

MINUTES of the **INFORMAL** meeting of the **HEALTH AND WELLBEING BOARD**
held at 10.30 am on 9 September 2021 via Microsoft Teams.

These minutes are subject to noting by the Committee at its meeting on Thursday, 2 December 2021.

Board Members:

(Present = *)

- * Fiona Edwards
Dr Charlotte Canniff (Vice-Chairman)
- * Jason Gaskell
Dr Russell Hills
- * Tim Oliver (Chairman)
- * Kate Scribbins
- * Simon White
- * Ruth Hutchinson
Dr Claire Fuller
- * Graham Wareham
Joanna Killian
- * Sinead Mooney
- * Clare Curran
Rob Moran
- * Rod Brown
- * Jason Halliwell
- * Carl Hall
Gavin Stephens
- * Mark Nuti
- * Steve Flanagan
Vicky Stobbart
Michael Wilson CBE
- * Professor Helen Rostill
- * Rachel Hargreaves
- * Rachael Wardell
- * Borough Councillor Nick Prescott
Lisa Townsend
- * Siobhan Kennedy (Associate Member)

Substitute Members:

Alison Bolton - Chief Executive, Office of the Police and Crime Commissioner for Surrey (OPCC)

Karen McDowell - Surrey Heartlands Integrated Care System (ICS) Chief Operating Officer / NHS Surrey Heartlands Clinical Commissioning Group (CCG) Deputy Accountable Officer

Sailesh Limbachia - T/Detective Chief Superintendent - Public Protection Command, Surrey Police

Nicola Airey - Executive Place Managing Director - Surrey Heath, NHS Frimley Clinical Commissioning Group (CCG)

In attendance

Rachel Crossley - Joint Executive Director - Public Service Reform, Surrey County Council (SCC)

Guests

Kate Barker - Strategic Commissioning Convener for Children (Frimley ICS, Surrey Heartlands ICS and SCC)

Liz Williams - Strategic Commissioning Convener for Learning Disabilities (Frimley ICS, Surrey Heartlands ICS and SCC)

Alison Leather - Strategic Commissioning Convener for Mental Health (Frimley ICS, Surrey Heartlands ICS and SCC)

The Chairman welcomed the following new Board members:

- Borough Councillor Nick Prescott - Leader of Runnymede Borough Council, to serve as a Board member representing the Surrey Leaders' Group.
- Borough Councillor Hannah Dalton - Leader of Epsom and Ewell Borough Council, to serve as a deputy/substitute Board member representing the Surrey Leaders' Group.

The Chairman noted farewell to a Board member:

- Rod Brown - Rod would be stepping down as Chair of the Prevention and Wider Determinants Delivery Board and so also from the Health and Wellbeing Board. He thanked him for all his work on the Health and Wellbeing Board and the Prevention and Wider Determinants Delivery Board, noting his contribution to the Health and Wellbeing Strategy and as Priority One Sponsor.

24/21 APOLOGIES FOR ABSENCE [Item 1]

Apologies were received from Lisa Townsend - Alison Bolton substituted, Dr Claire Fuller - Karen McDowell substituted, Dr Charlotte Canniff, Rob Moran, Dr Russell Hills, Gavin Stephens - Sailesh Limbachia substituted, Fiona Edwards - was present until 11.34 am - Nicola Airey substituted.

25/21 MINUTES OF PREVIOUS MEETINGS: 4 MARCH 2021 AND 2 JUNE 2021 (INFORMAL) [Item 2]

The minutes were noted as true records of the meetings and would be agreed at the next formal public Board meeting.

26/21 DECLARATIONS OF INTEREST [Item 3]

There were none.

27/21 QUESTIONS AND PETITIONS [Item 4]

a Members' Questions [Item 4a]

None received.

b Public Questions [Item 4b]

None received.

c Petitions [Item 4c]

There were none.

28/21 HEALTH AND WELLBEING STRATEGY HIGHLIGHT REPORT [Item 5]

Before introducing the item, the Chairman reflected on the upcoming changes regarding the Health and Care Bill 2021 which was working its way through Parliament, expected to become legislation in April 2022.

He noted that the current Integrated Care System Boards would be combined with the Clinical Commissioning Groups, to form a single NHS-centric Integrated Care Board, its focus would be on the delivery of healthcare across the system. Alongside that Board, there would be an Integrated Care Partnership, which it was envisioned in Surrey would either overlap with or take the place of the Health and Wellbeing Board; which already had a broad membership. Discussion would be had on the future changes including the terms of reference and transition arrangements, ensuring the continued collaborative approach to improving the health and the wellbeing of Surrey's residents.

