

HEALTH AND WELLBEING BOARD

13 September 2018

Present:-

Devon County Council

Councillors A Leadbetter (Chair), R Croad, J McInnes, B Parsons, P Sanders and H Ackland

Dr Virginia Pearson, Chief Officer for Communities, Public Health, Environment and Prosperity

Jennie Stephens, Chief Officer for Adult Care and Health

Dr Paul Johnson, South Devon and Torbay CCG

Jeremy Mann, Environmental Health Officers Group

Diana Crump, Joint Engagement Forum

David Rogers, Healthwatch

Jim Colwell, Chief Superintendent, Devon and Cornwall Police

Suzanne Tracey, Chief Executive, RD&E

Ann Wagner, Torbay and South Devon NHS Trust

Apologies:-

Jo Olsson, Chief Officer for Childrens Services

Dr Tim Burke, NEW Devon CCG

Melanie Walker, CEO Devon Partnership NHS Trust (Dr Brian Darnley and Phillip Mantay, attended as representatives)

* 69

Minutes

RESOLVED that the minutes of the meeting held on 14 June 2018 be signed as a correct record subject to an amendment to the final bullet point of Minute *62 (Homelessness and Rough Sleeping) to read:

“North Devon District Council having a target to half the number of *street* homeless in the area”

* 70

Items Requiring Urgent Attention

There were no items requiring urgent attention.

* 71

Loneliness in Devon

The Board considered a Report from the Chief Officer for Communities, Public Health, Environment and Prosperity on a campaign around loneliness, focusing particularly on high-risk populations and the development of local projects and interventions to reduce loneliness in Devon.

The Report highlighted the considerable impact of loneliness on individuals' health and wellbeing, with a greater risk of ill-health and a lower quality of life. Recent local and national studies on loneliness reported on certain characteristics associated with feeling lonely, including being female, being single or widowed, being in poor health, living in rented accommodation, having a weak sense of belonging to a neighbourhood; and with 5% of adults who reported feeling lonely, with those aged 16 to 24 feeling lonely more often when compared to older age groups.

The Board also received a presentation from Wellbeing Exeter on easing loneliness and social isolation, which looked at the root causes of isolation, practical action, obstacles to

engagement, and the overall aim of bringing people together to prevent loneliness. The presentation highlighted several case studies to demonstrate the diverse effects of loneliness and focussed on collective solutions to build interdependence.

The Board also received a further presentation by Health Watch Devon which had carried out an independent inquiry into loneliness in Devon and found that the three top factors that people felt caused loneliness were life events and trauma, personal circumstance and their psychological responses. The inquiry revealed the importance of social group membership in preventing loneliness and the top three interventions included spaces where people could be with others, one off community events and opportunities, and social group drop-ins such as coffee mornings. The presentation also recommended an alliance between local organisations on the issue of loneliness to drive a local response to the issue.

The Board discussed and asked questions on the following;

- the need for greater communication and awareness on the effects of loneliness, which was currently a hidden topic, specifically highlighting the impact on mental and physical health;
- raising awareness of how loneliness impacted on policy and organisational plans;
- that loneliness and isolation had a significant impact on young people, especially young carers, as well as the older population;
- the importance of community involvement in preventing loneliness;
- the use of technology in helping to prevent loneliness, especially given the geographical nature of the County;
- understanding where the high-risk areas were in the County (risk profiling), such as rural market towns, and to focus a campaign to meet the needs of the local population;
- the use and accessibility of public transport to help connect people in rural areas; and,
- the impact of loneliness on anxiety and depression.

It was **MOVED** by Councillor Leadbetter, **SECONDED** by Councillor McInnes, and

RESOLVED

(a) that a campaign around loneliness be led and supported by the Board with the communications teams;

(b) that consideration be given to the relationship between indicators of loneliness and health risk profiles; and

(c) that a six-month update report on actions to combat loneliness be brought to a future meeting of the Board.

* 72

Devon Joint Health and Wellbeing Strategy: Priorities and Outcomes Monitoring

The Board considered a report from the Chief Officer for Communities, Public Health, Environment and Prosperity on the performance for the Board, which monitored the priorities identified in the Joint Health and Wellbeing Strategy for Devon 2016-2019.

The Board received an 'updates only' version of the Health and Wellbeing Outcomes Report. The report was themed around the five Joint Health and Wellbeing Strategy 2016-19 priorities and included breakdowns by South West benchmarking, local authority district and local authority comparator group, clinical commissioning group, and locality comparison, trend and future trajectories and inequalities characteristics. The indicators below had all been updated since the last report to the Board;

- Adult Smoking Prevalence, 2017 – The latest figures from the Annual Population Survey (APS) indicated that 13.5% of the Adult population in Devon smoked. Rates remained lower than the South West, local authority comparator group and England; however, rates had increased slightly in Devon since 2014. Differences between local authority districts in Devon were not statistically significant, although rates in West Devon (4.9%) were significantly below the South West and England rates.
- Feel Supported to Manage Own Condition. In Devon during 2017-18, 59.6% of people with a long-term condition in the GP survey, felt they had enough support to manage their own condition. This was significantly higher than South West (57.3%), local authority comparator group (55.5%) and England (55.3%) rates. Rates had decreased from 2016-17 and were highest in the South Hams (62.8%).
- Fuel Poverty, 2016 – Just under one in ten households in Devon were in fuel poverty (10.9%). Levels of fuel poverty had increased between 2011 and 2014 in Devon, but fell or remained stable in many other areas of the country. Since then, in Devon, rates had fallen from 2014. Despite this, rates continued to remain above the South West and local authority comparator group rates.
- Estimated Dementia Diagnosis Rate (65+), 2018 – In April 2018, it was estimated that 7,577 people in Devon aged 65 and over were on a GP register for dementia. Recent data showed that Devon (59.4%) was lower than the South West (61.8%), local authority comparator group (63.5%) and significantly lower than England (67.5%) rates. Within the county, the highest rates were seen in Exeter (69.3%) and lowest in the South Hams (44.7%). Devon did not meet the dementia diagnosis target set at 67% by NHS England.

