



HEALTH AND WELLBEING VOLUNTARY ORGANISATIONS FORUM

Tuesday 16 July 2019, 10.00am – 12.30pm
Committee Room 1, Kensington Town Hall, Hornton Street, W8 7NX

Chair: Jamie Renton (JR), ADKC
Minutes taken by: Alice Lowry (AL), KCSC

| Item | Notes | Action |
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| 1 | Minutes of meeting on 16 April and any matters arising | |
| | Minutes from the previous meeting were approved and there were no matters arising. | |
| 2 | Mental health and wellbeing Joint Strategic Needs Assessment (JSNA) & JSNA Work Programme – Colin Brodie (CB), Public Health Bi-borough | |
| | <p><u>JSNA Presentation</u> CB introduced himself to the group and explained that the presentation would be focusing on the JSNA in a broader sense with less focus on the mental health JSNA. A JSNA is a way of identifying what the health and wellbeing needs of a local area are. It is a statutory requirement for Local Authorities and Clinical Commissioning Groups to produce. The aim is to provide a comprehensive picture of needs to inform policy and commissioning but it can also be used by individuals and organisations.</p> <p>Key questions and discussions which arose from the presentation included:</p> <ul style="list-style-type: none"> • Does the JSNA target the end user as well as the voluntary/health sector? CB said that the JSNA is usually used for key decision makers when creating policies but would be keen to see how Public Health can make it beneficial for service users. • The updated JSNA website was discussed https://www.jsna.info/. Attendees felt that it was clearer than before but there was still a lot of jargon which makes information difficult to access. If anybody has any feedback on the website please email Colin at cbrodie@westminster.gov.uk <p>The mental health JSNA is a detailed report on mental health in the borough. Kensington and Chelsea as a borough has high rates of depression. The group discussed a range of risk factors that can affect mental health and the findings from the JSNA. For more information please see presentation above.</p> <p>Key questions and discussions which arose from the mental health part of the presentation included:</p> <ul style="list-style-type: none"> • JR raised the issue of increased mental health issues within the disabled community and asked whether it was something that Public Health recognised. There is a lack of these statistics seen in reports. Public Health said they are focusing on prevention and early intervention. Austerity is a big factor and has had a clear impact on disabled communities as benefits are in shorter supplies. | |
| 3 | Social Prescribing & Self-Care - Kalwant Sahota (KS), WL CCG | |
| | <u>Social Prescribing presentation</u> | |

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| | <p>KS gave a presentation to the group about Social Prescribing and Self-Care. She focused on the link worker role and how NHS England have commissioned this so there is one link workers per primary care network. By 2023 the aim is to have one link worker per GP practice. For more information please see presentation.</p> <p>Key questions and discussions which arose from the presentation included:</p> <ul style="list-style-type: none"> • A group member who has used the My Care My Way service said that her Health & Social Care Assistant was fantastic, however the majority of the services are based in the North of the borough and are difficult to access for a lot of service users living in the south. | |
| 4 | <p>NHS Long Term Plan and the case for change – Ray Johannsen-Chapman (RJC), North West London CCG</p> | |
| | <p>Long Term Plan and case for change presentation</p> <p>RJC introduced himself and gave the group an overview of the NHS Long Term Plan. The NHS Long Term Plan sets ambitions for the NHS over the next decade which relies heavily upon finance, affordability and partnership working.</p> <p>RJC briefly explained the Case for Change and said timings were not clear but NWL CCG welcome feedback from the VCS. Key questions and discussions which arose from the case for change presentation included:</p> <ul style="list-style-type: none"> • West London Clinical Commissioning Group is able to fund a number of groups across Kensington and Chelsea. However other CCG’s in neighbouring boroughs and areas aren’t fortunate enough to have the same amount of money to invest. Group members wanted to know whether funding would be divided equally between the different areas. Previously funding requests would go to a borough’s own CCG whereas in the future it will go to the eight combined. WLCCG don’t know what is going to happen and it is still unknown. RJC will find out more about this from his colleagues. • Group members were keen to know how the single CCG would be working with the 8 different local authorities including housing, education and ASC. WLCCG were unable to answer this as even top decision makers in the NHS haven’t officially signed up to the single CCG. • Concerns over creating a bigger bureaucracy were discussed. NLWCCG explained that having one CCG should in theory save money. The group wanted to know what evidence they had that this would actually save money instead of the theory. • My Care My Way is a current social prescribing programme for over 65s in Kensington and Chelsea and neighbouring areas. Group members agreed that this was a successful model that should be considered by the other CCGs. • The North Kensington cultural competency framework was discussed. The eight CCG’s are currently discussing this aspect of work and how it would integrate into the single CCG. • There will be one commissioning team in the single CCG that will have an area dedicated person. RJC explained the importance of using patient reference group. The CCG’s are planning to use a delegated community to help CCG’s decide whether they are ready. • Group members felt that the merger could be positive if the consultation is successful and the evidence given is used – can NWLCCG feedback on how they | <p>AL to send out case for change and NHS Long Term Plan docs</p> <p>RJC to find out about how funding will be divided with areas</p> <p>RJC to send through details on how to join the Citizen panel</p> |

