



Agenda

Notice of a public meeting of North Yorkshire Health and Wellbeing Board

To: Councillors Michael Harrison (Chair), Andrew Lee, Janet Sanderson, Richard Foster

Amanda Bloor (Vice-Chair), Stuart Carlton, Richard Flinton, Jonathan Foster, Ashley Green, Helen Hirst, Shaun Jones, Brent Kilmurray, Phil Mettam, Mike Padgham, Jillian Quinn, Steve Russell, Sally Tyrer, Louise Wallace, Janet Waggott and Richard Webb.

Date: Friday, 18th March, 2022

Time: 10.30 am

Venue: Remote Meeting to be held via Microsoft Teams

Under his delegated decision making powers in the Officers' Delegation Scheme in the Council's Constitution, the Chief Executive Officer has power, in cases of emergency, to take any decision which could be taken by the Council, the Executive or a committee. Following on from the expiry of the Local Authorities and Police and Crime Panels (Coronavirus) (Flexibility of Local Authority and Police and Crime Panel Meetings) (England and Wales) Regulations 2020, which allowed for committee meetings to be held remotely, the County Council resolved at its meeting on 5 May 2021 that, for the present time, in light of the continuing Covid-19 pandemic circumstances, remote live-broadcast committee meetings should continue (as informal meetings of the Committee Members), with any formal decisions required being taken by the Chief Executive Officer under his emergency decision making powers and after consultation with other Officers and Members as appropriate and after taking into account any views of the relevant Committee Members. This approach will be reviewed on 18th May 2022.

The meeting will be available to view once the meeting commences, via the following link - www.northyorks.gov.uk/livemeetings. Recordings of previous live broadcast meetings are also available there.

Business

- 1. Welcome by Chair**
- 2. Minutes of the meeting held on 15th September 2021 (Pages 3 - 12)**
- 3. Apologies for Absence**

Enquiries relating to this agenda please contact Patrick Duffy, Principal Democratic Services Scrutiny Officer.
Email: Patrick.Duffy@northyorks.gov.uk Tel: 01609 534546
or e-mail

Website: www.northyorks.gov.uk

4. **Declarations of Interest**
5. **Public Questions and 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 (*contact details above*) no later than midday on Tuesday 15th March 2022. Each speaker should limit themselves to 3 minutes on any item.
6. **A look back over the past year from three statutory perspectives:- (Pages 13 - 36)**
 - a) Director of Public Health, Annual Report – Louise Wallace, Director of Public Health
In addition to the presentation slides, please see link to [Director of Public Health Annual Report 2021](#)
 - b) Healthwatch, North Yorkshire – Ashley Green, Chief Executive Officer
 - c) North Yorkshire Safeguarding Adults Board, Annual Report
Members are asked to note that this report has previously been circulated to them for information
7. **Local Government Reorganisation Update - Richard Webb, Corporate Director of Health and Adult Services (To Follow)**
8. **Integrated Care Partnerships/Integrated Care System Developments - Amanda Bloor, Accountable Officer, North Yorkshire Clinical Commissioning Group (To Follow)**
9. **North Yorkshire Better Care Fund 2021/2022; Summary Narrative - Louise Wallace, Director of Public Health (Pages 37 - 40)**
10. **North Yorkshire Pharmaceutical Needs Assessment 2022-2024: Briefing Paper - Louise Wallace, Director of Public Health (Pages 41 - 42)**
11. **North Yorkshire Joint Strategic Needs Assessment (Countywide Profile) and Joint Health and Wellbeing Strategy - Louise Wallace, Director of Public Health and Barry Khan, Assistant Chief Executive (Legal and Democratic Services) (To Follow)**
12. **Rolling Work Programme 2022/2023 - Patrick Duffy, Principal Democratic Services Scrutiny Officer (Pages 43 - 48)**
13. **Any other business which, in the opinion of the Chair, should be considered as a matter of urgency**
14. **Next Meeting - Wednesday 25th May 2022 at 1.00 p.m.**

Barry Khan
Assistant Chief Executive
(Legal and Democratic Services)

County Hall
Northallerton

Thursday, 10 March 2022

North Yorkshire Health and Wellbeing Board

Minutes of the meeting held remotely, via Microsoft Teams, on 15th September 2021

Board Members	Constituent Organisation
County Councillors	
County Councillor Michael Harrison (Chair)	Executive Member for Adult Social Care and Health Integration
County Councillor Andrew Lee	Executive Member for Public Health, Prevention and Supported Housing
County Councillor Janet Sanderson	Executive Member for Children and Young People's Service
Clinical Commissioning Groups	
Wendy Balmain	Director of Strategy and Integration, NHS North Yorkshire Clinical Commissioning Group (substitute for Amanda Bloor)
Fiona Bell-Morritt	Lead Officer, Primary Care, NHS Vale of York Clinical Commissioning Group (substitute for Phil Mettam)
Ali Jan Haider	Director of Keeping Well, NHS Bradford District and Craven CCG (substitute for Helen Hirst)
Local Authority Officers	
Stuart Carlton	Corporate Director, Children and Young People's Service North Yorkshire County Council
Richard Flinton	Chief Executive, North Yorkshire County Council
Janet Waggott	Chief Executive, Selby District Council and Assistant Chief Executive, North Yorkshire County Council (District Councils Chief Executive Representative)
Louise Wallace	Director of Public Health, North Yorkshire County Council
Richard Webb	Corporate Director, Health and Adult Services, North Yorkshire County Council
Other Members	
Ashley Green	Chief Executive, Healthwatch North Yorkshire (substitute for Chris Brackley)
Shaun Jones	Deputy Locality Director, NHS England and NHS Improvement (North East and Yorkshire)
Jill Quinn	Chief Executive, Dementia Forward (Voluntary Sector Representative)
Co-opted Members	
Brent Kilmurray	Chief Executive, Tees, Esk and Wear Valleys (TEWV) NHS Foundation Trust NOTE: Naomi Lonergan, Head of Mental Health at TEWV, joined the meeting towards the end when Mr. Kilmurray had to leave
Stephen Russell	Chief Executive, Harrogate District Foundation Trust
Sally Tyrer	Chair of Yorkshire Local Medical Committee Ltd (Primary Care Representative)

In Attendance (North Yorkshire County Council) unless stated:-

Councillor Carl Les, Leader of the Council, Stephen Loach and Patrick Duffy (Legal and Democratic Services)

144. Welcome by the Chair

The Chair welcomed Members to the meeting and anyone viewing. For the particular benefit of members of the public or the media, he advised that this is a Statutory Committee whose main role is to act as a forum for leaders from the local health and care system to work together to improve the health and wellbeing of the local population.

The full membership of the Board could be seen on the Council's website.

The Chair referred to the statement on the Agenda front-sheet about current decision-making arrangements within the Council, following the expiry of the legislation permitting remote committee meetings.

For absolute clarity, he reminded everyone that this is an informal meeting of the Committee Members. Any formal decisions required will be taken by the Chief Executive Officer under his emergency delegated decision-making powers after taking into account any views of the relevant Committee Members and all relevant information. This approach has been agreed by full Council

The Chair also welcomed Councillor Andrew Lee, who had taken on the Executive Member Portfolio for Public Health, Prevention and Supported Housing from Councillor Caroline Dickinson. The Chair expressed his thanks to Councillor Dickinson for her work as a Member of the Board. The Chair also advised that Jonathan Foster, Chief Fire Officer for North Yorkshire, who was unable to attend today's meeting, had joined the Board as representative of the Emergency Services.

145. Apologies for absence

Apologies for absence were submitted by:

- Chris Brackley, Chair, Healthwatch North Yorkshire
- Amanda Bloor, Accountable Officer, NHS North Yorkshire CCG
- Jonathan Foster, Chief Fire Officer, North Yorkshire
- Councillor Richard Foster, Leader of Craven District Council
- Helen Hirst, Accountable Officer, NHS Bradford District and Craven CCG
- Phil Mettam, Accountable Officer, NHS Vale of York Clinical Commissioning Group

146 Membership

The current Membership of the Board had been circulated with the papers for the meeting, for information. Recent changes were as referred to by the Chair under Minute No. 144, above.

NOTED.

147. Minutes

Resolved -

That the Minutes of the meeting held on 19th March 2021 be approved as an accurate record.

148. Declarations of Interest

There were no declarations of interest.

149. Public Questions of Statements

There were no public questions or statements.

150. Local Government Reorganisation

Considered –

A presentation by Richard Flinton, Chief Executive, North Yorkshire County Council.

