

ADULTS COMMITTEE: MINUTES

Date: Thursday 9th March 2017

Time: 2.00 p.m. to 4.20.p.m.

Present: Councillors A Bailey (Vice-Chairwoman), C Boden, P Brown, A Dent (Chairman), D Giles, R Mandley, T Orgee, and G Wilson.

Apologies: Councillors S Crawford, L Dupre, L Harford (Councillor Orgee substituting) and Councillor F Yeulett.

231. DECLARATIONS OF INTEREST

There were no declarations of interest.

232. MINUTES – 19TH JANUARY 2017 AND ACTION LOG.

The minutes of the meeting held on 19th January 2017 were agreed as a correct record and signed by the Chairman.

The Action Log was noted.

233. PETITIONS

No petitions were received.

234. FINANCE AND PERFORMANCE REPORT – JANUARY 2017

The Committee received the November 2016 iteration of the Finance and Performance report. Officers informed Members of a worsening forecast revenue position; although there remained an underspend within Adults Services it had reduced by approximately £500k.

During the course of discussion Members:

- Drew attention to the increased volume of demand placed upon services and the increased cost of services, noting the impact pressures would have on the budget for 2017/18.
- Expressed concern about the proportion of adults with learning disability that were in paid employment. Officers reminded Members of the draft employment strategy that was presented to the previous meeting of the Committee. Members were informed that work was progressing with Human Resources to make the application process simpler recognising that some people with learning disabilities or autism find online forms difficult.
- Drew attention to paragraph 2.3 of the report, in particular new nursing beds in Fenland that cost on average £110 more per week than the previous month and

requested that historical bed price data be incorporated within the report in order that trends could be identified. Officers explained that there had been a significant increase in patients aged over 85 who were being discharged from hospital with more complex needs that resulted in higher costs for care. Officers highlighted the work of the Brokerage Unit that worked to minimise those costs. Officers agreed to review how care cost trends could be incorporated within the report more effectively.

- Questioned how the additional funding announced by the Chancellor in the Budget would be utilised. Officers explained that it was unclear how the additional funding would be split across local authorities and were awaiting information about any conditions attached.
- Drew attention to 2 home care providers that had ceased trading and questioned how it would affect Cambridgeshire. Officers informed Members that the 2 companies continued to operate in Cambridgeshire however, in response to Members' concerns Officers acknowledged the impact the Living Wage would have on care providers and drew attention to the joint procurement of the home care contract that was about to be issued jointly with the Clinical Commissioning Group (CCG), where issues such as the Living Wage had been factored into the costings.
- Noted the number of vacancies across the service and the successful recruitment drives particularly in the Reablement Team. The Council had entered a relationship with JobsGoPublic.com that had brought considerable interest in vacant positions. While the market was competitive, officers were working to ensure that the Council was an attractive place to work and highlighted the development and promotion of staff within and across teams.
- Noted the Social Worker training programme provided by the Council that was designed to be as flexible as possible to meet the different personal circumstances of staff undertaking this professional qualification. Officers emphasised the importance of balanced teams of both newly qualified and experienced staff. It was however more difficult to recruit staff in Cambridge City and South Cambridgeshire, primarily due to the higher cost of living.

It was resolved to review and comment on the report.

235. TRANSFORMATION FUND INVESTMENT PROPOSALS

The Committee received two investment proposals that would be presented to the General Purposes Committee (GPC). The proposals represented the response to the severe challenges in the adult social care market where there was a growing mismatch between demand and supply for care.

During the course of discussion Members:

- Welcomed the proposals set out in appendix B of the report that would help deliver efficiencies.

- Expressed concern regarding the proposal set out in appendix A of the report, in particular the potential cost of external consultants and questioned what they could suggest that was new. Officers explained that following presentation to Senior Management Team and Group Leaders it was preferred that soft market testing take place. It was envisaged that a range of organisations would be identified to deliver the scope set out in the proposal. The consultants would bring additional capacity for the work to be completed quickly with the benefit of additional experience from work elsewhere.
- Requested a greater alignment between the proposals and the Neighbourhood Cares model.
- Expressed frustration regarding proposals regarding Continuing Healthcare (CHC) as it was work that should be happening without the need for additional funding. Officers explained that the savings achieved would pay for the posts and it had become apparent that as the issues surrounding CHC funding had been explored in more detail, the level of work generated as a result had increased.
- Requested that the report be amended to emphasise the positive work that had taken place as it would assist the General Purposes Committee.
- Noted the ambition of the proposals with regard to the longer term future and expressed concern regarding the pending waiting list for care and the financial pressure that would result from the waiting list for care being reduced. Officers confirmed that there was a risk that reducing the waiting list could result in increasing costs however, a failure to provide care at an early stage could lead to preventable higher care costs later. Members' attention was drawn to the large number of people that were receiving ongoing domiciliary care through the Reablement Team which was unsustainable and the importance of managing demand effectively was emphasised by officers.
- Questioned whether greater emphasis needed to be placed on integration with the NHS within the proposals.
- Queried the timescales associated with the proposals and questioned how their progress and results would be reported. Officers informed Members that the short term investment proposal would begin immediately and the long term proposal would be placed for tender through the framework system. It was anticipated that a report would be presented to the Committee in the autumn and regular updates would be provided at Spokes meetings.

