



## Agenda

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

**To:**                      **Councillors Caroline Dickinson, Karl Arthur,  
Andrew Lee, Bridget Fortune, Heather Moorhouse,  
Angus Thompson, Karin Sedgwick (Chair),  
Roberta Swiers, Nigel Knapton, Andy Brown,  
Joy Andrews, Pat Marsh, Robert Heseltine, Jack Proud,  
Eric Broadbent (Deputy Chair) and Phillip Barrett.**

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

**Date:**                      **Thursday, 23rd June, 2022**

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

**Venue:**                      **The Brierley Room, County Hall, Northallerton**

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 Thursday 2 March 2022**                      **(Pages 3 - 6)**
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 20 June 2022. Each speaker should limit themselves to 3 minutes on any item. Members of the public who have given notice will be invited to speak:-

Enquiries relating to this agenda please contact Ray Busby Tel:  
**or e-mail [ray.busby@northyorks.gov.uk](mailto:ray.busby@northyorks.gov.uk)**  
**Website: [www.northyorks.gov.uk](http://www.northyorks.gov.uk)**

- 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.

- Chairman's remarks - Any correspondence, communication or other business brought forward by the direction of the Chairman of the Committee.  
(FOR INFORMATION ONLY)**
- Overview and Scrutiny at North Yorkshire County Council** **(Pages 7 - 12)**  
Report of the Scrutiny Team Leader  
The purpose of this report is to provide Members of the Care and Independence Overview and Scrutiny Committee with a summary of how overview and scrutiny is undertaken at the Council, the way in which subjects for scrutiny are identified, why it is important and what role committee Members have to play.
- Assessment of Experience of Covid-19**  
Presentation at the meeting by Louise Wallace, Director of Public Health
- North Yorkshire Adult Social Care Market Overview** **(Pages 13 - 28)**  
Presentation and Report by the Assistant Director Prevention and Service Development, Commissioning and Quality (HAS)  
  
This report gives an overview of the state of the care market in North Yorkshire
- Adult Social Care Charging Reforms** **(Pages 29 - 40)**  
Report and Presentation by the Assistant Director for Prevention and Service Development, Commissioning and Quality (HAS)
- Work Programme** **(Pages 41 - 44)**  
Report of the Scrutiny Team Leader
- 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

Wednesday, 15 June 2022

## North Yorkshire County Council

### Care and Independence Overview and Scrutiny Committee

Minutes of the virtual meeting held on Thursday 10 March 2022 at 10am.

**Present:-**

County Councillor Karin Sedgwick in the Chair.

County Councillors: Mike Chambers MBE, Caroline Goodrick, Helen Grant, Stanley Lumley, Cliff Trotter and Robert Windass.

**In attendance:**

Caroline Dickinson (Older Peoples Champion)

Officers: Ray Busby (Principal Scrutiny Support Officer), Karen Siennecki () and Louise Wallace (Director of Public Health)

**Apologies:**

County Councillors: Eric Broadbent, John Ennis, David Jeffels, Andrew Jenkinson, John Mann and Roberta Swiers.

Co-opted Members: Jill Quinn (Dementia Forward) and Mike Padgham (Co-opted Member - Independent Care Group)

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

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**271. Minutes**

**Resolved –**

That the Minutes of the meeting held on 2 December 2021 having been printed and circulated, be taken as read and be confirmed and signed by the Chairman as a correct record.

**272. Declarations of Interest**

There were no declarations of interest to note.

**273. 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.

**274. Chairman's Remarks**

The chair thanks everybody who had served on this committee. The support was most appreciated. Under the most challenging of circumstances over the last two years, the level, range and quality of scrutiny of all matters relating to adult social care was something to be proud of.

## **275. Director of Public Health Annual Report 2020**

### **Considered-**

Covering report by the Scrutiny Team Leader introducing the Director of Public Health Annual Report 2020.

Since the public health function returned to Local Government, this Scrutiny Committee has reviewed every Director of Public Health Annual Report, showing a particular interest in where public health activity helps achieve social care objectives.

Louise explained that during one of the most difficult periods, partners and organisations had clearly come together and brought creative thinking and resources to address problems. There is every reason to believe, as Louise put it, that "...this will carry us through as we continue to respond and rebuild for a healthy future.

### **Resolved –**

- a) That the report be noted
- b) Members found the 2021 report strong in all of the following areas:
  - Progress on past recommendations and priorities
  - Health In North Yorkshire
  - North Yorkshire’s COVID-19 response
  - Protecting and Improving the health and wellbeing of the North Yorkshire population
  - North Yorkshire Public Health priorities for 2021- 2025

## **276. Local Account of Health and Adult Services**

### **Considered –**

Louise Wallace, Director of Public Health introduced the Health and Adult Services Draft Local Account shown as Appendix 1 attached to a cover report by the Scrutiny Team Leader.

The time period covered for this Local Account is the 1st April 2020-31st March 2021

### **Resolved –**

That the report be noted.

## **277. All Age Autism Strategy - Recap and Update**

### **Considered –**

Presentation from Karen Siennecki providing an update on the All Age Autism Strategy and implementation within Health and Adult Services.

Members were advised that it had been over a year since the committee first looked at the intentions and objectives of the All Age Autism Strategy. Although, inevitably,

the pandemic has affected implementation, Karen explained that much had still been achieved.

Karen reminded the meeting about what we understand about autism. Having autism can mean:-

- You find it hard to communicate and interact with other people
- You find it hard to understand how other people think or feel
- You find things like bright lights or loud noises overwhelming, stressful or uncomfortable
- You get anxious or upset in unfamiliar situations and social events
- You take longer to understand and process information
- You do or think the same things over and over

Autism is much more common than many people think. There are around 700,000 people on the autism spectrum in the UK – that is more than 1 in 100. If you include their families, autism is a part of daily life for 3 million people.

While autism is not a learning disability, around 4 in 10 autistic people have a learning disability. Three times as many males as females are diagnosed with autism. However, it is believed to be under-diagnosed in females.

