

**NORTH YORKSHIRE COUNTY COUNCIL****Care and Independence Overview and Scrutiny Committee****17 December 2018****Feedback from the Health and Social Care Integration Task Group**

The Health and Social Care and Integration task Group met on 16 November 2018

Present:

Councillors Val Arnold, Eric Broadbent, Philip Broadbent, Jim Clark, Liz Colling, John Ennis (Chair), Caroline Goodrick, Helen Grant, John Mann, Heather Moorhouse

The group discussed the returns from the call for evidence. Copies of these are available on request

**Discussion points raised during the meeting.**

- Lack of funding is seen as a barrier to large scale changes to the way that community services are delivered. Financial pressures create a short termism.
- What of cultural change and the changes to operational delivery that can be achieved that are cost-neutral
- Geography - Concerns about what happens to the Ryedale population as half fall outside of the newly aligned three CCGs (S&R, HRW, HRD)
- How can the constraints that result from the complex organisational arrangements be overcome
- Need to pursue s.75 agreements and pooled budgets?
- Set the level of ambition at a level that is challenging and drives change
- Relationship with York and the impact that this has?
- Do we have the people with the skills to enable integration to be undertaken successfully?
- Will integration with the NHS lead to an increased financial risk to the Council?  
Financial controls are weak in the NHS
- Is there a shared ambition with a clear vision for North Yorkshire?
- Need to understand the benefits of care pathways

**Leadership Theme**

- Too many meetings and not necessarily the right people at the table
- Does the Health and Wellbeing Board support integration? Invite Cllr Harrison to respond
- Is there sufficient accountability for planning, commissioning and delivery
- Need to consider public health and how it fits with health and social care.

### **Agreed Purpose Theme**

- Need a muscular health and wellbeing board that sets the overarching vision
- Is there a shared vision or a plethora of local visions that are contradictory?
- Is there a risk that health outcomes will be different across the county as local integrated systems are developed? Is there a risk that locally developed integrated services perpetuate inequality in health outcomes across the county?

### **Framework for collaboration Theme**

- System wide principles – are these being shared across the system and worked to?

### **Preferred model**

- Work at a 30,000 pop level
- Think about footprints and how to work in those areas
- Do we over play the differences between areas of the county? The needs of most are very similar. The intensity of service required varies but the needs are largely similar
- Is there a shared model – integrated community services aligned to the primary care home model? Does this reflect the logic model?

### **Benefits Theme**

- Filling gaps and mending breaks in the care pathways and how the impact of this can be measured?

### **System wide benefits**

- Cost shunting? Investment in community (social care services) to the benefit of hospitals – do we have arrangements to ensure that there is a balanced management of costs and benefits across the system?
- Can you bank the savings so that they can be re-invested?
- Do you know what the financial consequences of integration are?
- If there are opportunities to save money, then why are these not being realised now?

### **Barriers**

- Differences in charging mechanisms creates difficulties
- Lack of capacity building
- Linking IT systems and sharing of data
- How do approaches to commissioning and procurement influence the development of integrated services? Legal constraints/freedoms?

## **Collaboration**

- Recognition that this will yield long term gains and makes sense but there is often not the time or space to do so
- Who is leading this?
- Do we share learning – successes and failures?

## **Measuring progress**

- Key role of the HWB in setting targets and then measuring progress against them.
- KPIs are already in place? Do not need to develop further?
- Performance management key to understanding successes, failures, stresses and strains.

## **Tangible benefits**

- Care Academy – are we getting funding from the LEP for this?

## **It was agreed**

1. that the above would become the main areas of investigation, dovetailed with the existing key questions from the line of enquiry
2. Those partners who had not submitted a return to the initial call for evidence would be encouraged to do so
3. Meetings of the Task Group to be arranged in the New Year with representatives of all the key CCGs and trusts will be invited to attend over two days coverage of select committee.
4. The meeting is likely to be held in camera to facilitate confidence in process, engagement and unfettered discussion, but the findings and conclusions will be made public
5. A report will be produced for the two parent Scrutiny Committees, NYCC Executive and the Health and Well Being Board

**DANIEL HARRY**

**Scrutiny Team Leader**

Report Prepared by Ray Busby  
01609 532655 Direct Dial  
[Ray.busby@northyorks.gov.uk](mailto:Ray.busby@northyorks.gov.uk)

Background Documents Nil

County Hall,  
NORTHALLERTON

13 December 2018

## **North Yorkshire County Council**

### **Scrutiny of Health and Care and Independence Overview and Scrutiny Committees**

#### **HEALTH AND SOCIAL CARE INTEGRATION**

##### **CALL FOR EVIDENCE**

Two North Yorkshire County Council scrutiny committees have come together as an Inquiry Group to consider integration of health, social care and related services in the North Yorkshire area.

