

Notice of Meeting

Health and Wellbeing Board



Date & time

Thursday, 5 September 2019
at **1.00 pm**

Place

Ashcombe Suite, County Hall, Penrhyn Road, Kingston upon Thames, KT1 2DN

Contact

Ben Cullimore
Room 122, County Hall
020 8213 2782
ben.cullimore@surreycc.gov.uk

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This meeting will be held in public. If you would like to attend and you have any special requirements, please contact Ben Cullimore on 020 8213 2782.

Board Members

Siobhan Kennedy
Dr Andy Brooks

Dr Charlotte Canniff

Dave Hill

Jason Gaskell
Dr Russell Hills

David Munro
Mr Tim Oliver (Chairman)
Kate Scribbins
Dr Elango Vijaykumar (Deputy Chairman)
Simon White

Ruth Hutchinson

Dr Claire Fuller
Fiona Edwards
Joanna Killian
Helen Griffiths

Sue Littlemore

Mrs Sinead Mooney

Housing Advice Manager, Guildford Borough Council
Chief Officer, Surrey Heath and East Berkshire Clinical Commissioning Group
Clinical Chair, North West Surrey Clinical Commissioning Group
Executive Director for Children, Families and Learning, Surrey County Council
CEO, Surrey Community Action
Clinical Chair, Surrey Downs Clinical Commissioning Group
Surrey Police and Crime Commissioner
Leader of Surrey County Council
Chief Executive, Healthwatch Surrey
Clinical Chair, East Surrey Clinical Commissioning Group
Executive Director of Adult Social Care, Surrey County Council
Interim Director of Public Health, Surrey County Council
Senior Responsible Officer, Surrey Heartlands
Chief Executive, Surrey and Borders Partnership
Chief Executive, Surrey County Council
Executive Dean of the Faculty of Health and Medical Sciences, University of Surrey
Head of Partnerships and Higher Education, Enterprise M3
Cabinet Member for Adults and Public Health, Surrey

Mrs Mary Lewis	County Council Cabinet Member for Children, Young People and Families, Surrey County Council
Ruth Colburn Jackson	Managing Director, North East Hampshire and Farnham Clinical Commissioning Group
Giles Mahoney	Director of Integrated Care Partnerships, Guildford and Waverley Clinical Commissioning Group
Rob Moran	Chief Executive, Elmbridge Borough Council
Rod Brown	Head of Housing and Community, Epsom and Ewell District Council
Borough Councillor Caroline Reeves	Leader of Guildford Borough Council
Borough Councillor John Ward	Leader of Waverley Borough Council

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

To receive any apologies for absence and substitutions.

2 DECLARATIONS OF INTEREST

All Members present are required to declare, at this point in the meeting or as soon as possible thereafter

- (i) Any disclosable pecuniary interests and / or
- (ii) Other interests arising under the Code of Conduct in respect of any item(s) of business being considered at this meeting

NOTES:

- Members are reminded that they must not participate in any item where they have a disclosable pecuniary interest
- As well as an interest of the Member, this includes any interest, of which the Member is aware, that relates to the Member's spouse or civil partner (or any person with whom the Member is living as a spouse or civil partner)
- Members with a significant personal interest may participate in the discussion and vote on that matter unless that interest could be reasonably regarded as prejudicial.

3 MINUTES OF PREVIOUS MEETING: 6 JUNE 2019

(Pages 1
- 6)

To approve the minutes of the previous meeting.

4 QUESTIONS AND PETITIONS

a Members' Questions

The deadline for Members' questions is 12pm four working days before the meeting (Friday 30 August).

b Public Questions

The deadline for public questions is seven days before the meeting (Thursday 29 August).

c Petitions

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

5 FORWARD PLAN

(Pages 7
- 10)

To Board is asked to review and approve its forward plan.

6 PRIORITY TWO DRAFT IMPLEMENTATION PLAN

(Pages
11 - 20)

This paper introduces the draft implementation plan for Priority Two:

Supporting the mental health and emotional wellbeing of people in Surrey.

7 HEALTH AND WELLBEING STRATEGY COMMUNICATIONS REVIEW AND FUTURE PLANNING (Pages 21 - 36)

This paper gives an overview of the background and role of the Health and Wellbeing Board Communications Sub-Group to date, an overview of the impact of the Winter Campaign 18/19 supported by the Sub-Group, and sets out recommendations to be discussed by the Board.

8 WHOLE SYSTEM APPROACH TO PHYSICAL ACTIVITY IN SURREY (Pages 37 - 42)

The new Surrey Health and Wellbeing Strategy's aim of developing a whole system approach to physical activity provides a huge possibility to create a step change and really move at pace and scale. It will require multi-agency buy-in, including support at the highest levels, as explained in this paper.

9 SURREY SCHOOL AIR QUALITY PROGRAMME (Pages 43 - 46)

The purpose of this report is to provide an update on the Surrey School Air Quality Programme and present early evaluation findings.

10 SURREY'S GREENER FUTURE: LOCAL ACTION FOR GLOBAL IMPACT (Pages 47 - 50)

Surrey's Community Vision for 2030 contains the shared ambition that "*residents live in clean, safe and green communities, where people and organisations embrace their environmental responsibilities*". This ambition reflects the fact that Surrey's residents have consistently raised concerns about how we tackle climate change with a clear desire to preserve their county for future generations.

This paper sets out a programme of work, developed by the County Council, which would help to achieve this ambition. It also proposes ways in which the County Council is seeking to work with its partners to address the climate challenge, and in so doing enable people and organisations to ensure Surrey is safe, free from pollution and has open, green spaces to enjoy in the future.

11 DATE OF THE NEXT MEETING

The next meeting of the Health and Wellbeing Board will be held on 3 October 2019.

Joanna Killian
Chief Executive
Surrey County Council
Published: Wednesday, 28 August 2019

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).
The Public engagement session held at the end of the meeting is made available to Members of the public wanting to ask a question relating to an Item on the current agenda. Questions not relating to items on the agenda will need to be submitted in advance of the meeting.
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.

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It is requested that if you are not using your mobile device for any of the activities outlined above, it 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.

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MINUTES of the meeting of the **HEALTH AND WELLBEING BOARD** held at 1.00 pm on 6 June 2019 at Ashcombe Suite, County Hall, Kingston upon Thames, Surrey, KT1 2DN.

These minutes are subject to confirmation by the Board at its meeting on Thursday, 5 September 2019.

Elected Members:

- * Helen Atkinson
- * Dr Andy Brooks
- * Dr Charlotte Canniff
- Dave Hill
- * Jason Gaskell
- * Dr Russell Hills
- * David Munro
- * Tim Oliver (Chairman)
- * Kate Scribbins
- Dr Elango Vijaykumar (Deputy Chairman)
- Simon White
- * Dr Claire Fuller
- * Fiona Edwards
- * Joanna Killian
- Helen Griffiths
- Sue Littlemore
- * Sinead Mooney
- * Mary Lewis
- Ruth Colburn Jackson
- Giles Mahoney
- Siobhan Kennedy
- * Rob Moran
- * Rod Brown

Substitute Members:

Dr Peter Bibawy
Patricia Denney

18/19 APOLOGIES FOR ABSENCE [Item 1]

Apologies were received from Ruth Colburn Jackson, Dave Hill, Siobhan Kennedy, Giles Mahoney and Simon White. Dr Peter Bibawy acted as a substitute for Ruth Colburn Jackson and Patricia Denney substituted for Dave Hill.

19/19 DECLARATIONS OF INTEREST [Item 2]

The Chairman informed the Board that he was the former chair of trustees for Shooting Star Children's Hospices and current patron.

20/19 MINUTES OF PREVIOUS MEETING: 4 APRIL 2019 [Item 3]

The minutes were agreed as a true record of the meeting.

21/19 QUESTIONS AND PETITIONS [Item 4]

a MEMBERS' QUESTIONS [Item 4a]

None received.

b PUBLIC QUESTIONS [Item 4b]

None received.

c PETITIONS [Item 4c]

None received.

22/19 IMPROVING HEALTHCARE TOGETHER 2020-2030 [Item 5]**Witnesses:**

Andrew Demetriades, Joint Director of the Improving Healthcare Together 2020-2030 Programme, South West London Alliance
Dr Charlotte Keeble, Senior Programme Manager for Acute Sustainability, South West London Alliance

Key points raised during the discussion:

1. The Joint Director of the Improving Healthcare Together (IHT) 2020-2030 Programme presented a summary of the paper to the Board. He explained that it identified and analysed the challenges that had been recognised and the three options available. These were to locate major acute services at either Epsom, St Helier or Sutton Hospital whilst continuing to provide district hospital services at both Epsom and St Helier.
2. The Board heard that officers involved in the IHT 2020-2030 Programme were proposing to continue with an option process to make sure they followed the national and regional assurance process, and they were working closely with NHS Improvement and NHS England whilst their plans were undergoing assessment.
3. Discussing the next steps that would be taken, the Joint Director informed the Board that the Pre-Consultation Business Case would be updated before being subject to a national assurance process. CCGs would then consider the feedback from this process during Autumn 2019 before any consultation was undertaken on the options for future development.
4. A Member of the Board asked a question on behalf of the Surrey Coalition of Disabled People (SCDP), who wanted to know when an Equalities Impact Assessment would be completed for disabled people, as the IHT 2020-2030 Programme report analysed data from people living with "life limiting long-term illness" rather than disabilities. In response, the Senior Programme Manager for Acute Sustainability told the Member that a representative from the SCDP was on a consultation steering group and additional engagement was due to take place in June 2019.
5. The Joint Director was asked about the possibility of not successfully managing to gain capital funding. In response, he said that the case being put forward by the IHT 2020-2030 Programme was a strong one but they would re-evaluate at a later date if they were not successful.

CCGs would not proceed to consultation unless support in principle had been achieved for available capital.

Actions/ further information to be provided:

None.

Resolved:

The Board:

1. Noted the update on progress with the Improving Healthcare Together Programme.
2. Considered any further information or updates it would like to receive in due course.

