Local Authority Health and Wellbeing Workshops

Fareham, Gosport and Havant

June - July 2009

Evaluation Report for NHS Hampshire

Background

The Health and Wellbeing workshops resulted from work undertaken the previous year, funded by South Central SHA Public Health Development, to examine in detail the potential public health workforce in each of three local authorities in SE Hampshire, Fareham, Gosport and Havant. The report\(^1\) outlined the opportunities for strengthening and developing the public health capacity around health and public health priorities in the authorities, and specifically recommended that seminars on public health should be held with ‘key influencers’, to increase their knowledge and understanding of health and wellbeing, and support the development of the organisations towards an efficient and effective public health role in partnerships. It was suggested that in the first instance, seminars were offered to all elected members, and could also include senior officers. After a period of negotiation it was agreed that workshops would be held separately in each LA and involve a mix of members and officers.

Consultants were commissioned in March 09 to develop and run the programme on behalf of the PCT.

Aims and Objectives

The workshops aimed to operate on two levels to maximise their developmental potential; firstly to inform and broaden the understanding of local “key health influencers” and secondly, to deepen and develop the knowledge and skill set of managers and practitioner level officers who can impact on health within their day to day core roles.

Specific objectives and learning outcomes were to:

- gain knowledge and understanding of public health concepts, the determinants of health, and health inequalities
- identify health and wellbeing priorities based on local needs assessments
- understand the health and wellbeing roles of the LA, the PCT and other partners
- improve communication for joint strategic planning, commissioning and service development
- appreciate the availability of evidence of effectiveness for health and wellbeing

\(^1\) Walters R & Chapman-Andrews J (June, 2008) Public Health Development in three South-East Hampshire local authorities. A report to NHS Education South Central.
Programme

In order to accommodate the needs of councillors attending the workshops, it was planned to keep the sessions to three hours maximum and to run them at convenient times and in the local authority premises to maximise access. However in Fareham the timing was reduced to schedule the meeting before an evening council meeting and the timing was reduced to two hours (Appendix A).

Aiming to achieve the outcomes above in a short session like these meant that the programme had to be organised tightly to include the information required and to ensure adequate time for discussion to engage participants in the material from a local perspective, and to achieve the outcomes of improved communication and understanding of each others’ roles.

Each session began with introductions, and contextualising the meeting with reference to the earlier public health development work. The first talk aimed to introduce the social and environmental determinants of health and health inequalities, using the Dahlgren & Whitehead ‘policy rainbow’ model\(^2\) as a framework, highlighting that all agencies make a significant contribution to health and wellbeing through action on the determinants and the need for good connections between health and local authorities to deliver this. In order to make the information relevant and current, both to those with a good grounding in health and wellbeing issues and others, material from the recently produced review of developments in tackling inequalities in England over the last ten years was used\(^3\). This illustrated social gradients in health and trends in their distribution over ten years across a range of health determinants. Importantly for these authorities, where health inequalities are less pronounced than in other parts of the country, it was important to ensure that this communicated both that the issues were still nationally very important, and that there were local pockets of inequality that required attention.

This was followed by a presentation on selected issues from the Joint Strategic Needs Assessment demonstrating relative measures across the local authorities in Hampshire to put the local situation into comparative context. A short presentation was also made on the need for evidence based actions to improve health and wellbeing and the tailor made support for local authorities available from NICE\(^4\).

For the two longer workshops, discussions were then held as to whether these reflected the key health and wellbeing issues for the area. Groups were organised to include a mix of local authority members and officers and PCT staff. Copies of the 2008 Health Profile\(^5\) for each local authority were also provided as background to the discussions. Following general discussion a list of priorities was collated for use in further exercises. For the shorter workshop a number of priorities had already been highlighted and these were used without further discussion, although participants were invited to add to them as necessary.


\(^3\) Department of Health (May 2009) *Tackling health inequalities 10 years on: a review of developments in tackling health inequalities in England over the last ten years*.

\(^4\) National Institute for Health and Clinical Excellence (Dec 2008) *How to put NICE guidance into practice to improve the health and wellbeing of communities*.

