ITEM 9

#### NORTH YORKSHIRE COUNTY COUNCIL

# CARE AND INDEPENDENCE OVERVIEW AND SCRUTINY COMMITTEE

#### **3 FEBRUARY 2011**

#### **WORK PROGRAMME REPORT**

## 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.'

#### 3.0 Requests for the Committee to add topics to its Work Programme

- 3.1 I have received two requests that the Committee undertake work:-
  - 1. Scrutiny of the County Council Strategy for Support to Carers

David Harbourne, Chair of the Carers' Resource, Ripon, Harrogate, has invited the Committee to undertake a review of the County Council's position, strategy and plans for supporting carers in communities. His reasons for this are outlined in the Appendix attached.

Further information will be available at the meeting.

#### 2. Supporting People: Involvement of Members

I have received a request from a Craven District Council representative on the Joint District and County Supporting People Elected Member Panel. This Panel combines representatives of the District and County Council (Portfolio Holders). Its primary responsibility is to oversee the implementation of the North Yorkshire Supporting People Strategy. It does this by informally holding to account the officer

commissioning body and Supporting People Team. It therefore acts in a quasi-scrutiny capacity in that it ensures that the Strategy is delivered as intended. The Members who serve on the Group also act as champions within respective authorities.

Since submission of the Councillor's request that the Committee review the governance arrangements of the Joint Group, its status has been reviewed. It is expected that the Group in its current format will be dissolved but the officer group and commissioning body will be retained. In the light of this it is probably timely that the Committee review the changes, but as part of understanding the way services that underpin the Supporting People Strategy are delivered.

In the first instance it might be helpful to refer the suggestion to your Group Spokespersons at the Mid-Cycle Briefing.

### 4.0 Drugs and Alcohol Commissioning: In-depth Review

- 4.1 The Committee responded to concerns about the leadership and direction of the DAAT Board by reviewing governance, contractual arrangements with providers and action plans. The Committee was impressed at the recent progress made and highlighted two key findings
  - There is strong strategic level commitment from partner organisations to the objectives of the Board.
  - There is demonstrable evidence of activity and change, which would benefit communities and provider organisations.
- 4.2 The remaining areas for review are around how different stakeholders, especially providers and users of carers, understand the local landscape pattern and the aims of services and pressures faced. This is reflected in the attached project plan.
- 4.3 For the medium and long-term the Committee always intended to consider broader, more thematic issues around the balance of commissioning of services to address drugs and alcohol misuse.
- 4.4 For that reason colleagues from the Board together with provider organisations have been asked to return on Thursday 24 February 2011 at 10.30am so that a more detailed assessment might be completed. This aim of this workshop is to find out what it feels like on the ground for practitioners and representatives of provider organisations and service users in the County area.
- 4.5 This will also help to shape the next phase of this review by discussing:

- What evidence is there that the Board's actions are improving things and what has been the reaction of stakeholders, providers, users and carers? Do these agencies and stakeholders share the Substance Abuse Board's view of its success?
- how the Committee moves the alcohol commissioning intervention and prevention agenda forward including -
- Looking at the balance in commissioning activity between drug and alcohol treatment; what would an effective transformation of services look like and how might we plan for delivery?
- What is the bigger picture around intervention and the notion that more money spent on intervention and preventative services, especially on combating alcohol abuse, benefits other services 'upstream' (especially Health).
- How are elected Members to be involved as place shapers/community leaders so that as this debate broadens, their expectations are understood?
- To what extent can the Committee/Elected Members press for these to be priorities for the Director of Public Health especially as public health responsibilities are incorporated within local authorities?
- 4.6 The Corporate and Partnerships Overview and Scrutiny Committee has been invited to participate in this review in the light of its terms of reference and remit around community sustainability. The Committee has been invited to nominate a representative or representatives to the 24 February 2011 meeting.

#### 5.0 Budget Issues

5.1 Following your special meeting on 25 November Group Spokespersons reviewed the latest position on the ACS budget savings for 2010-15 at their last Mid-Cycle Briefing. They asked that the attached schedule be included with your papers so that if Members had any further questions on latest developments they could be raised.

#### 6.0 Re-ablement

6.1 Re-ablement services (in association with other services eg Telecare) play an important role in the way that people are supported in living independently. Therefore the Committee has a role to play in scrutinising these services to ensure that they are addressing individual needs.

- 6.2 When you received a presentation on local developments you asked that a discussion/workshop has been arranged to review the shape, impact and effectiveness of Re-ablement services in North Yorkshire.
- 6.3 As advised this will be held on Wednesday, 2 March 2011 at 2:00 pm in MR3, County Hall, Northallerton.

#### 7.0 Recommendations

7.1 The Committee is recommended to consider the attached work programme and determine whether any further amendments should be made at this stage.

