

Meeting: Health and Wellbeing Board Venue: Selby District Council, Civic Centre Doncaster Road, Selby (see map)

Date: Wednesday 19th September 2018 From 1.00 p.m. to 1.45 p.m.

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No.	Agenda Item	Action	Page Nos
	FORMAL BUSINESS		
1	Apologies for absence		
2	Minutes of the meeting held on 30 th May 2018	To approve	6-11
3	Review of actions taken at the last meeting	To report	12
4	Any declarations of interest		
5	Public Questions or Statements Members of the public may ask questions or make statements at this meeting if they have given notice and provided the text of their question or statement to Patrick Duffy of Democratic Services <i>(contact details below)</i> no later than midday on Friday 14 th September 2018. Each speaker should limit themselves to 3 minutes on any Item.		

Business

Enquiries relating to this Agenda please contact Patrick Duffy **Tel: 01609 534546** or e-mail patrick.duffy@northyorks.gov.uk Website: <u>www.northyorks.gov.uk</u>

6	Digital Theme Update - Presentation	To note	
	Presented by Robert Ling		
7	North Yorkshire Health and Wellbeing Board, Mental Health, Moving in the Right Direction – Summit Report	To note	13-15
	Presented by Louise Wallace		
8	Mental Health Prevention Concordat – Update	To approve	16-23
	Presented by Lincoln Sargeant		
9	Integration and Better Care Fund Operational Guidance 2018/19 and implications for North Yorkshire - Presentation	To note	
	Presented by Louise Wallace		
10	Health and Wellbeing Board - Rolling Work Programme / Calendar of Meetings 2018/2019	To approve	24-25
11	Other business which the Chair agrees should be considered as a matter of urgency because of special circumstances		

PLEASE NOTE:

At the conclusion of the meeting there will be a Workshop involving Members of the Health and Wellbeing Board. Members of the public are not invited.

Barry Khan, Assistant Chief Executive (Legal and Democratic Services)

County Hall, Northallerton

11th September 2018

North Yorkshire Health and Wellbeing Board – Membership

Cοι	Inty Councillors (3)	
1	HARRISON, Michael (Chair)	Executive Member for Adult Social Care and Health
		Integration
2	DICKINSON, Caroline	Executive Member for Public Health and Prevention
3	SANDERSON, Janet	Executive Member for Children and Young People's
		Services
Ele	cted Member District Council Representation	tive (1)
4	FOSTER, Richard	Leader, Craven District Council
Loc	al Authority Officers (5)	
5	FLINTON, Richard	North Yorkshire County Council
		Chief Executive
6	WEBB, Richard	North Yorkshire County Council
		Corporate Director, Health & Adult Services
7	CARLTON, Stuart	North Yorkshire County Council
		Corporate Director, Children & Young People's Service
8	WAGGOTT, Janet	Chief Officer, District Council Representative
9	SARGEANT, Dr Lincoln	North Yorkshire County Council
		Director of Public Health
Clir	ical Commissioning Groups (5)	
10	RENWICK, Dr Colin	Airedale, Wharfedale & Craven CCG
11	PROBERT, Janet	Hambleton, Richmondshire & Whitby CCG
12	BLOOR, Amanda	Harrogate & Rural District CCG
13	METTAM, Phil	Vale of York CCG
14	COX, Simon	Scarborough and Ryedale CCG
Oth	er Members (3)	
15	JONES, Shaun	NHS England NY & Humber Area Team
16	BROMFIELD, Judith	Healthwatch Representative
17	QUINN, Jill	Voluntary Sector Representative
Co-	opted Members (2) – Voting	
18	MARTIN, Colin	Mental Health Trust Representative (Chief Executive,
		Tees Esk & Wear Valleys NHS Foundation Trust)
19	TOLCHER, Dr Ros	Acute Hospital Representative
Sub	ostitute Members	
	WARREN, Julie	NHS England NY & Humber Area Team
	CROWLEY, Patrick	Acute Hospital
	COLLINSON, GIII	Hambleton Richmondshire & Whitby CCG
	MELLOR, Richard	Scarborough and Ryedale CCG
	AYRE, Nigel	Healthwatch
	COULTHARD, Adele	Tees, Esk and Wear Valley NHS Foundation Trust
	HIRST, Helen	Airedale, Wharfedale & Craven CCG
	PHILLIPS, Andrew	Vale of York CCG
	BRAMHALL, Phil	Voluntary Sector

Notes:

1. The Health and Wellbeing Board is exempt from the requirements as to political balance set out in Sections 15-16, Schedule 1 Local Government Housing Act 1989

2. The Councillor Membership of the Board is nominated by the Leader of the Council. In the event that the number of portfolio holders responsible for health and well related issues increases, the additional portfolio holders will also be a Member of the Board.

