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| Meeting | Health and Wellbeing Board |
| Date | 16 November 2022 |
| Present | <p>Councillors Craghill, Looker and Waller Siân Balsom - Manager, Healthwatch York Brian Cranna - Director of Operations and Transformation, Tees, Esk & Wear Valleys NHS Foundation Trust (substitute for Zoe Campbell) David Harbourne - Chair of York CVS (substitute for Alison Semmence) Jamaila Hussain - Corporate Director Adult Social Care and Integration, City of York Council Martin Kelly - Corporate Director of Children's and Education Services, City of York Council Stephanie Porter - Interim Executive Director of Primary Care and Population Health, NHS Humber & North Yorkshire Health and Care Partnership (substitute for Simon Bell) Peter Roderick - Consultant in Public Health, City of York Council/NHS Vale of York Clinical Commissioning Group (substitute for Sharon Stoltz) Lisa Winward - Chief Constable, North Yorkshire Police</p> |
| In Attendance | <p>Carl Wain - Information and Social Action Manager Joe Micheli - Head of Communities, City of York Council Tracy Wallis - Health and Wellbeing Partnerships Coordinator, City of York Council</p> |
| Apologies | <p>Councillor Runciman Simon Bell - Interim Place Director, NHS Humber & North Yorkshire Health and Care Partnership Dr Emma Broughton - Joint Chair of York Health & Care Collaborative Zoe Campbell - Managing Director - Yorkshire, York & Selby - Tees, Esk & Wear Valleys NHS Foundation Trust</p> |

Shaun Jones - Interim Director Humber and North Yorkshire Locality, NHS England and Improvement

Simon Morrill - Chief Executive, York & Scarborough Teaching Hospitals NHS Foundation Trust

Alison Semmence - Chief Executive, York CVS

Sharon Stoltz - Director of Public Health, City of York Council

109. Chair (16:33)

In the absence of the Chair and Vice Chair, the Board needed to elect a Member to act as Chair of the meeting.

Resolved: That Cllr Waller be elected to Chair the meeting.

110. Declarations of Interest (16:37)

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.

Cllr Waller declared a personal interest in that he is a Governor for Westfield Primary School and York High School, and his partner is employed by NHS England.

111. Minutes (16:38)

Resolved: That the minutes of the last two meetings of the Health and Wellbeing Board held on 18 May and 20 July 2022 be approved as an accurate record.

112. Public Participation (16:39)

It was reported that there had been four registrations to speak under the Council's Public Participation Scheme.

Flick Williams spoke about agenda item 6 – Approval of Application for WHO Friendly Community Status, and item 10 –

COVID-19 Update Report. She questioned York's Age Friendly City status while Blue Badge holders remain excluded from York City Centre. She then spoke about the social model of disability and the effects of both COVID-19 and the exclusion of Blue Badge holders on people's mental health.

Marylin Crawshaw also spoke on item 6 and the 'Reverse The Ban' campaign. She argued the ban jeopardises key parts of the Health and Wellbeing Strategy before highlighting the 27 organisations participating in the campaign. She then provided some comments from the 2700 postcard petition submitted to the full Council meeting on 20 October 2022 describing how the ban affects them.

Diane Roworth also spoke on the 'Reverse The Ban' campaign. She explained that the ban causes isolation, exclusion and unhappiness, which contribute to physical and mental ill-health before providing some further comments from the petition submitted to the Council.

James Cannon also spoke on item 6 and welcomed the progress made so far, including investments to improve pavements and installation of extra seating. He argued against Blue Badge exemption and how this, alongside COVID-19, has impacted the elderly and their mental and physical health.

113. Ratification of Decisions made by the Health and Wellbeing Board outside of a Formal Meeting (16:56)

The Board considered a report that asked members to formally ratify four decisions which were made outside of a formal meeting via email following the cancellation of the September meeting. The Consultant in Public Health for City of York Council/NHS Vale of York Clinical Commissioning Group detailed the decisions that needed approval:

1. Joint Health and Wellbeing Strategy 2022-2032
2. Pharmaceutical Needs Assessment (PNA) 2022-2025
3. Review of York's Health and Wellbeing Board
4. Chairship of the Mental Health Partnership

He also confirmed that the PNA has been approved by the NHS.

Members commented on the Joint Health and Wellbeing Strategy and questioned how strategic decisions are made to ensure that they are realistic. They discussed issues, such as black mould in houses, accessibility for the elderly in the city centre and support in schools, as factors which affect people's health and wellbeing.