Richard Flinton updated as follows:-

- The Secretary of State for Housing, Communities and Local Government had decided to implement the County Council's proposal for a single, Unitary Authority in North Yorkshire, with the City of York as a separate entity
- The seven District Councils and the County Council will come together to form a new Authority
- In terms of timescale, there will be elections for the new Council in May 2022, which will incorporate a new set of ward arrangements.
- Councillors will serve for five years and oversee the final year of the County Council and the implementation of the new Council
- Vesting day will be 1st April 2023. This allows 18 months for what is a major structural change. Whilst this is a significant task, work has begun and there is good engagement between partners and a sense of collective leadership
- A Member implementation Board has been established comprising representatives of the County and Districts. This met for the first time yesterday and will have oversight of the programme
- A range of workstreams are being devised, several of which will cut across the work of the Board
- The intention is to be outward looking, garnering people's views as to how we move forward
- The changes in the NHS should tie in well with Local Government Reorganisation
- This is a huge opportunity to make sure we derive the most efficient system we can, given the challenges that will be faced

Richard Flinton concluded by saying he would be happy to update the Board as to progress.

Janet Waggott, Chief Executive, Selby District Council and Assistant Chief Executive, North Yorkshire County Council, added that the transition is being handled professionally and people are working well together.

Ashley Green, Chief Executive of Healthwatch North Yorkshire, advised that there are some anxieties among the public. How can these be raised? The Chair responded that one of the workstreams is communication. Richard Flinton added that he understands there will be sensitivities. The key is to ensure that change for the public is seamless. Therefore, a lot of work will be put into aspects such as access arrangements and communications, to reassure them.

NOTED.

151. Government White Paper on Integration and Innovation: Implications for North Yorkshire

Considered –

A presentation by Wendy Balmain, Director of Strategy and Integration, North Yorkshire Clinical Commissioning Group.

The Chair mentioned that the Vice-Chair, Amanda Bloor, was disappointed that she could not attend today's meeting.

Wendy Balmain talked Members through this presentation. Among the points she highlighted were:-

- The core elements of Humber, Coast and Vale Integrated Care Partnership which will comprise an Integrated Care Board (ICB) and an Integrated Care Partnership (ICP). The role of the ICB is to allocate NHS budgets and produce a five-year plan for health systems. The ICP will lead the development of an Integrated Care Strategy. Place-based Partnerships will play a pivotal role, along with Provider Collaborates, creating a new way for organisations to talk to each other and plan and organise services.
- The CCG will not exist when Integrated Care Systems commence from 1st April 2022 and there is a significant amount of work required to ensure that the new system is ready to operate.
- The draft Model for the Humber Coast and Vale Integrated Care System has Place-based Partnerships at the fulcrum so as to understand, at a local level, people's needs and to plan collectively to deliver services and improve outcomes for residents.
- We are managing four key elements at present:-
 - transforming the system
 - delivering recovery
 - business as usual work; and
 - transition planning
- Several guidance documents have been issued, which include *Thriving Places*, and the role of the voluntary sector. There are already strong place relationships in North Yorkshire which can support transition to the new arrangements.
- The North Yorkshire and York Operating Model will continue to develop a model that delivers services through four Local Care Partnerships – Harrogate; Hambleton and Richmondshire; East Coast; and Vale and Selby. Primary Care Networks and Federations are also an integral component of the Model.

- Wendy Balmain and Richard Webb, Corporate Director, Health and Adult Services, have co-chaired conversations with Local Care Partnerships. There were several common themes and workforce was by far the biggest issue. A real sense of collaboration is evident.
- It was also clear from the conversations that people want earned autonomy to deliver plans, recognising that they know their communities, but welcome support from the Strategic Partnership Board in North Yorkshire and the Health and Wellbeing Board.

Richard Webb added that a challenge lies in the balance between subsidiarity – so that decisions are taken at the right level. We are trying to dovetail changes with Local Government Review to derive the most opportunity out of this. Prevention and Children and Young People were also widely referred to in the conversations referred to by Wendy. In terms of Craven, we are working closely with colleagues in Bradford. With regard to the recent announcements on NHS/Social Care Reforms, the future stability of the Care Market is a challenge. We will look for the White Paper to give more detail on several other issues, which will be worked through and brought back to the Board in due course

In response to a question by the Chair, it was confirmed that the picture in West Yorkshire is similar. *Act as one* comprises leaders across Local Government and Health in Bradford and Craven and the County Council is part of these arrangements.

Ali-Jan Haider, Director of Keeping Well, Bradford District and Craven CCG, added that the overarching system in Bradford is similar to that outlined by Wendy Balmain. There is a great opportunity to tailor systems to be more effective at a place level - utilising data to drive change. There is good engagement occurring with key stakeholders to ensure co-production with areas that share a boundary with Bradford.

NOTED.

152. Covid-19 Systems Overview

Considered –

A presentation by several Members of the Board outlining the effect of Covid-19 on their organisations and key issues arising from this.

Louise Wallace, Director of Public Health, introduced the presentation and stated that:-

- It felt opportune to update the Board as it has not met for some time.
- The Vaccination Programme is having an impact on the number of people being hospitalised and deaths. Infection rates remain high, however. Therefore, we are encouraging people to continue to think about what they can do to reduce the risks – maintain social distancing; hand washing and so on.
- We are beginning to live with Covid.
- Her Team continues to provide support to schools, workplace settings, etc., as required. The Public Health response is still very much in place, including the Locality Teams to glean intelligence on the ground.
- The overall picture for the system is one of pressure.

Louise then introduced the following speakers, who advised the Board of the situation in their respective areas.

Sue Peckitt, Chief Nursing Officer, North Yorkshire CCG

- Excellent progress made on the vaccination programme.
- The Evergreen offer continues for anyone who is yet to come forward.
- A number of successful Pop-up and Walk in Clinics are in place.
- Uptake along the 18-29 year old cohort has been higher than expected.
- Preparing for Phase 3 Booster Programme to be delivered through nine GP Local Vaccination Sites.
- Due to supply issues, it is not currently the intention to administer a booster jab and flu jab at the same time.

In response to a question from the Chair, Sue advised that if someone is eligible for both the flu and Covid vaccines and stocks are available of both when they arrive, she saw no problem in them receiving both.

Sally Tyrer, Chair of Yor Local Medical Committee, added that there is a big impact on Primary Care so, where supply permits, they will try to co-administer.

Richard Webb, Corporate Director, Health and Adult Services (Social Care)

- North Yorkshire is well placed to deal with the challenges we are likely to face this autumn and winter.
- There are 20,000 people who work in the Care Sector with, at any one time, about 1,000 vacancies. Facing competition for recruitment of staff from other sectors
- Some packages of care are being handed back by Providers.
- Very pro-active on quality issues, including a Quality improvement Team who work with Providers.
- Seeing high levels of crisis referrals to Social Care and Mental Health Services.
- The requirement for mandatory vaccination of care staff will impact on the sector and not all staff have chosen to be vaccinated.
- Fatigue with the Pandemic among staff and the public is an issue.
- We await more detail on Social Care Reform, particularly around the operation of the care market.
- Good co-operation exists between partners.

In response to a question from the Chair as to what would happen if a Nursing Home was de-registered, Richard Webb advised that other options would need to be looked at including, as a last resort, moving residents to a Home where they could receive the nursing care required.

Sally Tyrer, Chair of Yor Local Medical Committee (Primary Care)

- Significant patient demand for appointments. Capacity is an issue; struggling to meet demand even though more appointments have been offered than previously.
- Workload pressures – people waiting a longer time for Hospital treatment will contact their GP.
- Staff resilience – the delivery of the Vaccination Programme is over and above normal work.
- Significant staff absence due to stress and Covid infection. There is immense goodwill but little energy or capacity left in the system to step up.
- Respiratory illnesses – seeing a significant rise now that people are mixing more. It can be difficult to tell whether someone has a Covid or non-Covid condition. Need to take a cautious approach.
- Face to face appointments represent 60% of all appointments.

Councillor Janet Sanderson said she saw parallels with the stress and burnout faced by teachers and asked how outbreaks in school communities are being monitored? In addition, thinking back to a presentation by the Health Service in the Highlands to the Board last year, have we learnt any lessons with regard to virtual meetings?

Louise Wallace advised that rules around schools and isolation and bubbles changed as schools returned in September 2021. LFD tests have been encouraged to maximise testing of asymptomatic people. The Public Health Team continue to offer support but the process within schools is now managed differently as a result of the changed Guidance.

Regarding the point around the Highlands presentation, Richard Webb commented that there has been a shift in innovation, with people meeting virtually and many online care assessments and reviews, where this is right for the person concerned. The system makes far greater use of digital than was the case prior to the Pandemic.

