

## **ADULTS COMMITTEE: MINUTES**

**Date:** Tuesday 1<sup>st</sup> September 2015

**Time:** 2.00p.m. to 5.05pm.

**Present:** Councillors A Bailey (Vice-Chairwoman), C Boden, P Clapp (substituting for Councillor Ashcroft), S Crawford, D Giles, S Hoy, G Kenney, M Loynes (substituting for Councillor Reynolds), L Nethsingha, M Tew (Chairman), J Scutt (substituting for Councillor Sales), G Wilson and F Yeulett.

**Apologies:** Councillors P Ashcroft, K Reynolds and P Sales

The newly appointed Chairman of the Adults Committee paid tribute to the former Chairwoman of the Committee, Councillor Rylance who passed away recently and pledged to continue her good work. The Chairman expressed his thanks to all those that attended Councillor Rylance's funeral.

### **107. DECLARATIONS OF INTEREST**

There were no declarations of interest.

### **108. MINUTES – 7<sup>TH</sup> JULY 2015 AND ACTION LOG.**

The minutes of the meeting held on 7<sup>th</sup> July 2015 were agreed as a correct record and signed by the Chairman.

The Action Log was noted.

### **109. PETITIONS**

No petitions were received.

### **110. CONTRACT EXEMPTION REPORT FOR THE PROVISION OF ADVOCACY SERVICES AND SERVICES THAT PROMOTE INDEPENDENCE AND WELLBEING FOR OLDER PEOPLE.**

The Committee received a report that proposed to extend the Age UK contract "Services which promote independence and wellbeing for older people in Cambridgeshire" for 13 months until 31<sup>st</sup> December 2016. This was to allow time for the advocacy project to take forward the re-commissioning of all advocacy services across Cambridgeshire and for a single advocacy contract to be developed. The services provided covered advocacy, the Healthy Homes Service, Volunteer Visiting Service, Community Warden Schemes and day services. Officers explained to Members that there was a two-fold reason for the extension to the contract being requested. Firstly

work was taking place to rationalise seven separate advocacy contracts into one contract that met the requirements of the Care Act 2014. Secondly services other than advocacy were being discussed with Uniting Care Partnership which had only recently been established and therefore more time was required for discussions to take place.

During discussion Members:

- Noted that the demand for advocacy services continued to increase and questioned how the service would be improved and whether there would be financial benefits to merging advocacy services to one contract. Officers explained that by reducing the number of contracts it allowed duplication of services to be driven out and that it would be compliant with the requirements of the Care Act 2014. They highlighted that the funding provided by Central Government for the implementation of the Care Act included an allocation for advocacy services and the demand for advocacy services was being closely monitored.
- Expressed concern that the extension to the contract being requested was a further extension to one previously agreed. A Member asked whether there was a timetable that led up to 31<sup>st</sup> December 2016 and requested regular reports to Spokes to monitor progress. Officers confirmed that they would update progress to Spokes.
- Requested that a future meeting of the Committee receive a report regarding the draft service specification of the proposed advocacy services. Officers advised that a report would be produced for the December meeting of the Committee.
- Requested assurance that the report to be produced for the December meeting of the Committee demonstrated how the Advocacy Service would meet the diverse needs of people and questioned whether there would be a reduction in the level of advocacy available. Officers were conscious that there were diverse groups that required advocacy services and would seek assurance from bidders that they were able to cope with the different demands placed upon it. Assurance was given that the statutory requirements for advocacy services set out in the Care Act 2014 would be met however the level of Community Advocacy may be reduced. The provision of Community Advocacy would be addressed in the December report.
- Questioned how inflation was managed within the contract and whether the division of funding had been agreed with Uniting Care Partnership. Members were informed that there had been no specific agreement regarding inflation. Uniting Care Partnership was committed to providing the same amount of money.
- Clarified with officers that advocacy staff were paid employees and not volunteers due to the legislative framework they operated under.
- Sought assurance that the transition from the old contract to the new contract would be seamless. Officers confirmed the transition would be seamless.
- Expressed disappointment about the lack of detail on performance of the provider relating to the previous term of contract, as the information had been requested to be included at Spokes. Members therefore, requested a briefing note be issued to

Members regarding the performance data of the Age UK contract. Officers confirmed that it would be circulated. **ACTION**

- Sought clarification regarding the Handypersons Contract detailed in paragraph 2.2.3 of the report. Officers explained that once an agreement had been reached with an organisation to provide that contract then notice would be served to Age UK on that element of the contract.

