

Public Document Pack

Hastings and St Leonards Local Strategic Partnership

Minutes 29 January 2018

Present:

Statutory Sector

Councillor Peter Chowney
Councillor Rob Lee
Councillor Nick Bennett
Mike Thompson
Simon Hubbard
Chief Inspector Steve Curry

Community & Voluntary Sectors

Marie Casey
Carole Dixon
Tracey Rose
Catherine Almac
Naomi Ridley
Julie King
Marc Turczanski
Steve Manwaring
Annie Whelan

Business Sector

John Williams
Drew Knight
John Bownas
Clive Galbraith
Sean Dennis

In Attendance:

Helen Kay
Mark Horan
Michael Courts

Apologies for absence were received from:

Colin Dormer, Wayne Edmunds, Clive Cooke

<p><u>14</u></p>	<p><u>MINUTES AND MATTERS ARISING (CHAIR)</u></p> <p>The minutes of the meeting held on 16 October 2017 were approved as a correct record.</p>	
<p><u>15</u></p>	<p><u>UPDATE ON PUBLIC SPACE PROTECTION ORDERS (PSPOS)</u></p> <p>This item was moved up the agenda with the agreement of the Chair.</p> <p>Mike Hepworth, Assistant Director, Environment and Place, Hastings Borough Council, updated the group on the implementation of Public Space Protection Orders (PSPOs). The council made two new PSPOs on 12 June 2017 which provide enhance powers to tackle dog control measures and anti-social behaviour.</p> <p>The police have been enforcing the PSPOs throughout the summer. The council's warden service has also undergone accreditation to enable them to enforce the new PSPOs, a shadowing exercise between the police and the council's warden team will also be arranged. The council is keen that enforcement activity is coupled with links to appropriate support services for alcohol and drug addiction.</p> <p>The implementation of the PSPOs will be reviewed in autumn 2018, and this will explore opportunities for further collaboration with other agencies.</p>	
<p><u>16</u></p>	<p><u>UPDATE ON DRUG RELATED ISSUES IN HASTINGS</u></p> <p>Chief Inspector Steve Curry, District Commander in Hastings and Rother, updated the group on efforts to tackle drug related issues, in particular disrupting the supply of drugs to the town and combating cuckooing.</p> <p>Drug related crime has increased nationally over the past 3 years, and this trend has been reflected in Hastings. The board noted that drug related crime is often linked to broader community safety issues. Police in Hastings and Rother have been using their enforcement powers to tackle the county line supply of class A drugs and cuckooing, which occurs when criminal gangs target the homes of vulnerable people to use as a bade to deal drugs.</p> <p>Chief Inspector Curry commented that collaborative working between agencies was key to addressing this issue. In particular, encouraging vulnerable drug users to access treatment for addictions. The board were concerned at the impact of gang culture on vulnerable young people in the town, and considered the potential for the police, council and healthcare providers to work with local schools and colleges on this matter.</p>	
<p><u>17</u></p>	<p><u>UPDATE ON EDUCATION OPPORTUNITIES AREA</u></p> <p>Helen Kay, Programme Director, presented an updated on the Hastings Opportunity Area.</p> <p>Hastings is one of 12 opportunity areas across the country. The aim of the</p>	

	<p>programme is to improve social mobility. Funding of £72 million will be shared between the opportunity areas, and they may also be prioritised for other government funding schemes. Extensive engagement has been undertaken with a range of local education providers and stakeholders to develop the priorities for the opportunity area. The programme, which will be overseen by a partnership board, will focus on 4 key priorities; improving literacy outcomes, improving maths outcomes, mental health and resilience and broadening horizons and developing new skills for employment.</p> <p>Discussion took place regarding the challenges recruiting and retaining teachers. The Programme Director explained that opportunity areas also had access to an innovation fund to improve teaching and leadership together with other funding streams. It was noted that a number of other employers in the town faced similar challenges recruiting staff, and there may be an opportunity to work collaboratively to address this.</p> <p>The Board noted that short timescales for the scheme. The Programme Director commented that effective monitoring was essential, to enable the programme to be adapted where necessary. An emphasis would also be placed on sustainable improvement, once the programme had come to an end.</p>	
<u>18</u>	<p><u>UPDATE ON HASTINGS BUSINESS IMPROVEMENT DISTRICT (BID)</u></p> <p>John Bownas, Manager of Love Hastings Ltd, gave an update on the Hastings Business Improvement District (BID). The BID is an independent organisation, representing 400 businesses in Hastings town centre. The businesses pay supplementary business rates, which is used to enhance trading in the town centre. Recently, the BID have invested in new hanging baskets and Christmas lights and have also been supporting projects to reduced anti-social behaviour and shoplifting and encouraging new businesses to relocate to the area.</p>	
<u>19</u>	<p><u>UPDATE ON HEALTH AND WELLBEING COMMUNITY HUBS</u></p> <p>Carole Dixon, Chief Executive of the Education Futures Trust, and Tracey Rose, Chief Executive of the Fellowship of St Nicholas, presented an updated on the Health and Wellbeing Hubs. The project formed part of a broader programme, funded by Hastings and Rother Clinical Commissioning Group to tackle health inequalities.</p> <p>The Hubs will be located in North East Hastings, North West Hastings, Central St Leonards and Central Bexhill and Sidley. The Hubs aim to give people access to the health and wellbeing services and information, by partnering with organisations which are already established and trusted in the local community.</p>	
<u>20</u>	<p><u>DIGITAL PATHFINDER</u></p> <p>Annie Whelan, the Chief Executive of the Seaview project, provided an updated on the digital pathfinder project.</p>	

	<p>The Seaview Pathfinder project aims to widen access to digital healthcare services for people who are homeless. The computers have been located in various sites including Seaview, Citizens Advice and East Sussex Recovery Alliance (ESRA). Early findings suggest service users are very engaged in the project, with many using the computers provided to explore previously overlooked health issues.</p>	
<u>21</u>	<p><u>UNIVERSITY UPDATE (IF AVAILABLE)</u></p> <p>Simon Hubbard, Director of Operational Services, Hastings Borough Council, had contacted the University of Brighton for further information about their future plans for the buildings they occupied in the town. A property on Lacuna Place is about to be leased. The remaining two properties will be retained until the Hastings campus closes. The council continues to work with partners to explore options to secure higher education provision in the town.</p>	
<u>22</u>	<p><u>REGENERATION UPDATE</u></p> <p>An update is appended to the minutes.</p>	
<u>23</u>	<p><u>EXECUTIVE DELIVERY GROUP NOTES</u></p> <p>The minutes of the Executive Delivery Group meeting held on 18 December 2017 were received and agreed.</p>	
<u>24</u>	<p><u>NEXT MEETING DATE - 23 APRIL 2018</u></p>	

