



## COWAL HEALTH & WELLBEING NETWORK

26<sup>th</sup> June 2013

### Minutes

**In Attendance:** Lorna Ahlquist, Margaret Stevenson, Laura Porter, Ailsa Dominick, Sue Clarke, Susan McFadyen

**Apologies:** Pauline Livingstone, Michaela Goan, Fiona Duncan, Laura Stephenson, Gwen Harrison, Angela Coll, Agnes Harvey

#### 1. MINUTES/REGISTRATION OF MEMBERS

Minutes of last meeting approved.

Susan agreed to email a registration form to Laura. **Action Susan**

##### Matters arising:

- Laura would like to put the question to Community Planning about whether we can get more recycling done in the area – Who is doing what? What can we do?

Lorna suggested that following on from the successful recycling project run by Carr Gomm with homeless people and funded by CHWN we invite agencies involved in recycling in Cowal to a meeting to discuss the possibility of a recycling project being set up in Cowal linking waste disposal with groups which could recycle goods and public recycling direct to project partners. This would involve low income and homeless people to benefit from self-help recycling, health and wellbeing groups to create active recycling and would involve a range of statutory and third sector partners. It was agreed that this was a good idea. **Action Lorna/Susan to arrange meeting**

Laura thought that the grammar school does some kind of bicycle recycling.

**Action Laura to find out the details of this**

- Health and Wellbeing funded Oral Health DVD is filming at the moment.
- A copy of Helen Lambertini's powerpoint presentation from last meeting has been received. **Action Susan to send out to members and share on website.**

## **2. COWAL HEALTH AND WELLBEING NETWORK**

CHWN had planned to have a stall at Sandbank Gala along with Carol Muir's Keep Well team but unfortunately Carol's team could not attend. Lorna had planned to attend on the Saturday but the event was rescheduled to Sunday due to bad weather and then Lorna was away on holiday.

CHWN will have a stall at Kirn Gala on Wednesday 28<sup>th</sup> August.

### **Information Sharing**

#### **Ailsa**

The Strachur Early Years provision is moving into the school. Innellan and Toward are hopefully moving into Innellan Primary School – premises should be confirmed this week. The lease on the old building will be terminated and this should make the Early Years service more sustainable. Ailsa is doing Book Bug pre-school library sessions during the summer. There may be a couple of Early Years Health and Wellbeing funding bids for September.

There is training coming up about teaching P1/P2 about empathy – “Routes of Empathy”. Ailsa is not aware of anyone in Cowal registering an interest but it looks like a good program.

#### **Margaret**

The local Red Cross have lost a first aid trainer. This may affect public courses. The Red Cross are holding an awareness day on Wednesday 31<sup>st</sup> July in Argyll Gardens, Dunoon. All aspects of the Red Cross will be represented. Lorna asked if the Single Point of Access Person from the hospital will be there. Margaret did not know.

#### **Sue**

There have been discussions about how sustainable the Keep Well project is. There is no extra funding for staff. In Campbeltown one of the organisers has been doing health checks. Each appointment takes about 2 hours which is quite a big commitment and really needs designated staff time. Of the checks that have been done in Campbeltown, it was discovered that 2 had already seen their GP. This highlighted the fact that there is not yet a good way of separating out those people that need to be seen from those who are already being seen. Project has until next April.

Also looking at Child Healthy Weight Program. This week fliers have gone out to Primary 7 children going to Dunoon Grammar School. There will be a 2 day event in August based around food/nutrition/exercise – parents will be invited to a barbecue

on the last day. Initial weight will be taken on entry to DGS – would like to do this at end of each holiday block.

Ailsa and Sue are also looking at providing PSE classes – aimed at S5 on parenting – what it means to be a parent, children’s development etc.

### **Laura**

The Learning Disability Service is supposed to be reviewing everybody with an overnight service this year because of Telecare and Telehealth having advanced technologically and because the council has bought in a night care service which is not oversubscribed. There is a question over whether individual sleepovers are taking a disproportionate amount of resources. Carr Gomm now has the contract for out of hours services for emergency social work. Out of hours calls are directed by Carr Gomm to appropriate local departments.

## **3. PRESENTATIONS FROM HEALTH AND WELLBEING FUND APPLICANTS**

### **Rebound Therapy – Elaine Doyle**

**Summary:** Use of trampoline for people with learning disabilities and physical disabilities

#### **What is the rationale for this project or why is this project a good idea?**

Exercise and fun for a client group who are disadvantaged by their additional support needs. Encourages safe aerobic exercise. Improves fitness. Can increase or decrease muscle tone. Helps relax the participant. Improves sensory integration. Improves concentration. Improves communication skills. Easily achievable.