In the group work participants were asked to consider the list of priorities for health and wellbeing in the area and identify what policies, strategies and actions were already in place to address them, in the local authority, the PCT or the county council. Flip charts were placed around the room to create a ‘graffiti wall’ on which the participants noted their responses. The facilitators challenged groups, if there were obvious gaps in provision, to think more widely about who might be contributing to that issue, or who should be. The findings were reviewed briefly in general discussion drawing out any key lessons or themes that came out of the discussions. Individual workshop health and wellbeing priorities and actions are presented at Appendix B.

Finally a quick five minute evaluation of the session was conducted by asking all participants to fill out four post-it notes with thoughts on ‘what worked well’, ‘what could have been done better’, ‘what key message will you take away’ and ‘what further public health development needs/sessions do I or my staff have’, which they stuck on a flip chart as they left. Individual workshop evaluation reports are presented at Appendix C.

Outcomes

Overall 16 councillors, 37 council officers and 13 PCT staff attended the workshops. (Total 63 of which Havant: 8,11,6; Gosport: 3,12,4; Fareham: 5,14,3).

The most useful aspects of the workshops were stated as:

- increased information and awareness-raising about health inequalities generally
- increased understanding about specific local health issues and what is being done to address them
- improved understanding about what different partners do, within and across organisations
- making new contacts and recognising where expertise lies
- stimulating new ways of looking at issues and understanding others’ viewpoints
- mixing groups of members, officers and staff from other agencies

Ways of improving the workshops included:

- involving representation from Hampshire County Council and other partners
- having more councillors involved
- having more senior PCT representation
- having more time and more structure for discussion
- better preparation by dissemination of local data prior to the meeting
- practical improvements for space and room layout to facilitate access to the ‘graffiti wall’

Key messages or actions participants said they would take away included:

- better understanding of local health and wellbeing issues especially about pockets of deprivation and health inequality
- improved knowledge about who does what to contribute to the ‘bigger picture’
• improved contacts and recognition of need to work better together, across departments within councils and with PCT
• recognition of the need to improve partnership working
• better awareness of the health implications of local policy
• knowledge of good resources to follow-up to support work

The final question of the evaluation clearly confused some representatives who cited more specific health issues that needed targeting, rather than public health development needs. Those who did respond to this question were also divided between those wanting more development time for themselves or others, and those wanting more opportunities to take the work forward practically in partnership:

• repeat sessions for more councillors
• further discussion on other issues
• sharing evidence based practice
• joint follow up sessions to take health and wellbeing strategies and action plans forward
• more specific detail leading to more action planning for solutions
• more on group working / working styles / decision making involving all partners

Discussion

The workshops not only built upon the earlier public health organisational development work, but also the ongoing partnership working between the PCT and the three local authorities through the SE Public Health Liaison Board. However the impression gained was that although a number of the participants worked jointly at that level and were familiar to each other, for many in the councils, both members and staff, there was less knowledge and understanding of each other and of the current programme of joint work, both within the council and with the PCT and other partners.

The level at which these workshops were pitched, at an introductory information provision level, but delivered in a businesslike way, allowing participants to engage with the information and put it into local context, seemed to be appropriate. For those attending the workshops with more knowledge of health and wellbeing issues, the discussions gave them an opportunity to explain what actions were being taken, and to share information and understanding more widely. The impression was that having a greater depth of understanding of both the issues and the determinants of health in the council would help them to raise health and wellbeing up the agenda. In Gosport in particular, the workshop gave the senior officers an opportunity to announce that Health and Wellbeing was now a corporate priority for the authority.

Although there was a lot of data presented, the presenters communicated the key messages clearly and in simple technical language where necessary, avoiding jargon where possible. This however failed in the evaluation questions, and a learning point is to continue to be vigilant about jargon such as ‘public health development’ which was not interpreted as workforce development, but as improvement of the health of the population. This could have been communicated more clearly by asking simply about further training needs of staff and councillors in this area.
The active engagement of councillors, officers and PCT staff was a key to the success of the workshops. The opportunity to move quickly from information provision to discussion, and to share information across teams, led to lively debate. Whilst facilitating links between the PCT and the local authorities was a key objective of the sessions, it was perhaps surprising that discussion between members and officers and between council teams, on these cross-cutting health and wellbeing topics was seen to be so valuable from all perspectives. Many of the take home messages in the evaluation were that individuals intended to maintain these contacts in the future, and try to make time for further discussion on solutions.

