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Meeting	Health and Wellbeing Board
Date	6 September 2017
Present	Councillors Runciman (Chair), Craghill, Cannon and Rawlings  Sheenagh Powell (Lay Member and Audit Committee Chair, NHS Vale of York CCG) - Substitute for Keith Ramsay  Fiona Phillips (Assistant Director, Consultatnt in Public Health) - Substitute for Sharon Stoltz  Michael Melvin (Assistant Director, Adult Social Care, CYC) - Substitute for Martin Farran  Jon Stonehouse (Corporate Director, Health, Housing & Adult Social Care, CYC)  Lisa Winward (Deputy Chief Constable, North Yorkshire Police)  Sarah Armstrong (Chief Executive, York CVS)  John Clark (Chair of Healthwatch York) - Substitute for Siân Balsom  Ruth Hill (Director of Operations (York and Selby) Tees, Esk and Wear Valleys NHS) - Substitute for Colin Martin  Mike Proctor (Deputy Chief Executive, York Teaching Hospital NHS Foundation Trust) - Substitute for Patrick Crowley  Dr Shaun O'Connell (Medical Director, NHS Vale of York CCG)  Phil Mettam (Accountable Officer, NHS Vale

of York CCG)

Keren Wilson (Chief Executive, Independent Care Group),

Apologies

Keith Ramsay, Sharon Stoltz, Martin Farran, Sian Balsom, Julie Warren, Colin Martin, Patrick Crowley, Mike Padgham

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## **88. Declarations of Interest**

Board Members were invited to declare any personal, prejudicial or disclosable pecuniary interests, other than their standing interests, that they had in relation to the business on the agenda.

No further interests were declared.

## **89. Minutes**

Resolved: That the minutes of the meeting of the Health and Wellbeing Board held on 12 July 2017 be approved and signed by the Chair as a correct record.

## **90. Public Participation**

It was reported that there had been no registrations to speak at the meeting under the Council's Public Participation Scheme.

## **91. Appointments to York's Health and Wellbeing Board**

Board members considered a report which asked them to confirm the following new appointments to its membership:

- **Tom Cray**, Senior Strategic Community Lead, City of York Council (CYC) – as second substitute for Martin Farran, Corporate Director, Health, Housing & Adult Social Care, CYC;
- **John Clark**, Chair of Healthwatch York - as first substitute for Siân Balsom, Manager of Healthwatch York;
- **Maxine Squire**, Assistant Director, Education & Skills, CYC – as second substitute for Jon Stonehouse,

Corporate Director of Children, Education & Communities,  
CYC.

Resolved: That the above appointments be confirmed.

Reason: In order to make these appointments to the Health and Wellbeing Board, in accordance with the Board's terms of reference.

**92. Annual Report - Safeguarding Adults Board (Annex C available online only)**

Board members received a report which provided information on the work of the Safeguarding Adults Board (SAB) over the course of the year 2016/17, summarised in Annex B. The full annual report had been made available online as Annex C.

Kevin McAleese CBE, Independent Chair of the SAB, highlighted the following points in his presentation at the meeting, which included the slides at Annex A (page numbers 25-42 refer to these):

- The 3 statutory members of York SAB were City of York Council, North Yorkshire Police and Vale of York CCG.
- York SAB's annual budget, at just over £50k, was the smallest in the region.
- Making Safeguarding Personal (MSP) was a key area and the case study at p.29 illustrated how a complex case should be dealt with using this person-centred approach.
- There had been no Safeguarding Adults Reviews (SARs) in the year, but a 'lessons learned' case was detailed at p.38.
- All planned developments had been achieved in the year.
- The peer review carried out in January 2017 (p.36) had been highly complimentary of the SAB's work.

In response to questions from Board members, Mr McAleese acknowledged that self-neglect was a challenging area in terms of providing effective help for vulnerable adults, as people could not be forced to accept what was on offer. The problem of isolation was also recognised, and the SAB planned to spend a day examining the vulnerabilities of those living alone. Adult services were very lean in terms of resources and this was the case across all areas, due partly to problems with recruitment, which the SAB would be looking at. The issue of abuse by

service providers was a concern, since people could choose to buy services from unregulated providers. However, the SAB was optimistic that it could be as effective as possible in safeguarding adults within this challenging environment. The 'lessons learned' case study at agenda page 49 was an example of the effect of these challenges, when despite the council's best efforts a service had been unobtainable.

