

Agenda

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

**Venue: Brierley Room, No 3 Racecourse
Lane Northallerton DL7 8QZ
(see location plan overleaf)**

Date: Thursday 28 November 2019 at 10am

The Brierley Building (main County Hall building) is closed now until July 2020. All Committee meetings will be held in either No. 1 or No. 3 Racecourse Lane, Northallerton, DL7 8QZ. Please note the venue above for the location of this meeting. Please report to main reception which is located in No. 3 Racecourse Lane

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PLEASE NOTE START TIME OF MEETING

Business

- 1. Minutes of the meeting held on 26 September 2019** (Pages 6 to 9)
- 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 25 November 2019. 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)	10-10.10am
5.	Strategic plan for the transformation of carers offer – Presentation by Dale Owens, Assistant Director of Health and Adult Services (Pages 10 to 20)	10 - 10-50am
6.	Annual Report of the Older Peoples Champion – Joint report by County Councillors Andy Paraskos and Karin Sedgwick (Pages 21 to 25)	10.50 – 11.05am
7.	Health and Social Care Integration – The Scrutiny Team Leader will report	11.05am-11.15am
8.	Work Programme - Report of the Scrutiny Team Leader (Pages 26 to 31)	
9.	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.

19 November 2019

NOTES:

Emergency Procedures for Meetings

Fire

The fire evacuation alarm is a continuous Klaxon. On hearing this you should leave the building by the nearest safe fire exit. From the Brierley Room this is the main entrance stairway. If the main stairway is unsafe use either of the staircases at the end of the corridor. Once outside the building please proceed to the fire assembly point outside the main entrance

Persons should not re-enter the building until authorised to do so by the Fire and Rescue Service or the Emergency Co-ordinator.

An intermittent alarm indicates an emergency in nearby building. It is not necessary to evacuate the building but you should be ready for instructions from the Fire Warden.

Accident or Illness

First Aid treatment can be obtained by telephoning Extension 7575.

