



Agenda

Meeting: North Yorkshire Health and Wellbeing Board

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

Date: Friday, 14 March 2025

Time: 11.30 am

Venue: 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 on the first page of the Agenda if you would like to find out more.

This is an informal meeting of the Committee that is being held remotely using Microsoft Teams. Members of the public wishing to attend will be sent a link to the meeting, upon request. Again, please contact the Democratic Services Officer concerned for further information.

Business

1. **Welcome by the Chair**
2. **Apologies for Absence**
3. **Minutes of the Meeting held on 27 November, 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, Christian.brennan@northyorkshire.gov.uk of Democratic and Scrutiny 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 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. Better Care Fund Monitoring - Quarter 1, 2, 3** (Pages 9 - 14)
- 9. North Yorkshire Joint Health and Wellbeing Strategy - Delivery Update** (Pages 15 - 22)
- 10. Rolling Work Programme** (Pages 23 - 28)
- 11. Any Other Items**
Any other items which the Chair agrees should be considered as a matter of urgency because of special circumstances
- 12. Date of Next Meeting**

Members are reminded that in order to expedite business at the meeting and enable Officers to adapt their presentations to address areas causing difficulty, they are encouraged to contact Officers prior to the meeting with questions on technical issues in reports.

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

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Barry Khan
Assistant Chief Executive
(Legal and Democratic Services)

County Hall
Northallerton

Thursday, 6 March 2025

North Yorkshire County Council

North Yorkshire Health and Wellbeing Board

Minutes of the remote meeting held on Wednesday, 27 November 2024 commencing at 10.30 am.

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
Matt Sandford	Director of Partnership and Place – Bradford District and Craven Health and Care Partnership
Louise Wallace	Director of Public Health, NYC
Richard Webb	Corporate Director of Health and Adult Services, North Yorkshire Council
Ashley Green	Chief Executive Officer, Healthwatch, North Yorkshire
David Kerr	Tees, Esk and Wear Valley NHS Foundation Trust

In Attendance:-

Christian Brennan, Assistant Democratic Services Officer.

Adrian Green,

Sally Lichfield

Heather Pearson

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:-

- Cllr Janet Sanderson
- Sally Tyrer
- Jonathan Coulter
- Zoe Campbell, substituted by David Kerr
- Brian Cranna

3 Minutes of the Meeting held on 18 September 2024

That the Minutes of the meeting held on 18 September, 2024 be approved.

4 Declarations of Interest

There were no declarations of interest.

5 Public Participation

No public questions were received.

6 West Yorkshire Place Update

Richard Webb presented his update:-

- Work on the business case for Airedale Hospital was ongoing and he had taken part in conversations between Airedale Trust and Bradford and Craven NHS Place.
- North Yorkshire Highways and Transport colleagues had linked up with Bradford Council colleagues on implications inherent to the build.
- In addition to the hospital there was work regarding the development of community services and its links to the hospital, which included a stock-take around Craven.
- Conversations with Matt Sanford and Helen Palmer had discussed how to maintain a balance between the issues faced by Bradford and Craven in their respective localities.

Matt Sanford introduced himself to the Board, and presented his update:-

- He noted the work that had gone into the Partnership and Governance Review, which had looked at new personnel, the structure, relationships with partners, and how they would add value.
- The Airedale Electronic Patient Record had been postponed due to issues that had arisen.
- The Strategic Outline Case (SOC) for the New Hospital Programme was due in December following timelines set by NHS England.
- The ICB would sign off on the SOC at its first stage, subject to some caveats around ensuring the co-production of clinical strategies; engagement with partners; and transport for communities.
- Regarding financial challenges he advised that they had a dedicated programme, Closing the Gap, which focused on immediate concerns for the financial year, in addition to setting plans around transformation and maintaining financial alignment in future years.

The Chair asked, given the new government, how secure the plans were around Airedale Hospital; and what would be delivered with the money? Mr Sandford responded that Airedale Hospital was unaffected by the national review as its issues pertained to RAAC. Further, that they were unsure how the money was going to be designated. From a place perspective this brought uncertainty due to the potential misalignment between a clinical strategy that met the needs of the population, and having the services that may be used to deliver towards that strategy.