The Report proposed changes to the way in which the outcomes report was reported in the future, to make it more accessible to all. The Board received a presentation outlining how this would be achieved, which included a new streamlined technical report and an update on interventions relating to these indicators. The Board welcomed the new presentation format and wished to receive similar style presentations in the future.

The outcomes report was also available on the Devon Health and Wellbeing website www.devonhealthandwellbeing.org.uk/jsna/health-and-wellbeing-outcomes-report

RESOLVED that the outcomes report be noted and accepted.

* 73

Draft Joint Commissioning Strategy for Adults with a Learning Disability in Devon

The Board considered the Report of the Head of Adult Commissioning and Health at Devon County Council and the Senior Commissioning Manager of the Clinical Commissioning Group on the draft joint strategy '*Living Well with a Learning Disability in Devon 2018-2022*'.

The new joint strategy built on the progress made since the publication of the 2014-2017 joint strategy and set out a fresh approach to improve the lives of adults with learning disabilities across Devon, Torbay and Plymouth; to support them to be as independent as possible and lead meaningful lives within their communities. The draft strategy encompassed the geographical area of Devon and covered the work undertaken by the two CCGs and three Local Authority areas.

The Report highlighted there were approximately 20,586 adults with a learning disability across Devon, with 3,530 of these individuals receiving adult social care services. Health and Social Care support across Devon, Plymouth and Torbay accounted for £130m of spend. The draft strategy aimed to support Local Authorities and the NHS to commission quality support that promoted the independence of people with learning disabilities, within the context of significant financial challenges.

Some of the main aims of the draft strategy outlined in the Report included more appropriate housing that met the range of needs of people with learning disabilities, more support for

people with learning disabilities to obtain employment, and improved access to healthcare for people with a learning disability.

Members and officers' discussion points included:

- a disability employment campaign "Ready When You Are", led by Devon County Council, which aimed to make employers disability confident and increase the number of disabled adults in work to help increase their independence;
- changing the cultural perception of disability to get more disabled adults into employment;
- working with employers around myth-busters and the benefits of employing disabled adults;
- the aim to engage with district authorities to implement the strategy and help monitor progress through performance management and indicators;
- the importance of strong links with the Learning Disability Partnership Board;
- ensuring that the voice of people with learning disability was articulated in the document; and
- making the strategy accessible to all individuals.

An easy read version of the strategy is attached to these minutes.

It was **MOVED** by Councillor Leadbetter, **SECONDED** by Dr Pearson, and

RESOLVED

- (a) that the 'Living Well with a Learning Disability in Devon 2018-2022' Joint Strategy report be noted and endorsed;
- (b) that the Chair of the Learning Disability Partnership Board be invited to a future meeting to provide an update to the Board;
- (c) that the 'Living Well with a Learning Disability in Devon 2018-2022' Joint Strategy be taken to a committee of the Devon District Councils to further promote and engage with local districts on this matter and also circulated to local district Chief Housing Officers.

* 74

Sustainability and Transformation Plan and Integrated Care Systems Update

The Board received a Report from the Head of Adult Commissioning and Health at Devon County Council and the Director of Strategy at NEW Devon CCG and South Devon and Torbay CCG on the progress of the Sustainability and Transformation Partnership (STP) and the Integrated Care Systems (ICS) and the Boards future involvement in the design and development of health and care integration.

The Report highlighted the two-year STP report which had been recently published and provided the opportunity to reflect on the progress across Devon, Plymouth and Torbay; an update on recent national developments in relation to Integrated Care Systems and how the Board could help develop and design future work in relation to the emerging ICS in Devon.

It was **MOVED** by Dr Johnson, **SECONDED** by Councillor Leadbetter, and

RESOLVED

- (a) that progress on the Sustainability and Transformation Partnership (STP) and Integrated Care System (ICS) Development be noted by the Board; and
- (b) that a development session be arranged for Devon, Plymouth and Torbay's Health and Wellbeing Boards by the Clinical Commissioning Groups to discuss their future involvement and role in Devon's Integrated Care System.

* **75** **Task Group Report on the Development of the Health and Wellbeing Board**

The Board received the Task Group Report on the development of the Devon Health and Wellbeing Board following discussions about the role and priorities of the Board at the June 2018 Stakeholders Conference. It was highlighted that the Board should focus on health and not just healthcare, with a tiered approach to geography and democratic accountability at all levels. Other suggestions included closer working across all three Health and Wellbeing Boards in the Devon area, a specific role for the Board in joint commissioning of health and care, a stronger emphasis on the wider determinants of health, a focused role for the Board in holding the wider system to account and the development of links with stakeholders and local areas.

This led to the following objectives for Board development:

1. Establishing alignment with other partnerships focused on the wider determinants of health;
2. Establish a wider Health and Wellbeing Network to support, inform and disseminate the work of the Health and Wellbeing Board;
3. Utilise a tiered approach to geography with democratic accountability at all levels and a two-way information flow to inform local priority setting;
4. Strengthen and formalise the role of the Board in providing assurance that the commissioning plans of local organisations reflect boards priorities;
5. Establish the Board's role in the strategic planning of health, care and wellbeing; and
6. Increase collaboration between Devon, Plymouth and Torbay Health and Wellbeing Boards.

Members discussion points included:

- the need to engage and increase communication and understanding amongst the public regarding the Sustainability and Transformation Partnership (STP) and the important role of the Board in delivering this;
- the ability of the Board to be able to hold the STP to account, through the Better Care Fund;
- the strategic importance of working with partners such as the Police, with a further action point to invite a representative from Devon and Somerset Fire and Rescue Service and the South West Ambulance Service Trust to join as a Member of the Board; and
- the importance of engaging with voluntary and third sector organisations.

