

North Yorkshire County Council

Care and Independence Overview and Scrutiny Committee

Minutes of the meeting held on Thursday 14 December 2017 at 10.00am at County Hall, Northallerton.

Present:-

County Councillor John Ennis in the Chair

County Councillors: Val Arnold (as substitute for Karin Sedgwick), Philip Broadbank, Eric Broadbent, Mike Chambers MBE, John Ennis (in the Chair), Caroline Goodrick, Helen Grant, Andrew Jenkinson, Stanley Lumley, John Mann, Stuart Martin MBE and Nicola Wilson.

Independent Sector: Mike Padgham (Independent Care Group)

In attendance:

County Councillors Caroline Dickinson and Michael Harrison (Executive Members for Adult Social Care).

Nigel Ayre (Chief Officer, Healthwatch) and Kathryn Reid (Regional Inspector CQC)

Officers: Ray Busby (Scrutiny Support Officer), Kathy Clark (Assistant Director, Commissioning (HAS)) Janine Tranmer (Head of Quality & Monitoring, Quality and Engagement), Dale Owens (Assistant Director of Care and Support, Health and Adult Services), Dr Lincoln Sargeant (Director of Public Health), Louise Wallace (AD Health and Integration, Commissioning (HAS))

Apologies:

County Councillors David Jeffels and Karin Sedgwick

Voluntary and Community Sector: Jill Quinn (Dementia Forward).

Copies of all documents considered are in the Minute Book

142. Minutes

Resolved –

That, the Minutes of the meeting held on 28 September 2017, having been printed and circulated, be taken as read and be confirmed and signed by the Chairman as a correct record.

143. Declarations of Interest

There were no declarations of interest to note.

144. Public Questions or Statements

The committee was advised that no notice had been received of any public questions or statements to be made at the meeting.

145. Care Standards

Considered –

- a) Introduction and Line of Enquiry from the Scrutiny Team Leader
- b) CQC responsibilities and Briefing - a presentation from Kathryn Reid
- c) HAS perspective and responsibilities - a presentation and briefing from Kathy Clark and Janine Tranmer
- d) Social Care and the Independent Sector - a presentation and briefing from Mike Padgham
- e) Healthwatch – a briefing by Nigel Ayre

Kathryn Reid, Regional Inspector for the Care Quality Commission, the independent regulator of health and adult social care in England, explained how the commission goes about making sure care services provide people with safe, effective, compassionate, high-quality care; and how the Commission encourages care services to improve.

North Yorkshire's quality compares favourably across the Northern region in terms of providers - of Care homes, Nursing Homes and Domiciliary Care - rated good and outstanding. There are no services in North Yorkshire rated inadequate overall. CQC continues to strive to get all providers to good and outstanding.

HAS staff explained the role of its quality and monitoring team to support development of market monitoring, trends analysis, and joint working with providers and regulators, including work on training and career pathways. Members were impressed with:

- the commitment to share information regionally;
- the creative approaches being taken to recruitment
- the way the directorate supports struggling providers and has engagement meetings with providers;
- the stated aim to get out to regulated services once every three years while investing in staff to get this down to once every 18 months; and
- how the directorate is looking to capture the service user voice.

Nigel Ayre explained that Healthwatch representatives undertake visits of health and adult social care provider premises within North Yorkshire known as, "to enter, view and observe". Representatives have open and frank conversations with service users, and share information. Healthwatch can then work with providers to improve - especially on the little things that might make a big difference.

Mike Padgham placed the local situation in the context of national challenges to social care. Demographics suggest that the care home sector will continue to play an ever-increasing role in supporting older people with complex health and social care needs. Yet it is well known that, like all social care providers across the country, North Yorkshire establishments are experiencing significant pressures in maintaining the very high standards we have, quite rightly, come to expect. This, Mike added, is the so-called 'perfect storm': rising demand, falling funding, greater inspection, staff shortages. Nationally, up to a quarter of care homes are thought to be at risk of closure.

