

Notice of Meeting

Health and Wellbeing Board



Date & time
Thursday, 13 June
2013
at 1.00 pm

Place
New Council Chamber,
Reigate Town Hall,
Castlefield Rd, Reigate,
Surrey RH2 0SH

Contact
Huma Younis
Room 122, County Hall
Tel 020 8213 2725
huma.younis@surreycc.gov.uk

If you would like a copy of this agenda or the attached papers in another format, eg large print or braille, or another language please either call 020 8213 2725, write to Democratic Services, Room 122, County Hall, Penrhyn Road, Kingston upon Thames, Surrey KT1 2DN, Minicom 020 8541 8914, fax 020 8541 9009, or email huma.younis@surreycc.gov.uk.

This meeting will be held in public. If you would like to attend and you have any special requirements, please contact Huma Younis on 020 8213 2725.

Board Members

Mr Michael Gosling (Co-Chairman)	Cabinet Member for Public Health and Health and Wellbeing Board
Dr Joe McGilligan (Co-Chairman)	East Surrey Clinical Commissioning Group
Mrs Mary Angell	Cabinet Member for Children and Families
Helen Atkinson	Acting Director of Public Health
Dr Andy Brooks	Surrey Heath Clinical Commissioning Group
Dr David Eyre-Brook	Guildford and Waverley Clinical Commissioning Group
Dr Claire Fuller	Surrey Downs Clinical Commissioning Group
Dr Liz Lawn	North West Surrey Clinical Commissioning Group
Sarah Mitchell	Director, ASC
Dr Andy Whitfield/ Dr Jane Dempster	North East Hampshire and Farnham Clinical Commissioning Group
Nick Wilson	Director, CSF
Councillor James Friend	Mole Valley District Council
John Jory	Reigate and Banstead Borough Council
Councillor Joan Spiers	Reigate and Banstead Borough Council
Healthwatch Member TBC	Healthwatch

TERMS OF REFERENCE

The Health and Wellbeing Board:

- oversees the production of the Joint Health & Wellbeing Strategy for Surrey;
- oversees the Joint Strategic Need Assessment; and
- encourages integrated working.

PART 1 IN PUBLIC

1 APOLOGIES FOR ABSENCE

2 MINUTES OF PREVIOUS MEETING:

(Pages 1
- 8)

To agree the minutes of the meeting held on 4 May 2013.

3 DECLARATIONS OF INTEREST

To receive any declarations of disclosable pecuniary interests from Members in respect of any item to be considered at the meeting.

4 QUESTIONS AND PETITIONS

4a Members' Questions

The deadline for Member's questions is 12pm four working days before the meeting (**7 June 2013**).

4b Public Questions

The deadline for public questions is seven days before the meeting (**6 June 2013**).

4c Petitions

The deadline for petitions was 14 days before the meeting. No petitions have been received.

5 JOINT HEALTH & WELLBEING STRATEGY PRIORITY PLAN: EMOTIONAL WELLBEING AND MENTAL HEALTH

(Pages 9
- 32)

To consider the Emotional Wellbeing and Mental Health plan as part of the Joint Health and Wellbeing Strategy.

6 BETTER SERVICES BETTER VALUE (BSBV)

(Pages
33 - 34)

The Chairman will introduce this item to the Board.

This will be followed by a presentation from the BSBV group which summarises the progress that the BSBV programme has made to date, and explains where it is as a part of the ongoing process. It demonstrates the areas where the intentions of the Joint Health and Wellbeing Strategy and BSBV align. Finally it sets out the next steps for the programme.

7 FORWARD WORK PROGRAMME

(Pages
35 - 36)

To consider the Board's forward work programme and confirm the agenda for the next meeting on 19 September 2013.

8 UPDATE ON LOCAL HEALTH AND WELLBEING FORUMS

An update to be provided on the Local Health and Wellbeing Forums.

9 PUBLIC ENGAGEMENT SESSION (Q&A)

To consider the arrangements for public engagement sessions at future Board meetings.

David McNulty
Chief Executive
Surrey County Council
Published: 4 June 2013

QUESTIONS, PETITIONS AND PROCEDURAL MATTERS

The Health and Wellbeing Board will consider questions submitted by Members of the Council, members of the public who are electors of the Surrey County Council area and petitions containing 100 or more signatures relating to a matter within its terms of reference, in line with the procedures set out in Surrey County Council's Constitution.

Please note:

1. Members of the public can submit one written question to the meeting. Questions should relate to general policy and not to detail. Questions are asked and answered in public and so cannot relate to "confidential" or "exempt" matters (for example, personal or financial details of an individual – for further advice please contact the committee manager listed on the front page of this agenda).
2. The number of public questions which can be asked at a meeting may not exceed six. Questions which are received after the first six will be held over to the following meeting or dealt with in writing at the Chairman's discretion.
3. Questions will be taken in the order in which they are received.
4. Questions will be asked and answered without discussion. The Chairman or Board Members may decline to answer a question, provide a written reply or nominate another Member to answer the question.
5. Following the initial reply, one supplementary question may be asked by the questioner. The Chairman or Board Members may decline to answer a supplementary question.

