



## Agenda

**Notice of a public meeting of**                      **Care and Independence Overview and Scrutiny Committee**

**To:**                      **Councillors Karin Sedgwick (Chair), Helen Grant (Deputy Chair), Andrew Backhouse, Phillip Broadbank, Eric Broadbent, Mike Chambers, John Ennis, Caroline Goodrick, David Jeffels, Andrew Jenkinson, Stanley Lumley, John Mann and Cliff Trotter.**

**Co-opted Members: Jillian Quinn and Mike Padgham**

**Date:**                      **Thursday, 4th March, 2021**

**Time:**                      **10.00 am**

**Venue:**                      **Remote Meeting held via Microsoft Teams**

Pursuant to The Local Authorities and Police and Crime Panels (Coronavirus) (Flexibility of Local Authority Police and Crime Panel Meetings) (England and Wales) Regulations 2020, this meeting will be held using video conferencing with a live broadcast to the Council's YouTube site. Further information on this is available on the committee pages on the Council website - <https://democracy.northyorks.gov.uk/>

The meeting will be available to view once the meeting commences, via the following link - [www.northyorks.gov.uk/livemeetings](http://www.northyorks.gov.uk/livemeetings). Recording of previous live broadcast meetings are also available there.

### Business

1.                      **Welcome and Introductions**
2.                      **Minutes of the meeting held on 17 December 2020**                      **(Pages 3 - 8)**
3.                      **Any Declarations of Interest**
4.                      **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 1 March 2021. 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.

- 5. Chairman's remarks - Any correspondence, communication or other business brought forward by the direction of the Chairman of the Committee.  
(FOR INFORMATION ONLY)**
- 6. Independent Care Sector and the Impact of Covid19**  
A personal perspective - Presentation by Mike Padgham
- 7. Care Market Update** **(Pages 9 - 20)**  
Presentation by Dale Owens Assistant Director of Commissioning & Quality, Health and Adult Services
- 8. Extra Care Housing** **(Pages 21 - 32)**  
Presentation by Dale Owens Assistant Director of Commissioning & Quality, Health and Adult Services
- 9. Work Programme** **(Pages 33 - 38)**  
Report of the Scrutiny Team Leader
- 10. Other business which the Chairman agrees should be considered as a matter of urgency because of special circumstances.**

Barry Khan  
Assistance Chief Executive  
(Legal and Democratic Services)

County Hall  
Northallerton

Wednesday, 24 February 2021

## North Yorkshire County Council

### Care and Independence Overview and Scrutiny Committee

Minutes of the meeting held on Thursday 17 December 2020 at 2.00pm at County Hall, Northallerton.

#### Present:-

County Councillor Karin Sedgwick in the Chair.

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

Mike Padgham (Independent Care Group) and Jill Quinn (Dementia Forward).

In attendance:

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

Officers: Ray Busby (Principal Scrutiny Support Officer), Richard Webb (Corporate Director for Health and Adult Services), Dale Owens (Assistant Director of Commissioning & Quality, Health and Adult Services), Louise Wallace (Director of Public Health, Commissioning (HAS))

Apologies:

County Councillor Stuart Martin MBE

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

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#### 230. Minutes

##### Resolved –

That the Minutes of the meeting held on 25 September 2020 having been printed and circulated, be taken as read and be confirmed and signed by the Chairman as a correct record.

#### 231. Declarations of Interest

There were no declarations of interest to note.

#### 232. 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.

#### 233. Chairman's Remarks

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

She highlighted some of the adjustments made in order that the committee not only met at the right time, but also accommodated officer priorities in these challenging times. Hence, the decision to re-arrange the meeting from the 3<sup>rd</sup> December to the 17<sup>th</sup>.

As Chair, she would be observing the upcoming meeting of the Outbreak Management Board, which intended to review how Covid 19 had affected suicide rates in North Yorkshire. This topic has been a key concern for the committee. In this context, she had recently suggested that aspects of the mental health first aider training feature as a future members seminar agenda topic.

## **234. Care Market Update**

### **Considered**

Presentation by Dale Owens Assistant Director of Commissioning & Quality, Health and Adult Services on how the Health and Adult Services directorate has responded to the challenges of the pandemic. This presentation focused on the impact of Covid 19 on the Care Market.

