



Leicester
City Council

Minutes of the Meeting of the
ADULT SOCIAL CARE SCRUTINY COMMISSION

Held: TUESDAY, 25 OCTOBER 2016 at 5:30 pm

P R E S E N T :

Councillor Cleaver (Chair)
Councillor Chaplin (Vice Chair)

Councillor Dempster

Councillor Riyait

Councillor Khote

In Attendance

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

Pat Hobbs -Healthwatch

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27. APOLOGIES FOR ABSENCE

Apologies for absence were received from Councillors Hunter and Thalukdar.

28. DECLARATIONS OF INTEREST

No declarations of interest were made.

29. MINUTES OF THE PREVIOUS MEETING

RESOLVED:

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

30. PETITIONS

The Monitoring Officer reported that no petitions had been received.

31. QUESTIONS, REPRESENTATIONS AND STATEMENTS OF CASE

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

32. LEICESTER SAFEGUARDING ADULTS BOARD - ANNUAL REPORT

The Strategic Director, Adult Social Care submitted the Annual Report of the Leicester Safeguarding Adult Board (LSAB). The Chair welcomed Jane Geraghty, the Independent Chair of the Board to the meeting and invited her to present the report to the Commission.

Ms Geraghty explained that she had been appointed as Independent Chair of the Board in December 2015 and therefore this was her first annual report. During this period she had spent a considerable amount of time looking at governance details to ensure that the Board was fit for purpose.

The Board's first 'Away Day' had recently been held which focussed on implementation of the safeguarding obligations within the Care Act and trying to ensure that there was a clear safeguarding pathway for vulnerable adults across the whole system in the City. An area that caused concern was relating to the number of repeat enquiries and the growth in Deprivation of Liberty Safeguards (DoLS), though Members heard that the latter was a national rather than a local issue. The Board now had a clear set of priorities but it was acknowledged that there was work to be done.

The Chair extended her thanks to Ms Geraghty and commented that the report was excellent.

A number of questions and comments were raised as follows:

- It was noted that there were still a large number of people waiting for assessment for the DoLS and further information was sought on this issue.

The Strategic Director responded and explained that the Local Authority was responsible for DoLS and there had been a significant increase in the number of cases following the ruling in the Cheshire West Case. The Government had not increased funding to local authorities to deal with the increase in DoLS, because they said that this was not a new responsibility for local authorities to deal with. This decision was currently being challenged and four local authorities were taking the Secretary of State to Court. The outcome of this judicial review was awaited and it was hoped that there would be an increase in funding to local authorities if the judicial review was successful. It was not known when the judgement might be made public.

- Ms Geraghty was asked whether she was confident that all procedures were in place in the event of there being a safeguarding issue and Ms Geraghty responded that it would be very difficult for any organisation to state that they were confident that their systems could cope with any eventuality. She was however very impressed with the contribution of all the partners as they

worked together on the LSAB. In response to a question about any potential weaknesses in the system, she explained that while the Board knew what questions to ask, they but did not always have the answers to those questions. There was however a peer review to challenge the Board and also a great deal of qualitative information to inform monitoring.

- The Chair asked whether there was a contact list for people to use in the event of a safeguarding issue. The Director of Adult Social Care and Safeguarding responded that while there was not a list, there was a robust system and where an issue was reported, those people would know how to make an 'alert' to the local authority. The local authority had a duty to ensure that those alerts were actioned.
- The Chair stated that there had been a recent programme on Radio 4 about people, diagnosed with dementia and living in care homes, who were being targeted by abusers. She asked whether there was anything further that could be done to completely check on residents' safety and also help care-workers and families recognise signs of abuse and know what action to take.

The Director of Adult Social Care and Safeguarding explained that Safeguarding Level 1 training was widely available within the local authority and voluntary sector and people were given details of how to report abuse. The safety of people in care homes was a responsibility of the providers. Local authority staff carried out quality monitoring visits and as part of these, they checked that staff had the necessary DBS clearances. However, no system was 100 % safe so it was extremely important that staff looked out for signs of abuse.