Future work with these councils can build on this introduction in a number of ways. There was clearly a demand for more of the same to give other councillors a chance to hear the key messages and engage with colleagues. Mostly however people seemed to want to continue with more practically orientated sessions where they could build on the plans and work better together. It would seem that there may be value in the PCT supporting further action orientated groups to take forward the work of the SE Public Health Liaison Board in each authority, which will draw on the knowledge and skills of staff across council departments. Reviewing the current joint strategies on the key priorities, including HCC involvement, and developing longer term action plans with identified leads would be a valuable way forward.

The original plans for the workshops had envisaged systematic public health training programmes for selected groups of staff, in line with competencies in the Public Health Skills and Career Framework. There is still a need for this as side discussions with members of health improvement teams in the councils showed that there is some interest from these groups in developing their public health skills, and in at least once instance these have now been connected to the Public Health Development lead in the PCT. It would be helpful if these leads (supported through SC SHA) could ensure that council staff are receiving information about current Public Health development opportunities available in the area. Engagement with other Public Health Practitioners seeking local authority experience possibly through placements could also be facilitated through better links to existing key staff in each authority.

However these three awareness raising workshops with a broader audience including councillors has placed health improvement more clearly on the agenda, and should provide a good basis on which to build further public health skills and partnerships.

Viv Speller & Pat Christmas
Independent Public Health Consultants

This work and report was commissioned by NHS Hampshire with funding from NESC following the recommendations made in the Report to NHS Education South Central. Public Health Development in three South-East Hampshire local authorities.

For further information about the Local Authority Development Programme, go to: http://www.nesc.nhs.uk/about_nesc/departments/public_health_development/public_health_development/local_authorities.aspx
APPENDIX A

Programme

Health & Wellbeing Workshop
(3 hours)

Following the review of the public health workforce in Borough Council it was recommended that Hampshire PCT support further development work with key elected members and officers who have a leadership role for the organisation and potential influence on the health and wellbeing of the local community.

The workshop aims to:

- increase knowledge and understanding of public health concepts, the determinants of health, and health inequalities
- identify local health and wellbeing priorities based on local needs assessments
- understand the health and wellbeing roles of the LA, the PCT and other partners
- improve communications for joint strategic planning, commissioning and service development
- increase knowledge about effective actions to improve health and wellbeing

The programme will include:

<table>
<thead>
<tr>
<th>Time</th>
<th>Activity</th>
<th>Presenter</th>
</tr>
</thead>
<tbody>
<tr>
<td>2.00</td>
<td>Welcome and Introductions</td>
<td></td>
</tr>
<tr>
<td>2.15</td>
<td>What is public health? Social and environmental determinants of health and health inequalities</td>
<td>Viv Speller</td>
</tr>
<tr>
<td>2.35</td>
<td>What are the major health and wellbeing issues in Gosport? Looking at the Joint Strategic Needs Assessment and public health data.</td>
<td>Pat Christmas</td>
</tr>
<tr>
<td>3.00</td>
<td>Do these reflect the key health and wellbeing issues in your ward / local area? What policies and structures are in place to address these priorities?</td>
<td>Group work</td>
</tr>
<tr>
<td>3.30</td>
<td>Coffee/Tea</td>
<td></td>
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<tr>
<td>3.45</td>
<td>What examples of evidence do we have of what works to address these issues?</td>
<td>Viv Speller</td>
</tr>
<tr>
<td>4.00</td>
<td>What current services are addressing these health and wellbeing priorities, and what else can be done?</td>
<td>Group work</td>
</tr>
<tr>
<td>4.45</td>
<td>Interactive evaluation, feedback</td>
<td>All</td>
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<tr>
<td>5.00</td>
<td>Close</td>
<td></td>
</tr>
</tbody>
</table>
Health & Wellbeing Workshop
(2 hours)

