

## **HEALTH & WELLBEING**

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## 1 Primary Care (General Practice) Service in England

1.1 For some years the General Practice in England has been under pressure with increasing patient numbers and difficulties in attracting and retaining clinical staff making access to services poor and pressure on staff severe.

1.2 In April 2016 NHS England published a 5-year plan for General Practice, entitled *General Practice Forward View* and a link to this is shown below.

<https://www.england.nhs.uk/wp-content/uploads/2016/04/gpfv.pdf>

1.3 Improvement in the General Practice Service will come from:

- a Achieving a more integrated health care system;
- b Attracting and retaining more clinical staff by increased numbers in training and improved working conditions;
- c Providing healthcare in different ways:
  - i more Practice Nurses and Advanced Nurse Practitioners, who will take on more clinical care, particularly for long term conditions;
  - ii use of Pharmacists and Physiotherapists within Practices and Practice Groups to advise on medication and deal with suitable conditions;
  - iii use of eConsult to help direct patient to an appropriate healthcare professional, so that the history of the condition is already known to the healthcare professional when seeing the patient and to avoid unnecessary consultations;
  - iv use of Electronic Prescribing (ePS) to reduce physical attendance at Practices;
  - v Use of the NHS App, which started in January 2019, for patients over the age of 13 years and allows patients to check their symptoms, find out what to do when they need help urgently, book and manage appointments at their Practice, order repeat prescriptions and view their medical records securely. About 95% of Practices in England can use all the features of the NHS App. Details of the NHS App can be found using the link below; and  
<https://www.nhs.uk/using-the-nhs/nhs-services/the-nhs-app/>
  - vi freeing General Practitioner time, by the changes in 1.3ci to 1.3cv so that they can concentrate on patients specifically requiring care by a doctor.
- d General Practices working together in geographical areas to:

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- i Ensure equity of access;
- ii Allow more mutual clinical support between practices; and
- iii Allow consolidation and provision of more specialised services within the Practice Groups.

- 1.4 Primary Medical Care is delivered by a variety of staff, which includes:
- a General Practice Partner (Doctor) - own part or all of business and premises;
  - b Salaried Doctor - contracted to provide medical services to the Practice;
  - c Locum Doctor - employed to provide medical services for a variable period of usually not more than one year;
  - d General Practice Registrar - qualified doctor undertaking further training in General Practice;
  - e Advanced Nurse Practitioner - qualified nurse with additional training in specific areas of practice;
  - f Practice Nurse - qualified nurse undertaking general nursing duties;
  - g Musculoskeletal Practitioner - a qualified Physiotherapist providing care for musculoskeletal conditions;
  - h Mental Health Practitioner - a healthcare provider with specific mental health training; and
  - i Paramedic - healthcare provider with specialist training to respond to medical situations and emergencies outside a hospital or Practice.

## **2 West Hampshire Clinical Commissioning Group (WHCCG)**

- 2.1 West Hampshire Clinical Commissioning Group commissions medical services for a large area (2242 square kilometres) of west Hampshire with a population of over 550,000 people. There are 48 Practices within the Group, split into six localities.
- 2.2 The West Hampshire Clinical Commissioning Group locality relevant to Botley is the Eastleigh Southern Parishes Network and comprises of five Practices, these being:
- a Blackthorn Health Centre;
  - b Bursledon Surgery;
  - c Hedge End Medical Centre;
  - d West End Surgery; and

e St Luke's & Botley Surgeries.

- 2.3 The results of the annual General Practice Patient Survey for the four West Hampshire Clinical Commissioning Group Surgeries are consistently higher for overall patient satisfaction (overall mean 85.6) than those for St Luke's & Botley Surgeries (mean 55.5), which are part of the Living Well Partnership. Detailed results are shown in the Appendix page 1.
- 2.4 During the Eastleigh Borough Council consultation on the Boorley Green and Woodhouse Lane developments, in 2012, the then commissioning body, the Southampton, Hampshire, Isle of Wight & Portsmouth Primary Care Trust, advised that the additional housing would generate the need for three additional general medical practitioners and their ancillary staff. It is not clear to us what either Eastleigh Borough Council's or the West Hampshire Clinical Commissioning Group's plan to meet this need entails.
- 2.5 The St Luke's & Botley Patient Participation Group raised their concerns about the impact of increased housing on healthcare provision with Eastleigh Borough Council in 2015, 2016 and 2017 without a clear and structured plan emerging. During the same period Hedge End Medical Centre raised similar concerns.
- 2.6 We are informed by the West Hampshire Clinical Commissioning Group that Hedge End and Botley are the largest areas of development with the Group and that they are working closely with Eastleigh Borough Council about healthcare provision but again no clear structured plan has been shared with us.

### **3 Southampton City Clinical Commissioning Group**

- 3.1 Southampton City Clinical Commissioning Group commissions medical services within the Southampton City boundary (72 square kilometres) with a population of 287,000 people. The Primary Medical Care is provided by Southampton City Primary Care Limited, with 26 General Practices within the Group, split into three localities.
- 3.2 The locality group within Southampton Primary Care Limited with relevance to Botley is the East Group and comprises of seven Practices, these being:
- a Bitterne Health Centre;
  - b Peartree Practice, includes Bath Lodge Surgery and Chessel Practice;
  - c St Peter's Surgery;

- d The Old Fire Station Surgery;
- e Townhill Community Surgery;
- f Weston Lane Surgery, branch surgeries Harefield, Bitterne Park, Ladies Walk, Thornhill Park and Midanbury (Living Well Partnership); and
- g Woolston Lodge Surgery.

3.3 The results for the six Southampton City Clinical Commissioning Group Surgeries are with the exception of the Peartree Practice higher (overall mean including Peartree Practice 77.2) than those for Weston Lane and its Branch Surgeries (mean 61.8), which are the main part of the Living Well Partnership. Detailed results are shown in the Appendix page 1.

#### **4 Primary Medical Care - St Luke's & Botley Surgeries**

4.1 The Primary Medical care (General Practice) for Botley is provided from St Luke's Surgery in Hedge End, just outside the western boundary of the Parish, and Botley Surgery, which is in Mortimer Road in central Botley.

4.2 The St Luke's & Botley Surgeries' catchment area covers the whole of Hedge End and Botley (see boundary map in the Appendix page 2).