It was resolved unanimously:

To approve a contract exemption with respect to Age UK's existing contract to deliver services which promote independence and wellbeing for older people in Cambridgeshire for 13 months from 30<sup>th</sup> November 2015 to 31<sup>st</sup> December 2016.

**111. THE CAMBRIDGESHIRE AND PETERBOROUGH NHS FOUNDATION TRUST 2014/15 ANNUAL REPORT ON THE DELIVERY OF THE COUNCIL'S DELEGATED DUTIES FOR OLDER PEOPLE OVER 18 YEARS WITH MENTAL HEALTH NEEDS.**

The Committee was presented with the Cambridgeshire and Peterborough NHS Foundation Trust's (CPFT) annual report. The report covered the delivery of Mental Health Services under the Section 75 Agreement for the period 2014/15. Officers highlighted that the report covered a period prior to the writing of the Mental Health Strategy. The Committee was informed that the report formed part of the assurance process under the Section 75 Agreement. Officers drew attention to the close partnership working that took place and the integrated way in which the service was delivered.

During discussion of the annual report Members:

- Raised an issue that constituents with mental health issues contacted Councillors and it was not always clear how to respond in those circumstances. Officers confirmed that they would be able to provide a briefing on how to manage such situations. **ACTION.**
- Highlighted that more work needed to be completed with GPs as they could be inconsistent in their approach to patients mental health issues. Officers confirmed that a recent report by the Care Quality Commission reinforced this point and agreed with the importance GP training for consistency of approach to be improved.
- Drew attention to paragraph 2.12 of the annual report, dealing with "parity of esteem" having been a welcome headline and emphasised the difficulties facing Mental Health Services with reduced budgets. Officers explained that the Mental Health budget could not be viewed differently to other budgets within Children, Families and Adults Services, but careful judgements were being made and the scrutiny of existing care packages would be carried out as part of the process of managing demand and spend as set out in the Council's Business Plan

- Noted the improvement in delayed transfers of care but concern was raised over the increase since March 2015 seen in the Finance and Performance report. Officers explained that CPFT had taken responsibility for wider community health services for older people and the increase related to areas that would have previously been reported elsewhere.
- Questioned how the Council was working in partnership with District Councils regarding accommodation and how the Council supported people with mental health issues in employment. It was explained that links continued to be forged with District Councils regarding housing and work was ongoing regarding accommodation and support within CPFT. With regard to supporting employment, work was carried out in supporting people in the journey back to work.
- Commended the money saved last year but questioned whether it would be possible to remain within budget when it was reduced. Officers advised that efficiencies would have to be found wherever possible but warned that it would result in a reduction in the level of support and services available.
- Were interested to see what had been implemented to control care costs when care packages were reviewed and expressed concern over the low numbers of reviews that had been carried out. It was agreed with officers that there needed to be a focus on reviews and the area would be addressed in more detail in the next report.

#### **ACTION**

It was resolved to:

Comment and advise on any area of the report in the context of the commitments agreed under the signed Section 75 Agreement.

## **112. SOCIAL CARE STRATEGY FOR ADULTS WITH MENTAL HEALTH NEEDS**

The Committee was presented the final draft of the Social Care Strategy for Adults with Mental Health Needs. Officers highlighted the focus within the strategy on prevention methods and that it was a strategy about building relationships. The strategy had been well received by members of staff and it was noted that the Health colleagues had also been enthusiastic about it.

Following the presentation of the report Members:

- Questioned when the Committee would receive a monitoring report on the progress of the strategy. Officers advised that a report would be produced for 6 months' time. **ACTION**
- Expressed concern that Social Workers employed to carry out social care tasks reported they were completed too much work that related to Cambridgeshire and Peterborough Foundation Trust (CPFT) functions. Assurance was given that this related to a very specific instance and that resources were deployed flexibly to both Council and CPFT functions to best effect.