MOBILE TECHNOLOGY – ACCEPTABLE USE

Those attending for the purpose of reporting on the meeting may use mobile devices in silent mode to send electronic messages about the progress of the public parts of the meeting. This is subject to no interruptions, distractions or interference being caused to any PA or Induction Loop systems. The Chairman may ask for mobile devices to be switched off in these circumstances.

It is requested that all other mobile devices (mobile phones, BlackBerries, etc) be switched off or placed in silent mode during the meeting to prevent interruptions and interference with PA and Induction Loop systems.

Thank you for your co-operation

MINUTES of the meeting of the **HEALTH AND WELLBEING BOARD** held at 1.30 pm on 4 April 2013 at Committee Room C, County Hall, Kingston upon Thames, Surrey KT1 2DN.

These minutes are subject to confirmation by the Committee at its meeting on Thursday, 13 June 2013.

Elected Members:

- * Mr Michael Gosling
- * Dr Joe McGilligan
- Dr Akeem Ali
- * Mrs Mary Angell
- * Dr Andy Brooks
- * Dr David Eyre-Brook
- * Dr Claire Fuller
- * Dr Liz Lawn
- * Sarah Mitchell
- * Dr Andy Whitfield
- Dr Jane Dempster (A)
- * Nick Wilson
- * Healthwatch Member TBC

1 APPOINTMENT OF CHAIRMAN [Item 1]

Mr Michael Gosling and Dr Joe McGilligan were appointed as co-chairmen of the Health and Wellbeing Board.

2 APOLOGIES FOR ABSENCE [Item 2]

Apologies were received from Cllr Joan Spiers and Dr Jane Dempster.

Dr Claire Fuller was substituted by Miles Freeman.

3 MINUTES OF THE LAST MEETING [Item]

The minutes of the last Shadow Board Meeting, 6 February 2013 were agreed as a true and correct record by the Board.

4 DECLARATIONS OF INTEREST [Item 3]

There were none.

5 QUESTIONS AND PETITIONS [Item 4]

There were none

(a) MEMBERS' QUESTIONS [Item 4a]

There were none.

6 PUBLIC QUESTIONS

There were none.

7 PETITIONS

There were none.

8 ESTABLISHMENT OF THE BOARD AND TERMS OF REFERENCE [Item 5]**Key points raised during the discussion:**

1. The Cabinet Member for Adult Social Care and Health introduced the terms of reference to Members of the Board. He explained that papers attached in the Agenda contained a report with constitutional amendments formally establishing the Health and Wellbeing Board which had been agreed by Council on 19 March 2013. The Councils

constitution sets out the role, membership and governance arrangements for the Health and Wellbeing Board. The Health and Wellbeing Board has the power to decide its own ways of working within this framework.

2. The Cabinet Member for Adult Social Care and Health commented that the Health and Social Care Act 2012 had changed working practices and required the Board to accurately reflect current legislation.
3. Details around the Membership of the Board were discussed. The various opportunities for additional persons with specific expertise to attend meetings were detailed and noted.

Resolved:

- Members of the Board agreed to the draft terms of reference whilst acknowledging the possibility to explore and change these in the future.

Actions/Next Steps:

None.

9 MEMBERSHIP OF THE HEALTH AND WELLBEING BOARD [Item 6]

Key points raised during the discussion:

1. The Cabinet Member for Adult Social Care and Health advised that the Leader of Surrey County Council had previously written to Leaders of the 11 Borough and Districts asking them for nominations to the Health and Wellbeing Board. The relationship between the County and Local partners was recognised as essential for the development of the Health and Wellbeing Board.

Resolved:

- John Jory, Cllr James Friend and Cllr Joan Spiers be agreed as Members of the Health and Wellbeing Board to represent the Borough and District Councils.

Actions/Next Steps:

None.

