

## Agenda

**Meeting:** Care and Independence Overview & Scrutiny Committee

**Venue:** The Brierley Room, County Hall, Northallerton, DL7 8AD  
(See location plan overleaf)

**Date:** Thursday 27 September 2018 at 10.30am

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### Business

1. Minutes of the meeting held on 28 June 2018 (Pages 5 to 8)
2. Any Declarations of Interest
3. Public Questions or Statements.

Members of the public may ask questions or make statements at this meeting if they have delivered notice (to include the text of the question/statement) to Ray Busby of Policy & Partnerships (*contact details below*) no later than midday on Monday 17 September 2018. Each speaker should limit themselves to 3 minutes on any item. Members of the public who have given notice will be invited to speak:-

- at this point in the meeting if their questions/statements relate to matters which are not otherwise on the Agenda (subject to an overall time limit of 30 minutes);

- when the relevant Agenda item is being considered if they wish to speak on a matter which is on the Agenda for this meeting.

If you are exercising your right to speak at this meeting, but do not wish to be recorded, please inform the Chairman who will instruct those taking a recording to cease while you speak.

**PROVISIONAL  
TIMINGS**

- 4. Chairman's remarks - Any correspondence, communication or other business brought forward by the direction of the Chairman of the Committee.**  
**(FOR INFORMATION ONLY)**
- 5. Client Contributions – Presentation by Anton Hodge, Assistant Director - Strategic Resources, Central Services** *10.40-11.15am*  
**(Pages 9 to 12)**
- 6. Adult Social Care Outcomes Framework - Introduction and Presentation** *11.15-12noon*  
**(Pages 13 to 15)**
- 7. Work Programme - Report of the Scrutiny Team Leader**  
**(Pages 16 to 23)**
- 8. Other business which the Chairman agrees should be considered as a matter of urgency because of special circumstances.**

Barry Khan  
Assistant Chief Executive (Legal and Democratic Services)

County Hall,  
Northallerton.