- Agreed they would be interested in hearing the views of social workers in the progress report. Members were informed that the feedback received from Social Workers regarding the strategy had been positive and any further feedback would be included in the monitoring report. **ACTION**
- Asked whether “Priority 4” of the strategy was working because some negative feedback had been received from the Carers Board. Officers accepted that improvements were needed not just for Mental Health services but Learning Disability services also.
- Highlighted that carers should have been included as stakeholders during the consultation. Officers confirmed that carers had contributed through “Re-think”, online and the strategy had been presented to the Carers Partnership Board.
- Raised concerns that Social Workers had not integrated within the service as well as had been hoped for. It was explained that integration was moving in the right direction and the importance of this was recognised.
- Concern was raised over suicides and whether there was enough expertise to recognise mental health crisis due to cuts. Officers explained that it was difficult to answer as the vast majority of suicides were not known to Mental Health services or GPs. Members were reassured that there were no current plans to reduce staff or training.

It was resolved:

To approve the final draft of the Strategy following circulation of earlier drafts and amendments as a result of a six week consultation period that concluded on 24<sup>th</sup> July 2015.

### **113. BUSINESS PLANNING FOR CHILDREN, FAMILIES AND ADULTS SERVICES 2016 TO 2020**

The Service Director Strategy and Commissioning for Children, Families and Adults Services (CFA) updated the Committee on the development of business planning proposals for CFA and sought a steer from the Committee regarding the strategic direction for business planning prior to the development of detailed business planning proposals for the next 5 years. Members were reminded of the Business Planning workshop scheduled to take place in October. Officers highlighted the pressures facing the service including Living Wage, Care Act 2014, market pressures and general increases in prices. Officers also focussed on the need to look at preventative measures in order that demand for service was reduced.

During discussion of the report Members:

- Expressed concerns regarding the demographic pressures the Council faced and recommended that robust data about demographic pressures be included in the budget as there would be a point in the future when the pressures could no longer be absorbed and additional funding would be required. Members requested that

the emphasis of paragraph 5.4 of the report be altered and for the wording to be changed to read “demographic pressures have to be recognised.” Officers explained that the challenge of demographic changes thus far had been absorbed but confirmed that the pressures facing the Council would be identified and clear actions to mitigate them where possible demonstrated at the October Business Planning workshop.

- Requested information for the October workshop that highlighted what service reductions to services there would be. Officers confirmed that the draft information would be available at the October workshop.
- Expressed the view that new housing developments should be self-sufficient in terms of Section 106 agreements in order that the costs of new demographic pressures were mitigated. It was confirmed that discussions had taken place with District Councils regarding new developments but it was accepted that for 3-5 years there were additional costs to be absorbed. There was a balance to be struck between the economic benefits of new developments against the additional costs they incurred.
- Questioned how inflation was managed and whether there was concern that advocacy services might not be able to accept the terms of the contract. Officers were confident that advocacy services would accept the proposed inflation element of the contracts. Careful attention was paid to the contract by Officers to ensure that it was viable.
- Requested that a discussion took place regarding Council Tax and that a 5% increase in Council Tax should be considered in order for services to be protected. Officers confirmed that this would normally be presented and agreed to provide forecasts for how a 5% increase in Council Tax would affect budgets at the October seminar.
- Expressed concern over the future of the FACET centre in March and the size of Personal Budgets people could expect to receive in the future. Officers could not speculate on the future of the FACET and could not see how the budget could be balanced without reducing the amount spent on individual care packages.
- Questioned whether the Council was on target for moving individuals to Personal Budgets. Officers informed Members that the number of people electing to receive Direct Payments was different across client groups. Less older people were taking up Direct Payments but they were still being promoted by staff.
- Questioned whether officers were aware of the difficulties Four Seasons Health Care was experiencing. Officers confirmed they were aware and were working on the issue.

It was resolved to:

- a) Comment on the draft strategy and the principles and direction of travel it set for the transformation of Children, Families and Adults Services over the period to 2020.

- b) Comment on the suggested approach to the treatment of demographic pressures within CFA services for the 2016/17 Business Plan.
- c) Comment on the suggested approach to the treatment of inflationary pressures within CFA services for the 2016/17 Business Plan.
- d) Note the suggested next steps for the development of detailed business planning proposals for the 2016/17 Business Plan.

