

MAIDSTONE BOROUGH COUNCIL

**MINUTES OF THE PARTNERSHIP AND WELL BEING
OVERVIEW AND SCRUTINY COMMITTEE MEETING HELD ON
TUESDAY 8 FEBRUARY 2011**

PRESENT: Councillor Mrs Stockell (Chairman)
Councillors Butler, D Mortimer and Paterson

83. The Committee to consider whether all items on the agenda should be web-cast

Resolved: That all items be web-cast.

84. Apologies

Councillor Daphne Parvin, Councillor Heather Langley and Councillor Jane Griffin sent their apologies.

85. Notification of Substitute Members

There were no Substitute Members.

86. Notification of Visiting Members

It was noted that Councillor David Pickett attended as a Visiting Member interested in item 9.

87. Disclosures by Members and Officers:

Councillor Butler disclosed a personal interest in Item 8, tackling Obesity, by virtue of his mobility business which catered for obese persons.

88. To consider whether any items should be taken in private because of the possible disclosure of exempt information

Resolved: That all items be taken in public as proposed.

89. Minutes of the Meeting Held on 11 January 2011

Resolved: That the minutes of the meeting held on 11 January 2011 be agreed as a correct record of the meeting and duly signed by the Chairman.

90. Tackling Obesity

The Chairman welcomed Jim Boot, Community Development Manager and Jane Coombes, Healthy Lifestyles Coordinator. The Chairman also welcomed the representatives from local Weight Management Programmes; Jill Maynard from Zeroth Active Zone and Donna Kavanagh and Sara Matthews from Maidstone Leisure Centre.

Jim Boot began by explaining his new role managing the community development team, the team was focussed on enabling local communities with the purpose of improving the lives of residents and included the Sports and Play function. The Officer made reference to Maidstone's Health Profile for 2010 and the few red indicator results which showed Maidstone as significantly worse than the England average on a small number of health issues. Those that were showing as red were physically active children and obese adults. The Officer made reference to the forthcoming Olympics in 2012 as an opportune time to tackle these inequalities. Mr Boot explained that the 2 year Service Agreement with the Primary Care Trust (PCT) to develop health programmes was coming to an end but that it would be 2 years before the new health structures were in place which would involve GP Commissioners. The Officer explained that they would know at the end of March whether the Health Prevention funding would continue. The Committee expressed their hope that funding would be continued.

Jane Coombes, Healthy Lifestyle Coordinator explained that the funding for her post came from the PCT and that through their Health Needs Assessment they had identified the number of people that needed to be reached through the Health Programmes. As a result of this 60% of the budget was targeted towards Health Programmes. They had also engaged a nutritionist to go out to rural areas where people couldn't be reached through the weekly programmes devised. She explained that it was a 2 year programme run according to evidence based practices. The success was in the holistic approach, recognising that from the evidence in the Health Needs Assessment, it was not just diet that was important; behaviour change and motivation were involved. The Officer felt that Body Mass Index (BMI) was not always the best measurement. At the beginning and end of each 10-12 week programme weight and measurement was taken; following the programme 6 monthly contact was maintained with participants. Ms Coombes told the Committee that overall the programmes were a success and they were on course to meet the targets set by the PCT in the Service Level Agreement.

Members questioned the BMI criteria and the referral process. The Committee were told that patients could self refer or were referred by GP's, practice nurses, dieticians, school nurses and through advertising and leaflets distributed widely to doctor's surgeries and libraries. Members questioned the BMI level and why it was set at 28. It was explained that it was set at that level so intervention could take place before a patient became obese. Members questioned the use of the

internet to promote the programmes. Mr Boot responded by explaining that there was a definite link between behaviour change and social change and with social networking sites such as Facebook and Twitter there was an opportunity to exploit this. The Officer cited the success of the Facebook campaign in 2010 which had secured the Red Bull 'Back Yard Digger' BMX track for Mote Park.

Members referred again to the Health Profile for Maidstone and the discrepancies showing physical activity significantly worse than the England average and questioned whether this would lead to obesity. Ms Coombes explained that National Child Measurements were taken during a child's first year at school and this information would feed into the Health Profile which put Obese Children as not significantly worse than the rest of England but could not offer further explanation. Mr Boot explained that some communities would be performing worse than others in Maidstone and this would have an impact on the overall figure for Maidstone.

