

## NORTH YORKSHIRE COUNTY COUNCIL

### CARE AND INDEPENDENCE OVERVIEW AND SCRUTINY COMMITTEE

2 FEBRUARY 2011

#### WORK PROGRAMME REPORT

##### **1.0 Purpose of Report**

- 1.1. The Committee has agreed the attached work programme
- 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 Dementia Day Services**

- 3.1 The Committee has maintained an interest in developments regarding Dementia Day Services in the Hambleton and Richmond area. It was agreed to fund these services until April 2012. In the meantime, assessments and consultations are being undertaken with carers and service users.
- 3.2 Group Spokespersons agreed that the criteria for assessing eligibility for day services should be made available to you. See attached.

##### **4.0 Alcohol Related harm**

- 4.1 Committee Members have received correspondence about the meeting with Public Health and PCT colleagues on Alcohol Related Harm. This will be held on Friday, 10 February at 10:00 am in the HAS Conference Room. Discussions will take place on the needs assessment and what strategies the Committee might wish to support and champion as public health responsibilities are passed to the authority. Members have been requested to advise whether they are able to attend this meeting.

##### **5.0 Complex Needs**

- 5.1 In March 2011 the Committee was advised of a review of the appropriateness and cost of out of County complex needs placements for people with a disability.

- 5.2 North Yorkshire, in common with many other local authorities, has insufficient special local provision to meet the needs of people with a disability who have complex needs. Reviews have been undertaken in detail of how plans for care are delivered by agencies along with the quality and cost of provision. Options include, commissioning local specialist provision for people with a disability who may be suitable to return to North Yorkshire as well as new people in transition from Children's Services requiring such placement.
- 5.3 Your Group Spokespersons were advised that much has been done to map our future need and explore cost effective local solutions for people with complex needs requiring future services. But they agreed this work was not at a stage where a report to Committee would be helpful.
- 5.4 It was therefore decided that a report be made later in the year which struck a balance between updating Members on progress, but also gives you some indication of the shape of services to be developed.

## **6.0 Dates of Meetings**

- 6.1 Having looked at the dates of upcoming meetings your Group Spokespersons agreed that the diary dates for meetings over the next few months just does not work (see attached Appendix); three meetings in four months is not practical. Canvassing for an alternative sequence of dates was considered, but the favoured option is to dispense with the April meeting of the Committee and if circumstances warrant look to arrange a special meeting in July. I will report verbally at the meeting.

## **7.0 Autism**

- 7.1 The Chairman received a letter from a local resident regarding services for people with Autism. The Group Spokespersons learned more about this with a briefing on the implications of the "Fulfilling and Rewarding Lives: Evaluating Progress" document from the Department of Health. This identifies themes in relation to Autism and mirrors the questions posed by the constituent in his letter. This requires the Directorate to undertake a self-assessment by mid-February, and will be referred to your April or May meeting.
- 7.2 Group Spokespersons heard that the Young People Overview and Scrutiny Committee is reviewing Special Needs Support, especially the period known as "Transitions". An analysis of support for Autism will be included in that Strategy. Whilst the Group Spokespersons were of a mind to defer to Young People to avoid duplication, it is recognised that issues with relation to adults with Autism should not be marginalised.
- 7.3 The Committee should therefore review adult Autism as a separate topic. We will of course need to make sure that each of the two Committees shares intelligence.

7.4 Your Chairman therefore intends to have further discussions with Councillor Keith Barnes so that the two Committees are working in tandem.

## **8.0 Low Level Intervention and Prevention**

8.1 Your Group Spokespersons agreed with the notion that an extended review regarding Low Level Intervention and Prevention would be appropriate. This would encompass scrutiny of individual topics by groups of Members in particular areas. At the outset the strategic assessment tool, mentioned in the attached project plan will be used so that the Committee can satisfy itself that the authority is moving in the right direction on Low Level Intervention and Prevention.

