



Agenda

Meeting: North Yorkshire Health and Wellbeing Board

To: Councillors Michael Harrison (Chair), Simon Myers, Janet Sanderson, Amanda Bloor (Vice-Chair), Wendy Balmain, Zoe Campbell, Jonathan Coulter, Stuart Carlton, Ashley Green, Nic Harne, Mike Padgham, Jillian Quinn, Sally Tyrer, Louise Wallace and Richard Webb.

Date: Wednesday, 27 November 2024

Time: 10.30 am

Venue: Microsoft Teams

Members of the public are entitled to attend this meeting as observers for all those items taken in open session. Please contact the Democratic Services Officer whose details are at the foot of the first page of the Agenda if you would like to find out more.

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Business

1. **Welcome by the Chair**
2. **Apologies for Absence**
3. **Minutes of the Meeting held on 18 September 2024** (Pages 3 - 8)
4. **Declarations of Interest**
5. **Public Participation**
Members of the public may ask questions or make statements at this meeting if they have given notice to Christian Brennan of Democratic Services and supplied the text by midday three working days before the day of the meeting. Each speaker should limit

themselves to 3 minutes on any item. Members of the public who have given notice will be invited to speak:-

- at this point in the meeting if their questions/statements relate to matters which are not otherwise on the Agenda (subject to an overall time limit of 30 minutes);
- when the relevant Agenda item is being considered if they wish to speak on a matter which is on the Agenda for this meeting.

If you are exercising your right to speak at this meeting, but do not wish to be recorded, please inform the Chair who will instruct anyone who may be taking a recording to cease while you speak.

- 6. West Yorkshire Place Update**
- 7. Humber and North Yorkshire Place Update**
- 8. Director of Public Health Annual Report (Pages 9 - 86)**
- 9. North Yorkshire Safeguarding Children's Partnership (NYSCP) Annual Report 2023/2024**
- 10. North Yorkshire Safeguarding Adults Board Annual Report 2023/2024**
- 11. Review of Health and Wellbeing Board - Terms of Reference**
- 12. Health and Wellbeing Board ToR (Pages 87 - 92)**
- 13. Rolling Work Programme (Pages 93 - 98)**
- 14. Any Other Items**
Any other items which the Chair agrees should be considered as a matter of urgency because of special circumstances
- 15. Date of Next Meeting - 13 January, 2025**

For enquiries relating to this agenda please contact Christian Brennan, Assistant Democratic Services Officer

Email: christian.brennan@northyorks.gov.uk

Tel: 01723 232332

Website: www.northyorks.gov.uk

Barry Khan
Assistant Chief Executive
(Legal and Democratic Services)

County Hall
Northallerton

Tuesday, 19 November 2024

North Yorkshire County Council

North Yorkshire Health and Wellbeing Board

Minutes of the remote meeting held on Wednesday, 18th September, 2024 commencing at 12.30 pm.

Board Members	Constituent Organisation
Councillor Michael Harrison (Chair)	Executive Member for Health and Adult Services
Councillor Simon Myers	Executive Member, Culture, Arts and Housing
Wendy Balmain	Place Director, North Yorkshire, NHS Humber and North Yorkshire Integrated Care Partnership
Ashley Green	Chief Executive Officer, Healthwatch, North Yorkshire
Nic Harne	Director of Community Development, NYC
Louise Wallace	Director of Public Health, NYC
Richard Webb	Corporate Director of Health and Adult Services, North Yorkshire Council
Brian Cranna	Tees Esk and Wear Valleys NHS Foundation Trust
Samual Peate	Chief Operating Officer, South Tees Hospitals NHS Foundation Trust

In attendance:-

Christian Brennan, Assistant Democratic Services Officer.

Sohail Abbas, Deputy Medical Director for our NHS West Yorkshire Integrated Care Board

Copies of all documents considered are in the Minute Book

1 Welcome by the Chair

The Chair welcomed everybody to the meeting.

2 Apologies for Absence

Apologies were received from:-

- Jonathan Dyson
- Mike Padgham
- Janet Sanderson
- Stacey Hunter, substituted by Sam Peate
- Sally Tyrer
- Amanda Bloor
- Zoe Campbell, substituted by Brian Cranna

3 Declarations of Interest

There were no declarations of interest.

4 Minutes of the Meeting Held on 19th July 2024

That the Minutes of the meeting held on be approved 19th July, 2024 be approved.

5 Public Participation

One public question had been received from Mr. Roger Tuckett.

Mr. Roger Tuckett

Mr Tuckett made the following statement:-

Since March's HWB, I have met with Councillor Harrison, and put forward some specific suggestions ("five asks"). I am now in regular contact with Natalie Smith, and have been asked to joined the drafting Group. Her report to this HWB Meeting is to be welcomed. Suggestions of a 2025 JNSA for Autism appear to be being discussed. Progress has been made on Oliver McGowan training of members, leaders and executives, specifically. The Council appears in listening and cooperation mode.

In parallel, growing cooperation exists with the ICB MHLDA Collaborative and its new Autism Strategy Lead, albeit that with associated organisational adjustments, some transitional uncertainty remains.

Can the ICB give any definite information as to whether a new consultation either for NY, NY&Y or the ICB a whole (through the Collaborative) is imminent on the assessment pathway, and specifically whether it will include the important matter of pre- and post-diagnostic support? I appreciate matters may still be fluid, and a written reply quite soon would suffice.

Could I encourage all HWB Members give some attention in the debate today and to follow:

The importance of ever-closer cooperation between Health Care, Social Care, the VCSOs including The Retreat and Autism/ND Communities; and in the case of the ICB, between Place activities and MHLDA Collaborative activities?

That NICE and NHSE Guidelines are clear and precise on both the assessment pathway and support, which central Government is expecting to be applied, and do not require to be re-written and watered down even if this involves difficult and challenging budgeting issues at ICB Main Board level.

Recognition that further Autism and ND community engagement is unlikely to be fruitful in an atmosphere of trust unless with clear indication from the ICB Board on the availability and timetable for funding of new and materially improved services.

The value of close cooperation with the City of York, where considerable greater progress has been made on community engagement and support, inclusion of ADHD matters alongside Autism and the detailed understanding of unmet need through their own JSNA currently under development by their Public Health team.

The Chair thanked Mr Tuckett for his submission.

Wendy Balmain responded that there was no planned consultation, rather, there had been a series of engagement events regarding online assessment pathway which spoke to

people with lived experience. The implementation of the pathway had been necessary due to growing waiting lists, and with the feedback, had become a more needs led platform.

6 West Yorkshire Place Update

Considered –

An update from Richard Webb, as summarised below:-

- There was a significant change in personnel as Nancy O'Neill was due to retire from her role as Bradford District and Craven Health and Care Partnership. The NHS West Yorkshire Integrated Care Board had selected Matt Sandford as the new Director of Partnership and Place, and Helen Farmer as Director of System Transformation.
- The Better Care Fund had been signed for the Craven area.
- There is ongoing major work regarding the financial status of Bradford City Council and the NHS in Bradford
- Craven NHS colleagues are now part of a joint commissioning group between the Council and the NHS
- Links with the Lancashire and South Cumbria ICB had been formalised. Further, populations traditionally split along the West Yorkshire ICB and West Yorkshire ICB border were now receiving health provision from their respective ICB.

Louise Wallace added that the Bradford and Craven Place Board received the HWB strategy at their last meeting.

In response to a question from the Chair regarding Airedale Hospital, Richard responded that the planning was ongoing but that the overall position of the scheme was unclear.

Ashley Green asked about the nature of North Yorkshire's connection with the North East and North Cumbria ICB and the status of the relationship. Richard said there was good engagement with organisations based in the NENC ICB that served North Yorkshire, particularly South Tees and TEWV.. Wendy advised there were ICB to ICB conversations at the chief executive level, in addition to good engagement on the local level that maintained access to services, such as Friarage and the Catterick developments.

7 Humber and North Yorkshire Place Update

Considered –

An update from Wendy Balmain, as summarised below:-

Strategic Overview

- The recently published Darzi report detailed what would be the 10 year strategy for the NHS, which included three big shifts.

1. Hospital to community care
2. Analogue to digital

3. Treating sickness to preventing sickness

- That prior to the report, the ICB was already underway with partners to look at how services were delivered for the future, work partnerships were affordable, quality was improved, and long-term mortality rates were improved for the population, in particular those who have a low quality of life. The report would however support how the ICB moved its plans forward.
- That the new ICB strategy included four health priorities, which would be the focus of the ICB.
 1. Reducing harm from cancer
 2. Cutting cardiovascular disease
 3. Living with frailty
 4. Aiding mental health and resilience
- The ICB strategy had a 'golden priority' around how we improve life chances of children and young people.
- As part of the strategy, the ICB had worked with leaders across the system to look at the design for the future, or 'blueprint'. It would become public in the autumn for consultation. The Blueprint would look at three key areas.
 1. The integrated out of hospital model across primary, community, and social care.
 2. Mental Health
 3. Hospitals
- The ICB was looking at a 'delegation to places' model, which would put places at the centre for the delivery of the integrated model around primary, community, and social care. The Place Board, acting as an executive forum, was looking at what this meant for North Yorkshire, what they wanted delegation to look like, and whether it would deliver something different from what currently exists.

Practical Overview

- The ICB was working through the model of community health and what it should look like for the future, its core offer, and its ability to deliver equitable access to its services. She suggested there was an opportunity to cooperate across York and North Yorkshire and its providers of community services.
- There were two primary care network pilots in North Yorkshire which would provide insight into what primary care would look like in the future.
- There was a Health and Inequalities programme in its third year which was testing ways of working with local organisations. It was amongst other smaller schemes of which the findings could be shared at a future meeting.

Louise Wallace added that the schemes had been discussed at the North Yorkshire Place Board, of which many would complement the Health and Wellbeing Strategy. Further, that as Chair of the Population Health Prevention Executive Committee for the ICB, they were keen to find a balance between initiatives which were done as one-offs on a local authority level, and initiatives at the local level could be done on a basis that reflected local needs.

The Chair observed that in the short-term much the operational side was spent enabling people to leave hospitals, freeing beds, or block-buying beds in care homes; while the long-term strategy would redesign services. Wendy added that strategically, they were seeking ways of delivering care closer to home rather than using more nursing and residential care. They would redesign services so that pressure on services were lifted and coordinated differently.

In regard to the Darzi report Ashley commented that it was more than the way people received care, but importantly the issues on why they need it. Social determinants around education, housing, green spaces all contributed to health outcomes, of which the prevention agenda should address.

8 Autism Strategy - Update

Considered –

An update from Louise Wallace.

The Update advised that the team had been engaged in conversations which had helped develop an initial action plan. The data collected would be developed over the next few months but would not impede creating the strategy now. As it was a partnership strategy, Louise asked that the members of the board consider the strategy in their organisations, and feedback during future updates.

The Chair was encouraged to hear that the plan would prioritise its early phase and produce measurable results, rather than map out the full five years and fall behind.

Ashely Green welcomed the work, and said it was important to keep the autism community updated and involved as the strategy progressed.

Richard Webb commented that he was grateful for the engagement and the different views received which helped create the delivery plan. He said that it was important to acknowledge that there will be phased milestones for progressing actions. . On top of this, he suggested to look at other initiatives that were underway during the next five years such as national work with younger people with special educational needs and how we influence the government's policy approach. Further, that he was involved in a piece of work regarding 'work in general', which aimed to understand the changing needs and demographics of working age adults.

9 Rolling Work Programme

The Chair introduced this report and advised members that the Work Programme was open to their input and recommendations.

In response to the Chair's query regarding the status of the Joint Health and Wellbeing Strategy Delivery Plan, Officers confirmed that it was ready for the next meeting.

NOTED.

10 Any Other Items

There was no other business.

11 Date of Next Meeting - 27 November 2024

The meeting concluded at 1.15 pm.

Health and Wellbeing Board North Yorkshire



27th November 2024

Director of Public Health Annual Report 2023-24

Report of the Director of Public Health (Health and Adult Services)

1.0 Purpose of report

- 1.1 The purpose of this report is to introduce the Director of Public Health Annual Report 2023-24: 'Live, Age, Engage: healthy ageing in North Yorkshire'.
- 1.2 The Director of Public Health Annual Report is an independent report on the health of the local population. The Director of Public Health has a duty to write an annual report, whereas the local authority's duty is to publish it¹.

2.0 Issues

- 2.1 The Director of Public Health Annual Report for 2023-24 focuses on older people in North Yorkshire.
- 2.2 The report explores healthy ageing and what this looks like in North Yorkshire, responding to the projected increase in the older population and the opportunities and challenges that this brings.
- 2.3 Built around older people's voice, and with partner contributions and case studies, the report focuses on the four healthy ageing priorities for North Yorkshire:
 - Health & reducing inequalities
 - Housing
 - Financial security & employment
 - Making North Yorkshire an age-friendly place
- 2.4 Older people's creativity is also showcased through the inclusion of images from the recent, very successful, 'Healthy ageing' photography competition.
- 2.5 The report provides recommendations for each of the four priorities, and some overarching ones. It also gives an update on the recommendations from the DPHAR 2022-23, 'In Our Words: a Child's Life in North Yorkshire'.
- 2.6 The published report will be accompanied by an interactive dashboard so that people can review data for their area and further explore local trends.

3.0 Milestones

- 3.1 The report will be shared with Care and Independence Overview and Scrutiny Committee on 5th December and Scrutiny of Health Committee on 18th December 2024.

¹ Section 73B(5) & (6) of the National Health Services Act 2006, inserted by section 31 of the Health and Social Care Act 2012)

It will be published by the end of December 2024.

- 3.2 A communications plan is being drawn up to ensure that the report and its recommendations are widely shared, with a particular focus on system partners.

4.0 Financial implications

- 4.1 Whilst there are no specific financial implications in the report, it is intended to inform and influence service design and commissioning decisions for healthy ageing both within the council and more widely with system partners. The recommendations focus on enabling older adults to maintain independence and quality of life, and as such, provide many opportunities to reduce the costs associated with ageing.

5.0 Legal Implications

- 5.1 The local authority has a legal duty to publish the Director of Public Health Annual Report, as outlined in paragraph 2.1, 'Purpose of report'.

6.0 Equalities Implications

- 6.1 Age is a protected characteristic, and older people shared their experiences of discrimination based on their age; this includes being perceived as less competent, a burden on society, and being offered fewer opportunities in the workplace. Older people wanted everyone to know that they were valuable, not vulnerable.

7.0 Climate change implications

- 7.1 Whilst the report does not focus specifically on climate change, there are some relevant themes. Older people fed back in our engagement that they are concerned about climate change, and in particular would like to be able to use their cars less but are unable to do so due to the limitations of public transport. Housing was also highlighted, around support (financial and advice) to make their homes more energy efficient.

8.0 Recommendations

- 8.1 That the Health and Wellbeing Board notes the content of the Director of Public Health Annual Report 2023-24, 'Live, Age, Engage: healthy ageing in North Yorkshire'.
- 8.2 That the Board considers the recommendations made within the report and how these relate to the work of the Board.

Louise Wallace
Director of Public Health

19 November 2024
County Hall, Northallerton

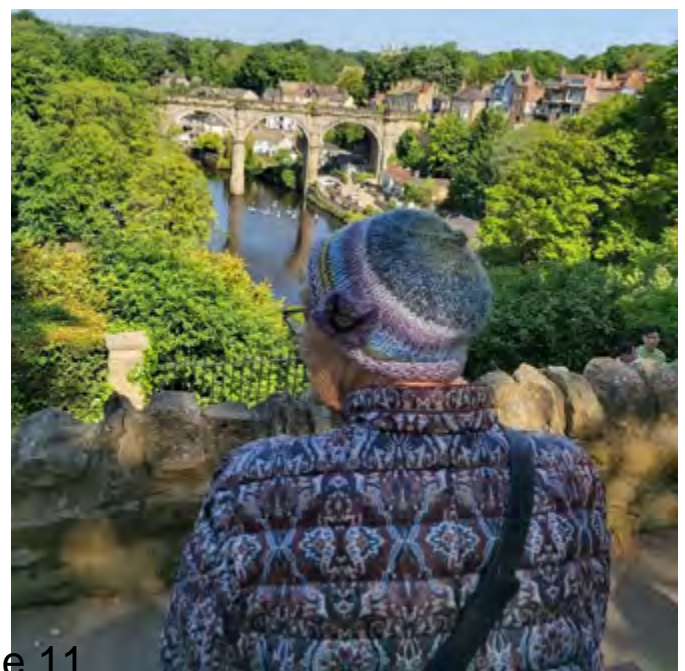
Document: Director of Public Health Annual Report 2023-24, 'Live, Age, Engage: healthy ageing in North Yorkshire'

(Please note: the attached version of the Director of Public Health Annual Report 2023-24 is an uncorrected proof, in the process of editing prior to publication.)

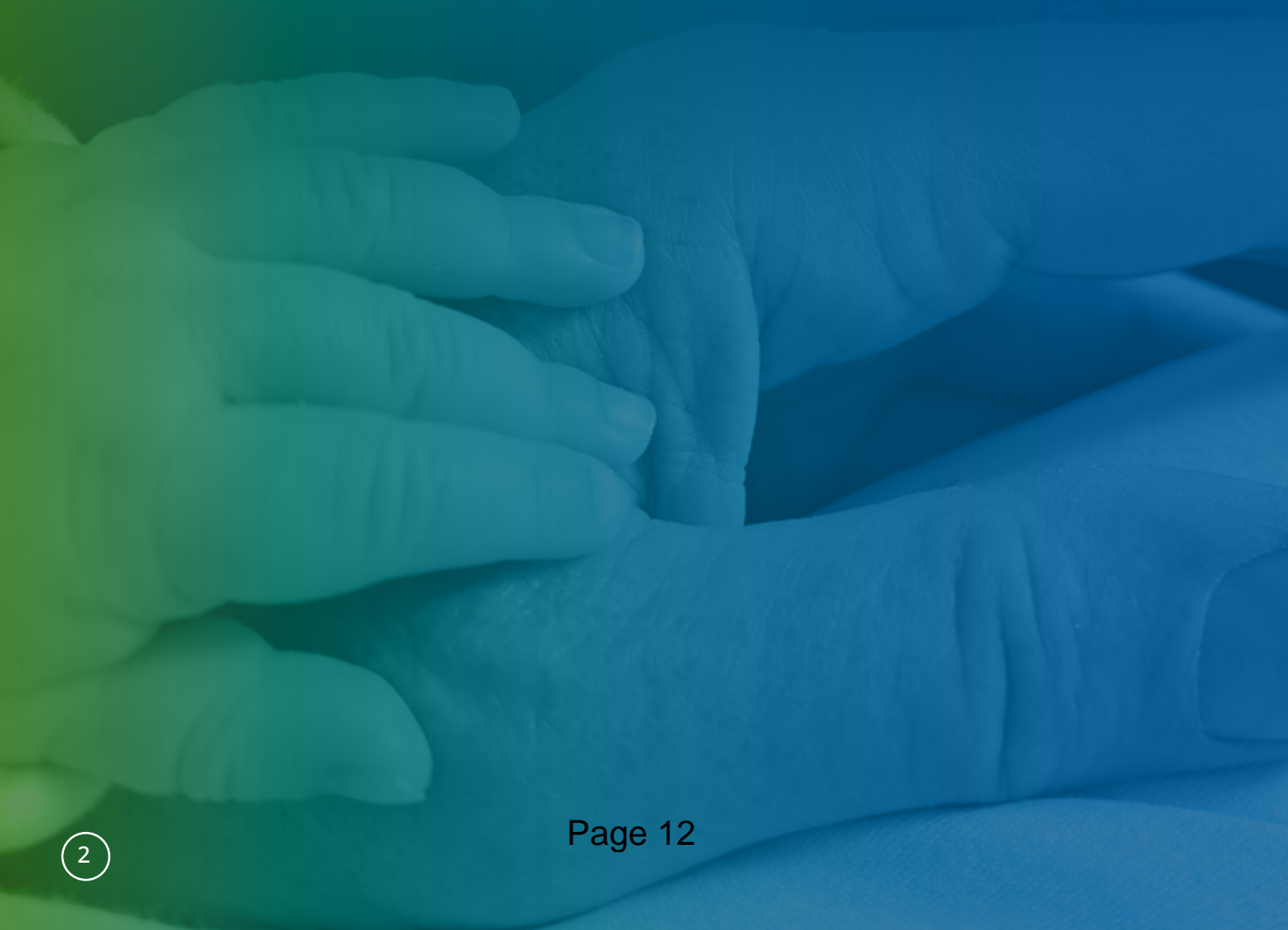


Live, Age and Engage: Healthy ageing in North Yorkshire

North Yorkshire Director of Public Health Annual Report 2023-24



We are born ageing...



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Foreword

Louise Wallace, Director of Public Health

Welcome and thank you for taking the time to read my fourth Director of Public Health Annual Report for North Yorkshire. This report covers the period from April 2023 to March 2024.

In my previous report, *In Our Words: a Child's Life in North Yorkshire*, I focused on the health of children and young people growing up in North Yorkshire. In this year's report I have chosen to focus on older age groups (although they may still be young at heart!), who make up a significant proportion of the North Yorkshire population.

We considered whether to include a definition of an older person for the purpose of this report. However, we know that people biologically age at different rates, and the feedback from older people is that they do not want to be categorised as old. Services such as Age UK are working with three generations of people, from 50 to 103.

We were delighted to welcome Professor Chris Whitty, Chief Medical Officer for England, to North Yorkshire in June last year to learn about local services and gather information for his **Chief Medical Officer's annual report 2023: health in an ageing society**.

He saw how local people were making a difference in their communities and heard about some of the challenges of living and delivering care in rural areas.

People talked to Professor Whitty about access to transport, the importance of workforce and volunteers, and the benefits of arts, culture and physical activity.

Professor Whitty highlighted in his report that North Yorkshire

is an area with a higher proportion of older people compared to other parts of England, so it seemed fitting to focus this year's report on healthy ageing and highlight some of the work that is happening in response to the projected increase in population as well as the challenges and opportunities.

The fact that people are living longer is an achievement to be celebrated. This report focuses on some of the issues that organisations need to consider to ensure we meet the needs of older people in the future, whilst also celebrating the contribution they make to our society.

