

Uttlesford District Council 19 July 2022

Written response to clarification question (Question 4) asked at 19 July 2022 meeting

Original Question: By Councillor Khan to Councillor Sutton, the Cabinet Member for Communities, Health, Youth, Public Safety, Emergency Planning and Liaison with the Police and Fire & Rescue Service.

“Many of our residents will be impacted by the current cost of living crisis and we know that many families are under pressure, worried sick about the future and therefore seeking help with mental health services via our General Practitioners. Earlier this year Council agreed our motion to provide a one off £100 grant to nearly 1000 working households in Uttlesford to help towards their Council Tax bills in 2022/23 providing some assistance.

Can the Portfolio Holder inform us what specific action is now being taken in conjunction with the local Clinical Commissioning Group (CCG) to help residents with poor mental health due to financial worries?”

Reply from the Cabinet Member for Communities, Health, Youth, Public Safety, Emergency Planning and Liaison with the Police and Fire & Rescue Service:

“There is close collaboration and ongoing work with the West Essex one health care partnership. Work has been undertaken to establish those residents at greatest need across the district and this work will progress under the Cost of Living and Wellbeing group that has been established. The Uttlesford Health and Well Being strategy is currently being refreshed and a workshop was held with partners to establish priorities going forward, mental health will be a priority for the Board. Health and Wellbeing monies will be available through the board for projects to help those with mental health concerns.

The community response hub continues to be available to those people in crisis and referrals can be made to the most appropriate agencies, including the social prescribers and the mental health outreach. The Frontline referral Service is available for both individuals and agencies to access help and support.

In regards to Household Support Funding:

1. Essex County Council (ECC) have received funding from the Department of Works and Pensions (DWP) to support Households in most need. ECC have

- distributed some of this funding to lower tier authorities to provide additional support of £80 to pensioner households.
2. At the Council meeting on 25 February 2022 an amendment to the budget was approved to increase support by providing a council tax rebate of £100 to working age residents on low incomes in receipt of Local Council Tax Support (LCTS).
 3. The current additional support schemes highlight the fact that the vulnerable, disabled and their carers on low incomes are not receiving any additional support at all. It is proposed that the above amendment to the budget is extended and that the vulnerable, disabled and their carers receive a council tax rebate of up to £80.
 4. The original motion approved stated the eligible date as the 31 January 2022, it is further proposed that the eligible date is extended to include claimants receiving LCTS at the 1 April.”

Clarification Question asked by Councillor Khan:

“What specific action is now being taken in conjunction with the Local Clinical Commissioning Group (CCG) to help residents with poor Mental Health due to financial worries?”

Reply from the Cabinet Member for Communities, Health, Youth, Public Safety, Emergency Planning and Liaison with the Police and Fire & Rescue Service:

“The working relationship between the district council and the CCG, which is now the West Essex Health and Care Partnership, is strong. Officers are linked in to the Health system on a number of levels with the Chief Executive being a Board Member for the Integrated Care Partnership. The Communities Manager is linked, as are other members of the communities team, with a number of working streams, and WEH&CP is a valued member of our Health and Wellbeing Board. The relationship was further strengthened throughout the pandemic and we have continued to work collaboratively since then. The UDC H&W team also work closely with the Primary Care Networks (PCNs).

Councillor Tayler, a well-respected local GP and Health and Wellbeing Board member, has also been consulted on the matter. GPs have always found it difficult to manage social problems in the medical context in which they work and this is particularly difficult at the moment because of the lack of manpower in primary care and also the lack of time. However in Uttlesford within the last two years there have been significant improvements in the way in which primary care can be linked with the voluntary sector and potentially local government, through the innovation of “social prescribers.” This is actually a central government initiative, but has been embraced locally by the PCN. The PCN is based much more locally, being divided in two between Uttlesford north and south. As a result they are able to work much more directly with the local practices than the CCG referred to in the question. GPs and other members of the primary healthcare team as well as others, are able to directly refer to the social prescriber when problems exist such as poverty,

loneliness, mental health concerns and indeed the effects of the cost of living crisis where “treatment“ is better through action and direct help rather than medication. As the social care prescribers are integrated into the community and into the practices, as well as working with the Communities Team, there is a direct link and this is proving extremely valuable. The UDC Health and Well-being Board has been directly involved with this initiative as has the voluntary sector. Therefore lots of efforts are being made, and in my view this is a very welcome, new and innovative commitment, joining up the various agencies. Various other important organisations should be mentioned, and are being integrated with much improved links. These include Citizens Advice (with its referral platform “Front Line”) and of course The Food Bank which also has an increasing role in the wider welfare of the community who are suffering food poverty. Primary care is able to link with all these initiatives.”