Care settings, whether they are nursing homes, residential homes or extra care, have been at the heart of the council's response. There are 235 of these settings in NY – more than any other area of Yorkshire, with high concentrations in Harrogate and Scarborough. This reflects the high number of people coming to retire to the County, as well as people being referred from West Yorkshire and Teesside.

The headlines:

- Residential and nursing occupancy dropped from an average of 94% in November 2019 to an average of 80%. This equates to an overall increase of available beds of 17.5%.
- Increase in mortality due to Covid-19 has seen higher than average excess deaths.
- Financial Sustainability survey has resulted in 32 providers expecting to face significant financial challenges in the next 12-18 months.
- Non-regulated Day Care Service providers continue to be paid based on planned activity with a blended model of support in place consisting of virtual sessions, small group based activities and one to one support. We are working with 23 providers who are reporting challenges with reopening services. In response to a members question, Dale confirmed that this situation was a level of risk that was a county we could not live with. Efforts were in place to address this.

Dale explained that a strategic Market Development Board had been established with the participation of key partners. Its priority being strategic level action to support the care sector in the future, with the aim of helping the market to become more sustainable.

The Adult Social Care Winter Plan includes a commitment to deliver a designation scheme with the Care Quality Commission. Premises have been designated for people leaving hospital who have tested positive for COVID-19 and are transferring to a care home. Anyone with Covid-19 positive test result being discharged into, or back into a registered care home setting must be discharged into an appropriate designated

setting. These approved settings have been signed off by CQC and have policies, procedures, equipment and training in place to maintain infection prevention and control and they support the care needs of residents.

Members were reassured that the market has been supported financially by a range of measures, including:

- Compensatory Payments to residential, nursing, domiciliary care and non-regulated providers.
- Payments in advance in line with annual uplift agreement.
- Block purchasing of bed capacity to support hospital discharge and admission avoidance where appropriate.
- Infection Prevention Control Fund National Personal Protective Equipment Portal.
- Supplier relief and Hardship processes in place.

Dale advised on the latest 7 Day Infection rates across the county, including prevalence in Care Homes and Extra Care Housing.

Members noted that the overall capacity for testing and turnaround times for the polymerase chain reaction (PCR) testing and for lateral flow testing (LFT) continues to improve.

Dale replied to a question about transmission rates amongst care staff, highlighting the response of providers trying to minimise the effects of transmission by adhering to good practice guidelines and regulation, especially where PPE was concerned. More latterly, increased reliability of supply of PPE was helping the situation. The incidences of asymptomatic transmission would always be a challenge for providers.

Mike Padgham stated the care providers, because of fixed costs, needed to operate at high levels of occupancy.

Mike added that the county council's support offered to providers had been exemplary. Some providers were struggling to manage the increased burdens and lower occupancy levels. A number of homes were having to recruit additional staff to ensure the required testing in homes could be properly undertaken.

Against the background, It was inevitable that some providers would be lost to the market. Continued financial support was no doubt needed, but he acknowledged the county council faced financial challenges of its own.

Anecdotally, a member reported knowledge of some individuals being reluctant to accept the move into a residential setting – known as “Covid fear”. Dale advised that the service would always support individuals who decided not to go into residential care even when a needs assessment had determined that this was an appropriate response.

Mike Padgham agreed that some relatives had struggled to persuade individuals to enter residential care because of national publicity around care homes repeatedly reporting that homes were centres of high transmission of the virus. Indeed some concerned relatives had sought to move loved ones out of existing care settings. He believed the government could do more, in terms of messaging, to highlight that care homes were a safe environment.

In response to a member's question, Dale advised that the council was monitoring very closely the additional cost to the authority in relation to extra services - purchase of bed space, additional staffing and so on – so that the underlying cost could be accurately evaluated and the longer term risks properly identified.

A member commented on the demands upon staff. Fatigue was becoming an issue, Dale responded, and we may yet see that reflected for example in stress levels, absenteeism and future sickness rates, The county council had a number of initiatives in place, as did CCG's, to support staff's mental health and well-being during this period.

Dale agreed to respond after the meeting to the range of other questions and comments that had been raised in the "chat pane" by members.