“Probably the most frustrating thing is being in the '50+' box - we are just the same as the 30+ and 40+ but with a bit more experience; not yet ready for the scrap heap”



Foreword

Councillor Michael Harrison

As Executive Member for Public Health and Adult Social Care, and Chair of the North Yorkshire Health and Wellbeing Board, I would like to express my thanks to everyone involved in the production of this report. I particularly enjoyed seeing the photos provided by people sharing examples of celebrating positive ageing in North Yorkshire.

We were delighted to be included in Professor Whitty's annual report last year, and I welcome the opportunity to shine a light on the key issues for older people in North Yorkshire through this report.

Healthy ageing is an important subject for the council, and has been identified as one of the top 3 cross-council public health priorities. Following local government reorganisation our new unitary council is now responsible for housing, transport, planning and social care - as well as public health - and there are so many opportunities to embed the needs of our ageing population into our plans and priorities.

Alongside this there are also opportunities to work more closely with the new Mayoral Combined Authority to look at the positive contribution older people can make to the economy, whilst also ensuring there is the housing and transport infrastructure in place for an ageing population.

Councillor Caroline Dickinson

As the Older Person's Champion for North Yorkshire I welcome this report that reflects many of the discussions I have had with older people, partner organisations and from the seminars and conferences I have attended.

My role as Champion is about raising the profile and voice of older people. Being a councillor, I can do that through the Committees I attend including Care and Independence, Scrutiny of Health, Housing and Leisure. I am a big believer in exercise to keep healthy, happy and independent; I was on the Sports and Leisure working group where I continually reminded everyone about the benefits for older people accessing what is available around the county, hopefully with some concessions! With the pension age rising many employees will continue to work and employers should be aware of the Age -Friendly Employers' Pledge to ensure people remain supported in the workplace for as long as they choose to do so.

Transport and Housing are issues within North Yorkshire and we need to make sure people are able to get out and about not just for work and health appointments but also for pleasure in the fantastic county we live in and be able to live in a house that suits their needs.

As one Council we need to take advantage of opportunities to work together to help our residents live a long and happy life as long as possible and as independently as possible.

We may be getting older but that does not mean we have to be boring!!

How we produced this report

To produce this report, we used feedback from over 450 people who responded to a healthy ageing survey as well as using information from other council surveys such as Let's Talk Transport. We carried out further stakeholder interviews with older people and services to explore the topics further, and asked people what North Yorkshire would look like if it was the best place to grow old and what needs to happen to achieve this.

We have used the four key priorities identified through these discussions to structure the report. Each of these sections contains an overview of the relevant data and narrative, as well as feedback from the voice of older people engagement, case studies, gaps/issues and recommendations.

In response to feedback about negative images of older people we launched a photo competition to celebrate ageing well in North Yorkshire. We invited people to share their photos and received over 140 photos, some of which can be seen in this report. The photos will be used in future publications and reports to continue to challenge stereotypes around ageing.

To accompany this report, we are also launching an interactive dashboard so that people can review data for their area and explore local trends further.

Report authors:

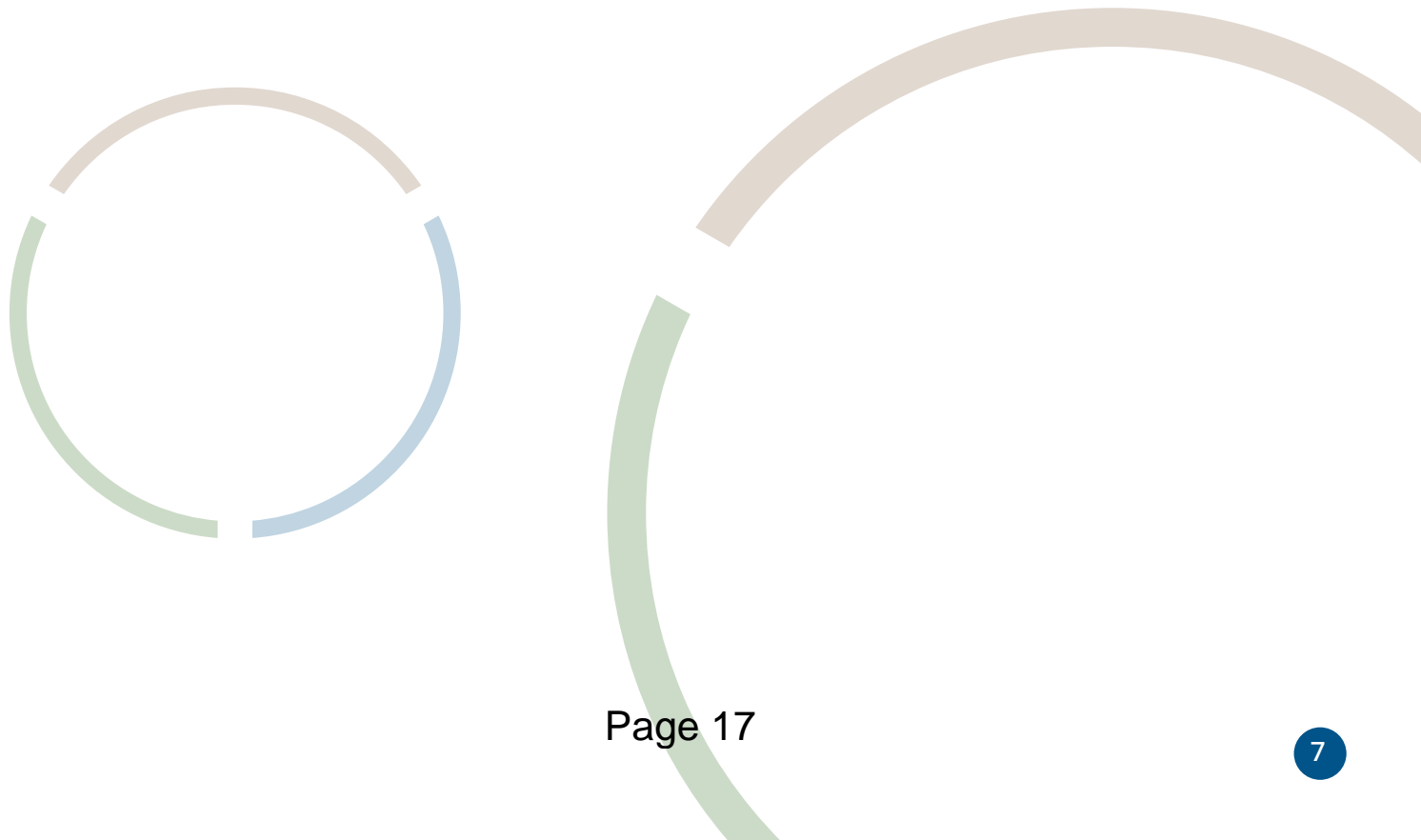
Louise Wallace, Carly Walker, Vic Turner, Helen Carmichael, Colin Bainbridge, Shanna Carrell, Leo Beacroft, Amber Reed Jess Thompson



If North Yorkshire was the best place to grow old what would it look like?



Feedback from engagement with stakeholders, Summer 2024



Introduction

North Yorkshire is England's largest county, spread across a geographical area of over 8,000 square kilometres (or 3090 square miles). There are approximately 615,400 people living in North Yorkshire, 153,800 of whom are aged over 65. The county has a mixture of coastal, rural and urban areas.

Ninety eight percent of the county is either sparsely (13%) or super-sparsely (85%) populated, with just over a third of the population living in these areas. This results in a population density of just 77 people per square kilometre, compared with an England average of 434 people per square kilometre. This presents challenges around the delivery and sustainability of rural services and sits alongside issues around fuel poverty, affordable housing and digital exclusion as highlighted in the map shown below.



North Yorkshire Council has recently completed Local Government Reorganisation, combining seven district councils and one county council into a single unitary authority in April 2023, which has already led to better collaboration around healthy ageing. Alongside this, the newly established York and North Yorkshire Combined Authority creates significant opportunities for increased funding and local control over more decisions.



Why focus on healthy ageing?

Professor Whitty's annual report on health in an ageing society helped shine a spotlight on the growth of the older population in areas such as North Yorkshire. Over the last few years there has been a lot of work taking place looking at how we can improve outcomes for older people, but it seems timely to review what we are doing and where further action is needed.

It has been seven years since the previous Director of Public Health focused his annual report on "Growing old in North Yorkshire". Progress has been made to address the four recommendations from 2017:

1. Age-friendly communities: North Yorkshire was successfully accepted into the UK network for age-friendly communities in 2019, signalling commitment to become an Age-friendly Community and working towards global recognition through the World Health Organisation. An age-friendly steering group was established, stakeholder engagement carried out and priorities agreed.

2. Comprehensive retirement planning: a range of programmes are available within organisations to support employees. A quiz was developed by Community First Yorkshire to encourage people to consider how they will continue to make connections when they leave paid work.

"The great majority of people move out of cities and large towns before older age, concentrating geographically in coastal, semi-rural or peripheral areas, often with relatively sparse services and transport links. Manchester, Birmingham and London will age very slowly but areas such as Scarborough, North Norfolk or the south coast are going to age rapidly and predictably."

Professor Chris Whitty, 2023 CMO report

3. Identifying and managing frailty: training and awareness-raising has taken place across health and social care on the Rockwood frailty scoring to support staff in identifying and grading frailty. A toolkit has been produced to assist practitioners in a range of settings, including primary and secondary health care, social care, and the community and voluntary sector, to provide information about relevant community resources to individuals living with frailty and their families and carers. Humber and North Yorkshire Integrated Care Board (ICB) has launched a frailty centre of excellence with 10 principles to deliver integrated care for people living with frailty.

4. End-of-life planning: regular awareness-raising has taken place about end-of-life planning, which includes events such as death cafes where people can come together to share experiences and discuss issues such as the importance of writing a will, telling loved ones your end-of-life wishes and helping with planning. The North Yorkshire and York Palliative and End-of-Life care group brings together organisations to join up work around end-of-life care.



We are still dealing with the impact of the COVID-19 pandemic, which significantly affected older people, and in particular around increased levels of deconditioning. Globally we are also dealing with the effects of climate change which poses a significant challenge to the health and wellbeing of older people. (Reference 1)

This latest Director of Public Health Annual Report highlights some of the progress made in improving outcomes for older people over the last few years, and also focuses on the areas where further work needs to happen. From a strategic perspective, healthy ageing has been identified as one of the cross-cutting council priorities as there are a range of factors affecting whether people age well, such as housing, employment, lifestyles, access to services and social connections.

The report is structured around the four healthy ageing priorities for North Yorkshire that have been developed in collaboration with stakeholders, including older people and support organisations, and agreed by the Council's management board:

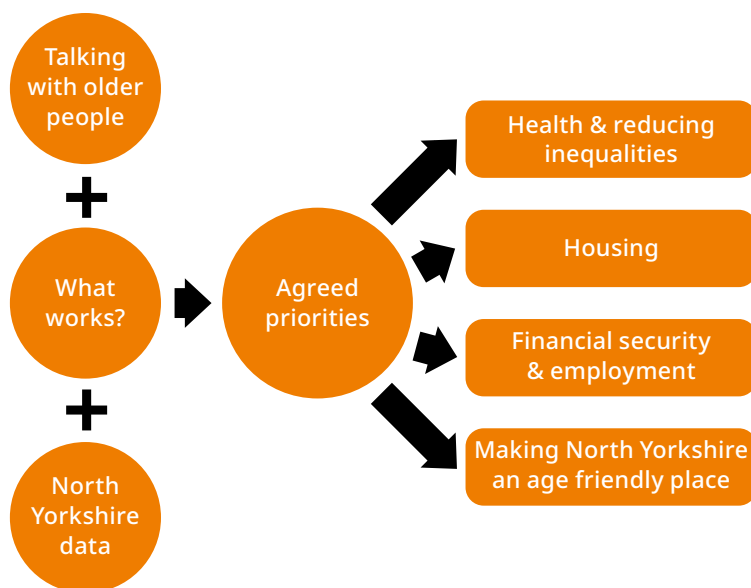
- 1. Health and reducing inequalities
- 2. Housing
- 3. Financial security and employment
- 4. Making North Yorkshire an age-friendly place

North Yorkshire has a higher proportion of older people compared to the rest of England with almost 1 in 4 (24%) people aged 65 and over compared to 18% in England. The wards with higher proportions of residents aged 65+ tend to be in rural areas, with, on average, younger populations in more urban areas. However, some urban areas, particularly in Scarborough have substantial proportions of residents aged 65+.

The 65+ population in North Yorkshire is 99.3% white compared with 93.3% nationally. The largest non-white ethnic group aged 65+ in the county is Asian, Asian British or Asian Welsh (0.4%).

Whilst the number of residents from ethnic minority backgrounds is currently small, this is set to increase over the coming years. It is important to ensure that services and care organisations that support older residents are culturally appropriate.

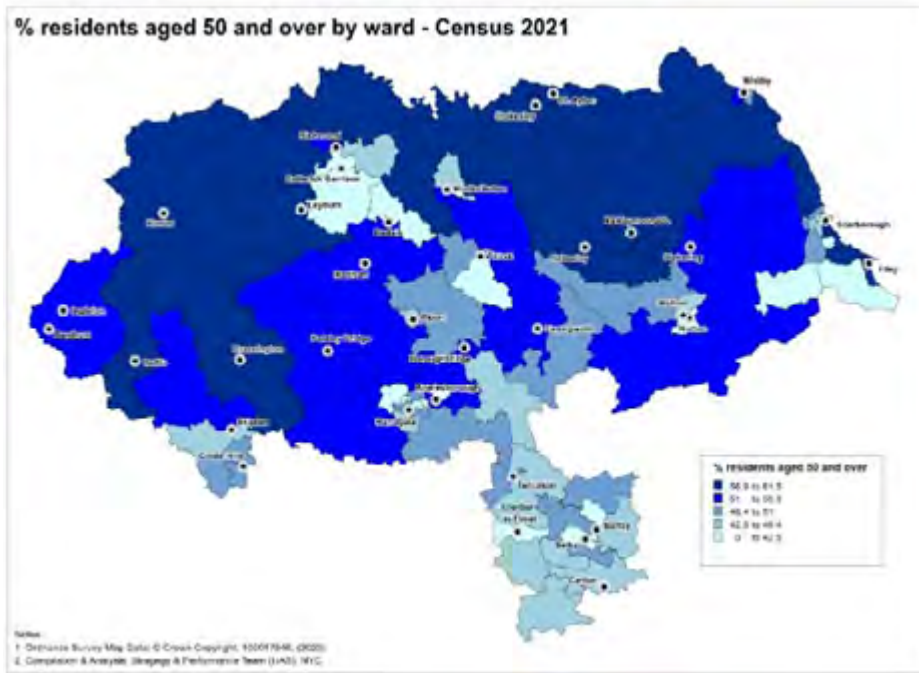
This report predominantly includes data for the population aged 65+. However healthy ageing begins before this and therefore also considers people 50+. Preparation for retirement for example needs to start much earlier than 65+, and having the infrastructure in place for older people will benefit all ages.



Voice of older people informs programmes and policies

We strive for North Yorkshire to be a place where people can stay living in their homes for as long as they want to do so, participate in the activities they value, and contribute to their communities, for as long as possible.

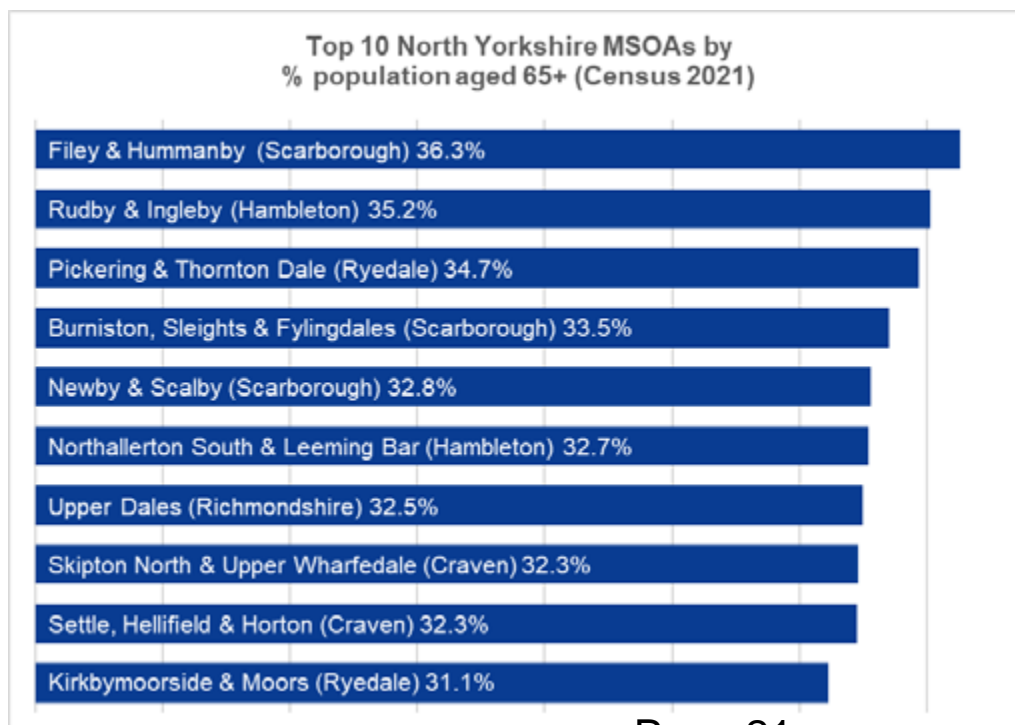
The following map shows where people aged 50+ are currently living and therefore where we need to start planning infrastructure and services in preparation for projected growth in the older people’s population.



There are already parts of North Yorkshire with even higher proportions of people aged 65 and over. These tend to be coastal areas and rural towns:

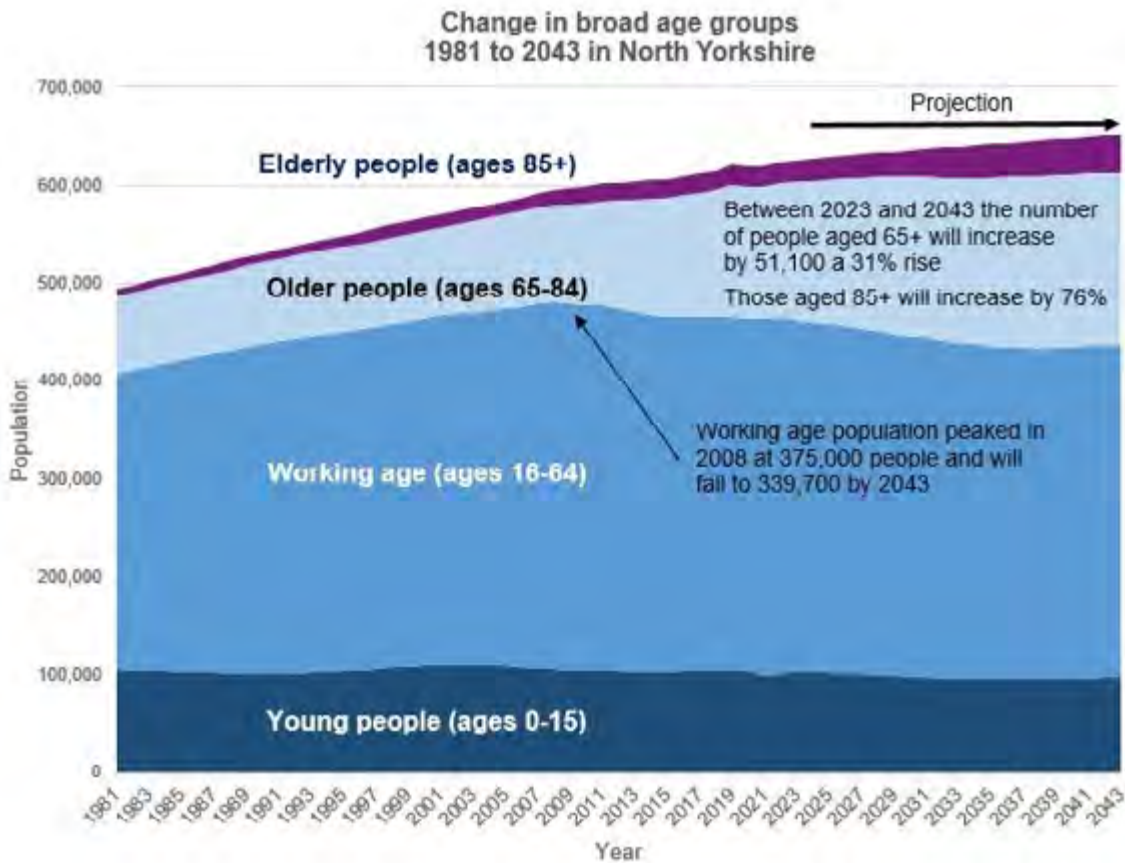
55% of North Yorkshire residents live in rural areas; this rises to 59% for those aged 65+

25% of North Yorkshire residents live in coastal areas; this rises to 28% for those aged 65+



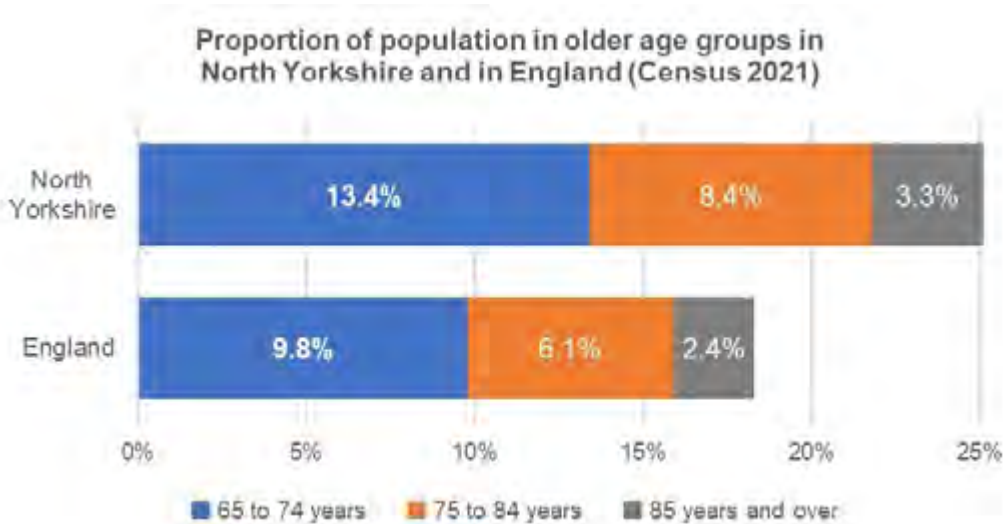
By 2043 the number of people in North Yorkshire aged 65+ will increase by 51,100 which is a 31% rise. This means that 1 in 3 residents will be over the age of 65 (33%).