8.2 The Chairman would welcome discussion at the meeting as to how the aims of this review can be met.

## **9.0 Triangulation Meeting**

9.1 The Chairman recently met with the Director and Portfolio Holder to discuss Directorate priorities, issues on the horizon and how they might influence the Committee's work programme. This discussion covered the awaited National Carers Strategy, the Future Funding of Social Care and the Government's response to the Dilnot Report. It was suggested that the Committee might benefit from a briefing report on Personalisation and Commissioning, particularly picking up the points Scrutiny Members have raised regarding the commissioning implications for local organisations as a result of Personalisation.

9.2 Also for future consideration could be initiatives emerging from the continuing discussions with PCT colleagues on the Integration agenda.

## **10.0 Recommendations**

10.1 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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23 January 2012

Background Documents: None

**Helen Taylor**  
**Corporate Director – Health and Adult Services**

**Your Ref:**

**Our Ref:** PR/LET/ADS/23.12.11/RB  
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23<sup>rd</sup> December 2011

Dear Colleagues

We are completing the reviews of present attenders of the Alzheimers Day Centres across Richmondshire and Hambleton, including Easingwold. A day service will continue in the future, though we cannot be certain at present about the number of days that will take place in each area. Until we are certain, Social Care and Community Mental Health Team (CMHT) staff should continue to accept referrals for people, with dementia, who need support. Attendance at day centres is one of the options to meet these individuals' needs, subject to eligibility criteria.

Social Care staff operate to the Fair Access to Care Services Criteria (FACS) which presently stands at the "Moderate Need" level and above. However, reference to the FACS Criteria will demonstrate that access to day respite for carers requires the individual to have substantial levels of need. In order to clarify Social Care's definitions are outlined at the end of this letter.

We note that the Alzheimer's Society Day Services are contracted to support people with moderate to severe needs and Health staff will need to assess against this criteria.

We would, therefore, expect Social Care and CMHT staff to jointly assess individuals who express a need in this service to ensure that they are dealt with equitably. The outcomes of these assessments should be shared with the managers of the local Alzheimer's Day Centre so they are clear of the thinking behind the decisions.

Yours sincerely

Yours sincerely

**PHIL RICHARDSON**  
General Manager

**JUDITH KNAPTON**  
Head of Commissioning (Adult and Community Services)



**FAIR ACCESS TO CARE SERVICES:  
ELIGIBILITY FRAMEWORK 2011:  
and North Yorkshire Eligibility Threshold for 2011/12**

Low – when	Moderate – when
<ul style="list-style-type: none"> <li>• There is, or will be, an inability to carry out one/two personal care or domestic routines.</li> <li>• Involvement in one/two aspects of work, education or learning cannot or will not be sustained.</li> <li>• One/two social support systems and relationships cannot or will not be sustained.</li> <li>• One/two family and other social roles and responsibilities cannot or will not be undertaken.</li> </ul> <p><b>2011/12</b> Risks in this band will not be met, but advice and information will be offered and people signposted to other services in the community:</p> <ul style="list-style-type: none"> <li>◆ support from voluntary groups</li> <li>◆ handy person services</li> <li>◆ advice on whether a person is claiming all the benefits to which they are entitled</li> <li>◆ out of hospital support</li> <li>◆ hot meals</li> <li>◆ telecare to help people feel safe and supported</li> <li>◆ support for carers</li> </ul>	<ul style="list-style-type: none"> <li>• There is, or will be, an inability to carry out several personal care or domestic routines.</li> <li>• Involvement in several aspects of work, education or learning cannot or will not be sustained.</li> <li>• Several social support systems and relationships cannot or will not be sustained.</li> <li>• Several family and other social roles and responsibilities cannot or will not be undertaken.</li> </ul> <p><b>2011/12</b> North Yorkshire will ensure support in this band where moderate risks or risks which are likely to become moderate within six months can be improved, reduced or contained.</p> <p><i>Support might include:</i></p> <ul style="list-style-type: none"> <li>◆ START</li> <li>◆ low level personal budget</li> <li>◆ small packages of care</li> <li>◆ support for carers</li> <li>◆ support to help people access paid or unpaid employment or training</li> <li>◆ Intermediate care.</li> </ul>
Substantial – when	Critical – when
<ul style="list-style-type: none"> <li>• There is, or will be, only partial choice and control over the immediate environment.</li> <li>• Abuse or neglect has occurred or will occur.</li> <li>• There is, or will be, an inability to carry out the majority of personal care or domestic routines.</li> <li>• Involvement in many aspects of work, education or learning cannot or will not be sustained.</li> <li>• The majority of social support systems and relationships cannot or will not be sustained.</li> <li>• The majority of family and other social roles and responsibilities cannot or will not be undertaken.</li> </ul>	<ul style="list-style-type: none"> <li>• Life is, or will be threatened.</li> <li>• Significant health problems have developed or will develop.</li> <li>• There is, or will be, little or no choice and control over vital aspects of the immediate environment.</li> <li>• Serious abuse or neglect has occurred or will occur.</li> <li>• There is, or will be an inability to carry out vital personal care or domestic routines.</li> <li>• Vital involvement in work, education or learning cannot or will not be sustained.</li> </ul>

