



## Notice of a public

### Decision Session - Executive Member for Health and Adult Social Care

**To:** Councillor Runciman (Executive Member)

**Date:** Wednesday, 15 December 2021

**Time:** 11.00 am

**Venue:** The George Hudson Board Room - 1st Floor West Offices (F045)

In view of the changing circumstances around the Covid-19 pandemic, this meeting will now be held remotely. Any decisions made will form recommendations to the Chief Operating Officer.

### AGENDA

#### **Notice to Members – Post Decision Calling In:**

Members are reminded that, should they wish to call in any item\* on this agenda, notice must be given to Democratic Services by **4:00 pm on Friday, 17 December 2021**.

\*With the exception of matters that have been the subject of a previous call in, require Full Council approval or are urgent which are not subject to the call-in provisions. Any called in items will be considered by the Customer & Corporate Services Scrutiny Management Committee.

Written representations in respect of items on this agenda should be submitted to Democratic Services by **5pm on Monday, 13 December**.

## 1. **Declarations of Interest**

At this point in the meeting, the Executive Member is asked to declare:

- any personal interests not included on the Register of Interests,
- any prejudicial interests or
- any disclosable pecuniary interests

which they may have in respect of business on this agenda.

## 2. **Minutes** (Pages 3 - 4)

To approve and sign the minutes of the Decision Session held on 09 December 2021.

## 3. **Public Participation**

At this point in the meeting members of the public who have registered to speak can do so. Members of the public may speak on agenda items or on matters within the remit of the committee. Please note that our registration deadlines have changed to 2 working days before the meeting, in order to facilitate the management of public participation at remote meetings. The deadline for registering at this meeting is **5:00pm on Monday, 13 December 2021**.

To register to speak please visit [www.york.gov.uk/AttendCouncilMeetings](http://www.york.gov.uk/AttendCouncilMeetings) to fill out an online registration form. If you have any questions about the registration form or the meeting, please contact the relevant Democracy Officer, on the details at the foot of the agenda.

### Webcasting of Remote Public Meetings

Please note that, subject to available resources, this remote public meeting will be webcast including any registered public speakers who have given their permission. The remote public meeting can be viewed live and on demand at [www.york.gov.uk/webcasts](http://www.york.gov.uk/webcasts). During coronavirus, we've made some changes to how we're running council meetings. See our coronavirus updates ([www.york.gov.uk/COVIDDemocracy](http://www.york.gov.uk/COVIDDemocracy)) for more information on meetings and decisions.

**4. Public Health Grant Allocation 2021-22** (Pages 5 - 12)

The report provides details of the Local Authority Public Health Grant Allocation to the council for 2021/22. An update against agreed budget savings and priorities for investment of non-committed Public Health Grant is included.

**5. Urgent Business**

Any other business which the Executive Member considers urgent under the Local Government Act 1972

Democracy Officer:

Jane Meller

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Email- jane.meller@york.gov.uk

For more information about any of the following please contact the Democratic Services Officer responsible for servicing this meeting:

- Registering to speak
- Business of the meeting
- Any special arrangements
- Copies of reports and
- For receiving reports in other formats

Contact details are set out above.

**This information can be provided in your own language.**

我們也用您們的語言提供這個信息 (Cantonese)

এই তথ্য আপনার নিজের ভাষায় দেয়া যেতে পারে। (Bengali)

Ta informacja może być dostarczona w twoim własnym języku. (Polish)

Bu bilgiyi kendi dilinizde almanız mümkündür. (Turkish)

یہ معلومات آپ کی اپنی زبان (بولی) میں بھی مہیا کی جاسکتی ہیں۔ (Urdu)

 **(01904) 551550**

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## Coronavirus protocols for attending Committee Meetings at West Offices

If you are attending a meeting in West Offices, you must observe the following protocols.

**Good ventilation is a key control point, therefore, all windows must remain open within the meeting room.**

If you're displaying possible coronavirus symptoms (or anyone in your household is displaying symptoms), you should follow government guidance. You are advised not to attend your meeting at West Offices.