There will be a 76% increase in those aged 85+.



Alongside this there will be a decrease in the working age population, which has been declining since 2008. Currently there are 16 working aged adults (18-64) for every elderly adult (85+) and in 2043 there will be 9 working aged adults for every elderly adult.

This is more significant than the national average as reflected in the chart below and presents further challenges around the workforce and recruitment of nurses, doctors and care staff to support the older population.



As the number and proportion of older people in North Yorkshire rises, so will the demand for services and infrastructure to support the older population. This includes suitable housing, transport, and health and social care services. People are also predicted to live longer, and so the number of people living with multiple long-term conditions and diseases that are associated with ageing such as dementia is likely to increase.

However, despite this predicted increase it is important that an ageing population is not viewed as a demographic time bomb. Most people do not have dementia, most people are not living in care homes and not everyone who is old will need help.

There are around 7,200 older people aged 65+ living within the most deprived 20% of neighbourhoods in England. These are predominantly in the former Scarborough Borough area.

Recommendations

- All agencies and services to consider the projected increase in older people and what this means for their services, in particular ensuring the infrastructure is in place to prepare for this, whether you are NHS, council e.g. planning and transport, voluntary sector, combined authority etc.
- Ensure there is accountability for a multi-agency approach to healthy ageing. A co-ordinated response should make sure that planning takes place to respond to the current and future needs of older people and, in particular, in areas where numbers will be highest.

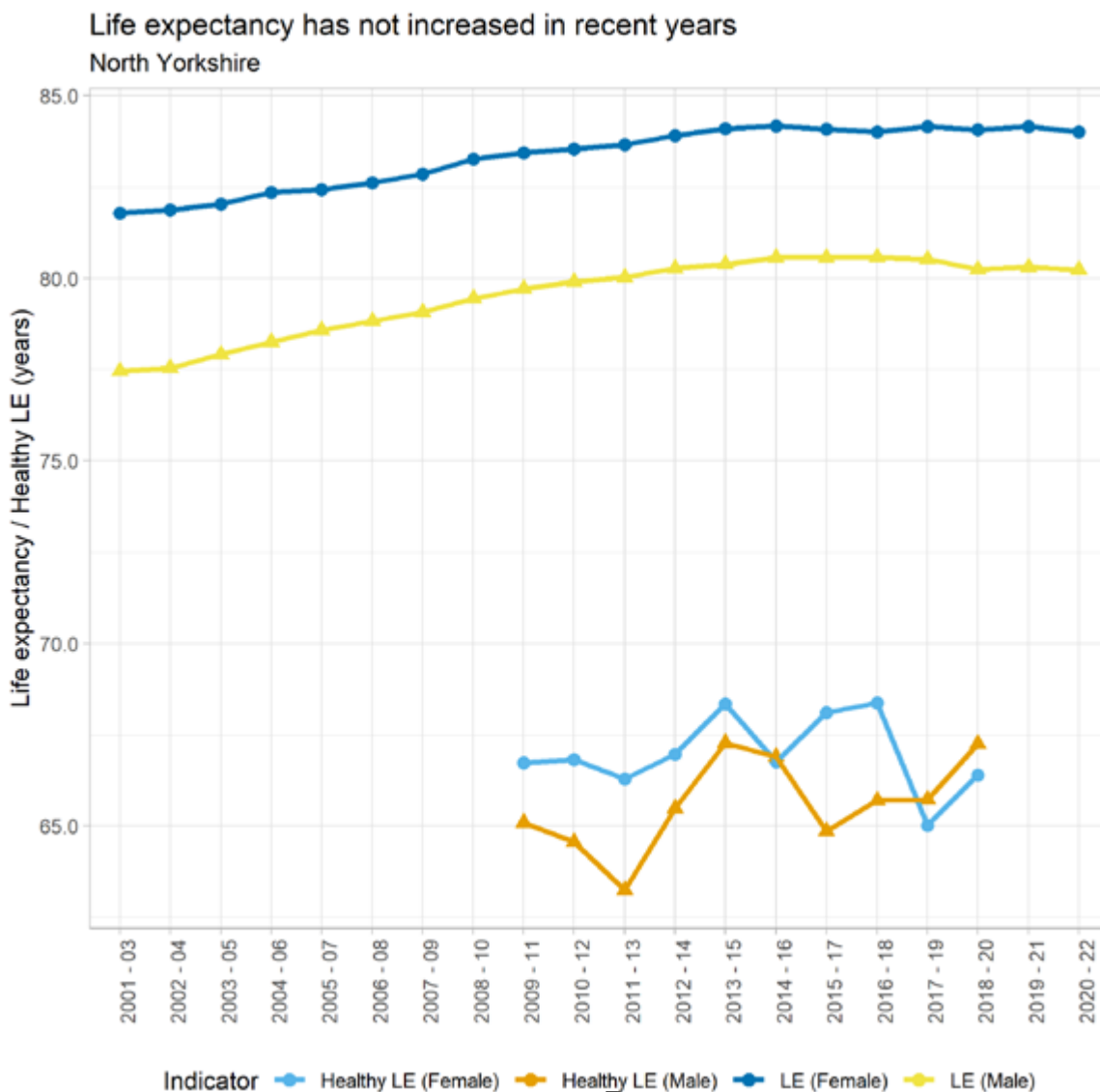


Chapter 1: Health and reducing inequalities

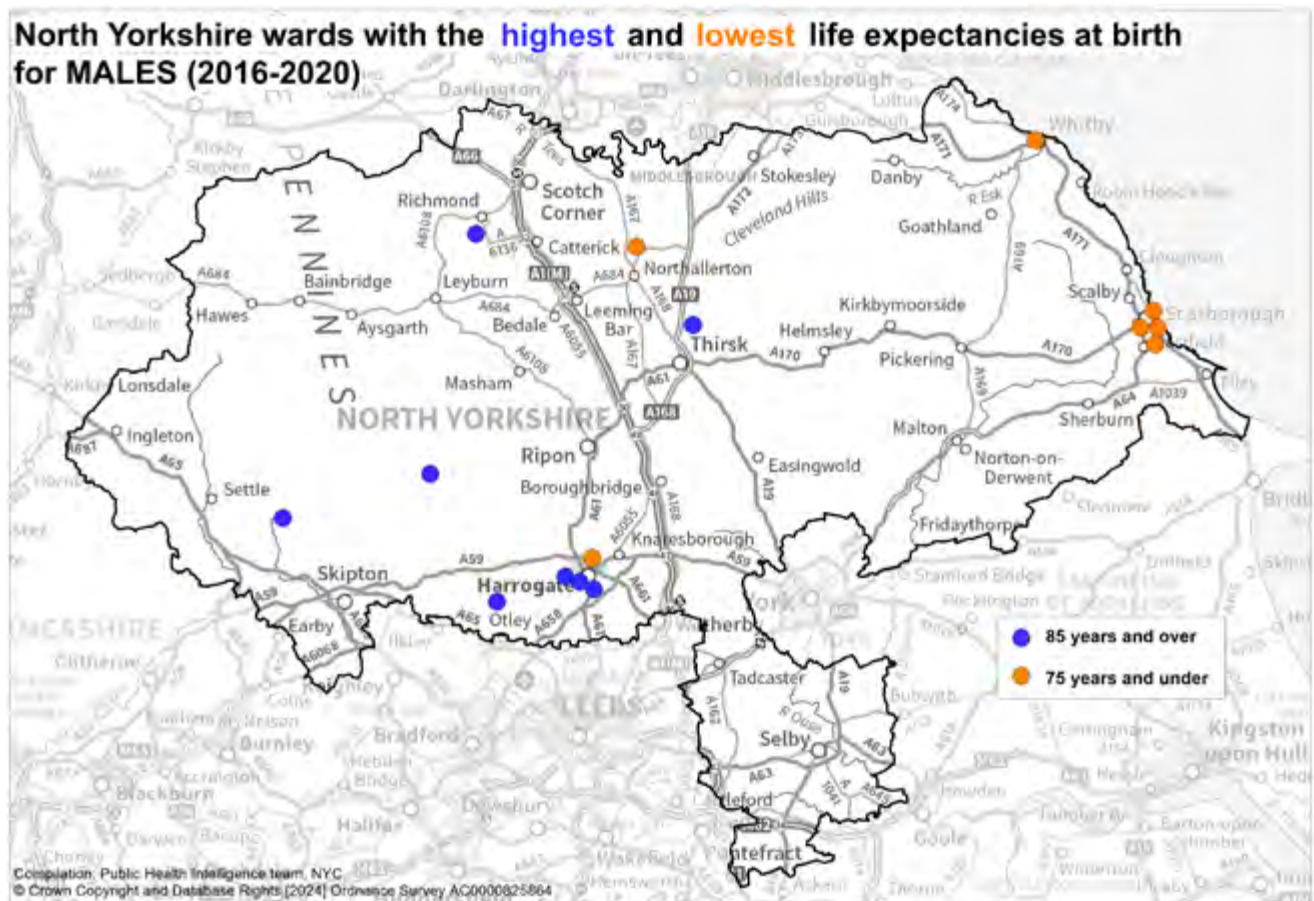
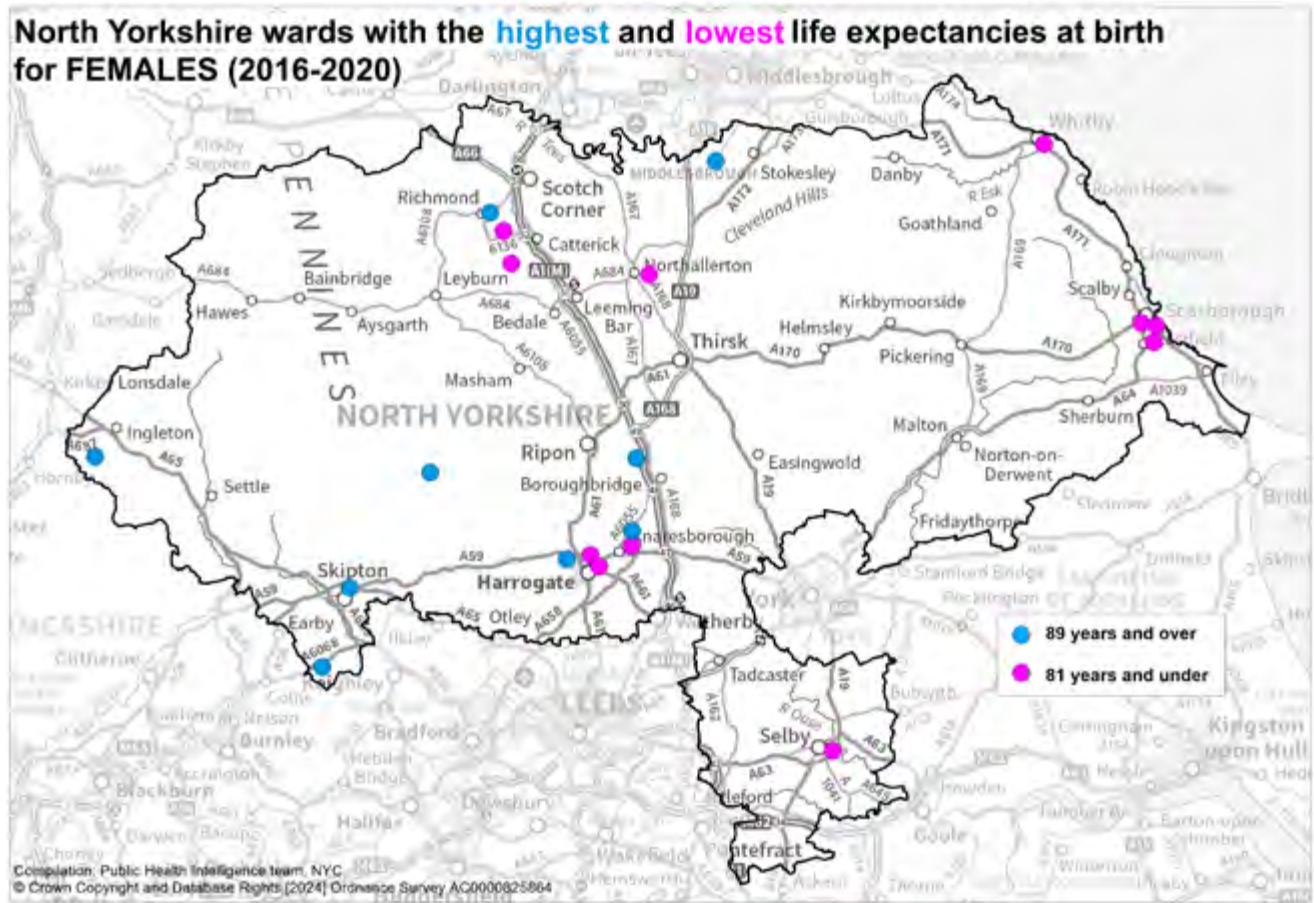
Life expectancy

Life expectancy in North Yorkshire averages at 80.2 years for males and 84.0 years for females, which is higher than the England values (78.9 years and 82.8 years respectively). There is a variance within the county, with higher life expectancy in less deprived areas. This is generally understood to be caused by a range of wider determinants of health, including employment, income and housing. Many of these are preventable.

Professor Whitty highlights that “Those who enter older age in good health and maintain it to the end have a very different experience to those who rapidly accumulate multiple debilitating or degenerative conditions, living with them for many years”. (Reference 2)



Life expectancy in North Yorkshire



Not everyone has the same opportunity to age well. There are inequalities in how many years we live and how long we live in good health. There is a need to do more to understand the diversity of our older population and tackle inequalities in later life. Healthy life expectancy has decreased for females which means people are spending less time in good health.

According to the Office for National Statistics (ONS), nationally, the main causes of poor health are chronic health conditions and multimorbidity, alongside musculoskeletal conditions and behavioural and socioeconomic risk factors such as physical activity, smoking status, education and household income (*Reference 3*). Again, many of these are preventable or can be improved through effective clinical management. An ageing population will have implications for health, social care and other public services as the risks of living with long term conditions increases with age, although living with a long term condition is not inevitable. Professor Whitty highlighted in his report that “with older age comes an increasing probability of an accumulation of chronic diseases” but that the length of time spent in ill health can be shortened by focussing on prevention and delaying the onset of disease.

We need to do more to extend the period of good health and reduce the period of ill health - increasing healthy life expectancy should be a key priority and is a major public health issue.

In our conversations, older people raised a range of health concerns relating to ageing well and for the purpose of this report we have chosen to focus on **access to health services, mental health, physical activity and falls and frailty.**

The NHS in Humber and North Yorkshire (HNY) faces two significant challenges:

Challenge 1: rapidly ageing population

The product of fewer births, younger adults moving away and older people retiring on the coast, we already have 20% more over-75s in 2024 than we did in 2018 and will have another 45% by 2035. Across HNY we would need to be building a whole hospital ward every two months to keep up with that level of population growth. In North Yorkshire we would need an extra 200,000 GP appointments each year to meet expected demand in 2035.

Challenge 2: growing health inequalities

The gap in life expectancy and healthy life expectancy between our wealthiest and poorest populations is widening. For example, male life expectancy in Scarborough decreased by a year between 2015/17 and 2018/20 while it remained unchanged in Harrogate.

Without intentional effort, a system delivering health and care services will struggle to address the ageing population, regardless of growing inequalities. Huge effort is underway to maintain the quality and quantity of services within financial envelopes that are not keeping up with inflation.

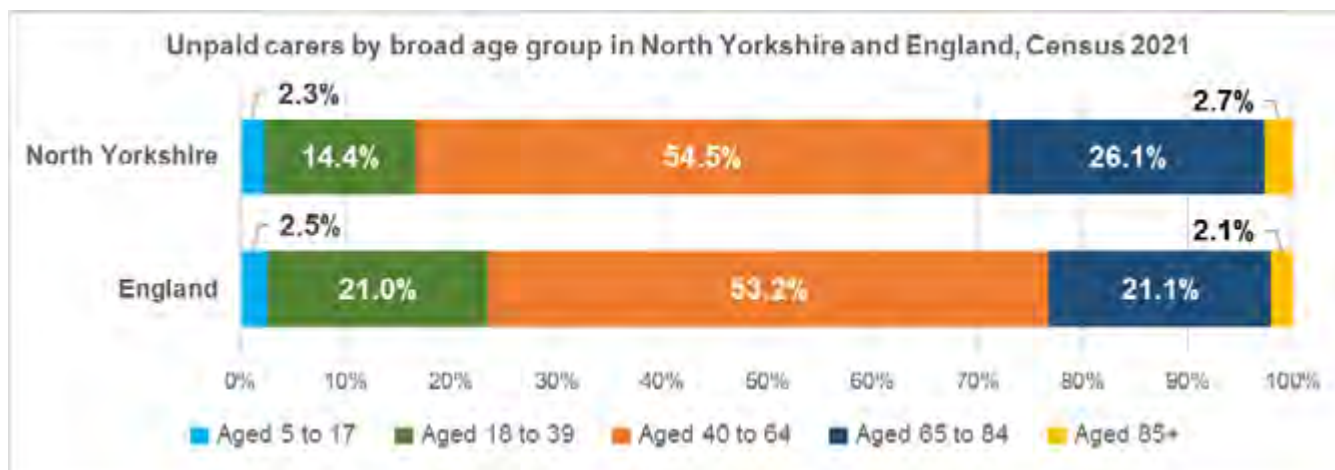
Meanwhile there is significant unmet need among those affected by growing inequalities, often located in different areas than our ageing population, including coastal communities and city centres. More deprived groups tend to develop diseases earlier in life that then go undetected and are not treated as quickly. The burden of preventable deaths including those from alcohol, smoking and obesity falls disproportionately on the most vulnerable.

Any transformation effort that seeks to tackle these challenges falls into one of four categories:

1. Increasing capacity: expanding the ability to serve more people across all care sectors.
2. Improving efficiency: enhancing the efficiency of services to better utilise available resources.
3. Balancing care capacity: ensuring an appropriate distribution of capacity across primary care, hospital care, social care, and other sectors.
4. Emphasizing prevention: prioritizing preventive measures to reduce future demand on services.

The NHS and partners must adopt an intentional approach to improving population health across all four categories, and in a way that tackles both challenges around the rapidly ageing population and growing health inequalities.

Older carers



Census 2021 data shows that the age profile of unpaid carers in North Yorkshire is older than the national average. 26.1% of unpaid carers in North Yorkshire are aged 65 to 84. This is a considerably larger proportion than the England average of 21.1%. Unpaid carers aged 85+ make up 2.7% of the total in North Yorkshire compared with 2.1% nationally. Older carers have amongst the lowest pensions, and this is often because they have had to leave the workforce early or cut down on hours. (Source: Centre for Ageing Better).

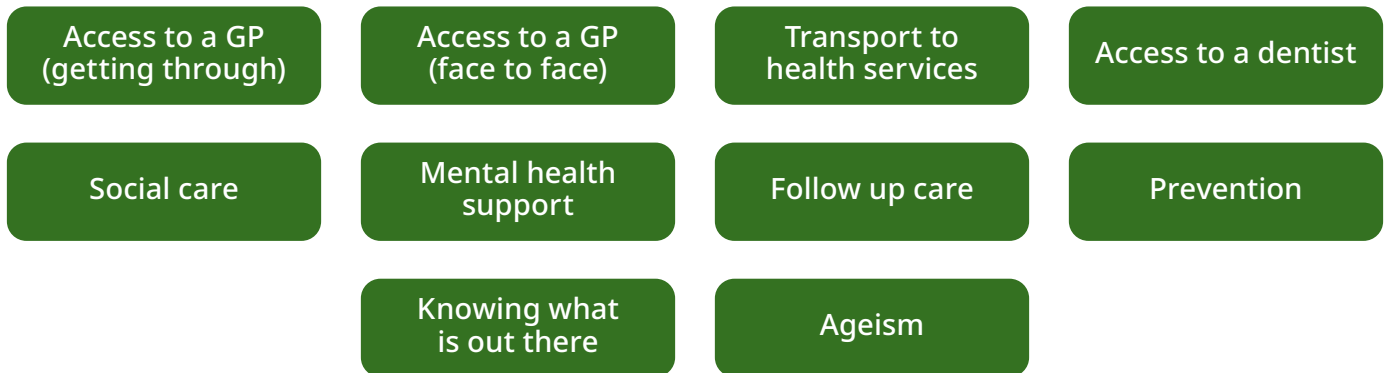
The 2021-22 Survey of Adult Carers in England (SACE) found that in North Yorkshire 20.3% of unpaid carers had little social contact with people and felt socially isolated – slightly lower than the England average (20.9%).

Ageing without children

Nationally there has been an increase in people ageing without children, with an estimated 10% of people aged 65+ having no children due to a variety of reasons such as choice, infertility, becoming estranged or outliving their children. (Reference 4) This can have implications for future care and support needs as they may have fewer networks and people ageing without children are 25% more likely to go into a care home. People ageing without children are a third more likely to be carers for their own parents. (Reference 5)



Residents' Voices: access to healthcare



Access to a GP

The 2nd biggest theme raised during the engagement was around access to a GP. There were two main concerns highlighted relating to this: contacting the surgery and being able to see a GP face to face. Getting through to the surgery to make an appointment was an issue for a large number of people.

There were lots of concerns raised about appointments being online or telephone and not being able to see a GP face to face. There were numerous comments about the difficulties seeing a health professional face to face.

There were a number of comments made about the time it takes to get an appointment with people wanting to see a doctor quickly rather than having to wait weeks.

We also heard concerns about opening times. This is particularly relevant as people are working later in life.

However, there was positive feedback about services too.