Locally, solid progress against the strategy objectives can be found, especially in staff investment and training. However, perhaps the most pleasing aspect for members was that NYCC were the first Local Authority to have all of its Adult services accredited in the UK in 2016. Seventeen services were accredited; all are being re-inspected in 2023.

#### **Resolved –**

- c) That the report be noted.
- d) The committee suggested that members return to this topic towards the end of this year with input from Children and Families Services to gain a full picture of how we have progressed.

#### **278. Work Programme**

##### **Considered –**

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

Ray Busby explained that in setting out plans for the forward work programme, group spokespersons had been mindful that after the elections there would be new faces and increased numbers round the table. In proposing a revamped work programme, it was suggested that each item to be considered should have a strong overview perspective to help new members grasp the broader context. As Covid pressures change, affecting “business as usual” and service development activity, the suggested timing of items will inevitably need to be revised.

##### **Resolved -**

That the work programme be agreed.

The meeting finished at 12.05pm

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## North Yorkshire County Council

### Care and Independence Overview and Scrutiny Committee – 23 June 2022

#### Overview and Scrutiny at North Yorkshire County Council

#### Report by the Assistant Chief Executive (Legal and Democratic Services)

##### **1.0 Purpose of Report**

- 1.1 To provide Members with a summary of how overview and scrutiny is undertaken at the Council; the way in which subjects for scrutiny are identified; why it is important and what role Committee Members have to play.
- 1.2 The report also provides Members with details of some of the specific responsibilities and powers relating to this Committee.

##### **2.0 Introduction/background**

- 2.1 The Local Government Act 2000 first introduced the requirement for every Local Authority to include provision for at least one Scrutiny Committee. Under this Act and associated legislation, Scrutiny can make recommendations to the Executive and other local bodies. The Committees also have the power to question Cabinet Members, Council officers and representatives of other organisations, such as health and community safety agencies. The committees can also investigate any issue which affects the local area or its residents.
- 2.2 For more detail on the roles and responsibilities that the Overview and Scrutiny Committees have, please refer to the North Yorkshire County Council Constitution – <http://www.northyorks.gov.uk/article/24041/The-council-constitution>

##### **3.0 Why it is important**

- 3.1 Overview and Scrutiny provides an important check and balance, helping to ensure that the decisions made by the Executive reflect the needs of local people, are financially robust, are in keeping with the strategic priorities and responsive to the operational demands of the Council.
- 3.2 Where Overview and Scrutiny is not active, engaged and inquisitive, then there is a risk that some strategic and operational issues could be overlooked and opportunities for early intervention and action missed. Examples of where this has occurred in other Local Authorities, albeit at the extreme, include: child sexual exploitation in Rotherham MBC; poor care and high mortality rates at Mid Staffordshire NHS Foundation Trust; and governance failings in Tower Hamlets LBC.

##### **4.0 How it contributes to the Council's outcomes**

In addition to being an important check and balance and providing early warning, Scrutiny aims to contribute to the Council's corporate outcomes in many other ways, including:

- Enabling Councillors to become directly involved in the development of: policy and strategy; consultation and public engagement planning; and the performance management of the Council

- Keeping Councillors and the public informed of key issues, priorities and initiatives
- Enabling direct engagement with the people of North Yorkshire
- Acting as a critical friend and providing Cabinet Members and senior officers with a non-partisan forum in which to test out ideas, approaches and gain feedback and suggestions
- Providing a structure, through the call-in process, for scrutinising specific decisions of the Executive
- Scrutinising issues of public concern beyond the remit of the Council

## 5.0 The Overview and Scrutiny Committees

5.1 The Care and Independence Overview and Scrutiny Committee is one of the five thematic Overview and Scrutiny Committees, each of which meet in public four times a year. Its role is to scrutinise the needs of vulnerable adults and older people and people whose independence needs to be supported by intervention from the public or voluntary sector.

5.2 The other four Overview and Scrutiny Committees are:-

- Transport, Economy and Environment – focussed upon transport and communications infrastructure, supporting business and helping people develop their skills, sustainable development, climate change, countryside management, waste management, environmental conservation and cultural issues
- Corporate and Partnerships - the Council's corporate organisation and structure, resource allocation, asset management, procurement policy, people strategy, equality and diversity, performance management, communications, partnership working, community development and engagement and community safety (as the designated Crime and Disorder Committee).
- Young People – focussed upon the planning, commissioning and delivery of services for children, young people and their families, including education, care and protection and family support.
- Health - focussed upon the planning, provision and operation of health services in the County with the aim of acting as a lever to improve the health of local people and ensuring that the needs of the local people are considered as an integral part of the delivery and development of health services.

5.3 Overview and Scrutiny functions are also supported through the following bodies:-

Scrutiny Board – this is comprised of the Chairs of the five thematic Overview and Scrutiny Committees and enables work to be co-ordinated, opportunities for joint scrutiny to be identified, and Committee Chairs to act as critical friends.

Police, Fire and Crime Panel – which scrutinises the Police and Crime Commissioner. There is also a Complaints Sub-Committee, which meets on an adhoc basis.

Looked After Children's Members Group – this is not a formal Committee but acts as an informal Advisory Group to the Executive Portfolio Holder for Children and Young Peoples Services. The group performs a role consistent with statutory guidance for Local Authorities to promote the health and well-being of looked-after children.



## **6.0 Mid Cycle Briefings**

6.1 In addition to formal meetings of the Committees, there is a system of Mid Cycle Briefings. A Mid Cycle Briefing enables the Chair, Vice Chair and Spokespersons for each Committee to meet in private four times a year to: discuss the work of the Committee; identify areas for in-depth scrutiny; and have an early discussion with commissioners and providers about topics that may be confidential or under development.

