

## North Yorkshire Shadow Health Well-being Board

**Minutes of the meeting held on Wednesday, 30 May 2012  
at 2.00 pm at County Hall, Northallerton**

**Present:-**

<b>Board Members</b>	<b>Constituent Organisation</b>
<u>Elected Members</u>	
County Councillor John Weighell CHAIRMAN	North Yorkshire County Council Executive Member and Council Leader
County Councillor Tony Hall	North Yorkshire County Council Portfolio Holder for Children and Young People's Services
County Councillor Clare Wood (Vice Chair)	North Yorkshire County Council Portfolio Holder for Health and Adult Services
<u>Local Authority Officers</u>	
Richard Flinton	North Yorkshire County Council Chief Executive
Cynthia Welbourn	North Yorkshire County Council Corporate Director – Children and Young People's Services (Statutory)
Helen Taylor	North Yorkshire County Council Corporate Director – Health & Adult Services
Janet Waggott	Chief Officer District Council Chief Executive – Ryedale District Council
<u>Clinical Commissioning Groups</u>	
Dr Colin Renwick	Airedale, Wharfedale and Craven CCG
Dr Mark Hayes	Vale of York CCG
Amanda Bloor (substitute)	Harrogate and Rural District CCG
Debbie Newton (substitute)	Hambleton, Richmondshire & Whitby CCG
<u>Other Members</u>	
Chris Long	NHS NY & Y – Chief Executive
Dr Phil Kirby	NHS NY&Y – Interim Director of Public Health
Janet Kirk	Healthwatch
Kate Tayler	Voluntary Sector (North Yorkshire and York Forum)
<u>Co-opted Members Non-Voting</u>	
Richard Ord	Acute Hospital Representative(Chief Executive – Harrogate and District NHS Foundation Trust) (Interim Appointment)

**In Attendance:-**

<b>Representative</b>	<b>Organisation</b>
Seamus Breen	North Yorkshire County Council – Board Support – Assistant Director (Health Reform and Development)

Jane Wilkinson	North Yorkshire County Council – Democratic Services Officer – Secretariat
Alan Wittrick	NHS NY & Y – Project Director
Dr Bruce Willoughby	Consultant In Public Health

**Apologies for Absence:-**

Apologies for absence were received from Councillor John Blackie, Dr Vicky Pleydell and Dr Alistair Ingram.

In attendance five members of the public.

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**Copies of all documents considered are in the Minute Book**

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**18. Minutes of the meeting held on 28 March 2012**

**Resolved –**

That the Minutes of the meeting held on 28 March 2012, having been printed and circulated, be taken as read and be confirmed and signed by the Chairman as a correct record .

**19. Questions or statements from members of the public**

There were no questions or statements from Members of the public.

**20. Joint Strategic Needs Assessment**

The Board received a joint presentation from Dr Phil Kirby, Interim Director of Public Health and Dr Bruce Willoughby, Consultant in Public Health, NHS North Yorkshire & York on the production and content of the final draft of the refreshed Joint Strategic Needs Assessment (JSNA) for North Yorkshire. A copy of the presentation slides is in the Minute Book.

Members were informed that the final draft attached to the agenda contained a number of typographical and formatting errors that would be corrected before it was published the following week. The document was specifically designed to be web-based and interactive and Board Members were encouraged to read the Geographical Summary for North Yorkshire. In particular it was emphasised that the overall health and well-being of the population of North Yorkshire was above the national average.

Feedback from the final engagement event held on 10 May was reported as being broadly in favour of using Marmot to develop the JSNA structure. Some concerns had however been expressed about there being no specific mention of older people and mental health in Marmot domain titles and the consequent perception that health budgets would be used for wider determinants of health where other bodies or funding streams should be leading.

As this was the last opportunity the Board would have to comment on the JSNA Members reaction on its content and structure was sought.

Board Members referred to the demographics for North Yorkshire and expressed

support for the concerns voiced at the May engagement event. In addition Members commented as follows:-

- Suggested that affordability references be given higher priority
- That the impact of changes to the benefit system be included
- That alcohol mis-use and substance mis-use are awarded the same priority
- That as when it becomes available data on the numbers of people in each 'population group who have specific needs' be added
- That the impact of adult obesity on people with long term conditions is recognised

Apart from the specific comments recorded above the Board commended the structure and findings of the JSNA which they said was a big improvement on its predecessor. It was highlighted that as and when further in-depth analysis of subject topic areas became available this data would be uploaded.

Richard Flinton asked whether JSNA outcomes could be measured against the results of other comparator Primary Care Trusts in England as was the accepted practice between local authorities. Bruce Willoughby replied that this was possible and could be very useful as any comparison with national figures would be irrelevant given that the health of the population of North Yorkshire was better than the national average.

#### **Resolved –**

That the content of the presentation and Joint Strategic Needs Assessment be noted and endorsed.