23/19 END OF LIFE CARE PARTNERSHIP PROJECT [Item 6]

Witnesses:

Sarah Brocklebank, Chief Executive of Phyllis Tuckwell Hospice Care
Nigel Harding, Chief Executive of Shooting Star Children's Hospices

Key points raised during the discussion:

1. The Chairman informed the Board that officers had started to identify specific areas of work surrounding end of life care and introduced the two chief executives.
2. The Chief Executive of Shooting Star Children's Hospices (SSCH) provided an overview of the services offered by his organisation and the challenges it faced. The two biggest were funding and recruitment, and these had resulted in the Surrey branch of SSHC being in deficit since 2012. The Board heard that SSHC was reliant on match funding with clinical commissioning groups (CCGs) and that more engagement was needed if it and similar organisations were to be able to continue to offer the services it provided.
3. The Board then heard from the Chief Executive of Phyllis Tuckwell Hospice Care (PTHC), who also spoke about the difficulty it has securing funding. She explained that it offered education and training as well as its three core services – in-patient unit care, care at home and living well services – and echoed the Chief Executive of Shooting Star Children's Hospices' view that more partnership working needed to take place.
4. After a discussion about the report, it was agreed that Dr Charlotte Canniff, Clinical Chair of North West Surrey CCG, would be the lead sponsor for the End of Life Care partnership approach.
5. A Member of the Board asked whether sufficient information had been collected from families and carers who had experienced end of life care. They went on to say they felt the report focused on what the systems did and how they worked but overlooked their users. The Board were told that Healthwatch Surrey were in correspondence with officers and would be able to support their efforts by gathering information and insight.
6. A discussion was had about the recruitment of staff after a Member of the Board asked how, given a free hand, the two chief executives

would overcome the problem. Both spoke about the shortage of suitable recruits across the system as a whole and reiterated the need for closer collaboration between hospices and other health organisations.

Actions/ further information to be provided:

None.

Resolved:

The Board:

1. Noted the initial scoping that has taken place to map the End of Life commissioning priorities across Surrey.
2. Agreed to take forward an End of Life Care partnership project and support the next steps listed in the report.
3. Agreed to work with SODA to develop measures for End of Life Care, including preferred place of death.

24/19 PRIORITY ONE DRAFT IMPLEMENTATION PLAN [Item 7]

Witnesses:

Ruth Hutchinson, Deputy Director for Public Health

Key points raised during the discussion:

1. The Deputy Director for Public Health introduced the report and informed the Board of the work that had been done since its last meeting. Members were told that much of the engagement had already started with the five target population groups outlined in the Strategy, and that final plan would be presented to the Board for approval in December 2019.
2. A discussion was had about collaboration, with the Deputy Director for Public Health and Members agreeing that organisations and sectors from across Surrey needed to be included in the development process. Surrey Police, district and borough councils and the voluntary sector were all mentioned, as this would allow aims to align on a county-wide scale.
3. Members heard that there were plans to form a Surrey-wide Prevention and Determinants of Health Board, and this proposal went to the Surrey Heartlands board the day before the meeting of the Health and Wellbeing Board (5 June 2019). This, the Deputy Director for Public Health said, would provide greater assurance across the whole of the county and would sign off the final implementation plan in Autumn 2019 before being brought to the Health and Wellbeing Board.
4. It was agreed that Rod Brown, the Head of Housing and Community at Epsom and Ewell Borough Council, would be the Priority One lead sponsor.
5. After further discussion about collaboration and the importance of building on what already existed rather than duplicating, the Cabinet Member for Children, Young People and Families requested that the final implementation plan contains more mentions of children rather than just the elderly.

Actions/further information to be provided:

None.

Resolved:

The Board:

1. Approved the draft implementation plan, subject to any suggested changes.
2. Agreed to work in partnership to develop the final detailed implementation plan.

25/19 DEVELOPING THE COMMUNITY DEVELOPMENT SYSTEM CAPABILITY [Item 8]**Witnesses:**

Rebecca Brooker, Communities and Prevention Lead

Key points raised during the discussion:

1. The Board heard from the Communities and Prevention Lead, who introduced the report on community development and explained the way in which it was aiming to bring together elements of both the Health and Wellbeing Strategy and the 2030 Community Vision for Surrey. The report was a proposal on how this would be taken forward and put into action, and how those two strands would be combined to have a single clear approach.
2. The Communities and Prevention Lead explained that the proposal was made up of three phases. Firstly, partners would be brought together to scope and draft an initial proposal before those ideas would be prototyped and a period of engagement undertaken. Officers would then review the feedback gained and formulate a final plan. The Board heard that it would take a system leadership role throughout the process and after the plan's implementation.
3. After discussing the community development and engagement plans, the Chairman invited the new Independent Chair of the Surrey Safeguarding Children Board to address Members. He spoke about working closely with the Board and sought clarity on what the formal relationship between the two boards would be moving forward. In response, the Chairman said that this would be confirmed and reported back to the Independent Chair in due course.
4. Members welcomed the idea of closer working between the Surrey Safeguarding Children Board and Health and Wellbeing Board and spoke about the need to make sure that all safeguarding protocols are as tightly aligned as possible.

Actions/further information to be provided:

The Board is to:

1. Provide an opportunity at a future Board meeting to shape the community development and engagement plans through an in-depth workshop.
2. Confirm the nature of the formal relationship between the Surrey Safeguarding Children Board and the Health and Wellbeing Board and inform the Independent Chair.

Resolved:

The Board:

1. Approved the proposed approach to establish a community development workstream and engagement plan.
2. Agreed to ensure that the activities within the community development and engagement plans are developed in partnership.
3. Agreed to provide an opportunity at a future Board meeting to shape the community development and engagement plans through an in-depth workshop.

26/19 DATE OF THE NEXT MEETING [Item 9]

The next Health and Wellbeing Board public meeting will be held on 5 September 2019.

Meeting ended at: 2:07 pm

Chairman

Surrey Health and Wellbeing Board Forward Work Plan 2019

Version control

Version	Date	Who	Change made
1	2/5/19	Amy Morgan	First draft developed for discussion and population with the board
Item title	Health and Wellbeing Board Champion	The Health and Wellbeing Board will be asked to?	Item type
May 2019 – Business Plan			
Priority one workshop – Helping People in Surrey to lead Healthy Lives	Cllr Paul Spooner	Develop implementation plans and metrics for priority one of the strategy	Discussion
Partnership project – Community asset-based development	Helen Atkinson	Discuss and shape the scope of the partnership projects	Discussion
Partnership project – End of life	Dr Sian Jones	Discuss and shape the scope of the partnership projects	Discussion
June 2018 – Public			
Priority one – draft implementation plans	tbc	Approve the draft implementation plans and amendments to the metrics	Approval

Partnership project – Community asset-based development	Helen Atkinson	Agree the partnership project plan	Approval
Partnership project – End of life	Dr Sian Jones	Agree the partnership project plan	Approval
Pharmacy Application: Kingswood	Helen Atkinson	Actions to be noted by chair	Update
Strategic Transport Review	Rachel Crossley	To feed into the review and use it to shape implementation of the Health and Wellbeing Strategy	Discussion
July 2019 – Private			
Priority two workshop – Supporting the emotional wellbeing of people in Surrey	Giles Mahoney	Develop implementation plans and metrics for priority two of the strategy	Discussion
Housing – deep dive	Siobhan Kennedy/Rod Brown	Workshop on housing to feed into the Priority 1 implementation plan: <ul style="list-style-type: none"> • Single, complex homelessness • Fuel poverty and overcrowding • Specialist housing and care 	Discussion
Healthwatch Surrey annual report	Kate Scribbens	An update on Healthwatch’s annual report and key priorities	Update
September 2019 – Public			
Priority two – draft implementation plans	Giles Mahoney	Approve the draft implementation plans and amendments to the metrics	Approval
HWB Draft comms plan and Winter comms plan	tbc	Approve the draft plan	Discussion and approval
Priority three workshop – Supporting people in Surrey to fulfil their potential	Rob Moran	Develop implementation plans and metrics for priority three of the strategy	Discussion
Physical Inactivity	Campbell Livingstone	Discussion on ways to increase the number, frequency and intensity of people in Surrey being physically active	Discussion
Climate Change	Chris Tisdall	Discussion on the Surrey emergency response to climate change	Discussion

Evaluation of the schools air quality programme	tbc	Update on the schools air quality programme, delivered through the Air Quality Alliance	Update
October 2019 – Informal			
Better Care Fund plan	Simon White and CCG representatives	Approve the Better Care Fund plan	Approval
SEND whole-system transformation workshop	tbc	To feed into the transformation programme and use it to shape implementation of the Health and Wellbeing Strategy	Discussion
Community Development System Capability	Rebecca Brooker	Workshop to develop the community development system capability	Discussion
Dementia partnership plan	tbc	Discuss and shape the scope of the partnership project	Discussion
November 2019 – Informal			
Priority three – draft implementation plans	Rob Moran	Approve the draft implementation plans and amendments to the metrics	Approval
Local business and economy – deep dive	tbc	Workshop to feed into the Priority 3 implementation plan. Scope to be decided.	Discussion
Family resilience approach and the new role of family centres	tbc	How will the approach improve the wider determinants of health? To feed into the transformation programme and use it to shape implementation of the Health and Wellbeing Strategy	Discussion
December 2019 – Public			
HWB strategy final implementation plans	tbc	Approve final plans	Approval
Annual report of the Safeguarding Adults Board and Safeguarding Children’s Board	Chairs of the Safeguarding Board and the Children’s Safeguarding Board	Update on the annual report and discuss the implications for the Health and Wellbeing Board and strategy implementation	Update and discussion

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Health and Wellbeing Board

1. Reference Information

Paper tracking information	
Title:	Priority Two Draft Implementation Plan
Related Health and Wellbeing Priority:	Priority Two: Supporting the mental health and emotional wellbeing of people in Surrey
Author:	Chris Tune, Policy and Programme Manager (Health and Social Care Integration), 07790836779
Sponsor:	Giles Mahoney
Paper date:	5 September 2019
Related papers	Annex 1 – Priority Two Draft Implementation Plan

2. Executive summary

2.1 This paper introduces the draft implementation plan for Priority Two: Supporting the mental health and emotional wellbeing of people in Surrey. Following approval, we will begin engagement on the draft implementation plan with key stakeholders and partnerships. The system architecture for mental health in Surrey is currently in development, but the final implementation plan will be presented at numerous forums and approved in the autumn before it is brought to the Health and Wellbeing Board for approval in December 2019.