3. All members of the Health and Wellbeing Board or any sub committees of the Health and Wellbeing Board are voting Members unless the Council decides otherwise

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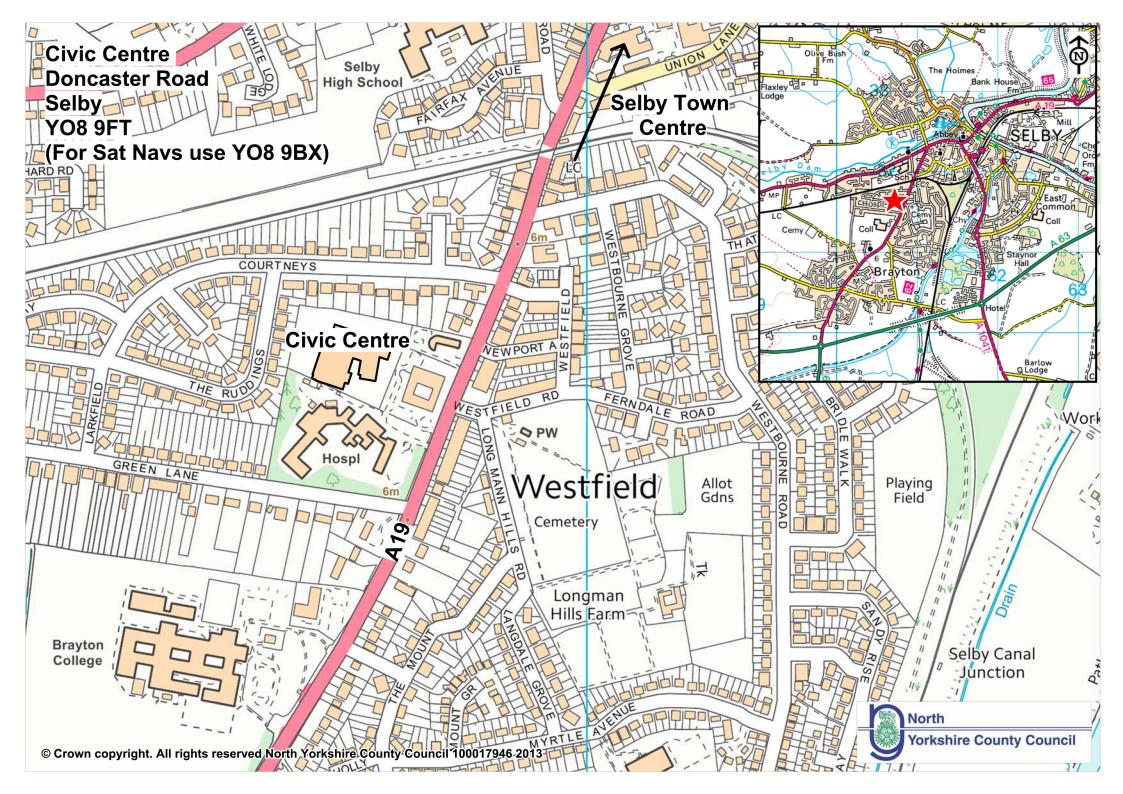


These ground rules are about Team North Yorkshire Health and Wellbeing Board and should apply within and outside of Board meetings. They were adopted by Board members in June 2015.

We have made a commitment that when working together we will treat each other with respect, with openness and honesty. We will make sure that there is equality – everyone is of equal value in the room. We will contribute and take part, committing to listen and ask questions of each other, checking that what we heard is what was intended. We believe it is good to be passionate, and we know that constructive challenge is helpful in getting us to a better place. We must voice disagreement, otherwise silence implies consent but recognise that this should be done with respect to other points of view. We shouldn't expect the same sort of challenge in the public arena.

We have a responsibility to model exemplary behaviour, inside and outside of the HWB meetings, as Board members we should give and accept support and bring collective experience and knowledge to this Board. Our discussions need to focus on added value and outcomes and we must take responsibility for our decisions. We should ensure that we communicate and cascade to our respective audiences and organisations.

We believe that we should **continually strive to be better and** wear our **team badges - Team North Yorkshire** with pride.



North Yorkshire Health and Wellbeing Board

Minutes of the meeting held on 30 May 2018 at the Pavilions of Harrogate

Present:-

Board Members	Constituent Organisation	
County Councillors		
County Councillor Michael	North Yorkshire County Council	
Harrison (Chairman)	Executive Member for Adult Social Care and Health Integration	
County Councillor Caroline	North Yorkshire County Council	
Dickinson	Executive Member for Public Health and Prevention	
Elected Member District Counc	il Representative	
Richard Foster	Leader, Craven District Council	
Local Authority Officers		
Richard Flinton	North Yorkshire County Council, Chief Executive	
Jane Le Sage (substituting for	North Yorkshire County Council	
Stuart Carlton)	Assistant Director, Inclusion - Children and Young People's Service	
Dr Lincoln Sargeant	North Yorkshire County Council, Director of Public Health	
Janet Waggott	Selby District Council	
Richard Webb	North Yorkshire County Council	
	Corporate Director – Health and Adult Services	
Clinical Commissioning Groups	5	
Amanda Bloor	Harrogate and Rural District CCG	
Helen Hirst (substituting for Colin Renwick)	Airedale, Wharfedale and Craven CCG	
Phil Mettam	Vale of York CCG	
Janet Probert	Hambleton, Richmondshire and Whitby CCG	
Other Members		
Shaun Jones	NHS England, North Yorkshire and Humber Area Team	
Jill Quinn	Voluntary Sector Representative	
Claire Ferguson (substituting for Judith Bromfield)	Healthwatch North Yorkshire	

