



York Health and Wellbeing Board

Annual Report 2017/18



CITY OF
YORK
COUNCIL

Contents

Welcome	3
The York Health and Wellbeing Board.....	4
About York.....	6
What has been done in the past 12 months.....	9
Mental health and wellbeing	10
Starting and growing well	12
Living and working well.....	14
Ageing well	16
Joint Strategic Needs Assessment	18
Pharmaceutical Needs Assessment.....	20
Performance	22
Working with partners	24
Challenges and the future.....	27



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Welcome from the Chair of the Health and Wellbeing Board

Welcome to the third annual report of the York Health and Wellbeing Board, May 2017 to May 2018.

Following the launch of our new [joint health and wellbeing strategy 2017-2022](#) in March 2017 we have themed most of our meetings around the four key priorities in the strategy (mental health and wellbeing; starting and growing well; living and working well and ageing well).

This report highlights some of the work programmes which have contributed to delivering our strategy.

Also included are updates on how we have produced a [Joint Strategic Needs Assessment \(JSNA\)](#) and a [Pharmaceutical Needs Assessment \(PNA\)](#).

During this time, the Board met seven times in public. The meetings were webcast and uploaded to the council's website. The number of times the webcast meetings have been watched ranges from 77 to 154.



Our formal meetings are open to the public to attend and webcasts are available to view at www.york.gov.uk/webcasts, whenever it is convenient for you.

I would like to take this opportunity to thank all the Health and Wellbeing Board members for their hard work and commitment to improving the health and wellbeing of York's residents.

Carol Ruciman

Chair of the York Health and Wellbeing Board

City of York Council's executive member for health and adult social care

The York Health and Wellbeing Board

The York Health and Wellbeing Board (HWBB) is a strategic partnership which sets the vision and direction for health and wellbeing for the city. Its aims are to:

- Improve the health and wellbeing of the locality via strategic influence over decisions across health, public health and social care
- Strengthen working relationships between health and social care partners.

The main responsibilities of the Board are:

- Assessing the health and wellbeing needs of the local population and how they can be addressed through a Joint Strategic Needs Assessment (JSNA)
- Producing and implementing a Joint Health and Wellbeing Strategy based on the information in the JSNA
- Promoting greater partnership working and joining up services across the health and social care system
- Producing a Pharmaceutical Needs Assessment (PNA)

Membership

During 2017/18 the York Health and Wellbeing Board had 17 members from several organisations across the city. The Chair keeps a list of named substitutes which is reviewed regularly to ensure it is up to date.

Changes

During the course of this year there have been some changes to the membership of the Board:

Lisa Winward joined as the North Yorkshire Police Representative

The elected member portfolio holder for education, children and young people was invited to join the HWBB. For much of the time this was Councillor Stuart Rawlings and it is now Councillor Keith Myers attending in this role.

Gillian Laurence joined as the representative for NHS England

Dr Shaun O'Connell joined the HWBB as a clinical representative from NHS Vale of York Clinical Commissioning Group (CCG) in July 2017 but has since stood down. From May 2018 the representatives for NHS Vale of York Clinical Commissioning Group changed with Dr Nigel Wells, the new Chair of the CCG, replacing Keith Ramsay and Dr Kevin Smith, Executive Director for Primary Care and Population Health replacing Phil Mettam.

The membership of the Health and Wellbeing Board for the period this report covers was:



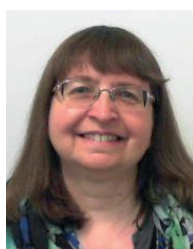
Councillor Carol Runciman
(Chair) Executive Member for
Adult Social Care and Health,
City of York Council



Keith Ramsay
(Vice-Chair)
Chair of NHS Vale of York Clinical
Commissioning Group



**Councillor
Mary
Cannon**
City of York
Council



**Councillor
Denise
Craghill**
City of York
Council



**Councillor Stuart
Rawlings**
Executive
Member for
Education,
Children & Young
People, City of
York Council



**Dr Shaun
O'Connell**
Joint Medical
Director NHS
Vale of York
Clinical
Commissioning
Group



Phil Mettam
Accountable
Officer
NHS Vale of
York Clinical
Commissioning
Group



Siân Balsom
Manager
Healthwatch
York



Sharon Stoltz
Director of
Public Health
City of York



Jon Stonehouse
Corporate
Director of
Education &
Communities
City of York
Council



Martin Farran
Corporate
Director of
Health, Housing
& Adult Social
Care, City of
York Council



