

**Minutes of the
Stronger Communities and Health Improvement Group
held on 2nd November 2010
at Coaver Centre, County Hall, Exeter**

Attendance:		
Name	Role	Organisation
Jay Talbot (chair)	Chief Executive Representing Devon Consortium	Community Council of Devon
Malcolm Carmichael	Area Commander, Central Command	Devon and Somerset Fire and Rescue Service
Karen Nolan	Chief Executive Representing Devon Consortium	West Devon CVS
Diana Crump	Chief Executive Representing Devon Consortium	Living Options Devon
Tina Henry	Head of Health Improvement S Devon	NHS Devon
Penny Mason	Chief Executive Representing Devon Consortium	Torridge Voluntary Services
Ian Tearle	Head of Health Policy	NHS Devon
Jill Borrow and Stuart Dudley		Active Devon
Sue Craythorne	Community Strategy Officer	Devon County Council
Dave Roddy		Devon and Somerset Fire and Rescue Service
Sarah Bird	Skin Cancer Project Officer	NHS Devon

Apologies for Absence:		
Name	Role	Organisation
John Bunting	Chief Executive Representing Exeter Social Inclusion and Health Partnership (SHIP)	Exeter CVS
Iain Mellis	Head of Public Health Partnerships	NHS Devon
Lynn Thornton	Transport Co-ordination Service	DCC
Lucy O'Loughlin	Chair Mid Devon Health and Wellbeing group	NHS Devon
Neil Roberts	Chief Executive	Active Devon
Andrew Lightfoot	Regeneration and Resources Team Leader	Devon County Council
Marguerite Shapland	Non Executive Director Attending as Chair of Northern Devon H&W Group	NHS Devon

Patsy Temple	Head of Health Improvement Exeter	NHS Devon
Alan Robinson	Strategic Director Attending as chair of South Hams, Teignbridge and West Devon H&W group	South Hams District Council
Simon Perkins		Devon and Cornwall Probation Service
Alison Golby	Strategic Commissioning Manager, Adult and Community Services	Devon County Council
Julia Page	Head of Health Improvement	NHS Devon

27/10 Welcome and Introductions

Jay Talbot welcomed members and introductions were made. Apologies were noted. The minutes of the last meeting on 8th July were agreed. Action points had been completed.

28/10 Matters Arising

Web Forum

The chairman expressed his concern that no progress had been made in setting up a web forum, as he saw it as a very useful tool for the group to generate new thinking between meetings. The subject has become subsumed within a review of wider DSP communications.

Improving Commissioning with the third Sector – IDeA programme

Two workshop sessions have taken place, involving a range of statutory sector and voluntary and community sector participants. The work is now at the stage of producing an action plan for implementation from December onwards.

Action: agenda item for January meeting

29/10 Fire and Rescue Service Presentation

Dave Roddy spoke about the Fire and Rescue Service work on fire prevention. He is part of a project looking at more efficient ways of delivering the service and opportunities for partnership working in connection particularly with home safety visits. Research suggests that those people / households most at risk of domestic fires are the same people who come into contact with agencies such as social care, health and police etc. We all have the same 'clients'

Increasing numbers of home safety visits have been carried out – 16,500 in 2009-10, but it cannot be demonstrated that these households are in the highest risk categories. The service is looking at how best to target visits towards the most vulnerable. They will have a definition of 'vulnerable' by early December and will share this with partners for comment.

In discussion, group members enquired about rural proofing, in terms of responses times for actual fires, and for home safety visits. Rurality is taken into account. The Mosaic system is being used to help to target prevention activity.

It was noted that the Home Improvement Agency also makes home visits to the

vulnerable and the F&R service should link closely with that agency. Good practice with visits to Gypsy and Traveller sites was noted. Many households have multiple agency involvement, and there are lessons to be learned from the Total Place work nationally about combining resources to target services where they can be most effective.

The F&R service should share findings with NHS Devon to add to the Joint Strategic Needs Assessment.

Actions: Fire Service to liaise with NHS Devon; Fire Service to share defilection of vulnerable; Consortium representatives to network today's information and look for opportunities for the Voluntary Sector to work with the fire service in targeting vulnerable groups and individuals.

Further contact with the F&R service on their targeting work via Dave Roddy droddy@dsfire.gov.uk

30/10 Skin Cancer Prevention Strategy

Sarah Bird attended and presented the draft strategy, which is currently out for consultation. The south west has the highest incidence of malignant melanoma in the country. Rates are highest among 16 to 34 year olds, and southern Devon has higher rates than other parts of the county. The strategy identifies teenagers and older people as priority groups. For young people the messages are about reducing exposure, using cream etc whilst for older people it is about early diagnosis.

