

Minutes of the Meeting of the ADULT SOCIAL CARE SCRUTINY COMMISSION

Held: THURSDAY, 5 SEPTEMBER 2013 at 5.30pm

PRESENT:

<u>Councillor Dr. Moore – Chair</u> <u>Councillor Chaplin – Vice-Chair</u>

Councillor Alfonso Councillor Fonseca Councillor Joshi Councillor Willmott

Also in Attendance

Councillor Rita Patel – Assistant City Mayor (Adult Social Care)

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27. APOLOGIES FOR ABSENCE

There were no apologies for absence.

28. DECLARATIONS OF INTEREST

Councillor Chaplin disclosed an Other Disclosable Interest as she had spoken with a number of members of the public relating to the Elderly persons Homes proposals (Minute 32 refers) and had also been one of the Councillors that had called in the notice of decision on the Older Persons Mental Health Day-Care Services item (Minute 33 refers).

Councillor Joshi disclosed an Other Disclosable Interest as his wife had formerly worked in the Reablement Team within Adult Social Care, but was still

employed by the City Council (Minute 32 refers) and that he was currently working for a voluntary organisation within mental health services (Minute 33 refers).

Councillor Moore disclosed an Other Disclosable Interest as she had spoken with families and staff in relation to the item relating to Older Persons Mental Health Day-Care Services item (Minute 33 refers).

29. MINUTES OF PREVIOUS MEETING

RESOLVED:

that the minutes of the meeting of the Adult Social Care Scrutiny Commission held on 11th July 2013, as previously circulated, be agreed as a correct record.

30. PETITIONS

The Monitoring Officer reported that no petitions had been received.

31. QUESTIONS, REPRESENTATIONS, STATEMENTS OF CASE

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

32. ELDERLY PERSONS HOMES PROPOSALS

Councillor Moore introduced the item and made reference to the previous meetings of the Scrutiny Commission that had discussed this area of work, and had been held on 1st July and 11TH July 2013. Responses by officers to the questions raised by members had been circulated and an opportunity had been given for Members to seek further information from officers on the responses given.

Councillor Moore stated that there was now a need to draw this review by the Scrutiny Commission to a conclusion so that a report could be prepared, setting out the conclusions reached, for consideration by the Executive.

Member's attention was drawn to the Responses report circulated and to an additional sheet 'Elderly Persons Homes – Financial Implications' that had been drawn up by the Chair and had been tabled at the meeting.

Capital Expenditure

Current Funding is:

Funding already approved	£3.0m
Sale of EPH Sites (Preston, Herrick, Elizabeth, Nuffield)	£1.41m
Sale of Brookside	£0.4m
NHS Funding	£1.23m
Total Current Capital Funding	<u>£6.04m</u>

(Table drawn up at the request of the Chair)

Option	Description	Cost	Funding to be found
Option A	1 Intermediate Care Facility. New Build and Fixtures and Fittings. No EPHs or Brookside (30 intermediate care and 30 respite beds)	£6.7m	£0.66m
Option B	4 Converted EPHs to provide intermediate care and residential care. Sell Brookside. (60 intermediate care and 72 residential beds)	£16.3m	£11.67m
Option C	3 Re-build EPHs to provide intermediate care. Sell Brookside. (60 intermediate care beds)	£11.61m	£6.97m (approx.)

Revenue Expenditure (table provided by officers)

Option	Description	Cost	Saving against current cost
'Do Nothing' Current Costs	8 EPHs + Brookside	£9.5m	0
Option A	1 Intermediate Care Facility. No EPHs or Brookside.	£6.0m	£3.5m
Option B	4 Converted EPHs to provide intermediate care and residential care. Sell/dispose 4 EPHs and Brookside.	£8.0m	£1.5m
Option C	4 Converted EPHs to provide intermediate care and residential care. Retain 4 EPHs and dispose of Brookside.	£9.5m	0

Councillor Moore stated that, in relation to provision of intermediate and residential care, she had visited one of the homes referred to in the proposals and had come away with the impression that there were no conflicts regarding the provision of these two areas of care within one facility.

Members had an opportunity to question and comment on the options reported as follows: -

Councillor Alfonso – concerns that funding not in place to retain or re-furbish existing homes, funding would likely be sourced from elsewhere within the City Council therefore affecting other services. Therefore she could see no other option than Option A.

Councillor Joshi – having looked at all options reported and having taken into consideration all the information available Option A – 1 Intermediate Care Facility, No EPHs or Brookside (Revenue Expenditure Table). Noted that moving people with care was important.

Councillor Willmott – Not here to make a decision. The City Council is in business to provide public services. Clearly been failure to invest properly to ensure retention of this service, figures tabled lacked credibility. Figures given give maximum costs for running local authority homes but minimum costs for income. At the last meeting it was established that the running costs of EPHs were similar between local authority and private sector homes, the difference came with staff wages and staff ratios. Conflict with Living Wage agenda by Deputy City Mayor.

Private sector care market was at risk of collapse, large debts and number of providers have gone bankrupt over last few years. By putting all eggs in one basket could lead to serious problems.

Suggest that, between now and full Council, all options available to the City Council, not taking the options tabled tonight at face value. Ther was a way forward that was not one of the options reported at the meeting.

Councillor Fonseca – Prefer Option A (Revenue Expenditure). Duty of care to support all people who need us, not just those in EPHs.

Councillor Chaplin – Expressed horror that consideration being given to close EPHs when elderly population is rising. Gov't is not demanding that we close homes, we also know that additional costs compared to private sector are down to staffing costs. Short-sighted to be considering closures now. Not reassured by the various versions of figures circulated, the Executive required accurate figures. Issue rests on sale of existing sites, what if sites were not sold, would this jeopardise whole intermediate care plans.

It was also apparent that all refurbishments of existing homes were not required immediately. En-suite facilities had also proved to be detrimental as this meant that certain elderly persons were then not likely to leave their room.

Provision of intermediate care and residential care within one site was purely a training issue. Information shared from Hampshire County Council showed that joint provision could be achieved within one facility. The City Council should in fact be approaching the Department for Health and NHS with view to assuring that nursing care was provided within residential homes.

Concerned re: equality issues for Herrick Lodge residents.

Concluded by stating that options worked up had not been thoroughly costed and assessed.

Chair – Re-iterated that Scrutiny Commission could not make a decision, but rather it would be making recommendations to Executive.

If staff were paid at a level similar to the private sector then the City Council would be able to retain homes, we chose to pay our staff a living wage. If other options of providing care were explored it could prove to be cheaper. Some people opt to go to private sector homes, often to be near families, and there was a need to strengthen inspection regimes in private homes and we needed to look at how best this could be done.

Regarding sale of EPHs, some people have said that this would be fine as long as the services were retained, purchasers of the EPHs must therefore be vetted thoroughly. There was however a need to respect the skills of staff and voluntary redundancy must be offered. The Scrutiny Commission were pursuing the issue of providing nursing care in homes.

Unhappy about proposal for a 60 bed unit (Option A) but was happier about several smaller units locally and the retention of EPH provision in the City.

• Use funding set aside for 60 bed unit to fund re-build smaller units on sites of 4 homes

providing residential/intermediate care.

- Work with DoH and NHS to provide nursing care on site
- Monitor work of private sector
- Look at provision of Extra Care and nursing care in homes.
- What sort of provision were those private providers who have expressed interest in our homes looking to provide

Councillor Willmott – not prepared to recommend the sale of any of the City Council EPHs to private sector. Not sure of the viability of re-building 4 homes. £6m quoted was only available if the sites of other homes were sold. Support the pursuit of Extra Care and Nursing Care in homes.

The meeting adjourned to allow consideration of the various Options tabled. It became apparent that certain information was not available at the meeting and that officers had not had an opportunity to cost the alternative options put forward.

Councillor Joshi – Having listened to debate still of opinion that Option A (Revenue Expenditure) was the favoured option.

Chair – uneasy around Option A as this would not offer residential care in future should we want it.

Propose Option C (Capital Funding) – Re-Build 3 EPHs to provide intermediate care. Also look to provide Extra Care and look at the Hampshire model. Use the budget available in a more creative way.

Councillor Willmott – Amendment - suggest keeping all 8 homes and re-furbish where appropriate, provide residential and dementia care where appropriate and that the City Council look to make available funding for Extra Care provision.

Chair – stated that there was a divergence of opinion. Could take a vote but there was obviously a need for further information that was not available to members and officers at this meeting and that there was a need to get some of the figures referred to firmed up.