**Resolved –**

- a) That the report be noted.
- b) The committee was pleased at the comprehensive and professional nature of the action taken and the support offered.
- c) The committee agreed to revisit this issue at the next meeting.

**235. Local Account: Consideration prior to publication**

**Considered –**

The Local Account for North Yorkshire Health and Adult Services for 2019/2020 - the directorate's own statement on how services have supported people across the county, how public money has been invested, and what the aims are in 2020/2021.

The Chairman congratulated Louise Wallace on her recent appointment as Director of Public Health.

Louise advised that preparing and publishing a Local Account was not a statutory requirement, but it was a good practice requirement. The document whilst an Adult Social Care document, also included, quite appropriately, references to Public Health.

Members liked the revamped document - especially its accessible format. The description of how the service has worked with our partners, including care providers, the NHS, District and Borough Councils, Police, Fire Service, community and voluntary sector organisations was found to be clear.

**Resolved -**

That the report be noted.

**236. Second Wave Implications, Coming out of Lockdown and Looking Forward**

**Considered –**

Richard Webb advised that contact with care providers had been maintained through daily calls and online options that was providing critical data.

Richard updated members on the very latest infection rates and the picture across the county – district by district. He contrasted the experiences between the first and the second wave; outbreaks in care homes - at the time of addressing the meeting - had not been as numerous as faced in the first wave. Preparations were now being made for the onset of the anticipated third wave and the consequences of increased household mixing.

Generally, the authority in conjunction with providers had collaborated effectively with all partners to stay ahead of issues - for example in relation to testing, safe visiting procedures, and PPE.

The Chairman asked about priorities for our prevention and intervention services as we come out of Covid. It was clear that some vulnerable adults have been hit harder than others - learning disabilities, autism the whole transitions agenda. Richard highlighted the implications for certain groups of people being more susceptible to Covid, notably younger people with disabilities. That had influenced the shape of the local response with local discretion was being sensibly applied terms of access to rapid testing for example.

Work was underway looking at the longer-term impact on day services – most of which had been unable to take place - and what those services might look like in the future. In reality, however, the pace and volume of challenges faced had made it difficult to plan for the longer-term future to any substantial degree.

The mental health condition of staff had been a priority concern. Richard covered the corporate and directorate responses for supporting staff – both formal and informal, information around this was available on the website.

Ways and methods of working had changed dramatically over recent months. We have seen the move away from traditional office based to home working, accompanied with the increasing confidence in digital communication and solutions. As a Director, he recognised that assessing the impact of changing work patterns would need proper and full consideration; part of this would be about how best to prepare staff for inevitable shifts and adjustments to the work environment.

Richard agreed with members' comments about the need to tackle the longer term funding of social care. He believed that at national level there was a clear recognition of the needs for longer-term reform of social care, including particularly the evident current fragmentation in funding arrangements.

**Resolved -**

That the report be noted

**237. Work Programme**

**Considered -**

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

A member believed that the committee should consider looking beyond the current experience to what the future of council social care services might look like and what might be the key considerations of a recovery strategy.

A member suggested that the respective chairs of the Scrutiny of Health and Care and Independence Scrutiny Committees might want to explore the feasibility of some time-limited joint work on what many observers believe is an impending crisis: the backlog of undiagnosed conditions, missed operations and GP appointments and so on. The Chairman agreed to explore this suggestion further.

**Resolved -**

That the work programme be agreed.

The meeting finished at 2.30pm



# Care Market Update

Dale Owens, Assistant Director – Commissioning & Quality

March 2021

OFFICIAL

## State of the Market - Headlines

- Increase in mortality due to Covid-19 has seen higher than average excess deaths.
- Financial Sustainability survey has now been completed for both residential and domiciliary care services. The Service Development Team are working with provider who have demonstrated sustainability issues to work with them at an early stage
- Non-regulated Day Service providers continue to be paid based on planned activity with a blended model of support in place consisting of virtual sessions, small group based activities and one to one support. Further work currently underway with the providers to move to a longer term sustainable footing.