Cllr Simon Myers noted the importance of Skipton General and provision in Settle, which served a purpose in addition to Airedale Hospital. Mr Sandford confirmed he was aware of the importance of these centres. Mr Webb added that arrangements had been made within the Council for colleagues to look at what potential opportunities were available with Craven based assets.

Ashley Green asked which authority would be responsible for the issues around Airedale Hospital transport. Further, he highlighted the value and role of the Voluntary, Community, and Social Enterprise sector during the current financial challenges. Mr Webb advised the intention was for Bradford and North Yorkshire to work together.

7 Humber and North Yorkshire Place Update

Wendy Balmain presented her update:-

- She summarised the We Need to Talk survey to the Board.
- A draft proposal on place delegation was in development and would eventually be shared with Health and Wellbeing Board partners.
- There was an ongoing piece of work to define the core offer for primary community services of the six North Yorkshire places which involved harmonising around 150 clinical policies. They were collaborating with the Leaders Forum on what the offer should look like, for example, integrated neighbourhood communities and how these would operate.
- They were managing the collective action of GP's, and had arrived at agreements with 63 out of 64 practices. An in-depth review would examine what a longer-term offer would look like, which would involve an assessment of local enhanced services. A combined approach around local enhanced services would bring some consistency across the six places and 143 practices across the ICB, of which 64 sit in North Yorkshire.
- The Winter Plans had been submitted. It was amongst a build-up of pressure on hospitals. There were improvements in discharges from hospital beds due to changes in criteria, and were close to the target of 15%, down from 24% over the last year.

Richard Webb gave his update:-

- That if the place delegation was approved, the Health and Wellbeing Board could hold a workshop session on its implications.
- There was also an extensive national consultation on the NHS 10-year plan, and shared with others that they were welcome to take part.
- He spoke of the Workshop in a Box toolkit which, further to consideration, may be of value to the Health and Wellbeing Board.
- There was significant pressure on adult social care, which had accumulated a £7.7 million overspend mostly from hospital care and partly from pressures in the care market and changes to ordinary resident legal rules.
- They were currently consulting on the budget and had been focusing on ways to increase independence and care at home such as extra care schemes, prevention, and increased investment into leisure and children's services. In addition, efforts were being made into creating a single leisure service.

Matt Sandford advised that they planned to utilise existing networks in regard to the Workshop in a Box Toolkit. Alongside this, they intended to increase engagement around their financial challenge and decision making so that observers could understand the reasoning behind those decisions. He also added that they intended for West Yorkshire Place, on behalf of voluntary and care sector colleagues, to compile a piece on national insurance and living wage increases, to be raised nationally. It would be helpful for the region to have consistency and would therefore speak with Stephen Eames on this.

The Chair asked whether Mr Sandford was sighted on the situation regarding GP collective action. Mr Sandford responded that primary care was under Helen Palmer, but that they had not seen the scale of challenge felt elsewhere.

8 Director of Public Health Annual Report

Louise Wallace introduced the report. She reminded the Board it was a statutory responsibility to write a public health annual report. The focus this year was on healthy aging, which would be reflected in some of the report's recommendations. North Yorkshire did on average have a higher proportion of old people than other parts of the country at 25% of the population, and set to increase to 33% by 2043. She also brought attention to and thanked those who participated in a photo competition which was part of the report and sought to show the ways people remained healthy and well in older age. She summarised the conclusion of the report as highlighting the need for public services to prepare for an increase in older people, to be aware of ageism, and ensure communities were age friendly.

Cllr Simon Myers spoke about how the report was relevant to the Council's approaches on, for example, housing, which should meet the needs of all residents; and leisure services, that have a role in keeping elderly residents healthy. The report would be useful to refer back to and remind decision makers of these issues.

Wendy Balmain thanked Louise for the report which she would share throughout the ICB. She agreed it was important to have reports that educated on issues like frailty and good financial health going into old age. On deprivation and health inequality she felt that the impact of having a large proportion of old people in the region was occasionally overlooked since it imparted a higher level of investment in terms of care.

Richard Webb thought the campaign on positive imagery was beneficial to combatting stereotypes on aging. He acknowledged that there were many people of older age who still worked and contributed to society as well as those who struggled and needed assistance. He emphasised that the work from Louise was crucial in not just adding years to life but also life to years.

