



Armagh City, Banbridge and Craigavon Borough
Healthy Community Thematic Action Planning Team
Meeting Notes

DATE: Thursday 17th May 2018 **TIME:** 9.30 am, **VENUE:** Old Town Hall, Banbridge

Attendees: – Chair: Southern Health & Social Care Trust (SHSCT) – Gerard Rocks, Armagh City Banbridge and Craigavon Borough Council – Alderman Kenneth Tywble, Councillor Julie Flaherty, Alison Beattie, Carmel Taylor, Cathy Devlin, Catriona Regan, Claire Weir, Eileen Campbell, Elaine Devlin, Elaine Gillespie, Gerard Houlahan, Gillian Dewart, Gillian Topping, Jennie Dunlop, Lynn Esler, Michelle Markey, Health and Social Care Board (HSCB) – Alison Patterson, Libraries NI – Sean Beattie, LLTCA – Claire Patience, National Children’s Bureau – Claire Dorris, Northern Ireland Fire Rescue Service (NIFRS) – Eddie Carroll PSNI – Billy Stewart, Public Health Agency – Colette Rogers, Fiona Teague Richmount Rural Community Association – Joe Garvey, SHSCT – Carolyn Agnew, Lynne Smart Sport NI - Angharad Bunt, Start360 – Ciara Dorris, Volunteer Bureau – Donna Stewart, West Armagh Consortium – Stephen Fields,

Guest speakers – Jacinta Linden SPACE, Rachel Long NIACRO

Apologies: Donaghcloney Community Garden – Walter Ferris

1.	Welcome
2.	<p>Getting to Know Each Other</p> <p>Attendees had 5 minutes to find out a little about their neighbour, then introduce one another. They were also asked to note on a post-it what they felt made good partnership working. These key principles/values of joint working were considered the most important (noted by numerous attendees):</p> <ol style="list-style-type: none"> 1. Trust 2. Clear understanding of a common purpose/vision 3. Honesty 4. Commitment to contributing to the group

	<p>5. Respect for diversity of opinion</p> <p><u>Additional values considered important included:</u></p> <ul style="list-style-type: none"> • Structured terms of reference • Greater access to resources • Influence opportunities • Good governance arrangements • Sharing • Equal power between group members • Reliability • Ownership of the project • Empathy with others • Connections • Flexibility of members
3.	<p>Shared Learning Experience</p>
	<p>A presentation was given by Rachel Long (NIACRO) Jacinta Linden (Space-NI) on their experience in working with the SHSCT Family Support Hub.</p> <p>Key benefits of the model included:</p> <p>For parents:</p> <ul style="list-style-type: none"> • Faster and more streamlined access to appropriate and integrated services • Stronger communication with professionals • Greater involvement in care planning <p>For professionals:</p> <ul style="list-style-type: none"> • Better understanding of needs • Better understanding of other services • Improved interactions with other professionals/services • Job satisfaction and learning of new skills (eg in interagency working) <p>For agencies:</p> <ul style="list-style-type: none"> • Shared responsibility, resources and therefore capacity • Better service user engagement • Prevention & early intervention focus • Evidence of need & what works to inform services

	<p>Summary video of the Family Support Hub service is available to view here:</p> <p>https://vimeo.com/216493917</p>
4	<p>Setting the scene</p> <p>Chair (Gerard Rocks) provided an overview of the process to date, including where the ‘healthy community’ thematic action plan fits within the wider community planning vision and structure.</p> <p>Pillars: community (confident, healthy, welcoming), economy (Enterprising, skilled, tourism), place (creative, enhanced, revitalised)</p> <p>Cross-cutting themes: connectivity, equality and sustainability</p> <p>Healthy Community</p> <p>Long-term outcome: people are making positive lifestyle choices. They are more resilient and better equipped to cope with life’s challenges.</p> <p>Indicators:</p> <ul style="list-style-type: none"> • Number of preventable deaths per 100,000 population • Gap in life expectancy between most deprived areas and the borough overall • Percentage of people who participate in sport or physical activity on at least one day a week
5	<p>Purpose of action planning process</p> <p>An overview of the steps involved in the planning process was provided, including:</p> <ul style="list-style-type: none"> ▪ Exploring the indicator baseline data: what causes and influences are behind the trend? Which key partners have a role to play in improving the indicator? ▪ Research and engagement agenda: gathering and using evidence of need and ‘what works’ to inform action planning ▪ Mapping current activity to baseline data: what do we know is already happening in the area to address these indicators? Are there any gaps? ▪ How can this group contribute? Explore existing and potential opportunities for collaboration. ▪ Refine and prioritise actions and develop the action plan