**Sarah
Armstrong**
Chief
Executive
York CVS



**Patrick
Crowley**
Chief Executive
York Teaching
Hospital NHS
Foundation
Trust



Colin Martin
Chief Executive
Tees, Esk &
Wear Valleys
NHS Foundation
Trust



**Mike
Padgham**
Chair
Independent
Care Group



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

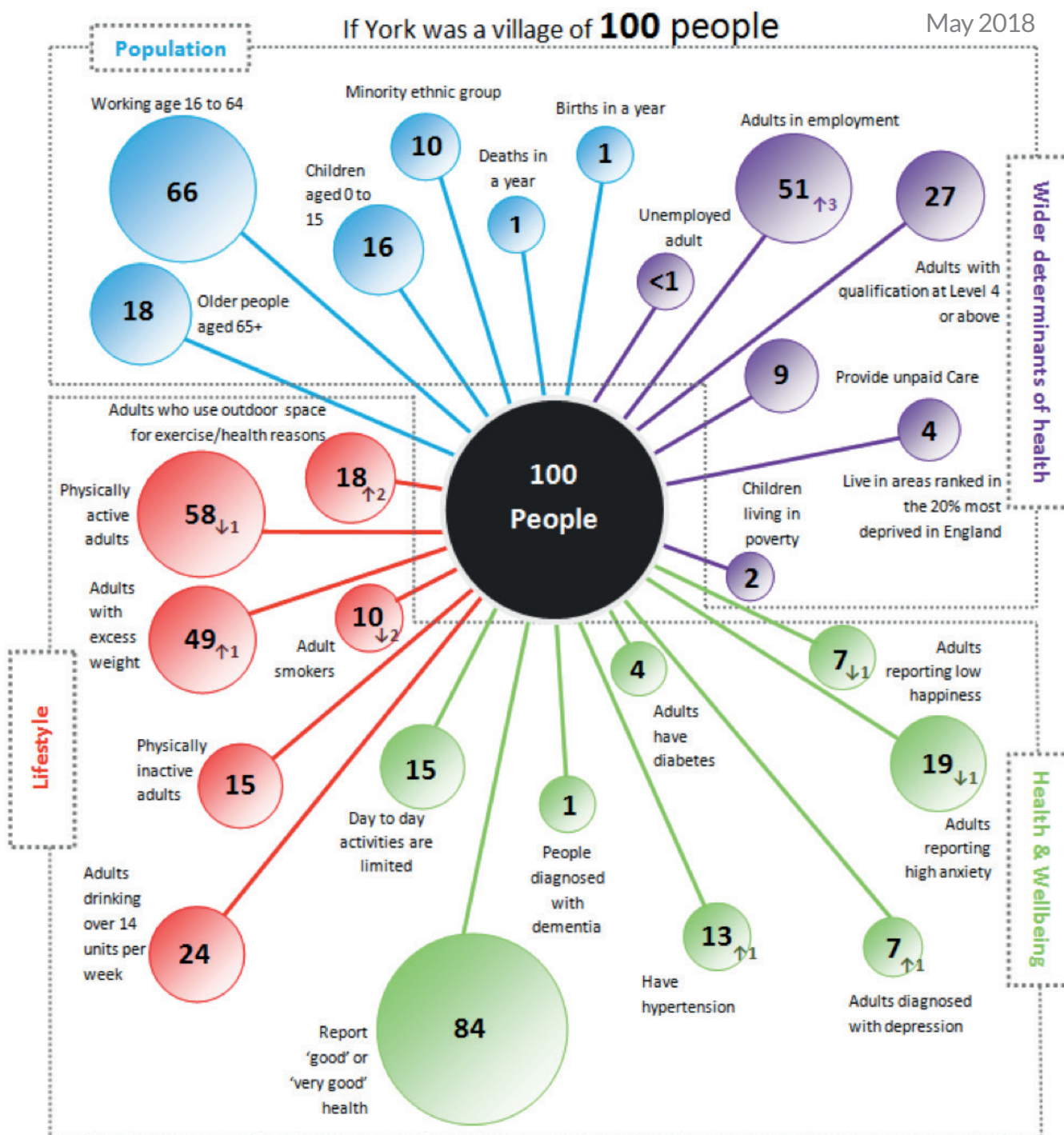


Lisa Winward
Deputy Chief
Constable
North
Yorkshire
Police

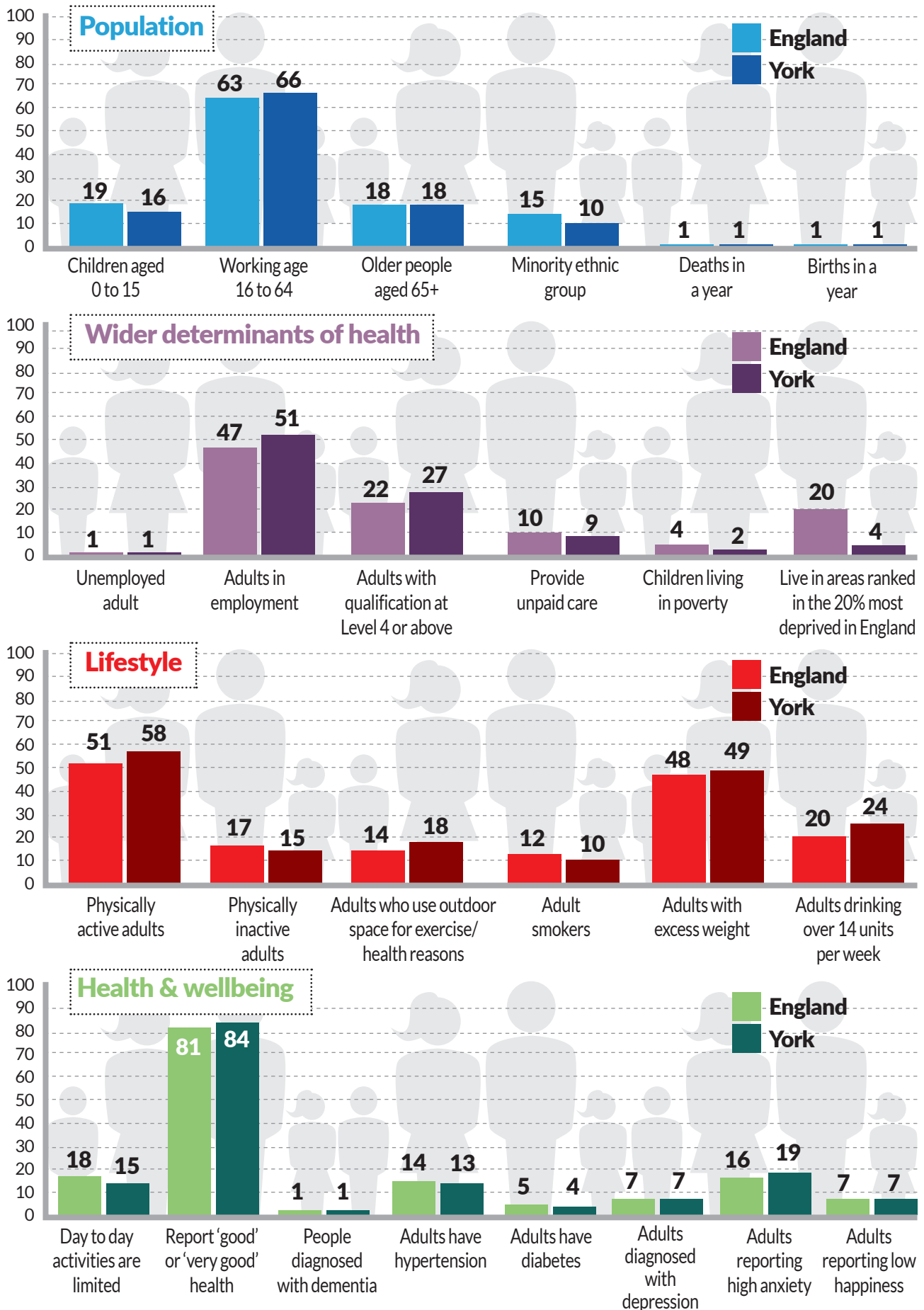
About York

This graphic illustrates what the composition of York would be like if it was a village of 100 people based on available data (April 2018)

The arrows and smaller numbers show the changes since the last time this was produced in October 2016

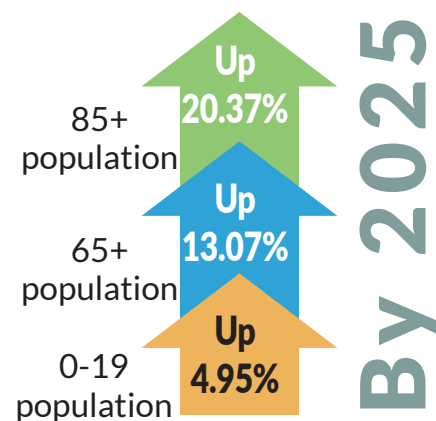
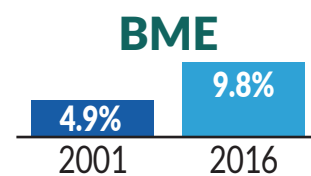
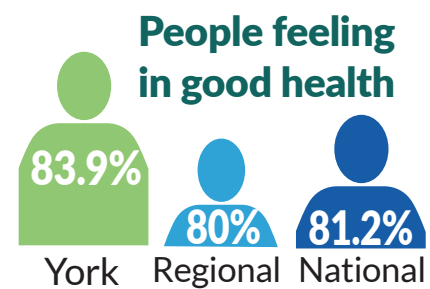


This graphic compares York to England if both were a village of 100 people





- York has a population of approximately 208,000 people
- According to the 2011 census, 83.9% of the residents of York stated that they are in very good or good health compared to 80% regionally and 81.2% nationally
- The city has become more culturally diverse with a black and minority ethnic (BME) population of 9.8% (non white British) compared to 4.9% in 2001
- By 2025 it is estimated that:
 - the 0-19 population will have risen by about 4.95%
 - the 65+ population in York will have increased by 13.07%
 - the 85+ population will have increased by 20.37%
- Life expectancy at birth is now 9.1 years lower for men and 5.5 years lower for women in the most deprived areas of York than in the least deprived areas
- Average life expectancy in York is 80.4 years for men and 83.5 years for women
- Healthy life expectancy for men is 66.3 years and for women 65.9 years



What has happened in the past 12 months

The following pages in this annual report highlight some of the work the Board has undertaken and supported during the last 12 months.