Care and Independence Overview and Scrutiny Committee

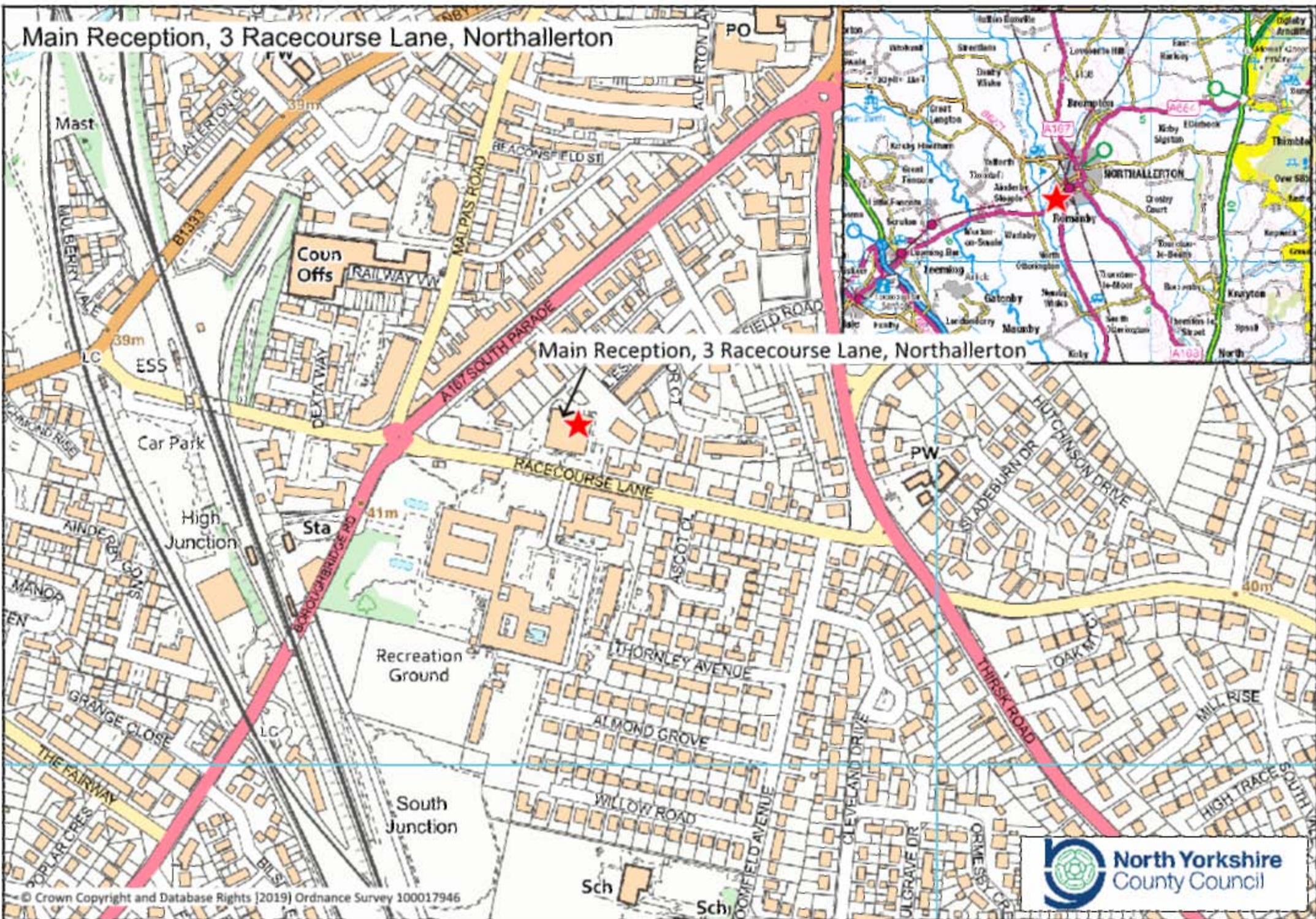
1. Membership

County Councillors (13)					
	<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		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		Independent	Woodlands	
9	LUMLEY, Stanley		Conservative	Pateley Bridge	
10	MANN, John		Conservative	Harrogate Central	
11	MARTIN, Stuart MBE		Conservative	Ripon South	
12	SEDGWICK, Karin	Chairman	Conservative	Middle Dales	
13	TROTTER, Cliff		Conservative	Pannal and Lower Wharfedale	
Members other than County Councillors – (3)					
Non Voting					
	<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				
Total Membership – (16)				Quorum – (4)	
Con	Lib Dem	NY Ind	Labour	Ind	Total
9	1	1	1	1	13

2. Substitute Members

Conservative		Liberal Democrat	
	<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	
NY Independents		Labour	
	<i>Councillors Names</i>		<i>Councillors Names</i>
1		1	COLLING, Liz
2		2	
3		3	
4		4	
5		5	

Main Reception, 3 Racecourse Lane, Northallerton



North Yorkshire County Council

Care and Independence Overview and Scrutiny Committee

Minutes of the meeting held on Thursday 26 September 2019 at 10.00am at County Hall, Northallerton.

Present:-

County Councillor Karin Sedgwick in the Chair.

County Councillors: Philip Broadbank, Eric Broadbent, John Ennis, Caroline Goodrick, Helen Grant, David Jeffels, Andrew Jenkinson, Stanley Lumley, John Mann and Cliff Trotter.

In attendance:

County Councillors Caroline Dickinson (Executive Member for Adult Social Care) and Andy Paraskos (Older Peoples Champion).

Officers: Ray Busby (Scrutiny Support Officer), Anton Hodge, Assistant Director - Strategic Resources, Central Services, Chris Jones-King (Assistant Director Care and Support, Health and Adult Services), Mike Rudd, Head of Housing Market Development, Commissioning (HAS), Karen Siennicki, Interim Head of Service Mental Health, DoLS and EDT, Care and Support (HAS), Cath Simms, Head of Targeted Prevention, Care and Support (HAS).

Apologies:

County Councillors Mike Chambers MBE and Stuart Martin MBE.

Voluntary and Community Sector: Independent Sector: Mike Padgham (Independent Care Group) and Jill Quinn (Dementia Forward).

Copies of all documents considered are in the Minute Book

198. Minutes

Resolved –

That the Minutes of the meeting held on 27 June 2019 having been printed and circulated, be taken as read and be confirmed and signed by the Chairman as a correct record.

199. Declarations of Interest

There were no declarations of interest to note.

200. 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.

201. Chairman's Remarks

The Chairman updated members on changes to the work programme she had agreed to.

202. Mental Health: Implementation and Pathway

Considered

Presentation by Chris Jones-King, Assistant Director Care and Support, Health and Adult Services) and Karen Siennicki, Interim Head of Service Mental Health, DoLS and EDT, Care and Support (HAS)

Social care and all partners can now follow a clear health pathway from referral into the service, triage and prevention. A restructured mental health service with a clear hierarchy, transparent lines of accountability and, significantly, an integrated care workforce team, strengthens this approach.

Karen explained the increased confidence that the service is statutorily compliant. Given that there is a stronger prevention offer at the front door, we can expect to see a reduction in the number of people requiring specialist mental health services. The pathways also set out a clear process of best practice to be followed in the treatment of a patient or client with a particular condition or with particular needs. Where there is a social care need identified, the impact of a crisis for an individual will be minimised

On the basis of what Members heard, they concluded that these new care pathways are designed to level up services so that individuals and patients all receive the best standard of care available.

Resolved –

- a) That the report be noted.
- b) The Chairman report the committee's positive conclusions in her statement to council.

203. Budget Position: Operational Actions overspend update

Considered –

Report by Anton Hodge highlighting the areas presenting with the most significant financial pressures facing HAS as at September 2019 and the management action that is being taken in response to the pressures

Anton explained that towards the end of last year the Committee reviewed the HAS Directorate projected overspend and the action plan that is being taken in response to financial pressures.