"When I tried to understand how to get an e-consult with my GP I found it really hard and gave up"

"9-5 type access to the GP is no longer appropriate"

"Couldn't be better - hospital and GP surgery are amazing"

"A 40 minute wait (on the phone) costs money"

The Local Medical Committee for North Yorkshire (LMC) shared a number of challenges around recruitment of staff and increases in workload:

"We are providing more appointments than ever before, but we know that it can still be challenging to get an appointment when you need it. We are negotiating with the government to try and improve this situation nationally through increasing the number of GPs and adapting the way we work. We recognise that especially for older people, accessing care through digital means can be daunting, and as a profession we remain committed to trying to offer a variety of ways to access and consult with your GP, including face to face appointments in surgery (with >65% of all appointments delivered in this way). We know that continuity of care saves lives and leads to better health outcomes. GPs want what patients want, easy access to a GP who knows you, in a timely fashion, in a way that is chosen by the patient, and we will continue to advocate for better support for general practice through negotiations with the NHS and government."



Bradford District and Craven Partnership have also been responding to feedback about difficulties accessing GPs by providing additional appointments and improving telephony when people call the practice.

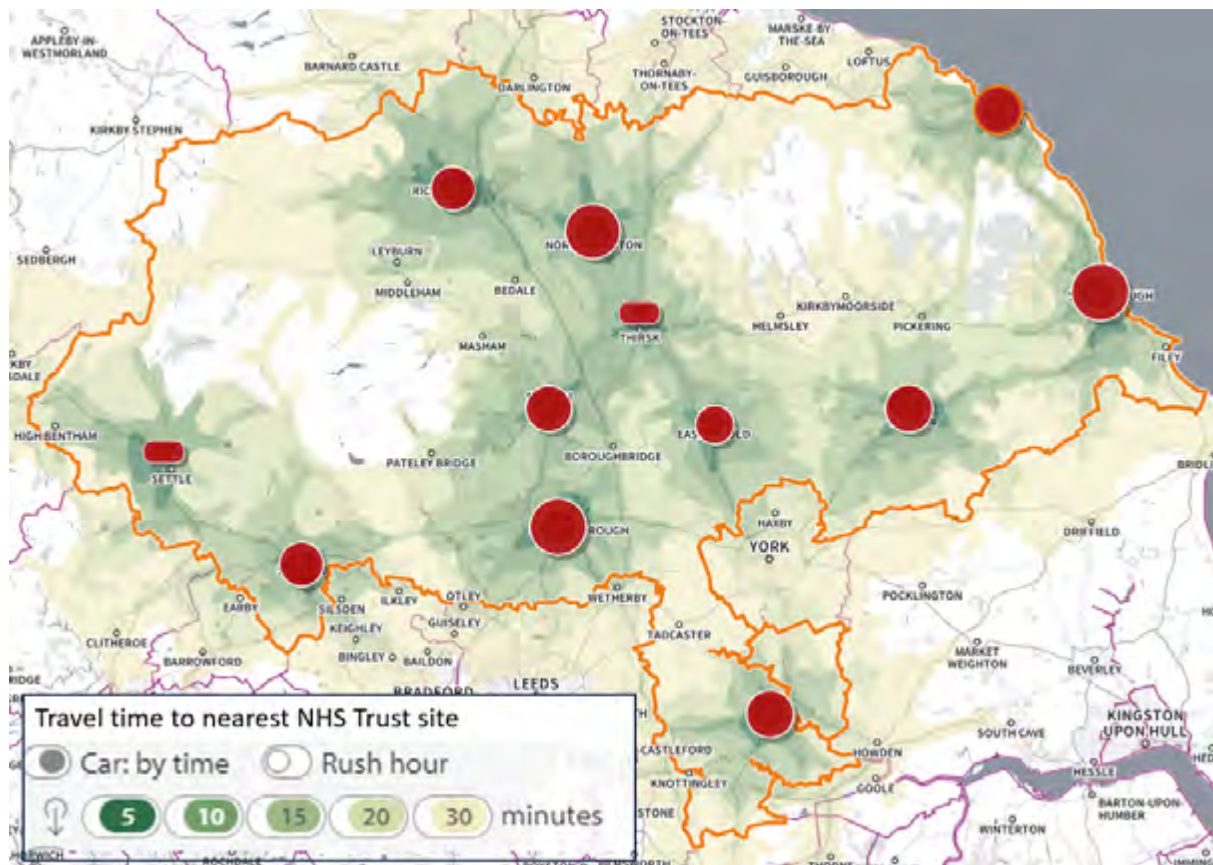
Humber and North Yorkshire Health and Care Partnership has developed a digital strategy which includes a commitment to digital inclusion and engaging with the population.

Transport to health services

Transport to health services is another key issue highlighted regularly by older people. Many reported that because they currently drive they could access services, but for those relying on public transport this was more challenging.

There are a number of community/volunteer transport schemes which operate in North Yorkshire and further information can be found later in the report. Humber and North Yorkshire Integrated Care Board (HNY ICB) is currently reviewing patient transport services, paying particular attention to rurality.

“I am able to choose between hospital services in Harrogate/ Leeds or Northallerton/ Middlesbrough but local transport does not support direct access to these places”



The above map shows 30-minute drive times to hospital trust premises; many areas have much longer drive times. For those without access to a car and who have to rely on public transport this proves even more difficult. As numbers of long-term conditions are expected to increase as people get older, more appointments and visits to health services will be needed. This reinforces the need highlighted in Professor Whitty’s report that services should move away from being specialist and become more generalist so that people are not having to attend numerous different appointments for numerous different conditions. Services should be built around the most common cluster of diseases.

Access to a dentist

The lack of NHS dentists has been highlighted as a particular issue with many feeding back about the number of dentists who are no longer offering NHS treatment. The Scarborough Older People's Forum commented that 4 dental practices had recently stopped treating NHS patients which means they are now struggling to access a dentist. Access to private dentists was also mentioned as well as the cost.

NHS Humber and North Yorkshire ICB assumed responsibility for the commissioning of dental services last year, with an aim to make it easier to deliver joined up and responsive care, delivering high quality primary care services for the population.

Practices are working hard to make as many NHS appointments available as possible to meet the high levels of demand. The availability of workforce, particularly being able to recruit and retain dentists, is further exacerbating the ability of practices to meet the demand of patients. They are working with training providers to secure places and to train dentists in our area and exploring international recruitment as an option. HNY ICB has also increased access to urgent appointments.

Bradford and Craven ICB has also committed to look at flexible commissioning, improve access to emergency appointments and developing a long term workforce plan.

Harrogate District Foundation Trust Oral Health Team has been commissioned by North Yorkshire Council and City of York Council to provide a programme of free oral health training for the adult social care sector.

To date they have delivered training webinars for care home staff (covering living with dementia or stroke, denture care and supporting individuals with their brushing), they have attended Care Connected sessions and delivered a joint training session alongside North Yorkshire's Quality Improvement Team to over 125 participants in the care home sector.

They have provided bespoke training to other teams supporting older adults, including Living Well North Yorkshire.

"Unless we have the means to pay privately I feel we are isolated"



Mental health

According to Age UK, 1 in 4 older people live with mental health conditions. (Reference 6) As we get older, we are more likely to experience issues with our physical health, which can trigger or exacerbate mental health issues. Co-morbidity is common and can impact on a person's mobility and independence, as well as present challenges such as chronic pain. This can place a strain on an individual's mental health and lead to conditions such as depression and anxiety, amongst others. There is also the risk of misdiagnosis, or missed diagnosis, where a person's physical symptoms are diagnosed as mental health problems or vice versa.

Ageing can also impact on our role in society. Careers may change or stop altogether as people retire; not only impacting self-worth but potentially leading to a drop in income too. A person's value may be undermined by ageism, and a person's role within a family dynamic may be subject to change as well. All of these, coupled with earlier life experiences, could have a cumulative impact on a person's mental health as they get older.

Due to a general under-recognition and treatment of mental health conditions among older people, there remains a stigma surrounding these conditions that can make people reluctant to seek help. This is something that was noted in the engagement of North Yorkshire residents as part of this report.

There was a call for an improvement in the provision of mental health support and services within communities too.

Older adults are more likely to experience adverse events such as bereavement and our engagement found that support for this was lacking in some areas across the county.

Local services report seeing an increase in loneliness and social isolation, which is impacting on people's mental health. Mental health services also report seeing more severe and complex cases in older people, alongside increased demand for memory assessments. As new drugs for dementia emerge over the next few years this will result in more people coming forward for assessments. There are already challenges around access to a dementia diagnosis with 58.4% of people estimated to have dementia being diagnosed in North Yorkshire compared to 64.8% nationally.

"(Need) care and support for long lasting clinical mental conditions"

"No bereavement service in our area. I was desperate for help to navigate notifying services of his (husband's) death which was close to impossible unless you had a degree in computing. The GP told me about a programme I could download and that was all the help offered"



Falls and frailty

It is estimated that one in three people over the age of 65 have at least one fall a year, and this increases to half of people over the age of 80. Many of these are not reported. The impact on someone's health from a fall can be significant, as well as loss of confidence and independence. However, many falls are preventable and commonly caused by muscle weakness, poor balance, visual impairment, the use of certain medicines, environmental factors and some medical conditions.



Since COVID-19 organisations have reported seeing an increase in deconditioning, where there is physical, psychological and functional decline that occurs as a result of prolonged inactivity and associated loss of muscle strength. With the predicted rise in older adults over the next few years it can be expected that this will result in an increase in the number of falls. It is important, therefore, that the prevention of falls is considered a key priority.

A recent renewed focus on falls has helped to raise awareness of what is available and identify gaps in provision.

Falls summit

A North Yorkshire falls summit was held in 2023 that was attended by health, social care and voluntary sector partners. The event aimed to share new and existing work, identify gaps and opportunities for future work, and bring together agencies with an interest in falls to share ideas and good practice.

Recommendations from the event are being taken forward by a multi-agency partnership and through localities. These included:

Establishing a strategic approach to falls: developing a countywide working group and locality groups

Developing a clear pathway and strategy: from the prevention of falls to how we respond to someone who has fallen, ensuring there is equity in provision across North Yorkshire, and development of a single consistent falls assessment

Training and awareness raising: to explore opportunities to raise awareness of falls prevention amongst the public and professionals, and identify opportunities to develop a comprehensive training programme for professionals

Physical activity: promoting the importance of having a broad leisure offer to increase physical activity amongst people at low/medium/high risk of falls, and including physical activity options in the falls pathway

Care settings, housing and wider environment: develop a comprehensive training programme for care settings and identify opportunities to gather better data on the causes of falls to inform environmental improvements

Urgent falls response: clear pathways for crisis response services, with mapped falls pathways in place that are also available digitally

Selby Health Fair

Selby Primary Care Network (PCN) in partnership with Inspiring Healthy Lifestyles invited 280 patients to attend a health fair where they could access blood pressure testing, an occupational therapist, a physiotherapist and a range of agencies providing information and advice. Patients were identified using the practice's clinical system based on frailty and Rockwood scores (a scaling system used by health professionals to assess fitness and frailty in older people).

Partner agencies included Living Well, the Selby Ageing Well and Frailty Team, Yorkshire Energy Doctor, Citizens Advice, Healthwatch, Dementia Forward and Up for Yorkshire. Attendees fed back that they found it really helpful to find out what support and information is out there. One lady came on behalf of her 96-year-old father and found out about the falls prevention exercise programme and hopes that he will now attend.

One attendee commented that it was "Good to get out of the house, seen lots of people I haven't seen for years".

"During covid we infantilised older people by doing everything for them. E.g. shopping. There is the danger we continue to do this. We over care and try to make things easy for people. By doing this we are engineering physical activity out of people's lives"

"People pay more attention to what they see rather than what they are told. For example a GP buzzing a patient into their room isn't modelling behaviour. They could walk with the person and say this is one of the ways I get my steps in"

Physical Activity

The benefits of physical activity are well documented. Exercise can not only improve physical and mental health but also delay diseases associated with ageing. The Chief Medical Officer recommends that older adults should aim to accumulate 150 minutes of moderate intensity aerobic activity per week and do strength and balance activities twice a week.

In our engagement we heard positive feedback about living in such a beautiful rural area with access to **green spaces, nature and leisure** as being important.



Access to parks and green spaces was an issue for some, particularly those in towns.

People wanted more parks and more spaces for growing food, with more easily accessible places to walk.

Being able to do things with family and grandchildren was important for some, with intergenerational facilities such as adult-sized swings.

Having protected, multi-purpose leisure spaces and access to exercise was highlighted by many.

Other themes includes **“Walking and cycling friendly”** routes which included safer cycling options on rural roads and more off-road cycle routes. There was also one comment about keeping pavements free of cycles.

There were a number of comments about the need for **more places to sit**. This included comments that existing benches did not provide enough support and are not always age-friendly.



“Our local environment is crucial to the wellbeing and quality of life for everyone”

“More community walking groups on a weekend as well as during the week”

“There are no outdoor spaces, mostly farmland with badly maintained public footpaths”

“Green areas keep getting houses built on them”

“We have fantastic scenery for walks and to go and see different places – it comes down to infrastructure and transport”

“The key is keeping active. Lots of my friends have stayed in since COVID-19 and get things done for them such as shopping or going on-line. Find they are deteriorating. I prefer to keep active”

North Yorkshire Sport and Active Wellbeing Service

North Yorkshire Council’s Sport and Active Wellbeing service is firmly embedding their role in supporting healthy ageing. Whilst still in the transformation stage, the service has a wealth of programmes within council facilities and community settings to support residents to be active throughout their lives.

Engaging with health providers and community organisations across the county, the service is developing its health and wellbeing offer across North Yorkshire to meet the needs of residents now and in the future. By utilising council run facilities, community settings and open spaces, and through the offer of universal and targeted programmes, they aim to further meet the needs of residents, supporting and enabling people to enjoy moving well for longer.

Specific strength and balance sessions are offered to support people at risk of falling. These chair-based activities improve people’s ability to undertake everyday activities, allowing them to stay active and independent for longer. They are proving popular and effective.

“A participant of Strong and Steady has experienced great benefits from attending the classes. From not being able to turn over in bed due to lack of strength, this is something he can now do. Following a recent slip out of bed onto the floor, the participant was able to get back up onto his feet. He and his wife reported this as a real achievement and something not possible a few months before. They were pleased not to have to call for help but instead manage the situation themselves. The improved leg strength has allowed the gentleman to continue with the hobbies he loves.”

Active North Yorkshire, the new name for our leisure provision, officially launches in 2024 as Selby and Tadcaster leisure centres transition in-house. This will be followed shortly by leisure facilities in Craven, Harrogate and Richmondshire, with facilities from Ryedale and Scarborough expected to join by 2027. With over 20 leisure centres and a focus on community well-being, Active North Yorkshire aims to lead a national movement towards enhanced physical and mental health. Find out more here: [New sport and active well-being service for North Yorkshire](#).

The size and geography of North Yorkshire means that community settings play a crucial role in the delivery of the service, ensuring everyone can access and enjoy the benefits of health and wellbeing close to home. ‘Primetime’ are fun sessions where participants can socialise and be active. These fully inclusive, chair-based activities take place in community settings, supported by the Sport and Active Wellbeing Service.

Did you know?

In excess of 700 participants take part in activities to improve their balance and strength each week.

“At the Start, I could only do 3 ‘sit to stand’ but now I am able to do 10. It has given me confidence to go back into the swimming pool”

“Sessions have been a great help with mobility and mental health issues”

Care Home Olympics

The North Yorkshire and York Care Home Olympics is held annually over summer. In 2023 there were 800 individuals taking part from 32 care providers. The initiative supports providers to hold their own Olympics-style event to promote the health benefits of physical activity to those in their care.

Staying active can help combat deconditioning, which can result in reduced mobility and muscle strength, confusion, poor mental health and increased risk of falls.

A highlights video of events from across the county is available here:

[NY+Y Care Provider Olympics Initiative - YouTube](#)



Dying Matters Awareness

Honest, timely conversations about death and dying are essential to make sure people are able to die well. Yet all too often, barriers including lack of confidence and taboos around discussing death mean people may not get all the information and support they need at the right time.

Talking about death has not always been so stigmatised. Throughout history death has been a central part of most cultures, and is still much more visible in other cultures from around the world – for example Mexican Day of the Dead (Día de los Muertos) celebrations.

Advances in medical care over the last century have meant that people are living longer, and often receiving intensive medical care right up until the very end of their lives. Where death was once seen as natural and inevitable, it is now almost considered a 'failure' of the medical system. For most of history people usually died at home surrounded by family; however, during the twentieth century people increasingly died in a hospital or other medical environment.

All this has meant that most people don't have to come 'face to face' with death for many years, often not until late adulthood, where once it would have been common to be involved in supporting the dying process from a much younger age. The removal of this lifetime of learning and acceptance can make it very challenging to start having conversations later on – with parents, children, and others.

Death cafes have been held for North Yorkshire Council staff to raise awareness of issues around death and dying, where topics such as the importance of writing a will, organ donation, funerals and sharing end of life wishes with loved ones have been discussed.



Recommendations

- Maximise opportunities with the development of the new Sport and Active Wellbeing service, alongside existing community provision, to increase physical activity and movement amongst older people, to support people to live well for longer.
- Ensure that falls prevention is a priority for joint working.
- Improve dementia diagnosis rates.
- Make sure that the voice of older people and age friendly network are involved as part of service user input when designing NHS and wider services.
- Council, NHS and other partners to work together to implement the recommendations and actions in the new **joint local health and wellbeing strategy**.

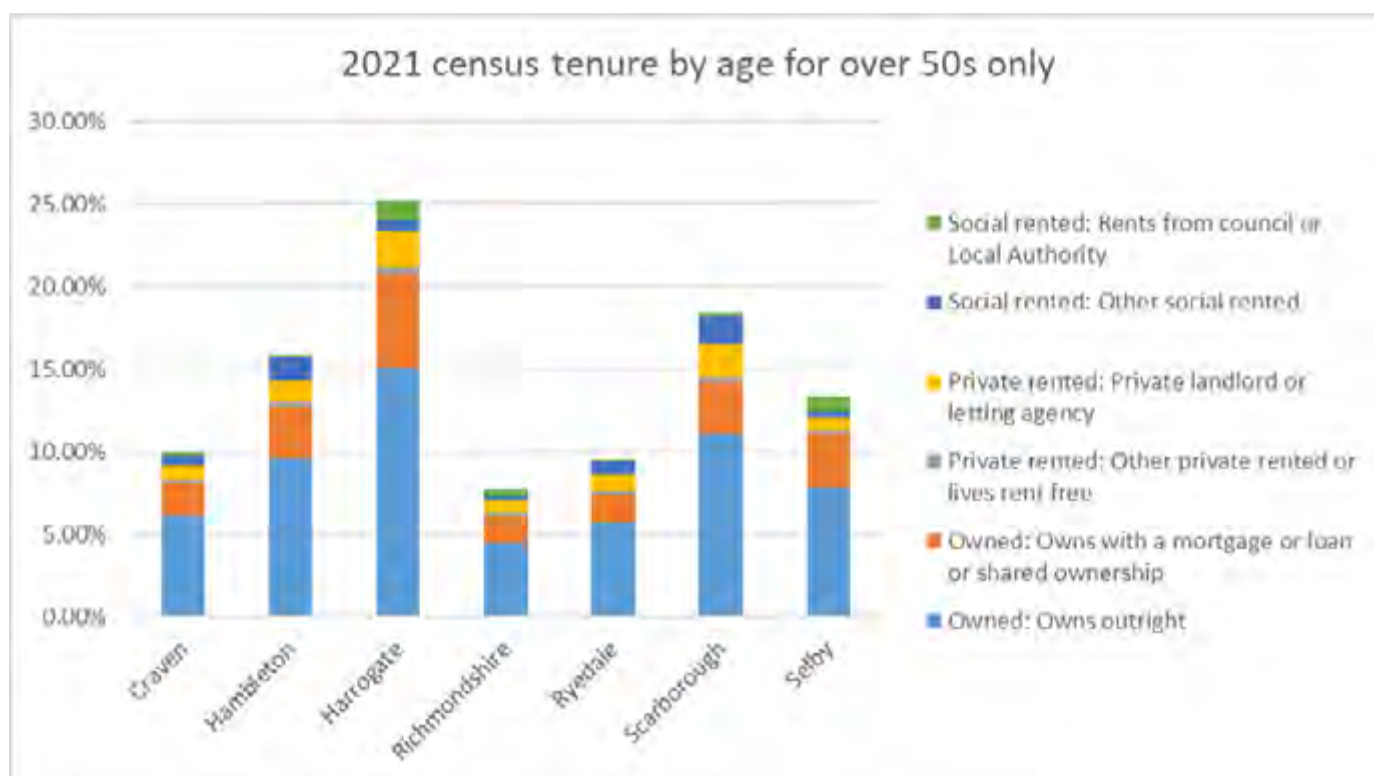
There needs to be a co-ordinated approach to physical activity, looking at:

- **Supporting community and leisure providers** - to work together, and with health providers, to tackle health inequalities and to ensure there is appropriate place-based and health focussed provision to support active ageing across North Yorkshire. This should include further development of universal offers that are age and ability appropriate such as aqua aerobics, strength and balance classes, as well as walking and gardening groups, through to targeted and specialist provision, as age related conditions increase. This will require support for the existing and developing workforce and a driving of the demand for provision, from both older people themselves and those who support them.
- **Positive messaging** – ensuring a person-centred approach that considers audience specific language and messages which resonate with people, focussing on their personal outcomes, rather than just those of commissioners and funders. For example, highlighting being and staying active to be able to play with grandchildren, or continue to enjoy hobbies, rather than an aspirational health benefit. Enjoyment should be a focus with activities providing opportunities for people to meet with others and have fun. Finding what is available should be easy for individuals interested in moving more as well as practitioners and support services wanting to signpost to appropriate provision. This should be supported by the roll out of further behaviour change and workforce development.
- **Making physical activity everyone's business** – physical activity should be at the heart of every intervention and decision, to ensure movement and activity is promoted and enabled and to avoid preventing or discouraging people from being active by poor infrastructure or resources. For example, if an older person is finding accessing the shops difficult, we should address ways to make that easier, such as supporting their balance and confidence, or identifying transport options, rather than finding an alternative that reduces movement. The impact on physical activity should be a noted consideration when new programmes/strategies are developed.
- **Care pathways** - provision of physical activity and movement should be embedded in care pathways for people living with long term health conditions and those at risk of falls, as well as in core services such as intermediate care etc.