It was **MOVED** by Councillor Leadbetter, **SECONDED** by D Rogers, and

RESOLVED

- (a) that the objectives for Board development and the action plan be approved;
- (b) that Board Members agreed to provide their support for the implementation of the action plan; and,
- (c) that Members of the Board be nominated to help support the delivery of the action plan:
 - (i) that Mr D Rogers be nominated to champion loneliness;
 - (ii) that Dr P Johnson be nominated to champion dementia.

* **76** **Homelessness Report**

The Board received a Report on responses to the Homelessness Reduction Act across Devon District and City Councils, whether any related funding had been received and details of any local targets around the reduction of homelessness.

The Board had a key role in ensuring a collective system focus on population health and ensuring that the priorities as set out in the Joint Strategic Needs Assessment and the Joint Health and Wellbeing Strategy were being delivered across Devon. As part of this role, the Board requested information to seek assurance that activity to implement the Homelessness Reduction Act was taking place across all areas of Devon.

The Report set out a summary of responses received which included collaboration between services within local authorities and between authorities themselves, a reconfiguration and in some cases an expansion of teams in order to deliver the new duties and the national drive to support those at risk of homelessness, on-going engagement with the voluntary and community sector, staff training on the legislation and how authorities planned their response and New Burdens Funding received with some authorities accessing other national funding streams from Government departments. Centrally-mandated targets had not been set, however where specific grants had been received to reduce homelessness, separate to funding the implementation of the new legislation, targets had then been set.

It was **MOVED** by Councillor Leadbetter, **SECONDED** by Dr Pearson, and

RESOLVED that the report be noted and accepted and an update Report be provided to the Board in 12 months.

* 77

Dementia Update Report

The Board considered the Report of the Head of Service for Adult Commissioning and Health and the Deputy Chief Operating Officer of the NEW Devon CCG and South Devon and Torbay CCG which aimed to raise awareness of dementia across Devon, to provide appropriate support post-diagnosis and to reduce the potential stigma of diagnosis.

The Report outlined the current and predicted demand for dementia support services and the progress of the STP mental health dementia workstream. Around 2% of the Devon population (14,200 people) were estimated to have dementia, with the figure expected to rise to around 25,000 over the next 10 years, affecting nearly 3% of the population and around 6.5% of the over 65's.

The following services were commissioned to help support people living with dementia and their families:

- **Dementia Advisor Service:** the Council had a contract with the Alzheimer's Society. A Dementia Adviser or Dementia Support Worker enabled people with dementia and their carers to navigate the system and find the right information and support at the right time. It was aimed to expand this provision following national guidance and the learning from a gap analysis.
- **Memory Cafes:** the Council had grant-funded the Devon Memory Café Consortium. The Consortium supported people living with dementia and their carers through the Memory Cafe movement - ensuring they had access to peer support, information, advice and meaningful activities.
- **Care home education and support:** a small pilot was funded last year with a view to expanding provision this year.
- Other services such as the Carers contract, and grants to the voluntary sector, also support to those with dementia and their families.

Members discussion points included:

- that Alzheimer's training had been provided to the senior leadership team with the Council becoming a dementia-friendly organisation; and,
- a dementia bus would be visiting Devon County Council in October which offered the opportunity for learning and providing information about the services available to people with dementia.

It was **MOVED** by Councillor Leadbetter, **SECONDED** by Dr Pearson, and

RESOLVED that the Report be noted and an update to be provided by the Dementia Champion at a future meeting.

* **78** **References from Committees**

Nil

* **79** **Scrutiny Work Programme**

The Board received a copy of Council's Scrutiny Committee work programme in order that it could review the items being considered and avoid any potential duplications.

* **80** **Forward Plan**

The Board considered the contents of the Forward Plan, as outlined below (which included the additional items agreed at the meeting).

<u>Date</u>	<u>Matter for Consideration</u>
Thursday 13 December 2018 @ 2.15pm	<p><u>Performance / Themed Items</u> Health & Wellbeing Strategy Priorities and Outcomes Monitoring Theme Based Item (TBC)</p> <p><u>Business / Matters for Decision</u> Better Care Fund Acuity Audit Presentation Learning Disability Partnership Board Chair to provide an update on Strategy HWB Task Group Report – Update on Progress CCG Updates</p> <p><u>Other Matters</u> Scrutiny Work Programme / References, Board Forward Plan, Briefing Papers, Updates & Matters for Information</p>
Thursday 11 April 2019 @2.15pm	<p><u>Performance / Themed Items</u> Health & Wellbeing Strategy Priorities and Outcomes Monitoring Theme Based Item (TBC)</p> <p><u>Business / Matters for Decision</u> Better Care Fund Loneliness Campaign Update Report (to include risk profiling and heat maps) STP Update and feedback of involvement of Devon HWBs Dementia Update report CCG Updates</p> <p><u>Other Matters</u> Scrutiny Work Programme / References, Board Forward Plan, Briefing Papers, Updates & Matters for Information</p>
Thursday 11 July 2019 @2.15pm	<p><u>Performance / Themed Items</u> Health & Wellbeing Strategy Priorities and Outcomes Monitoring Theme Based Item (TBC)</p> <p><u>Business / Matters for Decision</u> Better Care Fund CCG Updates</p>