	<ul style="list-style-type: none"> ▪ Set performance measures to ensure we can demonstrate if anyone is better off
6	<p>Agreeing how we work together</p>
	<p>Agreeing a common purpose: groups were given a number of aids to discussion to help agree a common purpose for the group.</p> <p>Q. What would you like to achieve for the community through your membership of this group?</p> <p>Common goals focused on:</p> <ul style="list-style-type: none"> • Joint working: building relationships between organisations and within the community. Maximising resources, sharing skills, knowledge and experience. Joined up thinking and action planning. Avoiding duplication and maximising impact. Improved understanding of other organisations; Build trust and an improved understanding of services available and how statutory & voluntary services work. • Encouraging motivation and engagement across the community: How do we empower people to take control and to make healthy choices? Population engagement in health and resilience; reducing barriers to access, better understanding of motivation, individualising needs and providing personal support. • Taking action: Improved services (joined up) such as a joint marketing campaign for getting people active and eat healthily (short term), making better use of existing statutory and community resources while creating new and innovative infrastructure; identify gaps and develop action plan to feed into vision and smart objectives. • Improving access to services: Engaging with people to enable them to access services/become programme ready; enabling links between first interactions with people to encourage participation in other support services. • Supporting engagement of marginalised groups: removing language barriers, respecting and interacting with marginalised groups and those in need, • Supporting volunteers: More meaningful opportunities; better practice in organisations for volunteers.

Q. What should be the underpinning values/principles of how we work together to achieve this?

In line with the principles of partnership working discussed earlier, the following key points were raised:

1. Joined up government, characterised by openness and collaboration
2. Evidence-based but innovative actions
3. Inclusivity: ensuring that actions target the full population, across the geographical spread and particularly inclusive of section 75 groups
4. Trust , respect and commitment to the group
5. Being accessible and positive

Q. What can you / your organisation bring to the process?

1. Representing grassroots community opinions on services.
2. Local engagement opportunities and contacts
3. Making better use of available resources through collaboration and pooling (including direct resources (funding?), qualified staff)
4. Examples of good practice, such as how to get people active.
5. Diversity
6. A willingness to work together, along with a willingness to change

Q. What challenges do you foresee and how can these be overcome?

1. Need to gain wider engagement from the volunteer and BME sectors, as well as 'hard to reach' groups
2. The need to ensure equal geographical spread
3. A concern that people may use the opportunity to force their own agenda rather than focusing on the task.
4. The need to measure success and how actions can attribute directly to targets
5. Getting key organisations to cooperate and engage in the process
6. Current lack of government / focusing resources in right places /
7. Early intervention: influencing children's behaviour before they leave primary school
8. Aligning with the three other community planning processes
9. The size of the task ahead; the detail could be burdensome

	<p>10. Focusing resources in the right direction. The innovation opportunities are out there; the challenge is to take the risk and exploit these.</p> <p>11. Creating change; how do we encourage positive choices and personal responsibility for change, not just programmes.</p> <p>12. Sustainability – training communities</p> <p>13. Knowing what’s achievable</p> <p>Terms of Reference</p> <p>Groups were given a short time to review a draft Terms of Reference and identify any gaps or suggestions for amendments. Group members were advised to email any comments to Michelle Markey for inclusion in a final TOR, to be signed off at the 2nd workshop (31 May 2018).</p>
7	<p>Next steps and close</p>
	<p>Mapping exercise</p> <p>Members were advised that a mapping template would be issued for completion; these will be collated and presented at the next meeting.</p> <p>Date of next meeting</p> <p>Thursday 31 May 2018.</p> <p>Lough Neagh Discovery Centre</p>