

MINUTES of the meeting of the **HEALTH AND WELLBEING BOARD** held at 2.00 pm on 14 December 2023 at Council Chamber, Woodhatch Place, 11 Cockshot Hill, Reigate, Surrey, RH2 8EF.

These minutes are subject to confirmation by the Committee at its next meeting.

Board Members:

(Present = *)

(Remote Attendance = r)

- * Bernie Muir (Chair)
Dr Charlotte Canniff (Vice-Chair)
- r Karen Brimacombe
Professor Helen Rostill (Co-Sponsor)
- * Liz Williams (Co-Sponsor)
Kate Barker (Co-Sponsor)
Mari Roberts-Wood
Fiona Edwards
- * Jason Gaskell (Co-Representative)
Sue Murphy (Co-Representative)
- * Dr Russell Hills
- r Kate Scribbins
- * Ruth Hutchinson
- * Helen Coombes
- * Rachael Wardell
- r Karen McDowell
Graham Wareham
Joanna Killian
- * Mark Nuti
Sinead Mooney
Clare Curran
- * Kevin Deanus
Jason Halliwell (*no longer a Board member*)
Carl Hall
Tim De Meyer
Borough Councillor Ann-Marie Barker
Steve Flanagan
- r Jo Cogswell
Dr Pramit Patel
- * Lisa Townsend
- * Professor Monique Raats
- r Siobhan Kennedy (Associate Member)

Substitute Members:

- * Michelle Blunsom MBE - CEO, East Surrey Domestic Abuse Services
- * Tracey Faraday-Drake - Director for Children and Young People and All Age Learning Disabilities and Autism / Place Convenor for Surrey Heath, Frimley ICB
- * Chris Raymer - Detective Chief Superintendent, Surrey Police
- r Jack Budgen - Community Interventions Development Lead, Interventions Alliance

The Chair:

- Welcomed a new Board member: Helen Coombes - Executive Director for Adults, Health and Wellbeing, Surrey County Council (SCC).
- Welcomed new Board members - as a result of changes to portfolios:
 - Clare Curran - Cabinet Member for Children and Families, Lifelong Learning.

- Kevin Deanus - Cabinet Member for Fire and Rescue, and Resilience; and thanked outgoing Board member Denise Turner-Stewart.
- Thanked an outgoing Board member: Rosemarie Pardington - Director of Health, Research & Compliance/Deputy CEO Young Epilepsy (VCSE Alliance Co-Representative); who would be taking up a national role.
- Welcomed an observer on the Teams link: David Izatt - ex-Co-Chair of the Surrey Carers Partnership Board.

34/23 APOLOGIES FOR ABSENCE [Item 1]

Apologies were received from Dr Charlotte Canniff, Professor Helen Rostill, Kate Barker, Joanna Killian, Dr Pramit Patel, Mari Roberts-Wood, Graham Wareham, Sinead Mooney, Clare Curran, Borough Councillor Ann-Marie Barker, Steve Flanagan, Sue Murphy - Michelle Blunsom MBE substituted, Fiona Edwards - Tracey Faraday-Drake substituted, Tim De Meyer - Chris Raymer substituted, Carl Hall - Jack Budgen substituted (remote), Karen Brimacombe (remote), Jo Cogswell (remote), Karen McDowell (remote), Kate Scribbins (remote).

35/23 MINUTES OF PREVIOUS MEETING: 20 SEPTEMBER 2023 [Item 2]

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

36/23 DECLARATIONS OF INTEREST [Item 3]

There were none.

37/23 QUESTIONS AND PETITIONS [Item 4]

a Members' Questions

None received.

b Public Questions

None received.

c Petitions

There were none.

38/23 HEALTH AND WELLBEING STRATEGY HIGHLIGHT REPORT INCLUDING THE BOARD'S UPDATED TERMS OF REFERENCE [Item 5]

Witnesses:

Karen Brimacombe - Chief Executive, Mole Valley District Council (Surrey Chief Executives' Group) (Priority 1 Sponsor)
 Phillip Austen-Reed - Principal Lead - Health and Wellbeing, SCC
 Liz Williams - Joint Strategic Commissioning Convener, SCC and Surrey Heartlands ICS (Priority 2 Co-Sponsor)
 Lisa Andrews - Public Health Principal, SCC
 Sarah Haywood - Serious Violence Programme Lead, Office of the PCC
 Rebecca Brooker - Prevention and Communities Lead, SCC

Key points raised in the discussion:

1. The Chair referred to the Board's Terms of Reference (ToR) in the agenda, noting that due to some recent initial discussions on maximising the alignment of the Board with the Surrey Heartlands Integrated Care Partnership (ICP) and Integrated Care Board (ICB), she proposed that the Board: approves the ToR as interim as it might need to be revisited later in 2024 once the review had progressed. She highlighted the small changes in the boundaries for the Key Neighbourhoods bringing those in line with the ward boundary changes which occurred earlier in the year.

Priority 1

2. The Priority 1 Sponsor referred to the spotlight item: Changing Futures Sustainability - Next Steps, to be funded until March 2025 and it was hoped that the programme would continue beyond that.
3. The Principal Lead - Health and Wellbeing (SCC) detailed the spotlight item:
 - That the work on multiple disadvantage had been brought together with a greater focus due to the alignment of national policy and local prioritisation of the issue. Since 2020 there had been better multi-agency working through the Surrey Adults Matter approach.
 - That in 2021 funding from the national Changing Futures grant had been secured, enabling greater collaboration with (VCSE) Voluntary, Community and Social Enterprise partners; trauma informed outreach was being provided and the data showed the improved outcomes in line with SCC's ambition of 'no one left behind' (NOLB). Funding although flagged as a risk, had been secured for next year; highlighted the positive engagement with the commissioning collaborative and the local joint commissioning group chairs.
 - That the JSNA chapter on multiple disadvantage which would help inform the way forward for the specific areas around trauma informed outreach and multi-agency working, and broader areas under the Board's remit.
 - That such programmes would be useful to reflect on at the Better Care Fund (BCF) Strategy workshop in February in terms of how such programmes which appear to meet both national and local strategies, could be built into BCF processes and structures in a better way.
4. A Board member noted that he had been interviewed regarding the work on the multiple disadvantage JSNA chapter, noted that he had visited a centre in Guildford where speaking to people with lived experience was invaluable; stressed that prevention was fundamental.
5. The Chair noted that not only were the aims important and aligned with the strategies, but so was the data being gathered which could be used elsewhere.
6. A Board member welcomed the vital work in the preventative space and thanked the team for their work on the multiple disadvantage JSNA chapter.
7. A Board member recognised the work nationally by systems on supporting such individuals with complex needs. However, noted that if the ask was for the local joint commissioning group chairs to agree to allocate their Better Care Funding towards the project, queried whether there was a risk that there would be place variation or whether it was expected that all the groups would agree the allocation. A Board member responded that as a county-wide initiative it was important to be discussed at the BCF Strategy workshop, to ensure that health inequalities are not exacerbated and such initiatives are sustainable. The potential risk highlighted must be reflected on at the workshop. The Principal Lead - Health and Wellbeing (SCC) noted the importance of the engagement with the commissioning collaborative and the local joint commissioning Group chairs around decision-making.

8. The Board member added that there was an increasing view on what sat within the BCF and what sat within place-based determination, reiterating the risk of multiple asks on a finite pot of money and how the system collectively agrees what the priorities are. The Chair noted that having that perspective at the BCF Strategy workshop would be vital to ensure money would be spent in the right way.
9. The Priority 2 Co-Sponsor thanked the Senior Policy and Programme Manager - Changing Futures (SCC) and colleagues, and Dr Jo Jennison, for considering the neurodiversity of the cohort; that would be further explored within the population.

Priority 2

10. The Priority 2 Co-Sponsor noted that:
 - The Mental Health: Prevention Board's (MHPB) role was to enable the right target of the Mental Health Investment Fund (MHIF) and to have oversight of those funded projects; a MHIF Oversight Sub-Group had been convened. Regarding round two of the MHIF, 13 of the 64 bids were successful and covered a broad age range and spread across the county, she would send the Committee Manager (SCC) the website link detailing the bid outcomes to be published early in the new year. The governance needed to be finalised.
 - Regarding the national research on inequalities in mental health care for Gypsy, Roma and Traveller (GRT) communities, one of the report recommendations had been actioned around prioritising the training of members of that community in mental health first aid.
 - Opportunities:
 - The MHPB had agreed its 2024 forward work plan, six actions were detailed in the Appendix and would drive tangible progress such as understanding how the system jointly works with place, focusing on prevention and supporting the development of the JSNA chapters.
 - A joint meeting would be held in January between SCC and Surrey Heartlands ICS to discuss the future funding of the Green Health and Wellbeing programme, she welcomed VCSE Alliance support.
 - Noted that the Strategy Index was being reworked, looking at the Key Performance Indicators in-depth.
 - Noted the positive start on the JSNA chapter on loneliness and social isolation with a high level of engagement.
 - A challenge was that several projects led by community organisations relating to suicide prevention might be impacted by changes in funding processes related to the National Suicide prevention strategy, that had been included in risk registers and would be discussed at Surrey Heartlands ICS.
11. A Board member referred to the withdrawal of the suicide prevention funding and noted that work was underway to find another source to continue the work that had taken place. The Chair welcomed a future update on the matter. Regarding the MHIF, had recently visited a group called Prospero Theatre who worked with people with learning disabilities into theatre and which received £28,000 from the funding; hoped that the money for round two of the MHIF could be released soon.
12. A Board member noted that the work around the GRT communities was important noting the impact of the trauma having recently met a member of the community who was homeless and unemployed, and whose friend had committed suicide.
13. A Board member noted the fantastic work which would deliver good outcomes for people, but queried what the connection was between the programme and special educational needs and disabilities, and schools. The Priority 2 Co-Sponsor would ask the Children and Young People's Convener to provide a response. A Board member responded that the Mental Health Improvement Programme was linked to the work underway for children with additional needs and disabilities via the

Additional Needs and Disabilities Partnership, where schools and health colleagues were represented. She noted that some of the most successful work with children's mental health was that conducted with schools via the mental health support teams and the other programmes that had MHIF funding. Where there were opportunities for additional resources or to focus attention that was directed into the work with schools; however, that did not cover all schools at every phase and stage with as comprehensive range of provision as was desired.

14. A Board member noted the large and vibrant home education community in Surrey, many children were being home educated because schools had been unable to accommodate their needs; sought assurance that the area was being considered. A Board member explained that it was an area being considered however it was more challenging to deliver such individualised interventions.
15. The Public Health Principal (SCC) detailed the spotlight item: Children and Young People's Emotional Wellbeing and Mental Health Strategy:
 - That the strategy served as the JSNA for children and young people's mental health in Surrey and linked with the NHS England's Local Transformation Plan. The ambition was to undertake a single piece of collaborative work which considers all the relevant levels of information from partners and providers across the county. A workshop held last year looked at how strengths were assessed and what improvements could be made.
 - That the strategy published in September set out six key themes which had been co-developed and produced with system partners, children and young people and their families; work had begun system-wide to understand and address the challenges. The Surrey Healthy Schools approach was a key part of the preventative work enabling schools to develop their provision of personal development and teaching, building culture and there was comprehensive training for mental health leads in schools, via Mindworks Surrey and Personal, Social, Health and Economic (PSHE) education.
 - That there were key groups that were known to be more at risk of poor mental health and additional support was being built in, those electively home educated were a consideration.
 - Work was underway to roll out the i-THRIVE Framework.
16. The Chair asked who officers were working with regarding the online safety part of the strategy. The Public Health Principal (SCC) noted that they were working with wider system partners such as Mindworks Surrey to understand what the issues are, desktop research had been undertaken to understand the key themes; as part of the broader strategy development group.
17. The Chair asked whether the PCC had information around the online safety impacts. The Serious Violence Programme Lead (OPCC) noted that there was work underway nationally, the Youth Endowment Fund had published a recent report around the link between violence and what children saw online. The OPCC offered support and was keen to discuss the matter with the Public Health Principal (SCC), she assumed that Surrey Police had specialist teams that had more intelligence around online safety. A Board member in her capacity as PCC added that it had been raised as an issue at the national group and South East regional group. A further Board member noted that Surrey Police had Paedophile Online Investigation Teams (POLIT) which received intelligence as well as investigations relating to online safety. Those teams linked with the regional and national picture and would be a key partner to engage with to look at the thematic elements.
18. The Chair noted that she had been contacted by more concerned parents than ever before, noting the interaction between harmful forces and their children in different ways yet that was not being reported; she stressed that it was a bigger issue than realised. A Board member responded that from a senior policing point of view the magnitude of the issue was recognised, the challenge around underreporting was

resource allocation. She welcomed anything that could be done as a community to encourage reporting and for that to be a simple process, to see the full scale of the issue and understand the magnitude in Surrey.

19. A Board member would put information into the Teams meeting chat from Surrey Healthy Schools about teaching online safety in schools which was a core part of the PSHE curriculum, taking a safeguarding lens to support children and young people to understand responsible online use and the routes of harm online. The Chair presumed that schools were communicating with parents on the matter. A Board member added that the National Crime Agency flagged that Meta was moving the Facebook Messenger platform to an encrypted format which would have an impact on child safety. A Board member explained that as part of the Surrey Healthy Schools approach there were now four violence against women and girls prevention workers across Surrey who would upskill teachers, with targeted work around online safety; the Chair welcomed detail on that. A Board member added that the University of Surrey had some research on the matter and would share that.

Helen Coombes and Liz Williams left the meeting at 2.42 pm.

20. A Board member praised the huge amount of work that had gone into the strategy and highlighted the resources committed, however sought for the Board to understand that in Children's Services it seemed that the problems with children's emotional wellbeing and mental health were accelerating faster than its capacity to respond. It was vital to keep the matter under review to ensure that the response keeps pace with the changes in children's lives. The Chair suggested that the issue be broken down and discussed in partnership to understand the work underway across the system, raising it as a higher priority regarding the prevention and early intervention work. A Board member agreed that it needed to be a higher priority as technology was outpacing the response.
21. The Chair noted that regarding the effort to monitor and gather data to create a Surrey-wide picture, it was incumbent to lobby the Government on what needed to happen going forward. From the PCC perspective a Board member provided assurance that was underway, having had a conversation with the Minister for Policing on the matter; it was a large and rising threat to Surrey - a low crime area.

Priority 3

22. The Priority 1 Sponsor in lieu of the Priority 3 Sponsor noted that the work on the Whole System Approach to Poverty would be sponsored by SCC's Director of Public Health. Through different interventions, the multi-agency NOLB Skills and Employment Network had progressed in the bid to support people who were the furthest away from employment to get back into employment.
23. The Prevention and Communities Lead (SCC) noted:
 - The positive progress in supporting those most at risk of being left behind from the skills and employment market in Surrey. A £6 million grant from the Department for Work and Pensions (DWP) had been secured to support people with long-term health conditions and disabilities to access work and to stay in work. Community organisations could bid on £2 million of that in the form of grants - used as an opportunity to upskill and provide training, she would circulate information about applying for a grant.
 - The continuation of Naturally Talented Me which was an online recruitment platform for residents that do not have traditional work histories but have a range of life experiences which could be translated into a suitable role, 140 residents had profiles and were looking for work. Research was underway with businesses around their experiences of being an inclusive employer, supporting them to do more around equality, diversity and inclusion (EDI).

- Working with the Mace Group contracted as SCC's Facilities Management provider on their social value-funded plan on the access to work scheme for those who may be left behind from the labour market to get jobs with them.
 - That getting people into a job was important but so too was helping people stay in that job and progress, there was a piece of work understanding and mapping the career pathways in facilities management and leisure sectors.
 - That a new piece of work had started around addressing in-work poverty regarding residents who might be working in one or multiple jobs but still needed to access food banks or still found themselves living in poverty.
 - All the work underway was designed in partnership with the NOLB Skills and Employment Network composed of 100 different partner organisations, the work sought to make real life differences to many.
 - The new opportunity called Work Well about providing holistic support to help people navigate and find the right employment support for them, an application was underway for funding from DWP.
24. The Chair noted that getting people back into work, reskilling and upskilling was important, particularly for those with neurodiversity; the employment figures for that group was low despite them desiring to work. A Board member noted that the University of Surrey had a piece of work on organisations building in being mindful of neurodiversity in the recruitment process, the Chair praised that positive work.
25. A Board member referred to the Poverty Strategy Commission, highlighting that it would be good for someone to link into the work by the Founder of Good Company regarding the East Surrey Poverty Truth Commission, it was a positive opportunity for the voluntary sector. The Prevention and Communities Lead (SCC) noted that the team were continuing to work closely with the Founder of Good Company; the Chair noted that it was an exciting opportunity and had attended its launch.
26. The Priority 1 Sponsor asked whether the team was linked in with the Employment and Skills Hub in Leatherhead. The Prevention and Communities Lead (SCC) noted that the team was trying to link in with all the career hubs and was working with the economic development officers in the district and borough councils; she was happy to follow up on any suggested connections.
27. A Board member welcomed feedback about the way the Healthwatch and Luminus Insights were presented separately in the Highlight Report. She flagged the feedback on the ground and the theme across the Priorities that there were services in place but navigation was a huge challenge for people. Noted the risk of a creep towards a two-tier system of people with resources able to navigate the system and those without unable and were at risk of being left behind - particularly true with carers. Noted the changes to the dementia support system meaning some people were unable to access some of dementia services that were available before. The biggest issue was access - particularly to primary care - and signposting was vital.

RESOLVED:

1. Approved the Terms of Reference as interim.
2. Acknowledged the minor revision to 4 Key Neighbourhoods due to boundary changes.
3. Would use the Highlight Reports and Engagement Slides to increase awareness of delivery against the HWB Strategy and recently published / upcoming JSNA chapters through their organisations.
4. Noted the opportunities/challenges including:
 - the incorporation of Primary Care Network level data for indicators in HWB Strategy Index.
 - change in sponsor for the work exploring a Whole System Approach to Poverty.