4.3 Currently any resident living within the boundary of St Luke's & Botley Surgeries (boundary is the M27 and the outer boundary of the Living Well Partnership, in green on the map) can register as a patient but you cannot register if you live outside the outer boundary of the Living Well Partnership.

4.4 If a patient moves outside the outer boundary of the Living Well Partnership, they could be asked to find a new Practice. The Practice should request this quickly after being informed of change of address.

4.5 According to NHS Digital the number of patients registered at St Luke's & Botley Surgeries has fallen from 12,042 in November 2017 to 11,175 in February 2021. There is no clear explanation for this fall, but patient dissatisfaction with the service is likely to be the root cause.

4.6 There is no General Practice facility in the northern part of Botley (Boorley Green) to deal with the needs of the increasing number of residents as new

dwellings at Boorley Park and Boorley Gardens are built. There does not appear to be any plan to provide General Practice facilities in this area.

- 4.7 The St Luke's Surgery must be open from 8.00 am to 6.30 pm Monday to Friday.
- 4.8 The Extended Hours session at St Luke's Surgery now provides appointments to see a nurse from 6.30 to 8.00 pm on Thursdays and to speak to a General Practitioner by phone from 6.00 to 7.30 pm on Mondays and 7.30 to 8.00 am and 6.30 to 8.00 pm on Thursdays.
- 4.9 Botley Surgery is a Branch Surgery and is not required to have defined opening times. As a result of shortage of medical staff, the reduced opening hours of Botley Surgery are 8.30 am to 1.00 pm Monday, Tuesday and Friday and 8.30 am to 12.30 pm on Friday. There are some unscheduled morning closures, if the medical staff are required to maintain the clinical service at St Luke's Surgery. This is an unsatisfactory situation for Botley residents.
- 4.10 Further information, including current opening times, for St Luke's & Botley Surgeries can be found on the Practice web site, using the link below.  
<http://www.stlukesandbotleysurgery.co.uk/>
- 4.11 Until October 2017 the healthcare services at St Luke's & Botley Surgeries were provided by an independent General Practice group within the West Hampshire Clinical Commissioning Group but because of difficulties in recruiting clinical staff the clinical service was transferred to the Living Well Partnership for a trial period of 6 months, which subsequently has been extended.
- 4.12 St Luke's & Botley Surgeries were placed in Special Measures by the Care Quality Commission Special Measures in April 2018, after an inspection in February 2018 showed an unsatisfactory service. A further inspection in August 2018 showed improvement and the Special Measures were withdrawn in October 2018, although the Practice was rated as Requires Improvement. There will be no formal CQC Report following this inspection, as St Luke's Surgery is now listed as a location under the Living Well Partnership and not as a Practice in its own right.
- 4.13 The Care Quality Commission will inspect St Luke's again in the future, but it is not clear when this will be and whether the rating will be for St Luke's alone or for the Living Well Partnership as a whole.

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- 4.14 In a Parish wide survey conducted in 2016 81.6% of respondents were either concerned or very concerned about the increasing failure of the local General Practice Service and only 6.0% were satisfied. In a further survey performed in 2017 30% of those responding felt there was a need for more doctors, and this was the highest number of comments on matters other than traffic calming.
- 4.15 St Luke's & Botley Surgeries appear to be less well funded using the Carr-Hill weighting for the elderly population than expected. This may represent a 20% underfunding, which is the equivalent of two full time doctors.
- 4.16 The St Luke's & Botley Surgeries results from the annual General Practice Patient Survey show a lower level of patient satisfaction over the past four years (mean overall satisfaction 55.5%) than for the other four Practices in the Eastleigh Southern Parishes Network (mean overall satisfaction 85.6%).
- 4.17 The other Practices in the Living Well Partnership are within the Southampton City Clinical Commissioning Group area. The administrative processes are shared across all the Living Well Partnership Practices, but the clinical information systems remain separate, which is both clinically inefficient and requires additional resources that could be better allocated to other areas.
- 4.18 Areas for improvement in healthcare provision at St Luke's & Botley Surgeries are identified by the St Luke's & Botley Patient Participation Group. The active Group members meet the Practice staff regularly to discuss matters of concern. Recently, a secure way to reach all patients who have given their email addresses to the Practice has been introduced and this should improve communication with patients and secure more feedback on the services offered.
- 4.19 The areas where concern has been expressed are:
- a General communication with patients
  - b Requesting appointments with over-reliance on electronic communication (eConsult)
  - c Poor telephone system making it very difficult to speak to the Practice
  - d A limited service at Botley Surgery, which can be cancelled at very short notice
- 4.20 It is estimated by the St Luke's & Botley Surgeries that about 90% of Botley patients are still driving. Given the age distribution of the community Botley Parish Council would challenge this statement.

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- 4.21 It is not always possible to see the same doctor, as the majority of General Practitioners are part time. Patients can't book to see a specific doctor. However, doctors can arrange to see specific patients for follow-up. However, unexpected moves of doctors around Practices to deal with shortfalls may mean the expected doctor not covering the expected session.
- 4.22 Practice Nurses from St Luke's & Botley Surgeries currently only undertake Home Visits to administer flu vaccination.
- 4.23 There is no Contraception & Sexual Health Clinic at either St Luke's or Botley Surgeries and these women must attend the CASH Clinic at Ladies Walk Surgery, 3.2 miles from Botley Surgery, which can be reached using the Bluestar 3 bus, but this is only an hourly service.
- 4.24 Emergency contraception is provided at Rowlands Pharmacy in central Botley, but this service is Pharmacist dependant so if an appropriately trained Pharmacist is not present these women must go to one of the two Pharmacies in Hedge End. For women at such a stressful time this is not a satisfactory situation.
- 4.31 The Living Well Partnership are looking at improvements to the building at Botley Surgery, funded by NHS improvement grants. Any development at the Surgery must fit with long term plans for General Practice.
- 4.32 The West Hampshire Clinical Commissioning Group are considering an extension to the Botley Surgery using the £225,000 (index linked from 2016) Section 106 agreement funding from the Boorley Park development, held by Eastleigh Borough Council. Currently, West Hampshire Clinical Commissioning Group are preparing an estates strategy for this project.
- 4.33 The Eastleigh Borough Local Plan 2016-2036 contains the statement in paragraph 6.5.72 that *GP Services are understood to be adequate to meet existing local needs*. This runs contrary to the view of the residents and the opinion of the St Luke's & Botley Surgery Patient Participation Group, which had been shared with Eastleigh Borough Council. An extract from this Health & Wellbeing Paper was submitted to the Inspector prior to this statement being challenged by the Parish Council at the Eastleigh Borough Council Local Plan Hearing on 28 January 2020. The Inspector was asked to consider the following alternative wording: *General Practice and related medical services in Botley Parish are known to be under strain and significant improvement and expansion will be required to meet both existing and future needs in the Parish. New housing and employment developments should be required to make*



*proportionate contributions towards such improved and expanded medical services.* Eastleigh Borough Council Officers were supportive of this revised statement and we are awaiting the Inspector's Report on the Local Plan. A link to the Parish's representations to the Inspector is shown below.

