

**Minutes of a Meeting of the External
Partnerships Select Committee held at
Surrey Heath House on 3 March 2015**

+ Cllr Josephine Hawkins (Chairman)
+ Cllr Paul Deach (Vice Chairman)

Cllr Glyn Carpenter	+ Cllr Adrian Page
- Cllr Ian Cullen	+ Cllr Ken Pedder
+ Cllr Tim Dodds	+ Cllr Chris Pitt
Cllr Heather Gerred	+ Cllr Ian Sams
- Cllr Liane Gibson	- Cllr Pat Tedder
- Cllr David Hamilton	- Cllr John Winterton
Cllr Lexie Kemp	

+ Present

- Apologies for absence presented

Substitutes: Cllr Bill Chapman (for Cllr Liane Gibson), Cllr Edward Hawkins (for Cllr John Winterton) and Cllr Judi Trow (for Cllr Pat Tedder)

Guests: Tim Pashen – Surrey Heath Health and Wellbeing Board
Haydn Morris – Chief Executive Officer, Southern Addictions
Advisory Service
Sheila Hargreaves – Adult Clubs and Volunteering Manager,
Crossroads Care Surrey
Jenni Pringle – Care Operations Manager, Crossroads Care Surrey

Officers: Sarah Groom – Transformation Team Manager
Rachel Whillis – Democratic Services Officer

24/EP Chairman's Announcements and Welcome to Guests

The Chairman welcomed the guest speakers.

25/EP Minutes

The minutes of the meeting held on 20 January 2015 were confirmed and signed by the Chairman.

26/EP Surrey Heath Health and Wellbeing Board

The Committee received a presentation from Tim Pashen, the Executive Head of Community for Surrey Heath Borough Council, on behalf of the Surrey Heath Health and Wellbeing Board. He informed Members that Surrey Heath Health and Wellbeing Board had been established in April 2013 in response to the Health and Social Care Act 2012, which had introduced the biggest changes to health arrangements since the establishment of the NHS. The Act had introduced local commissioning of health services through Clinical Commissioning Groups and a requirement for upper tier authorities to establish Health and Wellbeing Boards.

The Surrey Heath Health and Wellbeing Board was not a statutory body but had been formed to look at issues specific to Surrey Heath. Members were reminded that the Surrey Heath Clinical Commissioning Group's boundary was virtually co-terminus with the borough boundary.

The membership of Surrey Heath Health and Wellbeing Board was comprised of Surrey Heath Borough Council, Surrey County Council Public Health, Surrey County Council Adult Services, and Surrey Heath Clinical Commissioning Group.

The aims and objectives of the Surrey Heath Health and Wellbeing Board were to be a strategic board and to harness opportunities for promoting and encouraging good health and active lifestyles. The Surrey Heath Health and Wellbeing Board looked at 5 themes, which mirrored the themes of the Surrey Heath and Wellbeing Board.

The Committee was informed that research had identified the 5 following main risks, which had been embodied in Surrey Heath Health and Wellbeing Board's Action Plan, which included tobacco smoking, raised blood pressure, obesity, physical inactivity, and alcohol. These areas would be looked at together with improving emotional wellbeing and health. The Plan was an evolving document and contained a number of actions which were underpinned by SMART targets.

The Plan contained 3 Sections:

- **Section 1 - Healthy Lifestyles.** This section contained several actions regarding campaigns to stop smoking, enforcement against smoking offences, alcohol, healthy weight, physical activity and diet.
- **Section 2 – Protection from Harm.** This included actions relating to prevention of excess winter deaths, falls, immunisation, domestic abuse, and self-harm and self-care.
- **Section 3 – Active and Supportive Communities.**

The Surrey Heath Health and Wellbeing Board was also working to develop a Workplace Charter for employers to demonstrate their commitment to health and wellbeing. It was reported that there was a lot of evidence that a healthy workforce could reduce absence and improve productivity.

The Committee was reminded that a Wellbeing Centre had been opened at the Windle Valley Centre in Bagshot, which housed a number of organisations which help sufferers of dementia and carers for those with dementia. It was reported that a Memory Garden was expected to be opened in Bagshot towards the end of April. Mr Pashen undertook to circulate further information on the purpose of the Memory Garden to Members.

Members noted a number of other areas of work being undertaken by the Care Connections Co-ordinator, who was part of the Diocese of Guildford Communities Engagement Team, including a pilot in Lightwater. This project was intended to connect services and resources with residents within the Lightwater community.

RESOLVED

- i) to note and thank Mr Pashen for his presentation; and
- ii) that further information on the purpose of the Memory Garden in Bagshot and the Surrey Heath Health and Wellbeing Board Action Plan be circulated to Members.

27/EP Southern Addictions Advisory Service (SAdAS)

Haydn Morris, Chief Executive Officer for Southern Addictions Advisory Service (SAdAS), informed the Committee that the organisation was an independent charity which had been operating in Surrey for 29 years. SAdAS was a contracting agency and worked with Surrey County Council, from whom it received most of its income, and was involved with the Surrey County Council's Health and Wellbeing Board.

The Committee was informed that the organisation employed 52 members of staff and had a Senior Management Team of 5.

SAdAS was currently principally commissioned to provide preventative work in relation to drugs and alcohol, although it still undertook some work with chaotic people using drugs and alcohol whose behaviour impacted upon the community. Although the organisation was contracted to work with 35 complex needs cases per year, it currently saw 186 per quarter.

Mr Morris informed Members that SAdAS had also worked with high risk people with drug, alcohol and mental health problems who presented a risk in the community but this work had now been decommissioned.

In order to utilise its experiences in this field, SAdAS had sought community connections funding and had developed the Welcome Project, which had been running for 18 months. It was recognised that loneliness and a sense of not feeling valued were key drivers for triggering anxiety, stress and poor wellbeing, which also impinged on an individual's physical health. The Project was designed to connect and involve people in existing networks already in place in their community. Surrey Heath in particular had seen a huge increase in this area of work since the project's inception.

The Committee was informed that SAdAS ran counselling services across the County, with over 100 volunteer counsellors providing drugs and alcohol counselling, and some mental health counselling. It was reported that the organisation provided 5,200 free hours of counselling per year.

The organisation also worked to help divert people with mental health issues who presented themselves at Hospital Accident and Emergency, into other services. This crisis aversion work would shortly be rolled out across the county.

Members were advised that, whilst clients were often referred by medical professionals and other agencies, 75% of their clients had contacted them directly.

The Committee was informed that SAdAS was also involved in housing matters and concentrated upon tenancy sustainment. It was reported that the average cost

of evicting somebody had been calculated at £32,000. The benefit of avoiding this measure was therefore recognised and the organisation assisted by using a variety of solutions to help avoid an eviction process.

Members discussed opportunities for the Council to help promote the organisation and its work in the community, including the Council's YouTube Channel, Heathscene, Surrey Heath Show, and through the Council's Social Media. It was therefore agreed to ask the Council's Media and Marketing Manager to liaise with Southern Addictions Advisory Service's communication officer.

RESOLVED

- i) to note and thank Mr Morris for his presentation; and**
- ii) that officers be asked to discuss appropriate methods to publicise Southern Addictions Advisory Service, as outlined above.**

28/EP Crossroads Care

Jenni Pringle, Care Operations Manager, and Sheila Hargreaves, Adult Clubs and Volunteering Manager, for Crossroads Care Surrey informed the Committee that the organisation was a leading charity which had been providing vital respite breaks to unpaid carers in Surrey for over 30 years.

It was reported that 3 in 5 people would become an unpaid carer in their lifetime and every day 6,000 people would start caring for someone close to them, saving the economy £119 billion a year. It was noted that in September 2014 Carers UK had reported that 6 out of 10 carers had been pushed to breakpoint.

Crossroads Care Surrey covered the whole of Surrey and had approximately 1,800 clients of all ages. It had over 200 Carer Support Workers who would go into people's homes and take over the caring responsibility for a specific amount of time. It was emphasised that the carer was the person providing the service; the Carer Support Workers supported them in this role.

The Committee was informed that Crossroads Care Surrey's core service was providing carer breaks. It provided regular respite breaks of 3 hours, funded by Surrey County Council, on a weekly or fortnightly basis depending upon the carer's needs. This would usually be on the same day, at the same time, with the same Carer Support Worker. This allowed the family to get to know their Care Support Worker and enabled the Support Worker to understand the family's needs and build trust. Carers were also able to purchase additional hours to add to their break or have an additional break on a different day.

Crossroads Care Surrey, in partnership with the NHS, offered a Professional End of Life Service which provided individually tailored practical and compassionate support to carers and people affected by life limiting illnesses during their last 12 months. A palliative care trained Carer Support Workers would take over the caring role to allow a carer to have regular breaks to help improve their quality of life and reduce stress and fatigue they might experience as a result of their caring

role. This service was funded by all 5 of the Clinical Commissioning Groups in Surrey.

The Committee was informed that, before going into a carer's home, Carer Support Workers received training; they undertook 13 mandatory training courses, plus any specialist training required.

It was reported that many of the organisation's Carer Support Workers had worked for Crossroads Care Surrey for many years; 1 Carer Support Worker had been working with a family for 25 years. The Carer Support Workers undertook a range of activities which improved the quality of a cared for person's life, including interacting with the cared for person, meal or drink preparation, light domestic duties, or attending to personal or health care needs. It was noted that respite time could also allow the opportunity for parents caring for a disabled child to spend time with other children.

Crossroads Care Surrey also had a variety of clubs for adults with varying disabilities which were run throughout Surrey. Whilst some of these clubs provided a safe environment for cared for people, in order for carers to enjoy an extended respite break, other clubs provided carers an opportunity to meet other carers and receive support and advice from trained professionals.

Members were informed that the organisation was compliant with the Care Quality Commission and Ofstead, and was monitored annually by Crossroads Care Quality Evaluation Tool (CROQUET). An annual carers' questionnaire continued to demonstrate the organisation's improvement, with 98% of carers stating that they got on well with their Carer Support Worker and 98% saying their quality of life was improved by their respite breaks.

The Committee discussed opportunities for the Council to help promote the organisation and its work in the community. It was therefore agreed to ask the Council's Media and Marketing Manager to liaise with officers from Crossroads Care Surrey.

RESOLVED

- i) to note and thank Ms Hargreaves and Ms Pringle for their presentation; and**
- ii) that officers be asked to discuss appropriate methods to publicise Crossroads Care Surrey, as outlined above.**

29/EP Committee Work Programme

The Committee agreed not to schedule any items for the 2015/16 Work Programme pending the Governance Working Group's review of the Council's scrutiny arrangements. Discussions were ongoing regarding the Chief Executive of Frimley Health Trust attending a future meeting.

The dates for meetings in the 2015/16 municipal year were discussed and it was noted that the meeting in January 2016 was scheduled on a Wednesday, rather

than on a Tuesday, the committee's usual day for meeting. It was, therefore, agreed to ask the Chief Executive to move the January meeting of the committee to Tuesday, 19 January 2016.

Members were informed that, following recommendations by the committee, the Spring 2015 publication of Heathscene would contain articles on Thames Water and Surrey Search and Rescue.

The Chairman expressed her gratitude to all members who had served on the Committee that year.

Chairman