#### NORTH YORKSHIRE COUNTY COUNCIL

### Care and Independence Overview and Scrutiny Committee

### 27 September 2018

#### **Work Programme 2019**

### 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 Market Shaping Responsibilities

- 3.1 Under the Care Act, the county council has a duty to encourage quality, choice and sufficiency in provision of the local social care market. In November 2017, as part of the authority's duty to promote the efficient and effective operation of the market for adult care and support as a whole, HAS commissioned a feasibility study to in relation to the provision of nursing care, residential and/or dual registered residential and nursing care.
- 3.2 The Committee has long expressed its desire to be advised how NYCC might use a range of approaches to encourage and shape the social care market, 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. The study was seen by members as a way of better understanding this.
- 3.3 As the slides describe, the Council's Commercial Team are currently considering options for implementation and are refining business models for approval. As the market continues to change, updated information is continually updated to populate the tools developed by Mazars to inform the business models being considered.
- 3.4 In the meantime there have been some new independent nursing and extra care housing developments opened within the county. Capacity within the nursing market remains limited the county. This, together with increased pressure

- within the domiciliary care market across the county, has demonstrated that the care market remains fragile.
- 3.5 Also, since the feasibility study was undertaken, HAS has introduced the Quality Improvement Team which works with providers at risk of existing the market to secure quality improvements.
- 3.6 Group Spokesperson asked that the slides (attached) be made available to you in order that committee could decide what further work it wishes to undertake in this area.

#### 4.0 Recommendations

4.1 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**

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27 March 2019

# Introduction

 To explain the content of the report in the context of the directorate is using the findings of the report to help it meet its wider market shaping and oversight obligations

# Committee's Interest

The Committee has long expressed its desire to be advised how NYCC might use a range of approaches to encourage and shape the social care market, 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.



# Aim of Presentation

- Outline our market shaping responsibilities
- Overview of the social care market
- Background to the commission of the Mazars report
- Market Influencing
- Current position and next steps



# Our market shaping responsibilities

### Within the Care Act we are required to:

- Focus on outcomes and wellbeing
- Understand market and facilitate development
- Have strategies that assess and meet local need
- Promote quality services, including through workforce development, renumeration and appropriately resourced care and support
- Support sustainability
- Ensure choice
- Co-production with partners and stronger voice of users and carers
- Provide people with meaningful choice regardless of who pays for it covers whole market



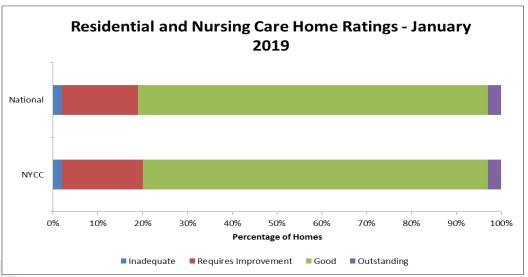
# Overview of the social care market

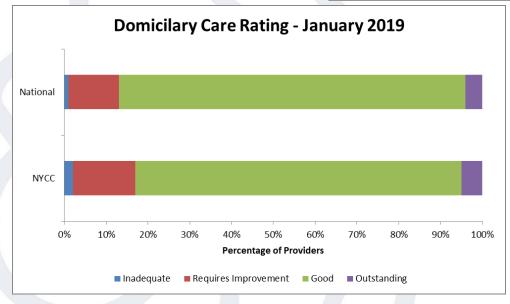
### Residential and nursing care

- Approximately 6000 care and nursing home beds across the county
- NYCC directly operates 13 care homes (408 beds)
- Nursing home occupancy has increased from 95.4% to 97.3% since 2016/17, available beds have reduced by 13.2%
- Overall available beds have been consistently at saturation point over the last 2 years, averaging above 95% in 5 of the last 8 quarters. Over the same period the number of available beds has reduced by 7.5%
- Selby is the only locality showing an improvement in average occupancy levels, down from 95% to 92% overall. Average nursing occupancy in Selby has been above 95% in 5 of the last 8 quarters



# Overview of the social care market - Quality







# Background to the commission of the Mazars report

- Cost
- Capacity vs choice
- Quality of provision and CQC action
- Workforce pressures
- Estate/premises
- Shortage of nurses
- Deregistration of homes
- Needed robust evidence base



# Findings of the Mazars report

### Options appraisal:

### New nursing home/s

- Partner builds, NYCC owns and operates on NYCC land
- Partner builds, independent sector operates on council owned site.\*
- Partner/s build, own and operate, NYCC make capital contribution to development costs
- Nursing home "Plus", as \* above including short-stay facilities for rehab/respite

#### Additional Extra Care

- Partners build and operate under long term lease on NYCC site. NYCC make capital contribution to development cost#
- · Partner/s build, own and operate. NYCC make capital contribution to development cost
- Extra care "plus", as # above including short-stay facilities for rehab/respite

### Expansion of existing facility

- Care home expansion by existing provider, NYCC make capital contribution to development costs
- Extra care expansion by existing operator, NYCC make capital contribution to development costs

### Findings were based on:

- Demand and capacity data
- Population projections
- Stakeholder workshops
- Analysis of changes in local infrastructure, for example closure of community hospital beds



# Market influencing

- Each option for consideration includes rationale and risks
- Range of tools developed for ongoing use by NYCC to populate with specific information to support the development of business cases
- Nursing and Extra Care plus were recommended as the most viable options overall however these are generic recommendations
- A range of delivery models are available and can be explored further



# Current position and next steps

- Best programme NYCC Commercial Team developing options
- Updating tools developed by Mazars as market changes
- Independent sector developments progressing in some localities
- Continued fragility in the market, continued to be impacted by changes in retail and hospitality sectors
- Introduction of Quality Improvement Team
- Business Continuity Planning for Market Failure and impact of BREXIT on social are marker workforce



### 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 Dates	Thursday 4 April 2019 at 10.am
	Thursday 27 June 2019 at 10am
	Thursday 26 September 2019 at 10am
	Thursday 28 November 2019 at 10am
	Thursday 5 March 2019 at 10am

### **Programme**

BUSINESS FOR THURSDAY 4 April 2018						
Respite	An understanding of the different	In particular, how the authority is				
	types of respite provision and their	responding to the pressure upon				
	purpose	families.				
	How NYCC supports carers.					
User Participation and Co-design	Report back from members and next					
	steps					
BUSINESS FOR THURSDAY 27 June 2019						
Advocacy - meeting Providers						
Assistive Technology and	How NYCC uses Assistive	Understanding and evaluation				
Independent Living	Technology					
Direct Payments	Take up of Direct payments as a part	Update on Directorate				
	of personal budgets. How NYCC is	performance				
	ensuring that Direct Payments enable					
	more choice and control over the					

	support people receive and how their				
	social care needs are met.				
Client Contributions – decision?			Anton Hodge		
Harrogate Integrated Working					
Health and Social Care Integration	Task Group Report - Final		Ray Busby		
NHS Long term Review					
BUSINESS FOR THURSDAY 26 September 2019					
Annual Safeguarding Board Report			Sheila Hall and		
			Sue Proctor		
Prevent Reduce Delay	Update on current activity particularly				
	in relation to Strength Based				
	Assessments				
BUSINESS FOR THURSDAY 28 November 2019					
DPH Annual Report					
Local Account					
BUSINESS FOR THURSDAY 5 March 2020					
Wellbeing, Prevention and mental	Dialogue/conversation with providers				
health contracts					

Mid Cycle Briefings Dates – all at 10am 2 May 2019 – to be changed 25 July 2019 31 October 2019 13 February 2020

Items that have been requested Learning disabilities in house provision Possible item on supported Employment Providers Substance Misuse Providers Yorsexualhelath