



Public Document Pack  
**TONBRIDGE & MALLING**  
**BOROUGH COUNCIL**

**EXECUTIVE SERVICES**

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**Chief Executive**

Julie Beilby BSc (Hons) MBA

Gibson Building  
Gibson Drive  
Kings Hill, West Malling  
Kent ME19 4LZ  
West Malling (01732) 844522

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**NB - This agenda contains proposals, recommendations and options. These do not represent Council policy or decisions until they have received proper consideration through the full decision making process.**

Contact: Committee Services  
[committee.services@tmbc.gov.uk](mailto:committee.services@tmbc.gov.uk)

19 February 2014

To: MEMBERS OF THE COMMUNITIES AND HEALTH ADVISORY BOARD  
(Copies to all Members of the Council)

Dear Sir/Madam

Your attendance is requested at a meeting of the Communities and Health Advisory Board to be held in the Civic Suite, Gibson Building, Kings Hill, West Malling on Tuesday, 4th March, 2014 commencing at 7.30 pm

Yours faithfully

JULIE BEILBY

Chief Executive

**A G E N D A**

**PART 1 - PUBLIC**

1. Apologies
2. Declarations of Interest

3. Minutes

To confirm as a correct record the Notes of the meeting of the Communities and Health Advisory Board held on Monday, 18 November 2013

**Matters for recommendation to the Cabinet**

- |    |   |         |
|----|---|---------|
| 4. | Key Voluntary Sector Bodies - Grant Support | 5 - 8   |
| 5. | Community-Led Local Development (CLLD)      | 9 - 12  |
| 6. | Health Action Team                          | 13 - 20 |

**Matters submitted for Information**

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| 7. | Minutes of the Local Strategic Partnership | 21 - 28 |
| 8. | West Kent Health and Well Being Board      | 29 - 36 |
| 9. | Urgent Items                               |         |

Any other items which the Chairman decides are urgent due to special circumstances and of which notice has been given to the Chief Executive.

**Matters for consideration in Private**

10. Exclusion of Press and Public

The Chairman to move that the press and public be excluded from the remainder of the meeting during consideration of any items the publication of which would disclose exempt information.

**PART 2 - PRIVATE**

11. Urgent Items - Private

Any other items which the Chairman decides are urgent due to special circumstances and of which notice has been given to the Chief Executive.

## **MEMBERSHIP**

Cllr Ms S V Spence (Chairman)  
Cllr Mrs C M Gale (Vice-Chairman)

Cllr A W Allison  
Cllr T Bishop  
Cllr Mrs E M Holland  
Cllr D Keeley  
Cllr Miss J L Sergison  
Cllr Miss S O Shrubsole

Cllr C P Smith  
Cllr A K Sullivan  
Cllr M Taylor  
Cllr R Taylor  
Cllr D J Trice

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TONBRIDGE & MALLING BOROUGH COUNCIL  
COMMUNITIES AND HEALTH ADVISORY BOARD

4<sup>th</sup> March 2014

Report of the Chief Executive

Part 1- Public

**Matters for Recommendation to Cabinet - Non-Key Decision (Decision may be taken by the Cabinet Member)**

**1 KEY VOLUNTARY SECTOR BODIES – GRANT SUPPORT**

**To review the work of those voluntary sector bodies who receive grant support from the Borough Council and to determine grants for 2014/15.**

**1.1 Background**

- 1.1.1 In March 2012, the former Communities Advisory Board agreed revised, three year service level agreements with the following key voluntary sector bodies:

Tonbridge and Malling CAB  
Voluntary Action within Kent  
Voluntary Action Maidstone  
Age UK Sevenoaks and Tonbridge  
Age Concern Malling/West Kent Community Care  
Maidstone and West Kent Mediation Services.

- 1.1.2 The first year of those service level agreements is now nearing completion. Annual reviews are an integral part of these and it is therefore timely to hear from representatives of each of these organisations about progress achieved to date. A short, verbal progress report from each will be presented at the Board meeting and Members of the Board will have an opportunity to put questions to each representative.

**1.2 Requirements of the Service Level Agreements**

- 1.2.1 The services offered by each of the organisations listed above should be well known to the Board. The following, however, is a summary of any specific requirements of each service level agreement which will assist the Board in reviewing progress.

**Advice Services:** The key role of the Tonbridge and Malling CAB is to provide advice services on a range of specialist topics. The CAB is located at River Walk in Tonbridge and advice services are available via walk in appointments, by telephone or via on line services. Home visits can also be arranged. In order that the CAB offers effective services to the whole of the Borough, their service level agreement requires the CAB to provide outreach services in the Malling area at

the following locations: West Malling, East Malling, Snodland, Kings Hill, Aylesford, and Borough Green. The Tonbridge and Malling CAB is also encouraged to work with Bureaux in adjoining areas to provide mutual assistance and reduce operating costs. Annual grant support from the Council is £111,000.

**Volunteering Services:** Voluntary Action Within Kent (VAWK) provide support for volunteers looking for placements and for organisations needing volunteer assistance focused in the Tonbridge area. Voluntary Action Maidstone (VAM) provides similar services for the Malling area. Both organisations provide a volunteer driving scheme for medical appointments etc. Each organisation receives an annual grant of £5,000.

**Older People's Services:** Age UK Sevenoaks & Tonbridge offer a range of services to support the elderly including transport services, health and day care and information services. The organisation is affiliated to Age UK as part of a national network. Age Concern Malling/West Kent Community Care provide a similar range of services for Malling but have chosen not to be affiliated to Age UK. Each organisation receives an annual grant of £10,000.