**2011/12**

North Yorkshire will ensure support in this band where substantial risks or risks which are likely to become substantial within six months can be improved, reduced or contained.

*Support might include:*

- ◆ personal budgets
- ◆ support for carers
- ◆ day respite for carers
- ◆ community care packages after reablement
- ◆ maximum use of telecare and rapid response services.

- Vital social support systems and relationships cannot or will not be sustained.

- Vital family and other social roles and responsibilities cannot or will not be undertaken.

**2011/2012**

North Yorkshire will ensure support in this band where critical risks or risks which are likely to become critical within six months can be improved, reduced and contained.

*Support might include:*

- ◆ nursing and end of life care
- ◆ enhanced residential care
- ◆ extra care with personal care

**NORTH YORKSHIRE COUNTY COUNCIL**

**Care & Independence Overview & Scrutiny Committee**

**Mid-Cycle Briefing: 6 January 2012**

**Meetings in 2012**

Future meetings have been scheduled for:

6 January – Mid-Cycle Briefing, 10:30 am

2 February – Agenda Briefing, 9:30 am

2 February – **Committee**, 10:30 am

8 March – Mid-Cycle Briefing, 10:30 am

12 April – Agenda Briefing, 9:30 am

12 April – **Committee**, 10:30 am

28 May – Agenda Briefing, 2:00 pm

30 May – **Committee**, 10:30 am

12 July – Mid-Cycle Briefing, 2:00 pm

29 August – Agenda Briefing, 10:30 am

30 August – **Committee**, 10:30 am

20 September – Mid-Cycle Briefing, 2:00 pm

24 October – Agenda Briefing, 10:30 am

25 October – **Committee**, 10:30 am

6 December – Mid-Cycle Briefing, 10:30 am

## Care and Independence Overview &amp; Scrutiny Committee

## Early intervention, low level prevention - Plan of Scrutiny Review

TOPIC	Independence, prevention and early intervention – are we doing enough	
<b>OBJECTIVE</b>	<p>To review and report upon the shape, impact and effectiveness of prevention and early intervention services that are being and/or are planned to be delivered in North Yorkshire</p> <p>To identify issues, challenges and any improvements that may be recommended to the Executive and/or Portfolio Holder.</p>	
<b>REASONS FOR REVIEW</b>	<p>Supporting people to remain independent is central to a strategic approach to wellbeing and to cost effective services. This involves preventing them from needing intensive care services by intervening early before they reach crisis point.</p> <p>The coalition government's, 'Vision for Social Care' says that prevention is best achieved through community action working alongside statutory services. It emphasises the importance of local support networks and user-led organisations in reducing isolation and vulnerability and points out that this goes well beyond the social care sector and must also focus on what people can do for each other.</p>	
<b>CORPORATE OBJECTIVES</b>  (Please tick as appropriate)	To ensure good access for all	
	To help people to live and thrive in safe and secure communities	√
	To help all children and young people to develop their full potential	
	To promote a flourishing economy	
	To maintain and enhance our environment and heritage	
	To improve health and wellbeing and give people effective support when they need it	√
<b>TASK GROUP MEMBERS</b>	To be decided	
<b>STAKEHOLDERS PARTICIPANTS</b>	Changes with topic considered	
<b>HIGH LEVEL ISSUES</b>	<p><b><u>What's the vision</u></b> - in partnership? Communicated widely?</p> <p><b><u>What does Leadership look like locally</u></b> -</p> <p><b><u>Whole System working-</u></b> Improving the quality of (older) people's lives requires input from a range of public provision.</p>	



