

Health and Wellbeing Strategy Leads Forum

10 January 2025, held at YMCA Leeds Street

Action

Minutes

Present:

Ellie McNeil (Chair) (EM)	YMCA
Jacinta Ashdown	Age Concern Liverpool & Sefton
Shantanu Kundu	Be Free Campaign
Debbie Nolan	Citizens Advice
Matty Caine	First Person Project
Zoran Blackie	Merseycare and Healthwatch
Michael Viggers	Health Equalities Group
Elaine Mathers	Imagine Independence
Win Lawlor	Irish Community Care
Bev Morgan	Koala
Rachel Lindsay (notes)	LCVS
Dave Horsfield	PC24
Karol Zwolinski	Turner Homes
David Carter (DC)	Whitechapel Centre
Kevin Peacock (KP)	Options for Supported Living
Rachael Stott	PSS
Tom Harrison	Local Solutions

Apologies

Richard Davies	LCVS
Matthew Cliff	Bradbury Fields
Matthew Philpott	Health Equalities Group
Joanne Parr	MSDP
Anna McKenna	The Bobby Collieran Trust
Diane Hesketh	Natural Breaks
Rocio Castellero	Incurably Wonderful
Lucy Dossor	Growing Sudley
Janette Carr	Compass
Jemma Guerrier	The Reader
Maxine Ennis	The Rotunda
Jo Henney	We are Nugent
Andrea Rushton	Blackburn House

1. Welcome and Introductions

Ellie McNeil (EM) welcomed all representatives to the meeting and invited everyone to introduce themselves.

2. Ellie Garnett and Kath Wallace from Adult Social Care

Ellie and Kath attended the meeting to present their proposals for prevention and early intervention in adult social care for different groups, giving an overview of this to date, including emerging priorities etc and welcomed comments from Well Placed on the proposals.

Kath presented on the Adult Social Care Prevention Strategic Intentions & Engagement introducing LCC's thinking and journey towards embedding prevention into all aspects of Adult Social Care as part of their transformation journey and covered the following:

- LCC's Adult Social Care vision
- What LCC mean by embedding prevention
- Understanding prevention
- Why LCC need to focus on prevention
- LCC's Prevention approach and how they might implement it
- The people LCC need to reach

Following the presentation Well Placed were asked to make/answer the following comments/questions by LCC:

- Are these the right building blocks for an effective approach to prevention?
- Are the groups we need to reach the right groups? Are there any groups/populations missing?
- What work / projects is already ongoing in these areas that you are involved in that feeds into our approach
- How do we 'socialise' this approach wider?

Comments from Well Placed:

Win Lawlor – asked what the overlap is with the work being done with the Liverpool City Region Race Panel around data, particularly in terms of hidden data where communities are uncomfortable identifying themselves. Win suggested contacting Alison Navaro at the Liverpool City Region.

Debbie Nolan – CAB's Health Service only takes referrals from health professionals. Without the collection of data, they wouldn't have known that one in three complex family households have used the service. Once people have used the service, anti-depressant use lessens and health and wellbeing improves. The frustration is that they know the service is effective but still the resource has been reduced, therefore the service is not currently resourced effectively and efficiently. Debbie feels joined up thinking is needed. Voluntary sector is seen as poor relations. Need to not work in silos. Lack of co-ordination frustration. Neighbourhood managers are identifying problems staff already know exist which are putting additional demands on the voluntary sector.

Kevin Peacock – how does LCC’s plan for transformation link with other services ie. prevention – where are the resources. Kevin appreciates we are moving away from a service led approach, but it still feels like the approach is service led and not person centred. How does this fit with other institutions and funding resources. Need to think bigger and work more collectively. Need to look at the definition of ‘prevention’ ie. we can’t prevent ageing, a learning disability, therefore what are we preventing? Need to be clear that we are preventing an unhealthy life and giving people a good life within that system.

