

Minutes of the Health and Wellbeing Board

15 October 2015

-: Present :-

Ian Ansell, Caroline Dimond, Councillor Ian Doggett, Pat Harris, Fran Mason, Mairead McAlinden, Councillor Derek Mills (Chairman), Martin Oxley, Councillor Julien Parrott, Nick Roberts, Councillor Jackie Stockman and Dr Liz Thomas

11. Apologies

Apologies for absence were received from Mayor Oliver, Richard Williams, Caroline Taylor who was represented by Fran Mason and Tony Hogg who was represented by Ian Ansell.

12. Minutes

The Minutes of the Health and Wellbeing Board held on 18 June 2015 were confirmed as a correct record and signed by the Chairman.

13. Declaration of interest

Councillor Doggett declared a non-pecuniary interest as he is a lay member of the Joined Up Medicines Optimisation Group.

14. CAMHS Transformation Plan Overview

The Board considered a report that sought support for the CAMHS Transformation Plans. Members noted a requirement of the transformation plans was for the ambition of the South Devon and Torbay Clinical Commissioning Group (CCG) to align with the priorities set out in the Department of Health's publication 'Future in Mind'.

The transformation plans set out a number of priorities including:

- eating disorders;
- crisis intervention and intensive home treatment service;
- prevention and resilience and links to the schools pilot;
- funding during the life of the plan;
- infant mental health; and
- an improved Neurological Development Assessment Service.

Members were aware of the issues people had experienced when trying to access the CAMHS Service, whilst they supported the plan and welcomed the ambitious nature of the plans, Members sought information regarding the current position of the CAMHS Service (e.g. numbers accessing the service) and performance measures in order to evaluate whether the transformation plans were effective.

Resolved that the Health and Wellbeing Board:

- (i) supports the broad priorities contained within the submitted report as the agreed use of the additional CAMHS funding allocated to the Clinical Commissioning Group's by NHS England;
- (ii) member organisations agree to work jointly on the priorities where appropriate; and
- (iii) receive updates at appropriate junctures particularly at the plans mid point where implementation can be reviewed and priorities reassessed.