#### **114. PHYSICAL DISABILITY AND SENSORY SERVICES COMMISSIONING STRATEGY 2015-19**

The final draft of the Commissioning Strategy for Physical Disability and Sensory Services was presented to the Committee. The strategy had been previously presented to the Committee in November 2014 and a period of consultation agreed. The document had been amended following feedback received from the consultation. Officers explained that the strategy looked to intervene in a smaller way earlier to prevent the need for a larger intervention later.

During consideration of the report Members:

- Expressed concern that visual loss/impairment was not as high a priority as expected and that the Isle of Ely Society for the Blind was not mentioned. Assurance was given that contacts had been made with the society over many years but they wished to remain small and independent. It was confirmed that events were taking place to promote partnership events and the Isle of Ely Society for the Blind would be taking part.
- Sought clarification regarding the staffing costs of the team. It was confirmed that the majority of the £12million budget was individual care packages.
- Questioned how the Assistive Technology Team was funded. It was explained that it was funded 50/50 between Cambridgeshire County Council (CCC) and the NHS; however the running of the service had now been taken over by CCC. It was recognised that a core service was required that had expertise and that was able to deliver savings.
- Questioned why there were differences in the numbers of people with hearing difficulties between Cambridge and Fenland. It was explained that the numbers in Cambridge would be affected by the number of students and that there could have been historical provision of services in Fenland that might have resulted in more people with hearing difficulties living there.

It was resolved:

To comment on and approve the final draft of the Physical Disability and Sensory Impairment Strategy 2015-19.

## 115. FINANCE AND PERFORMANCE REPORT – JULY 2015

The Committee was provided with the July 2015 Finance and Performance Report. The report responded to comments made by the Committee the last time the report was presented. Officers highlighted the Learning Disabilities Team, which showed favourable changes with the forecast overspend decreased by £288k in the last month. The announcement of the delay of the introduction of the cap in care costs had resulted in a £900k favourable change.

During discussion of the report Members:

- Requested to hear about progress in making the arrangements for funding of Continuing Health Care cases more transparent in relation to paragraph 1.4 of the report. **ACTION**
- Raised concerns that due to the changes to the implementation dates of the cap in care costs as per the requirements of the Care Act 2014 the funding would not remain in place. It was confirmed that the Government had not communicated to the Council whether or not the funding would be clawed back.
- Sought clarification regarding table 1.2 of the report. Officers agreed to clarify this. **ACTION**
- Raised concerns regarding the forecast overspend in the Learning Disability Service, highlighting that it was projected to cost twice as much as the Older People's service.
- Drew attention to the budget tables, and, using table 2.5.3 of the report as an example, raised detailed concerns on the presentation of the figures and sought clarification regarding the budget columns as they had changed from the last Finance and Performance report, when they would have been expected to remain the same. Members had confidence that the numbers reported were correct but felt unable to interrogate the data as it was currently presented. Officers explained that additional expenditure had been added as the contents of the report were developed, which had not been previously included. Officers agreed that the content of the Finance and Performance report would be reviewed and amended to improve transparency and consistency for members.
- Expressed concern that the average unit cost of the Learning Disabilities Team was over £100. Officers reminded Members of the statutory responsibility for meeting individuals assessed needs and that it would be discussed further at the October Business Planning Seminar.
- Welcomed the information provided for delayed transfers of care and noted the seasonal effect on numbers. However, they expressed a lack of confidence in the data for Cambridgeshire and Peterborough Foundation Trust (CPFT) and asked for the figures to be included in future reports. **ACTION**
- Questioned what had affected the delayed discharge figures at the Queen

Elizabeth Hospital. Officers agreed to provide the delayed transfers of care dashboard. **ACTION** (it has been confirmed since the meeting that this is already provided to members)

- Sought assurance on the implications for Service Users regarding Direct Payment claw-backs. Officers explained that Direct Payment claw-backs were carried out when people had not spent all of the money allocated to them, which formed part of the Direct Payment agreement.
- Noted that residential/nursing care placements for people with learning disabilities were the most expensive placements. It was requested for the Business Planning seminar in October whether officers could identify if more people could be moved from residential/nursing homes into the community. Officers explained that it would not be possible to move everyone into the community but they would provide information on those people that were in permanent residential/nursing care at the October seminar.

