



Health and Adult Services

Local Account 2023/24

People living longer, healthier, independent lives

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Section 1 - Introduction

This is the Local Account for North Yorkshire Health and Adult Services for 2023/24.

It is an account of what we have done to support people across the county during the last year, how we have invested public money, and what we aim to do in 2024/25.

The main focus of this report is adult social care; however, the council's Health and Adult Services (HAS) directorate includes public health and this report should be read in conjunction with the Director of Public Health's (DPH) Annual Report, available here: [Director of Public Health annual report 2023 | North Yorkshire Partnerships \(nypartnerships.org.uk\)](https://www.nypartnerships.org.uk)

Looking back at 2023/24, notable areas of work include beginning to tap into the new opportunities afforded by the first year of the new unitary council; responding to challenges for the social care sector, and the new national assurance framework for local authorities' adult social care duties.

Turning initially to the new unitary council: North Yorkshire Council (NYC) is a new unitary authority, established on 1 April 2023 and bringing together all the services

provided by the 8 predecessor councils. During 2023, the focus for the new council has been on making sure that services could continue without interruption. In HAS, we have also made a great start on exploring the opportunities to enhance our work with other services to improve outcomes for local people. In particular, we see joint working with housing, leisure services, cultural services and libraries, regeneration and community/ locality teams as central to achieving our ambitions for improving health and wellbeing.

Looking now at our challenges, the social care sector nationally and in North Yorkshire continues to face unprecedented challenges. A changing and competitive labour market, leading to major workforce challenges across different sectors; the continuing high numbers of hospital discharges; increased demand for services; and inflationary and cost of living impacts are all impacting adversely on the sustainability of the sector. In North Yorkshire, these challenges are increased by the size and rurality of the county, which adds extra cost pressures.

Also on 1 April 2023, the new duty on the Care Quality Commission (CQC) to assess local authorities' delivery of their adult social care (ASC) duties under Part 1 of the Care Act 2014 came into effect. Over the last 12 months, we have been working hard to prepare for inspection, seeing it as an opportunity for an in-depth review of our strengths and areas for improvement.

Together, these issues have informed the creation of our 3 Public Health and 7 Adult Social Care improvement priorities, about which you can read more in this report.

As well as our key challenges and what we are working on to address them, we also want to share the things we're celebrating, what people say about our services and how they have been involved, and our plans for 2024/25. We hope you enjoy reading this report and find it useful.



Cllr Michael Harrison
Executive Member, Health
and Adult Services



Richard Webb
Corporate Director,
Health and Adult Services

Section 2 - Who we are and what we do

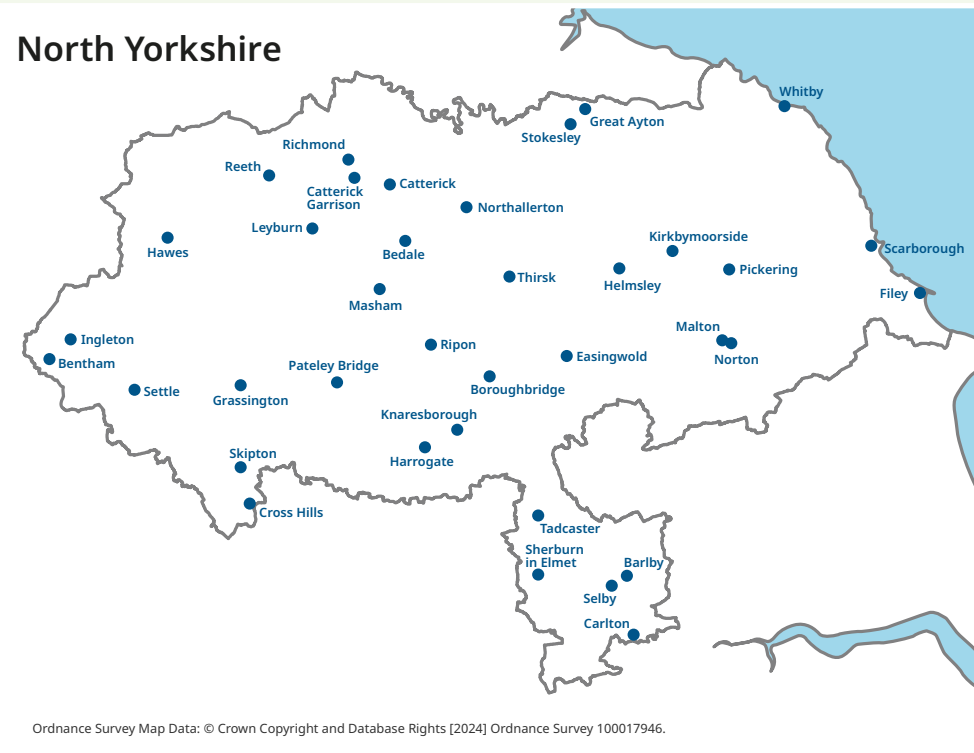
England's **largest county**, covering a geographical area of over **8,000** square kilometres

Total **population** of **615,500**

A mix of **urban, rural** and **coastal** areas

Highly rural - up to **85%** of the county classified as '**super sparse**' with a population density of just 77 people per square kilometre, compared with an England average of 432

153,800 (25%) of **residents** are **over 65**; with projected trends and inward migration of older people to the area, this figure is expected to increase to almost a third by 2035



A small but growing **ethnic minority** population - **6.7%** compared to England average of 26.5%

Home to Catterick Garrison, the **largest** British Army **garrison in the world** with a population of over 13,000

80.7% of North Yorkshire's working age population are **economically active** compared to 77.4% for the Yorkshire & Humber region and 78.4% for the UK

Ranked 127th most deprived out of 151 upper tier local authorities – so **amongst the least deprived** local authorities in England.



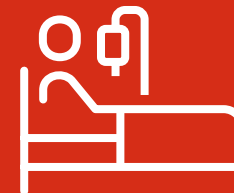
Pockets of deprivation and inequality, with significant variation across the county - **11 neighbourhoods** that are amongst the **most deprived 10%** areas in England (most in east of county).



Large parts of North Yorkshire have **better than average life expectancy** when compared with England as a whole.



Health inequalities - the gap in life expectancy varies across the county between our most and least deprived wards, with a **gap** of up to **15.5 years** between highest and lowest wards.



North Yorkshire **performs well** in indicators for **wellbeing** and **education**, and for some economic indicators.



Inequalities across North Yorkshire include rural access to **services, fuel** poverty, affordable **housing** and **digital** exclusion.



The council

North Yorkshire Council (NYC) - a new unitary authority, established on 1st April 2023 and bringing together 8 predecessor councils

NYC's Council Plan: [Council plan | North Yorkshire Council](#)

Health and Adult Services (HAS) – our role is to:

- lead the council's work on adult social care, public health, supported housing and partnership with the NHS;
- plan, invest and deliver services to support individuals and communities to be healthier and to live the lives they want to live;
- work with partners to build 'health' into the economy, education, planning, regulation, community safety and care; and
- develop service providers and ensure service quality.

Adult social care providers

198 CQC-registered **care homes** in North Yorkshire, including 12 NYC care homes, and 143 outside North Yorkshire

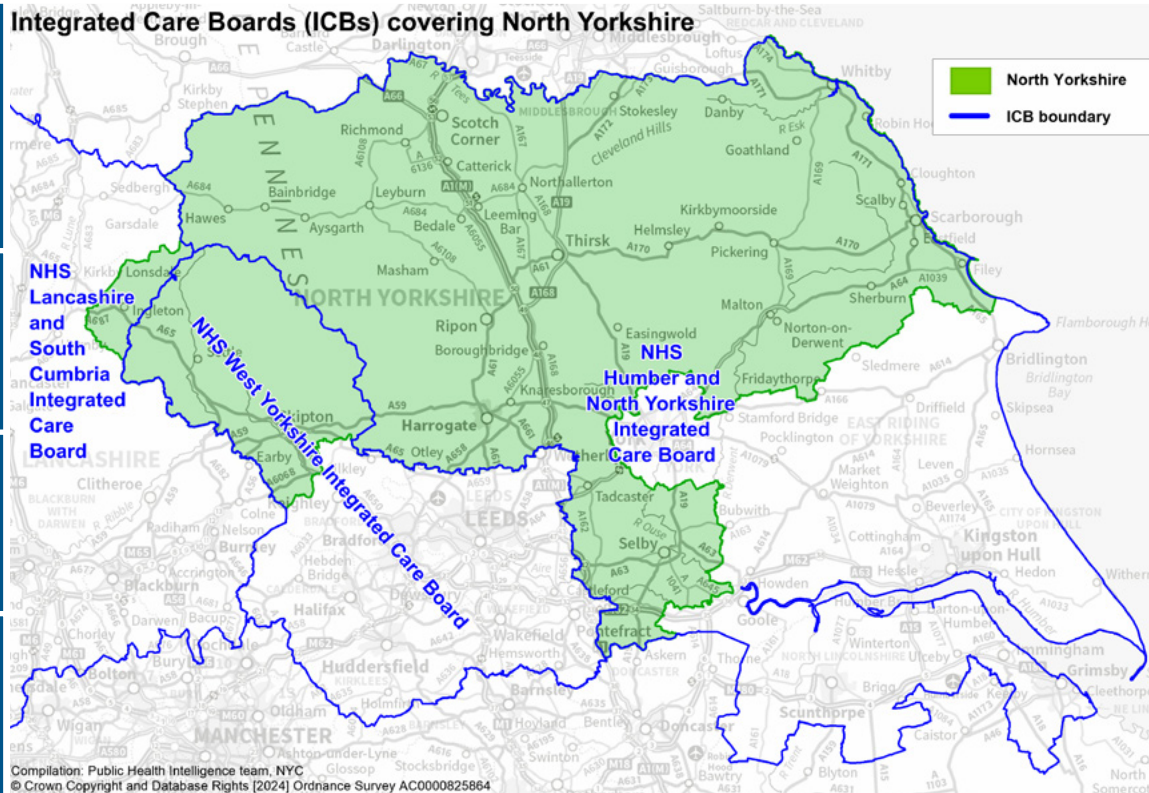
Over **160** CQC-registered domiciliary **care agencies** and supported living services, including 24 NYC services, and 85 outside North Yorkshire

A **vibrant voluntary and community sector**

If you would like to find out more about Adult Social Care, information and advice can be accessed directly from our website at [Adult care | North Yorkshire Council](#) or by contacting our Customer Services Centre on **0300 131 2131**.

