

SOCIAL CARE AND INCLUSION SCRUTINY AND PERFORMANCE PANEL

TUESDAY 20 November 2012 AT 6.00 P.M.

Panel Members Present: Councillor B. Douglas-Maul (Chair)
Councillor D. Barker
Councillor R. Burley
Councillor L. Rattigan
Councillor J. Rochelle
Councillor S. Coughlan

Officers Present: Paul Davies, Executive Director (Social Care and Inclusion)
Andy Rust, Head of Joint Commissioning
Peter Davis, Head of Community Care (Operations)
Lloyd Haynes, Finance Manager - SC&I and Finance
Projects Team
Brandon Scott-Omenka, Service Manager Quality Assurance
Bernard Cysewski, Senior Welfare Rights Officer
Matthew Underhill, Committee Governance & Business
Manager

215/12 APOLOGIES

Apologies were received for the duration of the meeting from Councillor T. Oliver. The Panel expressed their best wishes to Councillor Oliver and asked that a letter be sent to him on their behalf wishing him a speedy recovery.

216/12 SUBSTITUTIONS

There were substitutions for the duration of the meeting

217/12 DECLARATIONS OF INTEREST AND PARTY WHIP

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

218/12 MINUTES

The Panel reviewed the minutes of the previous meeting.

Resolved:

That the minutes of the meeting held on 15 October 2012, copies having previously been circulated, be approved as a true and accurate record.

219/12 DISCUSSION WITH REPRESENTATIVES FROM THE CARERS CENTRE

The Chair welcomed the representatives from the Carers Centre, including Mary Thorley. The following is a summary of the subsequent discussion:

- Mary Thorley explained that she and her colleagues were attending the meeting following an invitation from Councillor Oliver. She also explained that she had received more than one hundred complaints from carers and service users in relation to personal budgets. Many carers and service users had expressed concerns that they felt pressured to self-manage their personal budgets when visited by social workers. For example, Mary Thorley had been contacted by a ninety year old who did not want to have to manage a personal budget. Further concerns had been expressed to the carers centre by carers who also understood that where they self-managed their personal budgets they would have to pay a fee for the use of a broker and funding for this would come out of their personal budgets. This charge was between £12 and £18 and as a consequence would result in an individual being able to purchase fewer hours of care. There was also concern regarding what had been regarded as a lack of clarity in the information sent out to individuals. One carer explained that he cared for his son who had learning disabilities. However, he had been told that the Goscote Centre were no longer able to support his needs and his son now received care in Dudley. He also felt that he had not been offered a proper explanation as to why it was no longer possible to care for him. Mary Thorley also highlighted the case of a carer whose husband, who suffers from a muscle wasting condition from which he continues to deteriorate, had been told that he was now no longer able to receive care through Apna Ghar;
- In responding to the issues raised the Executive Director explained that personal budgets were a national policy and that all those assessed with having care needs receive a personal budget. In addition, it is a requirement of the Adult Social Care Framework that individuals are informed regarding their individual funding entitlement. In Walsall the council is responsible for the care of 2,800 people, within that group 800 were in residential care with 2,000 being cared for within their community. From within this group 400 receive direct payments;
- It was also explained that where services were no longer able to manage the specific care needs of an individual, officers from within social care services would ensure that a suitable alternative arrangement was identified. A Panel Member emphasised the importance of ensuring that the reasons for not being able to continue to offer support to an individual were provided. The Executive Director explained that guidance was always provided. However, it was the case that inevitably this information was not always welcomed. However, the carer agreed with the Executive Director that he was comfortable with the arrangements now in place for his son;
- In relation to Apna Ghar it was explained that the block contract arrangement, together with those for a range of traditional day care services, had been ended by the council. This had been replaced by individuals now choosing alternative ways of meeting their own needs. However, an individual with assessed need would continue to be entitled to a service. This would mean that where a block contract arrangement no longer existed and individual would still be free to purchase care on an individual basis. A Member sought further clarity and it was explained that while post assessment an individual might have a reduced entitlement. This would be as the result of a more accurate assessment and the

individual would receive the support needed. The removal of the block contract arrangements meant that providers had to better demonstrate the quality and value of the services they provide. In addition, individuals, or groups, were often able to negotiate better rates;