Richard pointed towards a housing regeneration report that had recently been published by the Older People's Housing taskforce, and would be worth reading for its insight on housing issues affecting older people. He also recalled praise towards the Council's Market Strategy, and referenced Barnsley Council's strategy which saw innovation like the moving of out-patient health services into shopping centres and the conducting of primary care in town centres. He thought that it would be useful to look at where services were located in the community over the next five to ten years.

NOTED

9 North Yorkshire Safeguarding Children's Partnership (NYSCP) Annual Report 2023/2024

Heather introduced the report and gave a PowerPoint presentation. She invited questions

from the Board.

Cllr Simon Myers asked why the number of exclusions, and the percentage of young people reoffending was above the national average. Heather responded that the number of exclusions had also increased nationally and that fewer children attending school post-pandemic. They were working with partners in schools and the police to address the issue and hoped to see improvements by the year's end. She advised that she could liaise with her colleague to provide a full answer following the meeting.

NOTED.

10 North Yorkshire Safeguarding Adults Board Annual Report 2023/2024

Adrian introduced the report and gave a PowerPoint presentation to the Board. He invited questions from the Board.

The Chair asked a question regarding the increase in safeguarding alerts, specifically, were the duplications regarding genuine cases. Richard advised that this was under review with councils in the Yorkshire and Humber area in terms of how data should be collated. He explained that this work was to improve clarity on when multiple referrals applied to a single individual. Even so, there had been an increase in safeguarding activity locally and nationally. Locally most of these were justifiable and those that weren't were largely from a single agency, however this was being addressed.

Richard thanked Adrian for a comprehensive overview, and believed the priorities identified were well informed, and had benefitted from the inclusion of voices from the wider safeguarding group. He also wished to acknowledge the contribution from Sue Procter following her departure as Safeguarding Chair, in addition to the wider team who wrote the report.

NOTED

11 Review of Health and Wellbeing Board - Terms of Reference

The Chair advised the Board that it was on the agenda to review the Terms of Reference, and following feedback, a proposal would return to the Board for adoption.

NOTED

12 Health and Wellbeing Board ToR

For information.

13 Rolling Work Programme

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

14 Any Other Items

The Chair gave thanks to Wendy Balmain for her contributions to the Board and ICB, prior to her departure, and wished her well.

15 Date of Next Meeting - 13 January, 2025



North Yorkshire Council

Health and Wellbeing Board

14 March 2025

Update of the Better Care Fund 2025/26 Planning Requirement and approval of the 2024/25 Qtr 1, Qtr 2 and Qtr 3 monitoring returns

Report of the Director of Public Health

1 PURPOSE OF REPORT

- 1.1 To update Health and Wellbeing Board on the 2025/26 Better Care Fund Planning Requirement and to seek approval of the Quarterly return for quarters 1, 2 and 3 of 2024/2025.

2 BACKGROUND

The Better Care Fund 2025/26

- 2.1 The Better Care Fund is a Government initiative which creates a local single pooled budget to incentivise the NHS and local government to work more closely together around people, placing their well-being as the focus of health and care services. It was introduced in 2015 to support local systems to successfully deliver the integration of health and social care.
- 2.2 In North Yorkshire it is, essentially, a partnership between the Council and the three Integrated Care Boards that operate within the Council's footprint, namely:-
- NHS Humber and North Yorkshire ICB
 - NHS Lancashire and South Cumbria ICB
 - NHS West Yorkshire ICB
- 2.3 The Better Care Fund requirement for 2025/26, published on 30 January 2025, saw some key changes since the previous two-year plans for 2023-25.
- a) A final submission date from 19 July 2023 for the 2023-25 Better Care Planning requirement to 31 March 2025 for 2025/26. This has meant that earlier than anticipated work has been undertaken and Appendix 1 shows the most up to date plan as of present, with work still on-going up to the end of March 2025 to finalise the submission is taking place.