3. Recommendations

3.1 The Health and Wellbeing Board is asked to:

- a) Approve the draft implementation plan subject to any suggested changes
- b) Agree to work in partnership to develop the final detailed implementation plan

4. Reason for Recommendations

4.1 Following initial engagement with work leads across the three areas of focus in Priority Two, the draft implementation plan sets out the activity required to improve the outcomes set out in the Health and Wellbeing Strategy.

4.2 By approving the draft plan, the Health and Wellbeing Board are agreeing to work in partnership to identify work leads and shared resource, developing a detailed final plan to bring back to the board in December 2019.

5. Detail

5.1 At the Health and Wellbeing Board business meeting on 4 July 2019, Board Members discussed the three areas of focus for Priority Two. Since then, officers have engaged with stakeholders to put together a draft implementation plan. The draft plan sets out the key outcomes and activity required to improve health outcomes in Priority Two of the strategy.

- 5.2 Key work leads across health, districts and boroughs, social care, and the voluntary sector have been initially involved in identifying gaps in provision. We are also engaging with representatives for each of the target groups in the strategy on the implementation plans. The draft plan will be used for further engagement, and also be taken to the Surrey-wide delivery board for Priority Two, when confirmed, and other mental health forums, for their approval of the draft and establishing mechanism for further engagement and programme management.
- 5.3 Following agreement from the Health and Wellbeing Board, we will engage with key stakeholders and partnerships to shape the plans over the coming months across the whole of Surrey. We will work closely with the mental health governance architecture to complete a detailed final plan to bring back to the Board in December 2019.
- 5.4 The Mental Health system architecture is currently being reviewed with a view to landing the Surrey-wide delivery board for Priority Two. The final plan, which will map delivery milestones and KPIs, will have a named owners and timescales for delivery. Key issues, risks and highlight reports will be brought to the Health and Wellbeing Board where appropriate.
- 5.5 Links to each capability have been mapped out in the draft implementation plan. We are currently developing plans for each capability and will update the board in due course. These plans will also be working documents, reviewed annually to agree activity.

6. Challenges and dependencies

- 6.1 There are a number of dependencies to note in the draft implementation plan. Many of the areas of focus, such as 'Enabling children, young people, adults and elderly with mental health issues to access the right help and resources' and 'Preventing isolation and enabling support for those who do feel isolated', are linked to other priority areas such supporting people to live independently. These dependencies have already been identified and will be managed as the implementation plans are finalised for all three priority areas by December 2019.
- 6.2 A key challenge will be to ensure the implementation plan is owned across the health and wellbeing partnership to ensure more joined up delivery and wider system change.

7. Timescale and delivery plan

- 7.1 The Health and Wellbeing Strategy is a 10-year strategic plan. However, the detailed implementation plans will be reviewed annually. The KPIs are currently under development by SODA (Surrey Office of Data Analytics) for the Health and Wellbeing Board and will be finalised alongside the final plan for the Board meeting in December 2019.

8. How is this being communicated?

- 8.1 A meeting has been arranged with members of the Health and Wellbeing Communications Group to discuss communications campaigns and stakeholder engagement.
- 8.2 The draft implementation plan also includes suggested activity on communications campaigns and stakeholder engagement, all dependent on available resource.

9. Next steps

- 9 September – Begin engagement on the draft implementation plan with key stakeholders and partnerships
- The established governance forum for Priority Two sign off the final implementation plan in the autumn
- 5 December – The final implementation plan is brought to the Health and Wellbeing Board for approval
- Annex 1 is the draft implementation plan, which includes a matrix on the developing metrics

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Surrey Health and Wellbeing Strategy

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Priority 2 – Draft Implementation Plan

Healthy Surrey

≡ DELIVERING THE
COMMUNITY VISION FOR SURREY

Focus area
What we are trying to achieve

Activity
What we will do

Outcomes
What we need to achieve

KPIs 19/20 -
We will know that we are on track when...

Enabling children, young people, adults and elderly with mental health issues to access the right help and resources

- Develop preventative mental health in-reach offer with schools.
- Map and develop preventative mental health support access for Older People.
- Scale up anti-stigma work, including rollout of the Time for Change training programme.
- Expand work to improve the links between physical and mental health.
- Supporting wellbeing at work through the development of a Wellbeing Charter for businesses.
- Develop new integrated models of care to support people at risk of admission to secondary mental health services.
- Mapping of Dementia services and develop partnership responses to system opportunities, to support people and carers to live independently for as long as possible.
- Develop system-wide aligned plans for people with mental health issues who need support in prisons or the criminal justice system.
- Enable effective system-wide planning ensuring safe discharge into suitable accommodation for people upon hospital discharge.
- Suicide prevention work to be scaled up with existing partners, supporting our zero suicide ambition.

- People with depression and anxiety are identified early and supported
- Support people to reduce levels of mental ill health
- Improving access to good information, advice, and support that is relevant and timely
- Reduce stigma around mental health
- People are supported to recover and live well in the community
- Employee health and wellbeing is valued in the workplace

Under development by SODA (Surrey Office of Data Analytics)

Impact
We will know we have achieved this when...

(Under development by SODA)

- Reduced number of mental health admissions
- Increased uptake of Workplace Wellbeing Charter

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Related priorities	Priority 1 (helping people to lead healthy lives) Priority 3 (supporting people to fulfil their potential)
Related workstreams	NHS Long Term Plan implementation Joint Emotional Wellbeing and Mental Health Commissioning Strategy for children and young people Surrey and North East Hampshire Integrated Commissioning Strategy - Emotional Wellbeing & Adult Mental Health Substance Misuse

System Capabilities

Community development:

- Add mental health metrics to Social Progress Index.

Digital and Technology:

- Develop existing resources to create a single point of access web platform detailing information and services.

Intelligence:

- Development of a Suicide Surveillance System, pending approval of business case.

Estates:

- Review of dementia friendly assets and rollout of dementia friendly premises including GP practices.

Workforce and Culture:

- Further rollout of mental Health training offer.

Governance:

- Develop existing system architecture to support effective partnership forums and assurance of Health and Wellbeing Strategy implementation.

Focus area
What we are trying to achieve

Activity
What we will do

Outcomes
What we need to achieve

Supporting the emotional wellbeing of mothers and families throughout and after their pregnancy

- Develop offer around the emotional wellbeing of mothers through First 1000 Days planning lens.
- Develop a pregnancy Healthy Behaviours Framework.
- Further development of wraparound care and support through Perinatal services.
- Support the new, targeted provision delivered through Family Centres (such as the universal Family Centre offer in development in East Surrey).
- Domestic Abuse support/prevention offer around wellbeing of mothers throughout and after their pregnancy.
- Alcohol and Substance Misuse prevention offer in place prior to pregnancy.
- Evaluation and implementation of family support tools (such as Dadpad, and Baby Buddy)

Mothers and families feel safe, positive, and empowered throughout and after pregnancy

Protection of mothers and families from Domestic Abuse

KPIs 19/20

We will know that we are on track when...

- *Under development by SODA (Surrey Office of Data Analytics)*

Impact

We will know we have achieved this when...

Under development by SODA (Surrey Office of Data Analytics)

System Capabilities

Digital and Technology:

- Evaluation of existing apps designed to support mothers and families throughout and after pregnancy, and implementation where appropriate.

Workforce and Culture:

- Evaluate training and skills offer to ensure Health Visitors receive pre and post-registration education in perinatal and infant mental health.
- Perinatal training strategy for the workforce involved is developed and delivered.

Governance:

- Develop existing system architecture to support effective partnership forums and assurance of Health and Wellbeing Strategy implementation.

Related priorities	Priority 3 (supporting people to fulfil their potential)
Related workstreams	Surrey's Local Maternity Services Transformation Plan

Focus area

Activity

Outcomes

What we are trying to achieve

What we will do

What we need to achieve

Preventing isolation and enabling support for those who do feel isolated

- Further develop an accessible community transport offer that supports people’s social connections.
- Develop youth social isolation approach, including bullying prevention and social media offer, with schools.
- Develop a Technology Enabled Care offer that enables independence and supports social interaction.
- Support for Surrey Dementia Action Alliance in establishing Dementia Friendly communities, as already seen in Oxted, Woking, and Hindhead.
- Link in with plans for intergenerational mentoring to ensure impact on social isolation.
- Establish business links to prevent isolation (such as Walking Friends) and unlock the potential of underutilised community space
- Undertake engagement to scope out partnership project supporting the emotional wellbeing of Carers.
- Develop a wraparound, holistic bereavement support offer.
- Ensuring meaningful work and volunteering opportunities for those at risk of mental ill health and social isolation.

- No-one in Surrey feels isolated
- People will have easier access to good and relevant information
- Tackle the stigma of speaking up about loneliness
- People feel that they have social capital that they can contribute to the area in which they live

KPIs 19/20 – We will know that we are on track when...

- *Under development by SODA (Surrey Office of Data Analytics)*

Impact – We will know we have achieved this when...

Under development by SODA (Surrey Office of Data Analytics)

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Related priorities	Priority 1 (helping people to lead healthy lives) Priority 3 (supporting people to fulfil their potential)
Related workstreams	End of Life Care Dementia Strategy Carers Commissioning Strategy

System Capabilities

Community development:

- Develop Preventative Workforce including Social Prescribing and ‘A Million Ways’ Programmes to ensure access to information from trusted environments.

Workforce and Culture:

- Implement MECC and the preventative offer across the wider frontline workforce to ensure appropriate signposting to services.
- Ensure that staff working with Carers are appropriately trained and are “Carer aware”.

Governance:

- Develop existing system architecture to support effective partnership forums and assurance of Health and Wellbeing Strategy implementation.

Priority 2: Draft Metrics

In development by SODA – to be finalised once implementation plans are developed.

Initial source metrics listed below

	General population	Children with special education needs and disabilities (SEND) and adults with learning disabilities and/or autism	Deprived or vulnerable people	People who require support to live with disability and / or illness, live independently, or to die well	Young and adult carers
Enabling children, young people, adults and elderly with mental health issues to access the right help and resources	<ul style="list-style-type: none"> Depression prevalence Anxiety prevalence 		<ul style="list-style-type: none"> Rate of access to NHS mental health services by 100,000 pop IAPT: Access rate IAPT Recovery Rate Patient experience of community mental health services Safety incidents reported. Safety incidents involving severe harm or death Hospital admissions as a result of self harm Suicide Rate Absence without leave of detained patients 	<ul style="list-style-type: none"> Employment of people with mental illness People with mental illness or disability in settled accommodation Proportion of people feeling supported to manage their condition 	<ul style="list-style-type: none"> Identification of carers Identification of young carers Total number of carers who have had an assessment Total number of carers who have had a review
Supporting the emotional wellbeing of mothers throughout and after their pregnancy			<ul style="list-style-type: none"> Postpartum psychosis: estimated number of women Chronic SMI in perinatal period: estimated number of women Severe depressive illness in perinatal period: estimated number of women Mild-moderate depressive illness and anxiety in perinatal period (lower estimate): estimated number of women Mild-moderate depressive illness and anxiety in perinatal period (upper estimate): estimated number of women PTSD in perinatal period: estimated number of women Adjustment disorders and distress in perinatal period (lower estimate): estimated number of women Adjustment disorders and distress in perinatal period (upper estimate): estimated number of women 		
Preventing isolation and enabling support for those who do feel isolated	<ul style="list-style-type: none"> National Social Isolation Index Self-reported wellbeing 		<ul style="list-style-type: none"> Community connections outcomes Enabling Independence Service outcomes National Attitudes to Mental Health survey National Viewpoint Survey – discrimination experienced by people with MH problems Time to Change-Surrey monitoring and evaluation data 	<ul style="list-style-type: none"> Proportion of people who use social care services with control over their dally life. 	

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Health and Wellbeing Board

1. Reference Information

Paper tracking information	
Title:	Health and Wellbeing Strategy Communications Review and Future Planning
Related Health and Wellbeing Priority:	Relevant to Priority One, Two and Three
Author (Name, post title and telephone number):	Amy Morgan, Policy and Programme Manager (Health and Social Care Integration), 07881 328 250
Sponsor:	Board lead TBC
Paper date:	5 September 2019
Related papers	Annex 1 – Terms of Reference for the Health and Wellbeing Board Communications Sub-Group and Membership Annex 2 – Winter 2018/19 Communications Campaign Evaluation

2. Executive summary

2.1 Good, effective communications and engagement are essential part of the delivery of the Surrey Health and Wellbeing Strategy. The Health and Wellbeing Board Communications Sub-Group was set up in May 2013 to promote a partnership approach to communicating key messages on health and wellbeing to Surrey residents. This paper gives an overview of the background and role of the Communications Sub-Group to date, an overview of the impact of the Winter Campaign 18/19 supported by the Sub-Group, and sets out recommendations to be discussed by the Health and Wellbeing Board.

3. Recommendations

3.1 This paper recommends that:

- a) The Health and Wellbeing Board confirms the role of the Communications Sub-Group in coordinating key messages from the Health and Wellbeing Strategy and agrees that a communication plan supporting the communication elements of the strategy should return to the Board following the final implementation plans, together with options for joint resourcing and budget
- b) The Health and Wellbeing Board supports the repeat of the Winter Campaign in 2019/20
- c) The Health and Wellbeing Board identifies changes to ensure the Sub-Group reflects the membership of the current Health and Wellbeing Board (see appendix A)
- d) The Health and Wellbeing Board identifies a lead member to chair the sub-group, or nominate a chair for the Sub-Group from within their organisation

4. Reason for Recommendations

4.1 The draft implementation plans are starting to highlight a number of areas where the Communications Sub-Group could support delivery including new campaigns, a partnership approach to the existing campaigns and targeted campaigns to key

communities. The Communications Sub-Group would benefit from a steer on membership along with a board lead to ensure a strong link between the group and the Board activity is maintained. This will help further inform the development of joint communications opportunities and work to resolve issues such as lack of resources to develop communications materials.

5. Context

- 5.1 In 2013 the Director of Public Health asked for communications support for the new Health and Wellbeing Strategy, seeking a partnership approach. The Health and Wellbeing Board Communications Sub-Group was set up in May 2013, reflecting the membership of the Board at that time.
- 5.2 Initially the group was chaired by the ASC Communications Lead, followed by the Public Health Communications Lead. Most recently the chair was a communications representative from the relevant clinical commissioning group where the CCG also held the Joint Chair of the Board role which rotated annually. Most recently this was the Director of Communications and Engagement for Sussex and East Surrey Clinical Commissioning Groups. However, they have indicated they will not be able to continue in this role going forwards.
- 5.3 The work of the group has focused primarily on two seasonal health campaigns each year where all partners contribute to a joint communications plan and implement together using shared resources and skills, to create consistency of messaging, impact and reach to residents across Surrey. The summer and winter campaigns are evaluated each year and lessons learnt help build and improve future campaigns. Following the successful co-ordination of a communications campaign during previous winters, the Surrey Health and Wellbeing Board Communications Sub-Group delivered a similar campaign in winter 2018/19.

6. Surrey Winter Campaign 18/19

- 6.1 The aim of the campaign was to deliver a co-ordinated campaign across Surrey that encouraged residents to:
- a) Prepare for winter – such as stocking up on medications, having a boiler check, join the priority services register
 - b) Keep warm during winter – keep rooms heated to a minimum of 18°C, advice on how to keep warm, winter warm packs
 - c) Keep well during winter – such as getting flu vaccinations, getting early help, using NHS 111, using local pharmacy services, eating well and keeping active
- 6.2 The Surrey Winter Campaign, which was delivered with no additional resource, provided consistent messaging across Surrey and also complimented and built on the national ‘Help Us Help You’ Stay Well This Winter campaign by promoting local offers and services.
- 6.3 1,641 residents were surveyed as part of the Surrey residents’ survey between January and March 2019 to determine their awareness of the campaign. 73.6% of Surrey residents were aware of the campaign (compared with 56.5% in 2016, 67.4% in 2017 and 69.9% in 2018) – an average increase of over 5% year on year. For more information on the 2018/19 winter campaign see appendix B for the full evaluation report.

7. Challenges

7.1 No formal pooled budget has been available for communications support over the last six years. Some CCGs have pooled monies for tactical advertising during winter to raise profile of key health messages. However, if the group is to support additional key campaigns on wider issues as part of the strategy, it is felt that some additional pooling of budget / resources and staff commitment would be beneficial to enable this to be done comprehensively and reduce potential apathy caused by rolling out similar campaigns each year. An over reliance on free communications channels also means a risk of having limited impact on behaviour change and also upon more vulnerable groups who may not be online.

8. Next steps

- The Surrey-wide winter campaign to commence from the beginning of September 19 to end of March 2020, in line with PHE campaign when released
- To refresh Terms of Reference and align with the Health and Wellbeing Board membership for approval by the Board
- Develop a communication plan incorporating relevant communication elements within the final implementation plans for consideration by the Health and Wellbeing Board together with options for more jointly resourcing the work

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Terms of Reference for the Health and Wellbeing Board Communications Sub-Group and Membership

Background:

The vision of Surrey's Health and Wellbeing Board is: "Through mutual trust, strong leadership, and shared values, we will improve the health and wellbeing of Surrey people." Communications and engagement are essential to the delivery of this vision. We will work together to communicate and engage with Surrey people to encourage and support them to improve their health and wellbeing in a consistent and co-ordinated fashion.

Purpose:

- Review the action plans relating to the priorities set out in the Health and Wellbeing Strategy and as a group develop an appropriate communications and engagement plan to reach all key stakeholders. This will highlight the key areas of focus for communications and engagement activity to achieve greater value and impact with residents and patients.
- Provide strategic advice and support the implementation of communication plans in response to briefs from health and wellbeing priority lead officers
- Identify key stakeholders to communicate and engage with
- Agree and maximise communication channels to reach them (including the development of a new website)
- Identify appropriate level of resource and utilise existing resources in an efficient, co-ordinated and consistent manner wherever possible
- Support stakeholder groups to implement communications activities
- Help promote the new identity for the Board's programme of work to build a consistent and recognisable brand with the public (using design guidelines, where appropriate)
- Through greater information sharing and communication with each member organisation, maximise effective information provision, promotion and engagement to local residents
- Act as a peer support network on communications issues and challenges

Key principle

By working together and pooling experience, resources and communication channels we can achieve better communications and engagement outcomes on health and wellbeing priorities in Surrey than working as single organisations.

Membership

The communication lead from each of Surrey's six Clinical Commissioning Groups (CCGs):

East Surrey CCG

Guildford and Waverley CCG

North East Hants and Farnham CCG

North West Surrey CCG

Surrey Downs CCG

Surrey Heath CCG

The communication leads from the following Surrey County Council directorates:

Adult Social Care

Children, Schools and Families

Corporate Communications

Public Health

The Health and Wellbeing Programme Manager responsible for strategically supporting the Health and Wellbeing Board

Borough and District Councils (representing all borough and district councils):

Two communications leads from Borough and District Councils in Surrey

Public / Patient Groups:

Healthwatch Surrey

Extended membership:

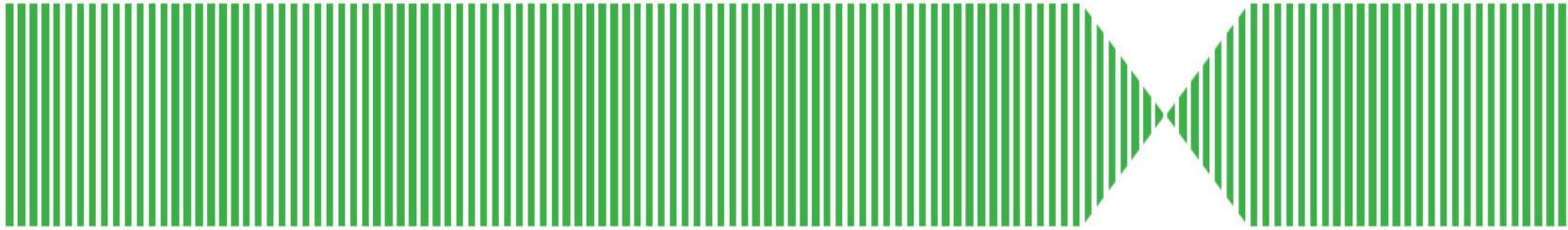
Membership will be extended to invite additional members as deemed appropriate by the group

Frequency of meetings

Bi-monthly.

Chairperson

The Chairperson will reflect that of the Health and Wellbeing Board.



Surrey Health and Wellbeing Board
Winter 2018/19 Communications
Campaign in Surrey - Evaluation report



Health and
Wellbeing
Surrey

1.0 Background

Following the successful co-ordination of a communications campaign during previous winters, the Surrey Health and Wellbeing Board Communications Sub-group delivered a similar campaign in winter 2018/19. This brief report is an evaluation of the 2018/19 campaign which ran from 1 October 2018 to 31 March 2019.

2.0 What did we do?

The aim of the campaign was to deliver a co-ordinated campaign across Surrey that encouraged residents to:

- a) Prepare for winter – such as stocking up on medications, having a boiler check, join the priority services register
- b) Keep warm during winter – keep rooms heated to a minimum of 18°C, advice on how to keep warm, winter warm packs
- c) Keep well during winter – such as getting flu vaccinations, getting early help, using NHS 111, using local pharmacy services, eating well and keeping active

The Surrey campaign provided consistent messaging across Surrey and also complemented and built on the national *'Help Us Help You' Stay Well This Winter* campaign by promoting local offers and services.

Below are some examples of the various channels used to communicate the winter campaign to residents.

2.1 Healthy Surrey website examples:

The screenshot shows the 'Healthy Surrey' website. The main content area is titled 'Preventing winter bugs' and features an NHS banner with the text 'Don't put it off - get the flu jab now'. Below the banner, there is a list of three simple steps: 'Catch it', 'Bin it', and 'Kill it'. To the right of the main content, there is a 'See also' sidebar with several green buttons: 'NHS 111', 'Help Us Help You before it gets worse', 'Help Us Help You know what to do', 'Keep safe this winter', 'Keep warm, keep well', and 'Winter wellness toolkit'.

2.2 Healthy Surrey social media examples:



Healthy Surrey
@HealthySurrey

If you are the main carer of an older or disabled person you may be eligible for the free flu jab, speak to your GP. #HelpUsHelpYou



5:45 PM · Nov 8, 2018 · Twitter Web Client

View Tweet activity

11 Retweets 5 Likes

Healthy Surrey
@HealthySurrey

For most children the flu vaccine is not an injection, just a quick nasal spray. Find out more by talking to your GP surgery today #fluvaccine #healthysurrey #HelpUsHelpYou

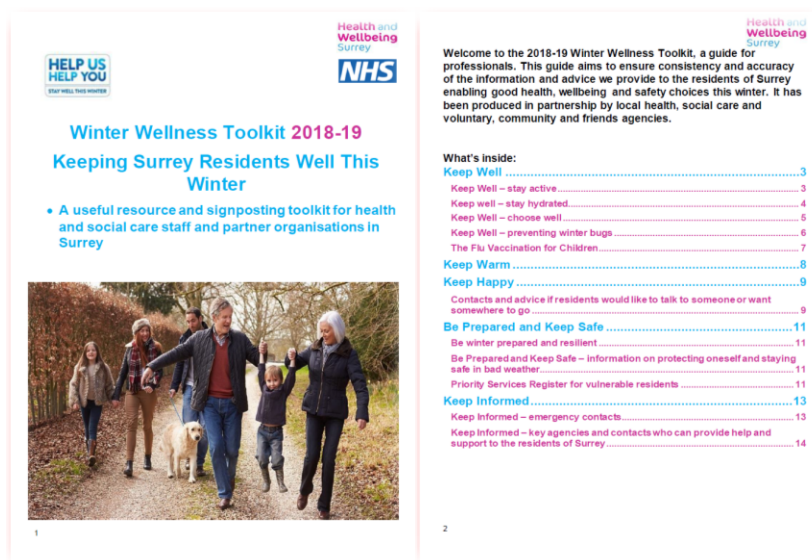


6:46 PM · Oct 30, 2018 · Twitter Web Client

View Tweet activity

4 Retweets 2 Likes

2.3 Resources for health professionals:



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Below is a summary of the activity during the campaign from 1 October 2018 to 31 March 2019:

- 8,655 visits to the Healthy Surrey winter web pages, a 58% increase on 2017/18 figures
- 71 downloads of the *Winter Wellness toolkit* for health and social care professionals
- 24 winter related tweets with 18,691 tweet impressions and 160 tweet engagements
- 8 uses of #healthysurrey (with many more of #Staywellthiswinter, but this cannot be tracked to Surrey)

2.4 Examples of activity across Surrey



- Winter wellness article in our Quarterly Report which was published in October 2018.
- Posted/shared SWTW social content on Facebook and Twitter and received a reach of 1,035.
- Emails sent to Board and team members, volunteers and Citizens Advice with Flu vaccine, NHS111 and pharmacy messages.



60,000 residents received 2018 winter edition of the Council newspaper with *Winter wellness* feature.



Scheduled a series of tweets and Facebook posts during the winter months to its 16,000+ followers





- 4,576 residents received the Surrey Disability Register winter **newsletter** with an article on *Stay Well This Winter*.
- *The Surrey Matters* e-newsletter was sent to over 357,000 residents with winter articles on Flu Vaccines and Winter Wellness.
- Campaign messages were cascaded through a variety of **network groups**, including targeted groups. Examples include: Domiciliary Home Care Network and Care Homes Provider Network (Surrey Care Association); Guildford & Waverley Care Home Forum; Surrey Falls Prevention Network; Surrey Care Homes Collaborative; Local Valuing People Groups, Disability Empowerment Network Surrey; Information and Advice Forum/ VCF; Autism Partnership Board; Independent Mental Health Network; Gypsy and Roma Traveller Forum; Surrey Minority Ethnic Forum; Veterans Group.
- *Stay Well This Winter* messaging was also included **online and on social media** across 30 posts, reaching over 22,000 people and receiving over 200 engagements.
- Promoted messages to **frontline Surrey County Council (SCC) staff** to encourage uptake of the flu vaccination.

Clinical Commissioning Groups (CCGs) in Surrey

NHS Surrey Heartlands CCGs

- Surrey Downs CCG, Guildford & Waverley CCG and North West Surrey CCG engaged in joint, widespread communications activity which included: social media; range of press releases and newsletter articles to various audiences; presentations; staff briefings; telephone engagement; radio interviews; and distribution of materials including posters and slide decks for display on TV screens in GP practices. Content was also included on website and social media.
- Paid digital advertising covering paid Facebook ads, PPC and localised www.GetSurrey.co.uk homepage placements. Paid print advertisements were placed within the Surrey Advertiser group.

NHS Surrey Downs CCG and SCC targeted residents in wards in Epsom and Ewell with publication to signposting local people to community support over the winter. Funding was provided by the CCG System Resilience Group to print 2,500 copies of the leaflet, produced by the SCC design team.



Included a minimum of three posts every week across social media platforms - daily posts in peak periods. These include a combination of the assets supplied by NHSE and created content relevant to area (i.e. sign-posting to our local walk-in centres or Minor Injuries units).



157 Posts | 95,939 Impressions



48 Posts | 58,454 Reach |
2,405 Engagements

- Promotion via Web banner resulting in 916 click-thrus

Information and leaflets distributed to patients, across social media, on SASH website and TV screens across the organisation. Internally with SASH staff on SASH intranet, all staff messaging, staff noticeboards, Chief Executive and Chief Nurse messages.



Facebook
17 Posts | 2,407 Impressions



Twitter
27 Posts | 12,282 Impressions

2.5 Funded targeted campaign in Surrey Heartlands

In addition to the above, partners in Surrey Heartlands secured approximately £5,000 of transformation funding to deliver a targeted campaign which complimented the wider *Stay Well This Winter* Campaign and benefited residents wider than Surrey Heartlands. Advertising activity included a multi-themed Facebook advertising campaign, which included elements targeted specifically at parents and carers of 0 – 12 year olds to encourage use of the NHS 111 service, as well as broader targeting to people (20-65 years) on Pharmacy Advice, GP Access and NHS 111.

The campaign included 5 x *Stay Well This Winter* advertising concepts on Facebook delivered to 146,126 people and generating 4,057 click-thrus to www.healthysurrey.org.uk.

Further to this, over 2 million impressions were achieved via Google pay per click advertising, and over 26,500 people reached via paid print placements.



3.0 What difference did it make?

3.1 Campaign awareness

1641 residents were surveyed as part of the Surrey residents' survey between January and March 2019 to determine their awareness of the campaign. They were asked if they remembered seeing the campaign and if so, where they saw or heard about it. The results are outlined below.

- 73.6% of Surrey residents were aware of the campaign (compared with 56.5% in 2016, 67.4% in 2017 and 69.9% in 2018) – an average increase of over 5% year on year.
- 36.0% of residents who were aware, heard of the campaign on the TV or radio (compared with 51% in 2017 and 41% in 2018). This is in line with a decrease in TV & radio activity for 2018/19.
- 9.6% of residents saw the campaign in Surrey Matters e-magazine (compared with 10.5% in 2017, 11.2% in 2018)
- 12% of residents who were aware, received a leaflet through the door (compared with 8.6% in 2017 and 9.2% in 2018) – indicating a steady increase across 3 years.
- 11% who were aware, had heard of the campaign by social media (compared with 1.1% in 2016, 6.2% in 2017 and 11.7% in 2018).
- 61.9% of residents who were aware, had heard about the campaign from a health professional (compared with 58% in 2016, 54% in 2017 and 53.6% in 2018).

3.2 Flu vaccine uptake

A large focus of the campaign was to encourage residents to have the flu vaccine and the data for Surrey in 2017/18 demonstrate a higher uptake than 2016/17 for all target groups. See table 1 below for a summary of the details.

Table 1. Flu vaccine uptake in GP Patients (returns from 98.4% of Surrey practices) 1 September 2018 to 31 March 2019¹

% Flu vaccine uptake performance comparison table 2018/19 compared to 2017/18					
CCG	Children age 2 years	Children age 3 years	65 and over	Under 65 (at-risk only)	All Pregnant Women
NHS EAST SURREY CCG	41.7	43.1 ↓	68.6 ↓	46 ↓	46.5 ↑
NHS GUILDFORD AND WAVERLEY CCG	51.3 ↑	53.5 ↑	73.3	50.9 ↑	52 ↑
NHS NORTH WEST SURREY CCG	43 ↓	46.5 ↓	69.2	47	46.6 ↓
NHS SURREY HEATH CCG	52.3 ↑	52.3	73.4 ↓	48.8 ↓	51.3 ↓
NHS SURREY DOWNS CCG	46.4 ↑	49.9 ↑	67.4 ↓	45.4	44 ↓
NHS NORTH EAST HANTS AND FARNHAM CCG	59.3 ↑	62.7 ↑	76.5 ↓	54.8 ↑	54.3 ↓
Target Uptake	48	48	75	55	55

¹ <https://www.gov.uk/government/statistics/seasonal-flu-vaccine-uptake-in-gp-patients-monthly-data-2018-to-2019>

Flu Season 2018-19 Community Pharmacists (for Surrey)	
Surrey by CCG	No. vaccinations Sept – Dec 2018*
East Surrey	3740
Farnham	1056
G&W	4535
NW Surrey	6343
Surrey Downs	7443
Surrey Heath	1249
Grand Total	24,366

*Note: The season ran from September 2018 to March 2019 but figures are only available to December 2018. Flu is embraced by community pharmacy as an important service and community immunisation remains high priority. Please also note that these figures: represent the NHS National PGD (patient group direction – a protocol by which a pharmacist can provide prescription only treatments to the public without the need of a doctor providing a prescription) and do not include children or healthy adults that pharmacies have vaccinated privately, which is business sensitive information and not published.

4.0 Conclusion and Recommendations

4.1 Conclusions

A wide range of communications and engagement activity took place promoting the co-ordinated winter campaign in Surrey with a large number of partners and stakeholders delivering similar messages. Whilst it is hard to tell if this directly impacted upon the uptake of the flu vaccination, promoting this was a key element of the campaign and the percentage uptake in Surrey for the flu vaccination increased in some areas from last year. Where reductions in uptake have been noted, this could be a result of the reduced spend in advertising budget.

4.2 Recommendations for future winter campaigns:

- Promote campaigns to health professionals as a high percentage of residents hear about the campaign this way
 - Continue to use residents magazines
 - Continue to use and increase presence on social media as awareness from this route has gradually increased over the last 3 years
 - Consider radio advertising activity as a high percentage of residents heard about the campaign in this way in 2016/17
 - Consider paid for advertising budget to increase impact of messaging and reach wider audiences
 - Continue to promote flu vaccination to target groups in particular pregnant women and parents of children under 5 years, as well as those with learning disabilities
 - Ensure that campaigns are evaluated consistently and that the parameters for evaluation and what will be collected is determined at the start of the campaign
- Consider utilisation of access to NHS 111 and GP activity such as, promotion of flu vaccine and uptake
 - Gather information on flu uptake with the workforce (frontline staff, carers, care home staff and also other vulnerable groups such as, care home residents and learning and disability groups)
 - Establish and agree on Key Performance Indicators (KPIs) for 2019/20

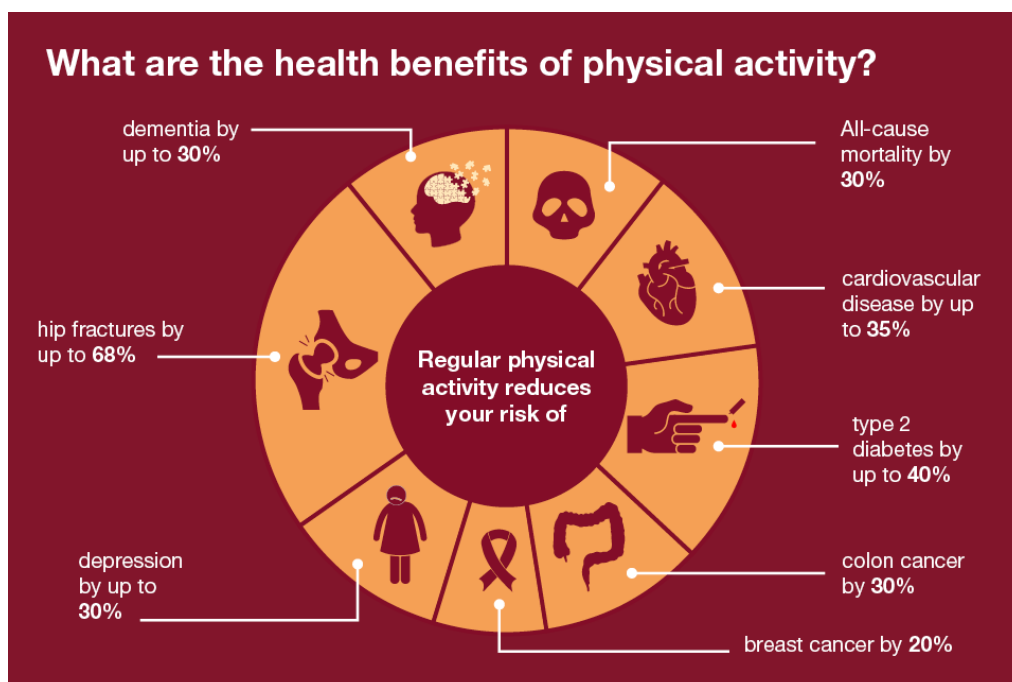
Health and Wellbeing Board

1. Reference Information

Paper tracking information	
Title:	Whole System Approach to Physical Activity in Surrey
Related Health and Wellbeing Priority:	Priority One (directly) plus Priorities Two and Three
Author (Name, post title and telephone number):	Campbell Livingston, Director – Active Surrey, 07791 327780
Sponsor:	Ruth Hutchinson
Paper date:	5 September 2019
Related papers	N/A

2. Executive summary

2.1 Increasing the number, frequency and intensity of people in Surrey being physically active can have huge health, social and economic benefits to both individuals and society.



2.2 Participation rates in Surrey are better than the national average and, thanks to collaborative working, moving in the right direction. However, around 330,000 of Surrey’s adults do not exercise enough to meet health guidelines (at least 150 minutes per week moderate intensity) and stubborn inequalities still exist with those from lower socio-economic groups, older people, those with disabilities and females all significantly less active than the average.

2.3 The new Surrey Health and Wellbeing Strategy’s aim of developing a whole system approach to physical activity provides a huge possibility to create a step change and

really move at pace and scale. It will require multi-agency buy-in, including support at the highest levels.

3. Recommendations

3.1 It is recommended that the Health and Wellbeing Board:

- a) Notes the direction of travel in national Government policy in relation to sport / physical activity and the role of Active Surrey as the lead agency locally
- b) Considers the best practice examples from across the country that have developed a whole system approach to physical activity, and the policy, governance and delivery changes that made it happen. Discuss how this might best work in Surrey.
- c) Commits to supporting a whole system approach to physical activity and agree a sponsor / champion from the Health and Wellbeing Board to help take this forward

4. Reason for Recommendations

4.1 Because of the many benefits it brings, physical activity should be: at the heart of all ill-health prevention and treatment; factored into all new housing/planning developments; a primary consideration when designing roads; and a keystone of schools and workplaces wellbeing programmes. To do so requires a whole systems approach which Active Surrey has been mandated to develop, with partners, in Priority 1, Area 5 of the new Health and Wellbeing Strategy. Whilst improvements in activity levels have been made over the last few years as a result of the Surrey Physical Activity Strategy, there now exists a great opportunity to move at scale and pace thanks to the new way of collaborative working as part of the Community Vision, inclusion in the Surrey Health and Wellbeing Strategy, and support at national policy level.

5. Detail

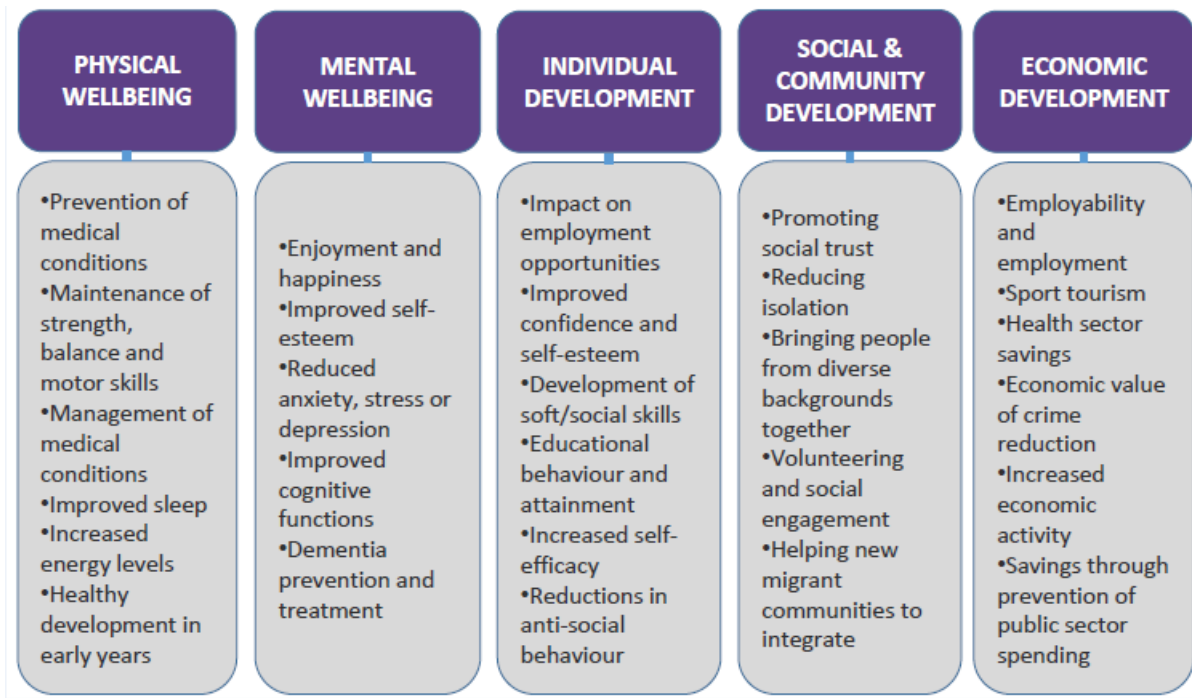
5.1 Active Surrey is the lead organisation for physical activity and sports development across Surrey. One of England's network of 43 Active Partnerships, Active Surrey is commissioned by Sport England and local partners to play a crucial role in blending Government strategic, health and economic-related objectives with the needs of local people.

5.2 Active Surrey works collaboratively with a variety of partners (including local authorities, health agencies, businesses, schools, providers and voluntary organisations) to improve the health and wellbeing of Surrey's residents by increasing physical activity levels through delivery of the Surrey Physical Activity Strategy 2015-20. The Strategy was designed to support Priority Two of the Surrey Health and Wellbeing Strategy 2013.

- The Surrey Physical Activity Strategy adopted a lifecourse approach with the aim of increasing activity levels by 1% a year and decreasing inactivity by 1% a year
- It was endorsed by Surrey's Health and Wellbeing Board and at Cabinet level by most of the Borough and District Councils, with many developing local versions as a result
- It fostered a greater sense of collaboration amongst partners, particularly those from outside the sport or leisure sphere (e.g. school nurses supported the take up of the Daily Mile in schools; Surrey Coalition became an integral partner on inclusive sport)

- The success of schemes such as Get Active 50+ and Otago falls prevention have seen the importance of physical activity to health partners markedly increase. It has been less successful so far in engaging planners and transport colleagues but this has started to shift this year.
- So far we have seen very positive results in the first two years with a 1.6% reduction in the total number of 'inactive' residents and shifting their habits (1.9% increase) to 'fairly active' (i.e. creating the biggest health gain)

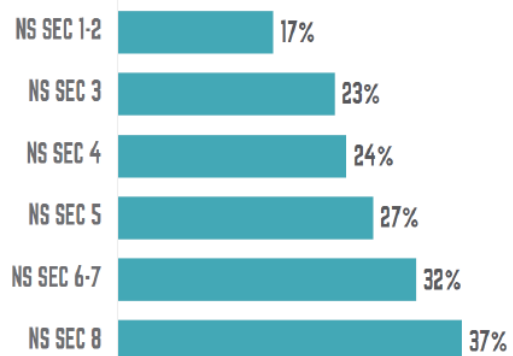
5.3 At the same time, a shift occurred in national sports policy with the publication of the Government's 'Sporting Future', and the subsequent Sport England 'Towards an Active Nation', both of which prioritised an outcome-focused model targeting the least active.



5.4 Sport England now fully recognises the wider benefits that being active can bring. This is demonstrated by a radical shift in how they have spent their money. From 2013-17 Sport England invested £398m into national sport governing bodies (NGBs) for delivery of their activities. In the most recent four-year cycle this has dropped to £235m, freeing up £163m, most of which is now being spent on programmes/campaigns to target physical activity at the least active in society where the greatest increase in positive health outcomes will be seen.

Socio-economics (Inactivity)

5.5 The national picture of inactivity (those active for less than 30 minutes per week) is around a quarter of all adults, but when socio-economic data is included (right), it is clear that the least well off fare markedly worse. In addition, those with disabilities/long term health conditions are often twice as likely to be inactive, and females and certain ethnic groups are also significantly more inactive.



5.6 Sport England’s investment is not a panacea for all ills; at approximately £300m its annual budget is what the NHS spends in a day. However, investing a significant part of its budget is a great sign of intent to play their part in contributing to the health system and creates a fantastic opportunity to match fund local activity. For example, Active Partnerships, such as Active Surrey, have been freed up from supporting NGBs to focus on working with partners to create conditions that enable inactive people to move more.

5.7 Around £120m of Sport England’s 2017-21 funding has been awarded to local areas adopting a whole system approach to tackling physical inactivity. These 12 Local Delivery Pilots (LDPs) ranging from small towns to city regions are testing ways of breaking down barriers, joining up deliverers. One of those LDPs is in Greater Manchester, a devolved city region benefitting from sustained collaboration as a result of Greater Manchester Moving and championed by Mayor Andy Burnham and the CEOs of all the local NHS and councils. Yorkshire has also used a whole systems approach to physical activity to drive change in some of the most disadvantaged parts of the country and is now benefiting from 2 LDPs.

The Greater Manchester Moving journey so far



5.8 As Active Surrey (mandated by the Surrey Health and Wellbeing Strategy) starts the journey to review the Surrey Physical Activity Strategy with its partners and develop a new whole systems approach for the next decade, there is a great opportunity to learn from colleagues across England – and from across other sectors – as to what works. With high-level support we can be as ambitious as possible in our aims for our residents.

6. Challenges

6.1 To be fully successful this needs multi-agency buy in at the highest level.

6.2 Physical activity can support so many other workstreams that a number of champions at all levels will be needed to represent the sector at strategy and planning meetings.

7. Timescale and delivery plan

7.1 Consultation work with partners will start before the end of the year with the main thrust of activity in early 2020. An event showcasing the work of the Essex LDP – and what

lessons Surrey can learn – is due to be held in the next six months to kick-start system thinking.

8. How is this being communicated?

8.1 The desire to develop a whole systems approach was announced at the Moving Surrey Forward conference in April 2019 with around 180 stakeholders. Further initial conversations have been held with the Surrey Senior Leisure Officers Group and a number of colleagues in Surrey County Council public health.

9. Next steps

- It is proposed to follow the six-phase approach advocated by Public Health England in its whole systems approach to obesity paper
- The first step is to agree a process for engaging senior leaders followed by wider stakeholders, then system mapping and action planning workshops
- The Health and Wellbeing Board will be updated again in 2020 on progress

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Health and Wellbeing Board

1. Reference Information

Paper tracking information	
Title:	Surrey School Air Quality Programme
Related Health and Wellbeing Priority:	Priority One
Author (Name, post title and telephone number):	Dr Rachel Gill, Consultant in Public Health, 0208 213 2678
Sponsor:	Rod Brown
Paper date:	5 September 2019
Related papers	Surrey Healthy Weight Strategy for Children, Young People & Families, 2017- 2022

2. Executive summary

- 2.1 The purpose of this report is to provide an update on the Surrey School Air Quality Programme and present early evaluation findings.
- 2.2 The Surrey Air Alliance partnership was awarded £145,188 through the Department of Environment, Food and Rural Affairs (DEFRA) Air Quality Grant Fund to improve the air quality around targeted schools, in/within 2km of an Air Quality Management Area.
- 2.3 The Surrey School Air Quality Programme was taken forward to: give school children an increased awareness of the health impacts of poor air quality; to understand what they could do to improve local air quality and reduce exposure; and encourage behaviour change to increase active travel and reduce vehicle idling outside schools.
- 2.4 The successful project has run throughout the 2018/19 academic year and some activities will continue into the 2019/20 academic year.

3. Recommendations

- 3.1 The Health and Wellbeing Board is asked to note the early evaluation findings of the Surrey School Air Quality Programme.

4. Reason for Recommendations

- 4.1 The Surrey School Air Quality Programme supports delivery of the Health and Wellbeing Board Strategy, Priority One: Helping people in Surrey to lead healthy lives.

5. Detail

Background

5.1 Air pollution is an important determinant of health. The biggest health burden is understood to be from long-term exposure to small particulate air pollution which is estimated to decrease life expectancy by an average of six months. District and borough councils have the statutory duty to assess air quality and declare an Air Quality Management Area (AQMA) if there is a potential breach in the standards. There are currently 27 locations across nine of the 11 district and boroughs in Surrey that have been declared AQMAs.

5.2 The Surrey Air Alliance (partnership of Environmental Health Officers from district and borough councils and Surrey County Council's Transport and Public Health) was awarded £145,188 through the DEFRA Air Quality Grant Fund to improve the air quality around targeted schools, in/within 2km of an Air Quality Management Area. This report provides an update on the programme and presents early evaluation findings. The Surrey School Air Quality Programme supports delivery of the Health and Wellbeing Board Strategy, Priority One: Helping people in Surrey to lead healthy lives.

Surrey School Air Quality Programme

5.3 The School Air Quality Programme offered a package of complimentary measures to targeted primary/secondary schools, in/within 2km of an Air Quality Management Area (AQMA). The objective of the programme was to: give school children an increased awareness of the health impacts of poor air quality; to understand what they could do to improve local air quality and reduce exposure; and encourage behaviour change to increase active travel and reduce vehicle idling outside schools. The project has run throughout the 2018/19 academic year and some activities will continue into the 2019/20 academic year.

5.4 Programme measures included: Theatre in Education (TiE), a bespoke production based on air quality and sustainable transport to/from school; lessons and whole school assemblies delivered by a specialist provider, including support for pupils to measure local air quality at roadside, playground and around the school site; educational resources to support lessons in relation to air quality; school travel planning intervention; Bikeability training (basic level to support children to learn to ride a bicycle as well as advanced level for cycling on busy roads); an air quality element to the existing Golden Boot Challenge (which encourages active travel); and an Air Quality Summit (school conference).

5.5 In addition to this programme, a county-wide communications campaign ran for six weeks in September to November 2018, targeting parents/families to raise awareness about the impact air pollutants have on children's health and encourage parents to use alternative modes of transport to and from school. The campaign channels included radio, bus backs/bus stop advertising and digital/social media.

5.6 The programme was delivered across nine district/boroughs; Guildford and Surrey Heath were ineligible for the programme as they were in receipt of separate DEFRA funding under a ministerial directive. Programme delivery was led by the Surrey County Council (SCC) Safer Travel Team, in partnership with SCC Public Health and Spelthorne District Council (project management), with support from Surrey Air Alliance partners.

Early evaluation results

5.7 A total of 48 schools in Surrey have taken part in one or more of the core measures on offer (Theatre in Education, air quality workshops and/or anti-idling campaign):

- 40 schools held a performance of a bespoke theatrical production on air quality and sustainable travel, reaching a total of 2,156 pupils. 100% of adults (teachers/school staff) surveyed thought the show was an effective or very effective way to communicate the health impacts of poor air quality and what pupils could do to improve air quality around their school.
- 31 schools took part in air quality workshops and whole school assemblies run by a specialist contractor, reaching a total of 7,435 pupils; and five schools were supported to host anti-idling events. One of the events coincided with National Clean Air Day on 20 June 2019 and received positive media coverage. A formal evaluation of workshop/assemblies and anti-idling event elements is due in August 2019.

5.8 In addition to the core measures, over 2,500 pupils across 46 schools received additional subsidised cycle training; seven schools received training to develop their School Travel Plans; and air quality toolkits/teaching resources were prepared by a specialist provider and distributed to all schools in Surrey.