Following the review of the public health workforce in Borough Council it was recommended that Hampshire PCT support further development work with key elected members and officers who have a leadership role for the organisation and potential influence on the health and wellbeing of the local community. The workshop aims to:

- increase knowledge and understanding of public health concepts, the determinants of health, and health inequalities
- identify local health and wellbeing priorities based on local needs assessments
- understand the health and wellbeing roles of the LA, the PCT and other partners
- improve communications for joint strategic planning, commissioning and service development
- increase knowledge about effective actions to improve health and wellbeing

<table>
<thead>
<tr>
<th>Time</th>
<th>Activity</th>
<th>Presenter</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>3.30</td>
<td>Welcome and Introductions</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3.40</td>
<td>What is public health? Social and environmental determinants of health and health inequalities</td>
<td>Viv Speller</td>
<td></td>
</tr>
<tr>
<td>3.55</td>
<td>What are the major health and wellbeing issues in Fareham? Looking at the Joint Strategic Needs Assessment and public health data.</td>
<td>Pat Christmas</td>
<td>PCT representative</td>
</tr>
<tr>
<td>4.15</td>
<td>Do these reflect the key health and wellbeing issues in your ward / local area? What policies, structures and services are in place to address these priorities? What more can be done?</td>
<td>Group work</td>
<td></td>
</tr>
<tr>
<td>5.15</td>
<td>Feedback and discussion</td>
<td>All</td>
<td></td>
</tr>
<tr>
<td>5.30</td>
<td>Evaluation and close</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
APPENDIX B

Health and Wellbeing Priorities and Actions from each Local Authority workshop.

Havant Borough Council  15th June
Fareham Borough Council  16th June
Gosport Borough Council  1st July
**Havant Borough Council**  
**Health and Wellbeing Workshop 15th June**

**Workshop Discussion Notes**

1. **What are the Health and Wellbeing priorities for Havant?**

<table>
<thead>
<tr>
<th><strong>Children / Poverty</strong></th>
<th><strong>Older People</strong></th>
<th><strong>Hard to Reach</strong></th>
<th><strong>Healthy Eating &amp; Physical Activity</strong></th>
<th><strong>Access to Health Services</strong></th>
<th><strong>Education</strong></th>
<th><strong>Housing</strong></th>
<th><strong>Overall Strategy for Health and Wellbeing</strong></th>
<th><strong>Focussed, co-ordinated delivery</strong></th>
<th><strong>Better Knowledge / Scrutiny for HWB</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Child poverty</td>
<td>Planning for increase in older population</td>
<td>Understanding how to motivate the hard to reach</td>
<td>Leisure</td>
<td>Screening, early diagnosis and access</td>
<td>Educational attainment</td>
<td>Improve standards</td>
<td></td>
<td>Local promotion of services</td>
<td>Better analysis, evidence of what works</td>
</tr>
<tr>
<td>All children – breaking patterns</td>
<td></td>
<td>Information and signposting services</td>
<td></td>
<td>Dentistry</td>
<td>Raising skills</td>
<td>Housing allocation policy of Portsmouth City Council</td>
<td></td>
<td>Co-ordination of delivery eg children’s services</td>
<td>Local research</td>
</tr>
<tr>
<td>Nursery provision</td>
<td></td>
<td></td>
<td></td>
<td></td>
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<td></td>
<td></td>
<td></td>
<td>Better use of Scrutiny committee</td>
</tr>
</tbody>
</table>

