

North Yorkshire County Council

Care and Independence Overview and Scrutiny Committee

Minutes of the virtual meeting held on 29 July 2021 at 1.30pm.

Present:-

County Councillor Karin Sedgwick in the Chair.

County Councillors: Eric Broadbent, John Ennis, Helen Grant, David Jeffels, Andrew Jenkinson, David Jeffels, Stanley Lumley, John Mann, Roberta Swiers and Robert Windass,.

In attendance:

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

Officers: Toya Bastow, Direct Payments Support Service Manager, Care and Support (HAS), Ray Busby (Principal Scrutiny Support Officer), Dale Owens (Assistant Director of Commissioning & Quality, Health and Adult Services), Cath Simms, Head of Targeted Prevention, Care and Support (HAS),

Apologies:

County Councillors Mike Chambers MBE, Caroline Goodrick and Cliff Trotter
Co-opted Members - Jill Quinn (Dementia Forward) and Mike Padgham (Independent Care Group)

Copies of all documents considered are in the Minute Book

246. Minutes

Resolved –

That the Minutes of the meeting held on 4 March 2021 having been printed and circulated, be taken as read and be confirmed and signed by the Chairman as a correct record.

247. Declarations of Interest

There were no declarations of interest to note.

248. 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.

249. Chairman's Remarks

The Chairman welcomed Cllrs Robert Windass and Roberta Swiers as newly appointed committee members, and recorded her thanks to Cllr Philip Broadbank for

his service on the committee and as one of its group spokespersons since the last county election.

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

She was grateful for members co-operation in the rescheduling the date of this meeting.

In her statement to council, she had reported the content of the well-received informal meeting members had had with user representative groups. An account of the meeting was included in the work programme item. It was hoped that something similar could be arranged next year.

250. Direct Payments and the Covid Pandemic

Considered

Presentation from Toya Bastow, Direct Payments Support Service Manager, Care and Support (HAS), explaining Direct Payments, including: how they were applied in practice, prevalence and the impact Covid 19 had had on the service and the people who requested and received a Direct Payment.

Cllr Lumley welcomed the heart-warming stories in the presentation but the drop in numbers applying for the service was disappointing - whether because people were not aware of the service and that it could help or those in need were reducing. Toya explained that a lot of work was ongoing on this, introducing peer support meetings, best practice sharing and enabling staff to promote direct payments as an option. The service was opening up more options around individuals being able to contract with single and micro providers (who work as a network) to overcome the misgivings many users had about contracting with large-scale providers. It was hoped that the positive reaction so far seen to this initiative would continue and build.

Toya commented that there was a perception that direct payments were difficult to manage. The directorate was doing what it can to address this by highlighting that they can be quite simple to arrange and can be an easy way to receive care. Councillors in their community leadership role can help with that messaging.

Cllr Lumley encouraged the use of community hubs to help increase awareness.

Cllr Helen Grant highlighted the difficulties in rural areas of attracting Personal Assistants (PA) and concerns that, especially in the current climate, the PA might be off sick for a prolonged period. Toya reassured members that the directorate was working with those individual, sole providers to ensure resilience and support was available, through the network referred to earlier, should a PA be unable to support.

Members were pleased that the service continued to offer the level of service and had adapted well to the challenges of the pandemic.

The Chair stated that the presentation followed on from the committee's consideration two years ago. Ray Busby advised that then the committee decided that whilst levels of take-up might be where we would them to be, there is convincing evidence that there is a supporting infrastructure within the directorate combined with a good understanding of the principles behind direct payments.

Resolved –

- a) That the report be noted.
- b) The committee reaffirmed its earlier position that whilst levels of take-up might be where we would them to be, there is convincing evidence that there is a supporting infrastructure within the directorate combined with a good understanding of the principles behind direct payments.

251. Living Well During Covid 19

Considered –

The presentation covered how the Living Well service had coped and adapted during the Covid 19 pandemic.

Cath Simms explained that referrals to the service showed a dip from March 2020 but that demand quickly began to increase and returned to pre Covid-19 levels by Spring 2021. Analysis shows Living Well support was more concentrated in areas of highest need during the pandemic – areas with higher levels of deprivation

The flexible nature of the service remained a bridge between community and voluntary services and the council's adult social care response. Cath highlighted:

- Issues presented were resolved where possible by phone/virtual communication with face-to-face support when required.
- information, advice and guidance was provided to teams and to individuals to enable them to access the most appropriate support from the community and Universal offer.; this helped prevent people's needs from escalating
- Supported individuals and families to find solutions to remain well at home following discharge from hospital.
- Support for Community Support Organisations with people with more complex needs who were 'only just managing' prior to COVID-19 or were managing with support that was not available due to COVID-19.

With their experience in creative problem solving and knowledge of local services, staff were able to find ways to support people to be as independent as possible even where services were disrupted.

