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SCOTTISH BORDERS COUNCIL BERWICKSHIRE AREA PARTNERSHIP

MINUTES of Meeting of the
BERWICKSHIRE AREA PARTNERSHIP
held in the Community Centre, Coldstream
on Thursday, 7 June 2018 at 6.30 pm

Present:- Councillors H. Laing (Chair), J. Greenwell, C. Hamilton, D. Moffat and
M. Rowley.
Apologies:- Councillor J. A. Fullarton.
In Attendance:- Partners, Community Councillors, officers and members of the public.

1. **WELCOME AND INTRODUCTIONS**

The Chair, Councillor Laing welcomed everyone to the meeting of the Berwickshire Area Partnership and thanked the Community Councils, Partners and local organisations for their attendance. Councillor Laing explained that the Agenda would proceed as published and that the theme for the evening's discussion was Our Health, Care and Wellbeing.

2. **NEIGHBOURHOOD SMALL SCHEME AND QUALITY OF LIFE PROJECTS**

There had been circulated copies of a report seeking approval for the granting of Delegated Powers for future applications for Small Scheme and Quality of Life Projects to the Service Director Assets and Infrastructure. The report explained that, in order to ensure that all applications were dealt with timeously, a new future approval process was being proposed. This process would be used by Elected Members, Community Councils and members of the public when making applications for projects under the Small Scheme and Quality of Life Scheme. The process would be that:- application(s) for projects to be carried out from Small Scheme and Quality of Life budgets would be received, assessed and costed by Council Officers; Officers would then send details of the project(s) to Elected Members along with a recommendation for their consideration; Elected Members would advise appropriate Council Officers of their support or otherwise for a particular project – support would be required from a majority of Elected Members for a project to proceed; if support by the majority of Members was not given for a project, this application would be refused; and details of projects funded from Small Scheme and Quality of Life budgets would be presented to the Berwickshire Area Partnership as part of any future updates on Grants and Funding. Discussion followed and it was agreed that guidance for making application to the Small Scheme and Quality of Life Scheme would be circulated to assist in this process.

DECISION

AGREED:-

- (a) **to delegate authority to the Service Director Assets and Infrastructure to approve future applications for Small Scheme and Quality of Life projects in 2018/19;**
- (b) **that application(s) for projects to be carried out from Small Scheme and Quality of Life budgets were received, assessed and costed by Council Officers;**
- (c) **that Officers would then send details of the project(s) to Elected Members along with a recommendation for their consideration;**

- (d) that Elected Members would advise appropriate Council Officers of their support or otherwise for a particular project. Support would be required from a majority of Elected Members for a project to proceed;
- (e) that, should support by the majority of Members not be given for a project, this application would be refused;
- (f) that details of projects funded from Small Scheme and Quality of Life budgets would be presented to the Berwickshire Area Partnership as part of any future updates on Grants and Funding; and
- (g) guidance for making application to the Small Scheme and Quality of Life Scheme would be circulated to assist in this process.

3. **FEEDBACK FROM MEETING ON 15 MARCH 2018**

The Minute of the meeting of the Berwickshire Area Partnership held on 15 March 2018 had been circulated along with a summary of the discussion attached as an appendix to the Minute. The general concerns, issues, challenges and opportunities raised at that meeting were referred to during discussion. The theme that had been identified as the next priority for further detailed discussion was Our Health, Care and Wellbeing and this would therefore be the focal point for consideration at this evening's meeting.

4. **THEME: OUR HEALTH, CARE AND WELLBEING**

- 4.1 The Chair presented the theme for the meeting – Our Health, Care and Wellbeing – and introduced Allyson McCollam Associate Director of Public Health and Jane Robertson of the Health and Social Care Partnership who would provide some background and further information about health, care and wellbeing across the Scottish Borders. Ms McCollum highlighted the need for engagement with Communities and for partnership working and explained that keeping communities healthy was a key priority going forward. People in the Scottish Borders generally had a healthy and long life. There was an increase in Type 2 diabetes across the Scottish Borders but there were no statistics which stood out in terms of specific health issues within Berwickshire. Mental health and personal contentment were very important to individuals and communities. People in the Borders as a whole appeared to feel supported from within their own communities.
- 4.2 Jane Robertson provided some background on the establishment of the Health and Social Care Integration Joint Board (IJB) and the Health and Social Care Partnership (HSCP), explaining that the IJB commissioned health and social care services across the Scottish Borders and the HSCP was responsible for delivering those services. The HSCP Strategic Plan for 2016-2019 was developed following widespread consultation across communities in the Scottish Borders and identified nine local objectives for service delivery. Since then, the Plan has been reviewed and simplified and would be presented to the IJB during week commencing 11 June 2018. The new Plan highlighted three main objectives for the Scottish Borders, namely to improve:- the health of the population and reduce the number of hospital admissions; the flow of patients into, through and out of hospital; and the capacity within the community for people who had been in receipt of health and social care services to better manage their own conditions and support those who cared for them. The challenge for the HSCP would be to deliver services according to these refreshed objectives. There were also five Locality Plans which had been developed from the Strategic Plan and all Plans would be available on the web once they had been finalised.
- 4.3 Work was ongoing to look at ways in which services could be redesigned on a local level to meet the needs of communities and taking account of the different demographics. The What Matters Hub was being launched in Berwickshire whereby professional health staff would travel to the Hub to meet with and provide advice to individuals and it was likely that the Hub would visit Duns and Eyemouth on a two weekly basis.

