

Summary of Minutes from discussion of Financial Insecurity Papers presented to Yorkshire Integrated Care Boards 2022

West Yorkshire Minutes - 6th September 2022

The Chair informed members that at the WY Partnership Board on 6 September 2022 there were specific recommendations to the ICB from Public Health colleagues with an ask for a response from the WY ICB in relation to alleviating poverty. The importance of connecting the WY Partnership Board and the WY ICB was recognised in responding to the cost-of-living crisis in West Yorkshire.

Two areas were recognised; what the ICB could do as an organisation for staff facing issues and what the ICB was already doing for citizens across WY and how resources were being spent. Practical examples included the winter warmth investment and focusing on the four key aims as an ICB to improve outcomes including tackling inequalities.

The Board welcomed the recommendations and recognised the further work to be undertaken with a suggestion to consider through a Board development session. A commitment was made to discuss at the November 2022 Board meeting with a plan and commitment to act.

James Thomas (JT) suggested that when considering data to use, a population health management approach should be adopted to drill further down to focus on the links between health and poverty. A suggestion was made for the focus topic for a future Board meeting to be in relation to Population Health Management and Health Inequalities.

There was consensus from the Board to ensure people's experience was kept at the heart of this work, including considering the impact on people of not being able to access appointments, and digital information due to not being able to afford this. There was support to ensure that action was taken, and it was recognised that through the WY Partnership meeting there would be actions as to what could do done imminently, and in the longer term. In terms of the ICB, it was acknowledged that there was work ongoing across each Place in relation to this agenda and a suggestion was made that as a Board, there was oversight and assurance of this work, but for the Places to do the work and then escalate and highlight work as appropriate. Board members were invited to contact the Chair and Chief Executive to join the Task and Finish Group to take forward the recommendations.

South Yorkshire Minutes - 7th September 2022

The report presented by Ben Anderson generated a lot of discussion between members present. The Chair recommended that further discussion regarding what we need and what we can do to be held outside of the meeting. This was agreed by those present.

It is to note that the report provided within the paper set (enc 16) is out of date with the ever-changing picture. It is expected further change may be required as an outcome of the government announcement later this week.

It is understood there is a potential £2.5K energy cap, which is a high increase on the cap in the previous quarter. Inflation is expected to increase, with figures at 18%.

The paper focusses on the potential impacts to care services and the expectation of what will happen within physical and mental health services, the ICB and its partners.

Discussion also reflected on the impact it will have on prescriptions with people not being able to afford them.

Those present were clear that the NHS needs to be a poverty friendly service and be able to identify signs and symptoms of health deterioration and provide support by being proportionate in response and signposting to relevant services e.g. debt advice.

Chris Edwards was clear that long term inclusion strategies need to be implemented within winter plans.

Lee Outhwaite questioned what the planning process is – there needs to be an understanding of the baseline and the impact assessment.

Christine Joy reflected that 40% of the workforce are from deprived areas, with 40,000 earning less than £25K. Christine also noted that whilst learning opportunities are valued, there is no consistency within how apprenticeships are paid; some areas employ against agenda for change whilst other use the apprentice national minimum wage which is less than £5 per hour. In addition, mileage costs is now locally managed, because of the pandemic.

Shahida Siddique identified that we should not be judging on income levels. A large number of people had been in poverty prior to the cost of living crisis, and whilst it may be more difficult for them, we are also looking at a whole cohort shifting to a state of poverty, which they have not experienced before – meaning their resilience may be lower.

Businesses are also facing closure because of the cost of living crisis. An innovative way of working was considered in the possibility of approaching these businesses and support in identifying job opportunities within the NHS. It is recognised that pharmacies which are privately owned can undertake an impact assessment to access support for the business.

There is a low-income scheme available for NHS staff to provide financial aid.

The outlying question is who owns the leadership of this. As an ICB we need to be able to articulate our position, not in a way to dictate or provide the answers, but to be able to contribute to solutions.

Lucy Davies advised that one of the main impacted groups are those who have a learning disability and reiterated the need for partnership working between NHS services and social care to support Learning Disability patients in accessing the appropriate services for their medical needs.

Will Cleary-Gray noted that the ICB need to be systematic in the practicalities of supporting the most vulnerable. Lessons learned from COVID will provide a good sense of who may come to harm. Cathy Winfield suggested a review of the risk list, and utilise lessons learned from the cohort previously embedded in poverty.

Shahida Siddique noted the importance of working alongside to voluntary sector to strengthen the knowledge within agencies in terms of signposting to appropriate services. Samaritans and MIND could also be utilised for Mental Health Support. Liaising with PCN link workers to gather understanding of a person's social prescribing need.

The Executive Directors of each place are to consider the practicalities of responding to the cost of living crisis, to present as part of a non-formal discussion at the ICB October development meeting.

Humber and North Yorkshire ICB Minutes - 12th October 2022

7. Cost of Living

Anja Hazebroek provided a verbal update regarding cost of living in terms of the actions agreed and the messages to be communicated. She conveyed that it was important to share the key parts of the discussion with stakeholders in developing the Integrated Care Board (ICB) and Integrated Care Partnership (ICP).

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A letter had been drafted by S Symington, Chair and the Vice Chair Councillor Jonathan Owen regarding the positive initiatives that were

taking place and the key actions that the ICB were progressing regarding the unique position to understand what was happening across the area to coordinate good and best practice in terms of what was working and having an impact.

The ICB were looking to secure clear evidence in terms of the impact and was working with local universities regarding this and expediting the approach to social prescribing and the fantastic work that was happening and the ambitious work taking place regarding workforce and recruitment opportunities.

Outcome:

(a) Board Members noted the contents of the verbal update provided.