



Leicester
City Council

Minutes of the Meeting of the
ADULT SOCIAL CARE SCRUTINY COMMISSION

Held: TUESDAY, 19 JUNE 2018 at 5:30 pm

P R E S E N T:

Councillor Cleaver (Chair)

Councillor Chaplin

Councillor Thalukdar

Councillor Unsworth

In Attendance :

Councillor Dempster, Assistant City Mayor – Adult Social Care and Wellbeing

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1. APOLOGIES FOR ABSENCE

Apologies were received from Councillor Joshi (Vice- Chair) and Councillor Aldred.

2. DECLARATIONS OF INTEREST

There were no Declarations of Interest.

3. MINUTES OF THE PREVIOUS MEETING

AGREED:

That the minutes of the meeting of the Adult Social Care Scrutiny Commission held on 20 March 2018 be confirmed as a correct record.

4. TERMS OF REFERENCE

The Terms of Reference for Scrutiny Commissions were submitted.

AGREED:

That the Terms of Reference be noted.

5. COMMITTEE MEMBERSHIP

The Membership of the Commission for the 2018/19 municipal year was submitted.

AGREED:

That the membership of the Commission for the 2018/19 municipal year be noted as follows:

Councillor Cleaver (Chair)
Councillor Joshi (Vice-Chair)
Councillor Aldred
Councillor Chaplin
Councillor Osman
Councillor Thalukdar
Councillor Unsworth
(1 non-grouped place unallocated)

6. DATES OF MEETINGS OF THE ADULT SOCIAL CARE SCRUTINY COMMISSION 2018/2019

The dates of Commission meetings for the 2018/19 municipal year were submitted.

AGREED:

That the dates of Commission meetings for the 2018/19 municipal year be noted as follows:

19 June 2018
28 August 2018
16 October 2018
4 December 2018
22 January 2019
19 March 2019

7. PETITIONS

The Monitoring Officer reported that no petitions had been received.

8. QUESTIONS, REPRESENTATIONS AND STATEMENTS OF CASE

The Monitoring Officer reported that no questions, representations or statements of case had been received.

9. ADULT SOCIAL CARE ANNUAL OPERATING PLAN 2018/2019

The Strategic Director for Social Care and Education gave a presentation on the Adult Social Care Operational Plan for 2018/19.

As an introduction, it was noted that the Operational Plan:

- underpins delivery of our Strategic Priorities
- builds on previous year's progress
- delivery of 'change' not day to day business
 - process change
 - professional practice change
 - cultural change
- operationally focused – driven by Heads of Service

It was reported that the following six Strategic Priorities were being carried over from 2017/18:

- protecting from harm and abuse
- strength based, preventative – promoting wellbeing
- independent living – working age
- supporting remaining at home for older people
- improving transitions to adulthood
- improving customer experience

To build on the priorities from 2017/18, the following key points were noted:

- operating within budget

It was explained and noted that the £100m actual versus the £108m budget contained an underlying growth pressure due to increasing frailty and associated increases in care package costs.

- delivery of planned savings (exceeded and/or delivered early)
- progress on managing demand
- "getting the basics right" – consistency
- improving quality in local care market
- stable but fragile locally; not reflecting some national trends
- improved performance / outcomes (ASCOF provisional data)
- evidence of improved customer experience

In terms of the focus for 2018/19 the following priorities were reported and noted:

- training for staff around Mental Capacity
- work with care homes on improving notifications of concerns / abuse
- refresh of the use of Safeguarding Competency Framework with staff
- defining the model of 'strengths based'
- wellbeing through community assets
- evaluation model – 'strengths based'

The importance of the 'strengths based' model was highlighted and it was

reported that although officers considered this to be a proactive development, it was noted that as no template or current definition existed, officers were having to develop and define what a 'strengths based model of practice' would be in Leicester.

In concluding the presentation, the next steps for the Commission were noted. It was reported that specific planned reports through the year would reflect Operational Plan developments and impacts, and that a more detailed Period 9 report on progress of delivery would be submitted to the Commission in December 2018.

The Chair welcomed the presentation and requested questions and comments from Commission members. It was suggested by the Chair that particular attention could be given to the impact of community groups and clubs, and a greater focus on the use of community assets. It was recognised that Ward Councillors often were aware of pockets of activities within their Wards, including religious organisations, friendships clubs and schools that could be enhanced. A statement to this effect encouraging connections between community groups would be taken forward.

In respect of the positive and negative attitudes to the Plan, it was reported that a significant improvement related to the empowerment that Heads of Service had witnessed following the initial implementation stages of the Plan. It was noted that Heads of Service now felt able to make a difference in their individual areas of the service and had improved their engagement in the programme. Benefits had also been experienced from greater partnership approaches, both internally and externally.

In debating the enhancement of community assets, it was noted that in some Wards the schools were the principal area that could provide a greater focus of activity. In this regard the Commission referred to the expected positive implications of the change in designation of the Director's remit, which now included children's social care, early help services, learning and inclusion. It was also noted that opportunities for enhanced internal practices would also result due to the 'joined-up' approach.

Some concern was raised regarding the community assets that had been previously transferred to faith based organisations, and the need to ensure that universal use was available for the whole community was expressed.

The importance of the ongoing work of Leicester Ageing Together, which was looking at concepts and models on effective ways of connecting with external groups was noted.

