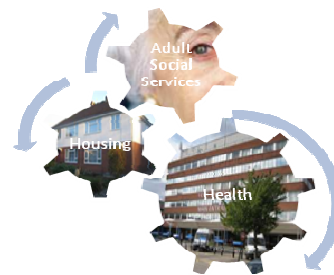


Annual Report - Cabinet Member for Health Housing & Adult Social Services to Health & Overview Scrutiny



Once again the last twelve months have been challenging both to the Council and the partners we work with as 'needs' grow and budgets from Central Government are cut. The recent announcement of Integrated Care money, in the CSR, is already being questioned as it is seen as only a short term solution, perhaps according to some commentators for only a few years, before there will be an urgent need for Government to further invest and properly fund the sector of Adult Social Care.

Adult Social Care - Achievements and performance in the past year.

Personal Budgets – CYC recognises that people are different so is offering more residents the opportunity to decide how they use funding available from the Council to meet their eligible social care needs. Over 73% of residents who could be offered a Personal Budget were during 2012/13 – above the Government guideline of 70%. Feedback from respondents to the national POET (Personal Outcomes Evaluation Tool) survey was that we do some things very well but there are areas still to work on. The areas we scored lower on the POET survey were:

- Residents knowing how much money is in their personal budget
- Getting the support people want (levels were low nationally for this area)
- Personal Budgets helping people back into work (also low nationally)

How CYC will move forward on these:

- the new Resource Allocations System (RAS) will make it easier to make sure people know what money is being offered
- the *Connect to Support* website has just gone live and already a range of providers have joined. However not all who register will be accredited by CYC (we cannot stop people offering services) but we will ensure that residents are aware of this and will have the choice about whether to go with an accredited provider or not.

The Council needs to ensure a more consistent response and with this in mind I am looking forward to the outcome of the Health OSC topic on 'Personalisation'. I hope it will be able to include consideration of the messages from the survey to identify the top three priorities for York so that Personalisation works better for more people.

Hospital Discharges - The Council has continued to receive high numbers of referrals for support on discharge from York Teaching Hospital. I have ensured that Officers continue to work with Health colleagues to make the best use of resources available to reduce delays. As a result the Council has been increasing use of 'Step Down Beds' in Residential Care Homes for people waiting for more complex support packages at home to become available. This policy has started to make a difference but can go further.

Reablement – The service was transferred to an external provider in late March 2012 and within six months 'face to face' contact time doubled. A review of outcomes for people receiving the service, undertaken in November 2012, showed that 70% of people needed lower levels or no support at the end of the Reablement. A CQC inspection, in 2013, has identified positive outcomes and full compliance with all standards – those using the service told Inspectors that they were happy with how their individuality and rights were respected by the staff and the help and support they received.

Adult Safeguarding - Safeguarding alerts have continued to rise, nearly three fold, over the last four years. New protocols for joint working with support for partners undertaking investigations has added to the work of the Councils Safeguarding Team but has been well received by partners. Work is underway to ensure that the response to the Winterbourne Review, from Health and Social Care in York, is on track and the Health & Wellbeing Board will receive information on a 'stocktake', in July, before it is passed on to the Local Government Association and NHS England. In June we welcomed the Board's new Chair Kevin McAleese

Elderly People's Homes (EPH's) – During 2012 our 7 EPH's were inspected by CQC and received a very positive outcome with all being compliant with the required standards.

The modernisation programme is moving forward after the Council's Cabinet endorsed the state of the art new '*lifetime care facilities*' at Burnholme and a Community Village at Lowfield in Acomb. The new Care Homes will provide a 'Household Model' of care with residents living in self-contained households of up to 12 people – 'a home within a home' environment – with similar care needs. Each household will have a kitchen and open plan communal spaces that will help promote a sense of community. There will be access to a mix of private and shared outdoor spaces.

The decision to adopt this model has drawn on innovative care in the UK, and Europe, alongside significant work by the Council, and its partners, to explore future demand for specialist Residential Care and an understanding of local Residential and Nursing Care provided by the independent sector.

