

March 2025

Adults and Health Select Committee Recommendations and Actions Tracker

The actions and recommendations tracker allows Committee Members to monitor responses, actions and outcomes against their recommendations or requests for further actions. The tracker is updated following each meeting. Once an action has been completed, it will be shaded green to indicate that it will be removed from the tracker at the next meeting.

KEY			
	No progress reported	Recommendation/Action in progress	Recommendation/Action completed

RECOMMENDATIONS

Date of Meeting	Item	Recommendation	Responsible Officer or Member	Deadline	Progress Check	Update/Response
5 October 2022	Mental Health Improvement Plan [Item 7]	AH 29/22: The Joint Executive Director for Adult Social Care and Integrated Commissioning and SaBP, to develop a robust process to deal with complaints as well as Issues of concern regarding mental health services and provide a written update to the AHSC on progress toward this.	Liz Bruce, Joint Executive Director for ASC & Integrated Commissioning Surrey and Borders Partnership (SaBP)		15 January 2024 28 February 2024	Strategic System Conveners were contacted for an update. It has been passed onto the Children’s Mental Health Commission Lead for further update. Graham Wareham, Chief Executive SABP was contacted to provide an update. Since this recommendation was made, the Committee have since received a paper in 2024 on ‘The Mental Health

Item 8

					6 February 2025	Improvement Plan – with a Focus on Working Age Adults’ as well as further communication on the Transformation programme from SaBP.
7 March 2024	Healthwatch Surrey Presentation	AHSC 1/24: To ensure that language used for automatic responses reflects a friendlier approach.		13 May 2024	7 February 2025	Distributed 15 March 2024 It was agreed with the Chairman that this recommendation seems relevant to future items concerning these services and use of language. The Scrutiny Officer intends to bring this out in a future KLOE at upcoming the AHSC in March.
10 October 2024	Cancer and Elective Care Backlogs [Item 5]	AHSC 23/24: Surrey Heartlands NHS ICB to clearly communicate learnings from the Cancer Inequalities Programme especially in relation to the effectiveness of actions taken in terms of improving outcomes and experiences for patients.	Surrey Heartlands	25 November 2024		Distributed to officers for response on 15 October 2024. Response received on 13 January 2025: As this programme of work develops, in partnership with Surrey County Council and the Surrey and Sussex Cancer alliance there will be learnings and outcomes that we can share. At this stage the programme/s are being developed and baselines being assessed. We would suggest that we bring an update, perhaps with some specific examples when we present to the committee again next year.

	Cancer and Elective Care Backlogs [Item 5]	AHSC 24/24: Keep the Adults and Health Select Committee updated on the Surrey Heartlands NHS ICB Cancer Inequalities Programme and its impact on both the Health and Wellbeing Priority Areas and groups experiencing inequalities.	Surrey Heartlands	25 November 2024		<p>Distributed to officers for response on 15 October 2024.</p> <p>Response received on 13 January 2025:</p> <p>We are happy to share progress and updates on this work in coming months, some of these programmes will take some time to assess the impact. As above it feels appropriate to bring these updates to the committee next year.</p>
	Cancer and Elective Care Backlogs [Item 5]	AHSC 25/24: To improve accessibility, and to ensure that communication is effective and does not disenfranchise those who aren't able to use technology in one way or another.	Surrey Heartlands	25 November 2024		<p>Distributed to officers for response on 15 October 2024.</p> <p>Response received on 13 January 2025:</p> <p>As an ICB we will continue to work with our secondary care providers and specifically their IT and comms leads to develop and improve their communication channels, in particular the patient portals. We are encouraging trusts to engage with their own patients groups and those of partner organisations to take on board concerns and suggestions.</p> <p>As an ICB our emerging strategy is one of co-design, including citizen engagement when we do implement anything. We include considerations</p>

						regarding possibility of digital exclusion when documenting requirements for solutions.
4 December 2024	Scrutiny of 2025/26 Draft Budget and Medium-Term Financial Strategy to 2029/30 [Item 6]	AHSC 32/24: It is recommended that strong and effective Risk Management is treated as a key requirement to ensure that Surrey's Adult Social Care Services remain sustainable while delivering the services needed by Surrey's residents.		3 February 2025		<p>Cabinet Response: Strong and effective risk management is essential to ensure the sustainability of Surrey's Adult Social Care Services while meeting residents' needs. Risk management in our services involves both mitigating potential negative outcomes and identifying opportunities for improvement. Our approach includes regular risk assessments, stakeholder engagement, scenario planning, and maintaining a risk register to track and manage identified risks. This proactive approach helps us address challenges such as financial pressures, staffing issues, and demographic shifts.</p> <p>Data plays a critical role in both risk management and validating the impact of our services. We use data-driven insights to track service usage patterns, identify emerging risks, and monitor key performance indicators aligned with resident outcomes. We are also using predictive analytics to help us model future trends and assess how external factors may impact service delivery. To ensure that changes and initiatives are effective, we test their impact on residents. This includes pilot</p>

						<p>programs, co-design with residents and user groups as well as commissioning independent evaluations such as using the Local Government Association to measure the impact on service users, identifying unintended consequences and then refining approaches. This helps us refine services and ensure that the voices of residents and their families are central to decision making. By evaluating the effectiveness of changes, we can quickly adjust strategies and maintain responsiveness to evolving needs.</p>
	<p>Scrutiny of 2025/26 Draft Budget and Medium-Term Financial Strategy to 2029/30 [Item 6]</p>	<p>AHSC 33/24: It is recommended that Needs Assessment is appropriately resourced and robust as it is central to the reduction of costs and at the same time it is essential the weaknesses identified by the CQC are rectified.</p>		<p>3 February 2025</p>		<p>Cabinet Response: The improvements required and identified by the CQC regarding Needs Assessment will be delivered through the transformation and improvement programme in AWHP. This will include resourcing and robust scrutiny of the plans to ensure they remain on track and deliver the required outcomes.</p>
	<p>Scrutiny of 2025/26 Draft Budget and Medium-Term Financial Strategy to 2029/30 [Item 6]</p>	<p>AHSC 34/24: A plan will be required within the next six months for review, to support the provision of Technology Enabled Care in areas where the provision of appropriate telecommunications services is weak or lacking.</p>		<p>3 February 2025</p>		<p>Cabinet Response: The plan for how the digital switch over is being managed, delivery progress and how issues around connectivity gaps are being addressed within this work will be presented to the committee within the next six months.</p>

	Scrutiny of 2025/26 Draft Budget and Medium-Term Financial Strategy to 2029/30 [Item 6]	AHSC 35/24: It is recommended that there is investment in the tracking of spending.		3 February 2025		Cabinet Response: We welcome this recommendation but can offer assurances that robust budget monitoring is already in place.
	Review of Progress Made to Implement the Joint Health and Social Care Dementia Strategy for Surrey, 2022-2027 [Item 7]	AHSC 36/24: The report identifies that Priority Populations such as BAME may have different levels of the risk factors for Dementia. Gaining a better understanding on the prevalence of the risk factors and Dementia in the priority populations and the 21 Priority Areas is recommended and consideration of population appropriate health actions to reduce health inequalities.		3 February 2025		Response: This will be covered in the upcoming JSNA chapter on older people.
	Review of Progress Made to Implement the Joint Health and Social Care Dementia Strategy for Surrey, 2022-2027 [Item 7]	AHSC 37/24: There is a need to better understand why levels of diagnosis within Surrey are higher and it is recommended that more research is undertaken to establish why the numbers are higher.		3 February 2025		Response: Research indicates that ethnicity and socioeconomic status play a role in poorer health seeking behaviours related to dementia, but also health inequities and the health factors that contribute to dementia. Given Surrey overall is an affluent County, this may contribute to better overall health and better health seeking behaviours as it relates to cognitive impairment and dementia. In addition, the SABP Community Mental Health Teams for Older People