Referencing the Competition and Markets Authority (CMA) report into the £16bn care homes sector, Mike pointed to the increasing number of care homes who are unable to accept the care fees NYCC can afford. The amount local authorities pay (£621

average) has fallen below what it actually costs to provide care. Self-funders pay on average £846.

Despite the pressures, Members' remarked upon their experiences that over the last few decades care provision – especially in residential establishments - has improved dramatically in many different ways. The importance of dignity in care, seeing the individual person and respecting their own space and their way of life, is now accepted as a given.

Some members expressed concerns about the limitations of choice in the care sector, for example where the one operating establishment in an area is struggling, or worse still, closing. These concerns were, at least in part, assuaged by reassurances that there are contingency plans in place to address those service interruptions that would pose the greatest risk locally.

Kathy Clark advised that consultants are to help the directorate to look at how we encourage new developments in the social care market and joint work with health colleagues. This is part of the authority's duty to promote the efficient and effective operation of the market for adult care and support as a whole.

Members noted the responsibility of the county council to deal with provider failure. Evidence was given to us of how, overall, these processes have historically been managed well.

Resolved –

- a) Members were reassured from the evidence they reviewed and the comments made that there was a close working relationship at a local level between CQC, the HAS directorate, Healthwatch and other partners.
- b) The committee would wish to return in future meetings to the state on the local care market, especially how NYCC might use a range of approaches to encourage and shape it, so that it meets the needs of all people in our area who need care and support, whether arranged or funded by the state, by the individual, or in other ways.

146. Intermediate Care

Considered -

Presentation by Dale Owens (Assistant Director of Care and Support, Health and Louise Wallace (AD Health and Integration, Commissioning (HAS)).

Dale and Louise highlighted how Intermediate care is a multi-disciplinary service that helps people to be as independent as possible. It provides support and rehabilitation to people at risk of hospital admission or who have been in hospital.

Members pointed to the evidence of good practice locally and strong support being provided through the various types of the Intermediate Care Service in North Yorkshire: Home-based intermediate care; Reablement; Bed based intermediate care - sometimes described as 'step up' and 'step down'; and Crisis response.

Resolved -

- a) That the presentation be noted.
- b) How we adopt a 'strength based' approach and maximise every opportunity for people to become more independent and achieve their desired outcomes through creative care and support planning be scrutinised at the next meeting.

147. Health and Social Care Workforce

Considered -

Draft report by the Task Group, Chaired by County Councillor, of the Joint Scrutiny by the Scrutiny of Health Committee and the Care Independence Overview and Scrutiny Committee, which has scrutinised health and social care workforce planning, over the course of three meetings since September 2017.

Daniel Harry talked through the content of the report explaining that, if agreed, the final version will be presented to a future meeting of the North Yorkshire Health and Wellbeing Board. Ray Busby added that the second element of this work - a review of the wider health and social care integration in North Yorkshire - would start once this approval process had been completed.

Resolved -

That the report has the full support of the Committee.

148. Director of Public Health Report

Considered –

The Annual Report of the Director of Public Health

Dr Lincoln Sargeant presented his fifth Annual Report for information and for feedback.

He explained that the report highlights the contribution older people make to society and some of the challenges faced by individuals and communities as they age. It examines services that help, and explores opportunities for improving systems across social care, health and wider determinants such as housing. The aspiration is that older people should be recognised as active citizens, not passive recipients of services.

The first part of the report focuses on healthy retirement encompassing good mental and physical health as well as financial planning. The second considers need for support as we age, using a series of case studies to illustrate the challenges and potential supports. The third examines end of life care. Members liked the way the report explores these three transitions through ageing.

Resolved -

- a) That the report and presentation be noted.

- b) As this year's report's content matches so closely the committee's remit, Dr Sargeant be invited Lincoln to report back sometime in the autumn of 2018 with an update on implementation.

149. Work Programme

Considered -

The report of the Scrutiny Team Leader on the Work Programme.

Resolved -

That the Work Programme be agreed.