

**North Yorkshire Thriving Communities Partnership Meeting**  
**Friday 10 December 10.30am - 12.30pm**  
**Notes of meeting**

**Attendance:**

Alaina Kitching, NYCC  
Angela Crossland, Selby  
Ann Duncan, Harrogate BC  
Barbara Merrygold, NYCC  
Bryony Boyle, Selby Big Local  
Caroline O'Neill, Community First Yorkshire  
Claire Lowery, NYCC  
Dave Winspear, North Yorkshire Fire & Rescue  
David Sharp, NYY  
Dawn Bowness, NHS NORTH YORKSHIRE CCG  
Elizabeth McPherson, Carers Plus  
Fiona Bell-Morrith, NHS VALE OF YORK CCG  
Harriet Johnson, Two Ridings Community Foundation  
Jane Colthup, Community First Yorkshire (Co-chair)  
Jill Quinn, Dementia Forward

Jo-Anne Scott, Richmondshire DC  
Karen Weaver, HARCA  
Leon Fijalkowski, Orb Arts  
Lisa Wilson, Hambleton DC  
Liz Lockey, Hambleton Community Action  
Marie-Ann Jackson, NYCC  
Mark Hopley, Community First Yorkshire  
Natasha Almond, North Yorkshire Police  
Neil Irving, NYCC (Co-chair)  
Phil Bramhall, Chopsticks  
Polly Oldacres, NYCC  
Richard Webb, NYCC  
Sam Alexander, Better Connect  
Sharon Hudson, Craven DC  
Tracy Watts, YNYLEP

**Apologies:**

David Watson, North Yorkshire Sport  
Emma Pears, SELFA  
Frances Elliot, Harrogate and District CA  
Jan Garrill, Two Ridings Foundation  
Jo Ireland, Scarborough BC

Lisa Keenan, Ryedale Special Families  
Lisa Pope, NY CCG  
Margaret Wallace, Ryedale DC  
Max May, Rural Arts  
Nancy O'Neil, Bradford CCG

**1. Welcome and aims of the group**

- Aim of the group is to bring together the VCSE and public sector colleagues to share understanding and discuss closer working on issues of common interest.
- A VCSE Context paper was circulated in advance, setting out setting messages from recently issued research, the Wider Partnership Conference Resilience workshop and what the sector is telling us about their current situation.

**Action** – Any queries on terms of reference paper please email Claire/Caroline

**2. Current challenges and priorities for 2022/23**

**VCSE Young People – David Sharp**

- Anxiety in young people – aim to prevent children going into CAMHS through Youth Mentor Scheme
- Safe spaces for young people to come together are needed – with trusted adults aim to stop young people going off on wrong path
- Internal capacity – Youth work should be high on the agenda, investment in low level activities is needed, should be lobbying the government
- Continuity of funding – working together to develop services and longer term funding agreements would allow great continuity of services

## VCSE Older People – Jill Quinn

- Build on community efforts / low-level prevention (CSOs) which has meant some people have thrived during Covid
- Need to look at better data sharing and learning between sectors.
- The more vulnerable who have not thrived – lack of confidence, decline in physical fitness and mental health, increased isolation, hesitance to pursue GP and hospital appointments, unable to use technology, pay attention to activities to prevent isolation, including more work with the media
- Social Care capacity – important that issues shared so that partners understand
- VCSE needs to be involved early in planning such as social prescribing and devolution
- Equalities, diversity and inclusion – would be good if VCSEs could tap into public sector training on this

## Public Health and Adult Social Care – Richard Webb

### Immediate Priority: Getting through winter

- Covid-19 response: outbreak prevention and management, vaccinations and boosters, event advice and management, Plan B
- Flu vaccinations
- Care market support and quality
- Social care recruitment – investment in social care recruitment and training
- Winter decision-making framework
- Hospital discharges – focus on community care packages and lower level support
- Community support

### Priorities beyond winter include

#### Recovery

- Supported housing – like to see more joining up of housing with public health
- Carers
- New Public Health services - healthy child, sexual health, health protection
- Care market development - Approved Provider List (APL), Actual Cost of Care, Quality Pathway, etc. APL session to develop APL and costing models
- Equality, diversity and inclusion (including co-production)
- Community Health and Social Care (sufficiency, comprehensiveness and integration)
- Missing currently is the impact of growing poverty in the county

#### Reform

- Local Government Review (and especially, Culture/Leisure/Sport!)
- ICS development two across the county and strong emphasis on place based focus
- New Public Health system
- Adult Social Care charging
- Adult Social Care Assurance System

