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Meeting	Health and Wellbeing Board	
Date	4 December 2019	
Present	Councillors Runciman (Chair), Baker, Cuthbertson (present for agenda items 1-5 only, minute 56 - 60), Lomas (present for agenda items 1-5 only, minute 56 - 60) and Melly as a substitute for Cllr Lomas (present for items 5-8 only, minute 60 - 63).	
	Dr Nigel Wells (Vice Chair)	Chair, NHS Vale of York Clinical Commissioning Group (CCG)
	Fiona Phillips (as a substitute for)	Assistant Director, Consultant in Public Health, City of York Council
	Sharon Stoltz	Director of Public Health, City of York
	Pippa Corner (as a substitute for)	Assistant Director, Joint Commissioning, City of York Council/NHS Vale of York Clinical Commissioning Group
	Sharon Houlden	Corporate Director, Health, Housing & Adult Social Care, City of York Council
	Amanda Hatton	Corporate Director, Children, Education & Communities, City of York Council
	Lisa Winward	Chief Constable, North Yorkshire Police
	Alison Semmence	Chief Executive, York CVS
	Sian Balsom	Manager, Healthwatch York
	Gillian Laurence	Head of Clinical Strategy (North Yorkshire & the Humber) NHS England

David Kerr (as a substitute for)	Director of Operations, North Yorkshire & York - Tees, Esk & Wear Valleys NHS Foundation Trust
Naomi Lonergan	Director of Operations, North Yorkshire & York - Tees, Esk & Wear Valleys NHS Foundation Trust
Simon Morritt	Chief Executive, York Hospital NHS Foundation Trust
Dr Andrew Lee	Executive Director for Primary Care and Population Health, NHS Vale of York Clinical Commissioning Group
Beverley Proctor (as a substitute for) Mike Padgham	Chief Executive, Independent Care Group Chair, Independent Care Group

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## **56. Declarations of Interest**

Board Members were invited to declare any personal, prejudicial or disclosable pecuniary interests, other than their standing interests, that they had in relation to the business on the agenda. None were declared.

## **57. Minutes**

Resolved: That the minutes of the previous meeting of the Health and Wellbeing Board (HWBB) held on 11 September 2019 be approved and signed as a correct record.

## **58. Public Participation**

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

Ms Sarah Marrison, Regional Support Officer (North) of Farm Garden, spoke on the Growing Care Farming Project explaining that care farms provide services for individuals with a defined need or diagnosis - most frequently for adults and children with learning disabilities, for people with mental ill-health, dementia, children and adults with autistic spectrum disorder, those with a drug or alcohol addiction history, children excluded from school and ex-service personnel with post-traumatic stress disorder. Care farming is the therapeutic use of farming practices where service users regularly attend the care farm as part of a structured health or social care, rehabilitation or specialist educational programme. Positive outcomes reported from service user feedback had been a feeling of belonging and being part of a team, reducing anxiety and increasing concentration. Ongoing training for new care farmers with voluntary safety assurance was also part of the network.

Board members were interested to hear about an initiative in York at Beetle Bank Open Farm which currently had 3 or 4 people accessing this service and a number of interested prospective care farmers. There were opportunities for signposting people to this service. Service users could continue for as long as they wish to.

It was agreed that the lead officer of the Health and Wellbeing Board (HWBB) would circulate Ms Sarah Marrison's contact information to board members so that she could provide them with further information.

## **59. Physical Activity and Sport Strategy for York**

Members of the Health and Wellbeing Board (HWBB) received a report which provided an update on the work to develop a physical activity and sport strategy for York. The report also contained a request of endorsement from the board.

George Cull and Damien Smith from the leadership team at North Yorkshire Sport were both in attendance to present the report. They also provided a presentation (which can be found at item 4 of this agenda).

They apologised for the two spelling mistakes in the report: (i) page 24 Annex 1 'in equalities' should read 'inequalities' and (ii) page 28 last bullet point 'casual' instead of 'causal'.

The Physical Activity and Sports Strategy for York had arisen due to the Health and Wellbeing Annual Report for 2018/19 which had outlined Public Health's ambition to develop a physical activity strategy. This resulted in a partnership arrangement with City of York Council (CYC) and North Yorkshire Sport (NYS), who were commissioned to lead the development of a Physical Activity and Sport Strategy for the city.

They outlined the aims of their strategy which included: a strong focus on physical activity as well as supporting core sporting markets; using physical activity and sport to support wider outcomes; connecting and linking with existing strategies within the city and nationally; support existing asset based approaches with communities and galvanising partners to work more effectively with each other, as well as identifying new work areas.