**Mediation Services:** West Kent provides services in the Tonbridge area whilst Maidstone covers the Malling area. A range of mediation services are provided including neighbour and family disputes, made either by self-referral or via referrals from partner agencies. They are a key partner in the Community Safety Partnership. A single grant of £6,000 is given which is shared equally between the two schemes.

### 1.3 Legal Implications

1.3.1 Addressed via adopted service level agreements.

### 1.4 Financial and Value for Money Considerations

1.4.1 As set out above. The Board must assess progress achieved by each organisation receiving grant support to ensure it is achieving value for money. Sufficient budgetary provision has been made in the estimates for 2014/15 to provide grant assistance as recommended below.

### 1.5 Risk Assessment

1.5.1 N/A

### 1.6 Equality Impact Assessment

1.6.1 See 'Screening for equality impacts' table at end of report

### 1.7 Recommendations

1.7.1 That, subject to the Board being satisfied the services provided are of an appropriate standard, the following grants **BE CONFIRMED** for 2014/15:

Tonbridge and Malling CAB - £111,000  
 Voluntary Action within Kent - £5,000  
 Voluntary Action Maidstone - £5,000

Age UK Sevenoaks and Tonbridge - £10,000  
 Age Concern Malling/West Kent Community Care - £10,000  
 Maidstone and West Kent Mediation Services - £6,000

The Chief Executive confirms that the proposals contained in the recommendation(s), if approved, will fall within the Council's Budget and policy Framework.

Background papers:

contact: Mark Raymond

Nil

Julie Beilby  
 Chief Executive

<b>Screening for equality impacts:</b>		
<b>Question</b>	<b>Answer</b>	<b>Explanation of impacts</b>
a. Does the decision being made or recommended through this paper have potential to cause adverse impact or discriminate against different groups in the community?	No	
b. Does the decision being made or recommended through this paper make a positive contribution to promoting equality?	Yes	The work of each organisation aims to focus in the need to support vulnerable residents most in need.
c. What steps are you taking to mitigate, reduce, avoid or minimise the impacts identified above?		

*In submitting this report, the Chief Officer doing so is confirming that they have given due regard to the equality impacts of the decision being considered, as noted in the table above.*

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**TONBRIDGE & MALLING BOROUGH COUNCIL**  
**COMMUNITIES AND HEALTH ADVISORY BOARD**

**4<sup>th</sup> March 2014**

**Report of the Chief Executive**

**Part 1- Public**

**Matters for Recommendation to Cabinet - Non-Key Decision (Decision may be taken by the Cabinet Member)**

**1 COMMUNITY-LED LOCAL DEVELOPMENT (CLLD)**

**To set out an opportunity to establish a CLLD addressing community development issues in Tonbridge and Malling.**

**1.1 What is a Community-Led Local Development?**

1.1.1 Reports have been made to recent meetings of the Economic Regeneration Advisory Board regarding the new funding role of the South East Local Enterprise Partnership. Significant levels of both future Government and European funding are now being channelled into local areas from 2015 with decisions being made on their distribution by the LEP.

1.1.2 A new funding initiative for local projects has been created called community-led local development. These will focus on the needs of local areas rather than LEP-wide initiatives (typically involving a population of between 10,000 and 150,000 people) and can be used to address a range of community issues and needs. Funding from European sources, the European Social Fund and the European Regional Development Fund, can be accessed via a CLLD. 50% match funding is required for these programmes. One of their key advantages over other funding sources is that CLLDs can provide funding for up to seven years with the long-term benefits of that investment remaining in the designated area.

**1.2 How a CLLD will operate**

1.2.1 CLLDs have been based on the 'LEADER' model. Members will be aware that West Kent was successful in obtaining funding over 4 years for a West Kent Leader programme enabling grant support of over £1m to be provided to the rural and land-based sectors. The model for CLLDs therefore involve the formation of a 'Local Action Group' (LAG) made up of local partners which prepares a Local Development Strategy setting out what local needs are to be addressed and what resources are required. A bid is submitted to the Local Enterprise Partnership and

if successful, annual funding is then provided and administered by a nominated 'Accountable Body' (usually the local authority involved).

### **1.3 The Bidding Process**

1.3.1 A formal call for expressions of interest from local partners within the South East LEP area is to be opened in March of this year with a deadline of June 2014. The LEP will assess those bids received and will then invite successful applicants to prepare a Local Development Strategy. These will need to be submitted by March 2015. Final decisions will then be made by May 2015.

### **1.4 A Suggested CLLD for Tonbridge and Malling**

1.4.1 The suggested focus for a Tonbridge and Malling CLLD is to support our community development objectives particularly related to addressing the needs of our more deprived communities. As Members will be aware, partner organisations (including the Borough Council) currently contribute to the funding of community workers for Snodland, East Malling and Trench who are provided by the Beat Project. This local funding commitment and any additional resources being invested by specific partners on such work, for example, Russet Homes, could then be used as match funding to draw down additional LEP funds, effectively to double the resources currently available.

1.4.2 A Community Led Local Development project could therefore seek to achieve the following key outcomes:

- § To consolidate and build on the existing community development work in Snodland, East Malling and Trench to extend its local impact, engage more families in need and extend the range of local innovative projects that can be delivered;
- § To extend the support available to areas in need additional to the three main priority communities via outreach work in other areas including, for example, Hadlow, Aylesford, Larkfield, and South Tonbridge;
- § To enable a longer term approach towards community development to be adopted with sustainable funding to bring about long-lasting positive change to local communities in need; and,
- § To bring together the three community partnerships under an umbrella Local Action Group to better co-ordinate community development work, set a clear, challenging agenda for future work and achieve a focus on interventions that have the best, positive outcomes for local people in need.