The type of support offered had included

- Connect people with a wide range of support, both low level and more complex
- Housing support & accommodation issues, heating, referral to Warm and Well, tenancy issues, hoarding
- Digital support – enabling people to access and use technology for family contact or online support
- Finances e.g. opening a bank account, NYLAF or grant applications
- Emotional support, accessing community groups and bereavement support
- Accessing community resources, social opportunities, finding cleaners, shopping and collecting prescriptions.
- Support to carers
- Low-level welfare checks and information gathering.

In response to a question from Cllr Paraskos, Cath Simms highlighted creative ways the service was continuing face to face contact where that was needed. She acknowledged his remark that there were indeed a group of people who were still anxious about getting out and about more and who were isolated. The directorate was doing what it can, in conjunction with GP surgeries for example, to overcome this. The connections the service had with other organisations and partners was helping to prevent people falling through the net and encouraging referrals to the service.

Cllr Mann asked whether there was a correlation between demand going back to pre Covid levels and increased waiting lists for NHS services. Were individuals with restricted mobility who were experiencing delays in receiving treatment, presenting to Living Well for support. Cath Simms acknowledged that this was likely to be the case; the service was seeing referrals from health colleagues for people needing support potentially for those very reasons. No formal analysis of this had been carried out on this but there was, however, definitely a case for working closely with health colleagues on this.

Members were reminded that the last time the committee looked at the findings of an evaluation report into Living Well, members believed evidence shows the positive impact upon service users.

The chair restated that conclusion. She believed Living Well is a genuine success story.

Resolved –

That the report be noted.

252. Dementia Village: Overview and Update

Considered –

Presentation by Dale Owens giving an update and situation report of the progress of the Dementia Village.

Dale explained that the project team were at the stage of presenting a business case to managerial leadership, which ultimately would go before Executive for formal approval.

The Dementia Village concept is aimed at tackling two of the main drivers in terms of directorate support for people with dementia.

- Supporting people with dementia when and as their condition worsens and trying to prevent the need for secondary mental health support. One of the key indicators of success in this initiative will therefore be the numbers of people detained under the mental health act.
- An economic imperative – where we do have to provide support for people detained under the mental health act or who require a rapid escalation in their need for support, this frequently means expensive, bought in services have to be commissioned. The more planning we can undertake rather than having to react in this way, the more likely we will see better outcomes at an more

affordable level, thereby increasing the directorate's capacity to provide more support and access to care for more people.

Harrogate was identified as the area of the county experiencing the greatest numbers in the category but also in terms of cost - largely for demographic reasons. So, it made sense to pilot the dementia village approach here where it would have the most impact.

The model proposed includes some level of building based service, some bespoke housing and some day-time support provision with a "wrap around" outreach service.

The outline business case carried out sufficiently demonstrated that the proposal had merit and was worth pursuing. Different aspects of that model had been refined further – for example, what type of care model would work best to prevent detention under the mental health act; build costs; and land availability. All of this had been brought together to help complete the final, detailed business case detailing the benefits that would likely be seen and also the level of investment required to achieve savings over the longer term.

Sometime towards the end of summer/early autumn, it was expected that the Executive would be asked to decide the way forward. At this stage for reasons of commercial sensitivity, nothing further or more detailed could be aired with the committee. However, the intention was to share such information with the committee as soon as that was possible.

Resolved –

That the report be noted

253. Older Peoples Champion

Considered –

Presentation by Cllr Andy Paraskos giving an update and situation report.

Cllr Paraskos explained that the major part of the role is meeting older people through their representative groups, to extend their "voice", to listen to their views, concerns and experiences. As the report says, the pandemic has meant that most groups have not met - either digitally or face to face – so that engagement aspect has been curtailed.

He was pleased to be involved in the work done by stronger communities, which looks towards putting in place an effective approach to involving older people representatives.

The picture regarding older people's familiarity with digital communication is mixed across the county. Some people and their groups have yet to get to grips with digital communication, some have, but there is a sense that some may never manage it and are just marking time till they can go back to getting together face to face.

He praised stronger communicates for all their work keeping people connected and supported by befriending, by food deliveries and so on - loneliness and be isolation is

of course a significant concern, but the hope is as things open up, people can be encouraged to get out and about safely to foster their independence.

Some OPC work is focussed on how the council provides services, helping scrutiny approach the right things. Cllr Paraskos is keen to be involved with scrutiny of health and this committee, examining the physical effects of the pandemic on older people.

Cllr Paraskos referred to a paper from Age Concern that highlighted concern at so much negative media representation of older people during the pandemic. He does not expect this to manifest itself as a concern for NYCC, but will act if he senses it is happening.

Without the massive contribution by older people as volunteers a lot of activity supporting people in communities would simply not have happened.

He thanked Adele and Marie Ann from Stronger communities who are working so hard to not only build inclusive communities in which older people can thrive, but also to find better ways to engage with those older people

Resolved –

That the report be noted

254. Work Programme

Considered –

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

The Chair referred to the importance and success of Social Proscribing.

Resolved -

That the work programme be agreed.

The meeting finished at 3.15pm