

**MINUTES** of the meeting of the **HEALTH AND WELLBEING BOARD** held at 1.00 pm on 5 December 2019 at Ashcombe Suite, County Hall, Penrhyn Road, Kingston upon Thames, KT1 2DN.

These minutes are subject to confirmation by the Committee at its meeting on Thursday, 5 March 2020.

**Elected Members:**

(Present = \*)

- \* 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
- \* Mrs Mary Lewis
- Ruth Colburn Jackson
- \* Giles Mahoney
- \* Rob Moran
- \* Rod Brown
- \* Borough Councillor Caroline Reeves
- Borough Councillor John Ward

**Substitute Members:**

Steve Hook - Assistant Director of Disabilities (SCC)  
Edmund Cartwright - Director of Quality and Nursing (Interim), NHS Surrey Heath

**In attendance**

Simon Turpitt - Chair of Surrey Adults Safeguarding Board  
Sue Robertson - Associate Director of Strategic Commissioning, NHS Surrey CCGs  
Alison Griffiths - Deputy Cabinet Member for Health (SCC)  
Barbara Herts - Interim Consultant - CAHMS Lead  
Hayley Connor - Director – Commissioning (SCC)

**44/19 APOLOGIES FOR ABSENCE [Item 1]**

Apologies were received from Simon White - Steve Hook acted as substitute, Dr Andy Brooks and Ruth Colburn Jackson - Edmund Cartwright acted as substitute, Dr Elango Vijaykumar and Borough Councillor John Ward.

**45/19 MINUTES OF PREVIOUS MEETING: 3 OCTOBER 2019 [Item 2]**

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

**46/19 DECLARATIONS OF INTEREST [Item 3]**

There were none.

**47/19 QUESTIONS AND PETITIONS [Item 4]**

**a MEMBERS' QUESTIONS [Item 4a]**

None received.

**b PUBLIC QUESTIONS [Item 4b]**

None received.

**c PETITIONS [Item 4c]**

There were none.

**48/19 HEALTH AND WELLBEING BOARD STRATEGY PRIORITY IMPLEMENTATION PLANS AND REVISED METRICS [Item 5]**

**Sponsors:**

Rod Brown - Head of Housing and Community at Epsom and Ewell District Council

Giles Mahoney - Director of Integrated Care Partnerships at Guildford and Waverley Clinical Commissioning Group (CCG)

Rob Moran - Chief Executive of Elmbridge Borough Council

Ruth Hutchinson - Interim Director of Public Health at Surrey County Council

**Key points raised in the discussion:**

1. The Head of Housing and Community at Epsom and Ewell District Council provided the Board with an overview of the Priority and raised additional points below:
  - Highlighted that it was important to tackle the Priority across all demographics rather than focusing solely on children.
  - Noted that a shared vision for those with 'lived experiences' was at the centre of the Priority.
  - That leadership from professionals in difficult areas was vital, such as the work by the Clinical Chair at North West Surrey CCG clarifying the milestones regarding dying a dignified death.
2. The Director of Integrated Care Partnerships at Guildford and Waverley Clinical Commissioning Group (CCG) provided the Board with an overview of the Priority and raised additional points below:
  - He noted the need for a broader out of service delivery to avoid isolating the Priority, and having proactive alignment between the both Surrey Heartlands' and Frimley's 5 Year Strategies on the transformation of local health and care services.

- Praised the work of the Dementia Clinical Lead at Surrey Heartlands Health and Care Partnership in addressing the low diagnosis rates in Surrey through the formation of a dementia strategy group.
- Fundamental to the prevention of mental health issues in adults was to ensure good emotional wellbeing in young people which was central to the Healthy Schools programme.

*Dr Charlotte Canniff arrived at 1.14pm*

3. The Chief Executive of Elmbridge Borough Council provided the Board with an overview of the Priority and raised additional points below:
  - Noted the importance of supporting children and vulnerable adults to gain life skills through the use of mentoring with older more experienced people.
  - That apprenticeships were an underused tool and a levy transfer working group would be established to maximise their benefits.
  - Noted Havering's effective Social Progress Index (SPI).

*Barbara Herts and Hayley Connor arrived at 1.22pm*

- There needed to be greater clarity between partnerships and projects within the Priority such as the Employment and Skills Board, SPI working group and Children's Programme Board - 'Time for Kids' had an obvious links.
4. In the discussion on the three priorities, the Chairman noted that continual resourcing was essential and that a more streamlined approach with partners was effective - noting that there were 45 charities in Surrey to address homelessness.
  5. Members noted that it was important to have a clear understanding on who had responsibility over each of the three priorities and positively commented that it was good that children were more visible within the plans as ensuring the healthy lives of adults had a beneficial effect on children's wellbeing.
  6. The Interim Director of Public Health provided an overview of the revised metrics and explained that further engagement work on the metrics was needed to ensure accurate baseline data.
  7. In response to a Member question on the inclusion of life expectancy variation, the Interim Director of Public Health noted that despite measuring inequality geographically it was important to not categorise certain areas as having better or worse life expectancies - measuring inequalities between the five population groups avoided that.
  8. The Interim Director of Public Health explained that it was crucial to promote healthy life expectancy rather than focusing solely on the length and the Chairman noted that the category of deprivation within the SPI greatly influenced life expectancy.
  9. A Member commented that some areas were not adequately covered by the metrics as only 1 of the 38 metrics was on self-reporting resident's perceptions of health and wellbeing issues. In response, a Member explained that citizen panels were recruited via postcode, they were geographically distributed and granted a donation to a charity. Citizen panels were empowerment tools for individuals and in response the Chairman would look into those panels.
  10. In response to a Member query on the process of changing metrics; the Interim Director of Public Health stated that the metrics were

constantly evolving and urged the Board to engage with herself and work collaboratively with the public health team.

11. In response to a Member question on accessing the metric data on Surrey-i, the Interim Director of Public Health explained that it was available on the a HWB strategy online dashboard.
12. A Member suggested to the Board that the member champions across the five population groups should meet to drive the metrics forward.
13. The Chairman commented that the metrics provided a good foundation and sense of direction and that Surrey County Council and Surrey Heartlands were working collaboratively to develop the metrics.

#### **RESOLVED:**

The Health and Wellbeing Board:

1. Approved the summary plans for incorporation into a refreshed published strategy to reflect the further refinement and development that has taken place since the publishing of the strategy.
2. Approved the revised set of metrics, where they have been finalised, for incorporation into an online public dashboard to be published early in 2020.
3. Agreed the mechanism for reporting and reviewing activity taking place within each priority area and the progress being achieved against the selected outcomes.
4. Supported the continued engagement and awareness of strategy, metrics and activity as currently described in the implementation plans by the constituent organisations and wider partners in Surrey.

#### **Actions/further information to be provided:**

The Chairman would look into the use of citizen panels to aid residents in self-reporting their perceptions of health and wellbeing issues.

#### **49/19 SURREY SAFEGUARDING ADULTS BOARD ANNUAL REPORT 2018/19 [Item 6]**

#### **Witnesses:**

Simon Turpitt - Chair of Surrey Adults Safeguarding Board

#### **Key points raised in the discussion:**

1. The Chair of Surrey's Adults Safeguarding Board (SSAB) summarised the report and noted positively that it provided stronger assurance, better and more in-depth data quality and a more robust committee structure.
2. In addition to the report he noted:
  - That there was greater agency engagement through more training programmes.
  - That to help improve the quality of enquiries, Healthwatch Surrey had collated user experiences from people who had gone through a Section 42 safeguarding enquiry, and findings would be presented to the SSAB next week.
  - The accessibility of the website of the SSAB was improved through working collaboratively with the Children's Board.

- In collaboration with Adult Social Care (ASC), SSAB had begun to produce more regular and effective briefing documents which were available on the SSAB website.
3. A Member praised the thorough report as it reinforced the responsibility required of all agencies to improve safeguarding work and noted the importance of hearing residents' experiences.
  4. There were concerns over the separation of the Children's Partnership from the Multi Agency Safeguarding Hub (MASH) and the need to increase the Council's engagement with private care homes engagement to ensure good safeguarding knowledge.
  5. Furthermore, a Member explained that the most numerous reports to MASH were from the police via concerned neighbours, the aim was to ensure the police were trained to address situations sensitively and meticulously. In response, the Chair of the SSAB mentioned the need for the police to have a standardised definition of vulnerability and referral routes as many referrals in Surrey were not strictly related to Safeguarding Adults.
  6. A Member praised the report as it reflected upon real challenges and stated that more work need to be done on Section 42 to address individuals reluctant to share information on safeguarding concerns.
  7. The Business Management Group was praised as it mirrored the Children's Partnership Executive Group, by deciding upon issues that need to be escalated to the SSAB and having more regular talks with key statutory partners ensured greater strategic management.
  8. A Member stated that alignment as noted within the report's second recommendation, was particularly salient following the Health and Wellbeing Board's merger with the Community Safety Board.

**RESOLVED:**

That the Health and Wellbeing Board:

1. Considered and noted the Surrey Safeguarding Adults Board Annual Report.
2. Agreed to ensure alignment of both Boards strategy so that there are more focussed work plans that build together and avoid overlap.

**Actions/further information to be provided:**

None.