4.4 Colin Banks, Lead Officer for Localities explained that the meeting would now move into the discussion session. As previously, there were information packs available for each group and those present were invited to consider the question “What are the key challenges, issues or opportunities for health, care and wellbeing in Berwickshire”. Thirty minutes were allocated for group discussion and each table was asked to note down the responses on the post-it notes provided. These responses would then be collated at the end of the discussion and outcomes circulated with the Minute of the meeting in due course. Following a short break, those present went on to discuss some of the most common points identified. A further 20 minutes were allocated to allow each table to discuss and decide what the most important priorities for health, care and wellbeing in Berwickshire were and what actions could be taken to take these priorities forward. The post-it notes from this session were also collected and again, the groups were advised that responses would be circulated with the Minute of the meeting. The Appendix to this Minute contained a summary of the output of the discussions.

5. **FUTURE MEETINGS**

The next meeting of the Berwickshire Area Partnership was scheduled for Thursday 6 September 2018, with further dates as noted:-

Thursday 6 December 2018

Thursday 7 February 2019

Thursday 2 May 2019

Thursday 6 June 2019.

The Chair referred to previous meetings and reminded everyone that suggestions for ways in which Partnership meetings could be made more inclusive for all members of the community would be most welcome. Any feedback would be taken into account when setting the time and venue for future meetings and details of times and venues would therefore be confirmed in due course. In response to a request from some attendees, it was agreed that advice on available parking at venues would be circulated with the Agendas whenever possible. The Chair thanked everyone for their attendance and wished everybody a safe journey home.

The meeting concluded at 8.20 pm

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Discussion Output: Health, Care and Wellbeing (7th June 2018)

Summary/Area of Discussion:

Transport

Post-it Notes (incl. from 1st February meeting):

- Travel to the BGH is difficult, outreach services required, mobile vans with GP's etc
- Appointments – how to get there
- Public Transport – Limited services and cuts in services
- Have to find others in the community to help get to appointments
- Reston Station would help to get to Edinburgh
- What options are available with regards to SBC Funding?
- Borders Buses cutting Coldingham to Edinburgh route, go into Eyemouth and out
- Transport for learning and medical care – easier to go to Edinburgh than the BGH
- Challenges – can't get public bus services that meet rural needs
- Berwickshire Wheels/BAVS struggling for drivers, can't keep up with demand
- Issue of transport when serious condition e.g. detached retina
- Rural area –distances to access health and social care are an issue in many cases.
- Scottish Ambulance Service have tightened criteria for patient transport – creating big demand for community transport – which isn't free, though far cheaper than taxis but need more volunteer drivers.
- Better links to community transport from BGH
- More awareness of what is available i.e. walking/cycling etc.
- Transport! Transport! Transport!
- Organise BGH clinics on a geographical client basis to simplify transport and make it more economical, sustainable and greener.
- Cycle pathways need to be improved.

"Priority" & "Solutions/Actions" Post-its:

- Community Transport need to look at other projects in the Borders and Scotland
- Transport – one stop shop to reduce number of journeys, co-ordination of appointments on a geographical basis
- Community transport – volunteer based and publicised – “how do you let people know” – think of audience mix of hard copy, digital, landline, notices and leaflets

Key Areas for Berwickshire

- **Cross Borders travel** as Edinburgh seen as more attractive/practical on a number of occasions
- **Community Transport** - support required to recruit volunteer drivers and meet the demand
- **Walking and Cycling** - infrastructure and promotion
- **Health service provision** - better co-ordination of appts. (in a geographical area); outreach clinics i.e. come to us

Summary/Area of Discussion:

Mental Health

Post-it Notes (incl. from 1st February meeting):

- Not enough being done for mental health problems, 4-6 month wait
- Mental Health – getting across the door is a challenge, skills sharing and skills match
- Mental Health – attainment – social media affects mental health. ‘See me’ introduced in secondary schools
- MH – support for small groups within communities – Eyemouth/Duns, reducing social isolation
- Social Inclusion linked to mental health – reach out communities
- Reduce stigma of being labelled ‘Obese’.
- Waiting lists for mental health support.

