



Leicester  
City Council

Minutes of the Meeting of the  
ADULT SOCIAL CARE SCRUTINY COMMISSION

Held: THURSDAY, 5 DECEMBER 2013 at 5.30 pm

P R E S E N T :

Councillor Dr Moore – Chair  
Councillor Chaplin – Vice Chair

Councillor Alfonso  
Councillor Fonseca  
Councillor Willmott

In Attendance

Councillor Kitterick  
Councillor Senior

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**62. APOLOGIES FOR ABSENCE**

Apologies for absence were received from Councillor Joshi and from Philip Parkinson, (Chair of Health Watch Leicester).

**63. DECLARATIONS OF INTEREST**

Councillor Fonseca declared an Other Disclosable Interest in the general business of the meeting, in that his son worked for a charity involved in adult social care.

Councillor Willmott declared an Other Disclosable Interest in the general business of the meeting, in that a relative used adult social services.

Councillor Dr Moore declared an Other Disclosable Interest in agenda item 6, “Mental Health Care”, as she had close family members who had used mental health services.

In accordance with the Council’s Code of Conduct, these interests were not considered so significant that they were likely to prejudice the Councillors’ judgement of the public interest. They were not, therefore, required to withdraw from the meeting.

#### **64. MINUTES OF PREVIOUS MEETING**

RESOLVED:

That the minutes of the meeting of the Adult Social Care Scrutiny commission held on 7 November 2013 be approved as a correct record.

#### **65. PETITIONS**

The Monitoring Officer reported that no petitions had been received.

#### **66. QUESTIONS, REPRESENTATIONS AND STATEMENTS OF CASE**

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

#### **67. MENTAL HEALTH CARE**

The Commission noted that Councillor Cooke, Chair of the Health and Wellbeing Scrutiny Commission, had been invited to the meeting to present an overview of that Commission's review of the mental health services for working age adults in Leicester, but was unable to attend the meeting.

Councillor Dr Moore reminded Members of the interest she had declared in this item.

The Commission suggested that it would be useful to establish timescales for the commissioning priorities identified in the report in to timescales, so that an indication could be obtained of what would be done and how. This could be assisted by making the recommendations more precise, so that achievements could be evaluated with greater accuracy.

Members were reminded that, since the review report had been produced, the Health and Wellbeing Scrutiny Commission had undertaken a review of the Bradgate Unit, which currently provided mental health services. It therefore was suggested that the Adult Social Care Scrutiny Commission could review dementia services. This could focus on older vulnerable people, in order to not repeat the work done by the Health and Wellbeing Scrutiny Commission.

RESOLVED:

That it be agreed at the next meeting of this Commission how the review of services for people with dementia will be reviewed and where this review should be included in the Commission's work programme.

## 68. REPRESENTATIONS ON THE HOUSING SUPPORT SERVICES CONSULTATION

### a) Representations

At the invitation of the Chair, the Commission received representations from the following people on proposed changes to housing related support services and how people would be affected if those changes happened.

#### i) Alistair Jackson – Chief Executive of Leicester Quaker Housing Association

Alistair Jackson introduced himself to the Commission, explaining that Leicester Quaker Housing Association offered approximately 70 units of sheltered housing, plus a care home and day centre specialising in dementia care. Residents at John Woolman House were able to live independently in sheltered housing. Without the support services provided, many of these people would have to live in more expensive accommodation and some would be living on the streets.

It was understood that the Council had to make cuts in its services and so was considering how it needed to change the services it provided. Under the current proposal, the Leicester Quaker Housing Association would no longer manage the services offered. Instead, the Council would operate a centrally managed service, which would be phoned when a need arose and an officer would attend.

Tenants unanimously wanted to keep the current service and management system, as tenants knew the sheltered housing officers, and the housing officers had full knowledge of the tenants. The officers worked 8 hours a day and Saturday mornings, so were available when needed by the tenants. Under the new model, officers would only be present for a few hours in the week, at pre-set days and times. This would reduce the flexibility that the current service had to respond to tenants' needs and could result in crisis situations not being dealt with as effectively as they could be at present.

Alistair Jackson gave examples of the sort of work currently done with tenants. These showed the ability of officers to work with people to enquire beyond immediate problems to identify reasons for those problems that were not immediately obvious. They also were able to work closely with tenants to manage behaviour that otherwise could jeopardise their tenancy.

Leicester Quaker Housing Association was happy to continue to provide its current services and the tenants wanted the Association to do this. This would give the Council the savings it needed, while giving the tenants a good quality of life. It also would keep them out of hostels and off the streets, so the Council would not have to increase the budgets for work in those areas.

