

Minutes of the Meeting of the ADULT SOCIAL CARE SCRUTINY COMMISSION

Held: THURSDAY, 3 MARCH 2022 at 5:30 pm

PRESENT:

Councillor Joshi (Chair) Councillor March (Vice Chair)

Councillor Kaur Saini

Councillor Kitterick

In Attendance

* * * * * * * *

62. APOLOGIES FOR ABSENCE

Apologies for absence were received from the Director of Adult Social Care and Commissioning.

63. DECLARATIONS OF INTEREST

Councillor Joshi declared an Other Disclosable Interest in that his wife worked for the Reablement Team at Leicester City Council.

64. MINUTES OF THE PREVIOUS MEETING

AGREED:

That the minutes of the meeting of the Adult Social Care Scrutiny Commission held on 13 January 2022 be confirmed as a correct record.

65. PETITIONS

The Monitoring Officer noted that none had been received.

66. QUESTIONS, REPRESENTATIONS AND STATEMENTS OF CASE

The Monitoring Officer noted that none had been received.

67. HEALTHWATCH LEICESTER AND LEICESTERSHIRE

A representative from Healthwatch Leicester and Leicestershire delivered an overview of the report to the Commission.

As part of the discussions, it was noted that:

- The Chair commended the work carried out by Healthwatch Leicester and Leicester with male suicide. It was noted that a diverse workforce and collaborative work with partner agencies allowed for successful engagement with victims
- The Vice Chair noted that although a lot of the was encouraging, the work was linked to the health and Wellbeing Scrutiny and suggested that items that tie into the Adult Social Care Scrutiny Commission portfolio be brought to commission in the future
- Members of the Commission requested that Healthwatch have a continuous presence at future commission meeting's, and this was confirmed by the Healthwatch representative.

AGREED:

- 1) That the Adult Social Care Scrutiny Commission note the report;
- 2) That Healthwatch Leicester and Leicestershire be requested to commit to future meetings of the Adult Social Care; and
- 3) That the Adult Social Care Scrutiny Commission be kept informed on any future projects.

68. COVID19 UPDATE

The Strategic Director for Social Care and Education provided the Commission with a verbal update on the latest data. It was noted that:

- There was a contrast in the data that was collected in mid-January 2022 to the more recent data and that the numbers had fallen dramatically
- The rate of testing within care homes had also declined and was half of that in January 2022
- The number of positive cases had declined but the infection rates were drifting upwards
- There were no patients in UHL because of Covid
- The mortality rate was in line with the pre pandemic 5 year trend
- Although there had been considerable anxiety on the mandatory vaccinations for staff, these had since been revoked from 15 February 2022 and vaccinations would no longer be mandatory but were still advised
- Half of care home staff had received the booster vaccination which was in line with the national average and 85% of care home residents had received the booster vaccination, the third best in the region
- Work was now underway to begin for preparations for autumn 2022

It was further noted that, there was a level of uncertainty in the sector as a

result of the change in regulations around isolation and others. The DHSE were yet to produce guidance and that the expectation was now on the service providers influenced by insurers and that these trends would also apply to homecare services

It was suggested that although the fundamental issues remained, the demands on services had started easing and that waiting time for services following discharge from hospitals were shorter. It was noted that the underlying trend was that the Adult Social Care workforce was falling yet the demand was on the increase and the level of commitment from the staff was admirable.

The focus was now shifting away from Covid and moving towards the external assurance of Council Commissioning and non service delivery functions. This would take place over the next 18 months and was considered to be similar to an Ofsted style inspection, which the service had not received in over 10 years.

As part of the discussions, it was noted that:

- The DHSE had identified money that would be made available for the new work
- although it was suggested that this was not usually enough for the delivery of additional work as it did not consider the responsibilities of still having work to catch up on from previous years
- in response to the Chair, it was noted that, the service would essentially carry on how it had done during the pandemic without any huge changes and continue to deliver services effectively and safely.

AGREED:

- 1) That the Strategic Director for Social Care and Education be requested to keep the Commission informed on any future developments, and
- 2) That the staff within the care sector be commended for their hard work.

69. ADULT SOCIAL CARE PERFORMANCE MONITORING (QUATER 2) REPORT

The Deputy City Mayor for Social Care and Anti-Poverty introduced the report.

Members of the Commission suggested going directly into the discussions and as part of the discussions it was noted that:

- The report was substantially better than what had been provided previously
- Members suggested that it would not be helpful to take data right now as things were yet to settle down following the pandemic
- For reassurance data from previous years (2016/19) should be able to provide a forecast
- The narrative for CQC inspections were available and would be useful
- Members queried whether 0 referrals from people leaving prison was normal and were interested in what the service's role was when prisoners were released from prison

In response to members Officers noted:

- That the quarter 3 data would be compared to 2019/20 which would be referencing an unusual period which would not be useful
- In terms of the language used in the report it was noted that the term leavers broadly referred to deaths, however people often move away closer to family members
- The service did work with people leaving prison, but it was noted this
 would not show as new referrals, in most instances there was an
 ongoing relationship with them and that the Adult Mental Health Team
 dealt with a substantial number of people. More detail of this could be
 made available if Members requested it
- Throughout the pandemic the CQC had adopted a risk-based assessment and the service did not have regular routine inspections.
 Inspections were carried out with providers that needed improvement

The Vice Chair queried how the picture now would differ from that in quarter 4 and in response Officers noted that it would potentially be continued increase in overall demand, an increase in service users waiting for a review and potential increase in safeguarding alerts.

It was noted that despite all the challenges, 86.3% of people either agreed or strongly agreed that the service is allowing them to live the life that they want. Officers wanted to see this continued level of satisfaction for service users for the rest of the year.

The Vice Chair also noted that the long-term sickness of staff had also been alarming and took the opportunity to thank staff for their ongoing work and acknowledged the toll it could have on individuals.

AGREED:

- 1) That the report be noted, and
- 2) That the Strategic Director for Social Care and Education be requested to consider the comments and concerns raised by Members of the Commission.

70. EXTRA CARE DEVELOPMENT

The deputy City Mayor for Social Care and Anti-Poverty introduced the report and encouraged Members of the Commission to visit the various sites across the city and noted that dates could be arranged on request.

As part of the discussions Members of the Commission were interested in how their input could shape progress early on.

The Chair requested that site visits to existing homes be arranged in the new municipal year.

AGREED:

1) That the item on the Extra Care Development be added to the work

programme for 2022/23; and

2) That the report be noted.

71. LIBERTY PROTECTION, SAFEGUARDING AND DEPRIVATION OF LIBERTY SAFEGUARDS

The report on the Liberty Protection, Safeguarding and Deprivation of Liberty Safeguards (DoLS) had been submitted with the agenda documentation and therefore, Members suggested going directly into the discussion. As part of the discussion, in response to questions raised by Members it was noted that:

- The waiting list for the assessment process was not a unique issue but rather a national one with most care homes having extensive waiting list. Leicester City Council had one of the lowest number of people on their waiting list regionally and individual's risks were mitigated by the triage process which identifies those with the greatest needs and regular memos between the service and the care home responsible, this also helped address any concerns that are raised.
- Meeting on a quarterly basis with external partners and advocacy groups to help develop the information and identify individuals that may also need to be on the list
- There were 380 people that were subject to a standard level of authorisation on the waiting list and the time frame for which each person can be on the waiting list varied, with the majority granted standard authorisation within 12 months this enabled the service to monitor and review any DoLS and address and share any concerns that are raised.
- A shorter period of authorisation would usually be because of any concerns that may need to be addressed sooner
- Overall, annually approximately 550 people were assessed and adapting to technology had improved the number of assessments from previous years.
- Everybody assessed were not automatically eligible for the DoLS standard authorisation to be applied. In these instances, the service provided advice to the funding authority such as the health or local authority to best support the person and reduce the level of restriction in order to make sure it was in the best interest for the service user and some cases were referred to the courts for a resolution

In further discussions it was noted that:

- Although there was a one-year backlog, positive improvements had been made and the backlog had been reduced from where it was as a result of proactive effort to ratify the area
- The team size had reduced by half but continued to work. Recruitment had been carried out but unfortunately, retention of staff due to reallocation and maternity leave meant the team were short staffed.
- Overall, there was a struggle to interest people in training to be a Best Interest Assessor and difficult to attract qualified people in post with the uncertainty of the future of LPS
- The planning aspect for the future was a challenge for the service, a

- robust action plan had been drafted with some elements that were already being addressed
- With the National LPS Steering Group meetings now being reconvened the draft code of practice would be announced at some point this year and all authoritative bodies would receive an implementation date.

AGREED:

- That the item on the Liberty Protection, Safeguarding and Deprivation of Liberty Safeguards was an important area of the Commissions work and that the item be added on to the Work Programme,
- 2) That the Strategic Director for Social Care and Education be requested to update the Commission on any future progress, and
- **3)** That the report be noted.

72. ASSISTIVE TECHNOLOGY REPORT

The Director for Adult Social Care and Safeguarding introduced the item on assistive technology.

The Technology and Response Team Leader presented the Commission with the different technology that was available.

As part of the discussions the Technology and Response Team Leader responded to queries raised by Members of the Commission in how the different technology worked and supported service users within their own homes. It was noted that individual had their own requirements, and the right support was provided to suit individual needs.

Representatives from Healthwatch Leicester and Leicestershire commended the Officer for their presentation and queried whether the technology could be translated into the various languages spoken by service users across the City. Officers noted that the use of team members and families to record messages in the required language allowed for devices to relay messages in languages best suited for the service user.

It was further noted that the response team that is alerted through the technology devices was a Leicester City Council department and responders aim to be with the service user within 2 hours and anyone that had fallen is responded to within 30 minutes.

AGREED:

- 1) That the Assistive Technology item remain on the work programme for the Adult Social Care Scrutiny Commission; and
- 2) That Officers be thanked for their informative display of the assistive technology available.

73. SCRUTINY REVIEW INTO 'UNDERSTANDING THE INCREASING COST OF CARE PACKAGES WITHIN ADULT SOCIAL CARE BUDGETARY PRESSURES'

The Chair of the Task Group, Councillor March noted that the report on the review carried out would be presented at the Adult Social Care in the new municipal year.

The Scrutiny Policy Officer was thanked for her support during the task group review.

74. WORK PROGRAMME

The Chair noted that the items on the forward plan would be included in the work programme for the new municipal year.

75. ANY OTHER URGENT BUSINESS

There being no items of urgent business, the meeting closed at 7:32pm.