The Chair thanked Mr McAleese for his presentation and it was

Resolved: That the report and the additional information presented at the meeting be noted.

Reason: To keep the Board apprised of the work of the Safeguarding Adults Board.

### **93. Progress on the Ageing Well Theme of the Joint Health and Wellbeing Strategy 2017-2022**

Board members received a report which asked them to note and comment upon progress made towards the delivery of the 'ageing well' theme of the joint health and wellbeing strategy 2017-2022, launched in March 2017.

The Chief Executive of York CVS explained that the report had been developed by an operational group of the Voluntary and Community Sector Ageing Well Forum, set up to identify gaps in current support for older people in the city and possible solutions. The group included members from a number of community organisations, as well as the CVS and the council. Places were still available should anyone wish to join the group, or to suggest organisations that could contribute.

Annex A to the report outlined progress and action planning already under way against the priorities in the strategy. In respect of the top priority, to reduce loneliness and isolation for older people, the group had begun to focus on two issues - fuel poverty and transport. Annex B set out an organisational case study, provided by Older Citizens Advocacy York (OCAY), which highlighted the effect of poverty on loneliness.

In response to Board members' questions, the Chief Executive of York CVS confirmed that:

- Regarding action on fuel poverty, there was a need to match up existing services with those who needed them, and as a starting point experts would be invited to attend Ageing Well Forum meetings to advise on this;
- In terms of action to be taken, the process was at an early stage; however, a five-year action plan was in development, in which the Board's involvement would be welcome;
- There were significant issues for older people around public transport, to which there were no easy answers and which the group planned to find out more about;

The Assistant Director of Adult Services (CYC) indicated that there was now a post within the council's Future Focus programme dedicated to information and advice, which would tie in with the work on this theme.

Resolved: That the report and additional comments be noted.

Reason: To keep the Board informed as to progress on delivery against the ageing well theme of the joint health and wellbeing strategy 2017-2022.

#### **94. Presentation: Introducing Ways to Wellbeing - York's Social Prescribing Service**

The Board received a report, and a presentation from the Chief Executive of York CVS, which introduced 'Ways to Wellbeing', York's social prescribing service. Presentation slides were attached as Annex A to the report

Put simply, *Ways to Wellbeing* was '*a way to give people a little extra support at a time they need it most*'. Starting with a meeting over a cup of tea, people were given time to talk about their situation, enabling them to open up and identify the support they needed. They could then be connected to local community support which addressed these needs, thus reducing reliance on GPs and other statutory services. Over 200 referrals had been received so far and an evaluation of the first year showed that GP appointments had reduced by 30% for those using the service. After the first three months, 80% of users reported a greater sense of wellbeing and 75% reported increased confidence; there had been a return of £1 for every 50p invested. Positive feedback had been received from GPs.

In response to a question from a Board member, it was acknowledged that preventing dependency on the service was not straightforward, given the range of people and support involved.

The Deputy Chief Constable, North Yorkshire Police, commented that the service also provided an opportunity to reduce pressure on the police, whose time was sometimes taken up by those who were simply lonely.

The Medical Director, NHS Vale of York CCG, expressed support for the service and noted that a similar approach had been adopted by Hull CCG.

The Chair thanked the Chief Executive of York CVS for an excellent presentation and it was

Resolved: That the presentation and report be noted.

Reason: To keep the Board apprised of the Ways to Wellbeing Service.

## **95. Report on York Older People's Survey**

Board members considered a report which provided an overview of some key results emerging from a recent survey of older people in York, similar to that carried out in 2008.

At their meeting on 20 July 2016, the Board had agreed to support the survey, and work had begun through a multi-agency steering committee in October 2016. The survey had been distributed between May and June 2017, and analysis carried out in July and August. There had been a good response rate, with 912 completed surveys returned in total.

Results from the analysis to date were highlighted in Annex A to the report. Respondents generally reported good health, due to being physically active and having adequate social contact. Practical support with personal care or running a home was also important, though the importance of this as a factor in staying independent had decreased since 2008 as against that of social activities and contact.

Board members commented that there was a need to start joining up themes within the overall strategy so that everything worked together. It was also noted that improvements in technology, and older people's increasing willingness to engage with it, offered an opportunity to provide more services electronically in future.

