



# Prevention and Wellbeing Partnership Board

## AGENDA

**Date:** Wednesday 25 July 2012

**Time:** 10.00 am

**Venue:** Mezzanine Room 2, County Hall, Aylesbury

No	Item	Timing	Page
1	<b>Welcome and Apologies</b>		
2	<b>Minutes</b> Of the Prevention Partnership Board meeting held on 11 <sup>th</sup> April 2012 and the three sub-group meetings which were held on 15 <sup>th</sup> May (Housing), 13 <sup>th</sup> June (Communities) and 27 <sup>th</sup> June 2012 (Health & Wellbeing), to be confirmed.		1 - 24
3	<b>Priorities of Themed Groups</b>		25 - 28
4	<b>Action Planning</b>		
5	<b>Date of Next and Future Meetings</b> Wednesday 12 <sup>th</sup> September 2012 in Mezzanine Room 1 at 10am Wednesday 14 <sup>th</sup> November 2012 in Mezzanine Room 2 at 10am		

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If you would like to attend a meeting, but need extra help to do so, for example because of a disability, please contact us as early as possible, so that we can try to put the right support in place.

*For further information please contact: Kelly Sutherland on 01296 383602  
Fax No 01296 382421, email: [ksutherland@buckscc.gov.uk](mailto:ksutherland@buckscc.gov.uk)*

## **Members**

Iwona Andrews, Bucks County Council  
Stephen Archibald, Carers Bucks  
Linda Barnes, The Alzheimer's Society  
Josie Bishton, Bromford Support  
Helen Bonner, Anchor Housing Trust  
Roy Brooks, Aylesbury Vale District Council  
Peter Bruford, Riverside  
Liz Bubbear, ConnectionFS  
Luisa Fletcher, Bromford Support  
Dominic Games, Paradigm Housing  
Steve Goldensmith, BCC  
Anna Gordon, Aylesbury Vale District Council  
Martyn Hale, Wycombe District Council  
Martin Holt, Chiltern District Council  
Margaret Howard, South Bucks District Council  
Tracey Ironmonger, NHS Buckinghamshire  
Elaine Jewell, Wycombe District Council  
Giulia Johnson, Age Concern  
Rob Michael-Phillips, Buckinghamshire Mind  
Stephanie Moffat, Aylesbury Vale District Council  
Sally Morris, Thames Valley Probation  
Jane O'Grady, NHS Buckinghamshire  
Helen Page, Wycombe District Council  
Kath Palmer, Accommodation Worker, Bucks County Council  
Tony Peak, South Bucks District Council  
James Sainsbury, Safer Bucks Commissioning Manager, BCC  
Becci Seaborne, Home Group Ltd  
Jane Taptiklis, NHS Buckinghamshire  
Mark Thompson, ConnectionFS  
Steve Tredwell, Vale of Aylesbury Housing  
Mike Veryard, Chiltern District Council  
Susie Yapp



## Prevention and Wellbeing Partnership Board

# Minutes

## Wednesday 11 April 2012

<b>Members in attendance:</b>	
Iwona Andrews	Bucks County Council
Linda Barnes	The Alzheimer's Society
Sheila Bees	Wycombe District Council
Josie Bishton	Bromford Support
Roy Brooks	Aylesbury Vale District Council
Peter Bruford	Riverside
Mandy Carey	Bucks Mind
Dominic Games	Paradigm Housing
Steve Goldensmith	BCC
Anna Gordon	Aylesbury Vale District Council
Chris Gregory	Bucks & Milton Keynes Sports Partnership
Martin Holt	Chiltern District Council
Giulia Johnson	Age UK - Bucks
Sally Morris	Thames Valley Probation
Claire Paine	AVDC
Lee Scrafton	BCC
Mark Thompson	ConnectionFS
Mike Veryard	Chiltern District Council
Chris Voller	Vale of Aylesbury Housing