- In response to a question about the LSAB, Ms Geraghty explained that it was very important that all partners in the Board were active partners. There was a good involvement in the Board's sub-groups and very good compliance in meeting attendance. All partners needed to take responsibility for delivering the work programme. Ms Geraghty added that the right people were involved in the LSAB.
- The importance of case audits was emphasised and a query was raised as to whether they were taking place and if so, with what frequency.

The Commission heard that the LSAB were developing a stronger use of the Carers' Voice, an organisation which would advise and challenge the Board's priorities. This would provide useful feedback, but it was work in progress and more information could be given on this next year.

The Board was a partnership of individual agencies, all of which had their own responsibilities. These agencies would be carrying out their own case audits. The Director of Adult Social Care and Safeguarding stated that the local authority recognised that more audits were needed and there would for example, be an audit around repeat referrals; there was also an aim to carry out more multi agency audits.

The Director was asked whether it was known what 'Good' looked like, and she explained that with multi-agency audits a pro-forma, with a measurement for 'Good' was agreed collectively. There were people skilled in safeguarding audits, who would identify areas for improvement. Where issues were identified, a practical response was put in place straight away.

- Concerns were expressed relating to the difficulty that the LSAB might have in engaging with some vulnerable people. Although user groups may be consulted, this would result in reaching the same group of people rather than engaging with different service users. The Commission heard that the Board were hoping that Healthwatch would help to widen that engagement.
- It was noted that both Councillor Palmer, Deputy City Mayor with responsibility for Adult Social Care, Health Integration and Wellbeing and Councillor Master attended meetings of the Board and their relationship to that was queried. Councillor Palmer explained that he was a member of the Board, and his role was to make sure that the assurances regarding safeguarding were in place. He did not have a vote on the Board. Councillor Master, Assistant Mayor, Neighbourhood Services attended meetings because of his work in the Safer Leicester Partnership.
- The Chair referred to the report which stated that 1404 communications were received relating to concerns of abuse and neglect, and queried that 641 of those communications were not responded to under local safeguarding adults' procedures. The Director of Adult Social Care and Safeguarding explained that concerns raised may not relate to safeguarding, although action may still be taken.
- The Chair questioned whether more could be done to encourage referrals from some of the minority ethnic groups, as they were substantially lower in number than those from the white ethnic group. Ms Geraghty replied that the Carers' Forum and Healthwatch had numerous contacts and this issue was on the Board's agenda in order to raise awareness in all communities.

The Chair stressed the importance of members of the public being given as much information about adult safeguarding as possible.

The Chair commended the work and achievements of the LSAB and asked Members of the Commission to note the report.

AGREED:

that the report be noted.

33. LEICESTER AGEING TOGETHER

Sam Larke, Programme Lead, Vista was in attendance to deliver a presentation to the Commission on 'Leicester Ageing Together'. A copy of this presentation is attached at the back of these minutes.

The Chair thanked Mr Larke for the presentation and asked him what he

thought were the top achievements for the project. Mr Larke responded that a great deal of work was taking place relating to sustainability to keep projects alive once funding had finished. He commented on how well all the partners were working together.

It was noted that five wards within the city were chosen for involvement with the project although there was also citywide coverage on certain issues. These wards were Spinney Hills, Belgrave, Wycliffe, Thurncourt and Evington and a query was raised as to why those particular wards were chosen. The Lead Commissioner, Dementia, Adult Social Care and Commissioning, was invited to the table to respond. She explained that the set criteria necessitated the requirement to identify where the target beneficiaries lived. They looked at a population needs analysis, indices of deprivation and in addition there was a considerable amount of community engagement. A Member pointed out that there were no wards from the west of the city within the project, and the Lead Commissioner responded that a great deal was learned from the project which could be applied citywide.

A Member asked about the type of activities that were taking place and Mr Larke responded that these included 'Men's Sheds' and 'Singing for the Brain'. A Member added that there was deprivation in the ward she represented, but residents there could attend activities in those specified wards. It was agreed that further details of the activities offered would be emailed to the Scrutiny Policy Officer.