### Testing

The Council encourages regular testing of all Officers and Members and also any members of the public in attendance at a Committee Meeting. Any members of the public attending a meeting are advised to take a test within 24 hours of attending a meeting, the result of the test should be negative, in order to attend. Test kits can be obtained by clicking on either link: [Find where to get rapid lateral flow tests - NHS \(test-and-trace.nhs.uk\)](https://www.test-and-trace.nhs.uk), or, [Order coronavirus \(COVID-19\) rapid lateral flow tests - GOV.UK \(www.gov.uk\)](https://www.gov.uk). Alternatively, if you call 119 between the hours of 7am and 11pm, you can order a testing kit over the telephone.

### Guidelines for attending Meetings at West Offices

- Please do not arrive more than 10 minutes before the meeting is due to start.
- You may wish to wear a face covering to help protect those also attending.
- You should wear a face covering when entering West Offices.
- Visitors to enter West Offices by the customer entrance and Officers/Councillors to enter using the staff entrance only.
- Ensure your ID / visitors pass is clearly visible at all time.
- Regular handwashing is recommended.
- Use the touchless hand sanitiser units on entry and exit to the building and hand sanitiser within the Meeting room.
- Bring your own drink if required.
- Only use the designated toilets next to the Meeting room.

### Developing symptoms whilst in West Offices

If you develop coronavirus symptoms during a Meeting, you should:

- Make your way home immediately
- Avoid the use of public transport where possible
- Follow government guidance in relation to self-isolation.

You should also:

- Advise the Meeting organiser so they can arrange to assess and carry out additional cleaning
- Do not remain in the building any longer than necessary
- Do not visit any other areas of the building before you leave

If you receive a positive test result, or if you develop any symptoms before the meeting is due to take place, **you should not attend the meeting.**

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City of York Council

Committee Minutes

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Meeting	Decision Session - Executive Member for Health and Adult Social Care
Date	9 December 2020
Present	Councillor Runciman (Executive Member)

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**26. DECLARATIONS OF INTEREST**

The Executive Member confirmed that she had no personal interests not included on the Register of Interests, nor any prejudicial or discloseable pecuniary interests, to declare in the business on the agenda.

**27. MINUTES**

Resolved: That the minutes of the Decision Session held on 13 February 2020 be approved by the Executive Member as a correct record and signed at a later date.

**28. PUBLIC PARTICIPATION**

It was reported that there had been no registrations to speak at the meeting under the Councils Public Participation Scheme.

**29. SMOKEFREE PLAY PARK SCHEME**

The Executive Member considered a report that summarised the York Tobacco Control Plan, included at Annex 1, and the Council's Smoke free Play areas scheme. The Acting Consultant in Public Health outlined the Tobacco Control Plan explaining that the burden of smoking of health in York was high with an estimated 20,000 smokers and the largest area of preventable health conditions. He reported that over the 18 months, the Tobacco Control Alliance, involving a number of organisations, had met to look at reducing tobacco use, supporting pregnant women who smoke, the smoking policies of different organisations and supporting a high quality cessation

service; all of which were included in the plan. He noted that the council was responsible for this as part of its public health remit and he listed the support available. He noted that since 2010 smoking rates in York had halved.

The Acting Consultant in Public Health was asked and gave an overview of the smoke free play park scheme. He explained that it was designed to encourage smoke free norms for children through smoke free play areas. He was asked and noted that the scheme would be rolled out beyond council play parks to wider parks and the posters would be available to other organisations with play parks such as parish councils. There was to be a public consultation on the scheme running from 4 January to 1 February 2021 on the consultation forum on the council website. The Acting Consultant in Public Health encouraged participation in the consultation. The Executive Member noted that the results of the consultation would be reported back to the Health and Wellbeing Board. She welcomed the plan and scheme and

Resolved:

- a. That the Council's commitments to the York Tobacco Control Plan (as detailed in Annex 1 of the report) be adopted.
- b. That the introduction of voluntary smoke free zones in York's play areas, subject to public consultation be agreed in principle.

Reason: Adopting the plan and agreeing in principle the Smoke free zone proposal is in line with the council's duty to promote public health and the Health and Wellbeing Strategy, and is an opportunity to support partnership work and tangible action in this area.

Cllr Runciman, Executive Member

[The meeting started at 10.00 am and finished at 10.16 am].



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**Executive Member Decision Session****15/12/2021**

Report of the Director of Public Health  
Portfolio of the Executive Member for Health and Adult Social Care

**Public Health Grant Allocation****Summary**

1. The purpose of the report is to present the Executive Member with details of the Local Authority Public Health Grant Allocation to the council for 2021/22.
2. The report will provide an update against agreed budget savings and priorities for investment of non-committed Public Health Grant.