	<p><b><u>Nothing for us without us - Involving (Older) People</u></b> - Involving people is vital to ensuring that public provision is designed to meet their needs.</p> <p><b><u>“All the colours and all the sizes” - Service design</u></b> - Promoting the independence and well-being requires services or interventions which span a wide range of need – from ‘high’ to ‘low’ - input from agencies well beyond just health and social care</p> <p><b><u>What difference is it making? Service delivery</u></b> - It is not enough just to have the right service elements in place. Effective delivery requires attention to a number of system and operational issues. Services need to be reviewed to ensure they are joined-up, co-ordinated and meet the needs of older people</p> <p><b><u>Commissioning for Independence</u></b> - At the heart of delivering good outcomes - good information on how system is performing in addressing needs - is joint commissioning the norm/effective</p> <p><b><u>Sustainability and Quality</u></b> – is the evidence showing more than just a few prevention initiatives – will the outcomes be achieved and sustained</p> <p><b><u>Monitoring and Quality</u></b> – must be done jointly</p>
<p><b>WORK PROGRAMME</b></p>	<p>Each issue programmed on merit/what works</p> <p>Initial briefing to develop understanding, plans for the future and if appropriate determine the scope of the expected in-depth review</p> <p>Schedule series of discussions and informal consultations with known providers and community interest groups to determine topics based upon areas of concern and best practice.</p> <p>Groups of Members prepare for committee examination evidence of activity and service development.</p> <p>Review evidence of activity regarding strategic intention and commitment <b>(high level issues above)</b></p> <p>Follow up discussions with groups to establish extent is realised on the ground</p>
<p><b>SUCCESS INDICATORS</b></p>	<p>Review clearly contributes to greater understanding of services required and provided by the council and its partners for the community at large.</p>

## CARE AND INDEPENDENCE OVERVIEW AND SCRUTINY COMMITTEE - WORK PROGRAMME – January 2011

### Vision for Social Care

P1. Prevention	P2. Personalisation	P3. Partnership	P4. Plurality	P5. Protection	P6. Productivity	P7. People
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### In-depth Scrutiny Projects

SUBJECT	AIMS/TERMS OF REFERENCE	ACTION/BY WHOM	TIMESCALES
Alcohol Related Harm	<p>Wider analysis of the balance of activity and relationship between alcohol and drug use in our communities</p> <p>Steer through a countywide partnership strategy on combating alcohol misuse and related harm.</p> <p>How, with the support of partners; the County Council might assume leadership of this agenda.</p> <p>Develop a high-level alcohol harm reduction strategy. This in turn would be used to give direction and focus on future commissioning intentions.</p>	Task Group with Corporate and Partnerships	<b>Final report spring/summer 2012</b>
Possible Project on Prevention and Early Intervention and			

### 2012

		2 February 10:30 am	12 April 10:30 am	30 May 10:30 am	30 August 10:30 am	25 October 10:30 am
<i>Scheduled Committee Meetings</i>						
<i>Scheduled Agenda Briefing</i>		2 February 9:30 am	12 April 9:30 am	28 May 2:00 pm	29 August 10:30 am	24 October 10:30 am
<i>Scheduled Mid Cycle</i>	6 January 2012 10.30am	8 March 10:30 am		12 July 2:00 pm	20 September 2:00 pm	6 December 10:30 am

## Overview Reports

Overview / Update Topics						
1. Personalisation/Self Directed Support						
2. Dementia		Poss Day Services Update	Day Services Position		Collaborative - Update	
3. HAS Vision – Timetable of Consideration of Books						
4. Safeguarding Adults (Board)		Annual Report of the Board				
5. Dignity Champion		Report Due				
6. Care Charging					Review end of transition period	
7. JSNA, Adult Vision for Social Care, Big Society and Commissioning						
8. Out of County Placements/Complex Needs				Update		
9. Learning Disabilities Strategy					Update	
10. Funding for Social Care			Update			
11. Extra Care for people under 50, especially those with long-term conditions	To be decided					