Actions/further information to be provided:

1. The Priority 2 Co-Sponsor will send the Committee Manager (SCC) the website link detailing the MHIF round two bid outcomes to be published early in the new year.
2. The Priority 2 Co-Sponsor will provide a future update on the withdrawal of the suicide prevention funding.
3. The Priority 2 Co-Sponsor will ask the Children and Young People's Convener to provide a response on what the connection is between the Mental Health Improvement Programme and special educational needs and disabilities, and schools.
4. Regarding online safety:
 - The CEO, East Surrey Domestic Abuse Services will provide detail on the work of the four violence against women and girls prevention workers across Surrey via the Surrey Healthy Schools approach.
 - The Board Member will share the research by the University of Surrey.
5. Regarding the Children and Young People's Emotional Wellbeing and Mental Health Strategy and ensuring that the response keeps pace with the changes in children's lives, the Public Health Principal (SCC) will follow up the Chair's suggestion to break down the issue and discuss that in partnership to understand the work underway across the system, raising it as a higher priority regarding the prevention and early intervention work.
6. The Prevention and Communities Lead (SCC) will circulate information about applying for a grant for community organisations to support people with long-term health conditions and disabilities to access work and to stay in work.

39/23 SERIOUS VIOLENCE DUTY UPDATE [Item 6]

Witnesses:

Lisa Townsend - Police and Crime Commissioner for Surrey
Sarah Haywood - Serious Violence Programme Lead, Office of the PCC

Key points raised in the discussion:

1. The PCC emphasised the importance of the second recommendation around endorsing the establishment of the Surrey Serious Violence Reduction Partnership, its establishment was necessary to provide the strategic leadership and governance needed. Reminded the Board that whilst the OPCC was a recipient of funding for the Serious Violence Duty, there were several partners which had a statutory responsibility to follow it to ensure all residents are and feel safe. Thanked the Serious Violence Programme Lead (OPCC) for her hard work.
2. The Serious Violence Programme Lead (OPCC) noted that:
 - She was employed by and worked across the Partnership, with funding via the PCC from the Home Office.
 - The Serious Violence Duty came into force in January 2023 and required those specified authorities to work together to understand and then reduce violence locally. It required a whole system multi-agency approach to understand and address the drivers of serious violence, protecting people from becoming victims and perpetrators of violence.
 - A Strategic Needs Assessment and Surrey Serious Violence Reduction Strategy were being developed, working with partners such as the Surrey Office of Data Analytics (SODA), SCC and Surrey Police.

- The needs assessment looked at hot spot areas and cohorts: those more at risk were males aged 30 to 34 years old, hot spots were in urban areas, and there was a growth in violence in the young female cohort; and identified gaps and areas requiring in-depth work. Police data would form the core, building around the contextual factors to understand the Surrey picture.
 - Whilst Surrey was safe and there was low crime, serious violence greatly impacted victims and communities; preventing the increase of crime numbers was vital and she would circulate a comprehensive PowerPoint Presentation.
 - Partnership connectivity and networking was crucial, whilst there were several mature workstreams around violence; having that single place through the Partnership to discuss serious violence, understand the risks, collect data and commission responses was vital. The Partnership had oversight of the strategy and the delivery plans, and four overarching priorities had been identified: leadership, evidence-based response, community connections and focused prevention.
 - The funding for this year's Serious Violence Home Office grant had been assigned and there was an opportunity next year to use the insights from the needs assessment and learning to target support to projects and communities, linking into the towns and the place-based work.
3. The Chair valued the extended presentation that she had received, she asked what the governance pathway was for the Partnership. The Serious Violence Programme Lead (OPCC) noted that the overarching governance sat with the Board where the Partnership would report to, as referenced in Priority Three with milestones built into those delivery plans. The Chair recognised the cross fertilisation of the Partnership's work with many of the other activities under the Board's remit and welcomed regular updates in the Highlight Report.
 4. A Board member highlighted the connections of the work with the Surrey Safeguarding Children Partnership around children being victims in their own right in domestic abuse and sexual offences, and the Youth Using Violence and Abuse (YUVA) service which supports families where children themselves were violent. Stressed that even when children are perpetrators, they are seen as children first. Flagged that nationally the children's secure estate placement provision was inadequate, it was unable to provide the rehabilitation and protection of those children in the Criminal Justice System.
 5. A Board member endorsed the recommendations and reinforced the point that the Duty was statutory partners' responsibility. The needs assessment looked at police data which was only a fraction of the relevant data that provides the whole picture, information sharing across the Partnership was therefore crucial. Noted that the Duty sought to address and provide oversight over the elements of serious violence that had been neglected in the past.
 6. The Chair asked whether the data collection was about seeing patterns around victims and perpetrators that would be valuable to the early intervention and prevention work by other partners and services. A Board member noted that when trying to assess the information needed, it was important to incorporate what all the other partners need.
 7. The Chair asked whether other partners had been liaised with stating what was needed to gain value from the data to help with the prevention and early intervention work. It had been a longstanding issue that data had been collected but not all of it was useful to other agencies; hoped that over time patterns would emerge and the data would be valuable to the other agencies. The Serious Violence Programme Lead (OPCC) stressed that data insights and intelligence was vital to get right, police data was gathered easily through the needs assessment, yet there were limitations in extraction across multiple cases.

8. The Serious Violence Programme Lead (OPCC) explained that there was a read across the needs assessment, looking at areas that increase the risk of becoming involved or a victim of violence. Data extraction and cross referencing across cohorts was challenging, part of the next phase was to look at that in more detail. There had been funding for a Public Health analyst to provide support and do that read across the Combating Drugs Partnership; and funding for a police analyst to investigate that data and how it could be shared. A few years ahead in the work were national Violence Reduction Units; Thames Valley Police could pull together that data and share it from across the partnership.
9. The Chair asked whether that other data was able to be collected from other agencies. A Board member noted that the Board could provide that advocacy to ensure that their organisations look for a reason to share that data rather than not to, data access had been a longstanding issue. The Chair suggested a discussion outside of the meeting around overcoming the barriers.
10. A Board member was excited for Public Health to host of one the analyst posts as data triangulation was vital to any needs assessment; it was a partnership and was iterative with data being layered.
11. A Board member noted that the only way to understand data in terms of people committing serious violence or becoming a victim of it was to understand their stories, that was being built into the Changing Futures cohort. Noted the large number of Domestic Homicide Reviews and safeguarding adults and child reviews, where prevention was vital and those two cohorts should be focused on. Regarding suicide surveillance and prevention, there was a responsibility to know those people's stories as many had experienced serious violence.

RESOLVED:

1. Considered the progress made against the Serious Violence Duty.
2. Endorsed the establishment of a Surrey Serious Violence Reduction Partnership.
3. Supported the proposed Serious Violence Reduction narrative and priority areas that will be at the core of the Surrey Serious Violence Reduction Strategy.

Actions/further information to be provided:

1. The Serious Violence Programme Lead (OPCC) will circulate a comprehensive PowerPoint Presentation summarising the data of crime numbers in Surrey.
2. Regular updates will be included in the Highlight Report on the work by the Surrey Serious Violence Reduction Partnership under Priority Three.
3. The Serious Violence Programme Lead (OPCC) will have a discussion with the Chair around overcoming the barriers around data collection.

40/23 HOUSING: AN OVERVIEW OF A HOUSING HOMES AND ACCOMMODATION STRATEGY FOR SURREY AND THE HOUSING JSNA CHAPTER [Item 7]

Witnesses:

Michael Coughlin - Executive Director - Prosperity, Partnership and Growth, SCC
 Poppy Middlemiss - Public Health Registrar, SCC

Key points raised in the discussion:

1. The Chair noted that the updated Housing Joint Strategic Needs Assessment (JSNA) chapter provided a good opportunity to revisit the strategy and endorse the recommendations given the significance of housing as a wider determinant of health

and its impact on the cost of living. She thanked the Cabinet Member for Adult Social Care (SCC) for her hard work.

2. The Executive Director - Prosperity, Partnership and Growth (SCC) noted that:
 - The One Surrey Growth Board received a similar item with an economic development and economy focus. There were two parts of the strategy: Call to Action and the Call to Government arose from the work undertaken with stakeholders over the last eighteen months; identified the affordability of housing as a significant barrier to recruitment.
 - Good quality, affordable and secure housing was a key determinant of positive mental and physical health.
 - Work began around the state of Surrey's housing market and a baseline assessment by the consultants had been produced collating national and local data; concluding that there was a housing crisis in Surrey. Several months after the work, a national housing crisis had been identified.
 - Acute to Surrey was high demand matched against insufficient supply for several years, resulting in high purchase, mortgage and rental costs.
 - Extensive stakeholder engagement tested the accuracy of the findings and gain a complete picture of the baseline assessment; not all the borough and district councils agreed with or signed up to the strategy.
 - It was acknowledged that the strategy must be system-wide and multi-agency, agencies were asked to respond to the Call to Action.
 - The conclusions drawn from the work was the need to prioritise partnership working and to better understand public opinion around housing. Issues identified: aging population, underoccupancy of housing, affordability, vulnerable groups suffering from poor or no housing, land availability and the need for housing developments to focus on essential and key worker housing, and the contribution to net zero and climate change targets.
 - The recommendations in the Call to Action and the Call to Government - submitted to the Housing Minister - focused on policy and funding changes that would help Surrey with its housing crisis.
 - Whilst SCC did not have a statutory housing duty it was part of the One Public Estate partnership and it was taking the lead with a report scheduled for February's Cabinet setting out multiple work programmes where SCC could have a direct influence on particularly vulnerable children's and adult social care accommodation and services.
3. The Public Health Registrar (SCC) noted that:
 - The updated JSNA chapter was expected to be published in early January and was developed in collaboration with many stakeholders including district and borough councils, and set out the picture of the housing situation in Surrey looking at how it was affecting people's health and was to inform commissioners and stakeholders going forward.
 - The current provision was mapped against the gaps in that service provision to identify housing needs for Surrey's residents. There was an in-depth look at the needs of vulnerable groups including: people with learning disabilities, people with autism and people with mental health needs, GRT communities, and prison leavers.
 - The themes of the draft recommendations were: affordability and availability, homelessness, condition, and meeting the needs of residents.
4. A Board member noted that the VCSE Alliance contributed well to the JSNA chapter, praising the thorough process and exciting work. Highlighted that in rural Surrey the median income to median house price multiplier was significantly higher than across Surrey as a whole. The report does not recognise the greater cost of living in rural Surrey, the unaffordability of accommodation and larger cost of living impacts for example rural households spend 50% more on transport and are