1.4.3 It is therefore suggested that a draft Expression of Interest be submitted to the SELEP when the invitation period is opened, based on the above.

## 1.5 Legal Implications

- 1.5.1 If this expression of interest is successful, these issues will need to be dealt with as part of the preparation of a Local Development Strategy.

## 1.6 Financial and Value for Money Considerations

- 1.6.1 As set out above. The opportunity for additional matched funding will enable a wider range of community development work to be undertaken across the Borough.

## 1.7 Risk Assessment

- 1.7.1 N/A

## 1.8 Equality Impact Assessment

- 1.8.1 See 'Screening for equality impacts' table at end of report

## 1.9 Recommendations

- 1.9.1 That an expression of interest for a Community-Led Local Development initiative focused on addressing the Borough's community development objectives **BE SUBMITTED.**

The Chief Executive confirms that the proposals contained in the recommendation(s), if approved, will fall within the Council's Budget and policy Framework.

Background papers:

contact: Mark Raymond

Nil

Julie Beilby  
Chief Executive

Screening for equality impacts:		
Question	Answer	Explanation of impacts
a. Does the decision being made or recommended through this paper have potential to cause adverse impact or discriminate against different groups in the community?	No	

<b>Screening for equality impacts:</b>		
<b>Question</b>	<b>Answer</b>	<b>Explanation of impacts</b>
b. Does the decision being made or recommended through this paper make a positive contribution to promoting equality?	Yes	Additional community development work will focus on the specific needs of our more deprived communities.
c. What steps are you taking to mitigate, reduce, avoid or minimise the impacts identified above?		

*In submitting this report, the Chief Officer doing so is confirming that they have given due regard to the equality impacts of the decision being considered, as noted in the table above.*

## TONBRIDGE & MALLING BOROUGH COUNCIL

### COMMUNITIES and HEALTH ADVISORY BOARD

4 March 2014

#### Report of the Director of Planning, Housing and Environmental Health

#### Part 1- Public

#### Matters for Recommendation to Cabinet - Non-Key Decision (Decision may be taken by the Cabinet Member)

#### 1 HEALTH ACTION TEAM

##### Summary

The report provides a summary of the work of the Council's Health Action Team. Minutes of the most recent meeting are attached.

#### 1.1 Background

1.1.1 Through the Health Action Team (HAT) it is intended that local partners involved in the delivery of "health" in its widest context have the opportunity to meet together to develop a wider understanding of the role of the various partners engaged in health improvement. The HAT also provides a focus for co-ordinating health improvement work across the Borough to help achieve good local outcomes for local people.

1.1.2 The HAT meets quarterly and includes representation from a number of the Council's Services, including Leisure, Private Sector Housing, Executive Services and Environmental Health. It also involves partners including, Tonbridge and Malling Leisure Trust, Kent County Council Public Health, Clinical Commissioning Group, Age Concern and Voluntary Action West Kent. It is intended that as work on this agenda develops additional partners will join the group, including those representing the Troubled Families Programme and MIND. Minutes of the 11 December 2013 meeting are attached at **[Annex 1]**.

1.1.3 Complementing the work of this Group, will be a Health OSG, the principle aim of which will be to focus on the delivery of our Health Inequalities Action Plan.

#### 1.2 Legal Implications

1.2.1 None

#### 1.3 Financial and Value for Money Considerations

1.3.1 Actions for the Council arising out of the HAT will be met by existing budgets or additional external funding.

- 1.3.2 An important role for the HAT is to ensure a co-ordinated approach to the delivery of health improvement initiatives, including the avoidance of duplication, to ensure that resources are used to best effect.

#### 1.4 Risk Assessment

- 1.4.1 None

#### 1.5 Equality Impact Assessment

- 1.5.1 See 'Screening for equality impacts' table at end of report

#### 1.6 Recommendations

- 1.6.1 Members are requested to **ENDORSE** the work of the HAT and the most recent minutes of this Group.

The Director of Planning, Housing and Environmental Health confirms that the proposals contained in the recommendation(s), if approved, will fall within the Council's Budget and Policy Framework.

Background papers:

contact: Jane Heeley

Nil

Steve Humphrey

Director of Planning, Housing and Environmental Health

Screening for equality impacts:		
Question	Answer	Explanation of impacts
a. Does the decision being made or recommended through this paper have potential to cause adverse impact or discriminate against different groups in the community?	Yes	The HAT meets to formulate a strategic approach to the delivery of health improvement, with partners, across the Borough. A key focus of this work is addressing health inequalities, for that reason the emphasis on delivery of these initiatives will tend to be focussed in and around our priority communities.  However, programmes such as those adult weight management delivered through the Leisure Centres programmes, healthy walks etc. are open to all.

<b>Screening for equality impacts:</b>		
<b>Question</b>	<b>Answer</b>	<b>Explanation of impacts</b>
b. Does the decision being made or recommended through this paper make a positive contribution to promoting equality?	Yes	Through the reasons stated above.
c. What steps are you taking to mitigate, reduce, avoid or minimise the impacts identified above?		

