North Yorkshire Council

North Yorkshire Health and Wellbeing Board

Minutes of the remote meeting held on Friday, 20 March 2026 commencing at 10.30 am.

Board Member	Organisation
Councillor Michael Harrison (Chair)	Executive Member for Health and Adult Services, North Yorkshire Council
Councillor Simon Myers	Executive Member for Culture, Arts and Housing
Councillor Janet Sanderson	Executive Member for Children and Families, North Yorkshire Council
Abigail Barron	Corporate Director of Health and Adult Services, North Yorkshire Council
Louise Wallace	Director of Public Health, North Yorkshire Council
El Mayhew	Corporate Director of Children and Young People Services, North Yorkshire Council
Mark Bradley	North Yorkshire Place Director, Humber & North Yorkshire Health & Care Partnership
Jonathan Coulter	Chief Executive, Harrogate District NHS Foundation Trust
Ashley Green	Chief Executive Officer, Healthwatch, North Yorkshire
Naomi Lonergan	Interim Managing Director (North Yorkshire, York and Selby), Tees, Esk and Wear Valleys NHS Foundation Trust
Dena Dalton	Deputy Chief Executive, Community First Yorkshire

In attendance

Clare Smart, Associate Director, Bradford District and Craven Health and Care Partnership
Naomi Smith, Head of Health Improvement, North Yorkshire Council
David Smith, Senior Democratic Services Officer, North Yorkshire Council

---

Copies of all documents considered are in the Minute Book

---

74 Welcome by the Chair

The Chair welcomed attendees to the meeting.

The Chair acknowledged that Richard Webb, Jill Quinn, Jonathan Dyson, Amanda Bloor and Mike Padgham had recently left the Board and thanked them for their contributions.

The Chair also noted that Abigail Barron, Dena Dalton, Garry Mackay and John Pattinson had recently joined the Board, subject to approval by Full Council.

As there were new attendees, members of the Board introduced themselves.

75 Apologies for absence

Apologies for absence were received from John Pattinson and Matt Sandford (Clare Smart as substitute).

76 Minutes of the meeting held on 14 January 2026

Resolved

a) That the minutes of the meeting held on 14 January 2026 are approved as a correct record.

77 Declarations of interest

No declarations of interest were made.

78 Public questions/statements

No public questions or statements were received.

79 Future Role of the Health and Wellbeing Board

Louise Wallace, Director of Public Health, introduced the report which set out the outcome of the November 2025 workshop on the future role of the Health and Wellbeing Board. The report proposed next steps relating to the Board's role and membership and invited members to consider these.

In introducing the report, Louise highlighted that, following a period of significant system change, the Board had taken the opportunity to reflect on whether its current arrangements were enabling it to add maximum value. Members were reminded that, while the Board's statutory responsibilities were fixed, there was flexibility in how it operated beyond those requirements.

She highlighted the relationship between the Health and Wellbeing Board and the North Yorkshire Health Collaborative as a key area for consideration, including ensuring that the two bodies complemented one another, avoided duplication and worked together effectively, including through an annual review of respective work programmes.

Reference was also made to the Board's way of working, including meeting four times per year, with two in-person meetings focused on development activity and deeper exploration of priority areas arising from the Joint Health and Wellbeing Strategy. Louise drew attention to the proposed membership arrangements and the flexibility to invite additional attendees to support discussion of specific themes.

It was noted that national guidance on neighbourhood health had been published after the report had been finalised and that this would need to be reflected in the Board's future work programme.

During the discussion, the following points were raised:

- The Chair emphasised that the workshop had been undertaken to understand what members wanted from the Board and how it could operate most effectively, highlighting the importance of maintaining flexibility in approach while ensuring that statutory responsibilities were met.
- It was highlighted that NHS Foundation Trusts supported a focused core membership for statutory business, alongside flexibility to involve a wider range of partners in workshops.
- Members discussed new expectations around neighbourhood health, including closer working with Integrated Care Boards and links to Better Care Fund requirements. It was emphasised that neighbourhood health was not solely an NHS policy and required the involvement of all partners, with Health and Wellbeing Boards seen as playing a leading

role across the local system. It was highlighted that Health and Wellbeing Boards would be expected to co-produce and agree neighbourhood health plans, ensuring that they delivered agreed outcomes and aligned with the Joint Health and Wellbeing Strategy. The importance of contributions from the VCSE sector and embedding people's voices was emphasised.

- The Board's role as the governance route for the local area SEND partnership was highlighted, including oversight of the forthcoming SEND Reform Plan and alignment with the Best Start in Life programme. Members emphasised the importance of coherence between SEND reforms, neighbourhood health planning and Best Start in Life activity.
- Concerns were raised about the pace and scale of system change, particularly in relation to Integrated Care Board arrangements, and members welcomed the clearer role for the Board in providing leadership and stability during a period of significant change.
- In response to a query on meeting arrangements, it was clarified that while the intention was to hold two online and two in-person meetings each year, this would remain agenda-led, with flexibility to extend in-person meetings where this would add value.
- Members welcomed the proposals and supported the overall direction of travel.

Resolved

a) That the Board approves the recommended approach and next steps outlined in the report.
b) That the Board recommends to Full Council that the membership of the North Yorkshire Health and Wellbeing Board, as outlined in Appendix B of the report, is approved.

80 North Yorkshire Health Collaborative Verbal Update

Abigail Barron (Corporate Director of Health and Adult Services at NYC), Louise Wallace (Director of Public Health at NYC), Mark Bradley (North Yorkshire Place Director at Humber & North Yorkshire Health & Care Partnership) and Clare Smart (Associate Director, Bradford District and Craven Health and Care Partnership) provided verbal updates on work since the last meeting. The following points were raised.

