ADULTS COMMITTEE: MINUTES

Date: Tuesday1st March 2016

Time: 2.00p.m. to16.35 p.m.

Present: Councillors A Bailey (Vice-Chairwoman), C Boden, P Brown (substituting

for Councillor Yeulett), S Crawford, D Giles, S Hoy, G Kenney, M Loynes (substituting for Councillor Harford), R Mandley, L Nethsingha, P Sales,

M Tew (Chairman) and G Wilson

Apologies: Councillors L Harford and F Yeulett.

152. DECLARATIONS OF INTEREST

None.

153. MINUTES -12TH JANUARY 2016 AND ACTION LOG.

The minutes of the meeting held on 12th January 2016 were agreed as a correct record and signed by the Chairman.

The Action Log was noted. Members requested that the older completed actions were removed from the log. **ACTION**

154. PETITIONS

No petitions were received.

155. PROPOSED CHANGES TO THE SUPPORT PLANNING SECTION OF THE POLICY FRAMEWORK

Members considered a report that provided feedback on the consultation on proposed changes to the Support Planning section of the Care Act Policy Framework for adults with eligible social care needs. The revised Support Planning section was presented for approval by the Committee. Officers highlighted that 81% of respondents to the consultation stated that the proposed changes would have a significant impact on them and that overall the response was generally cautious but respondents were open to proposals.

During discussion of the report Members:

- Welcomed the content of the consultation questionnaire but expressed disappointment in the volume of responses received. It was suggested that Parish and Town Councils be involved in future consultations in order to extend public involvement.
- Noted the high quality of responses and identified a number of themes from the responses.

- Questioned how voluntary support was monitored and how safeguarding risks were mitigated. Officers recognised that risk to individuals would increase as a result of the changes but safeguards were in place to mitigate them as much as possible. Ultimately however, Members noted that there was not the resource available to mitigate all risk.
- Noted that there were no assumptions made regarding the willingness of family members to undertake caring duties during the assessment process. Discussions would take place with families to understand their willingness and whether it was forced or not.
- Expressed concern regarding the low number of responses received from older people and wondered whether people with complex needs had been overlooked during the consultation process.
- Noted that although 83% of respondents stated that the proposed changes would make a significant difference to them it did not specify whether those changes would be negative or positive.
- Requested that the differences between the Support Plan and the Personal Budget be made more explicit and suggested that the Council presented itself as too paternalistic in section 1.5 of appendix C. ACTION
- Requested that the explanation of "top-up fees" in section 1.7 of appendix C be made clearer. ACTION
- Questioned the assurances in place regarding the corporate risk register. Officers
 informed Members that the Children's Families and Adults Risk Register would be
 presented to the Committee for review at its July meeting. ACTION
- Expressed concern that families and dependants could be less rigorous and dependable than paid care agency staff. It was therefore questioned how the proposed changes would be monitored by officers and Members. Members requested that Spokes be kept informed about the impact of changes to support planning on individuals and take a view on whether further consultation was required. Officers drew Members attention to the links with the Transforming Lives programme of work and the annual survey that reported customer satisfaction levels. It was agreed that the methods of monitoring the impact would be added to the Spokes agenda for discussion. ACTION
- Questioned how exercise levels were measured for individuals and what qualified
 as the correct type and amount of exercise. Officers informed Members that there
 was a large amount of public health research in this area and an individual taking
 the exercise was required to provide feedback.
- Questioned how the effectiveness of contingency plans would be measured.
 Officers highlighted the links with Transforming Lives and how it allowed teams to have more time for reflective discussions. The role of the Multi-Agency Safeguarding Hub (MASH) was also brought to Members attention.

Councillor Bailey, with the agreement of the Chairman and Members of the Committee, proposed an amendment to recommendation a) of the report that replaced "on" with "of".

It was resolvedto:

- a) Note the feedback received through the consultation of the proposed changes to the section on the Support Planning section of the Care Act Policy Framework.
- b) Approve the revised Support Planning section of the Care Act Policy Framework.

156. BETTER CARE FUND PLANNING FOR 2016/17

The Committee received a report that updated Members on the development of the Better Care Fund (BCF) Plan for 2016/17 and sought the view of Members in order to inform the plan. Officers explained that Better Care Fund planning had been challenging because the release of national guidance by the Government had been delayed to 23February 2016. Members noted the events surrounding Uniting Care Partnership and some of the changes to the Better Care Fund that included the following: the removal of the performance related pay element of the Fund; the addition of a new national condition regarding the management of Delayed Transfers of Care (DTOCS); a significant increase in the Disabled Facilities Grant (DFG) administered by District Councils created by the removal of the Adult Social Care Capital Grant Funding; and the requirement for local areas to develop a plan for multiple years that described a move towards the Government's definition of integrated health and social care services.

During discussion Members:

- Drew attention to the £0.9m allocated to transformation projects and questioned whether more money should have been allocated to transformation work. Officers explained that it did not represent the totality of transformation work within the directorate.
- Questioned the speed at which DisabledFacilities Grants were delivered in the community from assessment to implementation. Officers confirmed that the process was lengthy but work was being undertaken with District Councils to streamline the process and to look at revising how DFG cases are prioritised. Officers agreed to include Councillor Sales in the work.ACTION
- Raised concerns thatgood wordswould not be reflected in positive outcomes for service users and questioned why the target to reduce the number of non-elective admissions to hospital had been missed. Officers explained that the year had been dominated by the setting up of Uniting Care Partnership and its subsequent collapse and there was a lack of focus on preventing hospital admissions. There was a dilemma over meeting national aspirations versus the reality of events that were taking place. The evidence was that work should be focussed on preventing hospital admissions and work was taking place with District Councils to identify

triggers around people becoming more vulnerable in the community such as applications for single occupancy discount for Council Tax and applications for assisted bin collection.

- Questioned what the Rockwood Frailty Tool was. Officers informed Members that it
 was a standard measure of assessing an individual's frailty in simple terms for all
 agencies.
- Sought clarification regarding the vision for 2016/17 as it appeared it had been presented before and questioned whether Neighbourhood Teams had been set up. Officers explained that the Plan was largely re-energising what had been presented previously to the Committee and confirmed that Neighbourhood Teams were in place. Social Workers had been identified who would be linked with the Teams.
- Questioned whether, as stated in appendix A of the report, prioritising funding for care home placements to ensure that people were supported to live independently as long as possible was an oxymoron. Officers agreed to review the wording.
- Underlined the importance of shared IT and noted officer discussions were continuing with the Clinical Commissioning Group and a bid had been made to Vanguard to address the issue. Discussions had also taken place with Cambridgeshire and Peterborough Foundation Trust (CPFT) on the matter.
- Confirmed that regarding DFG funding, money was passed to the relevant District Council and if it was not spent then it would retain the money.
- Agreed that, given the short timescales, Members would be involved in further development of the BCF Plan by officers sending updated versions to Members by email for individual comment.

It was resolved unanimously to:

- a) Note the update on the BCF planning for 2016/17.
- b) Comment on the proposed approach to BCF Planning.
- c) Comment on the proposed priorities for transformation set out in Appendix A.
- d) Comment on how they would like to be involved in the BCF as the Plan was developed further.

157. BUILDING COMMUNITY RESILLIENCE

A report was received by the Committee that introduced, "Stronger Together – Cambridgeshire's Strategy for Building Resilient Communities, and sought the views of Members on the actions that were taking place in support of the strategy. Officers drew the attention of Members to the links with Transforming Lives and the Better Care Fund. Six areas of activity contained in section 3 of the report were highlighted to Members, together with the development of a business case that would be presented to the General Purposes Committee.