A Member commended the project and efforts to make it sustainable, but expressed concern that there would be expectations for the council to continue to provide those activities once funding had finished. She commented that this could cause problems as in her view it was unlikely that the council's financial situation would improve. Mr Larke explained that Leicester Ageing Together was exploring different models of sustainability.

The Chair thanked Mr Larke for his presentation and asked Members to note the report.

AGREED:
that the report be noted.

34. LOCAL ACCOUNT FOR 2015/16

The Strategic Director, Adult Social Care submitted a report that presented the Leicester Adult Social Care Local Account for 2015/16. The report summarised key developments, achievements and performance over the course of the year and set out future plans in response to challenges faced.

Members raised a number of comments and queries on the report to which responses were given. These included the following:

- A Member praised the Shared Lives scheme and asked whether there were plans to increase the number of service users. The Strategic Director

responded that there was no fixed upper limit on how many people could be supported under the scheme, but it took a special type of person who would want to be a carer and welcome other people into their own home. There were campaigns to attract more carers, one of which had just been held. A Member suggested that a 'drip drip' feed would be more successful than occasional campaigns and asked whether the officer with responsibility for publicity schemes for fostering children might have capacity to do something similar for Shared Lives.

- In response to a query relating to Independent Living Support, Members heard that this was a very specific service which was contracted out. The council were looking at how effective this was and as such it was an area of review. Service users would be consulted as part of this review.
- The Chair commented that some people were selling their homes to move in with their parents in order to care for them, or were making adaptations to their homes to accommodate their parents. She asked whether the council could do anything to encourage this. The Strategic Director explained that they would always support such initiatives and they also worked with the Housing Service to try to help where appropriate. However, there may be financial considerations for families to consider. Carers involved in the Shared Lives scheme, received a payment from the local authority, but this payment did not apply to families caring for one of their own.
- A Member questioned whether reviews and re-assessments were on track. The Strategic Director explained that the aim was that by the end of the year, there would be no outstanding reviews exceeding a period of 15 months. However, because of the current financial and resourcing pressures and a fluctuating demand and workload, this might not be achievable. Efforts would be made to achieve that aim as quickly as possible on a sustainable basis.

A Member suggested that a firm target should be set and the Commission heard that this was a firm and very ambitious target. There were pressures within the department, but the Strategic Director added that ambitious targets should be set to help the service achieve high standards. A Member expressed some surprise that the setting of a target was acknowledged, when previously the Commission had been informed that this was unnecessary. The Strategic Director responded that he had set a target, after his appointment to this post, because he needed an assurance that progress was being made. Further information on reviews would be reported back in regular Quarterly Performance Reports.

- Concerns were expressed that as part of the vision for Adult Social Care, from reading the report, it appeared that the council did not provide any funding towards prevention and intervention, although money was made available from other sources. The Strategic Director confirmed that the Council did fund prevention and intervention and agreed to clarify the text in the Local Account.

- A Member asked how 'soft' complaints were recorded. The Commission heard that there were various ways in which these were picked up, including team meetings and team leaders' forums. Informal complaints might be due to a failure to understand the decision made. A suggestion was made that team meetings include an agenda item to discuss complaints; it might be that one team was more affected by such complaints than others.

AGREED:

- 1) that the report be noted; and
- 2) that the Strategic Director, Adult Social Care clarify the text in the Local Account regarding funding for prevention and intervention initiatives.

35. CHANGES TO DEMENTIA SUPPORT

The Strategic Director, Adult Social Care submitted a report that provided the Commission with an overview of the proposal to change the way dementia support was provided for people diagnosed with the condition. The Commission heard that the new proposal would provide one co-ordinated approach across the NHS and Social Care for Leicester, Leicestershire and Rutland.

Members raised comments and queries to which responses were given. These included the following:

- In response to a concern that the amalgamation might result in some services being lost, Members heard that services would not be lost but would be delivered in a collaborative way across the county. This might lead to a more robust and sustainable system. The service would also provide a better and more holistic offer which would be easier to access. It was also expected that there would be better outcomes.
- A Member asked as to the size of the market for potential providers, and was advised that the potential market was not large. Four providers had come forward in a previous commissioning exercise.
- In response to a concern about staffing, the Strategic Director explained that the authority had a responsibility to ensure that any staff recruited had the necessary skills for their role.

