Meeting Health and Wellbeing Board

Date 19 March 2025

Present Councillors Steels-Walshaw (Chair),

Runciman, Cullwick and Webb

Sarah Coltman-Lovell - York Place Director

(Vice Chair)

Siân Balsom – Manager, Healthwatch York Peter Roderick - Director of Public Health,

City of York Council (Left 6:21pm)

Martin Kelly - Corporate Director of Children's

and Education, City of York Council

Sara Storey - Corporate Director, Adults and

Integration, City of York Council

Alison Semmence - Chief Executive, York

CVS

Fiona Willey – Chief Superintendent and Head of Local Policing, North Yorkshire

Police (Substitute for Tim Forber)

David Kerr – Community Mental Health Transformation Programme and Delivery Lead – Tees, Esk and Wear Valleys Fountation Trust (Substitute for Zoe

Campbell)

Apologies Zoe Campbell – Managing Director,

Yorkshire, York and Selby - Tees, Esk and

Wear Valleys NHS Foundation Trust

Simon Morritt - Chief Executive, York and Scarborough Teaching Hospitals NHS

Foundation Trust

Absent Dr Emma Broughton – Joint Chair of York

Health and Care Collaborative

Mike Padgham – Chair, Independent Care

Group

33. Apologies for Absence (4:34pm)

The board received apologies from the Chief Executive, York and Scarborough Teaching Hospitals NHS Foundation Trust; no substitute was available.

The board received apologies from the Chief Constable, North Yorkshire Police, who was substituted by the Chief Superintendent and Head of Local Policing.

The board received apologies from the Managing Director, North Yorkshire, York and Selby - Tees, Esk and Wear Valleys NHS Foundation Trust, who was substituted by the Community Mental Health Transformation Programme and Delivery Lead.

34. Declarations of Interest (4:34pm)

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. None were declared.

35. Minutes (4:35pm)

Resolved: To approve and sign the minutes of the last meeting of the Health and Wellbeing Board held on 22 January 2025.

That minute 29, paragraphs 8 and 9 be amended to state: "proactive social prescribing" rather than "practice social practicing".

36. Public Participation (4:36pm)

Ben Ffrench spoke on item 5, concerning the need for much greater access and visibility of mental health support for young people in York; and universal provision in schools.

37. Healthwatch York Report Core Connectors Report Young People's Experiences of Health and Social Care (4:40pm)

The Board received a report from the Core Connectors team, working with Healthwatch York, which shared the results of their peer research.

The Manager, Healthwatch York introduced the report. She explained that this scheme had begun as an NHS England programme concerning coastal areas of Humber and North Yorkshire, but that further funds had been made available for Healthwatch outside of these areas. Because of this origin, the aims of the project and prescribed questions were initially inherited, and Healthwatch York didn't have its usual autonomy concerning exactly what was asked, but together with the Public Health team, they had been able to add their own questions to focus on conversations with young people in the city.

Two young people from the Core Connectors team presented the report and spoke of their personal experiences and those of other young people with whom they had spoken. They conducted a semi-structured survey with 10 Core Connectors which addressed such issues as food insecurity, healthcare access, housing/financial strain, transportation challenges and mental/physical health.

Their conclusions were that the following factors would make York a healthier city:

- Reducing waiting times.
- Increased mental health care options.
- Better access to trans health care.
- More support systems in schools.
- Affordable food options.
- More social spaces that don't involve alcohol.
- Better transport (cheaper prices, more frequent bus times).
- Increased access to outdoor activities and green spaces for people with disabilities.
- Referrals from schools to support services.
- Improve cycle paths, pedestrian area and lighting.

And they made the following six recommendations:

- Introduce cost of living support.
- Reduce wait times for mental health support.
- Tackle GP and dental wait times
- Create affordable social and community spaces
- Transition to Adult Services
- Improve Public Transport

The Director of Public Health praised the Core Connectors presentation in particular and the wider work of Healthwatch's report. He also acknowledged the speaker who had referenced this item in Public Participation, which aligned with the discussion of mental health in the report.

He said the aims of the group were commendable. While he recognised that it would be good to fulfil all of the recommendations as soon as possible he was keen to see how these priorities could be aligned with the current structures.

He noted that York had not historically had a specific children and young people's mental health group – rather one for all ages, and within this group the voices of children and young people tended to be drowned out. With programmes such as Nothing About Us Without Us the case for an age-specific group, reiterated by the core connectors has been made and there was now a children and young people's mental health group.

Secondly there were plans ahead to work with York CVS along with ICB resources to invest in the third sector concerning Childrens and Young People's health.

