

## Minutes of the Meeting of the Health and Wellbeing Overview and Scrutiny Committee held on 24 January 2019 at 7.00 pm

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**Present:** Councillors Victoria Holloway (Chair), John Allen (Vice-Chair), Tom Kelly, Cathy Kent, Elizabeth Rigby (*arrived 7.04pm*) and Joycelyn Redsell

Ian Evans, Thurrock Coalition  
Kim James, Healthwatch Thurrock Representative

**In attendance:** Roger Harris, Corporate Director of Adults, Housing and Health  
Ian Wake, Director of Public Health  
Jeanette Hucey, Director of Transformation, Clinical Commissioning Group  
Malcolm McCann, EPUT, Executive Director of Community Services and Partnerships  
Mark Tebbs, Director of Commissioning, NHS Thurrock CCG  
Jenny Shade, Senior Democratic Services Officer

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Before the start of the Meeting, all present were advised that the meeting may be filmed and was being recorded, with the audio recording to be made available on the Council's website.

### **38. Minutes**

The Minutes of the Health and Wellbeing Overview and Scrutiny Committee held on the 8 November 2018 were approved as a correct record.

The Minutes of the Extraordinary Health and Wellbeing Overview and Scrutiny Committee held on the 5 December 2018 were approved as a correct record.

### **39. Urgent Items**

No urgent items were raised.

### **40. Declarations of Interests**

No interests were declared.

### **41. HealthWatch**

No items were raised by HealthWatch.

### **42. Verbal Update - SERICC**

Councillor Holloway stated that Kim James from HealthWatch had helpfully and rightly brought to the committee's attention the matter of grant funding for

SERICC being stopped before an alternative provision had been put in place. Councillor Holloway had written to the Clinical Commissioning Group with the committee members concerns who in turn agreed to extend the funding to the 31 March 2019 whilst the pathway for sexual assault and abuse services could be developed through evidence base. Councillor Holloway stated that the Clinical Commissioning Group had been excellent in providing the information requested and discussing the plans going forward with the good intentions on getting the new pathway right. There was a considerable amount of work still to be done and a long way to go for those involved in developing the pathway to understand the needs of those who had experienced sexual violence and abuse and to understand the needs of their treatment and support. That both clinical and non-clinical options would need to be fully explored and developed so there was a true choice for both women and men that needed the support.

Councillor Holloway further added that due to the timing of the grant funding for SERICC an ambitious deadline had been set for the new pathway. That further evidence was still being collected through a Joint Strategic Needs Assessment and through discussions with service users which would not be completed by the proposed deadline. Therefore Councillor Holloway would write to the Clinical Commissioning Group to express her ongoing concerns and request that the evidence gathered should be considered properly and not rushed into by the 1 April 2019 deadline. So proposing that the existing system remain in place and resourced until all were assured the new system was fit for purpose.

Mark Tebbs confirmed the Clinical Commissioning Groups commitment for the outcome of the services to ensure the best practice was delivered.

Kim James stated that the concern was originally raised to ensure that an alternative provision would be in place before the grant money had stopped and thanked the Chair for her continued commitment.

The Chair requested that this item be added to the work programme for the 7 March 2019 committee.

#### **43. Briefing Note - Referral to the Secretary of State : Orsett Hospital**

Roger Harris, Director of Adults, Housing and Health provided a brief update on the referral made to the Secretary of State on the closure of Orsett Hospital.

A draft letter had been sent to the Sustainability and Transformation Partnership and the Clinical Commissioning Group Joint Committee for comment to which a response had been received. A letter had been sent to the Secretary of State on the 8 January 2019 to which a letter had been received back requesting further information. A further letter had been sent back to the Secretary of State on the 18 January 2019 with this requested information.

Councillor Redsell stated that she hoped the process would not put the proposed four Integrated Medical Centres in jeopardy. Roger Harris reassured Members that planning of the Integrated Medical Centres was well advanced and would continue. Although there may be some delay as no formal agreements, tenders or planning permissions would be adhered to. Roger Harris stated at this time there was no precise timetable and that the Secretary of State may decide to look at the referrals made by Thurrock and Southend on Sea at the same time.

The Chair stated that all Members were in agreement that the Integrated Medical Centres should happen.

#### **44. Briefing Note - NHS Long Term Plan**

Roger Harris, Director of Adults, Housing and Health, provided a brief update on the NHS Long Term Plan that had been published on the 7 January 2019 and referenced Members to the Executive Summary that had been published in the agenda.

Members agreed that a more detailed report be presented at the 7 March 2019 committee.

#### **45. Adult Mental Health Service Transformation**

Ian Wake, Director of Public Health, presented the report that set out the work undertaken to date to address problems in the local mental health and care system in Thurrock. It also set out plans with NHS Thurrock Clinical Commissioning Group, NHS and third sector provider partners to transform mental health services moving forward. The report also highlighted the issue of suicide prevention and how best to integrate commissioning of services between the Council and NHS. Ian Wake stated that the report sought HOSC support for the new programme of transformation and for proposals to reform the section 75 agreement between the Council and EPUT.