Resolved: That the Health and Wellbeing Board ratify the decisions made in relation to the four items on the published agenda for September 2022.

Reason: To ensure that the decisions made by the HWBB are lawful.

114. Report of the York Health and Care Partnership (17:04)

Board Members considered a report that provided an update regarding the work of the York Health and Care Partnership since the last report provided in July 2022 (formally the York Health and Care Alliance), the progress to date and next steps.

The Corporate Director of Adult Social Care and Integration, City of York Council, outlined the paper and provided an update on the Place Board. She noted that:

- The Integrated Care Board now has a transitional operating plan to ensure consistency but there is still work to be done in the Place Board regarding delegation authority around finance, spending, and NHS funding.
- The membership of the Board is complete, and the terms of reference were agreed at the 24 October 2022 meeting.
- The Health and Care Prospectus was completed.
- The Place Board set overarching priorities and ways of delivering health and agreed to the following priority areas:
 1. Quality of Services; quality, safety, experience of care
 2. Population Health: health generation, prevention, early intervention
 3. Access to Services: general practice, dentistry, planned care

4. Resilient Community Care: preventing admissions, in-and-out of hospital care, effective discharge
 5. Urgent and Emergency Care: capacity, resilience, responsiveness
- Governance was agreed so there are now specific groups to look at delivering and achieving priorities.

The Interim Executive Director of Primary Care and Population Health, NHS Humber & North Yorkshire Health and Care Partnership stated that the Board is also populating priority areas with actions that form performance measures.

In response to questions from Members, The Corporate Director of Adult Social Care and Integration explained that the Place Board has different tiers of governance in relation to making decisions and budgets so local authority and community partners play a key role in these.

Resolved: That the Health and Wellbeing Board:

- i. Noted the content of the report and progress made.
- ii. Support the dissemination of the York Health and Care Prospectus across partners.

Reason: To keep the Board updated about the developments at Place.

115. Approval of Application for WHO Age Friendly Communities Status (17:13)

The Health and Wellbeing Board considered a report which asked Members for permission to apply for World Health Organisation (WHO) Age Friendly Communities Status. The Information and Social Action Manager outlined the report and noted that the Council consulted with residents and stakeholders to understand the key issues, and recommendations that can be implemented. He also outlined some recent projects that the Council have been involved in to improve services, which includes community transport and accessibility in community venues.

There were three options available to the Board in relation to applying for WHO status:

1. Apply for WHO status

2. Remain part of the Age Friendly Community but not apply for WHO status
3. Withdraw from the Age Friendly Community through the Centre for Ageing Better and determine an alternative method to deliver against the ageing well arm of Health and Wellbeing strategy.

The recommendation was changed to pause the application for WHO status in order to engage with community groups who have expressed concern, and work with the Access Officer to find a positive and constructive way to proceed. He also noted that the Council has an ongoing consultation process to choose priority areas.

Members were supportive of this amended recommendation and highlighted areas where York fails to be age friendly, including through pavement cafes and mobility problems, accessibility to online services and parking issues.

Resolved: That the City of York remain part of the Age Friendly Community but the application for WHO status be paused.

Reason: In order to engage with community groups and the Council's Access Officer to find a positive and constructive way to proceed with the WHO status application.

116. Healthwatch York Report: York Voices - What you Have Told Us So Far in 2022 (17:27)

This report was for information, where Healthwatch York shared details about what they have heard recently from York residents to the Health and Wellbeing Board. The Manager of Healthwatch York summarised the report and noted that it was used in creating the Health and Care Prospectus.

Resolved: That the Health and Wellbeing Board received Healthwatch York's report.

Reason: To keep up to date with the work of Healthwatch York and be aware of what members of the public are sharing with them.

117. Healthwatch York Report: Accessible Information Update Report (17:28)

Members considered a report which provided an update to the Board following the presentation of the joint report from Healthwatch North Yorkshire and Healthwatch York on Accessible Information presented to the July 2022 meeting. The Manager of Healthwatch York summarised the report and noted that they are still awaiting some responses from members and the York Health and Care Partnership before they are added to the report as part of a formal response.

Resolved: That the Health and Wellbeing Board:

- i. Received the update report
- ii. Considered the recommendations made

Reason: To make sure there is continued focus on how well our health and care system meets the Accessible Information Standard.

118. Healthwatch York Report: Children's Mental Health - A Snapshot Report (17:29)

Members considered a report which provided a summary of what people have recently told Healthwatch York about accessing children's mental health support. The Manager of Healthwatch York detailed the report and explained that it is a discussion around the City's approach to children's mental health and how it is able to make people feel more confident to access the help and support they need. She also discussed the need to analyse how the system works to ensure children get help and support, but that they are also aware of the options available to them.

The Director of Operations and Transformation for Tees, Esk and Wear Valleys NHS Foundation Trust welcomed the feedback from the report before acknowledging communication issues mentioned by families in accessing support and noting that partnership working and having numerous routes of access is very important. He also explained that long waiting times continue to be an issue with young people waiting 12 weeks for a mental health assessment, 2-3 weeks for an urgent referral, and 1-2 years for a neurodevelopmental assessment.

Members discussed the report and argued that the iThrive model and the Child and Adolescent Mental Health Services are not communicated, and not understood well by parents and that further support is necessary by the NHS. The Director of Operations and Transformations for NHS explained to Members that there have been changes in the Trust so there will be a focus on improving the services provided alongside giving families and schools increased support. He then agreed to provide a projected timeline of when these changes would occur and when results will be seen to the Board.

The mental health of students was discussed, with Members stating that York needs to pay closer attention to them due to their vulnerability, with particular support necessary for ethnic minorities and those part of the LGBTQ+ community. Members discussed the need for the prevention of some of the causes of mental health issues too.

Resolved:

- i. That the Healthwatch York's report, Children's Mental Health: A Snapshot Report is received by the Board.
- ii. That the Board Members are reminded to respond directly to Healthwatch York within 28 days regarding the recommendations made to their organisation.
- iii. That Healthwatch York provides an updated report to the Board following the end of their consultations.

Reason: To keep up to date with the work of Healthwatch York and be aware of what members of the public are telling them.

Resolved:

- i. That Tees, Esk and Wear Valleys NHS Foundation Trust provide a projected timetable for changes and results to Members of the HWBB.

Reason: To keep the Board updated with the NHS's projects and policies in relation to children's mental health.

119. Better Care Fund Update (17:49)

Board Members considered a report that provided them with a quarterly update on the Better Care Fund (BCF), which is a

national mechanism that aims to reduce admissions, delays and long term care in hospitals.

The Corporate Director of Adult Services and Integration, City of York Council, presented the report and explained that the 2022/23 BCF plan, which has a new focus on early intervention and prevention, has been updated and sent to the BCF national team. She noted that £20 million was awarded in funding and that the Council will review the schemes funded to ensure that they are effective in meeting the BCF goals. She also confirmed that NHS England has received the report and has agreed with the recommendations and monies within the BCF.

Resolved:

- i. That the contents of the report are noted by the Board
- ii. That the information within the attached appendices are noted.

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

120. Health Protection Annual Report (17:54)

Members considered a report that provided an update on health protection responsibilities within City of York Council and builds on the report from November 2021. The Consultant in Public Health for City of York Council/NHS Vale of York Clinical Commissioning Group provided an overview of the report and explained that it gives the Board assurance about work going on in York and covers sexual health services and vaccinations, amongst others. He also noted the ongoing work from the Health Care Acquired Infections group, oral health services and screening programmes before explaining that Infection, Prevention and Control (IPC) measures are delivered through the Harrogate and District IPC team.

In response to questions from Members, the Consultant in Public Health confirmed that:

- The uptake of some vaccinations for children is lower partly due to vaccination programmes in schools being disrupted due to the pandemic but that this is a nationwide issue and the Council are working to fix this backlog.

- The HPV vaccination has been expanded to both sexes and the Council are working closely with school vaccination services.

Further to statements from the Board, they;

Resolved:

- i. That the report is noted.
- ii. That further information on dentistry services for children and flexible commissioning programmes is provided to Members at the next Board meeting.

Reason: to keep the Health and Wellbeing Board updated in relation to health protection arrangements.

121. Director of Public Health Annual Report (18:03)

Members considered a statutory report of York's public health and it focuses on the City's response to the pandemic and covers the two year period of 2020-2022. The Consultant in Public Health for City of York Council/NHS Vale of York Clinical Commissioning Group provided an overview of the report and explained that it details the timeline and impact of the COVID-19 outbreak but also highlights the voices of healthcare professionals and York residents to understand the pandemic in the City. The report also makes historical comparisons between COVID-19 and three different epidemics that York faced to show how and why the City responded accordingly.