						<p>(CMHTOP) work closely with system partners to enhance working relationships and promote their memory assessment services (MAS), to ensure access to MAS when concerns about cognition are noticed. As such, SABP MAS may see people with emerging cognitive impairments earlier often via referrals from their GP, which may result in a diagnosis of mild cognitive impairment. These individuals are often re-referred to SABP MAS as their cognitive impairment progresses for additional memory assessment, ensuring those people with identified cognitive impairments receive appropriate assessments as required.</p> <p><u>How dementia diagnosis rate (DDR) is measured</u></p> <ul style="list-style-type: none">• The source of the data is NHS England.• The figure is calculated by looking at the number of people over 65 with an unresolved diagnosis of dementia according to GP clinical systems and comparing this to the estimated number of people with dementia in Surrey (to create a rate).• The estimated number of people in Surrey uses a robust
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						<p>methodology from the Medical Research Council (MRC) Cognitive Function and Ageing Study II (CFAS II) (national study). It takes into account age and sex when calculating this estimated number which means the fact that Surrey has more of an aging population (compared to nationally) is taken into account. The method involves applying the theoretical prevalence rates of dementia to the Surrey population and simulating this 100,000 times.</p> <ul style="list-style-type: none">• Due to the robust methodology, it is likely that the reason for a higher diagnostic rate is that we have good diagnostic rates <p>However, it is possible that we could have higher rates because:</p> <ul style="list-style-type: none">○ We have more dementia in Surrey so more diagnosis are taking place○ The methodology underestimated the prevalence of dementia in Surrey which distorts the diagnostic rate to be higher than expected.• The view of Public Health consultant is it is more helpful to look at the trend, rather than benchmarking one value against the national trend.
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					<ul style="list-style-type: none"> Surrey Heartlands and Frimley diagnosis rates are increasing at a quicker rate than national. This is a strong indicator of a positive outcome and that our diagnostics are working. This trend is likely only you be explained by good diagnostics, not a higher prevalence rate in Surrey or a flawed methodology. <p>In summary, we have a trend of increasing diagnostic rates being quicker than national trends. This trend is unlikely to be explained by having more dementia in Surrey.</p>
	<p>Review of Progress Made to Implement the Joint Health and Social Care Dementia Strategy for Surrey, 2022-2027 [Item 7]</p>	<p>AHSC 38/24: The effectiveness of communications around reducing the risk factors for Dementia is critical. Measurement of the effectiveness of communications and their ability to change behaviours is recommended.</p>		<p>3 February 2025</p>	<p>Response: This will require a bespoke and a carefully designed academic research study with allocated resources to be able to draw associations between effectiveness of the comms approaches and behaviour change in reducing risk factors for dementia. Although existing published studies can be used to develop evidence-based communication approaches, local evaluation will require a well-resourced research project. This can be facilitated through collaboration with the University of Surrey and securing research funding from external sources.</p>

						In the shorter-term, communications activity is to be measured using a number of available metrics including uptake of free health checks, which can help spot early signs of conditions such as heart disease.
	Review of Progress Made to Implement the Joint Health and Social Care Dementia Strategy for Surrey, 2022-2027 [Item 7]	AHSC 39/24: Enhanced training and support for Carers is recommended.		3 February 2025		<p>Response: Carers can find out about support available from a wide range of sources including Action for Carers Surrey and connect to support Surrey website which has all the support groups available locally.</p> <p>We have a wide range of support available for unpaid carers. We have the universal offer for all unpaid carers including: local carers hubs, benefits advice, carers ID card, GP registration which can then offer a £300 to support carer health and wellbeing, access to carer wellbeing breaks. Additionally, we have our new digital support offer, funded through our successful Accelerating reform fund bid. Mobilise, a carer-led digital community, are delivering the initiative. It provides support via an online hub. New digital support services include:</p> <ul style="list-style-type: none"> • An online peer community of thousands of fellow carers from across the UK – with the chance to share advice and

						<p>experiences through a community forum and during regular events, such as the ‘virtual cuppa’</p> <ul style="list-style-type: none">• Easy-to-use, self-service tools outlining the different forms of support which carers may be entitled to – including Carer’s Allowance – and guidance on how to navigate eligibility criteria and access various benefits, for example• Tailor-made support guides on everything from how to balance caring with full-time work, to managing personal health and wellbeing while looking after someone else• Information on carers’ rights and relevant social care law, in line with the latest government guidance <p>An AI-powered ‘assistant’ is also available to help carers quickly and easily find the specific information, resources or support that they need.</p> <p>Training for carers of people with dementia is in development. We are linking in with our comms colleagues to promote the training through the support groups we have mapped, and through our staff teams and voluntary sector providers.</p>
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	Review of Progress Made to Implement the Joint Health and Social Care Dementia Strategy for Surrey, 2022-2027 [Item 7]	AHSC 40/24: It is recommended that information is produced to support community leaders and especially councillors in supporting carers with what information is available for them, and the research needs to look at priority areas as part of that.		3 February 2025		<p>Response: We recommend Councillors use Connect to Support Surrey and Action for Carers Surrey websites which outline support available.</p> <p>We also have information on Healthy Surrey with regards to reducing risk factors for dementia and a comms campaign planned for the new year.</p> <p>There's a wide range of information and advice for carers on the Surrey County Council website and there are also specific information leaflets available for carers available, such as the hospital discharge guide.</p>
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ACTIONS

Date of Meeting	Item	Action	Responsible Officer or Member	Deadline	Progress Check	Action Update/Response
10 October 2024	Right Care Right Person [Item 6]	Deputy Director of Mental Health Commissioning (NHS Surrey Heartlands ICB) to update the committee on the learnings gathered from the pilot mental health response vehicles (non-blue light responder services) being conducted.		12 November 2024		<p>Response received on 12 November 2024:</p> <p>Simon Brauner-Cave, Deputy Director of Mental Health Commissioning for Surrey Heartlands Integrated Care System advises that the request was for him to update on learnings from the</p>

						<p>pilot when it has been up and running and learnings have been identified, but this will not be available for at least 12 months.</p> <p>Democratic Services will request an update on the action in October 2025.</p>
	Mental Health Improvement Plan-Focus on Working Age Adults [Item 7]	The Prevention & Communities Lead to provide the committee with more detail on how the innovation programmes, 'Work Wise' and 'Work Well' were working and the support these programmes offered.		12 November 2024		Please see combined response to point 5 below.
	Mental Health Improvement Plan-Focus on Working Age Adults [Item 7]	The Prevention & Communities Lead to share further information/data on the work being conducted to understand Surrey's local picture regarding the cost to Surrey's businesses and Surrey's economy from staff unable to maintain a role due to poor mental health.		12 November 2024		<p>Response received on 12 November 2024:</p> <p>Rebecca Brooker, Communities and Prevention Lead, Surrey County Council as advised that in response to these queries they are developing a briefing opportunity to allow members to learn more about these programmes, how they complement each other and support Surrey's residents, and how they respond to the research findings, some of which is complete and some of which is still in progress. Further details on this will be shared in due course.</p> <p>In the meantime, members may wish to review:</p>

						<ul style="list-style-type: none"> - Overview of the WorkWise programme: Work Wise: Supporting people to get work - Surrey County Council - Overview of the WorkWell programme: WorkWell Overview - external - Findings from the research into the experiences of residents furthest from the labour market: PDF NOLB skills and employment - Surrey CC Report draft Final 190523.pdf - Findings from the research into employers experiences of recruiting and retaining in employment those with additional barriers: PDF Surrey Employers Standalone deck 2008-compressed.pdf <p>Findings from the research into the experiences of Surrey residents experiencing in-work poverty: PDF In work poverty report FINAL copy with no images.pdf</p>
	<p>Mental Health Improvement Plan- Focus on Working Age Adults [Item 7]</p>	<p>Associate Director for Community Transformation (SaBP) to share the commissioned independent evaluation report on the impact of the specialist integrated mental health services in primary care.</p>				<p>Update on 12 November 2024: Georgina Foulds, Associate Director for Community Transformation (SaBP) due to respond.</p> <p>22 November 2024:</p>

						Georgina Foulds, Associate Director for Community Transformation (SaBP) provided documents to democratic services.
4 December 2024	Scrutiny of 2025/26 Draft Budget and Medium-Term Financial Strategy to 2029/30 [Item 6]	More information to be provided for Cllr John Furey on how the cost of care packages could be reduced with an increasing population.				<p>Response: There are several actions the Directorate are undertaking to manage demand effectively which have been informed by the Newton Diagnostic opportunities. These actions will help to deliver care at a reduced cost and therefore enable us to meet the need of an increasing population. These include:</p> <ul style="list-style-type: none"> • Increasing the utilisation and effectiveness of the Reablement function to support more people to live independently and therefore reducing the cost of funded care. • Ensuring that we have a high-quality sustainable care market with a range of competitively priced support offers, where providers are active in supporting independence. • Ensuring care packages are right sized, reviews are undertaken in a timely manner, people are supported in the most appropriate settings for their level of care and support needs.

						<ul style="list-style-type: none"> Focusing on supporting unpaid carers, connecting people to non-statutory support in their local towns and villages, and working with partner organisations to ensure that people have the right level of access to partner services. <p>Taken together these actions will allow us to continue to meet our statutory responsibilities.</p>
	Scrutiny of 2025/26 Draft Budget and Medium-Term Financial Strategy to 2029/30 [Item 6]	AHSC 1/25: AWP to share the link to the Newton Europe report with reference to the work about working age adults and the national picture – and how SCC are implementing some of the best practice that was drawn out of this.				<p>Response: As requested, here is the link to the LGA 2024 The Forgotten Story of Social Care 231024.pdf, and please see the reply above for how SCC are implementing some of the best practice that was drawn out of this.</p>
	Scrutiny of 2025/26 Draft Budget and Medium-Term Financial Strategy to 2029/30 [Item 6]	AHSC 2/25: A request was made for the committee to have sight of the paper in relation to telecare offers amongst District and Boroughs before it goes to Cabinet in January 2025, for review and comments.				<p>Response: A date has been agreed with Democratic Services for a virtual meeting on Friday 17 January from 2pm to 3pm for an informal review of both the TEC & Homes and the Everyday Living. Cllr Mooney has confirmed she can attend this meeting, and the invite will be extended to Claire Edgar, Jon Lillistone, Anna Waterman and Dan Stoneman. Copies of the final papers will be shared with Select Committee on or before the submission deadline 15 January.</p>

