#### EXETER HEALTH AND WELLBEING BOARD

Tuesday 2 February 2016

#### Present:-

Councillor Owen (Chair) Councillor Edwards Councillor Westlake Dr Virginia Pearson
Kirsty Hill
Ruby Keane
Simon Bowkett
Matt Evans
Julian Tagg
Jo Yelland
Clare Powley
Dawn Rivers
Nicola Forsdyke
Lee Staples
Howard Bassett

Exeter City Council Exeter City Council Exeter City Council Public Health, Devon County Council Public Health, Devon County Council Public Health, Devon County Council Exeter Voluntary Services Active Devon Exeter City Football Club Exeter City Football Club Exeter ICE Drink Wise Age Well Exeter City Council Exeter City Council Exeter City Council Exeter City Council Exeter City Council

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#### **CHAIR**

In the absence of the Chair, Gillian Champion, the meeting was chaired by Councillor Owen.

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### **APOLOGIES**

These were received from Gillian Champion, Simon Bates, Caroline Lee and Robert Norley.

60 MINUTES OF THE MEETING HELD ON 17 NOVEMBER 2015

The minutes of the meeting held on 17 November 2015 were taken as read and signed by the Chair as correct.

### GOVERNMENT SPORTS STRATEGY CONSULTATION

Following consultation, the Government had published "Sporting Future: A New Strategy for an Active Nation" in December. Whilst it covered all aspects of sport including elite performance, commercial sport and governance it mirrored much of the feedback provided in this Board's consultation response. It sought to redefine what success looks like in sport, by concentrating on five key outcomes: Physical wellbeing; Mental wellbeing; Individual development; Social and community development; and Economic development. There would be a specific focus on inactivity and Sport England's role remained central around community participation. Its remit would be extended down to the age of five and broadened to include activities such as walking, dancing and cycling. The Active People survey

would be replaced by a new Active Lives survey. The full strategy can be downloaded from this link https://www.gov.uk/government/uploads/system/uploads/attachment\_data/file/4866

<u>https://www.gov.uk/government/uploads/system/uploads/attachment\_data/file/4866</u> 22/Sporting\_Future\_ACCESSIBLE.pdf

In addition to the all encompassing Government strategy, Sport England had also announced a consultation on its own strategy and both Matt Evans and Robert Norley would attend a consultation event on 24 February. There is also an online public consultation available via the Sport England website.

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# RIVERSIDE AND LUDWELL VALLEY PARK MASTER PLAN

The Chair reported that the Master Plan was to be considered by the City Council Executive on 9 February and that comments on it were welcome.

The Plan, which can be viewed on the link below, contained many new features designed to increase activity by children and adults:-

https://drive.google.com/file/d/0B4CpCORtOQdTUjh1ZmFXNWcwMEk/view?usp=s haring

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# EXETER VOICES

Kirsty Hill reported that Healthwatch Devon had commenced initial research prior to Christmas on the Exeter Voices project and was looking to refine the questionnaires prior to developing the project further.

**RESOLVED** that the work in progress be noted.

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# **BUS AND COACH STATION SITE RE-DEVELOPMENT**

The recent Exeter City Council approval of planning permission for the redevelopment of the Bus and Coach Station site was noted and welcomed. Whilst a balance between Sport for Excellence and Sport for All was referred to it was noted that the design for the swimming pool, as part of the larger leisure scheme, was the economically viable option.

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# **GET EXETER ACTIVE**

Matt Evans updated the Board on progress with the Get Active Exeter Project as follows:-

- the new Get Active Exeter logo was tabled, which had been the winning design in a public competition;
- the Express and Echo has been secured as Get Exeter Active's media partner and would be running a high profile campaign across its various channels;
- the first distinct project City Fit Club was due to commence in mid-February based at the Grecian Club, Exeter City Football Club aimed at the 30-55 age group and involving a 30 minute interactive workshop to discuss lifestyle and 60 minutes light physical exercise activity; and
- Legacy Leisure were offering a £7 discount to Active Exeter members when participating in fitness sessions.

**RESOLVED** that the report be noted.

### **IMPROVING THE DIET OF EXETER CITIZENS**

Dawn Rivers reported the following issues discussed at the first Improving the Diet of Exeter Citizens Task and Finish Working Group, the inaugural group including Public Health Devon, Exeter Community Initiatives and Exeter City Council and would be widened to include the Exeter Food Network:-

- lobby government to implement a sugar tax on drinks;
- work with the planning department to explore different ways they could reduce fast food outlets in sensitive areas (near schools);
- work with the Exeter Food Network on the local and healthy food agenda to look at local supermarkets stocking healthy food and examine the possibility of a citizens supermarket;
- work with commissioners to establish where there may be opportunities within the commissioning process to promote and support people to eat a healthy diet., (including lunch clubs and school breakfasts – Magic Breakfast model; and
- use current resources to look at how a community engagement approach could work, maybe focussing on Wonford or Exwick, because some of the pieces of the jigsaw are in place there.