That the findings of the Joint Strategic Needs Assessment including the comments made at the meeting and recorded in the Minutes be used in the development of a Health & Well-being Strategy for North Yorkshire.

## **21. Developing a Health & Wellbeing Strategy (HWBS) for North Yorkshire**

### **Considered**

The report of the NYCC Corporate Director Health & Adult Services outlining a suggested approach for the development of a joint Health & Well Being Strategy for North Yorkshire.

Members were informed that based on the findings of the JSNA (see earlier agenda item) the Strategy aimed to identify priorities for collective action and influence future NHS and local authority commissioning plans. Both the JSNA & the JHWBS would not be an end in themselves but rather a process to ensure healthcare services in North Yorkshire met the needs of the whole of the local population. Issues identified would need to be prioritised and this work would take place over a period of time.

The report suggested a five step approach to develop a joint Strategy which the Board endorsed. The timetable for completion of this work was proposed as follows:-

- task group to prepare an initial draft to be submitted to the September meeting
- views on the initial draft to be sought from the community
- Final Draft to be referred to the November meeting for sign off

Board Members were keen to include and integrate the work already underway to implement the North Yorkshire Review and in particular work streams on community

based services and access to them. It was also agreed that actions required under Strategy should be cost effectiveness and that commissioners should be prepared to consider working in different ways as a means of achieving this. The use of community budgets was quoted as an example of this. The Board debated membership of the task group and agreed that initially it should consist of key professionals with the exact make up to be determined by Seamus Breen following consultation with relevant partners. It was suggested however that he give consideration to including more than one district council representative.

Amanda Bloor said that Harrogate & Rural District CCG were in the process of drafting long term plans that dovetailed into the JSNA with particular emphasis on early intervention.

Dr Phil Garnett said that as levels of deprivation in Scarborough were the highest in the county would other commissioners be willing to spend a disproportionate amount of their budgets in the locality which he suggested would ultimately achieve a better return.

Seamus Breen said that with regard to its social care commissioning agenda the County Council was seeking to weight its investment in the voluntary sector to take account of inequalities but that this would take time and could not be done at the expense of other communities. Cynthia Welbourn added that resources within NYCC Children & Young Peoples Service were already weighted and targeted according to need. The Chairman said that it was impossible to deliver services in North Yorkshire on a pro-rata basis. His personal experience as Leader of the County Council was that the cost of providing services in sparsely populated areas was significantly more expensive than providing the same services in an urban area.

Dr Colin Renwick said that the exact amount of monies allocated to CCGs would not be known until September. It had however been proposed that future funding should be based on demographics as opposed to deprivation. Chris Long confirmed that it was the view of Andrew Lansley, Secretary of State for Health that changes to the funding formula were needed but that until these were agreed commissioners had no option but to deal with the situation as it stood at present.

In summing up Seamus Breen thanked Members for their contributions and said that following the meeting the task group would be established and immediately start work preparing an initial draft Strategy.

#### **Resolved –**

That the Board agrees the following 5 step approach to developing a Joint Health & Well Being Strategy for North Yorkshire:-

1. That the workshop at the July meeting be used to prioritise potential areas that the Joint Health & Well Being Strategy should focus on based on the Marmot domains and evidence in the Joint Strategic Needs Assessment.
2. That a task group led by the Director of Public Health comprising of:-
  - representatives of the five clinical commissioning groups
  - NYCC Director of Health & Adult Social Services
  - NYCC Director of Children's Services
  - A nomination from the forerunner of the NHS Commissioning Board
  - District council representative
  - Voluntary Sector representative
  - Healthwatch representativebe established to prepare an initial draft of the Joint Health & Well Being Strategy.

3. That during September the Shadow Health & Well Being Board and partner Boards receive the initial draft of the Joint Health & Well Being Strategy.
4. That the views of the community are sought before the Joint Health & Well Being Strategy is finalised.
5. That the final draft of the Joint Health & Well Being Strategy is referred back to the Shadow Health & Well Being Board at its November meeting for sign off.

## **22. Update on the North Yorkshire and York Review- Implementation Programme**

Considered –

The report of Jayne Brown on the work streams and broad timelines for the NYY Review Implementation Programme.

The report was introduced by Alan Wittrick, Project Director, NHS North Yorkshire and York who updated Members on progress achieved since March 2012 following the decision of the Board to defer the report at its previous meeting.

It was reported that a Programme Board had been appointed to oversee implementation. The Board noted that work on all five work streams was continuing at different rates.

With regard to the development of integrated models of care and their impact on existing hospital sites following discussions across the county each area was now forming conclusions about the best model for their area. CCGs were in the process of developing their vision for the future and the Programme Board had received at its May meeting presentations from Harrogate & Craven CCGs. Preparation of a business case for the ideas put forward was in hand. Presentations from the remaining 3 CCGs would be considered by the Programme Board at its next meeting.

