

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 provide regular updates on the work of the Board. 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 at Annex A 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 regular 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 22 October may be particularly relevant to Health Overview and Scrutiny Committee:

Together York

7. DCC Tim Madgwick gave a presentation on the work of Together York, an initiative that looks at pathways into mental health services for a number of service users with complex needs including mental health and alcohol issues who have historically been hard to reach. Through personalised interventions, the project in its pilot stage will focus on approximately 30 people and through the development of clear pathways, will reduce pressures on the emergency services and contribute towards greater integration between partners providing services.

Winterbourne Update

8. An update on residents or former residents with learning disabilities or long-term mental health conditions who are in residential care was presented by Janet Probert, Director of Partnership Commissioning at the NHS Partnership Commissioning Unit, who discussed the programme of work being undertaken in the wake of the Winterbourne View enquiry. In particular, all hospital patients have been reviewed, and all patients are reviewed every 6 months.
9. As this is a programme of national interest, with specific relevance to adult safeguarding, there will be further updates to the Health and Wellbeing Board on this subject.

Health and Wellbeing Strategy refresh

10. The current strategy covers the period 2013-16, and has had an update to cover changes to activities needed to deliver the priorities, as well as changes to some of the contextual material. In particular, the links between the Adult and Child Safeguarding Boards and the Health and Wellbeing Board have been made explicit, and the need for safeguarding highlighted.
11. The original priorities were decided upon during 2012-13 after extensive consultation with residents and partners. For the update, the priorities have remained the same, but the activities to deliver

such priorities have been updated to reflect changes such as the passing of the Care Act in 2014.

Overview of the Care Act provisions

12. The recent changes to adult social care legislation, set out in the Care Act 2014, will have a considerable impact on local authorities, both in terms of expenditure and in terms of work required in order to be ready for the implementation of the legislation in 2015 and 2016. The full government guidance was issued at the end of October 2014.
13. The changes are far-reaching, and include changes to provision for carers, for safeguarding, and for those funding their own care, who from 2016 will be subject to an overall cap on care costs.
14. Responsibility for implementing the provisions of the Act at CYC rests with the Care Act Project Board, which has 5 working groups developing a plan against all of the enabling functions, which is aligned to the Rewiring Programme of adult social care transformation and is looking to integrate with partner transformation programmes where appropriate.

Other issues

15. Members of the committee may also wish to know that the Pharmaceutical Needs Assessment, which examines the location of pharmacies and the services they provide, is going out to public consultation shortly. The consultation will be open for 60 days, and the findings are to be reported to a future meeting of the Health and Wellbeing Board.

Council Plan

16. This report relates to the "Protect Vulnerable People" element of the Council Plan.

Implications

17. 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 22 October 2014 – see the link in “Background Papers” below.

Risk Management

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

Recommendations

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

Reason: To keep the Committee updated on the work of the Health and Wellbeing Board.

Contact Details

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Wards Affected:

All

For further information please contact the author of the report

Background Papers:

The Health and Wellbeing Board meeting papers for the 22 October 2014 meeting are available here:

<http://democracy.york.gov.uk/ieListDocuments.aspx?CId=763&MId=8338&Ver=4>

Annexes - None