In Attendance:-

County Councillor Carl Les Rachael Loftus, West Yorkshire and Harrogate Health and Care Partnership Rhys Williams, Department of Work and Pensions

North Yorkshire County Council Officers:

Neil Bartram and Louise Wallace (Health and Adult Services) and Patrick Duffy (Legal and Democratic Services)

Copies of all documents considered are in the Minute Book

46. Apologies for Absence

Apologies for absence were submitted by:

- Phil Bramhall
- Stuart Carlton
- Simon Cox
- Robert Ling
- Colin Martin
- Colin Renwick
- County Councillor Janet Sanderson
- Ros Tolcher

47. Minutes

Resolved -

That the Minutes of the meeting held on 23 March 2018 be approved as an accurate record.

48. Review of actions taken at the last meeting

Considered -

An Action Sheet produced by the Assistant Chief Executive (Legal and Democratic Services), who confirmed that the actions had been implemented, or were in the process of being.

Amanda Bloor, Chief Officer at Harrogate and Rural District CCG, added that the Memorandum of Understanding in respect of the West Yorkshire and Harrogate Sustainability and Transformation Plan, would be signed off in June or July.

Resolved -

That the Action Sheet be noted.

49. Declarations of Interest

There were no declarations of interest.

50. Public Questions of Statements

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

51. Digital Session 23 March 2018 - Feedback and Next Steps

Considered -

The report of Robert Ling, Health and Wellbeing Board Digital Lead, asking the Board to agree the next steps in progressing the 'Digital' Theme Work Plan for the Board, following the Digital Workshop facilitated by Gartner on 23 March 2018.

The report was presented by Louise Wallace as Robert was not able to attend today's meeting. She made the following points in particular:-

- good feedback had been received in respect of the digital session;

- this was more than about finding technological solutions to issues; the intention was to use digital to work in a smarter way and to help modernise services;
- the potential use of technology in robotics, for instance (as outlined in Section 5 of the report) was limitless. These benefits had, of course, to be balanced against the financial costs;
- progress would only be achieved from working together a small Working Group was being established to take this forward and to report back to the Board. Some nominations had already been received. If partners had any nominations for people from their area to be on the Working Group they should advise Louise;
- this was a long-term piece of work, but there is a real desire to push on with the work involved;
- a further update would be provided to the Board but, among the options being considered, was some form of "Dragon's Den" whereby IT companies could make a pitch to the Board as to how they could provide a solution to a particular issue;
- the Appendix to the report identified 5 main priorities, as follows:
 - Thinking and Working Smarter
 - Digital and Smart Communities
 - Skills for a Digital Age
 - Connected North Yorkshire
 - Smart Business and Growth

... together with a sixth, cross-cutting priority – A Digital Health and Social Care Service.

Richard Webb, Corporate Director, Health and Adult Services, mentioned there was a discussion in localities around out-patient services and links between secondary care services. Also, consideration was being given to running some digital labs. His Directorate had established links with Manchester University in connection with the development of robotics.

Richard Webb also advised partners of the likelihood that the County Council would be seeking a contribution from them to assist in the development of digital.

The Chair stressed that this is very much a shared strategy and urged partners to let Louise Wallace know who they wanted to represent their organisation on the Digital Working Group, so as to share the innovative practices that are happening at a place level. In that sense, it was important to capture what was occurring at a tactical level, as well as thinking strategically.

Amanda Bloor commented that there was a degree of excitement about the possibility of a "Dragons Den" and asked if there had been any conversation with Gartner IT Consultants about their involvement, as she felt this could help speed the process. Louise Wallace responded that she would be discussing this further with Robert Ling.

Resolved -

(a) That the Digital Working Group progress the sharing and analysis of what is already happening across the Health and Wellbeing Board partners in relation to digital and share this intelligence and good practice with a view to rolling this out across the County.

- (b) That partners advise Louise Wallace who their representative on the Digital Working Group will be by 12th June 2018.
- (c) That the Health and Wellbeing Board, at its meeting in September 2018, focus on considering a draft shared strategy and testing deliverability and planning for implementation.
- (d) That the Health and Wellbeing Board, at its meeting in March 2019, take stock on progress made regarding the Digital Theme through the above actions and plan for 2019-2020.