NHS partners

- Four main acute and community NHS trusts
- One community NHS trust
- Two mental health NHS trusts
- Over 70 GP practices



Two main Integrated Care Boards (ICBs): Humber and North Yorkshire (H&NY) ICB and West Yorkshire ICB – responsible for planning the commissioning of NHS services in North Yorkshire

Bentham and Ingleton areas - Lancashire and South Cumbria ICB

Key focus of the council and partners: understand and reduce health inequalities

Section 3 – What we did in 2023/24

Our plan for Health and Adult Services and our Improvement Priorities

In our Local Account for 2022/23, we shared our vision for people living longer, healthier, independent lives, and our plan to achieve this, '[Longer, healthier, independent lives: Our plan for Health and Adult Services in North Yorkshire 2022-2025](#)'.

Our Priorities

Our Vision: "People living longer, healthier, independent lives."

Longer, healthier, independent lives: Our plan for Health and Adult Services in North Yorkshire 2022-2025

1 Opportunities for everyone, everywhere

Reducing inequality across North Yorkshire "I will have access to the same services and life opportunities wherever I live or whatever my life circumstances".

Staying well and healthy
"I will have the information and support I need to keep myself as healthy and well as possible".

Protecting the health of North Yorkshire's residents
"I will live in a community that promotes good health across all ages and have access to information and services to support my own health and wellbeing."

Improving mental health and wellbeing
"I will know where to get information, advice and support when I need it".

1



2 My time and experiences are valued

Respecting people's time "I will only need to tell my story once to get the support I need. This will be based on my needs, and not delayed by decisions on how it will be funded".

Listening to people's experiences "My experiences will be heard and used to help make decisions about the way services are designed and delivered".

Embracing technology together "I will be able to interact with the council in more accessible ways, and have support to use technology to enhance my quality of life if needed".

A life outside of caring "As a carer I will feel valued and have a full and more balanced life".

2



3 My home, my community, my choice

My home, my choice "I will be supported to live independently in my home of choice as long as possible".

Outstanding Services "I can access high quality, affordable services within my community".

Strengthening communities to create opportunities
"I will have the opportunity to be an active part of my community where my contribution is recognised".

3



Our vision, commitments and priorities acknowledge our duties under the Care Act 2014 and align to the White Paper 'People at the Heart of Care' whilst prioritising what local people tell us is important to them.

We explained that as our next step for our plan, as we carry on our journey of continuous improvement, we had agreed our 3 Public Health and 7 Adult Social Care improvement priorities for 2023/24. These priorities were selected as we emerged from the COVID-19 pandemic response, based on what people were telling us and our data. We will be reviewing them in autumn 2024.

In this year's Local Account, we share our progress, including examples of our challenges, what we are working on, and our plans for 2024/25. You'll also see examples of feedback on our services, and how people have been working with us and sharing their lived experience.

3 Public Health improvement priorities

1 **Having the best start in life**

2 **Getting people moving more**

3 **Healthy ageing**

7 Adult Social Care Improvement Priorities

4 **Waiting Well** - actively managing people's waiting time throughout their care journey

5 **Reviews** - making sure people get a review of their support at the right times

6 **Direct payments** - supporting more people to take up the option of direct payments, and sourcing more personal assistants

7 **Carers** - a clear and consistent support offer everywhere to help unpaid carers to continue to care for their loved ones

8 **Reablement** - continuing to support the recovery of the reablement offer post-pandemic

9 **Home First** - helping people return home after a stay in hospital

10 **People with Complex Life Circumstances** - a clear and consistent support offer with excellent services available everywhere across the county

3 Public Health improvement priorities

Having the best start in life

Our challenges

Dealing with the increase in children's worries, anxiety and stress, along with the reduction in resilience and wellbeing: national and local evidence indicates that children's mental wellbeing and resilience has suffered through the pandemic, compounded by current pressures such as cost of living, social instability and the prevalence of social media. In our Growing Up in North Yorkshire survey in 2022, we saw a big increase in markers around mental health, for example for 10-11 year olds, 86% worry quite or very often compared to 61% in 2018 and 76% in 2014. You can read more about this in the [Director of Public Health annual report 2023 - In Our Words: a Child's Life in North Yorkshire | North Yorkshire Partnerships \(nypartnerships.org.uk\)](#)

Monitoring, prevention and treatment of childhood obesity: overall, our North Yorkshire rates for excess weight are 23.6% for our 4-5 year-olds and 34.6% for our 10-11 year-olds (both similar to the previous year). Our greatest concern is the levels of

4-5 year-olds carrying excess weight which are now above the national average, and we are examining how to support families with healthy lifestyles in the early years.



Supporting women to breastfeed:

Breastfeeding helps to give babies the best possible start in life, providing health benefits for both baby and mother. Data indicates that within North Yorkshire over 70% of women initiate breastfeeding but by 6-8 weeks breastfeeding rates have dropped to just over 50%, with only 38% exclusively breastfed. Evidence tells us that many women stop breastfeeding before they want to, with one of the challenges they face being social embarrassment about feeding in public.

What we are working on

Healthy Schools Award Programme: so far, over 80% of North Yorkshire schools have signed up to the Healthy Schools Award Programme. To celebrate this, we held an online event attended by over 4,000 children and 200 staff, concentrating on wellbeing and resilience, and an in-person event where the children attended workshops including ways to reduce waste and becoming wellbeing warriors. We are also piloting two [food pantries in schools](#), in conjunction with Rethink Food, Fareshare and the Healthy Schools Team.

Promotion of wellbeing and resilience through My Happy Mind

Mind: we are piloting My Happy Mind in 17 Scarborough primary schools. This preventative program focuses on teaching children positive, proactive habits that support good mental health. Delivered by teachers, it is grounded in science-backed techniques proven to support the development of resilience and self-esteem, and the lessons are highly interactive and fun. My Happy Mind has been developed with a trauma-informed approach and is inclusive for those with neurodiversity.

Breastfeeding friendly venues: the 'North Yorkshire Breastfeeding Friendly Venues Award' aims to help mothers feel more comfortable feeding in public places by providing a friendly space and the facilities they need. From fewer than 50 venues in 2022, there are now 108 signed up. See our new webpage: [Breastfeeding | North Yorkshire Council](#), and hear from mums and a venue provider: <https://youtu.be/n5WbwL2aSqg>.



¹ Nationally, over 1 in 3 children (36.6%) are living with excess weight (by the time they reach Year 6). In North Yorkshire the figure is slightly lower at 34.5% but still over 1 in 3. For adults, 64% are living with excess weight nationally, and in North Yorkshire this is slightly higher at 64.6%.

Getting people moving more



Our challenges

Being active is incredibly important throughout our lives. With 1 in 3 children and young people in North Yorkshire being overweight or obese, rising to nearly 65% in adults¹, we have to look at the best ways to embed movement in all parts of our lifestyle.

Being overweight can have long-lasting impacts on our health, including an increased risk of cancer, mental health issues, heart disease and diabetes. With the opportunities offered by the 8 North Yorkshire councils joining together into the new unitary authority, we wanted to look at a consistent health and wellbeing offer for our residents across the county.

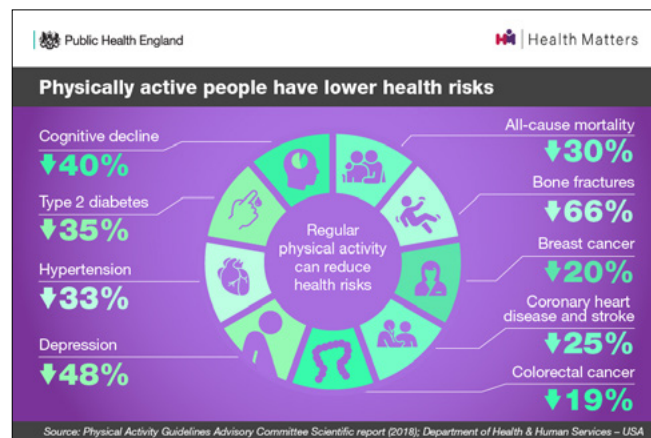


Figure 1: Health benefits of physical activity;
Source: Office of Health Improvement and Disparities 'Applying All our Health'

What we are working on

The Public Health team worked with the new Sport and Active Wellbeing service for the council to design a new delivery model for leisure services. The new service will look at how we use our leisure facilities as well as our work with community clubs and organisations to make health and wellbeing activities something everyone can access. Whether people live in rural places or town spaces, or have health conditions that would benefit from adapted approaches, we would like to offer something for everyone to get active. There is a lot to do over the next 3-5 years to bring the various council leisure services together to invest in activity and facilities. We will continue to work with colleagues to bring an evidence-based approach to this to improve health outcomes.