In response to a question from the Healthwatch representative, it was reported that a pilot on the 'strengths based' approach had been organised and the challenges for staff were being assessed. It was expected that the effect on service users would be positive with a removal of barriers to reduce the support needed. The positive impacts of the initiative and revised focus were welcomed by Healthwatch and continued support was offered.

In conclusion, concerns in relation to the local housing allowance were expressed and it was reported that supported units would be provided in accordance with the Government's ambitions and in view of their review of funding.

It was AGREED that the presentation be noted.

10. BETTER CARE FUND OUTTURN REPORT 2017/2018

The Strategic Director for Social Care and Education submitted a report, which provided an update on the outturn of the Better Care Fund (BCF) activity and performance for 2017/18.

It was noted that the BCF programme was in its third year of delivery. The programme aimed to achieve reductions in unplanned admissions to hospital, to reduce admissions in long term care and to reduce delayed transfers to care. The detail of the Plan had been previously presented to the Commission on 5 September 2017 and a copy of that report was appended for reference, including the financial investments schedule.

The report submitted therefore provided a summary of the Plan's delivery in 2017/18.

The Commission noted the performance figures against national metrics, emergency admissions, and delayed transfer to care (DTC). It was considered that the performance demonstrated positive results for the service and the Chair requested that the Commission's thanks and appreciation be forwarded to all staff concerned with the results.

In analysing the results and data in the graphs submitted, it was recognised that some data seemed inconsistent over separate periods. In response, it was noted that as the data referred to continuing health care for some individuals with very complicated health situations, including severe mental health complications, the data was often skewed. Work continued to bring consistency of interpretation of the data and partnership approaches had been enhanced to minimise impacts.

In respect of the data concerning emergency admissions, it was reported that the position was generally positive; however emergency admissions activity had been adjusted to take account of coding changes affecting comparisons.

In respect of the comments in the report relating to permanent admissions, together with other areas, comment was made on the statement that 'there was no significant cause for concern'. Although appreciating the situation, it was suggested by Commission members that the service priorities, as reported in the previous item, would require enhanced communication.

In response, it was noted that as effectiveness was measured and case audits

were undertaken, the comments relating to the context of the increasingly ageing population were accepted. It was noted that feedback from individual case audits was accurate and had demonstrated positive performance. This opinion had been backed up by patient groups and feedback received from Healthwatch.

Having regard to the data submitted concerning 'End of Life' care, it was noted enhanced recognition of the issue could be included in future performance reports. It was suggested that a revision of the method of recording performance data could be investigated.

In considering the finance schedule, the reduction in the Clinical Response Team was discussed and it was noted that no significant impact was expected due to the alteration to the funding arrangements. It was confirmed that no reduction in the service offer would result.

It was AGREED that:

- 1) the report be noted;
- 2) An update be submitted on the work with NHS regarding the Over 85s and end of life services;
- 3) An update be submitted on nursing care home delays, including the trusted assessor process; and
- 4) Information on work to develop communications be provided (in light of the strengths-based approach potentially changing the format and presentation of data).

11. ADULT SOCIAL CARE PROCUREMENT PLAN 2018/2019

The Strategic Director for Social Care and Education submitted a report, which provided the Commission with an overview of the procurement plan/activities anticipated to be undertaken by the department during 2018/19.

It was reported that the Plan included the status of each entry, together with a risk rating in respect of contract value. The Commission were asked to indicate any particular entry requiring further information, or those areas for further involvement, including the preparation of the specifications, dependent on the procurement process.

The Chair suggested that two areas be selected for further scrutiny and it was suggested that the Disabled Persons Support Services and Advocacy Services be identified as areas the Commission wished to have more involvement in.

Councillor Dempster (Assistant City Mayor, Adult Social Care and Wellbeing) was invited to comment and confirmed that she supported the selection of the suggested areas above.

It was AGREED to note the report and to identify the areas for future scrutiny and involvement in the procurement process as the Disabled Persons Support Services and Advocacy Services.

12. SPENDING REVIEW PROGRAMME 4 - 2019/20 - CEASING FUNDING FOR THE INDEPENDENT LIVING FLOATING SUPPORT SERVICE

The Strategic Director for Social Care and Education submitted a report on the ceasing of funding for the Independent Living Floating Support service with effect from 31 March 2019. The Commission were asked to note the preferred option, which will contribute towards the Spending Review Programme 4, meaning savings of £5.5m.

Councillor Dempster (Assistant City Mayor, Adult Social Care and Wellbeing) was invited to introduce the item. Reference was made to alternative support that would be offered to individuals by the Enablement Service who would provide short term support.

It was reported that if the option was agreed, the Council would be required to give notice to terminate the existing contract. The numbers of posts affected and the consideration given to the continued delivery of the service and to minimise impacts was explained. In response to questions it was confirmed that Unions had been consulted in view of the potential redundancy process for four internal posts. The support offered to redeploy staff as per the Council's redundancy policy was noted.

In response to a question from the Healthwatch representative, the stated possibility in the report that some individuals may be at risk of losing tenancies was explained and it was considered that this risk was minimal. It was confirmed that the Independent Living Floating Support Service was non-critical and non-statutory.

In response to a further question it was confirmed that the organisational review Equality Impact Assessment that would be carried out to could be circulated to Commission members, if the proposal was ultimately agreed.

It was AGREED to note the preferred option.

13. ADULT SOCIAL CARE SCRUTINY COMMISSION WORK PROGRAMME

The Commission's Work Programme was submitted and noted.

14. CLOSE OF MEETING

The meeting closed at 8.00pm.