- In terms of multiple visits made by social workers to individuals it was explained that these were both necessary and important to ensure that the right solutions were found. In response to the concerns expressed regarding pressure individuals felt placed under by social workers, the Executive Director observed that these were frequently difficult circumstances with people in highly emotional and sometimes volatile situations. Mary Thorley agreed but wondered if there was a need to make attitudinal corrections to the approach taken by social workers. The Executive Director stressed that social care had received forty-two complaints at this stage and this could be extrapolated to give a likely total of approximately 160 for the year, this would be set against 10,000 service users contacts. It was acknowledged that the social care did not always get it right, although the circumstances of individuals were often complex;
- The Executive Director also observed that some people are afraid of losing services and would possibly not want a broker. However, the advice received from the council's procurement department was that all of those with personal budgets had to be advised that they had a choice. At this point a quarter of those with personal budgets had opted to manage this themselves and he emphasised that no one would be compelled to do this unless they wished. The Executive Director referred to the introduction of Benefits Based Charging and explained that issues had emerged regarding the letters sent out by the council which appeared to suggest that in some instances individuals would be required to make significant one-off payments to the council. This matter had been resolved with the sending out of revised letters. This was the kind of learning that had been applied to ensure that individuals understood their funding entitlement;
- The Chair stressed the importance of ensuring that individuals understood that they were not being compelled to self manage their personal budgets or have a broker. The Executive Director agreed and emphasised a new letter was currently being prepared which provided the necessary clarity regarding personal budgets and the options available. He also pointed out that funding for brokers was provided in addition to the personal budget. In response to a Member query it was explained that payment for brokers varied from a one-off payment to a weekly charge. It was explained that a broker service provided by the Shaw Trust was a temporary arrangement. At present the council was seeking to introduce an accreditation process although this was not a legal requirement. However, it would be important for this to be proportionate as there would be little gained by seeking to accreditate a parent, neighbour or friend who had been asked to manage an individual's personal budget. The Executive Director also pointed out that the broker would also be able to act as an advocate on behalf of an individual. For example, in instances where a home carer does not turn up for a scheduled care appointment;
- Members proposed that an information sheet be produced that explained how personal budgets operated and the choices available to an individual. It was agreed that this should be circulated to Members as well as groups such as the carers centre. A Member noted that the provision of clear information would protect social workers and other staff. This should include that additional funding is provided for the cost of a broker;

- In relation to a query regarding Benefits Based Charging it was explained that there would be no increase in the percentage charge made, the only increase would be inflationary;
- The Chair and Panel thanked the Carers Centre representatives for attending the meeting.

Resolved:

That an information sheet providing guidance to those in receipt of personal budgets be produced and circulated to groups including the Carers Centre, as well as Members.

220/12 WELFARE RIGHTS SERVICE

The Senior Welfare Rights Officer introduced the presentation. A summary of the report and subsequent discussion was as follows:

- It was explained that that the Welfare Rights Service was a predominately home visits based service. It undertakes a range of work including from helping individuals to complete forms to benefit maximisation checks. It was explained that £10.5m of new benefit entitlement had been brought into Walsall through benefit maximisation. The service also supports Housing 21 and Extra Care schemes, the Benefits Based Charging Assessment Team and a range of other additional specialist projects. This includes the Carers Project which had brought £1.1m into the borough during 2011;
- It was explained that since 1996 the Welfare Rights Service brought in excess £300m of previously unclaimed benefits into Walsall. This includes £10,512,779 welfare benefit awards in 2011/12 which saw 2,564 people making a gain. Other notable achievements for the year included 8,300 referrals were handled;
- It was explained that welfare reform had lead to the introduction of the Personal Independence Payment (PIP) due to start from April 2013. This will replace the Disability Living Allowance (DLA) for eligible working age people aged 16 to 64. The size of payment will be based on a points system, with an individual's points score determined from an assessment made by a trained independent assessor. Currently there are three levels of the care component under DLA but with PIP there will be two under a new heading 'Daily Living Activities' The two levels of the mobility component will remain but it still hasn't been determined as to how many points will be required for each level or activity.
- It was explained that under Universal Credit the maximum entitlement 'Benefit Cap' for a couple was £26k and £18,300 for an individual. The PIP can be paid in addition to this. It was estimated that around three hundred households in Walsall would be affected. In response to Member query it was explained that there was no indication of likely entitlement levels in Walsall Following a further Panel query it was explained that benefit cap only applied to the working age group i.e under pension credit age and pensioners are exempt;
- It was explained that the Universal Credit is a new single monthly payment paid to a single person in the household and it's for people looking for work or on a low income. It is intended to replace current means tested benefits, these are: Income-based Jobseeker's Allowance, Income Related Employment and Support Allowance, child tax credit, working tax credit and housing benefit.

- It was also explained that for social sector tenants who have a bedroom more than required they will see a reduction in housing costs for household that have one extra bedroom will lose 14% of housing cost and for two or more extra bedrooms there will be a 25% deduction. However, there will be an exception to allow one extra bedroom where there is a non-resident carer. In addition, children of different genders under ten will be required to share and two children under the age of sixteen of the same gender will also be expected to share. It was estimated that this potentially could affect four thousand families in Walsall. There is also an increase in the age from 25 to 35 where the single accommodation rate will apply and this was from January 2012. The number of bedrooms that will be funded for private sector tenants would be capped at four under the Local Housing Allowance rates
- In relation to the Social Fund it was explained that certain elements of the discretionary scheme will be replaced by locally based provision by the council in April 2013. It was further explained that Community Care Grants and Crisis Loans for general living expenses (including rent in advance) will be abolished and replaced by 'local welfare provision' administered by the council. In addition, budgeting loans will be replaced by advanced payments that will be called 'payments on account' within the Universal Credit ;
- Council Tax benefit will no longer exist from April 2013, it is being replaced by localised support. As part of this Government has applied a further 10% reduction to current spend before transferring funding. All Local Authorities need to identify how they will fund this reduction, which can either be passed on to council tax payers locally, reduce services or funded in another way. . Within Walsall the authority has decided not to pass on the cut to council tax payers and to fund the cut itself from inhouse savings made under 'Working Smarter' for 2013/14 and it will be reviewed for the following year
- Officers explained that funding coming to the council to deliver the Local Welfare Provision for the replacement of the Social Fund was set at 2005 levels (£1.1m), in addition set up and administration costs needed to deliver this service brought this figure up to a total £1.4m from the Department for Works and Pensions. This meant it did not reflect the increase in demand which resulted from the social consequences of the significantly more difficult economic conditions experienced since 2005. It was anticipated that this would effect around four thousand people in Walsall;
- The Chair observed that the change in the benefits system would have a significant impact on a large number of households in the borough. A Member expressed concern regarding the difficulties moving to the PIP will have on those previously in receipt of DLA. She noted that while discretionary housing benefit payments would assist individuals migrating to the new housing benefit arrangements, it would seem unlikely that this type of additional funding would remain in place in the long-term;
- Officers explained that part of the local response to the likely pressures of the new system was an arrangement whereby individuals could open an account with Walsave Credit Union. The purpose of these "Jam Jar" accounts was to help people to budget effectively, for example, by ensuring they prioritised rent and utility payments. The council has joined with whg to encourage tenants to open this type of account and where there is a shortfall in required funds Walsave will seek to offer a line of credit to individuals during difficult periods;

- It was agreed that officers would report to the next meeting regarding working with Registered Social Landlords to ensure tenants paid their rent, including the opening of accounts to enable them to budget effectively;
- The Chair and Panel expressed strong support for the work of the Welfare Rights Service.