The key themes the group would like to focus upon are:

- People's experiences - Are we seeing better outcomes for people, eg, living independently at home with maximum choice and control.
- Services - Is integration ensuring a more efficient use of existing resources
- System -are the current approaches to integrated health and social care services being developed, trailed and implemented are the most appropriate. What might we do differently?

To help it understand these themes, as a first stage the group is seeking views on the attached lines of inquiry. These are prompt questions. Please feel free to answer them in whatever way you think will help councillors better understand what you want to say. We would welcome examples and background material where you believe this helps provide detail and context.

Please note that, unless you request otherwise, evidence might be published online at any stage. Personal contact details will be removed from evidence before publication, but will be retained for specific purposes relating to the task group's work, for instances to seek additional information.

Organisations that submit written evidence may be invited to send a representative or representatives to take part and contribute to a public meeting early in 2019. Separate notification of the procedure to be followed and the topics likely to be discussed will be given.

Cllr John Ennis  
Task Group Chair

# North Yorkshire County Council

## CALL FOR EVIDENCE

### SCRUTINY OF HEALTH AND SOCIAL CARE INTEGRATION

In responding please:

- include a brief introduction about the individual or organisation submitting the evidence;
- Have numbered paragraphs so that the Inquiry Group can refer to parts of the submission easily, referring where possible to the lines of enquiry below;
- Include any factual information which might be useful to the Inquiry;

#### **What Happens to your Submission**

Submissions will be collected and presented to the Inquiry group members to support their discussions and help the group to ask questions in their oral evidence gathering session(s).

The majority of Scrutiny Inquiries are held in public, so written submissions are likely to be used as public evidence - unless you specify a reason why it should be kept private. The combination of written and oral evidence will help the Inquiry Group to come to some conclusions at the end of its investigation. The group will then produce a final report which may contain some recommendations for change.

The Scrutiny Office will keep those who submitted evidence up to date with the Inquiry's progress and the final public report will be made available.

**The deadline for all submissions is close of business 5 October 2018.**

#### **Lines of Enquiry**

Wherever possible reference your response to the three themes identified by the group, ie:

- People's experiences - Are we seeing better outcomes for people,
- Services - Is integration ensuring a more efficient use of existing resources and ensuring people receive the right care, in the right place, at the right time
- System -are the current approaches to integrated health and social care services being developed, trailed and implemented are the most appropriate.

a) What is your assessment of the current level of ambition for the integration of health, mental health and social care services in North Yorkshire?

b) How are leaders ensuring effective partnership and joint working across the system to plan and deliver integrated services?

c) Is there a clear shared and agreed purpose, vision and strategy for health and social care?

- d) Is there a clear and understood framework for collaboration at a service level?
- e) Is there a preferred model for or approach to integration locally?
- f) What benefits have been seen as a result of integration for services users and patients?
- g) What are the system wide benefits to integration?
- h) What barriers to integration have been identified and how is it proposed to deal with them?
- i) What variations in approaches across services and geographies do we need to see?
- j) Is greater collaboration and coordination of service planning and delivery quicker, easier and more flexible? Please give examples of where experiences bear this out?
- k) How have we measured progress towards integration achieved, and what conclusions have been drawn from that?
- l) Is there merit in developing one overarching framework, at a local level, to help assess what good health and social care integration looks like, and if so what format should it take?
- m) What steps do you believe should be taken to ensure health and social care integration delivers tangible benefits?

### **How to send your written submission to Scrutiny**

We prefer to receive written submissions in an electronic format, preferably Microsoft Word or Rich Text Format or within the body of an email.

Email address: [raybusby@northyorks.gov.uk](mailto:raybusby@northyorks.gov.uk)

Contact Details

Ray Busby

Scrutiny Support Officer

Legal and Democratic Services (Scrutiny)

01609 532655 direct dial

You may also make submissions by post

Scrutiny Office

North Yorkshire County Council

County Hall

NORTHALLERTON

North Yorkshire

DL7 8AD