52. Performance against Delayed Transfers of Care Targets

Considered -

The presentation by Louise Wallace, Assistant Director of Health Integration, Health and Adult Services, on the performance against delayed transfers of care (DToC) targets.

The key messages were:-

- The Better Care Fund (BCF) Plan now covered a two year period 2017/18 to 2018/19.
- The majority of schemes had been rolled forward from the 2016/17 Plan.
- Agreement had been reached on allocation of the Disabled Facilities Grant.
- The escalation process had been exited following submission of DToC targets.
- Quarterly BCF and Improved BCF (IBCF) updates had been submitted to NHS England and the Department for Communities and Local Government.
- The Section 75 agreement for the BCF pooled budget had been signed by all partners. Louise Wallace thanked partners for this.

There was a disconnect between quarterly return dates and published metrics – as a result, the final month was estimated.

Performance against national metrics varied across areas but the overall position was:-

- Non-elective admissions (NEAs) Outturn was 1,475 NEAs (2.2%) above target.
- Residential/Nursing admissions Outturn was 222 placements (32.3%) above target.
- Re-ablement data not available to assess progress.
- DToC rates per day per 100,000 population Outturn was 1,884 days (8.4%) above target.
- Looking at DToCs specifically, the measure comprised delays attributable to the NHS; Social Care and those that are deemed to be jointly attributable. Whilst delays attributable to Social Care and joint delays had reduced markedly, the reduction in NHS attributable delays was less. Performance was measured

collectively, but the reduction, overall, from a baseline of 16.7 to 13.6, was still encouraging and there were good working relationships on the ground.

In response to a question from the Chair, Louise Wallace confirmed that estimated figures are resubmitted when the actual is known. She added that there had been escalation with UNIFY in relation to mental health data. Discussions were being held with NHS England.

Richard Webb stated that the confidence level in the current figures was far higher than had previously been the case.

Amanda Bloor advised that key actions tended to be taken through local A&E Delivery Boards. Particular themes were being picked up around multi-agency pathways so people were not standing still. DToCs remained a huge challenge, however.

Richard Webb advised that non-acute performance was very good but the problems were actually outside of Hospitals – in Community Hospitals, for instance. Core acute performance was good.

Shaun Jones, Interim Director of Delivery, Yorkshire and the Humber, NHS England, advised that the situation described mirrored the national picture to a large degree. The challenge of the winter period had meant that the reductions in DToC that had been hoped for had not materialised. The targets had been set on an artificial baseline. Consideration was being given to taking an average of monthly performance in Quarter 3 for 2017/18 as the basis of a baseline.

He added that the Guidance for 2018/19 had been delayed but it would provide an opportunity to refresh DToC rates and some of the associated metrics. The national mandate was for 4,000 less daily bed days by September 2018.

The Chair referred to inaccuracies in the data used to establish the baseline position and asked if there would be an opportunity to review this. Shaun Jones responded that there would be soft testing and an opportunity for organisations to make representations before the baseline, upon which targets would be based, was published.

Amanda Bloor felt it would be helpful if Shaun Jones could share this information with other NHS organisations. He said he would be happy to do so.

Resolved -

- (a) That the presentation be noted.
- (b) That Shaun Jones share with other NHS organisations the fact that *soft testing* is taking place and that there will be an opportunity to make representations before the next targets are published.

53. Health and Wellbeing Board - Rolling Work Programme/Calendar of Meetings 2018/2019

Considered -

The Work Programme/Calendar of Meetings for 2018/2019.

Janet Probert, Chief Officer for Hambleton, Richmondshire and Whitby CCG, sought clarification as to where the IBCF would be considered. Louise Wallace advised that this would be through the Commissioner Forum on 14th June. It was suggested that this also be considered by the Board at its meeting in July.

It was also suggested that Supported Housing, being considered by Commissioner Forum in June should be considered at the September meeting of the Board.

It was noted that electronic invitations for future meetings in 2018/2019 will be sent out soon but that some venues may change, depending on who is to be invited to assist the Board and the numbers involved.

Resolved -

That the following additions to the Work Programme/Calendar of Meetings be made:-

- a) Add Improved Better Care Fund to Commissioner Forum Agenda for 14th June and Health and Wellbeing Board on 20th July 2018.
- b) Add Supported Housing to Health and Wellbeing Board on 19th September 2018.

The meeting concluded at 9.35 a.m.

PD

NORTH YORKSHIRE HEALTH AND WELLBEING BOARD – ACTION SHEET FOR MEETING HELD ON 30TH MAY 2018

MIN NO.	ITEM	ACTION AGREED	ACTION BY
51	Digital Session 23 rd March 2018 – feedback and next steps	 a) That the digital working group progress the sharing and analysis of what is already happening across Health and Wellbeing Board partners in relation to digital and share this intelligence and good practice, with a view to rolling this out across the county. b) That partners advise Louise Wallace who their 	RL/LW ALL
		 representative on the digital working group will be by 12th June c) That the Health and Wellbeing Board in September 2018 focus on considering a draft shared Strategy and testing deliverability and planning for implementation. d) That the Health and Wellbeing Board in March 2019 take stock of progress made on the digital theme 	RL/LW
		through the above actions, and plan for 2019/2020.	
52	Better Care Fund Update and Performance against Delayed Transfers of Care Targets	Shaun Jones to share with other NHS organisations the fact that <i>soft testing</i> is taking place and that there will be an opportunity to make representations before the next targets are published.	SJ
53	Health and Wellbeing Board Rolling Work Programme/ Calendar of Meetings 2018/2019	 a) Add Integrated Better Care Fund to Commissioner Forum Agenda for 14th June and Health and Wellbeing Board on 20th July 2018. b) Add Supported Housing to Health and Wellbeing Board on 10th Sentember 2019. 	PD PD
		Board on 19 th September 2018. Noted that electronic invitations for future meetings in 2018/2019 will be sent out soon but that some venues may change, depending on who is to be invited to assist the Board and the numbers involved	



Mental Health Summit Update Report

Wednesday 19th September 2018

Presented by: Assistant Director of Health Integration

Summary:

The purpose of the enclosed report is to provide an update to the Health and Wellbeing Board following the Mental Health Summit the Board hosted on the 30th May 2018.

Which of the themes and/or enablers in the North Yorkshire Joint Health & Wellbeing Strategy are addressed in this paper?

[Please tick as appropriate]

Themes	\checkmark
Connected Communities	\checkmark
Start Well	\checkmark
Live Well	\checkmark
Age Well	\checkmark
Dying Well	\checkmark
Enablers	
A new relationship with people using services	\checkmark
Workforce	\checkmark
Technology	\checkmark
Economic Prosperity	\checkmark

How does this paper fit with <u>other</u> strategies and plans in place in North Yorkshire?

Mental Health and Wellbeing is a key priority for action in the Joint Health and Wellbeing Strategy, 2015 - 2020.

What do you want the Health & Wellbeing Board to do as a result of this paper? That the Health and Wellbeing Board note that a full summary report of the Mental Health Summit and associated action plan will be brought back to the Board in November.



NORTH YORKSHIRE HEALTH AND WELLBEING BOARD – 19th September 2018

Report of the Assistant Director Health Integration

Mental Health Summit Update Report

1. Purpose of Report

1.1 To update the Health and Wellbeing Board (HWB) regarding progress following the Mental Health Summit which the Board hosted on 30th May 2018.

2. Background

- 2.1 The HWB hosted a Mental Health Summit 'Mental Health Moving in the Right Direction #MHRD' on 30th May 2018.
- 2.2 This Summit was organised to recognise that mental health is one of the biggest health issues facing the people of North Yorkshire and to promote understanding and greater awareness. It was also the first time the HWB, members of the public and leaders from the public, private and community sectors had come together, to identify what could be done together to tackle mental ill-health and to improve outcomes.
- 2.3 The Summit brought together almost 100 people for a full day, to focus on mental health and wellbeing across North Yorkshire. This included people working in statutory, community and voluntary sector agencies, as well as people accessing services or with a special interest in mental health.
- 2.4 Participants in the Summit heard from a wide range of speakers during the morning including:
 - Rob Webster, Chief Executive from South West Yorkshire Partnership NHS Trust
 - Alison Iliff, Health and Wellbeing Programme Manager, Public Health England
 - Eden-Maia Shackleton and Jazz Parkinson, North Yorkshire, Youth Voice Executive
 - Gareth Atkinson, North Yorkshire County Council

3. The Summit

3.1 The Summit was very interactive and lots of ideas and discussions were generated. There was an opportunity through a 'marketplace' for people to talk, network and learn about each other's services and experiences, as well as discuss how to move mental health and wellbeing in the right direction

across North Yorkshire. People were also invited to make a 'pledge' to commit to taking positive action to support either their own mental health or on behalf of others. There was also an opportunity to practice 'Mindfulness' during a session led by Dr Paul Bernard from Tees, Esk and Wear Valleys NHS Trust.

- 3.2 The afternoon was full of energy and there were lots of ideas generated during workshops focused on children and young people; working age adults and older people. As mental health is one of the biggest health issues facing the people of North Yorkshire, discussions in the workshops considered how to promote greater awareness of mental health and wellbeing and identify what can be done together to tackle mental ill-health and to improve services.
- 3.3 During the workshops there was a good discussion and many ideas were shared that can be broadly grouped into the following themes:
 - Access to information and signposting
 - Access to services
 - Comprehensive service offer 24/7
 - Employment support
- 3.4 There was so much information generated through the discussion and workshop, that action planning is now underway to address the themes in paragraph 3.3, above, with a view to bringing the action plan back to the HWB in November. The action planning is aiming to ensure consistency with other strands of work related to mental health and wellbeing across the County to avoid duplication.

4. Recommendation

4.1 That the Health and Wellbeing Board note that a full summary report of the Mental Health Summit and associated action plan will be brought back to the Board in November.

Louise Wallace Assistant Director, Health Integration September 2018



Mental Health Prevention Concordat update report

19th September 2018

Presented by: Dr Lincoln Sergeant

Summary:

The enclosed report provides a briefing on the Mental Health Prevention Concordat, an initiative that was referenced in the presentation by Public Health England at the North Yorkshire Mental Health Summit on 30th May 2018. The national Prevention Concordat for mental health specifically requests health and wellbeing board sign up.

It also provides an update on public mental health activity.

Which of the themes and/or enablers in the North Yorkshire Joint Health & Wellbeing Strategy are addressed in this paper?

[Please tick as appropriate]

Themes	\checkmark
Connected Communities	✓
Start Well	✓
Live Well	✓
Age Well	✓
Dying Well	\checkmark
Enablers	
A new relationship with people using services	
Workforce	
Technology	
Economic Prosperity	

How does this paper fit with <u>other</u> strategies and plans in place in North Yorkshire?

Five Year Forward View for Mental Health Hope, Control and Choice. North Yorkshire's Mental Health Strategy 2015-20 (and associated strategy implementation plan and public mental health & prevention plan) North Yorkshire Suicide Prevention Action Plan North Yorkshire Health and Wellbeing Strategy 2015 -2020 Young and Yorkshire 2

What do you want the Health & Wellbeing Board to do as a result of this paper?

The Health and Wellbeing Board are asked to:

- Note local activity on mental health improvement
- Consider North Yorkshire Health and Wellbeing Board sign up to the Prevention Concordat on mental health
- Confirm the elected member champion for the Mental Health Prevention Concordat.

NORTH YORKHIRE HEALTH AND WELLBEING BOARD PUBLIC MENTAL HEALTH AND PREVENTION PREVENTION CONCORDAT UPDATE REPORT

1.0 Purpose of the report.

At the recent mental health summit organised by the Health and Wellbeing Board, Public Health England delivered a presentation which focused on the national approach to public mental health and prevention. This report aims to complement this presentation by providing an update to the health and wellbeing board on public mental health activity in North Yorkshire and seeks approval to formally sign up to the mental health prevention concordat.

2.0 Background

2.1 North Yorkshire's mental health strategy

North Yorkshire's mental health strategy, *Hope control and choice* was launched in October 2015. Public health is a core component of the strategy, with primary, secondary and tertiary prevention embedded throughout the strategy and associated implementation plans.

2.2 Prevention Concordat for mental health

The Prevention Concordat for Mental Health was published in September 2017 by Public Health England (PHE). The aim of the Prevention Concordat is to help local areas put in place effective planning arrangements for population-level mental health by March 2019.

The focus of the Prevention Concordat is to:

- Galvanise action on both a local and a national level to prevent mental health problems and promote good mental health
- Encourage and promote cross sector activity led by health and wellbeing boards, clinical commissioning groups and local authorities
- Enable every area to use the best data available to plan and commission the right mix of provision to meet local needs, increase equity and reduce health inequalities

The Prevention Concordat is underpinned by the following principles:

- An understanding that prevention focused approaches to improving the public's mental health make a valuable contribution to achieving a fairer and more equitable society.
- Promoting evidence based planning and commissioning to increase the impact on reducing health inequalities
- A focus on cross sector action to deliver a tangible increase in the adoption of public mental health approaches amongst stakeholders (including local authorities; NHS organisations; public, private and voluntary sector organisations; educational settings and employers)
- A recognition of the role and contribution of people with lived experience of poor mental health and mental ill health.

As such the Prevention Concordat provides a systematic planning framework for local areas. Recommended action is grouped in the following five themes

- 1. Needs and needs assessment
- 2. Partnership and alignment
- 3. Translating need into deliverable commitments
- 4. Defining success outcomes
- 5. Leadership and accountability

Appendix One details the criteria in the prevention concordat and provides an indication of progress against these specific criteria.

3.0 NORTH YORKSHIRE PROGRESS UPDATE

3.1 Public Mental health and Prevention Partnership Group

Implementation of the Mental Health Prevention Concordat for the county of North Yorkshire has been incorporated into the terms of reference for the Public Mental Health and Prevention Partnership Group (PMH&PP). Membership includes; experts by experience, NYCC mental health commissioning (adults and children), Tees, Esk and Wear Valley NHS Foundation Trust, and community and voluntary sector representatives. This group directly reports to the North Yorkshire Mental Health Strategy Implementation Group and is responsible for the delivery of public health and prevention elements of *Hope Control and Choice*, North Yorkshire's mental health strategy.

This group is also used as a reference group and consultation group about public mental health and prevention interventions and proposals.