18 September 2018

**NOTES:**

Emergency Procedures for Meetings  
Fire

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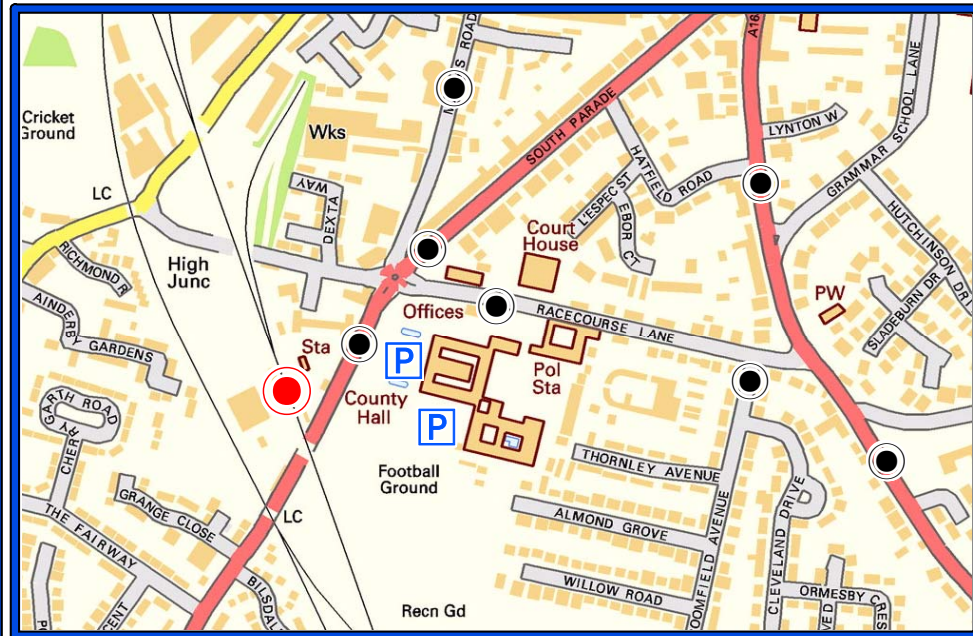
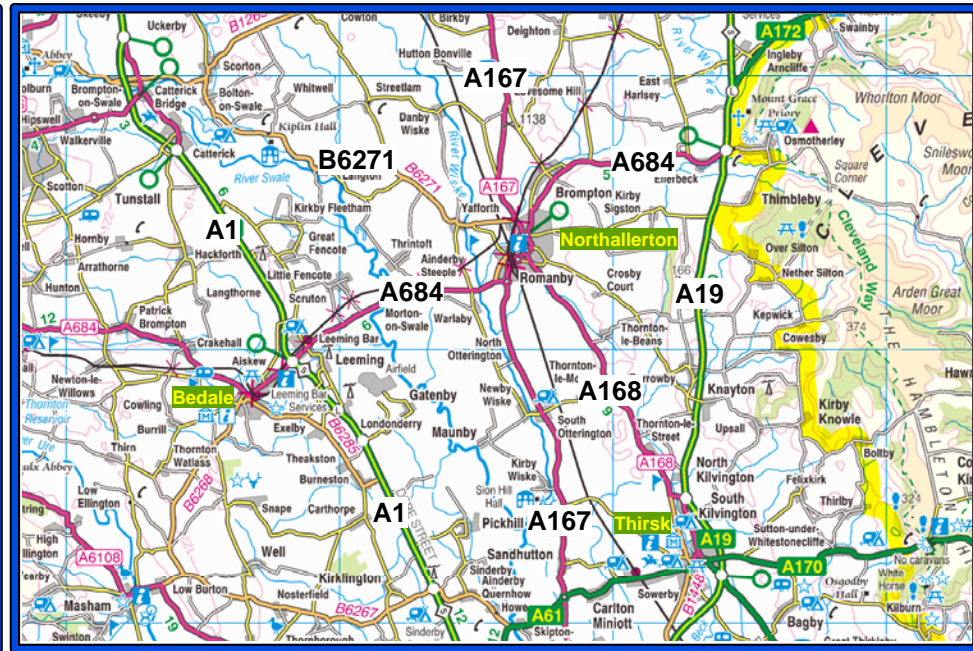
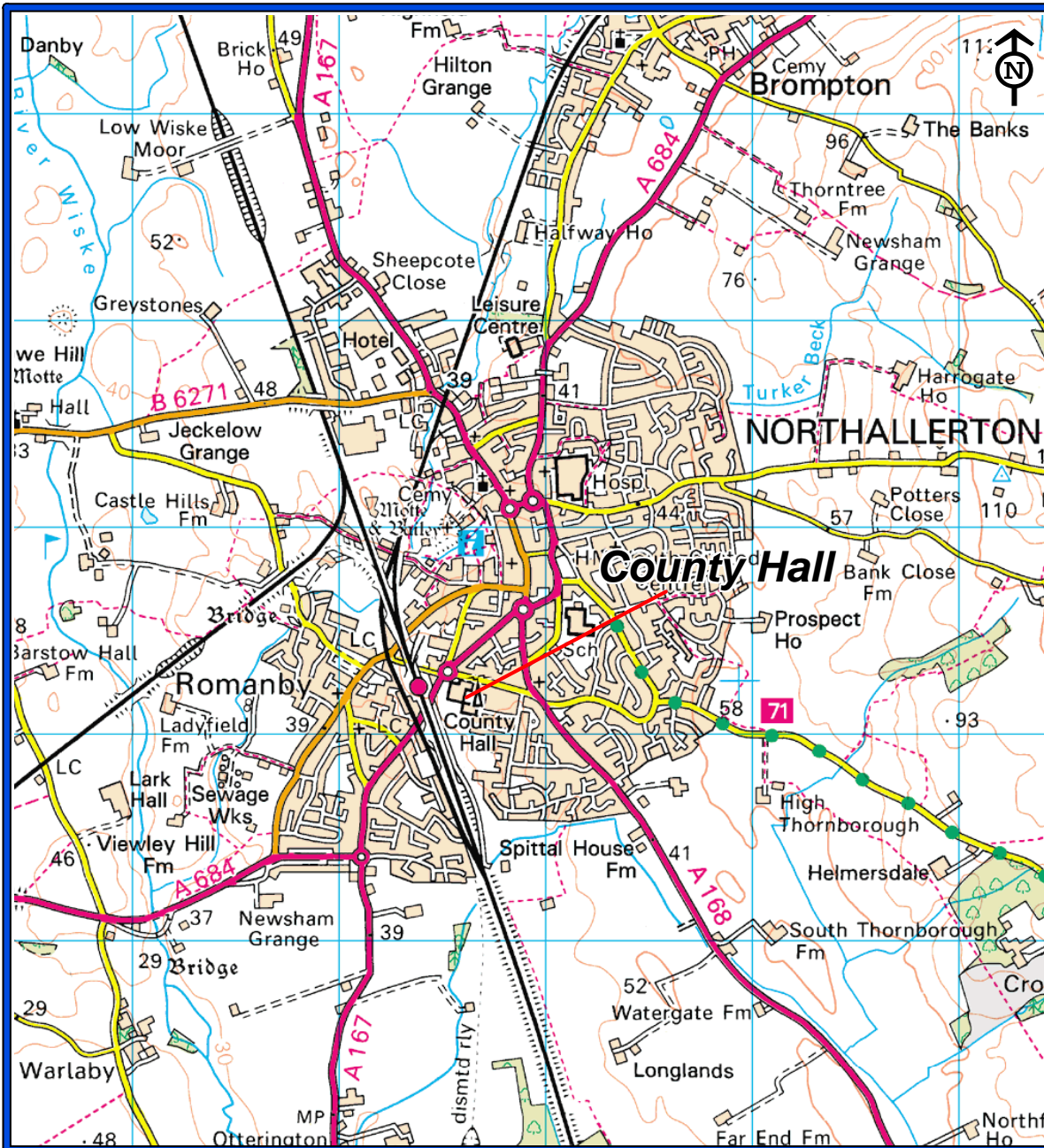
# Care and Independence Overview and Scrutiny Committee

## 1. Membership

<b>County Councillors (13)</b>					
	<i>Councillors Name</i>	<i>Chairman/Vice Chairman</i>	<i>Political Group</i>	<i>Electoral Division</i>	
1	BROADBANK, Philip		Liberal Democrat	Harrogate Starbeck	
2	BROADBENT, Eric		Labour	Northstead	
3	CHAMBERS, Mike MBE		Conservative	Ripon North	
4	ENNIS, John	Chairman	Conservative	Harrogate Oatlands	
5	GOODRICK, Caroline		Conservative	Hovingham and Sheriff Hutton	
6	GRANT, Helen	Vice-Chairman	NY Independents	Central Richmondshire	
7	JEFFELS, David		Conservative	Seamer and Derwent Valley	
8	JENKINSON, Andrew		Conservative	Woodlands	
9	LUMLEY, Stanley		Conservative	Pateley Bridge	
10	MANN, John		Conservative	Harrogate Central	
11	MARTIN, Stuart MBE		Conservative	Ripon South	
12	SEDGWICK, Karin		Conservative	Middle Dales	
13	VACANCY				
<b>Members other than County Councillors – (3)</b>					
<b>Non Voting</b>					
	<i>Name of Member</i>	<i>Representative</i>	<i>Substitute Member</i>		
1	QUINN, Jill	Dementia Forward			
2	PADGHAM, Mike	Independent Care Group			
3	VACANCY				
<b>Total Membership – (16)</b>				<b>Quorum – (4)</b>	
<b>Con</b>	<b>Lib Dem</b>	<b>NY Ind</b>	<b>Labour</b>	<b>Ind</b>	<b>Total</b>
10	1	1	1	0	13

## 2. Substitute Members

<b>Conservative</b>		<b>Liberal Democrat</b>	
	<i>Councillors Names</i>		<i>Councillors Names</i>
1	MOORHOUSE, Heather	1	GRIFFITHS, Bryn
2	PLANT, Joe	2	
3	PEARSON, Chris	3	
4	ARNOLD, Val	4	
5	LUNN, Cliff	5	
<b>NY Independents</b>		<b>Labour</b>	
	<i>Councillors Names</i>		<i>Councillors Names</i>
1		1	COLLING, Liz
2		2	



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### County Hall

Northallerton  
North Yorkshire  
DL7 8AD



North Yorkshire County Council

Tel : 0845 8 72 73 74

**North Yorkshire County Council**

**Care and Independence Overview and Scrutiny Committee**

Minutes of the meeting held on Thursday 28 June 2018 at 10.30am at County Hall, Northallerton.

**Present:-**

County Councillor Helen Grant in the Chair

County Councillors: Philip Broadbank. Eric Broadbent. Mike Chambers MBE, Caroline Goodrick, David Jeffels, Andrew Jenkinson, Cliff Lunn (as substitute for Jon Ennis), Stanley Lumley, John Mann, Stuart Martin MBE and Karin Sedgwick.

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

In attendance:

County Councillors Caroline Dickinson (Executive Member for Adult Social Care).

Officers: Ray Busby (Scrutiny Support Officer), Kathy Clark, Assistant Director Commissioning, Health and Adult Services, Avril Hunter, Locality Head of Commissioning Craven and Harrogate, Commissioning (HAS), Louise Wallace (AD Health and Integration, Commissioning (HAS))

Apologies:

County Councillor Nicola Wilson

Independent Sector: Mike Padgham (Independent Care Group)

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**Copies of all documents considered are in the Minute Book**

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**158. Minutes**

**Resolved –**

That, the Minutes of the meeting held on 22 March 2018 having been printed and circulated, be taken as read and be confirmed and signed by the Chairman as a correct record.

**159. Declarations of Interest**

There were no declarations of interest to note.

**160. 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.

## **161. Annual Older Peoples Champion Briefing**

### **Considered –**

Cllr Karin Sedgwick reported for the first time on her role as Older People's Champion.

Cllr Sedgwick said she had found that often the best way of getting to grips with a very complex subject like social care is to understand it through local activity.

