

## **Adults' Health and Wellbeing Partnership**

A meeting of the Adults' Health and Wellbeing Partnership was held on Wednesday 1 April 2015

**Present:** Peter Kelly (SBC) (Chairman),

Jane Humphreys, Colin Snowdon, Steve Hume, Councillor Jim Beall, Graham Clingan, Neil Russell, Reuben Kench, Margaret Waggott (SBC), Julie Allen (NPS), Ian Coates (Cleveland Police), Mick Hickey (SRC), Steve Rose (Catalyst) or (Secondary School Rep) Paul Williams (CCG), Lindsey Robertson (NTHFT); Priti Butler (Big Life), Anita Johnson (4Children), Shilva Visram (substitute for Simon Forrest) (Durham University)

**Officers:** Michael Henderson (SBC)

**Apologies** Sarah Bowman - Abouna, Simon Wilson, Julie Nixon (SBC), Steve Chaytor (Tees Active), Simon Forrest (Durham University), Natasha Judge (Healthwatch), Julie Parkes

### **1 Declarations of Interest**

There were no declarations of interest.

### **2 Inspiring an active Borough**

The Partnership was provided with a presentation relating to the development of a Sport and Active Leisure Strategy for the Borough.

The presentation covered the following areas:

- Context – the current positive position including: excellent public sector leisure facilities, healthy private sector, number of high profile events, schools sport partnership
- Challenges – including: austerity, national policy being sport-centric, less than 30% of population were active, links between low levels of physical activity and deprivation.
- Health Challenges – including: physical inactivity was a primary cause of premature deaths, child obesity
- Reasons for low activity – including: activity not seen as a priority, poor experiences of sport in childhood, lack of choice when young,

Members agreed that it was important that the strategy was right for all parts of the community but there should be a focus on getting things right for young people, right from the start as a positive experience of sport and physical activity influenced a person's attitude for the whole of their life. Effectively a focus on young people would be a preventative approach, which could see:

- creation of positive and engaging active play/sports introductions and experiences for all young children
- participation being young person focused rather than sports centric.

- Reducing the levels of drop out of young people
- Preventing inactive teenagers from becoming inactive adults

The Partnership noted some of the characteristics of positive participation including: having fun, improving health/appearance, providing a support network of peers, positive engagement with coach/teacher, opportunities for the expression of strengths, desired.

Important deliverers would be family, school, education, workplace, sports clubs, youth services etc.

In summary the strategy would look to

- ensure all the Borough's young people were exposed to a pathway of inspiring sport and active leisure experiences.
- Ensure that the sporting landscape existed for all adults and older people to be active and to achieve their sporting aspirations.

Further discussion on the strategy could be summarised as follows:-

- Members felt that a good strategy was emerging and agreed that there needed to be a focus on young people and the longer term. However adults needed to be considered too, as improvements in health would be beneficial to the individual and the health system.
- It was suggested that the strategy needed to include a focus on the disadvantaged as engagement in physical activity was particularly low in this group, where health inequality was particularly apparent.
- A look to the past may provide some help, as the rates of obesity in children and adults were much less in the past than the current situation. Intolerance and safety concerns that meant children were discouraged from undertaking unstructured activities such as football on green spaces.
- A person centred approach was essential but would take some time and would rely on the voluntary sector to effect a cultural change and would need some acceptance of sports' national governing bodies.
- The media had a role in pushing activity and not making inactivity and obesity appear normal.
- The strategy should maximise the use of community assets. Push initiatives such as outside gyms and encourage community ownership.
- Social prescribing – It was suggested that further discussion on this take place outside the meeting. Neil Russell to contact Public Health.

RESOLVED that the report be noted.

## **Learning Disabilities Partnership**

Members considered a report that presented minutes from a meeting of the Learning Disabilities Partnership held on 26 January 2015. The main areas of discussion that had taken place at that meeting had been:

- The Health Self –Assessment Framework that had to be completed by the end of January 2015.
- The plan for the Partnership meeting in 2015

Connected to the previous item members briefly discussed what support could be given to people with learning difficulties to help them engage with sport and physical activity.

RESOLVED that the report and minutes be noted and consideration be given to how people with learning difficulties could be better supported to access sport and physical activity.

## **Director of Public Health's Annual Report**

Members considered a report that presented the Director of Public Health's Annual Report 2013/14.

It was explained that, as part of his responsibilities under the Health and Social Care Act 2012, the Director of Public Health was required to produce an independent report on the health of the local population.

The report provided a strategic overview, setting out the key issues in improving and protecting the health and wellbeing of the population and reducing inequalities. It identified examples of key work and priorities for action. The report was supported by other strategies and more detailed plans e.g. the Health Protection Plan.

The report included issues relating to:

- Addressing inequalities in Stockton Borough.
- Creating population impact.
- Examples of addressing inequalities in 2013/14, including service reviews and providing specialist Public Health advice and support.
- Protecting the health of the population.

Members considered the report and supported its focus on addressing inequalities and the use of proportionate universalism.

RESOLVED that the report be noted.

## **Sex Workers update**

Members received a report that provided an update on sex work in Stockton and the multi-agency approach that was being adopted.

The Partnership noted that approach was working particularly well:-

- information sharing between agencies
- a more holistic view could be established and agencies were able to tackle issues simultaneously
- Establishment of a stable living environment was crucial including any necessary support.

Members agreed that that increased identification of vulnerable women was positive but, obviously presented an increased challenge. A more detailed approach to support, advice and guidance could be resource intensive and by increasing the cohort of women there was a risk of spreading the resource too thin. Consideration was being given to forming a risk matrix to allow more effective management of the identified cohort.

Members noted some of the ways intensive support would be provided , moving forward:-

- Looking to provide housing support, either to move to suitable accommodation i.e. through a supported housing scheme, or just better management of a tenancy.
- Continuation of trying to push for Rehabilitation Orders for those females arrested to ensure that appropriate help and engagement of support could be adapted to assist them in positively modifying their behaviour.
- Addressing any substance misuse issues,
- Supporting individuals with their finances and better advice and knowledge around debt management.
- Getting individuals trained, so they were better equipped to find employment
- Empower individuals to have the confidence to manage their lives in a more positive and effective way to allow them to successfully exit this kind of work / behaviour.
- Continuation of Police Operations to disrupt and target curb crawlers and continue to recognise each individual as a vulnerable victim in this situation.
- Reduce Sex working on the street without moving it to a more hidden crime making it more difficult to take enforcement action or engage with individuals to provide support.
- To reduce sex work within Stockton to improve quality of life for the communities that were living with sex work in close proximity to their home.

The Partnership was informed that the Children, Education and Social Care service (CESC) undertook a confidential initial assessment of its involvement with 32 adult females who were identified, via treatment services, as being involved in sex working.

Of the 32 cases, only 12 were actively involved with CESC, and in half of those cases the children were not placed with the parents.

In no cases were the reasons for CESC involvement directly linked with parents' involvement in sex working – the majority of cases were because of parental substance misuse.

There was only one confirmed case of an adult female being previously looked after by the Local Authority, and even that was for a brief period.

RESOLVED that the information and future plans be noted

### **Forward Plan**

The following amendments were agreed:-

Police operations – Sex Workers

Health inequalities – Professor Bambra to be scheduled.

Review frequency of meetings – July 2015  
Partners' Contributions – 9 June 2015