### NORTH YORKSHIRE COUNTY COUNCIL

#### 18 May 2016

#### STATEMENT FROM PORTFOLIO HOLDER FOR PUBLIC HEALTH, STRONGER COMMUNITIES, LEGAL AND DEMOCRATIC SERVICES AND THE ROLE OF AREA COMMITTEES

## COUNTY COUNCILLOR DAVID CHANCE

#### **County Councillor Locality Budgets**

The first year of the pilot was successful with every County Councillor participating. I approved a total of 376 recommendations; an average of just over five recommendations per County Councillor. The funding committed in year one totalled £349,996 (97% of budget).

The majority (59%) of the funding was allocated for projects and activities managed by not for profit organisations (including charities and voluntary organisations), 23% by parish and town councils, 9% by schools, and 7% by NYCC directorates for additional services over and above mainstream budgets.

The funding is supporting a very broad range of types of projects and activities, with the largest allocations to projects and activities supporting environmental improvements, village and community hall improvements, non-school activities for

children and young people, and support for vulnerable adults.

A review of the first year will be presented to Corporate and Partnerships Overview and Scrutiny Committee in June.

I emailed all Members on 20 April announcing the immediate start of the second stage of the pilot. Updated personalised recommendation forms have also been distributed. The last date for the receipt of recommendations in year two of the pilot is 17 February 2017, to allow sufficient time for decisions to be made before the start of the pre-election period linked to County Council elections in May 2017.

#### Syrian Vulnerable Person Resettlement Programme

We are working with many partners, particularly district councils, the NHS, voluntary organisations and schools, to ensure that North Yorkshire plays a proper part in providing relief and shelter to those Syrians who have endured unimaginable suffering. We are expecting the first 35 refugees to arrive in July, with a total of just under 200 being resettled in the county by the end of 2018.

## **Public Health Budget**

In my last statement I referred to the reductions in the public health (PH) grant and the need as a Council to review the scale and ambition of our plans to ensure that we continue to achieve excellent public health outcomes within the now reduced budget available to us.

The original estimate of the PH grant in 2016/17 was  $\pounds$ 23.3m. Following the cuts announced in the spending review the grant was reduced to  $\pounds$ 22.9m, and it is estimated to reduce further to  $\pounds$ 21.2m in 2020/21.

About 50% of the grant funds core public health services which includes delivery of our mandated functions (excluding services for children and young people). With the transfer of the Healthy Child Programme 0-5 services from the NHS last October, public health services for children and young people represent the largest proportion of the grant spending accounting for approximately 35%. The remainder funds programmes such as Stronger Communities (Central Services), the Living Well Service (Health and Adult Services) and initiatives in Business and Environmental Services Directorate. They intend to strike a balance between funding the nationally mandated services that we are require to fund (for example, sexual health and NHS Health Checks) and our local priorities.

The review of the PH budget seeks to create a sustainable recurrent revenue budget by identifying various savings. The reserve that resulted from underspends in the first 2 years will be used in full over the period to 2020/21 to finance some contributions to time limited projects in other Directorates, extending (on a temporary basis) support of items proposed in the cuts and savings and contributing to new PH related schemes/projects that respond to our distinctive priorities as a county.

#### Young parents programme

One of our priorities as a Council is ensuring every child has a healthy start in life. While teenage pregnancy rates in North Yorkshire continue to decline there are still around 433 young mothers in North Yorkshire at any one time. Research shows that for many young parents their health, education and economic outcomes remain disproportionately poor which affects the life chances for them and the next generation of children. For example mothers under 20 are half as likely to breastfeed, more likely to smoke during pregnancy and there is a 61% higher risk of infant mortality for babies born to women under 20.

A North Yorkshire-wide young parents programme has been established where enhanced tailor-made support is offered to all pregnant teenagers and young parents. The programme is being delivered jointly by the 0-5 Healthy Child Programme and NYCC's Prevention Service. This involves providing additional home visits during pregnancy and for the first 2 years of the child's life, and supporting young parents and their children to access services through children's centres. Specialist Health Visitors have been appointed through the 0-5 Healthy Child Programme who will co-ordinate the programme and provide training and expertise to the children and young people's workforce around working with pregnant teenagers and teenage parents.

Outcomes set for the programme include increasing the numbers of young parents accessing education, training and employment, increasing breastfeeding, preventing second unplanned pregnancies, improving school readiness and improving emotional health and well-being.

#### New smoking cessation service

The Council continues a programme of reviewing the services inherited when public health transferred from the NHS. Stop smoking services were previously delivered through GP practices and a specialist smoking cessation service. However, the numbers supported to quit through this system had been declining and there was little evidence that the service was proactively targeting groups who needed specialist support to stop smoking.

The Council has now awarded a contract to Solutions 4 Health to deliver the stop smoking service. Smokefreelife North Yorkshire started in January. This new service is delivered in conjunction with primary care through subcontracts with Solutions 4 Health. The service is incentivised to help people from key priority groups such as people in routine and manual occupations, pregnant women and mental health service users to stop smoking. Smokefreelife North Yorkshire will have a strong outreach focus to identify and work with these groups in new and innovative ways.

#### **Suicide prevention**

Suicide affects all communities and devastates the lives of those affected. The Public Health team completed the first audit of suicides in North Yorkshire to identify "at risk" groups and to inform suicide prevention across all services.

Data were collected from 227 Coroners files across a five year period (2010-14) and analysed to determine those most at risk, where incidents took place and why individuals chose to take their own lives. This included profiling by socio-demographic characteristics and access to services.

People who took their lives were mainly men (82%). The peak age group was 40-49 years (25%). Most incidents occurred at home (66%). Hanging/strangulation (56%) and self- poisoning (11%) were the most common methods. Mental health issues (53%), long-term illness (41%), emotional loss (40%) and alcohol use (33%) were among the common associated factors. Over half had made contact with their GP in the previous 4 weeks.

Whilst males aged 40-49 were identified as a key "at risk" group, we identified others including aging "baby boomers" struggling with increasing frailty and individuals with complex, fragmented lifestyles. Lowered resilience, often linked to mental health difficulties, caused individuals to escalate their perception of events from problematic to catastrophic. Alcohol was identified as a facilitator/enabler.

A system-wide multi-agency response to suicide prevention is being developed including on-going surveillance with real-time early alerts to prompt an integrated response to incidents where a cluster is identified.

### e Democracy - NY 2020 Modern Council

The e Democracy rollout to Members is largely completed - the positivity shown by Members responding to this initiative, it is very much appreciated. Only one or two have yet to receive induction (as a result of being unable to attend the group sessions and have yet to take up the offer of one to one briefings). For those requiring on-going support this is organised to suit the individuals concerned, and support is also being offered before the start of committee meetings, both in County Hall and at external venues, during April and May. Drop in sessions after Members Seminars and County Council meetings will continue to be offered. Where necessary home visits are also being undertaken. It is acknowledged action is still being taken to resolve issues with Craven District Council provided iPads, as used by twin-hatted Craven Members.

From the beginning of April, the move was made to predominantly paperless committees. It is acknowledged that certain complex documents may always need to be circulated in paper form to facilitate decision making, and so we will not be 100% paperless, but instead 'paperlight' to achieve the targeted savings of £20,000 per annum on printing and postage. It is accepted that where Members are unable to embrace e-working due to physical constraints, hard copy agendas will continue to be issued, as they will for co-opted members of committees and the public attending these meetings. (Hard copies also continue to be temporarily provided for twinhatted Craven Members until their iPad issues are resolved.)

A Skype for business taster session was run for Members at the April Members' Seminar and a more detailed insight will be provided this afternoon for interested parties05. The use of Skype to participate in certain informal meetings will help reduce Members' travelling time, carbon footprint, and travel costs.

#### **Stronger Communities**

A key focus for the Stronger Communities programme over 2015/16 has been supporting the formation of management groups for the proposed community libraries and supporting them with governance, options appraisals, trustee recruitment and the preparation of their formal Expressions of Interest. This focus will continue through 2016/17 as groups are supported to complete a business plan, recruit and train volunteers and develop their operating models prior to hand over in April 2017.

Over 120 groups were supported by the Stronger Programme in 2015/16 with investment of circa £750k. In addition to the 21 community library groups and 5 hybrids; 84 voluntary and community sector groups were given help to expand or extend their existing provision and to build organisational capacity. 24 new groups

were also established providing activities and support to both adults and children and young people across the county.

## Libraries – Supporting community and hybrid libraries

To date 19 out of 21 Expressions of Interest have been submitted from community library management committees. Work is underway with newly formed groups to obtain charitable status and to prepare their formal business plans. The first set of business plans will go to the evaluation panel on 26 May.

The Stronger Communities team have carried out a range of development activities with new and emerging groups including community visioning events to explore potential partners and future service options for community libraries, options appraisals, trustee recruitment and skills audits and preparation of constitutions. An additional visioning event is being planned with Eastfield library in early June.

All 5 proposed hybrids have established a management committee and are being supported to submit a community proposal.

### Services for Older People and Vulnerable Adults

Over 2015/16, the programme has supported 69 grass roots community projects aimed at reducing loneliness and isolation and supporting the "reduce, prevent and delay" objectives of the Targeted Prevention programme in Health and Adult Services.

In term of investment, this priority has seen the biggest proportion of support. An analysis of projects supported under the programme to date shows around 800 volunteer opportunities created with a target of 14,000 beneficiaries. Projects supported include: Men's Sheds, Dancing for Wellbeing, Digital Neighbours projects, community cafes, a community shop and a range of social and well-being groups providing low level preventative services. All projects are being monitored to establish actual figures and will be reported at the end of the project term.

# **Community Transport**

The Stronger Communities team have supported 2 existing providers – in Craven and Ryedale - with management advice and support to help them establish sustainable business models and a provider in the north of the Scarborough district to extend its services. In order to seek to build the customer base for community transport providers and thus helping to make them more sustainable, a marketing brief has been prepared to carry out a piece of work that aims to re-position community transport as a universal service rather than one that is associated with either people on low incomes or for health services and to establish a North Yorkshire community transport brand.

### Services for Children, Young People and Families

The team has been supported Children and Young People's Services over 2015/16 as it moved to the establishment of the 0-19 Prevention service by working with communities on the development of community based youth clubs and on the development of a community provided offer for under 5s. Youth provider networks have been established in 2 market towns and the focus for 2016/17 will be to extend this to a further 5 market towns. Marketing materials have been developed for community playgroups and parent and toddler groups; and a training programme – with a focus on healthy eating – has been developed with the Pre-school Learning Alliance.

### **Public Health Outcomes**

The Stronger Communities programme contributes to the delivery of the following public health outcomes: wider determinants, public mental health, general prevention, social exclusion, physical activity, information and intelligence and accident prevention.

In 2016/17 the programme will focus its support for groups around the 5 ways to well-being as developed by Public Health England in 2008: *Connect..., Be Active..., Take Notice..., Keep Learning... and Giving....* A monitoring tool for projects has been agreed and will be used by Health and Adult Services prevention projects, Living Well and Public Health. This will allow the different approaches to be compared in terms of effectiveness and value for money.