Being on both Care and Independence and Scrutiny of Health Committees has helped, but she recognised that the role should not be limited to social care and health needs. Her intention was to focus on the broad range of needs that an older person may have, such as access to transport, housing and adult education and learning. Linking closely with the new Area Constituency Committees should help in this.

A member expressed support when Cllr Sedgwick said she intended to take an interest in end of life care provision. Where the last remaining care home establishment in an area had closed, people had found arranging end of life care arrangements that met the expectations and wishes of the person concerned and their families, both challenging and upsetting.

Member commented on the relationship between limited access to rural transport and the isolation and loneliness encountered by many people in rural communities

## **162. Financial Assistance for People Receiving Housing Support**

### **Considered -**

Report by the Assistant Director, Health and Adult Services outlining the process of coming to a difficult decision regarding the withdrawal of financial assistance for people receiving housing support, which was one of the HAS2020 proposals to realise £250,000 of savings.

### **Resolved -**

That the report be noted.

## **163. Supported Housing Consultations**

### **Considered –**

Report by the Assistant Director, Health and Adult Services outlining a recent consultation on the complex funding for supported housing which helps thousands of vulnerable people in the County – from the elderly, homeless and victims of domestic violence, to those living with disabilities, mental ill-health or addiction.

Members commented that supported housing can be a key link for those who need it between hospital and independence, helping them get back on their feet. It is also an important investment which brings savings to other parts of the public sector, such as health and social care.

For the committee, the key points were:

- Government must ensure sufficient funding is provided to meet current needs, guarantee the ring fence in the long term, and should consider five year settlements.
- Local authorities must have sufficient flexibility to develop the commissioning and oversight arrangements to meet their local needs, and increasingly bring housing and the commissioning of supported housing into tandem with arrangements for health and social care.

**Resolved -**

- a) That the report be noted.
- b) Members were pleased that NYCC had submitted such a detailed and well-thought through joint response with District Councils.

**164. Wellbeing and Prevention Services Review**

**Considered –**

Report by the Assistant Director, Health and Adult Services giving background on the new commissioning model for Health and Adult Services investment into delivery of Wellbeing and Prevention support, to help people to stay well and independent in communities

Kathy Clark explained that the focus in new contracts will be on three core functions: information, advice and signposting; social inclusion/social activities; and low level practical support, integrated with the work of Stronger Communities and Living Well (particularly the approach of utilising community assets as part of early intervention and prevention), and with Public Health services and programmes.

**Resolved –**

Members supported the rationale that these form part of the Council's overall investment in 'targeted' prevention, which supports people at risk to avoid developing problems needing long-term support from statutory care services.

**165. Community Support Mental Health: Future Commissioning**

**Considered –**

Report by the Assistant Director, Health and Adult Services giving background on the new commissioning model for delivery of mental health community support.

Kathy Clark explained that the review work to date has informed the development proposals for future investment into voluntary and community sector organisations to deliver mental health support on its' behalf. A consultation took place on these proposals from the 22nd January to the 19th February 2018. The consultation feedback is currently being reviewed to finalise the future commissioning plans and procurement documentation for the procurement planned to be launched in early April.

Members commented that there was a need for mental health prevention across North Yorkshire, to help people avoid developing mental health issues and prevent the escalation of need in those who have existing mental health issues.

Members recognised that a fairer, more targeted distribution of resources like this, although more reflective of countywide need, can result in some areas receiving relatively less. This is the case here, particularly with regard to Harrogate. However, members expressed satisfaction that this was being handled appropriately, with arrangements being put in place to manage the change.

**Resolved –**

- a) That the report be noted.
- b) Members agreed that the two commissioning exercises reported - **Wellbeing and Prevention Services Review** and the **Community Support Mental Health: Future Commissioning** demonstrated that the Health and Adult Services Directorate was taking the opportunity presented by the expiry of contracts to improve and develop services that promote independent living.
- c) The underlying rationale behind both commissioning approaches was, as far as members were concerned, consistent with the stated commitment to wellbeing, prevention and targeting of support.

**166. Work Programme**

**Considered -**

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

**Resolved -**

- a) That “Client Contributions” be taken at the next meeting:
- b) That the following matters be added to the work programme
  - strategic arrangements in relation to housing for people who need support, and the work being done by Public Health on the role that housing plays in sustaining good health, helping people to live independently, and keeping them out of hospital
  - A workshop type meeting be arranged to consider the preparation of a response to the LGA Green Paper “The lives we want to lead”.



## North Yorkshire County Council Health and Adult Services



Paying for social care:  
proposals for changes to  
the amount of money  
that people are asked to  
pay towards their support

## Paying towards the cost of social care



North Yorkshire County Council gets a lot less money from the Government than we used to.

This means that the council has to look for ways to save money so that we can keep providing services for people.