It was suggested that a report would be prepared recording the discussions that had taken place at this meeting and, following the draft report being circulated to members for comment, it would be referred to the Executive as a record of the views of the Scrutiny Commission members.

RESOLVED:

that a report to be prepared recording the discussions that have taken place at this meeting and, following the draft report being circulated to members for comment, it would be referred to the Executive as a record of the views of the Scrutiny Commission members.

33. OLDER PERSONS MENTAL HEALTH DAY CARE SERVICES

Following the announcement by the City Mayor of a forthcoming proposal,

following statutory consultation, to close Martin House Day Centre and Visamo Day Centre that provided services for older people with mental health issues, a statutory call-in by members was made and it was agreed that the issue be brought to this Scrutiny Commission.

The Scrutiny Commission received a report that set out information relating to the consultation process and the key findings were detailed within the report. The recommendation within the report was to close both services as the quality of service had been adversely affected by the low numbers using the service and therefore they were no longer financially viable.

A number of options were set out in the report and these are set out below: -

Option 1. Do nothing. This is not an option because the service is no longer adequate for service users and is financially unviable.

Options 2. Expand the services offered by actively marketing and attracting people into the service. The service would need to be totally redesigned and change the way it operates in order to ensure the long term sustainability as evidence already shows that people are not choosing traditional day services and are instead opting for community based services that offer greater innovation and flexibility, including evening and weekend provision.

Option 3. Combine the two services to run from one building. This is not a viable option as based on current evidence, the combined service would still be relatively small and would therefore be unaffordable when applying true costs of the service which currently stand at £111 per person per day, compared to an average of £28 per person per day in the voluntary sector.

Option 4. Develop the services into an Enablement /outreach service. Whilst this fits in with current model around the future of inhouse provision, the proposal is premature as the redesign of inhouse day care is in the early stages. Substantial change of this nature would mean current job descriptions and salary scales would have to be consulted on and revised and the opportunity to be part of the new service offered to a wider group of staff.

Option 5. Close the service and move existing service users to alternative provision. This would ensure the provision of suitable stimulating services for individuals and deliver a cost effective solution.

- In order to ensure the most sensitive and appropriate method of transition both service users and staff at the current OPMH service, the Council will:
- Carry out an assessment of each individual during August and September 2013. This will be done with the full involvement of family carers and with the offer of advocacy support. The assessments will be carried out and followed through by a

- dedicated team of care managers who will then support individuals and their families to find appropriate services that meet their needs.
- There are currently 152 vacancies within this type of provision in the voluntary sector and a number of other organisations keen to explore extending their offer to this client group.
- The services include specialists in Dementia and Alzheimer's and services that are able to meet the cultural needs of specific groups.
- Following the transition of individuals to the new services care management officers will be identified to track their progress at 3, 6 and 12 months in order to ensure the new arrangements are meeting people's needs.
- It is envisaged that staff will be served 3 months' notice at the end
 of August 2013 at which point they will be eligible to apply for
 redeployment opportunities across the whole council.
- Where possible this may mean some staff will transition into the existing provider service and replace agency staff, thus bringing more stability and continuity in the services provided.

Councillor Willmott – expressed concerns at the proposals and questioned whether we should be closing both centres. It was realised that not all provision for people with mental health issues was with the City Council and that there was no overall consistency. Whilst it was accepted that the two centres might not be the best way to continue he strongly felt that the City Council should retain some provision. The report provided did not specify what alternative provision was in place, where, and what times. Councillor Willmott questioned whether the alternative provision was reliable.

Councillor Chaplin – recognised the need for the Council to make savings and recognised that the services outlined were not as well used as previously. Councillor Chaplin expressed concerns that Adult Social Care did not communicate their services particularly well, along with other areas of the Council. There was a need to undertake a thorough assessment of what was communicated. Councillor Chaplin also expressed concern that the report did not specify who the other providers were, and outline what they did.

Councillor Joshi – stated that his main concerns centred around the Financial Implications and expressed concern that there was currently a lot of uncertainty within the voluntary sector. Having looked at the Options referred to in the report Councillor Joshi favoured **Option 5**.

Councillor Chaplin – Suggested the following recommendations: -

- that communication issues around Adult Social Care services be addressed, the emphasis being to be proactive about communicating services.
- ii) that those people who may be moved from one service to another be subjected to the necessary care and that the necessary checks are also put in place.

