

NORTH YORKSHIRE COUNTY COUNCIL

CARE AND INDEPENDENCE OVERVIEW AND SCRUTINY COMMITTEE

14 July 2009

WORK PROGRAMME

1.0 Purpose of Report

- 1.1 The Committee has agreed the attached work programme (Appendix 1).
- 1.2 The report gives members the opportunity to be updated on work programme items and review the shape of the work ahead.

2.0 Background

- 2.1 The scope of this Committee is defined as:

The needs of vulnerable adults and older people and people whose independence needs to be supported by intervention from the public or voluntary sector.

- 2.2 At its last meeting the Committee agreed that for the start of the new County Council term its work programme would be shaped under the seven outcomes from 'Our Health, Our Care, Our Say', which will be used to judge our performance. Members might find it helpful to read the guide to these outcomes attached as Appendix 2.

3.0 Employment and Learning Disabilities

- 3.1 People with learning disabilities tell us that they, like most of the population, want to work. Employment is also one of the best ways of achieving real social inclusion. However many people with a learning disability have difficulty getting a job.
- 3.2 At a previous Mid-Cycle Briefing, Group Spokespersons discussed the merits of a project to promote economic/employment opportunities for people with Learning Disabilities, both within their organisations and with local communities and employers. We could look at how we could have someone with a learning disability playing a role in some of our work.
- 3.3 You agreed that the Chairman enter into a dialogue with his counterpart on the Economic Development Overview and Scrutiny Committee on whether a joint project is feasible. There has been some delay whilst you concentrated on completing the Dementia Report and then the County Council elections intervened.

- 3.4 This issue has risen further up the national agenda with the recent announcement from the Government's National Director for Learning Disabilities that authorities need to refocus annual social care spending to implement valuing employment now. This aims to increase the number of people with learning disabilities in paid work in England. Currently 10% of those known to services have paid work.
- 3.5 A number of organisations have expressed concern that the Government's strategy will fail without extra resources. From the Government's perspective money in the system isn't delivering the outcomes that people with learning disabilities want.
- 3.6 The suggestion is that local authorities need to look at refocusing day-care centre services towards employment and training opportunities as part of the modernisation of the service. This implies councils commissioning education and training for 16 – 25 year olds with learning disabilities (local authorities will take over this responsibility from the Learning and Skills Council next year). As part of this service users will be encouraged to use personal budgets on employment services.
- 3.7 **In the light of this the Committee is invited to consider the topic for an in depth review.**

4.0 Issues Discussed with the Chairman

- 4.1 Two issues have dominated early discussions with the Chairman in the context of how the work programmed might be shaped.
- 4.2 **Demographic pressures** will be key to the Committee's work. There is an ever increasing older population (unlike children where there is a decreasing demographic). By 2010, it is estimated that 7% increase in older people aged between 65-74 and an increase by 4% of older people aged between 75-85 who are unable to manage at least one domestic task on their own. A significant number within this age group will require some form of care. In addition longer term, there will be 52,000 more over 65 year olds by 2020 and 9,000 more over 85 year olds- a quarter will have some form of dementia. At today's prices the Council would have to find an additional £43M.
- 4.3 **Transformation and Personalisation** – Adult and Community Services is required to radically transform the way in which it delivers its Adult Social Care so that services fit around people's lives. This includes delivering the Government's vision as set out in its Putting People First National Concordat.
- 4.4 There is a range of expectations including personalised budgets and greater integration with health partners. Fundamentally the role of social care services will be increasingly focussed on supporting people's independence and promoting inclusion in communities through preventative approaches and the

promotion of well being, rather than the traditional approach of intervention at the point of crisis.

5.0 Older Peoples' Strategy

- 5.1 For the last two years the Committee has appointed a Task Group, Chaired by County Councillor Melva Steckles, which includes representatives from the voluntary sector and older peoples' representatives groups across the county. This Group assesses the progress of the County Council in meeting the commitments entered into by the County Council as part of its Older Peoples' Strategy. The aims of this Strategy are to improve not just the services we provide to older people but how we can ensure that older people have the opportunity to shape, influence and engage in the planning of services.
- 5.2 The Task Group met recently to start this year's review, which is again geared towards helping local councillors and representatives of groups in the community make an assessment of what difference the Strategy has made, concentrating in the main on the theme of 'Engagement'.
- 5.3 The Task Group has extended and broadened the range of its representation to develop that independent assessment by including representatives from the Older Peoples' Partnership Board from the North Yorkshire Strategic Partnership.
- 5.4 Directorates have compiled further substantial evidence this year of their activity. At a recent meeting the Task Group agreed to make this more manageable by splitting into a number of groups which will look at each directorate in turn.
- 5.5 The expectation is this initial assessment process will be completed towards the end of September after which the final report will be drafted. An update on progress will however be made to your September meeting.
- 5.6 As a result of the elections, County Councillor membership on the group has been reduced to just three. It would be good to have three or four more Committee members who would be interested in joining in this important work. As a rough guide the Task Group meets at County Hall two or three times during the course of the year. A councillor will be invited to serve on at least one of the sub-groups which again will meet two or three times during the course of July, August and September to discuss the detail of the evidence submitted.