Healthy ageing

Our challenges

153,800 (25%) of North Yorkshire's residents are over 65; with projected trends and inward migration of older people to the area, this figure is expected to increase to almost a third by 2035. This brings challenges for services, including adult social care, but also opportunities – for example, many of the county's active volunteers are older people.

Last year, we carried out engagement to find out what is important to older people and how we can support people to age well in later life. Older people were positive about living in North Yorkshire but shared their challenges as well. The main issues were:

- Access to a GP (contacting GP, navigating systems, transport to health services)
- Transport (lack of and frequency/reliability of)
- Digital inclusion (move towards everything being online)
- Outdoor space being clean, tidy and safe
- Housing (energy efficiency, heating, adaptations)

What we are working on

NYC has approved 4 priorities to improve outcomes for older people:

1. Health and reducing inequalities (including falls, dementia, increasing physical activity, care home interventions, screening and immunisation and dying matters awareness)
2. Housing (including extra care housing, fuel poverty in lower-income homes, lifetime homes and age-friendly planning and development, adaptations and assistive technology)
3. Employment and financial security (including age-friendly workplaces, pension credits and income maximisation and support for unpaid carers in the workplace)
4. Age-friendly communities - North Yorkshire Council was the first rural area to sign up to the UK network of [Age-friendly Communities](#).

We are working to raise the profile of older people and healthy ageing through events and campaigns, including International Day of Older People; a pension credits campaign working with [Independent Age](#); a falls prevention summit; developing the North Yorkshire age-friendly network (voice of older people); and the Accessible North Yorkshire project, working with agencies and organisations to support villages, towns and larger places to be accessible to all.



7 Adult Social Care improvement priorities

Waiting Well – actively managing people’s waiting time throughout their care journey

Our challenges

In our Local Account last year, we explained that post-pandemic, there are still many pressures on health and social care. This includes hospital referral levels at 50% or more above pre-pandemic activity, long-term staffing pressures across health and social care, and a fragile care market. As a result, there are more people waiting for an initial Care Act assessment, or for additional interventions due to a change in their needs. These pressures have also made it harder to move people on to the next step in their care journey, which has increased some waiting times.

What we are working on

We are continuing to work hard to reduce and manage waiting lists through the interventions we introduced last year, including recruiting more social workers, introducing Advanced Practitioner roles and developing assessment hubs. We are also improving the way we keep in

touch with people who are waiting, including the introduction of new practice standards, to make sure that anyone waiting for an assessment is provided with information, advice and guidance to support them whilst waiting and kept informed about what will happen next.

Building on good results last year, we have maintained a consistent reduction in the number of people waiting for an initial assessment by a third, down from the 2021/22 baseline of 1,054 people waiting to 695 people at the end of 2023/24, and as a result people are not waiting as long. We have also reduced the number of unsourced care packages (where we have not been able to find a suitable care package for someone) to 9 at the end of 2023/24, having started the year at 47.



Reviews – making sure people get a review of their support at the right times

Our challenges

Nationally and locally, the pressures on Adult Social Care have meant that reviews of people already being supported have not always been happening when they should. Initial and annual reviews are important to make sure that a person’s care and support is working well for them, and to see if any changes need to be made.

What we are working on

To help reduce the backlog and make sure that people’s reviews happen when they should, we have created a new Countywide Reviewing Team. This new team is completing all reviews for people in long-term residential/nursing settings, which will reduce the pressure on community social care teams. Our community social care teams are concentrating on reviews for people receiving community-based support, and by March 2024 had increased the number

of annual reviews completed within the set timescale to 62% compared with 57.8% last year. Whilst current performance is below the 65% achieved in 2021/2022, it remains above both the national (55%) and regional (48%) averages.

Direct payments – supporting more people to take up the option of direct payments, and sourcing more personal assistants

Our challenges

Number of people choosing [direct payments](#): we want to increase the number of adults across North Yorkshire with eligible social care needs who choose to manage their own care and support with a direct payment or Individual Service Fund. The evidence shows improved outcomes for people directing their own care and support through direct payments, through the increased choice and flexibility for individuals that this option offers; however, low numbers of people take up this option in North Yorkshire.

What we are working on

Improving our direct payments offer to increase uptake: we are co-producing information with people who receive direct payments, tackling personal assistant recruitment challenges, making our processes more efficient, updating training for all frontline staff, and improving our recording.

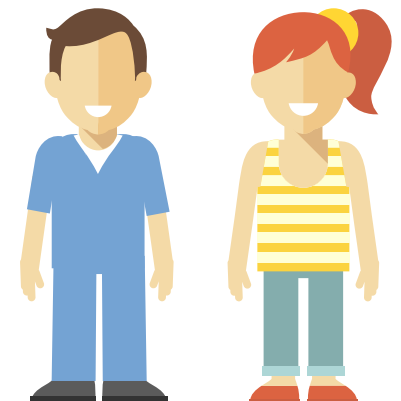
Following a survey of people receiving direct payments in 2023, we recruited to direct payment support service posts. This helps us provide consistent points of contact and communicate more effectively with people. We have also introduced a scheme that will help personal assistants access a number of benefits and rewards, and made it easier for direct payment recipients and personal assistants to provide regular feedback.

As a result of the actions completed so far, more people are taking up direct payments. We have exceeded our improvement target of 160 people with direct payments per 100k of the population, achieving 164.4. This compares favourably to the July 2022 baseline of 140 people per 100k of the population.

Carers – a clear and consistent support offer everywhere to help unpaid carers to continue to care for their loved ones

Our challenges

Our [support for unpaid carers](#) is important in its own right, but also because it is a way of helping people to stay in their own homes for longer. We know from our performance data and engagement that we need to strengthen our offer to carers, including identifying and recognising more carers, and improving carers assessments, reviews and preventative support. We also want to make sure that our offer is consistent across North Yorkshire and happens at the right times for the carer.



What we are working on

Following the implementation of the new 'all ages' Carers Support Service in 2022, the Carers Break Service was re-commissioned with new services starting 1 October 2023. We have also made it even easier for carers to get the help and support they need by the council's Living Well Team providing carer's assessments. A carer's assessment looks at the care provided, how that affects a carer's life, and what they want to achieve in areas such as work, training, social activities and wellbeing.

Reablement – continuing to support the recovery of the reablement offer post-pandemic

Our challenges

Our reablement service helps people regain their confidence and skills to live as independently as possible, especially after an illness or deterioration in health. It offers a short-term intervention of up to six weeks,

after which people are referred for ongoing care and support if that is still needed.

There have been many demands on the service, including a continuing need for reablement staff to step in to cover staffing gaps in teams that provide ongoing care and support. Recruitment has been difficult, with teams carrying significant vacancies. These challenges have meant that the service has had less time and staff to focus on its core reablement offer. We are also looking at opportunities to offer the service more widely across the population: we have noticed that the number of referrals for people with a learning disability or mental health condition is disproportionately lower than for elderly people.

What we are working on

We have reviewed our approach to ensure that opportunities to offer reablement across the population are not missed. We are also working hard to fill vacancies in our in-house care services and to support the care market, so that our reablement staff can focus on their main role of helping people to regain more of their independence. We

have already seen improvements because of this work, with reablement delivery up 33% compared with last year – this means an extra 476 packages of support for people.

Home First – helping people return home after a stay in hospital

Our challenges

Too many people are moving into residential or nursing care following a stay in hospital rather than being able to go home, partly due to the pressure on Adult Social Care to support hospitals to discharge people when they are seen as medically ready but may still need some care and support. Evidence suggests that short stays in a care home, particularly if therapy and reablement input aren't available, often become permanent, leading, unintentionally, to a major life-changing decision about where they live. It also impacts on the council's budget.

During and after the height of the COVID-19 pandemic, there was a shortage of home care in North Yorkshire. This



resulted in some people having to wait for the right care for them or, in extreme circumstances, having to move into a care home. However, capacity in the home care market has improved significantly during 2023 and most people are able to choose from a range of providers that can support them to stay living in their own home. There are still several challenges, though, including the need to ensure the long-term sustainability of the home care provider market and difficulties in ensuring that sufficient home care is available in our most rural communities.

We also support people via bed-based intermediate care: this provides intensive assessment and support to people in care homes, community hospitals and extra care housing. The focus of the service is on promoting independence and recovery, to help people make a smoother transition home.

What we are working on

We are continuing to look at innovative ways to help people return home after a stay in hospital, including a review of intermediate care, bed-based provision, and reablement. We are focusing on rural areas where it can be more difficult to source care packages, for example working with the voluntary and community sector to enable people to access support in their community. We are seeing good results from this work: we have reduced the length of time that people are staying in residential care before they can go home, and we have very few people waiting for a provider to take up their package of care. We also have more reablement capacity to help people maximise their independence when they get home.

People with Complex Life Circumstances – a clear and consistent support offer with excellent services available everywhere across the county

Our challenges

More people with complex life circumstances are coming to Adult Social Care for help. They may need help because of, for example, their mental health issues, neurodiversity, severe dementia, substance misuse, or a combination of these factors. We are looking at our adult social care practice and commissioning to make sure that we can support people in the way that they need. And, also, about how we establish closer links with Public Health, NHS and Housing services to support them.

