

Meeting	Health and Wellbeing Board
Date	20 January 2016
Present	<p>Councillors Runciman (Chair), Brooks, Cannon and Craghill,</p> <p>Sian Balsom (Manager, Healthwatch York),</p> <p>Patrick Crowley (Chief Executive, York Teaching Hospital NHS Foundation Trust),</p> <p>Kevin Curley (Acting Chief Executive, York CVS),</p> <p>Martin Farran (Director of Adult Social Care, CYC)</p> <p>Dr Mark Hayes (Chief Clinical Officer, NHS Vale of York Clinical Commissioning Group),</p> <p>Ruth Hill (Director of Operations, Tees, Esk and Wear Valleys NHS Foundation Trust) (substitute for Martin Barkley),</p> <p>Tim Madgwick (Deputy Chief Constable, North Yorkshire Police),</p> <p>Mike Padgham (Chair, Independent Care Group)</p> <p>Rachel Potts (Chief Operating Officer, NHS Vale of York Clinical Commissioning Group)</p> <p>Sharon Stoltz (Interim Director of Public Health, CYC)</p> <p>Jon Stonehouse (Director of Children's Services, Education and Skills - CYC)</p> <p>Julie Warren (Locality Director (North) NHS England)</p>

Apologies - Martin Barkley (Chief Executive, Tees, Esk and Wear Valleys NHS Foundation Trust)

### **37. Introductions**

The Chair opened the meeting by congratulating Tim Madgwick who was due to receive the Queen's Police Medal.

The Board's Terms of Reference were circulated as the Chair felt that the strategic focus of the Board needed to be re-emphasized rather than the operational side.

### **38. Declarations of Interest**

Board Members were invited to declare any personal, prejudicial or disclosable pecuniary interests in the business on the agenda, other than the standing interests which had been circulated with the agenda papers. No additional interests were declared.

### **39. Minutes**

Resolved: That the minutes of the Health and Wellbeing Board held on 2 December 2015 be signed by the Chair as a correct record.

Consideration was given to the Board's Action Grid, in particular the action to write to the Department of Health. A draft letter to the Secretary of State for Health was circulated at the meeting and the Board asked for their comments before submission. The letter covered all the points discussed at the previous Board meeting and a related Council motion on public health cuts.

The following amendments to the letter were suggested:

- add a further sentence into the third paragraph to ask, what would any further reductions be, and the impact these would have on services
- inclusion of wording around dis-investment in prevention and the impact this would have

- include the fact that Health and Wellbeing Board support this letter as well as the council.

Discussions then took place on the current allocation of York's Public Health Grant and the predicted budget.

It was reported that there had been a shortfall in the current budget as there had been unfilled staff vacancies, lower than expected take up in some services and some activity such as a substance misuse service had been put on hold. Therefore the reduction in the overall grant of 6.2 %, which was recurrent, had been absorbed. It was unknown what the allocation for 2016/17 was likely to be, but Officers were expecting a further reduction of 2.7%. Work was currently being undertaken by a Health and Adult Social Care Policy and Scrutiny Committee Task Group on how the Council should prioritise their Public Health spending, and how to influence the way that services could be run.

One Board Member cautioned that 'Public Health' should not be looked at as a singular issue and needed to examine the delivery of services and budgets if they were cut further. It was noted that the Public Health Grant, which was currently ring fenced would no longer have this status after 2020, and it was expected to be funded from business rates.

#### **40. Public Participation**

It was reported that there had been one registered speaker under the Council's Public Participation Scheme.

Dr Andrew Field from the North Yorkshire Branch of YOR Local Medical Committee, who represented a number of GPs, shared a number of concerns with the Board in regards to the delivery of public health services in GP practices.

He raised concerns about cuts in services previously provided in primary care, including smoking cessation and sexual health. Practices who provided sexual health services had trained staff to provide these and there was a risk, that there could be a loss of skills through these cuts.

He added that access wise there was a postcode disparity in that some residents in North Yorkshire could access public health services, whilst those in the City of York could not. It was stated that patients valued these services and those such as health checks, where patients felt reassured.

In conclusion he requested that there be a joined up approach, as he was worried what was going to happen in March when the contracts ended.

The Interim Director of Public Health, Sharon Stoltz explained to the Board the reasons for why the smoking cessation contract had ended. She stated that it was the fifth lowest public health service accessed by patients and was very expensive. The city was currently under performance for the mandated NHS Health Checks and she wanted to make sure that the quality of service was the same across the city. This meant working with the CCG and GPs and she referred to offering the remaining health services as part of an Integrated Wellness Offer with GP practices. The Council were hopeful that in regards to the sexual health services that they could joint co-commission this service with the CCG from 1 April 2016.

#### **41. Joint Strategic Needs Assessment (JSNA) Update**

Board Members received an update report on York's Joint Strategic Needs Assessment (JSNA) and the work undertaken around specific topic areas.