10 HEALTHWATCH [Item 7]**Key points raised during the discussion:**

1. The Board received a presentation from Mr Richard Davy, Ms Norma Corkish and Mr Mark Sharman of Healthwatch Surrey. The presentation focused around the vision and principles of Healthwatch Surrey and the strategy around engagement with local residents. The importance of having evidence from consumers which could then be analysed for health trends was seen as crucial to the development of the Healthwatch vision. Building upon key relationships with other organisations was also discussed as being essential in supporting Healthwatch achieve its vision and principles.
2. As an interim measure, a Healthwatch representative would be assigned as a key contact to the Board. Going forward there would be elections for a permanent Healthwatch representative to the Board.
3. A Member of the Board raised a question over whether or not in the first instance; Healthwatch would approach the Board with any concerns that may arise. The Healthwatch representative commented that initially concerns would be resolved with services on a local level. More serious concerns would be drawn to the attention of the Board. Building a trusting relationship between Healthwatch and the Board would be essential to the overall success of both bodies.
4. Members of the Board raised concerns over principles of best practice and how Healthwatch would establish these principles going forward. The Healthwatch representative commented that Surrey Healthwatch was making links with other Healthwatch organisations and Citizen Advice Bureaus across the country to ensure best practice is shared. Currently an email network with nine Healthwatch groups from different counties was being developed, creating a consortium of skills and expertise.
5. Concerns around how Healthwatch aimed to develop its relationship with organisations for children and young people was raised by some Members of the Board. The Healthwatch representative commented that links with Surrey Youth Focus and Schools in the County had been developed. As the vision for Healthwatch developed, looking at how to support these organisations would be a key focus on the agenda.
6. The relationship between Healthwatch and the Health Scrutiny Committee was discussed by Members of the Board. Representatives from Healthwatch recognised that Surrey LINK (Local Involvement Network) had previously established a good working relationship with the Health Scrutiny Committee. This type of working relationship would

be something Healthwatch would be looking to build on going forward. It was recognised that as this was new territory for Healthwatch, discussions with a variety of organisations and groups such as the Health Scrutiny Committee would be required.

Resolved:

- The presentation was noted

Actions/Next Steps:

None.

11 JOINT STRATEGIC NEEDS ANALYSIS [Item 8]

Key points raised during the discussion:

1. The Board received a presentation from Dr Nadeem Hassan, Public Health specialist registrar and Dr Ruth Hutchinson, Public Health consultant on the Joint Strategic Needs Assessment (JSNA) was given to the Board by the Public Health specialist registrar. The JSNA had been made available in an accessible format for members of the public so decision making would be more transparent. New and existing information relating to the JSNA was available on Surrey-i for members of the public to access.
2. It was explained that JSNAs were assessments of the current and future health and social care needs of the local community, which were unique to each local area. JSNAs are produced by health and wellbeing boards and consider wider factors that impact on the local community's health and wellbeing.
3. The Board discussed the benefits of the JSNA as a powerful commissioning tool. The JSNA in relation to Surrey was explained in further details covering areas such as children and young people and how we live our lives. Data in the JSNAs came from multiple sources including local and national sources, all of which were referenced in the JSNA.
4. A Member of the Board raised concerns around the gaps in knowledge surrounding health and wellbeing information on children and young people. The Public Health consultant stated that a project plan addressing these gaps in knowledge had been put in place. The Public Health consultant commented that the project team in place would be grateful for feedback on any gaps in knowledge or concerns Members of the Board had.

5. It was suggested by a Member of the Board that posters explaining and detailing the JSNA would be helpful in local areas for local residents. It was further commented that individual JSNAs for specific areas would be useful for individual Divisions and Boroughs. A Member of the Board commented that this could be expensive and therefore costs would need to be considered before taking any action.

Resolved:

- The Joint Strategic Needs Assessment for Surrey was noted and its circulation agreed.
- That the Assistant Director for Health and Wellbeing look into costing for producing localised posters for each Borough and District relating to the JSNA.

Actions/Next Steps:

None.

12 JOINT HEALTH AND WELLBEING STRATEGY FOR SURREY [Item 9]

Key points raised during the discussion:

1. Dr Joe McGilligan introduced Surrey's Joint Health and Wellbeing Strategy to the Board. The Health and Wellbeing Strategy developed from a number of public meetings, online surveys, consultations with partners and stakeholders. A scoring mechanism for initial priorities was developed with five final key priorities of the Board being selected.
2. These five priorities included, Improving children's health and wellbeing, developing a preventative approach, promoting emotional wellbeing and mental health, improving older adults health and wellbeing and safeguarding the population. Each of the five priorities were discussed by Members of the Board. Results from the JSNA relating to each priority along with the future outcomes were discussed by the Board in further detail.
3. The Cabinet Member for Adult Social Care and Health advised that Surrey's Joint Health and Wellbeing Strategy contained a short paragraph addressing the residents of Surrey. It was vital for residents to be aware that Surrey's Joint Health and Wellbeing Strategy document had been created for them and could be modified going forward.

4. Members of the Board acknowledged and thanked the Health and Wellbeing team and Public Health colleagues for all their hard work with the Health and Wellbeing Board.
5. Ms Julia Dutchman Bailey from NHS England addressed the Board and explained NHS England's future involvement with the Board. The NHS England team were keen to be involved with the work of the Board. As a key commissioning partner they would be interested in how priorities set out in the Joint Health and Wellbeing Strategy document could be addressed.

Resolved:

- The Health and Wellbeing Strategy for Surrey be agreed

Actions/Next Steps:

The Board will receive detailed updates on each of the priorities within the plan at future meetings.

13 FORWARD WORK PLAN [Item 10]

Key points raised during the discussion:

1. A Forward Work Programme for the Board was in place but it was noted that some of the dates and agenda items would be subject to future change.