Witnesses:

Rod Brown - Head of Housing and Community, Epsom and Ewell Borough Council (Priority One Sponsor)

Professor Helen Rostill, Director for Mental Health, Surrey Heartlands ICS and SRO for Mental Health, Frimley ICS (Priority Two Sponsor)

Ruth Hutchinson - Director of Public Health (SCC)

Key points raised in the discussion:

1. The Priority One Sponsor highlighted:
 - The importance of collaborative working across different partners.
 - That progress had been made on embedding the social prescribing model through the Green Social Prescribing Working Group.
 - That joint working amplified key messages, partners such as Catalyst, Family Centres, and District and Borough Councils had shared national alcohol and tobacco campaigns to prevent substance misuse.
 - That over the last month the Council had been awarded £2.8 million in funding through the Changing Futures programme to provide additional tailored support in partnership to those facing multiple disadvantage, including homelessness, substance misuse, poor mental health, domestic abuse, and contact with the Criminal Justice System.
 - That active travel was a key area of focus with the Council currently consulting on the new draft Transport Plan including plans to reduce carbon emissions by 46% and redesigning neighbourhoods; the consultation survey would end on 24 October 2021.
 - Local Cycling and Walking Infrastructure Plans (LCWIPs) were being undertaken across Surrey to support active travel, with plans in each District and Borough to be developed by 2023.
 - The Surrey Safer Travel Team had secured an additional £175,000 travel demand management grant from the Department for Transport, of which some funding had been directed to supporting secondary schools.

- The agenda item on the Movement for Change strategy to 2030 for tackling physical inactivity and inequality whereby co-production was central.
 - That it had been a privilege to serve on the Board, thanking the Chairman and colleagues in Priority One.
2. The Priority Two Sponsor highlighted:
- The challenge of delivering significant improvement whilst facing ongoing demand within the mental health system, an emergency response group had been set up in January to mitigate the pressures.
 - That one key initiative that developed out of the emergency response group included the accommodation task and finish group led by the Council in partnership, it looked at more sustainable accommodation options for people with mental health needs and those discharged from acute hospitals or those in crisis, as well as in-home support.
 - That another key initiative set up in June by the Mary Frances Trust and Catalyst, was an in-reach initiative into Surrey's acute mental health wards, supporting individuals and their families pre- and post-discharge and connecting them to other community assets.
 - The enhanced paediatric offer regarding wraparound support with acute hospitals, out of hours mental health services, weekend services and the children's crisis line; to support the increasing number of children going into Accident and Emergency with mental health crises.
 - That Surrey was being supported by NHS England to set up a Tier 4 unit for those children who were most unwell and facing crises, a twelve bed unit in east Surrey was anticipated to be open by early summer, ensuring that children did not have to travel outside of the county.
 - That the Mental Health Delivery Board had a workshop to review the recommendations concerning the Mental Health Improvement Plan and as a result ten workstreams had been established and three cross-cutting themes identified.
 - The programme infrastructure was being developed to drive the Improvement Plan forward and an Interim Programme Director and workstream sponsors were in place.
 - That under the first workstream of Early Intervention & Prevention Vision and Strategy, the Independent Mental Health Network had led a piece of consultation work alongside Catalyst with service users and carers to gather their views on the Vision; as a result of the consultation, lunch and learn sessions were being set up to ensure co-production.
 - Regarding the improving access and preventing service gaps workstream, the different access points within the complex mental health landscape were being reviewed and Public Health (SCC) had been working to map those different points and support partners to look at how those points could be brought together to make access easier for local people; three workshops would be run in September led by Public Digital.
 - That an emotional wellbeing conference was hosted for local employers in June, the workforce wellbeing collaboration was led by the Council with third sector partners and the Surrey and Borders Partnership NHS Foundation Trust (SABP), as a result a follow up programme was underway with employers.
 - That services launched to support new parents included the new Maternal Mental Health Service and a psychotherapy in-reach into the neonatal services.
 - That the Surrey Dementia Strategy had been refreshed to provide enhanced support, noting the gap in the provision of post-diagnostic

support. Funding had been used for Admiral Nurses and noted the use of the Technology integrated Health Management (TiHM) monitoring service.

- The Behaviour & Intentions workstream included the commissioning of the Independent Mental Health Network, Surrey Minority Ethnic Forum and Healthwatch Surrey to lead a three-month piece of work on user-led design beginning with SABP, ensuring users were at the centre of governance structures.
 - Regarding the Integrated System working workstream, a pilot was underway in Epsom to align the community mental health services into Primary Care, and the continued rollout of the GP Integrated Mental Health Service (GPIMHS) programme.
 - That SABP had allocated executive leads at place level, to be followed by operational and clinical leads, helping develop the Communications & Engagement workstream.
 - That the Time to Change Surrey programme had been relaunched, lived experience champions were in place working with the public to look at attitudes to mental health and to challenge the existing stigma.
 - That work was underway to align some of the mental health improvement work alongside the Health and Wellbeing Strategy refresh.
3. On behalf of the Priority Three Sponsor, the Director of Public Health (SCC) highlighted:
- That as a result of the Health and Wellbeing Strategy refresh there would be a particular focus on the wider determinants of health.
 - The Board's whole system approach to poverty, focusing on aspects of the Community Impact Assessment which highlighted the disproportionate affected of Covid-19 on certain population groups.