**50/19 SURREY CHILD AND ADOLESCENT MENTAL HEALTH (CAMHS) WHOLE SYSTEM TRANSFORMATION PLAN [Item 7]**

**Witnesses:**

Sue Robertson - Associate Director of Strategic Commissioning, NHS Surrey CCGs

**Key points raised in the discussion:**

1. The Associate Director of Strategic Commissioning introduced the report, informing the Board that the Whole System Transformation Plan was updated annually. That year's update reflected the strong focus on CAMHS through extensive engagement with children and young people, families and those caring for and working with children -

which had driven the Emotional Wellbeing and Mental Health Strategy approved by the Board in March. The transformation work referred to in the report included the Children and Young People's Havens, Hope House, Extended Hope, supporting children in crisis and the eating disorder service and was built on partnership work across agencies.

2. A Member expressed that she could not approve the report as it did not address the 2014 and 2018 inadequate Ofsted ratings on Children's Services in Surrey. In 2019, waiting lists increased enormously and this was not mentioned in this report, Members noted that the report needed to be more balanced and that problems needed to be acknowledged in order to move forward.
3. A Member noted that Children's Services was positively progressing and explained that Hope House and Extended Hope were national exemplars within Surrey's CAMHS and the CAMHS contract would go out for procurement for a service starting from April 2021.
4. A Member stated that working in collaboration with many partners ensured that key areas of transformation were identified and noted that the NHS regulator required the details of the 5 year forward strategy to be available publically online.
5. In response, the Associate Director of Strategic Commissioning acknowledged the Board's concerns over the balance of issues within the report and would amend parts of the report to reflect Member's concerns prior to final approval.
6. An attendee explained that she would like to see where the additional £4 million investment that the Chief Executive of the National Health Service planned to put into children's services.
7. A Member commented that she would like to see the 'open letter to Children and Young People of Surrey' on page 107 rewritten to reflect the future strategic spending of funding and to ensure economic commitment in future years on prevention.
8. In response to a Member's query on how CAMHS in Surrey compared to similar partners, a Member noted that it compared positively with other partners but explained that CAMHS addressed Surrey specific issues such as the issue of access and overwhelming public demand. An early intervention model was not in place which created a negative compound effect with mental health issues in children's being more likely in adults.
9. A Member noted that Adverse Childhood Experiences (ACEs) were being considered within Children's Services in Surrey and the worry of labelling needed to be addressed.
10. The Chairman in agreement with the Board agreed to defer the report to the additional public meeting of the Board on the 16 December so it could be revised to incorporate Members' concerns.

**RESOLVED:**

The revisions to the report and its recommendations would be deferred to the additional public meeting of the Health and Wellbeing Board on the 16 December 2019.

**Actions/further information to be provided:**

The Health and Wellbeing Board to receive the revisions to the report at the Board's additional public meeting on 16 December 2019.

## **51/19 TIME FOR KIDS [Item 8]**

### **Witnesses:**

Dave Hill - Executive Director for Children, Families and Learning (SCC)

### **Key points raised in the discussion:**

1. The Executive Director for Children, Families and Learning introduced the report and thanked the Chief Executive Officer at Surrey Youth Focus for her input.
2. Noted the positive example of Child Friendly Leeds - despite Leeds' poor Ofsted rating five years ago, similarly to Surrey - which had a transformative impact on children's services and hoped that Time for Kids in Surrey would follow that successful initiative.
3. The report echoed many of the Board's fundamental principles, particularly early intervention and prevention to combat mental health crises, domestic abuse, and substance abuse - which accounted for 95% of referrals in young people.
4. Highlighted the high amount of young people who did not have someone in their life they could depend upon and particularly in care the lack of a permanent social worker was detrimental. Good emotional wellbeing for children was bolstered by someone 'crazy' about them who they could trust.
5. It was important the report was driven by the narrative provided by children with adverse experiences and he noted that children responded positively to the project.
6. A Member commented that the project would not be compatible in certain areas, noting anti-social behaviour among young people in deprived areas.
7. An attendee positively endorsed the project as it showed genuine attention and sensitivity to vulnerable children facing those difficult experiences.
8. A Member explained that from a clinical perspective, the lack of attachment in children led to a high degree of accessing mental health services later in life so early intervention and prevention were vital.

### **RESOLVED:**

The Surrey Health and Wellbeing Board:

1. Noted the important piece of work.
2. Would promote and socialise Time for Kids in the agencies and Networks.
3. Agreed to receive an update from time to time on progress.

### **Actions/further information to be provided:**

None.

**52/19 DATE OF THE NEXT MEETING [Item 9]**

The Board noted that its next public meeting would be held on 5 March 2020.

Meeting ended at: 2.47 pm

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**Chairman**