Councillor Westlake endorsed work with primary schools, the school where he was a governor, looking to promote healthy diets and reduce waste of school meals by some children. Although largely independent, schools could be assisted by the County Council who could, for example, influence food suppliers.

#### **RESOLVED** that:-

- (1) the scope of the target group, which is the whole community, be approved;
- (2) support for the group to develop links to Food for Life, the Healthy Lifestyle Service, Exeter Food Network, Integrated Care in Exeter, Health Visitors, School Nurses, the voluntary sector and any other organisation to be confirmed;
- (3) support for the group to determine appropriate consultation mechanisms to identify barriers and develop solutions in respect of improving peoples' diets be confirmed;
- (4) the Task and Finish Group identify the added value it can make to health and diet in the City, with recognition of existing groups on a similar agenda with a report back to the next Health and Wellbeing Board;
- (5) Robert Norley write to Dr Sarah Wollaston MP, a member of the Parliamentary Health Select Committee, which was reviewing Public Health, on the issue of a sugar tax; and
- (6) the City Council's Planning Department be consulted on measures to prevent the location of fast food outlets near schools.

### ICE PROGRAMME A1 : IMPROVING THE HEALTH INEQUALITIES OF HOMELESS PERSONS

Jo Yelland updated the Board on progress with the delivery of the Integrated Care Exeter Programme. She presented the three year plan from 2015/16 to 2017/18 and covered the initiatives to date including multi agency workshops, 151 people completing a Street Homeless Health audit to form a baseline, practitioners challenging each other to deliver more effective, person centred care and changes at the Clock Tower Primary Care.

The aims had been revised to cover:-

- improving the co-ordination and delivery of existing services;
- prototyping new models for future integration of commissioning; and
- prototyping new models of delivery for Rapid Response, Crisis Support and Reablement for Street Homeless through new models of delivery prototyped through Integrated Health & Wellbeing Team for Homeless, MEAM case coordination and the Wat Tyler Hub.

The next steps included a formal mandate from ICE Board, identification of project management resource and lead agency and delivery plans. The scheme will go live in March.

Amongst the highlighted statistics were:-

- concerning that over half of respondents eat less than one meal a day;
- smoking prevalence is significantly higher than for the rest of Devon;
- two thirds have slept rough and 46% first slept rough when they were under 25;
- only 12% were in employment, volunteering and training and 38% reported having been admitted to hospital for a mental illness;
- 40% reported drinking twice a week or more with 13% reported drinking almost every day;
- 46% (70) of respondents had been to A&E in the previous 12 months and 39 of these had attended repeatedly; and
- 57% of those discharged from hospital said this was to suitable accommodation but 25% were discharged back to the street and 22% said they were re-admitted within 30 days.

Members recognised the complexities of the issues in engaging the homeless. For example, that despite many avoiding visiting GP's, others would visit three to four times a week and that, whilst some individuals were reported as eating one meal only a day, there seemed to be a preponderance of groups providing free meals and food. Mental health was considered a contributory factor in many cases and that a variety of "first door" options were valuable to increase engagement levels.

Exeter, traditionally, had a high number of rough sleepers compared with other cities. Its response was more fragmentary compared with some, with Plymouth, for example, possessing two large bodies addressing the problem. Nationally, however, rough sleeping had increased by 55% in the last five years and Bournemouth, for example, had recently witnessed a significant increase in its area. Most of Exeter's rough sleepers came from the Exeter and Devon area.

The Chair thanked Jo Yelland for her update.

# ALCOHOL HARM FOCUS

The following presentations were made, the highlights set out beneath:-

- Facts on alcohol use in Exeter Kirsty Hill;
  - whilst people are drinking more than in previous decades, levels have started to fall since 2007;
  - alcohol use is falling quickest in younger people
  - whilst binge drinking is a concern, chronic health conditions in older people caused by prolonged excessive drinking is also a concern
  - whilst regular alcohol use is typically lower in communities with higher levels of deprivation, admissions and death rates are highest.
- Drink Wise Age Well Clare Pawley;

# <u>Aims</u>

- better policy and practice to prevent alcohol dependency in later life
- improved health and well being for people age 50 and over who are at risk of developing alcohol dependency;
- the delivery of more effective services to prevent alcohol dependency amongst the ageing population

# Key Messages

- hidden population of over 50's at risk of harm from drinking and high level of stigma and shame associated with alcohol use in the over 50s;
- the five most frequently reported reasons for those who drink more now than in the past were age-related.