# Market Sustainability

The Market Sustainability Board developed in 2020 continues to address strategic issues in the market

A number of work streams have been developed to enable appropriate representative across the system to work together to improve market availability and conditions across North Yorkshire

Key priorities for 2021/22 are:

- to develop a residential and nursing care strategy
- develop a plan to reimagine homecare
- improve sustainability in non-regulated services post covid
- complete the actual cost of care exercise to ensure sustainable funding is available to the market in the long term

# Designated Beds and hospital discharge

- Premises for people leaving hospital who have tested positive for COVID-19 and are transferring to a care home
- Anyone with Covid-19 positive test result being discharged into, or back into a registered care home setting must be discharged into an appropriate designated setting
- Approved settings must be signed off by CQC and have policies, procedures, equipment and training in place to maintain infection prevention and control and support the care needs of residents
- National funding to support hospital discharge for scheme 1 ceases on 31<sup>st</sup> March and for scheme two a maximum of six weeks after this date
- Local arrangements are being agreed to continue with the positive discharge work completed to date

## Financial Support to the Market

- Compensatory Payments to residential, nursing, domiciliary care and non-regulated providers
- Payments in advance in line with annual uplift agreement
- Block purchasing of bed capacity to support hospital discharge and admission avoidance where appropriate
- Infection Prevention Control Fund (Part 1&2), Workforce capacity Fund (£120m) and Lateral flow testing fund distributed to providers (£149m)
- National Personal Protective Equipment Portal
- Supplier relief and Hardship processes in place
- A negotiated 1 year settlement on inflation for the social care market has been agreed with the ICG for 2021/22

## 7-day infection rates for districts

Last refresh	22/02/2021 (daily)	Data source(s)	NYCC Dashboard via gov.uk
Descriptor	Number of people with one lab-confirmed positive COVID-19 test result in 7 days of data published on the gov.uk website that aligns with PHE daily briefing dates (crude rates per 100,000 population).		
Key points	<ul style="list-style-type: none"> <li>• <b>The rates here omit the two most recent days of data</b> but better aligns with the latest county-level data from Public Health England's daily briefing.</li> <li>• <b>The total number of cases excludes the most recent days</b> and is lower than the overall count elsewhere in this document.</li> <li>• Selby has the highest rate of new cases (over the past 7 days) in North Yorkshire.</li> <li>• Harrogate has seen the highest number of cases in the past 7 days.</li> </ul>		

Area Name	Population	Cumulative Number of Cases	Cumulative rate per 100.00	New cases over the last 7 days	New cases over last 7 days (all data)*	7-day rate per 100,000	Average Number of new Cases per Day (7 day RA)
England	56286961	3607093	6408.4	66837	59211	118.7	9548.1
Selby	90620	4490	4954.8	98	93	108.1	14.0
Richmondshire	53730	2418	4500.3	54	57	100.5	7.7
Harrogate	160831	7182	4465.6	153	133	95.1	21.9
Ryedale	55380	1759	3176.2	48	41	86.7	6.9
North Yorkshire	618054	27688	4479.9	521	473	84.3	74.4
Craven	57142	2631	4604.3	44	35	77.0	6.3
Hambleton	91594	3964	4327.8	62	59	67.7	8.9
Scarborough	108757	5244	4821.8	62	55	57.0	8.9

\* The 7-day total includes the latest available data and goes beyond the date range shown. All other data on this page excludes the latest 2 days reported since the latest figures are subject to revision.

## Current Cases of COVID-19 in Supported Living and Domiciliary Care

### New cases:

Number of new positive test results	5
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Providers with new positive test results that didn't have current positive cases	1
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### Providers with an outbreak (2 or more cases)

Outbreak of 2-14 days	5
Outbreak of 15-28 days	6
<b>Total</b>	<b>11</b>

### Providers with single cases confirmed / awaiting test results

Single confirmed cases within 14 days	2
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Therefore a total of 14 Providers with new or ongoing cases and outbreaks.

*Staff with positive test who are in isolation period = 8*

*People in receipt of a service with positive test who are in isolation period = 4*

*Total = 12*

**This information is correct as at 15:00, 22<sup>nd</sup> February 2021.**

## Current Cases of COVID-19 in Care Homes and Extra Care Housing

### New cases:

		Previous Day
Number of new positive test results	9	15
Settings with new positive test results that didn't have current positive cases	2	1

### Care settings with an outbreak (2 or more cases)

		Previous Day
Outbreak of 2-14 days	31	29
Outbreak of 15-28 days	19	20
<b>Total</b>	<b>50</b>	49

In these settings there have been no new cases since 19/02/2021.