We are working together to make sure that we have a shared understanding of what we mean by 'complex care' and who might be included in this definition. In NYC, the term 'complex care' can refer to situations when a person has multiple needs, some or all of which are difficult to meet (the person may have contact with multiple agencies/support networks) or when there is a complicated situation for the

practitioner or the organisation. Someone who would benefit from the complex care approach may have experienced trauma in their life, may be isolated or not have a strong support network. Risk factors which could contribute to a situation becoming complex include risks of self-harm or suicide; abuse or exploitation; harm to others; being subject to the Mental Health Act; substance use; homelessness or involvement from the criminal justice service.

What we are working on

We have been scoping and researching what the best approach for trauma-informed¹ care would look like, with internal and external partners and national experts. We are linked in with the Trauma-Informed Response North group, and our next steps will be to create a local trauma-informed network and care advisory board.

We are working to develop a shared definition of complex care with our networks, including Yorkshire & Humber Association of Directors

of Adult Social Services, national Principal Social Worker network, and the national Lead Social Worker for Mental Health. From those discussions, a Complex Care working group has been established with Kings College London, and a funding bid has been submitted for NYC to be a pilot site.



¹ ['Trauma-informed'](#) means being sensitive to the trauma that people may have experienced and actively seeking to prevent re-traumatisation.

How we involve people in shaping our work and improving what we do – some examples

People are experts in their own lives, and we want their voices to be at the heart of Health and Adult Services. Throughout the last year, we have worked closely with people and communities to shape our services and continued our work to enable a broader range of people to speak up and be listened to. We are very grateful to all the people who contribute their time and experience to help us develop and improve what we do.

You can find out more about the voice groups that we work with here: [Adults | North Yorkshire Partnerships \(nypartnerships.org.uk\)](https://nypartnerships.org.uk) or by contacting: HASengagement@northyorks.gov.uk

Creating our Involvement Framework: during 2023 and 2024, we worked with people with lived and living experience to co-produce our Involvement Framework and Charter. These set out how we will work together with people and communities to design and deliver our services and support. They will guide our journey towards co-production, working together in equal partnership from the start. By bringing together our lived and learned experiences, we can make life better for everyone in North Yorkshire. As Christopher Porter, self-advocate chair of the North Yorkshire Health and Wellbeing Group, says: **“Co-production is a superpower!”** We will launch the Framework and Charter in autumn 2024.

New extra care developments: we held engagement events to involve local people in plans to develop two new extra care schemes, one in Gargrave and one in Harrogate. The events were held in local venues, with an online survey for each community alongside. Feedback included:

“We need so much more of it!”

“More extra care and supported housing for these needs please.”

“Extra Care provision is an excellent option of housing for many individuals and Harrogate I would think has a significant need to have more.”



Reviewing our Countywide Reviewing Team:

in January 2024, we worked with Inclusion North to ask people who have been supported by the Countywide Reviewing Team about their experiences of it. Twelve people shared their views. Inclusion North's findings indicated that individuals receive tailored support that responds to their needs. Comments included:



"Review went well and I feel relieved that I have been listened to, and we have completed a CHC checklist."



"The review team staff member was very helpful, friendly and informative and very patient."

Co-producing information with people who receive direct payments:

we held focus groups to gather feedback on the direct payment service, and to co-produce the new webpage and leaflet, including changing the images to be more inclusive. There were nine focus groups in total, four virtual and five in person. [Direct payments and personal budgets | North Yorkshire Council](#)

All-age substance use strategy consultation:

in February 2024, North Yorkshire Council and partners launched a 12-week public consultation on the draft North Yorkshire substance use strategy. People could read the strategy document (with easy read option) and watch a short informative video, then complete a survey. We also visited a forum of people with lived experience to enable people to share thoughts directly. The feedback has helped change and shape the strategy, to be published in autumn 2024.



Lived experience of substance use:

in April 2023 North Yorkshire Council commissioned Red Rose Recovery (a lived experience organisation) to support people in Harrogate to co-produce a lived experience forum. People who have experienced the harms associated with substance use, be that themselves or as a loved one/family member affected, were invited to be part of the group, now named North Yorkshire Connected Spaces (NYCS). NYCS have delivered 5 forums, each with attendance of over 40 people. NYCS have also developed opportunities for people locally to volunteer and provide peer-led supportive recovery activities, including a boxing group and community litter picks. NYCS plan to expand across the county starting with Northallerton. You can read their annual review here: [NYCS Annual Review 2023-2024 - Red Rose Recovery](#)



Joint Local Health and Wellbeing Strategy consultation: between January and March 2024, North Yorkshire Health and Wellbeing Board held a consultation on the draft Joint Local Health and Wellbeing Strategy. We used different methods to make the consultation as accessible as possible, including drop-in events in local libraries, community conversations and arts-based engagement. We heard from over 700 people, and we made a number of changes to the draft strategy based on their valuable feedback.



Housing needs assessment for people with a learning disability and/or autism: in partnership with H&NY ICB, we commissioned the national Housing Learning Improvement Network (LIN) to undertake a strategic housing needs analysis for accommodation that supports people with a learning disability and/or autism. The Housing LIN partnered with Learning Disability England to talk to people about what was important to them, via online and in-person discussions, and surveys. The Housing LIN used what people told them to produce a report about housing needs over the next 10-15 years.



Developing online assessment tools: we wanted to find out what people's experiences were of our assessments, and about the idea of an online care assessment, to help us design new online tools. We used several different ways to find out about people's experiences, thoughts and ideas, including in-person and telephone conversations, going to community groups and a survey. We gathered lots of useful feedback that has helped us to design online assessments that work well for people, if they choose to use that option, as well as ideas for improving communication more generally.

Involving people with lived experience in our peer review: during 2023 and early 2024, we underwent a three-stage peer review in Adult Social Care to understand where our strengths are and what we could do better. As part of this work, the peer review team heard from seven focus groups with people with lived experience of our services and their families and spoke to 39 people individually. People generously gave their time to meet with the peer challenge team and shared their insights and feedback. These fed into the peer challenge team's recommendations about what we need to do next.

Joint Forums Q&A: Richard Webb, Corporate Director of HAS and other senior leadership team members meet with citizen forums and local voluntary organisations quarterly to answer questions on a variety of topics relating to Adult Social Care and Public Health. Attendees submit questions in advance, providing an opportunity for the senior leadership team to have awareness of local issues, take these issues back to the relevant HAS teams and act upon them. Recent topics have included access to sex and relationships, changes to self-advocacy in North Yorkshire and complex care.

Safeguarding Week – June 2023: we marked Safeguarding Week with an online campaign, featuring a programme of sessions and webinars delivered by inspirational and motivational speakers, all of whom are experts in their field. The theme for this year was ‘Safeguarding is everybody’s business’.



Partners from Safeguarding Adults Boards, Children’s Safeguarding Partnerships, Community Safety Partnerships across North Yorkshire, the City of York, East Riding and Hull came together to plan and deliver the week, with 44 sessions attended by over 4000 people.

Some quotes from sessions organised by North Yorkshire Safeguarding Adults Board:

The presenter was really helpful at giving clear guidance and advice - this charity (HALO) sounds amazing, and I wish they were in place nationally for all of the women and girls who need this.

This was an incredibly informative session that managed information about complex matters in a sensitive way.

This session was one of the best training sessions I have attended in a long time and will take away so much from it.

Feedback from people about our services

During 2023/24, our teams received nearly 600 compliments. Here's a small selection (some have been edited for length):



"Appreciate the hard work...

...and challenging dynamics you are working with as you continue to support [Name], you are clearly placing her voice first and foremost in all your decision making and approaches." [Social Care Assessor]



"[Name] was very professional and reassuring..."

...She suggested lots of things that would help my dad. She also provided a great line of communication for myself. Her very professional help and support made a stressful and traumatic time much easier to cope with." [Benefits and Assessments Officer]



"[Name] went above and beyond to support mum..."

...and I, in locating her a new care home. [Name] is amazing at her job and a true credit to herself and the profession. On behalf of my mum and I thank you [Name] you really did make a difficult time more bearable, I will always be truly grateful." [Transfer of Care Co-ordinator]



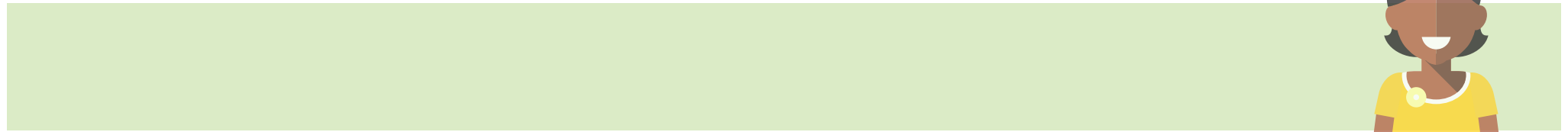
"She helped me understand the situation..."

...correctly and choose everything I needed. She is a pleasure to talk to. She is very positive, polite and friendly to other people." [Independence Co-ordinator]



"Thank you for all your help with Mum..."

...and arranging everything over the past few weeks, you made it straightforward and explained every step of the way for us. You are so kind and professional in your work." [Social Worker]



“She gave me advice, she filled in all my details...

...about what I could and couldn't do and also what I wanted to do, how much I wanted to do. She put dimples on my cooker! [...] She was affable, pleasant, polite and professional.”
[Rehabilitation Officer]”



“... our family want to thank you all for helping...

...with [name's] care and keeping everything nice and clean during the seven years he has been at Whitby Road. I know that a lot what you do is unseen but it does make a difference and I always comment on the fact that the building is always clean and fresh.”
[NYC Care Provider Services]



“After spending several days in respite at Silver Birches...