County Councillor Clare Wood said that production of integrated models of care required a whole systems approach. The real challenge was to implement change within existing budgets. There was however a real risk that because resources were limited costs could be shunted. If greater dependence was placed on community services then the additional burden on the county council's health & social care budget had to be acknowledged. She was pleased that the review team were taking account of the financial aspects of what was being proposed and she stressed the importance of this. She referred to the Minutes of the last meeting and the concerns expressed about the pace of implementation of the integration agenda being too ambitious and repeated calls for this work to proceed at a slower pace. The shift from acute to community services had to be managed properly on an individual basis as otherwise there was a danger that people in North Yorkshire could become alienated something she would not support. She stressed that the Board needed to see evidence of community based solutions before acute services were withdrawn.

The Chairman said that the withdrawal of any service would always be politically sensitive. He referred to the public march the previous weekend attended by over two thousand people protesting about the possible closure of childrens/paediatric services at the Friarage Hospital, Northallerton. The County Council faced with budget cuts of £69M over four years had he said made the majority of savings from back office services so as to minimise the effect on front line services which was more acceptable to the public. He urged Board members to be keenly aware at all times from a political perspective of the sensitivity of any proposals they made which would result in services being withdrawn.

Kate Tayler said she believed that the public was in favour of most changes to services but what was needed was for delivery models to be closer aligned to the findings of the Joint Strategic Needs Assessment.

Chris Long said that models of delivery had to change. The pace of change was being driven nationally and by cuts to local funding. He agreed that discussions about services had to be open and explicit but the circumstances meant that it was unavoidable that those discussions would be uncomfortable. Within the NHS there was he said no capacity for back office savings as staffing levels were already at a bare minimum.

Dr Mark Hayes said that the Vale of York CCG was looking at delivery models from Sweden as a means of balancing the need to make changes against a background of reduced finances.

Alan Wittrick said that after listening to the discussion the main issue was one of pace of change. The Board had a role to play as had the public. More work was needed but in order to achieve the necessary efficiencies this had to be done at a pace as otherwise in twelve to eighteen months time CCGs would inherit significant financial problems.

#### **Resolved**

That the information and comments made during the meeting be noted.

### **23. Integration of Health and Social Care for Adults**

Considered –

The report of the NYCC Corporate Director – Health and Adult Services updating the Board on progress achieved since the previous meeting to integrate health and social care services in North Yorkshire.

The report was introduced by Helen Taylor who said that the report was in response to a request from the Board to receive regular updates. The frequency of Board meetings meant that since the last meeting there were no new major developments to report and that steady progress continued to be made on established projects.

County Councillor Clare Wood referred to the previous item and said it would be helpful if future reports contained detailed evidence of community based solutions which would improve the Board's in-depth understanding and knowledge of the subject.

#### **Resolved –**

That progress reports on the integration of health and social care services in North Yorkshire that include evidence of community based solutions be a standing item on future agenda.

### **24. Clinical Commissioning Groups – Update on Approval Process and Development of 5 year plan**

Yale of York CCG

- Briefing Paper tabled outlining the vision, mission and values of the Group. Copy placed in Minute Book.
- Authorisation being sought in the third wave.
- Rachel Potts appointed as Chief Operating Officer
- Aidrian Snarr appointed Chief Finance Officer
- Recruitment to remaining posts to be carried out in July.

#### Harrogate & Rural District CCG

- Engaged with local practices, voluntary sector, local community on its vision and values.
- Conducted a patient and public engagement event in Harrogate
- Virtual reference group in process of being set up.
- Authorisation application to submitted by end of September and assessed in October.

#### Hambleton Richmond & Whitby CCG

- Interim management structure now in place.
- Working with local practices towards reaching an interpractice agreement
- Public engagement about the future of childrens/paediatrics services at the Friarage Hospital continuing
- Henry Cronin appointed as chair with responsibility for patient and public involvement.
- Authorisation being sought in third wave

#### Wharfedale & Airedale CCG

- Group in second wave of authorisation due to take place in September but possibility could be delayed.
- 2 Lay members now appointed.

#### **NOTED**

#### **25. Future Meetings-**

Cynthia Welbourn enquired if NHS colleagues were able to provide a position statement on the emerging arrangements for future commissioning of services for children and young people as the uncertainty was causing increasing difficulties for the County Council. Chris Long replied that whilst he shared her concerns he was not in a position to provide the information requested until he was in receipt of a response from the National Commissioning Board which was still awaited.

Helen Taylor said the emerging visions of CCGs for community services would be incorporated into the Board's work programme over the next couple of meetings.

The Chairman said that as both Vicky Pleydell and Alistair Ingram were unable to attend meetings of the Board held on a Wednesday afternoons alternative meeting dates would be sought. An email would be sent to all Board Members requesting details of their availability. This information would be collated with a view to the Board approving a new programme of meeting dates at its next meeting.

#### **Resolved –**

That the next meeting take place on Wednesday 25 July 2012 at County Hall Northallerton at 2.00pm.

The meeting concluded at 4.05 pm  
JW/JD