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| | <p>are using community feedback</p> <ul style="list-style-type: none"> • ACAVA commented that they have to turn away service users who don't live in the right area. They stated that it would be helpful for a wider range of services to be available across a wider geographical area so wouldn't have to turn away people. Other members highlighted that then this could possibly stretch local providers, all agreed. • The benefits of the Health Help Now app and KCSC directory were discussed and having central places to advertise local services to all PCNs. AL to share details with the minutes. • RJC highlighted the benefits of using a Citizens Panel to get information out to members of the community who are difficult to reach. 61% of the population want to say something about health services but don't want to attend an event The CCG are recruiting 4000 people to take part in a Citizens Panel that will represent the community in health and wellbeing decision made by NWLCCG. RJ to send details of how to join the panel. • How will savings from VCS projects be input back into the VCS • How will the local relationships built over the years with local commissioners who know the area be protected and harnessed to improve the health and wellbeing of the community • RJC suggested KCSC put together a paper from the sector highlighting what works and doesn't work currently with the CCG, what the VCS do well, advocate for funding to continue and how to scale up projects across a larger area. • Health Help App Now https://www.kcsc.org.uk/health-help-app-now-vco-information-update • KCSC Self-Care directory https://www.kcsc.org.uk/self-care-directory | AL to share Health App Now & KCSC Directory details with minutes |
| 5 | <p>Feedback from other forums including:</p> <ul style="list-style-type: none"> • Borough Voluntary Organisations Advisory Group • Main Voluntary Organisations Forum • Health and Wellbeing Board • WLCCG • Healthwatch | |
| | <p>Borough Voluntary Organisations Advisory Group This meeting was for the voluntary sector to meet with local Cabinet members from RBKC 3 or 4 times a year. Any topic suggestions for meetings can be sent to angela@kcsc.org.uk.</p> <p>Main VOF The Main VOF in June focused on the Council Plan and Grenfell Recovery Strategy.</p> <p>Health and Wellbeing Board The Health and Wellbeing Board recently met and spoke about the JSNA.</p> <p>Healthwatch The Healthwatch AGM took place on 15 July and was successful.</p> | |
| 6 | <p>Events and AOB</p> <ul style="list-style-type: none"> • ACAVA told the group about their latest project launching in the second half of 2019. Maxilla Men's Shed will be a place where local adults, primarily men, can come to access services. A basic woodwork shop will be running by August. They are recruiting a manger for the project – please see here. Contact Isabella Niven | |

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| | <p>at iniven@acava.org.</p> <ul style="list-style-type: none"> • One Westminster have their own Self-Care Directory. Groups who want to be included on this OR the Health Help Now App please send your information to Concia - c.albert@onewestminster.org.uk. • SMART is having a Summer Party & CD Launch on Thursday 1 August from 5pm – 8pm. • Clement James are running a week-long workshop called ‘Express Yourself’ – it intends to provide a space for young people to explore the theme of expressing themselves. This workshop will run between 29 July – 3 August. For more information please click here. • Dalgarno Trust have a Healthworks programme that works in partnership with a number of organisations that represent the BME community across the borough. • KCSC announced that two screens are available to organisations who often have residents coming in and out of their reception area. The screens will show key health messages but can also be used for out of hours activities. • Citizens Advice have won funding for a series of workshops for ‘effective evidence for disability benefits. Citizens Advice have received funding for ten workshops with GP workers. The project begins in September – for further information please email research@kensingtoncab.co.uk. • Pembridge Residential Unit was discussed with group members and whether it had been closed. Group members felt this had happened quietly. KS will circulate report with details around this. • Spectra provide trans services – this includes social groups, counselling and a new peer mentoring service which launched in July. Please see here for more information. • Paddington Trust are looking for outstanding volunteers who are passionate about supporting people at risk of Type 2 Diabetes to join our team of Diabetes Champions. For further information click here. • Volunteer Centre Kensington & Chelsea are running a mini comms programme – for further information please click here or email eunice.ackerson@vckc.org.uk. • Dadihye are running a sewing class on Thursdays from 11am-4pm. They are also looking for speakers to present to service users on health issues. Email info@dadihye.co.uk for further information. | <p>KS to circulate report about Pembridge Residential</p> |
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ATTENDANCE LIST

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| 1 | ACAVA |
| 2 | Action Disability Kensington and Chelsea |
| 3 | Al-Hasaniya Moroccan Women's Centre |
| 4 | Carers Network |
| 5 | Citizens Advice |

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| 4 | Community Living Well |
| 6 | Dadihiye Somali Development Organisation |
| 7 | Dalgarno Trust |
| 8 | Equal People Mencap |
| 9 | KCSC |
| 10 | Midaye Somali Development Network |
| 11 | MIND |
| 12 | MSH at Home CIC |
| 13 | One Westminster |
| 14 | Open Age |
| 15 | Paddington Development Trust |
| 16 | Public Health, RBKC |
| 17 | Public Health, Westminster |
| 18 | Spectra |
| 19 | The Clement James Centre |
| 20 | The Kensington & Chelsea Foundation |
| 21 | Volunteer Centre Kensington & Chelsea |
| 22 | West London Clinical Commissioning Group |
| 23 | West London Zone |

The information above will appear in minutes for this meeting which will be made available to all the attendees and published on KCSC's website.