

Meeting	Health and Wellbeing Board
Date	4 December 2013
Present	<p>Councillors Simpson-Laing (Chair), Looker, Kersten England (Chief Executive, City of York Council)</p> <p>Dr Paul Edmondson-Jones (Deputy Chief Executive and Director of Public Health and Wellbeing, City of York Council)</p> <p>Kevin Hall (Interim Director of Adults, Children and Education, City of York Council)</p> <p>Siân Balsom,(Manager, Healthwatch York)</p> <p>Dr Mark Hayes (Chief Clinical Officer, Vale of York Clinical Commissioning Group)</p> <p>Rachel Potts (Chief Operating Officer, Vale of York Clinical Commissioning Group)</p> <p>Chris Butler (Chief Executive, Leeds and York Partnership NHS Foundation Trust)</p> <p>Ken McIntosh (Acting Assistant Chief Constable, North Yorkshire Police) (Substitute for Dave Jones)</p> <p>Catherine Surtees (Partnerships Manager, York Council for Voluntary Service (CVS)) (Substitute for Garry Jones)</p> <p>Julie Warren (Director of Commissioning, NHS England) (Substitute for Chris Long)</p> <p>Wendy Scott (Director of Community Services (Scarborough, Whitby and Ryedale, York and Selby) York Teaching Hospital NHS Foundation Trust)</p>

Apologies

Councillor Healey

Mike Padgham (Chair, Independent Care Group)

Dave Jones (Chief Constable, North Yorkshire Police)

Garry Jones (Chief Executive, York Council for Voluntary Service (CVS))

Chris Long (Local Area Team Director for North Yorkshire and the Humber, NHS England)

Patrick Crowley (Chief Executive, York Teaching Hospital NHS Foundation Trust)

22. Declarations of Interest

Board Members were invited to declare any personal, prejudicial or disclosable pecuniary interests, other than their standing interests attached to the agenda, that they might have had in the business on the agenda.

Siân Balsom updated her standing interest by confirming that she was the Chair of Scarborough and Ryedale Carer's Resource, not the Vice Chair as previously stated.

No other interests were declared.

23. Minutes

In reference to Minute Item 16 (Integrating Health & Social Care-Integration Transformation Fund), Board Members were updated that the line and that *the other half would be new money* was now incorrect, as this money is already in existing budget baselines .

Resolved: That the minutes of the Health and Wellbeing Board held on 2 October 2013 be signed and approved by the Chair as a correct record subject to amendment detailed above.

24. Public Participation

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

Jake Furby from the York Lesbian Gay Bisexual and Trans Forum (LGBT) spoke about how the Forum were producing a document on health and wellbeing issues that LGBT people in York were facing. He requested that partners support the Forum's research when producing the Joint Strategic Needs Assessment (JSNA) 2013-14. He also asked for further minority strands to be included in the JSNA.

The Director of Public Health and Wellbeing confirmed that he would be happy to include within the JSNA, the Forum's research and any information they could provide on other minority groups.

25. The Mental Health Challenge

Board Members received a report which asked them to note the contents of the Mental Health Challenge.

David Smith, Chief Executive from The Retreat presented the report. Board Members were informed how Group Leaders had been approached to sign the Challenge to get them to sign up to the Challenge. He had been encouraged by their responses, and those from other Members of the Council. He explained that it was particularly significant that partners noted the Challenge as during one point in the city's history, it was at the centre of Mental Health care in the country.

The Health and Wellbeing Board would act as collective champions for Mental Health. In addition, Councillor Looker reported that she would undertake a special responsibility for Mental Health on the YorOK Board.

The Chair suggested that David Smith be invited to the next Board's development session to work with Board Members on the Challenge. It was also noted that the Board would receive an update regarding the Challenge in six months time.

Resolved: That the Mental Health Challenge be adopted.

Reason: To promote equality in mental health.