		<p><u>Other Matters</u> Scrutiny Work Programme / References, Board Forward Plan, Briefing Papers, Updates & Matters for Information</p>
<p>Thursday 10 October 2019 @2.15pm</p>		<p><u>Performance / Themed Items</u> Health & Wellbeing Strategy Priorities and Outcomes Monitoring Theme Based Item (TBC)</p> <p><u>Business / Matters for Decision</u> Better Care Fund Homelessness Report -12 month update CCG Updates</p> <p><u>Other Matters</u> Scrutiny Work Programme / References, Board Forward Plan, Briefing Papers, Updates & Matters for Information</p>
<p>Thursday 16 January 2020 @2.15pm</p>		<p><u>Performance / Themed Items</u> Health & Wellbeing Strategy Priorities and Outcomes Monitoring Theme Based Item (TBC)</p> <p><u>Business / Matters for Decision</u> Better Care Fund - frequency of reporting TBC CCG Updates</p> <p><u>Other Matters</u> Scrutiny Work Programme / References, Board Forward Plan, Briefing Papers, Updates & Matters for Information</p>
<p>Thursday 9 April 2020 @2.15pm</p>		<p><u>Performance / Themed Items</u> Health & Wellbeing Strategy Priorities and Outcomes Monitoring Theme Based Item (TBC)</p> <p><u>Business / Matters for Decision</u> Better Care Fund - frequency of reporting TBC CCG Updates</p> <p><u>Other Matters</u> Scrutiny Work Programme / References, Board Forward Plan, Briefing Papers, Updates & Matters for Information</p>
<p>Annual Reporting</p>		<p>Delivering Integrated Care Exeter (ICE) Project – Annual Update (March) Children’s Safeguarding annual report (September / November) Adults Safeguarding annual report (September / December) Joint Commissioning Strategies – Actions Plans (Annual Report – December) JSNA / Strategy Refresh – (June)</p>
<p>Other Issues</p>		<p>Equality & protected characteristics outcomes framework</p>

RESOLVED that the Forward Plan be approved, including the items approved at the meeting.

* 81 **Briefing Papers, Updates & Matters for Information**

Members of the Board received regular email bulletins directing them to items of interest, including research reports, policy documents, details of national / regional meetings, events, consultations, campaigns and other correspondence. Details were available at; <http://www.devonhealthandwellbeing.org.uk/>

No items of correspondence had been received since the last meeting.

* 82 **Dates of Future Meetings**

RESOLVED that future meetings and conferences of the Board will be held on:

Meetings

Thursday 13 December 2018 @ 2.15pm

Thursday 11 April 2019 @ 2.15pm

Thursday 11 July 2019 @ 2.15pm

Thursday 10 October 2019 @ 2.15pm

Thursday 16 January 2020 @ 2.15pm

Thursday 9 April 2020 @ 2.15pm

Annual Conference

Thursday 11 July 2019 @ 9.30am

***DENOTES DELEGATED MATTER WITH POWER TO ACT**

The Meeting started at 2.15 pm and finished at 4.20 pm

NOTES:

1. Minutes should be read in association with any Reports or documents referred to therein, for a complete record.

2. The Minutes of the Board are published on the County Council's website at

<http://democracy.devon.gov.uk/ieListMeetings.aspx?CId=166&Year=0>

3. A recording of the webcast of this meeting will also be available to view for up to six months from the date of the meeting, at <http://www.devoncc.public-i.tv/core/portal/home>



Easing Loneliness and Social Isolation

Nicola Frost

Devon Community Foundation

Understanding, enabling and challenge

Miriam is a woman living with a range of social and emotional issues, along with some financial pressures. Home and personal hygiene are an issue, contributing to her social isolation. She is well-known to her GP practice and was referred to Wellbeing Exeter. She and her Connector discussed the aspects of her life she wanted to change, and developed an action plan. Miriam said she'd like to join a knitting group. Her connector identified one based at a local charity shop, and accompanied her for the first time. Miriam now goes every week on her own, and feels comfortable and accepted there.

She also explored some more ambitious plans:

"...during that conversation I said I wanted to do GCSE maths as I find maths really calming...the [Community connector] said 'that's something we can do, its not beyond reality to do that, why don't you try?' I walked around for a few days asking myself 'why not?'...I'm now coming up to GCSE exams now. Also, because I was at a class, I didn't 'have' to socialise...so it was getting me out but not 'out' if you know what I mean. It was a really good step in the right direction for me."

She was also introduced to Transitions to secure a longer term mentor.

Miriam explained she feels less anxious and able to go out more. She has got a puppy, and bought a trike so she can exercise it properly, so is becoming more physically active. She has also decided to reach out to an elderly neighbour who lives alone.

- The power of holistic conversations to understand the root causes of loneliness, and obstacles to engagement; gentle challenge and a focus on people's strengths and passions shifts the focus from a narrative of lack or need.

Practical Action

- Steve is a man in his 50s who lives alone. He has mental health problems – is socio-phobic, with chronic anxiety and depression. He is very lonely, and wants to be more active, but lacks energy and motivation.
- Conversations with his connector revealed that Steve plays guitar, and would like to meet with someone to play together. His house is poorly built and very cold, with inadequate storage heaters, such that Steve says he often goes to bed in the afternoon as he's so cold.
- A is helping him liaise with the council to get central heating installed, but also arranges to be present in the house when tradesmen visit, as Steve is anxious about having strangers around.
- Once the heating issues are resolved, A plans to link Steve with someone else he knows who plays guitar.
- Loneliness can result from practical circumstances, which need to be addressed first, *alongside* an understanding of the emotional side of things.

Collective Solutions: building interdependence

Philip lived in a supported housing complex in Exwick. He was referred to WE as he was lonely, and wanted to find ways to get out and about – he was especially keen to do some gardening at his housing development.

Philip's connector put him in touch with the Exwick community builder. She listened to all the residents talk about their different interests and ambitions. Over time, she developed a broader picture of residents wanting to get together more, and make more of their communal space. Community Builder mediation between residents, managers, and local organisations has resulted in:

- Page 4
- A series of intergenerational creative workshops organised jointly by residents and Exwick Youth Council and hosted at the complex. One of these, a drawing class, is being led by Philip.
 - Agreements with the complex managers about the use of communal garden space by residents.
 - Further collaborations with a local church and volunteers from The Princes Trust to build and plant raised beds.