Resolved:

That officers report to the next Panel meeting regarding work with Registered Social Landlords in ensuring the payment of rent by tenants, including encouraging individuals to open accounts to assist with budgeting. Officers will also seek to provide guidance regarding likely funding levels in relation to the new benefits as these become known, and

the report be noted.

221/12 NURSING & RESIDENTIAL CARE QUALITY ASSURANCE PROGRESS REPORT

The Service Manager Quality Assurance introduced report. The following is a summary of the report and subsequent discussion:

- It was explained that the council works jointly with NHS Walsall partners to oversee the borough's care homes. The aim is to quality assure the care quality of contracted services, establish a sustainable care market and proactively manage care standards. The Walsall Quality Partnership Board (WQPB) leads on a programme to coordinate and enhance this activity to systematically raise the standards of care, address areas of poor quality and neglect, while placing the focus on outcomes, quality of life and dignity of care users. A key objective is to improve the overall quality of the care market in Walsall;
- The Board has commissioned a range of activity to address poor quality but also move from a reactive to a proactive approach to raising standards and focusing on outcomes. This has included action to measure the improvement in care for care service users, as well as encouraging innovations in the care sector;
- It was explained that a range of activity had produced ongoing improvements in care quality for care home residents. For example, a time limited medical review team, consisting of a range of health care practitioners, had completed a programme of reviews and the development and implementation of a Quality Outcomes Framework. In addition ongoing audits and the provision of advice to care homes had sought to raise medicine management standards and improve therapeutic interventions. It was highlighted that activity to reduce the incidence and severity of pressure ulcers. This had led to a reduction from 18% to 2% over the last twelve months. Further action includes leadership training for Registered Nursing Home Managers. However, an inevitable problem in seeking to maintain high standards of leadership in care homes is that often good managers will be promoted and move on. In addition, the Admissions and Discharge Task Group

has worked to reduce inappropriate referrals and admissions to hospital, while making discharges to care homes when suitable. Other key work includes engagement with providers through consultation events, workshops, forums and pilot activities. While care homes have been encouraged to undertake self-assessments as part of the process of improvement;

- It was explained that to further promote sustainable improvements in the sector a range of initiatives had been introduced. This includes the Care Homes Incentive Scheme. Homes which make innovative proposals for improving the quality of care in consultation with residents can apply for one off investment in home training, facilities or local community activity. Further activity includes the Vine Trust working with existing volunteers from Church based organisations to arrange visits to care home residents to gather their views. The objective is to recruit more volunteers and extend the coverage of homes. Feedback will inform the quality improvement process;
- It was explained that work was also underway to underpin the Quality Framework through benchmarking. This was based on the Self Assessment tool for care homes which is in the form of a six monthly questionnaire return. This process has enabled both local and regional comparison of care homes via a 'dashboard' of key comparators including infection control and safeguarding;
- The Head of Community Care (Operations) explained that the council was placing resources in the management of the local care market at a time when Care Quality Commission (CQC) was reducing its regulatory regime. This proactive approach had recently led to the shutting down of a poor quality care provider in Brownhills. It was also noted that proactive management of the local care market would help ensure that jobs remained for local people. It was also pointed out that the work of raising standards included significant work with partners including the Joint Commissioning Unit;
- Officers agreed with the Chair that it was preferable where possible for a care home resident to remain as a patient of their existing GP. However, if an individual became resident in a care home outside the area covered by the GP this was not always possible;
- A Panel Member expressed concern regarding the safeguards that were in place in relation to the staff employed in care homes. It was explained that in addition to the requirement for the home managers to be registered, issues and concerns of residents were handled through regular visits of social workers. Officers explained that there was also a strong culture of whistleblowing in relation to poor practice in Walsall . Further action to proactively manage the quality of care received included staff training and the audit process;
- In relation to health and safety within care homes, officers explained that further joint working with the Fire Service was underway to revise evacuation plans for care homes in respect of moving residents in the event of a fire. There have also been discussion with the Ambulance Service to understand the different demands made from care homes for ambulance call out. This will involve ensuring call outs are appropriate and looking at more effective responses for residents where summoning an ambulance is not appropriate. The Chair and other Members expressed the strong view that the most effective way of addressing the risk of fires in care homes should be the installation of sprinklers