- The Ambitious for Health work programme was structured around three key workstreams: healthy people, integrated neighbourhood working and healthy places.
- Under the healthy people workstream, Members were updated on progress with Prevention Plus, which is supported by external funding and focuses on community based support, prevention and unpaid carers. Members were also advised of targeted investment in initiatives addressing health inequalities through neighbourhood based approaches, with funding delegated through joint arrangements and aligned closely with Prevention Plus to avoid fragmented delivery. An update was also provided on delivery of the Trailblazer programme, including engagement with participants and employers, community grant funding and plans for Year 2 delivery.
- Members were updated on progress with integrated neighbourhood working, which remained a significant area of focus. This included development of intermediate care hubs, improved integration of rehabilitation and reablement services, proposals to improve the consistency and accessibility of intermediate care beds across a large rural geography, redesign of the community equipment service ahead of a future procurement, collaborative work to improve consistency and efficiency across community nursing services, and the role of the VCSE sector in supporting admission avoidance and hospital discharge.
- Reference was also made to work under the healthy places workstream, including the need to ensure greater coherence in the use of neighbourhood "hubs" across

programmes and partners, in order to avoid duplication and confusion for local communities.

- Members were advised of progress on the development of a frailty model across North Yorkshire, agreed through the Integrated Care Board, including work to establish a single, countywide frailty crisis response service intended to provide a consistent and proactive approach to frailty and act as a foundation for wider neighbourhood health arrangements.
- The governance arrangements supporting the Health Collaborative were outlined, including the roles of the Joint Committee, directors' group and provider led collaboration, alongside links to local care partnerships. It was noted that, as the Integrated Care Board moved towards a more strategic commissioning role, delivery of neighbourhood health would increasingly be driven through providers working collaboratively across the system.
- Members received an update on Integrated Care Board arrangements following the conclusion of the recent consultation, including progress with implementation of the new structure and the move towards a more strategic commissioning model. It was noted that, while the ICB was undergoing organisational change, delivery of key programmes, including neighbourhood health, frailty and health inequalities, would continue.
- Members also received an update on West Yorkshire and Bradford and Craven, including recent and forthcoming leadership changes across the Integrated Care Board and partner organisations, confirmation that a place committee would continue during the transition to new provider partnership arrangements, and publication of a listening programme report bringing together insights from engagement with local communities.

During discussion, the Board raised the following points.

- The importance of ensuring clarity for local communities, particularly in relation to neighbourhood hub models, and making effective use of existing community assets across a large and rural county. Members noted that confusion around the increasing number of "hubs" could be exacerbated by geography, rurality and transport challenges, and emphasised the need to involve local populations in shaping future neighbourhood health arrangements.
- The need to involve local communities and the VCSE sector in the design and delivery of neighbourhood health approaches was emphasised, including recognising their role in supporting admission avoidance and hospital discharge.
- Members sought clarity on how West Yorkshire fitted within the Health Collaborative arrangements. It was clarified that West Yorkshire providers were represented within the Joint Committee and Directors' Group, and that the model operated on a North Yorkshire Council footprint, rather than an NHS geographical footprint, enabling partnership working across Integrated Care Board boundaries.
- Reassurance was sought and provided that children and families would remain a priority across all programmes of care, including mental health and urgent and emergency care, and would not be limited to those programmes explicitly labelled as family focused. Officers acknowledged the point and agreed that further discussions would take place to ensure that Children and Young People were embedded within the programme.
- Members also highlighted the importance of understanding how statutory partnership boards, including safeguarding children and adults and SEND arrangements, aligned with the wider Health Collaborative governance framework. Officers acknowledged that further work was required to map these relationships clearly and agreed to undertake follow up work to ensure appropriate alignment and representation.
- Members raised concerns about reductions in GP practices and pharmacies across North Yorkshire and noted that this increased the importance of getting neighbourhood health and hub models right as services continued to evolve.
- Members discussed the ongoing Integrated Care Board reorganisation, noting that the

consultation had concluded and that partner feedback, including from local authorities and providers, had resulted in positive changes to the proposed structure. It was noted that implementation was underway, with a significant proportion of posts already filled, and that delivery of key programmes would continue during the transition.

- Members welcomed confirmation that pre planning consultation had commenced on intermediate care hubs in Scarborough and Harrogate, noting this as a positive example of progress from strategic planning to delivery on the ground.
- Members recognised the increasing role of the Mayoral Combined Authority as a route for funding and emphasised the importance of joint working across the system to deliver funded programmes efficiently, avoid duplication and make effective use of existing organisational capacity.
- The importance of maintaining strong links with West Yorkshire and Bradford and Craven was emphasised, with Members noting the value of ongoing collaboration and future place focused updates.

Resolved

That the update is noted.

Councillor Simon Myers joined the meeting at 11:30am.

---

81 Work programme

The Chair introduced the item and highlighted that the work programme remained flexible, with Members invited to suggest additional items as required. It was noted that agenda planning would continue to reflect whether meetings were held in person or remotely.

Members raised the following points.

- It was agreed that the SEND Reform Plan should be added to the work programme for consideration at the June 2026 meeting.
- Members also proposed that the Best Start in Life Plan be included on the forward work programme, noting its close links to the SEND Reform Plan.
- Members suggested that the Board consider a future agenda item exploring parenting as part of its wider prevention and public health role. It was noted that this could be considered at a later meeting.

The Chair welcomed the suggestions and reiterated that the work programme would continue to be kept under review and updated to reflect priorities.

82 Any other items

There were no other items to be considered.

83 Date of next meeting

Friday, 5 June 2026 at 10:30am – venue TBC.

The meeting concluded at 11.36 am.