No	Item
1	<p data-bbox="288 181 951 219"><b>Welcome and Apologies for Absence</b></p> <p data-bbox="288 271 1485 432">Steven Goldensmith welcomed everyone to the meeting and introductions were made around the table. It was noted that the attendees represented a very broad group, which reflected the wide scope of the Prevention agenda.</p> <p data-bbox="288 483 1485 734">Apologies were received from Steven Archibald and Kath Palmer, Luisa Fletcher who was represented by Josie Bishton, Susie Yapp who was represented by Lee Scrafton, Steve Tredwell who was represented by Chris Voller, Rob Michael-Phillips who was represented by Mandy Carey, Stephanie Moffatt who was represented by Claire Paine and Elaine Jewell who was represented by Sheila Bees.</p>
2	<p data-bbox="288 813 724 851"><b>Background Information</b></p> <p data-bbox="288 902 1485 1016">Steve Goldensmith outlined some background information to explain why a partnership board for Prevention and Wellbeing was being established.</p> <p data-bbox="288 1068 1485 1361">Within Adult Social Care and Health a new governance structure had been implemented, comprising of various partnership boards which report up to a new Executive Partnership Board, as the strategic decision making body. Each partnership board will nominate 2 representatives to sit on the Executive Partnership Board (EPB) and the boards will make recommendations to the EPB and could in turn be tasked by EPB to undertake different pieces of work.</p> <p data-bbox="288 1413 1485 1749">The partnership boards are as follows: Learning Disability, Older People's, Physical and Sensory Disability, Mental Health, Carers, Assistive Technology and this new Prevention and Wellbeing Board. Some of the Boards have been in place for some time but the Prevention and Wellbeing Board is brand new. Representatives from Housing and Housing Support sectors as well as voluntary groups and other organisations focussing more on prevention and wellbeing have been invited to participate.</p> <p data-bbox="288 1800 1485 2092">Traditionally much of the funding around these areas had been ringfenced under Supporting People, but this was no longer the case, so it was proposed that the old governance structure for Supporting People would be disbanded and representatives from the Supporting People Commissioning Body should be included in the Prevention and Wellbeing Partnership Board. This Board would have influence over the Supporting People budget of £4.5m per annum, the Prevention</p>

budget of £400,000 per annum and Prevention Development funding of £4m over the next 3 years.

The key difference between the Prevention and Wellbeing Partnership Board and the other Boards was that the other Boards focussed on the needs of clients who were eligible for support from Adult Social Care, whilst this Board would concentrate on people below this level of need, focussing on promoting independence at home for as long as possible. The Prevention and Wellbeing Board's priorities may well influence and link in with the work of the other Boards.

### **3 Draft Proposals for the development of the Prevention and Wellbeing Partnership Board**

Steve Goldensmith asked the Board members for their views on the development of the new Prevention and Wellbeing Board. There was a lively and open discussion and the following points were noted:

- Steve Goldensmith was asked if the new partnership boards structure was finalised. A member of the Supporting People Commissioning Body (SPCB) expressed concern at the disbanding of that group as he believed that there had not been proper consultation and there was a need for the SPCB to have oversight of the funds. In response Steve Goldensmith advised that the new structure was in place and the SPCB reps would have a key role to play on this new Board. He argued that the SPCB had not had a real commissioning role for quite a while and other members agreed that there had been confusion between the role of the SPCB and the Supporting People Partnership Board, which sat beneath it.
- There was some concern that District Council members were not fully aware of these proposed changes and it was suggested that a paper outlining the new structure should be circulated. Steve Goldensmith was surprised that district councils were not aware of the changes
- The areas of focus suggested in the report by Steve Goldensmith were commended, but it was suggested that these themes may be able to be run through the work programmes of existing groups rather than establishing a brand new Board. Sally Morris of the Probation service welcomed the new Board as she felt that other groups did not focus on groups such as ex-offenders, drug users and care leavers.
- Members were concerned about the breadth of the Prevention agenda and wanted to ensure that the new Board would not simply be a 'talking shop' but that it would have a tight focus and a clear membership. There was concern that there would be a high dropout rate if the group was trying to tackle too much.

- Steve Goldensmith emphasised that it was up to the Board to set their own priorities. These could include refreshing the Supporting People strategy, developing a housing support commissioning strategy and feeding into the Prevention Matters agenda.
- Voluntary organisation representatives were asked for their views on the proposed areas of focus for the Board. Linda Barnes, Alzheimers Society advised that maintaining independence, quality of life and participation safely in the community were the key considerations for their clients. Iwona Andrews, BCC, expressed concerns for care leavers who can struggle with maintaining a tenancy at 18, then turn their life around by the age of 21 but cannot get a second chance due to their earlier failed tenancy. She also mentioned issues with care leavers, often Unaccompanied Asylum Seekers (UASC) who wanted to move out of Bucks but there was no funding to support them in doing this.
- Giulia Johnson of Age UK – Bucks commented that older people did not have major issues with housing and if they did the Older People’s Partnership Board would take up these issues, so there was a degree of overlap. She did however applaud the concept of developing a broad base for Prevention, but cautioned that the Board needed a clear aim going forward.
- Chris Gregory of Bucks and Milton Keynes Sports Partnership commented that he welcomed the opportunities for discussions on Lifetime Health & Wellbeing and felt he could also contribute to the Lifetimes Communities theme, but Housing was not on their agenda and this had seemed to dominate the discussions so far.
- Steve Goldensmith welcomed these comments. He asserted that Housing was key to independence and prevention therefore there was a link. He appreciated the concerns about the number of attendees and the desire not to replicate other existing housing groups but there did need to be a forum for discussions about the wider prevention agenda.
- It was suggested that existing Housing groups could be asked to feed concerns up to the Prevention and Wellbeing Partnership Board, but other members questioned whether existing Housing groups had a fully inclusive membership.
- Another proposal was made that 3 themed meetings should be held to focus on identifying priorities across the 3 areas, then the full Board should meet again to refine the findings of the 3 themed groups before reporting agreed priorities up to the Executive Partnership Board (EPB)
- Steve Goldensmith was asked what the expectations of the EPB might be in terms of timelines. Steve explained that there was no

