

# Hastings and St Leonards Local Strategic Partnership Agenda

**Monday, 30 January 2017 at 10.00 am, Council Chamber, Aquila House**

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		Page No.
1.	Welcome and Apologies for Absence (Chair)	
2.	Notification of Urgent Items	
3.	Declarations of Interest	
4.	Minutes and Matters Arising (Chair)	1 - 4
	a) Minutes from the last LSP meeting on 16 October to approve.	
	b) Matters Arising	
	<b>For Discussion</b>	
5.	My Hastings - Stephen Dodson and Natasha Tewkesbury (15 mins)	
6.	Young People's Health - Youth Council Rep and Victoria Spencer Hughes, ESCC	
	a) Issues for young people (10 mins)	
	b) Response from Public Health (10 mins)	
	c) Discussion (10 mins)	
7.	Director of Public Health Report, Personal Resilience - Victoria Spencer Hughes, ESCC (10mins plus 10mins questions)	5 - 10
	The electronic link to the report is as follows:	
	<a href="http://www.eastsussexjsna.org.uk/publichealthreports">http://www.eastsussexjsna.org.uk/publichealthreports</a>	
	<b>BREAK (10 mins)</b>	
8.	Higher Education in Hastings - Clive Cooke, SCCH (10 mins)	
	a. The college to update on progress with the university centre	
	b. Partners to share their ideas of how they and/or their organisations can support the development of the new university centre	
	<b>For Information</b>	
9.	Seawater Bathing Quality Update	11 - 12
10.	Regeneration Update	
11.	Executive Delivery Group Notes: 13 December	
12.	East Sussex Strategic Partnership Notes: 5 December 2016	13 - 28
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# Agenda Item 4 Public Document Pack

## Hastings and St Leonards Local Strategic Partnership

Minutes 17 October 2016

### Present:

#### Statutory Sector

Cllr Nick Bennett	East Sussex County Council
John Williams	Sea Change Sussex
Cllr Peter Chowney	Hastings Borough Council
Clive Cooke	SCCH
Jane Fletcher	Ark
Stuart Gallimore	ESCC
Julie Gilbert-King	EFRS
Simon Hubbard	Hastings Borough Council
Jenny Jones	Hastings Academy
Chris Pole	University of Brighton
Anita Turner	Sussex Police
Mike Thompson	Amicus Horizon
Natalie Thorpe	Ark
Richard Watson	Hastings and Rother CCG

#### Community and Voluntary Sectors

Marie Casey	Hastings Community Network
Carole Dixon	Education Futures Trust
Jacqui Everard	Hastings Community Network
Gerry Loughran	Hastings Community Network
Steve Manwaring	Hastings Community Network
Marc Turczanski	Hastings Community Network

#### Business Sector

Clive Galbraith	Chamber of Commerce
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#### In Attendance

Shabana Bayjou	Hastings Borough Council
Cllr Kim Forward	Hastings Borough Council
Andrew Palmer	Hastings Borough Council

#### Apologies for absence were received from:

Sean Dennis	Let's Do Business
Paul Frost	University of Brighton
Andrew Knight	Chamber of Commerce
Rosie Ross	Sussex Police

<p><b>1</b></p>	<p><b><u>MINUTES AND MATTERS ARISING</u></b></p> <p>The notes of the July 18<sup>th</sup> Board meeting were considered.</p> <p>Matters arising:  (5) Meetings of key agencies and wider partners have been held to progress the homelessness and street community issues and further updates including shelters and mental health issues will come to the Board as appropriate.</p>	
<p><b>2</b></p>	<p><b><u>INTRODUCTION OF NEW ARK DIRECTOR AND OVERVIEW OF RESPONSIBILITIES AND CHALLENGES</u></b></p> <p>Jane Fletcher introduced herself as the new Director of the Ark academies, Helenswood and William Parker, she is also acting as the Executive Principal at William Parker until a permanent head is appointed.</p> <p>The academies are currently doing well with sixth form results at above the national average but a clear improvement programme is in place to achieve further advancements and meetings with partners to build a strong network have been convened. Narrowing the gap between disadvantaged pupils and others and recruitment and training of staff are key priorities.</p> <p>Partners welcomed Jane to the town and to the Board and expressed their commitment to working together to raise educational outcomes across the town.</p>	
<p><b>3</b></p>	<p><b><u>OVERVIEW OF HASTINGS EDUCATION RESULTS: UNVALIDATED PROVISIONAL RESULTS</u></b></p> <p>Stuart Gallimore was in attendance to give his annual update on educational results from Hastings schools. Figures are still provisional but the final data is not expected to alter the headline trends.</p> <p>The Board thanked Stuart for the presentation, raising the following points:</p> <ul style="list-style-type: none"> <li>• High number of FSM in early years big changes why?</li> <li>• High number of primary aged children attending school outside of the town</li> <li>• data excludes special needs sector</li> <li>• can we get this info breakdown to ward or SOA level</li> <li>• Update on Free school applications</li> <li>• Pupils changing schools</li> </ul> <p>Carole Dixon reported that the MP is prioritising early years provision and will now be attending the Head Teachers meetings to effect an increase in nursery places for preschool children as a key driver to narrow the gap in educational attainment.</p> <p>Stuart reported that further information will be available when a full analysis has been completed and although not routinely undertaken, additional investigation work could drill down to specific areas if required.</p> <p>‘Churn’ remains an issue in Hastings. There is anecdotal evidence regarding children resident in Hastings travelling to out of town schools, this is something noted across the region as parents can perceive schools in rural areas as better performing.</p> <p>A number of bids have been submitted for the establishment of Free schools in the area including those focussing on special and additional needs. A decision on</p>	

	<p>these expressions of interest is awaited from the Department for Education.</p> <p>He welcomed the MP's intervention in early years provision as County have a responsibility to ensure there are sufficient places.</p>	
<b><u>4</u></b>	<p><b><u>SCCH OVERVIEW OF RESULTS, NEW APPRENTICESHIPS AND REVIEW OF POST 16 EDUCATION</u></b></p> <p>Clive Cooke reported on this year's attainment at SCCH. There many instances of above national average achievements in specific areas although a small number of A level subjects and GCSE achievements have been highlighted as requiring improvement. The College accepts responsibility for learning and teaching failings in these areas and commits to make improvements next year.</p> <p>The Board thanked Clive for the information.</p> <p>Clive Galbraith reflected that it is ten years since the inception of the town's Learning and Skills Group and questioned how the group's aspirations have been achieved in that time.</p> <p>Clive responded that the overall position is good although growth has been mainly in vocational training or apprenticeships. This is reflected in the improved educational results.</p> <p>The Board noted the high performance of students from poorer backgrounds and disadvantaged postcodes and the good choice of future pathways and employment rates for those graduating from academic studies and apprenticeships.</p>	
<b><u>5</u></b>	<p><b><u>HIGHER EDUCATION IN HASTINGS: RESEARCH PROJECT UPDATE</u></b></p> <p>Simon reported that the final report on higher education provision in the town from the BiGGAR consultants is expected very soon. This will first be presented at the Hastings and Bexhill Taskforce meeting before being released to the LSP Board for information and then made public.</p>	
<b><u>6</u></b>	<p><b><u>ANTI-POVERTY STRATEGY REFRESH</u></b></p> <p>Andrew Palmer presented the refreshed Anti-Poverty strategy which requires ratification by the LSP as owners of the document. The strategy prioritises education and employment, health inequalities and access to affordable housing. Instead of an associated action plan, a position statement will now come to the Board annually to inform them of progress over the previous twelve months including key performance data and action for the coming year.</p> <p>Mike Thompson pledged the support of Amicus Horizon, the strategy addresses some of their key concerns resulting from benefits reforms and Universal Credit implementation. Richard Watson also voiced the support of the CCG who are in the process of developing plans for the next three years to deliver health outcomes, reducing homelessness and poor quality housing will be instrumental in achieving these.</p> <p>Andrew confirmed the APS will link with other town wide policies to provide a comprehensive strategy to tackle inequality and deprivation. Further updates and key performance measures will be reported as appropriate.</p> <p><b>RESOLVED:</b> the Board unanimously voted to adopt the strategy.</p>	