b) The Chief Executive officers at all four organisations needs to sign off the 2025/26 BCF Plans before the final submission deadline of 31 March 2025, and this cannot be delegated. There is also an additional requirement that the BCF Plans are to be signed off by the Local Authorities S151 Officer before the submission deadline. The BCF 2025/26 Plan still needs Health and Wellbeing Board sign off, however, this can take place after the deadline of 31 March 2025. The Health and Wellbeing Board will therefore sign off the Better Care Fund submission on 16 May 2025.

c) The Local Authorities' Adult Social Care Discharge Funding (£4.05m) and the Improved Better Care Fund (£17.33m) has been amalgamated into a new grant named Local Authority Better Care Grant (£21.38m 2025/26 with no uplift from 2024/25).

d) The ICBs' Adult Social Care Discharge Funding (£4.93m) has been transferred into the NHS Minimum Contribution allocation.

e) The ICBs are required to passport a set amount of the 'NHS Minimum Contribution' to Local Authorities to support Adult Social Care.

Local Authorities have seen an increase of 3.93% for this allocation to 2025/26 from 2024/25 (NYC 2025/26: £20.0m from 2024/25: £19.2m), with the ICBs for North Yorkshire HWB have seen a less than 1% increase in funding allocation from the NHS Minimum Contribution.

f) For the forthcoming year, the aim is to streamline the planning and reporting process for the health and wellbeing board areas (HWB areas). In addition, the quarterly monitoring returns in 2025/26 will require sign off by the Health and Wellbeing Board before submission. Steps will be taken to build this into the current process to ensure that the obligations are met.

2.4 There are a number of national conditions that all Better Care Fund Plans must meet in order to be approved. These are:-

1. A jointly agreed plan between local health and social care commissioners and signed off by the Health and Wellbeing Board.
2. Implementing the BCF policy objective 1: *Reform to support the shift from sickness to prevention.*

Implementing the BCF policy objective 2: *Reform to support people living independently and the shift from hospital to home.*

3. Complying with grant and funding conditions, including maintaining the NHS minimum contribution to adult social care (ASC)
4. Complying with oversight and support processes

2.5 The Council and partners are confident that the submission will meet these conditions.

2.6 The one-year Section 75 for 2025/26 to be agreed by all four parties by 30 September 2025

3.1 The Quarterly Reporting 2024/25

Quarterly monitoring reporting is a standing requirement of the Better Care Fund planning and reporting cycle and sitting alongside the submission of the annual Better

Care Fund Plan. The key purposes of BCF reporting is to confirm the status of continued compliance against the requirements of the fund (BCF)

- In Quarter 1, the focus was on Discharge Grant funding spend and activities and excluded and updates to the metrics. North Yorkshire and the ICBs reported that both spend and activity levels for the plan were in line with planned outputs for 2024/25.
- In Quarter 2 and 3, metrics data including narrative around any variance from plan and mitigation for recovery was requested. North Yorkshire and the ICBs reported that they were on track to meet targets for 2024/25. In addition, spend to date was requested in which North Yorkshire and the ICBs stated that there were in line with planned outputs.

North Yorkshire Council has not significantly changed the demand and capacity figures as systemwide data is one of the challenges it has and that is not shifted. This was reflected in the metrics which at outturn showed that four out of five metrics not on track to meet target. On-going collaboration between the ICBs and NYC to improve data is taking place with support from the BCF team (Appendix 1).

4 LEGAL IMPLICATIONS

- 4.1 It is a statutory requirement that the Local Authority and its health partners to produce an agreed, fully costed Better Care Fund Plan and for that to be signed off by the Health and Wellbeing Board. For the BCF 2025/26 submission, there is now an additional requirement for the Chief Executives at each organisation for HWB North Yorkshire and the North Yorkshire Council's s151 Officer and the Chief Finance Officers at the ICBs to sign off the final plans before submission on 31 March 2025.
- 4.2 In terms of monitoring, it is also a requirement that the Quarterly Returns are approved by the Health and Wellbeing Board (HWB). The BCF 2024/25 Planning Requirement allows the quarterly returns to be signed off by HWB after submission, whilst the BCF 2025/26 Planning Requirement requires signed off by the HWB prior to submission.

