



Leicester
City Council

Minutes of the Meeting of the
ADULT SOCIAL CARE SCRUTINY COMMISSION

Held: TUESDAY, 22 SEPTEMBER 2015 at 5:30 pm

P R E S E N T :

Councillor Cleaver (Chair)
Councillor Bajaj (Vice Chair)

Councillor Cutkelvin

Councillor Khote

In Attendance

Councillor Rory Palmer – Assistant City Mayor (Adult Social Care, Health,
Integration and Wellbeing)

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16. APOLOGIES FOR ABSENCE

Apologies for absence were submitted from Councillors Dawood, Halford and Joshi. Tracie Rees (Director, Care Services and Commissioning) and Philip Parkinson (Healthwatch) also submitted their apologies.

17. DECLARATIONS OF INTEREST

There were no declarations of interest.

18. MINUTES OF THE PREVIOUS MEETING

RESOLVED:

that the minutes of the meeting of the Adult Social Care Scrutiny Commission held 4 August 2015 be confirmed as a correct record.

19. PETITIONS

There were no petitions.

20. QUESTIONS, REPRESENTATIONS AND STATEMENTS OF CASE

The following questions had been received from Philip Parkinson on behalf of Health Watch.

- 1) Has it been possible for the number of service users having their care packages reviewed to be increased?
- 2) Is there a means of knowing how many of the reviews resulted in an increase in support, a decrease or a maintenance of the current service?
- 3) Has it been possible to increase the number of people with dementia attending community based services?

The response to the questions is attached to the back of these minutes.

21. LEICESTER AGEING TOGETHER INITIATIVE

The representative from Vista who was going to provide an update on the Leicester Ageing Together Initiative was not present, so no discussion on this item took place.

22. ANNUAL REPORT OF THE LEICESTER SAFEGUARDING ADULT BOARD

Dr David Jones, Independent Chair of the Leicester Safeguarding Adults Board (LSAB) presented the Board's Annual Report for 2014-15. Dr Jones explained that the Care Act 2014 had required Safeguarding Adult Boards to be established as a statutory requirement and it was also a statutory requirement for the Board to produce an annual report.

Dr Jones explained that because of the reductions in budgets, there would be an impact on middle and senior managers and that this would create pressures in maintaining partnerships. Members heard that Dr Jones was also Chair of the Leicester Children's Safeguarding Board, and the responsibilities on this Board had taken up more of his time following a recent Ofsted inspection. Dr Jones stated that he would be shortly standing down as Chair of the Boards and there was an intention to appoint different Chairs for each of the Boards.

Members considered the report and raised the following queries and comments.

Dr Jones was asked whether any lessons had been learned from the recent Children's Ofsted report that could also be applied to Adults Social Care.

Dr Jones responded that the central issue was in getting a framework of understanding as to how well services were delivered. In order to do this, it was necessary to have a comprehensive set of statistics, qualitative information and analysis. This challenge had been identified in the Ofsted report and it also applied to Adult Social Care across the country, not just in

Leicester. A robust response to this was being developed.

A member referred to Dr Jones' concern about the budgetary cuts and its impact on senior and middle management and the subsequent pressure in maintain partnerships. The Leicester Adults Safeguarding Board had been established before the Care Act made it a statutory requirement, and she questioned whether the extra time that the Board had been established had been helpful in embedding structures to maintain those partnerships.

Dr Jones responded that there had been a dedicated commitment to the Board, but all the agencies reported that it was getting harder to find the time to continue with that commitment. A certain level of engagement was required and if the number of people available to do this was reduced, there was a risk to that level being engaged. He suggested that this was something that the Commission might want to monitor.

A Member referred to Strategic Priority Area 3, Participation and Involvement and questioned what had been learned from the partners working jointly in a whole family approach.

Members were informed that in respect of family working, it was always a challenge for front line staff to be aware of the needs of others in the households. While focussing on the person with the primary needs, the needs of others in the family could be overlooked. There may be, for example, a young carer in that family. He stated that research showed that these other members of the family were not always identified as well as they should be. However, the key to this was communication, in order to obtain an overall picture of the whole family situation and to ascertain any risks and what support might be needed.

A Member referred to the issues and challenges for 2015 / 16 which stated that one of the areas identified in the report for further development was to strengthen the participation and involvement of service users in strategic planning and the work of the LSAB. Dr Jones expanded on this and explained that it was important to listen to service users and learn about their experiences. For adults, the situation was complex in that they may choose to live in a situation that presented some risks, but this was their right and they needed to be listened to. Dr Jones added that this was something that the partners were working on, but he felt that there was a need to engage more. The Director for Adult Social Care and Safeguarding commented that it was still early days but their approach to the strategy had been shaped by their engagement with service users and by listening to their experiences.