Since July 2017 we have held **themed meetings*** and the agendas for these have contained an update on strategy delivery for each theme along with performance data. This report does not seek to repeat this information but complement it. Agendas and papers for the individual themed meetings are available at democracy.york.gov.uk

- **12 July 2017:** Starting and growing well focused meeting
- **6 September 2017:** Ageing well focused meeting:
- **8 November 2017:** Mental health and wellbeing focused meeting
- **24 January 2018:** Living and working well focused meeting

The Health and Wellbeing Board have also had oversight of the refreshed Joint Strategic Needs Assessment; Pharmaceutical Needs Assessment and performance against delivery of the joint health and wellbeing strategy. This report also sets out some of the work that has progressed with partners, together with the challenges which need to be addressed in the future.



***themed meetings** mean that we aim to focus at least half of the meeting on one of the themes in the joint health and wellbeing strategy.

Mental health and wellbeing



Name: Martin Farran and Phil Mettam

Job Title: Martin Farran, Corporate Director, Health, Housing and Adult Social Care at City of York Council and Phil Mettam, Accountable Officer at NHS Vale of York Clinical Commissioning Group

Lead Board members for: mental health and wellbeing

Mental health and wellbeing

Top Priority

Get better at spotting the early signs of mental ill health and intervening early

Additional things we want to achieve

Focus on recovery and rehabilitation

Improve services for young mothers, children and young people

Improve the services for those with learning disabilities

Ensure that York becomes a Suicide Safer City

Ensure that York is both a mental health and dementia friendly environment

Martin Farran and Phil Mettam: Our aim is to improve access to support for residents experiencing mental ill health focusing on prevention and early intervention.