During discussion of the report Members:

- Expressed concern that the quality of services could be determined by the energy of Parish Councils and not based on need and therefore service delivery would be fragmented across the county. Members questioned how areas of activity would be mapped and tracked. Officers explained that work was at its early stages and monitoring work would develop as the strategy developed.
- Noted the importance of residents associations and groups as a source of information and support in urban areas.
- Questioned whether local libraries could be relied upon to remain open given reductions in local authority funding. Officers explained that buildings were being assessed to bring services together in a community hub format which would make rural libraries more sustainable for the future.
- Confirmed that the profile of volunteers was changing as people retired later and had less time to carry out voluntary work. The importance of adapting to engage with volunteers of all ages was noted.
- Confirmed the importance of church and faith groups in delivering community resilience and ensuring that networks between all groups were strong to allowpeople to be kept informed of what was happening in their community.

It was resolved unanimously:

To comment on the actions proposed to support the Community Resilience Strategy.

158. TRANSFORMING LIVES: A NEW STRATEGIC APPROACH TO SOCIAL WORK AND SOCIAL CARE FOR ADULTS IN CAMBRIDGESHIRE

Members received a report that provided an update on the progress made on key areas of the implementation of the Transforming Lives model. Officers drew Members attention to the transformation work that was currently taking place. Members were informed that the operating model for the Contact Centre was changing with a multi-disciplinary team receiving calls in order that a detailed exploration of need took place at an early stage. Members noted the setting up of the Multi-Agency Safeguarding Hub (MASH)and its purpose, together with the revised Contact Centre operating model that would enable Health and Social Care Teams to fully embrace the Transforming Lives model

During discussion Members:

 Noted that the Transforming Lives model appeared to be a return to a more traditional approach to social work. Officers confirmed that the model was far less prescriptive in its approach to social work and care management.

- Questionedwhat approaches other local authorities were taking to delivering social
 care services and whether Cambridgeshire was leading the way with the
 Transforming Lives model. Officers advised that learning was being shared
 between local authorities but Cambridgeshire was largely leading the way with the
 model. Members were informed that some local authorities were adopting models
 similar to Transforming Lives but some were moving in the opposite direction to
 more prescriptive models of delivering health and social care.
- Expressed disappointment that no evaluation data was included in the report and requested that a report be presented to Spokes and Committee at the earliest opportunity. ACTION
- Welcomed the change in terminology that referred to people as citizens rather than customers.
- Highlighted the importance of being able to compare care outcomes and experience of the service.
- Referred to an email received from a member of the public that suggested staff
 were spending more time assessing individuals than caring for them and
 questioned if there was any data available on the time spent on assessments.
 Officers explained that Transforming Lives was the vehicle that would enable a
 move away from process based social work. Members were advised that spending
 time completing a thorough assessment was invaluable and the focus of
 assessments should be around listening to people rather than paperwork.
- Questioned whether mobile devices would be corporately owned. Officers
 confirmed that such devices would be corporately owned and outlined the
 advantages of mobile devices to staff in the Reablement Team who spent a large
 proportion of their day travelling to enable them to work more flexibly and make best
 use of their time.

It was resolvedunanimously to:

- a) Comment on the current progress and ongoing plans in place for implementation across the service areas;
- b) Comment on current progress and ongoing plans for the areas of cross-cutting work that support implementation of the model in service areas.

159. FINANCE AND PERFORMANCE REPORT JANUARY 2016

The January 2016 Finance and Performance report was presented to Members. Officers drew Members attention to the decrease forecast overspend for the Learning Disability Partnership (LDP), the increase to the forecast underspends in Older People's Services and Mental Health, increased client contributions and decreasing external spending on care.

