## SOCIAL CARE AND INCLUSION SCRUTINY & PERFORMANCE PANEL

### THURSDAY 9 JANUARY 2014 AT 6.00 P.M.

#### **Panel Members Present**:

- Councillor B. Douglas-Maul (Chair) Councillor D. Barker Councillor J. Rochelle Councillor D. Coughlan Councillor D. James Councillor L. Rattigan
- Officers Present: Andy Rust, Head of Joint Commissioning Peter Davis, Head of Community Care (Operations) Suzanne Joyner, Head of Community Care Heather Maybury, Principal Customer Liaison Officer Santokh Dulai, Service Manager – Mental Health Matt Underhill, Committee Governance & Business Manager

Portfolio Holders Present: Councillor McCracken – Social Care & Inclusion Councillor Towe – Finance & Personnel

#### 313/13 APOLOGIES

Apologies were received for the duration of the meeting from Councillor Nazir, Councillor Oliver and John Bolton.

#### 314/13 SUBSTUTIONS

Councillor James substituted for Councillor Nazir for the duration of the meeting.

### 315/13 DECLARATIONS OF INTEREST AND PARTY WHIP

There were no declarations of interest or party whip identified at this meeting.

#### 316/13 MINUTES

The Panel considered the minutes of the meeting held on 7 November 2013.

#### **Resolved:**

That the minutes of the meeting held on 7 November 2013, copies having previously been circulated, be approved as a true and accurate record.

### 317/13 FINANCIAL PLAN 2014/15 TO 2018/19: UPDATE ON DRAFT REVENUE BUDGET AND CAPITAL PROGRAMME, AND OUTCOME OF BUDGET CONSULTATION TO DATE

The Portfolio Holder for Finance and Personnel introduced the update. The following is a summary of the update and subsequent discussion:

- It was explained that significant efforts had been made to encourage residents to contribute to the budget consultation with1,400 responses received to date. It was further explained that many local residents supported the majority of budget proposals. There were also a number of areas where respondents had disagreed with the proposals and this would be considered prior to final proposals going to Cabinet and Council in February;
- A Panel Member also noted that local residents had supported the majority of • proposals. In response to a query from the Chair the Portfolio Holder for Finance and Personnel invited Members to put forward any ideas they might have in terms of improving the response rate in future. A Member suggested that Area Panels could be more effectively operated to allow local people a greater say in decision making. The Portfolio Holder explained that an evening consultation event had been held to enable further public participation. A further Panel Member noted that a lot of emphasis had been placed on the use of social media as a means of encouraging individuals to participate in the consultation. However, this was not a suitable approach for all residents. The Member also highlighted that proposals to reduce funding of school transport would have implications for families in Willenhall, particularly those who had little choice but to send children to schools elsewhere in the borough due to a shortage of local school places. A further Panel Member expressed concern regarding the proposed reduction in the funding of maintenance of children's play areas. The Portfolio Holder for Social Care and Inclusion explained that these concerned would be referred to the appropriate panels and Officers.

## **Resolved:**

That the report be noted.

# 318/13 BROADWAY NORTH RESOURCE CENTRE - UPDATE

The Head of Community Care (Operations) and Service Manager – Mental Health introduced the update. The following is a summary of the update and subsequent discussion:

It was explained that in terms of the availability of crisis and respite services to • date there had been 29 incidence where care had been commissioned from Caldmore Accord at Lonsdale House. There had only been one issue in early July which had been speedily resolved. It was also explained that the length of respite care stay is on average 9 days, while it had previously been 14 days at Broadway North. Officers also explained that positive feedback from 20 out of 21 service users had been given on the new service and shown good outcomes since their use of the beds at Lonsdale. It was explained that it was intended to further develop the service model and feedback from service users, including via future consultation events, would be used in this process. It was further explained that the new model had meant that the council had been able to remove a block contract arrangement and this had resulted in a far more cost effective service. In addition it was explained that in terms of access clarity had been achieved with the Crisis and Respite bed provision accessible via a referral from mental health services alone. Officers also explained that in relation to the care quality pathways that it would not always be appropriate for an individual being presented to be referred for a crisis bed. Instead it is anticipated that if the day

service "recovery college" model is developed an individual's needs can be met through a range of courses intended to enable them to re-engage with their lives and the local community. This in turn should mean that demand for crisis beds would fall;

• The Chair noted that the success of the re-designed services will be demonstrated by the impact and outcomes for service users. In response to a query it was explained that the council does engage with alternative service providers and offers support for service users whom may wish to purchase this provision through personal budgets. Officers also emphasised that they would welcome and respond to any problems raised by service users regarding the new arrangements. A Panel Member disagreed with the Portfolio Holder and requested that for the present ongoing reports on the delivery of the services should continue to be received by the Panel with service users invited to a future meeting to discuss their experiences. A further Member expressed the view that the decision to close residential services at Broadway North was vindicated given that the need for crisis beds was limited to three or four at any one time. A Panel Member expressed the view that the delivery of effective mental health services was more important than value for money considerations.

## **Resolved:**

That the report be noted.

## 319/13 QUALITY IN CARE HOMES

The Head of Community Care (Operations) introduced the report. The following is a summary of the report and subsequent discussion:

- It was explained that the purpose of the report was to provide re-assurance regarding the process of quality monitoring once the Quality Team is no longer in operation. It was further explained that the Care Quality Commission (CQC) had recently proposed plans to monitor, inspect and regulate care homes within England, including a rating award for care homes. These changes will take effect from March 2016. It is this radical change in the role that the CQC will play in the care market and the overlap with some of the functions of the council's Quality Team that was one of the reasons why the closure of the team has been offered as an option in the budget setting process. It was also explained that within Walsall there are currently a variety of quality assurance activities undertaken by a range of functions across health partners, including social care, the joint commissioning unit and public health. In addition the quality of clinical service delivery is a key monitoring function of the Clinical Commissioning Unit (CCG), this includes medicine management reviews and end of life support;
- A Member highlighted the importance of the CCG in ensuring that quality in care homes was maintained. The Head of Joint Commissioning explained that the CCG undertook a number of functions and an effective working relationship had been established between it and the council. In response to a Panel query it was explained that support to ensure care homes operate at an acceptable level would continue to be provided. For example, undertaking the process of the replacement of a poorly performing care home manager in conjunction with the company.