Members particularly noted, referencing the previous item, the mental health budget is currently overspending by approximately £400,000 on a budget of £8.5m. Whilst reassured about the action being taken to correct this overspend, a number of members commented that it is easy to comprehend how the County Council spends such a significant part of its overall budget on these services.

Members discussed the main area of overspend, which remains within the care and support budget which accounts for £133m of a net £157m directorate budget. A predicted overspend of £4.9m. The question was posed whether, in cost effectiveness terms, it might be advantageous for the authority to operate a residential establishment, especially one that featured nursing home placement capacity. Anton replied that, in line with the county council's responsibilities regarding market shaping,

a good deal of analysis was being undertaken into how the council might intervene and develop the social care market. However, taking the step of becoming a direct provider entails significant business constraints and drawbacks. For example, the authority when faced with commercial factors - such as direct staffing costs, both cost per employee and overall employment costs, non-staffing direct costs, indirect or overhead costs, the cost of capital/premises – would find it a challenge to provide places at a favourable rate compared to many current independent sector providers.

Ray Busby reminded members that the committee members had recently reviewed the findings of the Mazaars consultancy report into market intervention options. A follow-up scrutiny discussion was planned at the next group spokespersons' mid cycle briefing on how the learning for this review was being progressed through the council's BEST improvement initiative. Members then asked that this be a substantive topic at the March committee meeting.

Resolved -

- a) That the report be noted.
- b) Whilst reassured about the action being taken to correct this overspend, Members remarked how easy it was to see how the County Council spends such a significant part of its overall budget on these services. Managing demand well, and sustaining the council's commitment to prevention and early intervention, will be key. These issues should, therefore, be prominent considerations for scrutiny and the committee's work programme.
- c) That current thinking on how the directorate meets its Care Act responsibilities regarding Market intervention and Shaping the Care market, especially in the context of the council's care and support budget pressures, now feature at committee meeting on the 5 March 2020.

204. Living Well in North Yorkshire

Considered

Presentation by Cath Simms outlining the results of an independent evaluation undertaken by Chrysalis.

Cath Simms explained that an integral part of NYCC's preventative offer is the Living Well Project which works with individuals and their carers who are isolated, vulnerable, bereaved, lacking confidence, or perhaps on the borderline of needing health and social care services. Instead, the service helps them to access their local community, and support them to find their own solutions to their health and wellbeing goals. This helps to reduce loneliness and isolation, and to prevent or resolve issues for people, including preventing hospitalisation.

Cath referred to the findings of the evaluation report. Evidence shows the positive impact of living well for service users in North Yorkshire County Council. Amongst a range of indicators pointing to the project's success, one in particular stands out: it delivers improved wellbeing worth £3.84 per every £1 spent.

Members agreed that Living Well is a genuine success story. It illustrates how the council has creatively and innovatively deployed public health grant money to further public health and social care objectives.

Resolved –

- a) That the report be noted.
- b) The Chairman report the committee's positive conclusions in her statement to council.

205. Assistive Technology

Considered

Report by Mike Rudd Head of Housing Market Development, Commissioning (HAS).

Mike explained the details of the recently entered into partnership arrangement with Nottingham Rehab Services (NRS). There are clear advantages to having moved to one organisation delivering AT services across the county to both adults and children. Rather than having to specify certain pieces of equipment and then relying on our NYCC Occupational Therapists (OT's) to understand and assess, the new contract operates as a direct partnership between NRS and the County Council. By employing their own OTs, who receive referrals from NYCC assessment staff, we can be confident that greater technical expertise is being brought to bear. NRS technical experts are able to identify the most appropriate piece of equipment to support a person's assessed needs and outcomes.

Members were impressed at how a range of solutions from the simple to the most technologically advanced are being used. One in particular, a working robot colleague, attracted members' interest. This appears to be having a great impact on people with dementia and Alzheimer's. The outcomes have been found to be reduced stress, stimulated interaction between people and carers, and reduced challenging behaviour.

Members concluded that initial results from the new arrangement seem to demonstrate that more people are being supported with a far wider range of equipment, and the contract provider is able to stay much more up-to-date with new and emerging technology.

Resolved –

- a) That the report be noted.
- b) The Chairman report the committee's positive conclusions in her statement to council.

206. Work Programme

Considered -

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

Resolved -

That the work programme be agreed.

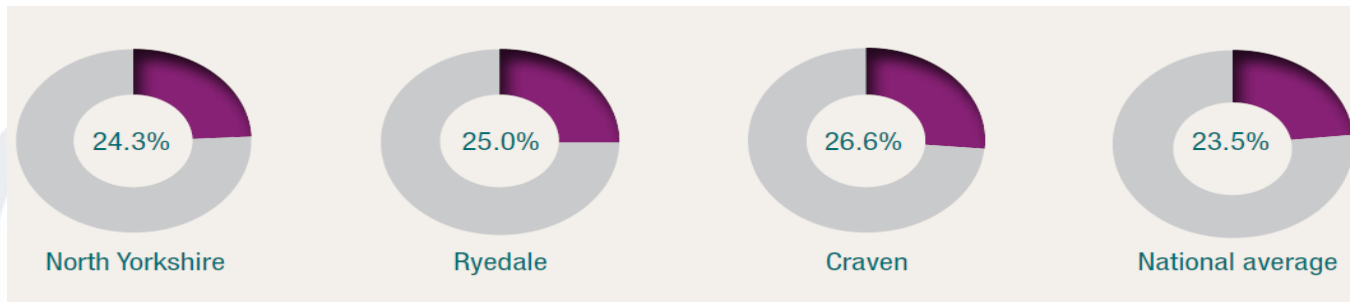
Carers Transformation

Strategic plan for the transformation of carers offer across North Yorkshire

#peoplelikeus

Demographics

There are around 65,000 people in North Yorkshire across all age groups who identified themselves as providing unpaid care in the 2011 census, which is more than one in ten people. This is higher than the average both nationally and through the Yorkshire and Humber region. Only Richmondshire (9.2%) had a lower rate of identified unpaid carers than the national average. In reality there are likely to be many more people providing unpaid care, who either do not recognise themselves as a carer or do not wish to be recognised as a carer.



The Carers UK reports regarding 'Carers at Breaking Point' and "Caring and Family Finances Inquiry" also report that:



Six in ten felt they had been pushed to breaking point

46%

said they had fallen ill but just had to continue caring



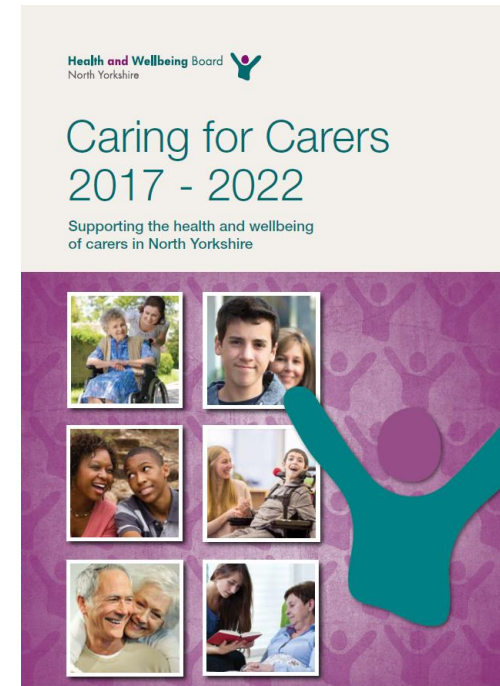
One in five carers were forced to give up their jobs because they were in crisis

61%

of the carers said they had been in debt as a result of caring

'Caring for Carers' Strategy 2017-2022

- Launched in 2017
- Developed as a recognition of the vital work over 65,000 unpaid carers do in North Yorkshire
- Ideas for the strategy were submitted by over 200 people – online, on the phone, in person, through libraries and through carer centres
- It was developed alongside several existing carer groups, as well as a dedicated group who volunteered specifically to represent carer views in the strategy
- Extensive consultation was undertaken on the draft at the start of 2017 and changes were made to reflect the feedback received
- A Strategy Implementation Group now meets on a 2 monthly basis to bring key stakeholders together to deliver the strategy



'Caring for Carers' Strategy

Vision

Carers themselves can live long and healthy lives and be able to continue to care as long as possible and as long as they would want to. We want to encourage more carer friendly communities, and promote carer issues across wider society.

Some of the key messages Carers told us were ...

- They want to be recognised as experts in the care they deliver
- They want help managing finances as a carer
- They want to continue caring but be able to stay healthy themselves
- They want more options for having a break from their caring role
- They want better and more accessible information about the caring role and what support is available



Current HAS Offer

- Carers assessment
- Carers emergency card
- Direct payment in the form of a carers grant (typically one off 200/250?)
- Residential respite – mostly in in house provision
- Day activities for cared for
- Living well offer

Current commissioned provision in North Yorkshire:

Commissioned Service:	End Date	Contract value (current year)	CCG Contribution (current year)	Total
Carers Support Services county wide	30/6/2021 (2yr + 2yr)	£389,671*	£146,444	£536,115
Carers Break Sitting Service county wide	31/3/2021 (+2yr)	£202,316	£90,549	£292,865
Total		£591,987	£236,993	£828,980

*includes NYCC contribution to Bradford DC for Craven delivery

Themes from Strategy to inform engagement planning

- Improving identification of carers
- Improving information and advice
- Enabling carers to take a break
- Improving carers health and wellbeing
- Enhancing financial wellbeing
- Involving carers as experts

