

North Yorkshire Health and Well-being Board

**Minutes of the meeting held on Wednesday, 5 February 2014 at 2.00 pm at
County Hall, Northallerton.**

Present:-

Board Members	Constituent Organisation
<u>Elected Members</u>	
County Councillor Tony Hall	North Yorkshire County Council Portfolio Holder for Children and Young People's Services
County Councillor Clare Wood (Chair)	North Yorkshire County Council Portfolio Holder for Health and Adult Services
County Councillor Don Mackenzie	North Yorkshire County Council Portfolio Holder for Public Health and Prevention
Councillor John Blackie	Elected Member - District Council Leader – Richmondshire District Council
<u>Local Authority Officers</u>	
Pete Dwyer	North Yorkshire County Council Corporate Director – Children & Young People's Service
Richard Flinton	Chief Executive – North Yorkshire County Council
Sally Burton	North Yorkshire County Council Interim Corporate Director – Health & Adult Services
Janet Waggott	Chief Officer District Council Chief Executive – Ryedale District Council
Dr Lincoln Sargeant	Director of Public Health North Yorkshire
<u>Clinical Commissioning Groups</u>	
Dr Colin Renwick	Wharfedale and Airedale CCG
Amanda Bloor (Vice Chair)	Harrogate & Rural District CCG
Dr Vicky Pleydell	Hambleton, Richmondshire and Whitby CCG
Simon Cox	Scarborough & Ryedale CCG
Dr Mark Hayes	Vale of York CCG
<u>Other Members</u>	
Alex Bird	Voluntary Sector (North Yorkshire and York Forum)
Chris Long	NHS England
Duncan Webster	Healthwatch
Richard Ord	Acute Hospital Representative (Chief Executive Harrogate and District NHS Foundation Trust)
Martin Barkley	Mental Health Representative (Chief Executive) Tees Esk & Wear Valleys NHS Foundation Trust

In attendance:-

County Councillors:- Jim Clark (Chairman Scrutiny of Health Committee), John Clark, Carl Les and Shelagh Marshall (Older People's Champion)..

Tony Vardy (Assistant Director North Yorkshire County Council Transformation & Integration) and Keith Cheesman Programme Manager Health & Integration

Janet Probert (Director of Partnerships Commissioning Unit)

Jane Wilkinson (NYCC Legal & Democratic Services)

Helen Edwards and Martin Feekins (NYCC Communications)

Five members of the public

Copies of all documents considered are in the Minute Book

38. Minutes

Resolved–

That the Minutes of the meeting held on the 29 November 2013 be approved as an accurate record of the meeting subject to the following amendments and be signed by the Chairman:-

Min No 34 – Integration Transformation Fund third paragraph, the figure of £3.8m be amended to read £38m.

39. Public Questions or Statements

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

40. Better Care Fund (formerly Integration Transformation Fund)

Considered –

The report of the NYCC Interim Assistant Director – Health & Adult Services updating the Board on the requirements for implementation of the Better Care Fund (BCF). The BCF is a government pool of £3.8bn for 2015/16 that aimed to move care from hospital to the community and to improve integration between health and social care funding. In North Yorkshire the fund was about £39.8m.

The Chairman commented that North Yorkshire had one of the most complex health and social care systems in the country. The situation had been further complicated by the latest guidance issued by central government which had revised sign off

arrangements for final plans. Draft plans were now required to be submitted on 14 February 2014 and final plans on 4 April 2014.

The Board received a presentation from Sally Burton NYCC Interim Corporate Director – Health & Adult Services in which she described work undertaken across North Yorkshire. She highlighted several key themes that had been identified for the health and social care community. It was proposed that the North Yorkshire plan set out a collaborative approach centred on the needs of individuals and their carers. In common with many areas of the Country, North Yorkshire was not yet in a position to present to the Board its draft plan. The Board was therefore invited to agree the priorities and performance measures described in the presentation that would then be used create and implement the draft Better Care Fund plan. A copy of the presentation slides used is in the Minute Book. The Board agreed the following principals for inclusion in the draft plan:-

- Integrate care around people rather than organisations
- The use of evidence-based initiatives to promote health
- To plan services that promote the patient's home, as the default place for care delivery
- Commission services with the underpinning ethos of "No health without mental health"
- Ensure common procedures for individual care needs assessment
- Pool resources across health and social care wherever possible to support joint services.

The Board was advised that about £10m of the local funding would be performance related, based on national measures and conditions. The Board was invited to agree its local metric and it was suggested that this should be a reduction in injuries caused by falls and a 5% reduction in avoidable emergency hospital admissions. Reasons given for selection of this metric were that other Boards were likely to choose it and that the data was easy to capture and could be linked to wider work on prevention. Board Members expressed support for the priorities and performance measure outlined in the presentation but said that greater clarification was needed of the context surrounding the local metric as not all falls resulted in a hospital admission. The baseline for data collection needed to be clear as currently a number of definitions were used nationally to define a fall. Current data collection systems were not sensitive to subjective terms such as 'avoidable falls'. The Board debated the target to be attached to the local metric and agreed that a figure of 5% would achieve the correct balance between being suitably ambitious yet realistic.

It was noted that negotiations were still on-going regarding funding of the Better Care Fund. A series of imminent meetings were scheduled when it was hoped agreement would be reached. Whilst recognising that those discussions would be difficult Board Members were supportive in principal and optimistic that agreement could be reached without having to resort to arbitration.

Further meetings of the working group were also planned to agree the detail of the priorities outlined in the presentation. In the light of changing guidance surrounding sign off arrangements for the BCF advice had been sought from the County Council's head of legal services. Each CCG had to submit draft plans to NHS England on 14 February 2014 and it was proposed that these be co-signed by the County Councils Corporate Director for Health & Adult Services. Work would then continue to refine the plans and a special meeting of the Board held prior to the deadline for final submissions on 4 April 2014. Board members endorsed this approach.

The Chairman commended the progress that had been achieved and the efforts of all those involved. Assurances were given that once the final plan was agreed monies would be available to communicate its content to the public.

Resolved –

That the targets for nationally provided performance metrics are suitably ambitious for North Yorkshire and accepted by the Board.

That “falls” is endorsed by the Health & Well Being Board as the local performance metric for North Yorkshire.

That draft Better Care Fund plans for each Clinical Commissioning Group in North Yorkshire are approved by CCG Accountable Officers and the NYCC Corporate Director of Health & Adult Services subject to ensuring that they meet national requirements.

That the issues identified at the meeting today and in the intervening period are addressed at a workshop held in late February 2014.

That an extra meeting of the Health and Well Being Board is held in late March 2014 at which the final submission of the Better Care Fund will be signed off by the Board.

41. Winterbourne Concordat

Considered –

The report of Director of Partnerships Commissioning Unit informing the Board of the progress made over the last six months toward ensuring the requirements of the Winterbourne Concordat are being met in North Yorkshire.

The report was introduced by Janet Probert, Director of Partnerships Commissioning Unit who in response to questions agreed to circulate Members with information about the timescale for commissioning Advocacy services after the meeting.

The Board noted the significant progress achieved by the Strategic Implementation Group surrounding the assessment and review of individuals. The Board was advised that the frequency of a follow-up visit was dependent upon an individuals' needs. All individuals received a minimum of one visit per annum but this was contrasted to some people who were visited on a monthly basis.

The Board requested a further progress report in six months.

Resolved –

That the content of the report is noted

That a further update report be referred to the Board in six months.

42. North Yorkshire Clinical Commissioning Groups High Level Strategic Plans

The Board received a brief presentation from North Yorkshire Clinical Commissioning Groups, district councils and voluntary organisations setting out their refreshed strategic plans. They gave an overview of the direction of their organisations for the next two to five years in order to demonstrate to the Board how services would be able to respond locally to individual needs. A copy of the presentation slides is in the Minute Book.

At previous meetings Clinical Commissioning Groups had presented their high level strategies to the Board as part of the formal authorisation process.

Common themes emerged from Clinical Commissioning Group presentations among them the need to centre integrated care on the patient; sharing data; delivery of care through community hubs and the need to address issues around isolation and loneliness.

District councils outlined how their services were able to support health improvements, for example through improving housing opportunities, driving a strong local economy; promoting a safe healthy feelgood sense of place; proving leisure facilities to extend opportunities for all and by advocating continued provision of local access to quality healthcare services.

Alex Bird, voluntary sector representative said that the county's 5000 voluntary organisations formed a vibrant sector that could address many of the issues raised. The Chairman said that the voluntary sector was key to realising the council's vision for the future of services in the county and that discussions between the parties would ensue.

A Member said he was aware of pressures surrounding mental health admissions and sought further information and/or clarification.

In response Martin Barkley said that the figures for Nov and Dec 2013 had seen a decrease in the number of admissions but that it was too early to say if this was an emerging theme. The number of available in-patient beds was not the issue the key question was why admission rates in North Yorkshire were so much higher than average (up to 250%) as compared to other parts of the country. An independent organisation had been commissioned to carry out research and would investigate support levels given to existing patients, admission rates in rural areas and the effectiveness of a crisis centre.

Resolved –

1. That the on-going process of engagement and information over the last 12 months on North Yorkshire Clinical Commissioning Groups and NYCC Health and Adult Service plans, specifically their alignment with the Health & Well Being Strategy is noted.
2. That the Health & Well Being Board endorses the strong local engagement in plan development and delivery.
3. That the strategic requirement of strong health systems is noted and the Board supports the high level content of each Clinical Commissioning Group strategy.
4. That a report on mental health be added to the Board's Work Programme and be referred to the September meeting.

43. Business for Future Meetings

Members were invited to comment upon and approve the content of the Board's future work programme.

Resolved –

That the work programme be received and agreed as printed.

That a special meeting of the Board be arranged to consider:-

- Better Care Fund
- Autism Strategy/Self Assessment

The meeting concluded at 4.30pm

JW/JD