

#### MEETING OF THE ADULT SOCIAL CARE SCRUTINY COMMISSION

DATE: THURSDAY, 3 APRIL 2014

TIME: 5:30 pm

PLACE: THE OAK ROOM - GROUND FLOOR, TOWN HALL, TOWN

HALL SQUARE, LEICESTER

#### **Members of the Committee**

Councillor Dr Moore (Chair)
Councillor Chaplin (Vice-Chair)

Councillors Alfonso, Fonseca, Joshi, Wann and Willmott

#### **Standing Invitee (Non-voting)**

Representative of Healthwatch Leicester

Members of the Commission are invited to attend the above meeting to consider the items of business listed overleaf.

Elaine Baker

for the Monitoring Officer

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#### **PUBLIC SESSION**

#### <u>AGENDA</u>

#### 1. APOLOGIES FOR ABSENCE

#### 2. DECLARATIONS OF INTEREST

Members are asked to declare any interests they may have in the business to be discussed.

#### 3. MINUTES OF PREVIOUS MEETING

Appendix A

The minutes of the meeting of the Adult Social Care Commission held on 6 March 2014 are attached and the Commission is asked to confirm them as a correct record.

#### 4. PETITIONS

The Monitoring Officer to report on any petitions received.

## 5. QUESTIONS, REPRESENTATIONS AND STATEMENTS OF CASE

The Monitoring Officer to report on any questions, representations or statements of case received

#### 6. DOMICILIARY CARE REVIEW

Appendix B

Carers and recipients of domiciliary care have been invited to tell the Commission of their experiences of domiciliary care. The Commission is recommended to receive this evidence and comment as appropriate.

Members are advised that some of this evidence will be presented verbally at the meeting, but some is attached at Appendix B.

#### 7. ELDERLY PERSONS' HOMES - UPDATE

**Appendix C** 

The Director for Care Services and Commissioning (Adult Social Care) submits a report outlining progress with individual residents' moves to alternative accommodation, where their current homes are to be closed in phase 1. The Commission is recommended to note the report and comment as appropriate.

Please note: The request for a judicial review of the decision to close elderly persons' homes will not be discussed at this meeting.

# 8. DOUGLAS BADER DAY CARE CENTRE - UPDATE ON ALTERNATIVE FACILITIES FOR CURRENT USERS

The Director for Care Services and Commissioning (Adult Social Care) will give a verbal update on progress with identifying alternative facilities for the current users of the Douglas Bader day care centre. The Commission is recommended to note the update and comment as appropriate.

#### 9. DECISIONS ON ADULT SOCIAL CARE NON-STATUTORY SUPPORT SERVICES - UPDATE

The Director for Care Services and Commissioning (Adult Social Care) will provide a verbal update on progress with decisions on adult social care non-statutory support services. The Commission is recommended to note the update and comment as appropriate.

### 10. DECISIONS ON THE MOBILE MEALS SERVICE - UPDATE

The Director for Care Services and Commissioning (Adult Social Care) will provide a verbal update on progress with decisions on the mobile meals service. The Commission is recommended to note the update and comment as appropriate.

# 11. PROGRESS WITH ESTABLISHING AN OLDER PERSONS' COMMISSION

The Assistant Mayor (Adult Social Care) will provide a verbal update on progress in establishing an Older Persons' Commission. This Commission is recommended to note the update and comment as appropriate.

#### 12. WORK PROGRAMME

Appendix D

- a) A verbal update on possible joint Scrutiny Commission working arrangements regarding the Better Care Fund will be given at the meeting. The Commission is recommended to note the update and comment as appropriate.
- b) The current work programme for the Commission is attached. The Commission is asked to consider this and make comments and/or amendments as it considers necessary.

#### 13. ANY OTHER URGENT BUSINESS

# Appendix A



Minutes of the Meeting of the ADULT SOCIAL CARE SCRUTINY COMMISSION

Held: THURSDAY, 6 MARCH 2014 at 5.30 pm

#### <u>PRESENT:</u>

Councillor Dr Moore – Chair Councillor Chaplin – Vice Chair

> Councillor Alfonso Councillor Fonseca Councillor Joshi

#### In Attendance

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

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#### 101. APOLOGIES FOR ABSENCE

Apologies for absence were received from Councillor Willmott, who was absent on Council business.

#### 102. DECLARATIONS OF INTEREST

Councillor Alfonso declared an Other Disclosable Interest in agenda item 7, "Blue Badge Scheme", in that her husband was a Blue Badge holder on a higher level of disability.

Councillor Joshi declared an Other Disclosable Interest in the general business of the meeting in that his wife worked for the City Council's Adult Social Care Reablement service. He also declared an Other Disclosable Interest in the general business of the meeting in that he worked for a voluntary organisation for people with mental health issues.