3.2 Joint Strategic Needs Assessment (JSNA) for mental health

A JSNA was produced in 2015 as part of the development work for *Hope, Control and Choice,* North Yorkshire's mental health strategy, however this needs updating and refreshing. The mandate to conduct a deep dive JSNA for North Yorkshire has been given. A working group has been set up and is in the process of drafting a scoping proposal. It is recommended that the JSNA will include data on the following;

- The prevalence of mental ill health
- Locality variations in diagnosis and prevalence of mental ill health (including personality disorder)
- Wider determinants and influences of mental health e.g education and training, housing
- Specific population groups e.g members of the armed forces and veterans, LGBT community

3.3 Training and Capacity Building

Mental health first aid (MHFA) and Applied Suicide Intervention Skills Training (ASIST) are internationally licenced training courses. In April 2016, 11 organisations were granted funding for employees to undertake training to become accredited trainers of MHFA and/or ASIST. The total grants awarded funded 10 ASIST trainers

19

and 10 MHFA trainers. As part of the funding agreement, organisations were required to deliver the qualifying courses, which are required in order to become licensed instructors, free of charge to individuals in North Yorkshire.

In May 2017, annual evaluation data was requested from successful organisations. One organisation withdrew from the scheme due to a lack of capacity to deliver and therefore did not receive their grant (£2234).

For the period May 2016 – May 2017 (inclusive), 7 individuals were trained as MHFA trainers and 10 as ASIST trainers. 6 ASIST courses and 5 MHFA courses had been delivered, totalling 83 ASIST participants and 108 MHFA participants (total = 191) receiving training free of charge under the grant scheme. Participants have included individuals from sports clubs, talking therapy organisations, schools, hospices, religious organisations, voluntary and community groups, probation services, art.

MHFA and ASIST instructor training courses only take place a few times a year and are usually oversubscribed. Therefore, 3 organisations were unable to undertake the training, leading to a slower roll out. These organisations are being contacted again in 2018 for further progress updates.

Organisations who received the funding report that they have been able to create additional revenue streams to fund other mental health projects, create partnerships (York Mind), support other organisational projects which require mental health support (North Yorkshire Sport) and have led to potential contracts to act as preferred provider for mental health training for other organisations (Scarborough Survivors, York Mind). Two organisations have been able to generate further income from delivery of the training.

NYCC's training and learning team have also recently funded members of staff to attend MHFA and ASIST instructors training courses and these courses are now part of the training offer to NYCC employees.

3.4 *Reducing stigma through social contact*

Research suggests that one of the most effective ways to challenge stigmatising attitudes is to have social contact with people who have experience of mental health issues.

Scarborough Survivors were successful in their bid to co-ordinate and administer a programme of social contact actives across North Yorkshire.

Small grants are available to organisations and / or individuals with lived experience of mental ill health (Champions) to host social contact events. Champions receive training and ongoing support from Scarborough Survivors. Applicants are required to complete an application form which is then reviewed by an independent board, membership of which includes an expert by experience.

The contract was awarded in July 2017 and ends on 31st January 2019. To date, seven grant applications have been received and three applications awarded.

3.5 Workplace health

3.5.1 Workplace Wellbeing Charter

The promotion of mental health in the workplace and inclusion of people with mental health issue within the workplace has been given national attention. There are a number of public health programmes in which this national strategic priority is being driven forward in North Yorkshire.

A framework for organisations to work towards to improve the health of their workforce in an easily understood, evidence based way is currently in development. Specific actions and recommendations to improve mental health and support a mental health improving workplace culture are core components of this framework.

3.5.2 North Yorkshire County Council

With the support of NYCC's corporate management board a significant amount of work has been undertaken to promote mental health for NYCC employees. The organisation signed up to the Mindful Employer charter in February 2016. An internal working group which includes members of staff who have lived experience of mental health, meets regularly.

A joint piece of work between public health, human resources and training and learning has been to identify gaps in current training on mental health. Consequently, we are involved in developing an online mental health awareness training programme for all staff and a classroom training course targeted at line mangers, managing mental health.

3.6 Links to complementary work streams

Mental health is a wide and complex issue with enormous potential to impact on other programmes and interventions. Building on this approach, we have sought to reinforce the interconnectivity and interdependence of mental health to other programmes.

- The Stronger Communities programme is funded through the public health grant. The internal service level agreement is in the process of being reviewed and we have sought to influence and strengthen their role in improving the mental health and social capital of communities through this contract.
- Encourage and support partnership delivery of mental health campaigns and awareness raising through partners such as the North Yorkshire Community Learning Partnership.
- Research indicates that that physical activity has mental health benefits. All providers who deliver the level 2 weight management services are contractually asked to measure the mental health impact of their programmes, using a nationally validated tool.
- Contribute to mental health service transformation work in North Yorkshire.