**Other identified partners:**

- Faith, community and voluntary groups
- Social landlords, Housing Associations
- Police
- Portsmouth City Council
<table>
<thead>
<tr>
<th>Health &amp; Well Being Priority</th>
<th>2. Does Havant Borough Council have a role to address these priorities, and what should it be doing?</th>
<th>3. Does NHS Hampshire have a role to address these priorities, and what should it be doing?</th>
<th>4. Does Hampshire County Council have a role to address these priorities, and what should it be doing?</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Children / Poverty</strong></td>
<td>Through the Scrutiny Ctte</td>
<td>School Health Team, nurses, dentistry</td>
<td>Children’s Services – LEAD Social Services – LEAD</td>
</tr>
<tr>
<td><strong>Hard to Reach</strong></td>
<td>Know the local communities and what motivates them - LEAD</td>
<td>Health Visitors for access to hard to reach at risk families</td>
<td>All delivery agencies, Local Strategic Partnership Joint scrutiny role with HBC</td>
</tr>
<tr>
<td><strong>Older People</strong></td>
<td>With the voluntary Through the Scrutiny Ctte Promote older people’s wellbeing</td>
<td>Local strategic plan, jointly PCT, HCC, voluntary organisations Older people’s wellbeing aftercare - LEAD</td>
<td>Older People’s Wellbeing team All delivery agencies with HCC as the LEAD body</td>
</tr>
<tr>
<td><strong>Healthy Eating &amp; Physical Activity</strong></td>
<td>PA - Parks, play areas, leisure centres, and street sports LEAD for healthy eating</td>
<td></td>
<td>School travel plans Healthy eating in school</td>
</tr>
<tr>
<td><strong>Access to Health Services</strong></td>
<td>Access to community and voluntary groups LEAD for Scrutiny</td>
<td>LEAD on availability Access to dentistry</td>
<td>Children’s Centres include access to health</td>
</tr>
<tr>
<td><strong>Housing</strong></td>
<td>Planning - strategic LEAD Supply, private sector and registered social landlords (with PCC and Govt re numbers)</td>
<td></td>
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</tr>
<tr>
<td><strong>Education</strong></td>
<td>Information and education provision across the community</td>
<td>General re health and lifestyle</td>
<td>Formal education through schools Informal education through other providers</td>
</tr>
<tr>
<td><strong>Overall Strategy for Health and Wellbeing</strong></td>
<td>Making it happen, develop a strategy and action plan with PCT and HCC</td>
<td>Making it happen in partnership with HCC, HBC – PCT LEAD</td>
<td></td>
</tr>
<tr>
<td><strong>Focused, co-ordinated delivery</strong></td>
<td>HBC / HCC joint leads</td>
<td></td>
<td>Local Area Agreement - LEAD</td>
</tr>
<tr>
<td><strong>Better Knowledge / Scrutiny for HWB</strong></td>
<td>HBC / HCC joint leads</td>
<td>Better knowledge - LEAD</td>
<td></td>
</tr>
</tbody>
</table>
1. **What are the Health and Wellbeing priorities for Gosport?**

<table>
<thead>
<tr>
<th>Improving aspirations</th>
<th>Travel for work outside Gosport</th>
</tr>
</thead>
<tbody>
<tr>
<td>Income</td>
<td>Young people – achievement, nothing to do</td>
</tr>
<tr>
<td>Drug misuse / Binge drinking</td>
<td>Strengthening family units</td>
</tr>
<tr>
<td>Antisocial behaviour</td>
<td>Community engagement – raising aspirations,</td>
</tr>
<tr>
<td>Affordable housing / homeless</td>
<td>Mental health</td>
</tr>
<tr>
<td>Self esteem</td>
<td>Awareness of characteristics of Gosport as a naval town</td>
</tr>
<tr>
<td>Health &amp; Well Being Priority</td>
<td>2. Does Gosport Borough Council have a role to address these priorities, and what should it be doing?</td>
</tr>
<tr>
<td>------------------------------</td>
<td>-------------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>Improving aspirations</td>
<td>Grants to organisations&lt;br&gt;Walking to health – play schemes&lt;br&gt;Free swimming – plat schemes&lt;br&gt;</td>
</tr>
<tr>
<td>Community engagement – raising aspirations, Self esteem</td>
<td>Roadshows&lt;br&gt;Homecheck&lt;br&gt;Exercise referral scheme</td>
</tr>
<tr>
<td>Awareness of characteristics of Gosport as a naval town</td>
<td></td>
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<tr>
<td>Strengthening family units</td>
<td></td>
</tr>
<tr>
<td>Antisocial behaviour</td>
<td>CREW Crime reduction&lt;br&gt;Community safety activities (inc police)</td>
</tr>
<tr>
<td>Affordable housing / homeless</td>
<td>Prevention of homelessness&lt;br&gt;Redevelopment of derived areas&lt;br&gt;Neighbourhood management pilot (multi-agency)&lt;br&gt;Reduction in homelessness</td>
</tr>
<tr>
<td>Travel for work outside Gosport Income</td>
<td>Employment Skills Hub&lt;br&gt;Redevelopment of sites for employment&lt;br&gt;Employment / Skills partnership&lt;br&gt;Business retention / support&lt;br&gt;Cycleways – funding in place&lt;br&gt;Healthy workplaces</td>
</tr>
<tr>
<td>Young people – achievement, nothing to do</td>
<td>Summer passport scheme&lt;br&gt;BMX tracks&lt;br&gt;Healthy Schools</td>
</tr>
<tr>
<td>Drug misuse / Binge drinking</td>
<td>Leisure services – play schemes, basketball, swimming, tennis etc SPAA – Sports activities Grants to aid voluntary organisations eg BMX club Provision of sports facilities, football, bowls Redevelopment of Holbrook Sports Ctr Co-ordinated approach with schools and council</td>
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<tr>
<td>-----------------------------</td>
<td>-------------------------------------------------------------------------------------------------</td>
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<tr>
<td>Mental health</td>
<td>Commissioning mental health services Probation Health Trainers Family support for dementia Depression, Stress</td>
</tr>
</tbody>
</table>

