

NORTH YORKSHIRE DELIVERY BOARD
Notes of a meeting held on 9 April 2015 at 2.00 pm
Boardroom, Sovereign House,
York

Present:

Janet Probert	Partnership Commissioning Unit
Kathy Clark	NYCC
Richard Webb	NYCC
Keith Cheesman	NYCC
Wendy Balmain	NYCC
Jane Wilkinson	NYCC (Note taker)
Ros Tolcher	Harrogate & District NHS Foundation Trust
Mike Proctor	York Teaching Hosp NHS Foundation Trust
Martin Barkley	TEWV NHS Foundation Trust
Lynn Parkinson (substitute)	Leeds & York NHS Trust
Simon Cox	Scarborough & Ryedale CCG
Anthony Fitzgerald	Harrogate and Rural District CCG
Richard Mellor	H'Ton Rich/shire & Whitby CCG
Debbie Newton	H'Ton & Rich/shire & Whitby CCG
Michael Ash McMahon (substitute)	Vale of York CCG
Mike Padgham	Independent Care Group
Jenni Newberry	North Yorkshire Police (Head of Commissioning)

Apologies:

Amanda Bloor	Harrogate & Rural District CCG
Sue Pitkethly	AWC CCG
Rachel Potts	Vale of York CCG
Janet Waggott	District Councils Representative
Andrew Copley	Airedale NHS Foundation Trust
Christopher Butler	Leeds & York NHS Trust
Pete Dwyer	NYCC

		Action
	Richard Webb in the Chair	
1.	<p><u>PREVIOUS NY DELIVERY BOARD MEETING</u></p> <p>(1) Notes of NY Delivery Board held on 15 January 2015: Agreed</p> <p>(2) Outstanding action points from meeting held on 15 January 2015:</p> <p>Care Act Training For Partner Organisations: Work Programme to be developed and circulated:</p> <p>Strategic Estate Planning: Local Transformation Boards better placed to do this work.</p> <p>Agreed</p> <ul style="list-style-type: none"> • Chairs of Local Transformation Boards to do scoping work on Strategic Estate Planning over course of next three months 	RW

2.	<p><u>TERMS OF REFERENCE</u></p> <p>Draft terms of reference for:-</p> <ul style="list-style-type: none"> • North Yorkshire Delivery Board • North Yorkshire Commissioner Forum <p>distributed with the papers.</p> <p>Members were asked to forward any comments to Wendy Balmain asap. Both Terms of Reference to be submitted to June meeting of HWB for information.</p> <p>Requests seeking membership of the NYDB received from Local Medical Committee (LMC) and Healthwatch were discussed. It was agreed that the key function of the Board was to support the delivery of the HWB business, ensuring that the agreed priorities set out in the Joint Health & Wellbeing Strategy were implemented. This led the Board to the view that other forums aligned more closely to the remit of these organisations and, therefore, it was agreed that the LMC should not form part of the membership of the Board. Members highlighted the need for the Board to improve public engagement/involvement and for this work to be added to the work programme. Given this, it was agreed that Healthwatch be invited to nominate a representative to be a non-voting member of the Board.</p> <p>Agreed</p> <ul style="list-style-type: none"> • Copies of all NYDB meetings notes to be included on agenda of meetings of the NY Health & Wellbeing Board • Draft mins of NYDB to be circulated to all members of NYDB for comment/amendment prior to being published as part of Health & Wellbeing Board agenda papers • Membership of NYDB to be reviewed on an annual basis • Healthwatch to be invited to nominate a representative to be a non-voting member of the NYDB • Work on public engagement/involvement to be added to work programme • Amanda Bloor to be appointed as Chair of NY Delivery Board for next 12 months • Richard Webb to be appointed as Vice Chair of NY Delivery Board for next 12 months. 	<p>WB/JW</p> <p>JW</p> <p>WB</p> <p>WB/RW /AB</p>
3	<p><u>Workforce</u></p> <p>Discussion paper distributed with the papers in response to HWB resolutions made at its February meeting in respect of 'winter planning' item.</p> <p>General consensus NYDB was that there was a case for compiling workforce information with a view to addressing issues on a joint basis.</p> <p>Recruitment and retention were identified as the main priorities. A</p>	