<https://www.eastleigh.gov.uk/media/3484/final-local-plan-document-june-2018-print.pdf>

<https://www.botley.com/np-evidence-base-2/send/84-np-evidence-base/1197-ebbp-matters-8-13>

#### 4.34 Aims

- a Consider the implications of any comment from the Inspector relating to Eastleigh Borough Local Plan's view on the adequacy of healthcare provision in Botley.
- b Work with whichever organisation provides the clinical service so that there are a core number of General Practitioners regularly providing the routine service at St Luke's and Botley Surgeries and that the service is not constantly provided by a variety of visiting and locum doctors.
- c Work with the St Luke's & Botley Patient Participation Group to monitor the views of the patients on the service offered to confirm an improving service.
- d Work with the St Luke's & Botley Patient Participation Group to monitor the annual General Practice Patient Survey results to confirm an improving service, although it may be difficult to find data for St Luke's Surgery alone (see 4.11 and 4.12).
- e Work with the St Luke's & Botley Patient Participation Group to monitor the closures at Botley Surgery and continue to press whichever organisation provides the clinical service to ensure that Botley Surgery is open every weekday afternoon.
- f Work with the St Luke's & Botley Patient Participation Group to monitor general, clinical and telephone communication with patients and continue to press whichever organisation provides the clinical service to ensure improvements in these services.
- g Work with Eastleigh Borough Council to ensure that the Section 106 agreement funding allocated to the Botley Surgery from the Boorley Park development is used to provide adequate infrastructure to support the General Practice needs of the Boorley Park residents, irrespective of the Clinical Commissioning Group providing the clinical services.

## 5 Use of Parish buildings for direct healthcare provision

- 5.1 Botley Parish Council is in favour of offering the use of Parish buildings for direct healthcare provision and training but having taken professional advice it is clear

that Parish buildings and their waste disposal makes them unsuitable for any direct clinical care provision.

- 5.3 However, Parish buildings or their associated car parks might be suitable for some screening and training programmes, for example:
- a Abdominal Aortic Aneurysm screening;
  - b Mobile Diabetic Eye Screening;
  - c Staff and public training sessions for example in:
    - i Cardiopulmonary Resuscitation (CPR) and Automated External Defibrillators (AEDs);
    - ii Asthma;
    - iii Diabetes;
    - iv Dementia; and
    - v Mental Health.

- 5.4 Aim
- a Work with providers of community-based health screening and education to see what services could use Parish buildings or car parks.

## **6 Primary Medical Care - Hedge End Medical Centre**

- 6.1 The General Practice care for a large part of Hedge End is provided by the Hedge End Medical Centre.
- 6.2 Hedge End Medical Centre's catchment area extends to almost the whole of Botley except for a small area to the south of Denham's corner (see boundary map in the Appendix page 2).
- 6.3 Currently any resident living within the inner boundary can register with Hedge End Medical Centre but you cannot register as a new patient if you live outside the inner boundary.
- 6.4 If a patient moves from inside the inner boundary stays within the outer boundary, they can remain registered at Hedge End Medical Centre. If the move is to outside the outer boundary, they could be asked to find a new Practice. The Practice should request this quickly after being informed of change of address.

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- 6.5 Reduction in the catchment area would require the agreement of the West Hampshire Clinical Commissioning Group and would require a clear reason and, if agreed, would most likely be time limited. It is usually a condition of reducing a boundary that current patients remain on the list and are not asked to move.
- 6.6 Hedge End Medical Centre is a training Practice and so has two General Practice Registrars. They benefit both the number of patients seen and the recruitment of new Salaried Doctors, when these are required.
- 6.7 A significant number of patients living in Botley are registered at Hedge End Medical Centre, particularly but not exclusively those living in western Botley.
- 6.8 The number of patients registered at Hedge End Medical Centre has risen from 13,000 in 2018 to 17,051 in February 2021. This is putting the Practice under increased pressure, partly due to the physical constraints of the building and the limited space for patient car parking. Increasing patient numbers might ultimately lead to a boundary reduction, which might impact on Botley residents.
- 6.9 Hedge End Medical Centre use Advanced Nurse Practitioners to make some house-calls directed by the medical staff and are considering appointing a Paramedic for the same purpose.
- 6.10 Hedge End Medical Centre is open from 8.30 am to 6.30 pm Monday to Friday.
- 6.11 The Extended Hours sessions at Hedge End Medical Centre are from 6.30 to 8.30 pm on alternate Mondays and Thursdays and from 8.00 am to 12.00 noon on alternate Saturdays.
- 6.12 Further information, including current opening times, for Hedge End Medical Centre can be found on the Practice web site, using the link below.  
<https://www.hedgeendmedicalcentre.co.uk/>
- 6.13 As an additional healthcare service Hedge End Medical Centre provide regular medical rounds at the Maypole, Hollybank, The Grange, Kitnocks and the White House Care/Nursing Homes with the addition of an Old Age Psychiatrist on the round at the White House.

6.14 Aim

- a Monitor any planned changes in the Hedge End Medical Centre's inner catchment area boundary and their possible impact on Botley residents.

## 7 Active Signposting & Care Navigators

7.1 In the *General Practice Forward View* additional training for Reception and Clerical Staff is recommended so that they can undertake Active Signposting to direct patients to the most appropriate source of help, which might include web or App based or other self-management resources as well as healthcare resources within the Practice. The link below provides further information concerning Active Signposting and Care Navigators.

<https://www.england.nhs.uk/gp/gpfpv/redesign/gpdp/reception-clerical/>

7.2 Some Practices provide additional training so that their Care Navigators can provide advice and support for a wider group of patients, for example the frail elderly, those recently discharged from hospital, streamline the process of home visits, liaise with local Pharmacies to set up dosette boxes for medication, help set up Care Packages or making decisions about moving into care.