Although not a member of the Commission, Councillor Rita Patel declared an Other Disclosable Interest in the general business of the meeting in that her sister worked for the City Council's Adult Social Care and Safeguarding division. She also declared an Other Disclosable Interest in the general business of the meeting in that her mother received a small social care

package from the City Council's Adult Social Care and Safeguarding division.

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

#### 103. MINUTES OF PREVIOUS MEETING

The Commission was reminded that its comments on the General Fund Budget, (minute 96, "General Fund Budget 2014/15 to 2015/16"), had been considered by the Overview Select Committee at its meeting on 13 February 2014, (Overview Select Committee minute 130, "General Fund Budget 2014/15 to 2015/16", 13 February 2014 referred).

It was noted that the information requested under minute 93, "Review of Adult Social Care Non-Statutory Support Services (Previously Known as Housing Related Support / Supporting People)", was being prepared and would be reported to the Commission as soon as possible.

#### RESOLVED:

That the minutes of the meeting of the Adult Social Care Scrutiny Commission held on 12 February 2014 be approved as a correct record.

#### 104. PETITIONS

The Monitoring Officer reported that no petitions had been received.

#### 105. QUESTIONS, REPRESENTATIONS AND STATEMENTS OF CASE

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

#### 106. DOMICILIARY CARE REVIEW

#### a) Information Previously Requested

The Commission received an update on the information that had been requested at its meeting on 9 January 2014, (minute 85, "Domiciliary Care", referred). Members were reminded that the information requested in resolutions 2(a) and 2(b) of that minute had been circulated separately.

It was noted that all 688 service users invited to participate in the survey on Home Care Services had responded. However, concerns were expressed that there appeared to be a very low variation in the data, particularly in the number of "Always" responses. In reply, the Group Manager Contracts and Assurance (Care Services and Commissioning) advised the Commission that the questions asked were taken from the quality assurance framework for the service. This was the first time that these questions had been used, so they

would be adapted as assessments were made of whether the right questions were being asked. In the meantime, the results would be cross-checked with other feedback, to ensure that it corresponded.

The Commission also expressed concern that the questions were "closed" and that, where questions had multiple parts, the results for the whole question were presented as one total. Group Manager Contracts and Assurance (Care Services and Commissioning) thanked the Commission for the feedback, noting that this was the first time such a survey had been undertaken and that the points raised would be taken in to consideration in the future.

The Group Manager Contracts and Assurance (Care Services and Commissioning) advised the Commission that no baseline had been set for the number of responses it was hoped to reach. New domiciliary care procurement contracts had started in October 2013 and this survey had been done as part of the new contract. The next stage in the process therefore was to scrutinise the results of the survey with providers, to establish where improvements were needed.

In noting this, the Commission suggested that it would be useful to receive information on previous services, in order to see how people's perceptions of services had changed, as it was disappointing that the number of people answering "Always" was not higher.

Members questioned whether the poorer responses to the survey related to particular carers, providers, or areas. The Director for Care Services and Commissioning (Adult Social Care) assured the Commission that it was known where service provision was low and the issues identified in the survey would be raised with providers. Meetings were held quarterly with providers, so officers would not have to wait for the annual quality review to raise these matters. Improved performance therefore should be seen through the next survey.

The Group Manager Contracts and Assurance (Care Services and Commissioning) assured Members that it was known which service users were with a particular organisation. In addition, screening had been used to ensure that, for example, service users were addressed in the most appropriate language. All results were anonymised.

Further to resolution 3 of minute 85, "Domiciliary Care", (9 January 2014), the Director for Care Services and Commissioning (Adult Social Care) reported that a provider at Danbury Gardens had been replaced. ASRA had providers in place at the Wolsey building, but residents could use other providers of they wished.

Councillor Rita Patel, Assistant Mayor (Adult Social Care), addressed the Commission at the invitation of the Chair, advising that ASRA was considering moving to a similar care provision model to that used at Danbury Gardens, so that someone would always be on site.

#### b) <u>Visits to Care Providers</u>

The Chair reported that she had visited Danbury Gardens. The facilities appeared to be nice and staff were positive about the conditions there. She also had met two middle managers from private providers, who had some concerns about domiciliary care. They were both happy to provide evidence at a meeting of the Commission.

The Chair further reported that:-

- She would be visiting a recipient of domiciliary care. The person's carer would be present;
- Two private providers had indicated that they would be happy to arrange visits to service users;
- She had made an appeal on Radio Leicester for people who had received domiciliary care to share their experiences of that care with the Commission; and
- Following the appeal made through local media, several people had already contacted the Council to share their experiences of domiciliary care.

#### **RESOLVED:**

- That a special meeting of the Commission be held, on a date to be arranged, to hear evidence from service providers and recipients; and
- 2) That the Director of Adult Social Care and Safeguarding be asked to make an appeal through the Carers Network for people who had received domiciliary care to share their experiences of domiciliary care with the Council.

#### 107. BLUE BADGE SCHEME

The Director of Adult Social Care and Safeguarding submitted a report informing Members of the operation of the Blue Badge Scheme for parking.

The following comments were made in discussion on this item:-

- The Council's Occupational Therapists did the medical assessments for discretionary Blue Badge holders. Information also was sought from the applicant's own doctor;
- The Occupational Therapists were fully qualified and were expected to undertake continuing professional development. The quality of their work was assessed in a similar way to that of social workers. For example, trends were identified and reasons sought for variations;

- At present, two part-time Occupational Therapists did the assessments, one of whom was agency staff, but it was hoped that a substantive appointment would be made in due course to the vacancy;
- Medical assessments were thorough. The Occupational Therapist
  assessed the person's mobility, both in the assessment room and from
  how they were able to get from the car park to the assessment room.
  The Department for Transport provided clear criteria on how such
  assessments should be conducted;
- In reply to questions about whether the Occupational Therapists were skilled in assessing all ailments and recognising the intermittent nature of some conditions, the Director of Adult Social Care and Safeguarding advised that the Occupational Therapists were only assessing people for Blue Badge scheme eligibility, not for other things. This meant they made a very specific assessment of someone's ability to walk and took account of the variability of people's conditions;
- The Occupational Therapists had taken over doing these assessments in 2013, when changes had been made to the scheme. It was considered that this had resulted in reliable and rounded assessments being made;
- Suggestions were welcome for things that could be included in the Blue Badge Mobility Assessment form;
- The Blue Badge Assessment Log was used by occupational health staff.
   Applicants for a Badge were not expected to self-declare;
- The number of Blue Badges issued in 2012 was greater than the number of applications received. This could be due to applications remaining from the previous year;
- The Blue Badge scheme was self-financing;
- It had been reported anecdotally that some people who no longer needed a Blue Badge continued to use one. There appeared to be limited action that could be taken to stop this happening:
- Whether a discretionary Blue Badge could be renewed was considered through the same process as a new application. People in receipt of Disability Living Allowance would automatically be assessed for a new Blue Badge; and
- Officers were working with the Council's Parking Enforcement Team to see if the team's hand-held equipment could be modified to recognise when a Blue Badge was no longer valid.

#### RESOLVED:

- 1) That the Director of Adult Social Care and Safeguarding be asked to:-
  - a) find out how arterial fibrillation and ischemic heart disease were assessed for Blue Badge eligibility; and
  - b) confirm why the number of Blue Badges issued in 2012 was greater than the number of applications received; and
- 2) That the Assistant Mayor (Adult Social Care) be asked to investigate what action the Executive could take to prevent people who no longer needed a Blue Badge continuing to use one

Post-meeting note: Since the meeting it has been advised that the workers undertaking blue badge assessments are Occupational Therapy Care Management Officers, for which an Occupational Therapy degree is not required. They are overseen by qualified senior Occupational Therapists.

#### 108. BETTER CARE FUND

The Director of Adult Social Care and Safeguarding submitted a report informing Members of the Better Care Fund and the local plan through which this funding could be accessed.

It was noted that the detail that needed to be included in the draft local plan was included in a Plan Template. Due to the short period for submitting the plan, there would be on-going discussions between all parties involved in submitting the plan and NHS England over coming months and the plan would continue to develop and evolve.

Some concern was expressed that the way the report was presented and the terminology used made it difficult to scrutinise the draft local plan. It was recognised that Councillors were not the key audience for the documentation and that this was a very early stage in the process of obtaining approval for it, but Commission members were lay people, who did not have the level of technical knowledge that appeared to be assumed by the documentation.

Councillor Palmer, Deputy City Mayor, advised the Commission that the Better Care Fund application had to be made in a certain way, which was why it had been submitted in this format and why it was phrased the way it was. The timescales for accessing the Fund were challenging, as there was only a very short time between publication of information about the Fund and the deadline for submission of a draft local plan. However, the application had been signed off by the Health and Wellbeing Board in January 2014, as required by the government, and submitted by the deadline of 14 February 2014. The documentation submitted to this Commission therefore was all that was available at present.

The documentation submitted set out the principles that would underpin the Council's approach to Better Care. This was summarised in the descriptions of the five work streams to be undertaken. Work was ongoing to prepare the full plan, which needed to be submitted to NHS England and Public Health England by 3 April 2014.

The Director of Adult Social Care and Safeguarding explained that this was not a public-facing document. It was a requirement that a specific template be followed and it contained a lot of health and social care terminology, as this was what was needed to provide the required assurance to the approving bodies.

In view of the concerns expressed, it was suggested that a joint briefing be held for members of the Adult Social Care Scrutiny Commission and the Health and Wellbeing Scrutiny Commission. From this, it could be decided which elements should be scrutinised by each Commission. This also could help the Executive to engage appropriately.

Rachna Vyas, Interim Strategy Lead for Leicester City Clinical Commissioning Group, advised the Commission that a very strong communications and engagement plan was running alongside the draft local plan. This was designed for the public, but the local plan was not. It was recognised that it would be useful to extract the essential elements of the plan to enable the public to gain an understanding of it, but at present the entire care pathway was being examined, which included having to looking at information from Public Health England that went down to a very detailed level. It was anticipated that this would result in the joint team of health care providers being empowered to do what was needed to prevent patients from needing to go in to hospital and from being passed around the system.

Councillor Rita Patel, Assistant Mayor (Adult Social Care), addressed the Commission at the invitation of the Chair. She explained that consideration was being given to the impact that the changes being introduced through the Better Care Fund would have on the Council's budget. For example, it was important to encourage integration and avoid duplication, as there already was a gap between Adult Social Care Services provided and funding available. These proposals therefore had been taken in to account in the preparation of the Council's budget.

The Deputy City Mayor confirmed that a significant proportion of the £23 million that was being made available to the city was not new funding, but the Better Care Fund provided a new focus for it. The parts of the funding that were new to the Council, (approximately £11.5 million), previously had gone to health services.

In response to a question from the Commission, the Deputy City Mayor advised that the systems established by the government invited challenge of the local plan. There would be opportunity for Members to be involved in this at quite a detailed level, as this was not a stand-alone plan, but had to relate to many other plans and issues.

#### RESOLVED:

- That a joint briefing on the Better Care Fund be held for members of the Adult Social Care Scrutiny Commission and the Health and Wellbeing Scrutiny Commission;
- 2) That Director of Adult Social Care and Safeguarding be asked to work with appropriate officers to make an initial assessment of which scrutiny commission could scrutinise which parts of the local plan for use of money from the Better Care Fund, so that following the briefing referred to under resolution 1) above a decision can be taken on whether this division of work should be adopted;
- 3) That, pending the outcome of resolution 2) above, an item updating Members on the Better Care Fund be included on the agenda for each meeting of the Adult Social Care Scrutiny Commission; and
- 4) That the Chair of the Adult Social Care Scrutiny Commission attend meetings of the Health and Wellbeing Board as an observer.

# 109. REPLACEMENT OF THE ADULT SOCIAL CARE AND CHILDREN'S IT APPLICATION

The Director for Care Services and Commissioning (Adult Social Care) submitted a report updating the Commission on the implementation of the new Liquidlogic and ControCC IT applications, which replaced the existing CareFirst IT system.

The Director for Care Services and Commissioning (Adult Social Care) advised the Commission that the previous system had been in place for a number of years. As the contract had ended, it was necessary to procure a new system. It was anticipated that the new system would go live for children's services at the start of April 2014 and for adult social care services at the end of April 2014. The system was on budget and was being installed according to expected timescales.

The Programme Manager (Care Systems) explained that:-

- The project had been well risk-managed, so there were sufficient safeguards to avoid delays in the introduction of the new systems. In addition, the new systems had safeguards built in;
- An extensive programme of training for the new systems had been developed and was underway. Those with the highest need had been trained first, to ensure service continuity; and
- Social care records had been scanned on to the system, but still needed to

be integrated.

#### RESOLVED:

That the introduction of the new Liquidlogic and ControCC IT applications be welcomed.

#### 110. ELDERLY PERSONS' HOMES

#### a) <u>Development of an Intermediate Care Facility</u>

The Director of Adult Social Care and Safeguarding advised the Commission that work was in progress to develop an options paper for the establishment of an intermediate care facility. This would be discussed at the Corporate Projects Board before a decision was pursued through the formal decision making processes.

A report on this was scheduled to be presented to the Commission at its meeting in May 2014.

#### b) Progress with Individual Residents' Moves

The Director for Care Services and Commissioning (Adult Social Care) submitted a report outlining progress with individual residents' moves to alternative accommodation, where their current homes were to be closed in phase 1.

The Adult Social Care Business Transition Manager advised the Commission that:-

- 25 of the affected residents were in the active planning stages of moving. Of these, 12 were in the process of looking at a home to move to;
- 13 residents were at stage 5, (preparing to move). Six of these had a date for moving to the homes of their choice and seven had rooms confirmed at the homes of their choice;
- It had been possible for friendship groups to move together;
- One person was still at stage 1 of the process; and
- Four residents were in the process of having assessments done. These
  were quite complex, so the help of health professionals was needed to
  complete these.

The Director for Care Services and Commissioning (Adult Social Care) reminded Members that they had been sent a letter explaining the impact of the request made to the courts for a judicial review of the decision to close the homes. A letter also had been sent to residents in the homes to be closed, to advise them of the situation.

As a result of the judicial review challenge, an undertaking had been given that a resident in Herrick Lodge would not be moved until the matter had been resolved. The date on which the judicial review would be undertaken was awaited.

Councillor Rita Patel, Assistant Mayor (Adult Social Care), addressed the Commission at the invitation of the Chair. She confirmed that, until the result of the judicial review challenge was known, the decision taken to close the homes would stand and work would continue towards this as planned. Appropriate risk assessments were being made at every stage of the process, but it was not possible to speculate on what could happen if the judicial review challenge was upheld.