## **7.0 Different approaches to overview and scrutiny**

7.1 In addition to formal Committee meetings and Mid Cycle Briefings, there are a number of approaches that Overview and Scrutiny can take, including:-

- Task and finish groups – these are informal, time-limited bodies comprised of Councillors that are established by the Committee to undertake a discrete piece of Scrutiny work and then report back their findings and recommendations.
- In-depth Scrutiny Review – this is when the Committee undertakes a prolonged and detailed piece of work, which includes: desktop research; expert witnesses, typically commissioners and providers; service/site visits; and engagement with service users. This approach combines formal Committee meetings and the use of a Sub-Group.
- Select Committee – where an Overview and Scrutiny Committee works as a whole Committee to address a particular issue. Typically, this would involve a one-off meeting lasting a day where a range of expert witnesses are invited to attend and give evidence. The Committee Members then analyse the evidence given and make recommendations for improvements.
- Call-in – this is when non-Executive Members of the Council can have decisions of the Executive considered by a Scrutiny Committee.
- Joint Scrutiny – this is when there is an issue that is directly relevant to more than one Overview and Scrutiny Committee and so a collaborative approach is taken. This can be internal or external. External joint Scrutiny is often undertaken by the Scrutiny of Health Committee.

## **8.0 Role of Committee Members**

8.1 All the Members of an Overview and Scrutiny Committee have a key role to play in ensuring that Council and other public sector services are delivered effectively, efficiently and that they achieve good outcomes for local people. The things that Committee Members can do, include:

- Contributing to the development of the Committee's Work Programme, providing constructive challenge and suggesting topics for inclusion
- Actively engaging with all stages of the Scrutiny process, including any additional groups or meetings that are set up outside of the scheduled, formal meetings of the Committee
- Developing constructive relationships with other Members of the Committee, the relevant Portfolio Holders and Service Leads

- Working apolitically as a Committee, with a strong focus upon service improvement and outcomes
- Receiving the data, information and analysis that is presented in an impartial manner
- Assessing the data, information and analysis presented to the Committee and testing the conclusions that are drawn
- Contributing to the development of recommendations, based on the Committee's deliberations, which are specific, realistic and relevant.

## **9.0 Some examples of areas considered by the Care and Independence Overview and Scrutiny Committee**

9.1 Set out below are some of the areas covered by the Committee in 2021/2022:-

- Maintaining an overview of the impact of Covid-19 on the care market and how the directorate has responded.
- Understanding the impact of Covid-19 on the independent care sector, how the whole care sector has survived the crisis and supporting the committee's understanding of what a more sustainable future for social care might look like.
- Reviewing the directorate's Local Account for North Yorkshire, setting out how services have supported people across the county, how public money has been invested and what the aims are in 2020/21.
- Living Well – reviewing experience over the last year and reflections on the impact of the pandemic.
- Revisiting a review of how NYCC is ensuring that Direct Payments enable more choice and control over the support people receive and how Direct Payments help to meet their social care needs. An assessment of the impact Covid 19 has had on the service and the people who requested and received a Direct Payment.
- Examining how the pandemic has affected user voices and participation. Direct engagement with user representative groups seeking their views on the Covid-19 response.
- Reviewing the prevalence and related issues in relation to Suicide Prevention. This included reviewing progress against all priorities
- Understanding the stresses on the workforce across the social care sector.
- Revisiting the intentions and objectives All Age Autism Strategy and how the pandemic has affected implementation.

## **10.0 Work Programme**

10.1 The topics for Overview and Scrutiny are identified by the Committee Chairs, Vice-Chairs, Spokespersons and Members, advised by the relevant Overview and Scrutiny Officer, using some of the following sources of information:

- Performance data, information and analysis - in particular, when it has been benchmarked against similar Local Authorities
- Inspection reports, such as those produced by the Care Quality Commission
- National research findings
- National policy changes
- National and local consultations and public engagement events

- County Council Plan
- County Council budget and delivery against savings proposals and targets
- Agendas for Executive
- Local issues raised by elected members, members of the public or highlighted in the media
- Local networks and partnerships.

10.2 Where an initial area of interest or line of inquiry is identified, further information is gathered to ascertain whether this is a valid area for scrutiny that will add value and not duplicate work that is already underway.

10.3 On every Agenda for formal meetings of the Overview and Scrutiny Committees, there is an item on the Committee Work Programme. This provides Members with an opportunity to reflect on the issues that have been identified and assure themselves that they are appropriate for the Committee.

10.4 The Work Programme for this Committee is a separate Item on the Agenda for today's meeting.

#### **11.0 Further information**

11.1 The officer supporting the work of this Committee is:

Principal Democratic Services Scrutiny Officer  
 Email: [ray.busby@northyorks.gov.uk](mailto:ray.busby@northyorks.gov.uk)  
 Tel: 01609 534546

11.2 Committee papers are available from the North Yorkshire County Council website, via this link [Committee structure | North Yorkshire County Council](#)

<h4><b>12.0 Recommendation</b></h4>
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<p>12.1 That Members note this report</p>
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Report Author: Ray Busby, Principal Democratic Services Scrutiny Officer