Cohorts to inform engagement planning

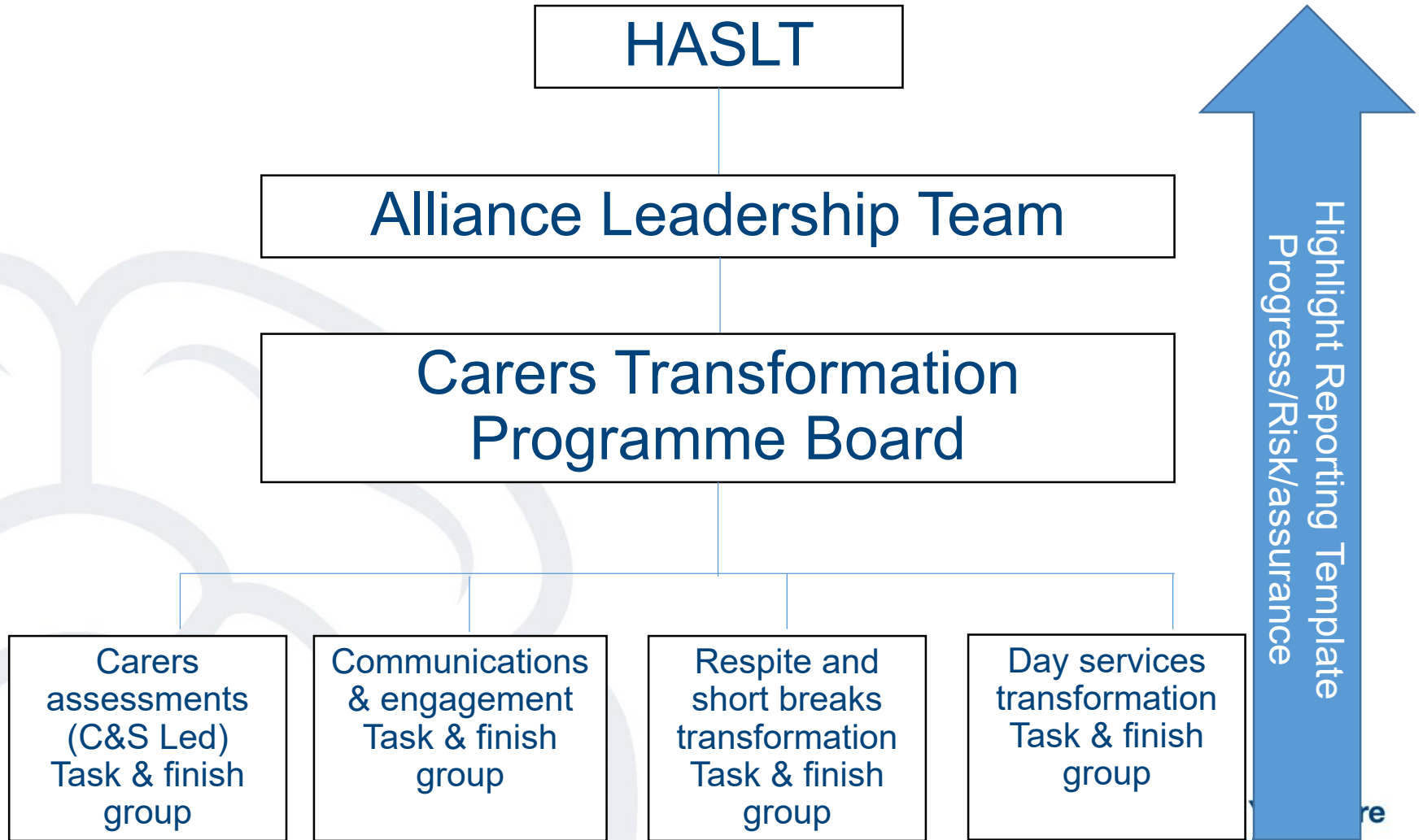
We will plan our engagement around a wide range of people including (but not exhaustive):

- Young carers ?
- People with substance misuse issues
- People with dementia
- Parent carers
- People with a learning disability
- People with mental health issues
- Working age carers/carers in employment
- People approaching end of life
- Co-carers
- Gypsies/travellers
- LGBT community
- Hidden carers

Enablers/early thinking

- Digital options
- Key pinch points in the life cycle of a carer
- Case studies
- Peer support

Project Governance Arrangements



Key considerations across all T&F groups: Young carers, working age carers, older carers, use of technology/digital solutions

Engagement phase 1

Analysis of Feedback from Summer conversations

White wall exercises with Health and Adult Services from December 2019

Post purdah planning for wider engagement with carers

NORTH YORKSHIRE COUNTY COUNCIL

CARE AND INDEPENDENCE OVERVIEW AND SCRUTINY COMMITTEE

28 November 2019

Report of the Older People's Champion

1. In May last year I, Andy Paraskos, took over from Karin Sedgwick as Older People's Champion. We decided to produce one Annual Report, covering our work since Karin reported in May last year.
2. It is a pleasure to celebrate the ways we support and encourage active, independent and healthy lives for older people, and show how we might all promote positive images of older people as citizens and combat stereotyping and age discrimination.

The OPC Role

3. This role is intended to ensure that the profile and 'voice' of older people is raised and that the issues that matter to older people in their communities become and remain a priority on the agendas of local decision makers.
4. Being Older People's Champion does open doors to go talk to all organisations and find out more about initiatives that do so much to support people. Not just those that are connected to the mainstream of County Council services and activity - such as North Yorkshire Forum for Older People, Better Ageing Partnerships, and the Dementia Collaborative - but also those whose motivation is all about "community". Here I refer to Rotary groups, the Good Neighbours scheme in Hambleton, and The Good Life Project in the Upper Dales, for example.

An Ageing Population is not a Demographic "Time Bomb"

5. We are living longer than ever before and the age profile of our society is changing rapidly. The number of people aged 65 and over will increase by more than 40% within 20 years, and the number of households where the oldest person is 85 and over is increasing faster than any other age group. These changes have profound implications for each of us, as well as for government, business and civil society.
6. We often hear this referred to – negatively it must be said - as the "ticking time bomb". In many of our meetings, people said this use of language makes them feel like a problem because people live longer. People are right to constantly remind us that they contribute so much to our communities and people from all backgrounds should be valued and respected. Part of the OPC role is to make sure that this

message gets across loud and clear, not just in the corridors and meeting rooms of county hall, but to all local authority services and partners.

Age Friendly Communities

7. People respond well when told that the County Council is linked to the UK network of the Centre for Ageing Better - a six-year, £78 million national investment to improve the lives of people aged over 50 by addressing social isolation and loneliness within local communities. Here we thank Caroline Dickinson, Executive Member for Public Health, Prevention and Supported Housing for her work.
8. There are eight parts to an Age Friendly Community: Housing, Transportation, Social Participation, Respect and Social Inclusion, Civic Participation and Employment; Communication and Information; Community Support and Health Services; Outdoor Spaces and Buildings. We will use some of these themes to feedback what people have said, and what it means for the OPC role.

Transport

9. Of these transport and bus services are so often mentioned as a hugely significant issue. Connectivity across a large area like North Yorkshire with a lot of people using bus passes etc. makes the viability of running buses difficult. It is such a big problem.
10. Having said that, an older person's bus pass means free travel on local buses in England. Great for essential journeys which otherwise would be unaffordable. It helps with leisure trips for shopping, sightseeing and into the countryside. It is good for older people's health and well-being, enabling people to socialise, take exercise and reduce social. But, by the same token, I am acutely aware of the impact of concessionary bus fares for the viability of commercial, as well as tendered bus services.

Loneliness and Social Participation

11. We report at a time when, particularly through the efforts of Public Health, a strategy to combat loneliness and isolation is being considered for adoption countywide. Social isolation and loneliness is not just a big problem for older people, all ages can experience this. It is pleasing that the strategy recognises this. We would encourage everybody to comment as part of the consultation.
12. We all need someone to talk to, but not all of us are lucky enough to have someone. So, at a practical, local level, we were pleased to support the Age UK North Yorkshire & Darlington initiative where volunteers are offering companionship

to lonely and isolated people in communities across Darlington & North Yorkshire through their Befriending service, the award-winning Good Friends scheme and also offer specialist Veteran's telephone befriending support through Ex-Forces Support.

Respect and Inclusion: Intergenerational Activity

13. We are seeing more media interest in Intergenerational activity and the important benefits it brings: promoting good relationships between groups; it reduces ageism, promotes friendships, and reduces the anxieties many older people feel about interacting with older people, and vice versa.

“We are far more united and have far more in common than that which divides us”

14. We felt privileged to have been involved in the successful event "The Great Get together" North Yorkshire's version of Get Togethers that have happened up and down the UK in memory of Jo Cox.

Community Support and Health Services: Social Capital

15. Being part of a community with family, friends and neighbours is important for people's wellbeing

16. As an example, Karin has supported the cafe geared up to creating a supportive and understanding environment for those living with dementia which has opened in Richmond. Dementia Forward is a charity passionate about supporting people living with dementia and those who care for them, and already has dementia friendly cafes in Ripon and Harrogate.

17. The new cafe in Richmond, open every Tuesday from 1pm until 3pm in the Town Hall, is designed to provide a relaxed atmosphere, and all the staff and volunteers have experience with dementia – either by having it themselves or through supporting someone with it.

18. We would encourage all members to go along and see for themselves how having an understanding of dementia and what makes people more comfortable can have hugely beneficial effects.

19. We have attended the local groups developed since the launch of Bring Me Sunshine in October 2017.

Communication and Information

20. Repeatedly people told us that they want to stay connected with events and people and get practical information to manage life and meet personal needs. This is vital for active ageing. Broadband or lack of it in the most rural parts of the county is raised on a regular basis. All the indications are these are being addressed and resolved; but it is mentioned time and time again by older people's representative groups.

Civic Participation

21. The council supports the North Yorkshire Forum for Older People - representative group of older people, with network groups across the county, which helps keep the County Council's focus on older people on things that matter to them. We regularly attend their meetings. The HAS directorate taps into the knowledge and expertise of these people: we would encourage all council services to follow suit.

Priorities and Interests for the year ahead

Advance care Planning

22. Sharing your wishes and preferences for the future with your family, friends and health and social care professionals is essential to help you and the people close to you understand what is important for your future, even if your health deteriorates and your capacity to make decisions is lost. Advance Care Planning ensures that your wishes and preferences are respected and that your voice and opinions continue to be heard, even if you are unable to speak for yourself.

23. I will be keeping an eye out for how successfully NYCC and partners are encouraging people to do both this and the next theme.

Transitions

24. In the same context, Transitions in later life, for instance retiring from paid work, changing career, ending or starting a relationship, can have a major impact on people's lives and their wellbeing. We will urge not just NYCC but all the organisations we come into contact with to provide effective support to employees in mid-life as a way of helping them stay in work for longer if they want to,

Dementia Friendly

25. We would like to see North Yorkshire being renowned for being dementia friendly across the whole of the county

TV licence campaign

26. The BBC has announced they plan to means test TV licences for the over 75s.

That means they'll only be free for people receiving Pension Credit. Age UK believes this will harm older people who rely on their TV. I will wait to see how this pans out, but my worry is how this affects those older people – and perhaps we ought not assume it means everybody – who can least afford it.

Our appreciation

27. We would like to place on record for the support we have received from Health and Adult Services Directorate and Public Health, Corporate Services, from Stronger Communities. Also from fellow councillors, especially the Young People's Champion, Annabel Wilkinson, Portfolio Holders Caroline Dickinson and David Chance.

ANDY PARASKOS

Older Peoples Champion

KARIN SEDGWICK

(Former) Older Peoples Champion

County Hall,
NORTHALLERTON

12 November 2019
Background Documents - Nil

NORTH YORKSHIRE COUNTY COUNCIL**Care and Independence Overview and Scrutiny Committee****28 November 2019**

Work Programme Report

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 Scheduled Committee dates/Mid-Cycle Briefing dates

- 3.1 The new calendar of meetings was tabled at the November council meeting. Here are the relevant dates for this committee.

Committee meetings

- Thursday 5 March 2020 at 10am
- Thursday 25 June 2020 at 10am
- Thursday 24 September 2020 at 10am
- Thursday 3 December 2019 at 10am
- Thursday 4 March 2021 at 10am

Mid cycle briefing dates

- Thursday 13 February 2020 at 10am
- Thursday 7 May 2019 2020 at 10am
- Thursday 23 July 2020 at 10am
- Thursday 29 October 2020 at 10am
- Thursday 4 February 2021

4.0 Suicide Prevention and Audit

- 4.1 The chairman and group spokespersons have agreed to follow up the briefing they received on Suicide Prevention and Audit at their mid cycle briefing with an interactive session for all the committee members. The intention is to close this committee meeting off early - it's a short agenda - and go straight into informal session for about an hour, starting around 11.30am

5.0 Strategic Framework for Tackling Loneliness in North Yorkshire.

- 5.1 In the middle of last year, Community First were tasked with producing a North Yorkshire wide Strategy to Tackle Loneliness.
- 5.2 Partners and agencies have now been invited to review and feedback on two strategic frameworks for preventing and tackling loneliness in North Yorkshire.
- 5.3 One is a county-wide framework which has been developed as part of The Loneliness Campaign, a project funded through the National Lottery Community Fund, North Yorkshire County Council and Defra to help support and inspire more local action to 'turbo charge' the county's response to tackling loneliness.
- 5.4 The other is a strategy developed at district level through a project funded by West Yorkshire and Harrogate Health Care Partnership. This is specific to the Harrogate area and takes a localised approach to tackling loneliness in Harrogate, Ripon and beyond.
- 5.5 You can view both frameworks and give your feedback by clicking the links below:

[TLC County-Wide Strategic Framework Consultation](#)

[Harrogate Strategic Framework Consultation](#)

- 5.6 The consultation for both strategies is open until midnight on Sunday 1 December 2019.

6.0 Social Prescribing

- 6.1 Group spokespersons have agreed an outline approach for a piece of scrutiny work on Social Prescribing. Current thinking is that this will be first considered as a substantive item at your 5 March 2020 committee meeting.
- 6.2 Leah Swain (Community First) has agreed to lead the discussion assisted by VCS Health Partnership Manager, Dewi Winkle, who is getting a county wide picture of approaches to social prescribing.
- 6.3 Social prescribing, sometimes referred to as community referral, is a means of enabling GPs, nurses and other primary care professionals to refer people to a range of local, non-clinical services.
- 6.4 Recognising that people's health is determined primarily by a range of social, economic and environmental factors, social prescribing seeks to address people's needs in a holistic way. It also aims to support individuals to take greater control of their own health.
- 6.5 Social prescribing schemes can involve a variety of activities which are typically provided by voluntary and community sector organisations. Examples include volunteering, arts activities, group learning, gardening, befriending, cookery, healthy eating advice and a range of sports.