- **It took time:** eight months from the original WE referral to the workshops.
- **A stone in the pond:** what began as one person wanting to do some gardening, has resulted in something much more extensive. This process is unpredictable (and may move some distance from an individual's initial stated needs or aims).
- **Person-centred, but also collective:** while the original connection was with an individual, the community builder approached it as a starting point for more general engagement. This was not a simple case of signposting an individual to a gardening club. It is the crucial difference between a standard social prescribing model, and WE's integrated approach.
- **Place is where it's at:** a firmly place-based approach to community engagement, built on ultra-local knowledge and local relationships.

Outcomes can look different too

- *“It [first time community connector helped] gave me some sort of hope, information and insight into what sort of things are going on in the community...and [helped me] realise there are people out there who will listen and help.”*
- *“[Community connector] put me in contact with someone at transitions team and I went to meetings [community connector] recommended to me. I used to walk around the village and not know anybody and feel quite isolated but now I can say hello to people in the street which is nice.”*
- *“I’m still on my tablets for my depression but I’m not on beta blockers anymore for the anxiety.”*

DCF and thriving communities

- We fund many small community groups and organisations who run activities with the primary aim of bringing people together.
- Much of this work is done at an **ultra-local level**. This reduces the barriers to participation, especially in rural areas. It also increases the chances that social connections formed through the activity (for example, a senior's lunch club in a village hall) will extend beyond that context. This is particularly important in rural communities that have lost local points of social contact, such as shops, post offices and pubs.
- Many of the small and micro-organisations doing this work are formed largely or solely of **volunteers**. They are not professionals, paid to befriend people, but simply other people, and this can give relationships a more authentic and genuinely reciprocal flavour. Far less distinction between 'helper' and 'helped'.
- We recognise that lonely people have **plenty to contribute** to their community, and often relish an opportunity to be 'useful' to others (for example, through a 'knit and natter' group that makes clothing for premature babies). Participants might well develop into being volunteers themselves, if given the opportunity.



Help tackle loneliness in Devon

David Rogers

13 September 2018

Background

Devon has a less favourable performance in social connectedness when compared to “like” authorities; 13th out of 16 and has been decreasing since 2013.



Methodology

- **5,500** surveys placed with 220 different organisations, along with feedback boxes
- Participated in **37** community events
- **45** people, representing **42** voluntary groups attended Clarity CIC focus groups
- Over **50** people attended our Devon Campaign to End Loneliness Conference
- **25** people representing various church groups and organisations attended our Loneliness Conference, organised with Diocese of Exeter
- **22** people entered our photo competition
- **2,402** loneliness web pages visited



The three top factors people felt caused loneliness in themselves or others

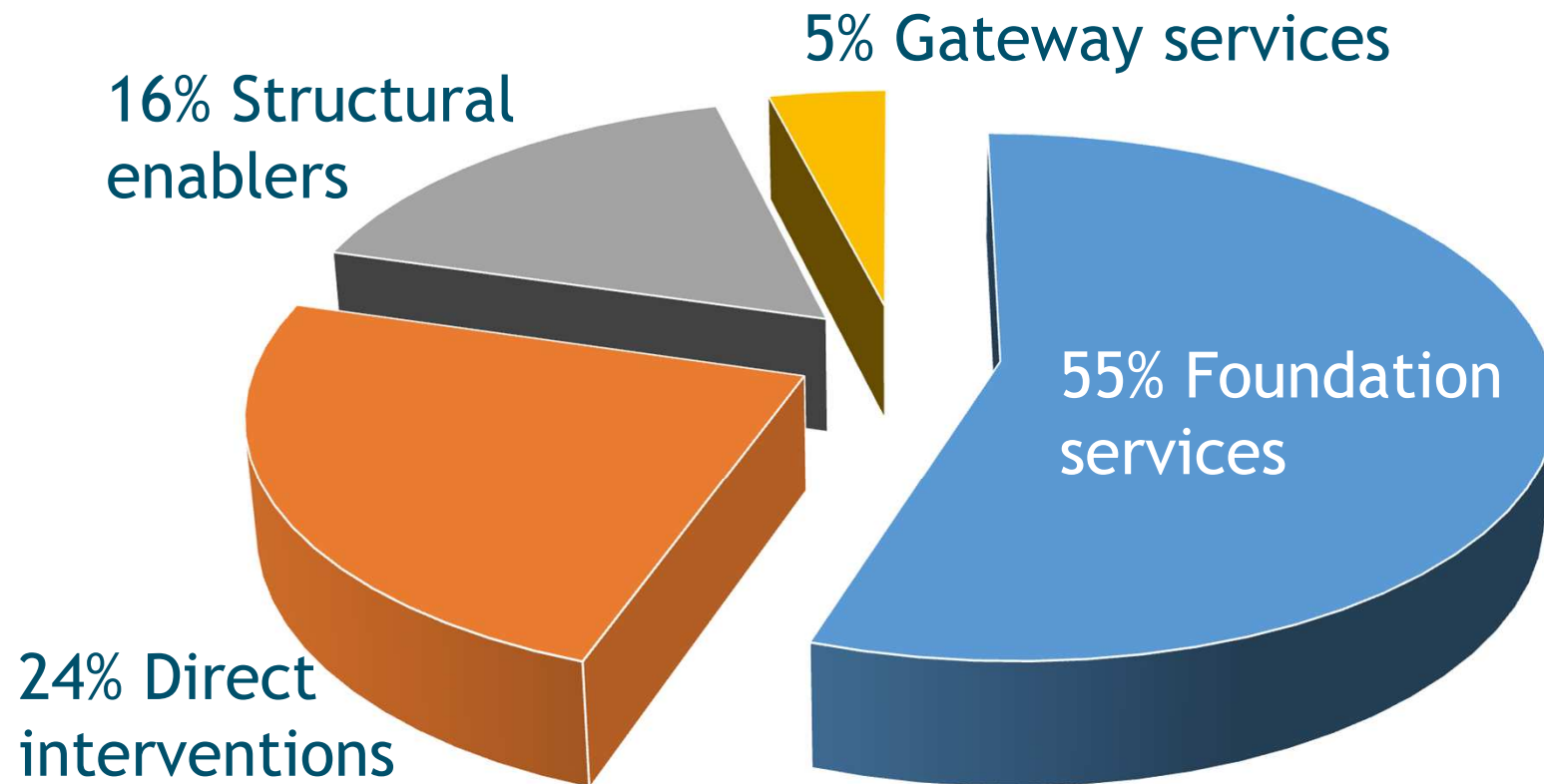
- Life events and trauma
- Personal circumstance
- Psychological responses

I am an only child. I have withdrawn from society since 2004 when I got hearing loss at age 38. I cannot cope with busy buzzy areas. Do not cope with crowds...withdrawn to communicating online.



477 people completed our loneliness survey

Key areas respondents felt would help people feel less lonely



Comments from VCSs to Commissioners



The top 3 interventions that help people feel less lonely were:



- Spaces where people can be with others
- One off community events and opportunities
- Social group drop ins e.g. coffee mornings



Recommendations

Educate

Design

Create

Collaborate

Sustain





Carry out



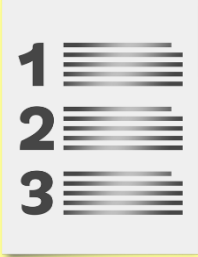







0800 520 0640







www.healthwatchdevon.co.uk






 <p>A spiral-bound notebook with the word 'Report' in blue. The cover features three small icons: a person in a red shirt, a globe, and a red fire truck.</p>	<p>A report to the Devon Health and Wellbeing Board</p>
 <p>A calendar page for September with the number '13' in large black font on a white background, and a red header with the word 'September'.</p>	<p>The report will be talked about at the Health and Wellbeing Board meeting on 13th September 2018.</p>
 <p>A stack of papers with a paperclip, labeled 'Plan'. The cover shows two people looking at a document.</p>	<p>The report is about the Draft Joint Strategy (plan) for Adults with a Learning Disability in Devon 2018 – 2022.</p>
 <p>A stack of papers with a paperclip, labeled 'Plan'. The cover shows two people looking at a document.</p>	<p>This Strategy (plan) is for people with learning disabilities who live in Devon, including Plymouth and Torbay.</p>
	<p>The report is from the Head of Adult Commissioning and Health in Devon County Council and Senior Commissioning Manager in the Clinical Commissioning Group.</p>

DRAFT






	<p>What we are asking the Health & Wellbeing Board to do</p>
	<p>We are asking the Health & Wellbeing Board to share with us what they think about the draft Strategy (plan).</p>
	<p>We want the Board to know about how we have listened to people about the plan.</p>
	<p>We want the Board to know that the report is to be signed off in October. When the report is signed off it means that it has been agreed.</p>
	<p>Introduction Information about the draft Strategy (plan)</p>
	<p>This strategy (plan) is about how we will work to improve the lives of people with a learning disability and their carers in Devon, Plymouth</p>




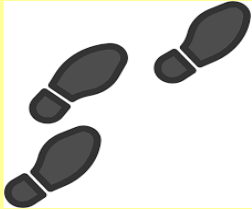


Minute Item 73

	and Torbay.
	We want to promote the independence of people with learning disabilities across Devon.
	The plan includes information about how we will make this happen.
	The draft strategy (plan) has used information about people's needs and what people have told us is important to them.
	Background Information
	People with a learning disability have difficulty with everyday activities - for example, household tasks, socialising or managing money - which affects someone for their whole life.
	People with learning disabilities have poorer health.


 <p>Workplace</p>	<p>Not many people with a learning disability have a paid job.</p>
	<p>Many young people with learning disabilities need health and care support when they become adults.</p>
	<p>Young people tell us that moving from children's to adult services can be hard for them.</p>
	<p>The strategy (plan) has information about what we will do together across Devon, Plymouth and Torbay.</p>
	<p>We will work together to make sure we have the right housing that meets the range of needs of people with learning disabilities.</p>

Minute Item 73

 A group of diverse people working together in a workplace setting, framed in a house-like shape. The word "Workplace" is written below the image.	<p>We will support more people with a learning disability in Devon, Plymouth and Torbay to have a job.</p>
 A woman in a wheelchair is shown next to a clock and a sign that says "I need ..." and "easy read".	<p>We will work together to improve access to healthcare for people with learning disabilities.</p>
 Two men are shown holding signs. The first man holds a sign with a red 'X', and the second man holds a sign with a green checkmark.	<p>The strategy (plan) also includes what we want to happen in our local areas to improve how people with learning disabilities live their lives.</p>
 A group of people are shown in a community setting, with a purple banner that says "Community Life" at the bottom.	<p>We want to increase the opportunities in communities for people to live as independently as possible.</p>
 A young woman is shown pointing towards the camera.	<p>We want to support young people to develop independent life skills, so that they can lead fulfilling lives as adults.</p>

	<p>We want people with learning disabilities to be safe in their communities.</p>
	<p>To make sure that we always listen to people and their families/carers about their care and what matters to them.</p>
	<p>We will support carers to be able to care throughout the different stages of their lives.</p>
	<p>Next Steps</p>
	<p>There will be another meeting in September with Devon, Torbay and Plymouth to talk about the strategy (plan).</p>
	<p>We would like to have the strategy (plan) approved by the end of October.</p>

Minute Item 73

	<p>When the strategy has been approved it will be published (be available to everyone) and work will start to make the plan happen.</p>

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A plan to help people Live Well with a Learning Disability in Devon





The Living Well with a Learning Disability in Devon Strategy 2018 - 22 is a plan that talks about how we will work to improve the lives and wellbeing of adults who have a learning disability.