*In submitting this report, the Chief Officer doing so is confirming that they have given due regard to the equality impacts of the decision being considered, as noted in the table above.*

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**TONBRIDGE AND MALLING  
HEALTH ACTION TEAM**

**MINUTES**

**Wed 11<sup>th</sup> December 2013  
14:00-16:00**

<b>Present:</b>	Mark Raymond	Corporate Services Manager, TMBC
	Heidi Ward (Gould)	Healthy Living Co-ordinator, TMBC
	Jane Heeley	Chief Environmental Health Officer, TMBC
	Martin Guyton	Chief Executive TMLT
	Alison Finch	Safer & Stronger Communities Manager TMBC
	Hazel Skinner	Private Sector Housing Manager
	Kas Hardy	KCC Public Health Specialist
	Vicky Lawford	SAFE Development Manager - VAWK
	Lyn Rootes	Age Concern West Malling

**Actions**

**1. Apologies and introductions**

The meeting was chaired by Jane Heeley and apologies were sent from Mark Raymond.

**2. Minutes and actions of previous meeting**

It was noted that there was a need for CCG representation on the group and that JH would identify the most suitable contact. JH

**3. Mental Health & wellbeing – Kaz Hardy**

As Ivan Rudd, KCC Public Health Specialist in the area of mental health and wellbeing had not responded to an invite to be present at the group, however, Kas Hardy agreed to feedback to the group on his behalf.

A new strategy 3 year Joint Health & Wellbeing Strategy was presently being developed with a key outcome of reducing suicide, increase self reporting on wellbeing and increase access to IAPT services.

KH reported that there were now '6 Ways to Wellbeing' for Kent as with the 6<sup>th</sup> 'Way' having a focus on 'Looking after our planet' and sustainability.

KH reported that it is likely that the Mental Health and Wellbeing Service Level Agreement between TMBC and KCC would remain the same for 2014/15. However, KH mentioned that the project - 'Men's Sheds' was moving forward and could provide a be a good opportunity to work jointly. A funded Development coordinator had been appointed to support the setting up of 'Men's Shed' groups however, there is no

additional funding available. The concept of 'Men's Sheds' is to specifically target men with a focus on 'veterans' to encourage men to talk about issues around mental health and wellbeing. It is a National movement that aims to build resilience.

JH enquired about access to IAPT, and Kas explained that the responsibility was now with KCC as it is part of the prevention agenda. IAPT delivered Cognitive Behavioural Therapy (recommended by NICE).

CCG now had responsibility for CAMHS Services and these would be delivered through the WKCCG commissioning intentions.

#### **4. Workplace Health & Winter Deaths – Karen Hardy KCC**

##### Workplace Health

KH explained that workplace health is a priority for Public Health England and KCC supported by the Kent Workplace Health Initiative. MR/KH

The National programmes encourage workplaces to sign up to a Public Health Responsibility deal – 'sign up and pledge' but in Kent, KCC are signposting organisations to the Health & Wellbeing Charter. Kent also have a focus on sustainability and a strong focus on targeting routine manual workers and achieve a reduction in Health Inequalities and provides a good framework with a good investment on return. Kaz explained that there was some available data and stats to show investment on return has been done by Sainsbury's and that she would look at getting this information for the group. KH

The wellbeing charter is awarded via an online self- assessment to achieve different levels;

- Committed
- Achieved
- Excellence

A training day is being held on the 17<sup>th</sup> December with a Launch Day 22<sup>nd</sup> January where Dame Carol Black will be attendance. JH and Tamsin Ritchie have been asked to present the Workplace Health Work already being delivered through Public Health funding. Funding will be given to local authorities by KCC via Environmental Health teams.

It was decided by the group that an update on the 'Workplace Health Initiative' would be required as an agenda item at the next HAT meeting. HW

##### Winter Deaths

KH has now taken over the responsibility for winter deaths from Colin Thompson. KH explained that winter deaths are calculated from the 31<sup>st</sup> Dec- 31<sup>st</sup> March Deaths and report over 3 years. KH

(Kas to circulate power point on winter deaths)

As part of the Winter warmth programme, all agencies refer into Health Improvement Agency (HIA)

- Health
- Home – more energy efficient
- Falls screening tool
- Falls – Karen Shaw – commissioning falls prevention.

KH/HS

TMBC falls prevention Assistants are a good resource to refer into the HIA– Kas to contact Hazel about linking work.

Age UK will be delivering training to voluntary, private and charitable organisations from January.

## 5. Domestic Violence & Alcohol update – Alison Finch

Alison Finch (AF) introduced herself and explained how there were a range of different agencies with the responsibility of reducing crime and disorder within the Borough.

Partnership meetings look at specific issues and formulate an action plan looking at 3 key themes - domestic violence, anti social behaviour and substance misuse. Each theme has a different action plan with different agencies looking at each theme.

Funding comes from a range of partners; TMBC CSU, Police, KCC wardens and Russet Homes.

### Domestic Violence

Two different organisations;

- Domestic Abuse Volunteer Support Services (DAVSS) – low to medium risk with free confidential support.
- KDAC is a County wide organisation looking at higher risk situations.
- North Kent Women’s Aid – Freedom Programme – work closely with police HW

### Alcohol and substance misuse

Kenward Trust work with young people and have engagement initiatives in Snodland, Aylesford, Leybourne and Tonbridge Park. Look at issues around under-age drinking, cannabis and legal highs.

CRI – are commissioned through KCC and look specifically at adults with drinking problems.

KCA – work with young people

## 6. **Dementia Friendly Communities – Lynn Rootes**

Lynn Rootes the manager at the Age Concern West Malling introduced herself and gave a brief presentation on the Dementia Friendly Communities. LR explained how there are 12 pilots throughout Kent with the West Malling project being one of them. The programme engages shops, restaurants and clubs and supports these businesses to have a greater understanding of Dementia.

The aim of the initiative is to work with local communities to raise awareness of dementia and to support people with Dementia to continue to live in the communities for longer. Each shop 'Stay Safe' sign with a 'Forget me knot' (with KCC logo) sticker on the front of the business. Training is available for 'Dementia Friends' who support people with Dementia to go to the shops from the Day centre at Rotary House, Norman Road.

However, LR did emphasise that there were limited resources in rolling out this project and explained that 'Age UK' did not take over all the 'Age Concerns'. LR was keen to emphasise that Age Concern in West Malling did not receive any funding from Age UK and therefore depended on local funding.

## 7 **West Kent Health and Wellbeing Board update & TMBC Health Inequalities Action Plan update – Jane Heeley/Heidi Gould**

Due to lack of time this agenda item was moved to the next HAT meeting.

However it was pointed out that *The Tonbridge & Malling's Health Inequality Action Plan* had now been signed off by members and that commissioning intentions for next year were being revised.

## 8 **AOB**

Housing Team -HS reported that the Housing 'Mind The Gap' had now been launched

SAFE – Vicky reported that a SAFE Conference is being held on March 4<sup>th</sup> in Maidstone for young people from Malling & Maidstone with a focus on stress in the over 15 age group.

All at 14:00 at Gibson Building, Gibson Drive, Kings Hill, West Malling, Kent ME19 4LZ

**TONBRIDGE & MALLING BOROUGH COUNCIL  
COMMUNITIES AND HEALTH ADVISORY BOARD**

**4 March 2014**

**Report of the Chief Executive**

**Part 1- Public**

**Matters for Information**

**1 MINUTES OF THE LOCAL STRATEGIC PARTNERSHIP**

**To receive the minutes of the December meeting of the Partnership.**

**1.1 Minutes**

- 1.1.1 The Local Strategic Partnership met on 6<sup>th</sup> December 2013 at the TA Centre in Ditton. The minutes of the meeting are attached as Annex 1.
- 1.1.2 The key items discussed at the meeting included a presentation on Mind the Gap, the Borough's health inequalities plan, an update on issues related to welfare reforms, an item from Jonathan Shaw of the RBLI on achieving social value from public sector contracts, and a presentation on fostering and the need to promote such opportunities more widely amongst partner organisations.
- 1.1.3 The next meeting of the LSP will be held on 14<sup>th</sup> March 2014 with a focus on flooding issues.

Background papers:

contact: Mark Raymond

Nil

Julie Beilby  
Chief Executive

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**Tonbridge & Malling Local Strategic Partnership  
Minutes of Meeting – 6 December 2013**

**Present:** Cllr Nicolas Heslop – Leader, TMBC  
 Mark Raymond – TMBC  
 Cllr Brian Luker - TMBC  
 James Harman – KCC  
 Penny Nicholls – Age Concern Malling  
 Chris Hare – K College  
 Bridget Remy – K College  
 Gill Fox – TMBC  
 Capt Richard Garrett – 220 Med Sqn. TA Centre  
 Jackie Wilkinson – Russet Homes  
 Bernadette Gillow – Ightham Mote  
 Angela Newey – Tonbridge CAB  
 Teresa Vickers – KCC  
 Jonathan Shaw – Shaw Business Partnership Limited  
 Peter Robinson – T&M District Cricket Partnership  
 Harry Rayner - Kent Association of Parish Councils

**Apologies:** Julie Beilby – TMBC  
 Peter Robinson – T&M District Cricket Partnership  
 Liz Simpson – TMBC  
 Bishop Brian Castle - Bishop of Tonbridge  
 Amanda Forrest – Kent Libraries  
 John Handley – Bridge Trust  
 Father Brendan Grady – The Friars  
 Bev Cleves – Hadlow College  
 Chris Smith – KCC  
 Liz Rikaby – RBLI  
 Paul Temple – Age Concern Malling  
 John Kirby – Kent Police  
 Jane Heeley - TMBC

		<b>ACTION BY</b>
<b>1. Introductions and Apologies</b>		
Nicolas Heslop welcomed all to the meeting and thanked Capt. Richard Garrett for the use of the meeting room at Ditton TA Centre. Apologies received from those listed above.		
Richard was invited to provide an update on issues for the Army Reservists, as follows: 220 Medical Squadron is a bespoke regiment,		

<p>currently has no deployments in Afghanistan; however other shorter term deployments on-going, including exercises in Kenya and Canada. Major recruitment drive currently underway as army seeks to raise number of reservists and reduce number of regular army personnel.</p>	
<p><b>2. Declarations of Interest</b> No declarations were made.</p>	
<p><b>3. Minutes of the meeting held on 13 September 2013</b> The minutes of the previous meeting were agreed as a correct record.</p> <p>Apprenticeship issues / employability skills are still an unresolved issue with the Skills Group of the LEP. However, SE LEP is currently considering the strategy to be taken in Kent and we will wait to see what emerges. K College currently undergoing significant change and unable to continue to chase this. Decision taken to remove this from the agenda for the time being until there is greater certainty of LEP representations to Government.</p>	
<p><b>4. Presentation – Mind the Gap – Health Inequalities Report</b> Jane Heeley was unable to attend the meeting. However, Mark Raymond gave a brief run through of the powerpoint presentation that she had provided. It demonstrated a need to focus initiatives on addressing health inequalities in the Borough. Those with lower incomes were more likely to die earlier and suffer from serious illnesses than those on higher incomes. These issues were being addressed via a new plan – “Mind the Gap” – this will be circulated with the minutes and used for wider discussion at the next meeting.</p> <p>Peter Robinson – mentioned the Nike survey – heading for a generation of children that will die before their parents due to poor diet and lack of exercise.</p> <p>Richard Garrett – offered to contact Jane Heeley – health professionals from the sqn. could get involved in workplace health.</p> <p>Bernadette Gillow mentioned the outdoor facilities at many NT sites – Ightham Mote has over 500 acres of grounds. Want to encourage children to go outdoors more.</p> <p>Intergenerational projects discussed. Older people going into schools. Training – Dementia Champions – possibility of linking with youth forum.</p>	<p>GF – Circulate MTG plan for discussion at next meeting</p>



Nicolas Heslop thanked Mark for his presentation and for the useful discussion.

**5. The Impact of Universal Credit – Updates from partners**

Jackie Wilkinson mentioned that the number of tenants affected by spare room subsidy had been reduced through house exchanges. However, 513 families were still affected. 89 of these have 2 spare bedrooms. They have managed to assist some via discretionary housing payments (approx. 80). Rent arrears have increased – gone up by about £90,000. Still uncertain about when Universal Credit will come in, but when it does, substantial rent arrears are anticipated. Now finding it harder to let larger properties, this had not been anticipated.

Angela Newey reported on some statistics from the CAB regarding the types of issues of concern locally. The biggest issue at the CAB is benefits (27% of all advice given). Relationship issues have also gone up by 13%.

The problem of young people needing support was raised. An opportunity existed for K College to work with the CAB to address this as often young people are unwilling to go to the CAB direct. Chris Hare/Angela Newey to discuss further.

Jackie Wilkinson reported that demand for affordable housing of one and two bed units was increasing whilst larger 3 and 4 bed properties were increasingly difficult to let, People living longer, may want to downsize, more single people, welfare reform adds complexities. Some need 2<sup>nd</sup> room for dialysis, adaptations required for large equipment etc.

Nicolas Heslop suggested that this remains a standard item on the agenda. The Council has an Officer Study Group, Job Centre Plus are engaged. Need to get more people into employment. A benefit map is currently being plotted; overlaying work undertaken by partners, need to ensure that no-one falls through the net. A representative from the Officer Study Group could attend to present the mapped data. Information about different forms of support available for those affected by the welfare reforms was also being placed on the TMBC staff intranet – useful database to show locations of food banks etc.

<p>Jackie Wilkinson drew attention to a consultation underway on the impact of the affordable rent model. She reported that “affordable rents” were currently 70% of market rent in T&amp;M and this was likely to increase 80%. Such levels meant that rents were unaffordable for many people in need of housing.</p>	
<p><b>6. Presentation – Promoting Social Value via Procurement – Jonathan Shaw, Shaw Business Partnership Limited</b></p> <p>A presentation on Social Value via Procurement was given by Jonathan Shaw. RBLI were recently awarded Charity of the Year. Also awarded the MOD contract to look after veterans and awarded liable money from the Government fines placed on the banks. Aim to provide resources to assist employment.</p> <p>Social Value Act 2012, a Private Member Bill, requires public bodies to consider how services they commission and procure might improve the wellbeing of an area. Social Value – a way of thinking about how resources are allocated and used, not about spending more, but as part of tendering process, indicating what can be done to benefit the wider community.</p> <p>It was suggested that Henry Swan, procurement officer at KCC, could attend a future meeting of the LSP to indicate how the County Council was addressing this issue.</p> <p>Following discussion of the opportunities that could be achieved via procurement processes and some of the difficulties involved given the continuing need to demonstrate value for money balancing cost and quality issues, it was agreed that, in 2-3 meetings time, further consideration would be given to the issue to explore how LSP partners might assist with the process.</p> <p>Nicolas Heslop thanked Jonathan for his presentation.</p>	
<p><b>7. Facing the Challenge / Update on transformation and budget consultation &amp; 8. Children’s Centre Update – James Harman</b></p> <p>James Harman provided an update on Facing the Challenge – this is KCC’s organisational transformation approach which aims to achieve savings whilst continuing to focus on what is important to residents.</p> <p>An update was also provided on the Children’s Centre changes. Consultation ended on 4 October 2013 and proposals have been made. Locally it will mean the closure of Hadlow and East Peckham</p>	

<p>Children's Centres.</p> <p>Jackie Wilkinson mentioned that some of their larger houses, which are empty, could potentially be used as alternative venues for youth events.</p> <p>Nicolas Heslop thanked James for the update.</p>	
<p><b>9. Additional Agenda Item – Presentation on Fostering – Teresa Vickers , KCC</b></p> <p>Teresa Vickers provided a presentation and overview of Fostering in Kent. Highest number of children fostered in the country (852). Aim to have people through the system (background checks undertaken etc) within 8 months. No maximum age for potential foster parents.</p> <p>Richard Garrett raised the question of numbers of service personnel applying to foster? There have been some, but the number is quite low and would have expected it to be higher. Richard to help promote.</p> <p>Jackie Wilkinson suggested those seeking work could apply? Possibly also helping to fill spare rooms for those currently affected by spare room subsidy.</p> <p>It was agreed that partners would help promote the fostering service as much as they could. A link from Borough Council website to the fostering page on KCC website will be arranged and information provided in gateways etc.</p> <p>Jonathan Shaw will include Fostering as an agenda item for the next Children's Operational Group.</p> <p>Nicolas Heslop thanked Teresa Vickers for her presentation.</p>	
<p><b>10. AOB</b></p> <p>Peter Robinson mentioned the Young Leaders in Cricket project and the recent presentation held at Lords. This was planned to take place again next year and also looking to extend the programme into formal apprenticeships.</p> <p>Discussion around the Centenary of WW1 – events activities to take place from 2014, funding is available.</p>	

Penny Nicholls mentioned the Dementia Friendly Community project – currently underway in West Malling. Working group established – aim to educate all, not just those immediately affected by dementia.

Chris Hare summarised the situation at K College – procurement process underway, staff will be transferred under TUPE regulations. Bids are in and being assessed, with an announcement expected 13/12/13. The entire process has taken two years. Hopefully will be able to report back outcomes to the next meeting.

Harry Rayner reported that budget cuts from TMBC to the Parish Councils have so far been minimal which was appreciated.

It was decided that the next meeting (14 March) would be held at Tonbridge CAB – and would include an update on the Advice Service Transition Fund. The following meeting (13 June) would be held at Ightham Mote.

**TONBRIDGE & MALLING BOROUGH COUNCIL**  
**COMMUNITIES and HEALTH ADVISORY BOARD**

**4 March 2014**

**Report of the Director of Planning, Housing and Environmental Health**

**Part 1- Public**

**Matters for Information**

**1 WEST KENT HEALTH AND WELL BEING BOARD**

**Summary**

**To present the minutes of the West Kent Health and Wellbeing Board**

**1.1** The West Kent Health and Well Being Board met on the 21 January 2014 and the Minutes are submitted for information at **[Annex 1]**. In keeping with the Board's policy of reviewing the current position regarding long term conditions, the theme of this meeting was an overview of substance misuse in the West Kent Clinical Commissioning Group (CCG) area, with presentations from West Kent Adult Integrated Substance Misuse Service, KCA and Kent County Council, providing perspectives on both young persons and adult substance misuse. The review of the West Kent Councils position was deferred until the next meeting on the 18 March.

**1.2 Legal Implications**

1.2.1 None

**1.3 Financial and Value for Money Considerations**

1.3.1 None

**1.4 Risk Assessment**

1.4.1 None

Background papers:

contact: Jane Heeley

Nil

Steve Humphrey

Director of Planning, Housing and Environmental Health

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**WEST KENT CCG HEALTH AND WELLBEING BOARD**

**MINUTES OF THE MEETING HELD ON 21 JANUARY 2014**

**Present:** Dr Bob Bowes (Chairman), and Councillor Steve Beerling, Alison Broom, Councillor John Cunningham, County Councillor Roger Gough, Jane Heeley, Dr Tony Jones, Mark Lemon, Councillor Brian Luker and Malti Varshney

**In Attendance:** Gail Arnold, William Benson, Hayley Brooks, Steve Butler, Alison Finch, Jody Gagan-Cook, Katie Latchford, Chief Inspector Dave Pate, Gaby Price, Mark Sanders, Ed Shorter and Colin Thompson

1. **APOLOGIES FOR ABSENCE**

Apologies for absence were received from Dr Caroline Jessel, Mr James Lampert, Mr Reg Middleton, Dr Sanjay Singh and Dr Meriel Wynter.

2. **DECLARATION OF DISCLOSABLE PECUNIARY INTERESTS**

There were none.

3. **MINUTES OF THE PREVIOUS MEETING**

The Chairman asked that the Board's thanks to Ben Bix for his administrative support be noted.

**RESOLVED:** That the Minutes of the Meeting held on 17 December 2013 be agreed as a correct record.

4. **GENERAL OVERVIEW OF SUBSTANCE MISUSE IN WEST KENT CCG DISTRICT AREAS**

Colin Thompson introduced the report on an overview of substance misuse data in the West Kent CCG district. The Board were informed that the number of chronic diseases was reducing, with the exception of the liver. There are many causes for the increase in liver disease, including alcohol, although West Kent is below the national average.

It was noted that the number of admissions to hospital for drug related conditions had increased by 60% in West Kent and that the number of mortalities from liver disease had also increased.

Board members commented as follows:-

- Councillor Beerling queried whether the results related to the night time economy of each individual area
- Malti Varshney commented that the data provided was only health related and how did it correlate to the data sources that partners of the Board had
- CI Dave Pate urged caution over the link of the results to established licensed premises as there were many other sources where alcohol could be obtained, i.e. parent or adult association. Their data shows links to some of the larger supermarkets and there is not necessarily a link to the licensing trade and the pubs and clubs

**RESOLVED:** That the report be noted and Colin Thompson circulates the mortality figures from liver disease for each individual area to the Board.

5. OVERVIEW OF THE WEST KENT ADULT INTEGRATED SUBSTANCE MISUSE SERVICE

Ed Shorter gave a presentation outlining the services provided by the West Kent Adult Integrated Substance Misuse Service commissioned by Kent County Council.

On 1 April 2012, following a competitive tendering exercise, CRI were commissioned to deliver a range of interventions. The goal is for all participants to have a long term overall recovery.

In response to questions from members of the Board, Ed Shorter informed them:-

- Need more engagement with GPs to access more clients who have drink or drug problems and take the pressure off GPs
- CRI's success rate is above the national average
- The pay by results scheme has improved the service and they are one of 8 national pilots
- Need to find the best way to attract people into their services

The Board commented as follows:-

- GPs are concerned about the cost of residential rehabilitation
- There are pockets of unhealthy drinking and drug misuse, but if the people never get in to trouble and have no particular health issues, then it is difficult to know where they are and what can be done to help them
- There is a need to create greater awareness of the effects of long term drinking
- One of the GPs present reported that on his list, the highest cause of death in men under 55 in the last year had been alcoholism

Colin Thompson informed the Board that KCC have plans for social marketing/advertising.

**RESOLVED:** That the report be noted.



## 6. YOUNG PEOPLE'S SUBSTANCE MISUSE SERVICE

Steve Butler of KCA introduced the report of the Director of Service Improvement, Customer and Communities providing an update on the progress of KCA's model of service delivery for the young peoples' substance misuse service.

The service is for 10-18 year olds and KCA work with schools and in youth settings. There is a programme called Riskit which looks at behaviour change in young people. There was a recent campaign on kmfm about the impact of legal highs in Kent.

In response to questions, the Board were informed that

- 96% of those who entered treatment come out with results;
- KCA provide free training on how to refer young people
- Literature is available

CI Dave Pate informed the Board that the trend to smoke substances is a significant problem. 80% of what the police seize contains Class A or B drugs.

The Board commented that:-

- There is a poor understanding of the medical consequences of these smoking substances
- Licensing and trading standards required for the people selling them
- There is a difficulty around testing the substances
- Campaign needed to inform retailers what they are getting into by selling these products
- These substances have an effect on a young person's brain and have psychological effects and it is important to get this message out

**RESOLVED**: That the report be noted.

## 7. KENT ALCOHOL STRATEGY

Colin Thompson introduced the report regarding the Kent Alcohol Strategy 2014-16. He advised the Board that if anyone had any specific points that they would like to make there was still time.

**RESOLVED**: That the report be noted.

## 8. DUAL DIAGNOSIS PROVISION IN KENT

Gaby Price introduced the report of the Corporate Director, Customer & Communities regarding dual diagnosis provision in Kent.

Gaby Price informed the Board that following analysis of data, there has been an increase in dual diagnoses across West Kent. The highest rates were recorded in Tunbridge Wells (21%), Tonbridge and Malling (20%) and Sevenoaks (20%). The lowest rates were in Ashford (10%) and Dartford (11%).

Following changes to governance arrangements that took place in April 2013 in accordance with the Health and Social Care Act 2012, it has been proposed that a Kent and Medway Dual Diagnosis Steering Group be set up to have a strategic oversight to ensure that the outcomes for people with both mental health needs and substance misuse problems are being met and monitored.

The Chairman stated that he found it shocking that 70% of prisoners have a dual diagnosis.

A Member of the Board asked how the homeless are helped and their underlying problems dealt with. It was suggested that a co-ordinated approach was needed by CRI and KCA and other partners, an analysis of clients that use homeless shelters to find out how they can be helped and that the Community Safety Partnership now has a co-ordinated role in bringing these different services together.

**RESOLVED:** That the report be noted and the set-up of the Kent and Medway Dual Diagnosis Steering Group be endorsed.

9. COMMUNITY SAFETY (BARRIERS AND PERSPECTIVES)

The Chairman proposed that this report be postponed and brought back with recommendations to the next meeting of the Board.

Jody Gagan-Cook of the Kent Police raised that a health representative is needed on the Community Safety Partnerships ("CSP") and the Chairman agreed to write to his colleagues regarding this. Gail Arnold mentioned that another option would be for Locality Heads to attend the CSPs.

**RESOLVED:** That the report be deferred to the next meeting and that the Chairman write to his colleagues regarding attendance at CSP meetings.

10. CURRENT BARRIERS AND WAYS FORWARD

Colin Thompson introduced his report on potential ways forward regarding the substance misuse agenda.

The Board commented as follows:-

- A review of Licensing policy is being undertaken at Maidstone this year and they are part of a Licensing Partnership with Sevenoaks and Tunbridge Wells, so there could be scope to look at Cumulative Impact Policy ("CIP").

- The need to consider how we improve the health of communities with mental illness, drug and alcohol abuse, tobacco and crime with evidenced based information.
- Information sharing is key to identifying problem areas
- A description of what each CSP expects from the CCG would be useful
- It was suggested that a task and finish group be set up to integrate all the information received at this meeting.

**RESOLVED:** That the report be noted.

11. BETTER CARE FUND

Mark Lemon informed the Board that each CCG has been preparing their contribution to the Better Care Fund and that a workshop was held the previous week. The Kent CCG Board has moved its meeting from 29 January to 12 February to consider the plans which need to be agreed and submitted on 14 February 2014.

The fund for 2015/16 is £100 million divided between the CCGs.

**RESOLVED:** That the update be noted.

12. CCG COMMISSIONING PLANS

Mark Lemon informed the Board that there is a scheme in Liverpool where people admitted with alcohol problems are taken better care of. They are waiting to see the outcomes from the Task and Finish Group.

**RESOLVED:** That the update be noted.

13. ANY OTHER BUSINESS

There was no other business to be discussed.

14. DATE OF NEXT MEETING

That date of the next meeting would be 18 February 2014 at Maidstone Borough Council.

15. DURATION OF MEETING

5.30 p.m. to 7.43 p.m.

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