#### c) Progress in Establishing an Older Persons' Commission

Councillor Rita Patel, Assistant Mayor (Adult Social Care), addressed the Commission at the invitation of the Chair, advising that the membership and functions of the new Commission were still to be determined.

Officers were considering the feedback received from the Executive on this proposal. A further report would be made to the Executive and it was hoped that the decision could be presented to the Commission for scrutiny.

#### 111. WORK PROGRAMME

In considering the draft work programme, the Director of Adult Social Care and Safeguarding advised the Commission that the report scheduled to be received on 3 April 2014 about Personal Budgets would relate to the assurance process. This was a tool used to produce indicative personal budgets.

#### **RESOLVED:**

That the draft work programme be approved, subject to the inclusion of the following:-

- a) The final report on the review of Domiciliary Care will be received at the Commission's meeting in May 2014;
- Update reports on the Better Care Fund will be included on the agenda for each meeting of the Commission until it is decided which parts of the local plan on the allocation of the Better Care Fund will be scrutinised by which Commission;
- c) A report on the outcomes of the consultation on the provision of advocacy services for voluntary organisations will be made to the Commission's meeting in May 2014.

#### 112. CLOSE OF MEETING

The meeting closed at 8.00 pm

# Appendix B

# Adult Social Care Scrutiny Commission 3<sup>rd</sup> April 2014

#### **Domiciliary Care Review - Response from Media Appeal**

#### Case 1

I have a neighbour who has no family, she is over 80 years old and has been housebound for some years now. Any friends she had have died or are unable to visit. The system that operates in the City at present does not seem to be set up to deal with the situation of someone without friends and relatives to care for them. I understand she pays for carers to attend 2 or 3 times a day but they often end up on my doorstep asking me to help with something which they are not permitted to do themselves. We have tried to help by organising a gardener to do work for our neighbour but although the price was reasonable and had been agreed beforehand she was very slow to pay them. I have been reluctant to help organising any further work for her and feel it would be good if there was someone independent who could act on her behalf to keep her home in order, as she is unable to do this herself.

I have been asked to pick her up if she has fallen as the carers are not allowed to do this on their own. I have been asked to change light bulbs as the carers are not allowed to use the ladder. I have been asked to find a gardener, a plumber, an electrician, supply a multi-socket extension cable to the man who had been asked to move the care line box into another room. Recently she was taken to hospital and I was asked to take some clothes for her as apparently the 3 person ambulance crew who took her into hospital are not permitted to pack a bag for her. I only found out she had been taken into hospital when the hospital staff phoned two days later, one of her main carers also knocked on our door to ask where she was as she hadn't been informed either. I did ask the hospital staff if the carers would have been informed and they told me that this would have happened, clearly it did not happen.

The care staff would like her to go into residential care but the lady concerned has not wanted to move from her home so they are unable to do anything but to continue to care for her there as best they can.

#### Case 2

I am a working carer for a number of people. Only one of them resides in the City. My mother resides in the City and her experiences of domiciliary care have been mixed. I think it is important to state that my other relatives (who live outside of the City boundary) have had poor experiences of domiciliary care, particularly in relation to commissioned 15 minutes visits. All these type of visits allow is a quick hello, do you want a drink and sandwich?, a medication prompt. Is your personal alarm at hand? and a note in the care log saying all is well on leaving – that's not quality care.

Currently, my mother employs a personal assistant to provide her with support with her shopping and cleaning and personal care. The individual concerned is reliable and professional and I have no worries that my mother is receiving excellent care whilst I am at work. My mother has developed a rapport with her personal assistant where as previously she was unnerved by the constant changes of new carers.

Previously, she used a company identified via her City Council care management officer. It came to light that the carers employed we stating that they had spent more time with my mother than they actually had and there appeared to be no system check to alert that this financial abuse was taking place. The carers were taking her to shop but doing their own shopping on her time and were constantly on their mobile phones. On one occasion, the carer said she was late as she had been applying for some immigration documentation. The carers notes were incomplete and on reviewing the notes it appeared to me that the notes were copied from those above on a constant basis.

My mother did not raise these issues with me for some time as she felt sorry for the carers who appeared to be vulnerable individuals themselves. We were left feeling that my mother was not being safeguarded and that the carers were being exploited by the company who employed them.

When I contacted the care management team to complain they stated that there had been complaints about the company previously – so why were they still on the list. Where is the initial and continued quality check for commissioned services?

I hope you accept these comments so constructive criticism. Our loved ones deserve the best care possible.