**Recommendations**

3. The Executive Member is asked to:
  - 1) Agree the update on delivery against agreed budget savings and priorities for investment of non-committed public health grant.
  - 2) Authorise the Director of Public Health, in consultation with the Executive Member and the Chief Finance Officer, to take all steps required to manage the public health reserve in accordance with the criteria for use of the public health grant

*Reason: To ensure that the criteria for the Public Health Grant Allocation is met.*

**Background**

4. Public health services are critical for preventing disease, reducing health inequalities and improving the health of residents. Public health services and functions transferred to the local authority under the terms of the 2012 Health and Social Care Act. Since 2012, local authorities have been responsible for most aspects of public health and receive a ring-

fenced public health grant from the Department of Health and Social Care to meet these duties.

5. Local authorities have several mandated services they must provide, and the remainder of the public health grant can be used flexibly for public health purposes. Any underspend of grant from one year must be carried forward in the ring-fenced public health reserve and applied to the budget in future years. In using these funds in future years, expenditure needs to comply with grant conditions. The government may consider reducing future grant amounts to local authorities that report expenditure which does not meet this criteria and which is considered a misuse of the grant.
6. There has been discussion at a national level regarding the potential removal of the ring-fence but this has not been acted upon and the ring-fence remains. This is anticipated to continue into 2022/23.
7. As per the November 2015 government spending review there has been, since 2015/16, a programme of reductions in the public health grant for City of York Council. The total confirmed cash reduction in grant allocation from the 2015/16 baseline up to and including 2019/20 was £1.845m. The public health team has delivered a programme of work to meet these savings and has been successful as spend to date has continued to land within the budgeted allocation.
8. In 2021/22 the ring-fenced public health grant received by City of York Council was £8.1m. The public health grant was uplifted specifically to pay for the roll-out of pre-exposure HIV prophylaxis (known as “PrEP”). A separate allocation of £58k was received specifically for adult weight management and a separate grant of £243k for additional drug treatment crime and harm reduction activity. In addition to the public health grant the council received one off new burdens funding of £334k to deliver the statutory duties as part of the Domestic Abuse Act 2021. This was transferred in-year from safer communities to the public health budget.
9. Despite the grant increase, the reduction in public health grant since 2015 inevitably presents challenges for delivery of the council’s core public health responsibilities, and for wider work to improve the health of residents. Continued careful planning, delivery and evaluation of evidence-based interventions will ensure that the available public health resources are focused on the key public health priorities identified in the Joint Strategic Needs Assessment, Joint Health and Wellbeing Strategy and Council Plan.

10. The breakdown of Public Health spend in each year is shown in the table below

	£'000
Public Health Team	1,428
Sexual Health	1,778
Substance Misuse	1,772
Wellness Service	346
Healthy Child Service	2,530
Recharges	429
Total	8,283
PH Grant	-8,143
Net CYC Budget	140

11. The Public Health Grant is a ring-fenced grant and must be spent on defined Public Health activity. On occasions when the budget underspends the value is transferred into a Public Health Reserve which is carried forward into future years. The current Public Health reserve totalled £776k at 31<sup>st</sup> March 2021 and due to the team focussing on the ongoing Covid-19 outbreak there is forecast a further underspend of c £225k in 2021/22 that will carry forward into future years.

### **Priorities for Investment**

12. The last 18 months or so has been an exceptional time for local authority public health services. The focus of public health work has by necessity been focused on leading the Covid Outbreak Management Response at the expense of some other activity. This, together with staff vacancies, has led to the development of a reserve in the ring-fenced public health budget. A proportion of this reserve is currently held against known risks and cost pressures within sexual health services, risk of over performance or quality and safety issues within commissioned public health services, health protection, contribution to air quality and prevention programmes in other council departments and risk mitigation against grant reduction. The remainder will be used to target health inequalities that have been exacerbated during the pandemic to support the city's recovery over the next three years.
13. There is compelling evidence that what happens at the start of life is vital to laying the foundations for good adult outcomes. The Healthy Child Service (0-19) in York provides a public health evidence based universal prevention and early intervention programme that is offered to all

families. It supports parents and promotes child development leading to improved child health outcomes and reduced inequalities while ensuring that families needing additional support are identified at the earliest opportunity. Additional investment into the Healthy Child Service is planned that will create additional public health nursing support to children in local authority care, strengthen the public health nursing resource in the Multi-agency Safeguarding Hub, create additional school nurse hours in the service and increase the capacity in the Child Health Development Worker team to support the childhood obesity agenda. Additional funding has also been put into the Healthy Start programme to improve access to vitamins, fruit and vegetables for low income families. We have also invested in a programme to tackle smoking during pregnancy, in partnership with maternity services, to improve outcomes for maternal and infant health.

