

Minutes of the Social Care and Health Overview and Scrutiny Committee held in the Council Chamber, Walsall Council House

Thursday, 7 December 2023 at 6PM

Committee Members present:

Councillor K. Hussain (Chair)
Councillor V. Waters (Vice Chair)
Councillor R. Martin
Councillor R.K. Mehmi
Councillor A. Parkes

Portfolio Holder:

Councillor G. Flint – Wellbeing, Leisure and Public Spaces

Officers Present:

Kerrie Allward – Executive Director of Adult Social Care (Walsall Council)
Jennie Pugh – Director of Adult Care
Nadia Inglis – Interim Director of Public Health
Suzanne Letts – Finance Manager – Adult Social Care & Public Health
Jack Thompson – Democratic Services Officer (Walsall Council)
Pip Mayo – Director of Place for Walsall (Black Country Integrated Care Board)
Prof. David Loughton – Chief Executive of Walsall Healthcare NHS Trust
Jo Wright – Director of Midwifery, Gynaecology and Sexual Health

31 **Apologies**

Apologies were received from Councillors S.B. Hussain, L. Rattigan, I. Hussain, P. Gill and W. Rasab.

32 **Substitutions**

No substitutions were received.

33 **Declarations of Interest and Party Whip**

There were no declarations of interest or party whip for the duration of the meeting.

34 **Local Government (Access to Information) Act 1985 (as amended)**

There were no agenda items requiring the exclusion of the public.

35 **Minutes**

A copy of the Minutes of the meeting held on the 26 October 2023 were submitted [annexed].

Resolved

That the minutes of the meeting held on the 26 October 2023, a copy previously having been circulated, be approved and signed by the Chair as a true and accurate record.

36 **Update on the midwifery led unit and maternity services.**

At the invitation of the Chair the Director of Midwifery, Gynaecology and Sexual Health at Walsall Healthcare NHS Trust introduced the report [annexed] and highlighting the following points: that the NHS Trust was in the final stages of moving the midwifery led unit and that they hoped the new unit would be opened in February 2024.

The Chair then invited Members to ask questions on the item, some of the responses included:

- There was a separate team in place which performed Caesarean Section (C-Section) operations and separate environments for planned C-Sections. In addition, two theatres were on standby to carryout emergency C-Sections;

- A risk assessment was carried out by a midwife before a planned home birth took place;
- Home births were seen as a low-risk environment and historically births took place at home. Midwives were trained in obstetric procedures to assist childbirth and mothers were made aware of the potential risks involved in home births;
- The NHS Trust provided additional non-clinical support to expectant mothers experiencing poverty, such as offering bus passes and working with Walsall Warm Homes;
- The Trust did not have any concerns that there would be lack of staff ahead of the opening of the new unit;
- There was a supportive executive support team at the Trust and a strong maternity support partnership which would aid to make the transfer to the new unit successful;
- The Trust ensured that expectant mothers received wrap around care;
- When problems with a pregnancy occurred, expectant mothers were always informed of the options, and it was always the woman's choice to have an abortion.

In closing remarks, the Chief Executive of Walsall Healthcare NHS Trust paid tribute to the midwifery team for turning around the Unit and being successful in attracting high quality staff. In addition, that the new relocated unit would be safer as it would eliminate the need to use ambulances to transfer patients to the consultant led unit.

Resolved

- **That the Committee note the report.**
- **That the Committee received a further update report in the future on the Midwifery Led Unit once it had been moved to the Manor Hospital.**

37 Adult Social Care Contributions Debt

At the invitation of the Chair the Executive Director for Social Care and Health gave an overview of the report [annexed]. Some of the key points included:

- There had been issues around Adult Social Care debt collection for several years and there was no easy fix;
- The Council had created a new joint team to help resolve problems with debt collection;
- It was the joint role of this new team to administer new charges for care delivered and to tackle historic debts;
- The Council currently had two employees working on historic debt and they were working from the largest debts first;
- Previously for clients who did not fill in a financial assessment within fourteen days it was assumed that they would have to pay the full cost of their care. The Council had changed its processes and would not

assume full costs applied but instead called clients and offered to help them fill in the form;

- A new contributions policy was due to be presented to Cabinet in December 2023;
- A very small number of clients had been handed over to the legal team for to pursue debt;
- Over £2 million was debt classed as payment pending.

The Chair invited Members to ask questions on the report, some of the responses included:

- The amount of debt being written off due to being statute barred was small;
- Most of the historical debt had been created due to incorrect charges being placed on clients;
- The focus of the debt collection team was to deal with new clients quickly and to calculate how much they would need to pay accurately as well as tackling historic debt;
- There was a provision within the budget setting process for historic debt write off and the risk was taken into account when drawing up the budget;
- There was a large amount of historic debt within the last three year and after that the amount tapered the more historic it was;
- There had been a fundamental shift in the approach of officers to new clients and calculating their finances to prevent further historical debt being created;
- Most of the historic debt fell within the years 2019 to 2023 and thus was not close to the seven-year statute barred debt collection limitation.

Resolved

- **That the Committee note the activity to investigate customer debt.**
- **That the Committee note the updated business processes to support customers who required financial assessment.**

38 Corporate Financial Performance – P6 September Financial Monitoring position for 2023/24

The Finance Manager introduced the report and highlighted the salient points [see annexed], including that the £14.32 million planned overspend within the Social Care Budget had been reduced to £12 million.

