

MINUTES of the meeting of the **HEALTH AND WELLBEING BOARD** held at 1.00 pm on 6 November 2014 at Committee Room C, County Hall, Kingston upon Thames.

These minutes are subject to confirmation by the Committee at its meeting on Thursday, 11 December 2014.

Elected Members:

- * Mr Michael Gosling (Co-Chairman)
- * Dr Andy Brooks (Co-Chairman)
- * Councillor John Kingsbury
- * Dr Joe McGilligan
- * Dr David Eyre-Brook
- * Dr Claire Fuller
- * Dr Andy Whitfield
- * Dr Liz Lawn
- * Mrs Mary Angell
- * Councillor James Friend
- * Mr Mel Few
- * Peter Gordon
- * Chief Constable Lynne Owens
- * Helen Atkinson
- * Nick Wilson
- * John Jory
- * Dave Sargeant

In attendance

Steve Cosser, Cabinet Associate for Adult Social Care
Tom Kealey, Reigate and Banstead Borough Council
Fiona Harris, NHS England

69/14 APOLOGIES FOR ABSENCE [Item 1]

- Apologies had been received from Lynne Owens, Mel Few, John Jory, Nick Wilson, Pennie Ford and Dave Sargeant.
- Steve Cosser substituted for Mel Few.
- Tom Kealey substituted for John Jory.
- Fiona Harris substituted for Pennie Ford.

70/14 MINUTES OF PREVIOUS MEETING: 2 OCTOBER 2014 [Item 2]

- The Chairman gave the board updates on health checks, diabetes, getting ready for winter, flu and the healthy homes partnership. Going forward it was explained that any information and advice sent to the joint Chairman would be shared with the board through regular update lists.
- The Chairman introduced Cllr John Kingsbury, Leader of Woking borough council to the board.

Resolved:

That the minutes of the health and wellbeing board, held on 2 October 2014 be agreed as a correct record of the last meeting.

71/14 DECLARATIONS OF INTEREST [Item 3]

There were none.

72/14 QUESTIONS AND PETITIONS [Item 4]

There were none.

(a) MEMBERS' QUESTIONS [Item 4a]

There were none.

73/14 PUBLIC QUESTIONS [Item 4b]

There were none.

74/14 PETITIONS [Item 4c]

There were none.

75/14 FORWARD WORK PLAN [Item 5]

Key points raised during the discussion:

- Going into 2015 the Chairman stated that he would like to revert back to one formal meeting in public every quarter with regular private business meetings to support these.
- The board noted and agreed the items for the December agenda.
- In 2015 the board will also re look at the JSNA and expand sections as required.

76/14 SURREY'S JOINT EMOTIONAL WELLBEING AND MENTAL HEALTH COMMISSIONING STRATEGY FOR CHILDREN AND YOUNG PEOPLE 2014 - 2017 [Item 6]

Witnesses:

Karina Ajayi, (Commissioner, Surrey County Council)

Key points raised during the discussion:

1. The Commissioner introduced the update on the joint emotional wellbeing and mental health commissioning strategy for children and young people. The strategy highlighted a number of gaps which commissioners seek to address over the course of the strategy. A number of the gaps were linked to recommissioning work with CAMHS. Referring to the table from pages 17-19, the Commissioner gave examples of where gaps had been identified and the action that would be taken to address these. It was further explained that the main themes from the engagement would along with gaps identified in the strategy be used to determine an options paper that would be taken to the Governing bodies of all of the CCGs in Surrey.
2. It was queried whether the model for the joint emotional wellbeing and mental health commissioning strategy for children and young people would be the same for all six CCG's. There was some concern for extending the age range for children and young people's mental health support to 25. It was suggested that although there was a desire to make the model for the strategy the same across all six CCG's, it was recognised that in some cases extending the age range would not be suitable.
3. It was queried how the gaps listed in the strategy would be addressed and if an outcomes focused action plan would be put in place.
4. A member commented on the need for 'Young Carers' to be recognised and addressed in the Equality Impact Assessment document.
5. The Commissioner stated that once an options paper had been developed an action plan would also be put in place. The service recognised that the current level of funding was not enough and a proposal to increase this would be taken to the CCG governing bodies.

