

MINUTES of the meeting of the **HEALTH AND WELLBEING BOARD** held at 1.00 pm on 7 March 2019 at Ashcombe Suite, County Hall, Kingston upon Thames, Surrey KT1 2DN.

These minutes are subject to confirmation by the Committee at its meeting on Thursday, 4 April 2019.

Elected Members:

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

Substitute Members:

Dr Peter Bibawy
 Robert Morgan
 Dr Jonathan Richards
 Dr Helen Rostill
 Liz Uliasz

1/19 APOLOGIES FOR ABSENCE [Item 1]

Apologies were received from Dr Andy Brooks, Ruth Colburn Jackson, Fiona Edwards, Joanna Killian, Russell Hills, Sue Littlemore and Simon White.

Robert Morgan acted as a deputy for Dr Andy Brooks, Dr Peter Bibawy acted as a deputy for Ruth Colburn Jackson, Dr Helen Rostill acted as a deputy for Fiona Edwards, Helen Atkinson acted as a deputy for Joanna Killian, Dr Jonathan Richards acted as a deputy for Russell Hills, and Liz Uliasz acted as a deputy for Simon White.

2/19 MINUTES OF THE PREVIOUS MEETING: 6 DECEMBER 2018 [Item 2]

The minutes were agreed as an accurate record of the meeting.

3/19 DECLARATIONS OF INTEREST [Item 3]

Dr Jonathan Richards declared pecuniary interests in Dorking Health Care and Brockwood Pharmacy.

4/19 QUESTIONS AND PETITIONS [Item 4]**a MEMBERS' QUESTIONS [Item 4a]**

The Board received one Members' question from Dr Andrew Povey and a formal response was tabled at the meeting (attached as Annex 1).

b PUBLIC QUESTIONS [Item 4b]

There were none.

c PETITIONS [Item 4c]

There were none.

5/19 ACTION REVIEW [Item 5]**Key points raised during the discussion:**

1. It was noted that there was one outstanding item on the Action Tracker but that actions were yet to be added from the previous meeting on 6 December 2018. These were included on an updated version (attached as Annex 2).

Actions/further information to be provided:

None.

Resolved:

1. The Board reviewed and noted the Action Tracker.

6/19 SURREY HEALTH AND WELLBEING BOARD TERMS OF REFERENCE [Item 6]**Witnesses:**

Tim Oliver, Chairman of the Health and Wellbeing Board
Amy Morgan, Policy and Programme Manager (Health and Social Care Integration)

Key points raised during the discussion:

1. The Cabinet Member for Children, Young People and Families noted that her role was not included in the Terms of Reference's membership list, and the Chairman informed the Cabinet Member that

there was to be some flexibility with regards to Cabinet Member representation on the Board.

2. A discussion was had about representation from district and borough councils after the Leader of Mole Valley District Council asked whether the Board thought the number of representatives included was adequate. The Chairman spoke about the two leaders and chief executives now included on the Board and expressed his belief in this being a reasonable representation.
3. Responding to a question from the Cabinet Member for Adults and Public Health, the Housing Advice Manager for Guildford Borough Council informed the Board that she was the new representative from the Surrey Chief Housing Officers Association.

Actions/further information to be provided:

None.

Resolved:

1. The Board approved the Terms of Reference.

7/19 DRAFT SURREY 10 YEAR HEALTH AND WELLBEING STRATEGY [Item 7]

Witnesses:

Tim Oliver, Chairman of the Health and Wellbeing Board

Key points raised during the discussion:

1. The Chairman briefed the Board on the background to the Strategy and highlighted its key strategic aims. He explained that the idea behind the Strategy was to tie in the NHS 10 Year Plan, the Surrey 2030 Vision and the Social Care Green Paper into a county-wide, multi-organisational plan of action, and that the priorities contained within it had been agreed by all of the partners who had taken part in its formulation.
2. The Chairman went on to talk about the engagement process, which was not a formal consultation but engaged Surrey residents in commenting on the three priorities and target groups set out in the Strategy. He also highlighted the fact that the Board's role was to make sure that the Strategy's aims were implemented in a way that allowed residents to witness a demonstrable improvement, and that the implementation process remained transparent and accountable throughout.
3. A discussion was had about the collaboration between organisations in the production of the document, with Board Members expressing their satisfaction with the levels undertaken.
4. The Chief Executive of Healthwatch Surrey asked whether the Board could assure that there had been enough engagement with the public and whether the rest of the Members were clear on the metrics to be used and the timeframe for their development. In response, the Chairman said that the Strategy was not a completed piece of work but instead would change as it was implemented. Regular reviewing

and public engagement would make sure the Strategy continued the meet residents' needs.