#### **What do you plan to do?**

Train 3 staff in rebound therapy

Develop application for service: clients already identified from learning disabilities team. Offer rebound therapy sessions at least weekly to each person included in project

Elaine distributed a handout detailing the health benefits of rebound therapy. She explained that they were not offering physio and that the project was primarily for fun and exercise. Physios could be used with people if they wanted.

Ailsa asked when the DGS trampoline could be used. Elaine said any time after school hours.

Lorna wondered how the school let would be funded. Elaine responded that they would charge for use of the service to cover costs without making a profit.

Laura was concerned about costs and possible ongoing costs to the council. Elaine thought that some people could use the service as part of existing support time.

Lorna clarified that charges would have to cover the cost of DGS and staff costs and that staff costs would not be incurred by the council.

Asked about potential numbers of users, Elaine said that so far 4 or 5 people had expressed an interest in the project with another 4 or 5 expressing an interest through the physio.

Elaine said that they have identified people who want to undertake the training. She reiterated that the activities are intended to be purposeful, fun exercise.

### **Social Inclusion and Networking Group (SING) – Richard Gault**

**Summary:** Project aimed at persons in the Dunoon and immediate area who are emotionally and socially isolated as a result of a severe and enduring mental illness.

#### **What is the rationale for this project or why is this project a good idea?**

When people become socially isolated, emotionally isolated or marginalised in society they cease to be a productive part of that society. This also affects the long term Mental Health management of that person.

Any project which helps towards an integrated society can only be a good thing.

#### **What do you plan to do?**

Once a month, we will hire a mini-bus and go places and attend functions which the target group would be unable to do without support

Richard spoke passionately about the need for the project.

Asked about sustainability, Richard said that they have applied for a section 19 permit to allow clients to contribute towards costs. At the moment clients contribute a small amount towards fuel costs but all other costs are met by the project.

There is a small core of 25 to 30 really isolated clients with a total of about 300 clients. The project would help about 100 to 120 people in a year.

## **Counselling and Support for Recovery – Giles Wheatley**

**Summary:** Pilot project to offer a voluntary counselling and support service to promote and improve the psychological well-being of those who are suffering (directly or indirectly) as a result of problematic alcohol or drug use, stress or depression, bereavement, damaged relationships, or any other psychological or mental health issue or problematic behaviour that reduces the quality of the beneficiaries' life.

**What is the rationale for this project or why is this project a good idea?** Counselling has been shown to be effective for those facing issues resulting from drug or alcohol use, stress, mild depression, bereavement, damaged relationships, and other psychological or mental health issues that are having an impact on quality of life. Professional links will be established with local addiction and mental health services and GPs for onward referral as appropriate.

### **What do you plan to do?**

Offer a one-to-one counselling service to those in Cowal who are suffering (directly or indirectly) as a result of problematic alcohol or drug use, stress or depression, bereavement, damaged relationships, or any other psychological or mental health issue or problematic behaviour that reduces their quality of life.

Giles explained that this is a pilot project to develop the need for a more generic voluntary counselling service in the area, i.e. not specifically alcohol and drugs issues. He feels that there is a gap in the 4 tier model of treatment which is as follows:

- Tier 1: Residential care
- Tier 2: Specialist treatment and care for which an assessment by a healthcare professional is required – as provided by Ballochyle House
- Tier 3: Community based with targeted client base – where this project fits in
- Tier 4: Pharmacist/GP etc.

The plan is to also extend the offer of counselling to family members.

Laura asked about referral. Giles said that there would be some self referrals but some referrals would only be accepted from a GP due to the nature of counselling required, e.g. if someone suffered from severe depression it would not be appropriate for them to self-refer if they were under care of their GP. Counsellors are all trained and experienced and would be able to make judgement calls appropriately. Counsellors would refer on where they thought appropriate.

Lorna asked where Ballochyle House fits in. Giles said that Ballochyle House do not accept self referrals and that they are Tier 2 on the model. He would expect to work with Ballochyle House as partners in the future as part of this project.

Lorna asked about partners. Giles said that at present only Dr Hall is a partner but other links will be established as and when needed.

**General discussion re bidding**

Laura mentioned the Autism Strategy Group and said that it would be good to see bids coming from this area.

Lorna thought that we should in general identify gaps and see if there is a potential to fill them.

**Next deadline for receiving applications for CHWN funding 16<sup>th</sup> September**

**Next Meeting Date Wednesday 25<sup>th</sup> September 2013 12:30pm  
Community Education Centre, Edward Street, Dunoon, GP Room**