The Vice Chair referred to the findings of the completed safeguarding referrals in para 5.8 of the report and stated that there was an inaccuracy in the calculations because the figures did not add up. The Director stated that she would look at this and confirm the correct figures to Members.

Members considered the statistics relating to safeguarding referrals received according to ethnic groups and noted that 73% came from White / British

Groups compared to 22% from Asian or Asian British Groups. Dr Jones explained that the statistics were crude but enabled them to ask the questions as to how safeguarding was operating across the city; for example were all communities being met? He also expressed concerns about the rhetoric relating to people with disabilities as sometimes people on benefits were deemed to be scroungers. He believed that there was a need to be alert and to help raise awareness as to what help was available.

The Deputy City Mayor commented that there might be a way of producing a more robust comparison around ethnicity. He also suggested that it would be helpful to look at different patterns in different settings, such as in people's own homes and residential settings.

There was some discussion around Deprivation of Liberty Safeguards (DoLS) as detailed in para 5.9 of the report. It was noted that there were 221 new referrals waiting allocation. Concerns were expressed that the number was high and that the people awaiting referral were vulnerable. The Director explained that this figure did not relate to people who had been reported as being abused. The ruling in the cases of P v Cheshire West had widened the criteria for someone who could potentially be subject to a Deprivation of Liberty. This had resulted in a significant increase in numbers of referrals and in response the council had invested in resources and increased the number of people to deal with those referrals. A triage system had been introduced and they were also working with care home providers, as following on from the Cheshire ruling, some care homes had referred every one of their residents.

The Chair commented that she believed that carers were not valued enough. She also suggested that it would be useful when delivering training sessions to show examples of poor care and how care could be delivered better. The school where she was a governor had a monitoring system where staff could video themselves and watch it later as a training exercise to see if there were areas of their performance which they could improve upon. The Chair wondered whether the LSAB had considered a similar strategy.

Members questioned whether there were any safeguarding issues that needed to be addressed. Dr Jones responded that they were looking at service user involvement and there was a need to keep a focus on this. There was also a need to understand performance across the city and of being aware of how well the key services and partners were working together.

In relation to a concern about reaching diverse communities, the Deputy City Mayor stated that it was important to make sure that people of all communities knew what to do and what help was available. Adult safeguarding was a relatively new initiative and because of language and cultural differences there was a broader challenge in raising awareness. The Director added that they were working across the board to include all communities, including the Lesbian, Gay, Bi-sexual and Transgender communities.

The Chair extended her thanks to Dr Jones for his contribution to the LSAB over the past six years adding that the work he had carried out was of great

importance. The Deputy City Mayor concurred with the Chair and also thanked Dr Jones for his commitment to the LSAB.

RESOLVED:

that the Commission

- 1) note the Leicester Safeguarding Adult Board's arrangements that are in place to oversee safeguarding activity in Leicester;
- 2) note the content of the Annual Report;
- 3) request clarification of the numbers detailed in para 5.8 of the report relating to the findings of completed safeguarding referrals;
- 4) request that future reports have more sophisticated data, particularly around ethnic groups.

23. VOLUNTARY AND COMMUNITY SECTOR (VCS) ADVOCACY AND CARERS' REVIEW: PROGRESS UPDATE

Members considered a progress update on the Voluntary and Community Sector (VCS) Review.

As part of the review, consultation had been undertaken with the VCS Advocacy providers to consider the impact of the Care Act and to determine a future service model. The Deputy City Mayor stated that the findings from the consultation had demonstrated that there was no consensus amongst the providers as to what they wanted going forward. This meant that it was likely that some of the providers would be unhappy with the outcome.

Councillor Cutkelvin stated that it would be helpful to see some outcomes from the consultation including information relating to the associated Equality Impact Assessment. The Deputy City Mayor responded that they could be shown to Members when they were ready, but at the moment the consultation had not been finalised. Concerns were expressed that by the time the Commission saw the findings of the consultation, it would be too late to feed in any comments.

The Deputy City Mayor stated that he would circulate a paper on the way forward along with the findings of the Service Users' consultation from 2013-14. Councillor Cutkelvin requested that there would be an opportunity to comment on the findings of the consultation in a public meeting, if required.