“Priority” & “Solutions/Actions” Post-its:

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Key Areas for Berwickshire

- **Social isolation** – how to reduce, communities to reach out to their isolated residents, how to encourage people to get out of their homes

Summary/Area of Discussion:

Prevention

Post-it Notes (incl. from 1st February meeting):

- Primary School in Eyemouth does CPR Training
- Childhood obesity – choices made about diet can be harmful
- Staying healthy – fitness classes, Isolation and information dissemination
- What Matters Hub – one health professional from different areas, drop in, get information
- Education needed on health
- GPs too quick to prescribe medication rather than advocating/supporting physical activity
- Cost of eating healthy can be too expensive
- Pressure on large supermarket to make a profit.
- Availability of cheap, unhealthy food and drinks.
- Food waste
- Availability of fresh fruit.
- Culture change to how we buy food and prepare food.
- Tax on fatty and sugary foods.
- Impact of welfare is significant.
- Pupils who don’t access free school meals might be living in poverty but won’t get access to services – holiday hunger.
- Access to healthy food – price.
- Transparency – additives, chemical ingredients in food.

<ul style="list-style-type: none"> • Education of pupils and parents on healthy eating and cooking with left overs.
<p><i>“Priority” & “Solutions/Actions” Post-its:</i></p> <ul style="list-style-type: none"> • £3.1 million – find out SBC’s plans for spend on play parks • Jed swimming pool – looking at funding options to improve facilities • Education on health eating and how to make the most of the resources in the community
<p><i>Key Areas for Berwickshire</i></p> <ul style="list-style-type: none"> • Education - role of schools and other learning environments; What Matters Hubs; availability and promotion of the right information • Eating Well - promotion of eating well, access/availability to healthy foods

Summary/Area of Discussion:

Community Provision

Post-it Notes (incl. from 1st February meeting):

- Lots of whole community projects, active Men’s Shed, Ace Group – Parkrun for all ages
- Healthy Village or Town competition
- Men’s Shed and Walking Football are great ideas
- Walking Clubs are free! Extend this idea across the area.
- Gardening in the community – skills transferred from elderly to young people, improving life skills and encouraging relationships between young and old.
- Availability of fresh food community allotments/gardens.
- More community gardens.
- Examples of what’s happening in other areas to show people.
- People lack purpose in the community.
- Communities lack young people.

“Priority” & “Solutions/Actions” Post-its:

- Community Garden (at the new Jedburgh Campus)
- Lack of funding streams for advertisements (e.g. Gala Life – good example of advertising services but costly)

Key Areas for Berwickshire

- **Expansion of existing community activities across the region**, e.g. Men’s Sheds, walking football, walking clubs etc.
- **Explore opportunities with community gardens/allotments**
- **Sharing of good examples from across (and out with) the Borders**

Summary/Area of Discussion:

Service Provision

Post-it Notes (incl. from 1st February meeting):

- GP – If call that day at 8am can usually get an appointment
- GP in Berwickshire provide a very personal experience (old fashioned)
- Cross Border health issues
- NHS Facility for Chiropody
- NHS, Health and Social Care plan should be one!
- Services need to provide care to reduce delayed discharge
- Get the people running groups to make contact with the individual – often the first step is the most difficult
- Out of Hours Services not as good as used to be
- Blocks of time reserved for GP appointments in remote communities
- Podiatry issues – now in Kelso was formally in Duns
- GPs Eyemouth Health Practice – recruitment of GPs to practice, little communication
- GPs Coldingham – not able to get appointments, shortage of GPs
- Postcode an issue – SBC v Berwick-upon-Tweed
- Services are too centralised – Chiropodists, Coldstream have to travel to Kelso
- Telecare is an opportunity – not for first time visits but follow up appointments for example
- Lack of GP appointments
- Cancer treatment
- Representatives from district health care – nurses, GPs etc.
- Long waiting lists for services – 7 months.
- Budgeting for everyone.

“Priority” & “Solutions/Actions” Post-its:

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Key Areas for Berwickshire

- **Service planning** – recognising demands and challenges of remote communities
- **GPs** – mixed views across the Locality as to service delivery and availability of appointments
- **Challenge of cross border health provision**, accessing different services depending on where you live

Summary/Area of Discussion:

Buildings & Infrastructure

Post-it Notes (incl. from 1st February meeting):

- Knoll Hospital in Duns is old and needs upgrading to act as minor injuries clinic
- Health – one central hospital, lack of travelling
- Few cottage hospitals

“Priority” & “Solutions/Actions” Post-its:

•
<i>Key Areas for Berwickshire</i>
<ul style="list-style-type: none">• To better understand future health and care service provision requirements and the buildings & infrastructure required to deliver that

Summary/Area of Discussion: Carers & Care Services
<i>Post-it Notes (incl. from 1st February meeting):</i> <ul style="list-style-type: none">• Nursing care in the community• Support for carers – access and affordability of transport, relief and respite for carers - social isolation?• More carers required.
<i>“Priority” & “Solutions/Actions” Post-its:</i> <ul style="list-style-type: none">•
<i>Key Areas for Berwickshire</i> <ul style="list-style-type: none">•

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