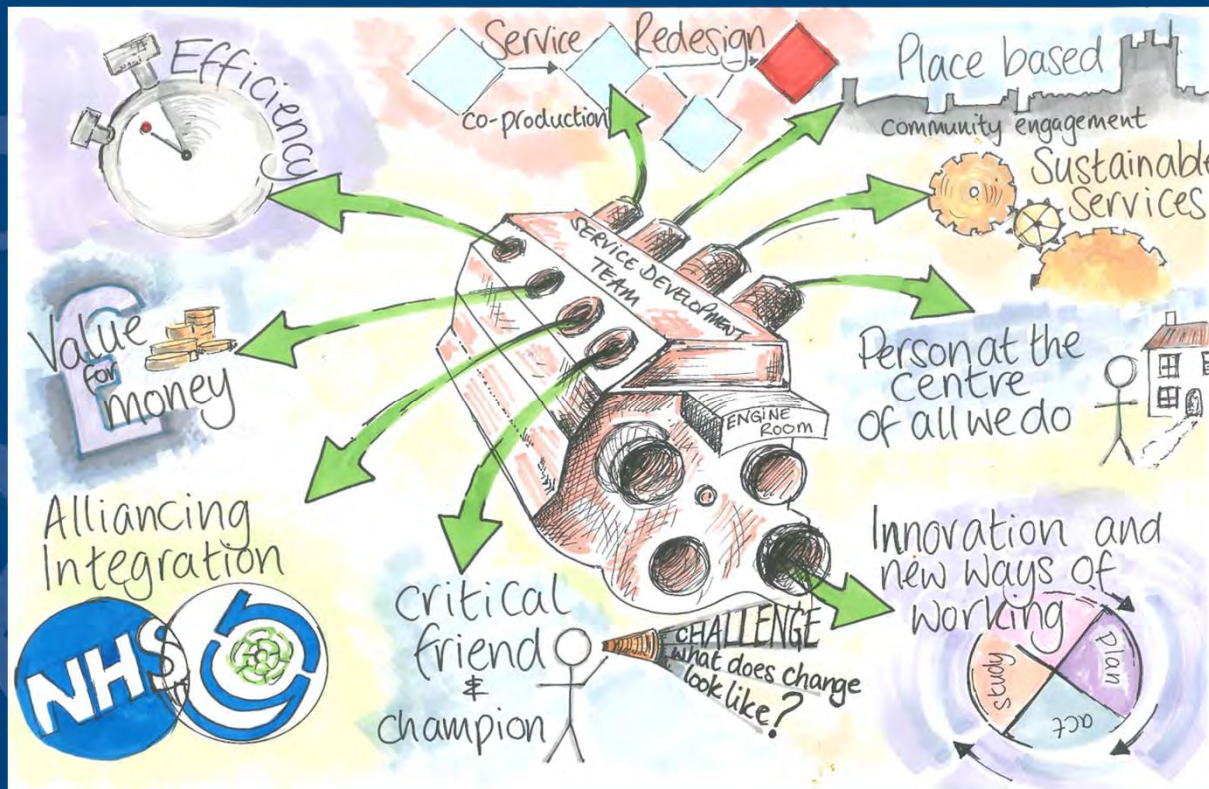
County Hall, Northallerton

May 2022

Background papers relied upon in the preparation of this report – None

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# North Yorkshire Adult Social Care Market Overview





## Social Care in North Yorkshire

**200+** care homes    **6** main hospitals    **28** extra care schemes    **500+** providers

**8,917** people receiving a long-term support service from Social Care in 2021 / 22\*  
\*People may receive more than one type of service over the course of a year

**65,000** family carers

**10,900** people with dementia

**700** Court of Protection people

**2,000+** directly employed staff

**3,325** residential packages

**5,579** community-based packages

**3,887** referrals to Living Well

**5,473** beds registered with CQC

**3,677** responses to safeguarding concerns

**827** direct payments

**6000** financial assessments and  
**£45m** raised in income maximisation



# Adult Social Care Market Context



Approved Provider Lists  
Direct Payments  
Capital and transformation programme  
Community Based Services – Block Contracts (Dementia, Carers, Advocacy, Mental Health Support, home from hospital, wellbeing)

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**Day Care**  
78 providers  
800 NYCC funded people



**Domiciliary Care**  
155 providers  
2800 NYCC funded people



**Care Homes**  
225 Residential/Nursing  
6325 CQC Registered  
Beds



**Extra Care**  
28 Schemes



# State of the Market - Headlines

- Very low nursing and residential home vacancy rates with limited capacity across North Yorkshire
- Challenges with sourcing home care particularly in Selby and Scarborough and in some cases where people require very bespoke/specialist support
- Non-regulated Day Service providers continue offer a blended model of support with some face-to face and some virtual services
- Workforce issues across health and care sector
- Sustainability of the care market remains a priority, issues relating to financial stability and workforce recruitment and retention

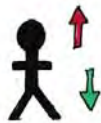
**BUT** – we do have well established working relationships with the care market, voluntary and community sector and health and are committed to working together as a local health and care system



**Where we are now:** The health and wellbeing of North Yorkshire



A male living in Scarborough district has a life expectancy of 78 years, which is 4 years less than a male living in Hambleton district.



Males and females in Scarborough district have the lowest life expectancy at birth.

Smoking—All districts in North Yorkshire are similar to the England average with the exception of Hambleton which is lower (8.4%) and Harrogate is higher (14.4%).



69% of adults living in Scarborough are classified as overweight or obese which is higher than the England average.



All districts of North Yorkshire have population densities far lower than the England average.

23.1% of the population of North Yorkshire are aged 65+. This is expected to increase to 29.8% by 2035.



The highest current physical disability rates per 10K are in Scarborough district. The 2035 prediction is that

the greatest need will be in Harrogate followed by Scarborough districts.



Harrogate and Scarborough districts have the highest predicted dementia rates for 65+ by 2035. Harrogate and Craven districts are above the England average for diagnosed rates.



Suicide rate in Scarborough is significantly higher than the England average at 16 people per 100K.



Richmondshire and Ryedale districts have the highest proportion of 'good' or 'outstanding' nursing homes.

Craven district has the highest percentage of residential care homes which are 'good' or 'outstanding' compared to Richmondshire who only has 4 providers.

2 YEARS

Average length of stay in a care home in North Yorkshire is 2 years with Richmondshire having the lowest length of stay at 1.9 years.



Selby district has the highest number of unsourced home care packages.

Selby, Harrogate, Scarborough and Ryedale districts are above 90% occupancy despite the Covid pandemic. Nursing occupancy rates are at 98% demonstrating that demand may outstrip supply.



28.6% of deaths occurred in care homes. The highest proportion was in Harrogate district (34.4%) while Hambleton district had the lowest proportion (24.1%). The proportion of deaths at home was highest in Hambleton (34.7%) and the lowest was in Harrogate district (23.7%).