At the request of the Chair, Ian Wake presented a comprehensive and detailed PowerPoint presentation to members that covered:

- Epidemiological Overview of Mental Health
- Projected number of older people in Thurrock with depression – up to 2030
- Stakeholders
- Key Themes
- How to address under-diagnosis
- How to get into the system
- Emergency Response Pathway
- New treatment offer for Common Mental Health Disorders
- New enhanced treatment model
- Integrated Commissioning
- Next steps

This presentation can be found on-line at the following link.

<https://democracy.thurrock.gov.uk/documents/b16658/Mental%20Health%20Transformation%20HOSC%20Presentation%2024th-Jan-2019%2019.00%20Health%20and%20Wellbeing%20Overview%20a.pdf?T=9>

The Chair thanked Ian Wake for the very comprehensive presentation.

Councillor Redsell thanked Ian Wake for the presentation and stated that more should be done at an earlier age for those older children being diagnosed now with mental health issues.

Ian Wake stated there was no simple answer as there were multiple causes such as bullying at schools and plans were in place to address this. Councillor Redsell stated that bullying also needed to be addressed as this was a contributory factor with schools not picking this up early enough and schools would be expected to action this but in cases would not have sufficient time and resources to do this. Ian Wake continued by stating that excessive social media usage caused depression and anxiety in people. With neglect and sexual assault being key contributing factors for depression. That Mental Health school based teams were in schools addressing these issues and plans were in place to expand the mental health treatment provision.

The Council should encourage more physical activity. Ian Wake stated there was no simple answer to the physical activity question but there was a range of activities, sport provisions and infrastructures in place and this would be the opportunity to promote these.

Councillor Redsell continued to state that she did not know who the Local Area Coordinator was for her ward. Roger Harris agreed to organise an introductory meeting between Councillor Redsell and the Local Area Coordinator covering her ward.

Councillor Redsell questioned the 8628 residents being undiagnosed. Ian Wake stated these were primarily people who were unable to seek and ask for help. A high risk of depression was getting older and this may be stigma amongst elderly residents who may be too proud to ask for help. Councillor Redsell questioned whether the 8628 number was correct. Ian Wake stated that figures were produced by Public Health England following modelling undertaken by Imperial College in London based on demographics and was the best evidence base available.

Councillor Redsell stated that more could be done between the elderly and the young and referred Members to the popular TV programme that demonstrated the bond that brought the elderly and young together. Ian Wake agreed that the programme had some very valid points and demonstrated some opportunities.

Councillor Allen thanked Ian Wake for the presentation and questioned whether the waiting times for Thurrock Mind could get worse. Ian Wake stated

he did not have the figures for Thurrock Mind but the patients for IAPT NHS counselling service were being seen within 6 weeks. Ian Wake agreed that a long term solution would need to be addressed. Councillor Allen welcomed the change in waiting times and agreed that early intervention was vital.

Ian Evans had a concern on the individual placement scheme to which those people that received back-to-work support who had mental health conditions but did not fit in the parameters of IPS and questioned what plans were in place. Mark Tebbs stated there was evidence base around employment support with people with serious mental health illnesses. An employment specialist would be embedded in the mental health teams as part of active treatment programme and this had produced the best results. Ian Evans further questioned whether as part of the model would the third sector specialist employment be involved as well as having employment specialists embedded into the CMHT teams. Mark Tebbs stated that would go back to working holistically with local authority colleagues and working closely to ensure that those offers were joined up.

The Chair stated that this needed to be handled delicately when built into the model being designed.

Councillor Kent thanked Ian Wake for the presentation and questioned how the scheme would be monitored. Ian Wake stated there were plans to move to an outcome framework that would measure if people were getting better.

Councillor Kent stated that more awareness had to be undertaken inside and outside schools with schools having to take some responsibility. Councillor Kent questioned that with insufficient general practitioners in Thurrock how patients could be reassured that when they ring for appointments their calls would be answered. Ian Wake stated that it was a competitive market for general practitioners and that with the introduction of the Integrated Medical Centres would make Thurrock a more attractive place for new general practitioners to work. For those patients accessing mental health services would follow the crisis pathway which would enable people to access specialist crisis care via 111.

Councillor Kent asked whether there was sufficient staff to cope with the expected number of calls and how the 111 service would be publicised. Mark Tebbs stated that the business case had been finalised with the secured funding being built into the contract with a 6 to 9 month mobilisation plan. That it would take up to 9 months to recruit staff and was ambitious that the model would be up and running by next winter. That engagement would be made with members of the public and publicised.

The Chair questioned whether a similar service would be presented to young people and young children. Ian Wake stated the two plans would be undertaken under the Joint Strategic Need Assessment and through the School Mental Health Summit. Roger Harris stated that the Health and Wellbeing Board was the oversight group to ensure that the plans came together.