He advised that every few years Public Health undertake surveys of children in various year groups. A 5-year sample of 2-3000 children to establish priorities, and this broadly aligned with what the Core Connectors had focused on.

The board noted the focus on alcohol-free spaces and also on public transport and asked what the main priorities of young people were.

The Manager, Healthwatch York responded that different cohorts of young people clearly had different contextual priorities (for instance those at Askham Bryan College had more

of a focus on rurality and transport, whereas those in Museum Gardens had a very different situational focus). She did however note that everyday living expenses were a recurring factor for young people. She added that NHS England would no longer be providing central funding for Core Connectors, but local funding would allow further support for a T level student at York College to take this plan forward – possibly with a focus on transport.

The board asked how the young people were selected to become core connectors and respond to the survey.

The core connectors responded that the broad parameters were that respondents be 14 to 25 years of age, and they began by asking people at York College, before broadening the field by talking to cohorts at Askham Bryan College, the Museum Gardens, an LGBT cafe in the city centre and a mental health event.

The board asked whether a formal follow up could be undertaken, tracking progress about the six recommendations and have a report back to say what has happened.

The Manager at Healthwatch York responded that the recommendations were quite broad and there were already some pieces of work being undertaken that may help to address some of the recommendations in the longer term, but the intention would be to have the Healthwatch report in July address this and any responses to the recommendations from board members would be appreciated.

The Director of Place noted that the Integrated Care Board had recently held a sort of public communication pre-engagement exercise, and some of the themes highlighted between that and this were very similar. While the sample size of this group was small, it was indicative of similar work done by the NHS.

In regard to priorities, she wondered whether transport, higher education and cost of living might form a focus for the next step, and in terms of the future of Core Connectors could they be used to assist with peer support networks?

The Corporate Director of Childrens and Education suggested that it was possible the authority had not been communicating well with the relevant people about what is already available – there are already capped £1 fees across the bus network for

under-18s. The Schools Wellbeing Service provides Mental Health provision, as does York Mind and significant commitment and financial investment has been put into bringing together youth services and making York a trauma-informed city. The adults do not know everything that is happening in the city and resources perhaps need to go into ensuring that children do as well.

The board suggested speaking to both the Council and the Mayor regarding issues raised.

Cllr Webb responded that the Combined Authority Mayor had recently met with care leavers with the discussion very much focused on transport.

The Manager, Healthwatch York noted that the past "Young People's Survival Guide" had been a useful resource in this area and pointed out that there would be a Core Connectors meeting at Priory Street on Tuesday 25 March.

Resolved: That the Board would:

i. Receive the Core Connectors report,

ii. Provide a response to the recommendations to be collated for the July Health and Wellbeing Board

Reason: To keep up to date with the work of

Healthwatch York and be aware of what members of the public are telling us.

38. Joint Local Health and Wellbeing Strategy Action Plan (5:16pm)

The report was presented by the Director of Public Health. He explained that this 2-year action plan constituted part of the overarching 10-year Health and Wellbeing strategy, and the focus which had been chosen was to bridge the gap in healthy life expectancy, and this could be measured in different ways, but deprivation was the most measurable metric.

He summarised the goals and fulfilment of these as well as the compassionate approach to discussing healthy weight. It was clarified that goal 5 should correctly read "Reverse the rise in

the number of children and adults living with an unhealthy weight."

He discussed action 10, which had been left open for discussion, and concerned social isolation; proposing that the board identify a particular group within the city that suffers from loneliness and social isolation more than others and focus on this for action 10. He suggested that adult and young carers might be an appropriate group for this.

The Chair asked the board to approve actions but also to delegate formulation to lead officers for action 10.

The Chair said that she had been concerned that limiting action 10 to a single group might risk omitting particular demographics, but that the scope of the proposed group of adult and young carers actually gave sufficient scope in terms of age groups.

The Corporate Director, Adults and Safeguarding noted that some of the previous metrics and measures were from an Adult Social Care survey concerning carers and those with social care needs. She suggested talking to carers and young carers to ascertain their thoughts, but ultimately for the board to commit to some very specific and measurable actions - we could therefore follow up in a year's time with evaluation of those actions.

The Chief Executive, York CVS suggested working specifically with young carers first and foremost as a cohort, because they can be hidden in plain sight and the schools don't always pick them up.

The Manager, Healthwatch York further discussed young carers; suggesting this was a significant blind spot and the hospital has not routinely been asking whether young people had siblings or directing them to the centre for young carers. She said it was telling that only six young carers had been identified by schools in the recent survey, and that caring must be embedded in everything. She also discussed micro-caring as a career choice.

The Corporate Director, Adults and Safeguarding responded that micro-caring had come to her attention recently; there had been work around this in York in the past, but she cautioned that this sector was unregulated and dealt with potentially vulnerable people, and checks/registers in this area had not been available. She suggested that micro-provision may potentially be beneficial for befriending and low-level support advice.

The Manager, Healthwatch York also drew attention to the importance of dementia diagnosis, alcohol awareness and adults living to a healthy weight on the action plan, suggesting further work could be done in these areas considering the discussion on Core Connectors item and previous board discussions on these topics.

Cllr Webb suggested that schools may need support knowing what a carer looks like, and also when Council teams are contacting residents about areas such as housing or adult social care, they could take the opportunity to discuss caring.

Cllr Runciman suggested that loneliness was not linked solely to poverty, and other factors such as bereavement must also be considered. She also suggested that many carers may not think of themselves as carers in their everyday lives, and asking bluntly whether people are "carers" would not necessarily result in all carers self-identifying and responding.

The Chief Executive, York CVS spoke on Goal 6 – requesting to amend the wording to reflect embedding of the standards across the system in the avoidance of being misleading. The Director of Public Health agreed to this.

The Board thereby

Resolved:

i. To approve the action plan and receive regular progress updates on the delivery of these actions.

ii. To delegate the identification of specific actions for Goal 10 to the lead officers for this goal.

Reason:

To ensure the HWBB is actively and effectively delivering on the vision and ambitions set out within the Joint Local Health and Wellbeing Strategy 2022-2032.

39. Health and Wellbeing Board Chair's Report (5:58pm)

The report from the Chair of the Health and Wellbeing Board summarised key issues and progress between meetings, providing board members with a concise update on a broad range of topics.

The Chair highlighted Healthwatch York's nomination for a National Impact award, recognising outstanding examples, such as the Autism and ADHD pathway. The Manager, Healthwatch York said they had since been commended for their work in this area.

The Chair advised that the draft Adult Social Care strategy for the next three years had now been completed. This focused on recognising strengths and reducing inequalities.

The board noted that consultation had been advertised as open until the end of March, but members had been made aware of some residents who were really interested in the strategy but may need a little bit longer to be engaged for their feedback. The board reassured these residents that if they were unable to submit their feedback before the end of March, their voices would still be heard.

The Chair advised that the full version of the Pharmaceutical Needs Assessment (PNA) would be available by autumn 2025. The main purpose of the PNA was to look at evaluation and applications for new pharmacies in the area there had been a lot of talk around pharmacies recently with residents wanting provision at weekends and out of hours (after 5pm) and concern around possible changes to opening times. She suggested that this was particularly prevalent in light of the increased services coming to pharmacies and advised that public health were working with the GPs and charities to work around people facing barriers. In June there would be a forum where public and professionals would be invited to comment on the draft PNA before publication of the final version.

The board congratulated the Public Health team for receiving over 400 responses to the PNA survey.

Resolved: That the Health and Wellbeing Board noted

the report.

Reason: So that the Board were kept up to date on:

Board business, local updates, national updates, and actions on recommendations

from recent Healthwatch reports.

40. Update from the York Health and Care Partnership (6:04pm)

The board received an update on the progress of York Health and Care Partnership initiatives.

The NHS Director of York Place presented the report – summarising recent YHCP meetings, discussing the Frailty Crisis Response and Health Integration service, mental health hubs, and various support programmes for vulnerable populations. She also summarised the draft Humber and North Yorkshire ICB annual report was now ready and advised that the draft York Health and Care Partnership annual report would be coming to a future meeting of the Health and Wellbeing Board.

The Community Mental Health Transformation Programme and Delivery Lead – Tees, Esk and Wear Valleys Foundation confirmed that the Acomb Medical Centre would open in (or around) summer 2025.

The Director of York Place advised the board of two significant government announcements.

Firstly she advised of the well-publicised abolition of NHS England – signalling greater direct control of the performance targets surrounding NHS Trusts.

Secondly, she advised that there had been a request for ICBs to reduce running costs – essentially staffing costs – by quarter three of the current year, meaning December, so they had a very short time scale to work with.

The Director of Public Health commented on this news saying how much he valued the hard work of the ten members of the York Place team, and looked forward to continuing to work with them, offering his support.

[The Director of Public Health left at 18:21]

The Chair thanked the Director of York Place for all her work on the board, prior to her planned leave.

Resolved: That the Board note the report of the YHCP.

Reason: So that the Board were kept up to date on the

work of the YHCP, progress to date and next

steps.

Cllr L Steels-Walshaw, Chair [The meeting started at 4.34 pm and finished at 6.22 pm].