Harrogate and Scarborough districts are the highest populated in the county. It is estimated they will have the highest levels personal care by 2035 for those aged 18-64.

# Current commissioning Arrangements

## Approved Provider Lists

- Currently allow providers to set own rates
- No assurance of market coverage
- Spot purchase only rules
- Limited information provided to the social care market on the longer term vision
- Brokerage service for CHC and discharge to assess via APLs

## Framework Agreements

- Running in Selby and Harrogate

## Block Contract for rural homecare

- Reeth, for delivery of home care

## Micro enterprises

- Ryedale, to recruit micro providers for the delivery of home care

## Care Rooms

- Selby and York, to offer an alternative hospital step down from hospital solution

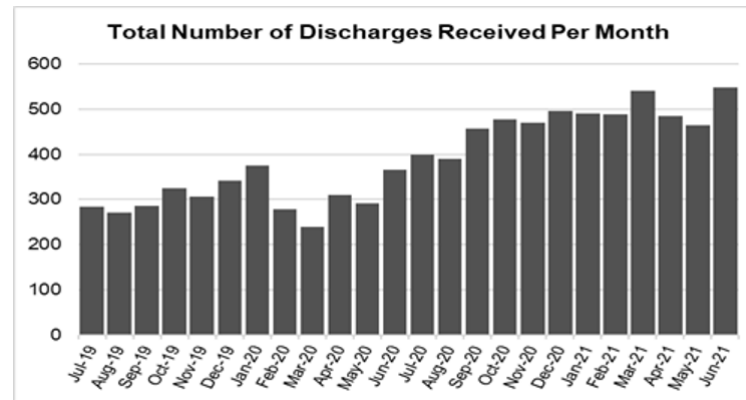
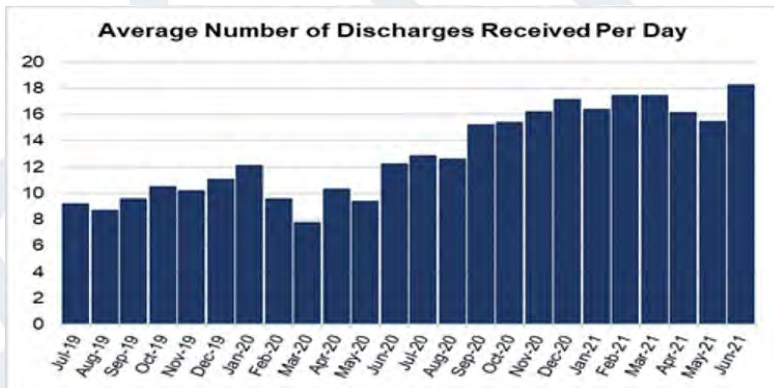
# Covid-19 – Support to the Care Market

- At the start of the Covid-19 pandemic it was recognised that there needed to be rapid financial support for the care market
- Cohesive approach to financial support included:
  - Agreed annual uplift payments;
  - An additional 5% compensatory increase;
  - Payment on Planned activity & Payments in advance
  - Block purchasing provision where appropriate
  - Infection Prevention Control Fund (Part1/2)
  - National Personal Protective Equipment Portal
  - Supplier relief and Hardship processes
  - Sustainability surveys and webinars to understand the pressures as they changed throughout the pandemic
  - Market Development Board commissioned some work to identify at risk providers via mortality and vacancy rates



# Discharge to Assess

- Since March 2020, discharge numbers per month have increased from 308 by 240, to 548
- During 2019/20 the average number of discharges per day was 10, and in 2018/19, this was 9. Since the start of the pandemic this figure had increased to 18 per day in June 21

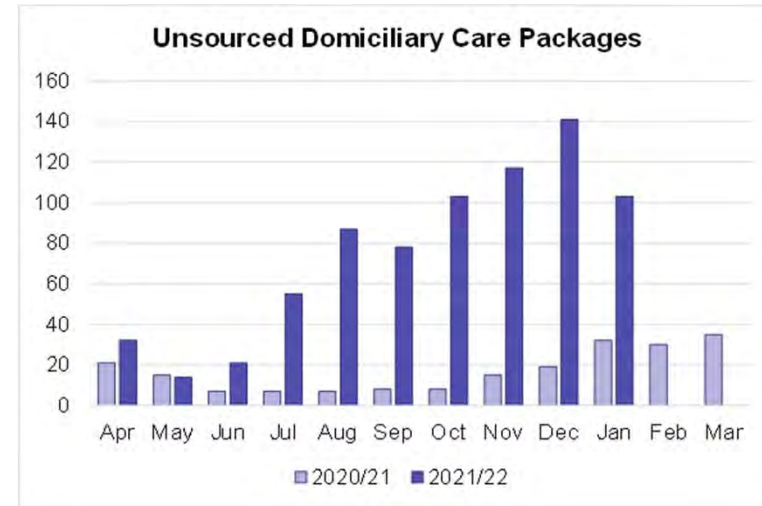


# Unsourced Packages of Care

Overall numbers have remained above 100 in each of the last four months, with significant volatility in localities in response to local pressures.

Unsourced packages are monitored weekly with brokerage. This has identified that where we might report 100+ unsourced packages, people are receiving support from alternative short term provision.

The shortage of capacity in the market requires additional, innovative work with providers on altering runs or changing visit times to providers to make it easier for providers to pick up more people needing support.



# Care Costs

## Residential/Nursing Care

4.65% increase since March 22  
 Largest increase Hambleton & Richmondshire  
 HARA remains highest cost locality

Locality	Change Since March 2022
HARA	+1.89%
Vale of York	+4.63%
Scarborough & Whitby	+3.38%
Craven	+5.14%
Hambleton & Richmondshire	+7.25%
<b>Total</b>	<b>+4.65%</b>

## Home Care

HARA remains highest cost locality  
 Most localities are above 2021/22 UKHCA rate of £21.43  
 UKHCA rate for 2022/23 rate represents 8.2% increase

Homecare 2021/22 average rates paid						
	URBAN		RURAL		Super Rural	
	Generic	Complex	Generic	Complex	Generic	Complex
<b>Countywide</b>	£21.24	£22.77	£22.74	£23.93	£25.60	£25.58



# Quality

## Quality & Market Support Interventions

Hambleton / Richmondshire	Craven	Harrogate	Vale of York	Scarborough/ Whitby	Out of County
36	15	52	47	47	9

A number of provider failure issues are being managed by teams to reduce impact where possible

## Suspension from Approved Provider List

Phased Suspensions	Full Suspensions	Voluntary Suspensions
5	17	3

## Covid 19 (16.05)

Individual cases: **48 (-22)** cases identified in last 7 days

Multiple cases: **15** care homes/extra cares and **3** dom care/non-reg services in last 14 days.



# Financial Sustainability

## Care Market Support

- Sustainability Policy – 24 applications since Sept 21
- Workforce Recruitment and Retention Fund
- Workforce Integrated Care System Funding
- Annual inflation settlement
- Care Setting Outbreak Management Support

## Key workstreams

- Fair cost of care exercise for home care, working in partnership with ICG, deadline 31 May for regional verification
- ACOC for care homes – liaison with DHSC ongoing
- Development of Market Sustainability Plan
- Upcoming procurement of the Approved Provider Lists
- Wider transformation plan incorporating national health and care reform



# Market Sustainability

## **Establishment of Strategic Market Development Board, priorities include:**

- Addressing wide range of challenges in the social care market and provide a strategic focus on the implementation of solutions
- Multi-agency membership with opportunity for collaboration and integration with partners and to increase transparency across the sector
- Forum to proactively manage care market supply and demand and to support sufficient market capacity at a strategic level
- Explore innovative commissioning models and develop preventable approaches to the delivery of personalised care

## **Examples of key projects:**

- Review of provider sustainability
- Actual Cost of Care Exercise
- Transformation plans for Residential and Nursing care, Home care, Day Services and Supported Living Services
- Reviewing the care market and developing locality plans and future commissioning intentions
- Targeted support to care providers highlighted within the sustainability review



# Transformation Vision

In developing our vision described in HAS 2025 we have considered what outstanding adult social care and public health services might look like which is underpinned by both policy and the experience of the people who work for us, with us and those we provide and commission our services on behalf. We have strived to ensure:

- A focus people and their outcomes
- The person remaining as independent as possible and living in their own home for as long as possible
- Focus on prevention and alternative provision for complex needs and switching away from residential homes and nursing beds
- Frontline colleagues excelling at strengths-based practice, being empowered to be creative
- Organisation interfaces working seamlessly together and not being visible to people we support



OFFICIAL

# Service Development Transformation Programme

Market Intelligence	Market Shaping					Local Community Integrated Support
<ul style="list-style-type: none"> <li>• Locality plans, district profiles, Market Statement</li> <li>• Provider Relationship Management</li> <li>• Links to local communities and Voluntary Sector</li> <li>• Market and provider sustainability</li> <li>• Public health intelligence</li> <li>• Best Practice / benchmarking</li> </ul>	Contractual mechanism for Approved Provider Lists	Residential & Nursing Care	Community Based Support	Supported Living	Home Based Support 	<ul style="list-style-type: none"> <li>• Community Mental Health services</li> <li>• Carer Pathway to support information and advice, sitting services and carer respite</li> <li>• Dementia Support ensuring early identification and diagnosis</li> <li>• Prevention &amp; Wellbeing of local communities</li> <li>• Advocacy</li> <li>• Transitions</li> <li>• Safe Hospital Discharge</li> <li>• Intermediate Care</li> </ul>
	<ul style="list-style-type: none"> <li>• Standard contract template</li> <li>• Revised terms and conditions</li> <li>• Embed quality pathway</li> <li>• Standards and Outcomes Framework</li> <li>• Procurement</li> </ul>	<ul style="list-style-type: none"> <li>• Strategy development</li> <li>• Test new models of care</li> <li>• Discharge to Assess and intermediate care</li> <li>• Care Rooms</li> <li>• NYCC in house services</li> </ul>	<ul style="list-style-type: none"> <li>• Develop Day Care support for people with complex needs</li> <li>• Stronger pathways to supported Employment</li> <li>• Routes to enable better access to community assets</li> </ul>	<ul style="list-style-type: none"> <li>• Outcomes based specification</li> <li>• New provider list</li> <li>• Needs analysis to future-proof</li> <li>• Transforming Care Partnership link</li> <li>• Housing solutions</li> </ul>	<ul style="list-style-type: none"> <li>• Geographical Zoning</li> <li>• Micro-enterprises</li> <li>• Framework agreements</li> <li>• Reeth Pilot</li> <li>• Rapid Response</li> <li>• Outcomes based specification</li> </ul>	



# Care Market Support

- Workforce Recruitment and retention fund
- Workforce Integrated Care System Funding
- Annual inflation settlement
- Active & regular engagement with current providers and potential new providers around expansion into difficult to source parts of the County
- Working with homecare providers and stronger communities to identify opportunities to sub-contract non-regulated care
- Care Setting Outbreak Management Support
- Ongoing commissioning of block purchased discharge beds in residential and nursing care settings
- Upcoming procurement of the Approved Provider Lists
- Fair cost of care exercise for home care
- Wider transformation plan incorporating national health and care reform



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**North Yorkshire**  
County Council

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# ADULT SOCIAL CARE CHARGING REFORMS

## C&I Scrutiny

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Agenda Item 9

# Adult Social Care Charging Reforms

“Protecting individuals and families against unpredictable and potentially catastrophic care costs”

- From October 2023, no eligible person starting adult social care will have to pay more than **£86,000** for personal care over their lifetime.