### BRYON HUNTER SCRUTINY TEAM LEADER

County Hall Northallerton

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24 January 2011

**Background Documents: None** 

CARE	CARE AND INDEPENDENCE OVERVIEW AND SCRUTINY COMMITTEE - WORK PROGRAMME – January 2011											
Social Care Outcomes												
S1. Health and emotional well-being	S2. Quality of Life	S3. Making a positive contribution	S4. Exercise chand control	noice	S5. Freedom from discrimination and harassment	S6. Economic well- being	S7. Personal dignity					
In-depth Scrutiny Projects												
SUBJECT	AIMS/	TERMS OF REFERENC	A	CTION/BY WHOM	PARTNERSHIP ISSUES	TIMESCALES						
Access to Dementia Services	<ol> <li>To assess local interpretation of the National Dementia Strategy.</li> <li>To develop proposals for a good Dementia Service.</li> <li>Preparation of a Joint Commissioning Strategy.</li> </ol>			Final Exec Furth Demo	Report agreed by utive February 2009 per work on the entia Declaration elected Member vement in local entia forums	Network involves partners from all sectors	Decision to be taken on next phase February 2011					
Valuing Employment	preparedness Employment No  2. What are the disability in emp  3. What worked/di into employment  4. What are the s country and wh North Yorkshire  5. How do the Co Council underst  6. What awarene partners?	To assess and contribute to our and our partners' preparedness for the implications of Valuing Employment Now.  What are the numbers of people with learning disability in employment in North Yorkshire now?  What worked/did not work in getting these individuals into employment in North Yorkshire?  What are the success stories from elsewhere in the country and what lessons might be brought back to North Yorkshire?  How do the Committee assist the Corporate County Council understand this agenda?  What awareness is there among other critical partners?  What should be the role of ACS?		Task Group		Working with partners in all sectors to encourage a positive approach	Final Report to be agreed					

Extra Care	Report to January Committee regarding objectives of					decided	Collaborativ	o vonturo	To be decided		
Development		ential Terms of Reference				decided	involving	and role of housing		To be decided	
Re-ablement	effectiveness	nd report upon the shape, impact and of reablement services that are being anned to be delivered in North Yorkshire				decided		Starts 2011		ts January	
Drugs and Alcohol Team		round the strategic assessment on the of the DAAT to deliver against its core s.				Group with rate and erships				al report ring/summer I1	
		structure of hoabuse in the Nourea.									
	,	is of the bala etween alcohol		•							
						2011/12	·				
Scheduled Committee Meetings		3 February	17 March	2 Ju	ne	8 September	10 November	2 Februa	ary	12 April	
		10:30 am	10:30 am	10:30	am	10:30 am	10:30 am	10:30 am 10:30 al		10:30 am	
Scheduled Agenda Briefing		3 February	17 March	2 Ju	ne	8 September	10 November	0 November 2 Februa		12 April	
		9:30 am	9:30 am	9:30	am	9:30 am	9:30 am	9:30 am 9:30 ar		9:30 am	
Scheduled Mid Cycle		24 February	14 April	14 J	uly	13 October	6 January	8 Marc	h	24 May	
		10:30 am	10:30 am	2:00	pm	10:30 am	10:30 am	10:30 a	m	2:00 pm	

Overview Reports									
Overview / Update Topics									
Personalisation/Self Directed     Support			Update						
Safeguarding Adults (Board)					Annual Review				
Early Intervention and Prevention									
4. Dignity Champion	Report Due								
5. Library Consultation	Update	Review Results							
6. Care Charging		Review Results							
7. JSNA, Adult Vision for Social Care, Big Society and Commissioning	Overview Report								
Learning Disabilities and Out of County Placements	Overview Report								

Would like to suggest that the Care and Independence Overview and Scrutiny Committee should carry out a scrutiny of the County Council's strategy and plans for supporting carers.

In November, the Coalition Government published "Recognised, valued and supported: next steps for the Carers Strategy". This identifies the actions that the Government will take over the next four years to ensure the best possible outcomes for carers and those they support, including:

- supporting those with caring responsibilities to identify themselves as carers at an early stage, recognising the value of their contribution and involving them from the outset both in designing local care provision and in planning individual care packages
- enabling those with caring responsibilities to fulfil their educational and employment potential
- personalised support both for carers and those they support, enabling them to have a family and community life
- supporting carers to remain mentally and physically well.

North Yorkshire County Council provides and/or commissions a range of services for carers. Working jointly with NHS North Yorkshire and York, NYCC has contracts with five third sector organisations to provide information and other forms of support to adult, parent and young carers, and to carry out carers' assessments on behalf of the County Council. In 2010-11, Adult and Community Services committed mainstream funding totalling £217,000 to these contracts; Children and Young People's Services committed £176,000; and NHSNYY committed £182,000. NYCC and NHSNYY are currently negotiating new contracts with the five organisations. The new contracts are due to run for two years from April 2011.