Resolved:

- The Forward Work Plan be agreed, noting that changes would be made as required through the course of the year

Actions/Next Steps:

None

Meeting ended at: 3.00 pm

Chairman

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Surrey Health and Wellbeing Board

Date of meeting	13 June 2013
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Item / paper title: Promoting emotional wellbeing and mental health

Purpose of item / paper	The purpose of the paper is to review progress made in turning strategic priorities into actions, reflect and remind ourselves of the journey we have been on, consider and discuss a set of proposed actions and agree which actions should be taken forward as part of the next steps.
Surrey Health and Wellbeing priority(ies) supported by this item / paper	The paper outlines the next steps needed to implement the emotional wellbeing and mental health priority.
Financial implications - confirmation that any financial implications have been included within the paper	The full financial implications of the proposed actions need to be further developed following agreement at the 13 June 2013 meeting. 2012-13 spend for mental health across health and social care is £103,697,700.
Consultation / public involvement – activity taken or planned	Large scale engagement took place as part of the prioritisation process that resulted in Surrey's five health and wellbeing priorities. This engagement included over 900 people from a range of organisations from across Surrey. The development of the action plans is in its early stages and one of the next steps should include engagement with stakeholders.
Equality and diversity - confirmation that any equality and diversity implications have been included within the paper	Equality and diversity implications of the proposed actions need to be further developed following agreement at the 13 June 2013 meeting.
Report author and contact details	Donal Hegarty, donal.hegarty@surreycc.gov.uk 01483 517944 Diane Woods, Diane.Woods@surreypct.nhs.uk 07912 774656 Ros Hartley, Ros.Hartley@hampshire.nhs.uk 01252 335080
Sponsoring Surrey Health and Wellbeing Board Member	Andrew Whitfield Sarah Mitchell
Actions requested / Recommendations	The Surrey Health and Wellbeing Board is asked to:

	<ul style="list-style-type: none">• review the progress we have made so far in turning our strategic priorities into actions• reflect and remind ourselves of the journey we have been on• consider and discuss a set of proposed actions• agree which actions should be taken forward as part of the next steps
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Surrey's Joint Health and Wellbeing Strategy:
turning strategic priorities into actions

Promoting emotional wellbeing and mental health

13 June 2013

Aim

The Health and Wellbeing Board are asked to:

- review the progress we have made so far in turning our strategic priorities into actions
- reflect and remind ourselves of the journey we have been on
- consider and discuss a set of proposed actions
- agree which actions should be taken forward as part of the next steps

The journey so far

October 2012 – development workshop of the ‘shadow’ Health and Wellbeing Board identified Mental Health as a potential priority