Ashley Green informed the Board that Healthwatch North Yorkshire had received mixed feedback about online consultations, although the majority of people were positive. Healthwatch tries to have a balanced message approach by advising the public that GPs are increasing the number of appointments and that other options are available, such as local pharmacies and dialling 111. It perhaps needs to be pointed out to the public that many people do not attend their appointment.

In response to a question from Councillor Andree Lee, Sally Tyrer explained that in the data presented the “Other” category could relate to data extraction, which does not tell you the exact set up of a Clinic.

Stephen Russell, Chief Executive, Harrogate District Foundation Trust (Acute Care)

- Has been a real team effort among partners, with Team cohesion vital during this difficult time.
- Services have been very busy – not just Acute Care, but community-based services, who face different pressures.

- The three main Hospital Trusts – Harrogate; Yorkshire and Scarborough and South Tees - have seen an 8% increase in emergency care since 2019/2020 - often involving patients with more complex issues.
- Building on digital transformation - although this is not relevant for every circumstance.
- Waiting times have increased for a variety of reasons. Working hard to reduce times with a number of key actions in place. Waiting lists impact on Primary Care, as patients become, understandably, anxious and will contact their GP.
- Recovery is focused not just on activity but on lived experience; wellbeing and minimising harm – not just clinical harm, but the consequences of waiting longer in terms of pain and mobility.
- Focusing also on reducing health inequalities – examining waiting times and waiting lists to make sure we are not exacerbating these inequalities.

Wendy Balmain, Director of Strategy and integration, North Yorkshire Clinical Commissioning Group - North Yorkshire and York System pressures (Community Health)

- Challenges include operating at a high level across the County; these pressures are heightened by staff absences/turnover.
- Developments include all Community Provider Services working to strengthen their two-hour Crisis Response Services and a number of locality-specific initiatives, such as the Geriatric Outreach Pilot work, as part of the Friarage Ambulatory Care, coupled with frailty service design.
- Now dealing with long Covid implications, which are not yet fully understood. To develop our understanding, three Assessment Centres have been established in Harrogate, South Tees and Scarborough.
- Huge amount of innovation occurring across the system.

Brent Kilmurray, Chief Executive, Tees, Esk and Wear Valleys NHS Foundation Trust (Mental Health)

- Forecasting an increase in demand of 61% from pre-Covid levels.
- Crisis beds under severe pressure, resulting in people being admitted to beds in other parts of TEWV.
- Staff sickness has been an issue – now returning to more normal levels, but localised staff availability remains a risk.
- People are presenting with higher needs and more complex needs.
- People's wellbeing and mental health is coming under significant strain.
- Looking at different ways of working to offer earlier support and intervention to challenge the trends in the forecast models.
- A Resilience Hub has been established across Humber, Coast and Vale to assist health and care staff through outreach work.
- Providing wellbeing support; psychological therapies and access to services.

Jill Quinn, Chief Executive of Dementia Forward, advised that her organisation has been commissioned by the CCG and have been recruiting six Dementia Care Co-ordinators to work with Primary Care - primarily looking at people who may have slipped through the net and supporting people on the waiting list.

She added that workers can collect collateral evidence and, hopefully, streamline the diagnosis process.

The Helpline, which previously averaged between 70 and 100 calls per month for referrals, now receives over 200 calls each month.

The process is working and it is hoped that this will assist in easing waiting time issues.

Wendy Balmain, Director of Strategy and Integration, North Yorkshire Clinical Commissioning Group (North Yorkshire and York System pressures - Silver Command)

Wendy presented a slide which illustrated how system pressures are being pulled together, via Silver Command.

Today, the Board had considered individual updates from partners but the Silver Programme, which she and Richard Webb Co-Chair, meets every week and reports through to the North Yorkshire and York Strategic Partnership Board on system pressures. These include workforce; communications; triage; ageing well; care market and primary care.

On triage, she referred to the Medicare System service expansion, which enables a Care Home to have a video consultation with a Hospital as to how they can support someone to avoid admission. This has been expanded and will provide additional support throughout the winter.

She ended her presentation by stressing that partners are working together with a clear programme.

Louise Wallace concluded this Item by outlining the Next Steps:-.

- The Covid Winter Plan will be key, with its strong emphasis on pharmaceutical interventions and vaccines. Isolation remains an important part of managing the number of cases.
- There will be messages advising people how to support themselves, their families and communities to reduce the risk of infection.
- Winter resilience will involve a great deal of work between the NHS and Social Care – with different complexities this year.
- The Vaccination Booster Programme and the Flu jab will be crucial.
- Strong system working remains key.

Richard Webb added that need to prepare ourselves for winter to support people to stay safe in the best place possible - be that Hospital, Care Home or their own home.

There has been tremendous work around community support, with over 20 support hubs and 137,000 hours of volunteering.

The Chair thanked partners for their contribution. He commented that system working and the scope of the system, including the Voluntary and Community Sector, is key and has come across in everything said today.

153. Approach to future meetings

The Chair said that the decision had been taken not to meet when the Pandemic was at its height to allow partners to get on with dealing with the situation. He sought Members views on the approach to future meetings. His view was that remote meetings should be the default, unless it is clear that meeting in person can add value or where a decision is required.

Members agreed with the Chair's view.

154. Any other business which, in the opinion of the Chair, should be considered as a matter of urgency

There was none

The meeting concluded at 2.52 p.m.

PD

DRAFT

Louise Wallace

Director of Public Health
North Yorkshire

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North Yorkshire

Director of Public Health

Annual Report 2021

Making sense of COVID-19

October 2019 - April 2021



Agenda Item 6

Introduction

- Progress on past recommendations and priorities
- Health In North Yorkshire
- North Yorkshire's COVID-19 response
- Protecting and Improving the health and wellbeing of North Yorkshire population
- North Yorkshire Public Health priorities for 2021- 2025

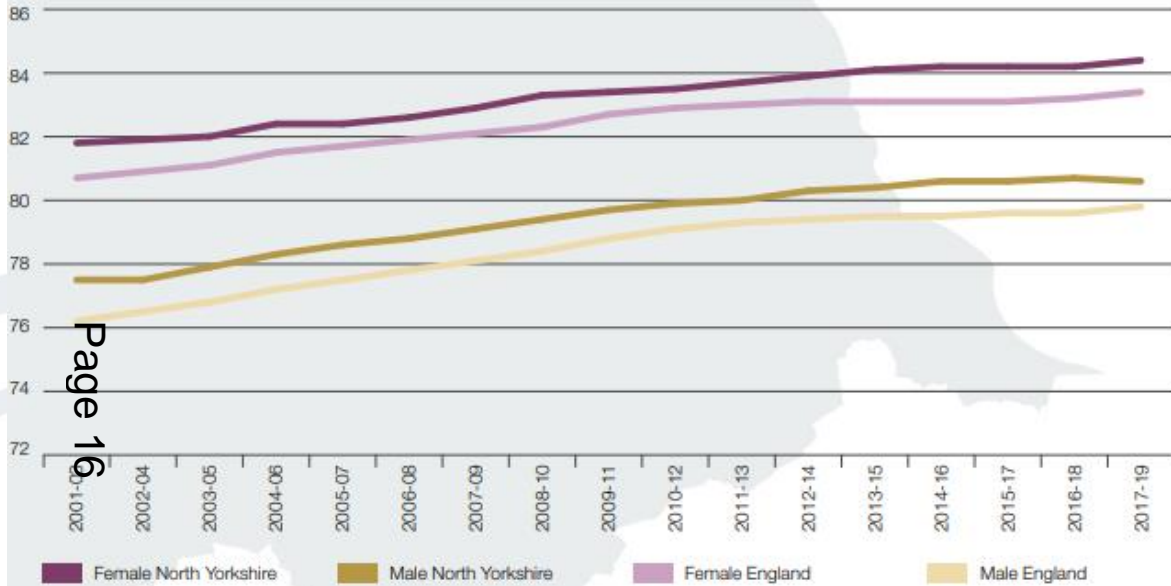
Progress on Past recommendations

Recommendations	
Support Deprived areas	<ul style="list-style-type: none"> • Building relationships in the community to identify regeneration priorities a £1.4m support package is being distributed • Improving under-five's immunisations vaccination uptake • School Zone and Food Poverty work • Teenage Pregnancy
Tackle rural Poverty	In partnership with Ryedale District Council, Hambleton District Council, Scarborough Borough Council and YES! Energy Solutions established the North Yorkshire Warm Homes Fund (£2.5m) .
Reduce Childhood inequalities	Grow and Learn, the School Readiness Pilot; understand the risk factors around delayed speech and language and test the impact of interventions. Outcomes: Improved speech, language and communications skills , Take up of Early Years 2 year old funding increased , Quality measures including feedback from parents. 78% found service helpful and all found support and resources useful.
Work with Military families and veterans	Worked with the Military to establish robust systems and processes to ensure the environment was as COVID-19-secure as possible, with regular spot checks to continually improve and develop best practice. continuing work with the Nepalese community based on the JSNA findings.
Create safe environments for high – risk groups	REACH (Reducing Exclusion for Adults with Complex Housing needs,) based on a Housing First approach was established. REACH will provide dedicated units and intensive community support to people who are currently homeless or likely to be made homeless due to a range of social and long term health needs. This includes mental health/substance misuse, physical health needs or because of criminal activity or anti-social behaviour .
Develop priorities to mitigate the impact of changes to the benefit system	Income Maximisation Team Since 2015, the Team has supported people to access over £39m in additional and previously unclaimed or unpaid welfare benefits. This has supported over 17,000 citizens of North Yorkshire. In 2019-20 the team supported over 3,600 people to claim £9 million in additional and previously unpaid benefits. This clearly shows the continued demand for help.
Improve Community Engagement	Engagement Framework for Health and Adult Services. This sets out our approach to find new ways to listen to, work and make decisions, together with communities.

