
Meeting	Health, Housing and Adult Social Care Policy and Scrutiny Committee
Date	12 December 2017
Present	Councillors Doughty (Chair), Cullwick (Vice-Chair), Cannon, Warters and Steward (Substitute for Cllr Richardson)
Apologies	Councillors Mason, Pavlovic and Richardson

39. Declarations of Interest

In addition to Members' standing declarations, Cllr Doughty declared a personal interest as his partner was the chief executive officer of a mental health charity who had done some work on the STP work streams.

40. Minutes

A request was made to include in the minutes of the meeting held on 15 November 2017 the question asked regarding York Teaching Hospital NHS Foundation Trust's involvement in the development of the Council's Local Plan regarding levels of funding compared to population changes in the future.

Resolved: To approve and sign the minutes of the meeting of the Health, Housing and Adult Social Care Policy and Scrutiny Committee held on 15 November 2017 as a correct record with the above amendment.

41. Public Participation

It was reported that there had been one registration to speak under the council's scheme of public participation. It was agreed that Cllr Craghill would speak under the relevant agenda item (minute 46).

42. 2nd Quarter Finance and Performance Monitoring Report

Members considered a report on the latest financial and performance position for 2017/18 for services falling under the responsibility of the Corporate Director of Health, Housing and Adult Social Care. A correction was made to Table One of the report. The heading "2016 Outturn" should instead read "Quarter One". Richard Hartle, Finance Manager for Adults, Children and Education, and Terry Rudden, Strategic Support Manager for

Adults and Public Health, were in attendance to take questions. During discussion of the report, the following points were raised:

- Efforts were being made to increase the take-up of direct personal payments for health and social care by making the process more accessible for users. It was reported however that this was not the best option for all service users for a variety of reasons. An update briefing report would be prepared and shared with committee members.
- The under-spend on Small Day Services had not prevented service users from having their needs met and work was ongoing with the voluntary and community sector to support a more flexible and community-focused style of service delivery.
- Government guidance on the sale of high value property was forthcoming but had not yet been released.
- A dispute regarding the value of the Section 106 agreement outlined in paragraph 16 of the report was historic and ongoing.

Sharon Stoltz, Director of Public Health, explained that work was ongoing with external service providers, in-house services and through the contract-management process to consider how local data could complement the performance indicators used nationally. She explained the local data could not be used to benchmark the council against other authorities but that it could support the internal scrutiny process through provision of more up-to-date information on service delivery outcomes.

Resolved: To receive the report for information

Reason: To update the committee on the latest financial and performance position for 2017/18

43. Health and Wellbeing Board Six-monthly Update Report

Members received an update on work of the Health and Wellbeing Board by Cllr Runciman, Chair of the board. The following points were highlighted:

- The Board's partnerships remained strong and an important role of the Chair of the Board was to continue to strengthen and maintain these in order to enable the board to fulfil its remit.
- A reduction in visits to GPs was detailed which was attributed to increased social prescribing which supported individuals to manage some health issues themselves through community-based provision. An evaluation of this had been conducted by York St John University and this would be circulated to committee members. The focus of social prescription was to improve health outcomes and to use resources more effectively rather than to make cash savings.

- A Whole System Review had been conducted with results to be available soon and decisions would need to be made around spending priorities and where investments were made. Integrated working between the CCG, hospital and council remained important in a period of financial challenges.
- It was explained that formal meetings of the Health and Wellbeing Board were held in public. Informal discussion sessions were sometimes held privately but these did not include policy-setting activity.
- Young people's health and support services had moved to Sycamore House. This had been successful and a report would be provided to the committee on this work.
- A planning application for a new mental health hospital would come to a future meeting of the committee for their consideration.

Resolved: To note the contents of this report.

Reason: To keep members of Health, Housing and Adult Social Care Policy and Scrutiny Committee up to date with the work of the Health and Wellbeing Board.

44. Update on the Progress of Humber, Coast and Vale STP

Members considered an update on the Humber, Coast and Vale Sustainability and Transformation Partnership (STP) including local place-based work in York. Linsay Cunningham, Strategic Lead for STP Communications and Engagement Humber Coast and Vale, Phil Mettam, Accountable Officer for the Vale of York Clinical Commissioning Group and Mike Proctor, Deputy Chief Executive of York Teaching Hospital NHS Foundation Trust, were in attendance to present the report and to respond to Members' queries. In their presentation, officers highlighted the following points:

- There were challenges in the varied geography of the area covered by the STP model but work was ongoing to identify the positive impact the STP could have on health provision in York. **Cost of care and patient outcomes were the two key areas which were recognised as important throughout the area**
- **The cost of care for frail and elderly residents was leading to considerable challenges to the health and care sector and continued joined up working with partner agencies was needed to meet the demand effectively.**

During discussion, and in response to questions asked by Members, the following issues were raised:

- **Members felt that the Humber Coast and Vale STP area did not reflect the way in which residents used services, with Leeds cited as**

a more usual location for York residents. There was also recognition that a move towards more localised governance of health services would support York to address the needs of local residents.