In reply to questions from the Commission, Alistair Jackson confirmed that, if there were funding cuts, the Association would need to be more focussed

about how it defined tenants' vulnerabilities and how these were dealt with. It also would review its business model, in order to keep staff and find other ways of funding its work.

The Commission expressed concern that:-

- If the service was centralised, the required savings would not be achieved if the same service was not provided for all of its sheltered accommodation;
- A way of protecting the most vulnerable people affected by these proposed changes needed to be found; and
- If these services were not protected now, it could be difficult to return to providing them in the future, so the Council had to plan for that eventuality.

ii) Derek Seaton – Tenant at Vernon House

Derek Seaton introduced himself, explaining that Vernon House was a sheltered housing unit with 22 flats and that he spoke for all the tenants there.

He stressed that elderly people chose to live in sheltered housing so that they could live independently, but with support. The concept of sheltered housing had been readily accepted by the Council, but the Council was now threatening its provision at a time when there was an increasing elderly population.

Derek Seaton then made the following points:-

- The scheme manager currently worked Monday – Friday and when they were not present support was provided through a 24-hour emergency service. The changes proposed by the Council could lead to a reduction in the hours of the scheme manager. At the same time, tenants would be assessed and then buy the level of support they needed. This could lead to increased anxiety for the tenants;
- Vernon House currently had a programme of social events that was very important to tenants;
- One reason why people chose to live at Vernon House was that there was a manager there. The manager could help with a wide variety of things, including more personal tasks such as filling in forms;
- There was concern that security at the flats could be compromised by individual support workers coming and going at different times. It also could be difficult to verify who people visiting the flats were; and
- It was proposed to withdraw funding for the alarm system, but this was a vital lifeline in an emergency, especially for tenants who were unwell or living alone. It cost approximately 45 pence per day and was one of the

most cost-effective and important service provided by the Council. It was recognised that tenants could buy their own services, but if they chose not to do so, situations could arise where no-one was aware of an emergency.

In summary, Derek Seaton explained that sheltered housing accommodation was very worthwhile for the tenants and the general public, with local residents in the area of Vernon House also being very concerned about the proposed changes to services. The independence, security, social life and degree of dignity currently experienced by the tenants could change, which could result in those tenants becoming vulnerable, depressed and anxious. As a result, they could need to move to residential accommodation, where they would need other Council services, so the proposed changes would be counter-productive.

iii) Ruth Raiser – Resident of John Woolman House

Ruth Raiser explained that:-

- She had chosen to live in John Woolman House on the basis of the staff and services available and its security;
- The services provided by the staff were varied and responded to needs as they arose. For example, if a resident's medications were not delivered, the staff were able to resolve this situation very quickly. Under the proposed arrangements this was not likely to be the case; and
- The idea that the new proposals were about individual choice was challenged. Individuals made their choice when they moved in to their accommodation and that choice was based on many factors.

The Commission was asked to consider whether the proposals met the needs of elderly people and whether they were cost-effective, as everyone was aware of what the consequences could be if the services were not provided. Sheltered housing let people live their own lives, especially as they became more frail, so should be given increased support.

iv) Councillor Senior – Castle Ward

Councillor Senior introduced herself and explained that she was speaking on behalf of all of the Castle Ward Councillors.

Housing support and the alarm services had many human and financial benefits. People commonly wanted to retain their independence and stay in their own accommodation as long as possible. This was made possible by things such as the alarm system, which was simple and cost-effective. Costs could still be examined, but it was sensible for all tenants in sheltered housing units to have access to the alarm system.

The changes were being suggested as part of the personalisation of services, but it was questionable that it could be called personalisation if they were not

receiving the support they needed. If tenants did not have an alarm in their home, they could be very vulnerable if, for example, they fell or were taken ill. It therefore was sensible for all of the tenants in sheltered accommodation to have an alarm.

It also was sensible to have a team of support officers in the sheltered housing block. This made services accessible and the accommodation safe, as well as helping to create a sense of community.

The Ward Councillors therefore requested that an Equalities Impact Assessment be done for these proposals.

#### **b) General Discussion**

The Chair thanked all those making representations for their contributions and assured them that their representations would be considered when the Commission made a formal examination of the proposals.

It was recognised that the reliability and consistency of the services currently provided were important to tenants. They also were personal, as tenants and officers knew each other and it removed the pressure of making decisions from tenants where appropriate. Personal budgets often were devoid of this. There was a risk therefore that just looking at financial savings could mean that things that were not quantifiable would not be taken in to account.

Disappointment was expressed that there were no members of the Executive at the meeting to hear the representations that had been made.

RESOLVED:

That the representations recorded above be noted and considered as part of this Commission's formal review of the proposals for the reshaping of Housing Related Support Services.