## 8 Social Prescribing

8.1 The NHS Long Term Plan states that personalised care will become business as usual across the health and care system by 2023/24. Further information concerning the NHS Long Term Plan can be found using the link below.

<https://www.longtermplan.nhs.uk/>

8.2 As part of personalised care Social Prescribing will allow referral to a trained link worker, who will provide advice on a holistic approach to health and wellbeing. Further information concerning Social Prescribing can be found using the link below.

<https://www.england.nhs.uk/personalisedcare/social-prescribing/>

8.3 General Practitioners can prescribe *Exercise for Health* programmes at local Keep Fit Groups or Gyms and dietary support for appropriate patients from Weight Watchers or Slimming World.

## 9 Appointments Plus (Extended Access Service)

- 9.1 The Extended Access Service has been renamed Appointments Plus but is generally referred to as the Hub Service.
- 9.2 The Appointments Plus service is a pre-booked service not a walk-in service. Bookings are made either via the patient's own General Practice or the NHS 111 Service. The service does not deal with medical emergencies that should be seen in Urgent Treatment Centres or hospital Accident & Emergency Units.
- 9.3 At the Hub patients can see an appropriate healthcare professional (Doctor, Advanced Nurse Practitioner, Musculoskeletal Practitioner or Mental Health Practitioner). Assessment, immediate treatment and arrangements for on-going treatment or referral are provided.
- 9.4 For the Eastleigh Southern Parishes Network, St Luke's & Botley Surgeries and Twyford, Wickham and Bishops Waltham Practices the Appointments Plus (Hub) Service is at Botley Surgery. The Botley Hub service is commissioned by the West Hampshire Clinical Commissioning Group. The Botley Hub hours are 6.30 pm to 9.30 pm Monday to Wednesday and Friday, 6.30 pm to 10.00 pm Thursday, 8.00 am to 6.00 pm Saturday and 9.00 am to 1.00 pm Sunday. However, these times can change, and current times are shown on the West Hampshire Clinical Commissioning Group's Appointments & Urgent Treatment Centre Information page using the link below.
- <https://westhampshireccg.nhs.uk/your-health/appointments-and-urgent-treatment-centre/>
- 9.5 At present a disproportionate number of visits to the Botley Hub are by patients from St Luke's & Botley Surgeries simply because of the current difficulties experienced by patients trying to access routine care at the Practice.
- 9.6 For Southampton Primary Care Limited, the Appointments Plus (Hub) Service is provided on a rotational basis at 7 sites listed below, with the shortest distance in miles from central Botley and central Boorley Park shown.

	Central Botley	Central Boorley Park
Aldermoor Surgery	8.7	16.4
Chessel Practice	5.4	11.5
Lordshill Health Centre	13.2	19.3

Portswood Solent Surgery	6.5	12.6
Shirley Health Partnership	8.6	18.5
St Mary's Surgery	6.6	13.6
Woolston Lodge Surgery	5.7	12.9

- 9.7 For the East Group of Practices in the Southampton Primary Care Limited, the Hub service is available from 8.00 am to 9.00 pm seven days per week. Below is a link to the Southampton City Clinical Commissioning Group's Southampton General Practices information.

<https://www.southamptoncityccg.nhs.uk/gps-and-localities>

- 9.8 Aim

- a Work with whichever organisation provides the clinical service so that the residents of Botley continue to have access to the Appointments Plus (Hub) service at Botley Surgery.

## 10 Out of hours Primary Medical Care

- 10.1 Out of hours medical care is provided through the NHS 111 Service. The 111 Team would assess the nature of the medical need and provide advice, which might include review by a doctor, an out-of-hours appointment or a home visit.

- 10.2 Below is a link to the NHS Choices Urgent & Emergency Care information.

<https://www.nhs.uk/using-the-nhs/nhs-services/urgent-and-emergency-care/>

## 11 Urgent Treatment Centre and Minor Injuries Unit

- 11.1 The two nearest Urgent Treatment Centre and Minor Injuries Units are located at the Royal South Hants Hospital in Southampton (9.4 miles from central Botley) and at St Mary's Treatment Centre in Portsmouth (15.8 miles from central Botley).

- 11.2 The Units are open to all NHS patients and deals with a wide range of non-life-threatening conditions. The Units are nurse-led but General Practitioners are present.

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- 11.3 The Units are open from 7.30 am to 10.00 pm Monday to Friday and 8.00 am to 10.00 pm at weekends and on Bank Holidays. Patients can be seen without an appointment or can arrange an appointment time through the NHS 111 Service.
- 11.4 Unfortunately, the public transport links to the Royal South Hants Hospital are poor and require taking the Bluestar 3 route from Botley Primary School, which runs only hourly from 9.00 am to 5.00 pm, to Brinton's Terrace, a journey time of 45 minutes.
- 11.5 The link below provides further information concerning the two Urgent Treatment Units
- <https://www.southamptoncityccg.nhs.uk/southampton-urgent-treatment-centre>
- <https://www.stmarystreatmentcentre.nhs.uk/utc/>

## 12 Physiotherapy and Podiatry Services

- 12.1 a NHS Physiotherapy Services are provided by either:
- i the Southern Health NHS Foundation Trust, at Moorgreen Hospital (2.7 miles from central Botley) or Antelope House on the Royal South Hants Hospital site (9.4 miles from central Botley);
  - ii the University Hospital Southampton NHS Foundation Trust (10.1 miles from central Botley); or
  - iii referral for Physiotherapy must be made by a doctor or a Musculo-skeletal Practitioner.
- b Currently, there are ten private Physiotherapy providers within 5 miles of central Botley.
- 12.2 a NHS Podiatry Services are provided by Southern Health NHS Foundation Trust, at Moorgreen Hospital or Antelope House.
- b Age Concern run a weekly foot clinic at the Botley Centre. This provides a basic foot health check and toenail cutting. There is a one-off charge of £10.00 for the equipment, which is kept for the individual person, and then a £15.00 charge for toenail care, which is recommended to be repeated at 8 weekly intervals. For those unable to trim toe-nails proper nail care reduces the risk of toe nail infection and the risk of falls. If more specialised podiatry care is required advice on what is needed and where to get help is provided.

- c Currently, there are eight private Podiatry providers within 5 miles of central Botley.