It was resolved to:

- a) Note the draft paper to be presented to the General Purposes Committee and comment on the two proposals under development for the Transformation Fund; and
- b) Endorse the two proposals to be taken to the General Purposes Committee for approval.

236. CHILDREN FAMILIES AND ADULTS RISK REGISTER

Members received the Risk Register for Children Families and Adults (CFA). The Register formed part of the Council's corporate risk management policy. There were 14 risks related to CFA that were within the Council's risk appetite. Members were informed that a review would be taking place through April and May that would align the Risk Register and the Finance and Performance Report more effectively.

During the course of discussion Members:

- Requested that risk number 3 be amended to include the over use of Reablement services to provide long term ongoing care and support rather than their intended short term intensive use. **ACTION**
- Highlighted Risk 8 on the Register. Officers advised that data received from partners was improving and a meeting was scheduled to take place with the Cambridgeshire and Peterborough Foundation Trust (CPFT) regarding the use of performance data within the Section 75 agreement.

It was resolved to endorse the CFA Risk Register and management of the identified risks.

237. BETTER CARE FUND 2017-19

The Committee received report that summarised the activity and performance of the Better Care Fund (BCF) in 2016/17. Officers explained that the BCF Guidance and funding allocations, originally intended for publication in November 2016 were not yet published and therefore only a limited update regarding the BCF Plan 2017-18 could be provided.

During discussion of the report Members:

- Drew attention to the substantial health inequalities across Cambridgeshire, in particular the level of diabetes in the Wisbech area.
- Clarified the meaning of proportionate universalism contained in paragraph 5.6.2 of the report. Officers explained that investment would be made across the County but targeted to areas that were most disadvantaged.
- Clarified the size of the areas resources would be targeted to. Officers confirmed that Fenland as an area was particularly concerning in terms of health inequalities and work was being undertaken with communities at a smaller level in order to identify their needs.
- Noted that it was planned for the BCF Plan 2017-19 would be presented to the next meeting of the Health and Wellbeing Board on 30th March 2017 however, if the BCF guidance was not published in time for the meeting then an extraordinary meeting of the Health and Wellbeing Board would take place in April.

- Expressed disappointment with the performance of the BCF outlined in paragraphs 2.3 and 2.4 of the report. Officers explained that there had been an unprecedented increase in the level of demand experienced at acute hospitals. It was further explained that the targets set during the original BCF bids were unrealistic and the measures did not reflect the wider situation. Members requested that greater context to the performance of the BCF be included in future reports and that officers included more details about what had been achieved.
- Emphasised the amount of work that had been undertaken to integrate services more effectively across health and social care, in particular with regard to Delayed Discharges of Care (DTOCS).
- Emphasised the importance of demonstrating the need for additional funding from the Government in order to be able to meet the increases of demand experienced.

It was resolved to:

- a) Note the update contained within the report; and
- b) Comment on the verbal update on the BCF Plan to be provided at the meeting, and agree how Adults Committee would like to be further engaged in the planning process for 2017-19

238. NEIGHBOURHOOD CARES PILOT

Members received a report that provided a summary of the plan for the pilot sites and the work that had taken place so far. Officers were focussed on identifying the areas in which to set up the 2 pilot sites and a multi-agency panel was due to meet that would review the suggested sites. The importance of recruitment was emphasised to Members and it was anticipated that following high profile recruitment drives in the pilot areas the team would be operational in late summer.