<u>7</u>	<b><u>EXECUTIVE DELIVERY GROUP NOTES: 19 SEPTEMBER</u></b> To follow.	
<u>8</u>	<b><u>EAST SUSSEX STRATEGIC ASSEMBLY: 13 SEPTEMBER</u></b> To follow.	
<u>9</u>	<b><u>NEXT MEETING DATE: 30 JANUARY 2017</u></b>	

# Agenda Item 7



**Date of meeting:** 30 January 2017

**Title of report:**

- Wellbeing and Resilience in East Sussex, Annual Report of the Director of Public Health 2016/17 – Hastings specific findings
- Author: Cynthia Lyons, Director of Public Health, Victoria Spencer-Hughes, Consultant in Public Health

**Recommendation:**

Hastings LSP are recommended to **note** the Annual Report, and particularly;

- the importance of the association between wellbeing and resilience;
- that building and developing personal and community resilience has the potential to alleviate the pressure on health and social care when implemented at scale and as part of wider system transformation.
- The changes in Hastings between 2008 and 2015 specifically the increases in the proportion of people saying Hastings is a good place to live, having a sense of belonging and being able to influence decision making. Across East Sussex, including Hastings a decrease in the proportion of people who say their health is good or very good.

**Executive Summary:**

The 2014/15 Director of Public Health (DPH) Annual Report, *Growing Community Resilience in East Sussex* (<http://www.eastsussexjsna.org.uk/publichealthreports/previous>) focused on community members coming together to identify and use community resources and strengths, e.g. voluntary groups, local businesses, parks, buildings etc. to help influence change in their community, e.g. to remedy the impact of a problem, gain more control over their wellbeing and manage their health and care support needs.

The 2015/16 DPH Annual Report, *Strengthening Personal Resilience in East Sussex* built upon *Growing Community Resilience in East Sussex* (<http://www.eastsussexjsna.org.uk/publichealthreports/previous>) by focussing on the need to develop and strengthen personal resilience to underpin and support growing community resilience. It outlines some of the ways in which building personal resilience is being supported through programmes and services and encourages people to take greater ownership of their own health and wellbeing, be more resilient, increasingly independent, self-sufficient and resourceful thus better able to help themselves

It is important that the messaging for people and communities to help themselves is maintained and amplified so the 2016/17 DPH Annual Report builds on both the 2014/15 and 2015/16 Annual Reports and highlights the importance of the association between wellbeing and resilience.

**Wellbeing and Resilience in East Sussex, Annual Report of the Director of Public Health 2016/17** (<http://www.eastsussexjsna.org.uk/publichealthreports>)

By recognising the strengths or assets that everyone has a system can be designed which enables people to make the best of their own strengths, support others in their community to achieve their maximum potential, and working with communities ensure there is the right combination of formal and informal support. This includes new ways of working that ensure front line staff work proactively with the strengths and assets of local people such



as family, friends and local informal and formal support networks. Harnessing our joint efforts to achieve the shared goal of creating more resilient people and communities is essential in a climate of reducing resources and rising demand.

It is important that progress is monitored and success measured at a population level, as part of the personal and community resilience work stream, and this report is about that too.

The Director of Public Health Annual Report is organised into two distinct sections:

- The first section presents the rich information on personal and community resilience generated by a Community Survey for East Sussex. The Warwick-Edinburgh Mental Wellbeing Scale (WEMWBS) is a measure of mental wellbeing and the questions to generate WEMWBS scores were included in the survey so it can be used as a proxy measure of personal resilience, as wellbeing and resilience are constituents of positive mental health, and to develop a baseline to measure against over the next few years. See section 1 below for Hastings results.
- The second section uses the results from the Community Survey and the latest information from a variety of other sources to update and recalculate the Wellbeing and Resilient Measure (WARM), that was originally presented in the 2014/15 DPH Annual Report, to measure community resilience. It has been analysed and mapped it at local authority, electoral ward, clinical commissioning group and GP practice level to establish a baseline to measure against over the next few years. See section 2 below for Hastings results.

To inform delivery programmes and partnership working to support and strengthen personal and community resilience in East Sussex there are three recommendations in the Director of Public Health's Annual report:

1. The Community Survey is repeated in 2017 and 2019 to identify any changes in the areas included in this report and the WARM 2016 and WEMWBS scores.
2. Further more detailed work be undertaken to develop insight into the exceptional wards identified in this report (none in Hastings) – those with higher WEMWBS scores but fewer assets and those with lower WEMWBS scores and great assets, and learning that can inform developments elsewhere across the county, including Hastings.
3. Exploring 'patient activation'\* further and how it can be implemented to reduce health inequalities and support the general public and patient's ability to be involved in and engaged with decision making about their health, wellbeing, care and support.

\* Patient activation is a concept that describes the knowledge, skills and confidence a person has in managing their own health and health care.

## Hastings information in the Director of Public Health Annual Report

### 1. From the Community Survey

#### 1.1. Living in East Sussex – comparing results from 2008 with 2015

- **Satisfaction with Hastings as a place to live increased**
  - from 75% to 79% (agreeing very / fairly strongly)
  - Hastings had the biggest increase in ES, therefore closing the gap with

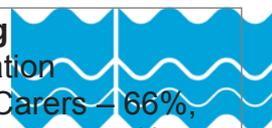


other D&B

- However, in 2015 some wards were still well about the East Sussex average for dissatisfaction with local area (6%): Tressell (24%); Central St Leonards (21%) and Baird (12%).
- Factors related to satisfaction with local area (p14) include: Being older >65 vs 16-34 years (88% vs 82%); being an owner occupier vs social tenant (88% vs 78%); having more qualifications NVQ level 4 or 5 vs no qualifications (89% vs 84%)
- **Sense of belonging increased in Hastings between 2008 and 2015**
  - From 57% to 63% said very / fairly strongly belong to their immediate neighbourhood (ES average 69%)
  - Wards with lower levels – Castle 55%; Hollington 54%; Gensing 53%; Central St Leonards 50%; Tressel 46%
- **Social Connectedness** (time with family and friends, barriers to leaving home, feeling lonely)
  - Loneliness – 29% of Hastings residents said they felt lonely often/ some of the time (ES 24%)
  - Wards with highest rates of loneliness – Central St Leonards (39%), Hollington (38%), Castle (36%) and Braybrooke (32%).
  - Biggest risk factors for loneliness (p24)
    - Worklessness (56% vs 18% in work)
    - Poor health (54% vs 17% in good health)
    - Social renting (47% and private renting 34% vs 18% owner occupier)
    - Disability 43% vs 18% of those without
    - LGBT 39% vs 22%
  - Barriers to leaving the home - more than 1 in 3 (35%) Hastings residents said there were barriers to leaving home. Higher than ES average 28%
  - Biggest barriers to leaving the home (p20) were reported as
    - Illness or disability (10%)
    - Financial circumstances / affordability (8%)
    - Fear of crime 8% (Hastings)
    - Cost of public transport 7% (Hastings)

## 1.2. Community Involvement and Volunteering

- **Increase in Hastings residents feeling able to influence decision making**
  - % of people who felt they could influence decision making increased from 25% in 2008 to 35% in 2015 (ES 27% to 38%)
  - Top three groups who feel more able to influence decisions (p27): BME residents 51%, Homemakers 45%, People aged over 65 45%
  - Wards with feelings of highest and lowest influence: Old Hastings ward 54% vs West St Leonards 27%
  - Around 29% of people in Hastings would like to be more involved in decision making
  - Majority say it depends on the issue
- **39% of Hastings residents involved in formal volunteering**
  - 39% of Hastings residents say they have done some formal volunteering in last 12 months (ES 46%, 28% on regular basis)
  - Three groups most likely to volunteer (p31) – Carers 58%, those with higher levels of education 54%, children in household 50%



- **48% of Hastings population involved in informal volunteering**
  - 48% of Hastings population vs 51% of East Sussex population
  - Three groups most likely to be informal volunteers (p 36): Carers – 66%, those with higher levels of education 56%, those *without* children 52%.
- **26% of population have caring responsibilities**
  - Lower in Hastings - 26% than the rest of East Sussex (27%)
  - Most likely to be carers (p39): Those aged 45-74 32%, those finding things difficult financially 31%, those with a disability themselves (30%)

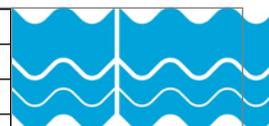
### 1.3. Health and Wellbeing

- **Self- assessed quality of health in Hastings decreased**
  - % saying good or very good decreased from 75% in 2008 to 63% in 2015
  - Similar findings across county – from 77% to 69% in same period
  - % saying bad or very bad increased from 4% to 7% (Hastings 10%)
  - No hard information yet on why this is, but to be explored
  - People over 65 less likely to report good/ very good health 54% vs 83% of 18-35s (p41)
  - Social tenants much more likely to report bad health 23% vs 4% of owner occupiers
  - Four wards in Hastings have higher proportion of residents reporting bad/ very bad health: Central St Leonards 17%, Hollington 17%, Silverhill and West St Leonards, both 14%
- **Health problems and disabilities**
  - 21% of respondents say day-to-day activities are limited by a condition which will last for more than 12 months
  - Highest rates (p44) in workless residents 75% vs 8% in work, 48% in social tenants vs 17% of owner occupiers
  - Central St Leonards 33% and Hollington 30% are the wards with the highest rates
- **Mental Wellbeing** (Warwick-Edinburgh Mental Wellbeing Scale)
  - Used as a proxy for personal resilience.
  - Scores can be from 14 (low wellbeing) to 70 (highest level of wellbeing)
  - Hastings average score of 48.5 slightly lower than East Sussex and England average of 50 but not low enough to be poor.
  - Age group with the highest average wellbeing score are the 65-74 year olds 51.5 and 18-24 year olds have the lowest 47.5
  - As might be expected people with more qualifications, owner occupiers and non-disabled residents all have higher wellbeing scores
  - Hastings wards with lower than average wellbeing scores (p47) were:
    - Tressell, lowest at 45.6, then Hollington, Central St Leonards, Castle, West St Leonards and Gensing with 47.7.

## 2. From the Wellbeing and Resilience Measure (WARM)

Measure published in 2010 and used to look at strengths – assets within a community or area, as well as vulnerabilities. Focuses on strengths and what people and areas have to use and build one.

Although reported on in the 2014 DPH Annual Report, it used findings from a 2008 survey. Not possible to directly compare all 2014 and 2016 domains, so 2016 will be used as a baseline for comparison against future years.



Domain	Component
SELF	Life satisfaction *
	Education *
	Health *
	Material wellbeing *
SUPPORT	Strong and stable families *
	Belonging
SYSTEMS AND STRUCTURES	Local economy
	Public Services
	Crime and anti-social behaviour *
	Infrastructure

- Hastings has the best average ranking across the county for public services and is a close second for local economy
- Hastings doing less well for all other areas with the worst ranking for six other domains (marked \*)

Work and activities informed by the DPH Annual reports

East Sussex Better Together Community Resilience  
Hastings and Rother CCG Inequalities Programme

Victoria Spencer-Hughes, Consultant in Public Health, East Sussex County Council

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# Agenda Item 9

## BATHING WATER QUALITY UPDATE FOR THE LSP - NOVEMBER 2016

**Mike Hepworth – Assistant Director Environment and Place with Hastings Borough Council.**

This successful multi-agency project resulted in the bathing water at Pelham being classed as good, and St Leonards as excellent at the end of the 2015 season.

Over winter Southern Water Services(SWS) continued to survey their infra-structure in the borough, particularly on the Eastern side draining into the Ore Stream.

Since last winter the Environment Agency(EA) have experimented with the deployment of continuous in situ monitoring devices, to help identify more sources of pollution.

As the main project resources essentially ended at the end of March, since then there has only been a limited amount of work between the Council's environmental health team, Southern Water and the Environment Agency, identifying and seeking to resolve more missed connections. The Council also completed the final phase of sustainable urban drainage works within the Alexandra Park stream and pond system.

Given that the results for last summer were good, and that there was more work over the autumn and winter, we were hopeful that we might experience even better water quality in years to come. In the circumstances, the justification for an engineering solution such as a long sea outfall is far less than it might have been, and this idea is not currently being actively pursued.

On Tuesday 8<sup>th</sup> November the results for the 2016 season were announced, and the 2 Hastings bathing waters retained their good and excellent classifications. The Hastings Bathing Water Quality Executive Group meets on the 23<sup>rd</sup> November to discuss the latest results and what if anything more can be done to safeguard the position for the future.

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East Sussex Assembly 2016  
13 September 2016, International Tennis Centre, Eastbourne

## CONFERENCE REPORT

### RECOMMENDATIONS

The ESSP is recommended to:

1. Note the content of the presentations given to the Assembly;
2. Note the pledges made by organisations and individuals that attended the Assembly; and
3. Note the feedback and suggestions for next year's Assembly theme.

### BACKGROUND

The East Sussex Assembly meets once a year and focuses on a topic that is of interest to Assembly members and wider partners. This year around 55 delegates attended from organisations across the public and voluntary and community sectors to discuss the topic of mental health. The theme of mental health was selected from a list of recommendations made by Assembly members at last year's conference.

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## S1. INTRODUCTION

The East Sussex Strategic Partnership's (ESSP) Pride of Place strategy includes the priority 'to protect and improve health and wellbeing and reduce health inequalities in East Sussex'. One of the key tasks set out to deliver this priority is to: 'enable people to manage and maintain their mental health and wellbeing so that they and their carers are able to manage their condition better and maintain their physical health.'

The East Sussex Mental Health Directory of Community Support ([www.eastsussex.gov.uk/socialcare/healthadvice/mental-health/directory](http://www.eastsussex.gov.uk/socialcare/healthadvice/mental-health/directory)) recognises the impact that physical and mental health have on one another, and the importance of taking care of both to ensure personal wellbeing. The Directory also outlines the array of projects and services that are currently being delivered by public and voluntary and community sector organisations across East Sussex to support residents with mental health conditions and generally improve the mental health and wellbeing of residents.

The 2016 Assembly offered an opportunity for these organisations and projects to share information about the work they are doing, in particular to support vulnerable people and those with multiple and complex needs. Service providers and service users attended to learn about existing East Sussex services and consider ways that services could work more effectively in partnership.

As the ESSP membership includes major public sector employers and other leaders within their sectors the event was also felt to be a useful opportunity to examine the contribution that could be made to support those with mental health issues and combat the stigma and discrimination which are, regrettably, still associated with this issue.

## S2. ASSEMBLY ITEMS

Nazeya Hussain, Director of Regeneration & Planning at Eastbourne Borough Council, opened the Assembly by welcoming attendees to the International Tennis Centre and providing an overview of planned local regeneration work. ESSP Chair Steve Manwaring then welcomed everyone to the Assembly and explained why mental health had been chosen as the 2016 Assembly theme.

### 2.1 Overview of East Sussex Mental Health Services

#### 2.1.1 Sussex Partnership NHS Foundation Trust

Following Steve Manwaring's introduction, Dr Mokhtar Isaac from Sussex Partnership NHS Foundation Trust, gave a presentation which provided an overview of mental health services in East Sussex, and outlined the Trust's strategy to 2020.

Dr Isaac set out Sussex Partnership NHS Foundation Trust's:

- Vision for 2020 – 'to provide outstanding care and treatment patients can be confident in';
- Purpose for 2020 – 'to work with patients, support their recovery, and provide them with the care and treatment they need when they need it'; and
- the five Goals the Trust aims to meet by 2020 –
  1. Safe, effective, quality care
  2. Local, joined up patient care

3. Put research, innovation and learning into practice
4. Be the provider, employer and partner of choice
5. Live within our means.

Over 400 staff work for the Trust, delivering adult mental health services, children and adolescent mental health services, learning disability services and forensic services in East Sussex. The Trust also has close working relationships and service delivery arrangements with Local Authorities, community providers and the ambulance and police services.

As part of the presentation, Dr Isaac covered the make-up of the East Sussex population that the Trust delivers services to, highlighting the high proportion of residents over 65. Dr Isaac also covered GP reported prevalence of mental health disorders: across the whole of East Sussex reported prevalence of mental health disorders is 10 per 1000 population. Prevalence is highest in West Hastings where 16 per 1000 population have a reported mental health disorder.

For further information about the services provided by Sussex Partnership NHS Foundation Trust please access their website at [www.sussexpartnership.nhs.uk](http://www.sussexpartnership.nhs.uk)

### **2.1.2 Healthwatch**

Phil Hale, a volunteer for Healthwatch East Sussex (HWES), followed Dr Isaac with a presentation on patients' views and perspectives of mental health provision in East Sussex.

The first part of the presentation outlined the feedback on mental health services that Healthwatch have received from patients. HWES conducted five mental health listening events around East Sussex between December 2013 and February 2014. Findings from the listening events were published in a report in July 2014, which recommended that further reviews were undertaken to consider patients' experiences of using the Mental Healthline and Children and Adolescent Mental Health Services (CAMHs).

The results of these reviews were published in two reports in August 2015.<sup>1</sup> The main themes in the findings of the review were:

- consideration should be given to how CAMHs waiting times could be reduced - the overwhelming view of the CAMHs service in August 2015 was that the service was very good but waiting times were too long (on average 18 weeks);
- the Mental Healthline should work on managing expectations of the level of support that could be provided for individuals via a telephone services; and
- calls to the Mental Healthline were time limited and of variable quality.

HWES collected further feedback about mental health services in July 2016 and found that since the listening events were first conducted in 2013/14:

- fewer individuals in crisis are directly contacting HWES with concerns about local services;
- however, some individuals are still experiencing difficulties access support when in crisis;
- there are examples of individuals in the community wanting to assist fellow residents but encountering problems when trying to access professional support;

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<sup>1</sup> All Healthwatch East Sussex reports can be accessed at ([www.healthwatcheastsussex.co.uk/our-work/our-reports](http://www.healthwatcheastsussex.co.uk/our-work/our-reports))

- information and education about mental health has improved; and
- concerns have emerged around older people experiencing social isolation, whether they live in the community or in care homes.

The second part of the presentation considered how HWES can work in partnership with other organisations to support and improve the lives of people with mental health problems. HWES plan to continue to gather independent views and feedback from local people, make those views known to partners to achieve service improvements, and take part in discussions through mechanisms such as the Mental Health Partnership Board, bi-monthly meetings with the Care Quality Commission and feeding into future local and national publications.

For further information about Healthwatch East Sussex's work to capture patients' experience of mental health services please contact Elizabeth Mackie at [liz.mackie@escv.org.uk](mailto:liz.mackie@escv.org.uk)

## 2.2 Table Top Exercise

Following the introductory presentation on East Sussex Mental Health Services, attendees took part in a table-top exercise. The exercise involved attendees reading a scenario and then considering: if they, or another person from their organisation, came into contact with the scenario, what could they do to assist the person? Participants were encouraged to consider whether they would assist by referring the person to another service, or work in partnership with another organisation.

Each table considered one of the following scenarios:

**Scenario 1:** *M is an ex-offender who is living with his girlfriend in social housing but the relationship is breaking down and he is at risk of homelessness. He has limited qualifications and no job. He is diagnosed with schizophrenia and has problems with substance misuse. He has diabetes, which is not under control.*

**Scenario 2:** *S is a newly qualified social worker who often works alone and depends on her car to reach appointments. S has recently been diagnosed with epilepsy and is struggling to come to terms with the diagnosis, which is preventing her from driving and working alone. S is currently continuing to carry out the office-based aspects of her work, but is showing signs of depression.*

**Scenario 3:** *You come into contact with a person unknown to you who is in crisis and verbalising suicidal intentions.*

**Scenario 4:** *T is an 89 year old living in his own home in a small village. His wife died 3 years ago and T is becoming increasingly isolated as it was his wife who held a driving licence and organised social activities. T relies on the local shop for all of his needs. Aside from speaking to the cashier, T hasn't seen or spoken to anyone else in 5 weeks.*

**Scenario 5:** *D is L's line manager. D knows that L is currently experiencing money problems and is at risk of redundancy. D has spoken to L, who says she's fine but D has noticed unusual behaviour, such as missing deadlines, arriving at work late and being short tempered with colleagues and clients.*

**Scenario 6:** *P was attacked a year ago in a local park that she has to walk through every day to get to work. P had counselling and support after the incident but 2 months ago had a panic attack in the park and is now walking an extra 20 minutes to work every day to avoid walking through the park.*

**Scenario 7:** *N is a 65 year old male, who has previously experienced health anxiety. His wife S has noticed that he is becoming forgetful but is concerned about raising the issue with him for fear of triggering his health anxiety. However, P is increasingly concerned for her and N's safety following an incident where the fire service was called when N left cooking food unattended in the kitchen which caught alight.*

**Scenario 8:** *B is a single mother of two teenage boys. One of her sons, S, is being bullied at school and has become withdrawn. B has seen evidence that S is self-harming.*

After discussing a scenario, each table then fed-back to the Assembly how they would work to assist the person in question. All tables fed back that more than one organisation or service would interact with or assist the person in their scenario, and during the exercise many participants discovered new services they could sign-post service users to the future.

A contact list (attached as Appendix 1) was then circulated, containing details of organisations in East Sussex that could be useful to contact when dealing with the issues and situations discussed during the exercise.

## **2.3 Presentations**

Following the Table Top Exercise, attendees had an opportunity to network and view market place stands from the following voluntary and community sector organisations delivering mental health services in East Sussex:

- Alzheimer's Society
- Counselling Partnership – Support for survivors of suicide
- East Sussex Recovery College
- HealthWatch East Sussex
- High Weald Lewes and Havens CCG
- Icepro
- i-Rock
- Mind in Brighton & Hove
- Southdown Housing
- Sussex Oakleaf Wellbeing Centres

The Assembly then received presentations from projects in East Sussex that are delivering services for vulnerable residents or those with multiple and complex needs.

### **2.3.1 Sussex Police**

Sarah Gates from Sussex Police gave a presentation on the Street Triage initiative to support people in crisis, delivered by Sussex Police in partnership with Sussex Partnership NHS Foundation Trust.

Street Triage began as a national pilot in 2013, funded jointly by the Department of Health and the Home Office. Sussex Police was one of four forces selected to run the pilot. The project was first rolled out in Eastbourne in October 2013 and, due to the success of the pilot, funding was extended to April 2017 and the project geography was expanded to incorporate Hastings.

The Street Triage project involves clinical mental health staff accompanying police officers to emergency mental health incidents. These clinical staff help officers decide the best option for individuals in crisis by:

- offering professional advice on the spot;
- accessing health information systems;
- identifying the right kind of support required for individuals; and
- helping to liaise with and access other care services.

The aim of the project is to achieve earlier, timely intervention that can prevent future escalation, reduce Mental Health Act (1983) s136 detentions and, reduce the number of patients being detained in police custody.

The success of the project is primarily exemplified in the reduction in s136 detentions, which have reduced by over a third in East Sussex in the same period that other police forces have seen an increase in detentions. Other figures from the project include:

	Eastbourne	Hastings
People referred	2030	1021
People assessed	1421	625
People detained under s136	135	42
S136 avoided	484	124
People arrested	55	42
Busiest day	Sunday	Thursday
Gender	50/50 split	More men than women
Age range	10-92 years	10-91 years

The benefits of the project have been:

- services have been moved into the community at the point of crisis;
- focus has been places on preventing the escalation of a situation;
- GPs have been provided with the details of each patient intervention;
- partnership working between health services and police officers has improved;
- understanding of mental health by the police has improved; and
- commitments made within the Mental Health Crisis Care Concordat have been delivered.

Sarah also provided anecdotal evidence of the benefits that the project has had on individuals, such as that a suicidal male who had previously been detained up to three times a week has not been detained once since the project has been rolled out.

Street Triage is funded in Eastbourne and Hastings to the end of March 2017, and local consideration is being given to exploring ways to fill gaps where Street Triage is not able to deliver.

For further information about the Street Triage project please contact Sarah Gates at [Sarah.Gates@sussex.pnn.police.uk](mailto:Sarah.Gates@sussex.pnn.police.uk)

### **2.3.2 Fulfilling Lives Project**

Jo Rogers and Eleanor Busby from Brighton Housing Trust gave a presentation on the Fulfilling Lives Project.

The South East Fulfilling Lives Project operates across Brighton & Hove, Eastbourne and Hastings and is one of twelve projects nationally funded for eight years by the Big Lottery Fund. The project aims to support people with multiple and complex needs (such as mental ill health, homelessness, drug and alcohol misuse and offending) and build evidence of more effective and efficient ways for designing, commissioning and delivering support services for this group.

Each local team in Brighton & Hove, Eastbourne and Hastings is made up of two frontline specialist workers and a Service Improvement Officer who focuses on systems change, overseen by an area lead. Each team undertake new interventions, pilots, or ways of working with the client group and Service Improvement Officers then review and redesign systems.

The project has three overarching outcomes it aims to achieve:

#### 1. It will change lives

The aim is that individuals experiencing multiple and complex needs will benefit through better established partnerships and networks. So far the project has worked with 54 clients. Work with each client is characterised by three key principles:

- trauma informed care – 100% of clients have experienced trauma during childhood and an awareness of this is essential in building supportive relationships;
- assertive outreach – ensuring frequent engagement, offering clients a mobile phone, practical support, persistent and non-judgemental support; and
- case coordination of care and support – integrated and reinvigorated multi-agency working around an individual's complex needs.

Some of the outcomes that have been achieved through this work include reduced drug and alcohol use, reduced offending and re-established contact with family.

#### 2. It will change systems

It is expected evidence will be produced showing which elements of the programme are effective, and that local and national decision-makers will then be encouraged to review and adopt these elements where appropriate. So far in the project, specialist workers working with clients have witnessed system failures which they will be able to turn into case studies to highlight and influence the need for change. The changes that are proposed are verified and tested by people with lived experiences.

To date, the System and Service Review process has led to action plans for the following improvements being agreed:

- improving access to recovery groups by providing satellites in other services in Eastbourne;
- improving awareness of services available by creating a homeless map and service directory in Eastbourne;
- reviewing the local implementation of Severe Weather Emergency protocols for rough sleepers in Hastings;
- training on multiple and complex needs for ward staff in Millview hospital Brighton; and

- information sharing and joint care planning between hostels and substance misuse services in Brighton.

### 3. It will involve beneficiaries

The aim is that both positive changes to individuals and system change will be underpinned by the collaborative involvement of individuals with lived experience. Project Consultants are roles within the project, open to service users, which provide a route into employment. To date, 11 Project Consultants have moved onto other employment. In addition to employment opportunities, service users are represented at all levels of governance within the project and are involved in the staff and delivery teams recruitment process. As part of the presentation, Eleanor Busby, a Project Consultant, provided an account of her experiences with Fulfilling Lives.

Finally, Jo outlined the next phase of the project. Years 1 and 2 of the project focused on building the project's local profile, implementation and service delivery. Now moving into year 3 and 4, the focus will be on building momentum for systems change and taking the model of effective service user involvement to external forums. Over the next few months, the Fulfilling Lives Project will hold a number of learning events which will be publicised locally, where they hope to work with new organisations and form new partnerships.

For further information about the Fulfilling Lives Project please contact Jo Rogers at [jo.rogers@bht.org.uk](mailto:jo.rogers@bht.org.uk)

### **2.3.3 Sussex Recovery College**

Debbie Rimmer and Karen Swain from Sussex Partnership NHS Foundation Trust gave a presentation on the Sussex Recovery College.

The Sussex Recovery College offers educational courses about mental health and recovery which are designed to increase knowledge and skills and promote self-management. The Recovery College is not a substitute for traditional assessment and treatment services, but it does compliment them, and it is also not a substitute for mainstream colleges, although it can provide a route onto mainstream education. Sussex Recovery College have campuses in East Sussex, Brighton & Hove and West Sussex and work in partnership with organisations such as Sussex Wildlife Trust and Sussex Downs College to deliver courses.

In the Recovery College setting, a service user or patient becomes a student, they make a choice of course from a prospectus instead of a referral or prescription, therapists are trainers or teachers and instead of being discharged, students graduate with a certificate to recognise achievement. Examples of courses provided by the Recovery College include Understanding Psychosis, Coping with Anxiety or Managing Depression, Finding Happiness, and Work for Wellbeing.

In 2015, 85% of Recovery College students improved their knowledge and/or skills moderately or a great deal and 97% said they were likely or extremely likely to recommend the course to others. 95% of students met personal goals and course learning outcomes. When asked about the course they undertook with the Recovery College, students said:

*'I feel more able to take control of my own recovery'*

*'It was the equality, learning from peer trainers and professionals that helped'*  
*'Thanks to the Recovery College I have got my sister back'*  
*'It was helpful to learn techniques to help me manage my anxiety'*  
*'I also made so many friends. I feel included, not alone.'*

For further information about the Sussex Recovery College please contact Debbie Rimmer at [Debbie.rimmer@sussexpartnership.nhs.uk](mailto:Debbie.rimmer@sussexpartnership.nhs.uk)

## 2.4 Pledge

At the end of the Assembly, attendees were asked to make two pledges to encourage the application of learning from the conference. First, attendees were asked to consider ways they could maintain and/or improve their own personal mental health. Themes in the pledges made include exercising more, spending more time in nature, battling stigma around mental health, undertaking self-care, practicing mindfulness, connecting with others and striking a work life balance.

