

Labour Group Annual Report – Cabinet Member Health, Housing & Adult Social Services.



Since May 2011 I have undertaken numerous briefing with Directors, Assistant Directors, Lead Officers and with local partners.

I established, early, two rules for a good working relationship – ‘*No Surprises*’ and ‘*a need to know*’. This has led to Officers being open, honest and accepting challenge, during policy development, resulting in policy driven by Labour’s core values and Manifesto.

Like all I went into administration with hope, but also an understanding of an ever decreasing Budget due to unfair and unjustified Coalition Government cuts. Budgetary constraints have proved challenging in creating a City that is fair, more equal and where vulnerable residents achieve a better life outcome. However, even with financial and legislative ‘barriers’, I can report that Labour’s Policies are taking shape and making a difference.

Adult Social Services

Elderly People’s Homes – The Homes re-provision is one of the most difficult decisions taken in recent years, but a correct one. Financing was always going to be challenging but the CSR announced defined that CYC would not be able to run all three new homes. I took the difficult decisions to Group, with confidence that the outcome will be the best for the Council.

Fordland’s and Oliver residents moved during March with all those living in the homes moving to their ‘first preference’ home – one person has moved outside of CYC. All residents were offered, and most took the opportunity to visit 2-3 homes before making their choice. Residents without relatives have been supported through the process by independent advocates. I have been informed that all those who moved appear to be doing well and have settled into their new homes. Officer will obtain a more accurate picture when the post move reviews are conducted by York St John’s University who have been commissioned to do an external evaluation of the closures. The researcher will talk to residents, relatives and staff about their experience of the moves and the process that has been followed. It is hoped that the research will tell us (a) how well the Council followed the process outlined in its ‘Moving Homes Safely’ protocol, (b) whether that protocol represents a ‘best practice’ model nationally, and (c) what learning lessons we can take to help inform the second round of EPH closures planned for Spring 2014.

Staff at the two homes have now had their first preferences met with regard to their new work location.

The buildings have been cleared of remaining equipment and furniture and are now occupied by Ad Hoc Property Guardians to reduce the need for high security costs and boarding up the buildings and provides a home.

Officers are obtaining commercial legal advice to determine the best tendering process for the Lowfields development, and are liaising with APSE (Association Public Service Excellence) about support for an 'In-House Bid'. Tenders for Architect and Construction for Fordland's have been issued. As Councillors are aware the Voluntary Sector will be taking over Olivier House as a 'Hub' for Voluntary Sector Organisations

Reablement – The failed Reablement Tender, by the Lib Dems, did result in a Budgetary overspend due to a handover date of March 2012 rather than November 2011. The new tender addressed the Tenders and Union concerns which were identified in a consultation I requested. The new Reablement tender began on the 26th March and the 31 remaining staff were TUPE'd across on that date to the Human Support Group. There have been no compulsory redundancies.

Officers are working closely with the provider and although there were some early teething problems on both sides these have been tackled. Changes agreed to rotas with effect of the 20th June will bring an additional 150 hours a week of Reablement . New staff currently being recruited/inducted and it is expected that the target of 625 hours will be exceeded by end of July. Indications are that care packages are reducing for customers – so not needing to move on to a Moderate FACS, and Officers are introducing an improved monitoring system for outcomes.

Day Services – The review of Day Services, for residents with Learning Disabilities, is another step towards ending services which do not meet individual's wishes and with the move to Personal Budgets it is important we equip people with the skills needed to be active residents. As part of the review, a representative 'Project Board' has been set up to look at the work at Greenworks and Yorcraft to look at individual's future wishes. This will determine when to begin consulting with those who use the services and their families/carers on options identified (probably in late August/ early September before finalising the review in October).

Care Service - Out of the in-house staff team of 59 only 7 staff were TUPE'd across to the locality provider, York Helpers, who took over the service on the 2nd April. A number of Care Service staff have taken up posts released through Voluntary Redundancy in the Sheltered Housing Extra Care (SHEC) service and a small number of Care Service staff took Voluntary Redundancy.

4 staff have been seconded to St Leonards Hospice where they will work as Palliative Care Workers and receive induction and training into End of Life

Care in their various services over three months. Work with health has begun to establish an End of Life Care Board to work on this pathway that will inform decisions about where to deploy our 4 staff after the secondment is complete.

Supporting People – Funding continues to reduce but work is taking place to ensure that projects related to Drugs, Alcohol, Domestic Violence, Homelessness, Mental Health and Learning Disabilities can continue through contract reviews and eligibility criteria management.

Fair Access to Care Services (FACS) - Consultation has taken place with over 1000 returns. Partners were invited to respond through Partnership Boards and Voluntary sector forums and the Questionnaire was also on line for the public. Questions about impact on prevention and early intervention have been raised and a future report will highlight how CYC can still preserve a prevention approach, with access to Reablement, Telecare and equipment as key elements of the support that can be offer to those whose needs are 'moderate' or 'low'.

Warden Call – This service provides 24/7 monitoring and response through a variety of technological aids. The service has approximately 3000 customers across the City of which approx 1800 have Telecare sensors installed. This service also provides monitoring and response support to the 7 CYC Sheltered Housing schemes and the 4 Extra Care Schemes outside of regular office hours. This is a positive way of using technology to let people stay in their own homes.

During 2011/12 over 2500 pieces of equipment were issued to new customers preventing some from having to go into full time Residential Care. For others, it supports their informal or formal care ensuring that the person remains as independent and safe as possible. Planned Capital investment of £250k per year for the next three years will enable the service to continue to meet demand for Telecare and other assisted living equipment.

The Control Room for Warden Call also hosts the Carers Emergency Card scheme. This means that Control Staff provide a telephone response to support a cared for person when a registered carer finds themselves in an emergency situation. The service is working in an integrated way within the new Telehealth pilot schemes in Haxby and Priory Medical Group practices across the City.

Health & Wellbeing Board – the Board was launched, in 'Shadow' format on the 4th July 2012, and will go 'live' in April 2013, previous to this the Board met in private on a number of occasion to set up its Constitution, Terms of Reference and to work on the JSNA. In February a number of Board members, including myself, travelled in Jonkoping where we looked at the care model which is preventative and led by the individual. Care is fitted around people's needs and life rather than a medical model. It is hoped to implementation some of the practice in York.

Public Health – Finances will be limited when this responsibility goes ‘live’. I have informed Officers that I am keen on partnership working to tackle preventative issues such as smoking, obesity and alcohol. A Director of Public Health will be joining the Council in August. When they arrive I will set about discussing how this agenda will move forward

Review of last year-updates

Mental Health Services - Awareness raising and training on personal budgets for Mental Health Staff (CYC and Health) was delivered. Funding for a small pilot of personal budgets was identified and a person identified to take part – work continues.

Enhancing Quality of Life for people with Care & Support needs - The final phase of the joint project with Joseph Rowntree to replace their residential care homes, for people with Learning Disabilities, with supported living was completed during 2011 and a Sheltered Housing with Extra Care scheme was completed in March 2012 and people moved in during May 2012. This work has ensured that the Council continues to working towards and meet targets to ensure that residents with Learning Disabilities are in stable settled accommodation.

Delaying & Reducing the need for care and support - Against a backdrop of an increasing number of referrals at the hospital for ‘support’ after Hospital Discharge - up 8% from the previous years - Officers have managed to keep the overall delays at the same level as last year. CYC funded an increase in Community Health capacity from Health Gain money to enable a ‘*step down intermediate care*’ response to be developed. I am pleased to report the Councils performance in regards to delayed transfers of care remains low compared with regional and comparator Councils.

Ensuring people have a positive experience of care and support equipment - A new web based tool to allow self assessment for equipment was used by over 300 people in its first year. Feedback has been very positive.

Safeguarding people whose circumstances make them vulnerable and protecting from avoidable harm - CYC have agreed a new protocol with other investigating agencies to route all safeguarding referrals through the new Safeguarding Team, to ensure consistency over the initial safeguarding assessment and with advice and guidance available to agencies. New procedures have been developed internally to ensure greater consistency with the multi agency procedures.

The Year Ahead

The above has been a snapshot of the major projects in the portfolio over the last year. There are ongoing funding challenges to services over the next financial year, which will be difficult, but I believe that the Directorates are now in a better place to deliver services whilst ensuring quality of services.

Despite impressive work over the last year to transform services whilst maintaining quality, the saving requirements into 2012-14 require even more. Our reviews of FACS criteria, of employment opportunities for those with Learning Difficulties along with revisiting Day Service and resource allocation systems are underway and will report shortly. And whilst important strategic direction has been provided for the future of our Elderly Persons Homes major work in delivering that vision and agreeing fair price for care for commissioned services is now required.

The challenges facing the health and social care system will not be solely addressed either locally or on a council specific basis. I await the White Paper on Social Care and the Government's response to the Dilnot recommendations on funding which report date keeps vanishing ever more into the distance.

At a local level we are establishing new partnership delivery models which will have at the heart a shift of resources from acute to community based integrated provision. Only through better integrated preventative arrangements can we hope to balance the demands made on the system through demographic change and technological advances.

One new way of working progressing this year will be the joint work with the Vale of York Clinical Commissioning Group and York Teaching Hospital NHS Foundation Trust to develop Neighbourhood Care Teams. Based on the principles and approach of practice in Sweden this will drive better integrated care and support, with the resident at the heart of the team, shared learning and improvement based on the resident's experience. Two pilot teams are being set up this month and there will be a shared learning event at the end of July.

Finally our engagement in wider plans to make York a "Dementia Friendly City" aims to provide local whole system leadership of challenges facing the whole country.

Meetings attended as Cabinet Member

Supporting People Board

Safeguarding Adults

Shadow Health and Wellbeing Board

York Valuing People Partnership Board

York's & Humber Regional Health and Wellbeing Leads Board

York Older People Assembly Executive Board
Elderly People's Homes Reference Group

Meetings with Partners

Patrick Crowley - York Teaching Hospital

Bill McCarthy - Chief Executive of NHS Yorkshire and the Humber (new Managing Director for the NHS Commissioning Board)

Dr David Hayes – Chief Officer Clinical Commissioning Group

Angela Harrison York CVS – discussed PCT funding to Voluntary Sector

Mike Horncastle York Credit Union – to discuss Universal Credit

Mike Padgham – Chair Independent Care Group

Other Meetings and Visits

Self Direct Support Forum as a speaker

You & Yours' Radio 4 interview on EPH review

Link York as a speaker

OCAV AGM

Full of Life Event

LGA Aging Well - Warwick

Supporting People Board

LGIU Health Networks Meeting – London

York Disabled Workers Coop

Our Celebration/York Mind

Retirement Care Village at Oakham, Rutland

Northern Care Awards

Councillor & MP Working Group on Welfare Reforms - London

South Australia Minister for Disabilities- looking at UK Social Care Systems

Lives Unlimited

Visit to Jonkoping with PCT/CCG to look at Health Model

Connaught Court

Auden House

Windsor House

Oakhaven

Wilberforce Trust