## NHS Primary Care & Community System – Fiona Bell-Morrith

Area of focus		Priority 2022	Aspirations	Considerations
Out of Hospital services	Proactive Frailty Response	<ul style="list-style-type: none"> <li>• Ensuring system-wide recognition of the signs of frailty, and adoption of common language to stratify (i.e. Rockwood Clinical Frailty Scale)</li> </ul>	<ul style="list-style-type: none"> <li>• VSCE to continue assisting people to age well, prevent / delay frailty</li> <li>• Trusted relationships between all partners on the frailty pathways</li> </ul>	<ul style="list-style-type: none"> <li>• Long term pathway of support for care at home and embedding the sector in long term planning</li> <li>• How proactively support for people can be looked at to bring together 'wrap around'</li> </ul>

		<ul style="list-style-type: none"> <li>• Support for people who have been deconditioned</li> <li>• Formally embed prevention in the frailty pathway</li> <li>• Develop Training opportunities for all involved in delivering care along the Frailty pathway</li> </ul>	<ul style="list-style-type: none"> <li>• Strong linkages with services in terms of Social Prescribing</li> </ul>	<p>services including involvement of VCSEs</p> <ul style="list-style-type: none"> <li>• Developing workforce roles especially Social Prescribing to provide better health support</li> <li>• Governance and data sharing to improve working with VCSE</li> </ul>
	Support in a crisis	<ul style="list-style-type: none"> <li>• Strengthen system capacity and capability for crisis and rapid response</li> <li>• Connect the VCSE into Discharge and Crisis Response service developments</li> </ul>	<ul style="list-style-type: none"> <li>• Community &amp; VSCE response wrapped around rehabilitation and reablement for people to stay independently at home for longer</li> </ul>	
Primary Care Services	Workforce and Capacity	<ul style="list-style-type: none"> <li>• Increase capacity for face to face appointments and also telephone and video consultations</li> <li>• Additional workforce roles developed through PCNs including joint posts and rotational posts with partner providers (Including mental health, social prescribers, health coaches)</li> <li>• NY&amp;Y Primary Care Collaborative including dental and optometry to promote joint working</li> </ul>	<ul style="list-style-type: none"> <li>• A system which is supported to improve local health outcomes</li> <li>• Improved resilience and retention in the workforce</li> </ul>	<ul style="list-style-type: none"> <li>• Workforce capacity, joint posts</li> </ul>
	Vaccination	<ul style="list-style-type: none"> <li>• Roll out of Booster programme to all &gt;18s plus 2<sup>nd</sup> doses for 12-15 and boosters for immunocompromised</li> <li>• Pausing of some LTC and health check work but maintaining a focus on those most at risk and inequalities</li> </ul>	<ul style="list-style-type: none"> <li>• Reduction of pressure on the healthcare system</li> <li>• Reduction of overall COVID-19 severity and mortality</li> <li>• Reopening of society</li> </ul>	

- Sharing of messages and cross partner communication
- Communication is an important enabler, to show 'you said/we did' changes which have been made

## **Children and Young People Services – Barbara Merrygold**

- Education lost due to Covid
- Low level anxiety, mental health and young people with autism – funding for 1 year pilot based on social prescribing in community often pre-diagnosis for children and parents
- Prevention of entry into Youth Justice Service – early help diversionary model developing sense of belonging in community and feeding into co-production
- Development early health Family Hubs – not Sure Start model but using the learning from it, 0-19s service, aim to give families sense of belonging, may not be a building but using ‘place’ could be a Family Hub network made up of schools, libraries and community properties. Important they remain open. Will need community capacity and co-production. [Further information on family hub model](#)

**Action:** Consider these priorities against the context paper priorities

3. Focus on the future – how can we help each other to tackle the issues and priorities particularly in the context of the structural changes happening in health and local government?