Members questioned whether the Healthy Lifestyles Programmes were taking a holistic approach and addressing other problems such as smoking and alcohol as part of the process. It was confirmed that this was the approach taken and alcohol units were checked; patients were asked if they would like a smoking referral and portion sizes were looked at. Ms Coombes highlighted other groups such as 'Little Stirrers' which she explained was based on the Change for Life programme and was a preventative measure; a cooking programme for parents and young children. The Officer explained that the Change for Life campaign was used widely in terms of its ethos and the colour schemes for marketing purposes. Ms Coombes explained that all programmes were funded by West Kent PCT with 60% of the programmes focused on Obesity and the other 40% tackling Mental Health and general Well-Being. It was discussed that the impact self esteem and mental health has should be incorporated into the programmes.

Members asked if Central Government had done enough in this area. Ms Coombes explained that £72 million had been invested in the Change for Life Campaign which had involved national television advertisements, local authorities and PCTs. The Committee were also told that Maidstone and West Kent had won a bid for a community chest and would be working with Change for Life on this. The Officer also explained that Change for Life would be issuing a 'passport' with incentives such as collecting points which would be met with rewards and that the Change for Life materials were continued to be used widely. Mr Boot summarised the programmes and said that they were trying to foster change, such as with breast feeding initiatives. He explained that it was about tapping into groups of people who already got together such as new mothers and encouraging people to motivate themselves.

The Chairman introduced Jill Maynard who ran two of the Healthy Living programmes at Zeroth Active Zone. Mrs Maynard explained that Zeroth particularly focused on patients with MS and medical conditions who would benefit from exercise.

The "Go For It" programme run at Zeroth was originally set up in 2007 for children. Due to the funding allocations being on an annual basis Mrs Maynard said it was difficult to plan ahead and referrals were restricted. One of the aims of Zeroth in particular was to reduce inappropriate referrals to the paediatric team. Mrs Maynard explained the "Go For It" programme in more detail to the Committee; it ran for 12 weeks and included 6 parent workshops (as with children under 11 parents also needed to be re-educated about food.) Mrs Maynard told the Committee that children were very often aware of healthy eating and what constituted this but were not very informed about physical activity and their own physicality. Pre and post measurements were taken including weight, height, waist, peak flow and fitness. For children under 11 it was not about weight loss and more about maintaining weight and patients were discouraged from weighing obsessively. The aim was to improve fitness levels and self esteem. The current "Go For It" programme had two age groups 5-11 & 12-16 with the criteria being a BMI over the 85th percentile. Mrs Maynard told the Committee that School nurses could no longer make referrals or contact the family and that the onus was now on the parents. Ms Coombes explained that to combat this change local authorities were advertising in the Primary Times so parents could contact their LA who would then make the referral. Mrs Maynard interjected to explain she had only had one referral as a result of this. Mrs Maynard explained the work done with teenagers involved workshops and that there were one to one sessions for more vulnerable children.

The "Weight for Life" Programme was described as an adult programme for those of a BMI of over 28; involving 2 gym sessions a week as well as nutrition and healthy lifestyle talks. Mrs Maynard felt that the weaknesses of the programme were the referral process; the information reaching the GP's, the understanding of different programmes available, the data collection and the possibility of a 2nd referral. The issue with data collection was explained as being the forms and assessment criteria required for the programmes by the PCT being left to individual interpretation. With reference to the 2nd referral Mrs Maynard felt that this had not been considered and should be down to the programme manager's discretion as 12 weeks is often not enough time to work with someone who was severely obese. Mrs Maynard outlined Zeroth's strengths as being a safe environment with the ability to cater for less mobile people and with a focus of those with medical conditions. She explained that it was value for money and that the £1 charged was to give participants ownership of what they were doing. Councillor Paterson who visited the centre was able to share with other Members the enthusiasm and commitment of those on the programme. Councillor Paterson also highlighted an aspect of the set up at Zeroth that was praised by those participating in the scheme which was the privacy that they did not feel they would have at a public gym.

Jim Boot explained that the process now was for schemes like Zeroth to become accredited in preparation for the role of Commissioners. He explained that there would be a period of transition from the PCT to the future GP commissioning body and therefore an opportunity to

demonstrate the importance of a local body. Members asked if there was a capacity for growth with Zeroth. Mrs Maynard explained that there was capacity in the afternoons for another 400 people. Members also raised the idea of advertising with local businesses.