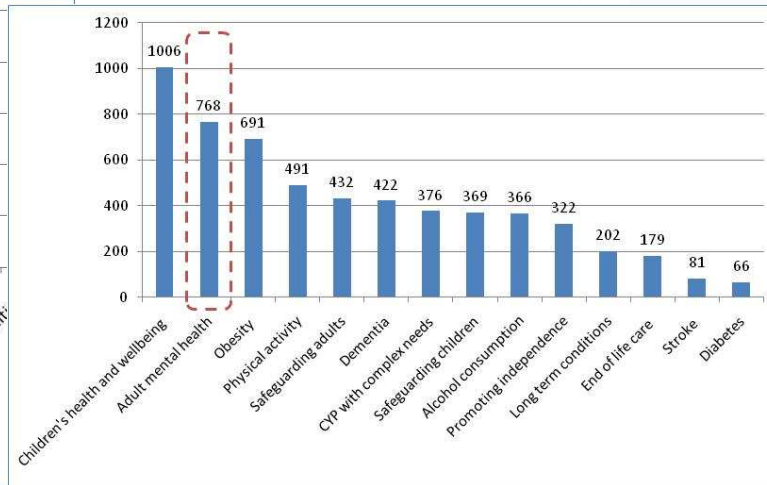
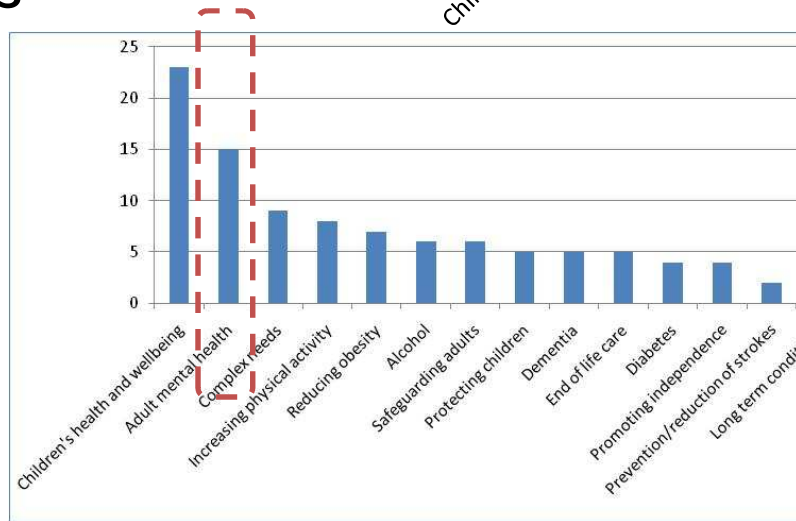
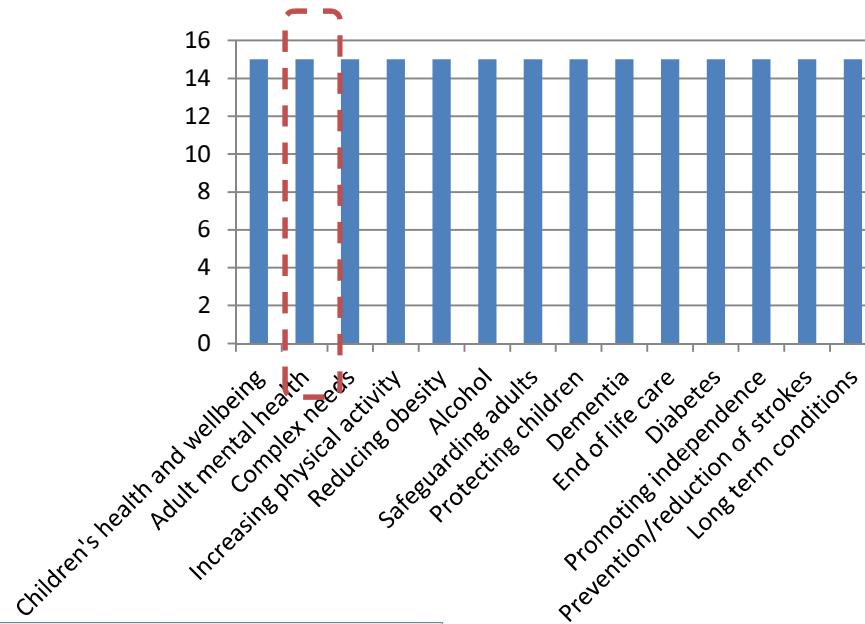
April 2013 – Surrey’s Joint Health and Wellbeing Strategy approved by the Health and Wellbeing Board with Emotional Wellbeing and Mental Health as one of five priority areas

May 2013 – Informal workshop of the Health and Wellbeing Board to generate and discuss ideas for actions the Board should take forward

Why we chose this as a priority

Emotional wellbeing and mental health scored highly during the board's prioritisation process

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Joint Health and Wellbeing Strategy

Priority 3: Promoting emotional wellbeing and mental health

Positive mental health is a foundation of individual and community wellbeing. The communities in which we live, the local economy and the environment all impact on an individual's mental health. We want to promote good mental health for the wider population and effective treatment and support services for people with emerging mental health needs and enduring mental health problems.

Our Joint Strategic Needs Assessment tells us that:

- An estimated 6,800 children and young people aged 5-16 have an emotional health issue
- Of the 145,860 children and young people aged 5 to 15, 10,356 (one in 14) have a mental health issue
- Generally, although rates of mental health disorders in children are lower in Surrey, some areas have a higher rate than the national average
- Nearly one in four adults is estimated to experience some form of mental distress. This would be 215,741 people aged 16+ in Surrey
- National stigma and discrimination studies indicate nearly nine out of ten people (87%) with mental health problems have been affected by stigma and discrimination
- Depression is the biggest form of mental illness in older people, with 24,000 people aged 65 and over (around one in seven) estimated to have depression or severe depression
- The World Health Organisation has projected that by the year 2030, it will be the greatest cause of disease burden in high-income countries

Priority 3 - If we get this right we hope to see the following outcomes:

- More people (people means all people in this strategy - children and adults) will have good mental health
- More people with mental health problems will recover
- More people with mental health problems will have good physical health
- More people will have a positive experience of care and support
- Fewer people will experience stigma and discrimination.



Scoping the priority

A working group consisting of Donal Hegarty, SCC, Diane Woods, North East Hants and Farnham CCG and Ros Hartley, North East Hants and Farnham CCG scope the priority.