...I feel apart from verbal thanks to the staff I must write to you to put on record what a very good service I received. The food was varied and of a very good standard. Also the staff gave me very good attention. Not only me but all their residents. First hand I saw how they looked after and cared for the very elderly. [...] Make sure the staff know what a good job they do and how much it was appreciated.
[NYC Care Provider Services]



“Mam received a lovely warm welcome...

and felt that she had made the correct move. [...] In September mam's health deteriorated and the Carers involvement with mam became more important to her health and wellbeing. Over the next few months mam's carers worked tirelessly to ensure that mam was always safe, warm and comfortable in her flat. When mam became bed bound the Carers stepped up to another level with the love and professional care that mam received. [...] [NYC Care Provider Services]



Information about complaints and learning from complaints received in 2023/24 is available in Section 4.

What we're celebrating

The 20th anniversary of the council's pioneering [Extra Care](#) programme, which has helped thousands of older people live in their own homes for longer, was celebrated throughout 2023 with a series of celebratory events and visits by the Executive Member, Corporate Director and other NYC colleagues to meet staff and residents, as well as a drop-in to one of the extra care schemes in his constituency by then-Prime Minister, Rishi Sunak.

Launched in North Yorkshire in 2003, there are now 28 housing schemes across the county with properties for rent and to buy. We are using the feedback from the visits to help us develop and improve our approach to Extra Care in the future. In November 2023 we also held a major national conference on Extra Care with over 200 delegates, and from that, launched a new national Extra Care commissioning forum to share good practice.



In July 2023, two North Yorkshire colleagues were recognised for their exceptional service by the Chief Nurse for Adult Social Care in England, Deborah Sturdy. The prestigious awards recognise the outstanding contribution made by social care workers and nurses and their “skills, expertise and enduring compassion”:

- The registered manager at Carentan House in Selby, Helen Breheney, received the Chief Nurse’s Adult Social Care Silver Award for ensuring exceptional service is delivered to residents.
- Sarah Fiori is the principal nurse and quality improvement manager at North Yorkshire Council and was honoured with the Chief Nurse’s Adult Social Care Gold award.



Also in July 2023, our in-house Care Provider Services celebrated Good Care Month with ‘Come Dancing with Care Provider Services’. The team encouraged movement in a fun way with parties, discos, singing and dancing for everyone in our care settings. Teams across HAS were invited to join in, and the celebrations finished with an award ceremony showcasing the creativity and enjoyment across the service.



North Yorkshire Council Care Provider Services retained, and improved, on its [Autism Accreditation](#) status and our Supported Employment service gained advanced status. The commitment shown to retain the Accreditation award is testament to the values of care that are at the heart of Care Provider Services.



At the [Yorkshire and Humber Clinical Research Network Annual Awards](#) in August 2023, held by the National Institute for Health and Care Research, Rachel Murphy, a social worker and member of the HAS research team, was highly commended in the Best Contribution to Research in a non-NHS setting category.

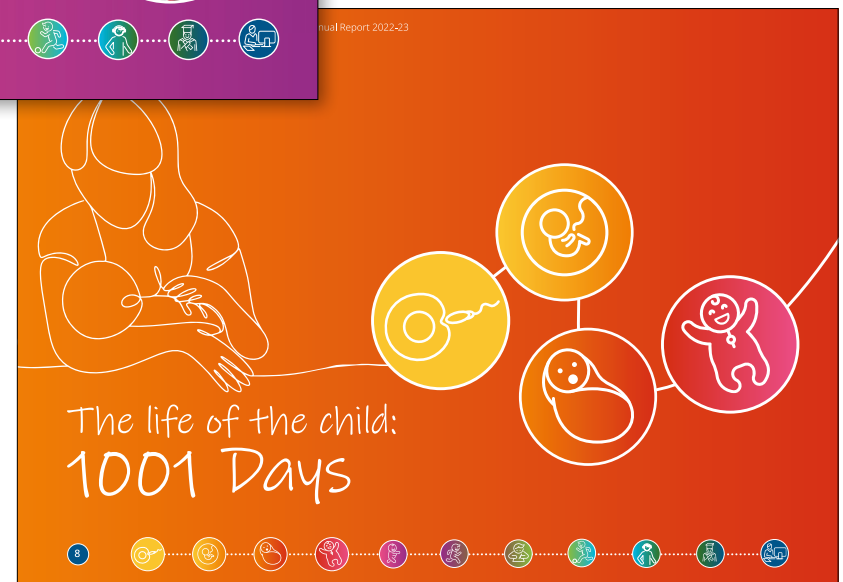
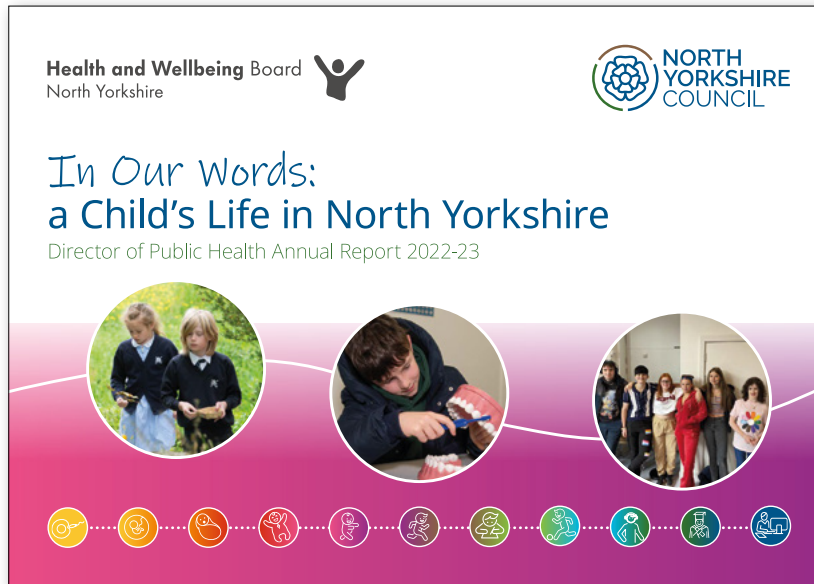


Also in August 2023, we hosted a visit from Professor Sir Chris Whitty, the Chief Medical Officer. Professor Whitty was exploring the experiences of older people and wanted to better understand the rural dimension. With voluntary sector and health sector partners, we highlighted a range of interventions that help to keep older people healthy and connected. We were very proud to be able to contribute to the [Chief Medical Officer's Annual Report 2023: Health in an ageing society](#).



Announced in November 2023, North Yorkshire Council, led by the Public Health team, was awarded £5 million by the National Institute for Health and Care Research (NIHR) to establish a Health Determinants Research Collaboration (HDRC). The [HDRC North Yorkshire](#) will better identify the local social, economic and environmental factors that influence the health and wellbeing of our residents, and help partners to shape policies and interventions that promote health equity and reduce health inequalities.

In May 2024, our Director of Public Health (DPH) Annual Report 2023 was named as one of the top four in the country by the Association of Directors of Public Health (ADPH), and also commended for its innovative use of infographics: [ADPH Annual Report Celebration 2024 | ADPH](#). This is the second year in a row that ADPH has included our DPH Annual Report in the top four.

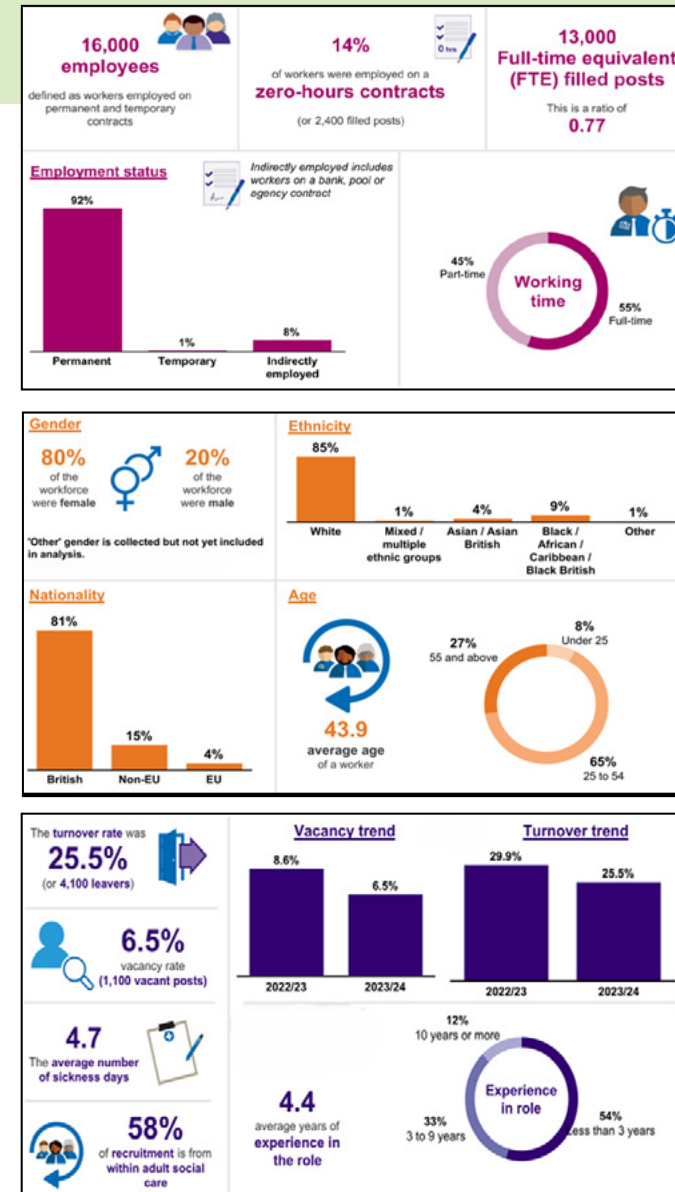


Our workforce

The recruitment and retention challenge in Adult Social Care has been a strong theme throughout the last few years, reflected in our previous Local Accounts. This year, we are very pleased to share that we have made significant progress in recruitment to vacant roles across our in-house Care Provider Services and in many of our community social work and occupational therapy teams. We recruited 23 international social workers who took up posts in Harrogate, Scarborough and Vale of York teams, reducing vacancy levels. Comprehensive induction and pastoral support arrangements have been put in place. We also have a number of trainee social workers across our countywide services who will qualify during 2024/25 and who will move into vacant roles as they arise. Vacancies across our in-house Care Provider Services have reduced to around 5%, and adding in our social work teams, it is 5.52% which is very positive and reflects a much more buoyant labour market. Across the directorate, our turnover rate is 9.98%. The charts to the right of the page show the combined data for the council and independent care workforce and show that although the vacancy rate has reduced overall, turnover for the wider sector continues to be a challenge.