4.0 **RECOMMENDATIONS**

The North Yorkshire Health and Wellbeing Board are asked to;

- Note local activity on mental health improvement
- Consider North Yorkshire Health and Wellbeing Board sign up to the Prevention Concordat on mental health
- Agree a named champion for the prevention concordat for mental health

Report Author

Vicky Waterson, Health Improvement Manager, NYCC

Report Sponsor

Dr. Lincoln Sargeant, Director of Public Health, NYCC

August 2018

Appendix One

Prevention Concordat criteria	Current North Yorkshire position
Confirm that areas have published a mental health Joint Strategic Needs Assessment (JSNA) in the last 18 months or provide reassurance that arrangements are in place to initiate one within 3 months of signing	A JSNA was produced in 2015 as part of the development work for <i>Hope, Control and</i> <i>Choice,</i> North Yorkshire's mental health strategy. The North Yorkshire JSNA editorial group have considered this request and given the mandate to conduct a refreshed deep dive of a JSNA on mental health. A working group has been convened and recommendations for in and out of scope is scheduled for discussion at the JSNA editorial board in September. Partners (including statutory, community and voluntary sector and experts by experience) are supportive of this approach.
Have a multi-agency suicide prevention plan in place	North Yorkshire has a multi-agency suicide prevention plan in place which is monitored via the North Yorkshire Suicide Prevention Strategy group.
Provide an indication of plans for evaluation	Hope, Control and Choice has a well-established monitoring and evaluation criteria for delivery of the mental health strategy and the PMH&PP is part of the governance and progress reporting systems for this group. More recently, the Public Mental Health & Prevention Partnership used outcomes based accountability methodology to begin developing a more specific evaluation and outcomes frameworks for public mental health.
Agree to schedule public mental health on the agenda of a scrutiny board in the next 18 months	This request will be made through the appropriate elected member and associated planning process.
Ensure sign off by the local health and wellbeing board.	This paper requests sign off by the health and wellbeing board.
Have a named mental health champion who is either an elected member, a member of the health and wellbeing board, chief executive (local authority or CCG or both)	This paper seeks clarity on a named champion.



North Yorkshire Health & Wellbeing and Commissioner Forum

ROLLING WORK PROGRAMME/CALENDAR OF MEETINGS 2018/2019 – Updated 10th September 2018

Date	Meeting	Details	Item (contact)
September 2018	Health and Wellbeing Board Report Deadline: Friday 7 September	Time: 1.00 p.m. Date: Wednesday 19 September Venue: Selby District Council Offices, Civic Centre, Doncaster Road, Selby YO8 9FT (For sat navs use YO8 9BX)	 Digital Theme Update (Robert Ling) Feedback: Mental Health Summit (Louise Wallace) Prevention Concordat – Local Area sign up (Lincoln Sargeant) Integration and Better Care Fund Operational Guidance 2018/19 and implications for North Yorkshire (Louise Wallace) Rolling HWB Work Programme NOTE: The above formal business to be followed by a Workshop on Housing and Health
November 2018	Commissioner Forum <i>Report Deadline: Tuesday</i> <i>30 October</i>	Time: 2.00 p.m. Date: Thursday 8 November Venue: Thornton Room, City of York Council, West Offices	 Better Care Fund and Integration Plan 2017-19 proposal as to how the Plan could be reviewed and refreshed before April 2019 Proposal for date from which Trusts to go paperless Consideration of whole-system issues – particularly extended Hours/24 hour working Update on IBCF spend – particularly the pressure on social care packages Key partner updates

Date	Meeting	Details	Item (contact)
November 2018	Health and Wellbeing Board Report Deadline: Tuesday 13 November	Time: 9.30 a.m. Date: Friday 23 November Venue: Ripon Community House	 North Yorkshire Safeguarding Adults Board Annual Report (Sheila Hall) Dementia Strategy – Progress Update (Mike Rudd) Mental Health Summit – Outcomes/Next Steps Rolling HWB Work Programme
December 2018	Commissioner Forum <i>Report Deadline: Tuesday</i> <i>4 December</i>	Time: 2.00 p.m. Date: Thursday 13 December Venue: Thornton Room, City of York Council, West Offices	 Key partner updates Other Items to be determined
January 2019	Health and Wellbeing Board Report Deadline: Friday 11 January	Time: 1.00 p.m. Date: Wednesday 23 January Venue: Falsgrave Community Resource Centre, Seamer Rd, Scarborough.YO12 4DJ	 Healthy Child Programme Review (Ages 0-5 and 5- 19) Rolling HWB Work Programme
Early 2019	Commissioner Forum	Time: TBC Date: TBC Venue: TBC	 Workshop to consider:- how best to alight BCF with the various funding streams; and the acute landscape.
March 2019	Health and Wellbeing Board Report Deadline: Tuesday 12 March	Time: 9.30 a.m. Date: Friday 22 March Venue: Dishforth Village Hall, Dishforth, YO7 3JU	 Digital Theme – take stock of progress and plan for 2019/20 (Robert Ling) Better Care Fund Update (Louise Wallace) Conclusion of work on Mental Health Rolling HWB Work Programme TBC: Workshop on End of Life Care