

Adults and Health Committee Minutes

Date: 25 January 2024

Time: 2.00 pm - 4.57 pm

Venue: New Shire Hall, Alconbury Weald, PE28 4XA

Present: Councillors Mike Black, Chris Boden, Alex Bulat, Steve Count, Claire Daunton, Bryony Goodliffe, Ros Hathorn, Anne Hay, Mark Howell, Edna Murphy, Kevin Reynolds, Geoffrey Seeff and Philippa Slatter.

224. Appointment of Chair for the meeting

It was resolved unanimously:

to appoint Councillor Alex Bulat to chair the meeting in the absence of the Chair and Vice Chair.

225. Apologies for Absence, Declarations of Interest and Announcements

The committee paid tribute to Councillor Mac McGuire who had sadly passed away recently. Councillor McGuire had been the Council's longest serving councillor having first been elected in 1985 and then again continuously from 1997. During that time, he had held various key roles including Chair of Council, Deputy Leader of the Council, Cabinet Member for Highways and Transport and most recently sat on the Adults and Health Committee. Those present stood for a minute's silence to mark Councillor McGuire's passing.

Apologies received from Councillor Richard Howitt (substituted by Councillor Bryony Goodliffe), Councillor Van de Ven (substituted by Councillor Edna Murphy), Councillor Graham Wilson (substituted by Councillor Ros Hathorn) and Councillor Adela Costello.

Councillor Bryony Goodliffe declared an interest in item 5 on the agenda as she was an unpaid carer.

226. Adults and Health Committee Minutes – 14 December 2023 and Action Log

The minutes of the meeting on 5 October 2023 were approved as an accurate record.

A member highlighted that they were attending the Cambridgeshire University Hospital Foundation Trust Liaison Group meeting on 26 January 2024, and they anticipated there would be an update in relation to minute action 169 at the meeting.

A member requested a further update on the workforce position for individuals that had been affected by the closure of Beaumont Healthcare Limited and an update on the number of individuals that had been supported to find alternative roles. The Executive Director: Adults, Health and Commissioning stated that he would provide a written update to the committee after the meeting. **Action Required.**

In relation to minute action 222 on the Health Scrutiny Workplan. A member requested an update on when Health Inequalities, would be scrutinised at committee. **Action Required.** A member also requested an update regarding a date when NHS Dentistry would be scrutinised at committee. **Action Required.**

The action log was noted.

227. Petitions and Public Questions

No petitions or public questions received.

228. Business and Financial Plan 2024-2029

The committee received a report summarising the business and financial planning proposals for 2024-29 which fell within its areas of responsibility.

Individual members raised the following points in relation to the report:

- sought clarity on any progress relating to the announcement by Government on 24 January 2024 regarding £500m of additional funding for Social Care. The Executive Director: Finance and Resources explained that further details on the funding were not expected until around 5 February 2024.
- welcomed the work on anti-poverty and the investment in mental health.
- expressed concern that the only uplift in the Public Health budget was for inflation and not demand. A member highlighted demand in relation to the current measles outbreak, the increase in STDs post Covid and that Police would no longer intervene in mental health cases. The Executive Director of Public Health explained that these areas were flagged as risks and there was increased pressure on services with no increase in funding. She explained in the case of

the measles outbreak, Public Health colleagues were working with schools to encourage vaccination uptake. She explained that outbreaks would cause immense pressure in terms of isolation periods of 21 days. The Executive Director: Adults, Health and Commissioning explained that the authority was working closely with the Police and partners on the 'Right Care, Right Person' (RCRP) partnership approach which was currently in its first phase and phases two and three were being developed and risks being assessed. He stated that if there were any financial implications that this would be brought back to committee for consideration.