The work also informed the decision, by the Council, that a third Care Home at Haxby is not required, based on future demand and affordability.

The focus, throughout the process, has been to ensure that the Council will be able to support the care requirements of York's ageing population; providing high quality facilities to the size required - not just today, but long-term. It is disappointing that due to continued Government cuts in funding, at a time of growth in 'need', that we can no longer run the new homes

Whilst some may say that the delay in the program could be seen as a set back to delivery, it has actually been advantageous in that we have a better understanding of Government funding for care, or lack of it, and of the most up to date means of delivering the care. I know that the Community Village is a particular exciting concept as it will provide residents with a care offer which runs from Independent Living through to End of Life Care and we are receiving recognition for the work we are taking forward.

Musical Connections Programme - The programme is fully established in our EPHs and involves intergenerational work with local nurseries, infant, junior and secondary schools in music, drama and craft work.

Telecare Show Flat – In January, York's first *Independent Living Telecare Show Flat* opened at Alex Lyon House, giving older residents the chance to try out the latest technology that could help them to continue to live safely and independently in their own homes. The show flat was created as a result of the council's award-winning innovation project GeniUS!

The year ahead

Elderly Peoples Homes - The tender for the Homes and Village has been issued to find an external provider to design, build and run the new Care Homes and Community Village. The Council will fund the building of the two new Care Homes through its existing budget for residential care in the City - meaning it will retain ownership of the buildings and the land on which they stand. Subject to planning permission, it is anticipated that the new care homes will start to be built within the next two years.

Warden Call/Community Equipment Loan Store– Cabinet gave its backing to develop a Social Enterprise for the Warden Call/CEL's – this will be a *not-for-profit, 'asset locked' social enterprise* and will be able to trade, access grants and achieve savings for the Council whilst continuing to develop and expand its workforce to meet future demand. The Social Enterprise will not only be the first 'spin out' company from the Council, but the first of its type in the delivery of such services in the UK. Staff will have a significant stake in its ownership with the Council continuing to own 20% of the company.

The current Council run service provides a 24-hour monitoring and response service to some 3,000 customers in York and the Telecare service has over 1,600 customers who have at least one piece of equipment installed. The Community Equipment Loan store provides 46,046 pieces of equipment including health and social care products.

Integrated working - Work is underway to design a more integrated pathway for frail elderly residents. This work shows that partnership work in the City is moving forward as it has agreement from the three Chief Executives at the Council, Hospital and the Clinical Commissioning Group. This is a key priority in the city.

However, caution needs to be exercised in relation to recent Government announcements. Whilst I, and Officers, welcome the move to integration it is concerning that at a time of growth in need there is no growth in funding. It is true to say that integration will lead to some savings but I do not believe enough to cover future needs.

Dementia Friendly City - Last year the Prime Minister's *Challenge on Dementia* included a challenge for 20 communities to commit to the aspiration of becoming 'Dementia Friendly'. York was cited as an example of good practice and we are committed to continuing our progress in this area.

In October 2012 the Joseph Rowntree Foundation launched their findings on how the Council can make York a more Dementia friendly community. An event was held at the New Earswick Folk Hall to present the recommendations and encourage partners to contribute to work to make York a dementia friendly place to live. The event resulted in the Council commissioning Dementia Forward to run a '*Dementia Community Development Project*', working with business, services and communities. This began in October 2012 and is a significant part of CYC's plans and commitment towards becoming a more dementia friendly community.

Since October the Council has established a core steering group to oversee and monitor progress towards our aspiration of becoming a Dementia Friendly City. The Steering Group consists of some key partners, such as JRF, CYC and Dementia Forward and is growing its database of interested supporters across the city who will be kept up to date on progress via newsletters and events. In June an event was held at West Offices which updated on progress, shared information and looked to inspire further action across the city. The Council will be launching itself as a '*local action alliance*' and is looking for interested partners/organisations to join.

Nationally, work has been undertaken to develop a recognition process for being a Dementia Friendly community/organisation.

York has registered as an early adopter for this recognition and partners/organisations/shops that commit to the values outlined will be able to use the recognition logo. We are also developing links with colleagues in Bruges, who are also working to become a Dementia Friendly City and we are hoping they will be able to visit York in the Autumn to share our respective experiences and learning.

Some specific examples of local action from partners include:

- The *Library Service* have been working with Dementia Forward, on awareness raising, dementia related reading lists and appropriate books in the library.
- *Sports and Active Leisure* team have continued to recognise and respond to the needs of those with Dementia in their programme of leisure activities.
 - a project in our EPHs to introduce interactive Nintendo Wii sessions.
 - worked with Sports UK to develop a Dementia Awareness Course, for coaches/instructors/providers of sports clubs across the city.
- The *Customer Contact Centre* committed to training their staff in Dementia Awareness, and make this part of their on-going training programme - all staff received this training prior to the West Offices opening.
- ACE Contracts & Commissioning Team continue to commission the Alzheimer's Society to run *Carers Education* courses and *Peer Support* activities such as 'Singing for the Brain' groups.
- *Genius York* Challenge on Dementia. Funding for intergenerational work in schools.
- *Dementia Forward* have been working with retailers and held dementia awareness raising sessions for staff at a number of stores, such as Fenwicks and Specsavers
- *Visit York* – have undertaken Dementia awareness training for staff.

York's Health and Wellbeing Board

Before the official launch in April 2013 the Shadow Board met on a number of occasions to look at joint working, to set up a Constitution and agree a media policy. Board members also attended a series of 'Development Sessions' to better understand ways of working and challenges both current and ahead. I am pleased to report that the Board is receiving national recognition for its composition of partners and the work already undertaken

Part of the Board's early work has included the Health and Wellbeing Board sponsoring the development of a *Shared Integration Framework* for York, North Yorkshire and the four Clinical Commissioning Groups. Work is now starting to create the right mechanisms for more joined up working and to find

ways to make sure we can use the funding across the system to support people closer to home and in the most cost effective ways possible.

Achievements

- The Joint Strategic Needs Assessment was completed and signed off in March 2012.
- Following the recommendations from the JSNA and extensive engagement and consultation with stakeholders, we agreed 5 priorities for the Health & Wellbeing Strategy:
 1. Making York a great place for older people to live
 2. Reducing health inequalities
 3. Improving mental health and intervening early
 4. Enabling all children and young people to have the best start in life
 5. Creating a local financially sustainable health and wellbeing system
- York's Health & Wellbeing Strategy was agreed and signed off on 17th April at the first meeting of the Board in its statutory form.
- York's Strategy has been nationally recognised and cited as an example of best practice, by the *Campaign to End Loneliness* for addressing loneliness and by the *National Council for Palliative Care* for its inclusion of End of Life support.
- To deliver the strategy partnerships have been established, jointly led by both CYC and VOYCCG:
 1. Health Inequalities
 2. Older People and People with Long Term Conditions
 3. Mental Health and Learning Disabilities

These partnerships have a clear line of accountability to the Health and Wellbeing Board, along with YorOK.

- The establishment of a Section 136 'Place of Safety'. North Yorkshire was the only place in the country not to have this vital provision and as Chair I tasked the relevant partners to act.

The year ahead

There are many challenges not least the continued incorrect and reduced funding from Government and the refusal to allow the CCG to start on a 'level playing field'. This combined with around 17% less funding for Public Health than needs assessed will not make the Council and its partners' work easy.

Priorities include:

- Improving engagement
- Looking at the voice and influence of carers and young carers within the new health and wellbeing structure
- Improving transitions between health and social care and from Children's Services to Adult Services

- Integration – working with North Yorkshire to integrate health and social care across North Yorkshire and York.
- Refreshing the JSNA
- Joint data and performance measures – ensuring CYC has access to the right information so we can measure the impact of the Board, strategy and sub groups.

Challenges include:

- Delivering the Health and Wellbeing Strategy – there are very large and complex pieces of work involving mapping pathways, re-designing pathways to care and support and commissioning to undertake.
- Integrating Health and Social Care – a complex, large scale area of work aimed at transforming local services - ‘how’ will be the challenge
- Mental health – understanding better the needs in the City, particularly lower level need residents that are not in contact with statutory services – hidden need.
- Reducing Health Inequalities - a focus on the most deprived 20% of men, a group that suffers disproportionately in terms of early mortality and ill-health due to disconnection with the rest of York.
- Ensuring that the Health & Wellbeing Board continues to challenge and change things, to improve planning, design and delivery of services. There is also a need to make sure that agendas engage our key partners and that the Board can influence commissioning plans.

Public Health

As Councillors are aware Public Health was officially taken back in to Local Authority control in April 2013 where it had not been since 1974. Whilst the powers to ‘manage’ were not in statute, until April, much work has taken place both within the Council, during the handover from the PCT, with the CCG and partners across health whom services have and are being commissioned from.

The main challenge to Public Health will be financial. Allocation of £6.641m or £33 per head for 2013-14 and £7.305m or £36 per head for 2014-15 is well short of the predicted need of £44 per head

Achievements

- The recruitment of York’s Director of Public Health and Wellbeing
- Successful transfer of Public Health duties into CYC
- The transfer of six public health staff into the council
- Twenty five sets of contracts for services have been transferred to CYC – primary care, acute, drugs and alcohol, voluntary and private sector.

Priorities and challenges

- Transferred contracts are currently being maintained – there is a need to know more about the health needs of our residents to enable a more strategic approach to public health commissioning.
- Capacity – the City of York Councils Public Health Team is one of the smallest teams in the country and there is a lot to do with very limited resources. This will make it difficult to go beyond the core needs and undertake innovative work, but the team are working hard to ensure that York is seen to be a ‘change leader’ and that our voice is one that others want to hear
- Finance – although our allocation saw a 10% uplift, in 2014-15, the City will still be 17.6% away from its target allocation, which represents £1.5M per year of underfunding (our target allocation is £8.86M for 14/15)
- Fragmentation of services – CYC, VOYCCG and the NHS are all required to commission ‘bits’ of Children’s Public Health (age 5-19) and sexual health and this will require close working between partners to avoid duplication and avoid gaps in provision

Meetings/events attended July 2012 to July 2013

- LGYH Improvement & European Board: Sept 2012, April 2013
- LGYH HWB Lead Member meetings: Oct 12, Dec 12, May 2013
(*Presented at two of these meetings on CYC’s work*)
- The Guardian – June 2013 (Article on new model of Care Homes)
- Economist - Oct 2012 (Challenges to care)
- IDEa phone survey on HWB Boards

- CLear Peer Assessment

- Public Health Team Meetings
- Valuing People
- YOPA Executive Board (Council nominee)
- York Domestic Abuse Forum
- Without Walls
- Dementia Without Walls workshop Oct 12
- Health & Wellbeing Stakeholder event: Jan 13
- VOYCCG Board Meeting

- Angela Potts York CVS
- Chris Long (as PCT lead)
- John Kennedy JRF
- Mark Hayes, VOYCCG
- Patrick Crowley
- Mike Padgham – Independent Care Group

- Kevin McAleese – Adult Safeguarding Board Chair
- NHS Regional Dementia Road – Leeds May 13 (*delivered presentation on CYC's work*)
- LGA Health and Wellbeing Leadership: Delivering Improved Outcomes for Local Communities - London June 2013

- Morrell House – with Hugh Bayley and Sally Hutchinson Jan 12
- Public Health England launch – Leeds March 13
- John Snow Conference March 2013

- ACE Retirement reception Oct 12
- Northern Care Awards – presenting award Nov 12