Only money spent on **personal care needs** will count towards the cap – ‘Daily Living Costs’ (DLCs) and Top-ups are not included

- **The means test will be more generous** – upper capital threshold will increase from £23,250 - £100,000 the lower threshold moves from £14,250 - £20,000
- The reforms mean **more people will qualify** for local authority assistance than previously which will have significant implications across all of our services
- NYCC has agreed to become one of five national **trailblazer** sites which will implement the reforms in **January 2023**.

# The Cap

- Only what people pay themselves (not LA contribution)
- For self-funders who arrange their own care, progress towards the cap will be based on what the cost would be to the local authority if it were to meet their eligible care needs – but LA needs to be able to check that appropriate care is being provided
- Does not include Daily Living Costs
- Does not include 3<sup>rd</sup> Party Top-ups

# Top-ups

- A person has a right to express a preference for particular accommodation of that type. The local authority can then charge for the additional cost over and above what the local authority would usually pay. This includes a preference for more expensive accommodation of the same type.
- Government intends to change the regulations to enable everyone receiving local authority financial support, which will include those who have reached the cap, to fund top-ups for their own care through their own means, where they can afford it.
- Where a local authority determines that a person is unable to pay a top up, it will be allowed to refuse the request. It is to the discretion of the local authority to determine when a person is unable and able to pay.



~~October~~ January 2023

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# Becoming a Trailblazer

- Charging reform is needed (even if we have concerns about the details)
- If it works well, then early implementation will bring benefits to the population of NY earlier than elsewhere
- We have high numbers of providers, high number of self funders and have remote rural and coastal communities – very different from many of the other Trailblazers
- Labour market competitiveness: it is unlike to be any easier to recruit for extra capacity in Summer/Autumn 2023 when the reforms are implemented across England
- We have to do it anyway so why not do so with support and be able to influence
- We have formal review points with DHSC in June, Aug/Sept and Nov 22

# Opportunities

- Deliver early benefits for North Yorkshire residents
- If we can, use this and the APL procurement, to re-design our relationship with the care sector and help to provide stability to providers
- Drive self-service and a new approach to social care, with specialist staff focused on higher need people
- Timing – early opportunity to influence and to secure resources/test things out

# Challenges

- It could break the bank! Especially section 18(3)
- Some people in some housing markets, even in NY, may still have to sell their homes
- Political sensitivities
- Systems, data and IT – trying to sort some tricky issues in 3-9 months!
- Workforce supply
- Timing – combined with LGR and CQC Assurance Framework

# National Trailblazer work streams and issues

## Work streams

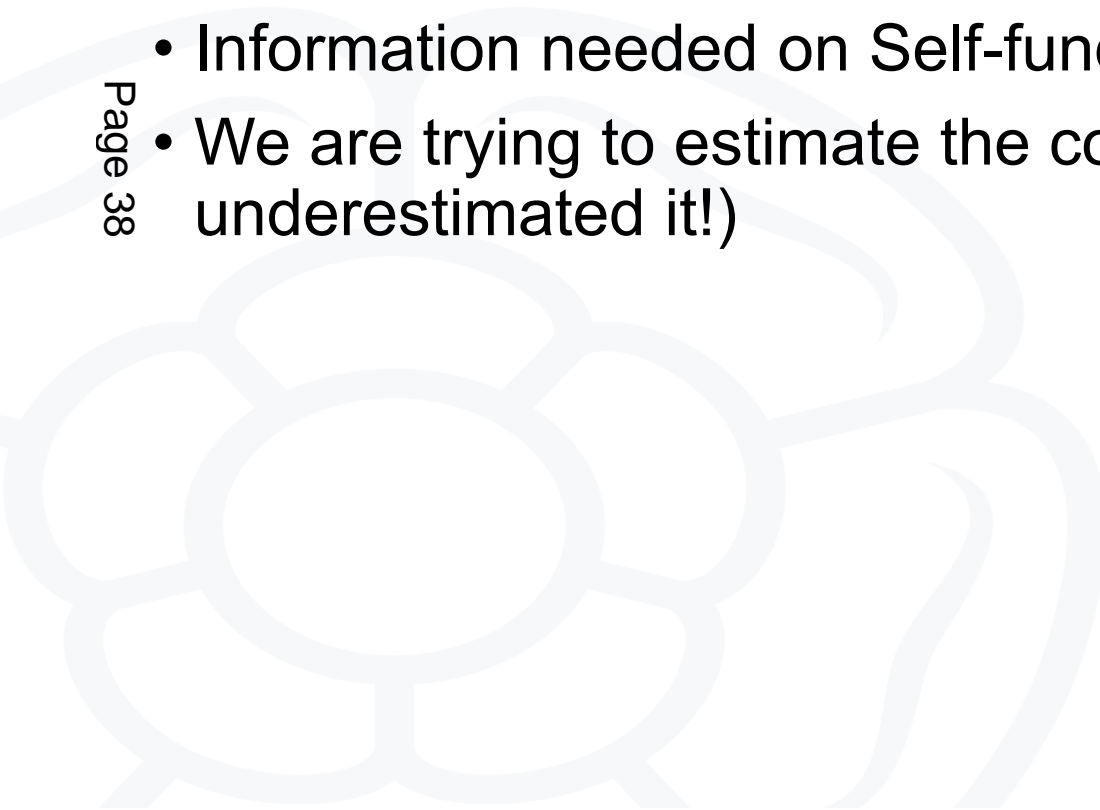
- Operating Model
- Fair Cost of Care
- Workforce
- IT/data

## Issues

- Operational Guidance
- Section 18(3)
- Provider readiness
- Communications
- Interface with the NHS

# Preparation

- Raising Awareness
- Fair Cost of Care exercise Approved Provider List procurement
- Information needed on Self-funders
- We are trying to estimate the costs of this (we think DHSC has underestimated it!)