5. The Director of Public Health informed the Board about a process of metric development that would be undertaken throughout the summer and autumn of 2019 as the Strategy moved into its next stage. Members also heard about the development of a performance dashboard, and that work would be done with stakeholders to provide an overview of performance.
6. The Cabinet Member for Children, Young People and Families asked about the aspirations behind the targets and noted that, in some instances, those included in the Strategy were lower than what was being achieved at that moment in time. The Cabinet Member was informed by the Senior Responsible Officer for Surrey Heartlands that the targets related to obesity and depression levels were typographical errors and would be corrected.
7. Responding to a question about the engagement undertaken with district and borough councils and the extent to which this would continue throughout the Strategy's implementation period, the Chairman told the Board that he saw such engagement as a key area of focus. He went on to inform Members that conversations would be had with district and borough leaders about how best to discuss issues relating to the Strategy. This point was echoed by the Head of Housing and Community and the Director of Integrated Care Partnerships.
8. The Police and Crime Commissioner welcomed the Strategy but expressed his disappointment at the lack of mentions to drugs included in the report. In response, the Director of Public Health reiterated how seriously the Strategy took the dangers associated with drug taking and that this had been factored into the draft strategy.
9. The Chairman informed the Board that the next stage of Strategy development would be to review the feedback given by Members and suggest changes where necessary. The Board would be asked to agree these changes at the next meeting on 4 April 2019.

Actions/further information to be provided:

None.

Resolved:

1. The Board noted the updates provided on the Strategy and used the opportunity to formally feed into the draft strategy engagement period.

8/19 A THRIVING COMMUNITY OF CHILDREN AND YOUNG PEOPLE IN SURREY: A STRATEGY FOR THEIR EMOTIONAL WELLBEING AND MENTAL HEALTH [Item 8]

Witnesses:

Julia Cramp, Children's Services Consultant (Children, Families and Learning)

Key points raised during the discussion:

1. The Executive Director for Children, Families and Learning introduced the Strategy and explained the background to its development. The Children's Services Consultant discussed the Strategy's development

process and the way in which it offered a clear vision that was spread across all of the relevant agencies. She also requested the opportunity to present at a future Board meeting in order to give an update on the work that had been done during the transformation period outlined in the Strategy. Responding to a question about the timeframe of the Strategy, the Children's Services Consultant then informed the Board that it covered the period 2019-2022.

2. The Cabinet Member for Children, Young People and Families welcomed the Strategy and stated that the Surrey Youth Cabinet voted in 2016 that mental health was one of the biggest issues facing young people. She also discussed the increase in central government funding for mental health and asked how the Council may be able to request a share of that money. In response, the Children's Services Consultant spoke about the work being undertaken with CCGs to make sure that funding was used to help implement the Strategy. The Executive Director for Children, Families and Learning added that social media has an impact on many of the issues outlined in the Strategy and told the Board that the department was aiming to invest money in early intervention in schools.
3. The Police and Crime Commissioner welcomed the report and spoke about the issue of children who go missing due to emotional and mental health problems. He discussed the improvement in coordination amongst partners in recent years but told the Board that more work needed to be done before the problem could be reduced to a manageable level.
4. The Chief Executive of Healthwatch Surrey discussed the Strategy's governance model and asked what the Board would see and at what point. She also questioned what the key milestones of the performance indicators were and who had ownership of performance management. The Board then heard from the Children's Services Consultant that discussions were underway regarding the governance of the model and what needed to be done to make sure the right partners were included throughout the transformation process.
5. Referring to the third recommendation outlined in the report, the Chairman spoke about there being an expectation that the Board would help drive the Strategy forward and continue to offer its recommendations and advice as the transformation process progressed.