Malcolm McCann praised Ian Wake on the quality of the presentation and work undertaken into the analysis on the direction of travel. Malcolm McCann applauded the priority of addressing mental health in Thurrock and complimented the health and social care commissioners. That EPUT had been working hard to transform services and were on a better journey of recognising the need to work within localities such as Thurrock. With EPUT having a strong desire that mental health services should go into the Integrated Medical Centres and commitment to offering services locally.

Councillor Rigby questioned how schools were educating children on social media. Ian Wake stated that social media was a risk factor in schools and that there was mental health teams based in schools who would discuss and address such issues.

Councillor Kelly questioned whether Thurrock had a high rate of mental ill health compare to the national average. Ian Wake stated that he did not have the figures to hand and would provide this information for Members.

Councillor Kelly questioned the comparison of mental health cases in urban areas compared to the number of cases in rural areas. Ian Wake stated that this would depend on the type of urban and what type of rural areas and that age was a key drive into depression so was hard to separate. That there was strong evidence that living near green areas and trees the less likely people would suffer from depression. That there were dedicated members from the Public Health Team who worked alongside the Planning and Regeneration teams and conversations were taking place. This would be a key opportunity to get it right in the local plan. Mark Tebbs referred Members to the Mental Health Needs Index with the University of Manchester analysed all the numbers nationally where a score was given per area on their mental health needs. Further to Councillor Kelly's earlier question on the rate of mental health compared to the national average, Thurrock was broadly in the middle with significantly higher needs compared to Southend.

The Chair stated that it was evident that surrounding areas affected mental health and this should be addressed.

Councillor Kelly referred Members to Thurrock's population increase by 0.6% and that it was disappointing that new housing planning applications were being brought to committee but there appeared to be little prioritisation on health provisions. Roger Harris stated over the last 12 months there had been a housing and planning sub group alongside the Health and Wellbeing Board to try and shape and influence the local plan. That when planning applications were submitted it would be the intention to have early dialogue with developments to discuss the needs required.

The Chair stated that having recently sat on the Planning Committee it was evident of the constraints in the law in what the Council can do.

Members questioned where they should direct their constituents if asked about a referral for mental health. Roger Harris stated that the starting point would be either through their general practitioner or to ring 111. That the recommended route would be to contact Thurrock First who were open 7 days a week, 7am to 7pm and were able to make referrals to Grays Hall.

The Chair stated it was vital that local general practitioners received the appropriate training to ensure the right person was being seen and as quickly as possible.

The Chair stated it was good to hear that finally we were addressing the disparity in money with regards to mental and physical health and that once we start to treat mental health the same as we treat and cure cancer we had the system that would work for people.

The Chair also stated that the 8-12 week waiting times was still very concerning but recognised the work being put in to reduce these times. Ian Wake referred Members to the PowerPoint that displayed the work already done and that treatment times were down.

That Chair referenced that crisis care was a big issue and previously mentioned adjustments in beds and questioned at what point would we not need crisis care as money had been put into prevention. Mark Tebbs stated that more money was being invested into IAPT this financial year with more high intensity training being undertaken to keep up with the ongoing demand. Those specific pathways would be available for specialist services. Mark Tebbs stated that important point to make was the people can refer themselves and not have to wait for general practitioner appointments. The crisis care had been successfully implemented into Basildon Hospital and had been a good winter from a mental health prospective with some good response times. That regular winter plan meetings took place to look at all the indicators.

The Chair questioned when the plans would be put into place. Ian Wake stated he would like to manage expectations on timescales as this was a very complex system. With Thurrock at the start of formal transformation journey with a working case change document be ready by the end of the calendar year.

Councillor Allen requested the contact numbers for Thurrock First. Roger Harris agreed that the numbers would be forwarded to Members following the meeting.

## **RESOLVED**

- 1. That Health and Wellbeing Overview and Scrutiny Committee notes the contents of this report and comments on the direction of travel in terms of adult mental health system transformation**

2. **That Health and Wellbeing Overview and Scrutiny Committee comments on and supports the proposals as set out in section 7.14 to 7.15 of this report to develop a new Section 75 Agreement with EPUT from 1 April 2019 based on a longer term contract, with a revised performance and budget framework**
3. **That Health and Wellbeing Overview and Scrutiny Committee comments on and supports and approves the proposals set out in section 10 of this report in relation to suicide prevention.**

#### **46. Work Programme**

The Chair asked Members if there were any items to be added or discussed for the work programme at the last committee for this municipal year.

Members agreed that the NHS Long Term Plan report be added to the 7 March 2019 committee.

Members agreed that the SERICC (Sexual Abuse Counselling report) be replaced with a report titled Sexual Violence, Treatment and Recovery Pathway to the 7 March 2019 committee.

Members agreed that the Mental Health Update Care Package should be added to the work programme for the 2019/20 municipal year.

**The meeting finished at 8.56 pm**

Approved as a true and correct record

**CHAIR**

**DATE**

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