The Chairman invited Sara Matthews and Donna Kavanagh to the discussion representing the schemes run by the Leisure Centre. Miss Matthews began by making reference to the 'old schemes' and 'exercise referrals' which targeted people with medical conditions that were often fit before their illness and were already motivated to return to their old self. Miss Matthews explained that under the old schemes patients were only seen every 5 weeks during a 20 week programme which was subsidised costing £2.95. Under the old scheme the Leisure Centre had 115 referrals a year from GPs, Hospitals and for Physiotherapy. The old scheme had a 32% drop out rate. The new Weight Management Programme, - ran for 12 weeks and at 10 weeks there was a trip to the supermarket to help re-educate participants on food. Members were told the programme also involved food analysis and motivational talks. The gym programmes were set individually and included weekly nutrient talks. Miss Matthews informed Members of a 'passport' through which weekly goals were set and small changes identified each week. Also incorporated in the programme were food diaries and weekly seminars on a broad range of topics.

Miss Matthews explained that the new 12 week programme had 53 referrals from GP's, it was being run at a reduced cost to participants of £2.00 and had a 41% drop out rate. Miss Matthews explored reasons for the high drop out rate with Members and other witnesses such as emotional and mental health issues which Ms Coombes explained they were exploring with counselling offered by -another West Kent NHS funded programme in collaboration with Age Concern, MIND, Brighter Futures and MBC.. Miss Matthews told the Committee that they had considered dropping their rate to £1 per session, explaining that it was important that participants took some onus by making a payment. Miss Matthews also agreed with Mrs Maynard on the 2nd referral scheme being made at the discretion of the programme manager.

The common denominator for obesity was said to be a sedentary lifestyle. Miss Matthews explained that often those that are overweight would stop eating and slow down their metabolism; when they were told to eat more often they found it hard to grasp. Members highlighted the myth often that ready meals which were high in fat and salt were cheaper to buy than fresh foods. Witnesses confirmed that in the long term it was cheaper to cook from scratch but that it did involve planning. Members discussed the issue that Home Economics was no longer a part of the curriculum in schools. Ms Coombes explained that there was a drive to have kitchens put back into schools and the witnesses confirmed that issues surrounding food were incorporated into their programmes. Also discussed was the emphasis on cooking in the media which should have a positive effect.

Members moved onto the Healthy Schools Programme and Maidstone reaching 100% Healthy Schools Status. The Committee were told that the

Healthy Schools toolkit was changing and would become a local arrangement.

Members discussed what could be done to raise the profile of the Healthy Lifestyles programmes examined. Ms Coombes explained that it was about engaging GP's and that what had let the programmes down despite leaflet drops, advertising and all the other aspects discussed was informing GP's directly about the Programmes that were available. Members were also keen to see Maidstone Borough Council's Website making explicit links to appropriate organisations and websites.

The Chairman concluded by thanking all for attending.

It was Resolved:

- a) That GPs should be engaged though a conference or seminar setting and given the opportunity to get involved in schemes that tackled obesity in light of GP consortiums. This would give those involved in programmes and referral schemes the opportunity to raise the profile of schemes; and
- b) That methods of promoting the programmes and services available via the Internet should be explored with IT and Communications.

91. CCTV Update

The Chairman invited John Littlemore, Head of Community Services and Housing and Councillor David Pickett, Visiting Member to the meeting.

Members had been invited to the recent stakeholder events on CCTV including a visit to the Medway CCTV Centre and a Questions and Answers session. Mr Littlemore explained that there would also be a neighbourhood forum that the Committee could be involved in as part of the consultation process. The Officer informed the Committee that the report to the Cabinet Member was likely to be delayed until March 2011. The outcome from the Stakeholder Question and Answer session was discussed and the Committee were supportive of this: there would be a stakeholder steering group who would be involved in the specification for the CCTV monitoring service. Members highlighted a concern that there would be a loss of local knowledge if CCTV was moved to Medway. Shops in Maidstone were said to have built up a partnership involving CCTV which had nothing but praise for the current system. Some members felt that this provided the local, on the ground knowledge that was vital. It was also highlighted by some Members that as County Town of Kent a move to Medway may result in a loss of control.