	<p>Review of Progress Made to Implement the Joint Health and Social Care Dementia Strategy for Surrey, 2022-2027 [Item 7]</p>	<p>AHSC 3/25: Democratic Services to check that all links in the report work and send to the committee.</p>				<p>Response: Democratic Services re-sent links to Members.</p>
	<p>Review of Progress Made to Implement the Joint Health and Social Care Dementia Strategy for Surrey, 2022-2027 [Item 7]</p>	<p>AHSC 4/25: In relation to the 'stop smoking' support, there was a request to share figures on the population of smokers in Surrey and possibly information on whether they are light smokers/heavy smokers, and to share further information on the education around smoking and why this was not being done at an earlier age.</p>				<p>Response: The latest available data on prevalence of smoking are included in the JSNA Smoking, Vaping and Tobacco Control Surrey-i. The data is also available for key neighbourhood areas and priority population groups. Surrey Tobacco Control Strategy 2023-2026's ambition is to address the local needs identified in the JNSA Smoking, Vaping and Tobacco Control chapter, and reduce health inequalities through targeting those populations where smoking rates remain high including:</p> <ul style="list-style-type: none"> • Routine and manual workers • Those with mental health conditions • Pregnant women • Those accessing substance misuse services • Young people • Those living in areas of deprivation (example, Index of Multiple Deprivation (IMD) deciles 1-4)

					<ul style="list-style-type: none">• Those from ethnic minorities*. <p>Using the new government funding, Surrey County Council Public health in the process of commissioning a new Inclusion Health Stop Smoking Service. This smoking cessation service will focus on a bespoke delivery model to Inclusion Health Groups and increase the number of quit dates set and 4 week quits amongst these populations, where smoking rates are greatest and poorer outcomes are expected. Inclusion health groups are groups of people who are socially excluded and have a higher risk of poor health outcomes. People who are experiencing homelessness, drug and alcohol dependence, are vulnerable migrants, are part of the Gypsy, Roma, and Traveller communities, are sex workers, are in contact with the justice system, or are victims of modern slavery.</p> <p>Surrey public health have also completed a behavioural insight research project to better understand the barriers and enablers in accessing the local stop smoking services including the latest communication materials used for the "its Well Worth it" campaign. The insights from this research will be used to tailor future</p>
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						<p>local communication and education sessions.</p> <p>Evidence in Surrey tells us that children and young people who face greatest inequalities are more likely to smoke or vape. The following actions are being taken as part of the local strategy to promote evidence-based education:</p> <ul style="list-style-type: none">• The Surrey Tobacco and Alcohol Control Alliance will share the South East position statement, continue to encourage the use of e-cigarettes as method to quit smoking and engage with partners to provide clarity across Surrey. It should be noted that the Local Stop Smoking Service give people choice as to which quit aid is used and support people to gradually reduce nicotine strength to ensure clients do not become dependent on vapes.• Work collaboratively with regional colleagues to create effective communications and messaging for children and young people around vaping, using the latest evidence.• Develop personal, social, health and economic (PSHE) drug
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						<p>education curriculum materials to be taught in schools (including information on vaping and smoking).</p> <p>The Tobacco and Vapes Bill was introduced to parliament on 5th November. The Bill will:</p> <ul style="list-style-type: none">• Create a smoke-free generation, gradually ending the sale of tobacco products across the country and breaking the cycle of addiction and disadvantage.• strengthen the existing ban on smoking in public places to reduce the harms of passive smoking, particularly around children and vulnerable people.• ban vapes and nicotine products from being deliberately branded, promoted, and advertised to children to stop the next generation from becoming hooked on nicotine.• provide powers to introduce a licensing scheme for the retail sale of tobacco, vapes and nicotine products in England, Wales, and Northern Ireland, and expand the retailer registration scheme in Scotland.
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						<ul style="list-style-type: none">• It will also strengthen enforcement activity to support the implementation of the above measures - As per Tobacco and Vapes Bill: Second Reading - Commons' votes in Parliament - UK Parliament, only a small portion of Surrey elected members supported the Bill with the majority with “no vote recorded” or voting “no”. To help us achieve our Smoke Free Strategy in Surrey and protect the children before they get addicted to smoking cigarettes and vapes, we ask for the political support of the Adult and Health Select Committee and the promotion of the Bill amongst other colleagues and peers.
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