The Executive Director of Adult Social Care added that one of the reasons for the increased pressure upon the Social Care budget was that residents within the Borough were living longer, thus using services for longer. In addition, that

improved access to services had increased costs and so had the increase in statutory reviews.

At the invitation of the Chair Members asked questions to officers, some of the responses included:

- The Council was in active conversation with the Integrated Care Board (ICB) and formal arbitration would start soon which should lead to a settlement;
- The Council would be implementing a more robust system for Section 117 payments (*Mental Health Act 1983*) to prevent a dispute from occurring again in the future;
- The debt dispute was complex and involved the Council, the ICB and the Black Country NHS Foundation Trust. In addition, any settlement would involve the Council paying money back as it owed debt to the ICB and the Foundation Trust;
- Recent changes in the responsibility for commissioning of care had added further complexity to the situation;
- All the organisations involved were committed to reducing the debt they owe to one another and were committed to building a process to make this possible;
- The Director of Place for Walsall (Black Country Integrated Care Board) added that the ICB was positive a partial resolution could be found soon. Additionally, that while the issue of debt had put pressure on both the Council and health partners, none of the parties involved wanted to stop funding which support residents;
- Debt in relation to current Section 117 payments was accruing everyday but the Council and health partners were working to create new tool to manage payments;
- Central government did not cover the cost of public body disputes.

The Portfolio Holder for Wellbeing, Leisure and Public Spaces added that the relationship with NHS partners was good, and the Council was in a good financial position.

Resolved

That the Committee note the revenue and capital forecast for the financial year end 2023/24.

39 Draft Revenue Budget and Draft Capital Programme 2024/25 – 2027/28

The Finance Manager introduced the report [see annexed] and laid out to the Committee the differences between savings linked to investment or improved processes and savings from additional income.

At the invitation of the Chair the Executive Director of Social Care and Health gave an overview of the planned savings proposed in the draft budget and the explained the investments that would be made to achieve the savings.

A discussion on the proposed budget then took place, some of the key points included:

- The Chief Executive of Walsall of Healthcare NHS Trust was complementary of the adult social care services at the Council but did agree that improved mortality rates would put further pressure on the service;
- The Council was looking at ways to increase the amount of shared lives placements within the Borough, however, the model was not widely used;
- There were around fifty shared lives placements within the Borough;
- There was a large increase in Adult Social Care spending for the year 2024/25 to take account of the increase in demand in the year 2023/24;
- The programmed investments would have a positive impact on the services by providing more appropriate care for clients at an earlier stage;
- The Director of Place for Walsall (Black Country Integrated Care Board) added the earlier intervention proposed in the budget would help to make savings;
- The Council was expanding the Be Well Service to include vaping as well as alcohol and smoking;
- The Council was trying to engage with harder to reach communities to help improve health outcomes which would help to save money for both the Council and health partners.

At the end of the discussion several recommendations were made through the Chair. These recommendations were as follows:

- That the Committee express its concern that the proposed savings of £4,544,392 for 2024/25 could potentially be detrimental to those receiving care within the Borough.
- The Committee expresses its concern that the predicted additional income for 2024/25 may not be achieved and this would lead to further budgetary pressures.
- That the planned investments in relation to investment reference 24, 'Community Reablement Service', would be difficult to implement quickly and therefore challenge the deliverability of the planned savings of £1.14 million (OP 24) in the financial year 2024/25.
- That the Committee request that the Cabinet write to the Secretary of State for Health and Social Care to ask for additional funding for social care and a long-term funding model.

These recommendations were not adopted by the Committee when put to the vote.

Resolved

- That the Committee considered the draft revenue budget proposals to date as attached that related to its remit as shown in Appendices 1 and 2, and that feedback would be presented to Cabinet on 13 December 2023.
- That the Committee noted that the revenue budget for 2024/25 was currently not balanced, with a gap of c£18m, and therefore a further report would be required if any changes to draft proposals outlined related to services within the committee's remit.
- That the Committee considered the draft capital schemes included in the draft capital programme attached that related to its remit as shown in Appendices 3 and 4, and that feedback would be presented to Cabinet on 13 December 2023.

40 Primary Care Access and GP Services Working Group – Terms of Reference

The Democratic Services Officer gave a brief overview of the report [see annexed].

There were no questions on the from Members.

Resolved

That the Committee approve the Primary Care Access and GP Services Working Group Terms of reference.

41 Recommendation Tracker

The Democratic Services Officer outlined the outstanding actions of the Recommendation Tracker and informed Members that some of these would be resolved as part of upcoming planned reports.

Resolved

That the Committee note the Recommendation Tracker.

42 Areas of focus for 2023/24

The Democratic Services Officer informed the Committee of the upcoming items for the next meeting of the Committee. Additionally, through the Chair the Democratic Services Officer asked if any Members had additional suggestions for items for the Committee to consider that they contact the officer.

Resolved

That the Committee note the Areas of focus for 2023/24.

43 Date of next meeting

The date of the next meeting would be 18 January 2024.

There being no further business, the meeting terminated at 19:52.

Signed:

Date: