



## York Health and Care Alliance Board

### Minutes of the meeting of the York Health and Care Alliance Board held on 28 June 2021 conducted via Microsoft Teams

#### Present

Simon Morritt (Chair)	Chief Executive, York and Scarborough Hospital NHS Foundation Trust
Dr Emma Broughton	Joint Chair of York Health and Care Collaborative
Gail Brown	Chair, York School and Academies Board
Dr Rebecca Field	Joint Chair of York Health and Care Collaborative
Professor Mike Holmes	Chair, Nimbuscare York
Emma Johnson	Chief Executive, St Leonards Hospice
Phil Mettam	Accountable Officer, Vale of York CCG
Alison Semmence	Chief Executive, York CVS
Sharon Stoltz	Director of Public Health, City of York Council

#### In Attendance

Abby Combes	Head of Legal and Governance, Vale of York CCG
Professor Stephen Eames	Independent Chair and Lead for the Humber Coast & Vale Health and Care
David Hambleton	DH Leadership Alliance, NECS Associate
Naomi Lonergan (part)	Director of Operations North Yorkshire and York, TEWV
Rob McGough	Partner, Hill Dickinson LLP
Michael Melvin	Director of Safeguarding, City of York Council
Peter Roderick	Consultant in Public Health, City of York Council/VOY CCG
Cllr Carol Runciman	Chair, Health and Wellbeing Board, City of York Council
Jo Baxter	Executive Assistant, Vale of York CCG

#### AGENDA

The agenda was discussed in the following order.

#### 1. Welcome and apologies for absence

Simon, as deputy chair welcomed everyone to the meeting and noted the apologies from Cllr Aspden, Amanda Hatton and Brent Kilmurray who would be represented at the meeting by Cllr Runciman, Michael Melvin and Naomi Lonergan.

The minutes of the meeting on 24 May 2021 were approved by the Board.

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As part of matters arising from the minutes, Mike raised concerns around the lack of progress on the Urgent Care review against an unprecedented rise on activity levels and an expectation of the review being completed for March 2022.

Phil acknowledged the current pressures on the system and advised that CCG colleagues would be undertaking a stocktake over the coming weeks by bringing providers together and encouraging them to work together on a new model of care. This would be in a facilitatory role and a change from the previous CCG contractual role.

Simon too acknowledged the issue raised; work was taking place on the Urgent Care Pathway but there were still statutory duties for the CCG and not the provider to be considered and a conversation was needed to establish options, including the North Yorkshire aspect.

Phil and Simon agreed to take this forward.

### **The Board:**

- Noted the concerns raised on the Urgent Care review and asked Phil and Simon to take this forward and provide an update at the next meeting.

## **2. Integrated Care System (ICS) Ambitions for Place**

The chair welcomed Professor Stephen Eames to the meeting.

Stephen opened by referring to the recent discussion document which set out the proposed operating arrangements for the ICS; he encouraged ongoing dialogue and engagement with all partners over the coming months as the operating model was further crystallised and further national guidance was received.

He advised that the Partnership was being built on six Places with York Place being one of the most progressed places; the intention was to phase in these arrangements in shadow form from November 2021 recognising that 2021/22 would be a transitional year with legislative change from April 2022 and there would be a considerable amount of development at place, provider collaborative, strategic partnership, and at a whole Partnership level during 2022/23. A process would be implemented to review the readiness of each Place through completion of a self-assessment against the Place Development Framework.

In reinforcing the subsidiary principles of 80/20, Stephen highlighted it was down to the Alliance Board to determine and build on how the York Place should operate and for the ICS to support and sign off.

The Chair welcomed the update from Stephen to help with the understanding of the complex picture and opened up for comments.

Sharon referred to the positive work of the Population Health and Health Inequalities Board and it was recognised that consideration would need to be given on how the limited Public Health resource was deployed across the ICS.

Mike sought clarity regarding the legal status of the Alliance and being held to account. In response, Stephen advised there was no clear and specific guidelines regarding the legal

framework for Place and it would be how the ICS delegated to Place. Further thought would be needed from the Alliance to determine what legalities and principles were placed around the partnership. In respect of financial budgets, Stephen acknowledged the complexities and advised that a suite of guidance was awaited.

*SE left the meeting*

### **The Board:**

- Welcomed the update

### **3. Emerging Scope of Enabling Functions**

Phil began by referring back to the update from Stephen advising that the intention was to review the self-assessment Place Development Framework over the coming months. Today, for awareness he would be sharing the emerging scope of enabling functions which, if agreed by the Board, David and the soon to be established Alliance Leadership Team, would take responsibility to move forward. A desire to have an understanding of the people capacity and capability by the end of summer was highlighted alongside the four places within the Humber who were already further advanced with this work through existing relationships.

The slides displayed examples of how functional responsibilities could be managed in Place for Quality, Finance and Communications and Engagement. Work was already taking place around the suggested infrastructure needed for Quality and a paper would be brought back to the Board in July.

The Board discussed Phil's presentation and clarity was sought around co-production; how could the Board feed into this and move away from just information sharing so far. Additionally, how would relationships with Local Care Partnerships and Places work? Phil acknowledged both points made; compatibility outside of York was absolutely the case and would be key. David would elaborate on the co-production query under the Alliance Leadership Team item.

In closing the item, the Chair recognised the wish for clarity in many areas, but this was still the design stage in the transition to ICS whilst national guidance was awaited and the Board should continue to push on and influence where it could.

*NL left the meeting*

### **The Board:**

- Noted the work underway and welcomed future updates

### **4. Alliance Leadership Team (ALT) update**

An initial meeting had been held with a small group of nominated representatives from the Board to consider the role and membership of the ALT. David reflected on the meeting where there had been enthusiasm for the challenge of establishing an ALT to deliver

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something different for the City of York and recognition of the duality that was required when both leading a culture & behaviour change as well as overseeing the delivery of priorities.

He advised that an early task for the ALT would be to identify the functions required at Place level, utilising the work of the Humber as a starting point.

A further planning meeting was being held to finalise the ALT membership with the aim of the first meeting to take place by the end of July; David welcomed any further thoughts on the membership and was keen for wide-ranging perspectives from organisations.

As discussion ensued, the Board considered the benefits from a suggested development day, for both the Board and ALT.

### **The Board:**

- Noted the establishment of the ALT and requested an update at the next meeting
- Agreed to consider a "Time Out" development day

### **5. Update on Diabetes and Engagement**

Alison and Peter recapped on the April meeting where the Board had committed to an approach with engagement at the centre, where the voice of the patient, resident or service user would be heard and valued through a principle of 'co-production'. Whilst still early days, the paper being presented provided an update on activities in this area.

Peter referred back to the earlier discussion around the awaited clarity on the ICS transition. It was important to push on now and use the opportunity to focus on the specific priorities already agreed by the Board. As Diabetes / Healthy Weight had been agreed as one of the areas of first focus for the Board an in-depth piece of work had commenced, and the paper summarised the planned work in this respect.

The Board welcomed the planned work around Diabetes; the additional benefits that could be realised from co-production with clinicians, social care and the voluntary sector was emphasised, and Mike and Alison would pursue this outside of the meeting.

In addition, the importance of starting with children was highlighted by Gail; Sharon noted the work already in place through Public Health teams and schools and how this could be further developed.

If agreed, it was proposed that the early diabetes work could be utilised as a 'test case' and lessons learned on the appropriate engagement methods needed to feed into the strategic work of the Board. The Alliance would also need to continue to reflect on what was agreed at the Alliance meeting in April around its overall future approach.

### **The Board:**

- Supported the approach
- Noted that Mike and Alison would provide an update at the next meeting on the progress with co-production

## 6. Population Health Hub update

Peter gave a brief overview on the progress of the Population Health Hub and provided an early update on the Diabetes work as the most tangible project so far.

### The Board:

- Received an update on the early work of the Population Health Hub

## 7. Proposal to support the further development of a Place based partnership in the City of York

*David and Rob left the meeting for this item.*

In presenting the item, Phil alluded to the April meeting where a continuation of the external support provided to develop the York place-based model so far through Hill Dickinson and NECS had been discussed and supported.

Following the initial work to develop the model and the approach with the CCG and local provider partnerships, the proposal being presented would now focus on the implementation and development of the City of York Place with the intention of preparing this for operation as a place based partnership operating under the new legal framework from April 2022. The expectation from the ICS was that local partners in York would cover the costs of further development work.

The Board discussed the proposal and acknowledged the progress made through the external support; the cost, however, was a concern and the Board were keen to utilise existing internal knowledge and expertise across the system to help alleviate this.

Additionally, the board suggested that the ICS considered future Hill Dickinson support from a value for money perspective including input into the York Alliance.

### The Board:

- Acknowledged the progress so far facilitated by Hill Dickinson but proposed to replace this with expertise from within the health and care system and limit Hill Dickinson input to facilitating cultural development and any specific support required.

## 8. Section 75 Agreements

Rob presented the paper which provided guidance and suggested next steps on the further development of the Alliance using Section 75 agreements as part of the operating model for City of York.

He referred to the number of Section 75 agreements already in operation in York between the City of York Council and Vale of York CCG. The paper recommended an initial review

of these and consideration of a consolidated approach for 2021/22 including wider services/budgets to reflect the ambition of the CCG and Council within the Alliance Board, and to provide a basis for the place working within the ICS.

Within the Board, there were varying degrees of knowledge relating to Section 75 agreements and it was suggested that the Legal teams within the system could help with the understanding of this via a separate training session. The Board also requested sight of existing Section 75 agreements to help further with this.

### **The Board:**

- Noted the recommendations relating to Section 75 agreements and requested that the Legal teams within the system pursued these on behalf of the Board
- Requested Section 75 training for Board members

### **9. Conflicts of Interest Policy**

Abby presented the proposed Conflicts of Interest policy which had been produced to support the work of the Alliance Board and supporting Delivery Groups established under the Concord.

In presenting, Abby explained the policy would remain as work in progress until the Alliance became a decision making Board when the policy would become more material.

### **The Board:**

- Approved the Conflicts of Interest Policy with further work required to manage any potential commercial conflicts as they arose.

### **10. Any Other Business**

A request was made for meeting papers to be circulated in a timely manner to allow sufficient preparatory work ahead of the meetings.

### **11. Confirmation of next steps and summing up**

The Chair closed the meeting and noted the next meeting date was Friday 30 July.