	<p>real timetable – the first key tasks for the Board were to identify its membership, agree priorities and nominate 2 representatives to sit on the EPB.</p> <ul style="list-style-type: none"> <li>• Members asked if it would be possible to have a paper about how the new structure fits together and the membership of the EPB to date.</li> </ul> <p style="text-align: right;"><b>Action: Steve Goldensmith</b></p> <ul style="list-style-type: none"> <li>• It was suggested that the role of the Prevention and Wellbeing Board might be a short term one to refocus the work of other existing groups to ensure that the Prevention agenda would be incorporated into their work. Steve Goldensmith suggested that a priority for the Board should certainly be to test the commitment of existing groups to the Prevention agenda.</li> <li>• Steve Goldensmith was asked if the Supporting People priorities would need to be reviewed and what timescales would apply? Steve Goldensmith explained that the Supporting People and Prevention budgets were separate pots of money and currently the Supporting People grants had been allocated until March 2014 through 30 contracts. These services could be reviewed between now and then with a view to recommissioning and this Board could influence the commissioning strategy.</li> <li>• A member of the Supporting People Commissioning Body commented that without a Supporting People support structure in place it would take a long time to recommission 30 contracts. Steve Goldensmith suggested that one of the priorities for the Board could be to offer to create a commissioning strategy in order to take this forward.</li> <li>• It was agreed that the proposal of holding themed meetings initially had merit. Therefore it was proposed that 3 themed meeting should be scheduled to take place during May and June, with a view to then reconvening the whole Board to consider the priorities which had come out of those discussions in July, in order to present agreed priorities at the EPB meeting in September. It was also agreed that Steve Goldensmith would circulate the Priorities Template for information.</li> </ul> <p style="text-align: right;"><b>Action: Steve Goldensmith</b></p>
<p><b>4</b></p>	<p><b>Membership</b></p> <p>Steve Goldensmith explained that ultimately it was hoped that service users and carers would become members of the Board. In the initial stages, it was suggested that all agencies should be invited to all 3 themed meetings and then they could decide who would be the most appropriate person to attend to represent them. Steve Goldensmith asked if anyone would like to chair any of the themed groups and Mike Veryard volunteered to chair the Housing themed group.</p>

	<p>Steve Goldensmith thanked everyone for attending and for their contributions to the discussion which had been very useful.</p>
<b>5</b>	<p><b>Date of Next Meeting</b></p> <p>To be confirmed</p> <p>Dates for the 3 proposed themed meetings would be circulated</p> <p style="text-align: right;"><b>Action: Kelly Sutherland</b></p>

**Chairman**





## Prevention and Wellbeing Partnership Board

# Minutes

## Tuesday 15 May 2012

<b>Members in attendance:</b>	
Luisa Fletcher	Bromford Support
Dominic Games	Paradigm Housing
Steve Goldensmith	BCC
Anna Gordon	Aylesbury Vale District Council
Margaret Howard	South Bucks District Council
Heather Mills	Riverside
Kath Palmer	Accommodation Worker, Bucks County Council
James Sainsbury	Safer Bucks Commissioning Manager, BCC
Steve Tredwell	Vale of Aylesbury Housing
Mike Veryard	Chiltern District Council

No	Item
1	<p><b>Welcome and Apologies</b></p> <p>Steve Goldensmith welcomed everyone to the meeting and provided a short overview of the Prevention Partnership Board (previously known as the Prevention and Wellbeing Partnership Board). He explained that the Board had decided to establish 3 sub-groups to consider the themes of Lifetime Housing, Lifetime Communities and Lifetime Health and Wellbeing with a view to identifying priorities in each of the 3 key areas.</p>