International recruitment has had a positive impact on the council and wider care sector, in terms of filling vacant roles. However, it is not a long-term solution to labour market competition.

NYC and partners are also responding to some significant challenges arising from the increase in international recruitment in the care sector, specifically related to quality, unethical employment practice, compliance and market sustainability. Given the sustainability issues linked to international recruitment and the growth we need to see within the workforce to support population projections, we know we need to continue to focus on developing talent and innovative approaches to recruitment.



3 Note: zero-hours contracts are primarily in the independent sector.

Section 4 – How did we do?

Care Quality Commission local authority assurance

As we mentioned in our introduction, the new duty on the Care Quality Commission (CQC) to assess local authorities' delivery of their adult social care duties under Part 1 of the Care Act 2014 came into effect on 1 April 2023. During 2023, we commissioned an independent expert and external peers from other councils to work with us on a three-phase review of our performance to identify where we are doing well, and where we need to strengthen our approach.

Phase 1, in June 2023, focused primarily on a desktop review of key data, plans and reports. This was followed in November 2023 with a peer review, involving 6 peer reviewers, 57 focus groups including 7 with people with lived experience, and over 100 briefing/debriefing meetings. Phase 3 in February 2024 built on the peer review, this time with 13 peer reviewers, 70 case audits, and 70 practitioners and 39 people with lived experience taking part.

The information gathered from this intense activity has informed a detailed action plan, incorporating our 7 improvement priorities for Adult Social Care and a number of other areas, plus plans to continue to develop and strengthen all the areas where we are doing well.

To contribute to our improvement journey and share best practice and learning, we also work closely with colleagues and the Association of Directors of Adult Social Services (ADASS) in our region.



Performance

In this section, we're sharing some performance information to complement the information about our 3 Public Health and 7 Adult Social Care improvement priorities in section 3.

In Adult Social Care, during **2022/23** we provided:

9,716 people with long term support services, made up of:

6,386 with community-based packages

3,330 with residential packages

1,538 Extra Care places

3,920 contacts to Living Well Service

1,575 Direct Payments

There were 3,699 referrals to the Living Well service during 2023/24 which is a decrease of 6% from the previous year. Living Well has also broadened its activity to include assessments for unpaid carers (275 during 2023/24), support for the Homes for Ukrainians scheme and social prescribing activity for GP practices in two areas of the county. The latter two areas of activity are not reflected in these figures; however, work is underway to develop reporting arrangements to bring all this activity together and we expect to share it in our next Local Account.

During **2023/24** we provided:

10,378 people with long term support services, made up of:

6,920 with community-based packages

3,458 with residential packages

1,538 Extra Care places

3,669 contacts to Living Well Service

1,977 Direct Payments

From feedback from people supported by Living Well, 93.1%⁴ 'would definitely recommend the service', and wellbeing levels increased following a Living Well intervention, with people who said that they 'never felt good about themselves' reducing from 34% to 13%.

In relation to our CQC ratings, 83.7% of residential care settings and 90.2% of domiciliary care services were rated as "Good" or better overall.

⁴ Feedback for quarter 4, January – March 2024

Looking at our public health improvement programmes:

- **Adult Weight Management Service:** 646 service users are projected to achieve 5% body weight loss and sustain weight loss for 24 weeks. This figure is substantially above the target of 347.
- **Smoking Cessation Service:** 774 smokers quit at 4 weeks over in the year 2022/23, a rate of 1,534 per 100,000 smokers, which is statistically similar to the England rate of 1,620.
- **NHS Health Checks:** 16,298 people in North Yorkshire received a health check in 2023/24, 8.5% of the eligible population, slightly below the England rate of 8.8%.
- **Substance Use:** in the rolling 12 months to June 2024, there were 2,584 engaged in structured treatment, which is 90% of the treatment target of 2,856.

Based on our assessment of our performance in 2023/24 against the Adult Social Care Outcomes Framework (ASCOF) and the Local Authority Health Profiles:

Our strengths are:		Our areas for further development are:	
1	The proportion of people who use services who said they have control over their daily life (83.0%, ranked 12/150);	1	A high level of permanent admissions to care homes for residential and nursing care;
2	The proportion of carers who report that they have been included or consulted in discussion about the person they care for (74.6%, ranked 13/150);	2	Low proportions of people using social care, and of unpaid carers, who receive direct payments;
3	Overall satisfaction of people who use services with their care and support (69.0%, ranked 22/150);	3	Decline in smokers accessing Stop Smoking Services - new clinics have been opened to address this, in line with the national "Smokefree 2030" ambition;
4	Procuring NHS Health Checks for adults aged 40-74: the proportion of the eligible population receiving NHS Health Checks is below the national average in 3 out of 4 quarters for 2023/24. However, in the first two quarters of 2024/25, the proportion of eligible adults receiving a health check has been similar to or above the national average and is now close to the pre-COVID average;	4	A high proportion of children, particularly reception aged children, are classified as overweight or obese, as measured by the National Child Measurement Programme.
5	Healthy Child Programme: for the year 2023/24, North Yorkshire achieved completion rates above the England average and above the average for 14 similar rural counties ("statistical neighbours").		

Complaints, compliments, LGSCO and MP enquiries

Complaints



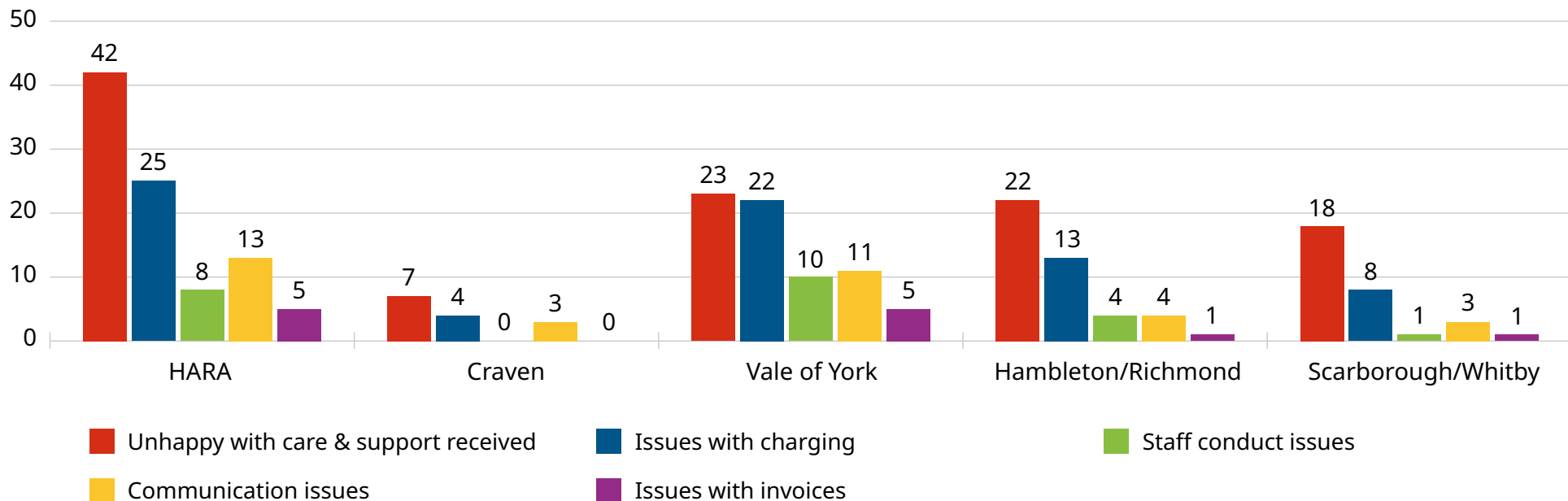
We received **348 complaints** in 2023/24,

in comparison with **336 complaints** received in 2022/23 - an increase of 12 complaints.

We received 96 complaint reviews in 2023/24, in comparison with 72 complaint reviews received in 2022/23, an increase of 24 complaint reviews. One reason for the increase is that we have made it more straightforward for people to ask for a review.

We analyse the learning from complaints to help us continually improve how we do things. For example, we undertook a review of complaints linked to communication issues and are undertaking a mystery shopper exercise to better understand the issues and help us decide what actions we need to take.

Root Causes of Complaints by Locality Teams



MP Enquiries

During 2023/24, **93 MP enquiries** were received. This is a 16% increase on 80 in 2022/23. We noted that more people were contacting their MPs at the same time that they had an open complaint with HAS.