# Appendix C

# Report to the Adult Social Care Scrutiny Commission

Date: 3<sup>rd</sup> April 2014

# **Elderly Persons Homes Update**

Lead Director: Tracie Rees

#### Useful Information:

Ward(s) affected: New Parks, Western Park, Latimer, Eyres Monsell

Author: Tracie Rees
 Author contact details Ext 2301

#### 1. Summary

1.1 This report provides an indicative timetable for the actions needed to support existing residents living in the Council's Elderly Persons Homes that are due to be closed.

- 1.2 Appendix 1 provides an anonymised summary of the progress of individual residents to move to alternative accommodation, where the homes are to be closed in phase I (Herrick Lodge, Elizabeth House and Nuffield House). The provision of this information has been agreed by the Council's Information Governance service.
- 1.3 The information details progress against the 7 steps in the "My Moving Plan" process. All residents have now had their community care assessments completed. 8 residents have now moved to a new home. 23 residents are currently on Steps 4 or 5 of the process. One resident is on step 1 of the process.
- 1.4 Of the 23 residents described above, 19 are currently in the process of identifying a home that they would like to move into (Step 4). 4 residents are in the planning stage of moving (Step 5) which means that a vacancy has been identified that meets their needs and they will be moving shortly.

#### PHASE 1 REPROVISION PROGRESS – Report to ASC Scrutiny- Appendix 1

DATE: April 3rd 2014 (Data as at 20 March 2014)

#### Key:

Step 1	Deciding who needs to be involved in your moving plan
Step 2	Meeting to look at what is most important to you in a new home
Step 3	Your social worker carries out a new assessment of your needs
Step 4	Meeting to review your moving plan and agree what will happen next
Step 5	Planning your move
Step 6	The day you move
Step 7	After you move

RESIDENT NO	STATUS	STEP ON MOVING PLAN	NOTES AND TARGET MOVING DATE	
1	Resident	Step 4	Awaiting move date for home of choice.	
2	Resident	N/A	Deceased	
3	Resident	Step 5	Assessment complete. Home of choice can meet needs and has vacancy. Awaiting confirmation of move date.	
4	Resident	N/A	Deceased	
5	Resident	Step 7	Has now moved to home of choice.	
6	Resident	Step 4	Assessment complete. Needs nursing care.	
7	Resident	Step 7	Resident has moved to home of choice. 4 weekly review has taken place and resident is settling in well.	
8	Resident	Step 4	Assessment complete. Nursing needs confirmed.	
9	Resident	Step 4	Assessment complete has identified home of choice, waiting for bed to become available.	
10	Resident	Step 7	Has now moved to home of choice. 4 weekly review is due soon.	

11	Resident	Step 4	Assessment complete and nursing needs have been confirmed. Now looking for a home.
12	Resident	Step 1	Awaiting involvement from relative
13	Resident	Step 4	Assessment complete. Has not yet identified homes to visit.
14	Resident	Step 4	Assessment complete. Has not yet identified homes to visit.
15	Resident	Step 4	Assessment complete. Has identified some homes for consideration.
16	Resident	Step 4	Assessment complete family in the process of looking at homes.
17	Resident	Step 4	Assessment complete, nursing needs confirmed. In the process of looking at homes.
18	Deceased	n/a	Deceased
19	Resident	Step 4	Assessment complete. Needs nursing care. In the process of looking for suitable home.
20	Resident	Step 5	Assessment complete. Home of choice can meet needs and has vacancy. Moving with friend on same day.
21	Resident	Step 4	Assessment complete. Nursing care needed. Looking for suitable homes.
22	Resident	Step 7	Has moved to home of choice.
23	Resident	Step 4	Assessment completed .Needs nursing care.
24	Resident	Step 4	Assessment completed. Needs nursing care.
25	Resident	Step 7	Has moved to home of choice.
26	Resident	Step 5	Assessment completed. Home of choice meets needs and has vacancy. Resident has been visiting home.
27	Resident	Step 5	Assessment completed. Home of choice meets needs and has vacancy. Move date planned for mid- March.
28	Resident	Step 7	Has moved to home of choice.

29	Resident	Step 7	Has moved to home of choice
30	Resident	Step 4	Assessment completed. Nursing needs confirmed. Family looking at different homes.
31	Resident	Step 4	Assessment complete. Currently liaising with a particular home about possibly moving in.
32	Resident	Step 4	Has been visiting a home and will be moving there. Awaiting a date for the move.
33	Resident	Step 4	Assessment complete looking for suitable home
34	Resident	Step 4	Assessment complete. Resident looking at two homes they might like to move to.
35	Resident	Step 7	Has moved to home of choice