### **69. DOMICILIARY CARE REVIEW**

The Commission received the scoping document for the review of Domiciliary Care. It also noted that background information on the domiciliary care tendering process was included in the exempt part of the agenda. Concern was expressed at the large volume of information that had been included, and that there was no index and some of the pages did not appear to contain much, if any, information.

The Commission raised the following comments and questions during discussion of the scoping document:-

- Zero hours contracts should not be being used;
- The aspirations contained in the service specification document were good, but could be hard to implement, as low paid staff could be less motivated towards them;

- Rather than just assess people's very basic needs and provide a level of service that met them, people should be given the service they wanted. For example, they may want to visit a day centre, or go shopping, but if this was beyond their basic needs this level of service would not be provided;
- If a service user was difficult, or refused to accept care, or the care provider felt unable to continue to provide care for someone, the Council would work with the user, and their family if appropriate, to manage such situations. The Council's statutory duty to provide care and support would remain, but carers could not be required to work with an individual in these situations. If this developed to the extent that an agency could not continue to provide a person's care, alternatives could be examined, such as establishing a tailor-made service from the user's personal budget, or linking the user to a personal assistant;
- How was the break-down of time for visits worked out? Information also was needed on what was included as activities and how time was allocated to these, as there currently appeared to be a mismatch between aspirations and outcomes;
- Approximately 6% of users had 15 minute visits allocated to them. However, these could be part of a package that included other visits on the same day of different durations. The Commission requested that the actual number of people receiving 15 minute visits be provided;
- Work was underway to phase out 15 minute visits over the next 12 months, as users' reviews were completed;
- Information was requested on who the providers were;
- A quality assurance framework was built in to the Domiciliary Care framework. This could be made available to the Commission;
- The Commission asked whether any form of "mystery shopping" was done and, if so, how often and what sample size was used. It also requested that information be provided on whether service users were asked for feedback on their care;
- It would be useful for the Commission to hear the experiences of users of domiciliary care and / or their families, in order to get a broad overview of the service;
- Some users could be concerned about spending money. This could cause problems if their families were unaware of the user's resources, or the user had no family with which to liaise; and
- Home carers could support users' very specific needs and could identify issues that prevented adequate care being given, (for example, if there was

inadequate hot water in a home). When the things that were important to individual users were understood, it was usually possible to work to accommodate them. Service contracts stipulated that employee training and development work had to be carried out by suppliers to enable carers to work with these situations.

It was noted that the Chair had requested the opportunity to accompany a care worker for a day, to get a better understanding of their work. Confidentiality and privacy would be respected at all times and appropriate arrangements would be made to ensure this.

NOTED:

- 1) The scoping document for the review of Domiciliary Care;
- 2) The concerns of the Commission about the way that background information to this item had been presented; and
- 3) That examples of anonymised care plans could be viewed via the Democratic Support Officer.

RESOLVED:

- 1) That the Communications Manager be asked to work with the Commission to issue an appeal for users of domiciliary care and / or their families to discuss their experiences of domiciliary care, both good and bad, the appropriate setting for these discussions to be decided;
- 2) That the Director of Adult Social Care and Safeguarding and the Director of Commissioning and Care Services be asked to provide the Commission with the information requested during discussion on this item, as recorded above; and
- 3) That the review of Domiciliary Care continue at the Commission's next ordinary meeting.

*(See also minute number 74 below)*

**70. OUTLINE TIMETABLE FOR THE FUTURE OF THE COUNCIL'S ELDERLY PERSONS' HOMES**

The Director for Care Services and Commissioning (Adult Social Care) submitted a report setting out an indicative timetable for the actions needed to support existing residents living in the Council's Elderly Persons Homes that were due to be closed.

The Director for Care Services and Commissioning (Adult Social Care) advised the Commission that, once individual assessments had started, an overview would be provided for each resident, so that Members could see how the moves from homes that were closing were progressing.



In response to questions raised during discussion on the report, it was noted that:-

- Officers had identified residents placed in city homes by Leicestershire County Council. Details of these could be made available;
- Some residents had indicated that they would prefer to move as soon as possible, but residents' assessments had not started yet;
- Residents' moving plans would be reviewed as they progressed through the process;
- No detailed discussions had been held yet with family members regarding preparing residents' new accommodation with appropriate equipment and/or furniture prior to their move;
- Work was underway to make sure that governance was in place so that a proposal for intermediate care could be drawn up, but a formal proposal had not been drafted yet;
- Due to the absence of the Assistant Mayor (Adult Social Care) due to ill health, it had not been possible to progress the establishment of an Elderly Persons' Commission; and
- Options for the structure of Intermediate Care provision would be included in a report to the Executive. Enough detail would be included to see the requirements and implications of each alternative. A preferred option would be identified and details provided of how it was anticipated that it would be delivered.