### Care settings with single cases confirmed / awaiting test results

		Previous Day
Single confirmed cases within 14 days	13	14

Therefore a total of 65 homes with new or ongoing cases and outbreaks.

This information is correct as at 15:00, 22nd February 2021.

Settings awaiting Test Results: 1 (of which 1 already have positive cases)



# Vaccinations in North Yorkshire

- Details of the specific numbers are held and controlled centrally by the DHSC
- North Yorkshire has seen an excellent take up of the vaccine across residential and nursing care settings with over 90% of people already in receipt of their first vaccination.
- Excellent take up also for staff vaccination with very high percentages complete
- Currently vaccinating as of 23/02 priority list 5 and 6 with the first groups in priority 1 to 4 mostly complete

Priority	Risk group
1	Residents in a care home for older adults and staff working in care homes for older adults
2	All those 80 years of age and over and frontline health and social care workers
3	All those 75 years of age and over
4	All those 70 years of age and over and <a href="#">clinically extremely vulnerable</a> individuals (not including pregnant women and those under 16 years of age)
5	All those 65 years of age and over
6	Adults aged 16 to 65 years in an at-risk group (see clinical conditions below) <a href="#">footnote 1</a>
7	All those 60 years of age and over
8	All those 55 years of age and over
9	All those 50 years of age and over
10	Rest of the population (to be determined)



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# Extra Care Housing



Dale Owens  
Assistant Director Commissioning and Quality

# NYCC definition of Extra Care

- What is extra care?
  - Extra care is a housing solution to a care and support need. Extra care housing is different because:-
    - you are living at home, not in a home
    - you have your own front door – you decide who comes in
    - couples (and pets) can stay together
    - there is a mix of able and less able people
    - 24 hour care and support services are available, with a choice of local care and support providers
    - On site services including restaurant and hair dressing which are open to the community
    - you are supported to maintain your independence
    - you can join in activities or you can be private
    - you have control over your own finances
    - you have security of tenure

# Our Vision

- We want people to live longer, healthier, independent lives
- Enable people to make the choices that are right for them
- New wave of extra care schemes to set the pace for extra care living into the middle of this century
- Well-spent investment with buildings that are well designed, environmentally sustainable and integral to our towns and villages

# Our Ambition

- Roll out of extra care to all major towns and locations
- Meet the needs of both older and younger people living with complex health and care needs
- Meet the aspirations and requirements of future generations
- Place extra care at the heart of communities making them active, thriving places to live
- Replacement of remaining Elderly Persons' Homes where appropriate and subject to consultation
  - 16 replaced to date



# The story so far

One of the largest Extra Care programmes in the country, recognised as an exemplar of good practice and effective delivery

25 schemes ranging from 12 to 90 units in places as diverse as Bainbridge and Harrogate

Over 1300 units with a mix of one and two bedroom apartments or open plan living for people with complex needs or dementia

8 Step up / Step down and 5 short stay / respite units

# Progress since 2016

## **New active schemes:**

Kirkwood Hall, Leyburn – Opened 2016

Mickle Hill, Pickering, Opened 2016

Orchid House, Sowerby – Opened 2016

Bransdale View, Helmsley – Opened 2018

The Cuttings, Harrogate – Opened 2019

Fry Court, Great Ayton – Opened 2020

Webb Ellis Court, Scarborough – Opened 2020

## **In Development**

Eller Beck Court, Skipton – Opening October 2021

Bowland View, Bentham – Opening September 2021

Filey Fields, Filey – Opening July 2021

## **Proposed**

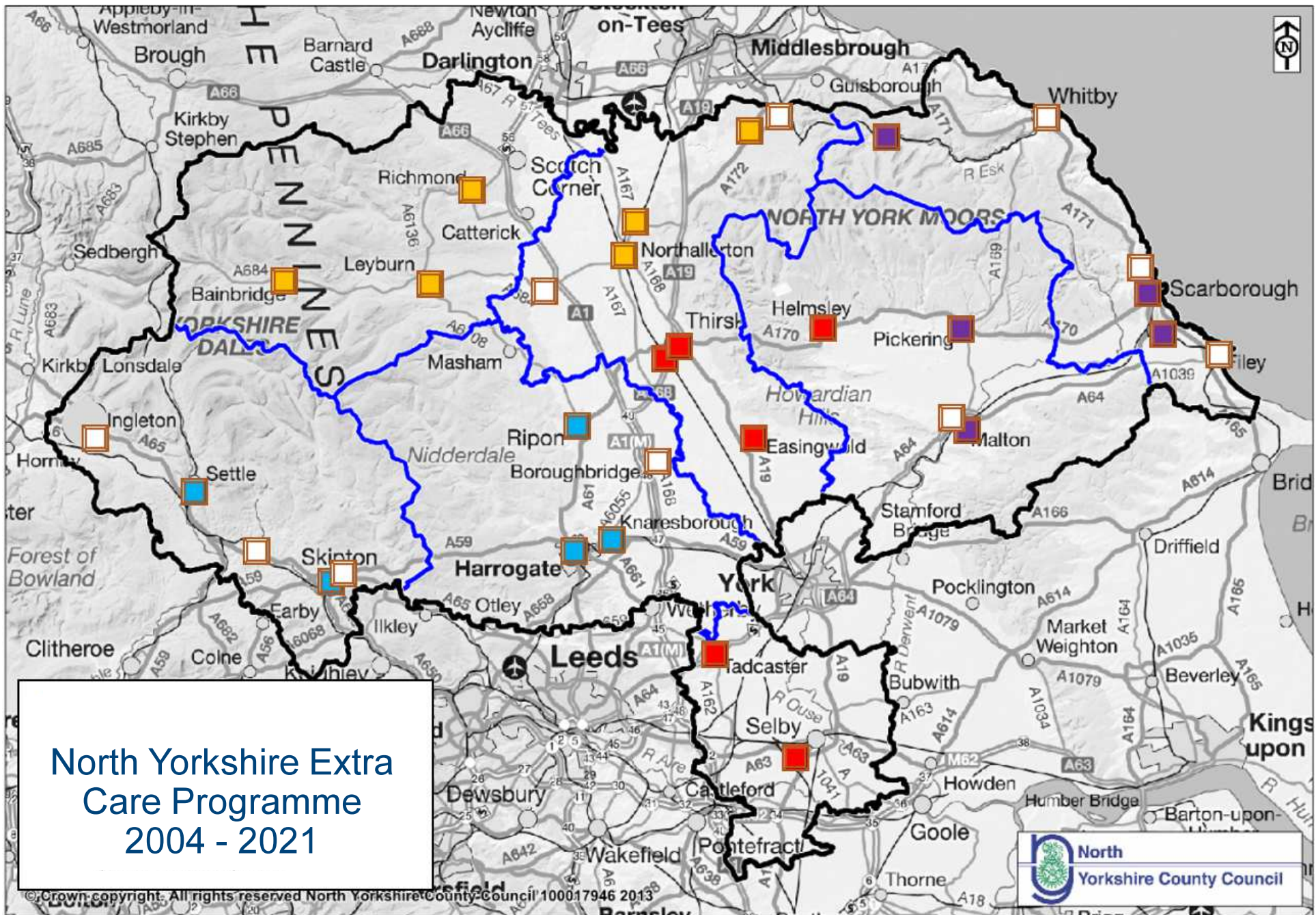
Bedale – Delayed pending planning appeal

Malton – Campus approach with wider housing offer

Whitby – Hospital site

Harrogate – link to wider development for dementia

Catterick – working with MOD



# Financial Model

New schemes cost approximately £10 - £12m to build

Developer / Provider account for ~60% of total cost

Homes England grant ~30%

NYCC Grant ~10%

NYCC grant is protected by a legal charge which requires the full grant amount to be repaid if the use of the building changes from Extra Care within 25 years of opening