Borough Councillor Nick Prescott joined the meeting at 10.58 am

- That Appendix 3: Digital Inclusion Programme Initiation Document (PID) was a key system capability for reducing health inequalities through the digital inclusion programme, the deadline for any initial comments was 24 September 2021.
 - That Appendix 2: All Age Autism Strategy 2021-26 reflected the partnership working across Surrey and the ambition to achieve an autism-friendly approach; involvement with children, young people, adults, families and carers and key community groups was fundamental.
 - That within the Strategy there were five workstreams with clear objectives, including the understanding and awareness of autism education.
4. The Chairman welcomed the updates which highlighted the interlinkages between programmes concerning skills and access to information, noting the importance of the interlinkages between the Board and the Growth Board.
5. Regarding the All Age Autism Strategy 2021-26 and reference to Independent Living, a Board member asked whether the evidence of some people being admitted to hospital because there were not the right specialist residential placements was included in the Strategy to be addressed.
- In response, a Board member explained that:
 - there was a commitment which was backed up with a substantial part of the capital programme to roll out supported living for all client groups.
 - there were two complicating factors to address, the first was around ensuring that hospital admission would not result in people losing their

existing accommodation; and the second factor related to the offer made under the Care Act 2014 to people with autism which related to a proportion of that population.

- people with autism were better supported when they were children than when they are adults, a change in legislation was vital to ensure a comprehensive offer for people with autism.
6. A Board member highlighted the successful organisation of holiday camps for children over the summer holidays that the Council launched and ran, to which she visited. Although universally available, the clubs were targeted at children from disadvantaged groups and those facing food poverty - exacerbated by the pandemic. Lunches were provided and she added that the clubs focused on catch up learning and healthy living, the activities were enjoyable, and she hoped that the camps would continue in the future.

RESOLVED:

1. Noted the progress against the Strategy.
2. Board members would share the Highlight Report across their networks (direct links to quarterly highlight reports available at www.healthysurrey.org.uk/about).
3. Endorsed (informally) the All Age Autism Strategy as a system-wide strategy for Surrey including the priority actions set out in the implementation plans in Year 1 and supported their delivery across the system.
4. Board members were encouraged to provide feedback from their organisations on the Local Transport Plan and the Digital Inclusion Programme Initiation Document.

Actions/further information to be provided:

None.

29/21 HEALTH AND WELLBEING STRATEGY REVIEW AND REFRESH [Item 6]

Witnesses:

Ruth Hutchinson - Director of Public Health (SCC)

Key points raised in the discussion:

1. The Director of Public Health (SCC) highlighted:
 - That the Board was at Stage Three of Four regarding the Health and Wellbeing Strategy refresh.
 - That Stage One was conducted in June 2021 whereby the reframed priorities, outcomes, system capabilities and priority populations were approved - a slight revision was contained in Appendix 1 as noted in the first recommendation.
 - That Stage Two was conducted in July 2021 whereby the principles and the empowering communities agenda was reviewed - which linked to tackling health inequalities.
 - That Stage Three sought approval of the principles and programmes as discussed at the private informal Board meeting in July, whereby the three guest speakers - Lord Nigel Crisp KCB, Hazel Stuteley OBE, Dr Gillian Orrow - led a workshop challenging the Board to look at how it could create the conditions for health improvement.

- The challenge considered at the private informal Board in July was how to move from a system led 'top down' approach to a community led 'inside out' approach.
 - The Population Intervention Triangle which had been adopted by the health inequalities work programme, it was proposed that the Board adopt it as part of its Strategy to reduce health inequalities through: community-led, civic-led and service-based interventions; also fulfilling the requirements within the NHS Long Term Plan.
 - That the key questions and feedback from the private informal Board in July, such as building on the Board's existing strengths were incorporated into the refresh and the ten draft Strategy implementation principles had been updated and converted into Internal Programme Management Guidance, with the following new principles 'four Cs' for endorsement under the second recommendation: community capacity building, co-designing, co-producing and community led action.
 - Recommendations three and four underpinned the work across the three Priorities through two commitments to action: the enhanced partnership effort to work creatively with communities particularly in areas with the poorest health outcomes, and the exploration of the system-wide adoption of the Health in All Policies approach to which the Local Government Association had offered support.
 - That Stage Four would commence in October-December to discuss and approve the governance arrangements, the details of the implementation plans and the new Health and Wellbeing Strategy metrics.
2. A Board member drew attention to the connection between the first recommendation concerning the community work in relation to areas of deprivation and the ongoing work around poverty - including child poverty - whereby it was vital to address the areas with the greatest deprivation; noting the need to ensure an explicit interconnected approach between the two.

RESOLVED:

1. Endorsed (informally) the Strategy's revised Priorities, Outcomes, Priority Populations, System Capabilities and new, internal Programme Management guidance.
2. Endorsed (informally) the set of core Principles for Working with Communities for incorporation into the Surrey Health and Wellbeing Strategy.
3. Endorsed (informally) an enhanced collaborative effort to work creatively with those communities in geographic areas of deprivation with the poorest health outcomes - with the Executive Director of Customer and Communities (SCC) asked, on behalf of the system, to coordinate with colleagues and produce a fuller proposition for the next Board meeting.
4. Supported the exploration of the adoption of a Health in All Policies (HiAP) approach across the Surrey system, with a report on its potential roll out across the Surrey system to be brought to the next Board meeting.

Actions/further information to be provided:

None.

30/21 HEALTH AND WELLBEING BOARD COMMUNICATIONS PLAN 2021/22 REVIEW [Item 7]

Witnesses:

Andrea Newman - Strategic Director for Communication, Public Affairs and Engagement (SCC)

Giselle Rothwell - Director of Communications and Engagement, Surrey Heartlands ICS

Key points raised in the discussion:

1. The Strategic Director for Communication, Public Affairs and Engagement (SCC) noted that she would welcome the opportunity to report into the Board on a more frequent basis going forward, in order to provide a deeper dive into some of the campaigns and communications activities undertaken.
 - In a later comment the Chairman welcomed both periodic updates and deep dives into key areas and campaigns at future Board meetings.
2. The Strategic Director for Communication, Public Affairs and Engagement (SCC) highlighted:
 - That having taken over chairing the Health and Wellbeing Communications Sub-Group alongside the Director of Communications and Engagement, Surrey Heartlands ICS; there had been a shift in the Sub-Group's approach to ensure a more strategic focus in its work and to utilise the breadth of experience available.
 - That the Sub-Group met periodically and worked collaboratively which had become more important as the Multi-Agency Information Group (MIG) had been disbanded post-Covid; collaborative working was key within the winter communications planning sub-group and the communications groups for the Surrey Safeguarding Children Partnership and the Surrey Safeguarding Adults Board.
 - That the Communications Plan was split into three workstreams and had been updated to reflect the changes regarding the Health and Wellbeing Board's Priorities and she welcomed feedback on the Plan.
 - That despite the focus over the last year on Covid-19 and the vaccine rollout, there had been a multitude of other communications campaigns.
3. The Director of Communications and Engagement (Surrey Heartlands ICS) highlighted:
 - The communications overview 2020/21, noting the communications campaigns around Covid-19 and the partnership approach through the MIG, where key messages, assets including videos were disseminated and health and wellbeing support was signposted.
 - That new tactics had been explored whilst in the middle of the pandemic, including the SoonSurrey Instagram account for young people and the wide use of trusted voices across the partnership promoting that consistent messaging and would be vital going forward in continuing to help support the Health and Wellbeing Strategy.
 - That the Covid-19 vaccination programme highlighted the proactive joint working across the system and key partners, maximising local relationships with the Imam at the Shah Jahan Mosque in Woking, with the Surrey Minority Ethnic Forum, the Gypsy, Roma and Traveller Community, the universities and the District and Borough Councils helped with reaching into local communities.

- That a joint approach had been taken to address vaccine hesitancy and misinformation through targeted campaigns based on behavioural insights and noted the work to reducing health inequalities through the joint equalities and engagement communications group and stakeholder reference group.
 - The mental health campaign called the 'We Are the Face of Support' to raise awareness of the preventative steps for residents and signposting to support services, featuring mental health practitioners and staff. The campaign supported the work of the Mental Health Partnership Board and was the first-time partners had formed a major system-wide collaboration on mental health and wellbeing. It would be launched during World Mental Health Day in October.
4. The Strategic Director for Communication, Public Affairs and Engagement (SCC) highlighted:
- The successful Surrey Together leaflet produced last winter which was sent to all households in Surrey and provided a list of helpful telephone numbers and signposted residents to services in the midst of the pandemic.
 - That a leaflet would be provided again this year as part of a wider winter wellness campaign.
 - The domestic abuse work undertaken through working closely with Women's Aid and Your Sanctuary, domestic abuse had been exacerbated due to the pandemic; noting that whilst a high level of engagement was important, what was key was having an impact on those most affected which was shown through the 76% increase in impressions and hits on Your Sanctuary's website compared to the previous year.

Carl Hall joined the meeting at 11.30 am

- That looking ahead to the winter, work was underway concerning the coordinated campaigns and messages around winter pressures and preparedness.
5. The Chairman noted that the communications campaigns and messaging throughout the pandemic had been tremendous, noting positive feedback from residents; and going forward the issue was about maintaining that level of engagement.
6. The Joint Executive Director - Public Service Reform (SCC) noted the link with the 2021/22 NHS System Operational Plans - Surrey Heartlands HCP and Frimley Health and Care ICS and the five must do's for the NHS concerning health inequalities, three of those were relevant to communications and engagement, digital inclusion and targeting those most at risk of health inequalities or of being excluded. One key area to focus on was around restoring the NHS inclusively and the data on that was being reviewed.
- In response, the Director of Communications and Engagement (Surrey Heartlands ICS) explained that the areas above were being supported through the research and insight work particularly on digital exclusion and on expanding primary care access, it was vital to ensure resident engagement going forward with those different areas of work.
7. A substitute Board member queried whether the translation of messages to communities that might not understand English was included within the Communications Plan.
- In response, the Strategic Director for Communication, Public Affairs and Engagement (SCC) explained that all of the communications materials

were translated into easy-read versions and multiple languages, noting the work with the Imam of the Shah Jahan Mosque in Woking to translate Government advice, including videos in Urdu and Bengali shared across WhatsApp communities.

Fiona Edwards left the meeting at 11.34 am

RESOLVED:

1. Supported the refreshed communications plan for 2021/22 and Board members would endorse the approach within their respective organisations.
2. Noted the communications highlights information.

Actions/further information to be provided:

1. The Strategic Director for Communication, Public Affairs and Engagement (SCC) will be invited to provide both periodic updates and deep dives into key areas and communications campaigns at future Board meetings.

31/21 POLICE AND CRIME COMMISSIONER FOR SURREY'S POLICE AND CRIME PLAN 2021-24 CONSULTATION [Item 8]

Witnesses:

Alison Bolton - Chief Executive, Office of the Police and Crime Commissioner for Surrey (OPCC)

Key points raised in the discussion:

1. The Chief Executive (OPCC) introduced the report on behalf of the Police and Crime Commissioner for Surrey and highlighted:
 - The ongoing consultation around the Police and Crime Commissioner (PCC) for Surrey's Police and Crime Plan for 2021-24.
 - Police and crime plans were statutory documents set by every PCC after they were elected, and the purpose of that Plan was to set the strategy for policing and for community safety over the PCC's tenure.
 - The PCC would use the Plan to hold the Chief Constable of Surrey Police to account and residents would use the Plan to hold the PCC to account.
 - That when Lisa Townsend was elected in May 2021 as Surrey's PCC, she was clear that she wanted her Plan to be informed by and reflective of the different views of residents and stakeholders across the county.
 - That over the summer the PCC and the Deputy PCC, had undertaken a multitude of consultation exercises with various groups and across a range of themes such as rural crime, violence against women and girls (VAWG), sexual violence and road safety.
 - That the PCC wanted to ensure that the key strategic boards in the county such as the Health and Wellbeing Board had the opportunity to provide input into the Plan before moving to the next consultation phase.
 - That the key questions to guide feedback on the future priorities for Surrey Police and for community safety were included in the report and asked that Board members share the questions with colleagues within their organisations and agencies.

- Responses were to be provided by the end of the month to Sarah Haywood - Policy and Commissioning Lead (OPCC) via her email address as noted in the report.
- It was hoped that the Plan would be finalised in November following the approval of the Chief Constable of Surrey Police and the Surrey Police and Crime Panel.

RESOLVED:

1. Considered the questions posed by the Commissioner below at this Board meeting, in order to provide input into the development of the Surrey Police and Crime Plan.
2. Board members would pose the Commissioner's questions within their own organisations and would provide their responses to the Office for Police and Crime Commissioner in a timely manner.

Actions/further information to be provided:

None.

32/21 2021/22 NHS SYSTEM OPERATIONAL PLANS - SURREY HEARTLANDS HCP AND FRIMLEY HEALTH AND CARE ICS [Item 9]

Witnesses:

Karen McDowell - Surrey Heartlands Integrated Care System (ICS) Chief Operating Officer / NHS Surrey Heartlands Clinical Commissioning Group (CCG) Deputy Accountable Officer

Nicola Airey - Executive Place Managing Director - Surrey Heath, NHS Frimley Clinical Commissioning Group (CCG)

Key points raised in the discussion:

1. The Chief Operating Officer (Surrey Heartlands ICS)/Deputy Accountable Officer (NHS Surrey Heartlands CCG) highlighted:
 - That the Surrey Heartlands Health and Care Partnership (HCP) 2021/22 operational plan set out how it would be delivered against the NHS 21/22 NHS Priorities and Operational Planning Guidance which included six national priorities over April-September, covering areas such as the recovery of services, continued partnership working and addressing health inequalities.
 - That NHS England and Improvement South East Region rated Surrey Heartlands HCP 2021/22 operational plan for the first half of the year as Green overall, with further guidance to be received imminently regarding the plan for October-March.
 - That senior responsible officers for each of the priorities and executive leads had been identified; the milestones were starting to be reported against each of the priorities through the Surrey Heartlands assurance report.
2. The Executive Place Managing Director - Surrey Heath (NHS Frimley CCG) highlighted:
 - That NHS England and Improvement South East Region also rated the Frimley Health and Care ICS 2021/22 operational plan for April-September as Green overall.

- That the planning guidance for October-March was expected on 16 September, the plan for the second half of the year would be a continuation of the narrative of the plan for April-September but with updated finance and activity data.
 - Reassured the Board that although both plans were responding to the national priorities, those national priorities were in line with the Surrey Health and Wellbeing Strategy.
3. The Chairman noted that with the national announcement yesterday it looked as though the plans for the second half of the year would roll on from the April-September plans which was positive in terms of long-term planning.

RESOLVED:

1. Noted the Surrey Heartlands HCP and Frimley Health and Care ICS 2021/22 operational plans for April-September, from a Surrey-wide perspective.
2. Board members would share the operational plans within their organisations.
3. Noted the South West London Health and Care Partnership operational plan 2021/2022 for reference.

Actions/further information to be provided:

None.

33/21 CREATING A WHOLE SYSTEM APPROACH TO PHYSICAL INACTIVITY [Item 10]

Witnesses:

Elizabeth Duggan - Managing Director - Active Surrey (SCC)

Key points raised in the discussion:

1. The Managing Director - Active Surrey (SCC) highlighted:
 - The activity over the last year in developing the system approach to physical activity through consulting with residents and their experiences and challenges.
 - That being active was positive for all ages, noting the proven benefits of a more active lifestyle such as the reduction in: the risk of osteoarthritis by over 80%, the risk of type 2 diabetes by up to 50%, heart disease, stroke, depression and dementia by up to 30%, as well as the confirmed link between regularly active people and less severe Covid-19 outcomes.
 - That beyond the health benefits, active travel had an important role to play against the climate emergency, community led initiatives were vital as for example sport and physical activity played an important part in reducing anti-social behaviour and addressed social isolation by creating a sense of belonging.
 - That physical activity levels were tracked nationally via Active Lives survey data, and over the course of the pandemic activity levels were low nationally; and in Surrey there had been some significant declines in numbers of regularly active people with levels at their lowest on record since 2015 with over 220,000 people who moved for less than thirty minutes a week.

- That where there was inactivity there was inequality as those who had the most to gain, were the least able to take part in physical activity. A disproportionate number of those 220,000 inactive people were from deprived communities, such as those from ethnic minority groups, those with disabilities or long-term health conditions.

Alison Bolton left the meeting at 11.51 am

- That the Movement for Change physical activity strategy set out the long-term and ambitious commitments for a more active county, running parallel to and as a sustainable way to support the Community Vision for Surrey by 2030.
 - That co-production was central to the strategy, listening to all residents but with a focus on inactive residents, the process was led by a cross-system steering group to ensure a whole system responsibility.
 - That through undertaking co-production two key priorities were identified to make it easier for everyone to move more and the research highlighted the importance of a focused approach to those needing extra support, facing the barriers of time, money and self-worth.
 - The strategy highlighted four priority areas to focus on:
 - giving a positive start to children and young people, through working with schools, parents and the young people themselves to establish the foundations for a healthy active lifestyle.
 - connecting communities and under-represented groups, recognising the importance of community led action to ensure a place-based approach to physical activity.
 - creating active environments, noting the focus on active travel and the rise in sedentary behaviour particularly throughout the pandemic; it was vital to reframe being active as the daily norm for people again.
 - creating a stronger link between physical activity and health including mental health, by creating more targeted provision and links through the healthcare system for people with long-term health conditions and continuing to promote active aging.
 - That it was a 'Movement' as it demanded collective action and system-wide change, a whole system approach was being fostered through the work of the Board, through the Green Social Prescribing Working Group and the countryside transformation programme.
 - That to drive forward the aims of the strategy, a dedicated resource was needed to upscale and mobilise others to maintain momentum, to test and learn and to embed physical activity into place-based working.
 - That in the recent review of the Everybody Active, Every Day: 5 years on Public Health England framework, it was highlighted that the major challenge to its success was 'the limited and uneven resource dedicated to increasing physical activity'.
 - That the next steps for Movement for Change included the formation of cross-system working groups for each of the four priority areas in order to develop detailed operational plans - she welcomed senior champions for those priorities - and to explore different long-term funding opportunities.
2. A Board member emphasised the importance of the strategy not least because the evidence base on physical activity was strong, but also due to the framing of the strategy in a way so that the key targets aligned with the

Health and Wellbeing Strategy, particularly in reducing health inequalities. Behavioural change was key but ensuring the right infrastructure to embed the strategy was vital, she thanked Active Surrey for its work.