# **Resolved:**

That the report be noted.

### 320/13 ANNUAL COMPLAINTS REPORT

The Principal Customer Liaison Officer introduced the report. The following is a summary of the report and subsequent discussion:

It was explained that work was undertaken with all managers and services in • trying to resolve complaints for customers at the first point of contact in order to avoid formal complaints. It was further explained that the number of statutory complaints had fallen from 144 in the previous year to 123 this year. In addition there were 43 comments, these include pre-complaints to which a prompt response prevented it leading to a complaint. It was also explained that there were149 statutory compliments. In response to a number of Panel queries it was explained that managers are very open during the process of investigating complaints, while the types of complaint received included in relation to services and communication. The investigation process includes seeking to resolve the complaints within the agreed timescale and prevent it being referred to the ombudsman. A letter detailing the response to a complaint is signed off by a senior manager in order to ensure that the learning is effectively implemented. A Panel Member emphasised the importance of ensuring that all staff attended training and briefings to ensure that they respond effectively to issues raised by service users and are able to prevent these becoming complaints.

### **Resolved:**

That the report be noted.

### 321/13 OPERATING MODEL FOR ADULT SOCIAL CARE & INCLSUION

The Head of Community Care introduced the presentation. The following is a summary of the presentation and subsequent discussion:

• It was explained that Walsall's operating model has a strong emphasis on maximising independence and is refocused on achieving outcomes for individuals. It was further explained that the approach taken to prevention in the borough was focused on a range of interventions which included intermediate care, reablement, recovery and crisis response. These different services were part of different care pathways and form part of an overall multi-disciplinary approach. A key feature is the early intervention phase which seeks to deliver services for people who have some needs but which are not critical enough to warrant an assessed social care intervention. This might mean the use of Intermediate Care Services to assist an individual's reablement following discharge from hospital, including equipment such as telecare and support from community social workers. Where an individual receives an assessment for longer term support outcomes are funded by personal budgets. For example, this might be where someone suffers a severe stroke and the early intervention approach is not suitable;

- The Chair noted that the link between the hospital and the council was crucial, particularly in terms of being able to anticipate pressure on services based on admission and discharge rates. The Head of Joint Commissioning explained that there were patterns of admissions to A&E throughout the year. For example, the rate of discharge from the Manor typically increased in the build up to Christmas as the hospital seeks to create some capacity for the demands it faces during the festive period. In addition, there is significant joint working to be able to anticipate the rate of discharge. A Panel Member highlighted the importance of the revised operating model being effective to achieve the significant savings that the service had to deliver. The Portfolio Holder for Social Care and Inclusion agreed and explained that the model of intervention was intended to both prevent individuals becoming isolated from communities and deliver costs savings;
- A Panel Member highlighted that she had first-hand experience of the community • based model of reablement. She explained that her mother had been supported to remain in her own home and regain her independence following a fall which had led to her breaking her ankle. The Member stressed that a significant amount of money had been invested in the revised operating model and it would be important that it was successful. Officers explained that a performance framework was being built to monitor the new approach. It was also explained that the objective was to have 25 people entering and 25 people exiting services in any one week and performance to date was significantly exceeding this target. In addition, the bedded reablement service at Holybank was performing well in terms of discharge rates. Officers also highlighted the pressures that would be exerted on the new approach by an ageing population. The importance of meeting the needs of the population in a more timely way was also noted. A Panel Member sought guidance regarding whether the reablement team based at Electron Point might instead be located throughout the borough to assist with responding to need. The Portfolio Holder explained that she did not think it appropriate for Officers to respond to the query at the meeting. She explained that officers would instead provide a written response to this query. A further query was raised in relation to possible support for those who care for members of their family. The Portfolio Holder also explained that she did not think it appropriate for Officers to respond to this guery either at the meeting. She explained that officers would instead provide a written response to this query. In response to a number of Panel gueries officers explained that where an individual is discharged from hospital and is terminally ill the hospital trust is responsible for meeting the cost. However, the council may be required to meet care costs where an individual is discharged and the prognosis is unclear.

### **Resolved:**

That the report be noted.

## 322/13 INDEPENENT LIVING FUND (ILF)

The Head of Community Care introduced the presentation. The following is a summary of the presentation and subsequent discussion:

• It was explained that following a decision by the Court of Appeal the Government is required to review its decision to close the ILF and transfer funding to local councils in March 2015. The Government has not indicated whether it will appeal the decision, although at present the transfer of funding will not be taking place

and ILF recipients will continue to receive payments as normal. In response to a Panel query Officers explained that there has been no indication as to the level of funding that would potentially be transferred to the council in the future. However, a review of current recipients is underway and this will be used to identify future funding demand.

### **Resolved:**

That the report be noted

## 323/13 WORK PROGRAMME AND FORWARD PLAN

The Panel considered the work programme and forward plan.

### **Resolved:**

That the work programme and forward plant be noted.

# 324/13 DATE OF NEXT MEETING

The Chair informed Members that the date of the next Panel meeting would be 20 February 2014.

The meeting terminated at 7:55p.m.

Chair:

Date: