

TOWN COUNCIL MEETING

REPORT 80/17

9 OCTOBER 2017

The purpose of this paper is to share with Members the concerns about the progress of the My Life a Full Life programme that have arisen through the experience of Town & Parish Councils' engagement with it.

No. DETAILS

BACKGROUND

- a) Members will recall that this time last year the My Life a Full Life (MLAFL) programme agreed to fund one Town & Parish Council in each of its three Localities to lead the development of Town & Parish Health & Wellbeing Forums in each area.
- b) The three lead Councils are Ventnor for the South Locality, Freshwater for the West & Central Locality and Ryde for the North & East Locality.
- c) Following Ventnor Town Council's long engagement with the programme, the MLAFL funding of £5,000 became effective from 1 November 2017 to be used to commit five hours a week from the Town Council's Community Development Officer and the administration and travel costs for Forum meetings.

2) PROGRESS TO DATE

- a) As the first to start, more progress has been made with the establishment of effective Forums in the South Locality than in the other two.
- b) All 13 of the South Locality Town & Parish Councils have appointed representatives to the South Locality Parishes Health and Wellbeing Forum.
- c) The Forum has met at different locations around the Locality on 8 December, 19 January, 16 February, 30 March, 15 June, 25 July and 5 September.
- d) Arrangements are made by Tony McCarthy and the Mayor has attended all of them with him.
- e) The Forums have heard from Lucy Abel on Locality working, Dr Mararita-Kitova John as Chair of the GP Consortium, Heather Rowell on Local Area Co-ordinators, the Isle of Wight Council's Assistant Director for Service Delivery Mike Corrigan and Steve Parker on Clinical Services Redesign.

3) LEADS MEETINGS

- a) The three Lead Town & Parish Councils meet quarterly with Claire Robertson, the MLAFL Communications Consultant to discuss progress and raise matters of interest or concern arising from the Forum meetings.
- b) Tony McCarthy and I attend these sessions, the latest of which was at St Mary's on 27 September.
- c) The matters raised this time were substantial and Claire's circulated summary of them, forwarded to the Programme Director Nicola Longson, was so accurate that it is attached here to this Report as the most effective means for facilitating Members' discussion of them.

4) NEXT STEPS

The Town Council has been asked to advise MLAFL about its willingness to continue its commitment to the further development of the Forums.

5) RECOMMENDATION

Members are recommended to:

- i) consider the issues raised through the Forum meetings and comment on them; and
- ii) advise MLAFL of the Town Council's commitment to the further development of the Forums, with continuing financial support, for a further 12 months.



BRIEFING NOTE

MY LIFE A FULL LIFE ENGAGEMENT

9 OCTOBER 2017

Email from Claire Robertson, Communications Consultant to the My Life a Full Life Programme to the Programme Director following the Locality Leads Meeting of 27 September.

I had one of my quarterly meetings today with the town and parish council locality leads, attended by David Bartlett, Tony McCarthy (both Ventnor) Michael Mills and Gill Kennett (Freshwater). Vikki Wyatt from the North East Locality had last minute childcare issues so couldn't join us.

A number of issues emerged during our discussions and these now seem to be causing them considerable concern and are effectively stopping them from truly having the dialogue between the community and the healthcare system as intended. These are not new issues and I have raised these a number of times, most recently with Mike Corrigan when I met him on Tuesday but I think they are coming to a head and really need resolving.

The key concerns expressed were:

- 1) The lack of agreed purpose, structure, focus (and often simply people attending) for the Locality Management Groups and also how this reports into the Local Care Board structure. This is key as it is meant to be the mechanism by which they facilitate their dialogue about local health and care matters.
- 2) The growing disconnect between the voluntary and statutory sector where once they were a key part of discussions, they are now seemingly left out of the structures and planning
- 3) The lack of dialogue around eg new community roles and where they are a)needed and b) whether they duplicate roles and c) the level of qualifications required example given the new Living Well community roles. The sense was that Town and Parish councils could have advised on where this could be best targeted eg in the West Wight it might have been better for these individuals to work with the district nursing teams where capacity and support is most needed and we are not making the most of their 'on the ground' knowledge of their communities.
- 4) Mixed messages around whether eg the locality hubs are designed to be public facing or not (different versions of this from different people)
- 5) Lack of feedback from events where they have contributed
- 6) Widening gap between the statutory sector organisations and what's happening on the ground.
- 7) An overstatement of claims now appearing in documents eg under the ILS plan on a page the reference to the Go Live of South Locality service when a) it isn't a service (and I know Mike is keen to get away from those terms) and b) their view is that it is simply a building that a few people are now working out of.
- 8) Rumours that the GPs were no longer going to support locality working
- 9) That this was feeling like a case of 'emperor's new clothes'

In relation to point 1, I did explain, following my really helpful conversation with Mike, that there was some key meetings coming up shortly with the Trust where this was hoped to be resolved and that terms of reference would be issued shortly. However, there were natural frustrations that we should still be discussing this when Gill herself drafted the TOR some time ago. West & Central is by far the worst with barely a functioning meeting (Michael was the only none SWTT member at the last meeting) and even when those that do meet, there is disillusionment from those involved about what they are doing which isn't helpful.

In relation to point 2, I explained about the stakeholder reference group but I think until this is better defined for people that doesn't answer the immediate perception that they have been sidelined.

In relation to point 3, I explained that these were funded as part of the BCF and work for Age UK IW – but I gather the perception is that Age UKIW are not working cohesively with the rest of the team in some areas. Again this type of concern could be raised through the LMGs if they were working effectively and a solution sought.

In relation to point 4, this clearly needs some agreed communication which can be used consistently by all – I have discussed this with Mike and hope to draft something following his meeting next week where he hopes to have more clarity.

In relation to point 5, I have suggested to Mike that we urgently issue the notes of the meeting and TOR to those who attended the workshop. Mike is working on some gaps in the TOR and will come back to me as soon as he can on that, so we can move that forward. I have also spoken to Hannah this morning about the West & Central workshop which was well received and am going to support her to ensure the feedback to that group post event happens.

In relation to point 6 – perhaps something to discuss at the LCB/Operational Delivery Group – it may only be a perception as opposed to a reality but reassurance is needed that that is not the case.

In relation to point 7 – I think at the next review of the plans and charters, perhaps there should be more challenge around those achievements/objectives to ensure they are not overstated as the risk is that it serves to undermine credibility. This also applies to some of the claims around achievements eg where we state that we are bucking the national trends around UEC – when there was an understanding that we had always done that (to the extent that the DoH apparently asked us what our secret was and the conclusion drawn was that Island people are more stoic!). We probably need to be more explicit to avoid the perception that we are overclaiming.

In relation to point 8, this is news to me and I gather their understanding is that the GP Federation has expressed that view. I thought perhaps it was not that and related instead to the Case Management of those at Highest Risk where I know not all GP practices have signed up, however good progress has been made with many others.

In relation to point 9 – clearly this is not a perception we would want to cultivate and I will consider that when I'm looking at the wider comms plan but again a sign of how they are feeling currently.

I'm raising these with you because we have a set of really willing and able people who still believe in the potential of making this work but who are feeling increasingly frustrated. Progress has been made on their part and eg South Wight are now getting requests for more than one person to attend their forums as a rep for their parishes and they have been able to engage some of the larger parishes who were simply not interested in getting involved before. West Wight have established some good dialogue across the area which is no mean feat given the variables across the patch and some of the negative individuals involved in that area. It just seems such a shame to have this resource available to us which we are not making the most of and of course, with South Wight in particular, their role is technically due to end of November 1st so they really need some answers about how this is going to move forward.

I am conscious that Mike has the meetings he mentioned coming up which may help to move things forward and speaking to Hannah this morning, the ILS workshops that happened yesterday appear to have been useful and some of these issues were discussed so my sense is that this isn't insurmountable however I do think it would be useful if you were able to meet with the group and I know you had wanted to do that at some point anyway. I'm really happy to help in whatever way would be useful but am desperately keen to try and resolve this.