	<p>Apologies were received from Josie Bishton, Becci Seaborne, Sally Morris, Giulia Johnson, Tracey Ironmonger and Peter Bruford. Heather Miles was attending on behalf of Peter Bruford.</p>
<p><b>2</b></p>	<p><b>Purpose of Meeting</b></p> <p>It was agreed that Mike Veryard, CDC would chair the meeting and after introductions round the table, Mike reiterated that the purpose of the meeting was to identify issues in the Housing arena and come to a consensus on what the priority areas should be. He reminded the group that the Prevention Partnership Board was primarily concerned with those vulnerable people who did not currently qualify for support from Adult Social Care but may well do in the future.</p>
<p><b>3</b></p>	<p><b>Current Housing Issues</b></p> <p>There was a round table discussion on issues currently being faced by various client groups and the following points were noted:</p> <ul style="list-style-type: none"> <li>• There were particular difficulties placing young offenders under the age of 18, because due to the nature of their offending, chaotic lifestyles and often also drug use, providers were reluctant to offer them accommodation.</li> <li>• It was difficult to get providers to interview young offenders who were being held in custody some distance away, often in Bristol or Weymouth, therefore young people were being released and immediately found themselves homeless.</li> <li>• Although YOS have improved in planning ahead with accommodation if individuals could not be interviewed prior to release and there is a lack of suitable accommodation, planning does not always help.</li> <li>• Mike Veryard reported that he believed that Simon Brown, Operations Manager, BCC Commissioning, would like to commission a housing service for 16-17 year olds.</li> <li>• For other young offenders without high risk issues, YOS had good referral processes with Stonham, Padstones and YMCA.</li> <li>• Move on accommodation was highlighted as a pressing issue. BCC had access to MoMo, 10 units of dispersed individual accommodation for YOS and Aftercare clients but there were issues with move on for YOS clients. The Old Tea Warehouse also face similar issues with move on accommodation.</li> <li>• This was exacerbated further by a noticeable trend of London boroughs moving people out to High Wycombe. Places through the Housing Deposit Scheme in Wycombe had been 'gazumped' by people coming in from Hillingdon and Harrow.</li> <li>• Representatives from the DAT recognised that Bucks is fortunate</li> </ul>

to have The Old Tea Warehouse and the DAT flats but demand is outstripping supply. Frequently people are forced back to sharing accommodation with others who are not as advanced with their recovery, which then undermines their progress.

- Heather Mills, from Old Tea Warehouse recognised that often they are the last resort for people displaying chaotic drug use. Sometimes statutory services such as mental health were reluctant to get involved. Sometimes it was necessary to evict people who just won't respond to the help offered and end up dragging everyone else down with them – however where do these people end up if Old Tea turn them away?
- It was noted that financial pressures or individual contract terms may result in providers setting tighter criteria for admission to their accommodation – e.g. if you have a target to move on a certain percentage of clients then providers may be more selective about who they choose to accept in the first place.
- It was also reported that there were issues with sheltered accommodation as the needs of the over 60s were now more complex and they were not always eligible for specialist support due to issues around duplication of funding.
- An increase in homelessness was reported, with people having their homes repossessed and Luisa from Brompton Support advised that often they were taking clients from Tindal into Griffin Place in Aylesbury, who were then placed with insufficient support and ended up being readmitted to Tindal.
- There was a lot of concern expressed about the impact of benefit changes, especially around housing benefit for the under 35s. It was suggested that it might be useful to undertake a co-operative piece of work across the county to assess the impact of changes to Disability Living Allowance, Local Housing Allowance and Universal Credit. For many clients, housing benefit which usually went straight to landlords would now be paid to them and they would be responsible for paying the landlord themselves – this presented challenges in a variety of ways and concerned support workers.
- Housing officers from the district councils reported that private rentals were increasingly difficult due to a reduction in local housing allowance, increased movement of people out of London and landlords being increasingly choosy about who they will take on as tenants.