Minute Item 15

LOCAL STRATEGIC PARTNERSHIP 29TH JANUARY 2018

PUBLIC SPACES PROTECTION ORDER – UPDATE

**MIKE HEPWORTH – ASSISTANT DIRECTOR ENVIRONMENT AND PLACE,
HASTINGS BOROUGH COUNCIL**

1. BACKGROUND

- 1.1 On 12th June 2017, following extensive consultation earlier last year, the Council made two Public Spaces Protection Orders (PSPOs).
- 1.2 One related to dog control measures and was largely a like for like replacement of the existing dog controls, whereas the other was an entirely new initiative for the Council, and aimed to deter anti-social behaviour (ASB). Such as that caused by groups of young people and street drinkers, and which had begun to seriously affect the town centre in 2016.
- 1.3 The ASB PSPO prohibited the consumption of alcohol and use of psychoactive substances in parts of our various town centres, the seafront and some parks and open spaces. It also prohibited 'aggressive begging' borough wide, and enabled authorised officers to seize alcohol borough wide, if a person was consuming it in public places and this was leading to ASB.

2. UPDATE

- 2.1 Although the Council made the PSPOs and is the primary enforcement resource for the Dog Control PSPO, the Police have been the primary enforcement resource for the ASB PSPO. However, the Council's Warden Service has been going through a significant change process, applying for Community Safety Accreditation from Sussex Police so that it can start to enforce the ASB PSPO.
- 2.2 In late December Sussex Police approved the application for accreditation. But during the process several of the Warden Team left the service, and it is now in the process of recruiting to fill these posts, so that the service can start a period of shadowing and joint working with the local Police.
- 2.3 The Council's Warden Team consists of 2 Lead Wardens and 7 Wardens. One of the Lead posts is vacant as are 2 of the Warden posts. This is currently having a significant impact on their ability to operate a 7 days a week

shift system, and to cover the broad ranging role they have as the Council's primary front line uniformed service. To date there has been a very poor response to our recruitment campaign.

- 2.4 It is possible that the need for Wardens in our newly accredited service to pass the full Police vetting process may be discouraging people from applying. Or possibly the fact that the role is changing to become far more involved with ASB associated with the street community, whether that is youths or street drinkers. A role that historically has been associated with the Police.
- 2.5 During the Summer and Autumn the Police carried out numerous patrols and visits to the town centre ASB hotspots, issuing warnings and in some cases Fixed Penalty Notices to people in breach of the ASB PSPO, and gathering evidence of persistent offenders to build a case for escalating enforcement action with them.
- 2.6 At the same time the Police worked with the Council and colleagues from housing, substance abuse, and mental health outreach services to ensure that irrespective of whether or not the offenders wanted help, their needs were assessed and where appropriate offers of help were made.
- 2.7 By late autumn evidence had been gathered in respect of about a dozen persistent offenders and enforcement action such as Civil Injunctions and ASB Contracts are being considered. Civil Injunctions can include a requirement for the offender to positively engage with health and wellbeing outreach and support services, and this is being considered in several cases. Although much of the direct evidence has been gathered by the Police, the Council's Legal Services are working with them to initiate the legal action, and the positive engagement requirements are being formulated with the active participation of the appropriate support services.
- 2.8 Last summer the Police and Council observed an improvement with far less ASB in the York Gardens Roundels, but a degree of displacement to Harold Place. However, since the closed public conveniences were boarded up and the street community were no longer able to shelter around them, ASB in Harold Place also appears to have reduced significantly.

3. CONCLUSIONS

- 3.1 It is too early to tell whether or not the ASB PSPO has had a significant positive impact on reducing ASB in our public spaces. They are part of a wider package of measures targeting ASB.

- 3.2 For example in the York Gardens Roundels outside Pound Stretcher and Sports Direct, the two pop-up retail outlets appear to have had a significant positive impact. The Council is in the process of commissioning an options appraisal to identify potential longer term and more sustainable ways of utilising this space.
- 3.3 It is also hoped that the site of the closed public conveniences in Harold Place will also be redeveloped, making this area more attractive, and far less likely to be affected by ASB.
- 3.4 From Easter 2018 it is hoped that the newly accredited Council Warden Service will be able to increase the 'ASB enforcement offer' as part of the wider Police family. But this will depend upon successful recruitment to fill the vacancies.
- 3.5 A formal review of the ASB PSPO should be initiated in Autumn 2018 to consider matters such as:-
- How effectively the powers have been used;
 - Whether the geographical scope of the PSPO needs changing, perhaps to deal with displacement;
 - How the various agencies have worked together, for example the enforcement agencies and the outreach/support agencies;
 - Whether some of the prohibitions and restrictions need amending or removing;
 - Whether new prohibitions or restrictions need adding; Impact on ASB in the areas covered;
 - Impact on offenders;
 - Impact on public and business perceptions of ASB in the areas concerned.
- 3.6 It is envisaged that the Council will lead the review, and that it will be conducted with the participation of the various key stakeholders.
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Hastings Opportunity Area