RESOLVED:

that the Commission:

- 1) note the update on the VCS Advocacy and Carers' Review; and
- 2) request that the findings of the consultation and the Equality

Impact Assessment be circulated to Commission Members or brought to the next meeting.

24. UPDATE ON THE ELDERLY PERSONS' HOMES PROJECT

Members were asked to consider an update on Elderly Persons' Homes Project.

The Director of Social Care and Safeguarding stated that the residents were coping with the change. While it was an anxious time for residents and their families, they did feel supported. The Council were doing their best to help those affected through the process.

Members asked about the morale of staff affected by the closure of the Elderly Persons' Homes. The Director explained that there was an organisational review taking place; the Council were working with the Trade Unions who were comfortable with the process. There were opportunities for the staff to be re-deployed.

RESOLVED:

that the update on the Elderly Persons' Homes Project be noted.

25. MODELS OF COMMUNITY SCREENING AND ASSESSMENT: DRAFT SCOPING DOCUMENT

The Commission was asked to consider a draft scoping document for a scrutiny review into 'Models of Community Screening and Assessment'.

Members suggested that when gathering evidence from witnesses, the views of the current provider should also be sought. The Director of Social Care and Safeguarding explained that as the current provider was the Council, the scope included Council officers, so it had already been captured.

The Chair, Vice Chair, Councillors Cutkelvin and Khote all confirmed that they wished to be involved in the Task Group and the Chair said that the remaining members of the Commission would also be invited.

RESOLVED:

that the Commission agree the draft scoping document for the Task Group Review into 'Models of Community Screening and Assessment'.

26. ADULT AND SOCIAL CARE SCRUTINY COMMISSION WORK PROGRAMME

Members were asked to consider the Adult Social Care Scrutiny Commission Draft Work Programme for 2015-16.

A Member referred to the Voluntary and Community Sector Advocacy and

Carers' Review as discussed earlier in the meeting. She acknowledged that the findings of the consultation would be circulated to Commission Members, but asked that the review be added onto the work programme as a potential item.

The Chair added that there had been a recent Executive Decision relating to the Development of a Specialist Dementia Care Scheme, and she requested that this item also be added to the work programme.

RESOLVED:

that it be agreed that the following two items be added to the work programme:

- 1) Voluntary and Community Sector Advocacy Carers' Review (potential item); and
- 2) the Development of a Specialist Dementia Care Scheme.

27. ANY OTHER URGENT BUSINESS

The Director of Social Care and Safeguarding submitted her apologies for the next meeting of the Adult Social Care Scrutiny Commission to be held on Tuesday 3 November 2015.

28. CLOSE OF MEETING

The meeting closed at 6.55 pm

Minute Item 20

Questions: ASC Scrutiny 22-09-15

1) Has it been possible for the number of service users having their care packages reviewed to be increased?

It is possible to provide comparative data on all people who had a review in 2014/15 and those reviewed in this year to date, using the statutory data set.

All users receiving a package (Long or short term)

	14/15	15/16 (Apr - Aug 15)
No of service users with at least one review in the period	3165	1418
No of service users in receipt of a package of care in the period	7663	6437
% reviewed in the period	41.3%	22.0%
		Y/E forecast = 51.9%

Based on current activity this would project that 52% of service users would have had at least one review in the year. This would be an increase to last year.

2) Is there a means of knowing how many of the reviews resulted in an increase in support, a decrease or a maintenance of the current service?

The outcome of reviews is now recorded, where this is a review of a long term service and it results in a change to a community based package of care.

Outcome of Reviews (Long term services only)

Based on LTS Support reviews	No of service users (LTS)	LTS package increased	LTS package decreased	No change in long-term support
No of service users reviewed 14-15	2674	699	179	1153
% of service users reviewed		26.1%	6.7%	43.1%
No of service users reviewed 15-16	1295	275	97	547
% of service users reviewed		21.2%	7.5%	42.2%

The figures do not equate to 100%. The balance will include people who have an alternative outcome including admissions to residential care, deceased, services ceased.

3) Has it been possible to increase the number of people with dementia attending community based services?

This indicator relates to people accessing services as a preventative measure rather than through assessed social care service provision.

The Alzheimer's Dementia Service has been developed this year and in the first quarter 147 people attended the 3 memory café/activity groups. 76 of those attending were people with dementia and the rest were carers. Compared with the previous level of provision this represents an increase of 53 people accessing this dementia service.