5.9 With respect to the media campaign, there were over 16,000 views on the Healthy Surrey webpage making it the most viewed page on the website during the campaign period. Facebook was the most popular social media channel to reach and engage with parents. There were 41 Facebook posts during the campaign period which appeared 98,970 times, generated 1,253 link clicks and 600 engagements, such as comments, shares and likes. An external evaluation of the media campaign was conducted, which included 300 interviews with parents who regularly drive their children to and from school. The evaluation findings suggest that although there was relatively low awareness of the campaign, the campaign was strongly liked, conveyed new information and was felt to discourage people from using their cars on the school run.

5.10 In July 2019 an Air Quality Summit was held to further disseminate the messages of the programme. The Summit was attended by 56 school representative, across 23 schools and elements of the School Air Quality Programme were shared through workshops/presentations. For example, the London Sustainability Exchange presented the school workshops and resource toolkits they delivered and a school showcased/shared their experiences of taking part in the programme.

Further elements

5.11 The final element of the programme will be taken forward in October 2019. SCC hosts a sustainable travel challenge, the 'Golden Boot Challenge'. The challenge will be rebranded as the 'Green Boot Challenge' and supported by a new mobile phone app, which adds an air quality element. The new Green Boot Challenge will be piloted with 20 programme schools to coincide with International Walk to School Month in October. The challenge will be App and White Board based, allowing parents/child to record their journey and mode to school and calculate mode share shifts and emission savings. The October pilot will enable a full launch of the Green Boot Challenge to 150-200 Surrey primary schools in June 2020.

5.12 We are planning to undertake a final survey and focus groups to enable evaluation of the programme as a whole, with the final evaluation report being completed by the end of the year.

6. Challenges

6.1 We found that schools were initially slow to sign up to the programme. However, we were able to adapt some of the initiatives following feedback from schools to support

elements to be delivered in such a way as to minimise the impact on school. For example, we adapted the initial offer of classroom resources to provide facilitated classroom workshops.

7. Timescale and delivery plan

7.1 The programme has run throughout the 2018/19 academic year and some activities will continue into the 2019/20 academic year.

8. How is this being communicated?

8.1 The final evaluation report will be disseminated through the Surrey Air Alliance partners to district and borough colleagues and through the Surrey Prevention and Wider Determinants of Health: Priority One Board to health and wider partners. The evaluation report will also be shared with Surrey schools by the SCC Safer Travel Team. Findings of the evaluation will be reported back to DEFRA and local authority partnerships.

9. Next steps

- Following an unsuccessful bid to the DEFRA Air Quality Grant Fund 2019/20, we will need to identify funding streams to continue the core elements of the Surrey School Air Quality Programme into 2019/20, including: Theatre in Education drama workshop; class workshops, including air diffusion tube monitoring, and school assemblies; and anti-idling events
- SCC has invited each borough/district council to contribute funding if they would like to participate in the programme in 2019/20. SCC will also contribute some funding, as well as provide the officer resource to manage and deliver the programme countywide. The programme will require a minimum of five district/boroughs to contribute in order to move forward. As this will not be funded through the DEFRA Air Quality Grant, it will be open for all boroughs/districts to participate.
- We plan to submit a bid to the DEFRA Air Quality Grant Fund in autumn 2019 to enable us to extend the School Air Quality Programme into 2020/21

Health and Wellbeing Board

1. Reference Information

Paper tracking information	
Title:	Surrey's Greener Future: Local action for global impact
Related Health and Wellbeing Priority:	Priority One
Author (Name, post title and telephone number):	Chris Tisdall – Strategic Commissioning Lead, Surrey County Council Simon Griffin – Partnership Lead, Surrey County Council
Sponsor:	Cllr Tim Oliver
Paper date:	5 September 2019
Related papers	IPCC Special Report (SR15): https://www.ipcc.ch/sr15/

2. Executive summary

2.1 Surrey's Community Vision for 2030 contains the shared ambition that "*residents live in clean, safe and green communities, where people and organisations embrace their environmental responsibilities*". This ambition reflects the fact that Surrey's residents have consistently raised concerns about how we tackle climate change with a clear desire to preserve their county for future generations.

2.2 This paper sets out a programme of work, developed by the County Council, which would help to achieve this ambition. It also proposes ways in which the County Council is seeking to work with its partners to address the climate challenge, and in so doing enable people and organisations to ensure Surrey is safe, free from pollution and has open, green spaces to enjoy in the future.

3. Recommendations

3.1 This paper recommends that Health and Wellbeing Board members:

- Consider their response to Surrey County Council and other Surrey local authorities declaring a climate change emergency, including the option of declaring climate emergencies on behalf of their own organisations (if they have not already done so)
- Work with Surrey County Council to support the Surrey's Greener Future initiative by
 - i. supporting and/or participating in the community design challenge;
 - ii. submitting evidence and ideas to the call for evidence (and potentially taking part in subsequent witness sessions);
 - iii. helping to develop an evidence base that will inform Surrey's collective response to the climate challenge; and
 - iv. engaging in a strategy review process that will determine how we can work together more effectively.

4. Reason for Recommendations

- 4.1 A global issue like climate change affects us all and we all – public services, partner organisations, local businesses and residents – have a role to play in responding to the challenges it brings. By working together, the County Council believes we will get the best out of our collective capacity and resources: improving the environment in Surrey while also contributing to a global change.
- 4.2 The Greener Future initiative will help to deliver Surrey’s Community Vision for 2030 and the aims of our Health & Wellbeing Strategy by helping people to lead healthy lives.

5. Detail

- 5.1 The UK Government has committed to achieving net zero carbon emissions by 2050, and on 9 July 2019 Surrey County Council adopted a corresponding motion, through which it resolved to:
 - i. commit to working closely with the Government, the Environment Agency, Borough and District colleagues, local businesses, our residents and other partners in meeting this ambitious target;
 - ii. deliver a strategy in 2019/20 involving a task group that clearly outlines how we plan to deliver the target including actions that will be taken;
 - iii. write to the Government asking them to confirm what support will be made available to local authorities to help achieve this goal; and
 - iv. declare a ‘Climate Emergency’, and commit to actions to support businesses and all local authorities in their work to tackle climate change by providing a strong unified voice for councils in lobbying for support to address this emergency, and sharing best practice across all councils
- 5.2 At the time of writing this report, Elmbridge Borough Council, Epsom & Ewell Borough Council, Guildford Borough Council, Woking Borough Council and Mole Valley District Council had also declared climate emergencies, with other local authorities in Surrey considering their position.
- 5.3 Further to the Government’s commitment to achieve net zero carbon emissions, DEFRA has published a paper that summarises its ambitions for the forthcoming Environment Bill and sets out some implementation considerations. It will be important to align the Greener Future initiative with work to develop the bill.

6. Challenges

- 6.1 For Surrey to achieve net zero carbon emissions, a genuinely collaborative approach is required, with individuals and organisations sharing collective responsibility. The principles at the heart of the Green Future approach are therefore designed to ensure the work is system wide, ambitious, long-term in its impact and genuinely co-produced by partners and residents.
- 6.2 There is some urgency to this work, as indicated in the Intergovernmental Panel on Climate Change’s (IPCC) Special Report on Global Warming of 1.5°C, published on 8 October 2018. The report outlines the risks to the planet if temperature increases by more than 1.5°C and warns that without significant action we could exceed the temperature within 12 years.

6.3 In light of the above, this work will need to progress at pace. However, this urgency should be balanced with the need to move forward in partnership and in so doing determine the most effective collective approach to becoming carbon neutral.

7. Timescale, delivery plan and next steps

7.1 Since declaring a climate emergency on 9 July, the County Council has started thinking about this work in three different ways, which have translated into three connected and complementary strands of work (to run at the same time):

- i. A cross-party **scrutiny** task group of county councillors will test what the 2030 Vision ambition means to Surrey residents, businesses and partners in order to draft a 'call for action'.

A call for evidence runs until 15 September, following which the councillors on the scrutiny task group will be running a series of witness sessions, which will enable a range of stakeholders to share their views on our climate emergency.

In December, the findings of the task group will be presented back to the County Council, setting out the draft 'call for action', which in turn will be supported by the emerging insight work and the outcomes of the community design challenge.

- ii. An **insight** workstream – being undertaken in conjunction with the University of Surrey – will ensure the right research and data are informing Surrey's approach and identify what more we need to do to become carbon neutral.

In order to keep the work targeted and manageable, the scope of this work will be limited to achieving net zero carbon emissions in Surrey, also reflecting the focus of the motion passed by Surrey County Council on 9 July and the corresponding UK target.

The member-led task group and design challenge workstreams provide the opportunity to explore wider environmental issues with residents and partners as appropriate.

The insight work will produce an evidence base that will help us to understand:

- how close Surrey is to being carbon neutral at present;
- how effective Surrey's current strategies are (across the whole county);
- what more we should do; and
- where we need to strengthen the data and evidence we are using to guide individual and collective actions

Between August and November 2019, two corresponding strands of work will provide an initial view of where Surrey is on its journey to becoming carbon neutral:

- Work to produce a baseline will identify and bring together existing data (also identifying any gaps) in order to give us the 'as is' picture
- At the same time, a proposed Surrey-wide strategy review aims to identify what organisations across the county are currently doing in order to become carbon neutral

The process of building an evidence base will be iterative – e.g. we will need to fill gaps in our knowledge having identified them – and work will therefore continue beyond November 2019. The aim is to have built a robust and comprehensive evidence base by summer 2020, which will then be available for organisations in Surrey to inform their work in future.

It will be crucial to work with colleagues in district and borough councils, the health system and other partner organisations to ensure this work realises its full potential. To that end, conversations have begun to determine how existing networks, such as the Surrey Environment Partnership and Sustainability Network, can help to take this work forward.

- iii. A **community design challenge** will enable local residents, communities and businesses to be innovative in developing and implementing ideas that will tackle climate change and other environmental issues.

Through September local people will be invited to share their ideas about how Surrey's communities could respond to the climate emergency, either online or by taking part in a local innovation workshop.

Ideas will be tested against the emerging findings from the insight work and support will be provided to enable shortlisted participants to develop and prototype their ideas through October and November.

In order to make these ideas a reality, it is hoped that a range of partners will collaborate to bring together the required resources and expertise.

8. Conclusion

- This report sets out Surrey County Council's proposed response to the climate emergency, and its commitment to working with partners and Surrey's communities
- In line with the recommendations, the members of Surrey's Health and Wellbeing Board are invited to share their views on this suggested programme of work, and on the opportunities to work together to ensure Surrey can achieve net zero carbon emissions