Four key themes were identified:

- An integrated systems pathway/strategy
- Accommodation & employment
- Inequalities and stigma
- Governance

Informal workshop – generating ideas

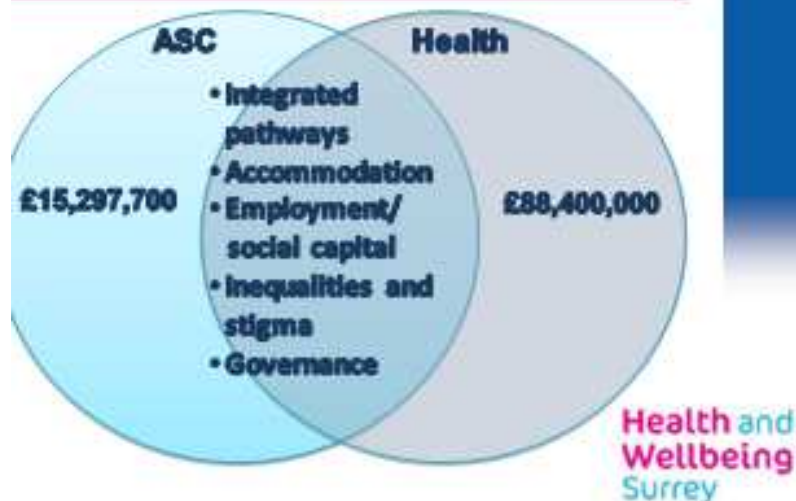
A successful workshop was run to generate ideas of how the EWMH priority could be implemented

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Why people supported mental health



Potential areas for joint working



Discussions centred around the four themes identified by the working group.

Stigma and discrimination

Aim

To tackle the stigma, discrimination and inequalities experienced by people with mental health problems and their carers in Surrey.

Key Objectives

- Improve understanding of and positive attitudes towards mental health.
- Reduce the stigma, discrimination and inequalities experienced by people with mental health problems, their family and/or carers.
- Increase the confidence and ability of people with mental health problems, their families and carers to address discrimination and have equal access to employment and housing opportunities.

Stigma and discrimination

Proposed actions

- Promote 'Time to Change Surrey' message countywide with positive media coverage of mental health.
- Encourage individual and organisation pledges to tackle stigma and discrimination.
- Establish an employer accreditation scheme to promote good mental health at work.
- Support the pilot project in Merstham/Redhill to deliver a whole community approach which includes workforce mental health awareness training for local employers, establishing a local mental health ambassador scheme, drama based awareness in East Surrey College and community development project that tackles discrimination, stigma and inequalities.

Health and
Wellbeing
Surrey

Stigma and discrimination

What would success look like?

Year 1 – 2013

Increase in knowledge and awareness of positive mental health in the pilot area.

Reduction in stigma experienced by people with mental health problems and carers in the pilot area.

Year 3 – 2016

Programme of work and learning from pilot delivered in other areas of high mental health need to achieve measurable increase in positive attitude, awareness and reduction of stigma.

Established employer accreditation schemes across Surrey.

Year 5 – 2018

Established climate of positive change cross Surrey where discrimination, stigma and inequalities are not tolerated.

Whole systems pathway

Aim

The aim of developing an integrated strategy for emotional wellbeing and adult mental health in Surrey will be to have a coherent and systematic approach to:

promote good mental health for the wider population, early intervention to support people with emerging mental health needs and effective treatment and support services for people with enduring mental health problems

Whole systems pathway

Key Objectives

- Provide better mental health for all and to increase the amount of people recovering from mental illness
- Raise awareness of how everyone has a role in improving mental health locally; not just health and care services
- Outline what the new health and care system will mean for emotional wellbeing and mental health
- Set out how progress on delivering the strategy will be monitored and reported and how the range of outcome measures currently available will be built upon in future illustrating how improving mental health will help organisations meet their broader objectives
- Translate the strategy's vision into specific actions setting out a series of recommendations for local organisations to take forward.
- Detail a series of local commitments to support implementation.

Whole systems pathway

Proposed actions

- Establish a governance structure in Surrey for emotional wellbeing and mental health that will oversee the development and monitoring of the joint commissioning strategy
- Each partner organisation to nominate a person to lead the development and implementation of the emotional wellbeing and mental health strategy
- Workstreams, timeframes and resource requirements for developing the strategy to be agreed and established
- Preparation work for development of strategy which includes bringing together information from the Mental Health Needs Assessment, review of current service pathways, a review of whole system spend and stakeholder views to be completed

Health and
Wellbeing
Surrey

Whole systems pathway

What would success look like?

Year 1 – 2013

By the end of 2013 there will be a Surrey joint commissioning strategy for Emotional Wellbeing and Adult Mental Health

Year 3 – 2016

By 2016 Surrey will be able to see a % increase in the number of:

- People who will have good mental health
- People with mental health problems who have recovered
- People with mental health problems who have good physical health
- People who have had positive experience of care and support
- People experiencing stigma and discrimination

Year 5 – 2018

By 2018 Surrey will be able to see a further % increase in the number of:

- People who will have good mental health
- People with mental health problems who have recovered
- People with mental health problems who have good physical health
- People who have had positive experience of care and support
- People experiencing stigma and discrimination

Accommodation and employment

Aim

To increase the access to and sustainability of people with mental health problems in relation to employment and secure accommodation.

Key Objectives

- Increase the numbers of people with mental health problems into full time employment.
- Support people with mental health problems to retain employment.
- Promote the value to employers of recruiting and retaining people with mental health problems.
- Increase access to appropriate accommodation for people with mental health problems.
- Work with landlords to reduce evictions for people with mental health problems.