Helen Kay, Programme Director



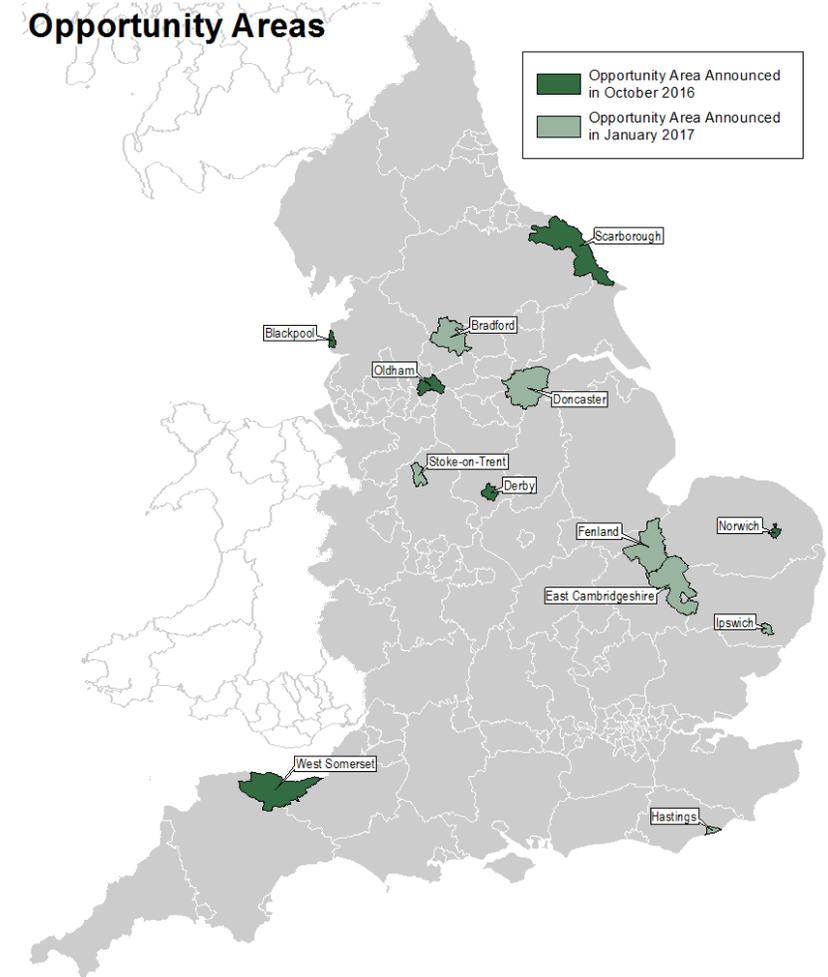
The opportunity areas

Six areas were announced 4 October 2016:

- Blackpool
- Scarborough
- Oldham
- Derby
- Norwich
- West Somerset

A further six areas were announced 18 January 2017:

- Doncaster
- Bradford
- Stoke-on-Trent
- Ipswich
- Hastings
- Fenland and East Cambridgeshire



Why these 12 Opportunity Areas?

Based on the Social Mobility Commission's social mobility index and DfE's education data, areas were identified as facing challenges to social mobility.

Other factors were also taken into account in selecting these 12 Opportunity Areas, including:

- **Regional spread**
- **Type of area**
- **Local support**

The primary purpose of Opportunity Areas is to focus local and national resources on a common goal – to increase social mobility. We want to learn from what works in these initial 12 areas, capturing which challenges all areas share and what is unique to a particular place.

Hastings ranks 282 of 324 on the social mobility commission's index. It is the only Opportunity Area in the South East.

What support will Opportunity Areas access?

- £72 million of new funding to support targeted, local work in a small number of Opportunity Areas to address the biggest challenges each of these areas face.
- An innovation fund to improve teaching and leadership, worth £75 million, for the most challenging areas of the country, including Opportunity Areas. Call for proposals is now live and we are prioritising OA as part of this.
- Investing in improving careers and enterprise provision in Opportunity Areas through the Careers and Enterprise Company.
- The National Collaborative Outreach Programme – aiming to increase the number of disadvantaged young people in Higher Education by 2020. (HEPP SY)
- Education Endowment Foundation (EEF) Research Schools – £3.5m available to establish hubs of expertise across schools, encouraging research and innovation through interventions proven by the EEF to advance social mobility.

Hastings Opportunity Area

- Over Summer 2017, DfE worked with partners to gather and analyse evidence and data about the strengths and challenges across Hasting's education system, and to investigate some of the root causes
- HOA Partnership Board – established – to provide advice, recommendations, support and challenge to the Programme
- Working Groups established for key priorities
- Programme Director – recruited
- Delivery Plan finalised and launched Friday 19 January
- Briefing held for ESCC Hastings Councillors and HBC Councillors

What will the Partnership Board focus on?

Board – has agreed 4 priorities for the opportunity area:

- Improving literacy outcomes;
- Improving maths outcomes;
- Mental health and resilience;
- Broadening horizons and developing new skills for employment.

Improving literacy and maths outcomes;

- Children in Hastings have good start in literacy – but this not translating to achievement at KS2 and 3, particularly for disadvantaged pupils
- Plan – set of actions to improve literacy across Key Stages, linked to Hastings wide literacy campaign and parental engagement to develop literacy in the home
- Achievement in maths across all stages is low
- Plan – build on good practice developed via the Maths Hub, attract and grow excellent maths teachers
- Working Group – for Literacy and Maths. Representative from all Academy Trusts in Hastings and the LA. (SLES; Health Visiting and Children's Centres).

Mental health and resilience;

- Clear priority for Hastings amongst Heads, parents, young people, voluntary sector and employers
- Evidence – linking non-cognitive skills; self-efficacy, self-regulation, emotional and social skills with improved outcomes
- Plan – support implementation of whole school and college approaches to promoting mental health, including training for mental health leads and champions in schools; Building capacity of effective external mental health support with focus on younger children; Develop universal approach to supporting families
- Working Group – representatives from Health, Voluntary Sector, Academies, LA.

Broadening Horizons and Preparing Young People for Work;

- Pupils in Hastings are overall less likely to progress into sustained further education post 16
- Plan – all Hastings secondary school and college pupils to receive at least 4 meaningful encounters with employers; support schools to engage proactively with local employers; introduce an entitlement to high quality, regular enrichment for all pupils across Hastings
- Working Group – Chair Graham Peters, East Sussex Local Enterprise Partnership, Representatives from HBC, Voluntary Sector, Schools, College, Employers and LA.

Next Steps:

- Further engagement with children and young people, parents/carers, early years providers, schools, voluntary sector, health colleagues;
- Firm up detailed plans for each priority area – begin procurement process;
- Detailed plan, including monitoring and evaluation of the programme;
- Communication plan – Early Years, Schools, Colleges, Voluntary Sector, Employers, Parents/Carers, Children and young people.