3. A substitute Board member welcomed the strategy and asked how the link between the Surrey-wide strategy and the place-based delivery would work whereby place-based referred to engaging with local communities and neighbourhoods; she welcomed a further conversation with the Managing Director - Active Surrey (SCC) to provide support through the established mechanisms and groups to link into the neighbourhood level across the county.
 - In response, the Managing Director - Active Surrey (SCC) explained that the intention was to pilot Movement for Change place-based working to put physical activity at the heart of place-based health creation.
 - The Managing Director - Active Surrey (SCC) further noted that work on pilot areas was underway with the Executive Director of Customer and Communities (SCC), including Canalside in Woking and community bike schemes were established.
 - The Managing Director - Active Surrey (SCC) noted that scaling up community engagement through working in partnership was vital and following the meeting she was happy to have conversations with Board members and organisations to look at how Active Surrey could support initiatives in other areas.
 - The Managing Director - Active Surrey (SCC) emphasised the importance of co-production and community engagement through the principle of 'nothing about us without us', ensuring community representation and the need to work with Community Champions.
4. The Chairman highlighted a comment in the Teams chat from a guest attendee about whether the work around the strategy would link to social prescribing and navigators.
 - In response, the Managing Director - Active Surrey (SCC) noted that Active Surrey was represented on many of the green social prescribing groups and had its own post linking thriving communities with social prescribing, social prescribing was an explicit subpoint within the health priority area.
5. The Chairman noted the various offers by Board members to have further conversations with the Managing Director - Active Surrey (SCC) and that going forward it would be vital to join up the activities and initiatives across Surrey in order to understand what was happening within communities.

RESOLVED:

1. Provided endorsement (informally) to adopt Movement for Change as Surrey's Physical Activity Strategy to 2030.
2. Provided commitment to the objectives contained within Movement for Change and would advocate for its future funding and implementation.
3. That the intent behind Movement for Change is that it really becomes a movement, and physical activity is adopted as a lens through which the development of all future services and provision should be viewed. That individual Board members considered how they could adopt Movement for Change within their own organisations.
4. Board Champions would to drive forward the Strategy's aims within its 4 priority areas:
 - i. Creating positive experiences of being active for young people.

- ii. Connecting communities and using physical activity to bring people together and create better places to live.
- iii. Creating active environments which make it easier for people to be active in their everyday lives.
- iv. Building stronger links between physical activity and health and wellbeing.

Actions/further information to be provided:

1. The Managing Director - Active Surrey (SCC) will follow up on the offer of support around place-based delivery through the established mechanisms and groups to link into the neighbourhood level across the county, by the Executive Place Managing Director - Surrey Heath (NHS Frimley CCG).
 - As well as the other various offers by Board members to have further conversations to join up the activities and initiatives across Surrey in order to understand what was happening within communities in order to look at how Active Surrey could support those initiatives in other areas.

34/21 IMPLEMENTING A WHOLE SYSTEM APPROACH TO OBESITY [Item 11]

Witnesses:

Jane Semo - Public Health Development Worker (SCC)

Key points raised in the discussion:

1. The Public Health Development Worker (SCC) highlighted:
 - The multitude of factors that influence a person's weight throughout their life, noting the enablers and barriers to maintaining a healthy weight.
 - The common areas to tackle obesity identified as part of a whole systems approach, for example increasing active travel, educating people about the benefits of a healthy lifestyle and exercise, and providing access to weight management support.
 - The overview of the whole systems approach framework which was commissioned by Public Health England and developed by Leeds Beckett University who piloted the approach with several local authorities in the country.

Nicola Airey left the meeting at 12.04 pm

- That the framework followed six phases using all parts of the system to effect change through identifying the gaps in provision rather than focusing on individual interventions, beginning with the set-up, building the local picture, mapping the local system, taking action, managing the system network and ending on reflect and refresh.
- Other pieces of work in relation to helping people to achieve a healthier weight as part of the whole systems approach included the use of grant payments from the Contain Outbreak Management Fund (COMF) to enable YMCA Redhill, Active Prospects, Stanwell Family Centre, Home Start (Runnymede, Woking and Ewell, Banstead) and Voluntary Action north west Surrey - all receiving £16,000 each with a further £4,000 having established an action plan in phase four of the framework.