Accommodation and employment

Proposed actions

- Mental health awareness training for all Borough Housing Department staff.
- Agreed protocols between Borough Housing Departments and Health & Social Care Services to reduction evictions.
- Better understanding locally for general practitioners (GPs) of the range and criteria for accessing accommodation.
- Ensure that information sharing is robust and available to all partners supporting an individual with mental health problems.
- Establish apprenticeship schemes for people with mental health problems and creating access to existing schemes in Surrey County Council.
- Extend the existing 6 months NEETS Scheme to include people with mental health problems with applications, subject to general practitioner (GP) recommendation.
- Promote the benefit of employing people with mental health problems through work with Job Centre Plus.

Accommodation and employment

What would success look like?

Year 1 - 2013

Better understanding of professionals across the whole system on the processes to access accommodation locally.

Promotion of schemes that promote employment opportunities for people with mental health problems.

Year 3 – 2016

Reduction in the eviction rate of people with mental health problems

Housing staff are trained to support people with mental health problems in a whole system approach.

Employers recognise the value of employing and retaining people with mental health problems.

Year 5 – 2018

People with mental health problems contribute to the workforce of organisation, both public and private, across Surrey.

People with mental health problems have access to local accommodation that supports their community integration and mental wellbeing.

Governance

Aim

To ensure structures are set in place locally and county wide to carry out the development, implementation and monitor progress of the emotional wellbeing and mental health strategy

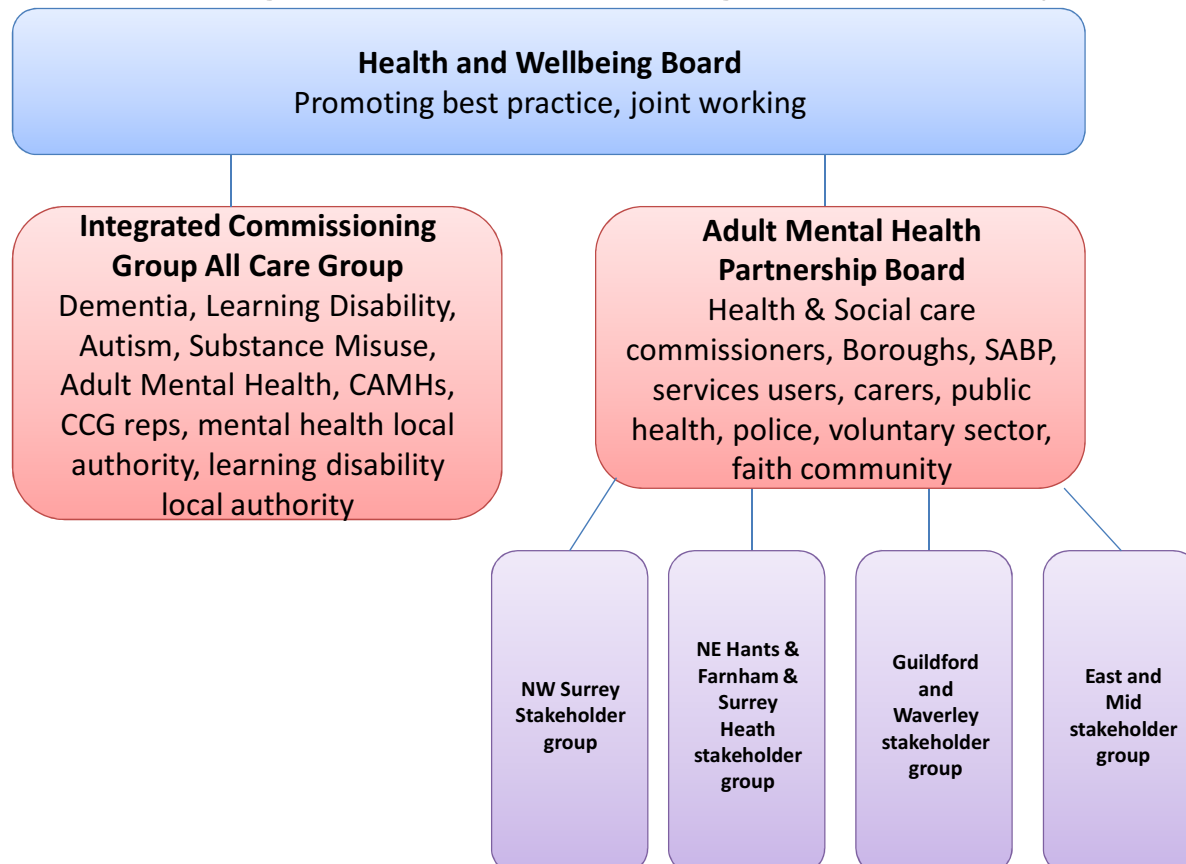
Key Objectives

- Governance structures assist in defining *expectations*, harnessing leadership, and verifying performance against key indicators.
- Assure the investment in Emotional Wellbeing and Adult Mental Health generate business value and mitigate the risks that are associated with Emotional Wellbeing and Mental Health.
- Ensure emotional wellbeing and mental health is part of everyone's business and is not just a siloed area of activity
- Ensure that quality is at the heart of the indicators developed
- Comprehensive multi level communication approaches to gain involvement and support engagement

Governance

Proposed actions

- Support for the governance structure illustrated below
- Establish an Emotional Wellbeing/Adult Mental Health Partnership Board
- Establish an Integrated Commissioning All Care Group



Health and Wellbeing Surrey

Governance

What would success look like?