Councillor Patel – welcomed the recommendations proposed by Councillor Chaplin around communications and gave assurances that this area was improving. Regarding the comments around the voluntary sector, it was apparent that all areas were being squeezed financially and that when capacity was being talked about it must relate to real capacity. Councillor Patel stated that she would like officers to respond to the comments made in detail.

Officers reported that the City Council had a personalisation programme in place and people were able to calculate their own personal budget. Because City Council services were more expensive compared to the voluntary sector people tended to go to the voluntary sector to get better value for money. A list setting out voluntary sector provision and vacancies was available and processes were in place to monitor care of those voluntary sector services.

Gaynor Garner (UNISON) – stated that she was aware that this topic had previously been discussed by the Scrutiny Commission, prior to the statutory consultation, but UNISON had not had the opportunity to speak to staff and provide feedback to the Scrutiny Commission in time for the meeting. Of the options specified in the report UNISON favoured **Option 4** to develop the service into an enablement service.

Officers informed the Commission that voluntary sector providers offered greater flexibility in what they offered. Enablement Services were something that the City Council was looking at for the future. Day Care Support was already in place to support people.

Councillor Alfonso – questioned the capacity and current usage of each of the two City Council facilities.

Officers stated that the combined capacity was some 40 people per day, the current usage being only some 8-9 people per day across both facilities.

Councillor Joshi – sought explanations as to the main reasons for the drop in numbers using the two City Council facilities.

Officers stated that the main reasons were deaths, a move to residential care and the move to voluntary sector facilities to achieve better value.

Chair – stated that this was again a situation whereby closure of City Council facilities were being recommended and a reliance placed on the voluntary sector to provide services. Councillor Moore suggested that the position outlined in the report should be noted and that communication issues around Adult Social Care services be addressed, the emphasis being to be proactive about communicating services.

Councillor Willmott – stated that he was really concerned that the City Council would no longer have a provision of day services for older people with mental health problems. Councillor Willmott expressed a view that a officers should be asked to look at a combination of **Options 3 and 4** should be looked

at with the aim of reducing costs. Councillor Willmott stated that he was not convinced of the costs quoted in the report.

Councillor Chaplin – stated that maybe if the two facilities were not closed then the various options could be looked at that would be cheaper than the voluntary sector. If a re-configuration was being considered then surely all services provided should be looked at as a whole.

At this point the Chair suggested that votes be taken on the two options favoured by members: -

- i) that officers be asked to look at a combination of Options 3 and 4 referred to in the report, with the aim of reducing costs.
- ii) that Option 5 be supported, close the service and move existing service users to alternative provision

Voting took place and 2 members voted for recommendation (i) and 3 members voted for recommendation (ii).

Recommendation (ii) was carried.

RESOLVED:

that, having considered the report and the options put forward, the Scrutiny Commission support Option 5, the closure of the day service for older people with mental health problems and the moving of existing service users to alternative provision.

34. ENABLEMENT PILOT AND THE COMMUNITY INCLUSION TEAM

Members were informed that in July 2012 the Executive had given approval to a 6 month Enablement Pilot to support people with learning and/or physical disabilities attending the Council's day care services to experience greater community based opportunities. The pilot had started in September 2012 with 20 people from the Braunstone, Belgrave and New Parks areas of the City and the pilot had then finished in March 2013. In July 2013 the Executive had stated that they were minded to approve a roll-out of the Enablement Pilot, renamed the Community Inclusion Team.

Members were offered a brief presentation but were of the opinion that, as the accompanying report had been issued the previous day it was suggested that members approach officers on an individual basis if they required further information on the work of the Community Inclusion Team. Due to timescales, the Chair noted that a decision on this proposal would be made before the next meeting of the Scrutiny Commission it was suggested that the outcome be fed back to members at that meeting.

RESOLVED:

that the information be noted and any individual queries be taken up with officers during the next week.

35. DRAFT WORK PROGRAMME 2013/2014

The Scrutiny Commission received the updated Draft Work Programme 2013/14 for consideration and comment.

RESOLVED:

that the updated Draft Work Programme be noted.

36. CLOSE OF MEETING

The Chair closed the meeting at 9.10pm.