5 FINANCIAL IMPLICATIONS

- 5.1 The following minimum funding must be pooled into the Better Care Fund in 2024/25 and 2025/26:-

BCF Schemes – 2024/25

- 2024/25 total BCF funding is £84.3m (2023/24 £77.1m).
- The ICBs' BCF Minimum Contribution in 2024/25 is £51.5m (LY £45.8m) of which £19.2m is transferred to NYC for Adult Social Care (LY £17.2m);
- NYC iBCF allocation is £17.3m (2023/24 £17.3m).
- The total ASCDF, (Additional discharge funding) for North Yorkshire is £9.1m; NYC £4.1m and ICBs £5.0m.
- DFG, (Disabled Facility Grant) for NYC is £6.4m

BCF Schemes – 2025/26

- 2025/26 total BCF funding is £85.1m (LY £84.3m).
- The ICBs' BCF NHS Minimum Contribution in 2024/25 is £57.3m (LY £51.5m) of which £20.0m is transferred to NYC for Adult Social Care (LY £19.2m);

- NYC iBCF allocation of £17.3m transferred to the new LA Better Care Grant (LY £17.3m).
- The total ASCDF, (Additional discharge funding) for North Yorkshire is £9.1m; NYC £4.1m and ICBs £5.0m. The LA Adult Social Care Discharge funding has of £4.1m has been transferred to the new LA Better Care Grant and the ICBs' Adult Social Care Grant has been amalgamated within the NHS Minimum Contribution.
- LA Better Care Grant £21.4m (iBCF £17.3m and LA ASCDF £4.1m)
- DFG, (Disabled Facility Grant) for NYC is £6.4m

6 EQUALITIES IMPLICATIONS

- 6.1 There are no direct equalities implications but attainment of the priorities in the Plan will, for example, enable more people to live safely and independently.

7 CLIMATE CHANGE IMPLICATIONS

- 7.1 An initial climate change assessment form has been completed and that indicates that there are no direct climate change implications.

8 CONCLUSIONS

- 8.1 The Better Care Fund (BCF) is a programme spanning both local government and the NHS which seeks to join-up health and care services, so that people can manage their own health and wellbeing and live independently in their communities for as long as possible.
- 8.2 Monitoring of the Fund helps ensure the priorities are being achieved

9 REASONS FOR RECOMMENDATION

- 9.1 The content of the Plan has been agreed with partners and is fully costed.

10 RECOMMENDATIONS

- 10.1 a) to note the Better Care Fund 2025/26 Planning Requirement
- b) and, that the Quarterly Returns for Quarters 1, 2 and 3 in respect of 2024/2025 to be approved.

Author

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Presenter

Louise Wallace, Director of public Health
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BACKGROUND DOCUMENTS relied upon in the preparation of this report – Better Care Fund Policy Framework and Planning Requirement 2025/26 and 2024/25

NOTE: Members are invited to contact the author(s) in advance of the meeting with any detailed queries or questions.

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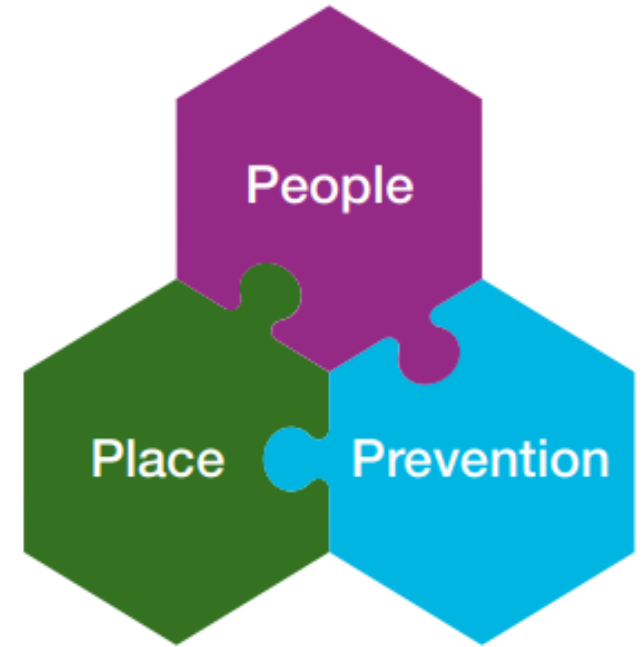
Joint Health and Wellbeing Strategy Delivery Update 2024/2025

Health and Wellbeing Board

14th March 2025

Louise Wallace – Director of Public Health

[Joint Local Health and Wellbeing Strategy 2023-2030](#)



North Yorkshire Joint Local Health and Wellbeing Strategy 2023–2030: Plan on a Page

For all residents of North Yorkshire to have a fair chance of living a fulfilling life, free from preventable ill health, 'adding years to life and life to years'.