- impacted by social isolation. Would be completing a bid to the Department for Environment Food and Rural Affairs for funding to support rural housing enablement, enabling small-scale building to take place in rural communities.
5. The Chair asked whether the various stakeholders had agreed to be on the multi-agency Surrey Housing Forum; what the take-up was. The Executive Director - Prosperity, Partnership and Growth (SCC) noted that the membership -based on the steering group and other key representatives - and terms of reference would be included in the February Cabinet report.
 6. The Chair asked whether the training to identify and support the health and wellbeing of their clients through signposting of wider workforce in Surrey including those who work in and for housing was underway. The Public Health Registrar (SCC) explained that it was being taken forward as part of the Making Every Contact Count Train the Trainer programme. She had linked up with the Surrey enabling officers in the districts and boroughs. A Board member welcomed the training but highlighted that the staff turnover of housing workers and within the housing association sector was high.
 7. The Chair noted the shortage of housing particularly in Epsom, which had a long waiting list and the highest figure of people in temporary accommodation and that had many knock-on effects to the children and families; it was a huge physical and mental health inequality. She noted feedback from those aged over 55 years old about the wrong type of housing being built for that age range.
 8. A Board member sat on the board of the Red Kite Community Housing association and would share the detail of its innovative approach of creating a subsidiary organisation where rents could be aligned to people's affordability, that was not a registered social landlord. She asked how it would be ensured that there would be a connection between the housing work and health system, filtering across to the communities within place. The Executive Director - Prosperity, Partnership and Growth (SCC) noted that he and the Public Health Registrar (SCC) would follow up with the Board member on Red Kite and its subsidiary; and could provide the relevant contacts in housing locally. For example, the Chief Executive of Surrey Heath Borough Council sat on the steering group and would have contacts in the local housing team. He noted that the socialisation of the work across the health system was down to the relevant Board members to action at place level.
 9. A Board member asked about the governance route of that report in February. The Executive Director - Prosperity, Partnership and Growth (SCC) explained that it was scheduled for SCC's February Cabinet meeting, focusing on the work programmes within SCC that were a subset of the strategy; to be discussed at the Surrey Chief Executives' Group prior to that.
 10. A Board member noted the multiple place-based discussions underway as the district and borough councils had housing and planning powers and had established various forums; noted the need to ensure that the Surrey Housing Forum would not duplicate that.
 11. The Associate Member referring to homelessness highlighted the lengthy process before someone could be placed in temporary accommodation concerning the discharge of a legal duty. In some areas that might be a high standard of accommodation in other areas not. Whilst the accommodation might be suitable it was insecure long-term in the private rented sector and increasingly the housing authorities had to subsidise rents to keep families in their current homes. Noted the need to acknowledge that the map around temporary accommodation in Appendix 1 did not show potential hidden issues of the large numbers of families facing the above situation. Would link the report into Guildford Borough Council's homelessness strategy being written.

RESOLVED:

1. Endorsed and supported the Call to Action laid out in the Surrey Strategy for Housing, Accommodation and Homes and the Call to Government for policy changes, resources, and powers to enable partners in Surrey to tackle the housing crisis.
2. Supported the recommendations of the new Surrey Housing JSNA Chapter in order to reduce inequality driven by housing needs.
3. Ensured a continued focus on the housing situation, its implications for health and the actions needed to address it amongst all partners in Surrey including ensuring key Health and Wellbeing Board and related strategies should include measures to reduce homelessness and improve housing and social care related health outcomes.

Actions/further information to be provided:

1. The Executive Director - Prosperity, Partnership and Growth (SCC) noted that he and the Public Health Registrar (SCC) will follow up with the Board member (substitute: Tracey Faraday-Drake) on the Red Kite Community Housing association and its subsidiary; and can provide the relevant contacts in housing locally.

41/23 INTEGRATED CARE SYSTEMS (ICS) UPDATE [Item 8]

Witnesses:

Karen McDowell - Acting Chief Executive Officer, Surrey Heartlands ICS
 Jo Cogswell - Place Based Leader, Guildford and Waverley Health and Care Alliance
 Tara Marshall - Principal Project Manager - Transformation Design, SCC
 Tracey Faraday-Drake - Executive Director and SRO for Children and Young People, Learning Disabilities and Autism; and Place Convenor for Surrey Heath, Frimley ICB

Key points raised in the discussion:

1. The Acting Chief Executive Officer (Surrey Heartlands ICS) noted that:
 - There would be a symposium in February bringing partners together to discuss opportunities and challenges.
 - Over the last few months several place-based deep dives had been held and the ICB received an update around the VCSE Alliance's work.
 - Work was ongoing around the primary care recovery plan on access and the winter recovery plan on managing winter pressures.
 - Work was underway around dental, optometry and pharmacy, there had been an engagement session with Healthwatch Surrey on co-design.
 - There was a strong focus and work was ongoing on EDI.
 - Large pressures across the health system included: upcoming industrial action, winter pressures and implementation of the operating model to reduce 30% of the management costs across the system.
2. The Place Based Leader (Guildford and Waverley Health and Care Alliance) noted that work had been undertaken across Guildford and Waverley with the Public Health team (SCC) looking at engagement with communities and system-wide alignment to population health and care need. The ICP roadshows demonstrated that good capabilities and methodologies for better working with communities had been developed. That led to the ICP chair championing the creation of a Library of Experiences; organisations sharing good practice and experiences and methods of doing things that others might be able to replicate.
3. The Principal Project Manager - Transformation Design (SCC) noted that in determining what to produce for the Library of Experiences, various pieces of work

had been considered around capturing and sharing knowledge, people's varied communication and learning preferences and how information is accessed and consumed, best practice through case studies, and community engagement efforts in North Guildford. Three products covering varied audiences and requirements had been produced: an overarching summary, a short video with partners reflecting on the experiences of those involved and their stories, a detailed written explanation of the approach including successes and challenges. Each initiative was unique, so it was vital to select the right methodologies and build in evaluation.

4. The Chair referred to the work done with Healthwatch Surrey on the Pharmacy and Dental engagement event noting that it would be good to know that the opportunities for residents regarding that engagement could improve. Epsom had lost two pharmacies and dental appointments were hard to get. The Acting Chief Executive Officer (Surrey Heartlands ICS) would provide event feedback.
5. The Chair requested detail on the System Development Funding.
6. The Executive Director and SRO for Children and Young People, Learning Disabilities and Autism; and Place Convenor for Surrey Heath (Frimley ICB) noted that:
 - There were similar pressures and challenges as in Surrey Heartlands.
 - Their last ICB took place at Surrey Heath Place, and it was a good opportunity to showcase the partnership working underway.
 - Frimley ICS also looked to make savings of 30%, there were difficult decisions that the ICB was having to make and a focus on its operating model to make sure that it was focused on health inequalities and getting the right structure in place to be able to support places; encouraged colleagues to respond to Frimley ICS' Chief Executive's call for feedback.
 - The Chief Executive of Frimley Health NHS Foundation Trust was leaving and a recruitment process would be in place.

RESOLVED:

Noted the update provided on the recent activity within the Surrey Heartlands and Frimley Integrated Care Systems (ICS) regarding the Integrated Care Partnerships and Integrated Care Boards against the Health and Wellbeing Strategy.

Actions/further information to be provided:

1. The Acting Chief Executive Officer (Surrey Heartlands ICS) will provide feedback from the Pharmacy and Dental engagement event on improvements to opportunities for residents to engage.
2. The Acting Chief Executive Officer (Surrey Heartlands ICS) will provide the detail on the System Development Funding 'being used to support prevention of mental health admissions, with other initiatives assisting those with Learning Disabilities.'

42/23 DATE OF THE NEXT MEETING [Item 9]

The date of the next public meeting was noted as 20 March 2024. Prior to that there would be an informal Board meeting in February: Better Care Fund Strategy Workshop.

Meeting ended at: 4.02 pm

Chair