

## Our place intention

Our place intention is to collaborate better, integrate further, and redesign and deliver services to match population need, through our place board, and seek delegated functions over time from the ICB in alignment with the ICS strategy. Through citizen, sector and stakeholder co-production work we have developed a York 'Prospectus', our preliminary statement which describes the state of our system in 2022, the changes we are currently putting in place, and what people have told us they would like to see in future years.

### Our health needs

We have identified our health needs through our Joint Strategic Needs Assessment, and our plan to tackle them is contained in a new, ambitious 10 year Health and Wellbeing Strategy which is one of three new 10 year city strategies, along with Economic and Climate Change Strategies. This sets the outcomes the place board will work to achieve.

# Preventable ill-health

1 in 10 smoke 2 in 3 adults overweight or obese 1 in 7 live with depression

Economic factors Lower than average income 10% of children living in poverty Housing affordability gap

#### Widening inequality gaps Healthy Life Expectancy Health of those with a learning disability School readiness

Changing Demographics Aging & growing population 4% ↑ hospital use (annual), 10% social care, 2.5% † in GP (over 5yrs)

#### York's 'red flags'

Alcohol consumption/admissions, multiple complex needs, drug related death, student health

#### Mental Health

u18s admissions for mental health need High prevalence of common MH illness High suicide and self-harm rate

# Our outcomes and first year actions

- > Lead the health and care sector response to the 3 city strategies, including the 6 ambitions of the Health and Wellbeing Strategy:
  - Become a health-generating city —
  - Make good health more equal across the city
  - Prevent now to avoid later harm
  - Start good health and wellbeing young
  - Work to make York a mentally healthy city
  - Build a collaborative health and care system
- Strengthen the foundations and governance of our place, streamline workstreams and build a fit-for-purpose partnership model
- > Join up the health and care research and innovation potential in York
- Model behaviours agreed in our 'Charter', improving cultural values
- Develop our co production approach to decision-making
- Produce a realistic future workforce strategy for the city based on the concept of a York 'health and care team'
- Key service redesign areas, including:
  - community services, including 0-19 services
  - neighbourhood team work in primary care
  - virtual wards and hospital avoidance
  - community Mental Health transformation / hubs

# Our system strengths and challenges

## **Strengths** for health and care in York



#### Improved links between primary care and wider social interventions, e.g. through social

prescribing An emerging aligned set of **prevention** 

# services / practitioner networks

The depth and togetherness of the voluntary sector

#### Many wonderful NHS and care staff, and commitment shown in e.g. the vaccination rollout

Research and innovation - the potential from clinical trials and operational insight

The power of

initiatives

involvement - seen in

several 'coproduced'

#### Use of technology to enable care and improve ways of getting help (but guard against digital exclusion)

Geography, in terms of our aligned providers, VCSE and council

An abundance of

space, access to

health assets - green

culture and heritage,

community venues

# **Challenges** for health and care in York



#### An overstretched, tired and burdened workforce where morale is low

Limited resilience in a number of smaller voluntary sector organisations

and long waits, across

hospital care but also

GP, community and

social care.

# Huge backlogs in care

Demand for healthcare seems to only ever head in one direction (upwards)

The long shadow and collective trauma of COVID

A voung people's

mental health crisis, apparent even before the pandemic made it

bed or the wrong service A reversal of inequality gains people in poorer

parts of York are

dying earlier than

they should

management',

system, not a

'preventative' system

A 'crisis

People often report

wrong place for too

long, be it a hospital

ending up in the

Access issues to several services, including urgent care, primary care and dentistry

A challenging

in York

financial situation for

all providers of care

Labvrinth systems people feel they bounce from one gatekeeper to another

# Our framework for a health generating city







CARE with compassion and quality



things into one York team