**General responsibilities for GBC:**

- Scrutiny of out of hours GP services
- Acknowledgement of role needed for health promotion
- Appointed an elected member for health
- Develop a political responsible body to oversee issues that have been raised (Health and Wellbeing Committee)

**General responsibilities for PCT:**

- Emergency planning
- Health protection
<table>
<thead>
<tr>
<th>Health &amp; Well Being Priority</th>
<th>2. Does Fareham Borough Council address these priorities, and what should it be doing?</th>
<th>3. Does NHS Hampshire address these priorities, and what should it be doing?</th>
<th>4. Does Hampshire County Council address these priorities, and what should it be doing?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Increase physical activity across all age groups</td>
<td>Walking 2 Health – mums and children Mums on the Move Leisure card schemes Chairobics – elderly people Parks and open spaces Leisure Centre Healthwise – Streetwise – Yr 6 pupils FBC physical activity officer targeting 16+ adults - LPSA2 funding Special FBC £13k fund to improve disabled access at swimming pool SXS skate parks Matched funding for sports clubs Green travel to FBC Air quality action plan eg On your Bike Parking strategy seeks to make country walk further from car parks Sustainable transport promoted eg walking, cycling Round the Harbour Cycle ride Planning applications, work travel plans, cycle racks, limited parking Cycle allowance and loan for staff</td>
<td>Probation Health Trainers Exercise Referral Community Schools Grant SPAA PCT support Healthy Schools</td>
<td>Cyclists able to use BRT route – HCC (when built) More involvement in development of schools sports participation • 2012 to deliver 5 hrs of PA in schools • Join up more with SPAA • More in school/after school activities • More involvement from Integrated Youth Service to engage ‘youth on the street’ Youth Service School travel plan – HCC and FBC Walk to School Week Healthy Schools</td>
</tr>
<tr>
<td>Showers, cycle racks at depot and Civic Offices</td>
<td>Bike to Work Day</td>
<td>Cycling Strategy</td>
<td></td>
</tr>
<tr>
<td>Climate Change Strategy eg get out of car</td>
<td>Promote cycling through cycle strategy, development of travel plans</td>
<td></td>
<td></td>
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<tr>
<td>Cycle facilities in new development</td>
<td>Open space provision in CDF</td>
<td></td>
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<tr>
<td>Get Active program</td>
<td>Healthy Workplace Award</td>
<td></td>
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<tr>
<td>Poster campaign – Stairways to Health</td>
<td>Exercise Referrals</td>
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</tbody>
</table>

FBC does a lot with little funding
More active parents will deliver more active children
How to target poorer families re PA?