The strategy contains proposals for action by a wide variety of agencies. These include work through Link, mole stalls at markets and other public events, beach patrols, work with primary schools etc. It was agreed that the voluntary sector agencies would have a lot to offer – eg Age Concern, complex care teams, etc. It was agreed that the CVS network could be used to facilitate communications. Consideration to be given to having a voluntary sector rep on the steering group. Active Devon can also support the strategy.

Action: Feedback on the strategy to Sarah Bird asap sarah.bird@nhs.net or via the NHS Devon website www.devonpct.nhs.uk/Consultations/Skin_Cancer_Prevention_Strategy.aspx

31/10 Current Strategic Context

Sue Craythorne and Ian Tearle updated the group on current developments following the Government's Comprehensive Spending Review, NHS White Paper etc. There are still many unanswered questions about the impact of budget reductions across the public sector, the effect of NHS changes and the development of Big Society ideas.

Although public health duties will transfer to the local authority (County), it is not yet clear exactly what is included or whether budgets are fully protected.

There is to be a new Health and Wellbeing Board which will supersede the current Healthier and Stronger Communities Partnership, starting with a shadow board next April. The Board will include a wider range of people, together with elected councillors.

Questions included:

What is the future for community hospitals

How will GP consortia be configured – probably 5 or 6 for Devon

Concern about the potential lack of involvement of the third sector in consultations and delivery

Concern about the current Adult Services aspirations about outsourcing to fewer legal entities

Loss of co-terminous boundaries

Can ex local authority service delivery units stand up as social enterprises?

It was accepted that answers will only emerge slowly in the coming months.

32/10 Mental Health and Wellbeing Promotion Strategy

This strategy has been developed through an internal review conducted by mental health services. It is not a strategy for treating mental health issues, but to promote mental wellbeing and comes on the back of the Government publication "New Horizons: a shared vision for mental health" which was published in December 2009.

The strategy attempts to set out the determinants of good mental health and is based on well evidenced research. There are some issues to be resolved around how to measure success. The implementation plan is somewhat aspirational, and may need attention. The group's comments will be welcome – to Ian Tearle please.

It was thought to be a useful document to share with the locality groups.

Comments at the meeting included that some attention needs to be paid to rural proofing and that there is potentially a huge role for the voluntary and community sector in delivery. The economic downturn poses some risks to people's feelings of well being.

Action: Locality leads to take to their local groups and feedback comments to Ian Tearle

33/10 Rural Health and Wellbeing Strategy

This strategy has been out for consultation and has been modified as a result. The draft implementation plan has been produced to address most of the recommendations. The main thrust of the consultation responses was that access issues, social isolation, transport and disability are not fully addressed. With changes in Government, and reductions in public sector budgets there are significant challenges in implementation, at least in the short term.

The plan will go to the HSCP in January and to Council Cabinet next week.

Initial comments from the group were that the implementation plan is insufficiently aspirational and that it could link more closely with the new Big Society agenda. Also that the voluntary and community sector have a great deal to contribute, but are barely mentioned in the plan. Ian Tearle agreed that the plan was in a draft form and needed additional contributions.

Further comments invited to Ian asap.

34/10 Public Health Locality Update

None of the chairs of locality groups were present. It was known that the northern Devon group was to have its inaugural meeting later this week. With changes to the health service, and the forthcoming health bill, it is a little unclear what structures will be in

place for the future under the new Health and Wellbeing Board. Concern was expressed that in some parts of the county LSPs are being abolished or scaled back, which leaves some questions about accountability and local partnership working.

35/10 Stronger Communities Programme Performance Report

The summary performance report was presented to the group. The new format was agreed to be much better and the information is more clearly presented. The main area of risk is the representation project. With changing structures it is difficult to see exactly where VCS representation will be needed at present. How will GP Consortia involve the sector – for example. The workplan is being modified and work is focusing on mapping and tools to improve communications.

The meeting noted the progress being made so far with the Stronger Communities programme.

36/10 Area Action Force

On behalf of Andrew Lightfoot, Sue Craythorne explained that this was a multiagency response which had worked well during and after the foot and mouth outbreak and when Appledore shipyard closed. The DWP, CAB and other relevant agencies had worked together to help individuals and groups through crises of unemployment. It was being suggested that the same approach could be taken where there are large scale job losses in the public sector over the coming months.

The group welcomed this, acknowledging its success at previous times of economic crisis.

37/10 Any Other Business

The Office for Civil Society has put out a consultation paper concerning infrastructure support for the voluntary and community sector. It presents a number of challenges to existing organisations. The abolition of the Compact Commission and Capacitybuilders does not appear to help the sector.

DACVS and CCD will be responding to the consultation which can be accessed through this link: www.cabinetoffice.gov.uk/newsroom/news_releases/2010/101014-big-society-strategy.aspx

35/10 Future meeting dates:

Thursday 13th January 2011 10.0
Thursday 14th April 2011 10.0

Ansell Room, Coaver Club, County Hall
ACS Boardroom