

	<b>Health and Wellbeing Board</b> <b>9 March 2017</b>
<b>Title</b>	<b>Motion from Full Council, Volunteering in Care Homes</b>
<b>Report of</b>	Head of Governance
<b>Wards</b>	All
<b>Status</b>	Public
<b>Urgent</b>	No
<b>Key</b>	No
<b>Enclosures</b>	None
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<b>Summary</b> <p>The report informs the Health and Wellbeing Board of a Motion on Volunteering in Care Homes which was reported to Full Council on 31 January 2017. In accordance with Council Procedure Rule 23.5, if a Member's Motion is not dealt with by the end of a Full Council meeting, it will be referred to the appropriate committee for consideration and any necessary action. An opposition amendment Motion on Volunteering in Care Homes has also been referred to the Health and Wellbeing Board under this rule. Details of the original motion and the amendment are set out in this report.</p>
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<b>Recommendations</b> <p>1. That the Health and Wellbeing Board's instructions are required in relation to this item.</p>
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## **1. WHY THIS REPORT IS NEEDED**

1.1 On Tuesday 31 January 2017 Councillor Lisa Rutter submitted an Administration Motion to Full Council as follows:

### **1.2 Volunteering in Care Homes**

1.2.1 *Care homes have limited resources and there are specific areas of staffing where volunteers help and can help further. Thank you to all those who volunteer in Barnet. As our population grows more diverse there are language difficulties as people age. They prefer to use their original language or may become unable to communicate in English.*

1.2.2 *Council wishes to encourage volunteering and specifically those who might help with other languages. Council call on officers to create a register of volunteers with language skills who might be able to assist and make this list available as required.*

1.2.3 Councillor Gill Sargeant submitted an Opposition amendment to the Motion, to Full Council as follows:

1.2.4 *Care Homes are under increasing pressure to deliver services to a growing elderly population. Underfunding, at both government and local level, has left staff stretched and with little time to engage residents.*

1.2.5 *Care homes have limited resources, and there are specific areas of staffing where volunteers help and can help further. Thank you to all those who volunteer in Barnet. As our population grows more diverse there are language difficulties as people age. They prefer to use their original language or may become unable to communicate in English.*

1.2.6 *We have a large number of Chinese and Asian residents in the borough - many of whom are elderly and vulnerable for whom culturally specific services are not an option but a necessity, and it is essential that the council listens to those from these communities, and other communities, who understand their own cultural and linguistic needs best.*

1.2.7 *Unfortunately, recent cuts by this Conservative administration to social care organisations providing services to these residents undermine the importance of independence and user-led services, and represent an attack on grassroots voluntary and community services in Barnet who often do fantastic work in supporting and standing up for the local community.*

- 1.2.8 *The stark reality is that the Conservative-led council refused in their last budget, despite repeated representations from Labour councillors, to apply the full social care precept which could have mitigated the impact on these groups.*
- 1.2.9 *This is being compounded by a legacy of successive cuts passed on to local government services by a Conservative national government that has consistently refused to fund social care properly.*
- 1.2.10 *Council wishes to encourage volunteering and specifically those who might help with other languages. Council call on officers to create a register of volunteers with language skills who might be able to assist and make this list available as required. Council will support the individuals and organizations on the list.*
- 1.3 Council's Constitution, Full Council Procedure Rule 23.5 states that:
- If the Member's Motion is not dealt with by the end of the meeting, it will be referred to the appropriate Council Committee or sub-Committee for consideration and any necessary action. (However, if the proposer has specifically asked in his or her notice for the Motion to be voted on at that Council meeting it will be voted on without discussion).
- 1.4 The motion was not discussed or voted on at the Full Council meeting. Therefore the Health and Wellbeing Board are requested to consider the contents of the motion as set out in section 1.2 of this report and give instruction.

## **2. REASONS FOR RECOMMENDATIONS**

- 2.1 No recommendations have been made. The Health and Wellbeing Board are therefore requested to give consideration to the motion and provide instruction.

## **3. ALTERNATIVE OPTIONS CONSIDERED AND NOT RECOMMENDED**

- 3.1 Not applicable.

## **4. POST DECISION IMPLEMENTATION**

- 4.1 Post decision implementation will depend on the decision agreed by the Board.

## **5. IMPLICATIONS OF DECISION**

- 5.1 **Corporate Priorities and Performance**

5.1.1 If the Board propose to action in relation to this motion, any actions arising will need to be evaluated against the Corporate Plan and other relevant policies such as the Health and Wellbeing Strategy.

## **5.2 Resources (Finance & Value for Money, Procurement, Staffing, IT, Property, Sustainability)**

5.2.1 None in the context of this report.

## **5.3 Social Value**

5.3.1 None in the context of this report.

## **5.4 Legal and Constitutional References**

5.4.1 Council Constitution, Full Council Procedure Rules (section 23.5) states if the Member's Motion is not dealt with by the end of the meeting, it will be referred to the appropriate Council Committee.

5.4.2 The Council's Constitution, Responsibility for Functions (Annex A) sets out the terms of reference for the Health and Wellbeing Board which includes:

- To receive assurance from all relevant commissioners and providers on matters relating to the quality and safety of service for users and patients
- To directly address health inequalities through its strategies and have a specific responsibility for regeneration and development as they relate to health and care. To champion the commissioning of services and activities across the range of responsibilities of all partners in order to achieve this
- To promote partnership and, as appropriate, integration, across all necessary areas, including the use of joined-up commissioning plans across the NHS, social care and public health. To explore partnership work across North Central London where appropriate.
- Specific responsibilities for:
  - Overseeing public health
  - Developing further health and social care integration.

5.4.3 There are no legal references in the context of this report.

## **5.5 Risk Management**

5.5.1 None in the context of this report.

## **5.6 Equalities and Diversity**

5.6.1 None in the context of this report.

## **5.7 Consultation and Engagement**

5.7.1 All of these issues must be considered for their equalities and diversity implications.

## 5.8 **Insight**

5.8.1 None in the context of this report.

## 6. **BACKGROUND PAPERS**

6.1 Motion to Full Council, 31 January 2017:

<https://barnet.moderngov.co.uk/ieListDocuments.aspx?CId=162&MId=8818&Ver=4>