It was resolved to review and comment on the report.

#### **116. SERVICE COMMITTEE REVIEW OF THE DRAFT 2016-17 CAPITAL PROGRAMME.**

The Committee was presented with an overview of the draft capital programme for 2016 – 17 for the Adult Social Care and Older People and Mental Health Service Directorates.

During discussion of the report Members:

- Noted that the proposed building of a Local Authority managed care home had not been entered on the Capital Programme. Officers advised that it had not been added because agreement had not been given for it to be built. The entry would be made once it was agreed.

It was resolved to:

- a) Note the overview and context provided for the 2016-17 Capital Programme
- b) Comment on the draft proposals for Adult Social Care and Older People and Mental Health Service Directorates 2016-17 Capital Programme and endorse their development

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

The Committee was asked to consider the progress made on key areas of development which would contribute to the Transforming Lives model being implemented and the next steps and future plans for the work to be delivered. Officers set out what had been learned from the innovation sites and highlighted how the Physical Disabilities Team had benefited from working more closely with the Reablement Team. It was noted that 3.1.1 of the report demonstrated how Transforming Lives was being implemented.

Members were informed that the Older People's service was a more complex arrangement and work was needed together with Uniting Care Partnership. Older People's Services were reliant on a pathway through the Council's Contact Centre, which would need to be reviewed to see how it could be improved.

Attention was drawn by officers to paragraph 4.6 of the report that showed "patch analysis" work had begun following a request at the July meeting of the Adults Committee. Further workshops were due to take place in September. Officers recommended that a report should be brought before the Committee in December that further demonstrated the implementation of Transforming Lives.

During discussion of the report Members:

- Noted that the focus so far had been on staff working practices and were interested to see in the next report what Service Users were receiving differently and understand how it had affected the amount spent on care packages. It was explained that the evaluation carried out so far had been on Social Care practice but how Transforming Lives was affecting spending was starting to be captured.
- Questioned what Transforming Lives meant for individuals. Members were informed that case studies had been developed for the care teams and these would be included in the December report. An example was provided of where an Older People's team had worked very differently with a Service User and enabled them to leave a Care Home. Although the approach had saved money it had taken a lot of time as there was a dedicated person working on it for a significant time, but as staff built confidence it would make the process more efficient.
- Questioned whether Transforming Lives was delivering on its objectives. Officers explained that although it was early in the introduction of the Transforming Lives model, the Learning Disabilities Team had a greater understanding of the support that was available in communities and had examples of small reductions in care costs.
- Expressed interest in whether savings were being matched to increase satisfaction in services received and highlighted the increased pressure on the voluntary sector. Officers explained that the Transforming Lives model was not solely about savings and that modelling work was being carried out with the voluntary sector that would mitigate the risks of increased demand.
- Highlighted the importance of lobbying the Government when cuts were unsustainable and people were at risk as a result. Officers reassured Members that the Executive Director of Children's, Families and Adults Services was active in this.

It was resolved to comment on:

- a) The progress and plans in place for implementation across the service areas.
- b) The progress and plans for areas of cross-cutting work that supports the implementation in service areas.

- c) The recommendation that the next progress report and plans for implementation be brought back to the Adults Committee in December 2015.

**118. ADULTS AGENDA PLAN; APPOINTMENTS TO INTERNAL ADVISORY GROUPS AND OUTSIDE BODIES AND TRAINING PLAN**

The agenda plan for the Committee was presented to Members together with the Committee training plan. Members noted the removal of "Use of Grants for Third Sector Organisations as an Alternative to Contracts" from the agenda for the November meeting of the Committee.

Members were also asked to consider an appointment to the Mental Health Governance Board. Councillor Kenney was nominated and appointed to sit on the Board.

Members requested that all Members of the Committee act as substitutes for each other with regard to attendance at Outside Bodies and Internal Advisory Groups. It was resolved to:

- a) Note the agenda plan and considers the need for the reserve date in December to be reinstated for consideration of the budget reports
- b) Appoint one Member and a substitute to the Mental Health Governance Board.
- c) Note the position with regard to the development of the Committee's training plan and consider if any further additions were required.

Chairman