Chapter 2: Housing



Safe, good-quality homes can maintain or improve physical and mental health, wellbeing and social connections. It is vital to have housing and support that allow people to age comfortably and safely within the community of their choosing.



Did you know?

Scarborough has one of the highest percentage of older households renting in the country according to Independent Age (**No place for older renters (independentage.org)**)

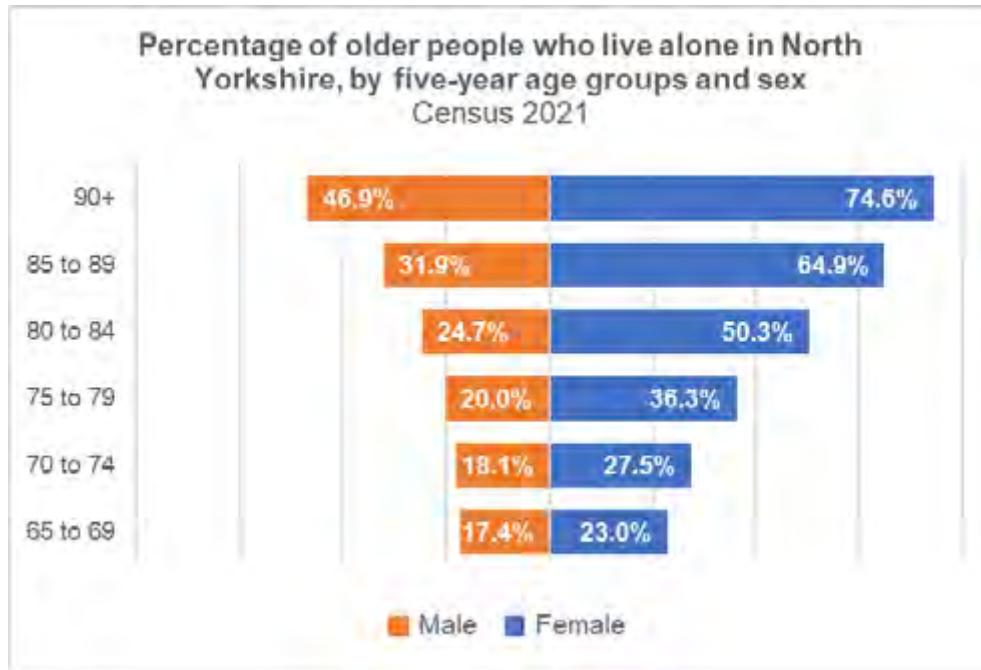
The majority of over 50s own their house outright. However, there has been a significant increase in the percentage of over 50s private renting. In the 2011 census, tenure for 3% of over 50s in 2011 was listed as privately rented or via a letting agency – in Scarborough in 2021 this was as high as 10.6%. All other areas of North Yorkshire have seen an increase in older people renting property.

Scarborough has been highlighted in a recent report (*reference 7*) by Independent Age as being in the top 20 areas with the highest proportion of older renters and has seen one of the biggest increases in the country. Of the top 20, these areas were more likely to be deprived, and 12 were coastal. The report points to growing inequalities between those who own their house outright and have a high income compared to those on a low income and renting privately. This needs to be explored further to find out what is driving the increase and the impact it has on residents. Alongside this, people who are renting often face challenges around affordability as they spend more of their fixed income on rent and have concerns about security of tenure.

The English Housing Survey (2021-22) shows 14% of all homes were deemed non-decent. Within the private rented sector, the proportion is higher at 23%. Based on these figures, it is **estimated that 38,500 of all homes across North Yorkshire are non-decent**, of which almost 12,000 will be privately rented.

Living alone

The likelihood of living alone increases across older age groups. Older women are more likely to live alone than older men. Almost 44,000 people aged 65 years and over in North Yorkshire were living alone according to the Census 2021; 36.7% of women and 21.0% of men.



Living alone is often associated with poor mental health and loneliness, however not everyone who lives alone will be lonely. It is important that people have access to social connections and activities and that there is the infrastructure in place to support this. Living alone in later life could have implications for future support needs as people may have access to fewer informal care networks.

Did you know?

The majority of older people do not live in a care home. Only 2.4% of over 65s live in care settings in North Yorkshire (3,651 people across the county).

Residents' Voices

We asked what people thought about their housing in North Yorkshire and the following themes were considered important:

Energy efficient/ better insulated	Availability of suitable housing	Easy to maintain	Price of housing
One level	Safe	Warm	Close to neighbours/ facilities
Different sized house	Adaptations/ improvements	Other (clean, multi- generational, parking)	Accessible

Most older people would prefer to remain in their own home, but many have fed back concerns about the availability of suitable housing if they did choose to move.

People wanted options beyond over-55s flats, with suggestions for more creative support options such as cohousing or home shares. The need for more suitable rented properties was also highlighted.

“Rightsizing”

Older people are not a homogenous group. Not everyone will want to “downsize” and move to a smaller house when they get older, although this is often the assumption.

Older people in North Yorkshire have fed back that they may like to consider a different sized house in the future if their house no longer meets their needs. However, this was not always about downsizing as some mentioned having more space for family or carers.

There needs to be a range of options available to support people to “rightsizing” in later life if they wish to do so. It is important to reframe the conversations so that rightsizing is promoted as a positive option and that it is not assumed that everyone wants to downsize.

Living conditions in rental accommodation

With increasing numbers of older people living in rented accommodation, concerns were expressed about the condition of some of these properties and the treatment of tenants.

As well as concerns around the quality of rented accommodation, some highlighted cost, including rent increases, and fear of eviction.

There was also a desire for more availability of other rental options for older people, such as increasing the number of rental properties available via housing associations.

“I don't want finding a decent, affordable home to feel like an unwinnable lottery”

“Recently moved from old house to a brand new flat - amazingly wonderful!”

“I cannot do anything with my gardens and often think it would be good if someone without a garden could use mine to grow whatever they wanted”

“Bedroom for carer”

“Space for family as they can't afford to buy due to low wages and high rents”

“Extend not move”

“I don't want to have to live in a town or city in my last years, there will be thousands like us that want to stay within our community but lack of suitable housing is against us”

Local Authority impact on housing

Poor quality housing is a major public health concern, and as a new council there are lots of opportunities to influence change and developments around housing provision. The council is a landlord of 8,500 properties and a new housing strategy has recently been approved. We have been working with the newly established housing management team to share feedback from older people and contribute to discussions about how housing services can support older people.

The strategy highlights challenges around an ageing population, and includes plans around extra care, updating and adapting council housing stock and working with health and social care colleagues to develop a holistic approach to supporting older people.

Did you know?

North Yorkshire Council has committed to build 500 council houses over the next 5 years and plans to deliver at least 2,500 new homes a year, of which 800 would be affordable homes. Second homes funding is being reinvested in housing provision.

In addition, the £12.7 million York and North Yorkshire Brownfield Housing Fund as part of the York and North Yorkshire Combined Authority aims to support the building of up to 1,000 homes.

The Fund will unlock housing development on brownfield land. This is among the key pledges of the region's devolution deal, and aims to help deliver affordable, accessible and low carbon housing, creating sustainable and high-quality places.


Planning

Having the right environment can play an important role in improving outcomes for older people. New housing developments need to include homes for life and homes that are accessible and can be adapted so that older people can live in their own homes for as long as they want to do so. Planners and developers should consider the needs of older people, particularly in areas where they live in greater numbers.

The local plan presents an opportunity to ensure there is the right infrastructure in place in anticipation of future population projections, and there is a range of provision suitable for older people.

Professor Whitty highlighted the need for environmental adaptation to allow older adults to maintain independence and quality of life. The outdoor environment is crucial in supporting people to access facilities and make social connections, such as access to public transport and community facilities. Small changes to the environment can make a big difference to the lives of older people.

Walking audits are a useful tool used in other areas to assess how age-friendly the environment is, such as footpaths, crossings and access to buildings. This is something that should be developed across North Yorkshire and the findings shared so that improvements can be made where possible.



**"No footpath
if you want to
go for a walk"**

Supported housing

To address challenges around housing, North Yorkshire Council has a clear ambition to deliver extra care housing (ECH); NYC is one of only a few local authorities investing in a dedicated resource to achieve this. Twenty-eight schemes operate across the county, delivering 1540 self-contained apartments, with 12 different housing providers. ECH replaces traditional residential care, contributes to community regeneration and creates local employment. The ECH programme applies passion with pragmatism and vision to make a positive impact on the lives of elderly and vulnerable people and their carers.

Large traditional housing schemes are not always viable in smaller communities, and apart from identifying and securing suitable sites, the topography and development costs associated with rurality can cost significantly more than urban schemes. This means that housing providers often have difficulty making schemes financially viable. However, North Yorkshire has achieved delivery of a number of rural ECH facilities at Esk Moors Lodge, Castleton; Sycamore Hall, Bainbridge and Bowland View, Bentham.

Escalating development costs, uncertainty over future central government grant funding, and increasing NYC grant funding contributions will impact the ability to expand the Extra Care programme. Plans are in place to commission 3 more schemes over the next few years together with the recommissioning of a framework to support delivery of traditional extra care, supported living, hybrid models of accommodation and, importantly, for smaller models of extra care. The future funding of schemes will be a challenge for both NYC and housing providers.



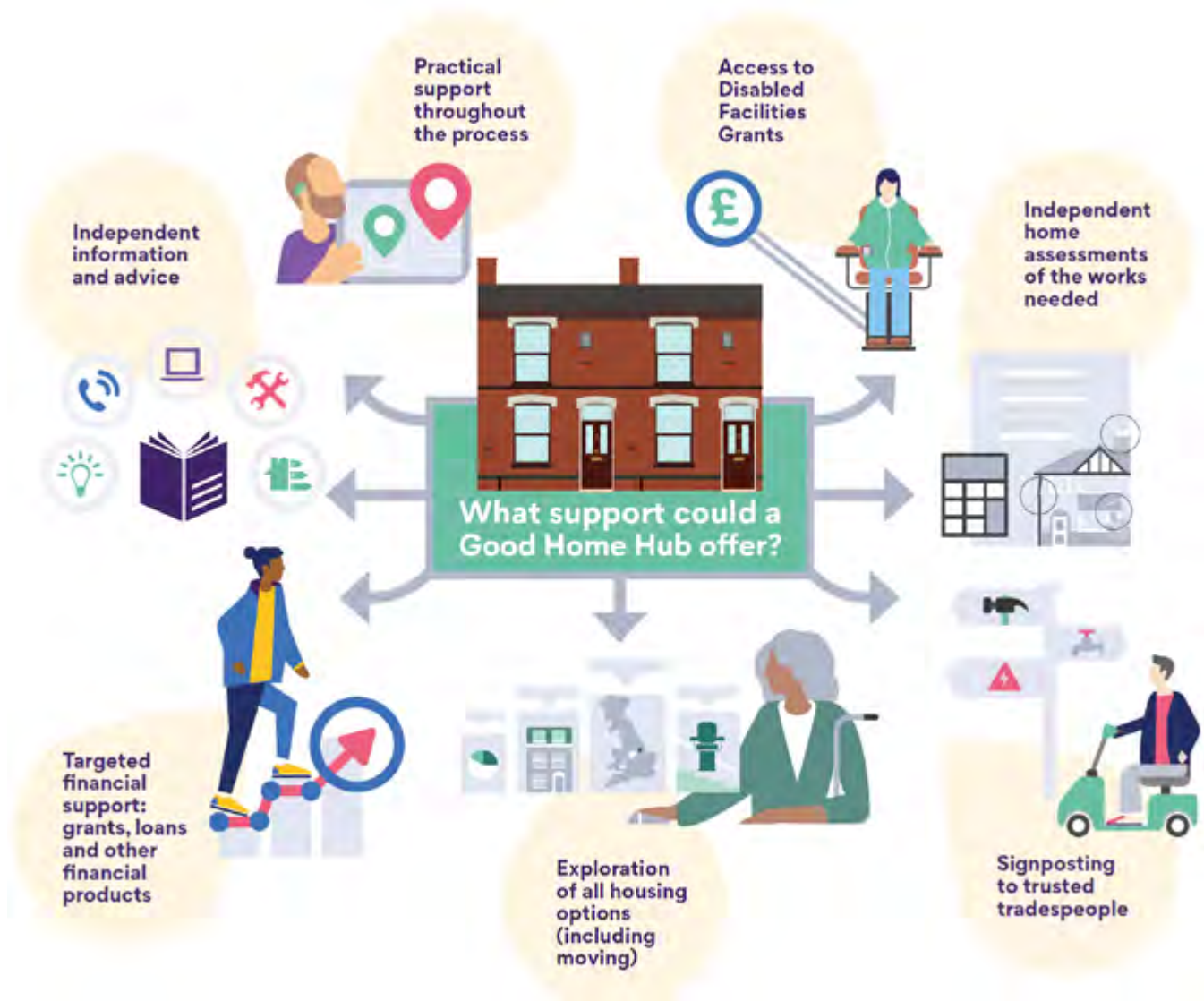
“NY’s policy of developing supported accommodation is really positive and is proving very successful. They are part of a community and adding something to the town.”
(Stakeholder comment)

20 Years of Extra Care Celebrations

The 20th anniversary of the Council’s pioneering Extra Care programme, which has helped thousands of older people live in their own homes for longer, was celebrated in May 2023 with a series of visits to meet staff and residents. Launched in North Yorkshire in 2003, there are now 28 housing schemes, with properties for rent and to buy, across the county. We are using the feedback from the visits to help us make our approach to Extra Care even stronger. In November 2023 we held a major conference on Extra Care with over 200 delegates, and from that, launched a new national Extra Care commissioning forum to share good practice.

Good Home Hubs

Many people need to make changes to keep their homes accessible, safe and warm but do not know where to turn for information and support. The Centre for Ageing Better is encouraging more areas to set up **Good Home Hub services**, an independent one-stop-shop service on all aspects of home repairs and adaptations, with support and signposting on everything from finding trusted tradespeople and identifying what work needs to be done, to how to finance repairs and improve energy efficiency. A hub can also include advice about housing options.



This service currently does not operate in North Yorkshire but there may be opportunities to explore the potential to develop something similar locally. It would not only benefit older people but all age groups - particularly disabled people.

“Need to get the infrastructure right to enable people to stay in their own homes” (stakeholder comment)

Trusted tradespeople

A concern raised regularly by older people is about access to trusted tradespeople and the cost of carrying out works on properties. Older people are more likely to own their property but if they are living on a low income or small pension then keeping on top of home improvements can be a challenge.

Since the launch of the new council, the handy person service that existed only in 2 areas has been extended to cover the whole county. The service supports NYC's delivery of statutory minor adaptations in the private sector. The countywide service delivers a range of adaptations from grab rails, to half steps and external hand rails.

There is the potential to develop this into a traded service to provide a trusted service.

Help at Home

The Help at Home gardening, decorating and odd job service covers the former Harrogate District area. The majority of people using the service are older and when a job is completed, they record whether a fall could have been prevented.

From April 2023 to March 2024, 101 jobs were noted as potentially preventing a fall. Of these:

- 79 people cited improved confidence as a result of accessing our support
- 68 people said they had improved wellbeing as a result of accessing our support
- 72 people said they felt less anxious as a result of accessing our support
- 58 respondents said all three

Types of work done include:

- Fitting a grab rail for a lady who struggles with her mobility: the grab rail is at the bedroom door to enable safe access in and out.
- Jet washing the patio, and the paths at the side and rear of a property to enable safe access.
- Cut back very overgrown garden for a lady who had had three strokes. She was unable to undertake the work herself and did not have the means to pay for a gardener. Access to the garden was made much safer.
- Asked to make a ramp for a wheelchair at a property to allow for easier access to the house. Client was worried about leaving the wheelchair outside and it made accessing her property much easier. She said 'So pleased to get the work done'.

More information is available here:

www.helpharrogate.org.uk/ripon-rural-services/helpathome/

"Grab rail is great and helps getting up the step and also helps my wife, as we were both uneasy on our feet" (NYC recipient of handyperson service)

"It's just getting the right kind of tradesmen in, which is a struggle in Harrogate always busy or impossible prices"

Energy efficiency and cold homes

Around a third of excess winter deaths can be directly attributed to cold homes and are therefore largely preventable. The impact of living in a cold home is well documented and can result in an increase in falls as well as impacting on mental health and social isolation.

People are often less likely to go out for fear of getting cold, and then returning to a cold home and being unable to get warm. Combined with the financial pressures of living in fuel poverty, all these factors could make someone living in a cold home more at risk of loneliness.

Cold homes are largely preventable. Making houses more energy efficient can reduce household bills, reduce fuel poverty and improve health outcomes, as well as ensuring that people have access to advice and support about heating their home.

Energy efficient/better insulated and warm was the most popular issue raised by older people in our recent engagement in relation to housing. The importance of homes being cheaper to heat was highlighted as a particular concern.

There is a strong desire to look at renewable/green home improvements amongst older people. However, many pointed out that there are restrictions preventing this in parts of the county with limited options, particularly for listed properties and properties in conservation areas.



"Need more options and help with alternative renewable energy sources such as solar (no gas in village, old properties not suitable for air source heat pumps)"

"We have certain restrictions on changing the outside (would like UPVC double glazing, solar panels)"

North Yorkshire Council has been successful in securing national funding for energy efficiency programmes to support some residents to upgrade their homes.

Projects include:

- Home Upgrade Grant which delivers retrofit measures (air source heat pumps, insulation, solar panels) to eligible homes across North Yorkshire.
- The Local Energy Advice Demonstrator (LEAD) programme: delivery of home energy plans with a view to those who are able to pay or can receive grant funding understanding what can be improved in their properties and then undertaking the measure, alongside upskilling/training of supply chain and general awareness.
- Energy Advice Service: person-centred support (including home visits) to support with reducing fuel poverty by reducing energy costs, increasing energy efficiency, and low-level measures (boiler servicing, draught proofing, warm packs etc).

However, cost has been highlighted as an issue as not everyone is eligible for these local and national upgrade programmes.

Home Upgrade Grant: Case Study



Geoffrey Evans recently had solar panels and loft insulation installed on his property in Northallerton, through the North Yorkshire HUG2 scheme. Geoffrey is 90 years old, lives alone and is receiving treatment for cancer. During our visit, he told us all about how much it meant to him to receive fully funded home upgrades: "As you get older you really start to feel the cold, so when I first read about your scheme in the local newspaper, I really jumped at the opportunity to keep my home warm... I was thrilled to hear my application was successful and I qualified... The loft insulation really appealed to me. Since installation I have noticed a big difference with the heat retention... Your team even put in extra fans to prevent condensation... I was also thrilled with the solar panels; I am receiving £2 a day just by selling back my extra energy... In large, I think I'm going to get my electricity for nothing. I can't wait to maximise the effect of the solar panels in summer... The savings encouraged me to get an energy reading app on my phone."

It is also important to note that overly warm homes can also impact on health.

“Older people are at most risk of extremes of heat and cold; lower income groups are disproportionately impacted by extreme weather by virtue of living in poorer quality housing in vulnerable locations and conditions and not being able to afford to move, and tenants are more vulnerable than owner-occupiers as they have less ability to modify their homes and to prepare for and recover from climate events.”

(Sir Michael Marmot, 2020)

In the future it is predicted that heatwaves are going to become more prevalent which will impact on health and wellbeing, particularly amongst the most vulnerable. During June to August 2022, there were 3,036 excess deaths in England with 33 in North Yorkshire (Excess deaths for all ages including COVID-19). The main causes of illness and death and illness during a heat wave are respiratory and cardiovascular diseases.

In our engagement, older people noted that it was important that housing is not just better insulated in winter but also *“well-ventilated in hot weather”*.



Recommendations

With 2,500 homes being built each year it is important that age-friendly housing is considered. Making new developments places where young and old can live together in a community that has access to facilities and can support independence and social interaction is key.

- Explore opportunities with the Mayoral Combined Authority to ensure healthy ageing is embedded into future plans e.g. around housing, transport and economic development.
- Establish a co-ordinated joined up approach to plan for the housing needs of older people now and in the future, exploring potential solutions such as setting up a “good home hub”, guidance for planners and developers and implementing adaptable standards.
- Embed the needs of older people into the local plan and planning decisions. Older people and developers should conduct walking audits to assess how age-friendly a neighbourhood is. Planners and public health should work together collaboratively.
- Ensure the voice of older people is listened to in all planning and housing strategies and developments, including co-production where possible.





Chapter 3: Employment and financial security

Retired households in North Yorkshire are estimated to contribute around £34 million per week to the economy (based on 2021 Census data on retired households and average weekly expenditure). National estimates suggest that consumer spending amongst over 50s will increase from 54p in every pound in 2018 to 63p in every pound by 2040. (*Reference 8*)

However, the amount of money received by retired households has gone down. Nationally, the median income for retired households decreased by 1.6% in 2022, from £26,300 to £25,900. Since then the cost of living will have had a further impact on this. There is still the perception that older “baby boomers” have lots of money and live in big houses with large pensions.

There are also inequalities across the county with 9.4% of over 65s in North Yorkshire living in poverty (Income Deprivation affecting Older People Index - IDOPI). Six out of the ten highest North Yorkshire wards for older people living in poverty are in Scarborough. Women are more likely to experience poverty in retirement than men, due to factors such as lower earnings when in employment and being more likely to take time out of work because of caring responsibilities. Bereavement can also contribute to poverty due to a loss of income.

The number of people aged 50 and over in North Yorkshire claiming Jobseeker's Allowance, plus those who claim Universal Credit and are required to seek work and be available for work, has increased from 2,065 in March 2023 to 2,180 in March 2024 (5.6% increase). Those aged 50-54 have seen the sharpest increase (up by 7.1%), while the increase for all ages 16 and over has been 3.4%.

According to the Centre for Ageing Better almost half of the poorest pensioners have no private or workplace pension and so rely entirely on state pension and other benefits. For pensioners on low incomes, pensions can be topped up with pension credits, but it is estimated that around 6,000 eligible North Yorkshire residents have not applied.

Older people living in poverty are more likely to remain in poverty compared to younger age groups.



