BARNSLEY METROPOLITAN BOROUGH COUNCIL COMMUNITIES DIRECTORATE

STRONGER COMMUNITIES PARTNERSHIP – INAUGURAL MEETING MONDAY, 9TH NOVEMBER, 2015

Attendees:-

Councillor Lamb, BMBC (Chair) Wendy Lowder, BMBC Dan Carver, CCG/BMBC Margaret Libreri, BMBC Sue Smith, BMBC Marie Hoyle, Barnsley GP Federation Dr Mistry, Barnsley GP Federation Helen Jaggar, Berneslai Homes Philip Spurr, BMBC Sean Rayner, SWYPFT Nigel Middlehurst, VAB Tony Dailide, BMBC Adrian England, Healthwatch Andrea Hoyland, BMBC Phil Hollingsworth, BMBC Jade Rose, CCG Carrie Abbott, BMBC Jill Bills, BMBC

Jacqui Bradley, BMBC - Minute Taker

Apologies:-

Julia Burrows, BMBC Keith Dodd, BMBC

MINUTES

1	Welcome and Introductions
2	Stronger Communities – Introduction and Where We Are Now
	 Wendy Lowder opened the session by explaining the rationale behind the concept of the Stronger Communities Partnership and they can be summarised as follows: Multiple meetings taking place but not connecting as well as they should No singular outcomes plan In the context of austerity the need to better envisage how services will look in the future and put systems in place to co-produce this change. We need a collective approach. The need for preventative strategies that mitigate or defer the need for costly interventions.
	Refer to slides.
	The 'perfect storm' slide shows that we need to be sited on the issues relating to demand management, demographics, behaviour change, welfare changes, financial and housing challenges, integration and cohesion.
	Recognition that we are already testing different approaches to tricky problems eg MCP, I Heart, Care Barnsley.
	The Stronger Communities Partnership may develop time however initially has four primary delivery groups: - resilient and healthy communities - anti-poverty - early help for adults - early help for children and families.
	Questions

Dr Mistry confirmed that we need to be focussing on prevention and working together.

Helen Jaggar confirmed that it is critical as a group that we are open to challenge. The Barnsley Enterprise for Living Well group (BELW) is already established and is an example of co-production.

Marie Hoyle reported that they manage services to patients and carers, but the key is to work with them to help them manage their own care and well-being.

Councillor Lamb referred to the personalisation agenda where people take control of their own care arrangements.

Dr Mistry reported that it is sometimes difficult and dependant on a patient's ability to do that. We would need to look further down the line to see what is causing this. We need to empower people. It is about having information available for them to make these decisions.

Sean Rayner stated that we need to quantify some of the issues or we will not have a focus on what we need to do. Councillor Lamb confirmed that it is about measuring success.

Philip Spurr responded to say that it is about people's own economic development. It is difficult to know the starting point.

I Heart

Councillor Platts asked for some further clarity on the I Heart development.

Jade Rose confirmed that a soft launch was held last week and is being tested with a small number of patients. Leaflets will be distributed shortly

Marie Hoyle confirmed that I Heart isn't available everywhere and advised that the 111 Service are directing people to I Heart.

3 Stronger Communities Partnership – Terms of Reference

Dan Carver confirmed that we need to own this as a group.

Membership

Wendy Lowder is to arrange a discussion with Tim Innes at South Yorkshire Police and the Fire Service regarding membership.

- That Helen & Sean act as voice of HWB Provider Forum and that this is reflected in TOR
 Action Dan Carver
- That deputies are identified all to inform Dan Carver
 Action All

Accountability/Governance

Early Help and Prevention has been split into there are two separate groups – one for Adults and one for Children & Families.

Councillor Lamb asked everyone to respond back to Dan if they had comments on the TOR.

4 Resilient & Healthy Communities (DG1)

Phil Hollingsworth explained the five themes.

Impact of volunteering – need to stretch this much further beyond environmental activities and better connect this work into health and wellbeing.

Market Development – this is particularly important in terms of capacity building as traditionally Barnsley has not had a very buoyant market.

Area Governance Arrangements – learning from the area arrangements is key to understand

the value we gain from this approach and what opportunities this brings going forward.

Community Engagement – to improve the approach to engagement and to better connect this as a system.

Values/Aspiration – improved health and well-being outcomes by working closely in partnership

Progress to date

A new group

The Terms of Reference have been approved and monthly meetings have been established. Membership is being extended to involve the CCG and SWYPFT.