### **13 Opticians, Ophthalmic Services, Audiology Service and Hearing Tests**

- 13.1
  - a NHS Ophthalmic Services are provided by:
    - i The Southampton Eye Hospital, which is on the University Hospital Southampton campus. Also, this is the site of the Eye Casualty; and
    - ii Diabetic retinal screening is provided by the Hampshire & Isle of Wight Diabetic Eye Screening Programme and the local service is run from the University Hospital Southampton. There are four sites for diabetic eye screening within 5 miles of central Botley (Bitterne Health Centre, Chessel Practice, Fair Oak & Horton Heath Parish Council Office and Fareham Community Hospital).
  - b There are 12 private Opticians within 5 miles of central Botley and all provide NHS Eye Tests.
  - c Opticians can refer patients directly to NHS Ophthalmic Services using form GOS18, when a copy of this goes to the patient's own General Practitioner.
- 13.2
  - a NHS Audiology and Hearing Services are provided by:
    - i The University Hospital Southampton, who also provide the auditory implant service. Also, the University Hospital provides the Community Audiology Service located at the Royal South Hants Hospital; and
    - ii The Hampshire Hospitals, who provide clinics at the Wickham Surgery (4.7 miles from central Botley), Eastleigh Health Centre and at the Royal Hampshire County Hospital.
  - b There are 4 private Opticians who also provide a Hearing Service within 5 miles of central Botley and all provide NHS Hearing Tests.
  - c Opticians can refer patients directly to NHS Hearing Services using form GOS18, when a copy of this goes to the patient's own General Practitioner.

### **14 Secondary & Tertiary Medical Care**

- 14.1 The Secondary (general hospital care) & Tertiary (specialised hospital care) for Botley Parish residents are provided mainly by the University Hospital Southampton NHS Foundation Trust, which is 10.1 miles from central Botley.



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- 14.2 Secondary and some tertiary care hospital can be provided at either the Royal Hampshire County Hospital, part of the Hampshire Hospitals NHS Foundation Trust, in Winchester (15.8 miles from central Botley) or Queen Alexandra Hospital (12.4 miles from central Botley).
- 14.3 Private medical care, both outpatient and inpatient, is provided at the Spire Hospital in Southampton, the Wessex Nuffield Hospital in Chandler's Ford and the BMI Sarum Road Hospital in Winchester. As part of NHS contracts some NHS care is provided at these hospitals.
- 14.4 Once referred for hospital care patients can use the NHS e-Referral Service (Choose and Book) to arrange where the care will be provided and book an appointment. Further details are shown in the links below.
- <https://www.nhs.uk/using-the-nhs/nhs-services/hospitals/nhs-e-referral-service/>
- <https://www.nhs.uk/nhsengland/appointment-booking/documents/nhs-e-referral-service-patient-guide-vs3.pdf>
- 14.5 The University Hospital Southampton provides a very wide range of speciality care, except specialised burns care and reconstructive surgery, specialised spinal injuries care and solid organ transplantation.
- 14.6 As with all Acute Hospitals in England the mortality rates at the University Hospital Southampton are reported using two common methods of calculating hospital mortality, these being the Summary Hospital-level Mortality Indicator (SHMI) and the Hospital Standardised Mortality Rate (HSMR). They use different risk models to calculate the expected mortality, so there is usually a small difference between the two results for any given hospital. In both the national average is 100. To be significantly better than expected the 95% upper confidence limit must be below 100.
- a The SHMI has been improving steadily over the past four years and is significantly better than expected at **82.2**. This places the Hospital as the 8<sup>th</sup> best of the 124 acute non-specialist hospitals in England, whereas it was 27<sup>th</sup> four years ago.
- b The HSMR has been improving steadily over the past four years and is significantly better than expected at **75.2**. This places the Hospital as the 5<sup>th</sup> best of the 124 acute non-specialist hospitals in England, whereas it was 26<sup>th</sup> four years ago.
- 14.7 Unfortunately, the public transport links to the University Hospital are poor and require taking the Bluestar 3 route from Botley Primary School, which runs only

hourly from 9.00 am to 5.00 pm, to New Road Southampton then crossing the road to take the Uni-bus U6 to the University Hospital Southampton, a total journey time of 90 to 100 minutes.

- 14.8 Road connections from Botley to the University Hospital Southampton are straight forward but car parking at the Hospital is both expensive and on occasions difficult to secure.
- 14.9 Often but not always Botley Neighbourcare is able to arrange a volunteer driver to help a patient attending a clinic at the University Hospital Southampton and charges a small amount to cover the petrol. Also, they are often able to arrange a volunteer driver for local General Practice, dental and optician appointments.

## **15 South Central Ambulance Service**

- 15.1 South Central Ambulance Service provides three main services, these being:
- a Accident & Emergency service responding to 999 calls;
  - b The 111 Service for help less urgent than 999; and
  - c The Non-Emergency Patient Transport Service.
- 15.2 South Central Ambulance Service covers seven counties, these being Buckinghamshire, Oxfordshire, Berkshire, Surrey, Hampshire (not Isle of Wight), West Sussex and East Sussex.
- 15.3 The Ambulance Quality Indicators show that South Central Ambulance Service performs well when compared to the other 10 Ambulance Services in England and achieves the required response time targets in all four call Categories.
- 15.4 Further information on the Ambulance Quality Indicators can be found on the link below.
- <https://www.england.nhs.uk/statistics/statistical-work-areas/ambulance-quality-indicators/>
- 15.5 More information about the South Central Ambulance Service and to the South Central Ambulance Service Non-Emergency Patient Transport Service can be found on the two links below.

<https://www.scas.nhs.uk/about-scas/>

<https://www.scas.nhs.uk/our-services/non-emergency-patient-transport-service/>

## **16 Change in the commissioning of General Practice Services in Hampshire**

16.1 At present the healthcare service at St Luke's & Botley Surgeries is commissioned by the West Hampshire Clinical Commissioning Group and provided on the ground by the Living Well Partnership. The remainder of the Living Well Partnership's healthcare services are commissioned by Southampton City Clinical Commissioning Group and this causes clinical information difficulties between the two parts of the Living Well Partnership.

16.2 In April 2021 six Clinical Commissioning Groups (excluding Portsmouth) in Hampshire will merge to form a single Hampshire, Southampton & Isle of Wight Clinical Commissioning Group. This will resolve the clinical information difficulties within the Living Well Partnership. It is hoped that this merger will lead to a better healthcare service in Botley. Further information can be found using the link shown below.