Contact Details

Contacts:

Helen Kay Programme Director

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Health and Wellbeing Community Hubs in Hastings & Bexhill



Funded by NHS Hastings and Rother Clinical Commissioning
Group (CCG)



Background

- **Health and Wellbeing Community Hubs, incorporate services that help the local community improve their health and wellbeing and access information about services and other organisations within the local area supporting wellbeing.**
- **NHS Hastings and Rother Clinical Commissioning Group (CCG), supported by Hastings Borough Council, put a plan forward to create wellbeing hubs in the most deprived communities of Hastings and Bexhill. Using existing community centres and organisations to help sustain and improve their infrastructure and development and delivery of the health and wellbeing services they provide.**
- **The fund is part of the CCG's "Healthy Hastings and Rother" programme that has been set up to tackle health inequalities in the region. It is also part of the East Sussex Better Together programme, which ensures the best services for the community.**

Aims

- **To give local people access to information, services and support in their community**
- **To support the community to improve and manage their health and wellbeing**
- **Access to organisations they feel comfortable and trust in**
- **Introduce services and projects that the community can access and benefit from**
- **Sustain the local Wellbeing Hub at a time when community centres and voluntary sector are finding challenging.**

Who has been awarded the funding?

- **North East Hastings** (led by Educations Futures Trust) in partnership with The Bridge
- **North West Hastings** (led by Fellowship of St Nicholas) in partnership with Optivo, Horizons Hub and Hollington Community Centre
- **Central St Leonards** (led by Fellowship of St Nicholas) in partnership with the YMCA
- **Central Bexhill & Sidley** (led by Sussex Community Development Association) in partnership with the Pelham

Established community venues experienced in supporting their local communities, working together in partnership to ensure outcomes are achieved. Funded till March 2020.



Statistics

- **Central St Leonards, Gensing , Hollington and Baird are amongst the wards in East Sussex with the highest ratios of mortality (age standardised) from circulatory diseases (for persons aged 0-74 years).**
- **Hastings is the most deprived district/borough in East Sussex with an IMD score of 34.49. Central St Leonards (58.14) is the most deprived ward in East Sussex and about half of the wards in Hastings are amongst the 10% most deprived in East Sussex. (2012)**
- **Men in these deprived areas of Hastings are expected to live 11.1 years less than those in the least deprived parts of the town.**
- **Obesity, alcohol related illnesses, smoking and mental health issues are above the national average in Hastings.**

KPIs for the Wellbeing Hubs

- Infrastructure and systems management
- Leadership development
- Small items of equipment and small scale refurbishment
- Running costs
- Staff/Volunteer and Trustee training and mentoring
- Community Development Worker & Volunteer Co-ordinator posts
- Collaborative working and innovation
- Increase in GP referrals
- Increase in footfall



Each partner has their own set of KPIs to achieve, working towards more organised company structures, wellbeing services and sustainability.

The Future!

- Each organisation is working in improving their infrastructure and provisions for wellbeing. As funding started Nov/Dec 2017 the project is very much in development stages.
- At FSN we are developing a wellbeing drop in - a gateway for information of services and projects in the Central St Leonards and also resources for people to learn ways to manage stress, sleep, exercise and diet, this will be volunteer led.
- EFT is developing an outdoor wellbeing hub at The Firs, which will offer wellbeing services to NE Hastings.
- Steering groups are in development for each Hub and these will include other organisations who support service users with wellbeing. An opportunity to work together to improve provision, ensuring not too much duplication of services.
- Wellbeing courses, workshops and events in the target areas.

Who to contact?

- North East Hastings – Education Futures Trust: laurap@educationfuturestrust.org
- North West Hastings – Fellowship of St Nicholas: mhooper@fsncharity.co.uk
- Central St Leonards: Fellowship of St Nicholas: mhooper@fsncharity.co.uk
- Central Bexhill and Sidley – Sussex Community Development Association: mccourt@sussexcommunity.org.uk





Overview on the work of the National Information Board & an update on the Seaview Pathfinder on Digital Health Inclusion for the homeless

Annie Whelan- Seaview Chief Officer
Independent member of the NIB

National Information Board

The role of the National Information Board is to put data and technology safely to work for patients, service users, citizens and the professionals who serve them. The NIB brings together national health and care organisations from the NHS, public health, clinical science, social care and local government, along with appointed independent representatives to develop the strategic priorities for data and technology.

Purpose

The purpose of the NIB is to:

- provide leadership across health and care organisations on information technology and information

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design and develop the vision, strategy and direction for the health and care system through engagement with partners and stakeholders, including industry

- ensure that priorities for investment and delivery are clear

- Set the annual commissioning priorities and delivery plan for NHS Digital

NIB Membership

- Chair – NHS England CCIO
- Academic Health Science Network (AHSN)
- Association of Directors of Adult Social Services
- Cabinet Office
- Care Quality Commission
- Department of Health
- Government Office for Science
- Health Education England
- Health Research Authority
- Health & Social Care Information Centre
- Healthwatch England
- Human Fertilisation & Embryology Authority
- Human Tissue Authority
- Independent Cancer Taskforce
- Independent NIB Members x6
- Local CIO Council
- Local Government Association
- Medicines and Healthcare Products Regulatory Agency
- The National Data Guardian Panel
- National Institute for Health & Care Excellence
- National Maternity Review
- NHS Blood and Transplant
- NHS Business Services Authority
- NHS England
- NHS Improvement
- NHS Litigation Authority
- Public Health England
- Richmond Group of Charities
- Strategic Clinical Reference Group
- UK Statistics Authority

Vision

NIB is one of the seven Governance boards of 5 Year Forward View

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However it began prior to 5YfV in September 2014

Publication of:

Personalised Health and Care 2020

Migration of all health and Social Care information into a single system by the year 2020

Personalised Health and care 2020

- 10 Focussed work streams
- Delivery roadmaps
- 33 Domains
 - Personalised care records
 - Data security
 - Information sharing
 - Research and cure
 - Resource and capacity
 - Interoperability and information governance across health and care

Enable me to make the right health and care choices Providing patients and the public with digital access to health and care information and transactions

- Unique patient identifier across health and care
- Individual patient records
- Citizen access to digital health records
- Supporting business change and citizen uptake
- Supporting a transformation in the design of social care services
- Widening access and improving digital skills

Enable me to make the right health and care choices

Providing citizens with access to an assessed set of NHS and social care apps

- Development of regulatory (accreditation) process
- More complex than first anticipated
- Realisation that there are 100's of existing H and S apps
- NHS.UK now showcasing approved health apps