Health in North Yorkshire

Life expectancy at birth

Source: PHE

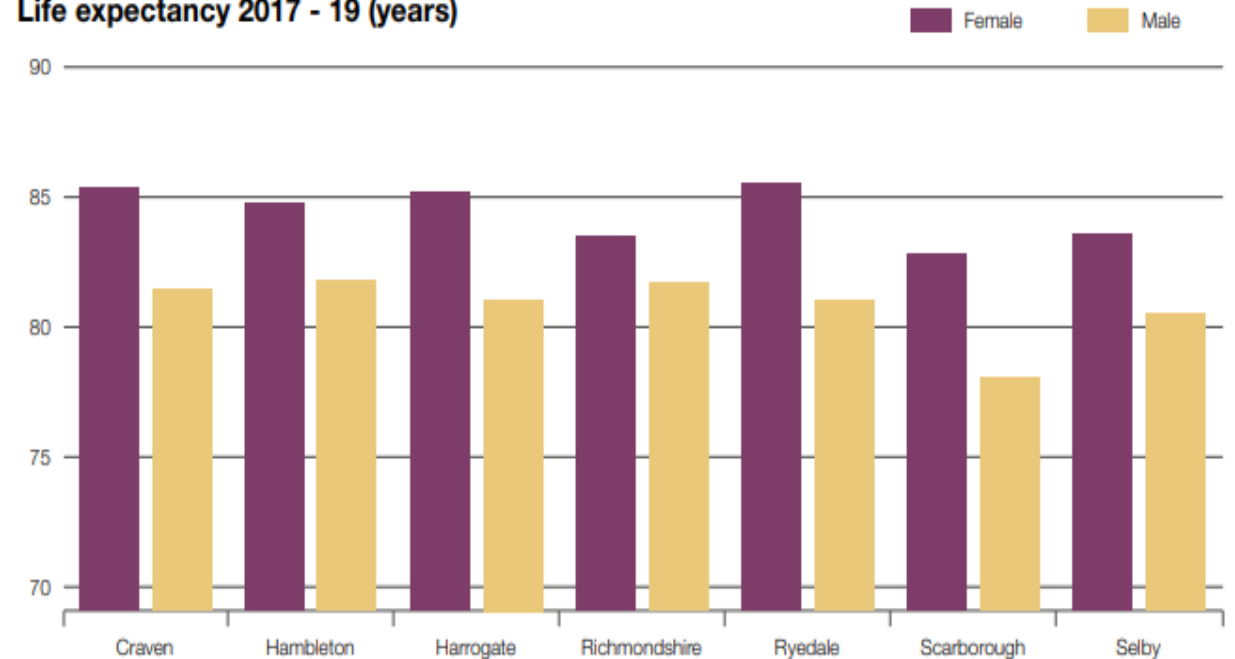


Life expectancy – Figures show the trend in life expectancy in England and North Yorkshire from 2001-03 to 2017-19 (top), the most recent life expectancy by sex and district, and the inequality in life expectancy by sex and district.

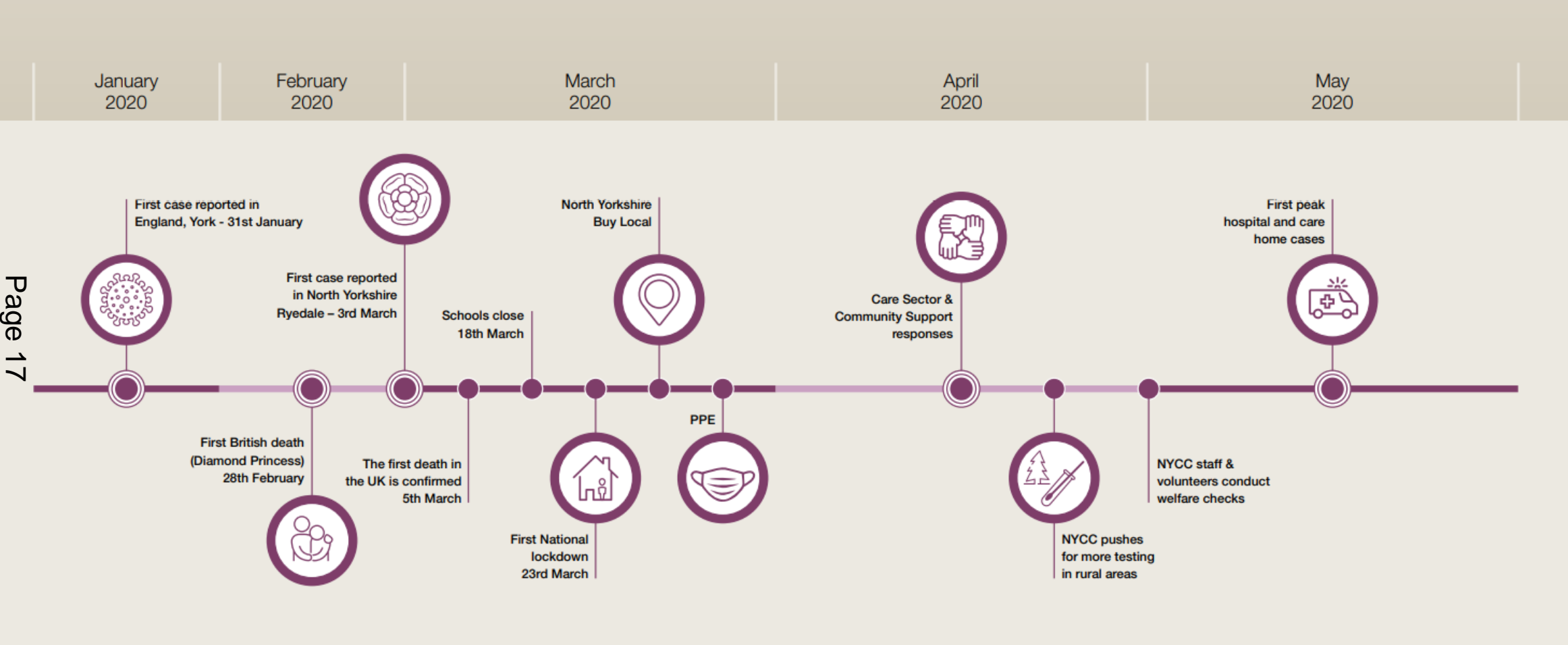
Women and men live 4.8 and 6.9 years longer respectively in the least deprived areas compared with those in the most deprived areas

Life expectancy at birth is 84.4 years for women and 80.6 years for men, both above the England average. In terms of healthy life expectancy,

Life expectancy 2017 - 19 (years)



An unprecedented year



June 2020

July 2020

August 2020

September 2020

October 2020

November 2020

December 2020

January 2021

February 2021

Relaxation of lockdown rules over summer

Primary schools reopen



First National Lockdown ends

Tier system introduced



Operation Talla in Hambleton and Scarborough



Vaccinations begin

Second National Lockdown



North Yorkshire deaths exceed 1000



North Yorkshire deaths exceed 500



Parts of North Yorkshire on national Watch list



Surge in cases in Scarborough

North Yorkshire cases exceed 20k

Hospital bed occupancy with COVID-19 cases peaks in the four hospital trusts serving North Yorkshire on 25th January



Flooding across North Yorkshire



Infection rates fall across North Yorkshire. New road map to end restrictions



North Yorkshire's COVID-19 Response

- Outbreak management readiness
- National guidance, local implementation
- COVID Outbreak Control Plan
- Public information and communication
- Personal Protective Equipment (PPE)
- Testing
- Settings response to COVID-19
- Partnerships
- Data Management
- The COVID-19 vaccination programme

Why we wear PPE

Keeping everybody safe

Health and care workers may look different. We are wearing extra protection called **PPE**

- Face masks
- Face shield
- Gloves and gown

PPE is good

✓ PPE helps health and care workers be safe.