26. A & E Winter Pressures Money

Board Members received a report which updated them on the use of additional money to fund schemes which would support health and social care to address winter pressures.

Members asked for information on the top reasons for presentation at Accident and Emergency. It was confirmed that this information could be provided and it was suggested that this be circulated to the Board.

It was noted that NHS England would be monitoring all NHS Trusts on a daily basis throughout the winter period, and that patients would be moved to where the care offered was the most suitable for them.

The Chair suggested that an update on the schemes to address pressures to health and social care services be provided at the next meeting and that comparative information from NHS England be included in this update.

Resolved: (i) That the report be noted.

(ii) That additional and further information be circulated between Board Members and partners on the top reasons for presentation in A & E Departments.

(iii) That a further update on A & E Winter Pressures Money be given at the next meeting of the Health and Wellbeing Board.

Reason: To co-ordinate work across partners.

27. Joint Strategic Needs Assessment-Progress Update

Board Members received a report which updated them on progress made for the Joint Strategic Needs Assessment (JSNA) 2013-14 for the Health and Wellbeing Board (HWBB).

In addition to the report, the Board were informed that a Health Inequalities Board had not yet been set up, but that an external lead had been given the responsibility to establish a Poverty Action Group, whose work would feed into the Health Inequalities Board.

Discussion took place regarding the JSNA as a web based resource and general resource issues in the collation of up to date data on Health and Wellbeing in the city.

Some Board Members pointed out that if the JSNA was online, it might be more difficult to bring a formal report back to the Board. It was suggested that a quarterly update could be brought to the attention of the Board in regards to what had been recently added on to the website. However, as a web based resource it was noted that the local information might not seem as robust as national data. In reference to points made under Public Participation, it was noted that there was a lack of data on ethnicity and sexuality within the JSNA.

In regards to general resource issues, it was noted that York Council for Voluntary Service was currently undertaking work on Learning Difficulties and that North Yorkshire Police had researchers who if approached might be able to help the Public Health Team in the collation of data for the JSNA.

Resolved: That the report and key recommendations be noted.

Reason: To co-ordinate work across partners and maintain the flow of information in an optimal manner.

28. Clinical Commissioning Group Strategic and Operational Planning Update

Members received a report which gave them an update on the NHS Vale of York Clinical Commissioning Group (CCG)'s strategic planning process and highlight emerging themes for further consideration.

Board Members were informed that the CCG's Operational Plan would now be extended by a year, to become a two year plan. Officers added that a two year plan was being considered for Adult and Social Care in the city and so it would be helpful to align this and the CCG plan.

In regards to emerging themes for further consideration, some Board Members felt that a highly significant area to concentrate on was on those who were newborn and up to 2 years old. Others suggested a future theme around the reduction of Out of Area Placements and working with hospitals on psychiatric care.

It was also requested by some Board Members that dates for consultation on the CCG plan be circulated to partners. Some Board Members felt that there also needed to be further lay involvement in the deep dive work for the JSNA.

Board Members were informed that updates on action plans would be considered at the Board's meeting in April 2014.

- Resolved:
- (i) That the report and key recommendations be noted.
 - (ii) That dates for the next consultation on the CCG Operational Plan be circulated to partners.
 - (iii) That a summary of all partners' operational plans be considered by the Board at their meeting in April.

Reason: To co-ordinate work across partners and maintain the flow of information in an optimal manner.

29. Older People and People with Long Term Conditions Partnership Board

Board Members were due to receive a report which asked the Board to agree to the Constitution, Terms of Reference and Membership for the Older People and People with Long Term Conditions Partnership Board (OPPLTC PB). It also asked the Board to consider an item escalated to them by the OPPLTC PB around the delay in setting up of the Health Inequalities Partnership Board.

It was suggested that this report not be considered at the meeting and be deferred until the next Board Meeting in January. This was because the Terms of Reference for the OPLTC PB might not have taken into account the work of transformation of Adult Social Care, in particular the Integrational Transformation Fund.