Actions/further information to be provided:

1. For the Board to inform Children's Services of what they wished to see in the Strategy and how success could be best measured.

Resolved:

The Board:

1. Agreed to sign off the Strategy.
2. Approved the request to present a new model for service delivery detailing the future vision for Children and Young People's Emotional Wellbeing and Mental Health Services at a future Health and Wellbeing Board meeting.
3. Agreed to take a role as systems leaders to ensure join up across the system and facilitate partnership working for all priority partners.

9/19 SURREY SUICIDE PREVENTION STRATEGY [Item 9]**Witnesses:**

Maya Twardzicki, Public Health Lead
Nanu Chumber-Stanley, Public Health Development Worker

Key points raised during the discussion:

1. The Director of Public Health introduced the Strategy and informed the Board that it was the department's response to the national work that had recently been undertaken.
2. The Board heard from the Public Health Lead, who spoke about the consultation period that had taken place during the summer of 2018. She explained how an extensive consultation process had resulted in 200 responses being received, and these then helped formulate the draft version of the Strategy that was further amended after being taken to the Surrey-based CCGs.
3. The Cabinet Member for Adults and Public Health welcomed the Strategy but questioned whether it could be signed off by the Board before a lead organisation had been agreed, as outlined in Priority 4 ('Reduce attempted suicide and self harm – especially amongst children and young people'). In response, the Public Health Lead informed the Board that this was to be a representative from the Children and Young People services. She went on to say that a first meeting was had with the Suicide Prevention Partnership early in March 2019 and that the Commissioning Manager had named someone with children and mental health in their brief who would take the lead going forward. At the Partnership meetings, there would also be representation from the Children and Adolescent Mental Health Services provider organisation, Surrey and Borders Partnership NHS Foundation Trust.
4. A discussion was had about recognising the signs of mental illness at the earliest possible stage. In response to a question about the possibility of training being provided so that those signs could be better spotted, the Public Health Development Worker told Board Members about suicide prevention training sessions that were delivered not only to families of those people that struggled with mental illness but also people who work in the wider community, from sectors such as retail, banking and security services.

Actions/further information to be provided:

None.

Resolved:

The Board:

1. Approved the Strategy.
2. Approved the request to commit partners to the joint delivery of the Strategy.
3. Agreed to provide strategic oversight of the implementation of the Strategy and hold partner organisations to account for their

contribution to the delivery of the actions and recommendations contained within.

10/19 PHARMACEUTICAL NEEDS ASSESSMENT: SUPPLEMENTARY STATEMENT AND UPDATE [Item 10]

Witnesses:

Julie George, Public Health Consultant

Key points raised during the discussion:

1. The Public Health Consultant outlined the background to the Pharmaceutical Needs Assessment (PNA) supplementary statement and explained to the Board that it was required that a new PNA be produced outside of the usual three-yearly cycle if circumstances changed sufficiently. As this was not the case, only a supplementary statement was needed and the Board were asked to note their approval of it.
2. A discussion was had about population growth and the supply of pharmacies, with this being one of the changes that can result in a new PNA needing to be produced. The Clinical Chair of North West Surrey CCG asked whether any predictive analysis was mapped with regards to housing growth in order to try and gauge what increases in population may occur over the coming years, and the Public Health Consultant informed the Board that the PNA Steering Group had looked at new housing developments and whether these required pharmacies to be opened to ensure access. The Steering Group primarily concentrated on large-scale developments due to the impacts they have on access, but the officer acknowledged the tension between the PNA that looked at the present requirements and what may happen in the future.
3. The Leader of Guildford Borough Council raised the issue of long delays relating to the one pharmacy located in Ash and was told that it was NHS England's responsibility and complaints needed to be escalated to them. He was also informed that the Surrey public health team would be happy to advise on the process.
4. Responding to a question about pharmacy closures, the Public Health Consultant informed the Board that there had not been as many as had been feared due to the changes to the pharmacy funding arrangements, and the minimal amount of changes meant that no gaps in access had been identified.

Actions/further information to be provided:

None.

