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

### Summary/Area of Discussion:

#### Transport

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

- 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 Coldham to Edinburgh route, go into Eyemouth and out
- Transport for learning and medical care – easier to go to Edinburgh than the BGH
- Berwickshire Wheels struggling for drivers
- Options in regards to SBC funding for transport
- Challenges – can’t get public bus services that meets rural needs
- Berwickshire Wheels/BAVS struggling for drivers, can’t keep up with demand
- Issue of transport when serious condition e.g. detached retina
- Travel to the BGH is difficult, outreach services required, mobile vans with GP’s etc
- Health – one central hospital, lack of travelling
- Few cottage hospitals
- Support for carers – access and affordability of transport, relief and respite for carers - social isolation?

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

- Ambulance services focussing on critical services
- Transport – Reston station, East/West timetable
- Appointments – ask where travelling from
- Transport demographics and ageing population

### Key Areas for Berwickshire

- **Public Transport** – cross Border travel/service provision, route planning/timetabling, affordability
- **Community Transport** – volunteer drivers

### Summary/Area of Discussion:

#### Mental Health

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

- Mental Health – attainment – social media affects mental health. ‘See me’ introduced in secondary schools.
- Social inclusion linked to mental health – reach out communities
- Mental health - Support for small groups – Eyemouth, Duns to reduce social isolation
- MH – support for small groups within communities – Eyemouth/Duns, reducing social isolation
- 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

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

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):
- Cost of eating healthy can be expensive.
- Childhood obesity – choices made about diet can be harmful
- Staying healthy – fitness classes, isolation and information dissemination, trim tracks
- Living safely in the home – advice on home safety to avoid slips, trips
- Education needed on health
- GP’s too quick to prescribe medication rather than advocating/supporting physical activity
- Young people are indoors more
- New park in Gala has had a positive impact on getting Young People outdoors.
- Grass cutting around parks affects health
- Primary School in Eyemouth does CPR Training
- Healthy Village or Town competition
- What Matters Hub – one health professional from different areas, drop in, get information

“Priority” & “Solutions/Actions” Post-its:
- Cross generational communication
- Increase access to What’s on hubs, make sure they are in building and premises used by the public.

Key Areas for Berwickshire
- 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
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<tr>
<th>Community Provision</th>
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<tbody>
<tr>
<td><strong>Post-it Notes (incl. from 1st February meeting):</strong></td>
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<tr>
<td>- Do you know your neighbour?</td>
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<td>- Mens Shed and Walking Football are great ideas</td>
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<td>- Get the people running groups to make contact with the individual – often the first step is the most difficult</td>
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<td>- Active Communities Eyemouth – sport and health related activities – meeting with Live Borders?</td>
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<td>- BAVS open days.</td>
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<td>- Co-locate community fire stations – use for community activities.</td>
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<td>- Loss of church – elders and minister visits.</td>
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<td>- Unaware of facilities available to them – consider how to bring the information together to access.</td>
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<td>- Cemeteries – grass cutting issues – some being done some aren’t.</td>
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<td>- Lots of whole community projects, active Mens Shed, Ace Group – Parkrun for all ages</td>
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| “Priority” & “Solutions/Actions” Post-its: |
| - Value of older peoples contribution to the community |
| - Annual events for communities to connect |
| - ALISS – national database – vulnerable people, how to reach them, mapping key community services. |
| - Register what support and services are available in the community. |
| - Increase access to Whats on hubs, make sure they are in building and premises used by the public. |

| Key Areas for Berwickshire |
| - Expansion of existing community activities across the region, e.g. Men’s Sheds, walking football, walking clubs etc. |
| - Sharing of good examples from across (and out with) the Borders |

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<tbody>
<tr>
<td><strong>Post-it Notes (incl. from 1st February meeting):</strong></td>
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<tr>
<td>- Cancer Treatment</td>
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<td>- Postcode an issue SBC v Berwick</td>
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<td>- Eyemouth – recruitment of GP’s needed</td>
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<td>- GP’s – can’t get appointments</td>
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<td>- Out of Hours Services not as good as used to be</td>
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<td>- Blocks of time reserved for GP appointments in remote communities</td>
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<td>- Podiatry issues – now in Kelso was formally in Duns</td>
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<td>- GP’s Eyemouth Health Practice – recruitment of GP’s to practice, little communication</td>
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<tr>
<td>- GP’s Coldingham – not able to get appointments, shortage of GP’s</td>
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- 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
- Pension age increasing.
- Rurality of B’shire.
- Defibrillators needed.
- 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
- Knoll Hospital in Duns is old and needs upgrading to act as minor injuries
- Nursing care in the community
- NHS Facility for Chiropody
- NHS, Health and Social Care plan should be one!
- Services need to provide care to reduce delayed discharge

“Priority” & “Solutions/Actions” Post-its:
- Telecare – community spaces, pharmacies etc.
- Lack of access to further education, care facilities, home care provision
- Unit for discharge to access unit e.g. at Craw Wood
- Delivering care in the home – improve connections, communications between services providing care and support

Key Areas for Berwickshire
- **Service planning** – recognising demands and challenges of remote communities/rurality, telecare
- **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