<https://www.southamptoncityccg.nhs.uk/news/six-clinical-commissioning-groups-ccgs-to-become-one-1511/>

## **17 Automated External Defibrillators**

17.1 When cardiac arrest occurs, prompt cardiopulmonary resuscitation (CPR) and defibrillation can help double someone's chances of survival.

17.2 Currently there are tens of thousands of Automated External Defibrillators in public and private locations across the United Kingdom, but they are used in less than 4% of cardiac arrests.

17.3 The Resuscitation Council (UK) and the British Heart Foundation's Guide to Automated External Defibrillators.

<https://www.resus.org.uk/publications/a-guide-to-aeds/>

17.4 Currently there are three publicly accessible Automated External Defibrillators in the Parish located outside the Botley Centre, outside the Market Hall and outside the Macdonald Botley Park Hotel. To access a defibrillator, you must dial 999 and inform the Ambulance Service of the cardiac arrest situation and

they will tell you the location of the nearest defibrillator and give you the four-digit code to open the defibrillator housing.

- 17.5 South Central Ambulance Service have created an App that shows the user the location of the nearest publicly accessible Automated External Defibrillators. Also, it provides further information and instructional videos covering cardiac arrest and heart attack questions. The link to this App is shown below.

<https://www.scas.nhs.uk/news/campaigns/savealife/>

- 17.6 Scotland and the West Midlands are the pilot sites for the creation of a National Defibrillator Network and, hopefully, this will be rolled out nationally. Further information can be found by using the link below to The Circuit.

<https://www.thecircuit.uk/>

17.8 Aims

- a Ensure that there is an Automatic External Defibrillator at the Boorley Park Community Centre, the Boorley Park Sports Pavilion and at a suitable location in the Boorley Gardens development.
- b Ensure that the location of all publicly accessible Automatic External Defibrillators within the Parish is known to the South Central Ambulance Service.
- c Work with Eastleigh Borough Council so that all developments, irrespective of size, make an appropriate contributor contribution to the creation of additional Automatic External Defibrillator points throughout the Parish.

**18 Youth Sexual Health & Teenage Pregnancy advice**

- 18.1 Youth Sexual Health & Teenage Pregnancy advice is available to patients registered with local General Practices, but on occasions is poorly given. The location for Teenage Drop-in Centres (TADiCs) for sexual health and pregnancy advice are well advertised in all Practices.

- 18.2 There is no Youth Sexual Health & Teenage Pregnancy TADiC in Botley. However, an excellent service is available at the Hedge End TADiC, which is open from 3.00 pm to 6.00 pm on weekdays. The service has been running for 25 years and is partially funded by Eastleigh Borough Council and Hedge End Town Council.

- 18.3 There are TADiCs in Bitterne, Southampton, Eastleigh and Fareham.

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18.4 Emergency contraception is provided by local Pharmacists, but is not always available at any given time in an individual Pharmacy.

18.5 There are a number of web sites providing Sexual Health support and links to the Hampshire section of the NHS *Let's talk about it* and the Hampshire County Council *getiton* are shown below.

<https://what0-18.nhs.uk/resources/information-on-local-healthcare-services/lets-talk-about-it>

<https://www.hants.gov.uk/socialcareandhealth/getiton>

18.6 Aim

- a Botley Parish Council to consider an annual contribution to the Hedge End Teenage Drop-in Centre.

## 19 Dental Care

19.1 NHS Dental Services are commissioned by NHS England through 14 local offices, with the service for Botley being commissioned by NHS South East.

19.2 There are 58 dental practices within 10 miles of central Botley but only two within Botley Parish. Neither of these accept NHS patients.

19.3 The location of dental practices providing NHS dental services is available on the Find Dentists services - NHS web site (see link below).

<https://www.nhs.uk/Service-Search/Dentists/LocationSearch/3>

19.4 For people requiring a dentist in an emergency or out of hours can get advice from NHS Dental 111. Further information is available on the web site shown below.

<https://www.nhs.uk/common-health-questions/dental-health/how-can-i-access-an-nhs-dentist-in-an-emergency-or-out-of-hours/>

19.5 Unfortunately using the Find Dentists web site shows that of the 58 practices 17 (29.3%) have no details about accepting either adults or children as NHS patients. Only 9 (15.5%) are shown as accepting adults and 12 (20.7%) as accepting children as NHS patients and phone contact with these Practices confirms the NHS Choices is correct. Practices change access for NHS

patients from time to time so the data above will change but the proportion accepting NHS patients at any one time is unlikely to vary very much.

## **20 Rest, Care & Nursing Homes**

- 20.1 There are only 4 Care providers in Botley Parish, with a total of 42 bed spaces and of these 23 beds are for Dementia and Old Age care.
- 20.2 There are a further 46 Care providers outside Botley Parish but within 4 miles of central Botley, with a total of 1166 bed spaces and of these 951 beds are for Dementia and Old Age care.
- 20.3 Although the facilities for Dementia and Old Age care in Botley Parish are probably inadequate for the need, based on the size and age distribution of the resident population, there does appear to be adequate provision currently within a few miles of the centre of Botley, albeit outside the Parish boundary.
- 20.4 With the steadily increasing age of the population and increasing rates of dementia it is of paramount importance that the provision of various types of residential care keeps pace with the need. Also, although not directly a healthcare issue it is important that there is an adequate supply of affordable smaller houses and bungalows for downsizing and proper provision of housing with some form of warden assistance.

## **21 Air Quality in Botley**

- 21.1 Air pollution comes from a wide range of sources. In the UK there are 13 pollutants with ambient air quality standards (see Appendix page 3).
- 21.2 Two types of air pollutants are particularly relevant to air quality in Botley High Street, these being:
- a Nitrogen oxides (NO<sub>x</sub>). NO<sub>x</sub> is a group of gases predominantly formed during fossil fuel combustion, with the main component being Nitric oxide (NO), which is not itself a health hazard. NO reacts very quickly with other atmospheric gases to form Nitrogen dioxide (NO<sub>2</sub>), which is a health hazard. Also, NO<sub>2</sub> is important in the formation of Ozone (O<sub>3</sub>). The main source of NO<sub>x</sub> is road transport (34%). Short term exposure to concentrations of NO<sub>2</sub> can cause inflammation of the airways, increase in the susceptibility to respiratory infections and to allergens. It exacerbates the symptoms of those with pre-existing lung or hearty disease shortening their lives.