## **Collaboration for impact**

### **Place/Locality**

- Need to take a locality approach
- Ensure all areas included – Craven part of West Yorkshire ICS needs need to work with both
- Bentham in North Craven covered by Lancashire & South Cumbria ICS
- Share learning from other areas
- Partnerships need to consider areas used to reduce duplication
- Consistent boundaries would improve cross organisation / sector working
- LGR locality work stream to do work in this area

### **Skills development / Leadership academy**

- Across sector skills development
- Sharing of training / learning sets / learning
- ABCD model training across partners in York went well
- Develop academy idea discussed at conference workshop
- Skills delivery – LEP skills investment pipeline looking at how could deliver further.
- Equalities, Diversity and Inclusion would be a good area for shared learning and development
- Learn from positive partnerships and good performance management practice
- Work on ICS equality and diversity training for VCSE
- Understanding of skill gaps

### **Partnership examples to learn from**

- Mental Health Transformation Harrogate
  - Craven Together Partnership
  - Selby Health Matters
- Learn from good examples and what makes them work well

### **Service development / commissioning / funding**

- Sector would like more involvement at early stage, co-production and longer term agreement

- NYCC HAS moving to 7-10 year mechanisms, move to grants and working together/co-production
- NYCC CYPS – working with teams to help understanding of co-production and change culture
- New post BREXIT procurement presents opportunities for doing things differently
- Consider more creative models e.g. System Partner Model worth looking at
- Social Prescribing needs funding to support demand
- VCSE should not be unduly competitive with each other, be honest, works to skills/strengths
- Collaboration fundamental
- Better Connect Thriving at Work Project able to get £900k of funding because it was able to access match funding. Need to work as a system to ensure can match fund when we need to get more funding into the county
- Need to improve effective contract performance management so that do not re-procure rather than deal with performance issues – Stronger Communities good example of how this should work
- Skilling all sectors up on evaluation and impact measurement
- Opportunity to undertake a systematic cultural values assessment to align personal with desired values: [Barrett Values Centre | Your Organization, Thriving](#)
- North Yorkshire Co-production Report <https://communityfirstyorkshire.org.uk/wp-content/uploads/2021/06/May-2021-With-us-for-us-by-us-final-report.pdf>
- Harrogate BC VCS Strategic Partner grants are a local example of system partner grants.

### **Business Engagement**

- Engage with small business and business organisations such as Chamber of Commerce
- Supported work e.g. Mental Health
- Community First Yorkshire has developed Yorkshire wide Business Brokerage model and is due to launch Business Brokerage Hub

### **Enablers and barriers**

- Generosity and kindness
- Community First Yorkshire will be exploring putting together VCSE Assembly as part of NHS changes

### **Capacity and staff wellbeing**

- Capacity is a barrier need to be able to give time for staff resilience
- Thriving at work - wellbeing offers
- Need to be realistic in job descriptions
- Opportunity for sectors to work together on OD approach, recruiting and job descriptions. Develop career paths between sectors to improve recruitment.
- More diversity in recruitment panels
- Inclusive workforce development has been a fantastic enabler in other areas of Yorkshire and Humber
- Hull Council have a joined working group for the Public Sector and VCSE for working and training and it is starting to create a great space for change.
- Potentially secondments might be something to think about - in terms of both ways. Understanding how we work and what we are capable of is very empowering. It also creates great relationships and provides that opportunity to build trust.

### **Partnerships**

- Example: Four VCSE mental health providers in Harrogate working together under shared banner. Partnership working as an enabler for additional funding from CCG.
- Locality based co-production with business – be clear about opportunity for the business and use of language
- Building on existing partnerships
- Getting to know each, other work with VCSE and health as relationships are key
- Require common language and understanding
- Consider as part of development of LGR community networks

### **Communication**

- Corporate social responsibility – what it means and how communicate it. Procurement could talk to businesses to develop this.
- Shared communication across and with those supporting to ensure consistent messages for example creating understanding may get support from someone would not expect
- Example in York – York CVS an option on GP Interactive Voice Response (IVR) automated phone system.

### **Diversity**

- Sharing training and learning
- Humber Coast and Vale ICS are piloting a BAME leadership programme for workforce and development. If successful, this is to be rolled out further. It is going out for tender this month
- Diversity of volunteers (and therefore capacity) is strongly linked to diversity of opportunity - how we can make volunteering accessible to all

### **Prevention**

- Frailty – what puts people at risk of fire puts people at risk of other areas. Development of risk profiles highlights high level of cross over and the need for intelligent data.
- Frailty is an issue for the Fire Service and often providing people with prevention advice, to avoid harm. The Fire Service could help to refer in those people at risk, which they are called out to.

**Action** - Jane to get in touch with Tracy Watts York & North Yorkshire Local Enterprise Partnership re Humber Coast & Vale work

**Action** - Fire, CCGs, VCSE, PH and ASC to meet to discuss frailty / falls prevention

#### 4. Next steps and summing up

- Carry on conversation, meeting act as catalyst for conversation
- Key area to develop shared learning, opening up training resources, time in for shadowing and shared learning action sets

**Action** - Any ideas for topics for future meetings to Claire/Caroline