

## North Yorkshire Health and Well-being Board

Minutes of the meeting held on 15 February 2013 at 10.30 am 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	North Yorkshire County Council Portfolio Holder for Health and Adult Services
County Councillor John Blackie	Elected Member District Council Council leader – Richmondshire District Council
<u>Local Authority Officers</u>	
Richard Flinton	North Yorkshire County Council Chief Executive
Helen Taylor	North Yorkshire County Council Corporate Director – Health & Adult Services
<u>Janet Waggott</u>	Chief Officer District Council Chief Executive – Ryedale District Council
<u>Dr Lincoln Sargeant</u>	Director of Public Health
<u>Clinical Commissioning Groups</u>	
Dr Colin Renwick	Wharfedale and Airedale CCG
Debbie Newton (substitute)	Hambleton, Richmond and Whitby CCG
Amanda Bloor	Harrogate and Rural District CCG
Simon Cox	Scarborough & Ryedale CCG
Dr Mark Hayes	Vale of York CCG
Alex Bird (substitute)	Voluntary Sector (North Yorkshire and York Forum)
<u>Co-opted Members Non-Voting</u>	
Martin Barkley	Mental Health Trust Representative (Chief Executive – Tees, Esk & Wear Valleys 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
Helen Edwards	North Yorkshire County Council – Communication Unit
County Councillors Jim Clark and John Clarke	North Yorkshire County Council

**Apologies for Absence:-**

Apologies for absence were received from Dr Vicky Pleydell (Hambleton, Richmond & Whitby CCG), Dr A Ingram (Harrogate & Rural District CCG), Chris Long (NHS North Yorkshire & York) Dr Phil Garnett (Scarborough & Ryedale CCG) and Rob Salkeld (Voluntary Sector).

Four members of the public present.

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

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*The Chairman announced that the Clinical Commissioning Groups for:-*

- *Vale of York,*
- *Harrogate & Rural District,*
- *Scarborough & Ryedale*
- *Hambleton, Richmondshire & Whitby CCG*

*had that day received final authorisation from the Department of Health. Final authorisation had been awarded to Wharfedale & Airedale CCG the previous month.*

*The Chairman informed the Board that North Bank Forum had been successful in tendering for the Local Healthwatch contract.*

**53. Minutes**

County Councillor John Blackie commented that it was extremely disappointing that the Primary Care Trust was not represented at the meeting that day particularly as assurances had been given at the previous meeting that Chris Long would be in attendance.

**Resolved -**

That the Minutes of the meeting held on the 28 November 2012 be approved as an accurate record of the meeting and be signed by the Chairman.

**54. Public Questions or Statements**

The Board was addressed by Ian Fulton (a representative of the Skipton Patient Participation Group). Mr Fulton said it would be helpful if the County Council could issue an interim position statement on local Healthwatch. Seamus Breen said that the role and function of Local Healthwatch was a priority and agreed to provide a statement following the meeting.

With regard to the refresh of the Mental Health Strategy Mr Fulton urged the Health & Well Being Board to strategically review the care pathways of service users in recovery.

## **55. Options for Integrating Care and Health in North Yorkshire**

Considered –

The report of Helen Taylor, Corporate Director Health and Adult Services inviting the Board to examine high level options for taking integration forward in North Yorkshire.

Andrew Cozens, a leading health and social care consultant who had been commissioned to look at possible solutions presented his findings to the Board. He said there was a need to create a consistent approach to commissioning that addressed local and national priorities and reflected the law. In relation to other local authorities North Yorkshire was towards the lower end of the scale in terms of its performance delivering integration. As part of his work he had looked at six integration models for North Yorkshire and York which he then described to the Board. His preferred option was to put in place a framework for integrated health and social care, laid down by the Health & Well Being Boards of North Yorkshire & York that would establish things such as countywide priority groups but would allow flexibility in local priorities and timetables and that recognised the responsibility clinical commissioning groups had for their own areas. He added that nationally there was a lot of interest in North Yorkshire on account of its size, complex health and social care economy and cross boundary issues. If both Boards favoured this approach it was possible they may be able to draw down national funding from the Secretary of State to support its implementation.

Richard Flinton commended the work done by Andrew Cozens and said that the County Council had a lot of experience in developing overarching strategies that were capable of reflecting the different needs of individual communities.

The Board was informed that the same presentation would be given to the York Health & Well Being Board at its meeting in March. Initial discussions had indicated that the York Board would support the framework model as suggested by Andrew Cozens.

Amongst Board Members there was strong support for the preferred option as put forward by Andrew Cozens. Members particularly liked that the Framework Model enabled local priorities to be reflected. Each Member expressed their commitment to integrating services and all partners expressed a desire to commence this work on a practical level as soon as possible. Whilst the scarcity of resources and the growing demand for services were recognised as being the drivers for this work Board Members said they were optimistic about the future. Local discussions and activity had led to new working relationships and innovative ways of working that were the first step towards a coherent countrywide approach.

Seamus Breen said that Craven District Council had expressed an interest in being actively involved and that the Board should give consideration to involving district councils. It was pointed out that the boundaries of some CCGs necessitated joint working with local authorities and partners outside of North Yorkshire that this needed to be born in mind.

In the light of comments made at the meeting and the consensus that existed between partners Helen Taylor sought the agreement of the Board to commence making appointments to a sub group of the Board that would oversee delivery of integration.

**Resolved –**

1. That the North Yorkshire Health & Well Being Board endorses a framework approach to integrating health and social care services.
2. That a further report on progress developing an integration framework be referred to the May meeting.
3. That an Integration Executive sub group of the HWB be established.

**56. Briefing on the Public Health and Functions Transferring to North Yorkshire County Council in April 2013**

**Considered –**

The report of Dr Lincoln Sargeant, Director of Public Health for North Yorkshire briefing the Board on the public health responsibilities that would transfer to North Yorkshire County Council on 1st April 2013. The report also presented the baseline position of public health outcome measures in the county.

During the presentation of his report Dr Sargeant said it was his intention to submit to the May meeting of the Board a further detailed report on the North Yorkshire public health ring-fence grant allocation for 2013/14 and 2014/15 as referred to in paragraph 4 of his report. A further report on mental health services focusing in particular on prevention amongst older people would be reported to a future meeting.

**Resolved –**

That the content of the report and the information provided at the meeting be noted.

**57. Substance Misuse and Mental Health**

**Considered –**

The report of Seamus Breen, NYCC Assistant Director Health Reform & Development highlighting work done to date to transform the way substance misuse services and mental health services, support people's health and well-being needs across North Yorkshire. Appended to the report were the results of engagement with key stakeholders. The report invited the Board to lead future work and to monitor progress.

The report was introduced by Seamus Breen who said that historically, mental health and substance misuse services had tended to focus on treating the condition. As funding tended to measure success based on the numbers of people in treatment, retaining people in treatment was often a key objective. This funding approach meant there was not enough emphasis on prevention. Care pathways were often complex as some people who accessed substance misuse services also had mental health problems and vice versa. The new service approach being proposed was much more client centred.

The Board heard how two major projects aimed to transform the way in which support was given to service users. A new set of service principles had been devised and these were due to be launched at an event on 25 March 2013 at Harrogate Pavillions. This would mark the launch of a major consultation to shape both services. A procurement exercise in June 2013 would follow culminating in a new reconfigured service with effect from April 2014. Throughout this period it was proposed that regular progress reports would be referred to the Board.

County Councillor Tony Hall commented that at present there were a number of different service providers across the county. The current arrangements needed to

change and he endorsed the approach outlined in the report and stressed the need for the Board to monitor accountability,

Seamus Breen said that he was keen to involve clinicians in this work as it was important they were aware of and knew how to access available services.

Board Members endorsed the approach outlined in the report and said that as the work progressed it was important that both knowledge of the services and how to access to them was widely available and that there were clear links between mental health and substance misuse services in order to support those service users who used both.

**Resolved –**

That the results of dialogues with people using substance misuse services and mental health services be noted.

That the actions to transform services as outlined in paragraph 5 of the report be endorsed.

That all partner agencies play their part in the transformation agendas.

That the subgroups as outlined in paragraph 5.6 of the report drive the agendas and report back on progress in a timely manner.

That when an Integrated Commissioning Board is established it is tasked with having an overview of the work in hand.

**58. North Yorkshire and York Clinical Services Review – The Role of the Health and Well Being Board**

**Considered –**

The report of Helen Taylor, NYCC Corporate Director Health & Adult Services inviting the Board to review its role with regard to the North Yorkshire and York Clinical Services Review. The report also summarised the distinctive and complementary roles, of the Board and the NYCC Scrutiny of Health Committee with a view to ensuring that any duplication and confusion of roles was avoided.

The report was introduced by Helen Taylor who proposed that the primary role of the Board should be to focus on the development of integrated solutions that supported people in their own home and communities wherever possible.

Richard Flinton said that the Board was faced with a new situation. Local politicians had highlighted disparities in the national funding formula but changes had not been forthcoming. The Board now needed to support CCGs in developing their implementation plans arising from the Clinical Services Review. Specific proposals regarding future hospital configuration would be of great interest to elected members and the people they represented and the Board needed to recognise this. The Scrutiny of Health Committee had in the past been very active and would continue to scrutinise and challenge where appropriate. The distinct roles of the Board and the Scrutiny of Health Committee were set out in the report. In reality the challenge was how partners could work together to overcome financial issues to provide sustainable health services. The Francis report had raised questions about the quality of services and he proposed that an invitation to attend the next meeting be extended to the regional representative of the Care Quality Commission to explore whether there were any issues that needed to be addressed in North Yorkshire.

Representatives of CCGs confirmed that they now knew their funding allocations for 2013/14 and were committed to living within their means.

Board Members agreed to work together to address the financial problems they had inherited.

**Resolved –**

That the content of the report be noted.

**59. Evaluation/Review of Working Practices and Performance of the Board over the previous year**

Considered –

The report of Seamus Breen, NYCC Assistant Director Health Reform & Development presenting initial feedback from an evaluation exercise carried out at the Board's request on the performance and working practices of the Board while in its shadow state.

During his presentation of the report Seamus Breen thanked Board Members for taking the time to participate in the evaluation.

Board Members agreed with the report findings and said that there was a need for future meetings to be less formal and for accommodation/venues to be reviewed with this in mind.

The Chairman said that previous meetings had on occasion been difficult to chair and that this was in part down to the complex structure of health and social care in North Yorkshire and the sensitivity of the subject matter under discussion. Board Members had that day shown a greater willingness to participate in the meeting and work together and the future now looked brighter.

**Resolved –**

That the results of this evaluation be received as a first step in receiving feedback on the Board's own performance and work;

That an early development opportunity is held, in private session, to examine feedback from the evaluation in more detail and to have as an outcome a developmental programme for the following year;

That as soon as possible a substructure beneath the Board is established to act as its executive arm to drive and monitor work requested and authorised by the Board, to include the Integrated Commissioning Board, and the Children's Trust and to have relationships with other Partnership Boards in the wider Health and Wellbeing Network.

That on a regular basis the Board creates opportunities for development time. This might be a balance of private sessions before or after formal meetings and time out once a quarter to ensure the Board is functioning to maximise effect.

That the Board ensures that there is in place a robust process to which all parties are committed to take responsibility for shaping the agenda of the Board.

That the Board ensures that there is as much clarity as possible between the role of the Health and Wellbeing Board and the role of scrutiny functions of the Council which takes account of the latest on scrutiny functions. That in pursuing this matter the Board ensures that there is no conflict of duties expected of its members.

In reviewing its membership to ensure partners have an early opportunity to re-appoint if necessary their representative and given the size and complexity of the voluntary sector in particular, this exercise should start sooner rather than later.

**60. Date and Venue of Next Meeting**

**Resolved –**

That the next meeting take place on Wednesday, 29 May 2013 at 2.00 pm at County Hall, Northallerton.

The meeting concluded at 12.25 pm.

JW/ALJ