Mike Veryard summed up the key issues as follows:

1. Under 18s
2. Private rent – impact of benefits issues, other authorities directing people to Bucks and private deposit schemes unlikely to continue working in difficult economic climate

	<ol style="list-style-type: none"> <li>3. Levels of support for clients once placed in accommodation</li> <li>4. Welfare reforms – huge concern and recognised need for training for workforce and clients on the impact of the changes</li> <li>5. Supply of appropriate accommodation and support for specific clients needs</li> <li>6. How floating support dovetails in with sheltered accommodation given that the Over 60s now have more complex needs.</li> </ol> <p>Steve Goldensmith commented that if services were being used by clients with a higher level of need, was there a case for redesigning some of the existing services.</p> <p>District councils reported that there was a serious issue in not securing 30-35% affordable housing in new developments – often only 18% is secured due to viability. Inevitably waiting lists will increase as a result.</p> <p>The Group was asked if there was any accommodation which proved hard to let. Mike Veryard commented that this might apply to sheltered accommodation. Generally via Bucks Home Choice someone would take any property available. If providers had sheltered accommodation that they wanted to reconfigure, this could be a worthwhile area to discuss as it might be sensible to switch the focus to a younger age group.</p>
<p><b>4</b></p>	<p><b>Longer term Housing Issues</b></p> <p>The Group felt that it was hard to predict if there would be an upturn in demand in future because it was hard to judge the impact of welfare reform and when a general election was held, maybe the politics would change again. Those working in Housing and Housing support felt that the environment was increasingly tough.</p>
<p><b>5</b></p>	<p><b>Feedback to Prevention and Wellbeing Board</b></p> <p>It was agreed that the themes identified would be circulated following the meeting and the priorities of this group would be presented to the full Prevention Partnership Board in July with a view to agreeing a range of priorities to present to the Executive Partnership Board. The Lifetime Housing group may meet again in the future. Mike Veryard and Steve Goldensmith thanked everyone for attending.</p>
<p><b>6</b></p>	<p><b>Dates of Future Meetings</b></p> <p>Lifetime Communities Group  Wednesday 13<sup>th</sup> June at 10am in Mezzanine Room 1, County Hall</p>

<p>Lifetime Health &amp; Wellbeing Group Wednesday 27<sup>th</sup> June at 2pm in Mezzanine Room 1, County Hall</p> <p>Prevention &amp; Wellbeing Partnership Board full meeting Wednesday 11<sup>th</sup> July, 2pm, Mezzanine Room 2, County Hall</p>
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**Chairman**





# Prevention Partnership Board Lifetime Communities Group Minutes Wednesday 13 June 2012

<b>Members in attendance:</b>	
Linda Barnes	The Alzheimer's Society
Josie Bishton	Bromford Support
Peter Bruford	Riverside
Luisa Fletcher	Bromford Support
Dominic Games	Paradigm Housing
Steve Goldensmith	BCC
Giulia Johnson	Age Concern
Paul Nanji	Chiltern District Council
Lee Scrafton	BCC
Lynn Trigwell	South Bucks District Council
Susie Yapp	BCC



No	Item
<b>1</b>	<p><b>Welcome and Apologies</b></p> <p>Apologies were received from Becci Seaborne, Anna Gordon, Rob Michael-Phillips, Sally Morris and Jane Taptiklis.</p>
<b>2</b>	<p><b>Background to the formation of the Group</b></p> <p>Steve Goldensmith welcomed everyone to the meeting and provided a short overview of the Prevention Partnership Board (previously known as the Prevention and Wellbeing Partnership Board). He explained that the Board had decided to establish three sub-groups to consider the</p>

	<p>themes of Lifetime Housing, Lifetime Communities and Lifetime Health and Wellbeing with a view to identifying priorities in each of the three key areas. The Lifetime Communities Group would be considering community issues including; Access including Transport, services available, built/natural environment, community safety and community capacity.</p>
<p><b>3</b></p>	<p><b>What are the immediate issues/concerns to prioritise for 2012-13?</b></p> <p>Steve Goldensmith reminded the group that whilst the other partnership boards were focussed on clients who receive services from ASC, the Prevention Partnership Board is primarily concerned with those vulnerable individuals who are ineligible for ASC services, but may still benefit from support from within their communities to maintain their independence.</p> <p>Are existing community services functioning well? What additional services would be helpful in supporting community capacity? What difficulties did specific client groups face in accessing these services?</p> <p>There was a round table discussion on these points and the following main points were noted:</p> <ul style="list-style-type: none"> <li>• Paul Nanji, Principal Leisure &amp; Community Officer, Chiltern District Council, explained that his role was to link in with existing community groups to help support their activities and he was pleased to report that in Chiltern there were many thriving groups offering physical and social activities. A recent Building Community Capacity project, which was aimed at reducing the social isolation of older people had worked very well. For example, in a rural area of Chesham the community had set up their own volunteer transport scheme and a luncheon club.</li> <li>• Lynn Trigwell of South Bucks District Council agreed that social isolation was a key issue to address and the district councils were well placed to help deliver some of the Prevention agenda.</li> <li>• For the elderly, social isolation and dementia were key concerns and Age UK believed that both were likely to increase in future. Age UK focus on helping individuals rather than running community projects, however they would be keen to signpost individuals to services that are available in the community and they were disappointed that they had not heard about the initiatives mentioned in the Chiltern DC area. This highlighted the importance of the need for different agencies to work more closely together.</li> </ul>