We have changed lots of things since 2010 and have saved lots of money. But we still need to save more money. More people need social care and this is very expensive.

## Ideas for saving more money - 1

### Transport to social care services:



North Yorkshire County Council sends a bus or a taxi to take some people to their social care service and home again.

When the council arranges a bus or a taxi for someone, it charges the person for the journeys.



It costs the person £2.70 a day. It costs the council about £18 per journey.

The council is thinking about charging people more than £2.70 per day to help pay for the cost of transport.

## More news about transport



The council also wants to make sure that it collects all the payments from people for their transport.

We have not always done this. Some people have not been charged for their transport when they should have been.



We are going to start charging everyone. We will send a letter to people who will have to start paying for transport.

We need to collect this money to help pay for services. We also think that it is fairer.

## Ideas for saving more money - 2



### Looking at the total cost of a person's care and charging for all the care provided:

At the moment, if a person needs to have two care workers at the same time, they are only charged for one.



The council is thinking about charging for both of the care workers. We think this is fairer.



This would not affect people who don't have enough money to pay for their care workers.

## Talking to people about these ideas



We have been talking to some people about these ideas during the summer.

We now want to talk to lots of people about the ideas. We will begin a **consultation** soon.



The consultation will be in easy read to help people tell us what they think about the ideas.

There will also be some events so people can come and talk to us about the ideas.



When the consultation starts, please tell us what you think about the ideas.

Please also help us to make sure lots of people know about the consultation.



We want to hear from lots of people.

Do you have any ideas about how we can tell people about the consultation?

Any questions?

# ASCOF 2016/17 Briefing

## Adult Social Care Outcomes Framework (ASCOF)

NHS Digital guidance describes the Adult Social Care Outcomes Framework (ASCOF) as measuring "...how well care and support services achieve the outcomes that matter most to people". The ASCOF measures are grouped into four domains which are typically reviewed in terms of movement over time:

- Enhancing quality of life for people with care and support needs.
- Delaying and reducing the need for care and support.
- Ensuring that people have a positive experience of care and support.
- Safeguarding adults whose circumstances make them vulnerable and protecting from avoidable harm.

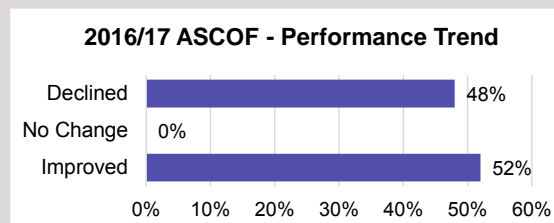
The ASCOF aims to give an indication of the strengths and weaknesses of social care in delivering better outcomes for people who use services.

The majority of data for the 26 measures is collected via statutory data returns and published annually, providing comparative data at council, regional and national level.

13 of the measures are derived from the service user surveys, including 5 outcome measures based on results taken from the biennial Survey of Adult Carers in England, which are updated every two years and are due to be collected next in 2018/19.

## ASCOF Performance Summary

### Performance Trend



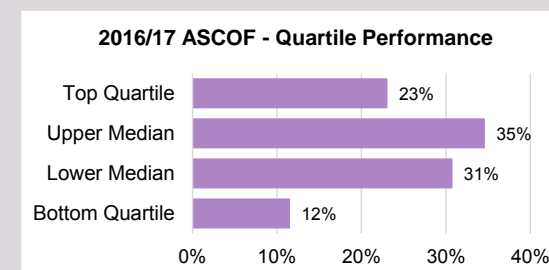
- 25 of the measures had data available for both years, with 52% (13) showing an improvement year on year.
- Of those that showed a decline between years (6), 50% were still above the national average.
- Overall, 69% of measures (18/26) were above the national average.

Of those measures showing a decline, 42% were derived from the service user surveys and it was the carers' survey that returned the majority of poorer ratings in 2016/17. The 2-year gap between carers surveys can result in more noticeable changes in performance between data collection points

The detail for individual ASCOF measures is provided in a table below.

### Comparative Performance

- Whilst the trend between years may look negative, North Yorkshire was ranked in the top quartile nationally for 23% of the measures (6).
- A further 9 measures (35%) were ranked in the upper median quartile. Overall, North Yorkshire was ranked in the top half of performance for all local authorities for 58% of the measures.
- Only 12 % of measures appeared in the bottom quartile and these related to:
  - delayed transfers of care from hospital (2C(2));
  - services users in receipt of direct payments (1C(2A)); and,
  - carers receiving self-directed support (1C(1B)).



# ASCOF 2016/17 Briefing

## ASCOF 2016/17 – Key Points

### **Long-term support needs of younger adults (aged 18-64) met by admission to residential and nursing care homes, per 100,000 population**

The outturn for North Yorkshire for 2016/17 was 8.7 admissions per 100,000 population, currently NY are below the all England and Regional Yorkshire & Humberside at 12.8 and 13.8 respectively. This indicator continues to reduce with the outturn in 2015/16 for NY at 10.7 new admissions per 100,000 population.

### **Long-term support needs of older adults (aged 65 and over) met by admission to residential and nursing care homes, per 100,000 population**

At 489.4 per 100,000 population North Yorkshire's currently performing below the all England (610.7) and Yorkshire & Humberside region (658.4), this outturn has continued to reduce year on year with an outturn 525.0 in 2015/16 and 785.5 in 2014/15. The reduction shows that North Yorkshire are placing few older people in residential care possibly a result of an increase in Extra Care units throughout the county.

### **The proportion of older people (aged 65 and over) who were still at home 91 days after discharge from hospital into reablement/rehabilitation services**

North Yorkshire continues to perform well with an outturn of 83.6 for 2016/17, an improvement since 2015/16 when the outturn was 82.5. The reablement services provided are helping people to live at home more independently and not requiring support up to 91 days after reablement intervention.

### **Delayed Transfers of Care from hospital per 100,000**

North Yorkshire are currently performing just below the all England outturn at 14.7 compared to 14.9 (England), regional Yorkshire & Humberside outturn for 2016/17 was 12.3 per 100,000 population.

### **Delayed transfers of care from hospital that are attributable to adult social care, per 100,000 population**

For 2016/17 North Yorkshires outturn is higher than both the all England and Yorkshire and Humberside outturns at 6.3 and 4.8 respectively.

### **Overall satisfaction of people who use services with their care and support**

North Yorkshire's outturn is above both the England and Regional comparators at 68.9 compared with 64.7 and 64.6 respectively. This is an improvement since 2015/16 where the outturn for NY was 63.1 an indication that people feel the services they are receiving are helping to meet their care needs.

### **Overall satisfaction of carers with social services**

The outturn for 2016/17 was 41.0 which is broadly the same as the Yorkshire and Humberside region at 41.3, all England outturn was 39.0.

# ASCOF 2016/17 Briefing

Measure	Description	NY	Yorkshire & Humberside	All England	Trend
1A	Social care-related quality of life score	19.4	19.1	19.1	↑
1B	The proportion of people who use services who have control over their daily life	79.3	77.4	77.7	↓
1C(1A)	The proportion of people who use services who receive self-directed support	90.2	88.1	89.4	↓
1C(1B)	The proportion of carers who receive self-directed support	59.5	70.5	83.1	↑
1C(2A)	The proportion of people who use services who receive direct payments	17.4	25.7	28.1	↓
1C(2B)	The proportion of carers who receive direct payments	59.5	64.5	74.3	↑
1D	Carer-reported quality of life	8.2	8	7.7	↑
1E	The proportion of adults with a learning disability in paid employment	9.3	6.7	5.7	↓
1G	The proportion of adults with a learning disability who live in their own home or with their family	88.9	79.4	76.2	↑
1I(1)	The proportion of people who use services who reported that they had as much social contact as they would	46	45.6	45.4	↑
1I(2)	The proportion of carers who reported that they had as much social contact as they would like	37.7	38.7	35.5	↓
1J	Adjusted Social care-related quality of life – impact of Adult Social Care services	0.398	0.402	0.403	
2A(1)	Long-term support needs of younger adults (aged 18-64) met by admission to residential and nursing care homes, per 100,000 population	8.7	13.8	12.8	↓
2A(2)	Long-term support needs of older adults (aged 65 and over) met by admission to residential and nursing care homes, per 100,000 population	489.4	658.4	610.7	↓
2B(1)	The proportion of older people (aged 65 and over) who were still at home 91 days after discharge from hospital into reablement/rehabilitation services	83.6	83.4	82.5	↑
2B(2)	The proportion of older people (aged 65 and over) who received reablement/rehabilitation services after discharge from hospital	2.4	2.6	2.7	↓
2C(1)	Delayed transfers of care from hospital, per 100,000	14.7	12.3	14.9	↑
2C(2)	Delayed transfers of care from hospital that are attributable to adult social care, per 100,000 population	7.9	4.8	6.3	↑
2D	The outcome of short-term services: sequel to service	79.6	69.7	77.8	↓
3A	Overall satisfaction of people who use services with their care and support	68.9	64.6	64.7	↑
3B	Overall satisfaction of carers with social services	41	41.3	39	↓
3C	The proportion of carers who report that they have been included or consulted in discussion about the person they care for	74.2	73.6	70.6	↓
3D(1)	The proportion of people who use services who find it easy to find information about support	76.2	72.6	73.5	↑
3D(2)	The proportion of carers who find it easy to find information about support	61.1	66.4	64.2	↓
4A	The proportion of people who use services who feel safe	68.8	69.1	70.1	↑
4B	The proportion of people who use services who say that those services have made them feel safe and secure	84.2	86.6	86.4	↓

## NORTH YORKSHIRE COUNTY COUNCIL

## Care and Independence Overview and Scrutiny Committee

27 September 2018

## Work Programme 2018

**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 Change in committee date**

- 3.1 To avoid a clash with a recently arranged Area Constituency Committee, your Chair has agreed to move the date of the next meeting to Monday 17 December 2018.