COVID-19 Testing 5 pillars

1. NHS swab testing
2. Commercial swab testing
3. Antibody testing
4. Surveillance testing
5. Diagnostics National Effort

TEAM NORTH YORKSHIRE Back to school

- Social distancing
- Wash your hands regularly
- Wear face coverings on transport and in shops
- High temperature, sore throat, loss of taste and smell
- Do not meet socially in groups of more than 10 on any setting
- Keep up to date with the latest information and stay safe against COVID-19. If you have symptoms, update for symptoms and self-isolate. For further advice on how to keep safe, follow @NHYCC

STAY SAFE IN NORTH YORKSHIRE

Covid-19: Preventing and Managing Covid-19 in Hospitality Settings – Local Guidance

Produced 20/12/2020

Who is this guidance for?
This guidance supplements the national action cards for settings including hotels and other guest accommodation, campsites and caravan parks, entertainment and holiday resorts, restaurants, pubs, bars, cafes or takeaways and any other similar setting.

Practical actions to prevent the spread of COVID-19:
Refer to the Working safely during coronavirus guidance that has practical steps you can take. This set of practical steps will work alongside your own risk assessment to help you stay safe.

STAY SAFE IN NORTH YORKSHIRE

Test and Trace

Covid-19: Hosting A Covid Secure Event

Local guidance for event organisers

Produced 18/12/2020

Practical actions to prevent the spread of COVID-19 – key considerations and principles to manage and mitigate risk

Attending events often includes socialising and associated activity. This can lead to attendees engaging in riskier behaviours and taking less notice of the rules around social distancing, or concerning government guidance. This behaviour is foreseeable and must be anticipated by event organisers, event organisers must put in place control measures to reduce these risks.

Traveling from outside areas should be avoided and you should limit the attendance from neighbouring areas where possible. You should prevent attendance from higher risk areas.

Key things to consider

Licences

It is the responsibility of the event organiser to ensure that the correct licence/consent/permits is in place for the activities being proposed.

In most circumstances, the process of obtaining these will include a consultation period ranging from 5 working days through to 28 days. These are often statutory requirements which therefore must be followed before permission can be granted. To check what consent/permission is required, please contact the Licensing Section using the contact details at the end of this document. Failure to provide a suitable risk assessment is likely to result in objections to an application from Responsible Authorities.

Capacity limits

- public attendance at outdoor and indoor events (performances and shows) is permitted, limited to whichever is lower: 50% capacity, or either 2,000 people outdoors or 1,000 people indoors
- public attendance at spectator sport and business events can resume inside and outside, subject to social contact rules and limited to whichever is lower: 50% capacity, or either 2,000 people outdoors or 1,000 people indoors
- weddings and funerals can go ahead with restrictions on numbers of attendees – 15 people can attend wedding ceremonies and receptions, 30 people can attend funeral ceremonies, and 15 people can attend linked commemorative events such as wakes or storeettings.

General COVID-19 Guidance

Assess your premises against [this guidance](https://www.gov.uk/government/consultations/covid-19-secure) to make your event COVID-19 Secure.

Depending on the nature of your event you may need to consider more than one guidance document, for example, if you are an outdoor area providing entertainment, selling merchandise

Going Home Checklist

Acknowledge what was difficult - and let it go.

Take a moment to think about your day...

Consider what went well.

Check on your colleagues before you finish - are they OK?

Are you OK? Your senior team are here to support you.

Switch your attention to home. Rest and recharge.

North Yorkshire County Council

Be part of Team North Yorkshire

Test and trace

If you have Coronavirus symptoms:

- Book a test immediately and self-isolate at home
- www.nhs.uk/coronavirus or call 119
- Do not leave your home for any reason other than to get a test
- If you need medical advice call 111

STAY SAFE IN NORTH YORKSHIRE

If you have symptoms including high temperature, a new cough or loss or change to sense of smell or taste, book a test and self-isolate at home www.northyorks.gov.uk/TestandTrace

STAY SAFE IN NORTH YORKSHIRE

Medium alert level

Only travel with your household or alone. You are at a higher risk of infection if you car share.

Thank you for playing your part to protect yourself, family, friends and community

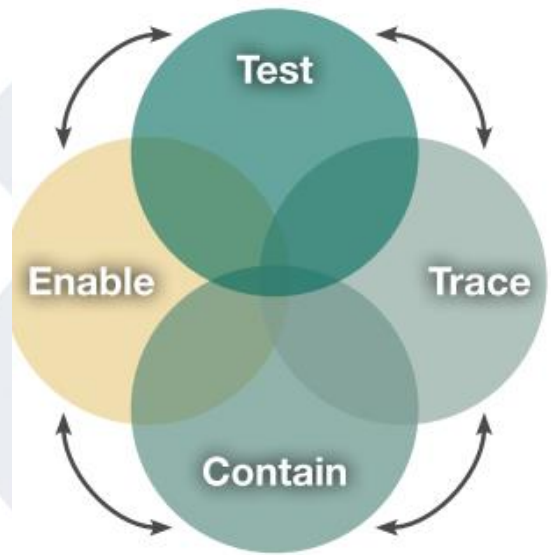
www.northyorks.gov.uk/coronavirus

WE'RE GOOD TO GO

In Partnership with the Tourist Operators of Great Britain & Northern Ireland

North Yorkshire County Council

North Yorkshire COVID-19 Outbreak Control Plan



Excellent Partnership we have achieved



23 organisations

1,132 COVID-19 Self Isolation Grants totalling **£108,775**

22,083 phone check-ins made

approximately **82,000** contacts

4,724 shopping deliveries made

31,876 meals delivered

4,402 transport requests fulfilled

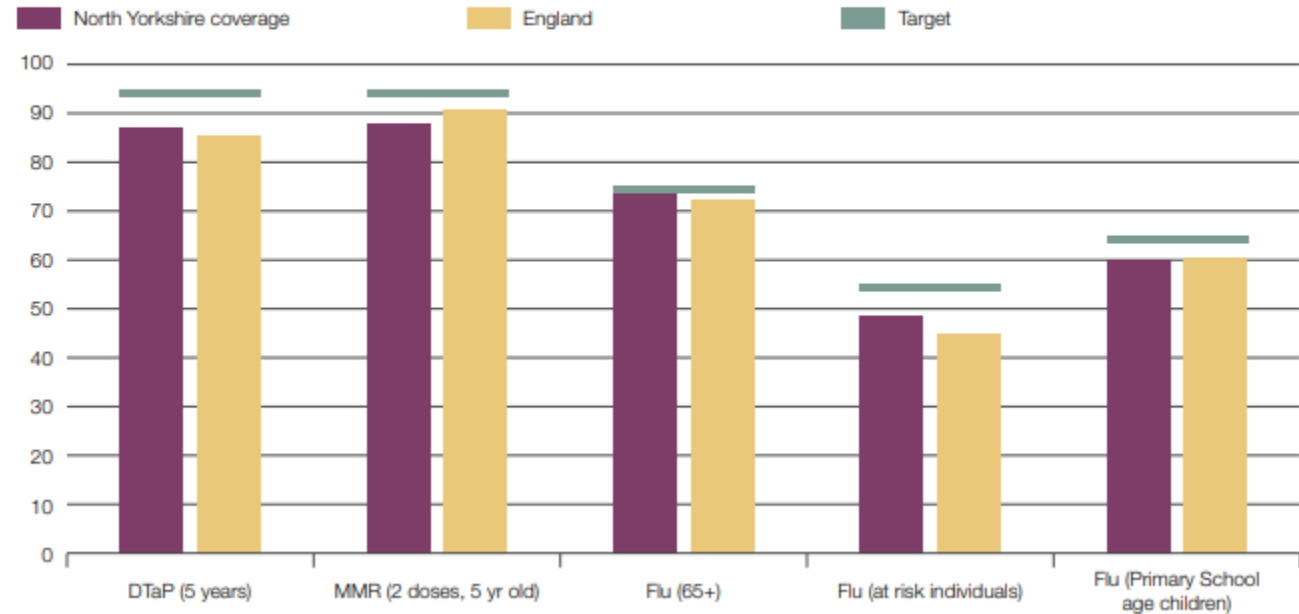
over **95,000** volunteer hours

32,559 befriending calls

17,214 prescriptions delivered

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Vaccination coverage – Coverage for routine vaccines. The North Yorkshire Coverage is shown by purple columns, coverage across England is shown by orange columns, and the target values are shown by green bars.



