

Report of York Health and Care Collaborative; Update March 2022

1. Introduction

This report provides update on the work of the York Health and Care Collaborative (YHCC); briefly outlining the scope of each priority workstream.

2. Progress on Priorities;

2.1 Prevention

The responsibility for leading health promotion and prevention activities across the city is with City of York. YHCC provides a forum to share population health intelligence and identify where a collaborative approach can increase the impact and effectiveness of interventions.

- a) **Smoking**; prevalence in York is below the regional and national average. However, smoking in pregnancy has not decreased locally as much as nationally. Maternity services can refer into CYC, but engagement is low. CYC are in the process of procuring a provider of e-cigarettes and work is being done with the Trading Standards team to look at smoke free parks and school gate initiatives.

CYC have increased the size of the health trainer team and work needs to be done between CYC and primary care to make sure that those with the greatest need, and highest chance of success, are seen.

- b) **Substance misuse**; drugs and alcohol; in February, YHCC focused on alcohol misuse, an area where overall York performs poorly on most indicators.

Two alcohol link workers have been recruited by Changing Lives to support people in the community that require an intervention to reduce their alcohol consumption. The pilot was originally set up to be aimed at GPs, but this has now been extended to include health trainers and social prescribers. There is an opportunity for health trainers to work in GP practices to identify those with harmful alcohol consumption. Target health checks can then be

done via text. It was agreed that additional comms was required so that providers know the service is available for referrals.

An action was taken from the February YHCC meeting to understand whether it was possible to link the alcohol reduction programme with IAPT.

- c) **Weight management, obesity and diabetes;** The Healthy Weight Steering Group continues to meet and deliver work on the wider determinants of healthy weight and weight management pathways.

In children at reception age, York benchmarks slightly higher than the national average for weight. Therefore, the weight management offer for children in York focuses on 0-5 year olds. HENRY invites families to meet in group sessions to encourage healthy food behaviours, the service has been commissioned for six months.

For adults, two contracts have been commissioned for people who are obese and meet the eligibility criteria. The contracts are with GLL and Slimming World.

In the February YHCC meeting the group discussed how to increase referrals into weight management programmes. Slides from Public Health were shared to the group alongside a video to help people to have confidence in starting conversations around weight. It was agreed that there could be one offer to all York patients through social prescribers. This will be progressed by the Clinical Directors for York PCNs.

2.2 Ageing Well, Frailty and Multimorbidity

a) Ageing Well and Frailty

The YHCC Frailty Steering Group continues to meet monthly, the aim of the group is to understand how to code frailty and ensure that the coding is readily accessible to all health care professionals supporting frail people. The group have identified and are working towards the following next steps:

- Share training to all health care providers that come across frail patients
- Confirm whether all patients are consented to the ESCR
- To build a practice information pack with the Vale Frailty Group to ensure a consistent approach across primary care, community teams and social prescribers.
- Collate and share survey results from Central and Vale practices
- Schedule a meeting with all relevant stakeholders to understand what services are available in York for frail patients and produce a map that can be shared to providers in the city.

Representatives from York Trust attended the YHCC meeting in January to provide an update around the national guidance that was released in summer 2021 in relation the 2 hour Urgent Community Response, which will come into effect at the end of March 2022. It is recognised that when the clinical models are finalised, they will vary between different geographies. Multiple agencies will need to help to design the model and YHCC will support any necessary conversations between providers in York.

2.3Mental Health

The responsibility for leading mental health transformation is with the Mental Health Partnership. YHCC supports two main aspects of this work; the aim to achieve better integration of mental health into the broader provision of community and primary care services and addressing the need to improve the physical health of people with severe mental health illness (SMI).

A workshop was held in October with the Innovation Unit who proposed three different models for mental health hubs in York. The chosen model will be prototyped through temporary MDT teams in a virtual hub. It was agreed that the hubs would need to be co-produced, and that primary care was central in their development.

Covid Support Hub – The Covid hub was set up in the first wave of the pandemic to offer welfare calls to those that were moderately unwell with Covid and at risk of rapid decline. This service is still in place, but the work of the hub has expanded to include additional services.

The most recent piece of work the hub has started looking at is offering calls to patients on hospital waiting lists to try and ensure they are fit for

surgery when it is offered. York is the first place in HCV to try and tackle the long waiting lists in this way. Long waiting lists are creating an unmet health need in York and it could be up to 5 years before the lists recover from the impact of Covid. Those receiving the calls will all be on P4 waiting lists and therefore, likely to face the longest waits. The cohort will be risk stratified based on health and social factors to make sure those that are most vulnerable are contacted first.

The hub is an example of successful collaborative working between City of York Council, York CVS, Nimbuscare and Vale of York CCG. Relationships formed through the hub have been unique and only made possible due to the foundation that was in place before the pandemic.

3. Future work and further development of York Health and Care Collaborative in 2022/2023

3.1 Priority Setting

Priorities for the group in 2022/2023 will be discussed and agreed at the March YHCC meeting.