Resolved:

The Panel noted the report;

and

a further update report be provided to the Panel's meeting on 18 April 2013.

222/12 CARERS STRATEGY

The Chair explained that this item would be deferred until the next meeting.

223/12 DRAFT REVENUE BUDGET 2013/14 FOR SOCIAL CARE & HEALTH PORTFOLIO

The Executive Director introduced the report. The following is a summary of the report and subsequent discussion:

- It was explained that the draft net budget for the Social Care and Inclusion Portfolio was £64.714m. This was a reduction of £1.655m from the previous year's budget of £66.379m. The reduction had been tackled via an early retirement and voluntary redundancy programme. However, further savings were anticipated through back office spending reductions, together with savings made through the resettlement programme. It was explained that the council had moved from being the 105 in the country for placing people in residential care to the fifth best in around two years. It was emphasised that it was most effective for people to be supported at home rather than be admitted to hospital. The investment in the Quality Assurance Team and the quality of the local care market, at a time where across the council significant funding reductions were taking place, was further evidence on the commitment to ensuring that people are able to remain within their communities where possible. However, he explained that although less funding would be available he would continue to seek to improve the quality of the services for which he was responsible;
- In response to a Panel query it was explained that staffing reductions had in part been a consequence of a number of care staff electing to retire after long and demanding careers. However, care staff provision would still meet the increasing demand for their services. For example, staff from a housing association where the contract for care provision had recently been ended had been TUPE transferred over to the council. Officers agreed with Members that there were significant costs associated with voluntary redundancy and early retirement. However, these were one-off fixed costs around which there was certainty that could be factored into the budget;
- The Executive Director emphasised that it was his intention to do more with less, highlighting the importance of making the best use of resources. Panel Members expressed concerns regarding the availability of respite care. Members explained that carers were entitled to this service. Officers explained that the work to ensure quality in the local care market would assist in the availability of respite care. However, they also explained that respite care was very expensive and it might simply prove too costly for the council to provide;
- Officers also noted that they had reduced the number of people placed in residential care from 500 to 155 over the last two and half years. This had been achieved through careful management of an individual's needs.

Resolved:

The Panel noted the draft budget proposals.

224/12 QUARTER 2 FINANCIAL MONITORING POSITION FOR 2012/13

The Finance Manager - SC&I and Finance Projects Team introduced the report. The following is a summary of the report and subsequent discussion:

- It was explained that the forecast revenue position for Social Care and Inclusion was a net overspend of £201k. The directorate management team are currently implementing action plans to ensure that the year end position is in line with the budget. It was also explained that there is currently a forecast breakeven position against Capital resources of £2.77m;
- The Executive Director explained that it was not unusual for there to be a forecast revenue overspend at this point in the financial year, with the benefits from a number of projects set to be realised later in the financial year.

Resolved:

The Panel noted the report.

225/12 WORK PROGRAMME 2012/13 AND FORWARD PLAN

The Panel agreed to receive further information in relation to the Personal Independence Payment (PIP), together with guidance regarding developments regarding a proposed Section 75 agreement with the Mental Health Trust.

Resolved:

That the work programme and Forward Plan be noted.

226/12 DATE OF NEXT MEETING

The Chair informed Members that the date of the next meeting would be 15 January 2013 at 6.00pm.

The meeting terminated at 8.25 p.m.

Chair:

Date: