Minutes of the Meeting of the HEALTH LIAISON PANEL held at the Council Chamber, Epsom Town Hall on 11 July 2023

PRESENT -

Councillor Christine Cleveland (Chair); Councillors Chris Ames, Liz Frost, Phil Neale (as nominated substitute for Councillor Bernice Froud), Bernie Muir and Kim Spickett

<u>In Attendance:</u> Councillor Rod Ashford (Reigate and Banstead Borough Council), Jamie Gault (Chief Executive Officer (Action for Carers)), and Markku Slattery (Director of Strategy and Transformation (Surrey Downs Health and Care Partnership))

Absent: Councillor Bernice Froud

Officers present: Rachel Kundasamy (Community Development Manager), Gayle Osbourne (Community Development Officer) and Serena Powis (Community Development Officer)

1 DECLARATIONS OF INTEREST

Councillor Chris Ames, Other Interest: Councillor Chris Ames wished to declare that his wife worked for the NHS and that he was also a carer.

Councillor Liz Frost, Other Interest: Councillor Liz Frost wished to declare a potential conflict of interest due to other commitments in the healthcare sector.

Councillor Kim Spickett, Other Interest: Councillor Kim Spickett wished to declare a potential conflict of interest due to other commitments on the malnutrition pathway.

2 MINUTES OF THE PREVIOUS MEETING

The Minutes and the Restricted Minutes of the meeting of the Health Liaison Panel held on 7 March 2023 were reviewed by the Panel. The Panel agreed that they were a true record and authorised the Chair to sign them.

3 ACTION FOR CARERS - 'THE LOCAL PICTURE AND THE VALUE OF CARERS' UPDATE

The Panel received a presentation (published as a supplement to the agenda) from Jamie Gault, CEO (Action for Carers).

The following matters were considered by the Panel:

- a) Action for Carers acknowledged that they can generate almost 5x return on investment for every £1 received, and therefore more funding would inevitably increase their opportunities to support and thus their reach and impact.
- b) The impact of the disparity between the language used on the 2011 and 2021 censuses was considered. The structure of the question surrounding carers and care responsibilities was changed between the two censuses, leading to a potential difference in how carers may self-identify and therefore answer, consequently altering the number of carers recorded.
- c) It was acknowledged that carers do not always self-identify their care roles and responsibilities and so may not realise that help is available. Action for Carers commented that they seek to mitigate this by offering multiple referral channels, such as their website. They also ensure that their promotional marketing is simple and clear for the public to understand and therefore identify with. They commented that these channels have evidenced success as their referrals have increased 25% since they launched the marketing. However, they also recognise that there are still barriers towards reaching approximately 20,000 'hidden carers' who do not recognise their care responsibilities.
- d) Other partnership and promotional opportunities were discussed, including SMEF, health and wellbeing boards, social media and utilising Cllr's networks.
- e) The need to support the borough's digitally excluded residents in accessing Action for Carers was acknowledged and discussed.

4 SURREY HEARTLANDS - SERVICE UPDATE

The Panel received a presentation (published as a supplement to the agenda) from Markku Slattery, Director of Strategy and Transformation (Surrey Downs Health and Care Partnership).

The following matters were considered by the Panel:

a) The presentation included information on the development and expansion of local NHS services. It was acknowledged that there is a current shortage of NHS staff, and it is imperative to ensure that the new models are not impacted by this shortage. While it was recognised that healthcare staff is a national challenge, it was also acknowledged that the interdisciplinary model outlined in the presentation will bring teams together and make services more collaborative and streamlined. This change will improve service efficiency by preventing duplication that occurs in silo. Integrated working also expands staffs' skill sets so they can support a wider array of concerns. Additionally, teams have operational protocols to oversee capacity and ensure they can adequately provide care.

- b) It was acknowledged that digital monitoring could be leveraged in the developments, but it is undergoing integration within the new services. These integrated digital models add value, especially with those with complex needs, but it is not necessarily the best care for all. Instead, a bespoke care plan will be decided by the multi-disciplinary teams.
- c) It was commented that the developments do not accommodate, nor concern, urgent response to mental health crises. Currently this area of development does not support complex acute mental health, which is instead supported in the community elsewhere.
- d) It was queried whether the co-design approach outlined in the community developments – enabling people to identify what they want and centering those findings in the developments – is possible when service users are not medically qualified. Surrey Downs Health and Care Partnership reaffirmed the distinction between medical services that provide clinical care versus community support. Co-design is not about assessing care or measuring outcomes but identifying unmet health and wellbeing desires. Therefore, what is offered on healthcare wards may differ from what residents want in the community.
- 5 EPSOM AND ST HELIER UNIVERSITY HOSPITALS NHS TRUST 'BUILDING YOUR FUTURE HOSPITALS' UPDATE

The Panel received a written 'Building Your Future Hospitals' update from Epsom and St Helier University Hospitals NHS Trust.

The Chair encouraged the Panel Members to submit in writing any questions they may have in relation to the content of the update to Officers.

The meeting began at 7.30 pm and ended at 8.50 pm

COUNCILLOR CHRISTINE CLEVELAND (CHAIR)