



Leicester
City Council

Minutes of the Meeting of the
ADULT SOCIAL CARE SCRUTINY COMMISSION

Held: TUESDAY, 3 MAY 2016 at 5:30 pm

P R E S E N T :

Councillor Cleaver (Chair)
Councillor Bajaj (Vice Chair)

Councillor Cutkelvin
Councillor Halford

Councillor Joshi
Councillor Khote

In Attendance

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

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55. APOLOGIES FOR ABSENCE

An apology for absence was received from Councillor Dawood.

56. DECLARATIONS OF INTEREST

Councillor Joshi declared an Other Disclosable Interest in the general business of the meeting in that his wife worked in the City Council's Reablement team. 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.

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. Councillor Joshi was not, therefore, required to withdraw from the meeting.

57. CHAIR'S ANNOUNCEMENTS

The Chair thanked staff in Leicester City Libraries for taking on board the suggestion raised at the previous meeting, to promote books on Autism during Autism Week. The Chair also welcomed the news that Leicester Museums was consulting on how the service could be improved for people with Autism. The Chair added that she was very pleased that Leicester Libraries and Museums had responded so positively to the issue and hoped that it would continue.

58. MINUTES OF THE PREVIOUS MEETING

The minutes of the previous meeting of the Commission had been previously circulated, and Members were asked to confirm them as a correct record

RESOLVED:

that the minutes of the previous meeting of the Adult Social Care Scrutiny Commission held 8 March 2016 be confirmed as a correct record.

Members discussed progress on actions agreed at the previous meeting of the Adult Social Care Scrutiny Commission on 8 March 2016. The Chair queried whether responses had been received relating to questions about the number of safeguarding referrals and whether, in the primary contact, domestic violence was a presenting issue. It was agreed that this would be checked.

The Commission heard that in relation to the Leicester City Better Care Fund 2016/17, a letter to the Minister of State around the bureaucracy in delivering the Better Care Fund, was being finalised.

59. PETITIONS

There were no petitions.

60. QUESTIONS, REPRESENTATIONS AND STATEMENTS OF CASE

With the agreement of the Chair, Sue Cowling, Chief Executive of Norton House presented a Statement of Case to the Commission. This was in response to a question raised at the meeting of the Health and Wellbeing Scrutiny Commission and the Adult Social Care Scrutiny Commission on 14 January 2016. The Statement of Case is attached to the back of these minutes.

The Chair thanked Ms Norton for presenting the Statement of Case.

61. ADULT SOCIAL CARE PEER CHALLENGE

The Commission considered a report from the Strategic Director, Adult Social Care and Health that presented the findings of a Peer Review of Leicester City Council's Adult Social Care Services. The Chair congratulated all concerned on the work being undertaken during the current challenging financial situation.

The Strategic Director explained that the key focus of the review was on leadership and how Adult Social Care in Leicester was prepared for the leadership challenges it faced. This appeared to be an appropriate focus when taking into account the recent changes in leadership and the increasing demand on services within the current financial constraints.

Members heard that the feedback produced no surprises, as the review highlighted areas which the service had already identified.

Members were invited to comment and ask questions on the report and points made included the following:

- How would the Service respond to the feedback received? Would there be an action plan?

The Strategic Director explained that they were mapping areas identified with pieces of work being undertaken. The leadership team would track this work and there would also be a self- assessment review later in the year.

- Was there a benchmark to enable Leicester to be compared to other Local Authorities?

The Strategic Director explained that all Local Authorities completed the same self-assessment tool, but could identify their own areas to review under the Peer Review process. This would provide a better focus on what was relevant to each authority. In addition to this Peer Reviews would make reference to the nationally available datasets and statutory data returns that all councils with adult social care responsibilities returned to the national data centre. These outcomes had been previously reported to the Commission in November 2015.

- It was noted that one of the findings from the review was that more clarity was needed as to where the boundaries of Adult Social Care were, and a Member questioned what this meant.