# Timeline

- ✓ Late 2021/Early 2022 – 2 Government’s Adult Social Care White Papers published including details for charging reform
- ✓ March 22 – government announced trailblazer sites - [gov.uk](https://www.gov.uk) recognition that there is still considerable detail and risk to be worked through)
- 19 April 22 - NYCC exec decision (submission by 12<sup>th</sup>) and Management board discussion.
- 6<sup>th</sup> May – submit our response to the ‘Digital readiness survey’
- 9 May Internal workshop - setting out the programme plan & key workstream areas
- End of May - post election review point - *DHSC has also agreed an additional review point for North Yorkshire in May 2022, following Executive and the May council elections*
- *June 2022, the Department will finalise operational guidance for charging reform; including taking account of any transitional arrangements for commencement of s.18(3). At this point, trailblazers are invited to adopt the approach for commencing s.18(3) that the Department will confirm nationally. By this point, the Recipient will be able to discuss what the s.18(3) approach will mean for their authority and make a decision about how they continue participating in the Trailblazer initiative”*
- June 22 – Technical spec available for all care record management system providers.
- August 22 – formal review prior to early assessments
- September 22 – early assessments (additional workforce needs modelling)
- November 22 – formal review prior to legislation
- January 23 – trailblazers early implementation
- October 23 – national go live

# Summary & Next Steps

- Established a corporate programme management approach in May 2022 – balancing local and national inputs/requirements
- Model the workforce impact/numbers & map customer journeys across North Yorkshire to support the early implementation of the reforms by January 2023
- Understand our digital readiness in comparison to other LA's
- Co-production of further operational guidance with DHSC to assist the national roll out in October 2023
- Strategically work with other 4 trailblazers and key suppliers to develop supporting IT systems
- Work with key local stakeholders to understand the impact across the system of the charging reforms
- Implement communication plans in partnership with DHSC to support and inform individuals and their families/carers in North Yorkshire



**Care and Independence Overview and Scrutiny Committee  
Work Programme 2022/23**

<b>Scheduled Committee Meetings</b>	22 September 2022 at 10am	1 December 2022 at 10am	2 March 2023 10am
<b>Scheduled Mid Cycle Briefings</b> (Attended only by Group Spokespersons)	29 July 2022 at 10am	27 October 2022 at 10am	2 February 2022 at 10am

**Agenda Briefings - will be held at 9.30am on the day of the committee meeting**

<b>Meeting</b>	<b>Subject</b>	<b>Aims/Terms of Reference</b>	<b>Lead/Current position</b>
<b>Thursday 23 June 2022 at 10am</b>	Assessment of Experience of Covid-19	Public health perspective. Aerial view of covid impact and how the response is changing the way we work and how we work with partners	Louise Wallace
	Managing the Care Market (development Programme)	Current position (12 months since previous report) relating to Approved Provider List, Covid impact and measures. Ongoing support for Care Homes. Extended to broad based report for newly constituted committee	Dale Owens
	Charging Reforms	Covering an introduction to the implications of the Care Cap and the authority's role as a Trailblazer	Dale Owens
<b>Thursday 22 September 2022 at 10am</b>	Adult Social Care in North Yorkshire right now	Strategic overview eg unmet need, Home care providers and packages, picture on homecare, workforce applications	Richard Webb
	Reimagining Home Care	Overview for new members and update on the progress of transformation phasing.	Dale Owens and Rachel Bowes
	The Care Cap and other Financial Matters	Extended review of the impact of the lifetime cap on the amount anyone in England will need to spend on their personal care, alongside the means-test for local authority financial support. A wider introduction to the financial pressures upon Health and Adult Services Directorate	Anton Hodge

	Unpaid Carers – support for Carers	Overview item to help assess the support provided to adult carers of adults in North Yorkshire. Update on the Strategic plan for the transformation of carers offer across North Yorkshire and experience of the contract for the provision of the Adult Carer Service and Young Carers support and advice	Cath Ritchie To be discussed
	Provider Services Development	Carried over from a previous Scrutiny briefing (during lockdown) is Provider Services - Update and developments.	To be discussed with Rachel and Angie Austin
<b>Thursday 1 December 2022 at 10am</b>	All Age Autism Strategy	Follow up to briefing earlier this year – possible involvement of CYPS	Karen Siennecki and Natalie Smith
	Digital Lives	Technology enabled care, online care, financial assessment and brokerage. Tech Enabled Care – supporting and enhancing the experience of people and their independence in their own homes	Mike Rudd and Cath Ritchie/Neil Bartram.
	Safeguarding	Annual NY Safeguarding Adults Board Report	Chair of Board and Sheila Hall
	Financial and Budget Pressures	Account of local, regional and financial pressures on the Adult Social Care Budget ( <b>possibly not necessary in light Anton being at September meeting</b> )	Anton Hodge
	Local Account	A review of the published account	Louise Wallace
	DPH Annual Report	A review of the DPH published report	Louise Wallace
<b>Thursday 2 March 2023 at 10am</b>	Extra Care - next generation	Revisit of Extra Care 12 months on as requested by the Committee. Update on progress and statement on ambition to see Extra Care in all key towns by 2023.	To be determined
<b>Long list of items yet to be programmed</b>			
	Intermediate Care/Discharge to Assess (possibly covering Reablement)	Discharge arrangements. Possible Briefing on introduction of Pilot scheme for short-term care beds.	To be determined

	Supported Housing	Transforming Care and current supported housing service overview	To be determined
	Shared Lives Scheme	Approval to re-procure or in-source the Shared Lives Scheme is now planned for Executive in July. so timing of this may be brought forward	To be determined
	Respite/Short breaks current position	Progress on a transformational approach to short breaks	To be determined
	Development of the Integrated Care Systems and Partnerships that cover North Yorkshire	What does this mean for social care, what are the risks etc	Richard Webb
	Dementia Care Facility	Report on progress business case and development in light of Executive approval (to be determined) Potentially Broad based report for newly constituted committee	Dale Owens
	Day Services	Overview with some focus on how the pandemic has changed demand for these services and how that influences commissioning arrangements that we have in place to deliver Personalisation and choice and meet current service and business requirements.	Principle and scope of item yet to be discussed

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