The Plan is for adults who have a learning disability who are living in Devon, including Plymouth and Torbay.



We want to improve outcomes for people who have a learning disability and their carers.



We want people to have care and support that is personalised and co-ordinated. It should be delivered in the right place at the right time.



Our Vision – What we want for people with learning disabilities



We are ambitious for adults with a learning disability in Devon.

We want people with learning disabilities to have the same opportunities as everyone else and to lead meaningful lives in their communities.



Carers and families of people with learning disabilities have the right to the same hopes and choices as other families.



Outcomes – what we want for people

What we want people to be able to say



I am an active citizen in my community.



I have opportunities to meet friends, to join social groups and to benefit from community and leisure facilities.



I can learn independent life skills to help me use Technology Enable Care and Support (TECS) to support my independence.



I have education and training opportunities to support me to learn the skills needed to have a job.



I have information and advice I can understand and can access support when I need it that is close to home and helps me to achieve my goals.



I live in my own home, where possible, that meets my needs.



I am supported to live an independent life that is right for me throughout my early life and as an adult.



Where I have complex needs, specialist support is in place when I need it.



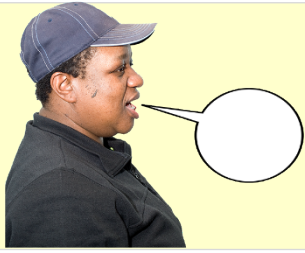
My family and/or carers are able to care for me.



I can access healthcare and my physical and mental health are better as a result.



I feel safe and can take positive risks because I am supported in the right way.



What people have told us.



People with disabilities and their families/carers have told us they want to be as independent as possible and be supported by their family and friends to live life in their community.



People need to be supported to be as independent as possible.



Important things we will be working on and work we will be doing.



Working with communities
What people have told us and what we will do.



What people have told us:

I want to be accepted for who I am and to be able to get involved in my community.

I want to have friendships and relationships like everyone else.



We will work with local communities to bring together people with skills and knowledge to support people with learning disabilities to have the same opportunities as everyone else.



We will create more opportunities for people to build real friendships.



Devon County Council will develop an accessible website, it will include information about what is happening in local communities.



Devon's Learning Disability Partnership Board will carry on working to improve accessibility and promote people's independence in their communities.



We will work in partnership to increase the number of Changing Place toilets in towns across Devon.



We will work with universal services, like GP surgeries, hospitals, leisure services, businesses and employment support services to make sure they are easy to use for people with a learning disability.



We will think about how Technology Enabled Care and support can support people to be more independent and support people to live as independently as possible in their communities.



Housing

What people have told us and what we will do



What people have told us;

I want my own home.

I want to live close to my friends and family.



Many people with learning disabilities live in their own homes.

Some people live alone or with family or friends.

We will carry on supporting people to do this.



Some people with learning disabilities need extra support and need a different type of housing to meet their health and care needs.



Support

We want people to be supported in different types of housing settings to develop independent living skills.



Some people live in care homes. We do not want people living in care homes if they don't need to.



If someone living in a care home is able to live more independently, we will help them to look at different housing options that support their independence.



Supported living and Extra Care Housing can help people become more independent even if they require full time support to meet their needs.



We will work with providers to develop supported living options and Extra Care Housing.



We will write a housing plan that covers all of Devon.



The plan will include information about how we will provide good quality housing for people with learning disabilities who have challenging behaviour.



People's needs can change over time.

We will work with providers to develop the right housing that supports people through change.



We will look at the housing needs of young people who will need health and social care support when they become adults.



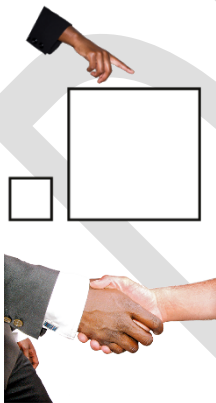
Employment
What people have told us and what we will do.



What people have told us;

I want to have a paid job so that I can support myself and do the thing I want.

I find it hard to get a job.



Across all of Devon we will increase the number of people with learning disabilities who have jobs by the year 2020.

We will work with partners to make this happen.



There will be more supported employment opportunities.



Health

What people have told us and what we will do.



Understand

What people have told us:

I want to be understood.



I don't know how to access health and care when I need it.



We will increase the number of people with a learning disability on the GP learning disability register who have an Annual Health Check and Health Action Plan.



Promote and help make happen MENCAP's "Don't Miss Out" and "Treat me Right" campaigns. We will work with schools to ensure young people aged 14 – 17 are included.



We will work to make sure that people with learning disabilities are given the right amount of medicine.

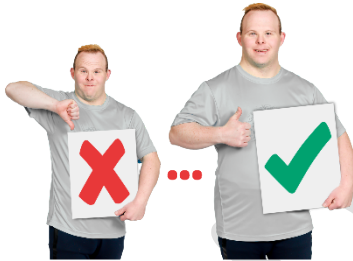
STOMP (Stop the Over medication of People with a learning disability).



Support people with learning disabilities as they grow older to access services that meet their needs including dementia needs.



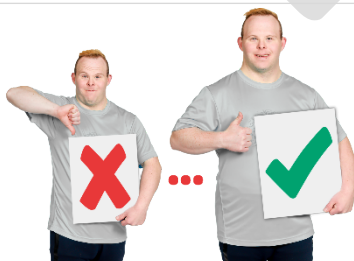
Make sure that people with learning disabilities and their families/carers have the right support at the end of their life.



Support and learn from the LeDeR programme. The LeDeR programme aims to make better the quality of health and social care for people with learning disabilities, and to reduce early deaths.



Make sure that all people with a learning disability with 2 or more long-term health condition have a local named Health Care Coordinator.



Improve the way different care providers communicate with each other.