During discussion Members:

- Questioned the forecast variance for the LDP Budget. Officers explained the
 importance of ensuring that the commitment records were up to date as it was
 suspected that the end of year forecast was inflated. Members were informed that
 work was being undertaken to improve the accuracy of commitment records.
- Welcomed the Delayed Transfers of Care (DTOC) figures that showed continuing improvement in delays attributed to social services and questioned the impact of seasonal fluctuations on figures. Members noted that two hospitals had blamed Cambridgeshire County Council for DTOCS and requested that officers relay Members dissatisfaction with apportioning blame in such a manner. Officers confirmed that the changing seasons affected the number of admissions to Accident and Emergency departments. Members noted that robust discussions took place regularly with NHS colleagues regarding DTOCS and the desire to ensure effective prevention work to reduce hospital admissions.
- Requested that the most up to date figures for DTOCs were included in the Finance and Performance report. Officers explained that DTOC figures were subject to a great deal of evaluation prior to their inclusion in the report. The attributing of DTOCs to either the NHS or the Council could take a significant length of time.
- Highlighted that poor quality referrals from hospitals to care teams were contributing to social care DTOCS. Officers confirmed that the quality of referrals was an issue and the Reablement Team were challenging poor referrals with the hospitals.
- Noted that the recruitment and retention of staff was improving as the volume of vacancies was reducing but competition with other Local Authorities was great. The Committee noted that recruitment of social workers was never delayed to achieve savings.

It was resolved unanimously:

To review and comment on the report.

160. DOMESTIC ABUSE STRATEGY - MANAGEMENT INFORMATION

The Committee was presented with the measures developed to assess the impact of the Domestic Abuse Strategy. Officers drew Members attention to the Domestic Abuse Governance Board and the revised governance arrangements. Members noted the difficulty in gathering statistics regarding domestic violence and that increasing numbers of incidents of domestic violence did not necessarily mean that numbers were increasing overall.

During discussion Members:

- Expressed alarm at the figures set out in paragraph 2.4.2 of the report. Officers explained that the statistics were of limited scope, highlighting the disparity between those that report incidents and those that did not.
- Welcomed that the complexity of domestic abuse had been identified within the report and noted that because not all cases of abuse were the same, the response

to each case had to be tailored accordingly.

- Questioned why homicide rates had increased. Officers explained that there were seasonal fluctuations in the figures but the statistics had remained fairly constant for the last 15 years.
- Expressed concern that the incorrect information was being measured and that
 although the Partnership Offer was presented in a good format it didnot make
 logical sense. Officers confirmed that the document reflected national and
 international issues with data recording. The only data set currently was the
 National Crime Survey that had significant issues with it.A new strategy provided by
 central government would help address the issues.
- Questioned how prevention work took place. It was explained that prevention work
 was currently based around education and lobbying government in order to be able
 provide relationship education in schools. Engagement work was ongoing with
 further and higher education establishments regarding providing relationship
 education.
- Noted that a new strategy from the Government was due on 8 March 2016 and a new action plan would be developed as a result with strong intervention and prevention strands.
- Expressed disappointment and concern regarding the deletion of an existing Health Independent Domestic Violence Advisor (IDVA) post.

Councillor Wilson proposed an amendment, with the agreement of the Chairman and the Committee, to recommendation c) of the report to read:

Note and express concern on the implications of the deletion of the Health IDVA post and ask officers to write to the CCG to express the Committee's concern

It was resolvedunanimously to note:

- a) The findings of the report, and that a progress report on the activities was requested from the Chair (s) of the Cambridgeshire and Peterborough Domestic Abuse and Sexual Violence Partnership.
- b) That all strategic actions contained within appendix 1 of the report were now either complete or would be carried forward into the new joint plan.
- c)Note and express concern on the implications of the deletion of the Health IDVA post and ask officers to write to the CCG to express the Committee's concern.

161. ADULTS COMMITTEE AGENDA PLAN

The agenda plan for the Committee was presented to Members. It was requested that a report on Transforming Lives Progress Data was presented to the July meeting.

It was resolved unanimously tonote the agenda plan.

Chairman