# Cost of Living

## Rent:

1 Bed Apartment: £110 p/w

2 Bed Apartment: £135 p/w

## Service Charge:

£50 per week

## Background Support:

£30 p/w

## Total:

1 Bed Apartment: £190 per week

2 Bed Apartment: £215 per week

Average package of domiciliary care: £188 per week

HAS stated residential rate: £579 per week

Indicative Extra Care rate: £378 per week

# Savings

Extra Care savings are predicated on either:

- Closure of linked EPH estate, saving on staffing, maintenance etc.
- Reduction in care costs

Since 2015/16 the Extra Care programme has generated cashable savings of £1.59m with an additional £1m savings in progress linked to other schemes

In addition, non cashable benefits include reductions in care need due to the environment and ethos of Extra Care and reductions in admissions and delayed transfers where Step up / Step down units are available

# Future Programme

By 2023 the ambition to see Extra Care in all key towns will have been met, the programme will have delivered over 30 schemes and approximately 2000 units of high quality, purpose built accommodation with support

Future need is changing and we need to address new challenges and changing demand

## **ECH+**

An enhanced staffing and care model to deliver levels of care comparable to nursing homes to allow ECH to become a true home for life and meet the need to support increasing levels of complexity

## **ECH Mini**

Small scale Extra Care to support rural locations and allow people to remain within their communities

## **Hybrids**

Mixed usage sites, including Extra Care, Residential and Nursing support and Supported Living all on one site





## NORTH YORKSHIRE COUNTY COUNCIL

### Care and Independence Overview and Scrutiny Committee

4 March 2021

#### 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**

##### **Committee meetings**

- Thursday 24 June 2021 at 10am
- Thursday 20 September 2021 at 10am
- Thursday 2 December 2021 at 10am
- Thursday 10 March 2022 at 10am

##### **Mid cycle briefing dates**

- Thursday 12 May 2021
- Thursday 22 July 2021
- Thursday 28 October 2021
- Thursday 10 February 2022

#### **4.0 VCS Resilience Survey**

- 4.1 Care and Independence Overview and Scrutiny members joined with members of the Young Peoples Overview and Scrutiny Committee to review the results of the second survey into CVS resilience undertaken by Community First.
- 4.2 Caroline O’Neil and Mark Hopley from Community First talked about what is happening on the ground with voluntary sector provision. This was a follow up to a briefing held back in July on the VCS Resilience Survey.
- 4.3 Voluntary groups and charity organisations are playing a critical role in the Covid-19 pandemic response, working in different ways, more flexibly and, in many instances, under real financial pressure.
- 4.4 Partners providing infrastructure support to VCSE organisations across Yorkshire and Humberside, have worked together to gather information using a common survey, co-

ordinated by Voluntary Action Leeds. Fieldwork took place between 4 September and 9 October and follows on from a similar survey undertaken in April 2020.

- 4.5 Members noted that the changes since reporting in April, at the time of the first lockdown, have continued, with a mix of closures and increasing proportion of service modifications to maintain delivery. Some reopening of services took place over the summer, for many reopening is in 2021 or they are unsure about when they will reopen.
- 4.6 The results suggest that organisations are broadly responding in at least one, if not a combination, of ways to the current situation:
- Reframing, repurposing or modifying their services and delivery methods to retain income and meet local community needs
  - **Reducing overheads** (e.g. reducing staff costs/hours and using the furlough scheme where eligible; turning off heating) to maintain some form of core/partial service
  - 'Plugging the gap' - use of reserves
  - **Short-term mind-set** - looking at the immediate crisis of shortfalls in income by using reserves (where available) and/or seeking grants and funding from other government/foundation sources (as well as self-initiated Crowdfunding and Easy Fundraising activities) and /or trying insurance claims
  - **Medium –term mind-set** – for those able to sustain for at least 6 months are looking for solutions that support current cash-flow but especially help to aid recovery around 6 months from now, framed in the form of needing a 'business recovery plan' or equivalent
  - **Delaying/deferring and or altering a pre-existing project**, service, contract schedules in agreement with a flexible funder and meantime keep the organisation running with existing reserves and contract income
  - **Volunteers** - some volunteers will not return for reasons of health, getting older and concerns, and with a proportion not re-engaging, bringing in new volunteers is increasingly important
  - **Marketing** – by maintaining contact with clients/members/constituents to continue a sense of community and encourage them to 'come back' once lock down measures are eased i.e. to mitigate any longer term loss of trade, participation or patronage
  - **Supporting the local community** in other (non-financially oriented) ways
- 4.7 The Chairs of the two committees agreed to bring up at an upcoming scrutiny board meeting the key recommendations in the report - especially those directed towards grant funders and key public sector partners like the county council.
- Flexibility has been acknowledged and is necessary to continue.
  - Investing in core costs has emerged as increasingly important for core costs, IT investment, management and embedding new ways of working.
  - Jointly plan investment for short, medium and longer terms – with an immediate 6-month horizon, to maintain groups and activities, until other sources of income are on a more sustainable platform.
  - Grant funders and public sector funders to join up investment frameworks and have some common fields and phrasing for funding applications.
  - Co-design services, recognising that service delivery has been modified and some of the changes need to be reflected in new service specifications.