This work includes the development of a new [mental health strategy for York 2018-2023](#) which complements the mental health elements contained within the Health and Wellbeing Board's joint health and wellbeing strategy 2017-2022. This will be delivered by a newly created mental health partnership led by Tim Madgwick, former Deputy Chief Constable at North Yorkshire Police.

We want to build on work to establish integrated care teams that bring health and care professionals together to avoid people going into a hospital bed. This means the creation of more opportunities for community based services that are accessible and responsive to the needs of our population.

Mental health and wellbeing is as important as physical health and we need to continue to challenge ourselves to commission services that are based on a model of community and personal resilience delivered with and through our partners.

Here are some of the ways in which the Board is delivering against the mental health and wellbeing theme.

The Health and Wellbeing Board agreed a new mental health strategy 2018-2023 in March 2018. The strategy's vision is for every single resident of York to enjoy the best possible emotional and mental health and wellbeing throughout the course of their life. It builds on the themes in the joint health and wellbeing strategy 2017-2022 and is a real opportunity to achieve parity of esteem for mental health. This means tackling mental health issues with the same energy and priority as physical issues.

A new mental health partnership has been established to deliver the mental health strategy and an independent chair appointed.

Tim Madgwick, Independent Chair of the new mental health partnership said: *"Mental health issues touch us all, whether they affect us directly, or our family or close friends. By creating a dedicated mental health partnership, York is underlining its commitment to supporting residents' to have the best possible mental health and wellbeing and to provide high quality mental health services. I look forward to working in partnership with professionals and groups across the city to look at how we can further improve our mental health support in York."*

30 Clarence Street and The Haven opened in July 2017. This has brought three services under one roof - adults mental health recovery, young people's services and a safe haven

Work continues towards achieving Suicide Safer Community Status. A Suicide Prevention Strategy has been developed and is currently being consulted on. The strategy will be launched at a Suicide Prevention Conference in September 2018.

A Time To Change Hub has been established with York CVS to challenge stigma and to offer training to support mental wellbeing in children and young people.

A new Learning Disability Strategy is being developed alongside a new Learning Disabilities Partnership. The new partnership will meet for the first time in June 2018 and nominations for Chair will be invited. The draft strategy is due to be considered by the Health and Wellbeing Board during the autumn.

Starting and growing well



Name: Jon Stonehouse

Job Title: Corporate Director, Children, Education and Communities at City of York Council

Lead Board member for: starting and growing well

Starting and growing well

Top Priority

Support for the first 1001 days, especially for vulnerable communities

Additional things we want to achieve

- Reduce inequalities in outcomes for particular groups of children
- Ensure children and young people are free from all forms of neglect and abuse
- Improve services for vulnerable mothers
- Ensure that York becomes a breastfeeding-friendly city
- Make sustained progress towards a smoke-free generation

Jon Stonehouse: The overall aim for the starting and growing well theme is to make sure all of our children get the best start in life. This includes looking after their health and wellbeing and making sure that all services are child and family friendly.

This work includes Local Area Teams who carry out direct work with families in response to need; working with partners to co-ordinate services and help find solutions to problems. This model of early intervention is already making a real difference to young people, be it through support for vulnerable mothers or the work we are doing to integrate the healthy child service as part of the programme. City of York Council alongside its partners has agreed to build a Centre of Excellence for disabled children and their families in York. The new building will provide a range of support services; a flexible short break provision and a Family Intervention Rapid Support Team, a clinical led service for families with children who have autism, learning disability and challenging behaviour.

As a board, we are determined to improve the health and wellbeing of all of our residents and a clear focus on children, young people and their families is critical to achieving this.

[The Children and Young People’s Plan 2016-2020;](#) YorOK Board and the Strategic Partnership for Emotional and Mental Health (Children and Young People) all contribute to delivering the starting and growing well theme.



Children and young people represent 16% of the population of York.

Here are some of the ways in which the Board is delivering against the starting and growing well theme:

The Board's [Student Health Needs Assessment](#) highlights health issues faced by further and higher education students. A task group led by Higher York has been set up to focus on the assessment's findings. While addressing student health needs in the round, the report found that mental health had overtaken traditional issues such as sexual health, drugs and alcohol as the main area of concern. An update is due to be discussed at the Health and Wellbeing Board meeting in July 2018.

One of the ambitions in the York Skills Plan 2017-2020 is to improve skills for young people eligible for free school meals, with special educational needs, leaving care, youth offenders, at risk of disengagement or Not in Education, Employment of Training (NEET).

The School Wellbeing Service is a school based early intervention mental health support service. There are six School Wellbeing Workers linked to geographical school clusters across the city and they have three key outcomes:

- School staff will have increased knowledge and confidence in supporting children and young people with emotional and mental health issues
- Children and young people are identified early and supported effectively within school to prevent needs increasing and the requirement for specialist intervention
- Increasing numbers of children and young people feel more able to cope with mental health issues within a school setting

A new mental health peer support programme has been established across secondary schools and colleges and is supported by the School Wellbeing Service.