# Four main work streams

- free alcohol training in Devon for individuals, groups and front line workers;
- direct engagement and support team who visit people 1-1 to reduce drinking;
- building resilience including activities and events Think Wise Age Well; and
- prevention and campaigning events.
- Video The Great British Booze Problem

and the following reports presented:-

- Public Health England's Local Alcohol Profile for Exeter;
- Alcohol Concern Blue Light Project; and
- Emergency Exits achieving the right balance between support and enforcement to reduce street-based anti-social behaviour in Exeter.

The Chair invited thoughts and suggestions on any action the Board could take in respect of alcohol harm, given that reducing alcohol misuse was one of its main themes. The following issues were raised in the debate:-

- surprise at the level of drinking in the retired but pleasing to see reduction in young people's consumption;
- culture change was key, with education one way of challenging behaviour. The difficulty in addressing a deeply rooted problem was recognised with hypocrisy apparent in many areas such as, whilst recognising the dangers of alcohol, its use as a social lubricant remained prevalent;
- increase in drink driving in over 50's;
- little understanding of unit limits and although 14 units a week was the recent recommended guideline the advice of the World Health Organisation was that there was no safe limit;
- drink culture embedded in certain work places and many under record drinking levels when quizzed;
- little opportunity for social interaction and events on Friday and Saturday nights without the presence of alcohol, an issue also raised in recent consultation;
- use of licensing tools to, for example, encourage licensed establishments to offer greater opportunities to drink non-alcohol beverages and tea/coffee. In this respect the Breweries would need to be targeted;
- pressure groups such as the Portman Group and a fledgling Exeter organisation called Club Soda were keen to promote alcohol free events and the City's licensed establishments and the Licensed Victuallers Association should be encouraged to engage;
- Artigiano offer non-alcoholic drinks in tandem with alcohol and this approach together with extending the City's café culture should be further encouraged;
- Exeter already undertaking encouraging measures such as Best Bar None;
- Alcohol Related Injuries Database Accident and Emergency Hospital attendance data which records details of last location of drink where the attendance is alcohol related Available for Devon via the Community Safety Partnership;
- a campaign to discourage shops from selling high percentage alcohol and promoting cheap alcohol could be considered. A similar approach was looked at by Torridge District Council; and
- campaigns in local schools and work with the University should be extended to Exeter College.

### **RESOLVED** that:-

- (1) the Board endorse the initiatives discussed at this meeting as part of its aim of reducing alcohol misuse; and
- (2) feedback be provided at the next Board meeting on the Eat Well Drink Well event to be held on Cathedral Green on 14 May organised by Drin Wise Age Well.

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### ONE YOU

Kirsty Hill reported on the Public Health England initiative, One You, launching on 7 March directed at the 30-55 year age group covering healthy eating, physical activity, more movement and cessation of smoking and sensible drinking. In Devon, this campaign is being uplifted around reducing sedentary behaviour and encouraging a more active lifestyle. An online tool will be available called the "How You Are You" tool. The public will be directed to this to make a quick assessment of the different areas covered and will then be linked to local and national resources to offer support.

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#### **BLUE LIGHT**

Details were provided of two training programmes being run by Alcohol Concern to enable front line staff to offer support to problem drinkers who are unable for one reason or another to engage with alcohol services. Details of this training is available from Lorna Jones or Gill Unstead in Devon County Council.

**RESOLVED** that the Board endorse this initiative.

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### **CLEAR STREETS CHARTER**

The Board meeting on 7 July 2015 had been advised that, following on from the presentation to the previous Board meetings by Tracey Wilson, the eye clinic liaison officer, Members and officers of Devon County Council and Exeter City Council had participated in a visually impaired walkabout from the Civic Centre to the top of Fore Street. The Board had resolved to support the development of a "clear streets policy or charter" in partnership with blind and partially sighted people, and stakeholders.

The Chair confirmed that the Board remained committed to producing a Clear Streets Charter and that a further report would be submitted to the April Board meeting.

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#### DATES OF FUTURE MEETINGS

RESOLVED that the following dates for future meetings be noted:-

Tuesday 12 April 2016 Tuesday 13 September 2016 Tuesday 31 January 2017 Tuesday 11 July 2017 Tuesday 5 July 2016 Tuesday 15 November 2016 Tuesday 11 April 2017 Tuesday 12 September 2017

(The meeting commenced at 2.00 pm and closed at 4.00 pm)

Chair