**MINUTES** of the meeting of the **HEALTH AND WELLBEING BOARD** held at 1.00 pm on 5 September 2013 at New Council Chamber, Reigate Town Hall, Castlefield Rd, Reigate, Surrey RH2 0SH.

These minutes are subject to confirmation by the Committee at its meeting on Thursday, 12 December 2013.

## Elected Members:

- \* Mr Michael Gosling (Co-Chairman)
- \* Dr Joe McGilligan (Co-Chairman)
- \* Mrs Mary Angell
- \* Helen Atkinson
- \* Dr Andy Brooks
- \* Dr David Eyre-Brook
- \* Dr Claire Fuller
- \* Dr Liz Lawn
- \* Sarah Mitchell
- \* Dr Andy Whitfield
- \* Dr Jane Dempster
- \* Nick Wilson
- \* Councillor James Friend
- \* John Jory
- Councillor Joan Spiers
- \* Healthwatch Member TBC

## Ex officio Members:

### **Co-opted Members:**

### Substitute Members:

**Councillor Joan Spiers** 

### In attendance

# 25/13 APOLOGIES FOR ABSENCE [Item 1]

Apologies were received from Cllr Joan Spiers.

## 26/13 MINUTES OF PREVIOUS MEETING: 13 JUNE 2013 [Item 2]

The Minutes of the meeting held on 13 June 2013 were confirmed as a correct record subject to an amendment to the date of the next meeting shown on page 1 to read "5 September 2013".

# 27/13 DECLARATIONS OF INTEREST [Item 3]

There were none.

# 28/13 QUESTIONS AND PETITIONS [Item 4]

There were none.

# 29/13 MEMBERSHIP OF THE BOARD [Item 5]

1. The Chairman asked for the Board to endorse the Chief Constable of Surrey Police, Lynne Owens as a new member of the board.

### **Resolved:**

Lynne Owens was agreed as a new member of the Health and Wellbeing Board

# 30/13 FORWARD WORK PROGRAMME [Item 6]

### Key points raised during the discussion:

- 1. Members of the Board were asked to consider the agenda for the next board meeting on 12 December 2013.
- 2. The Chairman explained that items on the forward work programme may need to be rescheduled depending on when decisions are made.
- 3. The Chairman asked for any comments on items coming to the Board to be sent to him.

### **Resolved:**

The forward work programme was noted.

# Actions/Next Steps:

Members of the Committee to send any comments on the forward work programme to the Chairman and Lead Manager for Health and Wellbeing.

# 31/13 BOARD APPROVALS [Item 7]

## Key points raised during the discussion:

- 1. The Chairman explained that the Board is frequently asked to approve requests from a variety of stakeholders. Not all these requests need formal approval from the Board and it therefore may be more suitable for a CCG or service to approve them.
- 2. The Chairman asked for Board members to send anything they are asked to formally approve to the Health &Wellbeing and Innovation lead at the County Council who will then decide on whether formal Board approval is required.
- 3. A member of the Board asked for a log detailing the approvals sent to the Board to be introduced.

## **Resolved:**

The process for approving requests to the Board was agreed.

### Actions/Next Steps:

The County Council's Health & Wellbeing and Innovation lead to keep the Board up-to- date with the formal requests that have been sent to the Board for approval.

# 32/13 ALIGNING COMMISSIONING CYCLES: CLINICAL COMMISSIONING GROUPS AND COUNTY COUNCIL PLANS [Item 8]

### Key points raised during the discussion:

 Representatives of each of the Clinical Commissioning Groups (CCGs) and the County Council's Public Health, Children, Schools & Families and Adult Social Care Directorates gave a presentation to the Board on commissioning priorities and plans for each of their organisations. The priorities of each organisation were discussed in further detail along with planning timescales.

The purpose of the item was to share at a headline level the commissioning planning timeframes and key commissioning priorities / intentions of each of the Clinical Commissioning Groups and Surrey County Council and in doing so, help to highlight opportunities, gaps and challenges for the Board in implementing the Joint Health and

Wellbeing Strategy. The presentation will be put on the website for all to access.

- 2. During the discussion the following points were raised:
  - Members of the Board expressed the importance of having an embedded approach to working across health and local government partner organisations so the overall strategy could be delivered.
  - Surrey's Joint Strategic Needs Assessment and Joint Health and Wellbeing Strategy provided common building blocks for the development of commissioning plans
  - Working with Trading Standards on the illegal selling of cigarettes could be of benefit when delivering a prevention priority.
  - Members of the Board agreed and understood that more needed to be done to utilise the contacts on the district and borough levels especially when working with organisations and residents in local areas. With increasing financial pressures it was recognised that more work would need to be done on a local level to ensure future delivery.
  - The work being done by local health and wellbeing groups was recognised as crucial especially as each CCG tries to build upon their knowledge of local health and wellbeing.
  - A Member of the Board drew upon the importance of the voluntary sector when considering a joined up approach on the local level.
  - It was commented that the police were seeing an upward trajectory for out of hours services in cases relating to substance abuse and mental health issues. A question around how this information could be shared with CCGs was raised. The Chairman stated that the lead CCG on mental health would look at this information and bring this priority to a future board meeting.
  - A Member of the Board stated the importance of the Board being able to demonstrate with 'examples on the ground' of how wellbeing was being achieved and delivered through commissioning.
  - Questions over how success would be measured were raised. The Chairman stated that success would need to be measured across Surrey as a whole and that updates progress updates on each priority .would be presented to future Board meetings.