Zoran Blackie – how do we change mindsets, empower communities. A data driven approach misses out what are the most perceived issues ie. an older person who thinks all the problems are to do with immigrants. Need to acknowledge new realities and how we support people more collaboratively.

Rachel Stott – use of language ie. delay pressure, cost on the system. This is an approach, culture and movement change. The words used and how they are used are critical. Prevention Strategy doesn’t make sense: changed management process, culture change is the angle.

Shantanu Kundu– one of the biggest pain points is between Children and Adult Services. The priority does lie towards elderly care. Need to ensure when we are developing/co-designing that we ensure people are part of the conversation. Need to change demographics across the listening circle.

Matty Cain – First Person Project already do this really well. They focus on what’s strong, not what’s wrong. Their service is 60% funded through own revenue. There needs to be a way for social enterprises to be a difference maker in communities. LCC to look at what other organisations are doing better.

Dave Horsfield – agrees that prevention is the way forward and LCC are the right people to do it, however, the devil is in the detail and when systems hit crisis, prevention is dropped. If this is going to work, we need to figure out how we get ourselves out of crisis or start pushing prevention during crisis. A hard conversation needs to be had around utilising the power of the third sector and what we can do differently.

Win Lawlor – the voluntary sector is dealing increasingly with increased risk, higher complexities without funding and support. ICCM are looking at getting together nationally in order to feed back the difficulties through party parliamentary groups. Need a mind-shift in order to make other organisations and partners accountable for the work that’s not being done strategically at a national level. Consideration needs to be given to excluded groups for people who have been minoritised.

David Carter – we currently have a housing crisis – prevention isn’t just adult social care; damage has often been done before adulthood, therefore would like to see this link in with children’s services, otherwise the danger is we are setting people up for a life of homelessness. There is a need for trauma reformed practices.

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Kevin Peacock – wonders if Economics is missing ie. how do we think through where the money is coming from and how we draw on that future saving.

Tom Harrison – thinks it's the right model but the voluntary sector is being squeezed to deliver statutory bits. Really difficult environment to achieve.

Bev Morgan – voluntary services can often access funding that the Council can't. Wirral Council recently commissioned an emotional mental health children's services using money from ICB children's services and public health to reduce impact on CAMHs services. No more money but used their money differently. Need to get those at the top to use the money differently.

The group thanked Kath and Ellie for attending the meeting and Kath and Ellie were grateful for the input from Well Placed. Kath and Ellie left the meeting at this juncture.

3. Representative roles for Well Placed

Well Placed were working with the ICB around health segments and had a number of representatives sitting on those groups. As crisis hit most of the groups were shut down. Ellie has been thinking about how this group can influence going forward in order for it to be a place where key leaders would come to think about the views of the sector and influence and shift the way things work. Ellie suggested creating the following link roles to be points of contact with key leaders:

- Adult social care
- Public health
- Children and families
- Secondary care
- Mental health
- Housing and homelessness
- Neighbourhoods
- Primary care

Also possibly women and EDI.

Well Placed were asked if this is the right approach, if so key leaders will be identified in order to ascertain who we link people with across the systems. Ellie will bring this back to the next meeting in order to draw up formally.

Elaine felt it would be helpful for the reps to have the opportunity to speak to other providers before they meet in order to put a meaningful agenda together. This would be the responsibility of the rep. The sector would also speak as one voice.

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4. Any other business

Ellie to distribute two letters to the group for comments: the first one relating to the pressures on the increase of National Insurance to organisations and the second one in relation to the third sector delivering social care and the subsidisation the sector is providing.

Ellie met with Matt Ashton before Christmas who was supportive of the group and the work Well Placed are doing.

Jo Richmond, Director of Neighbourhoods, is happy to come along to a future meeting of the group.

Debbie – healthy children and families – meeting on 10th Dec, company attended ICE doing weight management service – Gemma and Debbie arranged to meet with her and have a meeting next week if anyone wants to join them. Contact Debbie if interested.

5. Date of next meeting

30th January 2025, 10am, LCVS, 151 Dale Street

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