# Appendix D

# ADULT SOCIAL CARE SCRUTINY COMMISSION DRAFT WORK PROGRAMME 2013/14

#### Work from 2012/13

Meeting	Meeting Items	Standing Items	Scrutiny Review	Key Actions Agreed
10 <sup>th</sup> Jan	- ASC 2013/14 Budget	- Elderly Persons Homes		ASC 2013/14 Budget Officers asked to note comments of the commission and that they are kept informed of changes introduced as minuted, particularly proposals to integrate community services in residential packages.
Special Mtg 16 <sup>th</sup> Jan			- Domiciliary Care	Domiciliary Care The Scoping document was agreed with minor amendments.
13 <sup>th</sup> Feb	- Protecting Elderly People from Rogue Traders	- Elderly Persons Homes	Domiciliary Care     Alternative Care     for Elderly People	Protecting Elderly People from Rogue Traders It was agreed for information on what the current processes and actions are around financial abuse to come to the next meeting with the commission considering how it might be able to input into an awareness raising campaign.
7 <sup>th</sup> Mar	Healthwatch Leicester and ICAS     Protecting Elderly People from     Rogue Traders	- Elderly Persons Homes	<ul><li>Domiciliary Care</li><li>Alternative Care</li><li>for Elderly People</li></ul>	Healthwatch and ICAS Members of the commission asked that a further report on the ICAS be given at a future meeting.
4 <sup>th</sup> Apr	- Day Care for People with Mental Health Problems	- Elderly Persons Homes	Domiciliary Care     Alternative Care     for Elderly People	Elderly Persons Homes Cllr Patel mentioned that a letter to inform of the findings of her review into EPH will be circulated within the next week and a report will come to the next meeting of the commission.  Day care for people with mental health problems
2 <sup>nd</sup> May		- Elderly Persons Homes	Domiciliary Care     Alternative Care     for Elderly People	It was agreed that findings of the consultation process would come back to a future meeting.  Elderly Persons Homes Agreed for consultation findings to come back to the commission before a decision is made.

#### 2013/14 Work Programme

Meeting	Meeting Items	Review/Report	Actions Agreed
Thurs 13 <sup>th</sup>	- Adult Social Care Portfolio Overview	- Presentation	
June 2013 at 5.30pm	- Elderly Persons Homes	- Review Item Report	Agreed to hold a special meeting and cover in the scheduled July meeting to gather evidence. Also agreed to circulate the report completed by scrutiny previously.
	- Corporate Procurement Plan 2013/14	- Report	
	- City Mayor's Delivery Plan	- Report	Comments were submitted to officers. Asked for a further update in 3/6 months' time.
	- Access for All Work Programme	- Report	
	- Work Programme	- Report	A number of future items were discussed and were to be added to the work programme.
Special Mtg – - Elderly Persons Homes Mon 1 <sup>st</sup> July 2013 at 5.30pm		- Review Item Report	Extra information requested with regards to the proposals.  Members of the public will be allowed to give representation at the next meeting.
			-
		- Review Item Report	Further information still required but a report to be drafted up pending this information.
Thurs 5 <sup>th</sup> Sept 2013 at 5.30pm	- Elderly Persons Homes	- Review Item Report	Agreed that a final report with the commission's comments be completed and sent to the Executive.
	- Older Persons Mental Health Day Care Services	- Report	The commission voted in favour of the option to close the day service of older people with mental health problems and move the existing users to alternative provision.
	- Enablement Pilot and the Community Inclusion Team	- Presentation	The commission to receive a further update at the next meeting.

Meeting	Meeting Items	Review/Report	Actions Agreed
Thurs 10 <sup>th</sup> Oct	- Community Inclusion Team	- Report	
2013 at 5.30pm	- Douglas Bader Day Centre	- Report	Trade unions will be invited to give representation at the next meeting. The results of the consultation to come back to the January meeting of the commission.
	- Current Consultations	- Verbal Update	The series of consultations announced to be added to the work programme
	- Personal Budgets and Direct Payments	- Presentation	A report that evaluates the effectiveness of the indicative personal budgets be brought back to the commission in 6 months' time.
	- Elderly Persons Homes	- Verbal Update	The final review report was ratified. The direction of travel and timescales to brought back to the next meeting. The commission asked to be kept informed about progress of proposals to set up a commission for vulnerable people.
	- Winter Care Plan	- Scoping Document	The scoping document was agreed.
Thurs 7 <sup>th</sup> Nov	- ASC Local Account	- Report	Feedback was given to the draft ASC Local Account.
2013 at 5.30pm	- Douglas Bader Day Centre	- Verbal	Representation was received from Unison union and their views were endorsed by the commission.
	- Elderly Persons Homes	- Verbal	The commission requested anonymised updates on the position of each resident at each stage of the process of moving them from their current EPH to their new one.
	- Domiciliary Care Review	- Review Item	Further information was requested for the next meeting.

