

Meeting

Health and Wellbeing Board

Date

11 July 2018

Present

Councillors Runciman (Chair), Craghill and K Myers

Dr Nigel Wells (Chair, NHS Vale of York Clinical Commissioning Group)

Sharon Stoltz (Director of Public Health, City of York Council)

Martin Farran (Corporate Director of Health, Housing and Adult Social Care, City of York Council)

Jon Stonehouse (Corporate Director of Children, Education and Communities, City of York Council)

Phil Cain (Deputy Chief Constable, North Yorkshire Police)

Sarah Armstrong (Chief Executive, York CVS)

Gillian Laurence (Head of Clinical Strategy, NHS England: North Yorkshire and the Humber)

Mike Padgham (Chair, Independent Care Group)

Catherine Scott (Healthwatch York)

Darren Gargan (Tees, Esk and Wear Valleys NHS Foundation Trust)

Dr Kevin Smith (Executive Director for Primary Care and Population Health, NHS Vale of York Clinical Commissioning Group)

Keren Wilson (Independent Care Group)

Gillian Laurence (Head of Clinical Strategy,
NHS England: North Yorkshire and the
Humber)

Apologies

Councillor Cannon, Sian Balsom, Lisa
Winward, Colin Martin, Mike Padgham

1. Declarations of Interest

At this point in the meeting, Members were asked to declare:

- any personal interests not included on the Register of Interests
- any prejudicial interests or
- any disclosable pecuniary interests

which they may have in respect of business on this agenda.

No interests were declared.

2. Minutes

Resolved: That the minutes from the meeting of the Health and Wellbeing Board held on 9 May 2018 be approved and signed by the Chair as a correct record.

3. Public Participation

It was reported that there had been no registrations to speak at the meeting under the Council's Public Participation Scheme on general issues within the remit of the board.

4. Appointment to Health and Wellbeing Board

Members were asked to consider a report requesting the appointment of Catherine Scott to the Health and Wellbeing Board as the representative for Healthwatch York.

There were also two additional appointments that were verbally put to members for their approval;

1. To appoint Darren Gargan as second substitute for Colin Martin, Tees, Esk and Wear Valleys NHS Foundation Trust; and
2. To appoint Mike Proctor, Interim Chief Executive at York Teaching Hospital NHS Foundation Trust to replace Patrick Crowley who has recently retired.

It was noted that a full review of all substitutes will be undertaken and presented to the board at the next meeting in October.

Resolved: That the aforementioned appointments be made

Reason: In order to make relevant membership changes and for continuity of membership and substitutes

5. Inequalities within the Starting & Growing Well Theme

The board received a report from the Corporate Director of Children, Education and Communities on inequalities within the Starting and Growing Well Theme of York's Joint Strategic Needs Assessment (JSNA).

It was reported that there was an error on page 34 of the agenda papers. The papers state that nearly 44, 000 children in York live in poverty. This was an incorrect figure and should read that nearly 4,705 children in York live in poverty.

It was noted that there were three areas of focus, childhood obesity, hospital admissions for self harm and childhood poverty.

Officers explained that this was a new way of working for the board that involved workshops relating to key issues around health and inequality. This would allow the board to have a sharper focus and understanding of the inequalities and to ensure deployment of resources into areas of the city and to the individuals who need it most.

The first of these HWBB workshops was on childhood obesity and key issues raised in that session, were highlighted from the report.

The Board agreed that it would be a good idea to involve parents on the Healthy Weight Steering Group, it was suggested that the Healthy Weight Steering Group (HWSG) should consider how best to engage with parents and foster co-production.

The Board questioned whether statistics were available to show the direct link between income and obesity in York.

The Executive Director for Primary Care and Population Health, NHS Vale of York CCG, informed the board that:

- statistics were available for individual schools through the National Child Measurement Programme (NCMP), however it was not possible to compare these statistics to household income across York;
- there was a direct correlation between schools showing the highest levels of obesity and the schools that take children from the poorest areas of the city;
- poverty wasn't the cause of obesity. The issue was that in an affluent western country the availability of food is based on price and if you are comparatively poor, the food you will access will be the cheaper, higher calorie products.

However, the challenge is achieving an early behavioural change as there is much evidence to prove that intervening effectively with children can have a positive impact on adult health.

Members suggested that perhaps the Healthy Weight Steering Group could engage with 'Energise' to co-ordinate the delivery of activities.

The Director of Public Health suggested the Healthy Weight Steering Group continue to work with Public Health England, looking at all partners and how further proposals can be developed to tackle childhood obesity. It was also noted that this was a good opportunity to pilot the 'Health in All Policies' approach and how any proposals fed into the work of the YorOK Board.

Resolved: That the HWSG should continue their work to identify and develop proposals to reduce childhood obesity, with a focus on behavioural change rather than treatment led interventions.

That these proposals be brought back to a future meeting of the Health and Wellbeing Board.

Reason: To help address the inequalities around childhood obesity

6. Progress on the Starting & Growing Well Theme of the Joint Health and Wellbeing Strategy 2017-2022

The board were presented with a report from the Corporate Director of Children's Services, Education and Communities on the progress against the 'Starting and Growing Well Theme of the Joint Health and Wellbeing Strategy 2017-2022'.

Annex A set out the priorities within the Starting and Growing Well Theme and examples of where progress had been made to deliver against the priorities within this theme. Annex B set out information on the agreed performance indicators for the theme.

Members were interested in whether the board were closer to highlighting the key issues relating to why hospital admissions for tooth extraction were so high and why it makes up a significant proportion of paediatric surgery.

The Executive Director for Primary Care and Population Health informed the board that there were a number of factors that may help to explain the statistics, including:

- the availability of children's dental care
- the referral process for hospital extractions

Officers stated that the Oral Health Action Group would be conducting a survey with dentists over the summer to investigate practices further.

Resolved: That the Health and Wellbeing board note and comment on the report

Reason: To ensure the Health and Wellbeing board are informed on progress and delivery against the starting and

growing well theme of the joint health and wellbeing strategy
2017-2022

7. Student Health & Wellbeing: Progress Report on Student Health Needs Assessment Outcomes

The board received a report from the Operations Manager of Higher York on the progress on Student Health Needs Assessment outcomes.

Officers highlighted that waiting times had reduced for IAPT (Improving Access to Psychological Therapies) and in response to member questions, that services were looking at how they could provide more support to international and BME students, who for cultural reasons, are less likely to disclose mental health problems.

Officers stated that the Student Health and Wellbeing Network did not have representation from NHS Vale of York Clinical Commissioning Group (CCG). The Executive Director for Primary Care and Population Health, NHS Vale of York CCG, informed the board that he would be happy to represent the CCG at the Network and look at ways in which the network could better link with GPs.

Resolved: That the content of the report be noted and to approve the receipt of the annual progress update in year one.

Reason: The HWBB need oversight and assurance of the work that is being done on its behalf in relation to student health and wellbeing

8. Health Protection Assurance

The board were presented with a report on Health Protection Assurance from the Assistant Director of Public Health.

Officers noted that this was an update to the report brought to the board a year ago, that progress had continued on a majority of aspects and that contact rates are improving which is key in getting health messages out to parents.

It was noted that the previous report recommended the establishment of a local Health Protection Committee. York still has a membership to the North Yorkshire and York Health Protection Committee and whilst this has continued to be a useful committee, York would benefit from a committee focussed on York.

It was noted by officers that there had been improvements to health visitor contact rates with 6 months - 2 year olds and improved take up of immunisations.

The following amendment was noted on Page 78 of the Agenda: Text should read “Improve uptake of seasonal flu vaccine in 2 and 3 year olds...”

Resolved: That the report and content be noted and the establishment of a local Health Protection Committee to support a multi-agency approach to addressing health protection issues be approved.

Reason: To re-assure the HWBB that health protection measures are in place.

9. Better Care Fund Update

The board received an update from the Assistant Director, Joint Commissioning, NHS Vale of York Clinical Commissioning Group (CCG) and City of York Council on the Better Care Fund (BCF).

The officer reported that progress had been made on a number of indicators, including delayed transfers of care (DTC), however it was noted that targets would be very difficult to achieve.

It was also noted that some excellent events had taken place in May to re-launch the BCF including discussions around desired outcomes from the BCF, what our schemes were delivering and working together.

Officers responded to questions from members around the High Impact Change Model, its indicators, the improvements to the length of stay especially for elderly patients and the challenges associated with this.

Officers highlighted that we were seeing the impact of local area co-ordination, social prescribing, earlier intervention and prevention around mental health and the role of the voluntary and community sector is significant.

The Interim Chief Executive for York Hospital NHS Foundation Trust informed members that whilst it was clear that we were not on target, a cultural change of how we interact as agencies was needed to improve further. It was noted that:

- We have a better understanding of why people are delayed in hospital and we have become better at explaining this
- Residents were waiting for a specific type of care and not for assessments.
- There was a need for 'fast-tracking' patients.
- Discussions with patients regarding their future care is best not had in an acute setting as it is an artificial environment.

Resolved: That the HWBB note this report

Reason: To keep the HWBB updated in relation to the Better Care Fund

10. Update on Progress of the York Health and Care Place Based improvement Partnership (PBIP)

The Corporate Director for Health, Housing and Adult Social Care presented an update on the progress of establishing the Place Based Improvement Partnership (PBIP).

The director highlighted that the purpose of the partnership was to ensure that colleagues from different organisations came together to find innovative new ways to challenge some of the wider health challenges in York whilst also acting as a support mechanism for organisations represented on the partnership.

It was noted that meetings of PBIP would not be minuted in a traditional way so as to encourage the partnership to work as it was initially intended, as a sounding board and conduit for discussion on challenges that face the organisations present.

Members requested that a brief summary of topics discussed and any objectives agreed be brought to future Health and Wellbeing Board meetings. The Interim Chief Executive of York

Hospital NHS Foundation Trust, Mike Proctor, agreed to feed back this information to the board as the only member participating in both meetings.

Resolved: That the HWBB note:

- i) That the second PBIP meeting has taken place
- ii) The change of name from Place Based Improvement Board to Place Based Improvement Partnership
- iii) The terms of reference for PBIP

And endorse:

- iv) The approach taken by the PBIP to the development of a programme office to support its activity

Reason: To ensure that the HWBB is sighted on the work of the PBIP and endorse its approach.

11. Report from the Health and Wellbeing Board Steering Group

The board received a report from the Director of Public Health updating the board on the work of the Health and Wellbeing Board Steering Group.

Resolved: That the Health and Wellbeing Board note this update

Reason: To update the Board in relation to the work of the HWBB Steering Group

12. Urgent Business

The Chair highlighted that this would be the last meeting for a number of HWBB members and that it be noted in the minutes that the following members were thanked for all their dedication and support during their tenure:

- Patrick Crowley
- Sarah Armstrong

- Jon Stonehouse
- Martin Farran

It was also noted that replacement appointments will be made in the next meeting.

, Chair
[The meeting started at Time Not Specified and finished at Time Not Specified].