- queried what the Care Together and Independent Living Services funding was to be spent on. Officers explained that there were plans to open two Independent Living Facilities; one in Huntingdonshire which was currently being commissioned and expected to go live in April 2025. The second site was the Prince of Wales site in Ely. Officers explained that the lead times for this site were longer with planning scheduled for summer 2024, then the purchase of the land in November 2024 and construction due to be completed by April 2026. Officers stated that currently, Care Together operated largely in East Cambridgeshire and was due to be expanded across all of the districts, with a focus on all age prevention and early intervention. Officers explained that there was some external help required to help support thinking on how to expand the care together principles even further across the whole of Cambridgeshire. Officers highlighted that there would be a paper to Spokes in March 2024 that detailed the plans. The Executive Director: Adults, Health and Commissioning stated that there would also be a member training and development session on Care Together.
- queried whether the figures in business case BR5.005 'Investment in adults invest to save schemes' were re-occurrent or one-off savings from the initial investment of £3.324million. Officers explained that they were one off investments to deliver permanent savings over a four-year period.
- sought clarity on how the older people pressure investment need was calculated. Officers explained that they looked at trend data and that trends had been different since covid, and this had resulted in a lower demography bid last year. Officers explained that there had been some resistance by individuals to go into care homes following the pandemic, but that people were starting to go back to them, therefore the figure represented a catch up on underestimating the trend in the last financial year. The Executive Director: Adults, Health and Commissioning stated that previous finance and performance reports to committee had highlighted the rise in numbers over and above the current forecast, hence why there was a cost pressure.
- questioned the use of the word vacancy savings target and the impact on services performance in terms of not being able to fill vacant positions. A member queried why the council was not rebasing its costs as the vacancy issue would be the case for many years to come. Officers stated that the terminology was not something they were aiming for but was a reflection of the reality that the job market was difficult, and they were unable to fill particular posts. The Executive Director: Adults, Health and Commissioning stated that reporting in relation to waiting lists and performance was a credit to the workforce who

worked over and above to cover the current vacancies. He explained there was an ongoing struggle to recruit professional qualified staff and that the interim market was used. He explained that they would like to have a lower vacancy factor and that the vacancy factor for this year had been exceeded. He stated that the council was working hard to bring in new employees. Officers explained that there was an establishment and the figures that were reflected in the budgeting were mainly around the gap between one person leaving and another coming in so there was a cumulation of the gap. The Executive Director: Finance and Resources stated that through business planning discussions it had been agreed that the establishment was the correct one to be put forward. He explained that there was a reflection that the service would have a period where posts are not filled and there was always an element of estimating and the position would be monitored through the finance and performance report. He agreed that the wording would be reviewed in relation to the use of the word's vacancy savings target, and this would be changed to vacancy factor in the future.

- highlighted that the staffing levels in Adults and Public Health, in relation to the Employee Engagement Survey, Adults and Public Health were outliers in terms of staff turnover etc and there needed to be some work in these areas. Adult social care staffing had been flagged as an outlier by the Office for Local Government (OFLOG) nationally. At Strategy, Resources and Performance Committee there had been requests for benchmarking reports and there was some ongoing work in the Adult Social care service on this.
- queried if the Care Academy that had been established was purely an online academy and sought further information on what qualification participants could achieve. Officers explained that the Care Academy that had recently been launched offered an online platform that covered a baseline set of skills which were encompassed in the care certificate. Officers explained that some of the offer was face to face training but that there was an online offer included for those that were unable to access the learning in person. Officers highlighted that they were currently in phase one of the academy and phase two would be looking at more support for registered managers.
- queried page 48 of the report, in section 3.25 where it is stated that the largest proportion of the Public Health grant was spent on children 34% and asked for further clarification on this. The Executive Director: Public Health stated that the percentage related to services that were exclusively for children.
- requested the methodology and tracking of the figures for demand and demography in relation to B/R.3.001 Additional funding for Older People demand and B/R.3.004a Additional funding for Learning Disability demand attributable to CCC. The Executive Director: Finance and Resources explained that the figures were based on the current understanding in what officers' think will happen and he stated that he would be happy to provide members with the methodology in relation to the two items. **Action Required.**

- commented that in planning ahead and preventing long term conditions and need to include this in the planning applications for supported housing and co-production of health-related activities.
- highlighted the Learning Disability Partnership section 75 agreement saving. A member stated that he understood that the Council had served notice on the agreement, and he sought confirmation that the notice was final and that the numbers associated with the projected savings would be made. The Executive Director: Adults, Health and Commissioning confirmed that there was a 12 month notice period which would come to an end in August 2024 and that there was a further paper at committee seeking resource to carry out reviews so that the financial split could be finalised ahead of the deadline. He clarified that the notice was in relation to the pooled fund with the ICB and this was separate to the integrated service which the authority wished to continue. He explained there were still further conversations regarding the integrated service. Officers explained that they had gone for a conservative number in relation to the figures and the numbers were based on the information they currently had.
- questioned if the Chair and Vice Chair saw the level of detail that went into the figures as part of the business planning process. The Executive Director: Finance and Resources stated that the business planning process was an ongoing process, and every single line of the budget was scrutinised with officers with the support of finance colleagues and then there was engagement through Chairs and Vice Chairs.
- a member stated that in his view he continued to have concern that public health reserves were not being used in a proactive way and that he felt there should also be more of a focus on health inequalities.

In bringing the debate to a close the chair stated that she was pleased to see investment in increasing the real living wage and how this fitted into the work of the anti-poverty strategy.

The Executive Director: Adults, Health and Commissioning summarised the debate to be reported to the Strategy, Resources and Performance Committee, stating that:

The committee sought clarification on:

- any progress relating to the announcement by Government 24 January 2024 regarding the £500m Social Care. It was noted we do not have any details, and these are not expected until around 5 February 2024.
- the level of Public Health Funding to meet rising demand, such as measles.
- what the Care Together and Independent Living Services funding was to be spent on. Officers will provide further updates to Spokes and training to this Committee on Care Together.

- how the older people pressure investment need was calculated. The process of calculation was explained including reference to the Financial Monitoring in 2023/24 that Committee members have seen related to rising demand.
- the vacancy factor and the impact on performance, as well as the impact of the Care Academy.
- how the assumptions around later year pressures had been calculated and Finance will provide a further briefing to all Committee members.
- the confidence in the section 75 assumptions.
- officers are committed to considering the impact of the cost of living crisis on individuals, which will include reviewing the application of the Adult Social Care Fees and Charges, this will take some time (months), and will involve learning from other authorities and will require legal advice.

As a result of the clarification and debate the committee have not raised any further points to report back to Strategy, Resources and Performance Committee at its meeting on 30 January 2024 in their discussion and debate on proposals before they are proposed to Full Council.

It was resolved by majority to:

- a) consider and scrutinise the proposals relevant to this Committee within the Business and Financial plan put forward by the Strategy, Resources and Performance Committee, 19 December 2023.
- b) recommend changes and /or actions for consideration by the Strategy, Resources and Performance Committee at its meeting on 30 January 2024 to enable a budget to be proposed to Full Council on 13 February 2024; and
- c) Receive the fees and charges schedule for this Committee included at appendix 2.

229. Procurement of an All-Age Unpaid Carers Service

The committee considered a report that sought approval to agree the procurement approach for the all-age carers service. Officers explained that the report had been presented at the last committee meeting in December 2023 and members had requested further detailed information in order that they could make the decision.

Individual members raised the following points in relation to the report:

- questioned how the authority ensured that providers were putting in place a programme to recruit, retain and train volunteers. Officers explained that the service had a mixture of a permanent and volunteer workforce. Officers stated that there was a contract monitoring regime in place and providers were regularly monitored and detailed conversations were held on a regular basis with any risks

raised and recruitment and retention of staff was fundamental as part of the framework.

- asked that officers ensured that insourcing was given consideration in future procurement processes and that tendering for contracts was looked at up front with good lead in times. Officers explained that that they did look at insourcing to bring this service in house. Officers highlighted that through co-producing the requirements around the service with carers the clear feedback had been that their preference would be for the service not to be delivered by the local authority. Officers explained that they were asked to produce a forward plan of procurements for the next few years, and this had been shared with spokes. Officers stated that through the business planning process on of the services they were looking to bring back in house was the trusted assessor model.
- welcomed the support given to those caring for people with Alzheimer's.
- queried how contracts were reviewed on an ongoing basis once they had been let in terms of reviewing value for money and performance. Officers explained that once a contract was mobilized, they worked with providers to develop performance metrics focusing on key priorities. Officers stated that there were officers that went out to monitor the services and there were high level meetings on a regular basis. Officers explained that if there were any concerns with a service then an action plan was put in place and monitored closely. There was also an independent evaluation in year three of the contract.

It was resolved unanimously to:

- a) approve the procurement approach and the overall value of £6,315,616 based on 2023/24 values over 3 years plus a 12-month extension period of the all-age carers service.
- b) delegate responsibility for awarding and executing contracts for the provision of the all-age carers service to the Executive Director, Adults, Health & Commissioning in consultation with the Chair and Vice-Chair of the Adults & Health Committee.

230. Procuring additional Adult Social Care reassessment capacity

The committee received a report that outlined how the authority proposed to implement the recommendations received from the Local Government Association Peer review of Adult Social Care and Commissioning in 2022 ahead of a Care Quality Commission (CQC) inspection. Recommendation 4 – 'The Council should minimise backlogs of assessments including Deprivation of Liberty Safeguards and reviews. Where external agencies are used to complete reviews, the Council should ensure that agency staff are clear about their authority and the process to make changes to care and support.'

Officers explained that they had been working at pace to reduce the backlogs of assessments however, more work was required. Officers highlighted that there was

an acute shortage of qualified and experienced social workers (approx. 20% - 26% vacancy rate), meeting our requirements for assessment work, required hiring support from outside companies. The report explained the additional capacity required and this might be achieved, and the funding required.

