

HEALTHIER COMMUNITIES AND OLDER PEOPLE OVERVIEW AND SCRUTINY
COMMITTEE

20 NOVEMBER 2012

7.15PM-8.30PM

PRESENT: Councillors Suzanne Evans, Peter McCabe, Margaret Brierly, Brenda Fraser, Logie Lohendran, Laxmi Attawar (substitute), Linda Taylor (substitute), John Dehaney (substitute).

Co-opted member: Laura Johnson

ALSO PRESENT: Dr Val Day Interim Director of Public Health, Julia Groom, Joint consultant in Public Health

1 DECLARATIONS OF INTEREST

Margaret Brierly declared an interest as a member of the shadow health and well being board

2 Apologies for absence

Apologies for absence were received from:

Councillors Maurice Groves, Dennis Pearce and Greg Udeh. Co-opted members: Barbara Price, Myrtle Agutter, Sheila Knight

3 MERTON DRAFT HEALTH AND WELLBEING STRATEGY

Dr Val Day, Interim Director for Public introduced the strategy highlighting that it is complimentary to existing strategies

The Chair invited general thoughts on the strategy

A panel member pointed out that it is important that the strategy is as inclusive as possible and there is a concern that middle age and middle class people may be overlooked.

Dr Day pointed out that this is a concern, while the aim is to support equality, diversity and the protected characteristics we must ensure the needs of all the population are met. There are some characteristics that will be applicable to everyone such as the local environment and healthy living. Overall we focus on those that are the least able and have the greatest need .

Some panel members felt that the strategy was too broad and didn't focus on individual need, it was asked if there could be references where relevant information could be found. It was pointed out that if we want people to read the strategy there needs to be something in it for them

Dr Val Day said is a whole population strategy, each priority will be delivered by one

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of the partners on the Health and Wellbeing Board, they will develop a delivery plan which will translate into milestones and outcomes. This will help people to see how it translate into a service.

A panel member referred to a response to the consultation proposals from Mark Clenaghan at the Mental Health Trust pointing out the strategy divides “physical and mental health into two separate categories without addressing the inter-relationships between the two illnesses. The paper was circulated to the Panel.

Dr Day pointed out that priority three encompasses physical and mental illness and is intended to do so.

A Panel member pointed out that there are no timescale scales in the Strategy

Dr Day reported that this had been done on purpose because the strategy had been developed before the Health and Wellbeing Board becomes statutory. The delivery plan will include more timescales where appropriate.

The Panel were invited to make comments on priority one in the strategy

A panel member pointed out that In giving every child a healthy start in life it was important that this begins for mothers in anti-natal.

Dr Day reported that this was the case and is also linked to good sexual health. Local authorities will have responsibility for age 5-19 in its public health role this will also include school nurses. Services for 0-5years will stay with the NHS Commissioning Board for two years as the rest of the transition embeds within councils then those services will transfer.

A panel member asked for more details on the programmes to tackle anti-social behaviour linked to mental health problems. Julia Groom reported that there were was anti-bullying work as well as peer support and also programmes to tackle risky behaviour such as substance misuse.

A panel member said that while nutrition in schools is poor, increasing the take up of free school meals should not be a priority. Also, while breastfeeding is important this is not suitable for all mums. The same is to be said for keeping active, as some people are not good at sports.

Dr Day said that breastfeeding rates in Merton are quite high. The public health team are conducting a piece of research looking at why some people breastfeed and some don't. Although breast-feeding provides the best start for babies, there is a recognition that women should have the support that they need. Although there is an issue of nutrition in some school meals, the key issue is to ensure that all children have enough to eat. The benefit changes may mean that children are not having enough food. In terms of exercise, the best physical exercise is walking, which is

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easy and accessible for most people and should be promoted.

A panel member pointed out that in a borough of 200,000 people we need experts to identify population needs, this approach has achieved a lot of benefit to communities in the past.

The Panel were invited to comment on priority two

A panel queried the link between obesity and deprivation, as being overweight cuts across all social backgrounds. It was also pointed out that obesity can be linked to genetics another panel member noted that some organisations give people rewards to motivate them to lose weight.

Julia Groom said that there is a strong link between obesity and deprivation although it is prevalent in all sections of the population. Merton has developed a multiagency response with the Live Well project to support people to live a healthy lifestyle. Dr Day added that some areas have adopted controversial reward-based projects, In Merton it is important that people have access to healthy food.

A panel member asked for smoking cessation programmes to be flexible; some people thrive in the group environment while others do not. It was noted that there was large cohort of adults on benefits who smoke, this group should be targeted as they will benefit financially as well in their health.

Dr Day said a couple could spend up to £5000 a year on cigarettes, which can be a huge part of their income. NHS services must be evidenced based and take on new opportunities. Smoking cessation and Live Well services are coming together to make them more sustainable and successful

The Panel we invited to comment on priority three

A panel member welcomed the commitment to offer more support to carers as this will alleviate a greater cost to society

A panel member asked how we can make commitment to provide more support at a time when we are making cuts.

Val Day reported that it is not always about spending more money it can be about developing a multi agency approach and using the money you have more effectively.

RESOLVED

That Panel submit a formal response to the consultation.