Give care professionals and carers access to all the data they need

Setting the commissioning and regulatory roadmap for implementing of digital data standards 2018/2020

- local health and care economies will create joined up plans demonstrating how they will make viable progress towards being paper free at the point of care
- To support local areas to develop plans for delivering an interoperable health and care system we have published a first package of standards
- Creation of a new digital maturity index now available for self assessment

Give professionals, patients and carers access to the data they need

Developing comprehensive data on the quality, efficiency, and equity of health and care services for secondary uses

This work has been guided by three principles set out in the NHS Five Year Forward View

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The role of data for:

1. Health and wellbeing (“prevention”)
2. Care and quality (“quality”)
3. Funding and efficiency (“sustainability”)

Make the quality of care transparent , publication of comparative information

- To compare, in public, the quality and performance of NHS and care services, providers and commissioners, including public health
- to support transparency and to stimulate improvements in quality, safety, and efficiency
- to provide public accountability
- to complement other public-facing and publically available sites (e.g. NHS Choices, Dr Foster, National Cancer Intelligence Network and many others).
- MyNHS scorecard system

Build and sustain public trust consent based information sharing and assurance of safeguards

There are four principal reasons for using health and care data:

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- To support an individual's direct care
- To run the NHS and health and care system more effectively and efficiently in order to achieve higher quality outcomes
- To promote research, including to develop innovative new medicines, treatments and services
- To protect and improve health and reduce health inequalities.

Office of the National Data Guardian

- Dame Fiona Caldicott – November 2014
- Links with building public trust
- To ensure that patients and the public have an advocate and oversight scrutiny into how information is used
- 2013 Caldicott review and report- Caldicott 2
- 2016 –Review of the data security consent and opt outs- leading to 2017 Report

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The three operating principles of the office of the National Data Guardian:

1. To encourage sharing of information in the interests of providing direct care to an individual.
2. There should be no surprises to citizens and they should have choice about the use of their data.
3. There must be dialogue with the public, helping to increase their knowledge and choices about how data is used to improve health and care.

Bring forward life-saving treatments and support innovation and growth Chapter 9 of Personalised Health and Care 2020

- Building partnerships with industry
- Making the health and care system innovation-ready
- Testing and scaling new innovations
- Becoming a world leader in health data innovation.

Support care professionals to make the best use of data and technology Chapter 10 of Personalised Health and Care 2020

Professionalism: turning the specialist informatics community into a practical professional seam running through health and care

Competency: making data and technology a core part of every professional training programme and throughout continuous professional development/careers.

Leadership: ensuring that health and care leaders/decision-makers fully understand how information and technology can enable efficient, patient/citizen-focused health and care services.

Collaboration and Co-operation (for uptake): ensuring that the sector makes the best use of the knowledge, skills and capabilities acquired by collaborating and co-operating more effectively, and drive data/technological uptake.

Vision and progress

- In 2015, England became the first country to offer citizens the ability to access their GP records online and other digital services in primary care.
- more than 96% of people registered with a GP now have a summary care record and 73% of ambulance, 85% of NHS111 and 35% of A&E services now have access to view them. This means that clinicians can treat patients more safely based on knowledge of their medication history, especially allergies and other likely adverse reactions to drugs
- MyNHS is a new digital tool that has transformed transparency of local services and allows you to compare the outcomes and effectiveness of more than 37,600 health and care organisations.

NIB Programme reviews

1. Martha Lane Fox on Inclusivity
2. Fiona Caldicott on Security and consent
3. Wachter on Electronic patient records
4. McNeill Review on PHE use of data
5. Cross party sign up- After NHS spending review commitment of £4.2 Billion to realise the vision

Widening Digital Participation

- Martha Lane Fox review on inclusivity
- NHS Digital commissioned Good Things Foundation
- 20 National Pathfinder sites for Digital Health inclusion
- Being set up for a year each over a rolling three year cycle
- Each Pathfinder is focussing on a different specialist community

Digital Health Pathfinders

- Islington- Young people and mental health
- Sheffield – Older people with long term conditions
- Nailsea (near Bristol) – The development of a digital health hub on the high street.
- Stoke-on-Trent – A programme to build digital skills for people with long term conditions.
- West Yorkshire – Testing health technology for people with hearing and visual impairments.
- Seaview (East Sussex) – Digital health interventions for homeless people.
- Bradford – Development of a digital platform health improvements, initially focused on patients with dementia and diabetes and young people.
- Wakefield – Work on wearable healthcare technology.
- 12 more will be set up and run over the next 2 years.
- Positive models will be built into future national commissioning priorities

Background for Seaview

- Seaview/ University of Brighton Cupp study on the feasibility of the development of a homeless health app

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Case studies into NIB to influence the implementation of the VERIFY system

- NHS digital research on Digital Health awareness
- 1st VCS led Pathfinder site

SEAVIEW PATHFINDER

Hastings Seaview is the Pathfinder site focussed on Homelessness October 2017 until September 2018

