

GLOUCESTERSHIRE HEALTH AND WELLBEING BOARD

<p>1.Questioner's Name: Bren McInerney</p>	<p>Respondent's Name: Sarah Scott, Executive Director Adult Social Care and Public Health</p>
<p>Make I take the opportunity to thank everyone for all they have, and continue to do, during the covid period."</p> <p>Whilst I have observed an increased focused on inequalities, on inequalities that has always been present and evident in the county over many years, and welcoming the present focus on addressing inequalities, what specific measures are in place now, and may be used in the future to be assured, and assure people and communities who have/are experiencing these inequalities for decades, that a positive and measurable impact is being made now and for the future."</p> <p>My question is specifically focusing on a response to the measures, impact, and assurance on addressing inequalities in Gloucestershire.</p>	<p>Thank you for you query regarding current and future measures, impacts and assurances regarding addressing health inequalities in Gloucestershire.</p> <p>Key measures currently being taken forward under the Gloucestershire Health and Wellbeing Board (GHWB) include the following:</p> <ul style="list-style-type: none"> • Commitment within the 2019-2030 Joint Health and Wellbeing Strategy to ensure that action on health inequalities is embedded across each of the key strategic priorities (best start in life; healthy weight; mental health; social isolation; housing; ACEs and physical activity. This will also apply to local implementation of the NHS Long Term plan, for example the action within the plan on tobacco dependence and weight management. • Commitment to adopt an 'anchor institutions' approach across member organisations with a view to reducing health inequalities. This includes embedding action on inclusive employment and training; social value policies and systems leadership • Development of a health inequalities toolkit designed to enable local partnerships, organisations, services and other bodies to adopt a more structured / evidence-informed approach to understanding and addressing health inequalities within their spheres of influence <p>The GHWB paper accompanying the health inequalities item on the agenda for tomorrow's meeting also makes the recommendation that we convene a 'health inequalities panel' for Gloucestershire to provide system oversight (and assurance) on this agenda.</p> <p>Panel responsibilities would include:</p> <ul style="list-style-type: none"> • Developing a clear narrative to describe the local approach to addressing health inequalities • Working with communities to agree ways to involve them meaningfully in shaping, delivering and evaluating this work • Ensuring that community assets are given the same prominence to needs within the Joint Strategic Needs Assessment (JSNA), and are routinely factored into planning

	<ul style="list-style-type: none"> • Establishing a shared health inequalities dashboard for monitoring impact • Developing a plan for evaluation, and for sharing the learning • Feeding into workforce development plans relevant to health inequalities, including embedding cultural competency training. <p>I should add that this response in no way attempts to do justice to the wealth of innovative action on health inequalities taking place across the county, much of which is community-led.</p>
<p>2. Questioner's Name: Cllr David Willingham</p>	<p>Respondent's Name: Sarah Scott, Executive Director Adult Social Care and Public Health</p>
<p>At a number of secluded locations (for example under bridges, behind flood barriers, or on wooded embankments and cuttings) in the ward I represent (St Peter's ward, Cheltenham BC), there is incontrovertible evidence of multiple types of substance abuse taking place. This evidence comes from the litter found on site which has included: needles, syringes, spoons for cooking heroin, creamer cartridges as a source of nitrous oxide, lighter gas cylinders, balloons, blister packs of commonly abused prescription-only medicines such as benzodiazepines, vast quantities of empty alcohol containers, and on one occasion a crack-pipe. Our parks and cleansing teams as well as volunteers including myself and several other councillors regularly clear this litter up. However, simply removing the litter does nothing to help those whose health is being affected by substance abuse. Since this is unlikely to be an isolated issue, could the Health and Wellbeing Board please advise what multi-agency out-reach services are available to help communities to address these issues, and how ward members like myself can get those services to work in partnership, to target specific areas at the appropriate times and to ensure that every attempt is made to engage with and support those suffering from substance addiction into getting the help they need?</p>	<p>Thank you for highlighting the important issue of evidence of drug misuse in your ward and your concern to ensure that individuals are given every opportunity to engage with services. Gloucestershire County Council commission 'Change Grow live' (cgl) to provide adult (over 18's) drug and alcohol services across the county. These services are directed at working with county residents with problem and dependent drug and alcohol use and include an outreach service to street drinkers and 'in-reach' to supported accommodation around the county including venues in Cheltenham. Cgl also work with project Solace and Cheltenham Borough Council staff in relation to anti-social behaviour.</p> <p>We would be happy to put you in touch with cgl Cheltenham Hub managers to enable us to learn more about the situation you describe.</p>