Local Government & Social Care Ombudsman (LGSCO)

During 2023/24, we received a total of **8 cases** from the LGSCO. Last year we dealt with 15 cases, due to a backlog following closure of the Ombudsman office during the pandemic.



9 cases were closed in 2023/24 against 27 cases closed in 2022/23. 7 of those 9 cases had a decision against us: 7 were fault found with maladministration and injustice, i.e., the Ombudsman found that the complainants were disadvantaged by the administrative fault; 1 was fault found but no injustice, i.e., the complainant was not disadvantaged. A further case was closed after initial enquiries with no further action.

Compliments and commendations

During 2023/24, **599 compliments** were recorded for Health & Adult Services. This is 31% fewer than last year (984). This decrease could be due to changes in the way that we collect feedback, as more services go online. We are exploring ways to make sure that customers can provide feedback whether via online or in-person services.



Safeguarding adults

The safeguarding year in numbers

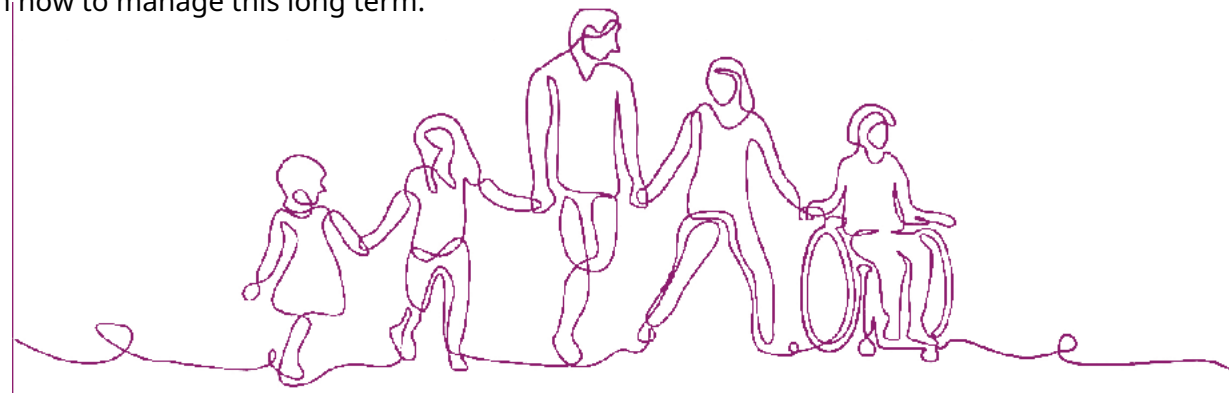
1,849	safeguarding enquiries in 2023/24, a 16% reduction on 2022/23
94%	of enquiries had risk reduced or removed, up from 92% in 2022/23
42%	of reported abuse occurred in the adult at risk's own home, down from 44% in 2022/23
45%	of reported abuse occurred in care homes, up from 41% in 2022/23
83%	of adults at risk felt their outcomes were fully met, up from 72% in 2022/23
5,427	Deprivation of Liberty applications were received, up 18% year on year

6,921 safeguarding concerns were received in 2023/24, a 27% increase compared to the previous year. We have reviewed this increase and part of it is linked to a change in how safeguarding concerns are logged when they first come in, which is causing the same incidents to be logged from multiple agencies. In 2023/24, 1,330 people had multiple concerns reported compared with 927 people in 2022/23. We intend to carry out a further audit in 2024/25 to check the information.

We have seen an 18% increase in Deprivation of Liberty Safeguards (DoLS) applications, in line with what is being seen nationally. Whilst the directorate has worked hard to reduce the backlog of DoLS applications and this project has now been completed, the number of referrals continues to rise. Conversations are taking place with partners on how to manage this long term.

[Making Safeguarding Personal](#) means putting the person at the centre of everything we do during a safeguarding enquiry from the very beginning to the end. Making Safeguarding Personal is not about putting a person through a process; it is about having a conversation with them or their representative to ask what has happened and identify what outcomes they want to achieve. Of the 77% of people that did express a desired outcome:

- 83% of these people's outcomes were fully achieved – in line with the national average
- 16% of people said their outcomes were partially achieved; and
- 1% of people said their outcomes were not achieved.

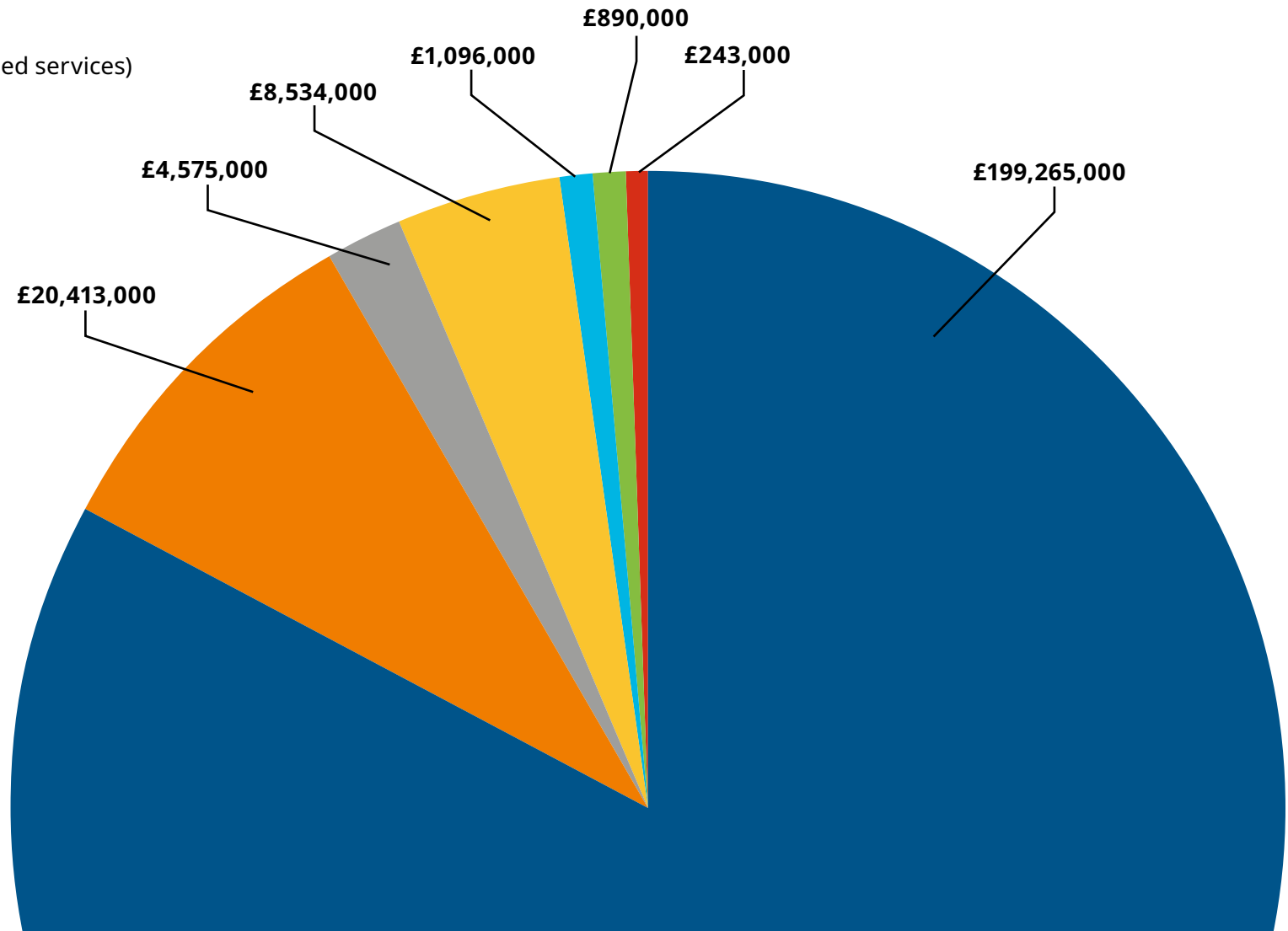


Section 5 - How much did we spend?