### ***To maintain and/or improve my personal mental health I pledge to...***

- 'take time to do some exercise.'
- 'keep active.'
- 'look after my wellbeing – do more exercise.'
- 'find more time to walk in the woods and kick the leaves.'
- 'walk along the seafront at least 4 times per week.'
- 'meditate more often.'
- 'walk in the countryside.'
- 'ask for help when I need it.'
- 'make more time for me.'
- 'be kind to myself and my family more. Focus on things that are important in the bigger picture – don't sweat the small stuff!'
- 'continue to fight against stigma and value my recovery.'
- 'always be honest and open about how I'm feeling and encourage others to do the same.'
- 'share knowledge about wellbeing and reduce stigma about mental health.'
- 'practice daily mindfulness.'
- 'continue to think and reflect on mindfulness in order to balance my work and home life and ensure I stay well and happy.'
- 'investigate mindfulness more. I can live too much in the future and past and not appreciate the here and now.'
- 'practice mindfulness.'
- 'have a cut off time for checking emails and working in the evenings.'
- 'use my 'out of office' properly when I'm on annual leave.'
- 'connect more effectively.'
- 'keep getting involved with others.'
- 'be more open to new ideas from individuals.'

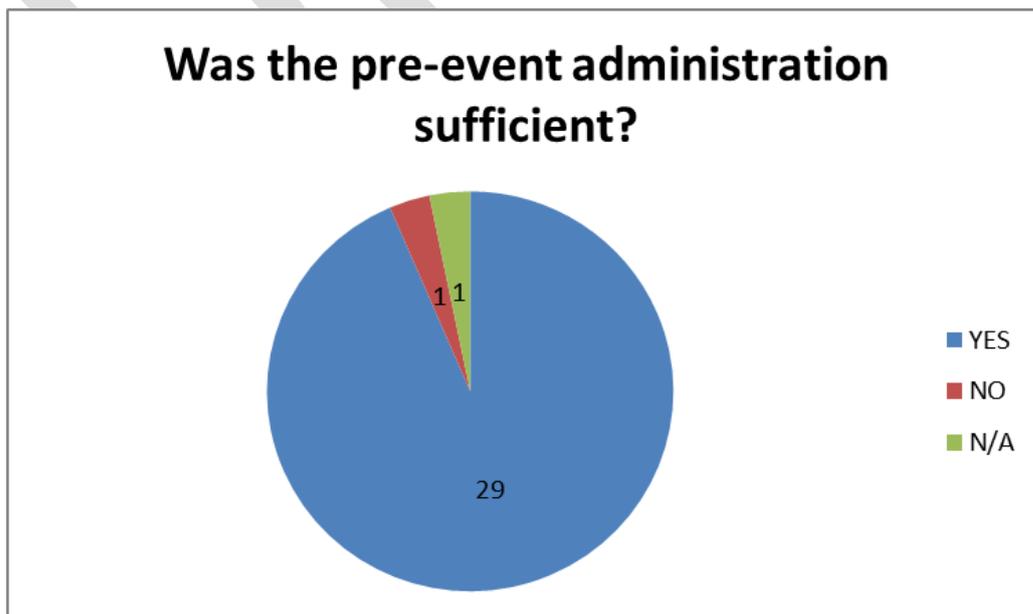
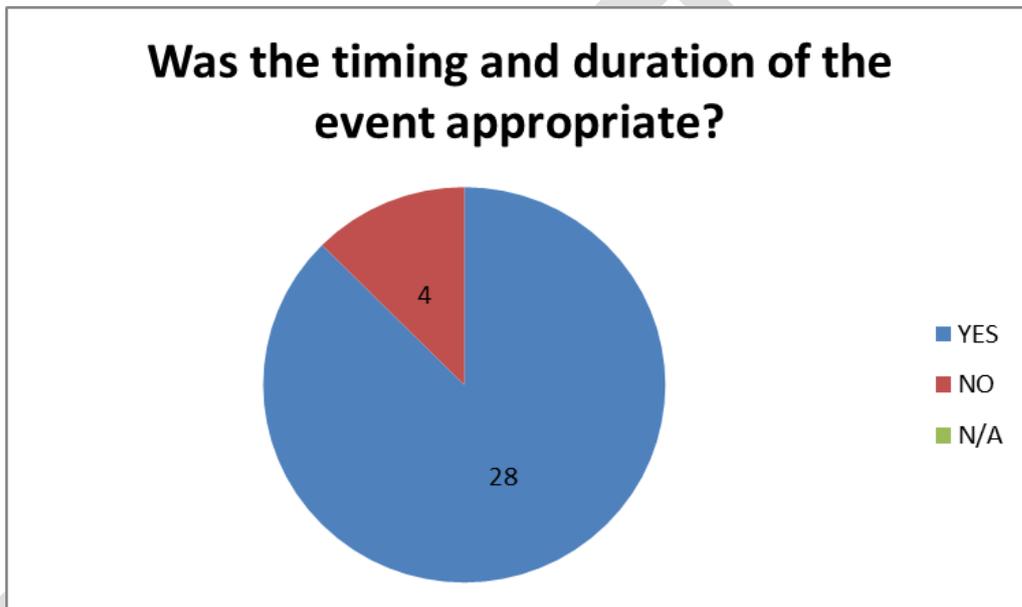
Attendees were then asked to consider things they could do in their organisation to maintain and/or improve the mental health of others. Some made pledges to help their colleagues, whereas others considered how the work their organisations were delivering could help those living in the community with mental health problems. Themes in the pledges made by attendees included working with partners, signposting to services and sharing information, and listening and talking openly about mental health with colleagues.

<b><i>To maintain and/or improve others' mental health within my organisation I pledge to...</i></b>
<p><b>Pledges to support colleagues</b></p> <ul style="list-style-type: none"> <li>• 'develop and strengthen the staff wellbeing work we have already begun.'</li> <li>• 'be more open about my experiences with a mental health condition.'</li> <li>• 'take time to talk to colleagues and volunteers about how they are.'</li> <li>• 'have a cup of tea and chat to others at work.'</li> <li>• 'listen to my colleagues and talk through difficult cases with them.'</li> <li>• 'keep effective team supervision at the top of the agenda across my organisation.'</li> <li>• 'continue to work with others to enable all colleagues to better understand mental health generally.'</li> <li>• 'champion good work/life balance to support our team to care for themselves.'</li> <li>• 'work to deliver our wellbeing strategy to enable staff to discuss wellbeing issues.'</li> </ul>
<p><b>Pledges to support service users</b></p> <ul style="list-style-type: none"> <li>• 'improve signposting to the range of services and access routes I learnt about today... sharing them with our officer and Member mental health champions and contact centre staff.'</li> <li>• 'cascading information from today regarding support services.'</li> <li>• 'signpost staff and claimants to a range of East Sussex Mental Health services.'</li> <li>• 'ensure councillors are aware of our mental health champion and can signpost residents when needed.'</li> <li>• 'encourage the fuller integration of services to include mental health as part of East Sussex Better Together.'</li> <li>• 'build on partnerships already there to provide better linked up services.'</li> <li>• 'continue to list and offer support as necessary.'</li> <li>• 'make East Sussex Fire and Rescue Service a Dementia friendly organisation and improve the understanding of mental health more widely.'</li> <li>• 'improve the health, safety and wellbeing of vulnerable members of the community.'</li> <li>• 'learn how to access hard to reach groups to receive health and social care feedback.'</li> <li>• 'carry on supporting clients.'</li> <li>• 'continue developing Recovery College courses and supporting its progress.'</li> <li>• 'identify and attend mental health partnership meetings to represent dementia.'</li> <li>• 'ensure that leaflets on suicide prevention information are distributed more widely in East Sussex.'</li> <li>• 'continue to ensure that clients are central to service delivery.'</li> </ul>