- To date the STP had demonstrated limited direct impact on service change in York but it was hoped the development of one plan for York would provide a vision for what should change within health and social care provision. This included a shift towards managing the non-acute health needs of elderly patients within the community as extended time in hospital was damaging for patients and resource-intensive for services. Work was required to balance this transition effectively.
- ~~The provision and cost of social care was under discussion across the region, including the potential added pressures of the winter period.~~ The Home First model and community based work were given as examples of models of supporting issues such as mental health, longer life expectancy, and higher levels of complex learning difficulties. ~~Some members felt that greater flexibility in the budgets for health and social care may benefit the joint work between the service areas. The challenge of balancing health needs with social care needs were discussed in regards to both service delivery and allocation of service budgets.~~
- A distinction was made between stakeholders and partners with regards to the engagement described **in the report**. It was explained that local authorities were usually regarded as partners in this work and there was regular engagement by the STP in Local Authority scrutiny committees and Health and Wellbeing Boards. It was explained that while meetings often took place outside the Vale of York this was for logistical reasons and did not reflect any priority for particular parts of the STP area.

Resolved: To note the content of the report and update.

Reason: To keep members informed of the ongoing efforts to improve local health and care services through the work of the Humber Coast and Vale STP.

45. Provision for Homeless People Over the Winter Period

Cllr Craghill addressed the committee under the Council's scheme of public participation. She thanked the committee for discussing her motion to Council and expressed a wish to see more comprehensive data on how many rough sleepers had been turned away from services and the capacity of current hostel and emergency accommodation. She also asked that further clarity was provided on the provision of longer term social housing and on the reasons for homelessness and rough sleeping.

Members considered the report on the measures being taken by the Council to provide support for people who are homeless. Tom Brittain, Assistant Director for Housing and Community Safety, and Becky Ward, Service Manager for Homelessness, were in attendance to present the report and respond to Members' questions. It was reported that the figures provided in paragraphs 21 and 26 of the report were incorrect and would be updated. During the discussion, the following points were made:

- The Housing First model used by the council offered a range of support with housing, employment and emotional challenges and could provide intensive multi-agency support for individuals who met certain criteria. Funding for Making Every Adult Matter (MEAM) had now been confirmed.
- A small number of homeless people remained unwilling to engage with services. Reasons for non-engagement were unique for each individual but could include an unwillingness to be part of the system (for example applying for social welfare payments), not wishing to live by the rules that governed hostels, or the belief that begging was more lucrative than employment. A small number are excluded from accommodation, for example after displaying violent behaviour or for drug use.
- The Council's No Second Night Out policy covered provision of emergency accommodation for those at immediate risk of rough sleeping. This could comprise beds made up on hostel floors and was not a sustainable option in the long term not least because such spaces were not paid for but still required staff support and other associated costs. Rough sleepers without a local connection could be supplied with the means to return to the appropriate local authority to access support.
- Work was ongoing to look at Tier One and Move-On accommodation to help people out of hostels and into independent living. It was important to balance the needs of rough sleepers with others requiring social housing within the city.
- Alternatives to hostel accommodation, including more "old fashioned" style night shelters were discussed but such options raised safety concerns related to ungoverned open buildings. It was also reported that this would not provide a sustainable way of reducing rough sleeping and homelessness in the longer-term.
- More work was required to increase public understanding of the support available to rough sleepers and on alternatives to offering money to those begging by making donations to charities instead.

Resolved: To note the content of this report and to request additional information be included on work to engage with members of the public most likely to give to beggars.

Reason: So Members are satisfied that issues around homeless people are being addressed.

46. Implementation of Recommendations from Public Health Grant Spending Scrutiny Review

Members considered the first update of the implementation of the recommendations from the Public Health Grant Spending Scrutiny Review completed in March 2017. The health strategy had been delayed over the summer due to staff sickness but had since been progressed.

It was explained that programmes funded through internal grants were not subject to assessment against KPIs as in the case of externally-funded programmes. This meant there were fewer mechanisms for collecting robust information on tangible project outcomes and the impact of funding was more likely to be assessed through more informal means. Members agreed that it would be useful for further information to be provided under the report headings to give a narrative of how the £50k health and wellbeing grant was allocated. It was explained that following the planned removal of the fund's ring-fence in 2018, the way in which the fund was allocated would be reconsidered and options for a more structured assessment approach may be more usefully explored at this later stage.

Resolved: To note the content of the report and its annex and to defer signing off the recommendations in the Public Health Grant Spending Scrutiny Review until further information had been received as detailed above.

Reason: To raise awareness of those recommendations which are still to be fully implemented.

47. Work Plan 2017/18

Resolved: To note the Committee's work plan for the municipal year.

Reason: To keep the Committee's work plan updated

Cllr Doughty, Chair

[The meeting started at 5.30 pm and finished at 8.25 pm].