

Meeting	Health and Adult Social Care Policy and Scrutiny Committee
Date	27 July 2022
Present	Councillors Doughty (Chair), Hook (Vice-Chair), S Barnes, Heaton, Wells and Pearson (Substitute for Cllr Cullwick)
Apologies	Councillor Cullwick
In Attendance	Councillor Runciman (Executive Member for Adult Social Care and Public Health)
Officers Present	Jamaila Hussain, Corporate Director of Adult Services and Integration Sharon Stoltz, Director of Public Health Steve Tait, Finance Manager: Adult Social Care

5. Declarations of Interest (5.31 pm)

Members were asked to declare, at this point in the meeting, any disclosable pecuniary interests or other registerable interests they might have in respect of business on the agenda, if they had not already done so in advance on the Register of Interests.

None were declared.

6. Minutes (5.31 pm)

The Chair requested that his comment at the last meeting with reference to the Dementia Strategy and the importance of reflection against the previous strategy, be noted

Resolved: That the minutes of the previous meeting held on 05 July 2022 be approved as a correct record and be signed by the Chair.

7. Public Participation (5.32 pm)

It was reported that there had been no registrations to speak at the meeting under the Council's Public Participation Scheme.

8. York Place Health and Care Partnership Board Update (5.33 pm)

The Corporate Director of Adult Services and Integration introduced the York Place Health and Care Partnership Board Update. She explained that the agreed key outcome of the Board was to make York the healthiest city in Northern England. She noted that the work of the York Board (YB) was closely aligned with the strategy of the Health and Wellbeing Board (HWBB). York was perceived as a healthy city but good health and access to medical services was not evenly distributed. The aim of the York Board was to reduce inequalities and improve service delivery.

[17:40 Cllr Pearson joined the meeting.]

The officer highlighted the work of the previous Health and Care Alliance, particularly in the area of learning disabilities and complex care.

It was emphasised that the new Board was introduced as a result of changes in the NHS. The implementation of Integrated Care Boards (ICB), had enabled Local Authorities to integrate its functions. The York Board was chaired by the Chief Operating Officer.

The ten year Health and Wellbeing Strategy was under development by the HWBB and was interlinked with the five year Integrated Care System (ICS) strategy. The York Place Board was working towards setting priorities which would be aligned with those of the HWBB. Suggested priorities including hospital admissions, delayed discharges, mental health delivery and Children's Services had been considered.

The next steps were to ensure the York Place Board membership was correct, work streams were in position and that learning from the previous Health Alliance had taken place.

The Corporate Director for Adult Services and Integration and the Director for Public Health responded to a number of questions regarding alcohol consumption, GP representation, governance arrangements for the Place Board, mental health provider services and the health and care workforce. It was confirmed that:

- York residents had a higher than ideal rate of alcohol consumption, predominantly drinking at home or in social situations. A social media campaign was due to start, encouraging people to be more alcohol aware. GP Practices and Health Trainers were focussed on alcohol support services to prevent more serious problems with alcohol from developing. GPs were well represented at strategic level and

clinically but had time constraints which would affect regular attendance at partnership meetings.

- The requirements for mental health services in York were different to North Yorkshire therefore arrangements would be redesigned to suit requirements in York.
- All 6 regional boards have a Local Authority Chair. However, York does not have an NHS Place Director which was an ongoing concern.
- Officers had looked at new ways of working and training, including working with schools and colleges, to attract and retain the health and care workforce.

During the discussion, Cllr Runciman, Executive Member for Adult Social Care and Public Health, mentioned the investment in assistive technology to support people with their independence.

The Chair raised the possibility of a cross scrutiny meeting with representatives from all six Place Boards and noted this could prove useful in securing influence for York. He asked that Democratic Services follow this up.

It was agreed that

- i. The content of the report and the progress made be noted.
- ii. The work of the previous York Alliance be noted.
- iii. The possibility of a cross scrutiny meeting with representatives from each Place Board be investigated.