However, it is difficult to attribute increased mortality to NO<sub>2</sub> alone rather than to a mixture of pollutants. NO<sub>x</sub> levels have fallen steadily since 1990 and in the period 1970 to 2015 had fallen by 71%. The target reduction of 55% by 2005 was not achieved till 2009 but the target reduction by 2030 of 73% was almost achieved in 2015; and

- b Particulate Matter (PM). PM is everything in the air that isn't a gas. It can come from natural sources such as pollen, sea spray and desert dust or from human made sources such as smoke from fires, soot from vehicle exhausts, dust from tyres and brakes and industrial emissions. Particles are classified by size as PM<sub>10</sub> (particles below 10 micrometres diameter) or PM<sub>2.5</sub> (particles below 2.5 micrometres, 200 times smaller than a grain of sand). PM can travel large distances in the air, so producing impacts far from the original source. The main source of PM is domestic wood and coal burning (38%) with only 12% coming from road transport. PM can have short-term health impacts over a single day when concentrations are high and long-term impacts from lower level exposure. The effects are amplified in vulnerable groups, including young children, pregnant women and unborn babies, the elderly and those with pre-existing breathing and heart problems. Broadly speaking smaller particle size has a greater the health impact. Between 1970 and 2016 PM<sub>10</sub> levels fell by 73% and PM<sub>2.5</sub> levels by 78%. However, both levels have been relatively stable since 2009 with PM<sub>2.5</sub> falling by only 2.2%. The target is to reduce PM<sub>2.5</sub> levels from the 2005 baseline by 30% in 2020 and 46% in 2030.
- c For more information on NO<sub>x</sub> and PM<sub>2.5</sub> see Appendix page 3. A link to the Department for Environment, Food & Rural Affairs Clean Air Strategy 2019 is shown below

[https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/770715/clean-air-strategy-2019.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/770715/clean-air-strategy-2019.pdf)

- 21.3 The High Street and Broad Oak suffer from excessively high levels of traffic and congestion, which in turn has an adverse effect on air quality. The area is designated as an Air Quality Management Area (AQMA) by Eastleigh Borough Council Environmental Health. AQMA reference is 1680, Eastleigh AQMA Number 4 (High Street, Botley). The designated area incorporates the A334 from the Parish boundary east of the junction with the B3354, Winchester Street, to its junction with Woodhouse Lane incorporating Broad Oak and a 5m corridor either side of it. This is a total area of 2.7 hectares.
- 21.4 The only airborne pollutant measured by Eastleigh Environmental Health is Nitrogen dioxide (NO<sub>2</sub>). Currently, the Government annual target for NO<sub>2</sub> is to be below 40 µg/M<sup>3</sup> (micrograms per cubic metre) of air and for hourly mean exposure not to exceed 200 µg/M<sup>3</sup> more than 18 times per year.

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- 21.5 NO<sub>2</sub> levels have been measured in various locations in Botley since 2012 (see Appendix page 4). The results are expressed as monthly or annual mean levels and a summary of these results are shown in Appendix page 4-5. A link to the full results of the Eastleigh Borough Council's NO<sub>2</sub> monitoring is shown below.
- <http://eastleigh.my-air.uk/diffusion-tube-data/>
- 21.6 In Botley High Street the annual mean NO<sub>2</sub> target level of below 40 µg/M<sup>3</sup> was achieved in eight of the nine years from 2012 to 2020 (data to October 2020). The target was probably just exceeded in 2014 (see 21.9). Over these nine years the number of months in any one year over target has fallen to zero. In this nine-year period the mean NO<sub>2</sub> levels for HSB and HSB2 have fallen by 28.7% and 30.1% respectively (see Appendix page 6).
- 21.7 Although not measured it is likely that the NO<sub>2</sub> levels in much of Mill Hill may be higher than in Botley High Street because of the canyon effect along this part of the road and the regular queuing of traffic.
- 21.8 There is increasing evidence that air pollution at levels below the recommended target level are injurious to many aspects of physical or mental health in some people so continuing reduction of all airborne pollution is a highly desirable goal.
- 21.9 The Eastleigh Borough Council data set for N<sub>2</sub>O levels for 2014 shows an obviously incorrect result for November. The result for the HSB site was 72.63 µg/M<sup>3</sup> (adjusted 66.82 µg/M<sup>3</sup>) when for the HSB2 site result was 38.00 µg/M<sup>3</sup> (adjusted 41.05 µg/M<sup>3</sup>). Correction might be achieved by:
- excluding the November result, when the annual adjusted mean becomes 38.00 µg/M<sup>3</sup>;
  - substituting the annual mean for the November result, when the annual adjusted mean becomes 37.92 µg/M<sup>3</sup>; or
  - substituting the November result adjusted by the HSB:HSB2 annual ratio, when the annual adjusted mean becomes 38.61 µg/M<sup>3</sup>.
- 21.10 Eastleigh Environmental Health do not measure PM pollution in Botley, with the nearest monitoring point being Southampton Road in Eastleigh. At this site the PM<sub>10</sub> annual levels were below the target of 40 µg/M<sup>3</sup> from 2016 to 2020. The 24-hour mean exposure should not exceed 50 µg/M<sup>3</sup> more than 35 times per year and this was achieved. The annual results are shown in Appendix page 7. There are no data for PM<sub>2.5</sub> levels. A link to the full results is shown below.
- <http://eastleigh.my-air.uk/annual-statistics/>



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21.11 One of the key questions is the probable impact on air quality in Botley High Street after the opening of the Botley Bypass. This has been fully assessed by Ricardo Energy & Environment on behalf of Eastleigh Borough Council and forms part of the evidence in the submitted Eastleigh Borough Local Plan 2016-2036.

21.12 Even without the Bypass other changes in the causes of pollution will lead to a 18.5% reduction in annual NO<sub>2</sub> levels but a far lower reduction in PM<sub>10</sub> (4.9%) and PM<sub>2.5</sub> (7.7%) levels. The opening of the Bypass should result in virtually a doubling of the reduction (35.9%) in the NO<sub>2</sub> levels and a greater reduction in the PM<sub>10</sub> (22.3%) and PM<sub>2.5</sub> (24.3%) levels. All the available results are in Appendix page 7. The link to the two reports by Ricardo Energy & Environment are shown below.