Access to money

An issue highlighted regularly by older people is around access to cash and concerns that many services such as parking and shops are moving away from accepting cash payments.

Community First Yorkshire recently conducted a survey about moving towards a cashless society, and respondents strongly supported the need for businesses and services to continue to accept cash.

Scams

Of particular concern is the national increase in scams, with an estimated 19 million losing money to scams. (*Reference 9*) Fewer than a third of these are reported. Fraud affects people of all ages but Age UK's analysis revealed that those older people with higher incomes, or who lived alone, were more likely to report having been a victim of fraud. (*Reference 10*)

“There is the myth that everyone is loaded but there are hidden inequalities. People are good at hiding it. Food and healthy eating – don’t have same access to cheaper food in rural areas”

Pension Credit

Pension credit is extra money designed to help with daily living costs for people over state pension age and on a low income. Despite national campaigns, there is still a lack of awareness and misperceptions about eligibility, with the amount going unclaimed **estimated to be £1.7bn nationally**.

For older people, a successful application for Pension Credit could amount to an additional £3,300 a year to help with living costs, with even small Pension Credit awards granting eligibility to other benefits too. With rising costs of living, promoting Pension Credit is a key way in which we can support older adults to live well.

Pension Credit tops up weekly income to a guaranteed minimum level of £218.15 a week for single pensioners or £332.95 for couples. It is a tax-free payment for those who:

- have reached Pension Credit qualifying age, which is State Pension age, and
- live in Great Britain

Someone may still get Pension Credit if they:

- have not paid National Insurance contributions
- have some savings or a small pension
- live with their grown-up family
- own their own home

According to **DWP research** perceived ineligibility is the single most important reason for people not claiming Pension Credit. Many people think that home ownership bars people from claiming Pension Credits and many worry about how it interacts with other income sources. The stigma of claiming benefits and mistrust of or anxiety about bureaucracy are important secondary barriers.

There are **thousands of eligible non-recipients** (ENRs) of Pension Credit in North Yorkshire, and

Did you know?

You can use the **Pension Credit calculator** to find out how much Pension Credit someone could get – without giving any personal details.

single women are a particular concern with the largest number of ENRs by volume, although couples have the lowest rate of take-up.

Millions of pounds of benefits are going unclaimed by households in the county, with knock-on consequences for lower spending in the local economy.

The **wide range of other passported benefits** associated with Pension Credit means that older people who are not claiming are losing much more than the Pension Credit value itself.

Claiming Pension Credit can have major health and wellbeing implications. Gaining access to the Warm Home Allowance, money to help improve quality of diet, and to allow more regular social contact helps older people to help themselves and live independent lives. Claimants are then able to stay healthy and well as they grow older, which can in turn help take some burden off healthcare services.

There are **large geographical variations** in Pension Credit claims across North Yorkshire, and this is only partly explained by varying deprivation levels.

Other factors, such as being of **non-white ethnicity or privately renting**, are **further risk factors for pensioner poverty**. These risk factors may also influence the likelihood to claim Pension Credit, but there is limited data available to investigate this further.

Pension Credit is only part of the picture. Other benefits, such as Carers' Allowance, Disability Living Allowance and bereavement benefits also affect the financial security of older people and should also be considered alongside Pension Credit issues.

Increasing local uptake of pension credits

In early 2023 we looked into the possible numbers of people in North Yorkshire who may be eligible and not receiving pension credit. Our research suggested **over 6000 residents were eligible and not receiving pension credit** (StatExplore May 2023) equating to **at least £14 million not being received** (based on an average figure of £45/ week. This rises to a staggering £20 million if you take the DWP weekly figure of £67 not being claimed).

Working closely with Greater Manchester (who ran a very successful pension credit campaign) and Independent Age, along with North Yorkshire Council teams (Libraries, Revenues and Benefits, Living Well, Adult Social Care), Citizens Advice, North Yorkshire Fire and Rescue, Voluntary Sector groups across the county and others, we looked at ways to raise awareness regarding pension credit.

- Agreement was given for 26,000 pension credit flyers to go in the September 2023 Household Support Fund mailing – this is a targeted paper mailing aimed at anyone who is considered vulnerable or cannot pay for essentials in the county. These were provided free of charge by Independent Age.
- A further 5000 copies were shared amongst partner agencies and voluntary groups, and signposted people to the Independent Age website to get further information/leaflets free of charge.
- Independent Age also provide free 1 hour on-line 'Pension Credit Awareness Workshops' which have been shared across many NYC teams and partner agencies in the county. These have been well attended, all quickly fully booked leading to Independent Age adding more to meet demand and feedback has been very positive.

All parts of the campaign have been well received, with the partnership with Independent Age and the Household Support Fund continuing into the 2024 mailings.

'We didn't think we qualified for Pension Credit, and to be honest thought it was a benefit like the 'dole'. We were awarded Attendance Allowance, carer's allowance, Guarantee Credit and Savings Credit all back dated 3 months. We're now over £300 a week better off – it's really helped with our worries about the cost of living and eating into our savings.'

**Cathy and Steve, Richmond*

'Receiving an extra £255.10 per week has made a huge difference to us – we were choosing between heating or eating. We also found out we could have a free TV license and got free glasses and dentures.'

**Mr and Mrs Smith, Hambleton*

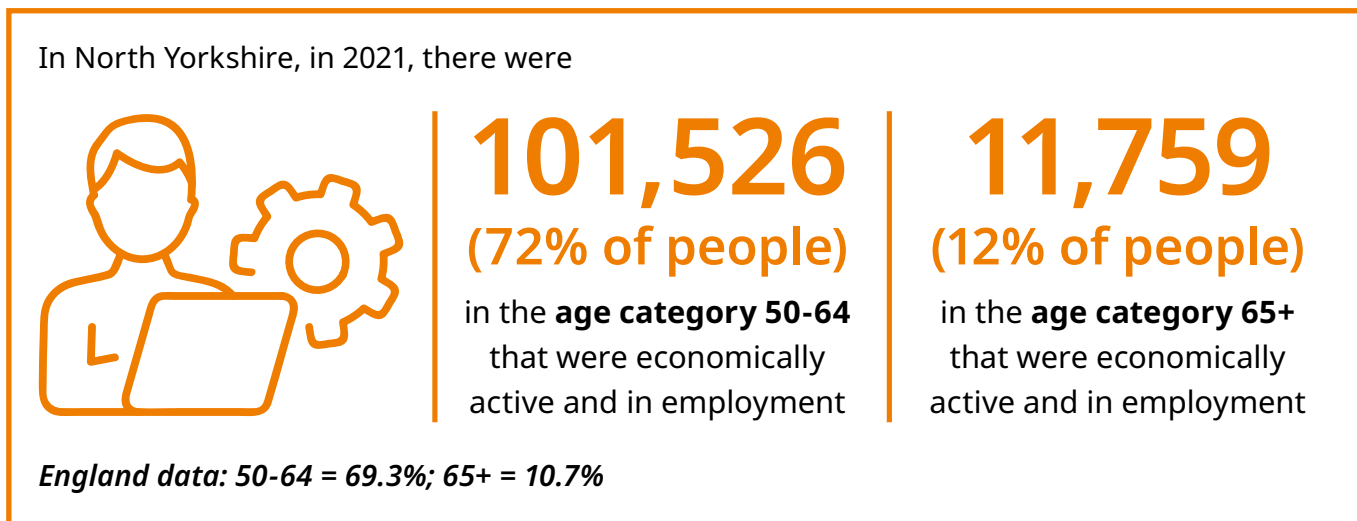
'I didn't know I was entitled to Pension Credit – I'm disabled and didn't have Carer's Allowance being claimed. I got an extra £79.03 a week plus a full council tax reduction of £20, and Local Housing Allowance which gave me another £86.30 towards my rent. It came through as a lump sum of over £2000 and I am also £185 per week better off! I'm over the moon.'

Peter, 97, Scarborough

**Names changed for anonymity. Ages and locations changed for anonymity.*

Employment

The importance of satisfying, fulfilling employment as part of a healthy lifestyle in older age is widely recognised. The importance of helping people to continue their careers later in life and to find suitable employment opportunities will increase with the growth in numbers of older people expected in the coming years.



The above infographic highlights that although North Yorkshire has similar to the national average number of 50-64s in employment, it is not back to pre-pandemic levels and is still significantly lower than younger age groups. For example, in the Craven area 97.5% of 25-49 year olds are in employment compared to 66.2% of 50-64 year olds. Data from the Department for Work and Pensions (DWP) points out that the main reasons people leave the workforce are because of sickness, injury or disability. This highlights the need to provide support for employees to manage health conditions so they can remain in employment. (Reference 9)

North Yorkshire Council's economic growth strategy highlights that our workforce is ageing at pace, with a **16% increase in workers aged 50+ in the past decade**, compared to a 1% increase in age groups overall. **Workers aged 50+ now comprise 42% of the workforce** versus 34% nationally. Yet a **quarter of our economically inactive population are early retirees** – almost double the proportion seen in the rest of Yorkshire and indeed the UK.



Unemployment rates in North Yorkshire are low at 1.3% against a national rate of 3.8% which means that businesses struggle to recruit to some jobs. Businesses are having to look at creative ways of employing and keeping staff, including supporting older workers.

Case Study

The Council held regular Employment and Skills Forums for businesses in Selby and discussed supporting older people in the workplace in terms of recruitment and retention.

This included the importance of offering flexible work schedules such as part time roles, job sharing and flexibility to help people balance personal commitments such as caring duties and health considerations. It was appreciated older employees may need additional support in relation to health considerations and therefore the adviser from DWP who supports 50+ job seekers was invited to join and shared details of the support DWP can offer in terms of disability confidence, especially with ergonomic workspaces and the funding available to make appropriate adjustments.

Training and development were highlighted as a two-way street, including upskilling and reskilling older employees to stay current with technology, and also older employees offering mentorship to younger colleagues to break down generational barriers. This can contribute to a positive culture of respect and inclusion and give employers confidence in employing those 50+ into the workplace.

Long term, employing those over 50 brings valuable experience, strong work ethics and diverse perspective to businesses. It has been shown to reduce staff turnover and enhances team stability. For society it promotes inclusivity, reduces discrimination and ensure economic stability for older adults who can then add value to the local economy.

The International Longevity Centre (ILC) reported in 2023 that nearly one in ten people (9.54%) over 50 but not yet at pensionable age left work involuntarily. Many of these would still like to work but have been pushed out because of a combination of redundancy, ill health or early retirement.

North Yorkshire Council's **Economic Growth strategy** has identified 3 priorities, one of which is people. Included in this is the need to retain and attract the talents of older workers. The strategy recommends: "the adoption of age-friendly employment practices to enable older workers, carers, armed service leavers and others to become or remain economically active."

In North Yorkshire Council, our demographics show that 41% of staff are aged 51 or above, rising to 46.3% for our non-school workforce. A recent report suggests that further discussion may be helpful to consider specific recruitment and retention details for this group and to consider future trends.

The engagement highlighted difficulties in securing jobs in North Yorkshire as people age.

Flexible working was also mentioned; however, not everyone is able to do this.

"I have been asked by my manager and by colleagues as to when I am thinking of retiring. This would not be asked of someone ten years younger than me. I am not thinking of retiring yet!"

"Look at working a 4 day a week for over 50+ would enable me to access more in my community"

The York and North Yorkshire Combined Authority has allocated UK Shared Prosperity Fund money to tackle some of the challenges in the shrinking labour market. One of the programmes is around supporting people aged 50+ to return to the workforce, and the following projects have been commissioned:

- Carers Plus are supporting carers to combine caring responsibilities with volunteering, training and employment in the Scarborough area
- Community Works are supporting men with mental health issues to gain skills and self-confidence linked to their Men in Sheds project
- Hambleton Community Action are supporting older people by providing volunteering opportunities.



There needs to be a wide range of support available, including options for re-training and help around becoming self-employed as self-employment becomes more common with age.

The **Age-friendly Employer Pledge** is a nationwide programme for employers who recognise the importance and value of older workers. Employers commit to improving work for people in their 50s and 60s (and beyond) and taking the necessary action to help them flourish in a multigenerational workforce.



More people are working later in life, but older workers often face prejudice and are overlooked. Employment rates drop after the age of 55, and over half of people have stopped working before state pension age.

Over 370 organisations across the UK have signed up to the pledge – including 26 Local Authorities and 77 charities, NHS Trusts, DWP and businesses, reflecting their commitment to being an age-friendly employer.

Find out more here:

[Age-friendly Employer Pledge | Centre for Ageing Better \(ageing-better.org.uk\)](https://ageing-better.org.uk)

In 2024, 62% of UK adults who paid into a workplace or personal pension scheme in the previous 12 months feel they will need to work past retirement age and over 50% feel they will never be able to retire. (Living Wage Foundation, 2024) (reference 10)

Preparation for retirement

Planning ahead for retirement needs to start early in a person's career so that they have enough money to live on when they do choose to retire, and it should be reviewed regularly. The cost of living crisis has driven up the cost of retirement and, according to recent research, (Reference 11) the average pension pot needed to meet basic needs in retirement has increased by 60% from £68,300 in 2021-22 to £107,800 in 2023-24, with an average income of £19,300 per year required to meet basic living standards. With challenges over the cost of living, 9% of employees reported stopping or reducing their pension contributions which will have an impact in their retirement income. This increased to 17% of those living below the real living wage stopping or reducing their contributions in the last 6 months. (Reference 10) As one in three of our residents are expected to be 65+ by 2043 it is essential that preparation for retirement is considered a priority to reduce post-work poverty.

"I got made redundant when I was in my 50's and it was very hard to get a job"



DWP Older Persons Champion: Anne Brewster MBE

The Department for Work and Pensions (DWP) employs a 50Plus Champion for North East Yorkshire and The Humber area. My role ensures people have the signposting information they need to make informed decisions for their later life. I work directly with Jobcentres, employers, and key partners such as North Yorkshire Council to help remove any barriers that are keeping older workers out of the jobs market.

It is estimated that 38% of working age people (equivalent to 12.5 million) are under-saving for retirement, impacting future financial resilience. I see in my work that 50 Plus customers are likely to be affected by low confidence, menopause, health and disability or caring pressures, and out of date skills or qualifications. Those barriers together can make it difficult to compete and progress in the jobs market.

Retiring later can make a huge difference to a retirement pot. There are other non-financial benefits of work such as developing a sense of purpose, having friends to combat loneliness as well as the health benefits of keeping active.

I work with Jobcentre staff to share good practices and inspire more people towards work. I also work with staff who have employer connections with the aim to get messages out about the best way to retain, retrain existing staff and how to adjust recruitment practices to ensure they are recruiting from the widest talent pool. People aged 50 and over have fantastic skills such as resilience, communication and problem solving. Employers tell me they know the benefits of employing people over 50, but their recruitment method may be putting off people 50 plus from applying.

There is a range of information available including on **menopause, caring responsibilities, flexible working, Job Help** and **Midlife MOTs**.

The Midlife MOT is a one-stop-shop support hub giving trusted services, tools and charity resources to help people to start thinking about work, health and money with future planning in mind. All ages can benefit from this. It is never too early to plan. The **Midlife MOT** site works on your personal goals to direct you to the support you need.

“Once your health deteriorates you feel you are being pushed out of your job”


“Jobs for 50 plus are hard to get but I won't be able to retire until I am 70”

*“I meet with 20 or more people each month who tell me they wish they'd prepared better.”
(Living Well Co-ordinator)*

Recommendations

- Employers in North Yorkshire need to promote age-friendly workplace practices and planning for retirement, including providing opportunities to enable employees to plan for later life such as through Midlife MOTs and to consider signing up to the age-friendly employer pledge
- Ensure support is provided for businesses to recruit and retain older workers
- Ensure there is support provided for over 50s to remain in/return to the workplace if they wish to do so
- Establish joined up working across the council and partners to increase awareness and uptake of pension credits and other benefits people are entitled to
- Organisations and businesses should consider how they attract older shoppers to access their services





Chapter 4: Making North Yorkshire an age- friendly place

What is an 'Age-Friendly Community?'

The age-friendly concept was developed by World Health Organization (WHO) in 2006. Age-friendly places encourage active ageing by optimizing opportunities for health, participation and security in order to enhance quality of life as people age.

"In practical terms, an age-friendly city adapts its structures and services to be accessible to and inclusive of older people with varying needs and capacities."

(World Health Organization (WHO) Global Age-friendly Cities: A Guide)

There are now **83 places in the UK** committed to making their communities better places to age (July 2023), which equates to over 26 million people living in an age-friendly community. In 2019 North Yorkshire was the first rural area in the UK to sign up to be an age-friendly community.

Age-friendly communities enable people to stay in places of their choosing as they age and to continue to play an active role in their communities for as long as possible. Age-friendly communities minimise barriers to participation as abilities decline.

The Centre for Ageing Better works with the Age-Friendly Network to provide guidance, connect places and offer support to member communities as they work towards making their services and infrastructure more age-friendly.

8 Domains of an age-friendly community (WHO)



Internationally, 'age-friendly' includes 50 years and over – we hear '50 isn't old' a lot! In practical terms Age-Friendly North Yorkshire aims to develop its infrastructure and services to be inclusive and accessible to all, ensuring that when people get to whatever age is 'old' they are leading a full and happy life.

'Adding years to life and life to years' Page 63

Accessibility

One of the most popular themes highlighted by older people was around accessibility, including pavements, roads, potholes, and other hazards. There were numerous comments relating to the surfaces of pavements and the difficulty walking on them, particularly if you use walking aids.

Trip hazards were highlighted as an issue on pavements and roads, and also along the high street.

The lack of benches in the right places was raised by the Scarborough older people's forum.

Accessible North Yorkshire

Feedback from the survey highlighted that a barrier to people going out was a lack of seating (without having to buy something) and toilets.

The 'Take a seat' campaign aims to tackle issues of social isolation, to motivate older people to feel confident about leaving their homes and play an active part in their local communities. It does this by encouraging local businesses and community premises to join the campaign and offer people a chance to take a seat and catch their breath. (Centre for Ageing Better). You can watch the take a seat video here: [Take a Seat](#)

Ripon Disability Forum introduced Take a Seat Ripon in 2019 where stores were given a chair and a banner to display. Harrogate Business Improvement District (BID) was also interested in introducing the scheme as it supported drawing shoppers back into the town centre following the pandemic, and together an audit was done of shops and benches in Harrogate Town Centre, focusing on age-friendliness. A local voluntary group, Community Fit, met weekly and completed a review of all outside benches close to the shopping areas – checking heights, arm rests and condition. This was fed back to the council's benches team who updated their records, and any damaged benches were mended/ replaced.

Accessible Selby/Tadcaster/Sherburn is a scheme very similar to Take a Seat with a disability focus. Following discussions with colleagues about initiatives for breast-feeding, autism, Parkinson's and dementia it was felt an all-inclusive accessible seating project would be a good idea.

Accessible North Yorkshire is currently being developed with input from Visit North Yorkshire, Harrogate, Skipton, Northallerton and Ripon BIDs, [Disability Action Yorkshire](#), and Ripon Disability Forum. The aim is that 'Accessible North Yorkshire' will act as the overarching umbrella initiative linking in with [AccessAble](#) and [Visit England](#). Individual towns across North Yorkshire can join with 'Accessible Harrogate' for example, or 'Accessible North Yorkshire'. A sticker will be displayed in business/organisations' windows highlighting that they offer a seat and are aware of accessible needs. This will be hosted centrally on a website with links to other websites.

Whilst the focus on Accessible North Yorkshire is for our residents, we are also mindful that the county is a popular holiday destination. Linking with Take a Seat, which is international, will support everyone being able to sit down if they need.

People are now able to find out locations of toilets across North Yorkshire via [this link](#) which includes accessible toilets. It would be good to have a similar search mechanism for accessible seating across the county.



International Day of Older People – 1st October

On 14th December 1990, the United Nations (UN) General Assembly voted to establish 1st October as the International Day of Older People (IDOP), and it was celebrated for the first time in 1991. The observance is a focus of ageing organisations and the UN programme on Ageing.

In 2021 North Yorkshire held its first IDOP celebration with Northallerton Over Fifties Forum, who meet on the first Thursday of every month at Northallerton Town Hall. In 2022 this grew to 5 events (Northallerton, Selby, Harrogate, Scarborough and Skipton) – coffee mornings with arts and crafts and partnership agencies joining including North Yorkshire Police (NYP), North Yorkshire Fire and Rescue Service (NYFRS), Energy Doctor, Rural Arts, Citizens Advice. A social media post generated the most comments ever for the North Yorkshire County Council (as was) site, the majority asking for more events across the county.

We listened to these comments and in 2023 there were more than 30 events spread widely across the county. An IDOP group of over 60 representatives has been formed including voluntary organisations, NYC, NYP, NYFRS and we are hoping 2024 will see a further increase in events and awareness, with buildings such as Skipton Town Hall, Scarborough Castle, NYC County Hall, Knaresborough Castle lit up to get people talking about age-friendly communities and healthy ageing.

Communities also sought to raise residents' awareness of age-friendly work by flying age-friendly flags in town centres, and using pop-up signage in busy places like supermarkets, leisure centres and libraries.





Age Friendly Network – a voice for North Yorkshire

Survey responses highlighted people asking for more opportunities to shape and be involved in what is happening in their communities. There were also requests for genuine consultation and co-production.

In partnership with **Community First Yorkshire**, we are developing a network for older people living in North Yorkshire to provide an independent representative voice. We want to encourage an age-friendly community across the county where people can live healthy, enjoyable and active lives.

Together with our network members, we will talk to local service providers, share information, raise the issues that really matter and work to make change happen.

To find out more about this project, watch the short animation [here](#).

North Yorkshire's Age-Friendly Network offers an opportunity for older people in our communities, their families and the organisations that support them to share information and individual views on the topics that really matter.

With the Network regularly consulted by key decision-makers, members' suggestions can actively help to shape change and encourage an age-friendly community where older residents can lead healthy, active lives.

As well as helping to influence service provision, members receive six network newsletters a year, designed to keep them up-to-date and informed on important issues and policies.

The Network is free to join and works to ensure that members are empowered, included and connected with the opportunities, choices and support they need to live the life they want.

Access to activities

Participating in leisure, cultural and spiritual activities in the community is important for health and wellbeing, a sense of belonging, and good relationships. Without social participation, people can experience loneliness and isolation. We learned from our conversations with older people that they access a wide range of groups.

From *Knit and Knatter* to *Pimms and Needles*, *Walks and Talks* to *Silver Swans*, *Sip and Share* to *Keep Moving Masham* – to name a few!

However, many have fed back that it was often difficult to find out what is going on and that they were missing out on a lot of information if they did not have digital access. Also not everyone felt confident to access a new group.

There were a number of comments about availability of activities for people who work.

“Not assuming that if you’re older then you want to do “older” things. Activities should be for a wide range of ages. More community work between our youth and the older generations”

“Have to drive quite far for evening class. I worry how I would access things when I can no longer drive”

“Staying Healthy, Independent and Connected” grants

Health and Adult Services awarded grants to 21 not-for-profit, voluntary and community organisations in 25 communities aimed at helping North Yorkshire residents to continue to live healthy, happy and independent lives within their local communities. The purpose of the grants approach is to:

- Prevent, reduce or delay people’s need for statutory social care
- Build the resilience of both our communities and residents so that people can live the life they want, where they want, supported by the resources available in their own community
- Build communities, places and spaces which offer people somewhere or someone to turn to when facing difficult times, and to support them to find solutions to their challenges and get on with life.

Volunteering

People who help out in their community – from everyday acts of neighbourliness to more formal volunteering roles – tend to be happier and to develop a better quality and quantity of relationships and sense of purpose in their lives. North Yorkshire has a wealth of voluntary organisations involving a wide range of ages – not only over 50s. Many of these organisations rely heavily on volunteers.

Nationally 65-74 year olds are the most likely age group to volunteer

even though volunteering numbers haven't fully recovered since the pandemic. 17% of 50-64-year olds, 23% of 65-74-year-olds and 19% of people aged 75 or older in England are involved in formal volunteering at least once a month. (Reference 12)

The increase in retirement age was highlighted as having an impact on people's ability to volunteer. Other reasons given for not being able to volunteer included being too old, carer responsibilities, looking after grandchildren, rural isolation, lack of public transport and working full time.

A number of people felt they had done enough already so are taking a step back or cutting back.



"Lots of older people volunteer. People who have worked all their life want to continue – (we are) not on the scrap heap"

"Been there done that – now in my 80's want to enjoy!"

Frances Elliot, CEO Harrogate and District Community Action (HADCA)

Each of us has so many talents and skills to share and there are so many flexible, enjoyable ways to help your local community and make new connections (some are things you could do from home, if you aren't able to get out as much as you used to).

If you're not sure how or where to start, look in the local paper for ideas, or look out for a local community group in your area, give them a call, tell them a bit about yourself and ask what they have heard is happening, that you might like to get involved in.

Anchor organisations

Building the success of the Community Support Organisation (CSO) model during COVID-19, the Stronger Communities Programme worked alongside the voluntary sector to identify how elements of the model could be retained and developed further to support the wider health, wellbeing and prevention, and community resilience agenda through a Community Anchor Organisation (CAO) network of locally rooted, place-based organisations.

In February 2023, as part of its established 'Achieve Together' investment programme, Stronger Communities created a new opportunity to establish a CAO model for North Yorkshire. Grants of £15,000 a year (for up to 3 years) have been made available from April 2023 for place-based organisations, based in principal service towns or centres, who are able to serve a wider hinterland. This investment supports the core aims of the wider Stronger Communities Programme which include:

- Prevention and reducing health inequalities
- Community resilience
- Social regeneration

Community Anchor Organisations are intended to build local partnerships and alliances to deliver services; build community resilience; support regeneration of their communities; improve people's financial resilience; and improve physical and mental wellbeing and reduce health inequalities.

Twenty-four place-based organisations from across the County are now working with the team. Recent activity has largely focused on the development and progression of organisational development action plans in 2023/24. A UK Shared Prosperity funded collaborative support programme for CAOs, delivered by Community First Yorkshire (CFY) and Better Connect has also been commissioned. This will be tailored to meet the needs of each organisation and will broadly include the development and delivery of resources and training, one to one support meetings, partnership events and networking opportunities.

For the nine localities where a suitable CAO has yet to be identified, development work continues to explore the potential for a locally rooted voluntary sector organisation to become a CAO, or to look at alternative models. Collaborative work with our key voluntary sector partners in our larger settlements of Harrogate and Scarborough to explore options for CAOs in an urban context also continues.



Digital inclusion

According to the Centre for Ageing Better, a quarter of people aged 65 and over do not have access to the internet at home. However, having the essential digital skills may be becoming more of a barrier to older people than online access. Only half of people aged over 75 have these skills and 43% of internet users aged 65 and over are limited in the activities they do online.



There are big concerns that there is an over-reliance on technology and the internet as a means of communication and that this should not be used as the only option for enabling people to access services and carry out tasks.

Each touchpoint we have with people must include a non-online option, such as phone or in-person assistance.

The most common theme in our engagement was the need for **not everything to be online**. We regularly have feedback with concerns about the reliance on/move towards information being available digitally and not to assume that everyone has access to or the willingness to use technology. Smart meters, on-line billing and apps were particularly highlighted.

There were numerous comments about wanting to talk to a person rather than having to go online. Many highlighted that not everyone has internet access or technology.

The availability of a phone number was important to many respondents. It was also highlighted that where an organisation does have a phone number you are still often directed online.

In larger organisations there is often one phone line for a number of services "which sometimes leaves me feeling worse than before I started. It was better when there were dedicated services, e.g., information centres or drop-ins for things like housing or travel."

It was also highlighted through the survey that not everyone has access to broadband and sometimes there is a poor signal.

Concerns about being scammed on-line was also raised during the engagement.

Suggestions were made about where information could be shared such as libraries or through community organisations.

There were a few comments about the difficulties of reading information online.

"Accessible - not just a website - sometimes a human is required to answer questions"

"Too many phone contacts and online replacements are time consuming and frustrating, and make no allowance for hearing difficulties"

"Fed up with the digitalisation of the information"

The **Digital Inclusion Group for North Yorkshire (NYDIG)** aims to bring together leads in digital inclusion to share good practice and learning. It is recognised the cross-sector importance of digital inclusion in an area that has been traditionally limited in terms of resources and capacity but has growing interest and investment. Working together will ensure we can build on good work and ensure cumulative impact, avoiding duplication and leveraging all opportunity.

As part of this the NYDIG will act as a steering group for the UK Shared Prosperity Fund (UKSPF) and Integrated Care Systems (ICS) funded work.

UK Shared Prosperity Fund (SPF) – Digital Hub Support Programme

The UK SPF Digital Hub Support Programme aims to increase digital inclusion support across North Yorkshire through new digital inclusion projects and offers. It intends to develop sustainable digital hubs across the county and upskill volunteers and employees to become digital champions.

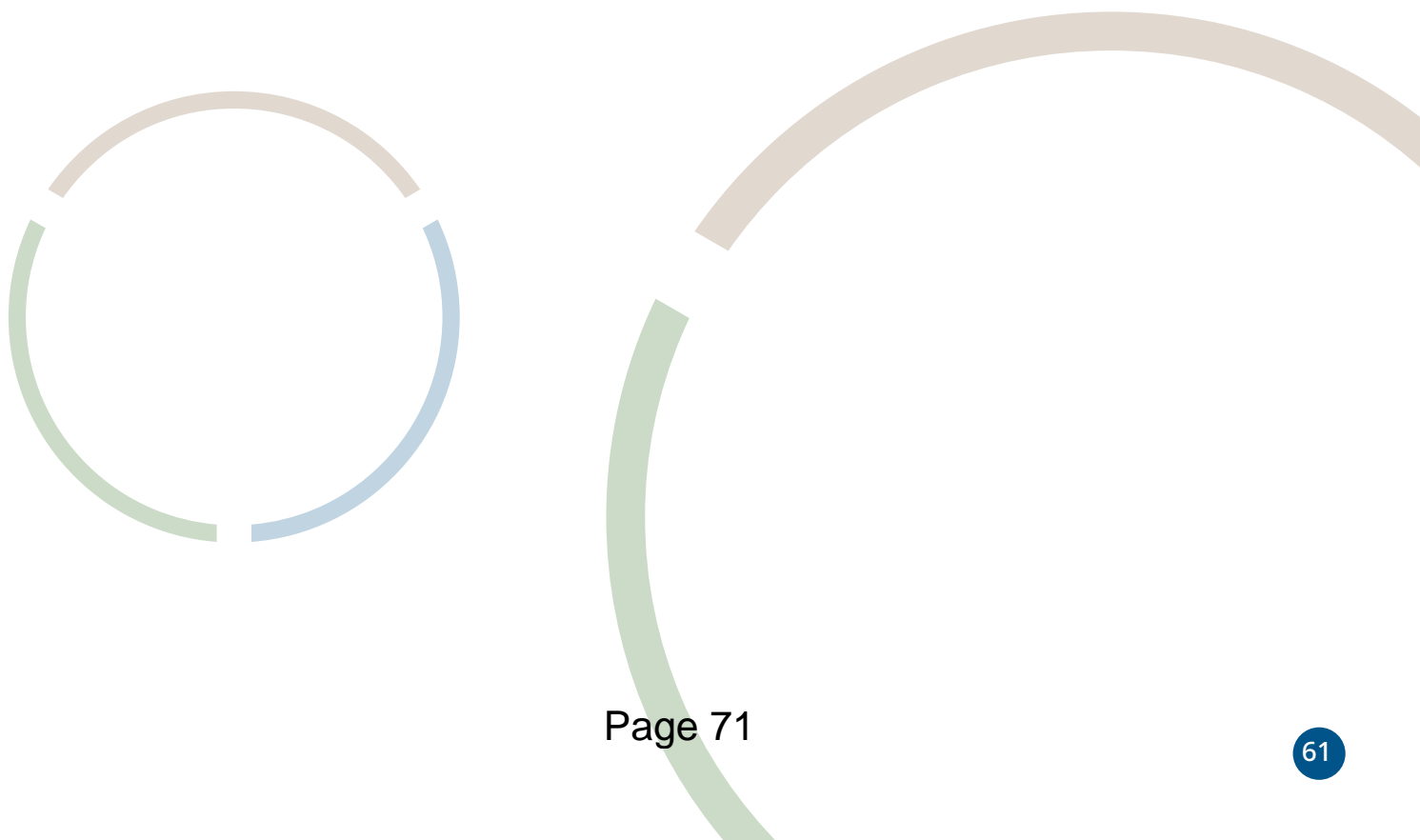
The programme enables organisations to access capital funding to purchase equipment, support with infrastructure, revenue funding for start-up costs and volunteer co-ordination, and access to training to upskill volunteers or existing staff to be digital champions. The digital champions will then support people to access digital services alongside other relevant information, advice and services with the overall aim of improving well-being and reducing health inequalities.

The first round of funding provided just over £200,000 to 19 organisations to fund their digital projects. Projects ranged from hubs based in village halls to more mobile hubs through sessions being run on a double decker bus and the mobile library service. A second round of funding has recently closed (July 2024), with the hope that a similar number of projects can be funded again.

Whilst the funding is not specifically age related, most has been aimed at the over 50s, with some looking at intergenerational support.

Further information about the programme can be found here:

[Digital Inclusion Programme | North Yorkshire Council](#)



One of the recipients of the Shared Prosperity Fund digital grants was **Nidderdale Plus**, a registered charity providing services and linking people and organisations across the wider Nidderdale area.

The Digital Champions service at Nidderdale Plus aims to help people get online, increase their level of digital skills, and to ensure that people stay safe when they are online. Champions support with activities such as helping set up an email address, showing a learner how to use video calling, helping people pursue their hobbies and interests online, and making learners aware of how they can stay safe online.

'When we started the Digital Champion programme back in November 2021, we always thought it would be time limited—maybe two years at the most. What we have found is that the demand for the service is steadily growing and attendance at the sessions more than doubled from year one to year two, and is set to grow again in year three. We continue to attract new learners, but, importantly, established learners need to continue to attend sessions in order to cement their skills and build confidence in using the internet. Skilling-up people who have had no prior knowledge of the internet and how it can benefit their daily life is a time consuming process for our Digital Champion Coordinator and her team of volunteers, but ultimately, very worthwhile for all who are involved.

We continue to run five weekly sessions in villages across Nidderdale, and this year will add three more sessions in more remote locations. We will also be running a Digital Switchover campaign from August-December 2024 to ensure that people are aware of the big change that is coming to their landline, and can potentially benefit more fully from the new broadband service that will be providing their phone line.'

Helen Flynn CEO Nidderdale Plus

Watch the video for more information: [Digital Champions – Nidderdale Plus](#)

Case Study

Barbara had never owned a digital device, done anything online or had a broadband connection to her property. She had no prior knowledge or digital skills.

Barbara first attended our drop-in sessions in 2022. Having no digital device, she was loaned a smartphone and was given a pre-loaded SIM card with data to last her 6 months. Attending our drop-in sessions most weeks she has slowly gained confidence and built her skills. She can now make and receive calls, texts, video calling using Apple FaceTime and WhatsApp. She has a grandson in Australia and a relative in America, so being able to do this has been a huge benefit. Barbara can now receive, reply to and compose emails. She is now also confident to have a go at applying for online banking with her US bank account.

Recently Barbara has completed an application form for a Blue Badge, and can now manage her US bank account online. She also uses the apps, Pressreader and Borrowbox to access free ebooks and newspapers using her library membership.'

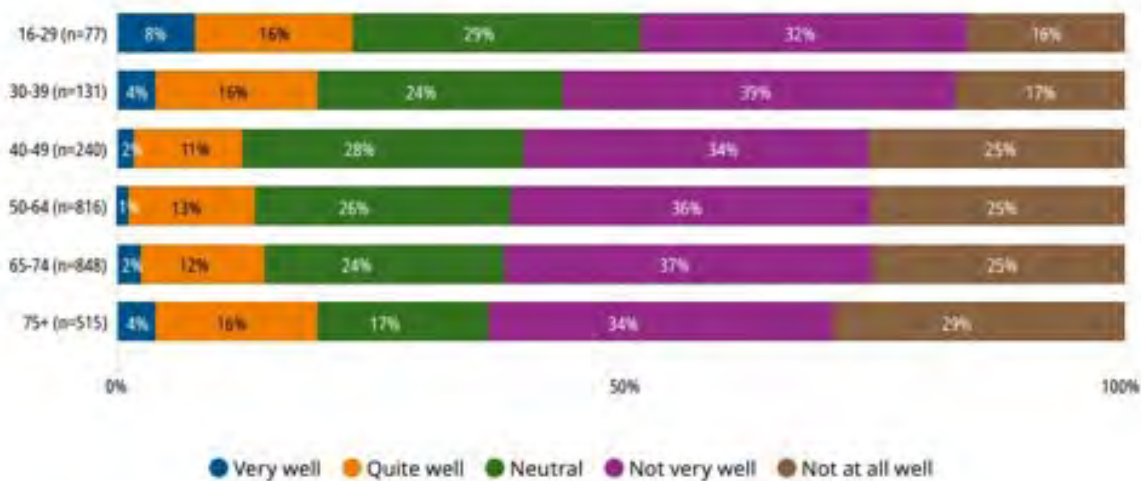


Transport

Affordable, reliable and convenient transport options enable older people to get out and about and continue to do things that matter to them. Whether it's going shopping, meeting friends or attending an appointment, good transport is essential to everyone. Recent analysis for the Council's **bus service improvement plan** highlights that since the COVID-19 pandemic, passenger numbers have taken time to recover, and although fare paying passengers have largely returned to pre-pandemic levels this figure remains much lower for concessionary pass users at around 70%. This has particularly affected rural routes where older passengers represented a greater proportion of users.

The North Yorkshire Let's Talk Transport survey asked residents how the transport system in North Yorkshire meets their needs. The majority of those in the 50-64 and 65-74 age groups responded "Not very well" or "Not at all well" and only 14% responded that the transport system meets their needs "Very well" or "Quite well."

Figure 5: How well do you feel the transport system in North Yorkshire meets your needs by age group



Source: Let's Talk Transport Survey

It should be noted when comparing between age groups that there are fewer respondents in the younger age groups, and that younger respondents are more likely to live in the urban areas of the county and so differences between age groups may reflect the differences in the urban and rural transport system rather than differences between how they age.

In the age-friendly engagement with older people, the following themes around transport were identified:

- Frequency/ timings/ reliability
- Lack of public transport
- Use a car
- Trains
- Community transport
- Cost of transport
- Cycling
- Happy with provision
- Accessibility
- Other (car share, information easily available, taxis)

The most common theme was around the frequency/ timings/reliability of bus services. Most of these related to not being able to access services or activities due to the restrictive timetable, with a number of comments about buses stopping in the afternoon. An example was given of a bus travelling to Richmond but with no return service, and buses running once or twice a week in some areas.

It was highlighted that public transport also varied by season.

There were a number of comments about the reliability of public transport.

With the increase in retirement age, access to work was mentioned a few times, particularly in relation to timings.

The **Council Plan** highlights challenges around transport, particularly in rural areas where commercial services are less sustainable due to population density. Less than 40% of parishes have a bus service operating more than three days per week. Government funding has been secured through Network North to address feedback from the Let's Talk Transport survey. Plans include strengthening bus routes through higher frequency and improvements to evening and weekend services; improving information and customer experience through better marketing and promotion as well as providing additional customer service support at very busy bus stations; and maintenance/improvements to bus service infrastructure such as bus stops and signage. As highlighted earlier, access to toilets is a barrier to getting out and about so it is important that people are aware of where they can access public toilets and how close they are to transport facilities.

The North Yorkshire Age Friendly Network needs to be more involved in discussions with the Council's transport team and transport organisations.

"The buses are often empty as time spent at destination is short or all day with nothing in between"

"The summer timetable is not too bad but in winter I will be confined to home"

"Travelling by bus or train is a complete gamble"



Ageism

Despite age being a protected characteristic there is still often a negative perception of older people. Throughout the engagement, we heard concerns about ageism. One lady reported that on two occasions she had been told by the surgeon that she needed an operation but due to her age “she was not worth bothering with” (at 70 and again at 80). Others fed back that they were discriminated against in the workplace or in their community.

A large number of comments in the engagement related to not being valued by their community or feeling excluded due to their age.

“(Ageism) It's rife and self evident throughout UK society. Condescending and patronising comments in the media and in the streets are only symptoms of the underlying discrimination against the elderly”

“Whilst discrimination is expressly covered, inadvertent consequences happen all the time - e.g. restrictions on bus pass use preventing early attendance at medical/dental, social and so forth”

Age-friendly photo competition

Images of older people in the press are frequently negative, using terms such as vulnerable, dementia and using pictures of frail old people with wrinkly hands.

To link with this report, a photography competition was launched to develop a library of North Yorkshire photographs showing positive and realistic images of over 50s in a bid to challenge negative and stereotypical views of older age. We will use these images to showcase and celebrate the contribution made to society and to change the narrative that older people are vulnerable. The images will also be used in a photo exhibition that will tour the county around International Day of Older People.



← **This**
or **this** →



The Centre for Ageing Better have developed a [library of age positive images](#) which is free to use – we look forward to having a similar library for North Yorkshire.

Recommendations

- Building on the work that has already taken place to becoming an age-friendly community, apply to the World Health Organization's global network of age-friendly communities. Consider how this will be managed in North Yorkshire, linking in with emerging locality planning.
- There needs to be a co-ordinated approach to promoting and celebrating the contribution that older people make to the North Yorkshire community. This includes work to challenge stigma and ageism and an ongoing communications campaign that is co-produced with older people.
- Organisations and services should consider how they communicate with older people and ensure that non-digital options are available
- Services to engage with the North Yorkshire Age Friendly Network to ensure the voice of older people informs decision making and the development of services, including transport, housing, and planning.
- Multi-generation programmes should be developed to bring generations together that will benefit all ages



Summary of recommendations

Overarching Recommendations

- All agencies and services to consider the projected increase in older people and what this means for their services, in particular ensuring the infrastructure is in place to prepare for this., whether you are NHS, council e.g. planning and transport, voluntary sector, combined authority etc.
- Ensure there is accountability for multi-agency approaches to healthy ageing. A co-ordinated response should make sure that planning takes place to respond to the current and future needs of older people and, in particular, in areas where numbers will be highest.

Chapter 1: Health and Reducing Inequalities

- Maximise opportunities with the development of the new Sport and Active Wellbeing service, alongside existing community provision, to increase physical activity and movement amongst older people, to support people to live well for longer.
- Ensure that falls prevention is a priority for joint working.
- Improve dementia diagnosis rates.
- Make sure that the voice of older people and age friendly network are involved as part of service user input when designing NHS and wider services.
- Council, NHS and other partners to work together to implement the recommendations and actions in the new **joint local health and wellbeing strategy**.

Chapter 2: Housing

With 2,500 homes being built each year it is important that age-friendly housing is considered. Making new developments places where young and old can live together in a community that has access to facilities and can support independence and social interaction is key.

- Explore opportunities with the Mayoral Combined Authority to ensure healthy ageing is embedded into future plans e.g. around housing, transport and economic development.
- Establish a co-ordinated joined up approach to plan for the housing needs of older people now and in the future, exploring potential solutions such as setting up a “good home hub”, guidance for planners and developers and implementing adaptable standards.
- Embed the needs of older people into the local plan and planning decisions. Older people and developers should conduct walking audits to assess how age-friendly a neighbourhood is. Planners and public health should work together collaboratively.
- Ensure the voice of older people is listened to in all planning and housing strategies and developments, including co-production where possible.