Reason: To keep the Committee updated.

9. 2021-22 Finance And Performance Outturn Report - Health And Adult Social Care (6.20 pm)

The Finance Manager for Adult Social Care and Public Health presented the 2021-22 Finance and Performance Outturn Report.

He reported that there had been a swing of £1.8m from Q3, which had reduced the overspend within the service. He explained that hard work and one off funding were responsible for the reduction and that the one off funding had probably masked underlying issues that would need to be addressed in the current financial year.

Savings from Public Health (PH) salaries, due to staff being redeployed and funded for Covid related work, had led to the transfer of reserves of £483,000. The plan for spending the sum had been agreed by Executive. Vacancies in the Healthy Child Service had also contributed to the savings.

In response to questions from Members, it was confirmed that:

- The Healthy Child Service had found it difficult to recruit Health Visitors and School Nurses due to the acute shortage of trained nurses with a PH nursing degree. There was also a growing pay differential between the Council and NHS salaries. Creative solutions to the recruitment problem included providing placements for student nurses, funding and training School Nurses and Health Visitors and offering flexible work contracts.
- There was a 14% vacancy rate across Health Visiting which had placed additional pressures on existing staff. The posts were funded through ring fenced PH monies, any financial incentives offered to staff needed to be weighed against the impact on PH services.
- Budgets were set against the figures in February / March and were assumed to remain steady throughout the year. Inflation increases had been included and for 2021/22 were set at 3%. Budgets for Learning Disabilities and Mental Health were difficult to set due to the complexities of the care.
- An increase in the number of safeguarding reports could be viewed as a positive. Levels of deterioration across the KPI's were considered to be low and it was important to ensure early intervention services were available in addition to information and advice with the aim to recover the deterioration quickly.
- Employers in York support employees with severe mental illness in paid employment, the recent dip in employees mental health may be due to Covid.
- NHS Health Checks was a statutory service aimed at residents within GP Practice boundaries, operationally it had been found that the most effective pathway to deliver the service was through GP practices.
- There had been an increase in the number of customers for P&SI Supported Living schemes, a new scheme at Wilberforce Trust was expected to take some of the customers who used the supported living schemes. The spend was also considered to be too high in comparison with other local authorities. It was a live issue and would be addressed this financial year.
- With reference to staff sickness levels, fewer members of staff were absent due to work related stress, reasons were variable but some absence was due to scheduled operations. Covid still impacted on the workforce although staff were able to return to work more quickly.

During the discussion, the Director of Public Health welcomed the opportunity to discuss further the implications of the staff shortages in the Healthy Child Service and the methods that could be used to improve the situation.

Officers agreed to seek clarification from the Business Intelligence Unit regarding the KPI – the percentage of adults in contact with secondary mental health services in paid employment.

They also agreed to seek clarification regarding the 2021-22 Survey of Adult Carers in England, paragraph 35 of the report, to establish the breakdown of responses.

Resolved:

- i. The report be noted.
- ii. The Healthy Child Service to be added to the Committee's Work Plan.
- iii. A clearer description of the KPI 'percentage of adults in contact with secondary mental health services in paid employment' to be included in future reports.
- iv. A breakdown of the responses regarding the satisfaction levels of Adult Carers in York be circulated to Members.

Reason: To keep the Committee updated on the financial and performance position for 2021/22.

10. Work Plan (6.50 pm)

Members considered the 2022/23 draft work plan for the Committee.

Officers advised that the Autism Strategy would be ready as a draft document for the meeting, 27 September 2022.

Members agreed that a Healthy Child item should be added to the agenda of the above joint committee meeting, subject to the approval of the Chair for Children, Education and Communities Policy and Scrutiny Committee (CEC).

Resolved:

- i. That the work plan be noted.
- ii. That a Healthy Child item be added to the agenda, subject to the approval of the CEC Chair.

Reason: To keep the work plan updated.

Cllr P Doughty, Chair

[The meeting started at 5.31 pm and finished at 6.59 pm].