Commissioned by



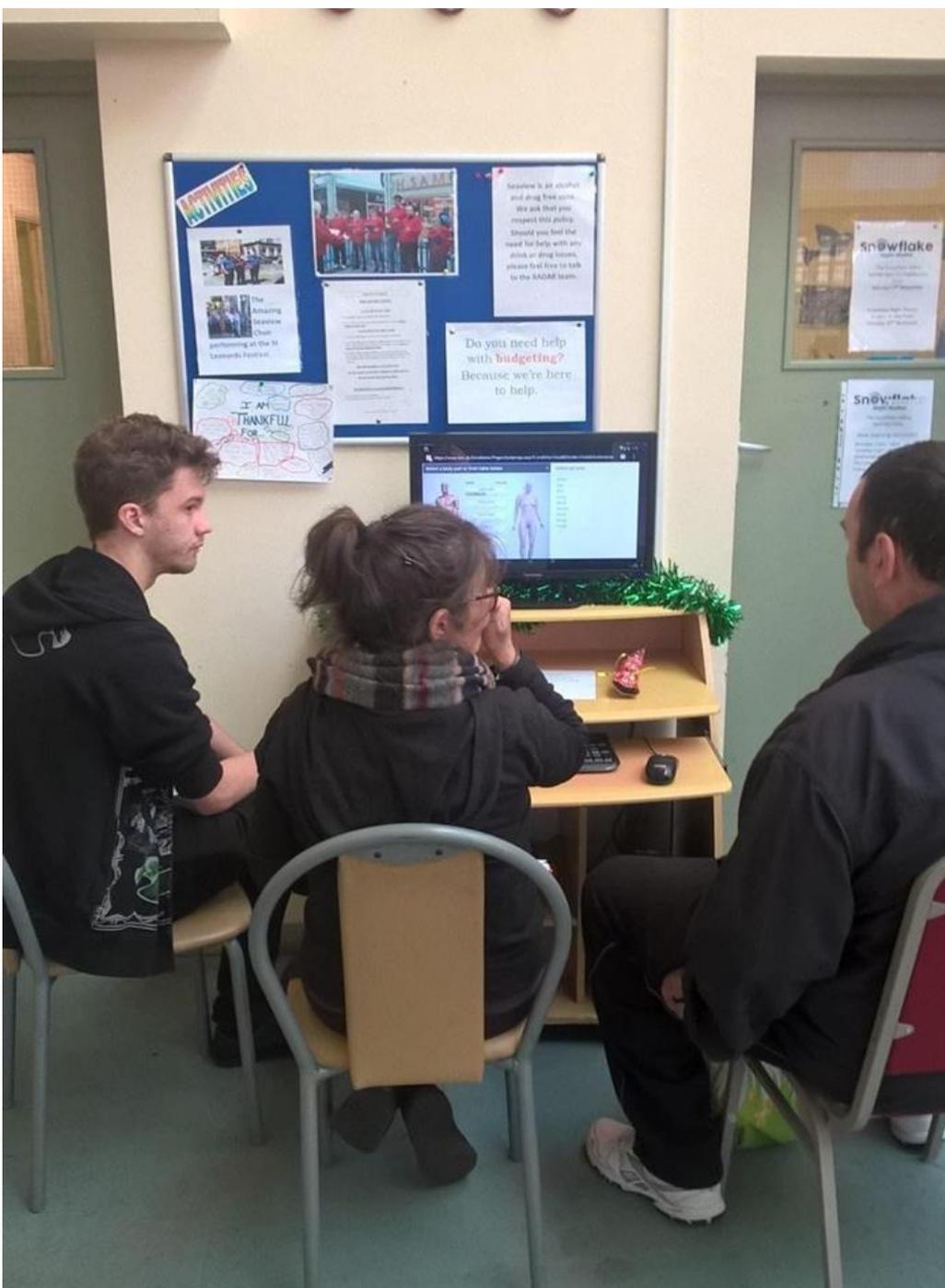
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- Widening access to digital health
- Promoting inclusion
- Understanding homelessness
- Participative research
- Building service models
- Working with people themselves
- Finding real local solutions
- 1 of 20 Pathfinders nationwide

What we are doing

- Strategic panel involving CCG, ESCC, HBC, HVA, SJA commissioners, housing , libraries
- We have engaged more than 50 service user participants with the participative research programme- transitional client group
- We are setting up Digital health Pathfinder computers in various sites- Seaview, ESRA, CAB
- We are using Digital health tablets on outreach
- We will be training library staff
- We are proving one to one support for service users



Early findings

- Service users very engaged, Pathfinder computers are being utilised daily

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People are exploring often long overlooked health issues and seeking help in making GP appointments based on the information they are finding

- 167 different pages visited on the NHS site

Case study example

- One rough sleeper came to our Pathfinder at Seaview in Hastings. He had long-standing high blood pressure and a thyroid problem, for which he took levothyroxine every evening.
- Whilst reviewing his current needs, a support worker went through NHS Choices with him on a tablet.. They found out that levothyroxine can't be taken after food and instead should be taken first thing in the morning, on an empty stomach.
- *"I take all of my tablets all together in the evening when I have been eating and drinking. I wasn't aware that they had to be taken on an empty stomach in the morning"*
- Now he's taking his medicine at the right time of day, he hopes he'll feel the effect of the levothyroxine more. Seaview have also helped him to book an appointment with a GP to check if he's still taking the right dose.

Department of Health interest

- Upcoming visit from Juliet Bauer NHSE
director of Digital Experience
Linking with Patient online developments

Information links

- NIB starting point- <https://www.gov.uk/government/publications/personalised-health-and-care-2020>
- NIB Annual report - https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/553403/NIB_annual_report_A.pdf
- Centre of Excellence for information sharing- <http://informationsharing.org.uk/our-work/learning-good-practice/>
- National Information Board- <https://www.gov.uk/government/organisations/national-information-board>
- NIB Annual Report- https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/553403/NIB_annual_report_A.pdf
- National Data Guardian Review 2016- <https://www.gov.uk/government/publications/review-of-data-security-consent-and-opt-outs>
- National Data Guardian consultation on opt out - <https://www.gov.uk/government/consultations/new-data-security-standards-for-health-and-social-care>
- NHS Digital, HSCIC -<https://www.gov.uk/government/organisations/health-and-social-care-information-centre>
- https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/652404/Patient_carers_and_service_user_vision.pdf
- <https://www.gov.uk/government/publications/public-health-englands-data-collection-mcneil-review-and-implementation-plan>

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Minute Item 22

CHART Summary- Hastings Furniture Service

Connecting Hasting and Rother Together (CHART) Community Led Local Development (CLLD) is a local grants programme which supports the social and economic development of the most deprived LSOAs within the Hastings and Bexhill community, shown in the map below in purple and blue.