**4.0 Adult Social Care Green Paper: LGA and CCN Publications**

- 4.1 A number of Care and Independence Overview members and Scrutiny of Health Committee members attended the meeting on the 17th September that reviewed the County Councils Network (CCN) report [Sustainable County Social Care: A Green Paper that Delivers a New Deal for Counties](#) and the Local Government Association (LGA) subsequent publication of [The lives we want to lead: The LGA green paper for adult social care and wellbeing](#).
- 4.2 It was agreed that a statement be prepared covering both papers.

**5.0 User Participation**

- 5.1 The Committee agreed to look at user participation: how confident can we be that services are person centred; are locally appropriate, and have been planned with individuals to put them and their carers in control and thus to deliver the best outcomes.



5.2 As a first step, two of the group spokespersons, Cllrs Helen Grant and Eric Broadbent, attended a recent meeting of the North Yorkshire Learning Disability Partnership Board.

5.3 In December and again in March 2019 group spokespersons will attend meetings of the North Yorkshire Disability Forum.

## **6.0 Budget Scrutiny**

6.1 The Chairs and Vice Chairs of the Young Peoples Overview and Scrutiny Committee and the Care and Independence Overview and Scrutiny Committee have discussed how to respond to the information previously brought before the Executive which suggested a projected overspend for 2018/19 for HAS and CYPS of £5m and £11m respectively.

6.2 All those lead members are in agreement that there ought to be some formal and public scrutiny of the HAS and CYPS budgetary positions at committee. In doing so, the Chairs want to ensure that all committee members have an opportunity to test the thinking of the respective management teams and Executive Members, and are seeking a clear articulation of what the risks are to social care services and also to the council as a whole (should the budgets not be brought back into balance and the deficit made up from services elsewhere in the council). Those lead members recognise that budgetary issues are likely to go through the Member Seminar route, but, from their perspective, that is not scrutiny and the seminars are not public meetings.

6.3 This will therefore feature at the meeting on Monday 17 December 2018 am (note this this is a revised dated from the 13th which appears in the council diary).

## **7.0 NY Safeguarding Adults Board Annual Report: 15 November 2018**

Dr Sue Proctor will be attending the Mid Cycle Briefing on 15 November. An invitation to attend has been extended to all committee members.

7.1 Reviewing the Annual Report helps you carry out your specific scrutiny responsibilities to ensure that vulnerable adults are safeguarded and that the Council and its partners are discharging their statutory duties in relation to safeguarding effectively. It also means members we can reflect upon whether as community leaders you are properly aware of national developments and best practice, and whether we fully understand our role as councillors when it comes to safeguarding.

## **8.0 Respite**

8.1 In response to interest shown by members at the last meeting in understanding respite provision in the county, the Chair has agreed that, rather than this be discussed just amongst group spokespersons, it be taken as a substantive item at the April 2019 meeting. The attached draft scope/outline has been suggested.

## **9.0 Recommendations**

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

**DANIEL HARRY**

**SCRUTINY TEAM LEADER**

County Hall,

Northallerton

Author and Presenter of Report: Ray Busby

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18 September 2018

## Care and Independence Overview and Scrutiny Committee

### Scope

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

### Meeting Details

Committee meetings	Thursday 27 September 2018 at 10.30am
	Monday 17 December 2018 at 10.30 (REVISED DATE from 13 December 2018)
	Thursday 4 April 2019 at 10.30am
Mid Cycle Briefings	Thursday 15 November 2018 at 10am Invitation extended to all committee members
	Thursday 14 February 2018 at 10.30am
	Thursday 2 May 2019 at 10.30am

### Programme

BUSINESS FOR Monday 17 DECEMBER 2018			
Budget Scrutiny	A paper which outlines the areas of the budget that are overspending with the plans we have in place to try and mitigate this overspend.		
Assistive Technology and Independent Living	How NYCC uses Assistive Technology to <ul style="list-style-type: none"> <li>• Help people manage or eliminate a wide range of risks to both the individual e.g. of falling, or to the property e.g. fire, smoke, flood alert</li> <li>• Promote independence</li> </ul>	Understanding and evaluation	

