

**Healthy Staffordshire Select Committee – 29 October 2018
District/Borough Digest**

Under the Health Scrutiny Code of Joint Working with District and Borough Councils, Authorities have undertaken to keep relevant Partners informed of their consideration of health matters having regard to the general working principle of co-operation and the need to ensure a co-ordinated Staffordshire approach. Therefore, the following is a summary of the business transacted at the meeting of the Healthy Staffordshire Select Committee held on 29 October 2018 - link to Agenda and reports pack:

<http://moderngov.staffordshire.gov.uk/ieListDocuments.aspx?CId=871&MId=8816>

Agenda Item	District(s)/Borough(s)
<p><u>Staffordshire and Stoke on Trent Sustainability and Transformation Partnership (STP) – update on issues that have arisen from the Select Committee</u></p> <p>The Committee considered a report of the STP which summarised the work that had been conducted by the Committee whilst scrutinising the STP workstreams. The report set out the outstanding issues raised and the STPs response to questions raised which were not answered at the related meetings.</p> <p>Simon Whitehouse, STP Chief Executive and Programme Director, Sir Neil McKay, STP Chairman and Roger Wade, Medical Director attended the meeting to present the report and answer questions. They felt that the scrutiny process had helped the STP to focus on the challenges ahead in implementing the programmes.</p> <p>The following comments and questions were asked:</p> <ol style="list-style-type: none"> 1. Concern that not all GP practices accommodated Mental Health practitioners. 2. The interdependency between the different work streams is vital for the STP to achieve its objectives. 3. A Member asked a question on the STP deficit and if officers were confident that the changes and workstreams would reduce the overall deficit as originally intended. They also asked about the funding for the extra emergency beds at Royal Stoke. A workshop had been scheduled on 14 November for more detail on the budget. 4. Another member asked about the Workforce stream and what specifically were they doing to attract and retain staff. The national and local approaches where outlined. 5. A question was asked about the working relationship with other areas such as Derbyshire and Cheshire and the Committee was informed that the STP had to continually look at neighbouring partners as their services were frequently used. 6. The greatest risk under the Digital workstream was that staff feared getting it wrong and others gaining access to information they were not entitled to. 	<p>All Districts and Boroughs</p>

7. Clinical leadership is now strong enough to carry through the changes needed and relationships are now very positive.
8. The Committee felt that the Prevention agenda was not as strong as they had expected. The STP believed that the prevention workstream contained many long-term objectives which needed partnership working. However, it was important not to lose sight of the quick wins around smoking cessation, screening and reduction in the number of diabetics. Both needed to be pursued.
9. With regard to the Estates workstream, it was reported that the development of the next 20 estate projects were critical and could not be delayed. The implementation timeline would be available soon and would be shared with the Committee.

A Stoke on Trent and Staffordshire Approach to Childrens and Young Peoples Emotional Wellbeing and Mental Health 2018-2023

All Districts and Boroughs

The Committee considered the report of the Cabinet Member for Children and Young People covering the “Starting Well, Living Well, Supporting Well 2018 - 2023” Children and Adolescent Mental Health (CAMH) strategy covering Staffordshire and Stoke on Trent.

The Strategy is an Integrated approach designed to make best use of the resources available and the changes will start with the new Commissioning of low to moderate needs with one lead provider in place of the current five.

Members raised the following points:

- why was the strategy so medically based and not school or prevention based? In response to the questions it was explained that the strategy was written with all partners and that it wasn’t intended to be a medical model, but this will be looked at. The focus of the strategy was a whole systems approach which included schools and other children based service providers.
- Delivery plans would be in place to support the strategy and would be refreshed each year and were required by the CCG’s who wanted them to be specific and meet local need.
- There was a question on how waiting times could be reduced. Officers explained that the strategy would not be able to address these issues and the CCG would have to explain how this could be achieved. The strategy was about developing early intervention services which reduce demand for services later on and therefore demand for services.

It was agreed that the strategy and direction of travel as outlined in the report be agreed in principle subject to more work taking place on the prevention agenda. The Committee noted the challenges faced in delivering the plan with partners; and the Committee asked for the following information:

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| <ul style="list-style-type: none">i. MAC budget provision.ii. Had the strategy gone through a similar process to the Joint Strategic Needs Assessment (JSNA).
The figures for Tier 3 services in the report showed significant increase in 2017/18 and Members questioned these numbers. | |
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Their next meeting will be held on Monday 3 December 2018.