Think Prevention

In North Yorkshire, we will improve the health and wellbeing of all our residents by concentrating on the big actions that will make the most difference to our population.

Page 16 Think Place

In North Yorkshire, where you live should help you stay well and happy. We want to make sure that where you live does not unfairly reduce the quality of your health or length of your life.

Think People

In North Yorkshire, we will work with our communities who experience the poorest health outcomes to make sure that they can access and benefit from the services and opportunities they need.

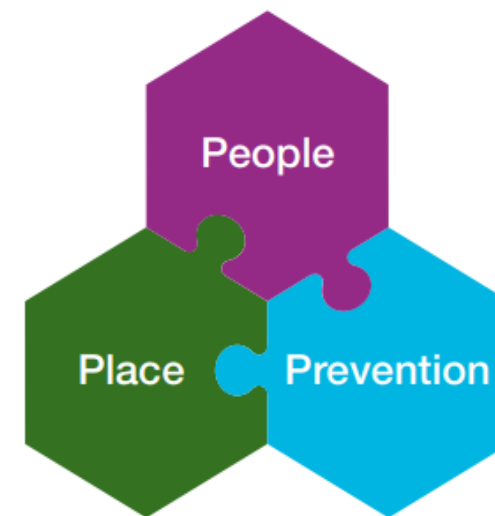
Workforce, employment & volunteering opportunities

Digital inclusion and innovation

Making best use of our resources

Accessibility of services and communication

Joining up our coproduction and engagement



We will work together to connect our actions so that we can tackle health inequalities as effectively as possible

Health and Wellbeing Board
North Yorkshire



[Joint Local Health and Wellbeing Strategy 2023-2030](#)

Think Prevention: Delivery update (1)

In North Yorkshire, we will improve the health and wellbeing of all our residents by concentrating on the big actions that will make the most difference to our population.



- **Children and Young People's Mental health, wellbeing and resilience:** Developed a whole system approach with Mental Health Support Teams in 26% of schools and My Happy Mind in 21 Scarborough schools and 3 Craven schools (now expanding to Harrogate). Wellbeing and resilience improved markedly in boys, all ages; small improvements in girls.
- **0-19 years Healthy Child Programme:** Over 95% of all mandatory contacts are seen at the correct time. The Early Language Identification Measure was introduced in 2023 to identify speech needs as early as possible.
- **Children's Health Partnership:** Significant work to align children's priorities across Local Government and Health supported by the creation of a NY Children's Partnership Health Board and contributing to the Start Well Children's Framework.
- **Breastfeeding:** Increasing the number of "Breastfeeding Friendly Venues" Award-holders from fewer than 50 (in 2022) to 108.
- **Early Years weight:** Identified a challenge around Early Years weight gain to reverse the trend of 4-5 year olds with very high excess weight.
- **Smokefree North Yorkshire:** Mobilised the North Yorkshire response to the Smokefree Generation ambition to reduce smoking prevalence to 5% by 2030, enabled by new national funding invested to enhance local stop smoking services.
- **Healthy Weight:** Redesigned our previous adult weight management service to the new 'Healthy You' all-age lifestyle programme focused on compassionate approaches to eating well and moving more
- **Frailty and Falls Prevention:** Established a Centre of Excellence for frailty across the health and care partnership through which we have developed a set of principles to encourage a consistent approach to preventing, identifying and managing frailty. Work has also taken place following the falls summit to strengthen pathways and improve the availability of strength and balance programmes. Community frailty crisis response services now established in all localities in and around York and Scarborough Emergency Departments



Think Prevention: Delivery update (2)

In North Yorkshire, we will improve the health and wellbeing of all our residents by concentrating on the big actions that will make the most difference to our population.



- **General Practice:** Continued annual growth in the number of GP appointments with almost 70% face-to-face. October 2024 saw the highest number (439,000) of GP appointments for 2 years. In 23/24 and 24/25 HNY ICB awarded General Practices funding to deliver a move towards Modern General Practice, with funds used to support development in areas including digital access (websites and NHS app), self-service (appointment bookings, blood pressure machines), improvements to care navigation, clinical triage and monitoring of capacity and demand.
- **Oral Health and Dentistry:** Training has been provided across sectors including adult social care, schools, early years and children's services around the importance of oral health and how to maintain good oral health routines. 7 special schools and 29 early years providers have signed up to participate in the Supervised Toothbrushing Programme. A new initiative was launched in September 2024 to offer Supervised Toothbrushing in Primary Schools alongside fluoride varnish and onward dental care for children where dental treatment identified, with 43 primary schools signed up to date. Investment has been initiated to increase access to Dental Services through increased urgent access sessions, orthodontic appointments and waiting list initiatives.
- **Hospital treatment and discharge:** Provided almost 100 virtual ward beds across North Yorkshire (ICB) with an average occupancy of 69%. Hospital discharge levels are running at 50-100% more than 2019 each week (North Yorkshire ICB). Very long waiters (i.e. patients waiting 65 weeks or more for hospital treatment) at zero as of December 2024.
- **Cardiovascular Disease (CVD) Prevention and Detection:** 435 people had their blood pressure checked through self-service stations or occupational health appointments as part of "Know Your Numbers week" 2024. Community-based self-service blood pressure stations are in place across 26 libraries as well as The Street in Scarborough. Through a Heart Health Checks pilot at North Yorkshire Council, 592 staff have accessed a check in a pilot aiming to gather evidence on the feasibility and impact of workplace CVD checks to support people to stay well in work. Local Care Partnerships in Scarborough and Selby have been working on CVD projects in particular Community CVD Champions.



Think Place: Delivery update

In North Yorkshire, where you live should help you stay well and happy. We want to make sure that where you live does not unfairly reduce the quality of your health or length of your life.



- **Community Anchor Organisations (CAO):** Established 25 local Community Anchor Organisations recognised as valued partners committed to contributing to system-wide challenges and initiatives. Funding is in place to build to build stronger strategic and operational relationships with CAOs in support of shared ambitions around Prevention & Reducing Health Inequalities; Community resilience and Social Regeneration.
- **Healthy Place Shaping:** Developed a Healthy Places partnership group across Council departments to deliver health priorities. This includes a Transport and Health group currently focussing on active travel.
- **New models of care and support:** Co-designed a Service Navigator pilot with Nidderdale Plus which aims to maximise use of community assets and reduce the need for more formal social care services for people with eligible care and support needs.
- **Movement:** Redesigned the North Yorkshire Council Leisure offer to bring previous locally-based services into one sport and active well-being model across the county
- **Food:** 'Food for the Future North Yorkshire' Framework is in the final stages of development, bringing a partnership systems focus to providing affordable nutritious and sustainable food through our communities and economy



Think People: Delivery update (1)

In North Yorkshire, we will work with our communities who experience the poorest health outcomes to make sure that they can access and benefit from the services and opportunities they need.



- **Inclusion Health Framework:** Co-designed a system-wide Inclusion Health Framework, with an action plan now being developed.
- **Population health strategies:** Launched North Yorkshire [Substance use Strategy](#) in Jan 2025. Autism strategy will be launched by the end of March 2025.
- **Carers:** Established a shared commitment to delivering the implementation plan and more strategic approach to commissioning carers support services. Carers strategy and a new carers online assessment tool are in progress.
- **Women's health:** Delivered the first North Yorkshire Women's Health Conference attended by over 120 delegates from across local authority, VCSE, NHS and partners. We have had over 1500 responses to the women's health survey launched at the conference, which will help inform future women's health work alongside the newly-developed Women's Health Framework for North Yorkshire
- **Healthy ageing:** Focussed on healthy ageing for the [Director of Public Health annual report 2023-2024](#) including recommendations around 4 priority areas of health/reducing inequalities, housing, financial security/employment and making North Yorkshire an age-friendly place. We had an excellent response to our [photo competition](#) to challenge stereotypes around ageing and ageism and create a bank of photos portraying older people in a positive light.
- **Children's mental health transformation:** secured approval for joint funding across North Yorkshire Council, Humber North Yorkshire ICB and Tees, Esk and Wear Valleys NHS Foundation Trust to establish a small team who are now in place to examine how to redesign the entire mental health and wellbeing support system for children and young people across North Yorkshire



Think People: Delivery update (2)

In North Yorkshire, we will work with our communities who experience the poorest health outcomes to make sure that they can access and benefit from the services and opportunities they need.