Board members requested that action plans accompany a further more detailed report once full analysis of the survey results had been completed.

Resolved: (i) That the initial findings from the older people's survey be noted.

(ii) That the Board receive a further report, with the full results of the survey.

Reason: To keep the Board informed on the outcome of the survey.

(iii) That the Board consider at a future meeting how any recommendations from the survey might be taken forward.

Reason: To ensure that the survey has been worthwhile.

## **96. Ageing Well Performance Report**

Board members received a report which outlined the current position against a set of indicators relating to the Ageing Well theme within the Joint Health and Wellbeing Strategy 2017-2022.

The performance summary, at Annex A, was intended to provide an accessible starting point to facilitate discussion. It included a narrative update on performance against six measures, including: sufficient social contact; reducing unnecessary admissions to hospital; reducing delayed discharges from hospital; more older people still at home 91 days after reablement/rehabilitation; more older people happy with the care they receive.

During their discussion, Board members:

- Commented on the disconnect between what was being measured, the aims of the joint health and wellbeing strategy itself and the action plans in development for the ageing well theme of the strategy. The Assistant Director, Adult Social Care (AD) agreed that these national measures were becoming less useful as time went on.
- Queried the rise in emergency admissions for acute conditions that should not usually require hospital admissions (CCGOIS301). The AD confirmed that work was in progress to develop community solutions, in order to reduce the pressure on the NHS caused by this. An exercise was also ongoing to increase the number of hours provided for reablement, to tackle the reduced percentage of older people still at home 91 days after discharge from hospital (ASCOF2B1).

The Deputy Chief Executive, York Hospitals NHS Trust commented that, locally, there was a need to measure things in different ways and focus on the broader reasons why, for example, 50% of those in hospital for more than 7 days were no longer in need of acute care.

Resolved: (i) That the content of the performance report be noted.

Reason: To ensure understanding of the progress made against the Health and Wellbeing Strategy.

(ii) That Board members request any further information they may require on specific areas of work by emailing the Health and Wellbeing Partnership Co-ordinator.

Reason: To ensure that Board members have the required level of detail.

## **97. Developing Co-Production in York**

Board members received a report on progress towards developing an approach to co-production that could be used by all partners across the health and social care system in York.

In November 2016, the Board had committed to following a co-design and co-production approach to all future major changes

to health and social care changes. City of York Council had agreed to work with Healthwatch York to develop a co-production strategy for the city.

Following discussions with residents and stakeholders at an event in July entitled 'People and Places: York goes Global', an initial draft co-production document had been produced and was attached at Annex A. Two options were presented:

**Option A** – to change the focus of this piece of work and agree to the development of a set of guiding principles for co-production. This was the recommended option, in the light of matters raised at the July event regarding the practicalities of working together and the need to involve residents as active citizens rather than passive recipients of services.

**Option B** – to proceed as originally intended and develop a co-production strategy for the city.

Board members commented favourably on the proposed approach and the document produced to date. They stressed the need to ensure accessible language, avoiding terms such as 'reciprocity'.

Resolved: (i) That Option A be approved; to change the focus of this piece of work and agree to the development of a set of guiding principles for co-production.

Reason: To develop a set of principles that can be used by all organisations within the city and complement the common design principles being developed through the work of Future Focus and the Central Locality Delivery Group.

(ii) That agreement be given to progress this work to a third draft, using the comments already received to shape it, and to then proceed to formal consultation.

Reason: To ensure that the draft reflects the views of those consulted to date, and to seek further views on the document itself and on how best to embed the principles across the different organisations in the city.

## **98. Better Care Fund (BCF) Update**

The Board received an update report on progress towards developing the Better Care Fund (BCF) submission for 2017/19. The draft narrative plan was attached as Appendix 2 to the report. A final performance table showing York's position against national and local metrics for 2016/17 was included at Appendix 1.

The report outlined key differences between the 2016/17 plan and the 2017/19 plan. It noted the increases to local funding contributions, in line with improved BCF allocations, and summarised the proposed investment profile for the fund up to 2018/19. The final narrative plan was due to be signed off by the Chair, Vice-chair and senior officers under delegated authority, for submission with the detailed planning return by 11 September.