In addition, in 2009/10, North Yorkshire County Council received Carers' Grant funding totalling £2,169,271. From this sum, grants totalling £145,909 were made to three carers' centres. I do not know which other organisations received grants from this budget, or how much of the budget was retained by NYCC for the in-house management and/or

delivery of carers' services, because officers have so far refused requests for this information.

In a paper to the Care and Independence Overview and Scrutiny Committee dated 9 December 2010, the Corporate Director - Adult and Community Services reported plans to reduce support to carers by £457,000 in 2011-12. However, he did not make it clear that the grants currently paid to carers' centres (ie £145,909) were to be eliminated entirely.

Given the current economic climate, cuts in public expenditure are inevitable and the third sector knows it is not immune. However, the cuts will affect some organisations more than others, and it is not clear how officers have reached these decisions. According to the Compact, before reducing the funding, NYCC should have assessed the impact on beneficiaries, discussed potential implications with the organisations concerned and given them a chance to respond. This hasn't happened.

However, I would not want this to turn into a sterile "blame game" or to focus solely on the issue of funding, because in the coming years, we will all have to find new ways of working. The main issue is how NYCC can work with a wide range of partners to deliver the aims of the carers' strategy published in November. This is important because there are already a huge number of carers in North Yorkshire, and the number is set to grow further because of demographic changes such as an ageing population and improved life expectancy among people with long-term conditions.

Some of the reasons for supporting carers are set out below. The list isn't exhaustive, but I believe it supports the case for a scrutiny inquiry.

We need carers to be able to cope with the stresses, strains and emotions of their role: if they can't, the people they care for are very likely to make greater demands on publicly-funded health and social care services.

We need carers to think about their own health, too: carers providing high levels of support are around twice as likely to suffer poor health than people without caring responsibilities. We need to support carers in the workplace. Currently 3 million people in the UK juggle paid work with unpaid caring responsibilities - one in seven people in any workforce - and this number is set to increase by half as much again in the next 25 years. Staying in work (even part time) can be a struggle for carers, yet all the evidence shows the economic, social and health benefits of helping them to stay in (or return to) some form of employment.

We need to make sure carers have access to information, ideally as soon as possible after they take on their caring role. Information gives carers (and the people they support) greater choice and control over every aspect of their lives.

We need to look out for the added pressures faced by young carers. Caring for a parent can harm a young person's chances of achieving their full potential at school (and beyond), so it's vital they get the help and support they need to achieve their ambitions.

We need to give carers breaks from their responsibilities, so they can recharge their batteries and have a social life of their own. Short breaks of an hour or two make a big difference to carers' health and well-being. Longer periods of respite care are also valuable for some carers.

Overall, a little support for carers can go a very long way to easing the pressures on their lives, and making it easier for them to cope, for longer. There are strong moral reasons for supporting carers. There are also benefits to the taxpayer, for example by reducing the pressure on health, social care and benefits budgets.

For all of these reasons, it would be timely for the scrutiny committee to look into the County Council's strategy and plans for supporting carers.

I hope this is all the information you need for now, but please do not hesitate to contact me if I can be of any further assistance.

David Harbourne Chair The Carers' Resource



#### Analysis of ACS Budget Savings 2010-15

Service Area	Budget 2010-11	Budget Saving Proposal	2010-11	2011-12	2012-13	2013-14	2014-15	Grand Total	%
	£000's		£000's	£000's	£000's	£000's	£000's	£000's	
Libraries and Community Services	8,373	Libraries and Community	225	1,049	500	500		2,274	27
Purchased Res. Care for Older People	22,205	Residential Placements	2,641	2,600	2,600			7,841	35
In-house EPHs	8,489	Closure of Elderly Persons Homes	188	-76	139	360	160	771	9
		Home Care Procurement	900					900 }	
Home care for OP {	21,988	Increased Charging	136					136 }	27
		Reablement	908	703	1,716	1,500		4,827 }	
Night Service	1,036	Night Sitting Service		1,036				1,036	100
Other services for OP	3,089	Reduced day provision and meals	131	371				502	16
Carers Budgets	2,186	Reduced support to Carers	. 243	457	4			700	32
Voluntary sector funding	5,762	Reduced funding to the Voluntary Sector	275	1,390	rigo.			1,665	29
Care Management & Support Functions	18,481	Management and Support	1,632	1,943	1,885			5,460	30
Services for people with Learning Disabilities	38,095	Learning Disabilities	1,000	578	-216	1,400		2,762	7
Services for people with Physical Disabilities	7,003		v.					0	0
Mental Health Services	4,594							. 0	. 0
Other budgets (net) - incl government grants	-10,701							0_	0
Total	130,600		8,279	10,051	6,624	3,760	1,60	28,874	22