The adult social care (ASC) net spend for 2023/24 was £234,940,000. It was invested in a range of services as illustrated below:

ASC Net Spend 2023/24

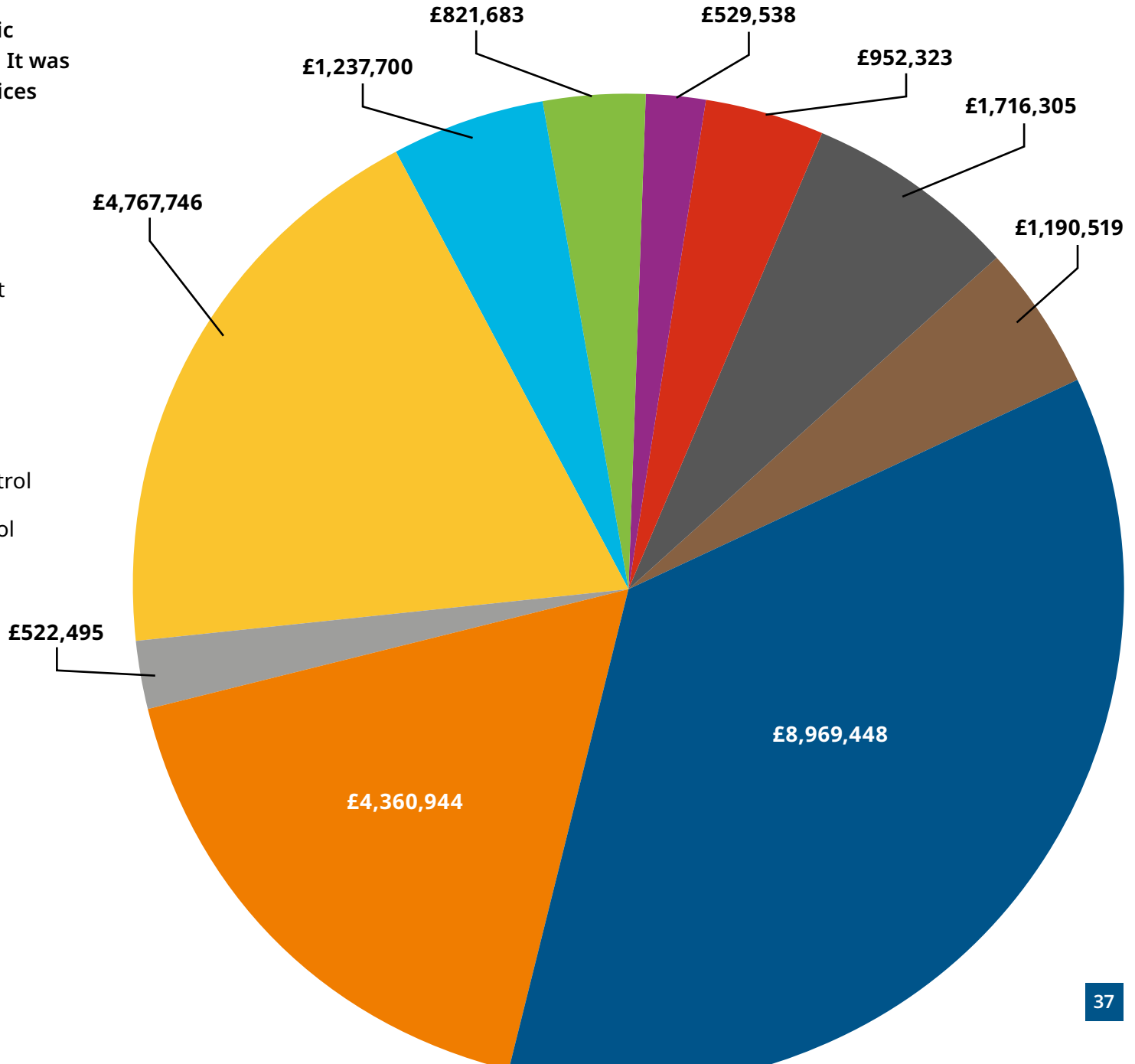
- Care & Support (including commissioned services)
- Provider Services & EC/PCAH
- Prevention and Service Development
- Mental Health Services
- Quality
- Integration & Engagement
- Resources Unit
- Director & Cross-Directorate



The Public Health spend against the Public Health Grant in 2023/24 was £25,068,700. It was spent on the following public health services and interventions as illustrated below:

Public Health Spend 2023/24

- Children’s public health programmes
- Sexual health - STI testing & treatment
- NHS Health Check programme
- Drug & Alcohol Misuse
- Obesity & Physical Activity
- Stop Smoking Services & Tobacco Control
- LA role in surveillance & disease control
- Stronger Communities Programme
- Targeted Prevention
- Services with focus on Older People



Section 6 - What we're going to do in 2024/25: some examples

Best start in life: we are starting a children and young people's Mental Health Multi-Agency System Transformation Programme, based on the iThrive model to ensure that young people receive the right level of support from the right part of the system in a timely fashion. We are examining ways to maximise the uptake of free school meals with eligible families to help them with the cost of living and to ensure schools receive the pupil premium, and we are looking to develop a schools toolkit to ensure that young people do not feel at a disadvantage within the school environment due to their family's finances.

Getting people moving more: we will support our Sport and Active Wellbeing colleagues to develop a new health and wellbeing offer, starting with a new all age weight management service. We will also be looking at wider ways in which we can support active movement and will develop a framework that helps us understand where we can make the most impact, from how we travel, how we play, through to how we stay stronger for longer.

Healthy ageing: the Director of Public Health Annual Report 2024 will be on the topic of healthy ageing and will include recommendations for the health and care system on how to support healthy ageing and create age-friendly environments. We will also continue to work with partners to encourage eligible people to apply for Pension Credit, introduce 'Accessible North Yorkshire' and develop the age-friendly network (voice of older people project), and make sure that council service plans promote healthy ageing.

Waiting Well: we are recruiting to newly created Occupational Therapy Assistant roles. These posts will help to shorten the waiting time for people who need occupational therapy support from the council. We are also making sure that people are getting useful information to help them while they wait, by reviewing the guidance for our teams and the letter that we send to people on the waiting list.

Reviews: having made significant progress reducing the number of people waiting for their annual review, especially people living in a residential setting, we need to make sure that people living in the community are receiving a timely annual review. To help us do this, the Countywide Reviewing Team will support the work already being undertaken by the Community Social Care Teams. We also want to understand more about a person's experience and what they want to achieve from their review, so we are planning a series of workshops with people to help us improve our processes and develop staff training and guidance.



Direct payments: we will continue our work to promote direct payments, including producing video content with direct payment recipients talking about their own experiences. We will develop pilots with trusted providers to explore new ways of using Individual Service Funds⁵ to better enable people to live life as they wish, and we will launch new online training for HAS staff.

Unpaid carers: during 2024/25, our plans to improve support for unpaid carers include co-designing an online carers assessment and improved information for carers; publishing an updated carers strategy and action plan; reviewing the direct payment offer to carers; supporting carers breaks; and strengthening our approach to identifying and recognising carers. The council's corporate director now co-chairs a regular Carers' Roundtable with leading representatives of carers' organisations to look at how we can improve our support to carers.

Reablement: we will work on improving the reablement offer by working in an integrated way with the NHS, for example expanding the Home First model, already piloted in one area of North Yorkshire. This involves reablement, occupational therapy and physiotherapy colleagues in the same team, working to a therapy plan. We will also continue our ongoing recruitment efforts to increase reablement staffing levels and ensure that we can focus on our core reablement offer.

Home First/Intermediate Care: jointly with H&NY ICB, the council has commissioned a range of bed-based intermediate care services for 2024/25, to be provided in NYC care homes, independent sector care homes, extra care housing and community hospitals. Looking beyond 2024/25, the council is working with H&NY ICB on a longer-term offer, delivered by trusted providers working with newly developed intermediate care hubs, and specialising in the delivery

of recovery and rehabilitation that meets people's needs in a flexible, responsive way.

Complex care: we are reviewing how we deliver care and support for people with complex conditions, including developing specialist care provision and a 'team around the person' approach. We want to ensure that our practice and commissioning is trauma-informed, and we intend to establish a trauma-informed care advisory board. We will continue our work to develop a shared definition of 'complex care', including our research partnership with Kings College London and our successful joint funding bid, with a pilot starting in October 2024. We have also submitted an application to [Making Every Adult Matter \(MEAM\)](#), a coalition of national charities.

⁵ An Individual Service Fund (ISF) is one way of managing a personal budget, where someone who needs care and support (and/or their family, advocate or carer) chooses an organisation to manage the budget on their behalf and works with them to plan care and support services and activities that will help them to achieve their identified outcomes. Individual Service Funds guide Aug2020 (skillsforcare.org.uk) accessed 05/08/2024

Our Involvement Framework: following the co-production of our new Involvement Framework and Charter in 2023/24, we will hold an event in autumn 2024 to launch our Framework and our teams will involve people and communities in the work to begin delivering our action plan, supported by our Involvement Team.

Workforce: the HAS People Strategy Group, made up of a cross section of HAS managers and officers, will co-produce a workforce development plan for the directorate addressing the key corporate [People Strategy](#) themes. This will include specific actions addressing recruitment and attraction, retention (including employee wellbeing), engagement and delivering a One Council approach.

Our improvement journey and preparing for CQC assessment: we will continue our work to understand, and be able to clearly explain, our strengths and areas for improvement in detail, and implement our action plans. This will help us to be ready for the new Care Quality Commission local authority assessment visit, which is likely to be in 2024 but, more importantly, drive our work to continuously improve the way we deliver support and deliver better outcomes for people.

Health Determinants Research Collaboration North Yorkshire: following our successful funding bid, we will continue our plans to create a health determinants research collaborative. Our aim, in partnership with Hull York Medical School, the University of Hull and the University of York, is to boost our research capacity and skills to help identify and address the issues affecting the health of the

people of North Yorkshire. Through this, we hope to assist the council to better tackle health inequalities and improve health outcomes.

Local Government: as well as the merger of 8 councils into 1 new North Yorkshire Council in April 2023, the new York and North Yorkshire Combined Authority launched on 1 February 2024. Its role is to use some of the money and powers that up to now have been held by central government, and work with local leaders and communities to invest in ways that will help to make York and North Yorkshire a better place for people to live, work and do business. We will work closely with the new combined authority to maximise opportunities to improve health and wellbeing for our communities. An elected Mayor leads the combined authority.



We hope you enjoyed our Local Account for Health and Adult Services 2023/24. If you have any feedback on our Local Account, it would be great to hear from you.

Please send feedback to: HASconsultation@northyorks.gov.uk

Contact us

Online: [northyorks.gov.uk/contactus](https://www.northyorks.gov.uk/contactus)

By telephone: **0300 131 2 131**

North Yorkshire Council, County Hall, Northallerton, North Yorkshire, DL7 8AD

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