Resolved:

1. The Board approved the PNA supplementary statement.

11/19 DATE OF NEXT MEETING [Item 11]

The Board noted that its next public meeting would be held on 4 April 2019.

Meeting ended at: 2:30 pm

Chairman

HEALTH AND WELLBEING BOARD – 7 March 2019**PROCEDURAL MATTERS****Members' Questions****Question (1) Dr Andrew Povey (Cranleigh & Ewhurst):**

I believe that the current SOS for Health sees keeping people out of hospital as a key priority. Although this is implicit on some of the current priorities for Surrey, wouldn't it be better to make this a key strategic aim and policy for Surrey?

Reply:

Firstly, the draft Health and Wellbeing Strategy focused on tackling Surrey's greatest challenges and, where appropriate, particular groups of individuals that need additional support to live healthier lives, using evidence from the Joint Strategy Needs Assessment, existing research on residents' needs and views, and workshops to engage further with Surrey leaders and providers.

The result is a strategy that focuses on the importance of prevention and addressing root causes of poor health and wellbeing – including things like poor housing and the environment. The strategy is not about simply treating the symptoms of poor health or challenges in the system (such as hospital discharge or avoidable A&E admissions). Obviously, focusing on the root causes of ill health will naturally keep people healthy and out of the hospital system. We want the people of Surrey to live longer, healthier lives. We believe that people should be supported to look after themselves and those they care for, and have access to services when they need them.

Secondly, the Integrated Care Systems and Sustainable Transformation Partnerships across Surrey are key partnerships bringing together the NHS, the Council and other partners – all of the ICSs and STPs have set clear priorities around strengthening out of hospital care. If we look in more detail at the local integrated care partnerships – where much of the changes and integration of NHS, Council and other services happens – we will see a number of out of hospital models being set up across Surrey with these pathways being strengthened through use of the Better Care Fund.

Better Care Fund funding enables schemes to support residents of Surrey stay well at home, ranging from Surrey's Community Equipment Store to Home from Hospital schemes. Local health and social care integration projects continue with a range of partners across the county, developing services that allow residents to access the right care, at the right time, in the right place. Discharge to Assess schemes support medically fit older adults to leave hospital and continue their care and assessment at home or in the community setting. For example, the Integrated Discharge Bureau in North West Surrey delivers same-day discharge for 90% of medically fit patients. Co-located multi-disciplinary teams in community hubs across the county provide holistic care to support frail older adults to remain independent in the community and prevent hospital admissions.

Finally, the strategy is not meant to include everything, and therefore doesn't cover sector specific, organisational or local plans, although these will all need to be aligned to this overarching work. However, the strategy sets out a single set of agreed priorities for the county, focusing in particular on where we can affect change as a partnerships.

Tim Oliver, Chairman – Health and Wellbeing Board

This page is intentionally left blank

SURREY HEALTH AND WELLBEING BOARD
ACTIONS AND RECOMMENDATIONS TRACKER – UPDATED March 2019

The recommendations tracker allows Board Members to monitor responses, actions and outcomes against their recommendations or requests for further actions. The tracker is updated following each Board. Once an action has been completed, it will be shaded out to indicate that it will be removed from the tracker at the next meeting. The next progress check will highlight to members where actions have not been dealt with.

KEY			
	No Progress Reported	Action In Progress	Action Completed

Date of meeting	Item	Recommendations/ Actions	To	Response	Progress Check On
7 December 2017 A34/17	Surrey Child And Adolescent Mental Health Update - Transformation Plan	[The Board] asked Clinical Commissioning Groups to ensure that the refreshed Plan was published on their websites.	Surrey CCGs	Plan was published in October 2018.	Completed
13 September 2018 A10/18	Priority Status Update: Improving Children's Health and Wellbeing	The Board to receive tableau data on targets and outcomes relating to performance in Children's Service.	Children's Service	Carried forward to 2019.	7 March 2019
6 December 2018 A12/18	Surrey Child and Adolescent Mental Health Update – Transformation Plan	The Head of Commissioning – Surrey Heartlands Clinical Commissioning Groups are to share the revised governance structure.	Surrey Heartlands Clinical Commissioning Groups	Outstanding.	7 March 2019

This page is intentionally left blank