Meeting	Meeting Items	Review/Report	Actions Agreed
Thurs 5 <sup>th</sup> Dec 2013 at 6.00pm	- Mental Health Care (Dementia)	- Report	It was agreed to consider all the information provided and follow up at the next meeting.
	- Mobile Meals Service	- Report	The commission agreed that the Executive be recommended to consider the way that consultations are carried out in view of the Commission's concerns about this consultation. Also recommended the Executive adopt option 2, (expand the inhouse service).
	- Housing Related Support Services	- Verbal	Representations were received from residents and staff at John Woolman House and Vernon House and also from Castle Ward Councillors.
	- Domiciliary Care Review	- Review Item	The commission agreed to look at communicating the review to carers and family members in order for them to give representation. Further information was requested for the next meeting.
	- Elderly Persons Homes	- Report	
Thurs 9 <sup>th</sup> Jan 2014 at 5.30pm	- Elderly Persons Homes	- Report	The commission requested for a paper on the Intermediate Care facility be brought to the commission when available.
	- Mobile Meals Service	- Verbal	
	- Alternative Care for Elderly People	- Review Report	The final review report was agreed and the Executive were asked to consider the recommendations in the report.
	- Dementia Care for Elderly People	- Report	It was agreed to consider having a joint meeting with the Health scrutiny commission to consider an initial report or presentation on this area of work.
	- Domiciliary Care	- Review Item	Further information was requested.

Meeting	Meeting Items	Review/Report	Actions Agreed
Wed 12 <sup>th</sup> Feb 2014 at 5.30pm	- Housing Related Support Services	- Report	The commission welcomed changes made to the proposals following previous scrutiny meetings. However the commission still felt that 15 hours of core support will not be sufficient to enable effective care to be given so requested that discussions are had with providers and Council officers as to what the correct level of support should be, and the appropriate mix of core and floating support that this should include.  The commission also requested the service review housing alarm services being used across the city to see if more equitable costs can be achieved, this to include discussions with Leicestershire County Council to see if joint provision of one or more alarm systems will be advantageous.
			Pending the outcome of this the commission requested funding for alarm only provision is retained at its current level, this funding to be available to current and future users.  The commission requested that all of this returns to the
	- Douglas Bader Day Centre	- Report	commission before a decision by the Executive is made.  The Commission supported Option 2 for closure of the service and the provision of support to service users to source alternative provision. The commission requested regular general updates on how current users of the centre adapt to alternative services.
	- Elderly Persons Homes - General Fund Budget 2014/15 to 2015/16	- Report - Report	The commission wanted their concern acknowledged at OSC that the Adult Social Care budget is facing large cuts, despite the services within this portfolio working with some of the city's most vulnerable people.

Meeting	Meeting Items	Review/Report	Actions Agreed
Thurs 6 <sup>th</sup> Mar 2014 at 5.30pm	- Domiciliary Care	- Report	Appeal to be made through the Carer's Network to have more people come through to give evidence to the commission.
·	- Blue Badge Scheme	- Report	Officers asked to find out how arterial fibrillation and ischemic heart disease were assessed for Blue Badge eligibility; and confirm why the number of Blue Badges issued in 2012 was greater than the number of applications received.  The Assistant Mayor was asked to investigate what action the Executive could take to prevent people who no longer needed a Blue Badge continuing to use one.
	- Better Care Fund	- Report	A joint briefing on the Better Care Fund will be held for members of the ASC and the Health and Wellbeing Scrutiny Commissions to assess which scrutiny commission could scrutinise which parts of the local Better Care plan.
	- Replacement of the ASC and Children's IT Application	- Report	
	- Elderly Persons Homes	- Report	
Special Mtg – Wed 19 <sup>th</sup> March at 5.30pm	- Dementia Care for Elderly People	- Presentation	Verbal updates on progress of progress of objectives to come to the commission when appropriate. Further work to be completed by officers to look at more sophisticated demographic data of dementia sufferers.

Meeting	Meeting Items	Points to be considered	Review Items			
	Agenda Meeting – Wednesday 19 <sup>th</sup> March 2014 at 4.30pm					
Thurs 3 <sup>rd</sup> Apr 2014 at 5.30pm	- Douglas Bader Day Centre	<ul> <li>Update on decision</li> <li>Progress with identifying alternative facilities for the current users</li> </ul>	- Elderly Persons Homes	Progress on individual residents		
	- Non-statutory Support Services	Update on progress of decisions	- Domiciliary Care Review	Representations from carers/family members		
	- Mobile Meals Service	Update on progress of decisions				
	- Older Person's Commission	Update on progress				
Agenda Me	eting – Thursday 1 <sup>st</sup> May 2014 at	t 4.30pm		•		
Thurs 15 <sup>th</sup>	- Intermediate Care Facility	Options for developing the facility	- Domiciliary Care	Final Review Report		
May 2014 at 5.30pm	- VCS Preventative Services	Update on the findings of the consultation	- Elderly Persons Homes	Progress on individual residents		
	- Update on Personal Budgets	Update report to evaluate the effectiveness of the indicative personal budgets				

Future Items	Items to be considered
Internal Day Care for People with a Learning Disability Review (Later in 2014)	<ul><li>An update of services</li><li>What is being changed and what will the review involve?</li></ul>
Better Care Fund (Briefing for scrutiny members on 1 <sup>st</sup> April)	Update on the split of scrutiny activities