Individual members raised the following points in relation to the report:

- queried whether it was realistic that that the authority would be able to source the number of staff required to undertake the work. Officers explained that they were looking to carry out 100 reviews per month, so this averaged out at 25 per week, which was a manageable target to find through the marketplace.
- commented that ideally the work should be done in house and that there should be an ambition to ensure that the use of agency staff was not a long-term requirement. Officers explained that there was a pending Care Quality Commission (CQC) inspection due and it was pointed out by the peer review that there was a noticeable backlog and that they would like to see improvements in reducing the backlog, and there were the assessments that needed to be carried out before the termination of learning disability section 75 pooled budget so there were timing issues for both of these elements.
- sought assurances that carers and those responsible for supporting individuals were involved in reassessments as they had the best insight into their needs. Officers explained that all of the temporary staff employed to carry out the assessments would have access to the relevant records and work with the same quality assurances processes as those in permanent roles. All staff carrying out assessments would also involve all of the relevant people involved in the care of individuals being assessed including any professionals that have been involved in their care.
- queried if there was an average time over and above when individuals are waiting for assessments to be completed and sought clarity on when the backlog would be completed. Officers explained that currently there was no average time above what people would normally wait. Officers commented that in terms of the backlog being completed, some of the assessments took longer than others as they were more complex, and the backlog was a moving feast with more assessments being added.

It was resolved unanimous to agree:

In the event we cannot hire interim staff as per paragraph 2.4, Adults and Health Committee is recommended to:

- a) Delegate responsibility for awarding any contracts for the provision of Adult Social Care reassessment work commencing March 2024 to the Executive Director of Adults, Health and Commissioning
- b) Delegate responsibility for executing any contracts for the provision of Adult Social Care reassessment work starting middle of March 2024 to the Executive Director of Adults, Health and Commissioning.

- c) This work has an estimated contract value of £1,180,000 over the next 12 months.

231. Referral from Audit & Accounts Committee

The committee received a report that detailed a referral from the Audit and Accounts Committee in relation to the “Contract management of the Healthy Child Programme and Integrated Drugs and Alcohol Systems contract management” set out in section 7.2.4 of the Internal Audit Progress Report to the attention of the Adults and Health Committee.

The Chair stated that there was an amendment put forward by the substantive chair of the committee prior to the meeting. She explained as he was unable to attend the meeting the amendment would not be taken forward as there was no proposer or seconder identified. She clarified that there would therefore be no debate on the amendment.

Individual members raised the following points in relation to the report:

- the Chair sought assurance that there was the capacity and skills in the Public Health team to carry out open book accounting. The Executive Director: Public Health stated that she had worked closely with the audit team to ensure that the appropriate training would be provided for the team, and she stated that she was confident that they would meet the revised target of April 2024.
- noted that the annual value of the Health Child Programme contract was between £8-9 million and started in 2020 and was due to expire in March 2025 and the Integrated Drug and Alcohol contract would normally be £4.5 million but had recently been inflated by the additional grant funding from central government and started in 2019.
- a member stated that for more than a year there had been concerns raised at the Audit and Accounts Committee by the internal audit function on both contracts and that they had not taken the necessary steps to implement open book accounting. He explained that the principle of open book accounting was used to ensure greater transparency in relation to costs and could be implemented in a number of ways. He stated that the Audit and Accounts Committee had agreed unanimously at its meeting in December 2023 to refer the matter for consideration at the Adults and Health Committee. He reiterated that it was important that the April 2024 deadline was met. He welcomed the fact that the amendment was not being debated as he found it unhelpful.
- a member highlighted that implementation dates agreed as part of the internal audit action plan were agreed by the relevant director and internal audit to ensure that they are reasonable, and every effort must be made to hit this date.
- a member stated that there was a consensus that what has been asked of officers in relation to the actions on open book accounting were deliverable.

It was resolved to consider the matter referred by the Audit & Accounts Committee.

232. Adults Corporate Performance Report

The committee considered a report that gave an update on the status of the selected Key Performance Indicators (KPIs) which track the performance of the services the committee oversees. The report covered the period of quarter two 2023/24, up to the end of September 2023

Individual members raised the following points in relation to the report:

- a member queried indicator 229: Percentages of safeguarding enquiries where risk has been reduced or removed and expressed concern to see that the percentage had worsened and more than 1 in 9 of the cases did not result in any reduction or elimination of the risk and the figure was below the national average. He sought assurance that actions were being taken to improve the figures. Officers explained that section 42 was the council's statutory duty to make enquires around adult safeguarding, and there was a significant piece of work being undertaken in relation to the adult safeguarding service delivery plan which included the multiagency contact hub (MASH) and the wider adult social care system. Officers explained that they were in the middle of reviewing all of the enquires so once they had gathered all of the data, they would be able to provide an update to committee. **Action Required.**
- requested that where the figures go from one year to the next that it can be made clear that the final figure is for the full year and should not be compared against the first quarter. **Action Required**
- a member queried indicator 140: Proportion of people receiving reablement who did not require long term support after reablement was completed, as the proportion of people not requiring long-term support after a period of reablement remained high compared to the national and statistical neighbour average and sought clarity on the reasons behind this and asked that the descriptor for the indicator be reviewed to make it clearer. Officers explained that the indicator related to the proportion of people that had received the reablement service after a period in hospital and did not require long term support following the receipt of the service. Therefore high performance was a good indicator that the service was working well. Officers agreed to review the descriptor for the indicator. **Action Required.**
- A member highlighted that none of the performance indicators had Key Performance Indicators (KPIs) and sought assurance that there would be KPIs for quarter 3 and queried why quarter 1 and 2 being presented together. The Executive Director: Adults, Health and Commissioning stated that in relation to KPIs this would be reviewed for future reports and that reports would be brought to committee in a timely manner.

It was resolved to:

Note and comment on the performance information outlined in this report and recommend any remedial action, as necessary.

233. Public Health Performance Report Quarter 2 2023-24

The committee considered a report that gave an update on the status of the selected Key Performance Indicators (KPIs) which track the performance of the services the committee oversees. The report covered the period of quarter two 2023/24, up to the end of September 2023

The presenting officer highlighted the following points in the report:

- the integrated drug and alcohol service and weight management service were both exceeding their targets. The breastfeeding target had also seen improvement and was exceeding its target.
- the performance of the drug and alcohol service had been driven by additional funding received by central government which was coming to an end in 2025-26 and there was concern that this would not continue.
- demand was overwhelming the weight management service and there was a 6-9 month waiting list. Some of this had been driven to some extent by the new drugs now available as there was a perception that they were a quick fix and the incentivisation payments for GPs to refer.
- NHS health checks had seen an improvement in performance and the expectation was that they would meet the local target and were currently above pre-covid figures.
- concerns around the stop smoking service as it was proving difficult to improve the figures and officers were looking at different delivery models. This service would receive additional funding next year and would be focusing on groups with high smoking rates such as the homeless and those in mental health services. There was also a system wide tobacco alliance and officers were currently reformulating the strategic plan which included vaping and illegal tobacco sales.
- there had been a lot of work on the healthy child programme focusing on skills mix and how the service could be delivered in different ways to meet the number of checks required, and this was a work in progress to ensure that the checks meet the target level.

Individual members raised the following points in relation to the report:

- a member highlighted indicator 56, the Stop Smoking Services as figures were poor and stated that the figures were disparate across the county with Fenland being the worst local authority in the country. He commented that he was

pleased to see new stop smoking projects were being developed in Fenland and sought further information on these projects and timescales and if there was any particular support for the Eastern European community. Officers explained that it was one of the closer to communities decentralisation projects and the latest data had started to show figures coming back down. Work focused on population groups with higher rates so were working closely with the Ferry Project, working with the homeless and working with neighbourhood managers, one post working with the homeless and another with primary care and having individuals trained within the project on supporting individuals to stop smoking. The behavioural science work being undertaken with Sheffield University would also help identify barriers. In relation to primary care the post would be imbedded in the integrated neighbourhood team and social subscribers. In addition, the NHS had a treatment tobacco dependence programme, making sure that the pathways going out of hospital, a small team had been formed in fenland to support these individuals to engage with services. Officers explained that they were working with the Rosmini Centre to give targeted support to the Eastern European population. A member stated it was important to focus on young people not taking up smoking. Officers explained that vaping has undermined this and there was work focused on working with schools and the wider community on the dangers of vaping.

- a member queried if any of the money set aside for weight management services was put into supporting individuals joining local weight loss clubs as they were seen to be highly effective in helping individuals lose weight. Officers explained that there was investment in commercial slimming clubs, and they are well evaluated, and people like them.

It was resolved to:

- a) Acknowledge the performance achievements
- b) Support the actions undertaken where improvements are necessary.

234. Adult and Health Committee agenda plan, training plan and committee Appointments

The agenda plan, training plan and committee appointments were noted.

Date of Next Meeting

It was noted that the next meeting would take place on Thursday 7 March 2024.

Chair