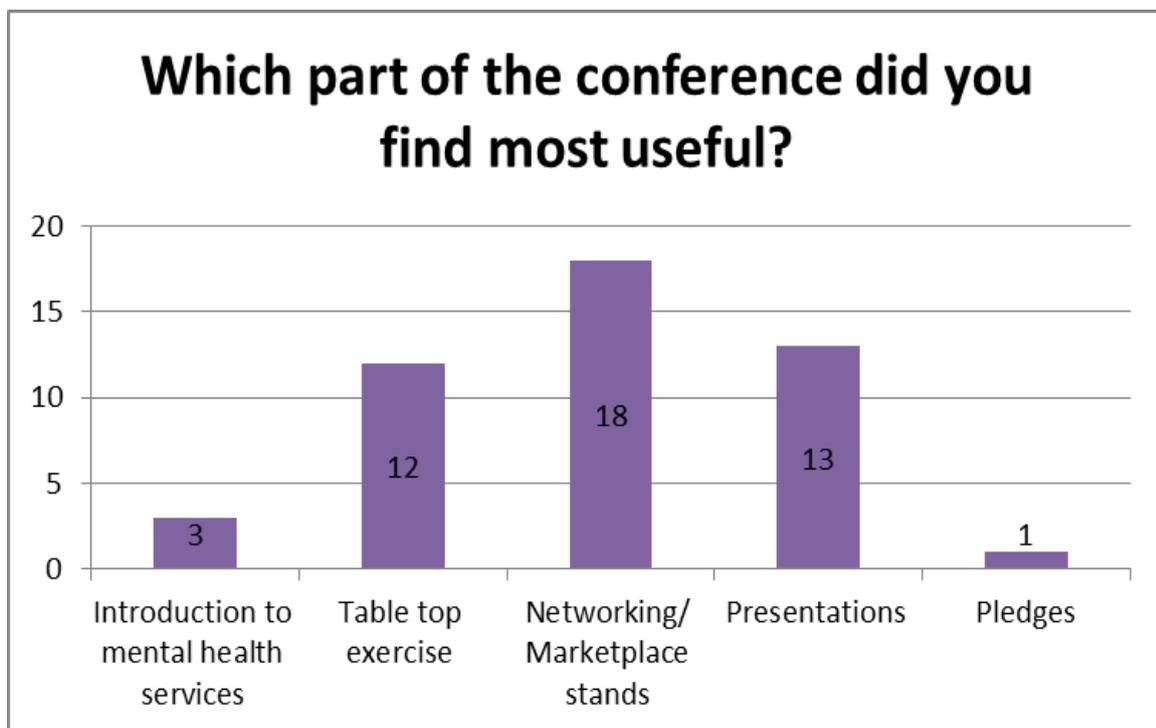
### S3. FEEDBACK

At the end of the conference all delegates were provided with an event feedback form. The following results are based on the 32 completed forms returned by attendees at the Assembly.

	Yes	No
Did the conference meet your expectations?	100%	-
Was the content appropriate?	100%	-



Attendees were asked which part of the Assembly they found most useful. Most participants found the opportunity to network and view marketplace stands particularly useful. One respondent said they found the networking segment an opportunity to make good contacts and share information on the important work their organisation is doing. Others said they found the table top exercise particularly useful, especially the opportunity to learn from other providers, consider partnership working in practice and and gain a list of contacts.



Attendees were also asked which part of the conference they found least useful. The majority of respondents found the whole Assembly useful, while others gave the following suggestions for improvement:

- Shorter, less detailed presentations
- Presentations from projects that cover the entire geography of East Sussex
- More time for networking and viewing marketplace stands
- More opportunities to interact with speakers

Overall, the evaluation forms found that attendees regarded the content of the event appropriate, informative, and useful. We will continue to ensure that content is relevant to organisations invited to future events. Attendees' suggestions for next year's focus will be considered when planning the 2017 Assembly. The suggestions were:

- Loneliness
- Road Safety
- Business Opportunities
- Partnership Working
- Housing and Homelessness
- Rural Access and Service Provision

- Sustainable Funding
- Employability and Skills
- Children and Young People
- Carers
- Volunteering
- Disability
- Public Sector Funding
- Later Life Wellbeing

## RECOMMENDATIONS

1. Note the content of the presentations given to the Assembly;
2. Note the pledges made by organisations that attended the Assembly; and
3. Note the feedback and suggestions for next year's Assembly theme.

## NEXT STEPS

Consider how ESSP can best support organisations delivering mental health services and support for residents of East Sussex.

### Contact:

Sarah Feather

01273 335712

[Sarah.Feather@eastsussex.gov.uk](mailto:Sarah.Feather@eastsussex.gov.uk)

C6E, County Hall, East Sussex County Council  
St. Anne's Crescent, Lewes, BN71UE

Below is a list of contacts that could be useful when dealing with the issues and situations covered in this exercise.

For further information about these services, or other mental health services in East Sussex, go to [www.eastsussex1space.co.uk](http://www.eastsussex1space.co.uk) or see the East Sussex mental health directory: [www.eastsussex.gov.uk/socialcare/healthadvice/mental-health/directory](http://www.eastsussex.gov.uk/socialcare/healthadvice/mental-health/directory)

### Mental and Physical Health Conditions

Anyone with concerns about their physical or mental health should visit their GP to discuss treatment and further referrals. Alternatively they can visit the Eastbourne (T: 01323 726650) or Hastings (T: 01424 884410) walk in centres.

The following services provide counselling, other tailored support and recovery options for people with mental health conditions:

- **Health in Mind** T: 03000 030130 E: [spnt.healthinmind@nhs.net](mailto:spnt.healthinmind@nhs.net) W: [www.healthinmind.org.uk](http://www.healthinmind.org.uk)
- **Sussex Oakleaf Wellbeing Centres** W: [www.eastsussex1space.co.uk/Services/1408](http://www.eastsussex1space.co.uk/Services/1408)
- **Together Wellbeing Centres** W: [www.eastsussex1space.co.uk/Services/1431](http://www.eastsussex1space.co.uk/Services/1431)
- **Counselling Plus** T: 01424 428300 E: [admin@counsellingplus.org](mailto:admin@counsellingplus.org)
- **East Sussex Recovery College** T: 0300 303 8086 E: [enquiries@sussexrecoverycollege.org.uk](mailto:enquiries@sussexrecoverycollege.org.uk)
- **Recovery Partners** T: 07960 122525 E: [l.desai@recovery-partners.co.uk](mailto:l.desai@recovery-partners.co.uk)

**Alzheimer's Society** provide information and practical and emotional support to help people living with dementia T: 01424 773687 E: [east.sussex@alzheimers.org.uk](mailto:east.sussex@alzheimers.org.uk)

**i-Rock** provide a drop-in service for people aged 14-25 in Hastings that want to discuss their mental health and emotional wellbeing E: [viki.ashby@sussexpartnership.nhs.uk](mailto:viki.ashby@sussexpartnership.nhs.uk)

The **Sussex Mental Healthline** telephone service provides support and information to anyone experiencing mental health problems. The service is also available to carers and healthcare professionals T: 0300 5000 101

### Mental Health Crisis and Suicide

**Mind's** website ([www.mind.org.uk](http://www.mind.org.uk)) provides a range of information on services available to resolve, or support someone in, a mental health crisis:

Crisis service	Situations where this service can help
A&E	Immediate medical help is required – if a person in crisis might act on suicidal thoughts, or is harmed and needs urgent medical attention
Emergency GP appointments	Urgent support is required but there no immediate danger to their safety or the safety of others
Listening services	Helplines for people in crisis that need to talk to someone right away about how they're feeling: <b>Samaritans</b> - T: 116 123 (24 hours per day, 365 days a year) <b>SANEline</b> - T: 0300 304 7000 (6pm-11pm, 365 days a year) <b>CALM</b> - T: 0800 585858 (5pm-midnight, 365 days a year) <b>Switchboard</b> (LGBT+ helpline) – T: 0300 330 0630 (10am-11pm, 365 days a year)

Mind also offer an online service for anyone experiencing a mental health crisis that can be accessed at [www.mind.org.uk/i-need-urgent-help](http://www.mind.org.uk/i-need-urgent-help), which provides on the spot information on where to go and who to speak to in a crisis.