The Chairman told members that the partnership between Maidstone and Medway meant that only the 'remote' control of the cameras were going to Medway and referred Members to the Health and Safety issues of the

current set up that are a factor in the decision. Mr Littlemore explained that the long term usage of current facilities was not viable and would not comply with minimum Health and Safety requirements. He also explained that there were technical issues to consider and the current set up meant the Town Hall were still using VHS recording. The Officer explained that an alternative would have to be considered so if it was not Medway another solution would be sought. Members referred to the recent visit to Medway and told the Officer how impressed they were with the facilities. Members felt that the issues were centred around the 'ownership' of the service. Mr Littlemore explained that stakeholders had been listened to and that staff would be transferred across to Medway with the authority going above and beyond to ensure local knowledge remains. The Officer also confirmed that regular meetings with the 'town centre partnership' had been included in the specification and the Officer believed this to be achievable. The Chairman emphasised that local knowledge was about maintaining local people's relationships with Police and the Fire Service predominantly. Members felt that there was also an issue to consider in reducing the 'fear of crime' which CCTV in Maidstone currently offered. Mr Littlemore reemphasised that if it was not Medway and the Partnership arrangement then a tendering process would take place which would look more widely at possible service providers.

Mr Littlemore informed the Committee that with regard to response times, technical and digital links would be better at Medway and that images could be downloaded into police vehicles, for instance, with the type of technology available. Members questioned an earlier proposal for CCTV provision with other Mid Kent Partners. Mr Littlemore explained that this had been explored in 2009 with Swale but that bid had failed and Swale were now with Medway. With regard to other options Mr Littlemore explained that the cost of crating a new set up for CCTV in Maidstone did not offer a viable incentive as the Medway option would be cheaper. The Officer explained the transfer from Swale to Medway had included only 4 hours of downtime in terms of service disruption, and that Maidstone had the benefit of learning from their experience. Members explored crime statistics associated with CCTV in Swale and Maidstone and mitigating factors such as Maidstone's night time economy. The Chairman deduced that Maidstone was now in a position where something needed to be done and that the service currently in operation was past its sell by date.

Members discussed with the Officer possible negative consequences of the service being provided at Medway if, for example, the operator from Maidstone was called away because of an incident in another area. Mr Littlemore explained that there were discussions on hours but that they did not have the equipment yet to understand when quiet and busy times were. He told the Committee that there would be a minimum of 2 operators at any one time and the specification draft would safeguard against situations like the example given by Members.

In response to Members questioning the Officer explained that the Police did not pay towards CCTV and there was no statutory duty to provide the service. Members questioned the savings that would be achieved by the partnership with Medway asking whether they would form part of the

savings required to be made by the authority as a whole. The officer explained that they were at present factored into current savings but in the future when other partners became involved more savings may be available. The Committee asked what provisions were in place should the entire service be knocked out at Medway. The Officer explained that Police HQ provided a back up service and the Chairman suggested a visit to Force Control HQ for the Committee to view the service.

Members queried the timescale for the service going to Medway; a date of December 2011, early 2012 was given. The Officer reiterated to the Committee that if the service was to stay it would inevitably go out to tender via Procurement within the next 12 months. He explained that with the partnership it was not governed in the same way as a contract (as with a tender) and they could have a notice period or a review date set every 12 months or 2 years which would give a degree of flexibility to arrangements. The Officers confirmed to Members that the legalities had been explored.

Members observed that with digital links the service could go anywhere in the country and an example was discussed involving Bexley Council and the company Siemens. The Officer explained that by going out to tender this type of arrangement could not be restricted.

The Chairman thanked the Officer for the update.

It was resolved:

- a) That a statement on behalf of the Committee should be sent to the Cabinet Member for Community Services in support of the stakeholder steering group developing the specification for the CCTV monitoring service; and
- b) That a visit to Force Control HQ to view a similar arrangement to CCTV to be organised by Councillor Stockell.

92. Future Work Programme

The Committee discussed their future work programme focusing on their next meeting as the Crime and Disorder Committee.

It was resolved:

- a) That Ian Learmouth, Chief Constable of Kent Police should be invited to provide and update on his priorities for Kent and Maidstone; and
- b) The Local Strategic Partnership delivery group, Safer Maidstone Partnership, should be invited to update the Committee on their current priorities and issues and provide and update on Domestic Violence as discussed at their last meeting.

93. Duration of the Meeting

6.30 pm to 9.20 pm