The Chair concluded the discussion stressing that it was important that people learned about dementia.

AGREED:

- that the report be noted.

36. ADULT SOCIAL CARE SCRUTINY COMMISSION'S REVIEW ON COMMUNITY SCREENING- EXECUTIVE RESPONSE

The Deputy City Mayor, with responsibility for Adult Social Care, Health Integration and Wellbeing, provided a verbal response to the Commission's review on Community Screening. The Deputy City Mayor explained that the Chair of the Commission had presented the report to the Executive and he had intended to provide a written response, but unfortunately the typed notes of that meeting were lost due to I.T. problems.

The Deputy City Mayor responded to the recommendations within the report as follows:

- With reference to a communications strategy to raise awareness of the web portal; this was an ongoing piece of work as the portal was now 'live'. The Deputy City Mayor added that it would be useful to have details of usage of the portal
- Work was on-going relating to the recommendation for front line staff to be given the correct information to enable them to make appropriate referrals. Staff were encouraged to signpost to the portal.
- The Deputy City Mayor commented that he did not agree with the recommendation for a 'staff to staff' hotline to be set up, as this undermined the purpose of the portal. He added that if there was an emergency, there was a need to ensure that staff would know what to do and how best to contact the appropriate people.
- A Member questioned if there was a procedure in place for those people who did not want to use the portal. The Deputy City Mayor responded that there would still be the option of face to face contact, although some local authorities were no longer providing this. The Commission heard that there was a Contact Response Team and there was no desire to reduce that service as it would be needed in the event of a serious emergency.

The Chair suggested that it would be useful for further work be carried out to raise awareness of the portal; for example, this might include the use of the television screens in G.P.s surgeries. The Chair requested that a further update on progress on actions made in response to the review's recommendations, be brought back to the Commission.

AGREED:

- 1) that the Executive response to the Commission's review on Community Screening be noted; and
- 2) that the Commission request a further update detailing progress on actions taken in response to the review's recommendations.

37. ADULT AND SOCIAL CARE SCRUTINY COMMISSION WORK PROGRAMME

No changes or additions to the Commission's work programme were requested but the Chair asked Members to contact the Scrutiny Policy Officer if they had any comments or suggestions for amendments.

38. ANY OTHER URGENT BUSINESS

The Chair agreed to accept the following report as urgent business in accordance with Scrutiny Procedure Rule 14, (Part 4E of the Council's Constitution).

Kingfisher Unit: Future Options.

The Chair stated that she had agreed to accept the item as urgent business in order for the Scrutiny Commission to have the opportunity to consider and comment on the report, prior to a decision being taken by the Executive. A delay would result in a failure to achieve the required savings, which were necessary given the cuts faced by the Council.

39. KINGFISHER UNIT: FUTURE OPTIONS

The Strategic Director submitted a report that sought Lead Member confirmation of the preferred way forward for the delivery of intermediate and short term care, currently provided in the part via the Kingfisher Unit.

A concern was raised as to the role the Commission had in respect of any decision the Executive made on the options available. There appeared to be no mention of Scrutiny within the report. Concerns were also raised that many of the reports that came to Scrutiny Commissions across the Council no longer had the timelines and chronology for when and where the reports would be considered.

In response, Members were advised that the report included recommendations for Scrutiny; however in respect of timing, the Deputy City Mayor explained that the report had been brought to this meeting at his request. He accepted that the chronology had not been handled in the best way, but he wanted the Commission to have the opportunity to consider and comment on the options and the next meeting would not be held until December. Commission Members asked the Deputy City Mayor to talk to the Executive about how a more effective interface with Scrutiny could be ensured.