	<p>dual approach was favoured that would allow either a county wide or local approach to be followed dependent upon the service model in question.</p> <p>Member organisations were asked to supply any data they had to evidence of workforce shortfalls.</p> <p>A shortage of nurses in the independent sector was highlighted.</p> <p>Also highlighted was the shortfall in the number of nurses undergoing training. Difficulties retaining staff in the locality following completion of professional qualifications further exacerbated the problem. It was reported that previous attempts to influence nursing recruitment programmes had proved unsuccessful.</p> <p>The shift towards care being provided in the community had workforce implications for all partners that would benefit from further scoping work.</p> <p>It was agreed that a task group be established to primarily look at strengthening recruitment and branding on a county wide basis. It was suggested that the task group should concentrate on building for long term success as opposed to a quick fix.</p> <p>The task group was asked to investigate an initiative in Lancashire where student nurses paid their own training fees as opposed to the traditional vocational route. Initial indications were that nurses who completed their training via this route were more likely to be from the local area and have higher levels of commitment. The task group was also asked to consider the possibility of establishing a North Yorkshire health and social care academy.</p> <p>Agreed</p> <ul style="list-style-type: none"> • That a workforce task group be established to look at the recruitment of health and social care professionals on a countywide basis • Nominations for membership of the workforce task group to be forwarded to Vicky Pleydell • That the LEP be approached and asked to identify someone to assist with the work of the task group 	<p>VP</p> <p>ALL</p> <p>MB</p>
<p>4.</p>	<p><u>Joint Health & Wellbeing Strategy/HWB Development Session</u></p> <p>Notes of the HWB development session held on 25 March 2015 circulated by WB prior to the meeting</p> <p>It was reported that feedback following the event had been positive and Members felt better able to work together in the future. Between Members there was a lot of consensus, about the JHWBS, the challenge was now to implement it. The NYDB was supportive of a suggestion to hold a similar event later in the year using the same facilitator.</p> <p>Copies of the Ground Rules for HWB as agreed at the</p>	<p>WB</p>

	<p>development session were tabled. The intention was that the Ground Rules would be referred to the June HWB meeting for approval and adoption. Members were asked to relay any comments in respect of the Ground Rules to WB asap.</p> <p>At the HWB development session attendees had reviewed the Joint Health & Well Being Strategy. A copy of the revised Strategy incorporating their comments had been circulated and Members were asked to comment. WB agreed to incorporate the comments made that day into a refreshed version of the Strategy to be referred to the HWB meeting in June for approval.</p> <p>In discussion it was agreed that a performance framework should be devised to support implementation of JHWBS. This could involve having a lead sponsor assigned to each of the outcomes. Responsibility for monitoring delivery to rest with Local Transformation Boards and a dashboard devised.</p> <p>NYDB to maintain oversight of progress through Local Transformation Boards via regular updates.</p> <p>All partners agreed that in future it was essential that progress against JHWBS targets was able to be evidenced and quantified.</p>	
5.	<p><u>Tobacco Control Strategy</u></p> <p>Members were unanimous in their support of the Strategy.</p> <p>Responsibility for the future funding of stop-smoking services was discussed and it was agreed that a meeting be arranged between the relevant parties to clarify the situation.</p> <p>It was noted that as from 2016 all hospitals would be smoke free and would have in place a nicotine free policy.</p> <p>Agreed</p> <ul style="list-style-type: none"> • That a meeting between public health officers and representatives of CCGs be arranged to agree the commissioning model for stop-smoking services and arrangements for procurement of the contract. • That the NYDB supports in principal the vision and priorities of the Tobacco Control Strategy. 	
6.	<p><u>BCF Dashboard</u></p> <p>Comments were sought on a draft performance reporting framework for the Better Care Fund that had been distributed with papers.</p> <p>Assurances were given that within the system there was sufficient capacity available to produce regular reports.</p> <p>The reporting framework was agreed in its current format with the proviso that it could be adjusted if it became apparent that amendments were needed once it was in operation.</p>	

	<p>It was noted that a populated version of the reporting framework would be considered at the May meeting of the Commissioner Forum. NYDB members asked to be supplied with a copy of the populated report when available.</p> <p>Agreed:</p> <ul style="list-style-type: none"> • That the format of the BCF performance reporting framework be approved. • That a copy of the BCF populated performance report referred to the Commissioner Forum be distributed to members of the NYDB when available. 	KC
10.	<p><u>Forward Work Programme</u></p> <p>Health & Well Being Board Potential items for inclusion on the Agenda of the June meeting included:-</p> <ol style="list-style-type: none"> 1. Refresh of Joint Health & Wellbeing Strategy 2. Mental Health Green Paper 3. Integration – New Models of Care – Vanguard 4. Workforce – oral update 5. Tobacco Control Strategy 6. Domestic Abuse Strategy <p>NY Delivery Board Members were asked to forward suggestions for agenda item for the July meeting to WB</p>	
11	<p><u>Reports from Partner Organisations</u></p> <p>TEWV</p> <ul style="list-style-type: none"> • Anticipated receipt of CQC report the following day. <p>North Yorkshire Police</p> <ul style="list-style-type: none"> • A new service recently launched supporting victims of crime. <p>NYCC</p> <ul style="list-style-type: none"> • Care Act – Meeting to discuss impact of delayed discharges arranged. • Camphill Village Trust – Botton Village – Legal proceedings continuing <p>Partnership Commissioning Unit</p> <ul style="list-style-type: none"> • CAMHS Health Task Group now published long awaited report Future In Minds. <p>Scarborough & Ryedale CCG</p> <ul style="list-style-type: none"> • Primary Care Co-Commissioning – progress continuing • Scarborough Street Triage Pilot - results being compiled hope to extend countywide 	
12.	<p><u>Date & Time of Future Meetings</u></p> <p>North Yorkshire Delivery Board</p>	

	9 July 2015 at 2.00pm at Jesmond House, Harrogate 8 October 2015 at 2.00pm at Jesmond House, Harrogate 14 January 2016 at 2.00pm at Jesmond House, Harrogate	
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