- Work with Community First Yorkshire and other partners and make use of locality VCSE structures to identify and agree joint plans to extend the reach and engagement in support services by VCSEs and the engagement of people in support services and activities.

## **5.0 Mid Cycle Briefing: Work Programme matters**

5.1 At a recent mid cycle briefing, group spokespersons have agreed that at the June meeting, members will:

- Review how the directorate has worked with user groups during the pandemic and hear from representatives of user groups about their experiences during lockdown and the pandemic generally
- Look again at how NYCC is ensuring that Direct Payments enable more choice and control over the support people receive and how their social care needs are met
- Receive the Annual Report of the Older Peoples Champion

5.2 Other items to be scheduled for future meetings include:

- Advocacy Services - meeting providers
- Transitions pathway update – progress
- Social Prescribing Update on Progress

5.3 At the May mid cycle briefing group spokespersons have asked for an update on:

- Reablement Review
- Transforming Care

## **6.0 Recommendations**

6.1 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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23 February 2021

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## 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**

<b>Committee Meetings</b>	Thursday 4 March 2021 at 10am
	Thursday 24 June 2021 at 10am
	Thursday 20 September 2021 at 10am
	Thursday 2 December 2021 at 10am
	Thursday 10 March 2021 at 10am

**Programme**

<b>BUSINESS FOR THURSDAY 24 June 2021</b>			
User participation	Experience of the pandemic and lessons learned. How the directorate has worked with, and the experience of, user groups during the pandemic -	Follow up to the interest the members had last year	
Update on HARA			Louise Wallace
Transfers of Care Annual update	Performance item		Louise Wallace
Annual Report of the Older Peoples Champion			Andy Paraskos
Yorsexualhealth	results of procurement and possible meeting providers		Public Health
Direct Payments	Revisit how NYCC is ensuring that Direct Payments enable more choice and control over the support people receive and how their social care needs are met		
<b>BUSINESS FOR THURSDAY 20 September 2021</b>			

Transitions	Transitions pathway update – progress and review		Cara Nimmo and Karl Podmore
All Age Autism Strategy	Update focussing on implementation within Health and Adult Services.		
Suicide Prevention and Audit	Update on prevalence and related issues How the committee can support the suicide prevention agenda		Claire Robinson Public Health
Respite/Short breaks current position	Progress on a transformational approach to short breaks: the identification of a model, plans for consultation and implementation	Report and Presentation	Dale Owens
Commissioned Services: The Provider perspective	Series managed dialogue/conversation with providers:	eg Wellbeing, Prevention and mental health contracts, Advocacy, Dementia Support	
<b>BUSINESS FOR Thursday 2 December 2021</b>			
Support for Carers	Overview item to help assess the support provided to adult carers of adults in North Yorkshire - specifically to provide an objective view of these services and whether they provide value for money	Update on the Strategic plan for the transformation of carers offer across North Yorkshire	
Social Prescribing	Update on Progress		

#### Mid Cycle Briefings Dates –10am start

Reablement Review update Safeguarding - Annual Report of the NY Safeguarding Adults Board Intermediate Care Procurement: Information on how the procurement of services (such as residential, nursing and domiciliary care) is linked to evidence-based medium-term commissioning strategies Charging for Social care - Overview	Thursday 12 May 2021 Thursday 22 July 2021 Thursday 28 October 2021 Thursday 10 February 2022
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