A Member asked about the role of Intermediate Care and how it fitted in with the options outlined in the report. Concerns were expressed that there appeared to be serious legal implications on both options. The Deputy City Mayor responded that the policy relating to Intermediate Care was being questioned. Intermediate Care essentially offered reablement, which could be facilitated in people's own home. The NHS Intermediate Care as provided in a NHS facility would still continue, but the view was that the Intermediate Care

that the local authority provided was best focussed in people's home. Data and outcomes had been studied and it had been shown that there were better outcomes when this was delivered in a home environment. There were clear risks with Option 2 and it was the Deputy City Mayor's intention to sign a decision notice for Option 1.

In response to a question, the Deputy City Mayor confirmed that by agreeing to Option 1, a clear saving would be made. He acknowledged that up to 10-12 intermediate care beds were likely to be needed, but these could be commissioned across the market.

A Member commented that this was about making savings and also securing the best value. The rationale for the decision was sound and in the best interests of the majority of residents in the City.

AGREED:

that the Commission note the options appraisal and agree to the preferred Option 1, to close the Kingfisher Unit and purchase up to 10-12 short-term beds from current providers in the local market.

40. CLOSE OF MEETING

The meeting closed at 8.25 pm

Sam Larke: Programme Lead



What is LAT ?



Programme Overview

Leicester Ageing Together is one of 15 localities benefitting from the Big Lottery's £82 million Ageing Better programme. The fund was set up to improve the lives of older people

Leicester Ageing Together consists of; 23 projects, delivered by 16 partners, with £5 million of funding



Why the need

Our review of data on need in Leicester City identified the following root causes of isolation:

- Physical and mental health problems and impairments, including mental and emotional health and mobility problems;
- People from BME communities, particularly if separated from a large community and/or experiencing language barriers;
- Poverty;
- Being very old.

19,940 residents aged 50 and over in Leicester assess their daily activities to be limited a lot by a health problem or disability, which has lasted, or is expected to last, at least 12 months.



Isolation and Loneliness is a bigger cause of death than obesity!



Aims Of Leicester Ageing Together

- To reduce the impact of isolation & Loneliness on older people
- To reconnect older people to communities
- To reduce the impact of health conditions on loneliness
- To improve services and their coordination
- To reduce the negative impacts of poverty
- Older people are more engaged in the design and delivery of services

Targets

- 6,400 beneficiaries supported; 50 years +
- 1,100 volunteers recruited and trained



Where?

These wards have been chosen due to their prevalence of risk factors associated with social isolation which had been identified by older people

- Spinney Hills
- Belgrave
- Wycliffe
- Thurncourt
- Evington
- City wide coverage; Hearing loss, African Caribbean Older People, LGBT and Older people who find it difficult to leave their homes



What does LAT partnership working mean?

- Joined up coordination of staff and volunteers
- Shared workforce development and learning
- Asset based Community Development
- Use of central database
- Attendance at partnership meetings
- Reasonable contributions and participation in Evaluation and Workforce Development meetings and events



What are the benefits of a LAT partnership?

- Greater Impact and reach
- Shared resources
- Project sustainability and legacy
- Shared learning
- Match funding
- Wider networking
- Development of good practice models



Workforce Development

- Advise on and develop programme human resources and workforce development processes
- Produce the annual workforce development plan for staff and volunteers across the programme.
- Support the sharing day to day insights and experiences.
- The coordination of the delivery of formal training and workshops



Evaluation

Leicester Ageing Together is a “test and learn” programme and will generate learning through:

- Intelligence gathering and community research
- Monitoring and reflecting on our practice
- Quantitative data gathering- CMF and local evaluator
- Qualitative focus groups



So what have we achieved...?



- Reached over 2700 beneficiaries
- Recruited and trained over 450 volunteers
- Developed a Community Resources directory
- Gathered evaluation data on nearly 300 beneficiaries
- Asset mapped our wards
- Committed and engaged board members
- Growing referrals from Adult Social Care
- Launched new micro projects



What are our plans for this year?



- Reach another 3000 beneficiaries
- Recruited and train another 450 volunteers
- Gather evaluation data on over 400 beneficiaries
- Demonstrate Social Return on Investment (Cost benefit analysis)
- Implement the outcomes of the strategic review
- Regular referrals from statutory service health providers
- Develop transport strategy
- Launch our Learning Network and Peer Research group



Thank You