The following information was provided in response to questions from the HWBB members:

- The strategy aims to run from 2020 – 2030 but was intended to be ongoing for as long as funding was available.
- The current participation in physical activity figures provided in their presentation had indicated that those from lower socio economic and those with physical disability were doing less exercise. To address this, they spoke about supporting individuals to build confidence and undertaking awareness raising so that people were informed of low cost or free activities that they could access.
- In response to a board member's concern that some of the activities listed such as Man v Football league were focused on physical activity which may set people up for disappointment in that physical activity alone would not help someone achieve a healthy weight, they explained that participants were provided with nutritional support and behaviour-change tools and that participants had been successful in achieving weight loss.
- On campaigns such as "This Girl Can" it was noted that many women would not describe themselves as a girl. This was something that was not in their remit to change as their role was to amplify existing campaigns.

- In relation to the funding strategy, referral model and making the existing system work better, they explained that they were not yet at that stage of detail.
- They considered that funding was available to access provided that there was a clear picture of services and assets available and that they could demonstrate where there was a need for services.

Board members were pleased to note the link between exercise and mental health and the aim to connect and link with existing programmes and promote assets within the community and to reduce inequality.

Resolved

That the Health and Wellbeing Board:

- (i) Endorse the strategy and agree the stated ambition and thematic structure.
- (ii) Approve the initial headline actions and support the development of more detailed action plans around each theme.
- (iii) Requested a progress report on the strategy once it had been further developed.

#### **60. Refresh of the Joint Health and Wellbeing Strategy and Review of the Health and Wellbeing Board Sub-Structure**

Members of the Health and Wellbeing Board (HWBB) received a report which presented the outcomes from a recent priority setting workshop; including discussions about how these priorities might be delivered through the Health and Wellbeing Board's sub-structure.

Fiona Phillips, Assistant Director, Public Health was in attendance to present the report and to respond to questions.

The report set out a number of options for the board to consider under a number of discrete headings:

## Priority areas for the remainder of the joint health and wellbeing strategy

The board were recommended to approve the priorities set out in paragraph 5 of the report with confirmation of the priority around starting and growing well to be confirmed by the Corporate Director – Children, Education and Communities once the feedback from the forthcoming peer review had been received.

On discussion of this it was confirmed that the peer review would no longer be taking place. Further discussion suggested that the YorOK Board, which reports to this committee, would be the most appropriate group to progress this priority. Board members agreed that the YorOK Board should be tasked to develop this priority as they were currently developing the Children and Young People's Plan. They were taking a multi-agency approach and the 'voice of children and young people' was captured throughout the Plan.

Many board members were keen that the focus of this priority should be around Adverse Childhood Experiences as originally put forward. Further discussion ensued and the board asked that rather than delegating the confirmation of the priority to the Corporate Director it should come back to the HWBB for final endorsement.

## Health and Wellbeing Board sub-structure

The board were recommended to disband the HWBB Steering Group but keep the rest of the existing sub-structure as a delivery mechanism for the board's priorities. They were also asked to consider inviting the Human Rights Board to take the lead on delivering against the living and working well priority. The chair and other board members expressed some concern regarding whether this was the right group to lead on delivering against this priority and asked that further work be done to look at which group might be best placed to deliver this priority. References to the Corporate Scrutiny Review into poverty were also made and how this work might link to the living and working well priority.

## Communicating the changes that are made to the Joint Health and Wellbeing Strategy

Board members agreed that a short supplementary document that identifies the national, regional and local system changes and the re-focused priorities for the board should be produced.

### Board values

The board discussed the values set out in paragraph 15 of the report. Healthwatch York asked for an additional value to be added about partners sharing power and participating equally. The board agreed to this addition.

Other suggestions for consideration in relation to this agenda item included:

- To invite Professor Stephen Eames to a future meeting for a discussion on Integrated Care Systems and Integrated Care Partnerships
- Primary Care Home Steering Group to ensure that it is an integral part of the Primary Care Network.

Resolved:

That the Health and Wellbeing Board approved the following options:

- (i) Option A: that for the remainder of the timeframe covered by the current Joint Health and Wellbeing Strategy the board would focus on the four priorities set out in paragraph 5 of the officer report with confirmation for the priority around starting and growing well to be considered by the YorOK Board and brought back to the HWBB for endorsement.
- (ii) Option D: Disband the HWBB Steering Group but keep the rest of the existing groups as a delivery mechanism for the board's priorities and further explore which group would be best to take forward the living and working well priority.
- (iii) Option G: Produce a short supplementary document that identifies the national, regional and local system changes and the re-focused priorities of the board.
- (iv) Option I: To adopt the values set out at paragraph 15 of the officer's report, with an amendment to incorporate a board member's request that it be set out that partners are sharing power and participating equally.