# **Resolved:**

The presentation was noted.

# Actions/Next Steps:

None

# 33/13 JOINT HEALTH & WELLBEING STRATEGY PRIORITY PLAN: CHILDREN'S HEALTH AND WELLBEING [Item 9]

### Witnesses:

Caroline Budden, Deputy Director - Children's, Schools and Families

Dr Liz Rayment, Guildford and Waverley CCG

Helen Atkinson, Acting Director of Public Health

# Key points raised during the discussion:

A presentation was given on the action plan for the children and young people's health and wellbeing priority. The presentation set out nine themes for the improving children's health and wellbeing: early help, A&E admissions/out of hours services, complex needs, healthy behaviours, mental health, domestic abuse, risky behaviours, shared understanding of need and commissioning for children. For each theme, the presentation set out the current services in place, the outcomes we are trying to achieve and the suggested actions.

- 1. In the discussion the following points were raised:
  - A member of the Board pointed out that on slide 12 of the presentation it is quoted a '30% overall reduction in A&E attendance for children and young people by 2017'. The member asked how likely it was for this to be achieved. In response it was explained that it would take time to change behaviours but the result would depend on the area this is implemented in. It was further commented that actions around this priority should ideally be implemented before the winter period.
  - A Member of the board felt that more work was needed to be done around A&E attendance figures especially with regards to reducing the numbers of children and young people visiting A&E. It was further commented that examples of how this priority would change things on the ground were needed as the implementation of this priority would differ according to location.
  - Members of the Board supported the ambition surrounding the priority whilst recognising the importance of getting the governance around agreeing specific actions right.
  - Each CCG committed their support to the strategy and the principles being put in place however some CCG Board Members advised that they might need to consult via their own individual governance structures before they could formally agree the wording of the recommendation as proposed.
  - Board Members discussed a number of options to enable the Board to sign-up to the proposals and the Chairman took a five

minute adjournment to enable the wording in the recommendation to be amended to reflect the views expressed by the Board Members.

 Members of the Board commented that stakeholders involved with developing the priority should carry on with their good work.

# **Resolved:**

1. The overall aim, lead organisation(s), actions and outcomes of the presentation be endorsed by the Health and Wellbeing Board.

2. Where considered appropriate / necessary, Board Members should hold further discussions within their individual organisations to progress and endorse some of the specific actions within the presentation in their specific areas.

3. The children's health and wellbeing group will:

- Be responsible for monitoring the action plan, including the joint commissioning activity when agreed by the commissioning agencies.
- Develop its membership and engage as appropriate to ensure relevant stakeholders for health and wellbeing are involved in decision making
- Report back to the Health and Wellbeing Board on progress

## Actions/Next Steps

For each constituted agency to be provided with an executive summary of the children and young people's health and wellbeing priority, plans and recommendation.

For all constituted agencies to take the details of the executive summary back to their governing bodies for approval before final sign off.

# 34/13 DISABLED CHILDREN'S CHARTER [Item 10]

### Key points raised during the discussion:

- 1. The Chairman asked the Board to consider signing the Disabled Children's Charter for Health and Wellbeing Boards.
- 2. Members raised concerns around signing charters aimed at specific groups and questions around how some of the commitments could be measured.
- 3. The Director for Children, Schools and Families explained that Surrey County Council had previously signed this charter similar to this. This raised questions as to added value / benefit of the Board, as a committee of the county council, signing up to this charter.

4. Some Members also felt that signing one charter could set a precedent for signing more. It was felt that there was a lot of ambiguity with signing charters and further discussion would be required.

# **Resolved:**

That the Charter not be signed at this time.

## Actions/Next Steps

For the Disabled Children's Charter to come back to the Board at a later date.

# 35/13 HEALTHWATCH WORK PROGRAMME [Item 11]

## Witnesses:

Richard Davy, Healthwatch

# Key points raised during the discussion:

- 1. Richard Davy updated members of the Board on the Healthwatch programme.
- 2. The update included details of:
- the appointments to the Healthwatch Surrey Board;
- a range of work being undertaken around engagement and awareness raising including through the set up of its own website and twitter account;
- volumes of calls to the information and advice line and interest from people wanting to volunteer.
- 3. Richard Davy said that whilst the organisation is still trying to find its feet, it is doing everything possible to ensure it works closely with stakeholders and that an engagement and liaison coordinator had been appointed to ensure this work is carried out.
- 4. The Chairman welcomed the appointment of Peter Gordon as the Chairman of Healthwatch Surrey and other new non-executive members of the Healthwatch Surrey Board.

# **Resolved:**

The content of the report was noted.

# **Actions/Next Steps**

None

# 36/13 PUBLIC ENGAGEMENT SESSION [Item 12]

# Key points raised during the discussion:

- A member of the public raised a question over the use of Section 136 of the Mental Health Act by the Police and how the numbers relating to the use of Section 136 varied across Surrey. The Chief Constable stated that there was no obvious pattern on the use of Section 136 across Surrey. Although the Police did not have a clear mental health strategy in place, Section 136 was only used in emergency cases.
- 2. Members of the Board asked for any questions not relating to the items discussed at the meetings to be sent to them before the meeting so an answer could be prepared in advance.

Meeting ended at: Time Not Specified

Chairman