NORTH YORKSHIRE COUNTY COUNCIL

CARE AND INDEPENDENCE OVERVIEW AND SCRUTINY COMMITTEE

31 May 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.
- 3.2 I reported that a review of the Alzheimer's Day Centres has been taking place. This work is now concluded. All of the people who attend the Day Centres have been jointly reviewed by social care staff, using the Fair Access to Care Services eligibility criteria, and Community Psychiatric Nurses from the Community Mental Health Teams. The outcomes of the review were shared with the staff and volunteers of the Alzheimer's Society at three meetings on 8, 9 and 10 February 2011.
- 3.3 The key outcomes of the review were:
 - The day centres in Hambleton at Easingwold, Northallerton, Stokesley and Thirsk will provide services on two days per week. This will keep Northallerton and Stokesley at their previous level and reduce Easingwold and Thirsk from three days.
 - The day centre in Richmond will provide services on three days per week, a reduction from a previous level of five days.

- This level of services arises from the assessed needs of the individual attenders.
- These services will be paid for by a joint contract between the County Council and the Primary Care Trust which will operate from 1 April 2012 to 31 March 2013. The Day Centres will focus on providing support to people with moderate to severe care needs. After that date, all existing users of the service will be offered a personal budget or direct payments to spend as they wish. This is a requirement of the Government's personalisation agenda.
- The above arrangement offers a transitional period of support to the Alzheimer's Society to continue with these valued services while allowing them to explore the opportunities offered by the greater freedom arising from personalisation. They are looking at offering additional services, to respond to local demand, from people outside the Council's eligibility criteria who would wish to make use of the services offered by the Society.
- 3.4 The Alzheimer's Society will also continue to offer other services across all North Yorkshire, including Hambleton and Richmondshire, for people with mild to moderate levels of Dementia. These services provide information to those with Dementia and their carers, education and training for individual carers, and personal support to individuals to help them live with their condition through the provision of 'care navigators' who will help find appropriate support in their local communities.
- 3.5 The basis for these changes is the desire to modernise and personalise the services provided by the Alzheimer's Society to make them more attractive to people in the future. This is not a cost saving exercise and, indeed, additional funding has been made available to ensure a smooth transition between the present block contracting arrangement and the introduction of the personalisation agenda.
- 3.6 At a recent Mid-Cycle Briefing it was agreed that, on the basis the contract has been extended and much of this information has already been shared with Members, a further report to your Committee today was not necessary. However Group Spokespersons have agreed that a full report more generally about Dementia Day Services in the community, picking up the themes from the Prime Minister's Challenge will be submitted to your meeting in November.
- 3.7 The update in October will also provide Members with information on the work undertaken by the Dementia Network.

Prime Minister's Challenge

3.8 Your Chairman attended the national launch of the Prime Minister's challenge on Dementia which aims to deliver major improvements in

Dementia care and research by 2015. This set out his Dementia challenge to society, the medical profession, business and Government, alongside the Alzheimer's Society publishing their report 'Dementia 2012: A national challenge'. The intention is to build on the achievements of the existing National Dementia Strategy.

- 3.9 The government will focus on improving three areas
 - Dementia awareness
 - quality care
 - research
- 3.10 By 2015 the aim is to have at least 20 cities, towns and villages working together as a Dementia-friendly community where cities, towns, villages and local businesses and organisations support people to live well with Dementia, helping them remain independent for longer. It is this aim where the Chairman believes the Committee can make a telling and important contribution. The Alzheimer's Society will lead on development, in consultation with the communities themselves and people with Dementia and their carers.
- 3.11 This autumn the Department of Health will fund a high-profile public awareness campaign, to raise awareness of Dementia and build on the lessons of previous campaigns. It will help to ensure people have access to advice on recognising early signs of Dementia, where to get help and support, and how to make life easier for people with Dementia and their families.
- 3.12 How the Committee can play its part in this will be considered further by Group Spokespersons at their Mid-Cycle Briefing in July. Comments are of course welcome.

Attendance at ICG Conference

- 3.13 Your Chairman attended the Independent Care Group Conference in York recently particularly to listen to the presentation and thoughts of David Sheard, Director of Dementia Care Matters. David founded Dementia Care Matters in 1995, with the purpose of demonstrating that Dementia care is all about emotional care. He has developed a reputation as a challenging and motivational speaker, holding up a mirror to reflect the realities of Dementia care and what it really takes to, in his words, "get it".
- 3.14 Your Chairman and I were impressed how David portrayed a model of Dementia care where passion, strategic management and practise skills can be joined up. His view is that for too long the emphasis on quality of services has been over focussed on policies, procedures, systems and standards that consume staff in what matters most. Dementia care in terms of the lived experience of people has therefore produced boredom, lethargy and staring into space, this combined with an institutional; "us and them" culture of care has left the care and support of people living with Dementia rooted in the past.

3.15 Councillor Hall spoke briefly to David Sheard and his colleagues about his involvement with local care homes. The possibility of meeting with local representatives of Dementia Care Matters to discuss mutual areas of interest and concern were discussed. One line of enquiry that could be pursued is the linkages between Dementia friendly communities and his approach to modern care methods in residential establishments.

4.0 Low Level Intervention and Prevention

- 4.1 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 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.
- 4.2 The initial briefing for this work will be held on Thursday, 24 May. As this is after the dairied dispatch of your agenda papers, a verbal update will be given.

5.0 Recommendations

5.1 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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22 May 2012

Background Documents: None

CARE A	ND INE	DEPENDEN	CE OVE	RVIEW AND	SCR	RUTINY COMMI	IIIE	E - WORK PROGI	RAMME - Ja		2011	
Vision for Social Care												
P1. Prevention	P2. Personalisation		P3. Partnership		P4. P	urality P5. Protection		Protection P	P6. Productivity		P7. People	
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In-depth Scrutiny Projects												
SUBJECT		AIMS/TERMS OF REFERENCE						ACTION/BY WHOM			TIMESCALES	
Alcohol Related Harm		Wider analysis of the balance of activity and relationship between alcohol and drug use in our communities						Task Group with Corporate and Partnerships			Final report spring/summer 2012	
		Steer through a countywide partnership strategy on combating alcohol misuse and related harm.										
		How, with the support of partners; the County Council might assume leadership of this agenda.										
		Develop a high-level alcohol harm reduction strategy. This in turn would be used to give direction and focus on future commissioning intentions.										
Possible Project on Prevention and Early Intervention and												
						2012						
Scheduled Committee Meetings				2 February	/	12 April		30 May	30 Augu	st	25 October	
			10:30 am 10:30 am 10:30 am		10:30 ar	n	10:30 am					
Scheduled Agenda Briefing		2 February		12 April		28 May	29 Augu	st	24 October			
		9:30 am 9:30 am					2:00 pm	10:30 am		10:30 am		
Scheduled Mid Cycle		6 January 2012 8 March					12 July	20 September		6 December		
		10.30a	10.30am 10:30 am 2:00 pm 2:00 pm				า	10:30 am				

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