**Grassroots Suicide Prevention** provide training courses on Suicide Prevention, as well as Mental Health First Aid and Mental Health Awareness W: [www.prevent-suicide.org.uk](http://www.prevent-suicide.org.uk), E: [office@prevent-suicide.org.uk](mailto:office@prevent-suicide.org.uk)

**Counselling Plus** provide support for people affected by suicide or attempted suicide, including families, carers, friends and colleagues T: 01273 519108 W: [Sharon@sussexcommunity.org.uk](mailto:Sharon@sussexcommunity.org.uk)

### Debt and Money Advice

Local **Citizen's Advice Bureau's** provide advice on money and benefits, housing, and relationships. T: 03444 111444 W: [www.eastsussexcab.co.uk](http://www.eastsussexcab.co.uk)

**The Welfare Benefit Helpline** provides information for people to help understand the changes to benefits and welfare reform T: 0333 344 0681 Please note that this service is only available within the Hastings and Rother Clinical Commissioning Group (CCG) area and the Eastbourne, Hailsham and Seaford CCG area.

**Discretionary East Sussex Support Scheme** provides emergency help in certain situations. The scheme does not provide cash or loans but may provide the food, utilities or household items that a person may need. T: 0300 330 94 94 E: [desss@eastsussex.gov.uk](mailto:desss@eastsussex.gov.uk)

### Offending Rehabilitation

**Kent, Surrey and Sussex Community Rehabilitation Company (Seotec)** deliver a range of rehabilitation services W: <http://ksscrc.co.uk/contact-us>

**Sussex Pathways** is a social mentoring scheme that trains volunteers to empower offenders to make positive life choices by supporting their resettlement into the community T: 01273 468160 E: [sussexpathways@googlemail.com](mailto:sussexpathways@googlemail.com)

**Reaching your Potential (RYP)**, delivered by Sussex Central YMCA, help assist youth offenders in re-joining the community T: 01273 222550 E: [website@sussexcentralymca.org.uk](mailto:website@sussexcentralymca.org.uk)

### Homelessness

**Brighton Housing Trust** provide a comprehensive range of services to meet the needs of homeless, insecurely housed and vulnerable men and women T: 01273 645400 W: [www.bht.org.uk](http://www.bht.org.uk)

**Southdown Housing** deliver HomeWorks a service for people aged 16-64 that are homeless or at risk of homelessness T: 01273 898700 E: [referrals@home-works.org.uk](mailto:referrals@home-works.org.uk)

**Eastbourne Homes** deliver STEPS, which provides short term support for people 65 or over at risk of homeless, already homeless, or living in poor quality or unsuitable accommodation W: [www.eastbournehomes.org.uk](http://www.eastbournehomes.org.uk)

**Shared Lives** provides accommodation-based support to enable a range of people, including ex-offenders to live their life to the full in their communities T: 01323 747415 E: [matt.holmes@eastsussex.gov.uk](mailto:matt.holmes@eastsussex.gov.uk)

### Substance Misuse

**Support and Treatment for Adults in Recovery (STAR)** – East Sussex's Drug and Alcohol Service can be used by anyone who is concerned about their or someone else's drinking or use of drugs T: 0300 303 8160 W: [www.thinkdrinkdrugs.co.uk](http://www.thinkdrinkdrugs.co.uk)

**Coastal Wellbeing** offer Wellness Recovery Action Plan courses for people who are thinking about stopping their drug or alcohol use T: 07507 734 370 W: [www.coastalwellbeing.co.uk](http://www.coastalwellbeing.co.uk)

### Skills

**Horizons Community Learning** offer a range of free vocational and non-vocational qualifications, CV advice, and volunteering and work experience opportunities for people of all ages T: 01424 204136 E: [horizonscourseenquiries@gmail.com](mailto:horizonscourseenquiries@gmail.com)

**Southdown Housing** provide one-to-one support to gain and retain employment T:01273 405822 E: [i.kirby@southdownhousing.org](mailto:i.kirby@southdownhousing.org). **Southdown Housing** also provide support for people

with mental health needs and people with Autism and mental health needs to take part in community activities to develop existing and new skills T: 01273 749500 E: [c.links@southdownhousing.org](mailto:c.links@southdownhousing.org)

**Diversity Resource International** offer life coaching and mentoring to help people from migrant and culturally diverse communities develop the skills and confidence they need to achieve their goal W: [www.dricic.org/contact-us](http://www.dricic.org/contact-us)

### **Bullying**

**East Sussex Czone** (<https://czone.eastsussex.gov.uk>) and **Connexions 360** ([www.c360.org.uk](http://www.c360.org.uk)) have extensive advice on what to do if a child you know is being bullied

### **Social isolation**

**East Sussex Fire and Rescue Service** provide home safety visits to vulnerable households at risk of fire T: 0800 177 7069 W: [www.esfrs.org/your-safety/home-safety-visits](http://www.esfrs.org/your-safety/home-safety-visits)

**3VA provide Health and Wellbeing Visits** to vulnerable older people that face social exclusion to reduce health inequalities and increase life expectancy T: 01323 462437 E: [info@healthandwellbeingproject.org](mailto:info@healthandwellbeingproject.org)

**The Links Project** is a multi-agency partnership that provides a weekly drop in offering support and advice for the excluded BME population living in Hastings and Rother T: 01424 444010 E: [marc@hvauk.org](mailto:marc@hvauk.org)

### **Relationships**

**Relate Sussex** provide a range of counselling services to people going through a difficult time in their relationship T: 01273 697997 E: [reception@brightonrelate.org.uk](mailto:reception@brightonrelate.org.uk)

### **Disability and Carers**

**Support Empower Advocate Promote Advocacy (seAp)** provide c-App, a web based app providing guidance, advice and support for people undergoing ESA and PIP medical assessments w: [www.c-app.org.uk](http://www.c-app.org.uk)

**Care for the Carers** offer a range of services including specialised support for carers of people with mental health needs T: 01323 738390 E: [info@cftc.org.uk](mailto:info@cftc.org.uk)

**Icepro** specialise in information for carers supporting someone with mental health issues T:01273 617100 E: [jane.icepro@btconnect.com](mailto:jane.icepro@btconnect.com)

Are you aware of other organisations that could provide useful support or information in these situations? Let us know at [ESSP@eastsussex.gov.uk](mailto:ESSP@eastsussex.gov.uk) and we'll circulate an updated contact list after the Assembly.

# Agenda Item 14

<b>Hastings &amp; St Leonards</b> <b><i>strategic</i></b> <b>partnership</b> <b>Meeting dates 2017/18</b>	
<b>Executive Delivery Group</b>	<b>LSP Board</b>
<b>Tues 13<sup>th</sup> December 2016</b> 10am Aquila House	<b>Mon 30<sup>th</sup> January 2017</b> 10am Council Chamber, Aquila House
<b>Mon March 27<sup>th</sup> 2017</b> 2pm Aquila House	<b>Mon 24<sup>th</sup> April 2017</b> 10am Council Chamber, Aquila House
<b>Tues 27<sup>th</sup> June 2017</b> 2.30pm Aquila House	<b>Mon 17<sup>th</sup> July 2017</b> 10am Council Chamber, Aquila House
<b>Mon 18<sup>th</sup> September 2017</b> 10am Aquila House	<b>Mon 16<sup>th</sup> October 2017</b> 10am Council Chamber, Aquila House
<b>Mon 18<sup>th</sup> December 2017</b> 10am Aquila House	<b>Mon 29<sup>th</sup> January 2018</b> 10am Council Chamber, Aquila House

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