- Queried the criteria used for determining where to launch the pilot sites as certain areas would not have the infrastructure available to support such a scheme. Officers informed Members that decisions about potential pilot sites need to balance a number of factors.
- Highlighted the importance of effective collaboration with the NHS partner organisations and noted the aspiration to have one worker representing a number of organisations delivering the model.
- Emphasised the importance of ensuring the pilot sites were small so as not to overwhelm newly recruited staff and would like to see existing social care cases being taken over by Neighbourhood Cares as soon as possible.
- Noted that the pilot sites would be located in areas where it was likely for Neighbourhood Cares to be successful and that the roll out would not be without challenge across the County.
- Questioned how community capacity could be increased. Officers explained that often communities would like to do more but require support and guidance in order to be able to do that. It was also important to build relationships with cares earlier

and supporting them to deliver more as the needs of the person being cared for increase.

It was resolved to:

- a) Note the update contained in the report; and
- b) Request a further update is brought to the Adults Committee once patches have been identified and the team appointed.

239. TRANSFORMING LIVES

Members received an update on the Transforming Lives Programme across client groups. Officers highlighted paragraph 2.4.5 of the report that provided Transforming Lives activity data across different client groups. The Learning Disability Partnership (LDP) were the first team to adopt the approach and over 50% of cases contained a Transforming Lives care note. Attention was drawn to the graph illustrated in paragraph 3.1.8 of the report that showed the number of people receiving long term community services was reducing and the number of people in nursing homes was increasing. The success of Integrated Community Equipment was highlighted with 90% of equipment reaching those who needed it within 5 working days. Members' attention was drawn to the work undertaken by the Multi-Agency Safeguarding Hub (MASH) where the number of referrals had steadily increased and 60% of safeguarding concerns were being handled by the MASH rather than being dealt with by long-term care teams therefore releasing capacity within those teams to focus on complex safeguarding cases and assessment and review work. The report demonstrated that the work was heading in the right direction but there was significantly further to go regarding embedding the cultural change in teams and in everyday work.

During discussion of the report:

- Expressed concern regarding the decreasing number of hours of Reablement delivered as the number of mainstream domiciliary care hours had increased. This would lead to increased difficulties in the recruitment and retention of staff if they were unable to carry out the role effectively.
- Queried the cumulative percentage of "end of life" hours contained in paragraph 3.2.3 of the report. Officers explained that the percentage was reducing as the work was not appropriate for the Reablement Team to carry out and therefore a wider piece of work regarding palliative care was undertaken with the Clinical Commissioning Group (CCG) and Cambridgeshire and Peterborough Foundation Trust (CPFT).
- Noted the anticipated savings of around £500k through the avoidance of the need to provide double-up care through the work of the Occupational Therapy (OT) Double-Up Team. Officers agreed to circulate case studies of the work of the team to Members. **ACTION**
- Expressed some frustration with the speed of the rollout of the model and

questioned whether data had been under-reported. Officers confirmed that it was likely that Mental Health was under-reported and advised that there was more work to do regarding the case recording of long term cases within Older People's teams.

- Noted the Neighbourhood Cares pilots were an extension to the Transforming Lives model. It had been difficult for care teams to deliver everything that was required of them and it was therefore necessary to run the Neighbourhood Cares pilots alongside the existing care teams in order for the successful delivery of the project.
- Expressed concern at the increase in numbers of elderly people that created a clear pressure on services.
- Requested that client satisfaction with assistive technology be reported in the future as increased use could exacerbate loneliness.

It was resolved to note and comment on the report.

240. APPOINTMENTS TO OUTSIDE BODIES, PARTNERSHIP LIAISON AND ADVISORY GROUPS, AND INTERNAL ADVISORY GROUPS AND PANELS

It was resolved to delegate, on a permanent basis between meetings, the appointment of representatives to any outstanding outside bodies, groups, panels and partnership liaison and advisory groups, within the remit of the Adults Committee, to the Executive Director (CFA) in consultation with Adults Spokes.

241. ADULTS COMMITTEE AGENDA PLAN

It was resolved to note the Agenda Plan and the oral update provided at the meeting.

242. EXCLUSION OF PRESS AND PUBLIC

It was resolved:

That the press and public be excluded from the meeting on the grounds that the following item contains exempt information under paragraphs 1 and 2 of Schedule 12A of the Local Government Act 1972, as amended, and that it would not be in the public interest for this information to be disclosed; information relating to any individual and/or information which is likely to reveal the identity of an individual.

243. CHILDREN, FAMILIES AND ADULTS LEADERSHIP REVIEW

The Committee received proposals for the Children, Families and Adults (CFA) senior management restructure.

It was resolved to comment on the proposals for CFA Senior Management Restructure Proposal.

Chairman