North Yorkshire
Local Resilience
Forum



Protecting and Improving the health and wellbeing

Delivering contraception in conjunction with maternity services during the pandemic

68% quit rate, well above the national average of **51%**

Living well team have connected people with a wide range of support, both low level and more complex, Housing, accommodation issues; Digital support, Finances, Emotional support, Support to carers, Low-level welfare checks.

The **fourth** annual report of the Healthy Weight, Healthy Lives Strategy

North Yorkshire Warm Homes Fund (**£2.5m**).

54% of North Yorkshire schools have registered with the Healthy Schools Award.

647 individuals had engaged NY Horizons, up from 2356 in 2020

National Pilots for **PHM** in Scarborough, Selby and Whitby PCN's

Over a five year period, NY is **the best** in Yorkshire and Humber for NHSHC and not just addressing the worried well other areas are using us at good practice.

£1m from National Institution of Health Research to understand research capacity for Adult Social care

Funding to pilot outreach weight management programme

0-19 Health Visiting and School Nursing Services delivered remotely and recommissioned



Public Health Priorities 2021-2025

Vision

“Everyone in North Yorkshire has an equal opportunity to have the best possible start to a long, healthy and independent life, where all residents fulfil their ambitions and aspirations and the gap in life expectancy across the county will be reduced”

Priorities 2020-2025

1.

Reduce health inequalities, through healthy place shaping and targeted work with vulnerable groups/communities

2.

Ensure measures are in to protect the populations health

3.

Improve the mental health of our population

4.

Ensure babies and children and young people have a good start in life

5.

Ensure the working age population have opportunities to live well

6.

Ensure older people are able to age well

7.

Work with our NHS partners to maximise our joint effectiveness and impact on health outcomes

8.

Develop a centre for public health excellence including in research, training and behavioural science

Discussion

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Our work – past & present

Philly Green
Chief Executive Officer

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Who we are

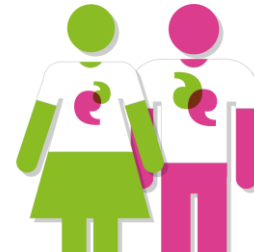
- Healthwatch North Yorkshire is the local health and social care **champion** for all people across the county.
- Established under the Health & Social Care Act 2012
- Independent charity (CIO)
- Commissioned by NYCC

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What we do

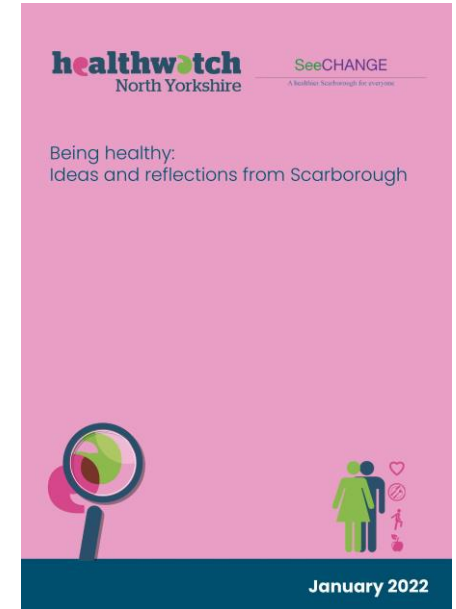
- ▶ We **listen** to what people like about services and what could be improved (**information gathering**).
- ▶ We share their views with those with the power to make **change** happen (**influencing**).
- ▶ We help people find the information they need about **services** in their area (**informing**).



Our priority areas of work

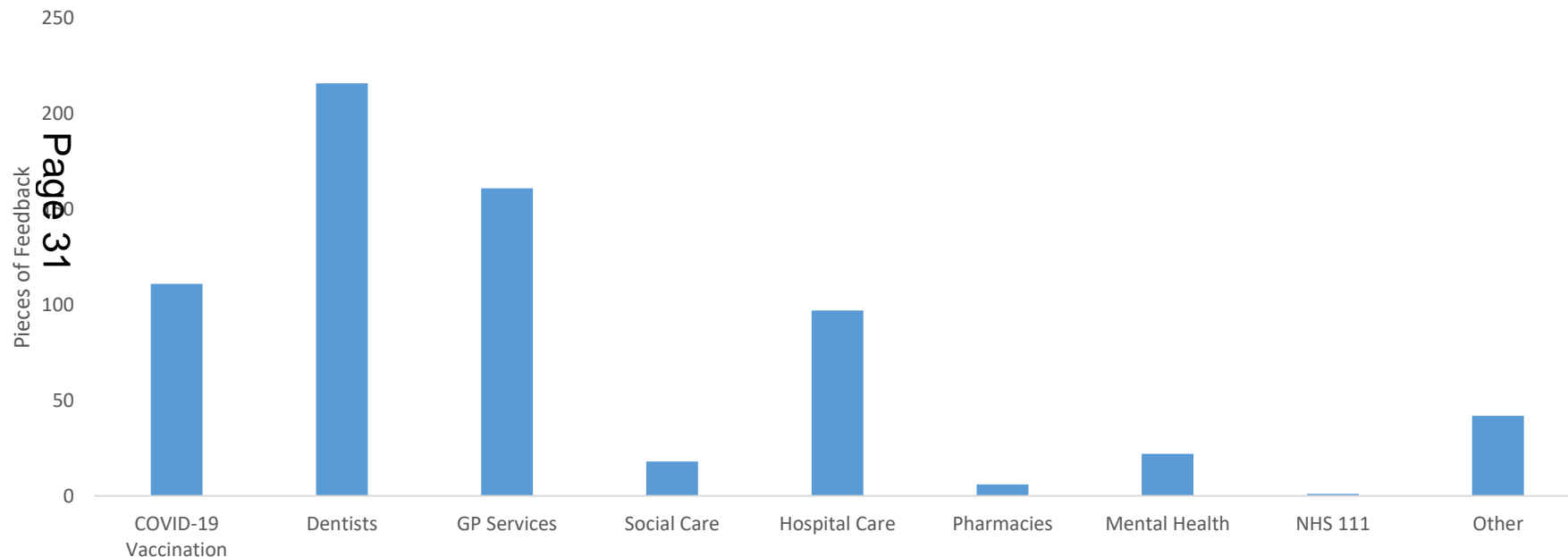
- Improve services & quality of care - care home sector
- Improve access & provision to NHS dentistry
- Reduce the gap around health inequalities (focus on Scarborough & Selby)
- Support improvements to young peoples health care
- Influence health & social care – COVID-19 recovery

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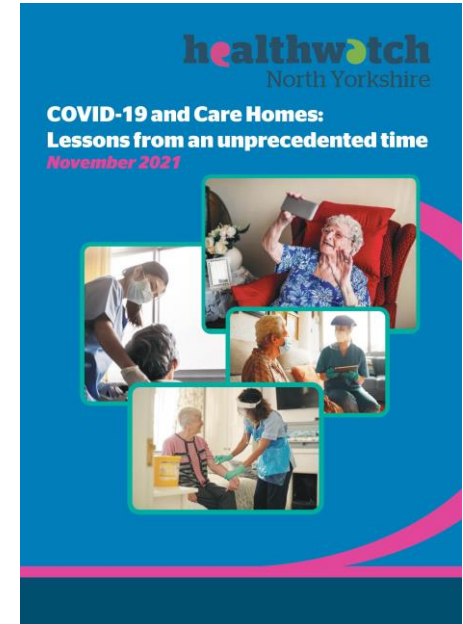
Public feedback

April 2021 – Feb 2022



Current activities & work

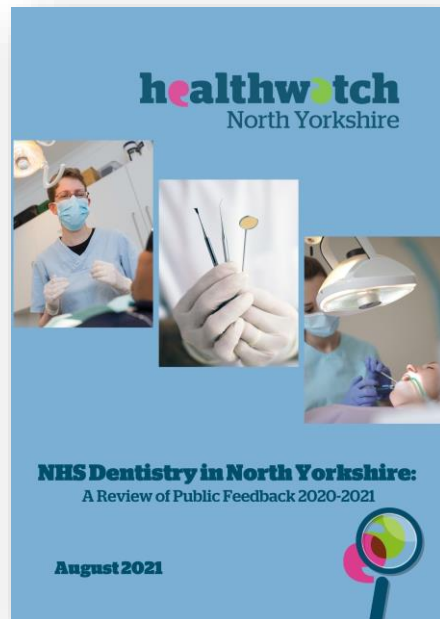
- Registered manager project - social care sector
- People's experiences of dentistry
- Accessible information provision
- Primary care services + NHS app
- Young people's mental health
- Health & care experiences in Selby & Craven



Case study of our work - dentistry

- Access to NHS dentistry major concern
- Heard from over 200 people in the last year
- COVID-19 has exacerbated an already fragile service
- System has pushed people to go private & pay huge costs
- Public not seeking treatment as no places
- Children's oral health suffering as no access to places

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Our impact - dentistry

- Increased media profile across NY – press & radio
- Part of the procurement process for new NHS services
- Establishment of a dental working group including Healthwatch by West Yorkshire ICS
- Local Healthwatch across England influence £50 million extra funding from NHSE to support NHS dentistry
- Our report supports work of NYCC Health Scrutiny Board
- New Humber & Yorkshire NHSE dental network established to include Healthwatch



Thank you – any questions



OFFICIAL

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18th March 2022

North Yorkshire Better Care Fund (NY BCF) 2021/22 Summary Narrative

Report of the Director of Public Health

1. Executive Summary

The North Yorkshire Better Care Fund constitutes a major programme of joint investment between North Yorkshire County Council and three partner Clinical Commissioning Groups (North Yorkshire CCG, Bradford District and Craven CCG and Vale of York CCG). Investment covers a broad range of providers, including both the statutory and voluntary/charitable sectors. The purpose of this paper is to outline the overall scope in 2021/22, highlighting the main areas of development and transformation.

The plan and narrative contains 59 projects, with total funding of £75.5m across each of the Districts, to support a wide range of initiatives and this has been sent to Members for information and has been approved by the Chair and Vice Chair on behalf of the Health and Wellbeing Board.

Looking ahead, work on the Plan for 2022/2023 has commenced and this will be brought to the Board for sign off by January 2023.

2. Development priorities for 2021-22:

The BCF Plan includes a range of developments and improvements associated with different funding streams as follows:

- Discharge to assess improvements based on the national policy, particularly length of stay and discharge to usual place of residence
- Strengthening VSCE as a system partner through Community First Yorkshire
- Retendering key services provided by the VSCE sector
- Care market
- Frailty Service Development
- Crisis response service development to reduce avoidable admissions
- Telemedicine support to Care Homes through Immedicare
- Improving response times within the community equipment services
- Integrating York urgent care practitioner scheme with primary care
- Prevention and addressing inequalities
- Mental health and dementia

3. Previous BCF objectives, plans and progress (based on 2019/20 planning)

The previous development plan for Integrated Care across North Yorkshire inclined towards the delivery of Integrated Service Models wrapped around newly formed Primary Care Networks to support people to access care in the right place at the right time.

To coordinate interventions that support people identified with complex care needs, a multidisciplinary team (MDT) approach is considered best practice to ensure timely, holistic individualised care and to agree a plan of action based on intended outcomes for the patient. North Yorkshire Clinical Commissioning Group have actively worked with provider partners to encourage the use of this approach, producing a guide suggesting how an MDT meeting could be organised. Through the HRW frailty pathway meetings, identified patients are discussed at Multi-Agency Meetings led by GPs monthly. HARA and HTFT are realigning their current approach to MDT meetings to identify the population cohort which will benefit most from proactive care in the community.

4. Engagement with partners

The Better Care Fund underpins much of the North Yorkshire approach to collaborative commissioning and integration. The BCF plan is a product of both specific engagement work to produce the plan itself, particularly to confirm priorities, financial contributions and metrics, supported by a broader programme of engagement on the core responsibilities.

The wider content of the plan is drawn from organisational plans and joint programmes of work from the partner organisations for community development and integration, supported by a broader programme of engagement and partnership working, in particular with the VCSE. While this work is not limited to the content of the BCF, it is consistent with and helps to inform the BCF aims and objectives.

5. Approaches to joint / collaborative commissioning

North Yorkshire County Council and its CCG partners have established a number of Groups and Boards to facilitate joint and collaborative commissioning. While these are not exclusively designed to manage the BCF, they do provide effective forums to discuss and develop commissioning plans related to services included within the BCF. In addition, BCF will be a key enabler to managing system pressures this winter and these forums will ensure that BCF services are responsive to emerging pressures and solutions, including responding to further guidance from NHS England.

6. Health and Care Management Group

As part of the transition towards moving towards an integrated care system while maintaining and building on existing arrangements, a new health and care management group across NHS and local government has been established in North Yorkshire, which will provide a strategic oversight to joint and collaborative commissioning. This consists of Director level membership between North Yorkshire CCG and North Yorkshire County Council, and attendance by key officers as appropriate. The content of the BCF and the associated plan are reviewed through this newly formed Group. Housing is not routinely represented on this group, but there are opportunities through regular meetings between North Yorkshire CCG, North Yorkshire County Council and Borough colleagues for housing input to be sought.

7. Equality and health inequalities

North Yorkshire has an increasingly aging population with rural deprivation, and the majority of BCF investment is therefore aligned with the challenges associated with this. A system workshop was held to review identify the priorities across North Yorkshire for Population Health, Prevention and Inequalities. The following headline priorities were identified:

- Supporting with a 3-4 D model around person, place and age group
- Community partnerships – building grass roots engagement at local places
- Addressing the rural geography of North Yorkshire
- Addressing the wider determinants of health – for example: school readiness, deprivation, housing, homelessness, carers, veterans, hypertension, alcohol use

- Tackling dementia / complex dementia – to reduce inequality of outcomes
- Young peoples' mental ill health
- Proactive management of frailty (including in younger people) and long-term conditions, such as diabetes, CVD, stroke, and respiratory disease
- Reaching the BAME population – including tackling exclusion and support in relation to diet, nutrition, drugs, alcohol, taking a more preventative approach

8. Supporting Discharge

Funding for health and social care community staff who support discharge is included within the overall BCF. However, during 2021/22, this is augmented by a National Discharge Fund, which meets the cost of a person's new or enhanced health and care needs post discharge for up to 4 weeks, and funds enhanced care services. Significantly, this fund also supports people who self-fund their own care, where previously they would have contributed to the cost of their own care post discharge.

In response to the National Discharge Policy, North Yorkshire and York (NYY) partners have agreed a revised operating model focussing on the principles of a 'Home First' approach which centred around discharge Command Centres for each of the main acute sites of, York, Harrogate, Airedale, South Tees, and Scarborough. Due to the complexities of having multiple providers across NYY, the 'Home First' approach has been developed across NYY via a series of providers' conversations and self-assessment exercises, informed by the Integration and BCF.

9. Metrics and performance

North Yorkshire County Council in partnership with CCGs tracks discharge performance through a detailed weekly report. This tracks progress against delivering the national target to discharge 12% or less patients within 21 days. Due to the significant pressures within the current system and capacity gaps within the broader care market and community services, current performance against this target for this age group is around 16% (based on NHS England data-packs provided to North East & Yorkshire Region CCGs). This data-set will have slightly different filters to the BCF national data-set.

The intention is to improve performance during autumn / winter 2021/22 by addressing workforce and other system pressures. For example, there is ongoing work to: integrate the health and social care workforce to increase resilience and reduce duplication; combining OT teams to pool work and resources and develop combined OT apprenticeship roles; development of generic health and care support worker roles for community settings; and increased placement capacity for nurse associate and nurse apprenticeship roles in Residential Care.

10. Development and improvement plans for specific BCF-funded services

The BCF includes an extensive and broad range of services. While the delivery of some schemes and services will continue as in previous years, many areas of the BCF are subject to development and review during 2021/22. This will inform and contribute to plans in development for 2022/23.

- Strengthening VSCE as a system partner through Community First Yorkshire
- Retendering key services provided by the VSCE sector
- Care market.
- Frailty service development
- Crisis response service development
- Telemedicine support to Care Homes through Immedicare
- Improving response times within the community equipment services
- Integrating York urgent care practitioner scheme with primary care

- Prevention and addressing inequalities

11. Disabled Facilities Grant (DFG) and wider services

North Yorkshire County Council is a tier one council and as such, DFG support is passed through directly to the District Councils.