- **Health Inequalities Funding:** In partnership with Humber North Yorkshire ICB between 2023-2025 17 projects have been funded to support local partners to work together to reduce health inequalities, reduce the gap in life expectancy, reduce differences between health outcomes across our populations and increase the number of years people live in good health.
- **Complex lives:** Developed a single Mental Health Partnership Board for North Yorkshire. Scoping the development of a Multiple Disadvantage Outreach Model team to support those with complexities. Health and Adult Services and Housing teams are working on embedding Trauma-informed approaches, beginning with phase 1 (Awareness).
- **Care Market:** maintained very low numbers of unsourced packages of care across the County and all types of care. Co-producing a new localised approach to commissioning home care, to be tested in the Whitby area. Collaborating with a broad range of stakeholders to transform how we commission services for adults with multiple and profound disabilities and mental health conditions, and those with moderate and advanced dementia. Co-designing of a new integrated service model for the provision of community equipment
- **Cost of Living:** Redesigned North Yorkshire Council's core offer of information and advice for those struggling with cost of living. Implemented Free School Meal autoenrollment for families whose children were eligible but not enrolled, identifying around 800 children and bringing in around £1million to North Yorkshire schools in pupil premium funding. Presented "Action of Poverty: a school's guide" to the sector ahead of its publication.



Next steps



- Establish North Yorkshire Health Collaborative, Joint Committee and 'Ambitious for Health' programme - a new approach to transforming health and care, strongly contributing to JHWBS priorities
- Develop year 2 work programme and monitoring arrangements for JHWBS (aligned to 'Ambitious for Health')
- Create a programme of spotlight sessions for H&WB members to focus on progress and key issues under each JHWBS priority area
- Publish summary of JHWBS delivery (2024/2025) for partners and the public



Health and Wellbeing Board

North Yorkshire



DRAFT ROLLING WORK PROGRAMME 2025/2026

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

Page 23

FRIDAY 14 TH 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

ROLLING WORK PROGRAMME 2025/2026

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
Better Care Fund 2024/25 Monitoring - Quarter 1, 2, and 3	Head of Finance – Public Health	Wednesday 5 th March 2025	To approve the 1 st , 2 nd , and 3 rd quarter return
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

Page 24

FRIDAY 16 May 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 8 th May 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 8 th May 2025	Standing Item Generally these will be verbal updates
Better Care Fund submission sign off 2025/26	Director of Public Health	Wednesday 8 th May 2025	To approve

ROLLING WORK PROGRAMME 2025/2026

FRIDAY 18 July 2025			
ITEM	LEAD	REPORT DEADLINE	COMMENTS
West Yorkshire Place Update	Director of Integrated Health and Care, Bradford District and Craven Health and Care Partnership		Standing Item Generally these will be verbal updates
Humber and North Yorkshire Place Update	Chief Operating Officer, Humber and North Yorkshire Integrated Care System		Standing Item Generally these will be verbal updates

Page 25

FRIDAY 19 September 2025			
ITEM	LEAD	REPORT DEADLINE	COMMENTS

ROLLING WORK PROGRAMME 2025/2026

West Yorkshire Place Update	Director of Integrated Health and Care, Bradford District and Craven Health and Care Partnership		Standing Item Generally these will be verbal updates
Humber and North Yorkshire Place Update	Chief Operating Officer, Humber and North Yorkshire Integrated Care System		Standing Item Generally these will be verbal updates

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ROLLING WORK PROGRAMME 2025/2026

OTHER *POTENTIAL* ITEMS – NO SET DATE ALLOCATED

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

WORKSHOPS

***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)

ROLLING WORK PROGRAMME 2025/2026

Democratic Services Officer

March 2025

DRAFT