Olympics 2012 driver locally re physical activity for all – include HCC

| Reduce obesity in children and adults |
| Healthy eating at work |
| Fareham suffers from disparity in ? funding for obesity work in relation to LPSA2 obesity target |
| Hill Park (Fareham NW) ask what people would be interested in re PA/obesity and other lifestyle issues? |

| Exercise Referral |
| School nursing to work in more systematic way with obese children and teenagers |
| Measure obesity in kids and use to target schools |
| Childrens’ Centres |

| School meals |
| Free school meals |
| Breakfast Clubs |
Appendix C

Workshop evaluations

Havant Borough Council
Health and Wellbeing Workshop
Mon June 15th 10am – 1pm

Evaluation

Participants
Havant Borough Council:

Cllr Olwen Kennedy       Frank Campbell       Janet Rees
Cllr Vic Pierce Jones    Nicki Conyard       Joy Okwuadigbo
Cllr Paul Buckley        Jaime Law           Tony Briggs
Cllr Cyril Hilton        Richard Wood        —
Cllr David Gillett       Andy Lenaghan       —
Cllr Mike Fairhurst      Susan Stocker       —
Cllr David Guest         Tim Slater          —
Cllr Gwen Blackett       David Bridges       —

NHS Hampshire:

Sarah Preece             Sarah Taylor         Laura Blake
Noleen McFarland         Kate Donohoe        Ileana Cahill

What did you find most useful?

Evidence of the real problems we are facing and not resolving
Update of priorities for Havant
Introductory presentations on causes of inequalities and statistics
Clarifying problems in Havant
Understanding of key areas of concern in Havant

Insight into how local council works – surprised they don’t have as much local
control as I thought
Improved my understanding of role of local authority councillors
Finding out who does what
Relaying information to councillors and other partners
Developing partnerships and finding out what is happening locally

Useful information overall
Expertise of those present and supporting
Nothing I’m afraid

What could we have done better?

Get Hampshire attendance
Got HCC to come along
More senior PCT representation
Very good presentations
Nothing

Better structured discussion
More focus / facilitation of discussion groups
Introductions from those present

More time for practical planning
Make sure we can hear what everyone is saying
Explanation of where we will take this and what we will do next
How do we deliver against health inequalities now, and how do we educate people about health inequalities
Councillors need/want to see examples of good practice in Havant
I felt totally unprepared, I was informed that it was a workshop and information on my specialist area was all that was required

What will you take away from today?

Greater awareness of problems
Knowing how low down Havant is
Size of problem in HBC and where we stand with rest of districts in county
Clearer appreciation of HWB issues

There are areas where improvements have been made eg children’s centres
But need to join forces much more on most areas of work
Greater awareness of services, particularly PCT
Passion to achieve but uphill climb
Realise how difficult solutions are
To remember to think local and targeted when commissioning

Good resources to follow re NICE

We all want to achieve the same things
Need for effective partnerships with identified leads and accountable delivery
Positive acknowledgement that we all need to work together

Are there other sessions you would like?

More detailed breakdowns on problems in Havant – more action planning for solutions and partnership meetings
Follow up joined up action plan with all partners
What are we currently doing, where are the gaps, and more specific project planning and delivery actions
Progress on development of wish list and hopes
Any leading to solutions
Today very strategic, next time delivery
Further proactive action and what we can really do to make a difference
Outline what is being done in Havant – more realistic priorities
Update on voluntary sector contribution to HWB

More presentations
Further sessions only if it is clearly defined what the aim is
Gosport Borough Council
Health and Wellbeing Workshop
Tues June 16th 2 – 5pm

Evaluation

Participants
Gosport Borough Council:

Cllr Roger Allan Richard Sturgess Mike Smith
Cllr Dennis Wright Paul Jaworek Claire Terry
Cllr Peter Edgar Angela Bennworth David Jago
Gaynor Williams Stephanie Pride Linda Dine
Kay Regan Sam Voller

NHS Hampshire:

Sarah Preece Jeanette Kyte Lee Dawson
Iain Maclellan

Fareham Borough Council:

Richard Sturgess

What did you find most useful?

Awareness of issues
Finding out more of the issues specific to Gosport
Statistics concerning Gosport

Discussion on identifying H&WB priorities
Discussions
Stimulated different thought processes
Listening to other peoples’ viewpoints

Finding out what other GBC sections / organisations do
Contacts with other bodies / organisations
Dialogue with partners – agreement of need to improve co-ordination / evidence-based delivery
Learning about partnership plans
Understanding some of the ‘political’ barrier issues

What could we have done better?