Summary of recommendations

Chapter 3: Employment and financial security

- Employers in North Yorkshire need to promote age-friendly workplace practices and planning for retirement, including providing opportunities to enable employees to plan for later life such as through Midlife MOTs and to consider signing up to the age-friendly employer pledge
- Ensure support is provided for businesses to recruit and retain older workers
- Ensure there is support provided for over 50s to remain in/return to the workplace if they wish to do so
- Establish joined up working across the council and partners to increase awareness and uptake of pension credits and other benefits people are entitled to
- Organisations and businesses should consider how they attract older shoppers to access their services

Chapter 4: Making North Yorkshire an age-friendly place

- Building on the work that has already taken place to becoming an age-friendly community, apply to the World Health Organization's global network of age-friendly communities. Consider how this will be managed in North Yorkshire, linking in with emerging locality planning.
- There needs to be a co-ordinated approach to promoting and celebrating the contribution that older people make to the North Yorkshire community. This includes work to challenge stigma and ageism and an ongoing communications campaign that is co-produced with older people.
- Organisations and services should consider how they communicate with older people and ensure that non-digital options are available
- Services to engage with the North Yorkshire Age Friendly Network to ensure the voice of older people informs decision making and the development of services, including transport, housing, and planning.
- Multi-generation programmes should be developed to bring generations together that will benefit all ages

Update on 2022/23 recommendations

In Our Words: a Child's Life in North Yorkshire

Health and Wellbeing Board
North Yorkshire



In Our Words: a Child's Life in North Yorkshire

Director of Public Health Annual Report 2022-23



All ages	
<p>Ensure all young people's needs are seen as an integral part of relevant strategies, policies and needs assessments.</p>	<p>Public health is a key partner in the development of all strategies and needs assessments which affect children and young people, with young people-specific surveys, engagement exercises and consultations taking place.</p>
<p>Look at ways of "poverty-proofing" the lives of children, young people and their families, whatever their ages, including supporting childcare to give parents more employment options and increased access to healthy, affordable food.</p>	<p>Monies from the Humber North Yorkshire ICB Health Inequalities funding have been used to commission Children North East (CNE) to complete a 'Poverty Proofing the School Day' (PPSD) project.</p>
<p>Monitor the uptake of all digital programmes to ensure that the most vulnerable are not excluded from modern forms of intervention e.g. Healthy Families (which is delivered exclusively online)</p>	<p>We monitor the take-up and performance of digital offers such as the Healthy Child Programme app and parenting courses, and identify where greater support is needed.</p>
<p>Our services should consider not just the needs of the children and young people, but also those of their parents and carers, including support networks in more isolated rural or coastal areas.</p>	<p>We adopt a holistic approach and work with whole families; examples include cost of living, improving rural and coastal health, health promotion and work around teenage pregnancy.</p>

Update on 2022/23 recommendations

Mental health and wellbeing	
Work closely with our NHS partners, and all organisations, to prioritise children and young people's mental health and wellbeing with a focus on:	
Perinatal mental health	Perinatal mental health is considered through a range of interventions, including the Healthy Child Programme 0-5 pillar, data and intelligence, multi-agency working, and the 'Ask Me' campaign.
Whole family wellbeing	The whole family approach is also seen as key within mental health, as well as physical health and healthy lifestyles. We invest in a number of programmes including the Solihull Parenting Programme.
Embed the iThrive model in all organisations throughout our county to help children to identify and manage their emotions and worries, and build resilience and wellbeing.	We are about to embark on a children and young people's mental health system transformation programme, including looking at the best way in which to embed iThrive at all levels of the mental health system.
Increase the focus on mental health, wellbeing and resilience to support young people to stay in school, particularly through stressful periods and ensure all young people have someone they can talk to and trust.	It is recognised that school attendance is a highly complex issue. We are examining the interaction between health and school attendance, working with strategic partnerships and building wellbeing into a range of initiatives.

Maternity: 1001 days	
Encourage commissioning organisations to think-family.	Initiatives to support the health of children and parents are integrated into services, including the 0-19 healthy child service, the Solihull parenting programme, vaccination at ante-natal appointments and working in partnership to provide support in localities where it is most needed.
Explore smoking in pregnancy and pregnancy vaccination take-up in Craven.	We are ensuring that we have accurate data consistently across the county, and investigating ways in which we can improve the currently declining pertussis vaccinations in pregnancy.

Update on 2022/23 recommendations

Early Years	
Prioritise school readiness and ensure all partner agencies, including the NHS, are working to this aim.	Our Healthy Child Programme uses the 2-2½ year developmental assessment to identify issues which may result in problems with school readiness, and we have a Speech, Language and Communication Network across the county (the most common area in which children do not achieve expected milestones).
Ensure we investigate the disparity between those achieving expected developmental milestones before 3 years and then at 4-5 years.	We are currently looking into how we would compare outcome data from 2½ year developmental assessments with data from the different developmental assessment completed at the end of Reception.
Continue to promote healthy lifestyles in the youngest children, including early toothbrushing, active play, healthy eating and sleep.	We have a range of health promoting initiatives within Early Years settings which we are expanding, including Healthy Early Years award programme and oral health programme.
We need to initiate a deep dive into the causes of hospital admissions and examine whether the measures we have in place adequately address the risk factors.	We are continuing to explore data, including different sources of data, including hospital admissions vs attendances.
Further promote parenting courses particularly in those areas and those population groups with lower uptake.	We are evaluating data for the Solihull parenting courses and Healthy Child service to form a comprehensive picture of the needs of families in the different areas in the county.

Primary	
Promote further uptake of the Healthy Schools Award Scheme and support families with healthy lifestyle choices.	Over 80% of North Yorkshire schools are now involved in the award programme. We are including York schools and we have developed a Gold renewal award and a Platinum award.
Explore how changes to dental commissioning can be used to support access to NHS dentistry, particularly for migrant children and other vulnerable groups.	Humber North Yorkshire ICB has developed flexible commissioning arrangements in order to allow dentists to alter their activities to tailor pathways with the Healthy Child Programme and Children and Family Services to meet the needs of vulnerable families. This gives our most vulnerable children and young people better access to dental health services.
Increase the focus within primary schools around online safety from the earliest years, enabling parents to manage screen use.	Schools are supported around safe screentime use, and data around online safety will be updated when the 2024 Growing Up in North Yorkshire (GUNY) results are available. We will feed this into the refreshed Being Young in North Yorkshire Strategy and our healthy schools modules.

Update on 2022/23 recommendations

Secondary and late adolescence Whilst the chapters are separate, it was clear, when deciding upon recommendations, that many of the aspects important to young adults apply from secondary school onwards. Therefore, it was sensible to combine the two.	
Continue to promote physical activity and healthy eating habits.	There are a variety of health-promoting workstreams within North Yorkshire including the Healthy Schools Award Programme, the Healthy Families Service, provided by Brimhams Active and school food work around healthy food.
Ensure a multi-agency approach to tackling the use of substances, including nicotine products, alcohol and drugs.	We are currently developing the prevention chapter of the new North Yorkshire Substance Use Strategy, entitled "Priority 3: Achieve a generational shift in (prevent) demand for substances."
Work with safeguarding partners around maximising online safety.	As with the primary school data, we use the GUNY data to show both the positives and negatives around CYP usage of screens and technology. We liaise regularly with safeguarding partners.
Ensure services which span young people and adults have robust processes around the transitions period.	Youth to adult services transition periods are seen as a key priority in multiple workstreams, including children's mental health, special educational needs (SEND) and physical health services.
Ensure a co-ordinated, multi-agency approach to sexual health services including young people's age-appropriate awareness of contraceptive services.	The North Yorkshire Teenage Pregnancy Partnership and the Scarborough Task Group continue to coordinate action across the county. YorSexualHealth is working with young people to ensure services effectively connect with young people.

You can find more detail on progress on the recommendations from the 2022/23 report in this [appendix: \[link to be added\]](#)

Acknowledgements

Our grateful thanks and appreciation to all the people, community groups, organisations and colleagues who so generously contributed their time, experiences and expertise to this report.

- North Yorkshire Sport
- North Yorkshire Council teams (housing, leisure, health and adult services, transport, economic development)
- North Yorkshire and York Combined Authority
- Age UK North Yorkshire Coast and Moors
- Age UK North Yorkshire and Darlington
- Age UK Craven
- Boroughbridge Community Care
- Brimhams Active
- HADCA
- Department for Work and Pensions (DWP)
- Harrogate Supporting Older People
- Dance for Wellbeing
- Skipton Step Into Action
- Carers Resource
- Home Instead
- Nidderdale Plus
- Community First Yorkshire
- Humber and North Yorkshire ICB
- All the older people who contributed their ideas and views
- Any other contributors who we have inadvertently missed from this list

Glossary

CAO/CSO – Community Anchor Organisation/Community Support Organisation

CMO – Chief Medical Officer

DWP – Department for Work and Pensions

ECH – Extra care housing

ENRS – Eligible but not receiving

GUNY – Growing up in North Yorkshire

HNY – Humber and North Yorkshire

ICB – Integrated Care Board

NYC – North Yorkshire Council

NYDIG – North Yorkshire Digital Inclusion Group

ONS – Office for National Statistics

SPF – Shared Prosperity Fund

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4. **Childlessness at the end of life: evidence from rural Wales** WENGER G. Clare Ageing and Society, 29(8), November 2009, pp.1243-1259. Cambridge University Press
5. **Briefing paper on people ageing without children**, Ageing without Children, 2019
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7. **No place for old renters**, Independent Age, Jan 2024
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8. **Maximising the Longevity Dividend**, International Longevity Centre, 2019
<https://ilcuk.org.uk/wp-content/uploads/2019/12/Maximising-the-longevity-dividend.pdf>
9. **National Trading Standards news article**, Oct 2023
19 million lose money to scams but fewer than a third report - National Trading Standards
10. **Age UK press release**, 2019
OLDER PERSON BECOMES FRAUD VICTIM EVERY 40 SECONDS | PRESS RELEASE | AGE UK
11. **Economic Labour Status of individuals aged 50 and over**, DWP. Sept 2023
<https://www.gov.uk/government/statistics/economic-labour-market-status-of-individuals-aged-50-and-over-trends-over-time-september-2023/economic-labour-market-status-of-individuals-aged-50-and-over-trends-over-time-september-2023#:~:text=Older%20adults%20in%20general%20are,long%2Dterm%20unemployed%E2%80%9D>
12. <https://www.livingwage.org.uk/retirement-realities-understanding-impact-cost-living-pension-savings-and-retirement-expectations>
13. <https://www.resolutionfoundation.org/app/uploads/2024/09/Living-pension.pdf>
14. **How to help ensure older people can make the most of volunteering opportunities**
Centre for Ageing Better (ageing-better.org.uk)

Photo Exhibition



Photo Exhibition





TERMS OF REFERENCE

1. Core Functions

- 1.1 The Health and Social Care Act 2012 requires the Council to establish a Health and Wellbeing Board (the Board) for its area to encourage the improvement and integration of working of health and social care for North Yorkshire.
- 1.2 To promote integration and partnership across the Council's area, including promoting joined up commissioning plans across the NHS and Social Care.
- 1.3 To support joint commissioning and pooled budgets.
- 1.4 To assess the needs of the population in the Council's area and lead the statutory Joint Strategic Needs Assessment (JSNA) and the Joint Health and Wellbeing Strategy (JHWS).
- 1.5 To be a forum for discussions about strategic and operational co-ordination in the delivery of services already commissioned

2. Key responsibilities

The main responsibilities of the Board are:

- (a) to actively participate in the development of Integrated Care Strategies of the Integrated Care Partnerships (ICP) within North Yorkshire, by working with the ICPs collaboratively and iteratively;
- (b) to ensure the JSNA (including the Pharmaceutical Needs Assessment) based on the needs of the population in the Council's area, is prepared and implemented effectively with the aim of improving healthy life expectancy and reducing health inequalities and to undertake an annual review;
- (c) to determine priorities, prepare and publish the JHWS for North Yorkshire, and undertake an annual review;
- (d) to be mindful of, and include, throughout its activities, a concern for both adults' and children's health and wellbeing;
- (e) to encourage integrated working between health and social care commissioners including the provision of advice, assistance or other support to encourage arrangements under Section 75 of the National Health Service Act 2006, such as leading commissioning, pooling budgets and/or integrated provision in connection with the provision of Health and Social Care Services; and to sign off the Integrated Better Care Fund submission annually
- (f) to encourage closer working between the commissioners and providers of health-related services, with local government services and, as part of that to
 - advise relevant commissioners whether their plans observe the JHWS and to express concerns to the ICP and the Local Authority, respectively, if the content of their plans deviate from the JHWS;

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- ensure the effective commissioning of services to help to deliver the priorities of the JHWS and to achieve public health outcomes; and
 - provide advice to commissioners and providers of health-related services on meeting the assessed needs of the population through effective interventions to improve health
- (g) to provide strong leadership, system leadership and direction to the health and wellbeing agenda by agreeing priority outcomes for the JHWS;
 - (h) to provide a platform for partners to work together to ensure the people of North Yorkshire are able to benefit from improvements in health and wellbeing;
 - (i) to undertake any of the other functions that are delegated to the Board by the Council under Section 196 (2) of the Health and Social Care Act 2012;
 - (j) to advise all commissioners and providers of health and social care services as to whether their commissioning plans observe the JHWS and to express concerns to the ICP and the Local Authority, respectively, if the content of their commissioning plans deviate from the JHWS;
 - (k) to engage with commissioners to ensure the effective commissioning of services to help to deliver the priorities of the JHWS and to achieve public health outcomes;
 - (l) to provide advice to commissioners and providers of health-related services on meeting the assessed needs of the population through effective interventions to improve health;
 - (m) to receive reports annually through arrangements agreed by the UK Health Security Agency/Office for Health Improvement and Disparities and the Director of Public Health on health protection arrangements, including the local agreement of health protection priorities;
 - (n) to receive such other reports as are necessary for the reporting of serious incidents or areas of concern with a view to ensuring acute and longer-term health protection responses and strategies of the Office for Health Improvement and Disparities/the UK Health Security Agency are delivered to properly meet the health needs of the local population;
 - (o) to report annually to NHS England, as part of their annual assessment of the ICSs, as to how the ICSs have helped to deliver the JHWS;
 - (p) to receive the Annual Report of the Director of Public Health and to consider its recommendations in reviewing the priorities for improving population health and reducing health inequalities
 - (q) to work with ICPs and Integrated Care Boards (ICB) to determine the integrated approach that will best deliver holistic care and prevention activities, including action on wider determinants in their communities.
 - (r) to comment on the draft Five Year Forward Plan produced by each ICB in North Yorkshire.

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3. **Governance and Accountability**

3.1 The Board will be accountable for its actions to its individual member organisations.

3.2 The Board will liaise with key statutory and non-statutory national and local organisations which have a remit to improve health and wellbeing in North Yorkshire. These will include the Integrated Care Systems; North Yorkshire Safeguarding Adults Board and North Yorkshire Safeguarding Children's Partnership.

- 3.3 The representatives of the Board will be accountable through their own organisations decision making processes for the decisions they take. It is expected that Members of the Board will have delegated authority from their organisations to take decisions within the Terms of Reference of the Board.
- 3.4 Subject to 3.5 below, decisions within the Terms of Reference will be taken at meetings and will not normally be subject to ratification or a formal decision process by partner organisations (provided that at least 10 days notice of forthcoming decisions has been given). However, where decisions are not within the delegated authority of the Board Members, these will be subject to ratification by constituent bodies.
- 3.5 The JHWS will be referred to the Council for approval as part of the Council's Policy Framework.

4. Conduct of Meetings of the Board

- 4.1 Meetings of the Board will, generally, take place six times each year to transact formal business and will normally be conducted in public, subject to the provisions as to exempt information. Additional meetings of the Board may be called if agreed by the Chair to be essential to the effective transaction of business. Prior to or following the formal meetings, the Board may hold Workshop/Development Sessions. These are informal and not open to the public.
- 4.2 The meetings will be chaired by the Leader of the Council, or the relevant portfolio holder nominated by him/her. The Deputy Chair will be appointed by the Board and should be from the NHS.
- 4.3 The quorum for meetings shall be 50% of its statutory membership.
- 4.4 Any elected Member of North Yorkshire Council can substitute for one of the elected Member representatives on the Board, should they not be able to attend. A substitute for other Members of the Board, by someone from their organisation, is also permissible.
- 4.5 It will invariably be clear that a consensus has been reached and the Chair will seek confirmation that Members agree with the recommendations. A formal vote will be taken where this consensus is not evident.
- 4.6 Each meeting will have an open forum session where members of the public may ask questions. In accordance with the Council's Constitution, notice of these questions will normally be required three days prior to the meeting
- 4.7 The Chair shall sign the Minutes as a true and accurate record of the meeting.
- 4.8 The Board may establish sub committees to undertake any of their functions.
- 4.9 The Board may set up strategy groups or task groups to assist in the undertaking of its functions, but such strategy or task groups will not have decision making powers, and Terms of Reference for each group will be agreed.

5. Codes of Conduct and Conflicts of Interest

- 5.1 All non-Councillor Members of the Board who are entitled to vote are governed by the County Council's Members' Code of Conduct and will be required to sign an undertaking to comply with the Code and complete a register of interests and observe requirements as to the disclosure of pecuniary and other interests. Members of the Board are prohibited from participating in discussion or voting on any matter relating to an interest contained in their register of interests.

6. Scrutiny

- 6.1 The discharge of functions by the Board falls within the remit of scrutiny, but the core functions are not subject to call-in as they are not Executive functions.

- 6.2 The review and scrutiny of decisions made, or other action taken by the Board in connection with discharge of the functions of the Local Authority, should not be undertaken by any Member who is involved in the decision making or actions of the Board. Accordingly, Members of the Board should not also be Members of any Overview and Scrutiny Committee(s) undertaking scrutiny of the work and decisions of the Board.

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NORTH YORKSHIRE HEALTH AND WELLBEING BOARD – MODUS OPERANDI

A. How we treat each other

1. The Board operates on a basis of mutual respect, openness and honesty, recognising that each individual brings something to the table, with all partners having a key role to play.
2. We will make sure 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.
3. We have a responsibility to model exemplary behaviour, inside and outside of the Health and Wellbeing Board 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.

B. How we will conduct business

4. Whilst there may be occasions when the Board needs to meet in person (or chooses to), the default, wherever possible, will be to meet remotely. This recognises the geography of North Yorkshire and the commitments faced by Members. This is a pragmatic approach and one that has a positive impact on the environment.
5. Whilst there is provision for a vote to be taken on any matter, the Board operates on a basis of consensus and so this will rarely be necessary.
6. The Board will seek to add value by not approving strategies that Members have already been sighted on elsewhere but, rather, meeting in Workshop mode to consider topics where, together, Members can seek to improve outcomes for the health and wellbeing of people in the county.
7. In developing relationships, the Board will be guided by the following principles:-
 - building from the bottom up;
 - following the principles of subsidiarity;
 - having clear governance, with clarity at all times on which statutory duties are being discharged;
 - ensuring that leadership is collaborative;
 - avoiding duplication of existing governance mechanisms; and
 - being led by a focus on population health and health inequalities

January 2023

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Health and Wellbeing Board

North Yorkshire



DRAFT ROLLING WORK PROGRAMME 2024/2025

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

WEDNESDAY 27TH NOVEMBER 2024

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ITEM	LEAD	REPORT DEADLINE	COMMENTS
West Yorkshire Place Update	Director of Integrated Health and Care, Bradford District and Craven Health and Care Partnership	Monday 18 th November 2024	Standing Item Generally these will be verbal updates
Humber and North Yorkshire Place Update	Chief Operating Officer, Humber and North Yorkshire Integrated Care System	Monday 18 th November 2024	Standing Item Generally these will be verbal updates
Review of Health and Wellbeing Board – Terms of Reference	Christian Brennan		
Director of Public Health Annual Report	Director of Public Health	Monday 18 th November 2024	Report and presentation

North Yorkshire Safeguarding Children's Partnership (NYSCP) Annual Report 2023/2024	Executive Chair and Independent Scrutineer NYSCP and Corporate Director, Children and Young People's Service	Monday 18 th November 2024	Presentation
North Yorkshire Safeguarding Adults Board Annual Report 2023/2024	Chair of Safeguarding Adults Board	Monday 18 th November 2024	Presentation
Rolling Work Programme	Assistant Democratic Services Officer	Monday 18 th November 2024	Standing Item

MONDAY 13TH JANUARY 2025

ITEM	LEAD	REPORT DEADLINE	COMMENTS
West Yorkshire Place Update	Director of Integrated Health and Care, Bradford District and Craven Health and Care Partnership	Thursday 2 nd January 2025	Standing Item Generally these will be verbal updates
Humber and North Yorkshire Place Update	Chief Operating Officer, Humber and North Yorkshire Integrated Care System	Thursday 2 nd January 2025	Standing Item Generally these will be verbal updates
Better Care Fund 2025/2026	Director of Public Health	Thursday 2 nd January 2025	To approve the Better Care Fund
North Yorkshire Joint Local Health and Wellbeing Strategy – Delivery Plan	Director of Public Health	Monday 18 th November 2024	Update on progress against the key priorities in the Strategy

Rolling Work Programme	Assistant Democratic Services Officer	Thursday 2 nd January 2025	Standing Item
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ROLLING WORK PROGRAMME 2024/2025

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FRIDAY 14TH MARCH 2025			
ITEM	LEAD	REPORT DEADLINE	COMMENTS
West Yorkshire Place Update	Director of Integrated Health and Care, Bradford District and Craven Health and Care Partnership	Wednesday 5 th March 2025	Standing Item Generally these will be verbal updates
Humber and North Yorkshire Place Update	Chief Operating Officer, Humber and North Yorkshire Integrated Care System	Wednesday 5 th March 2025	Standing Item Generally these will be verbal updates
North Yorkshire Joint Local Health and Wellbeing Strategy – Delivery Plan	Director of Public Health	Wednesday 5 th March 2025	Update on progress against the key priorities in the Strategy
Consideration of Rolling Work Programme for 2025/2026	Principal Democratic Services Officer	Wednesday 5 th March 2025	To approve the Work Programme for the year ahead

ROLLING WORK PROGRAMME 2024/2025

OTHER *POTENTIAL* ITEMS – NO SET DATE ALLOCATED

- NHS Operating Framework and Local Government Financial Settlement – update
- Regeneration
- Local Plan Update

WORKSHOPS

None scheduled.

***POTENTIAL* WORKSHOPS**

On occasions (on the same day as a Board meeting), the Board holds a Workshop on an area of mutual interest to partners.

Future Workshops might include:-

- Spotlight Session on the Joint Local Health and Wellbeing Strategy
- Health of the Nation
- Health and Inequalities
- Coastal/Rural Initiatives
- Local Plan Update (suggested as an Agenda Item for the meeting on 18th September 2024 but may lend itself to a Workshop)

Assistant Democratic Services Officer

November 2024

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