City of York Council	Committee Minutes
Meeting	Health, Housing and Adult Social Care Scrutiny Committee
Date	15 January 2025
Present	Councillors J Burton (Chair), Vassie (Vice- Chair), Baxter, Hook, Moroney, Rose, Runciman, Smalley, Wann and Wilson
In Attendance	Councillors Douglas (Leader of the Council and Executive Member for Policy, Strategy and Partnerships) and Steels-Walshaw (Executive Member for Health, Wellbeing and Adult Social Care)
Officers Present	Peter Roderick (Director of Public Health)
External Visitors	Natalie Caphane (Assistant Director of System Planning, Humber and North Yorkshire Integrated Care Board)

41. Apologies for Absence (5:33 pm)

No apologies for absence were received.

42. Declarations of Interest (5:33 pm)

Members were asked to declare at this point in the meeting any disclosable pecuniary interests or other registerable interests they might have in respect of the business on the agenda, if they had not already done so in advance on the Register of Interests. None were declared.

43. Public Participation (5:33 pm)

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

44. Establishing a Joint Committee between City of York Council and the Humber and North Yorkshire Integrated Care Board (5:34 pm)

Members considered a report setting out a proposal approved by the Council's Executive in November 2024 to form a Joint Committee (Section 75 agreement) between Humber and North Yorkshire Integrated Care Board (ICB) and City of York Council.

The Director of Public Health and the Assistant Director of System Planning, Humber and North Yorkshire ICB provided an overview, and in response to questions from the committee it was noted that:

- This was an important step in the integration of health and care in York, alongside a shift in focus from acute care to prevention and the adoption of the neighbourhood model. With reference to any anticipated changes in health structures, it was noted that while these could change, core principles could survive those changes and the joint committee should enable better joined-up delivery.
- With reference to the joint committee's relationship with the Health and Wellbeing Board, it was noted that the latter was a statutory body and would be kept updated on issues of assurance and outcomes, but the core of its business including around wider determinants of health across York would remain the same.
- No major changes were proposed to the governance of the Better Care Fund which would remain and continue to report to the Health and Wellbeing Board.
- In response to concerns about the extent of consultation carried out, it was noted that there had been elements of consultation around this piece of work through existing structures which had been quite extensive; this report was instead focused on ensuring funding went where it was needed. While a full public consultation was not proposed, it had gone through the democratic process and a wide range of partners had been involved in the design, including the York Health and Care Collaborative, which included members with lived experience.
- The example of Warwickshire ICB working with Fire and Rescue services on a frailty hub was noted, and it was confirmed that opportunities for similar work with Fire and Rescue through the York and North Yorkshire Combined Authority would be explored.
- The need to measure performance effectively was emphasised; and it
 was noted that while not covered by this report, these would be
 developed over the coming years; this would entail more
 interdisciplinary teams and care plans being shared with multiple
 organisations to increase efficiency and improve patient experience,
 and it was noted that there were various examples of integrated
 teams freeing up time and resources in this way.
- Several members raised concerns over the omission of climate considerations from the report, and it was confirmed that while this

had not been noted in the governance arrangements covered by the report, the climate implications of travel and older health estate were acknowledged; partners were having strong conversations around this and the York and Scarborough Hospital Trust had a robust and sustainable carbon reduction plan in place; climate considerations also formed part of the neighbourhood plan to ensure more services were walkable to residents.

- A variety of health sectors would be covered by the joint committee, although it was noted that pharmacy contractually in a different way; firewalls between different sectors were needed but efforts would be made to address concerns raised by the committee around pharmacy provision. With reference to small specialist services, it was noted that specialised commissioning had always sat outside local commissioning and would be done through the health collaboratives represented on the Place Board.
- Reassurance was sought over the equity of resource allocation across the six Place areas covered by the ICB, given York's historically low allocation. It was noted that at present this was based on historic allocation across Clinical Commissioning Groups, and that the ICB would review how it allocated growth and any new funding across Places. It was clarified that the £10.5m referenced in paragraph 10 of the Executive report was existing ICB resource and not new money.
- In respect of decision making and governance, a partnership agreement would be developed and signed; it was noted that issues had not gone to a vote within the existing Place partnership but mechanisms were in place if needed, and issues around the development of the joint committee's mechanisms could be brought back to scrutiny as required.
- With reference to budgeting and potential overspends and underspends, appropriate provisions would be included in the Section 75 agreement. While the Council would assign some funding to the joint committee it would continue to meet its obligation to set a balanced budget, and work would continue on the draft set of financial risk principles at Annex 1 to the report.
- York's universities as well as several schools were part of the partnership, and while North Yorkshire Council was not part of the Place Board, all options to work together to improve services would be explored.

Resolved: To note the developments in health and care integration, and the opportunities, challenges and implications for the health and wellbeing of York's residents.

Reason: This is a key development in the York health and care system,

and it is important the committee are engaged, involved and

briefed.

45. Work Plan (6:56 pm)

The committee considered its work plan for the remainder of the 2024-25 municipal year. Several points were raised including:

- With reference to a previous agenda item on Pharmacy provision from the committee's September 2024 meeting, concern was raised over an application to relocate a pharmacy licence from Green Lane to Cornlands Road where another pharmacy already existed, and the impact this could potentially have on out of hours provision in Westfield Ward. It was noted that a consultation document had just been released on the 2025 Pharmaceutical Needs Assessment (PNA), which would be an opportunity to stakeholders to shape the next PNA, although this would not impact the Westfield application. It was also noted that the Health and Wellbeing Board would consider the approval of the draft PNA, but that scrutiny's feedback could be considered at an appropriate point in the PNA process.
- Public Health were developing a new approach to Healthy Weight; an existing strategy in this area had lapsed and a more sensitive approach was planned, moving away from the concept of weight management; this could be brought to an upcoming meeting of the committee, but the next scheduled meeting in March would be too early.
- It was suggested that an update on Dental Services could be requested from the ICB following a previous update to the committee in December 2023, with a view to potentially considering this at the committee's next scheduled meeting.
- A poll would be circulated to members to ascertain their availability for a demonstration session or sessions with the Telecare team.
- It was suggested that a serious discussion on Health and Artificial Intelligence (AI) should be added to the committee's work plan, focusing on the potential benefits and challenges for York's residents, health and care system, and local authority.

Resolved:

- i. To note the work plan.
- ii. To request a report on the draft Pharmaceutical Needs
 Assessment at an appropriate point in time to allow scrutiny
 members to input into the PNA process.

- iii. To request an update on Dental Services from the ICB, with a view to considering this at the committee's next meeting.
- iv. To add an item on Health and AI to the committee's work plan with date to be confirmed.

Reason: To keep the committee's work plan updated.

Cllr J Burton, Chair [The meeting started at 5.32 pm and finished at 7.07 pm].