Reasons for all options:

To ensure that the Health and Wellbeing Board are focused on fulfilling their statutory responsibilities to produce and deliver a joint health and wellbeing strategy and to ensure that the HWBB functions in an effective and meaningful way retaining robust governance arrangements.

## **61. Better Care Fund Update**

Cllr Cuthbertson left the meeting.

Members of the HWBB received an information report which provided an update on the 2019-2020 Better Care Fund (BCF) Plan for York and progress against national targets that the BCF is designed to positively influence.

Pippa Corner, Assistant Director, Joint Commissioning, City of York Council/NHS Vale of York Clinical Commissioning Group and Ruth Abbott, the Housing Standards Adaptations Manager (CYC) were in attendance to present the report and answer questions from the board.

Board members were interested to receive information on the recent highlights of the BCF performance and delivery group and were pleased to note that representatives of the Primary Care Networks in York had joined this network.

Board members also noted the case studies and positive feedback from service users who had benefitted from these grants which had helped people consider their requirements at an earlier stage rather than when in 'crisis', enabling service users to feel safe and secure within their homes.

Resolved: That the HWBB noted this report.

Reason: So that the HWBB are updated on the 2019-2020 Better Care Fund Plan for York and progress against national targets that the fund is designed to positively influence.



**62. Healthwatch York Report - Understanding People's Experiences of the Sight Support Service provided by the Eye Clinic Liaison Officers (ECLO) at York Teaching Hospital NHS Foundation Trust.**

Members of the HWBB received a report from Healthwatch York about understanding people's experiences of the sight support service. Siân Balsom, Healthwatch York Manager, was in attendance to present the report and to respond to questions. The personal stories at Annex A of the report had highlighted how vital these services were. It should be noted that there are challenges around how this service area maintains its funding nationally.

Resolved: That the HWBB:

- (i) Considered the report and the recommendations set out at pgs. 94 and 95 of the agenda, within their own organisations;
- (ii) That those organisations with a specific recommendation, set out at pgs.94 and 95 of the agenda, respond to Healthwatch York, within 20 working days from the date of the board meeting, acknowledging the receipt of the report, and detailing any actions they intend to take;
- (iii) Refer the report to the Joint Commissioning Group for consideration of any implications for joint commissioning.

Reason: To keep members of the Board up to date regarding the work of Healthwatch York.

**63. Right Care, Right Place Programme**

Members of the HWBB received a report detailing Tees, Esk and Wear Valleys NHS Foundation Trust's Right Care, Right Place Programme (RCRP). The programme is their response to the NHS Long Term Plan and aims to deliver a more integrated and seamless approach to care. Each locality would look to co-produce their own proposals to implement the principles with local stakeholders. Within the City of York, this work has focused mainly around the 'Connecting Our City' project through the Mental Health Partnership Board.

David Kerr, Right Care, Right Place Programme Manager, from North Yorkshire and York Tees, Esk & Wear Valleys NHS Foundation Trust, was in attendance to present the report and to respond to questions.

The following information was provided in response to questions from committee members:

- The Programme is at the early engagement stage of the process.
- Primarily focused on adults, however in York it has an all ages approach.
- The process is to map assets and then to connect them together to create resilience so that people receive the care that they need at the right time, empowering service users and avoiding dependency on mental health care services.
- The 'Connecting our City' programme is heavily influenced by Trieste Mental Health service model used in Trieste, Italy.

Board members comments on the report included the following:

- Board members were pleased to note that health services that influence mental health such as: stop smoking, physical activity and sexual health services had been referenced in this Programme.
- board members considered that there would be mutual benefits with working with the Multiple Complex Needs Network.
- Chief Constable at North Yorkshire Police considered that this service would be of great benefit to the street triage service in directing people to access the most appropriate services.

Resolved: That the Health and Wellbeing Board:

- (i) Support the principles and values of the Right Care, Right Place Programme;
- (ii) Support the Programme's ongoing development and implementation through the Mental Health Partnership.

Reason: To ensure all partners represented at the Health and Wellbeing Board have the opportunity to contribute to the Right Care, Right Place Programme.

Cllr Runciman, Chair

[The meeting started at 4.30 pm and finished at 6.18 pm].