

Meeting	Health and Adult Social Care Policy and Scrutiny Committee
Date	28 September 2022
Present	Councillors Doughty (Chair), Hook (Vice-Chair), Heaton, Vassie, Cullwick, Webb (Substitute for Cllr Barnes) and Wells
In Attendance	Cllr Runciman, Executive Member for Adult Social Care and Public Health Sharon Stoltz, Director of Public Health Joe Micheli , Head of Communities Jennie Cox, Senior Local Area Coordinator Alison Semmence, CEO, York CVS Christine Marmion, Deputy CEO, York CVS Steve Tait, Finance Manager, Adult Social Care Terry Rudden, Strategic Support Manager, Adults and Public Health Jamaila Hussain, Corporate Director of Adult services and Integration (Remotely) Pauline Stuchfield, Director of Customer and Communities (Remotely)
Apologies	Councillor Barnes

11. Declarations of Interest (5:30pm)

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 the business on the agenda, if they had not already done so in advance on the Register of Interests.

Cllr Webb declared a personal non prejudicial interest in agenda item 4 (Local Area Coordination and Social Prescribing update), in that he was a trustee of a community centre that was heavily involved in local area coordination.

12. Minutes (5:31pm)

Resolved: That the minutes of the previous meeting held on 27 July 2022 be approved as a correct record and be signed by the Chair.

13. Public Participation (5:31pm)

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

14. Local Area Coordination and Social Prescribing update (5:32pm)

Members considered a report that provided a general update on the Local Area Coordination and Social Prescribing programmes introduced in the city in 2016.

The Head of Communities, the Senior Local Area Coordinator and the Chief Executive and Deputy Chief Executive of York CVS outlined a summary of the current status and work of both strength-based programmes, including what they were achieving separately and in collaboration. They highlighted how the programmes had evolved and worked together and reported that;

- Local Area Coordination and Social Prescribing were recognised as strength-based programmes that applied person centred approaches and supported people to achieve more healthy, happy and connected lives.
- The teams were primarily funded through the Better Care Fund (BCF).
- Local Area Coordination was an internationally recognised approach to creating networks of support around people to increase independence and reduce dependence on statutory services.
- The cost of living crisis was creating an unprecedented demand on both services, particularly for advice and support.
- The Local Area Coordination Team had supported 4630 people since the programme began in 2016. The programme was currently supporting 2193 people, even though the full caseload capacity for the team was 660.

- Mental health and wellbeing had been prevalent in the reasons for referral to Local Area Coordinators and the Social Prescribing service.
- A mixture of stories, key metrics and reporting data were used to evidence the work that the Local Area Coordinators undertook but the complexity of the work was hard to capture and reflect in the data.
- The stories demonstrated how the model was good at working with people who would otherwise be incredibly marginalized and the strength-based approach allowed Local Area Coordinators to build trust with people to address all the practical issues.
- Poverty and financial issues were becoming more common in referral to Local Area Coordinators and the programme was also seeing an increased demand from statutory services.
- York CVS had grown Social Prescribing in York, identifying gaps in the system where patients required additional holistic support. The team had grown exceptionally to support the most vulnerable across the four city Primary Care Networks and within Foss Park Hospital and York District Teaching Hospital.
- Social Prescribing empowered individuals to take more responsibility for their own health and wellbeing and to identify support networks within their community.
- The Ways to Wellbeing team were also funded through the Better Care Fund, and they were commissioned to deliver Social Prescribing to patients referred through secondary care health professionals.

The Director of Customer and Communities reiterated the key pressures across the teams and the challenging funding cycle.

In answer to various questions raised about the Better Care Fund programme, the workforce, systemic change, sustainability, volunteers, the demand for the service, the resources available within rural villages and the cost of living crisis, Members were informed that:

- A review of the BCF and the move to a multi-year funding agreement set out in the NHS White Paper allowed for the Local Area Coordination team to move to permanent contracts.

- Additional resource would assist both services to help sustain the large caseloads and provide job security, as the current funding programme was a continuing concern.
- The use of volunteers was an outstanding resource and although volunteering numbers had declined, some services were starting up again, such as the buddy role.
- Both teams had built strong strategic partnership relationships across the whole health and adult social care system and York CVS continued to locate funding from various sources. This funding supported York CVS' sustainability and allowed them to offer dedicated support to ensure a robust volunteer and community sector.
- Historically, funding streams had never been provided for core costs, but conversations were underway to reflect the current cost of living crisis.
- The local area coordination model included community building, which addressed areas that had no assets by actively building connected communities through strategic partnership working. York CVS also supported community development and had secured a small community transport fund.

Members commended officers for the service they provided, and they recognised how both teams sought to save costs across the whole health and adult social care system, and not just within the council. They agreed that the funding programme required a whole system solution, and Members welcomed an ambition to provide a whole city-wide local area coordination service. The Director of Public Health agreed to begin discussions with the Integrated Care System and the York Health and Care Partnership.

Resolved:

- (i) That the report and latest performance reports be noted.
- (ii) That there be an ambition to provide a city-wide Local Area Coordination service.
- (iii) That Local Area Coordination and Social Prescribing be discussed with the Integrated Care Service and the York Health and Care Partnership.

Reason: To keep the Committee updated on Local Area Coordination and Social Prescribing.

15. 2022-23 Finance and Performance Q1 Monitor Report - Health and Adult Social Care (6:45pm)

Members considered a report that provided a detailed view of the outturn position for Public Health (PH) and Adult Social Care for 2022/23.

The Finance Manager supporting Adult Social Care and the Strategic Support Manager supporting Adults and Public Health stated that the projected outturn position for Adult Social Care was an overspend of £1,750k. This assumed that £1.2m of savings and £2.8m of mitigations would be made by the end of the year. It was noted that some of the pressures were not reflected in the current projections and would add to the current overspend. Given the level of savings and mitigations still to be made, it was unlikely that further mitigations against these pressures would be achieved in year.

Public Health was expected to underspend by £117k which would be transferred to the earmarked Public Health reserve to fund future commitments, most notably, the investment in the Public Health Service and the pay award, if this was to be over and above what had already been forecasted.

The Corporate Director of Adult Services and Integration, the Finance Manager, the Director of Public Health and the Strategic Support Manager answered various questions raised by Members regarding mitigations, market prices, inflationary pressures, the workforce, adult safeguarding, dementia and service users. It was noted that:

- Staffing continued to be one of the main pressures on the Adult Social Care budget, as well as the market prices for beds and the need to reduce the price of care, particularly in nursing and residential care for older people.
- Mitigations were RAG (red, amber, green) rated and regularly presented to the Corporate Management Team to deliberate and where mitigations would not be achieved, replacement mitigations and savings would be considered to ensure the position did not deteriorate.

- The market prices for beds were currently higher than the City of York Council's (CYC) standard rates. CYC's standard rates were agreed as a fair cost of care exercise with providers.
- Work was underway to stabilize the spot purchase market with health colleagues, as some current prices in the care market had inflated since Covid 19.
- A nationwide exercise from Local Authorities was being undertaken and this would help inform a fair cost of care from April 2023.
- An accounting exercise had been developed for home care agencies asking for increases.
- To help reduce the use of agency staff and recruit more permanent staff, an improved career progression structure for Social Workers had been developed.
- Several of the safeguarding issues reported were of a low concern and were around care being provided in a domestic setting.
- Robust safeguarding processes were now in place and officers worked closely with Public Health to ensure all the care establishments were visited to assess the quality of the service they provided.
- Although York was within the upper quartile of performance amongst England's Local Authorities, it was still a concern that only 40% of York's carers had reported that they were extremely or very satisfied with the care and support they had received from services.

The Executive Member for Adult Social Care and Public Health confirmed that City of York Council's Dementia Strategy was launched on Monday 26 September and one of the priorities being addressed was for better diagnoses.

During discussion, the Finance Manager agreed to seek further clarification on:

- Any provisions that had been made available to individuals and organisations experiencing fuel poverty.
- Whether care homes had been encouraged to retrofit, particularly inefficient heating and insulation systems.
- York's performance in the 2021-22 Carers' Survey compared to the 2018-19 consultation, particularly in relation to how satisfied or dissatisfied carers were with the support.

The Director of Public Health confirmed that the impact of Covid 19 would cause variations within some of the performance data, including within the results of the 2021-22 survey of Adults Carers in England.

Members thanked officers for their report and update.

Resolved:

- (i) That the report and update be noted.
- (ii) That further clarification be circulated to Members on the Carers' Survey, retrofitting within care homes and fuel poverty support.

Reason: To update the Committee on the final financial and performance position for 2022-23.

16. York Health Trainer Service and NHS Health Checks - update (7:20pm)

Members considered a report that provided an update on the York Health Trainer Service and commissioned NHS Health Checks Service.

The Director of Public Health noted that the Health Trainer Service provided individuals with treatment and support to tackle the things that increased the risk of ill health, such as smoking, unhealthy diet, alcohol and the lack of physical activity. These risk factors all contributed to cardiovascular disease, respiratory disease and cancers. The service also worked closely with the Local Area Coordinators and Social Prescribing teams to support residents to make positive behaviour changes.

The NHS Health Check programme was a mandated programme that aimed to help prevent heart disease, stroke, diabetes and kidney disease. The programme was aimed at people aged between 40 and 74 and following a relaunch of the service and insufficient budgets, a decision was made to restrict the number of people invited for a check each year and to only target the population groups that were at greatest risk.

During discussion and in answer to Members questions, it was noted that:

- The Health Check programme was offered to those living in a more deprived postcode and to those whose cardiovascular disease outcomes were often poorer. The data to support this initiative was provided from various sources including GP practices, population level data and public health.
- The Health Trainers worked with individuals to devise a personalised support package, that would not stigmatise.
- A harm reduction service was also available to those that did not want to fully quit smoking or drinking alcohol.
- The cost of living crisis was predicted to put further increased pressures across all health and care services.
- A whole system partnership approach should ensure those residents eligible for a health check would be contacted, although further communication was required to ensure eligible residents were aware that they could contact their GP direct to request a Health Check.

During discussion of the item, the Executive Member for Adult Social Care and Public Health stated that the use of e-cigarettes had become more prevalent with young people and a campaign was to be launched to raise awareness of the risk factors.

The Director of Public Health agreed to meet with Committee Members who represented rural wards to consider rural deprivation and access to information.

[7:35pm Cllr Runciman left the meeting]

Resolved:

- (i) That the report be noted.
- (ii) That the Director of Public Health liaise with the Committee Members who represented rural wards.

Reason: To keep the Committee updated on the York Health Trainer Service and NHS Health Checks.

17. Work Plan (7:43pm)

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

It was noted that:

- The Commissioned Joint Committee with Children, Education & Communities Policy and Scrutiny Committee, to consider the draft Autism Strategy and healthy child update, had been rescheduled to take place on 9 November 2022.
- The Integrated Care Service would be invited to attend a Health and Adult Social Care Policy and Scrutiny Committee on 14 December and an invite would be extended to representatives from the five Place Boards.
- That the Health and Adult Social Care Policy and Scrutiny Committee on 22 November 2022 be scheduled to begin at 4:30pm.

The Director of Public Health noted that the recommissioning of the sexual health service would be considered by Executive in January 2023, and she suggested that this item could be considered by the Committee on 22 November 2022.

Following discussions on rescheduling the updates on elective care post pandemic, access to GP services, oral health in schools, the Dementia Strategy and children's healthy weight, officers agreed to consult with report authors to finalise the work plan.

Resolved:

- (i) That the work plan be considered and finalised.
- (ii) That the recommissioning of the sexual health service be considered at the 22 November 2022 Committee meeting.
- (iii) That the Health and Adult Social Care Policy and Scrutiny Committee be scheduled to begin at 4:30pm on 22 November 2022.

Reason: To keep the Committee's work plan updated.

Cllr Doughty, Chair

[The meeting started at 5.30pm and finished at 8.10pm].