	<ul style="list-style-type: none"> <li>• Do some more tasks better or more reliably than the human equivalent</li> <li>• Help deliver greater privacy or dignity in certain circumstances</li> </ul>		
Feasibility Study	Feasibility study - nursing care, residential and/or dual registered residential and nursing care	Report of the Consultants work and the directorates response	Janine Tranmer
Delayed Discharge	Trends and actions on Delayed Transfer of Care	Update on current performance and implications	Louise Wallace
Support for Carers	How NYCC supports carers.	In particular, how the authority is responding to the pressure upon families.	
Client Contributions	Committee consulted on proposed changes to charges		Anton Hodge
<b>BUSINESS FOR THURSDAY 4 April 2018</b>			
Short Breaks Proposals	Major review of respite/short term breaks (aiming to offer more to people with dementia but also potential changes to existing services), transport (initially focusing on income collection but will look at charging), charging levels	Details of current position	Dale Owens
Health and Social Care Integration	Report of Task Group		Chairman
Respite	An understanding of the different types of respite provision and their purpose		Louise Wallace
Direct Payments	Take up of Direct payments as a part of personal budgets. How NYCC is ensuring that Direct Payments enable	Update on Directorate performance	

	more choice and control over the support people receive and how their social care needs are met.		
User Participation and Co-design	Report back from members and next steps		
Prevent Reduce Delay	Update on current activity particularly in relation to Strength Based Assessments		Rachel Bowes

### Mid Cycle Briefings

15 November 2018

Initial discussions on PH Grant Proposals – Impact of £2.7m national reduction in North Yorkshire’s Public Health Grant by 2020/2021

Update on DPH Annual report

Local Account

NY Safeguarding Board Annual Report

Public Health aspects of mental health strategy 2015-2020

housing and social care objectives

14 February 2018

In house provision - learning disabilities

Supported Employment

Banded Extra Care Charges: Details of current position

### SCRUTINY BRIEFING ON RESPITE

#### What is respite?

- An understanding of the different types of respite provision and their purpose
- Why do we like respite
- current practice and national thinking
- Key legislation - carers

#### Who is it for?

- Care management and respite - How assessments play into this - how we approach them - criteria and eligibility
- What are the barriers that may prevent a carer or a cared for person accessing respite provision and how are these being overcome
- How do we empower people to have a voice and control over the respite support they receive

#### Availability: State of (and managing) the market and levels of respite: Quality Flexibility and Choice

- Profile of what is on offer locally, what we arrange and what we provide. How much is day breaks, community based day-services, Home or away, sitting services, Carers-breaks, residential, specialist and/or additional support, and so on. Volunteering?
- Emergency and Planned respite
- What is our overall assessment of the current level, quality and location of respite provision in North Yorkshire provided either in-house, by the independent sector or by the voluntary and community sector
- What are carers and users saying about respite provision in North Yorkshire from all providers

#### Us as an in-house provider: provision, challenges and Future

- What is our provision
- Where is it at
- What are we looking to do with this
- What are occupancy levels - dealing with emergency cases
- Relationship to other in house provider services
- What does the future look like

#### Commissioning, Funding and affordability

- Levels of Need and meeting demand
- How to ensure sufficient flexibility and choice - ensuring respite options are flexible for people with multiple and complex needs
- Local Commissioning approaches - use of in-house and spot purchasing options
- Funding for respite services including CCGs input and expenditure

- To what extent has Putting People First and direct payments had on enabling carers to access respite services that best meet their needs. take up carers personal budgets and direct payments

### Moving beyond respite

- Moving beyond "respite" to ensure wellbeing outcomes are given serious consideration
- Creative forms of respite in partnership with a range of sectors - moving away from the traditional one size fits all approach
- Avoiding a situation where respite, because of its institutional setting and/or practices, becomes isolating, avoiding segregated provision for example. Social contact, befriending, supported to build emotional resilience
- Seeing respite as an opportunity (eg people with dementia) to sustain and maintain their mental and psychological well being
- As a way of maintaining and Building relationships and social networks and peer support -activity based groups
- Keeping people active, learning new skills, social networks - having an ordinary life
- How do we make sure respite is more than just a break for the burden of caring, more that is a way to support families in maintaining important relationships, maintaining and developing new skills, and should underpin and sustain the overall wellbeing of both individuals and families.
- How can we measure the effectiveness of respite beyond just provision so that quality is seen in term of outcomes for people - Measurement of outcomes - individual and strategic level to understand meaningful outcomes are being delivered

### Information, Advice and Advocacy

Explaining, publicising, making people aware of the routes to respite available

### Supporting transitions

What are the issues users of the children's service have to face when they reach 18 and enter into adult services?

### Transport

Transport service for users of day services, including working with the Voluntary and Community Sector.

### Safeguarding, Risk taking issues