The Strategic Director responded that Adult Social Care had certain statutory obligations. Leicester City Council's adult social care offer was more extensive than some other Local Authorities and it went beyond the statutory requirements. There was a challenge however in continuing to go beyond those statutory obligations in view of the financial pressures the Council were under. The Chair queried how any resulting gap could be filled if that offer was reduced. The Strategic Director responded that there was an issue around people's expectations and there was perhaps a need to try to push back some of those expectations to balance people's needs with what the Council could do. Expectations around residential care were especially difficult to address. The Chair stated that from her experience, people did not want to go into residential care, but preferred to remain in their own home. If people were aware of what help was available locally, this would help to

avoid isolation. The Chair added that she believed that Adult Social Care started at birth with families encouraging healthy lifestyles, growing their own food and with getting involved in the local community.

A concern was expressed that the findings of the review identified a high level of staff sickness. The Strategic Director explained that work was ongoing to address this, with the initial focus on long term sickness. Sickness levels were being managed in accordance with the council's procedures; but the pressures that staff were under were recognised.

It was noted that the findings of the review also referred to John Bolton and his work on resources. In response to a question, the Commission heard that John Bolton had undertaken a considerable amount of work on the use of resources in adult social care nationally. His report reflected that part of the problem was the national funding crisis and the funding pressures that had been placed on Local Authorities. He stated that everyone had assets (or strengths) and there was a need to develop those strengths to build resilience, as opposed to focussing on what that person could not do. Members commented that they welcomed that approach, but there was a need to recognise that some people might over-estimate their own abilities. The Strategic Director responded that a competent social care practitioner would work with people effectively to gain a robust insight into the person's needs; this might involve asking a question in several different ways. However, if a person was insistent that they were able to do something, and had the capacity to decide this, there was little that social care could offer to overcome the person's choice.

AGREED:

that the report be noted.

62. ADULT SOCIAL CARE STRATEGIC PRIORITIES FOR 2016 / 17

The Strategic Director, Adult Social Care and Health presented a report that gave an overview of the strategic priorities for Adult Social Care for 2016/2017. As part of this, Members were referred to a set of six Strategic Priorities that were established for the year:

- 1) Improve the experience for our customers of both our own interventions and the services we commission to support them.
- 2) Implement a preventative and enablement model of support, to promote wellbeing, self-care and independence and recovery into an 'ordinary life'
- 3) Improve the opportunities for those of working age to live independently in a home of their own and reduce our reliance on the use of residential care, particularly for people with learning disabilities or mental health support needs.
- 4) Improve our offer to older people supporting more of them to remain at home and to continue to reduce our reliance on the use of residential

care.

- 5) Improve the work with children's social care, education (SEN) and health partners to continue to improve our support for young people with care and support needs and their families in transition into adulthood.
- 6) Continue to develop our understanding of the benefit to our customers of what we do, and to learn from this information so as to improve and innovate

A Member commented that there was a perception that people depended too much on Adult Social Care, but those six Strategic Priorities emphasised that the priorities were intended to improve peoples' quality of life. He believed that it was important to enable people to be as independent as possible and he hoped that those priorities would be implemented.

In response to a question; the Strategic Director explained that there were plans to implement each of the above priorities; and for example a report on promoting independence and reducing the use of residential care was included on the agenda. The Chair asked for the some of the implementation plans to be added to the Commission's work programme.

Support was expressed to promote independent living but Members questioned what support would be available to enable people with mental health problems to continue to live at home. The Strategic Director responded that people with mental health issues and living at home with families may receive a support package which could pay for a Carer. Alternatively it was possible that this might be an issue to be resolved by Housing rather than Adult Social Care if the needs were related predominately to housing and not care and support.

Members asked how someone who was having difficulties in living independently might be identified as being in need. The Strategic Director responded that if there was an incident at home which resulted in a hospital visit, that person's needs would be identified there. However, a high proportion of referrals came either from the community or were self-referrals. The main concern was with older people who were not in contact with their G.P. as in those cases their situation may not be identified unless there was an incident. Councillor Joshi informed the Commission that there was a considerable amount of help and support available for people with mental health issues and a G.P. would be able to signpost to the appropriate agency.

The Chair referred to the Shared Lives initiative and questioned whether there might be any funding available, perhaps through the Lottery or European Union, to enable family homes to be extended to become a shared property. An example might be for a bedsit to be added to a property so that someone could support an elderly relative.

Councillor Palmer, Deputy City Mayor responded that the Council were committed to finding ways to support independent living and for some families this might be a solution. The Government however had looked at this option

before and the take up had been minimal. It was however an interesting suggestion and there was a need to consider carefully as to how this could be progressed. The meeting heard that equity release was an option and many elderly people were asset rich but generally reluctant to release equity on their property.

AGREED:

that the report be noted.

63. PROMOTING INDEPENDENCE AND REDUCING THE USE OF RESIDENTIAL CARE

The Strategic Director submitted a report that provided an overview of the actions that were being undertaken to promote independence and to reduce the use of residential care, especially for people with learning disabilities and mental health issues.

The Director for Care Services and Commissioning (Adult Social Care) outlined actions that were being taken in response to the requirements of the Care Act 2014, to promote wellbeing, as a means of reducing the reliance on Adult Social Care services and enabling people to experience an ordinary life. These requirements were reflected in two of the key Adult Social Care Strategic Priorities

- 1) Implement a preventative and enablement model of support, to promote wellbeing, self-care and independence and recovery into an 'ordinary life':*
- 2) To improve the opportunities for those of working age to live independently in a home of their own and reduce reliance on the use of residential care, particularly for people with learning disabilities or mental health support needs.*

The Director explained that an enablement service had commenced on 1 April 2016. Actions would include the transformation of the existing day care services into the enablement service. Changes would be handled sensitively to avoid any detrimental effect on the carers, especially as their respite often came from existing services. There was therefore a need to remain alert to this.

The Chair referred to the report and noted that there were plans to support 197 people of working age (18 – 64 years) to move out of residential care into independent living schemes and questioned when this was expected to happen. The Director responded that they knew who those people were, but they had not yet spoken to them or their families. It was a four year programme and the Council intended to offer alternative accommodation but there was a need to do this in a measured and planned way.

The Chair stressed the importance of a robust system to be in place for providing alternative accommodation; housing needed to be offered in an

appropriate place, close to the person's work and friends.

AGREED:

that the report be noted.

64. ADULT SOCIAL CARE USER EXPERIENCE SURVEY: ANALYSIS OF RESPONSES-QUARTER FOUR- 2015/16

The Strategic Director, Adult Social Care and Health submitted a report that presented summary information on responses received during the first two months of running an adult social care user experience survey.

The Strategic Director explained that people's perceptions of adult social care in Leicester were at the lower end of the national experience as reported through the nationally recorded outcomes dataset. This was a concern to the council and the survey was an attempt to try to understand the reasons for the low satisfaction levels. There was a question as to whether the low satisfaction levels were a reflection of service users' interaction with the Council, whether it was in relation to the assessment process or to do with the quality of services provided to meet care and support needs. The Strategic Director explained that there was an obligation and duty under the Care Act to ensure the service users understood the assessment process. The survey covered in this report was focussed on seeking to understand people's experience of the Department's Contact / Access service and the interaction with practitioners around key processes such as assessment or review.

Members noted that 267 responses had been received between January and March 2016, and a query was raised as to what percentage this was of the total. The Strategic Director agreed to look into this.

The Deputy City Mayor commented that the survey could be potentially very useful as the information received could prove to be important in driving change. Members also commented that they welcomed the survey and it was agreed that updates on the survey should be brought to the Commission twice a year.

The Chair stressed the importance of ensuring that any carers who received negative comments were given appropriate training. The Strategic Director responded that they would need to look to see if any patterns emerged from the survey responses. He further assured the Commission that where any significant concerns raised through the feedback about any practitioner or interaction with the department was identified, that this would be followed up by managers.

AGREED:

that the report be noted and further updates be brought back to the commission every six months.

Action	By Whom
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Details of the percentage of responses received to be circulated to members of the Commission.	The Strategic Director, Adult Social Care and Health
The Adult Social Care User Experience Survey: Analysis of Responses to be added to the work programme and brought to the Commission every six months.	The Scrutiny Policy Officer.

65. ADULT AND SOCIAL CARE SCRUTINY COMMISSION WORK PROGRAMME

There were no comments on the Adult Social Care Scrutiny Commission work programme.

66. VOTE OF THANKS

Cllr Joshi thanked the Chair and Vice Chair for the way they had led meetings of the Adult Social Care Commission during the municipal year.

The Chair in turn thanked Members for their contribution to the Commission and also extended her appreciation to all staff in Adult Social Care for their work, in what was a very challenging department.

67. CLOSE OF MEETING

The meeting closed at 7.20 pm.