



Committee and Date
Health & Wellbeing Board
5 July 2013
9.30 am

Item
5
Public

MINUTES OF THE HEALTH AND WELLBEING BOARD MEETING HELD ON 12 APRIL 2013 AT 9.30AM IN THE SHREWSBURY ROOM, SHIREHALL

Responsible Officer Michelle Dulson
Email: michelle.dulson@shropshire.gov.uk Telephone: 01743 252727

PRESENT

Members of the Shadow Board:

Dr Caron Morton	Accountable Officer, Shropshire CCG
Dr Bill Gowans	Vice-Chairman, Shropshire CCG
Dr Helen Herritty	Chairman, Shropshire CCG
George Rook	Chairman Shropshire LINK
Sonia Roberts	Chairman, VCSA
Prof. Rod Thomson	Director of Public Health
Stephen Chandler	Director of Adult Services
Karen Bradshaw	Director of Children's Services
Dr Julie Davies	Director of Strategy and Service Redesign, Shropshire CCG (Substitute for Paul Tulley)

Officers and others in attendance:

Ruth Houghton	Service Manager - Developmental Support
Emma Sandbach	Public Health Specialist, Shropshire Public Health
Debbie Hill	Alzheimer's Society
Penny Bason	Health & Wellbeing Coordinator
Carolyn Healy	Partnerships and Health Integration Manager
Phil Brough	Partnerships Networks Officer

1. ELECTION OF CHAIRMAN

1.1 In the absence of the Chairman and Vice-Chairman, it was proposed, duly seconded and **RESOLVED** that Dr Caron Morton be elected Chairman for the duration of the meeting.

2. APOLOGIES FOR ABSENCE AND SUBSTITUTIONS

2.1 Apologies for absence were received from
Councillor Keith Barrow - Leader, Shropshire Council (Chairman)
Councillor Ann Hartley - Portfolio Holder for Health and Wellbeing (Vice-Chairman)
Cllr Cecilia Motley - Portfolio Holder for Flourishing Communities/Education and Skills
Graham Urwin - Chief Executive Shropshire & Staffordshire NHS Commissioning Board
Paul Tulley, Chief Operating Officer, Shropshire CCG

3. DISCLOSABLE PECUNIARY INTERESTS

3.1 There were none.

4. MINUTES

4.1 **RESOLVED:** That the Minutes of the Shadow Health and Wellbeing Board meeting held on 20 February 2013 be approved and signed by the Chairman as a correct record.

5. PUBLIC QUESTION TIME

5.1 No Public Questions had been received.

6. JSNA - MENTAL HEALTH DATA & STAKEHOLDER ALLIANCE – MENTAL HEALTH UPDATE

6.1 The Board received the report of the Public Health Specialist – copy attached to the signed Minutes – which highlighted information around the priority outcome on mental health and wellbeing identified in the Shropshire Health and Wellbeing Strategy.

6.2 The Public Health Specialist drew attention to the current information on mental health and wellbeing in Shropshire in relation to self-harm and mental health in young people, dementia and suicide. She highlighted the gaps in information and explained that it would be useful to try to build up an evidence base on the mental and emotional health of children and young people in order to understand the needs of this population locally.

6.3 The information obtained from various organisations could then be included in the JSNA and used to support the commissioning of services.

6.4 The Board received the report of the Partnerships Network Officer – copy attached to the signed Minutes – which presented the main themes of discussions arising from the online Health & Wellbeing Stakeholder Alliance around the priority outcome on mental health and wellbeing identified in the Health and Wellbeing Strategy.

6.5 The Partnerships Network Officer highlighted the key points and themes that came out of these discussions.

6.6 In response to a query, the Public Health Specialist confirmed that she would be looking at data from comparable Local Authorities, it was also hoped to get a good oversight of how services were accessed. It was noted that both the Shropshire Safeguarding Children's Board and the Coroner's office would hold information and data that could be tapped into. The Director of Adult Services commented that more work needed to be done in relation to the transition from Children to Adult Services.

6.7 It was agreed that each organisation would identify a link person to work on developing strategies and the commissioning of services related to dementia and young people's mental health.

6.8 RESOLVED:

A. to note the information contained in the JSNA report and to support future work in order to obtain data and information to contribute to an evidence base.

- B. to use the Stakeholder Alliance report to support discussion around agenda items 7, 8 and 9.
- C. to advise whether more investigation is required into any themes to feed into the JSNA and support for commissioning.
- D. to ensure the co-production with stakeholders in the development of strategies and commissioning of services related to dementia and children and young people's mental health.

7. CHILDREN AND ADOLESCENT MENTAL HEALTH SERVICES (CAMHS) RECOMMISSIONING UPDATE

- 7.1 The Board received the report of the Director of Strategy and Service Redesign – copy attached to the signed Minutes – which set out progress to date on the recommissioning of CAMHS.
- 7.2 The Director of Strategy and Service Redesign reported that two separate reviews of CAMHS had been undertaken in the last two years. An Action Plan based on the review findings was in place and some progress had been made. The Director of Strategy and Service Redesign reported that the proposed model for the service had been challenged by local clinicians from both providers, however, following an event held earlier in the week, agreement on a way forward had been reached.
- 7.3 The Director of Strategy and Service Redesign drew attention to the progress to date together with the outstanding issues, she then highlighted the proposed solutions. The Director of Strategy and Service Redesign thanked the Director of Public Health and the Local Authority for their continued support for the project which would ensure delivery of the service. She confirmed that a report would be presented to the next meeting of the Board on the detailed action plans for CAMHS.
- 7.4 In response to a query the Director of Strategy and Service Redesign explained that the concerns of clinicians had been overcome by not getting hung up on the detail of the proposed model of care but by focusing on the development of a single point of access and an agreement to address issues identified by the service reviews with the current model. She agreed to bring an update to the next meeting. The Director of Strategy and Service Redesign informed the meeting that the rapid action group were planning to report in 90 days. The draft model was not yet public but was due to be finalised the following week.
- 7.5 **RESOLVED:** that the lead senior officers with commissioning responsibilities for CAMHS meet to agree a way forward giving consideration to the proposals outlined in the report.

8. TARGETED MENTAL HEALTH IN SCHOOLS (TAMHS) SERVICE REVIEW UPDATE

- 8.1 The Director of Public Health gave a brief presentation on the service review of targeted mental health support – copy of slides attached to signed Minutes. He reported that the name had been changed to 'Think Good Feel Good' and its main vision was to promote positive health and wellbeing in young people.
- 8.2 The Director of Public Health explained that Shropshire had rolled out Early Intervention Funding from 2011 which was driving a whole school/organisation approach for children and young people, families and staff to raise awareness of mental health issues and to promote strategies to build self-esteem and resilience. It was hoped to achieve this by working more cohesively with other services. There

was a strong focus on staff training in order to provide targeted support for vulnerable children and young people.

- 8.3 The Director of Public Health reported that more than 80% of primary schools, 95% of secondary schools and 100% of special schools were engaged with the programme. 271 school staff and 60 partner organisations had received training and improvements were being seen.
- 8.4 The Director of Public Health explained that although the focus was on schools, it was hoped to extend the service to other areas eg children centres, in order to strengthen prevention and early intervention. It was important to draw together the different elements for children, young people and their families in a coherent way with a clear pathway to enable individuals to get support and access high quality services quickly.
- 8.5 Concern was raised about the perceived stigma in relation to mental health issues and possible anxiety for young people about confidentiality. The Director of Public Health agreed that this was a critical issue which he had discussed at the Youth Parliament. It must be ensured that cross work was done well and that young people were engaged in the development of services.
- 8.6 It was felt that the strategy should also be linked to education policies. The Director of Children's Services reported that a Children and Family bill was currently going through the House of Commons which would address the link between special education needs, health, education and social care and would establish a single assessment for children.
- 8.7 Concern was raised that schools/teachers were ill equipped to deal with mental health issues, partly due to a lack of resources. The Director of Children's Services agreed that schools were under pressure and although it was mainly low level mental health issues being dealt with by schools, there was a lack of understanding of their role. It was hoped to replicate good practice and to provide a single focus point.

9. DEMENTIA STRATEGY UPDATE

- 9.1 The Board received the report of the Director of Adult Services – copy attached to the signed Minutes – which gave an update on development of a Dementia Strategy. The Service Manager - Developmental Support drew attention to the multi-agency steering group which was working to develop the strategy and would report to the Board at its next meeting. She reported that feedback from the recent stakeholder event had helped to shape the priorities for developing the strategy.
- 9.2 The Service Manager - Developmental Support drew attention to the ongoing work and the services currently being commissioned by the CCG. She explained that the Strategy would be jointly developed in partnership with the Health & Wellbeing Board, patients, carers, the voluntary sector, service providers and other stakeholders to ensure a range of views were fed into the development of the final strategy.
- 9.3 Ms Debbie Hill from the Alzheimer's Society was invited to address the meeting in relation to the Dementia Friendly initiative. The idea behind the initiative was that a million people become dementia friends, by attending a two hour training session, and was the basis for becoming Dementia Friendly Communities. Dementia Champions, volunteers, who had an interest/life experience in dementia could attend a one day training session in order to then deliver Dementia Friendly training

to the public. She reported that an Action Plan was available on their website setting out how to make communities more dementia friendly.

9.4 It was suggested that Shropshire should become more dementia friendly and the Chairman stated that the challenge would be looked at by the Board with a view to getting all providers signed up to becoming dementia friendly.

9.5 **RESOLVED:** To approve the process for developing the Strategy and for an update to be taken to the July Board meeting, with a particular focus on ‘dementia friendly communities’.

10. STRATEGY FOR ADULTS WITH AUTISM IN SHROPSHIRE

10.1 The report of the Service Manager - Developmental Support was received – copy attached to the signed Minutes – which set out the Strategy for adults with autism in Shropshire. The Service Manager – Developmental Support confirmed that the Strategy had been approved by the Clinical Advisory Panel. She drew attention to the appendices which included an Action Plan, timeline and self-assessment framework audit.

10.2 The Service Manager – Developmental Support informed the meeting that training had been provided for Members and that the consultation and legislative requirements had previously been reported to the Healthy Communities Scrutiny Committee. Regional input had also been included in the development of the Strategy.

10.3 In response to a query the Service Manager – Developmental Support confirmed that voluntary and community mental health forums had been closely involved in development of the Strategy. The Director of Public Health drew attention to the lack of understanding within the Criminal Justice system of the different range of disorders that come under the autistic spectrum. It was important to ensure that autism was recognised and not stigmatised.

10.4 A brief discussion ensued in relation to supporting people with autism into employment. The Chairman of the VCSA explained that helping people into employment was not the end of the story as many still required support to cope with any management and/or process changes etc. The Service Manager – Developmental Support reported that the Strategy would be taken forward to the Leaders Board.

10.5 **RESOLVED:** to note the requirements of the statutory guidance for implementing Fulfilling and Rewarding Lives and to approve the Shropshire Adult Autism Strategy.

11. DATE OF NEXT MEETING

11.1 The next Green Paper meeting would be held at 9.30am on Friday 31 May 2013.

11.2 The next public meeting of the Health and Wellbeing Board would be held at 9.30am on Friday 5 June 2013 in the Shrewsbury Room at Shirehall.

The meeting finished at 10.45am

Chairman :

Date :