



Leicester  
City Council

Minutes of the Meeting of the  
ADULT SOCIAL CARE SCRUTINY COMMISSION

Held: THURSDAY, 9 JANUARY 2014 at 5.30 pm

P R E S E N T :

Councillor Dr Moore – Chair  
Councillor Chaplin – Vice Chair

Councillor Alfonso  
Councillor Fonseca

Councillor Joshi  
Councillor Willmott

In Attendance

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

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**76. APOLOGIES FOR ABSENCE**

There were no apologies for absence.

**77. DECLARATIONS OF INTEREST**

Councillor Chaplin declared an Other Disclosable Interest in agenda item 6, “Elderly Persons’ Homes”, in that she had attended a birthday party for three residents at Herrick Lodge on 3 January 2014 in a private capacity.

Councillor Joshi declared an Other Disclosable Interest in the general business of the meeting in that his wife worked for the City Council’s Reablement service. He also declared an Other Disclosable Interest in the general business of the meeting in that he worked in the voluntary sector with people with mental health problems.

As a standing invitee to Commission meetings Philip Parkinson, Interim Chair of Healthwatch Leicester, declared an Other Disclosable Interest in the general business of the meeting in that his mother-in-law was in receipt of services from the City Council’s Adult Social Care and Safeguarding division.

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 in the last few weeks her mother had started to receive a package of services 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.

## **85. DOMICILIARY CARE**

The Director for Care Services and Commissioning (Adult Social Care) submitted a report providing further information as part of the Domiciliary Care Scrutiny Review. This also addressed questions raised at the Commission's meeting held on 5 December 2013, (minute 69 referred).

Members were reminded that the Council's Communications team would be asked to make an appeal for users of domiciliary care to provide information on their experiences of that care, both positive and negative. In addition, arrangements were being made to enable the Chair to accompany a care worker for a day, to get a better understanding of their work. Appropriate arrangements would be made to ensure that confidentiality and privacy were maintained at all times.

In response to a question from the Commission, the Director of Adult Social Care and Safeguarding explained that, under direct payments, people received a personal budget as a cash payment. The recipient then became responsible for meeting the costs of the services they received.

In reply to further questions from the Commission, the Commissioning Manager (Care Services and Commissioning Division) explained that, during the last week, approximately 22,000 hours of care were provided. The standard of this care was carefully monitored. For example, providers' self-assessments were used and some providers came under the Care Quality Commission. Officers carefully analysed the data and graded providers on their standard of care. For example, an assessment is made of whether the minimum level of care was being provided, or whether there was a higher level of provision.

The contracts had been operating for two months. Their operation had been relatively stable, even during a period of high pressure regarding hospital stays over the Christmas period. However, starting on 27 January 2014, a consultation would be undertaken with users of Home Care. This would be done via the telephone.

It was recognised that people recently had been consulted on various services, (for example, mobile meals and elderly persons' homes), so it was possible that this could result in some "consultation fatigue", but there were no proposals to change the method of consultation at this stage. The consultation would be undertaken through the Contracts and Assurance team. A stratified

sample would be used, but the actual number of people to be consulted was not known at this time.

The Commission welcomed the consultation, but queried whether allowance had been made for the reasoning abilities of some service users. In addition, as the Council was not the service provider, it needed to be made very clear that information provided would be confidential and that individual users would not be identified in the data compiled. The Commissioning Manager assured Members that these factors had been taken in to account in preparing for the consultation. For example, support packages would be checked before anyone was telephoned to make sure they were capable of taking part in the consultation and that, where possible, they could be consulted in their first language.

Members noted that some service users had more than one provider through choice. These people would move to a single provider as soon as possible. Information on the number of people affected by this could be provided, although the reasons for each individual choosing more than one provider would not be available.

The following points were then made during discussion on this item:-

- At some authorities, trades unions had negotiated an agreement that zero contract hours contracts would not be allowed. This included external providers;
- The move away from 15 minute calls was very welcome;
- Currently, the only in-house care service was the Re-ablement service and that team did not use 15 minute calls;
- Consideration needed to be given to whether there should be a sole provider at Danbury Gardens, as there were concerns that to have this would limit choice; and
- In the ASRA scheme the care provider had started a company and so promoted the use of that company to residents in the scheme. This was in direct contrast to the situation at Danbury Gardens and there was concern that it could create problems when people who already had identified their own providers moved in to that facility.

*Amendment made at following meeting (12 February 2014):*

*Post-meeting note: Since the meeting, it has been clarified that the company providing care in the ASRA scheme has provided domiciliary care since before the scheme started. The company was not started for the ASRA scheme. ASRA residents can use this company, but are not obliged to do so, as other providers are available if preferred.*

Particular concern was expressed about the number of people employed by care providers. It was recognised that care workers tended to be a transient work force, but the Commission was assured that the contracts being operated

were not block contracts. Each new care package was offered through a mini tendering exercise, so each package would state the minimum number of staff required for that particular element. The Care Quality Commission did not set minimum numbers of staff required.

At the pre-qualification stage of letting the contracts a full financial assessment was undertaken. This provided reassurance that provider would only take on the number of care packages they could provide. Although it was very unlikely to disrupt care if a large number of staff left a particular provider, there was provision in the contract about the action that would be taken if a large number left or were ill simultaneously. There also was provision in the contract for the Council to suspend a provider from the framework or terminate a package of care, but in practice this would be very unlikely to happen, as contract monitoring would enable action to be taken before it reached this stage.

RESOLVED:

- 1) That the Director for Care Services and Commissioning (Adult Social Care) be asked to provide information at the next meeting of the Commission on the number of people to be surveyed during the consultation of users of Home Care services, the questions they would be asked, the expected length of time of each interview and whether the same person would do all of the interviews;
- 2) That the Director of Adult Social Care and Safeguarding be asked to provide information at the next meeting of the Commission on the following matters:-
  - a) the number of people who currently use more than one service provider; and
  - b) whether the use of zero hours contracts was permitted; and
- 3) That consideration be given to reviewing the different methods of providing care at Danbury Gardens and the ASRA housing scheme.