Resolved: That consideration of the report be deferred until the next Board Meeting.

Reason: In order to update the Terms of Reference in regards to the transformation of Adult Social Care.

30. Autism Self Assessment Framework Return Summary

Members received a report which asked them to note the second self assessment submission by the Council and its partners for the implementation of the Autism strategy.

One Board Member felt that a greater emphasis needed to be placed on having strategies to get adults with autism into employment. For instance, the person may be capable of doing the work but might struggle with interviews.

Resolved: That the report and statutory return be noted.

Reason: To fulfil the statutory requirements.

31. Local Government Declaration on Tobacco Control

Board Members received a report which asked them to note that City of York Council have signed up to the Local Government Declaration on Tobacco Control, and to consider whether they wished to endorse the Declaration's aims on behalf of all organisations engaged in tobacco control across the City.

Officers confirmed that a workshop would be held in January regarding tobacco control across the city. It was hoped that the event would be the first step in developing a multiagency strategy and a working group, which would firstly report to the Health Inequalities Board and then to the Health and Wellbeing Board.

The Board also acknowledged the work that had already been undertaken by Officers in regards to tobacco control in the city.

Resolved: That the report be noted and the following resolution be agreed;

“That the Health and Wellbeing Board welcomes City of York Council's signing up to the Local Government Declaration on Tobacco Control. As partner organisations engaged in improving, we also endorse the Declaration's commitment to tackling the harm caused by tobacco in our population. We also commit ourselves to work to reduce prevalence and participate in a city-wide strategy for tobacco control.”

Reason: In order to confirm the Council's commitment, and that of its partners, to improving health and reducing inequalities by tackling the harm caused by tobacco in our population.

32. Progress Report-Section 136 Place of Safety

Board Members received a report which asked them to note and make comment on the progress made on providing a Place of Safety for York and North Yorkshire.

The Head of Mental Health and Vulnerable Adults from the Partnership Commissioning Unit presented the report.

Two representatives, one from NHS Property Services and the other from the construction company Balfour Beatty (Mansell) were in attendance at the meeting to answer questions from Board Members.

It was reported that there had been a delay in building works on the site due to necessary agreements required by NHS Property Services, but that this had been resolved. The expected date of completion of the works would be 24 January 2014.

The Chair expressed disappointment at the delay in the completion date, she pointed out that the Board had been informed at their last meeting in October that the work would be completed by 10 January 2014 at the latest. She asked that NHS Property Services confirm in writing that agreements to begin work had been signed and that construction works would begin.

Discussion took place on what cover would be provided until the facility opened, how resilient it would be and what capacity it would provide. It was noted that current demand for the use of the Place of Safety fluctuated, however the Police did expect an increase in demand when the facility opened. They confirmed to Board Members that the impact on the Police would not be unmanageable and that if a Police Officer found a person in distress they would always try to find the best solution for them, and this might mean by using other methods.

The Chief Executive of Leeds and York Partnership NHS Foundation Trust informed the Board about training they had offered to the Police. They were currently commissioning street triage training for West Yorkshire Police.

The Chair suggested that an item on street triage training be put on a future agenda.

- Resolved:
- (i) That the report and associated annex be noted.
 - (ii) That NHS Property Services confirm in writing to the Chair the completion date of the Section 136 Place of Safety Facility.

- (iii) That an item on the Triage Training for the Police provided by Leeds and York Partnerships NHS Foundation Trust be considered at a future Board meeting.

Reason: In order to inform the Health and Wellbeing Board of progress made towards providing a Place of Safety for York and North Yorkshire.

33. Other Remarks

The Chair offered her thanks on behalf of the Board to Kevin Hall, the Director of Adults, Children and Education for all the hard work he had carried out in his role.

Councillor T Simpson-Laing, Chair
[The meeting started at 4.35 pm and finished at 6.10 pm].