Year 1 - 2013

In 1 years time (end of 2013) there will be clear structures in place that have engaged the right people and organisations to reflect a whole system and partnership approach of putting emotional wellbeing and mental health as one of their key priorities to improve

Year 3 – 2016

In 3 years time (2016) the structures will have had success in monitoring and evaluating the partnerships key deliverables

Year 5 – 2018

In 5 years time (2018) the governance arrangements will have ensured that the planning and initiation of future plans have taken place to continue supporting the improvement of peoples emotional wellbeing and mental health

Next steps

- Board decision today about which proposed actions to take forward
- Engagement of key partners and stakeholders
- Agree resources and contributions from all partners to implement the priority
- The working group lead the planning of agreed actions.

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Surrey Health and Wellbeing Board

Date of meeting	13 th June 2013
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Item / paper title: **Better Services, Better Value: Programme summary and progress to date**

Purpose of item / paper	This paper along with the presentation summarises the progress that the BSBV programme has made to date, and explains where it is as a part of the ongoing process. It demonstrates the areas where the intentions of the Joint Health and Wellbeing Strategy and BSBV align. Finally it sets out the next steps for the programme.
Surrey Health and Wellbeing priority(ies) supported by this item / paper	The paper aims to show where the aims of the JHWS and the proposals of the BSBV programme align, and how it can help achieve desired outcomes for selected priorities
Financial implications - confirmation that any financial implications have been included within the paper	There are no financial implications for Surrey HWBB associated with this paper – though please note that the programme is being run on behalf of seven local CCGs, including Surrey Downs CCG.
Consultation / public involvement – activity taken or planned	There has been considerable public engagement to date, with local clinicians holding in excess of 100 meetings. There have been three large scale public events held in Surrey. A full 14 week public consultation is planned, dependent on approval from local CCGs and NHS England.
Equality and diversity - confirmation that any equality and diversity implications have been included within the paper	A pre-scoping Integrated Impact Assessment (IIA) has been completed, indicating that there are likely to be both positive and negative impacts for those with protected characteristics. Two further IIA reports will be carried out, the final one will include a full Equality Impact Assessment. An interim local Impact Analysis has been completed for Surrey Downs CCG.
Report author and contact details	Charlotte Joll (charlotte.joll@swlondon.nhs.uk)/Matthew Newman (matthew.newman@swlondon.nhs.uk)
Sponsoring Surrey Health and Wellbeing Board Member	Dr Claire Fuller, Chair, Surrey Downs Clinical Commissioning Group

Actions requested / Recommendations	The Surrey Health and Wellbeing Board is asked to: Note this paper and the presentation
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Public meeting dates	4 th April 2013	13 th June 2013	19 th September 2013	12 th December 2013	20 th March 2014	19 th June 2014
<p>Planned agenda items</p> <p>30 mins</p>	<p>Appoint Chair</p> <p>Terms of Reference</p> <p>Membership of Board</p> <p>Welcome Surrey Healthwatch</p> <p>Joint Strategic Needs Assessment</p> <p>Joint Health and Wellbeing Strategy (JHWS)</p> <p>Work programme for next 12 months (version 1)</p>	<p>JHWS Priority Plan: Emotional wellbeing and mental health</p> <p>Update on local Health & Wellbeing forums</p> <p>Presentation on BSBV proposals</p> <p>Public engagement session</p>	<p>JHWS Priority Plan: Children’s Health and wellbeing</p> <p>Aligning commissioning cycles:</p> <ul style="list-style-type: none"> - CCG plans - County Council plans <p>Healthwatch work programme discussion</p> <p>Public engagement session</p>	<p>JHWS Priority Plan: Older adults priority plan</p> <p>Review of forecast budget positions:</p> <ul style="list-style-type: none"> - CCG’s - County Council - Borough/ districts <p>Public engagement session</p>	<p>JHWS Priority Plan: developing a preventative approach</p> <p>Report from outcomes group (JSNA steering group):</p> <ol style="list-style-type: none"> 1) progress review of Emotional wellbeing and mental health JHWS priority 2) progress review of children’s priority <p>Public engagement session</p>	<p>JHWS Priority Plan: safeguarding the population</p> <p>Public engagement session</p>

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