District Councils continue to be engaged in the development and implementation of the Plan through representation on the Health and Wellbeing Board (Chief Officer and Council Leader representation) and on Locality Transformation boards. Work has continued with District Council housing officers to develop a more strategic and joined-up approach to improving outcomes across health, social care and housing through the DFG and BCF programme. Use of DFG generally is used to support persons to stay safe, well and maintain independence in their own home. North Yorkshire County Council and Borough Council colleagues work collaboratively, and on undertaking a needs assessment, North Yorkshire County Council may refer to a Borough Home Improvement Agency (HIA). The HIA will assess the work, obtain quotations, approve grant applications in line with Section 19 of the Housing Grants, Construction and Regeneration Act 1996, which excludes extra care settings, and oversees the adaptation process to meet the person's needs.

12. Conclusions

The range of work described in the BCF plan and the associated integrated approaches to commissioning and service delivery demonstrate the commitment of all local partner organisations to the successful utilisation of the BCF.

The BCF plan and supporting financial template serves as a refresh and consolidation of a huge programme of work, which has been both interrupted and accelerated through the Covid pandemic response. It provides an effective platform to deliver improvements in 2021/22 and to prepare for further evolution of the BCF in 2022/23.

Report Author:

Fred Chambers, Central Services Finance

Background papers relied upon in the preparation of this report:

The report is a summary of the BCF submission and based upon the financial template and narrative.



18th March 2022

North Yorkshire Pharmaceutical Needs Assessment – Briefing Paper

Report of the Director of Public Health

1. Introduction

The purpose of the Pharmaceutical Needs Assessment (PNA) is to consider the current and future need for pharmaceutical services in a geographical area, and to describe to what extent current pharmaceutical services meet that need. Used by NHS England to assess whether there is a need to make changes to or open/close pharmacies, the current PNA full update is due on 1st October 2022.

2 Background

- Public Health Leadership Team meeting 9th June 2021 - decision made to commission all of the PNA work to an external organisation.
- Public Health Leadership Team meeting 8th September 2021 - agreement given for a joined up commissioning approach with City of York (CYC), with CYC taking the lead on procurement.
- Budget set at an estimated £50,000 for North Yorkshire. A separate PNA document to be produced for each footprint.

3. Update on commissioning

- Discussions with legal and finance teams, working up of detailed specification/contract took place October to December 2021.
- Opportunity advertised in January/February 2022 through YORtender portal with opportunity also flagged with all Commissioning Support Units (CSUs).
- One tender received from the North of England Commissioning Support (NECS). It scored very highly and more than met the criteria set out – also well under estimated budget at £33,718.
- CYC are formalising working arrangements with NECS week beginning 7th March 2022 and work is due to commence from 14th March 2022.

4. Update on community engagement

- Three separate surveys (residents, pharmacies and stakeholder/providers) developed alongside commissioning process.

- Surveys signed off by PNA Steering Group in January went live mid February (closing 28th March 2022).
- Communications developed to encourage participation in the survey - includes use of press, radio, social media, engagement of a wide range of networks such as the Older People's Forum and North Yorkshire Health Action Group.
- Direct contact made with all pharmacies, GPs and Dentists, along with Parish and Town Councils and library services.
- Surveys are available online - easy read and paper copies are available on request.
- Posters and leaflets promoting the surveys have been developed, printed and sent out to Pharmacies, GPs and Dentists for displaying in waiting rooms/reception areas.

Links to surveys:-

<https://www.northyorks.gov.uk/pharmaceutical-needs-assessment-pharmacies-and-stakeholders>

<https://www.northyorks.gov.uk/pharmaceutical-needs-assessment-residents>

Report Authors:

Clare Beard (Consultant), Claire Lawrence (Health Improvement Officer)



ROLLING WORK PROGRAMME 2022/2023

NOTE: Items subject to change. All meetings to be held remotely via Microsoft Teams, unless stated otherwise

FRIDAY 18th MARCH 2022			
ITEM	LEAD	DEADLINE FOR REPORT/ PRESENTATION	COMMENTS
A look back over the last year from three statutory perspectives	Louise Wallace Ashley Green	Wednesday 9 th March 2022	Presentations
Local Government Reorganisation - Update	Richard Webb	Wednesday 9 th March 2022	Presentation
Integrated Care Partnerships/ Integrated Care System Developments	Amanda Bloor	Wednesday 9 th March 2022	Presentation
North Yorkshire Better Care Fund 2021/2022 - update	Louise Wallace	Wednesday 9 th March 2022	Report
North Yorkshire Pharmaceutical Needs Assessment 2022-2024 – Briefing Paper	Louise Wallace	Wednesday 9 th March 2022	Report
North Yorkshire Joint Strategic Needs Assessment and Joint Health and Wellbeing Strategy – proposed approach	Louise Wallace	Wednesday 9 th March 2022	Report

ROLLING WORK PROGRAMME 2022/2023

WEDNESDAY 25TH MAY 2022			
ITEM	LEAD	REPORT DEADLINE	COMMENTS
Membership	Patrick Duffy	Monday 16 th May 2022	Report
North Yorkshire Place Board - feedback	Amanda Bloor	N/A Likely to be verbal update on most occasions	Standing Item
Integration White Paper	Richard Webb and Wendy Balmain	Monday 16 th May 2022	Presentation
National Drugs Strategy	Richard Webb	Monday 16 th May 2022	Possible Workshop – linking in with Police, Fire and Crime Commissioner’s Office and the Police/Community Safety Board
Coastal Initiatives	Amanda Bloor and Louise Wallace	Monday 16 th May 2022	Possible Workshop

ROLLING WORK PROGRAMME 2022/2023

FRIDAY 29TH JULY 2022			
ITEM	LEAD	REPORT DEADLINE	COMMENTS
North Yorkshire Place Board - feedback	Amanda Bloor	N/A Likely to be verbal update on most occasions	Standing Item
SEND Local Area Strategy	Jane Le Sage	Wednesday 20 th July 2022	Report/Workshop
Review of Health and Wellbeing Board	Louise Wallace and Patrick Duffy	Wednesday 20 th July 2022	Report To include Terms of Reference and modus operandi of the Board in the light of Integrated Care Systems; LGR and Devolution
North Yorkshire Joint Health and Wellbeing Strategy - formulation and priorities	Louise Wallace	Wednesday 20 th July 2022	Workshop. NOTE: This will link to the three North Yorkshire Place Priorities
Terms of Reference	Patrick Duffy	Wednesday 20 th July 2022	To reflect changes such as the introduction of Integrated Care Systems
Loneliness Strategy	Jane Colthup	Wednesday 20 th July 2022	Potential Workshop, picking up developments since the Voluntary and Community Sector launched this Strategy in 2020

ROLLING WORK PROGRAMME 2022/2023

WEDNESDAY 14TH SEPTEMBER 2022			
ITEM	LEAD	REPORT DEADLINE	COMMENTS
North Yorkshire Place Board - feedback	Amanda Bloor	N/A Likely to be verbal update on most occasions	Standing Item
North Yorkshire Pharmaceutical Needs Assessment 2022-2024	Louise Wallace	Monday 5 th September 2022	To sign off this document
Care Quality Commission – role and links with Health Systems	-	Monday 5 th September 2022	Presentation

MONDAY 28TH NOVEMBER 2022			
ITEM	LEAD	REPORT DEADLINE	COMMENTS
North Yorkshire Place Board - feedback	Amanda Bloor	N/A Likely to be verbal update on most occasions	Standing Item
Director of Public Health Annual Report	Louise Wallace	Thursday 17 th November 2022	Report
North Yorkshire Safeguarding Adults Board – Annual Report	Dr. Sue Proctor	Thursday 17 th November 2022	Report
Update on North Yorkshire Joint Strategic Needs Assessment	Louise Wallace	Thursday 17 th November 2022	Report
Update on North Yorkshire Joint Health and Wellbeing Strategy	Louise Wallace	Thursday 17 th November 2022	Report

ROLLING WORK PROGRAMME 2022/2023

WEDNESDAY 18TH JANUARY 2023			
ITEM	LEAD	REPORT DEADLINE	COMMENTS
North Yorkshire Place Board - feedback	Amanda Bloor	N/A Likely to be verbal update on most occasions	Standing Item
North Yorkshire Better Care Fund 2022/2023	Louise Wallace	Monday 9 th January 2023	Report/Presentation Sign off the BCF

FRIDAY 17TH MARCH 2023			
ITEM	LEAD	REPORT DEADLINE	COMMENTS
North Yorkshire Place Board - feedback	Amanda Bloor	N/A Likely to be verbal update on most occasions	Standing Item
Update on North Yorkshire Joint Strategic Needs Assessment	Louise Wallace	Wednesday 8 th March 2023	Sign off updated Countywide Profile
Update on North Yorkshire Joint Health and Wellbeing Strategy	Louise Wallace	Wednesday 8 th March 2023	Sign off refreshed/new Strategy to go live at inception of new North Yorkshire Authority on 1 st April 2023

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