- Susie Yapp, BCC Community Safety highlighted that often a fear of crime, which was disproportionate to the true levels of crime in the area, led to social isolation. Community Safety undertake a lot of work in trying to provide reassurance. Susie Yapp reported that Karen Adamson, BCC Prevention Community Development Worker, had set up a valuable network across the county, whereby Police Community Safety Officers were linked up with vulnerable people, identified by Adult Social Care. To date 6,000 people had been engaged through this initiative.
- Susie Yapp would like to introduce a Neighbourhood Watch Plus model, to encourage communities to look out for vulnerable neighbours, as well as crime issues.
- The Drug Action Team provide reactive services to specific areas where issues of drug use or dealing arise, but in addition they were trying to be proactive in developing connections with people in the community, especially those in hard to reach groups. If they could educate individuals in the community this would help to support the work of the team.
- It was noted that there were no representatives from Community Impact Bucks or the Localities team at the meeting – this might be useful as Parish Councils were on the frontline, often providing very local services.
- Representatives from Housing providers and Housing support providers reported that whilst they look at community development, often properties are quite dispersed and it was felt that a significant minority of customers may be overlooked with regards to access to services and having a voice.
- It was important to raise awareness of all existing services. Once there was an increased take up of existing services it would be easier to identify any significant gaps. There was a need to consider how people access information – cannot have a one size fits all model and certainly shouldn't rely solely on the internet. Very vulnerable people may need support to take tentative steps to reach out for information.
- Steve Goldensmith outlined the purpose of the Prevention Matters initiative. Health have devolved funding to BCC to deliver an effective prevention model. The project board were working on a model which would link organisations, build community capacity and link communities together to ensure sharing of best practice across the county. They were also looking at how to

identify vulnerable people.

- BCC would be introducing Community Link Officers and Community Prevention Workers as part of this model. Part of their role would be to work with individuals and provide 'a hand to hold' during difficult transition periods. The workers would be based geographically around 7 GP cluster groups – 3 in Aylesbury Vale and 4 in Wycombe, Chiltern and South Bucks.
- District Council representatives requested that the Community based workers should work closely with them to prevent duplication. It was also suggested that workers should perhaps be based in places where vulnerable people have to attend e.g. doctor's surgeries or chemists.
- Prevention Matters has its own project board but they would also feedback on their progress to the Prevention Partnership Board.

In summing up Steve Goldensmith identified the following issues as priorities for the group:

- Increase support and links between different agencies and organisations
- Need to build on successes of existing groups
- Create 'Community Champions' by empowering individuals who can play a key role in their communities
- Increase community capacity
- Tackle Social Isolation

There was a consensus that Social Isolation was the key priority, whether this was due to; transport difficulties, mental health, learning or physical disabilities, dementia, fear of crime, ex-offenders struggling to be accepted in the community or other groups who felt socially excluded due to language or cultural issues, such as travellers or single parents.

It was suggested that another issue to consider was a lack of community cohesion and how an increased community spirit could be fostered. Angie Sarchet, BCC Cohesion and Equalities Manager could perhaps be invited to a future meeting. Paul Nanji also offered to give a presentation on the Building Community Capacity project he had been involved with at Chiltern.

**4 What areas should be prioritised for the longer term?**

The Group were asked to think of any longer term priorities that the

	<p>Prevention Partnership Board could work towards. Dementia Friendly Communities were suggested and Susie Yapp suggested that whilst this was a really worthwhile aspiration it should be broader than this, looking at how to sustain communities in general over the longer term. There is a Sustainable Community Strategy in place which takes Bucks through to 2026 – it was suggested that it should be ensured that the needs of vulnerable clients groups had been identified and included in the Sustainable Community Strategy.</p> <p>Steve Goldensmith thanked everyone for attending and contributing to the discussions. The priorities of the group would be presented to the Prevention Partnership Board meeting in July with a view to agreeing a number of priorities to present to the Executive Partnership Board.</p>
<p><b>5</b></p>	<p><b>Dates of future meetings</b></p> <p>Lifetime Health &amp; Wellbeing Group Wednesday 27<sup>th</sup> June at 2pm in Mezzanine Room 1, County Hall</p> <p>Prevention &amp; Wellbeing Partnership Board full meeting Wednesday 11<sup>th</sup> July at 2pm in Mezzanine Room 2, County Hall</p>

**Chairman**





## Prevention and Wellbeing Partnership Board

# Minutes

## Wednesday 27 June 2012

<b>Members in attendance:</b>	
Stephen Archibald	Carers Bucks
Peter Bruford	Riverside
Liz Bubbear	ConnectionFS
Luisa Fletcher	Bromford Support
Dominic Games	Paradigm Housing
Steve Goldensmith	BCC
Anna Gordon	Aylesbury Vale District Council
Elaine Jewell	Wycombe District Council
Giulia Johnson	Age Concern
Cath Marriott	BCC
Stephanie Moffat	Aylesbury Vale District Council
Margaret Morgan-Owen	Alzheimers Society
Sally Morris	Thames Valley Probation
Paul Nanji	Chiltern District Council



No	Item
1	<p><b>Welcome and Apologies</b></p> <p>Steve Goldensmith welcomed everyone to the meeting and provided a short overview of the Prevention Partnership Board (previously known as the Prevention and Wellbeing Partnership Board). He explained that the Board had decided to establish 3 sub-groups to consider the themes of Lifetime Housing, Lifetime Communities and Lifetime Health</p>

	<p>and Wellbeing with a view to identifying priorities in each of the 3 key areas.</p> <p>Apologies were received from Linda Barnes, Roy brooks, Luisa Fletcher, Mark Thompson and Lynn Trigwell. It was noted that Margaret Morgan-Owen was attending on behalf of Linda Barnes of the Alzheimers Society.</p> <p>The objective of the meeting was to identify priorities in the area of health and wellbeing for individuals, with the primary focus being on those who are vulnerable but who are not eligible for services from Adult Social Care. In the area of Prevention it was important to identify what services worked well, who can benefit from existing and new services and ensure that joint working is effective, in order to deliver the maximum benefit when resources are limited.</p>
<p><b>2</b></p>	<p><b>Background to the formation of the Group</b></p> <p>This item was considered under Item 1 above.</p>
<p><b>3</b></p>	<p><b>What are the immediate issues/concerns to prioritise for 2012-13?</b></p> <p>There was a round table discussion about the issues faced by various client groups, with regards to Health and Wellbeing and the following points were noted:</p> <ul style="list-style-type: none"> <li>• Welfare benefits changes were highlighted as a concern.</li> <li>• Officers from the district councils reported that there were a range of activities taking place within communities already and rather than trying to create new projects it would be better to try to improve links and information for socially isolated people and in the process, increase support for these existing groups.</li> <li>• A carer representative commented that she had found it incredibly difficult to find out about support services, partly because she was unsure what services might help her in caring for her husband and also she found the council websites were very hard to navigate. GPs and Adult Social Care had not been helpful in this regard – she found that the voluntary sector were more helpful in signposting.</li> <li>• There was a discussion about how best to identify vulnerable people at an early stage so that relevant information can be provided. It was noted that for older people there were significant times of transition such as retirement or death of a partner, when signposting would be useful.</li> <li>• It was suggested that GPs would be the obvious group to help with identifying vulnerable individuals and providing access to</li> </ul>

information about services, but GPs are reluctant to hold information on every service available in their surgeries as it quickly becomes unmanageable. Steve Goldensmith reported that the Prevention Matters initiative was proposing to link GPs surgeries with a Community Link Worker, who would signpost individuals to relevant services. It was noted that Clinical Commissioning Group (CCG) representatives would also link in with the Prevention Partnership Board going forward.

- Sally Morris of Thames Valley Probation Service advised that ex-offenders do not always register with GPs, especially if there were issues of substance misuse.
- It was recognised that as statutory agencies were restricting their services to critical levels, prevention work is even more important.
- Provision of advice on debt, benefits and money management would also be helpful. Housing support providers and district council representatives reported an increase in the number of people with debt issues. With benefit changes yet to be introduced, it was anticipated that this might increase and younger single people would be particularly affected by the changes to housing benefit.
- Support workers were concerned that some people, who would soon receive housing benefit, rather than it being paid directly to their landlord, would struggle with managing their money. It might also be difficult for clients to understand changes to other benefits such as Disability Living Allowance.
- Training for the workforce on the welfare reforms would also be very useful to ensure that clients were given consistent and accurate advice.
- It was reported that Probation had been making increased numbers of requests for food parcels for their clients and accommodation continued to be problematic.
- Social isolation was raised as a key concern. Many people had no family support and Sheila Bees of Wycombe District Council reported that when she had been door knocking recently she had found that a large proportion of people did not know their neighbours. Loneliness, fear of crime and a lack of confidence in mixing with the community could all contribute to social isolation. The geography of Bucks was not helpful in this respect – large estates and small rural villages can both be isolating in their own way.
- It was noted that single people could become a large disaffected group as they will be impacted hugely by changes to welfare benefits and the current poor job market. There was a suggestion that people who are 'alone' could be targeted for signposting to services.
- A number of active retired people had enquired about

	<p>volunteering opportunities but did not always want to commit to regular weekly activities. This represented an opportunity which needed some managing. The Five Ways to Wellbeing was also promoting volunteering as a worthwhile, stimulating activity.</p> <ul style="list-style-type: none"> <li>• The group were asked what local authorities and voluntary organisations needed to do to address these issues. Disseminating information more effectively, sharing best practice across organisations and trying to identify incidences occurring in individual's lives that might increase their risk of social isolation were suggested. Also it would be useful to undertake a mapping exercise of what services are available and what services would be useful additions.</li> </ul> <p>In summing up, Steve Goldensmith outlined the following priorities for Health and Wellbeing:</p> <ol style="list-style-type: none"> <li>1. Social Isolation</li> <li>2. Access to information</li> <li>3. Housing</li> <li>4. Volunteering</li> <li>5. Sustainability of services</li> </ol> <p>It was suggested that it would be useful for the Prevention Partnership Board to receive presentations on the Prevention Matters initiative and the Welfare Reform changes.</p>
<p><b>4</b></p>	<p><b>What areas should be prioritised for the longer term?</b></p> <p>It was suggested that Accommodation and avoiding duplication of resources could be considered as longer term priorities. Also as the feedback had been received that district and county council were not as helpful in assisting individuals in times of transition as they would expect, maybe there should be some consideration of how better to support the public and how to avoid a bureaucratic response in these situations. It was suggested that community based resource centres could be a solution, although it was recognised that this would have increased resource implications.</p>
<p><b>5</b></p>	<p><b>Dates of future meetings</b></p> <p>Prevention Partnership Board</p> <p>Wednesday 11<sup>th</sup> July at 2pm in Mezzanine Room 2, County Hall</p> <p><b><i>Subsequently this date was changed to Wednesday 25<sup>th</sup> July at</i></b></p>



	<b><i>10am in Mezzanine Room 2, County Hall</i></b>
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**Chairman**





# Prevention Partnership Board

## Priorities Template

LHo = Lifetimes Homes

LC= Lifetime Communities

LHe = Lifetime Health

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Outcome	Outcome	Priorities
<b>1</b>		<b>Helping people to speak up and to be active citizens</b>
<b>1.1</b>	LHo/ LC / LHe	<b>Benefit Changes:</b> Concern has been raised re the impact of recent and coming benefit changes.
<b>1.2</b>	LC	<b>Fear of Crime.</b> Fear of crime can prevent people from being active citizens
<b>1.3</b>	LC / LHe	<b>Access to Information:</b> It is felt that information for vulnerable people is not coordinated or comprehensive
<b>1.4</b>	LHe	<b>Volunteering:</b> More support needs to be given to helping/ enabling/ encouraging people volunteer
<b>2</b>		<b>Supporting Carers</b>

Outcome	Priorities
3	<b>Day and employment opportunities</b>
3.1 LC / LHe	<b>Social Isolation:</b> Social isolation is a concern for many people. It is not just an older persons issue. Often people from vulnerable groups experience isolation and need different support to overcome.
4	<b>Housing and support</b>
4.1 LHo / LHe	<p><b>Housing Access for Vulnerable Groups:</b> Access to suitable housing is seen to be problematic for a range of vulnerable groups. The type of support that is required also needs consideration</p> <ul style="list-style-type: none"> <li>• Young Offender</li> <li>• Drug &amp; Alc</li> <li>• Under 18s</li> <li>• Homeless</li> <li>• DV</li> </ul>
4.2 LHo / LHe	<b>Availability of Move On Accommodation:</b> When people leave short term accommodation it is felt that a lack of “move on” accommodation is available and this exacerbates housing issues for groups of concern
4.3 LHo / LHe	<b>Future of Sheltered Accommodation:</b> There is a growing Older Persons population. Sheltered accommodation is not as attractive or used as much as it could be.
5	<b>Improving Health</b>
5.1 LC/ LHo	<b>Prevention Matters &amp; Building Community Capacity:</b> New prevention activity needs to be coordinated and make use of existing success, experience and opportunities Prevention
5.2 LC	<b>Community Cohesion / Sustainable Communities:</b> Relates to above and needs to ensure joined up thinking

Outcome	Priorities
6	Personalisation

