

Report of the Chair of the Health and Wellbeing Board

## **Chair's Report – Health and Wellbeing Board**

### **Summary**

1. It was agreed as part of the working protocol between Health Overview and Scrutiny Committee (HOSC) and the Health and Wellbeing Board (HWB) that the Chair of the HWB would bring regular updates on the work of the HWB. Members are asked to note the contents of this report.

### **Background**

2. The joint working protocol between the Health and Wellbeing Board and Health Overview and Scrutiny Committee was agreed at the Health and Wellbeing Board meeting held on 16 July 2014. As part of the protocol, it was agreed that the Chair of the Health and Wellbeing Board would attend Health Overview and Scrutiny Committee on a regular basis to inform the committee of the work of Board.
3. At the bi-annual meeting between the Chairs held on 10 October 2014, it was agreed that the Chair of the Health and Wellbeing Board's report would focus on the areas currently most relevant to the HOSC work plan.

### **Consultation**

4. Not applicable to this report.

### **Options**

5. Not applicable to this report.

## Analysis

6. The following topics that were discussed on 21<sup>st</sup> January 2014 may be particularly relevant to Health Overview and Scrutiny Committee:

### Public Health England - Presentation on Sugar

7. Alison Patey from Public Health England presented on sugar reduction. A copy of the presentation is attached to the minutes from the January Health and Wellbeing Board meeting. The Board discussed levels of sugar intake and the consequences of excessive sugar intake.
8. Through the National Child Measurement Programme in the region we know that 1 in 5 children in Reception are either overweight or obese and this is levelling off (or broadly stable for this age group). Of the same cohort of children by year 6 this has risen to 1 in 3. We therefore know that something is happening between Reception and Year 6 and this is directly correlated to sugar consumption at ages 5 and above
9. In addition to this we know that tooth decay in the Yorkshire and Humber region is the fourth worst in England.
10. Members discussed the presentation and asked what else they could do to support the agenda at a local level. They were presented with a number of potential interventions (detailed in the presentation) and additional ideas put forward were around the potential for collaboration with Nestlé and for the Public Health Team to consider taking some of this work forward.

### Annual Report of the Collaborative Transformation Board

11. Sub-Boards of the Health and Wellbeing Board are required to produce an annual report to present to the Board. The Chair of the Collaborative Transformation Board presented the report highlighting the work that had taken place around the Better Care Fund, Shared Care Records and the Adult Social Care Transformation Programme.

### Better Care Fund Update

12. The Better Care Fund (BCF) submission for York has now been approved with support from NHS England.

The Better Care Fund includes schemes including those around urgent care practitioners, care hubs, hospice at home and mental health street triage. There was also an ongoing joint assessment of community based services currently commissioned by NHS Vale of York Clinical Commissioning Group and City of York Council. The review will lead to a jointly commissioned CYC/CCG resource reporting to the Collaborative Transformation Board through the Joint Delivery Group. The governance structure for this is currently under review and is likely to change in 2015 when a more formal Joint Commissioning Executive between the CCG and CYC is formed. The findings of this review will be reported back to the Health and Wellbeing Board.

### Other issues

13. The Board also received updates on the Joint Strategic Needs Assessment, specifically in relation to the mechanism that would need to be in place to prioritise emerging recommendations.
14. NHS Vale of York Clinical Commissioning Group confirmed that they were currently refreshing their five year strategic plan. The focus would continue to be around the Better Care Fund, health and social care integration and new models of care. There would be an additional priority added to the plan around tackling health inequalities jointly with Public Health.

### **Council Plan**

15. This Report relates to the “Protect Vulnerable People” element of the Council Plan. It also relates to delivering against the priorities set out within the Joint Health and Wellbeing Strategy 2013-2016.

### **Implications**

16. There are no known implications attached to this report. Implications arising out of any of the reports referred to can be found in the original papers of the Health and Wellbeing Board’s meeting on 21 January – see the link in “Background Papers” below.

### **Risk Management**

17. There are no known risks attached to this report.

## Recommendations

18. Members are asked to note the contents of this report.

Reason: To keep members of Health Overview and Scrutiny Committee up to date with the work of the Health and Wellbeing Board.

## Contact Details

### Author:

Cllr Linsay Cunningham  
Chair, Health and Wellbeing  
Board  
City of York Council

**Wards Affected:** *List wards or tick box to indicate all*

**All**

**For further information please contact the author of the report**

### Background Papers:

The Health and Wellbeing Board meeting papers for the 21 January 2015 are available here:

<http://democracy.york.gov.uk/ieListDocuments.aspx?CId=763&MId=8339&Ver=4>