The Strategic Programme Consultant, Vale of York CCG attended to present the report. In response to questions from the Chair, she confirmed that officers from the council and the CCG were working well together to produce a jointly agreed draft plan that was balanced in terms of investment across schemes. There were still details to fill in, but the plan had identified ways to keep moving forward, focusing on the areas for which the BCF was intended.

Reference was also made to a forthcoming Care Quality Commission (CQC) Local System Review of York (Appendix 3 to the report, at agenda pages 155-161 refers).

Resolved: That the issues set out in the report be noted.

Reason: So that the Board has oversight of the Better Care Fund.

## **99. Update on the Humber, Coast and Vale Sustainability and Transformation Partnership (STP)**

The Board received an update report on the work of the Humber, Coast and Vale Sustainability and Transformation Partnership (STP).

The STP comprised nearly 30 organisations working together to realise a shared vision for the local health and care system, enabling everyone in the area to start well, live well and age well. Annex A to the report showed the area involved and the membership of the STP Board; Annex B provided details of current STP programmes. Progress was reported on place-based plans, integrated commissioning and STP-wide programmes. Recent developments had included:

- Creating a single management structure across the council and CCG in North-East Lincolnshire;
- Taking steps to integrate CCG and council budgets in Hull;
- Establishing an Accountable Care System Partnership Board and three locality sub-boards in the Vale of York;
- Beginning a review of acute hospital service provision in the Humber, Coast and Vale area;
- Developing a comprehensive communications and engagement strategy, plus additional forums to ensure the effective involvement of all partners.

The Strategic Lead, STP Communications and Engagement attended to present the report. She noted that a new Chief Officer of Hull CCG had recently been appointed after the previous incumbent stood down in July. Since this change in leadership, discussions had begun in relation to what should be done at a Humber, Coast and Vale level and at a more local level.

Board members raised issues regarding the current involvement of City of York Council and York service users in the STP and plans for hospital services across the area. The Chair advised that any questions be directed to the Strategic Lead, STP Communications and Engagement via email. The email address would be circulated.

**Resolved:** That the contents of the report be noted and that the Board continue to contribute to the work of the partnership via existing mechanisms.

**Reason:** To ensure that the Board is apprised of the Humber, Coast and Vale Sustainability and Transformation Partnership.

## **100. Future in Mind Local Transformation Plan (LTP) Refresh 2017**

Board members considered a report which provided an overview of work done to implement the Local Transformation Plan (LTP) and set out themes for inclusion in the 2017 refresh.

*Future in Mind* described the vision and steps to transform the way in which services supported children and young people's emotional and mental health. The LTP set out how to achieve the necessary changes locally, within the CCG area. The Vale of York CCG plan had been published in 2015 and refreshed in 2016. Detailed feedback from NHS England on that refresh, attached at Annex 2, indicated positive progress towards meeting the LTP aspirations and highlighted areas for further work. Detailed guidance for 2017/18 was attached at Annex 3. National guidance was currently focused on early intervention, workforce development and integrated commissioning and delivery structures. In setting local priorities, discussions with colleagues and feedback from service users and providers indicated a focus on systems issues that could have a significant impact on outcomes and experiences.

The Commissioning Specialist, Vale of York CCG attended to present the report. She highlighted the good feedback received on the content and implementation of plans over the past two years and acknowledged the need for further work across all sectors, especially with regard to looked after children, and young people in the criminal justice system.

The Corporate Director, Children, Education and Communities commented that council officers had had ongoing discussions with the CCG and fully endorsed the LTP. In particular, the jointly funded City of York school well-being service (paragraph 3b of the report) was an exemplar of good practice, being well engaged with both *Future in Mind* and with schools. There was a need to re-visit the funding model in the refresh, to build on that exemplar. More detailed discussions were needed around the local priorities in paragraph 11; these could be considered at the Board's next development session in October.

Resolved: (i) That the report and direction for the Local Transformation Plan (LTP) in 2017/18 be noted.

Reason: To keep the Board informed on the progress of the LTP.

(ii) That authority be delegated to the Chair of the Board to approve the final LTP.

Reason: To ensure that the LTP can be submitted to NHS England on 31 October 2017.

## **101. Work Programme**

Board members were asked to consider the Board's proposed work programme up to May 2018.

Resolved: That the current 2017/18 work programme be noted.

Reason: To ensure that the Board has a planned programme of work in place.

Cllr Runciman, Chair

[The meeting started at 4.30 pm and finished at 7.08 pm].