6.0 Recommendations

The Committee is recommended to:

- i. Consider the attached work programme and determine whether any further amendments should be made at this stage.
- ii. Consider the proposal regarding in depth review work in respect of

Employment of People with Learning Disabilities

- iii. Appoint three or four members to serve on the Older People Strategy Task group

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6 July 2009
Background Documents: None

**CARE AND INDEPENDENCE OVERVIEW AND SCRUTINY COMMITTEE
WORK PROGRAMME – June 2009**

Social Care Outcomes

S1. Health and emotional well-being	S2. Quality of Life	S3. Making a positive contribution	S4. Exercise choice and control	S5. Freedom from discrimination and harassment	S6. Economic well-being	S7. Personal dignity
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In-depth Scrutiny Projects

SUBJECT	AIMS/TERMS OF REFERENCE	ACTION/BY WHOM	PARTNERSHIP ISSUES	TIMESCALES
Access to Dementia Services	<ol style="list-style-type: none"> 1. To assess local interpretation of the National Dementia Strategy 2. To develop proposals for a good Dementia Service 3. Preparation of a Joint Commissioning Strategy. 	<p>Follow Up Actions</p> <p>Seamus Breen to submit report to Committee July 09</p>		<p>Final Report agreed by Executive February 2009</p> <p>Commissioning Strategy September 09</p>
Older Peoples' Strategy Engagement	Assessment of how North Yorkshire County Council engaged with older people as envisaged by the strategy affecting people 50 and over, adopted in October 2006 – Our Future Lives	Task Group Report		December 2009 /January 2010
Early Intervention and Prevention (POPPS)	Lessons learned from the POPPs project in the context of the wider prevention and early intervention agenda	To be considered at Mid-Cycle Briefing		Report to Committee on Scope – September 2009

**CARE AND INDEPENDENCE OVERVIEW AND SCRUTINY COMMITTEE
WORK PROGRAMME – June 2009**

Overview Reports

SUBJECT	AIMS/TERMS OF REFERENCE		ACTION/BY WHOM	PARTNERSHIP ISSUES	TIMESCALES	
S1. Health and emotional well-being	S2. Quality of Life	S3. Making a positive contribution	S4. Exercise choice and control	S5. Freedom from discrimination and harassment	S6. Economic well-being	S7. Personal dignity
2009						
<i>Scheduled Committee Meetings</i>	29 January <i>10.30am</i>	16 April <i>10.30am</i>	9 July <i>10.30am</i>	3 September <i>10.30am</i>	19 November <i>10.30am</i>	
<i>Scheduled Agenda Briefing</i>	26 January <i>2.00pm</i>	14 April <i>10.30am</i>	3 July <i>10.30am</i>	1 September <i>10.30am</i>	17 November <i>2.00pm</i>	
<i>Scheduled Mid Cycle</i>	26 March <i>2.00pm</i>	14 May <i>10.30am</i>	28 July <i>2.00pm</i>	15 October <i>10.30am</i>	17 December <i>10.30am</i>	
Overview / Update Topics						
1. Assistive Technology/Telecare			Review Progress			
2. Individual Budgets/Self Directed Support		Update				
3. Provision on Meals			Follow Up			
4. NSF Report						
5. Improvement Review - PDSI		Action Plan Monitoring				
6. Integrated Community Equipment		Informal Members' Group Report				

7. Safeguards/No Secrets	Status Report: Presentation				
8. CSCI Annual Inspection	Report				

Outcome	Summary
Outcome 1: IMPROVED HEALTH AND WELLBEING	People in the council area have good physical and mental health. Healthier and safer lifestyles help lower their risk of illness, accidents, and long-term conditions. Fewer people need care or treatment in hospitals and care homes. People who have long-term needs and their carers are supported to live as independently as they choose, and have well timed, well-coordinated treatment and support.
Outcome 2: IMPROVED QUALITY OF LIFE	People who use services and their carers enjoy the best possible quality of life. Support is given at an early stage, and helps people to stay independent. Families are supported so that children do not have to take on inappropriate caring roles. Carers are able to balance caring with a life of their own. People feel safe when they are supported at home, in care homes, and in the neighbourhood. They are able to have a social life and to use leisure, learning and other local services.
Outcome 3: MAKING A POSITIVE CONTRIBUTION	People who use services and carers are supported to take part in community life. They contribute their views on services and this helps to shape improvements. Voluntary organisations are thriving and accessible. Organisations for people who use services and carers are well supported.
Outcome 4: INCREASED CHOICE AND CONTROL	People who use services and their carers are supported in exercising control of personal support. People can choose from a wide range of local support.
Outcome 5: FREEDOM FROM DISCRIMINATION AND HARASSMENT	People who use services and their carers have fair access to services. Their entitlements to health and care services are upheld. They are free from discrimination or harassment in their living environments and neighbourhoods.
Outcome 6: ECONOMIC WELL-BEING	People who use services and their carers have income to meet living and support costs. They are supported in finding or maintaining employment.
Outcome 7: MAINTAINING PERSONAL DIGNITY AND RESPECT	People who use services and their carers are safeguarded from all forms of abuse. Personal care maintains their human rights, preserving dignity and respect, helps them to be comfortable in their environment, and supports family and social life.