventions at an individual level to address the problem. These solutions included partnership work between organisations, peer support groups, and addressing the circumstances which contributed to health issues in the district. The health priorities of the district were set out by the Portfolio Holder for Housing & Health and partnership organisations; Member input and feedback on the priorities was also encouraged. A directory of services for Sevenoaks was being prepared, to provide insight on what was being delivered in the district. The Council no longer held a list of local services, but did help individuals and organisations discover each other through the <u>Better Together Hub</u> and the Voluntary Sector Forum.

Members were advised that the further public health data for the district was available from the Kent Public Health Observatory website and the Office for Health Improvement and Disparities' Fingertips programme. It was noted that it was important to consider the district's health situation both in relation to other local authorities, and in its own absolute terms.

Resolved: that the report be noted.

# 14. North Kent Mind Update

The Chairman advised the committee that the representatives from North Kent Mind were unable to attend the meeting.

Resolved: that consideration of the North Kent Mind Update be deferred until the next meeting of the Health Liaison Board.

# 15. Age UK Update

The committee heard an update from the Chief Executive of Age UK Maidstone, Sevenoaks, and Tonbridge regarding the services provided within the district, and future initiatives. The three areas had merged together to compress operations, following the termination of several sources of funding that totalled around £300,000 per year. The merger meant that the Age UK office spaces in Sevenoaks and Tonbridge were cut, but Members were assured that community hubs were maintained in all areas.

She updated the committee on the projects within the district, including a Dementia Services Group, food deliveries for the Edenbridge Health Hub whilst the kitchens were being prepared, hospital transport groups for Maidstone and Sevenoaks, and information and advice services. This included applying for disabled parking permits, and carer support forms. The Committee heard that the organisation had helped elderly residents of Sevenoaks & Tonbridge claim over £1m in benefits that they would otherwise have missed since the merge.

She further updated the Committee on the organisation's goals and plans for the future. This included an expanded meals-on-wheels service to Sevenoaks and Tonbridge, which was being initially trialled in Edenbridge. They were further engaging with elderly residents to provide specialised local services. A pilot Diabetes Peer Support Group had been launched in Maidstone, and would be introduced to Sevenoaks also.

In response to questions, members were advised that Age UK did a large amount of work in partnership with other organisations to support carers for elderly relatives, including running carers support groups. These groups had trained staff to manage the cared for, allowing carers to meet other people in similar situations. They also performed a significant amount of outreach work, performing wellness checks on homes. Members heard that there was no comprehensive assessment of need within the district, but Age UK were a member of the Voluntary Sector Forum, and worked with other organisations to assess issues and avoid duplication of work.

Resolved: that the report be noted.

## 16. Health Action Plan 2023-24, Qtr 2 Update

The Health Team Leader presented the report, which updated the Committee on the Health & Wellbeing Action Plan 2023-24 for Quarter 2. The Plan covered 50 actions under the three pillars of Wider Determinants of Health, Health Behaviours, and Places and Communities. Of these actions, 41 were actively being worked on, 4 were starting, 1 had not progressed, and 4 were lacking data. Work was ongoing for further developing the plan for 2024/25, in collaboration with community groups and schools to gather new perspectives and ensure there was no duplication.

In response to questions, the officer explained that the actions were undertaken by partners, and that the council did not grade or evaluate the progress – instead they informed the council of the status they believed they were at with any action. The council were not able to impose targets or deliverables on the actions, though there was a double monitoring process, in which issues were identified and successes were studied. Members discussed the grading of green, amber, and red, and explained they felt there was a lack of clarity on the precise meaning of each stage. A key would be provided in future updates to explain the categories. Members discussed individual actions. Officers would liaise with external partners to provide more information on these.

Members further discussed the difficulty in assessing the impact of each action without targets. Officers explained that a workshop was being held on 16th January with partners, during which the need for clearer targets would be raised. Members were advised that the partners would be responsible for putting forward their own targets, in line with their own and the council's priorities. It was noted that a key aim of the Plan was to introduce organisations to each other, and make them aware of other work being undertaken in the district, to encourage further partnerships. Officers explained that the direct impact of many services was limited by resources. Long term work to change wider determinants of health, such as economic development, was emphasised, as it would address the problem at scale. The Health & Communities Manager would forward the draft action plan to members of the Health Liaison Board to receive their feedback. It was further agreed that an overview Sevenoaks District Health Update be introduced as a regular standing item to future meetings of the Board.

Action: for a Sevenoaks District Health Update to be introduced as a standing item for future meetings of the Health Liaison Board.

Resolved: that the report be noted.

### 17. Workplan

The Work Plan was noted, with the following additions:

### Summer 2024

- Health Checks KCHFT
- Access to GP Services Update
- North Kent Mind Update
- Dartford, Gravesham and Swanley Funding Update

## Winter 2025

- High Kent Hearing Impaired Services
- Health & Social Care Update

# THE MEETING WAS CONCLUDED AT 3:46PM

# CHAIRMAN