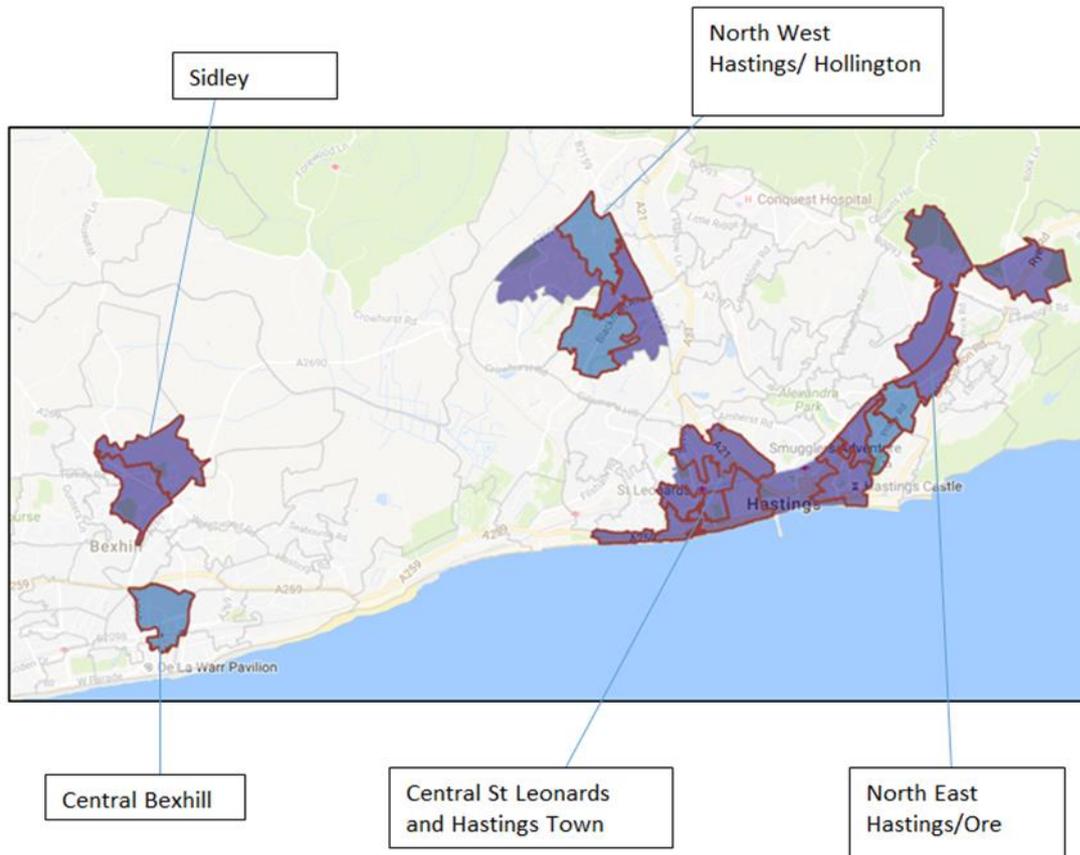


CHART has access to European Structural Investment Funds (ESIF) that can be used to support projects that will link the areas' most deprived communities to opportunities. It will support individuals through investment of European Social Funds and enterprises through investment of the European Regional Development Funds. These investments will need to align with the CHART Local Development Strategy and the Priority axes of ERDF and ESF relevant to CLLD.

Hastings Borough council is the Accountable body for the CHART programme and will oversee the administration and management of CHART. The Managing Authority for ERDF Funding is the Department for Communities and Local Government (DCLG) and the Managing Authority for ESF Funding is the Department for Work and Pensions (DWP).

CHART is a 'Community-led local development' (CLLD) programme, which means that it is led by a Local Action Group (LAG) ensuring a 'bottom-up', community based

approach to investment within the area. The CHART LAG is made up of local residents as well as public, private and voluntary organisations that are committed to driving change within the local CHART community.

To date, the CHART LAG has been integral in developing the Local Development Strategy, which sets out the objectives for the programme. The CHART LAG is also responsible for assessing and approving project applications.

The objectives of CHART will be achieved via 4 Work Packages as identified within the CHART LDS:

1. **Work package 1 COMMUNITY ASSETS (ERDF):** Investment in physical assets for employability and community benefit
2. **Work package 2 ENTERPRISE AND BUSINESS SUPPORT (ERDF):** Stimulating local entrepreneurship and business growth
3. **Work package 3 COMMUNITY DEVELOPMENT AND OUTREACH (ESF):** Work with local communities and organisations to build confidence and capacity to tackle local problems and improve the coordination of responses
4. **Work package 4 EMPLOYABILITY SUPPORT (ESF):** Direct support to the most vulnerable unemployed / inactive CHART residents to move closer and into the labour market

	Work Package	Activities
ERDF	1. COMMUNITY ASSETS: <i>Investment in physical assets for employability and community benefit</i>	<ul style="list-style-type: none"> • Collaboration with existing/planned assets e.g. Health and Wellbeing Centres • Acquisition and fitting out of premises where enterprises can grow and create employment • Capital equipment grants
	2. ENTERPRISE AND BUSINESS SUPPORT: <i>Stimulating local entrepreneurship and business growth, particularly in target sectors</i>	<ul style="list-style-type: none"> • Mentoring scheme • Support for all aspects of business growth, through the journey or pre start up, start up and growth • Specific entrepreneurial support within local economic sectors (e.g. Creative industries, leisure, tourism and social enterprise)
ESF	3. COMMUNITY DEVELOPMENT AND OUTREACH: <i>Work with local communities and organisations to build confidence and capacity to tackle local problems</i>	<ul style="list-style-type: none"> • Workshops and events to identify issues and design solutions • Data management and clear communication processes between organisations to deliver a non- competitive suite of interventions • Active outreach

	<i>and improve the coordination of responses</i>	<ul style="list-style-type: none"> • Organisation of community events • Capacity building in community development and management of community facilities
	4. EMPLOYABILITY SUPPORT: <i>Direct support to most vulnerable unemployed / workless CHART residents to move closer and into the labour market</i>	<ul style="list-style-type: none"> • Active outreach • Adult and community education delivery • Skills development • Paid work and voluntary experience • Individual mentoring and support • Expansion of existing provision to new groups • Skill development in enterprise and business • Create apprenticeships, traineeships
ERDF	5. MANAGEMENT , ADMINISTRATION AND EVALUATION	<ul style="list-style-type: none"> • Managing the CHART local grant scheme • Programme management • Eligibility/ Regulation application • State Aid monitoring • Training and capacity building • Monitoring, verification and audit • Claims management & dispersal of grant funding • Initiative development • LAG formation, animation and support • Communications and publicity • Securing match funding • Baseline setting, monitoring and evaluation programme • Marketing, Website use and social media

Operational Programme Investment Priority

Each Work package is part funded by either ERDF or ESF; applicants must therefore ensure that their proposals contribute to either ERDF or ESF investment priorities:

- Work package 1 & 2- ERDF: 9d Undertaking investment in the context of Community Led Local Economic Development strategies
- Work package 3 & 4 ESF: 1.5 Community Led Local Development