6.6 There are many different models for social prescribing, but most involve a link worker or navigator who works with people to access local sources of support.

6.7 Group spokespersons believe the following are the key points that should be covered:

- The extent of social prescribing in NY
- Link work, arrangements and protocols between the prescriber and the prescription
- Who are the partners and organisations currently involved in the development and provision of social prescribing services?
- What types of activities and interventions are provided, and how many people are being referred?
- What types of problems is social prescribing commonly used for?
- Which groups of people tend to be most commonly referred?
- What is the potential for expanding social prescribing? For which problems and groups of people could it play more of a role?
- What further partners and organisations could be involved in the development and provision of social prescribing?
- What is the capacity of local partners and organisations to provide these and more services? What challenges are they facing?
- The effectiveness of social prescribing so far - the NY experience compared
- For which problems and groups of people has social prescribing been used most effectively?
- How are the outcomes of activities and interventions captured and measured?
- How is the effectiveness and efficiency of social prescribing schemes evaluated?
- The gaps in social prescribing coverage - is the whole community being considered.

6.8 Depending on the level of interest, afterwards there might be some benefit in members holding a series of less formal conversations with VCS organisations involved in the provision of or referral to activities about what they are doing, how they are getting on, and so on.

7.0 Annual Safeguarding Board Report

7.1 On the 18 November members met with Dr Sue Proctor, Independent Chair of the North Yorkshire Adults Safeguarding Board.

7.2 All councillors share a responsibility in relation to safeguarding. Reviewing the Board's Annual Report is one way you meet 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 helps you to be confident you are properly aware of national developments and best practice.

7.3 Dr Proctor explained that the Board has a statutory duty to produce an annual report detailing what it has done during the year to achieve its main objectives and implement its joint business and strategic plan. The Report gives an overview of the membership, governance and accountability arrangements, together with the legal, national and

local contexts in which it operates. The Annual Report provides an overview of the progress made in delivering the business plan in relation to each of its key principles. In addition, the report provides the Board's priorities for the year ahead.

7.4 The main themes discussed the meeting were:

- This year's annual report is a lot shorter. It is more accessible as a result.
- The evidence of strong commitment from parties within the Board to the Safeguarding Agenda is welcome. There is a high level of leadership attendance at Board meetings. The right people attend. There is confidence that they cascade messages and learning within their own organisations.
- Building relationships and encouraging participation and representation from the military and farming communities is very much still a Board aim.
- The process of understanding the relationship between mental health, isolation and safeguarding is continuous.
- Members welcomed the statement that joint working with the NY Safeguarding Children's Board continues to improve. This relationship has thrown up areas where closer working between the two boards will bring benefits.
- Members reflected upon how much they understand their responsibilities as councillors when it comes to safeguarding. Many had concerns about the level of awareness at a local elected member level. It is important for member training on safeguarding – for new councillors especially – to focus not just on strategic and organisational aspects, but on practical, ground level community leadership expectations.
- It was noted that when asked about the most significant area of concern for the Board in terms of safeguarding activity, the challenges in the social care workforce, especially in terms of volume of incidents and scale of potential risk, was mentioned.

8.0 Recommendations

- 8.1 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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19 November 2019

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 28 November 2019 at 10am
	Thursday 5 March 2020 at 10am
	Thursday 25 June 2020 at 10am
	Thursday 24 September 2020 at 10am
	Thursday 4 March 2021 at 10am

Programme

BUSINESS FOR THURSDAY 28 November 2019			
TOPIC	CONTENT	APPROACH	LEAD
Short Breaks/Respite care	review – possible news on engagement sessions	Review consultation proposals	Dale Owens
Support for Carers	in particular how we respond to pressures upon families		
Health and Social Care Integration	Task Group Report		Ray Busby
BUSINESS FOR THURSDAY 5 March 2020			
TOPIC	CONTENT	APPROACH	LEAD
Transfers of Care Annual update	Performance item		Louise Wallace
Social prescribing		Report, Presentation and witness evidence	Discussion guided by Community First
Market Intervention and Residential Care/Domiciliary			Dale Owens
Commissioned Services: The Provider perspective	Series managed dialogue/conversation with providers:	eg Wellbeing, Prevention and mental health	

		contracts, Advocacy, Dementia Support	
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Mid Cycle Briefings Dates –10am start

<p><u>13 February 2020</u> Market Intervention and Residential Care/Domiciliary Review in-house residential provision Extra Care Programme Update and overview DPH Annual Report Public Health grant review - priorities Public Health Campaigns briefing Local Account</p>	<p>Thursday 7 May 2019 2020 at 10am Thursday 23 July 2020 at 10am Thursday 29 October 2020 at 10am Thursday 4 February 2021</p>
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Other arranged meetings

Friday 6 December at 11.30pm

Transitions: Joint meeting with YPOSC members