<https://www.eastleigh.gov.uk/media/4128/env008a-air-quality-main-report.pdf>

<https://www.eastleigh.gov.uk/media/5494/ed23-update-16-air-quality-impact-assessment-position-at-2020.pdf>

21.13 As stated in 21.2b burning domestic wood and coal produces 38% of PM air pollution and particularly generates PM<sub>2.5</sub>. In 2017 the UK Government started a consultation on banning the sale of domestic coal and wet wood. The uses of these fuels will be phased out starting in February 2021, as part of the Clean Air Strategy. It should be noted that this is not a ban on wood burners but is a ban on selling wet (not seasoned) wood for wood burners. More information can be found using the links below.

<https://www.botley.com/np-evidence-base-2/send/84-np-evidence-base/1198-air-pollution-from-burning-coal-and-wet-wood>

[https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/770715/clean-air-strategy-2019.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/770715/clean-air-strategy-2019.pdf)

21.14 Aims

a Continue to monitor measured air pollution in Botley and work with Eastleigh Borough Council and Hampshire Highways if mitigating measures are required.

b Botley Parish Council to encourage all residents with wood burning stoves to ensure that all wood used is well-seasoned (dry).

## **22 Eastleigh Health & Wellbeing Strategy**

22.1 Eastleigh Borough Council's Health & Wellbeing Strategy has two key themes, these being:

- a To enable health and wellbeing; and
- b To tackle health inequality and deprivation.

22.2 The key points of the strategy are outlined in the Eastleigh Borough Council Corporate Plan Strategy 2018-2020 Corporate Strategy Health and Wellbeing and a link to this is shown below.

<https://meetings.eastleigh.gov.uk/documents/s50019673/Health%20and%20Wellbeing.pdf>

22.3 A few of the key health and wellbeing facts in Eastleigh are that:

- a The health of people is generally better than the England average;
- b It is one of the 20% least deprived district authorities in England;
- c It does have an ageing population with 20.5% of the population over 65;
- d Life expectancy in males and females has been consistently above the national average;
- e Healthy life expectancy (the years lived in good health) has not risen as fast as life expectancy;
- f 23% of adults achieve less than 30 minutes of physical activity per week. The focus needs to move away from formal sport for people who are already active towards informal everyday physical activity (walking, cycling and gardening) for those who are less active or inactive; and
- g 67.7% of adults are over-weight.

22.4 In Sir Michael Marmot's review Fair Society, Healthy Lives 2010 there were 6 key actions, which have been accepted into mainstream Government policy. A link to the full report is shown below. A summary of the key actions is:

- a Giving every child the best start in life;
- b Enabling all children, young people and adults to maximise their capabilities and have control over their lives;
- c Creating fair employment and good work for all;
- d Ensuring a healthy standard of living for all;
- e Creating and developing sustainable places and communities; and

- f Strengthening the role and impact of ill-health prevention.

<https://www.parliament.uk/documents/fair-society-healthy-lives-full-report.pdf>

- 22.5 To achieve the actions outlined in paragraph 22.4 Eastleigh's aspiration is to:
  - a Facilitate better physical and mental health and wellbeing by improving the places people live and work, meeting the challenge of the ageing population and promoting cultural and physical activity; and
  - b Reduce health inequalities by engaging with, and prioritising our services towards, those groups and communities most in need.

## **23 Botley based Health & Wellbeing activity and Support Groups**

- 23.1 The challenges that face Botley, as well as every other community, are:
  - a An ageing population;
  - b The exclusion of some but especially the elderly from digital access;
  - c Social isolation and loneliness. Families and new residents on large developments can feel lonely and isolated and this will particularly be the case where infrastructure development occurs after house building, which seems to be the case in Botley at present;
  - d Mental health, but mental health is increasingly being linked to physical health;
  - e Dementia, in its many forms and causes;
  - f The needs of Carers, especially those for the frail elderly, those with Learning Disabilities and young carers of a parent;
  - g Not meeting the needs of hard to reach groups or individuals in the community; and
  - h Health infrastructure deficit and pressures and expectations on the NHS.
- 23.2 Socio-economic factors (income, employment, education, and isolation), behaviours (smoking, alcohol consumption, diet and exercise) and the quality of and access to the environment (housing, green spaces, clean air and water) appear to have a greater effect on an individual's health than their genetic makeup or the quality of health resources in an area.
- 23.3 A framework for addressing mental health issues is suggested by the 5 ways to wellbeing (link to further information is shown below), which promotes:

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- a Connect to others;
- b Be physically active;
- c Take notice of people and things around;
- d Keep learning; and
- e Give as a volunteer.

[https://www.mind.org.uk/media/4220803/five-ways-to-wellbeing\\_poster.pdf](https://www.mind.org.uk/media/4220803/five-ways-to-wellbeing_poster.pdf)

23.4 The key components of reducing loneliness are:

- a Making connections - finding ways to reach and understand the needs of those experiencing loneliness;
- b Making a difference - providing services that directly improve the number and quality of relationships that people have;
- c Linking up - giving support such as transport and technology to help sustain connections; and
- d The right environment - creating the right structures and conditions locally to support those affected by, or at risk of, loneliness.

23.5 There are 55 groups within the Parish that offer activities to promote physical activity, provide mental stimulation and educational input, encourage social inclusiveness and reduce social isolation (see Appendix page 8). Most of these groups meet regularly on a weekly, fortnightly or monthly basis although some meet on a seasonal or more irregular basis. All Saints Church provides considerable pastoral support throughout the Parish.

23.6 There are a further 20 groups based just outside the Parish offering similar activities to those outlined in 23.5 (see Appendix page 9).

23.7 There are 8 groups, with 5 being within and 3 outside the Parish, providing physical help (see Appendix page 9).

23.8 Further details of the groups mentioned in 23.5 to 23.7 can be found in the Botley Directory, using the link below.

<https://www.botley.com/community-directory>

23.9 There are many local, regional or national charitable organisations that offer help and support for specific issues, for example Age Concern UK, Alzheimer's

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Society, Autism Hampshire, Children & Young Persons Wellbeing Service, Citizens Advice Bureau, Cystic Fibrosis Foundation, Macmillan Cancer Support, Marie Curie, Mind, One Community, Support Hampshire, Versus Arthritis and Vitalise.

### 23.10 Aims

- a Use the annual Community Information Day as a way of encouraging all the many groups providing support to reach a wider audience in the community.
- b Continue to work with Eastleigh Borough Council to ensure that development plans enable residents to have easy access to local retail, leisure and public transport facilities.

## 24 Social Services provision

24.1 Both Adult and Child Social Services are provided by Hampshire County Council.

Approved Botley Parish Council

Version v15

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