Nothing
Had more councillors represented and more awareness raising of HWB issues
Would have liked to pick a health issue and discuss the opportunity for joint commissioning
Local health indicators need England & Wales comparators
Work corporately on health and wellbeing issues and not in individual Business Units
Communication / joint working as opposed to joint talking
Liaise more / bring our actions together
Joined up approach between GBC services and joined up approach with other partners
Joined up. Health is not health care, we are all public servants

What will you take away from today?

There is a need to ensure that the PCT does listen to local councillors
Feedback from the group opens your mind to ideas
Contacts with other agencies
Contacts with other partners
Need for better engagement and shared understanding between NHS and LAs

More clearly relate / articulate health benefits in policy / project delivery
Consider my place and influence in post alcohol strategy
Awareness of the issues that affect many different areas

Some confidence that Gosport BC may work towards improving health of the community in partnership
Ideas for how health and wellbeing could be developed corporately
Positive attitude that health and wellbeing is now more of a priority at Gosport
Optimism because HWB a corporate priority for GBC

Are there other sessions you would like?

Planning of partnership projects
How about group working / working styles / decision making that involves all
Repeat sessions for all councillors
Follow up session with senior reps from PCT, GBC and HCC to take H&WB strategy forward
Continuation of this group discussion
Joint working

Fareham Borough Council
Health and Wellbeing Workshop
Weds July 1st 3.30 – 5.30 pm

Evaluation

Participants

Fareham Borough Council:

Cllr Bayford  Mrs Kilbride  Andrew Fiske
Cllr Mrs Ellerton  Martyn George  Jon Shore
Cllr Mrs Hockley  Mark Bowler  Heather Cusack
Cllr Keeble  Janie Millerchip  Juli Treacy
Cllr Mrs Trott  Emma Barrett  Phil Rayner
Andy Vicars  Gareth Satherley  Susan Hird
Mary Kilbride
What did you find most useful?

Learning about what other officers are doing in the council for health improvement
Rapid assessment of health inequalities and health improvement activity in FBC
Informing individuals in groups of activity
Splitting into groups with cross section of representatives from different work areas
Discussion groups
Mixing members and officers and PCT staff
Good getting agencies together (more HCC staff?)
Discussions in small groups
Group work
Groups

Quick info dump
Most interesting – mosaic information – waiting for a closer look
Good presentations – perhaps a bit too long?

GP referral to leisure centre for obese patients

What could we have done better?

Room shape (sorry)
Each group being given a set time at each flipchart
Dissemination of background data prior to workshop

Wasn’t really sure where priorities came from
Development of FBC priorities for health inequalities and health improvement
Communicating with all partners including target people
Still not really sure how to engage with PCT
More time for discussion / workshop (half day?)

Better after care post-hospitalisation. Halfway house – particularly for the elderly
More competitive sport in schools

What will you take away from today?

Health inequalities and health improvement areas (pockets) in FBC, what joint needs assessment could be done. Social marketing research?
Better understanding of health issues in Fareham
Need for stronger focus on older person’s services to meet changes in demography

More knowledge about who provides what
Knowledge that much is going on out there
The bigger picture, how all contribute to the key objectives
Knowledge of work other organisations are doing and how we can work together
Need to work together
Talk to Janie and Emma (Health Devt, FBC) more! To see how Environmental Health could assist or learn or improve from their work
Some good contacts
Renewed confidence in NHS and Local Authorities
As a councillor I am continually impressed by the scope of knowledge and coverage of our health issues in Fareham. Good team work.

Are there public health development needs or other sessions you would like?

Need a health planning exercise for Fareham including FBC and PCT
More regular health MOT’s
Joined up capital and revenue funding between agencies (preventative services)
Funding
Further discussion on other issues
Sharing evidence based practice

Improved targeting of hot spot areas
Work with PCT on effects of poor air quality on health or promoting alternatives to car travel
Better care provision for older people especially on discharge from hospital – halfway house?