RESOLVED:

That consideration of the options for Intermediate Care provision be included in the Commission's work programme.

## **71. PROPOSAL FOR THE FUTURE OF MOBILE MEALS PROVISION**

The Director for Care Services and Commissioning (Adult Social Care) submitted a report setting out the results of a statutory consultation on a proposal to stop the Council's current mobile meals service and help people to prepare or obtain meals in alternative and more flexible ways.

In response to questions from the Commission, the Director for Care Services and Commissioning (Adult Social Care) advised that the consultation did not explicitly ask people if they did not want to lose the mobile meals service. Instead, it asked how stopping the service would affect them and what the impact of obtaining a meal in an alternative way would be.

The direct question was not asked, as the Council had to move to providing service users with personal budgets and people were choosing other options, so the current service was not financially viable. In order to assess the impact

of the changes, respondents therefore had been asked if they had any views about the fairness of the changes and the ability of a new service to still give help to those who needed it.

The consultation findings showed that people still wanted a hot meal, but there were issues about quality. For this reason, one of the options for the service was to provide a managed service through the Council from a Framework Agreement that included nutritional and quality standards. This would mean that the Council could buy meals where wanted, meaning that recipients would not have to manage the financial aspects of this.

Members stated that it appeared that the consultation had been worded to obtain a preference for this option. This in turn made it appear that the consultation was about meeting a budget savings target, not about providing a service.

Members also asked what would happen to staff if no providers tendered for the contracts and so staff could not be transferred under the Protection of Employment (Transfer of Undertakings) Regulations (TUPE). In reply, it was explained that the possibility of costs increasing and staff being transferred to a new provider were acknowledged as potential risks. Soft market testing had indicated that there were providers who could provide the service required within the budget, so it was felt that the risk could be managed. The full cost of the meals provided, and the subsidy paid by the Council, had been identified in the consultation so that service users were aware of those costs.

The Commission expressed concern that consultees had not been given the option of not changing anything. This meant that the consultation would not achieve a full range of answers and gave the appearance of trying to skew answers in favour of certain outcomes. The Commission also expressed concern that no pilot had been undertaken. Officers confirmed that this consultation had been discussed with the Council's corporate unit dealing with consultations to ensure that the consultation was balanced and fair.

The Commission also was concerned that, from the information presented, the majority response from the consultation was that service users wanted to keep a mobile meals service, but this did not accord with the requirement to reduce costs to the Council. Officers confirmed that service users who needed it would still receive a hot meal under the proposed new arrangements, but there would be more opportunities to co-ordinate the service. In this way, savings would be achieved, but individuals would still receive the service they needed.

The Commission acknowledged that meals would continue to be provided, but was concerned that the quality of the service from an external provider could be lower than that given by the current Council service. The majority of respondents stated that they liked the current service and the way that it was provided, so Members suggested that one option available was to try the suggestion from the trades unions that the service be remarketed and tested for a few years.

The Commission welcomed the inclusion of consideration of winter care pressures in the report submitted.

RESOLVED:

- 1) That the Executive be recommended to consider the way that consultations are carried out in view of the Commission's concerns about the consultation on the Mobile Meals service recorded above; and
- 2) That, in view of the preference shown through the consultation for a continuation of the current mobile meals service, the Executive be asked to reconsider the way forward for this service and to adopt option 2, (expand the in-house service).

## **72. WORK PROGRAMME**

Members expressed concern that it had not been possible to progress some of the Commission's work programme in the absence of the Assistant Mayor (Adult Social Care) due to ill health and queried whether her portfolio responsibilities could be managed by another Executive member in her absence.

NOTED:

That a meeting of the Shared Lives review task group will be held on Friday 13 December 2013, which Liz Kendall MP will attend.

RESOLVED:

- 1) That the Chair of this Commission be asked to liaise with the City Mayor and/or Deputy City Mayor to determine if the portfolio responsibilities of the Assistant Mayor (Adult Social Care) can be managed by another Executive member in her absence;
- 2) That the Chair and Vice-Chair of this Commission review how the work programme of this Commission can be managed in view of the outcome of the consultations referred to in resolution 1) above; and
- 3) That consideration of Housing Related Support Services be deferred to February 2014.

## **73. PRIVATE SESSION**

The Commission did not consider it necessary to consider the item below in private. Members of the public therefore were not asked to leave the meeting.

## **74. DOMICILIARY CARE REVIEW - ADDITIONAL INFORMATION**

NOTED:

The background information provided regarding the proposed review of

Domiciliary Care, (see minute number 69 above).

**75. CLOSE OF MEETING**

The meeting closed at 8.32 pm