14. Poor mental health represents a significant burden of disease in the city and increases the risk of developing physical diseases and premature death e.g. through suicide. We also know that the coronavirus pandemic has had a significant impact on the mental and emotional wellbeing of residents. We will be putting additional investment into the Time to Change programme in partnership with York Council of Voluntary Service (CVS) to tackle the stigma of mental health, build resilience and help with the early identification of mental health concerns so that residents can be sign posted to appropriate services for support.
15. The proportion of our population making unhealthy lifestyle choices, which will impact on their future health and social care needs, remains a public health challenge in York. These choices already have an impact on public health services and lead to considerable costs to the health and care system. Focusing on prevention and making a healthy lifestyle 'the norm' for people of all ages is key to keeping people healthy, in employment and independent for longer. We have developed a new model for the delivery of NHS Health Checks, in partnership with primary care and GP practices in York that will improve access to and the quality of screening for 40 to 75 year olds for the early identification of risk factors for heart disease, stroke and diabetes. This has included developing a new care pathway for residents to be referred into our Health Trainer programme. We have also increased the capacity in the service to provide support to problem drinkers who do not meet the threshold for referral into specialist alcohol service provision with funding from the Better Care Fund.

16. Health protection continues to be a core statutory public health function. Even before the coronavirus pandemic, the public health team was under significant pressure trying to ensure that health protection core duties are being successfully met and delivering programmes to protect the local population from preventable health threats. Public health's delivery of health protection was subject to independent peer review in 2019 and this was followed by a Local Government Association (LGA) Peer Challenge exercise in March 2021. Both of these reports highlighted the lack of capacity in the public health workforce for health protection. In response to this feedback the health protection capacity in the team has been strengthened with an additional post.

### **Consultation**

17. The priorities identified are based on the Joint Strategic Needs Assessment and the priorities contained in the Joint Health and Wellbeing Strategy and Council Plan which have been subject to consultation.

### **Options**

18. There are no options.

### **Analysis**

19. This section should present an appraisal of the advantages and disadvantages of each option.

### **Council Plan**

20. The public health programmes described in the report contribute to the delivery of the Council Plan priorities for Good Health and Wellbeing and a Better Start for Children and Young People.

### **Implications**

21. The report has considered the following implications:

- **Financial**

The report identifies that the Public Health reserve totalled £776k at 31<sup>st</sup> March 2021 and could increase further by c £225k in 2021/22. The report identifies key areas for further Public Health investment in the coming years. The Public Health Reserve is non-recurring so it is

important that additional interventions delivered are one-off or time limited. The Finance team will be work with the Public Health team to ensure the reserve can be reduced in a sustainable manner and that additional expenditure doesn't create any longer term financial liabilities.

- **Human Resources (HR)**

There are no specific HR implications arising from the report.

- **One Planet Council / Equalities**

There are no specific equalities implications arising from the report.

- **Legal**

Section 12 of the Health and Social Care Act 2012 imposes a duty on local authorities to take such steps as it considers appropriate for improving the health of the people in its area and addressing behaviour that is detrimental to health. The provision of the services discussed within this report should therefore fall within this section.

- **Crime and Disorder**

There are no crime and disorder implications arising from the report.

- **Information Technology (IT)**

There are no IT implications arising from the report.

- **Property**

There are no property implications arising from the report

- **Other**

There are no implications arising from the report.

## **Risk Management**

22. There are no known risks from this report.

**Contact Details**

**Author:**

**Author's name**

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**Chief Officer Responsible for the report:**

**Chief Officer's name**

Sharon Stoltz  
Director of Public Health

**Report**  **Date** [29/11/2021]  
**Approved**

**Specialist Implications Officer(s)** List information for all

Financial:-

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

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

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