6. A workshop has been organised in December to look at service specifications and identify what outcomes the service wants to achieve going forward. As part of the strategy implementation, someone had been taken on to work with care leavers.
7. A member asked for examples of where there had been successful progress in addressing gaps in the strategy. The Commissioner stated that she would provide this information to the board.
8. It was stated the reason for raising the age range to 25 had been from evidence from a report which recommended extending the age range.
9. The Chairman stated on the need for services for children and young people's wellbeing and mental health services to be individual specific rather than age specific.
10. Work had been undertaken with the voluntary sector to understand how better to address the mental health needs of residents. The importance of transition from children to adult mental health services was recognised as a key approach going forward.
11. Members commented on the good work that had been done to address children and young people's mental health concerns.

Resolved:

The health and wellbeing board agreed and endorsed the following next steps of the strategy-

- a) That the main themes from the engagement will along with gaps identified in the strategy be used to determine an options paper for a future model of care
- b) That this paper will be taken to the Governing bodies of all of the CCGs in Surrey to help define the model of care to be procured subject to funding.
- c) That the procurement exercise will be completed by September 2015.
- d) That progress on this joint commissioning strategy will be reported back to the Surrey Health and Wellbeing Board as part of the wider Children and Young People's priority update in April 2015. This will specifically include the action plan for the joint emotional wellbeing and mental health commissioning strategy, including timescales where work cannot be completed/or will take longer to complete.

Actions/Next Steps:

- That the Commissioner send to the board examples of where there had been successful progress in addressing gaps in the strategy.

77/14 EMOTIONAL WELLBEING AND MENTAL HEALTH: EVERYBODY'S BUSINESS [Item]**Witnesses:**

Jane Bremner, Assistant Senior Manager, Commissioning, Adult Social Care, Surrey County Council

Janine Sanderson, Mental Health Senior Commissioning Manager, North East Hampshire and Farnham Clinical Commissioning Group

Key points raised during the discussion:

1. A presentation was introduced by the Mental Health Senior Commissioning Manager and the Assistant Senior Manager on the consultation process for the adult Emotional Wellbeing and Mental Health commissioning strategy (please find presentation attached). It was explained that the closing date for the consultation was 6 October 2014. The service would give board members the opportunity to fully view the strategy before it is fully published and will email this out to the board as soon as it was completed. The final strategy would be bought back to the board in December. The consultation highlighted key trends which would be included in the final strategy.
2. Transition stages between children and adult mental health was recognised as a key action that would be taken forward as part of the strategy.
3. Concerns were raised around whether carers and carer's organisations had been fully consulted as part of the consultation process. The Mental Health Senior Commissioning Manager explained that specific engagement sessions had been held with carers and feedback had been received. The Assistant Senior Manager explained that additional work had been done with carers to ensure they was dedicated dialogue in place.
4. It was recognised that during the consultation feedback, domestic abuse was acknowledged as a key issue for respondents. Dedicated domestic abuse awareness training would be given to mental health workers.
5. Members were pleased to see that green spaces had been linked and included as part of the mental health strategy.
6. It was recognised that work would need to be done with planning and housing teams on the district and borough level. As part of the

strategy, the Mental Health Senior Commissioning Manager would ensure that dialogue is undertaken between teams.

7. Good partnership work was being undertaken with various stakeholders including district and boroughs, police, CAB's and voluntary organisations. The work being undertaken as part of the crisis care concordat was an example of good partnership work.
8. It was stated that the use of Section 136's had fallen by 25% in Surrey for the last year.
9. The Chairman stated that the strategy should not be viewed as a concrete document but rather it should be updated and changed as required to reflect the current situation in Surrey.
10. If any board members had any queries regarding the strategy they were asked to email Dr Andy Whitfield before the next Health and Wellbeing board meeting in December.

Resolved:

The health and wellbeing board,

- a) Endorsed the approach to receiving and signing off the final joint commissioning strategy.

Actions/Next Steps:

- For the Adult Emotional Wellbeing and Mental Health commissioning strategy to be sent to the board for comment before the next meeting in December.
- For the mental health commissioners to work with borough and district council planning and housing teams when implementing the strategy.

78/14 PUBLIC ENGAGEMENT SESSION [Item 8]

Key points raised during the discussion:

- A member of the public stated that as part of the regulations that had been published with the Care Act, clear advice around cooperation between the health and wellbeing board and district and boroughs had been set. It was asked that the board ensures that this cooperation is fully undertaken.
- The Director of Public Health stated that a Care Act implementation board was in place. Various partners sat on the board including district and borough councils. A key aim of the board was to regularly meet and update one another on the development of the Care Act and how each organisation had implemented the act.

- Information from the Care Act implementation board was available and could be shared through the Strategic Director for Adult Social Care.

Meeting ended at: 2.15pm

Chairman

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