3.2 ERDF: Applicants applying for Work package 1 & 2:

Investment Priority	9d Undertaking investment in the context of Community Led Local Economic Development strategies
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Specific Objectives	To build capacity within communities as a foundation for economic growth
Indicative Actions	<p>Under this investment priority indicative actions to be supported by the European Regional Development Fund may include:</p> <ul style="list-style-type: none"> • Facilitation and capacity building activity in targeted areas which seeks to mobilise community resources and build upon local assets to mitigate the risk of social exclusion and act as a foundation for economic growth; • Provision of small scale community hub facilities to support Small and Medium Enterprises including social enterprise) in targeted areas; • Activity that seeks to promote entrepreneurship and self-employment in deprived areas and targeted communities; • Tailored business support activity, mentoring, coaching, information, advice and guidance; • Small equipment grants; • Provision of business space; • Support for clustering, networking, cooperation or local supply chain development / collaboration; • Investments to better connect deprived neighbourhoods and areas of need with adjacent areas of opportunity and employment growth; • Support to embed and apply innovation in a local context (e.g. new products/services/ ways of working) that builds on community assets in pursuit of jobs and growth; • Support for new forms of enterprise (including the social economy and social enterprise); • Preparatory support, such as training actions for local stakeholders, studies of the areas concerned; costs related to the design of Community Led Local Development strategies, including consultancy costs for actions related to consultation of stakeholders for the purposes of preparing the strategy; administration costs (operating and personnel costs) of an organisation that applies for preparatory support during the preparation phase.

3.3 ESF: Applicants applying for Work package 3 & 4:

Investment Priority	1.5 Community Led Local Development
Specific Objectives	To deliver additional, localised support to people in particularly deprived areas, so that they move towards or into

	employment.
Indicative Actions	<p>Under this investment priority indicative actions to be supported by European Social Fund may include but are not limited to:</p> <ul style="list-style-type: none"> • Stimulating local economies to deliver jobs and growth, including innovative activity to tackle multiple deprivation and specific local barriers to accessing employment and skills faced by groups and individuals farthest from the labour market; • Providing individual pathways to integration and re-entry into employment, for example through developing links between disadvantaged groups and local employers, the social economy, social enterprises and intermediaries able to provide information, advice and guidance on employment and self-employment options; • Improving the integration of marginalised families and communities; • Combating discriminations in local areas that are based on gender, racial or ethnic origin, religion or belief, disability, age or sexual orientation; • Reducing employment barriers linked to social and economic isolation, for example by addressing health and transport issues and increasing access to information and sources of advice on issues such as debt and money management; • Improving low level skills amongst young people Not in Education, Employment or Training and adults, including communication, Information and Communications Technology and digital skills; • facilitating community participation and engagement, including community leadership and peer support programmes; • stimulating local economies to deliver jobs and growth in areas often affected by industrial decline - e.g. ex-mining communities; • support for the development of community and social capacity building, including social enterprise and through investment in developing high growth start-ups; • stimulating local level collaboration amongst citizens, small businesses and other local economic bodies; • addressing poor linkages between areas of deprivation with nearby areas of high economic growth and job

	opportunities.
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4 Required Outputs

The CHART programme must deliver against Priority Axis 8 outputs and results of the ERDF 2014 to 2020 Operational Programme and Priority Axis 1 outputs and results set out in the ESF 2014-2020 Operational Programme.

4.2 ERDF Work Package 1 & 2 Outputs

ID	Output Indicator
C1	Number of enterprises receiving support
C5	Number of new enterprises supported
C8	Employment increase in supported enterprises
P2	Public or commercial buildings built or renovated
P11	Number of potential entrepreneurs assisted to be enterprise ready

4.3 ESF Work Package 3 & 4 Outputs and Results

ID	ESF Output
	Number of participants
ESF CO 01	Participants that are unemployed including long-term unemployed
ESF CO-03	Participants that are inactive
ESF O4	Participants that are aged over 50
ESF CO5	Participants that are from ethnic minorities
ESF CO16	Participants that have disabilities

ID	ESF Results
ESF CR02	Participants in education or training on leaving
ESF CR04	Unemployed participants in employment, including self-employment on leaving
R2	Inactive participants into employment or job search on leaving

Annex- LSOAs

The CHART Areas (LSOAs)				
LSOA code (2011)	Ward Name	LSOA Name	Population, (Census 2011)	Overall % IMD 2010
Hollington				
E01020993	Hollington	Hastings 003A	1,344	6.20%
E01020994	Hollington	Hastings 003B	1,533	10.70%
E01020995	Hollington	Hastings 003C	1,435	5.40%
E01021019	Wishing Tree	Hastings 003E	1,597	3.30%
E01021020	Wishing Tree	Hastings 006D	1,849	14.20%
Total			7,758	
Hastings Town Centre and Central St Leonards				
E01020978	Castle	Hastings 009A	1,951	8.10%
E01020979	Castle	Hastings 009B	1,836	2.40%
E01020980	Castle	Hastings 009C	1,588	7.10%
E01020981	Castle	Hastings 009D	1,629	19.00%
E01020982	Central St Leonards	Hastings 011A	1,744	1.00%
E01020983	Central St Leonards	Hastings 011B	1,656	3.00%
E01020984	Central St Leonards	Hastings 011C	1,952	3.50%
E01020985	Central St Leonards	Hastings 011D	1,787	7.50%
E01020989	Gensing	Hastings 011E	1,756	2.00%
E01020990	Gensing	Hastings 008C	1,658	10.60%
E01020992	Gensing	Hastings 008E	1,845	3.20%
Total			19,402	
North East Hastings / Ore Valley				
E01020972	Baird	Hastings 005A	1,549	0.40%

E01021005	Ore	Hastings 004B	1,616	4.90%
E01021014	Tressell	Hastings 007E	1,877	13.90%
E01021015	Tressell	Hastings 005D	1,603	0.80%
		Total	6,645	
Sidley				
E01021135	Sidley	Rother 007D	1,847	9.60%
E01021136	Sidley	Rother 007E	1,323	3.90%
		Total	3,170	
Central Bexhill				
E01021092	Central	Rother 011C	2,001	14.20%
		Total	2,001	
Total CHART location population			38,976	