The following comments were made:

- How can the HWBB assure itself that progress is being made against the wider strategic priorities
- There was a need for an alcohol strategy and a falls strategy for the city
- Student health should be included in the new JSNA work programme
- There was a gap in strategic planning around autism that needed to be looked at
- The work around poverty was weighted towards CYC

Resolved: That the report and its annexes be noted.

Reason: To update the Board on progress made with the JSNA.

## **42. YorOK Board Annual Report**

Board Members received the YorOK Board's second Annual Report.

Councillor Brooks, as the Executive Member for Education, Children and Young People and Jon Stonehouse as the Director of Children's Services, Education and Skills presented the report.

They reported that alcohol had been highlighted as a key issue in the new Children and Young People's Plan.

The Chair felt that although the YorOK Board looked at mental health in respect of the child that taking a wider view, to look at parental mental health and the whole family would be beneficial.

One Board Member asked about new Governmental approaches for children's social care and asked what had been put in place in the city. It was noted that the vision for children's social care in York aligned well with the Government's.

Resolved: (i) That the report, including the priorities and cross-cutting issues for the coming year be noted.

(ii) That the opportunities for strengthening partnership working and progressing shared and cross cutting priorities be noted.

(iii) That any other support, development or information that will help the Health and Wellbeing and YorOK Boards fulfil their shared objectives be discussed.

Reason: To keep the Board apprised of progress to date.

### **43. Update on Work towards Implementing the Recommendations Arising from Healthwatch York Reports**

Board Members received a report and two annexes which set out progress made to date on implementing the recommendations arising from two Healthwatch York reports on;

- Accident and Emergency (A&E) Department and its Alternatives
- Discharge from Health and Social Care Settings

Patrick Crowley, the Chief Executive of York Hospital commented on the recommendations from the A&E and its Alternatives report, he stated that all of the actions did not sit within his remit.

Martin Farran, the Director of Adult Social Care responded about the Health and Social Care settings report. He stated that there needed to be a better focus on people living in their own homes, and people needed to think in different ways. He stated that the current approach was paternalistic. Some Board Members agreed, whilst others disagreed and felt that it was not possible to be discharged from hospital and then be expected to self care.

It was agreed that future Healthwatch York reports should continue to be presented at the Health and Wellbeing Board but detailed discussions and updates should be considered by the JSNA/Joint Health and Wellbeing Strategy Steering Group.

Resolved: That the updates at Annexes A and B be noted.

Reason: To follow up on the recommendations of the Healthwatch reports.

### **44. Delivering the Five Year Forward View for the Vale of York**

Board Members considered a report which provided them with an overview of the new national planning guidance for health services and proposals for the local development of the required plans.

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Rachel Potts, the Chief Operating Officer from Vale of York Clinical Commissioning Group (CCG) presented the report. She informed the Board that the CCG had two tasks namely, to develop a Sustainability and Transformation Plan (STP) and a one year operating plan. The footprint of the STP would be large but discussions to the exact footprint were still ongoing. However, alongside the required plans, there also needed to be the submission of a financial recovery plan by the end of June 2016. It was noted that with a larger footprint the implementation of the plans would be slower.

One Board Member asked whether the minutes from the Systems Leaders Board were in the public domain and if there were any plans in the future for them to be. It was confirmed that this was not the case.

Resolved: (i) That the footprint for the Sustainability and Transformation Plan to build on the current System Leaders arrangements and cover the York and Scarborough footprint be noted.

Reason: To provide continuity in strategic direction and planning and reduce complexity through delivery a single plan for the STP requirements and local system recovery requirements.

Resolved: (ii) Receive updates on the development of the development of the Sustainability and Transformation Plan at future meetings.

Reason: The Sustainability and Transformation Plan will be aligned to the Health and Wellbeing Strategy for York and provide the strategic direction for recovery and sustainability for local health care services.

#### **45. Suicide Prevention**

The Board received a report which provided them with a brief overview of the work around suicide prevention in York.

The Chair confirmed that the report was for information only.

The Interim Director of Public Health added that a suicide audit would come to a development session in March. She commented that there was a need for a City of York Suicide prevention plan which sat under an overarching North Yorkshire Suicide prevention plan, which would include plans on how the city would become a zero suicide city. It was added that the Police had continued funding for a Suicide Prevention Officer.

Resolved: That the report be noted.

Reason: To keep the Health and Wellbeing Board apprised of the work being undertaken on suicide prevention.

#### **46. Forward Plan**

Board Members were asked to consider the Board's Forward Plan. Mike Padgham commented that there should be an item added on from the Independent Sector and some of its challenges going forward.

Resolved: That the Forward Plan be approved.

Reason: To ensure that the Board has a planned programme of work in place.

Councillor C Runciman, Chair  
[The meeting started at 4.35 pm and finished at 6.25 pm].