Our [All Age Autism Strategy 2017-2021](#) has been written in consultation with people with autism, their families and lots of different professional organisations. The Autism Strategy Board is responsible for the delivery of this piece of work and will keep the Health and Wellbeing Board updated.

York's Local Area Teams focus on the improvement of outcomes for vulnerable mothers. These multi-agency teams based in localities improve our ability to identify vulnerable mothers and understand their needs. Local Area Outcome Plans have been developed from reviewing data and intelligence held by communities. These plans allow the Local Area Teams to work with other partners to address identified needs, including those of vulnerable mothers. A multi-agency forum has been created to share information and take an outcomes focused approach to problem solving.

Living and working well



Name: Sharon Stoltz

Job Title: Director of Public Health

Lead Board member for: Living and working well

Living and working well

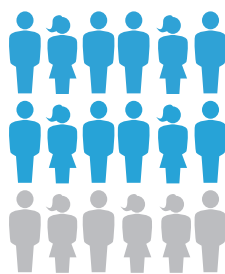
Top Priority

Promote workplace health and remove barriers to employment

Additional things we want to achieve

- Reduce inequalities for those living in the poorer wards and for vulnerable groups
- Help residents make good choices
- Support people to maintain a healthy weight
- Help people to help themselves including management of long term conditions
- Work with Safer York Partnership to implement the city's new alcohol strategy

Sharon Stoltz: The Health and Wellbeing Board wants to see everyone in York have the opportunity to live a long, healthy and productive life. York is a growing city and the local economy is dependent on having a healthy workforce. This will involve us working with individuals and communities to help them understand how the choices they make about what they eat, drink, how active they are and the way they live their lives can impact on their health and happiness. It is often the small changes that can make all the difference. A key focus will be to work on closing the gaps in health outcomes between people living in different areas across the city.



There are approximately 208,000 residents in York of which two thirds are of working age (16-64).

Over 20% of working people in York earned less than the living wage (as recommended by the living wage foundation). Additionally, a large proportion of working families on low incomes rely on tax credits to supplement their income.



Below are some of the ways in which we are delivering against the living and working well theme in the joint health and wellbeing strategy 2017-2022.

Proactive Health Coaching is a telephone based health management service that improves patient health and quality of life, while ensuring that healthcare resources are spent as efficiently as possible. In partnership with Health Navigator and York Teaching Hospital NHS Foundation Trust, NHS Vale of York Clinical Commissioning Group have delivered an effective preventative strategy that simultaneously provides better care for patients and reduced stress on A & E departments.

We are in the process of developing a Healthy Weight Strategy for the city. We are working with colleagues across the Yorkshire and Humber Region to look at signing up to a Healthy Weight Declaration for York. The declaration will capture the priorities that the council will lead on to prevent obesity and secure the health and wellbeing of our residents.

The YorWellbeing Service works across York to support healthy lifestyle choices. Offering health checks to residents is one way of raising awareness of the impact of lifestyle choices and can be used a tool to facilitate behaviour change. The team are able to provide advice and support to help people to achieve their health goals. Further work is required to improve uptake of this service. We are currently working on putting in place a better system for GPs to refer people who are eligible for a NHS Health Check into the service.. The YorWellbeing Service has worked with over 25 local businesses (all with over 50 employees) to offer mini health checks. 904 individual mini-health checks have been undertaken to date. Feedback from these has been positive with over 95% of those having had a mini-health check finding it beneficial.

United Response, a charity supporting people with learning disabilities, autism and health conditions, is working with the City of York Council to offer employment support to individuals. United Response's Job Coaches will assess the needs of the person, identify support needs and source the right type of work for the person. This includes CV building, interview preparation and in-work support, enabling increased independence with improved health and wellbeing.

The Work Wellness Service is a non-clinical health pilot project running in north and west York to help people aged 50+, off work with mental health or anxiety issues return to employment. The service is funded through the West Yorkshire Combined Authority and delivered by City of York Council. It operates at surgeries run by York Medical Group and Priory Medical Group.

Work has started on developing a Workplace Health Strategy for the council which is intended to influence healthy employment practices across the city.

Ageing well



Name: Sarah Armstrong
Job Title: Chief Executive, York CVS
Lead Board member for: Ageing well

Ageing well

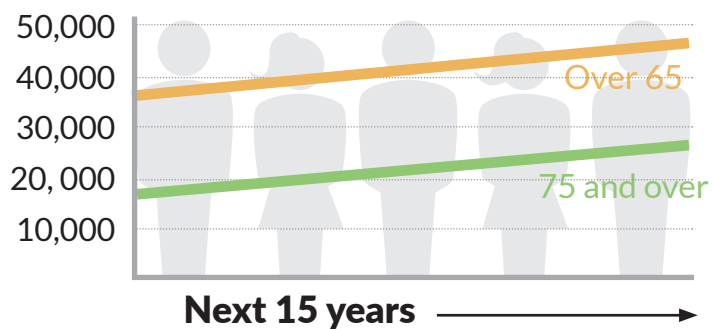
Top Priority

Reduce loneliness and isolation for older people

Additional things we want to achieve

- Continue work on delayed discharges from hospital
- Celebrate the role that older people play and use their talents
- Enable people to recover faster
- Support the vital contribution of York's carers
- Increase the use of social prescribing
- Enable people to die well in their place of choice

Sarah Armstrong: Over the next 15 years the number of people over 65 in York will increase from 36,000 to 46,000 and those aged 75 and over from 17,000 to 26,000.



We want York to be a fantastic place to grow old, with the city's increasingly ageing population able to stay fit, healthy and independent for longer. Loneliness and isolation has been highlighted as a real issue for older people in the city and research has highlighted that loneliness can be as bad for you as smoking 15 cigarettes a day. York has a vibrant and active voluntary sector that plays a vital role in helping to build friendly, resilient communities through targeted interventions and support. At York CVS, our social prescribing service Ways to Wellbeing is going from strength to strength and is reducing social isolation amongst some of our most elderly and vulnerable residents. Having undertaken an evaluation of the first full year of the service the data indicated that GP appointment usage has decreased by 30% for patients using the service.

Below are some of the ways in which we are delivering against the ageing well theme in the joint health and wellbeing strategy 2017-2022.

During 2017 the Health and Wellbeing Board undertook an [older people's survey](#), the first since 2008. The survey was designed by a multi-agency, peer led steering group including representatives from York Older People's Assembly; Age UK York; Healthwatch York; York CVS; The Police and Crime Commissioner's Office; NHS Vale of York Clinical Commissioning Group and City of York Council. The survey highlighted that, on the whole, the 912 respondents, generally reported having good health. Whilst the majority of respondents had as much social contact as they would like, or adequate social contact, there were just under a quarter of respondents who indicated they were socially isolated which became more acute in the winter months.

The partner agencies involved in the survey made recommendations in relation to information and advice; social interaction; health; independence and safety. These will be taken forward by the lead board member for ageing well.

The Ways to Wellbeing Service has been in place for just over two years now and an evaluation of its success has taken place. The service is a way of providing people with a little extra support at a time they need it the most. It connects people to local community support to make them feel better. Nationally, 20-25% of patients consult their GPs for social problems, e.g. loneliness. The service has had over 300 referrals and has proved to reduce GP/health appointment use. For the residents who have used the service 80% of people reported a greater sense of wellbeing and 75% reported an increased confidence.

Culture and Wellbeing York, a consortium of arts and culture partners, delivered a pilot programme to help improve the health of older residents in the city. By enabling participation in high quality artistic and cultural activity the project focused on improving health outcomes by increasing mental wellbeing through reducing social isolation and loneliness; enabling people to connect with others across generations; keeping active and reducing the risk of injury and inclusivity of people with learning disabilities and those with dementia. The ambitions of the consortium included looking at the reasons for non engagement, finding out what need there was (for example what activities were needed), and co-creation, collaboration and conversation between social prescribing and local area teams.

"A few years ago we might not have been able to do this – the Health and Wellbeing Board has created the environment for this to happen"

**Anna Bialkowska; Culture and Wellbeing Co-ordinator;
Cultural Consortium for Wellbeing York**

Joint Strategic Needs Assessment

Producing a Joint Strategic Needs Assessment (JSNA), describing the health of York's population and the factors that influence health is one of the main responsibilities for the Board. Its primary purpose is to be a tool for commissioning and policy decisions. In York the JSNA is a website <http://www.healthyyork.org/>

The JSNA is co-ordinated by a multi-agency working group which includes representation from York's Public Health Team; NHS Vale of York Clinical Commissioning Group; York Teaching Hospital NHS Foundation Trust; York CVS; City of York Council and North Yorkshire Police.

What has happened over the last twelve months

2017/2018

APRIL 2017

In April 2017 the content of the previous JSNA website was reviewed. We asked partners what had worked well and what needed to change. We were told that it was really helpful to have all the information in one place and that the more in depth pieces of work around individual topics were really valuable. However, we were also told that some of the information was out of date and was hard to navigate.

JUNE 2017

In June 2017 we completed a Student Health Needs Assessment. This project was established after the rise in student suicide in York. The project was undertaken in partnership with the four higher education institutions in the city. It was subsequently presented at a Healthy Universities conference, helping other areas to learn from York's approach.

Building Partnerships: Higher York has been a strong partner throughout this needs assessment and after completion they agreed to take on a role co-ordinating work to address the priorities identified. This has helped to increase the longer term impact of the needs assessment.

OCTOBER 2017

In October 2017 we started a rapid [Sexual Health Needs Assessment](#) to help inform major sexual health commissioning decisions that are scheduled for 2018. This needs assessment combined national benchmarking data sources and the views of people who used the specialist services in York. It was completed in March 2018.

NOVEMBER 2017

In November 2017 we published the new content on the JSNA website. In response to feedback we slimmed down the JSNA to focus on the topics that really matter to York and structured the content on a life course which complements the joint health and wellbeing strategy 2017-2022. We have focused on providing a concise narrative and making it easier to find the information you need. The content will be reviewed annually, if there are any changes you would like to see then please let us know at: healthandwellbeing@york.gov.uk

DECEMBER 2017/ JANUARY 2018

In December 2017 and January 2018 we ran learning lunches and information sessions to boost awareness of the JSNA among managers and commissioners in York. If you would like a learning session for your team or organisation then please get in touch at: healthandwellbeing@york.gov.uk We are also promoting the JSNA with local universities. This helps researchers to have a better understanding of the health needs in York and to find ways to work together to use evidence to address them.

MARCH 2018

In March 2018 we completed a Homeless Health Needs Assessment. This was undertaken to inform the York homeless strategy for 2018 'preventing homelessness together', as well as to identify opportunities for the health and social care system to better meet the health needs of people who are homeless or in insecure accommodation in York.

What's next? We are planning two more in depth pieces of work to look at the health needs of York residents:

- A project to investigate the data describing high levels of drug related deaths in York
- A project to identify opportunities to improve the dental health of residents; in particular children.
- We are also looking more closely at inequalities in York. In particular where people living in certain parts of the city, or who have protected characteristics and who have different outcomes than the city as a whole. We plan to incorporate these inequality reports into the JSNA in the summer and autumn 2018.

Pharmaceutical Needs Assessment

The Health and Wellbeing Board has responsibility for the production of a Pharmaceutical Needs Assessment (PNA) every three years.

The Pharmaceutical Needs Assessment considers whether pharmacies in York are in the right places and delivering the right services to meet the health needs of York residents. The population of York is growing and ageing, which is projected to increase the demand on health services, including community pharmacy services. It is important that the community pharmacy services have sufficient capacity to grow with this demand.

Summary

The PNA found that pharmacy services appear to be well spread across the main population centres of York, although the more central locations are better served than the outer villages. As housing developments change the residential picture of York, the need for community pharmacies should be reviewed. At present all of the York population live within a moderate driving distance of a pharmacy.

Overall, the range of services appears to meet the needs of residents, although public knowledge of some of these services is low. Broadly, the feedback from the public is that the services they

used were easy to access and meeting their needs. There are opportunities to build on this, in particular, improvements in the lifestyle advice on offer for people with long term health conditions, and the availability of compliance aids and medicine deliveries for those who require them. There is also scope to improve the opportunities of residents to offer feedback on their experiences through an independent feedback route. Finally, both pharmacists and health and social care providers in York recognise that there are opportunities to build on existing partnerships to make it easier for people to access the services they need.

Community pharmacies are an increasingly important part of the response to non-urgent health needs in the UK. In York, as elsewhere, a large proportion of the population use a pharmacy within the year, but many of these people only use pharmacies for prescription or over-the counter medications. In York, as elsewhere, there is scope to further encourage people to adopt the 'Pharmacy First' model of health care.

The current PNA was approved by the Health and Wellbeing Board in March 2018 and runs until March 2021.

How the PNA was produced

The Health and Wellbeing Boards of



York and North Yorkshire decided to work collaboratively in the development of their respective PNAs. A joint multiagency steering group was established to manage the production of the PNA.

The multiagency steering group met four times between March and September 2017. Additionally, working groups were established by the steering group to produce specific elements of work between the steering group meetings.

The steering group were keen to emphasise the importance of consulting with stakeholders. There were two parts of engagement and consultation in the production of the PNA.

Engagement with the public and key stakeholders was an important part of development the PNA and this took place in June and July 2017 (eight weeks) through the form of a survey. Four versions of the survey were produced; one for the public, one for pharmacists, one for health and social care providers, and one for strategic commissioners.

Consultation on the draft report was an important and necessary step in developing the PNA. The legislation and best practice guidance specify that the consultation period must last for 60 days in order to allow all interested parties a reasonable opportunity to respond. In York, the consultation period ran during November and December 2017.

Performance

Monitoring performance against the joint health and wellbeing strategy 2017-2022 is important to the Health and Wellbeing Board. Below is an idea of the direction of travel on a number of the key indicators from the different life course stages.

A selection of indicators have been chosen where at least five 'data points' exist i.e. we have data for at least five consecutive time periods. These time periods are usually annual but can be

shorter (e.g. a quarter) or longer (three year aggregated).

In each case a trend line has been plotted and 'projected' forward for several time periods. The projections therefore represent what we can expect to see in future time periods assuming the current trends continue.

The table opposite summarises the situation for each indicator.



Improving trend in York & projected to be better than national average

% of children in Year 6 recorded as being obese

Trend: based on current trends it is expected that by 2019/20 York will have obesity rates of just over 15% compared with national rates of over 20%

% of children who received a 12 month review by the time they turned 12 months

Trend: Based on current trends it is expected that by the second quarter of 2018/19 York will be exceeding the national averages and over 80% of children will receive a 12 month review by the time they turn 12 months

Inequality in female life expectancy at birth

Trend: The life expectancy indicators are calculated retrospectively so the most up to date period we have at present is 2014-16.

Based on current trends it is expected that by 2017-19 the inequality in life expectancy for females will have fallen to about three years in York compared with around 7.5 years in England.

Improving trend in York but still projected to be worse than national average

IAPT service referrals: rate per 100,000 population aged 18+

Trend: based on current trends, it is expected that by quarter four of 2019/20 the rate of referrals to IAPT in York will have risen to just under 700 per 100,000 of population. This is still expected to be below the England average of 920

Worsening trend in York and projected to be worse than national average

Emergency hospital admissions for self harm

Trend: Based on current trends it is expected that by 2019/20 the rate of emergency admissions for self harm will have risen to about 275 per 100,000 compared with about 185 in England.

Emergency admissions for acute conditions that should not usually require hospital admission

Trend: Based on current trends it is expected that by 2019/20 the rate of emergency admissions for acute conditions that should not usually require hospital admission will have risen to about 1,560 in York compared to 1,450 in England

Hospital admissions for alcohol-related conditions

Trend: Based on current trends it is expected that by 2019/20 alcohol related admissions will have risen to about 800 per 100,000 of population in York compared to an average of around 650 in England.

Worsening trend in York but still projected to be better than national average

Inequality in male life expectancy at birth

Trend: The life expectancy indicators are calculated retrospectively so the most up to date period we have at present is 2014-16. Based on current trends it is expected that by 2017-19 the inequality in life expectancy for males will have risen to about 8.7 years in York compared with around 9.5 years in England

Working with partners

Healthwatch York Reports

The Health and Wellbeing Board received a number of reports from Healthwatch York between May 2017 and May 2018 namely;

- [Unity Health Appointment Changes](#)
- [Healthwatch York's Annual Report 2016/17](#)
- [Healthwatch York Independent Evaluation 2017](#)
- [Healthwatch York Awareness Survey 2017](#)
- [Child and Adolescent Mental Health Services \(CAMHS\) Review 2017:](#)
- [Home Care Services](#)
- [Filled to Capacity: NHS Dentistry in York](#)

Health and Wellbeing Board actively encourages all partners to respond to the recommendations within these reports.

Care Quality Commission Review and creation of a place based improvement partnership for York

Between 30 October 2017 and 3 November 2017, the Care Quality Commission (CQC) undertook a Local System Review of York. York was one of 20 areas selected for a local systems review to look at how we support older

people to maintain their independence and to get home from hospital if they have been admitted.

The inspectors' interviews, focus groups and visits took in services across our system, including council; NHS; independent and voluntary sector. The [CQC Local System Review](#) concluded with the publication of their report on 22 December 2017. The report made thirteen recommendations to be addressed by the Health and Wellbeing Board.

In response to these recommendations the Health and Wellbeing Board have established the York Health and Care Place Based Improvement Board (PBIB) comprised of senior York based representative from City of York Council; NHS Vale of York Clinical Commissioning Group; York Teaching Hospital NHS Foundation Trust; GPs; Tees, Esk and Wear Valleys NHS Foundation Trust; York CVS and North Yorkshire Police. The partnership is chaired by the Chief Executive of City of York Council and reports on a regular basis to the Health and Wellbeing Board. An [improvement plan](#) in response to the recommendations has been developed.

Better Care Fund

The Better Care Fund (BCF) is a programme spanning both the NHS and local government which seeks to join up health and care services so that people can manage their own health and wellbeing and live independently in their communities for as long as possible.

The [Better Care Fund Plan for 2017-19](#) was approved by the Health and Wellbeing Board and submitted on 11 September 2017 and approved by NHS England on 20 December 2017.

The BCF comprises a number of schemes to provide integrated health and social care services that result in an improved experience and better quality of life. As well as carrying over the existing schemes from the previous BCF Plan some new schemes have been introduced including:

Alcohol prevention – investment to drive a promotional campaign and the delivery of training programmes to support an early intervention and preventative approach.

Rapid Assessment & Treatment Service (RATS) - this scheme provides additional support for the hospital Rapid Assessment Team to extend the service to cover evenings and weekends.

Seven day working: multi-agency – to develop and facilitate discharge from hospital seven days a week.

York Integrated Care Team
NHS Vale of York Clinical Commissioning Group, in partnership with local stakeholders, has developed a five year vision for care of the population. Key to this approach are local hubs, also known as the York Integrated Care Team (YICT), which provide a central point of access to health and social care services. The YICT was initiated by Priory Medical Group who designed, developed and implemented the care model which was born from the views of the local community who said they wanted fast access to care and support and to only have to tell their story once.

Following a successful trial with 55,500 patients the scheme was expanded to cover four York based practices and a rural Practice; totalling a population of 130,000. Subsequently, the scheme has been rapidly expanded to cover all City of York Practices totalling 207,000 patients.

The YICT helps keep people out of hospital and independent for longer by working directly with each individual to see if appropriate alternative solutions can be found. It offers continuous review

and support which ensures that patients are optimised to stay at home.

The project has seen some encouraging outcomes and good levels of patient satisfaction. The team has been highly

praised for its innovative approach to ensuring local patients get the right care, in the right place, at the right time across the Vale of York. Work is continuing with partners across the Vale of York and to expand the service across the local area.



Challenges and the future

The health and wellbeing of the people in York is generally better than the national average but there are still significant differences in life expectancy and wellbeing in some of our communities.

We need to continue to build resilience in our communities and to encourage people to take responsibility for their own health and wellbeing as much as possible.

However, we must not be complacent and we know there are areas where we are not performing as well as we could be, these include – hospital admissions for alcohol related conditions; emergency hospital admissions for self harm and inequalities in life expectancy for men. We need to focus on these to improve. We also have an increasing number of students in the city and this presents a challenge to health service provision.

We need to continue with our renewed focus on delivering the priorities in our joint health and wellbeing strategy and the new mental health strategy, monitoring performance and ensuring that we are making a positive difference to the lives of our residents.

By the end of 2018 we will also have approved new strategies for suicide prevention and for learning disabilities and will be committed to delivering these.

The health and social care system continues to be under pressure and the place based improvement partnership will continue their work to deliver against the improvement plan in response to the CQC whole system review.

Through this plan, the place based improvement partnership will focus on the whole system working towards community asset led services; securing a sustainable and appropriately skilled workforce to deliver the quality of interventions required; looking at ways to invest in housing both to accommodate the workforce with a particular emphasis on affordable housing for those in lower paid posts and looking at a range of supported living options to support people to maintain their independence and reduce the pressure on statutory sector provision

If you would like this information in an accessible format (for example in large print, in Braille, on CD or by email) please call (01904) 551550

This information can be provided in your own language.

Informacje te mogą być przekazywane w języku ojczystym.

Polish

Bu bilgi kendi dilinizde almanız mümkündür.

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此信息可以在您自己的语言。

Chinese (Simplified)

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Chinese (Traditional)

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