Provide learning disability awareness training to staff and include people with learning disabilities in the training.



Preparing young people for life as an adult
What people have told us and what we will do



What people have told us:

I don't want to have to fight for everything.

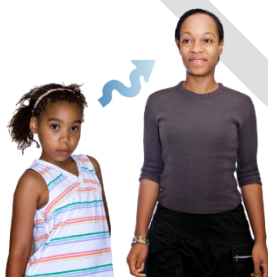
I want to be listened to.



Understand

I want someone to understand my situation.

I want my young person/adult to be able to do things other young there are doing.



We will work better together to support young people moving from children's services to adult services.



Support

We will make sure people are supported to be as independent as possible. Including travel training, cooking and have a job if they want.



For young people with learning disabilities and their families/carers to be able to access information and advice about what is happening in their local communities.



Increase the number of young people who use Technology Enabled Care and Support to help them be more independent.



Provide more employment and training opportunities for young people, including within our own organisations.



Use the information needed to plan for those young people with learning disabilities who will need health and care support as adults.



We will help people to be ready for the next real transition in their lives, this will include learning from new ways of working.



Support for people with complex needs
What people have told us and what we will do



What people have told us:

I want to be close to family and friends and to go home.



There is a lack of training, skills and support for families and carers managing complex needs and behaviours.

There is a lack of confidence in behaviour management and shared risk taking by practitioners and families.



Reduce the number of people with learning disabilities who go into inpatient settings outside of Devon.



We will work with local housing providers to provide housing and care options.



We will develop behaviour support services to support people so they don't have to go into hospital.



We will work to make sure that there are beds available in the Additional Support Unit (ASU) so that beds are available when needed urgently.



We will improve planning of transitions for young people and develop community forensic services.



We will deliver our workforce development plan which includes ways to help people with a learning disability and their family.

Workforce is about staff who work in a service.



Keeping People Safe What people have told us and what we will do



What people have told us;

I do not always feel safe in Devon.

I am worried about the care that my family member is receiving.



Make sure that services we provide or commission (buy) have fully trained staff.



We will commission (buy) services that provide kind and compassionate care that helps to keep people safe.



Run focus groups across Devon to understand the reasons why people don't feel safe.



Make sure local authorities and other agencies are dealing with safeguarding concerns quickly.



Make sure people know what safeguarding is and how to get the help that they need when they need it.



Carers are able to Care What people have told us and what we will do



What people have told us:

We want to be recognised and involved with our family members.



Involve

We want to understand what services are available for our family member and to be respected and involved by them. Including preparing for adulthood, living independently and preparing for later life.



We want to be put in touch with support which enables us as families and carers to support our health and wellbeing and to have a life of our own.



The role of caring is really important.

We will involve families and carers in the health and care support for people with learning disabilities.



Support

We will also support families and carers to plan for when they have gone and to include the planning into the support for their child.



How we will know how we are getting on



Workplace

There will be more people with a learning disability in employment.



Assessment

Less people asking for assessments for education for people over 19 years old.



Plan

More people with a learning disability who are happy that they have a clear plan for the future.



Fewer people in hospital and residential and nursing care.



Fewer people placed outside of Devon.



Levels of support will go down and there will be less emergency placements.



GP's will know more about young people's health needs as they become adults.



More people with a learning disability have had a Annual Health Check and have a Health Action Plan.



Health & Social care services work better and people with a learning disability are healthier.



Carers will feel better supported.

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Checking how we are getting on



Improvements in care and support in this strategy (plan) will be monitored (checked) by each local authority (DCC) and Clinical Commissioning Group (CCG's).



There will be regular reports to the Health & Wellbeing Boards in each council area.



The Learning Disability Partnership Boards will also have an important role in the monitoring of any local action plans.



Involve

Making sure that people who have a learning disability and their families and/or carers are involved.



It is really important that we work closely with people with learning disabilities and their families and carers.



We want to understand what is important to people.



Devon, Plymouth and Torbay all have Learning Disability Partnership Boards



There are a number of events during the year to check how we are getting on and to hear from carers and people using services about what needs to get better.

If you want to get involved, please contact us.

Ways to make contact? I can then list them.



Easy Read Summary (About the plan)

A plan to help people Live Well with a Learning Disability in Devon, Plymouth and Torbay





A plan to help people Live Well with a Learning Disability in Devon, Plymouth and Torbay 2018 – 2022.

Easy read summary.



This strategy (plan) is about how we will work to improve the lives of people with a learning disability and their carers in Devon, Plymouth and Torbay.



This Strategy (plan) is for people with learning disabilities who live in Devon, including Plymouth and Torbay.



People have told us they want to be as independent as possible.



We want people with learning disabilities to have the same opportunities as everyone else and to lead meaningful lives in their community.



Important things we will be working on.



Community Life

Working to make sure people are able to use and enjoy their communities.



Housing

Working to make sure people can live in their own homes where possible and supporting people to be as independent as possible.



Employment – having a paid job

We will create more employment opportunities for people with a learning disability and help them to learn the skills to have a job.



Health inequalities

Working to make sure people with learning disabilities can access the healthcare they need.



Preparing young people for life as an adult

Making sure people are supported to be as independent as possible. This includes travel training, cooking and the skills to have a job.



Support for people with complex needs

We will reduce the number of people with learning disabilities who go into inpatient settings outside of Devon.

We will work with local housing providers to provide housing and care options.



Keeping people safe

We will commission (buy) services that provide kind and compassionate care that helps to keep people safe.



Make sure carers are able to care

We will involve families and carers in the health and care support for people with learning disabilities and help them to plan for when they are not around.



Checking how we are getting on



Each local authority and Clinical Commissioning Group in Devon will monitor how things are and report to the Health and Wellbeing Boards.



The Learning Disability Partnership Boards will also have an important role in the monitoring of any local action plans, making sure people who have a learning disability and their families and/or carers and involved.