Next Steps

Formalise membership and agree the name of a Chair.

Determine skills criteria and performance management and avoid duplication.

Scope the work programme in more detail.

Move towards action and delivery rather than just coming together as a group for a discussion.

Questions

VCS review. – this is nearing its conclusion and would report in in due course.

Wendy Lowder referred to the behaviour change and self-care as an element of the work of this group. Marie Hoyle gave an update following a patient council meeting last week. The people in attendance really wanted to make a difference in their community and change their lifestyles. We need to empower them to be able to do this.

- To ensure membership of group includes SWYFT / relevant health colleagues
- To ensure self-care and behaviour change is included in scope of this group

Action - Phil Hollingsworth

5 **Early Help (DG2) – Children** – Margaret Libreri

Refer to slides

Key messages:

- It is not just about changing the service but changing behaviour.
- Early Help is about the right involvement at the right time with universal and targeted services. We can find a situation every day where a family have been sign-posted to a service early before they get into crisis.
- An Early Help assessment doesn't need to take place before you can take action. We work
 with families to bring stability and affect change. Every practitioner takes responsibility for
 managing early help.
- We need clear pathways that are understood by all partners.

A recent peer review on early help has taken place

- To ensure the delivery group takes the actions into their planning **Action – Margaret Libreri**

6 **Early Help (DG2) – Adults** – Tony Dailide

The concept of the 'Inverted Triangle' was described – universal services, targeted services and specialist services. Adult services sit between targeted services and specialist services. If universal services and targeted services didn't work, it would have an impact on specialist services and it couldn't cope.

We need to promote and maintain independence and reduce the need for health and social care

services. Avoid unnecessary admissions to care homes and hospitals. Reduce the risk of crisis and harm arising from these is very important. Pooling and making the best of limited resources. By identifying need early, we are preventing and promoting good health. Being clear who is leading, and who is delivering. We want to be involved to ensure that our objectives are being met.

Importance of the evidence base was discussed alongside an investment strategy...

Progress to date:

The least developed group.

To identify group membership and TOR.

Action – Tony Dailide

- To develop schedule of meetings.

Action – Tony Dailide

- Further consider performance metrics

Action – Tony Dailide

7 Anti-Poverty (DG3) – Andrea Hoyland

Councillor Platts reported that they have been working as a Partnership Board for many years and have developed an anti-poverty plan with partners recently discussed at Overview and Scrutiny Committee.

It is vital for this work to continue and the Anti-Poverty Delivery Group will oversee it. The Strategy will evolve as more Government pressures arise.

Why fight poverty

It is costly. It stops people reaching their potential and damages their future prospects. There is associated stress, which causes depression and anxiety and leads people to drink and use other substances to relieve the stress. People in poverty have no money, so they are unable to buy food and clothing for their families. It also damages relationships.

The number of people in poverty is expected to rise. The Living Wage will not have an impact on people in Barnsley as the majority are already on benefits.

Progress to date:

The first meeting of the delivery group will take place on 23rd November, 2015. The Terms of Reference and action plan have been drafted.

8 Measuring Success

12 draft outcome statements were posted around the walls on flipchart paper are:

Poverty is having an impact on a strong involvement in the community sector An increase in local participation and volunteering,

BCF outcomes, increased social capability,

The business community is contributing to strong and sustainable communities Increased social capability

Ownership of early help and understanding the impact

information about the early help service is easy to access

Increased funding coming into the Borough

People in Barnsley are making healthy life choices

Increased community cohesion and inclusion.

Child poverty is reducing

Our engagement project are working well

A brief challenge / critique of the outcomes took place.

To develop into a second draft. **Action - Jill Bills** To schedule a focussed session purely on outcomes framework in January. **Action – Dan Carver** 9 **Any Other Business** Pioneer Investment Programme Guidance Jade Rose circulated information for organisations who are part of the Pioneer programme to bid for monies up to £50,000, to be spent within this financial year. If anyone is interested please could they let Jade know by email. Action - All Other Items As they had run out of time, Councillor Lamb asked colleagues to forward any other items they want to raise to Dan Carver. He closed the meeting by thanking everyone for their attendance and looked forward to seeing them again in January.

Date of next Board Meeting:- 16th February, 2016 at 1.30 pm in Meeting Room 2, Town Hall