- That Surrey Heath Borough Council was taking a whole systems approach with support from Voluntary Action north west Surrey, and Active Surrey had been funded to support each project.
 - That the next steps entailed the monitoring and supporting of the progress of the whole systems approach pilots and developing an evaluation framework.
 - The recommendation which asked the Board to expand the whole systems approach and embed the framework in the other District and Borough Councils across Surrey as the framework was aimed at local authorities, with advocacy from the leadership to identify a person to lead on the approach - particularly someone from Reigate and Banstead Borough Council to support YMCA Redhill on the matter.
2. The Chairman noted that regarding ensuring engagement from the District and Borough Councils, it would be beneficial to get the matter onto the agendas of the Surrey Leaders' Group and the Surrey Chief Executives' Group.
 3. The Priority Two Sponsor agreed with the importance for District and Borough Councils to embrace the framework and was happy to assist on the matter.
 4. The Chairman noted a comment in the Teams chat whereby the Executive Director for Children, Families and Lifelong Learning (SCC) was happy to flag the whole systems approach to obesity which would fit into the work around Healthy Schools; at the planning session regarding an upcoming District and Borough Children's meeting.

RESOLVED:

1. Board members would persuade and support Surrey's Borough and District Councils to embed the Whole System Approach (WSA) Framework across their organisations, to establish advocacy from their leadership teams and identify a person within their organisation to lead on this approach.

Actions/further information to be provided:

1. That regarding ensuring engagement from Surrey's District and Borough Councils, the Whole System Approach (WSA) Framework to obesity will be put onto future agendas of the Surrey Leaders' Group and the Surrey Chief Executives' Group.
2. The Public Health Development Worker (SCC) to follow up with offers from Board members and partners, including the Priority Two Sponsor and the Executive Director for Children, Families and Lifelong Learning (SCC) on their offers to embed the WSA Framework to obesity across Surrey's District and Borough Councils.

35/21 SURREY LOCAL OUTBREAK ENGAGEMENT BOARD - UPDATE [Item 12]

Witnesses:

Sinead Mooney - Cabinet Member for Adults and LOEB Chairman (SCC)

Key points raised in the discussion:

1. The Surrey Local Outbreak Engagement Board (LOEB) Chairman highlighted:
 - That since the last Health and Wellbeing Board, the LOEB had met twice.

- The continuing collaborative work undertaken amongst the partnerships, agencies and the LOEB members in responding to and managing Covid-19; which had strengthened throughout the pandemic.
 - The Covid-19 data gathering and intelligence dissemination across the county, which was shared on a regular basis at the LOEB through the Covid-19 Surveillance Update.
 - The successful Surrey Community (Covid-19) Champions Programme established in nine Districts and Boroughs - with a further one to follow and the outstanding one was being engaged with - set up according to best practice in other London Boroughs at the start of the pandemic.
 - The offers of support from outside of Surrey, noting the Managed Quarantine Service hotel in Surrey accommodating British nationals and refugees from Afghanistan and the offer of help received from West Sussex County Council to support the Afghan refugees - providing essential items such as clothing, shoes and nappies.
 - The fluid communications and engagement strategy through the NHS Test and Trace Communications Plan for Surrey which evolved throughout the pandemic, with continuing communications via social media and traditional forms of media to residents.
 - The ongoing updates within the Surrey COVID-19 Local Outbreak Management Plan agenda item on: the national easing of restrictions or Roadmap out of national lockdown for England, the Covid-19 vaccination rollout programme, Covid-19 testing updates including local contact tracing and updates from Surrey Police, Adult Social Care (SCC) and Children, Families and Lifelong Learning (SCC).
 - That it was good to see that LOEB members were taking the information provided at the meetings away and sharing it across their organisations; the next public LOEB meeting was on 19 November 2021.
2. The Chairman noted that the LOEB covered a broad range of issues around Covid-19 and praised the work of the LOEB and the Public Health (SCC) and the Communications (SCC) teams over the past eighteen months.

RESOLVED:

The Board noted the verbal update on the work of the Surrey Local Outbreak Engagement Board.

Actions/further information to be provided:

None.

36/21 DATE OF THE NEXT MEETING [Item 13]

The date of the meeting was noted as 2 December 2021.

A date for the proposed private informal public meeting in late October/early November will be confirmed in due course, it is being provisionally planned to enable discussion of the Integrated Care Board and the Integrated Care Partnership as part of the Health and Care Bill 2021 following the publishing of recent guidance.

Meeting ended at: 12.18 pm

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