As a result, the report lists four recommendations for the City which include:

1. Public Health should seek to build on the city-wide partnerships that were formed and lead the development of a 'living with Covid' approach.
2. Establish a York Health Protection Committee to respond to large scale events such as future pandemics and disease outbreaks, amongst others.
3. Children and young people have been particularly badly affected over the past two years and the 2022 school survey has identified a number of needs that have to be addressed. It is recommended that the findings of the school survey are used to inform the development of a

new Children's Plan for York to be adopted by the Safeguarding Children Board Executive and the Health and Wellbeing Board.

4. The pandemic has had wider impacts of physical and mental health on residents. Preventable health issues, such as alcohol consumption, reduced levels of physical activity and mental health problems, should be focussed on. It is recommended that the public health team take on a preventative approach to some of these issues across York.

Resolved:

- i. That the Health and Wellbeing Board received the report.
- ii. That the Board agreed to support the recommendations.
- iii. That the progress made on the recommendations of the 2019 Director of Public Health Annual Report is noted.

Reason: It is a statutory requirement of the Director of Public Health to produce an annual report and the Board need to be aware of the recommendations within it.

122. HWBB Report COVID-19 update report (18:08)

Members considered an information only report that provides them with an update on COVID data for York.

In response to questions from Members, the Consultant in Public Health for City of York Council/NHS Vale of York Clinical Commissioning Group noted that:

- The Public Health team are monitoring COVID-19 infections through weekly ONS figures and are analysing excess death graphs and their causes.
- Primary Care is developing approaches to try and test for COVID and flu at the same time, which may give better protections in the future.
- It is difficult to predict future rises in COVID cases, so currently, it is encouraged to continue washing hands, ventilating public spaces, wearing masks in vulnerable settings, and getting vaccinated.

- There are some social disparities between people who take up vaccinations and those who are slightly more resistant to them but work has been done to overcome barriers to vaccinations and vaccine inequality.

The Interim Executive Director of Primary Care and Population Health, NHS Humber & North Yorkshire Health and Care Partnership also explained that there are weekly trackers with GP services alongside escalation ratings that are reported to Primary Care to monitor rates. She also noted that staff absences are monitored and that there is ongoing work with vulnerable groups and people who may be more resistant to vaccines.

Resolved: That the report is received and any key issues for further consideration are highlighted.

Reason: To keep the Board updated in relation to COVID-19.

123. Report of the Chair of the York Health and Care Collaborative (YHCC) (18:22)

Members considered a report on the work of the York Health and Care Collaborative, which is a multi-agency group that brings together a range of organisations involved in health and care in the City. The Consultant in Public Health for City of York Council/NHS Vale of York Clinical Commissioning Group presented the report and noted the 2022/23 priorities for the collaborative which cover prevention, ageing well/frailty, mental health and children and young people, all of which align with the Joint Health and Wellbeing Strategy.

He also provided an overview of some of the work completed by the collaborative, including:

- Frailty work and the use of the Rockwood Scale to prevent hospital admissions.
- Work around deprivation and the cost of living with action plans on how health care services can be better at supporting people with cost of living issues and how deprivation affects health.
- Improving staff wellbeing, for example by funding Blue Light cards for lower paid staff so that they can access discounts.

- Introduction of the Children's Ambulatory Treatment Hub which is trying to prevent avoidable admissions in hospitals for children.

The Board discussed some of the results from the workshop group and;

Resolved:

- i. That the Report of the Chair of the York Health and Care Collaborative is noted.
- ii. That the question and responses provided by Board members in relation to deprived communities in York, and comments on social work services and poverty numbers are circulated to the Collaborative.
- iii. That the Board will circulate an email, inviting Members to comment on health and non-health related anxiety.

Reason: There is a shared objective of improving the health and wellbeing of the population. The York Health and Care Collaborative is unique in bringing together; providers and commissioners of health and social care services (from the NHS and City of York Council), colleagues from City of York Public Health together with the voluntary sector as a means of working on joint priorities to achieve this objective. The York Health and Care Collaborative agreed to provide regular updates on its work and progress.

Councillor Waller, Chair

[The meeting started at 4.33 pm and finished at 6.30 pm].

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