

ADULTS COMMITTEE: MINUTES

Date: Thursday 3rd November 2016

Time: 2.00 p.m. to 5.35 p.m.

Present: Councillors A Bailey (Vice-Chairwoman), C Boden, P Brown, S Crawford, A Dent (Chairman), L Dupre, D Giles, L Harford, R Mandley, M Tew, G Wilson and F Yeulett.

Apologies: Councillors B Ashwood, S Hoy (Councillor P Brown substituting).

The Chairman welcomed Wendi Ogle-Wellborn as Interim Director: Children's Families and Adults. The Chairman announced a change to the order of the agenda; item 12, Health and Care System Sustainability and Transformation Programme Memorandum of Understanding: Local Authority Appendix would move to agenda item 9.

205. DECLARATIONS OF INTEREST

There were no declarations of interest.

206. MINUTES – 13th OCTOBER 2016 AND ACTION LOG.

The minutes of the meeting held on 13th October 2016 were agreed as a correct record and signed by the Chairman.

The Action Log was noted. Item 115 would be removed following its completion and officers agreed to provide Members an update regarding item 168.

207. PETITIONS

No petitions were received.

208. FINANCE AND PERFORMANCE REPORT – SEPTEMBER 2016

The Committee received the September 2016 iteration of the Finance and Performance report. At the end of September Children, Families and Adults (CFA) forecast an overspend of £2,338k. This was an improvement on the previous month when the forecast overspend was £2,521k. Officers highlighted the key changes since the August report including, Older People's locality teams reporting improved forecasts of £605k and Mental Health forecasts reporting an improvement of £448k. More minor influences on the forecast overspend included a new pressure on funded nursing care and an increasing underspend on carers support. Members note that there were approximately 70 fewer older people in permanent residential care which was assisting the financial position.

During discussion Members:

- Requested that the wording of the final sentence of paragraph 2.3 of the report be reviewed.
- Highlighted the continued, worsening overspend within the Learning Disability Partnership (LDP) and questioned whether the overspend would remain. Officers explained that there had been a significant downward revision of savings targets for the coming financial year and confirmed that resources had been focussed on completing care package reviews. Officers were confident that the overspend could be reduced and Members noted that further details on how it would be managed would be presented to the Committee at its December meeting. The Interim Executive Director: Children, Families and Adults stated confidence in being able to reduce the directorate wide overspend of £2.3M.
- Drew attention to invoices that totalled £140k that had been presented having not been accrued for. Officers explained that the invoices related to two high cost clients that had not been accrued for properly following the transition from a manual to an automated commitment system.
- Expressed concern regarding the proportion of adults with learning disabilities in paid employment as there were a significant number of individuals that would benefit from employment and would benefit the Council also. Members questioned whether the Council had a strategy and how many employees of the Council had learning disabilities. Officers explained that the measure contained within the report related to people that had services provided by the Council and only a very small minority would be able to seek employment. Whilst the current performance was below target Members noted that the information was not as accurate as it could be due to it being dependent on the review/assessment performance of the LDP. With regard to the wider context of enabling individuals with learning difficulties to seek employment, officers confirmed that the Council did not have a strategy. Members noted that the topic had been placed on the Spokes agenda and a report with an Action Plan would be presented to the Committee in early 2017. **(ACTION)**
- Confirmed that the forecast outturn included an expectation regarding the recovery of money from the NHS.
- Highlighted an amendment to be made to the grant funding line of the report. **(ACTION)**
- Expressed concern regarding the number of LDP reviews that had taken place and questioned how informed decisions could be made regarding savings targets and business planning with so many outstanding. Members were informed that a team had been created and tasked with completing reviews. The overspend within the LDP had remained largely static relative to the overall size of the budget for the last three months. The Business Planning report that would be presented at the December meeting of the Committee would contain a number of measures that would address the overspend.

- Drew attention to the data related to Delayed Transfers of Care (DTOCs) noting that the performance of the Council was better than the national average and had improved by 40%, emphasising that contrary to media reports not all DTOCs could be attributed to delays within Adult Social Care.
- Drew attention to page 71 of the report, in particular to the Building Community Resilience Programme and questioned when Members' were likely to receive information to provide to Parish Councils. Officers confirmed that this would be after Christmas when proposals had gone through the Committee process. **(ACTION)**

It was resolved to review and comment on the report.

209. 'COMMISSIONING FOR BETTER OUTCOMES' PEER REVIEW FINDINGS AND ACTION PLAN

Members received the findings of the Adult Social Care 'Commissioning for Better Outcomes' Peer Review. The report contained a summary of the findings of the review, the planned response to the findings and the next steps for reporting and sharing the findings more widely.

During the course of discussion Members:

- Drew attention to paragraph 25 of the Peer Review regarding the quality of the training offered by the Council and the opportunity it presented for the Council to charge for training. Officers confirmed that it would be added to the Action Plan. **ACTION**
- Requested that paragraph 28 be included in the Action Plan regarding improving communication across the Council as well as with health partners.
- Noted the collaboration with the NHS featured in the Action Plan on page 108 of the report and emphasised the need for simple specific outcomes. There was an opportunity to progress greater collaboration with the NHS and outcomes based commissioning through the negotiation of the new home care contract.
- Requested that feedback from service users and carers be included with the evaluation of Transforming Lives. **(ACTION)**
- Drew attention to the comments regarding the governance arrangements of the Council and questioned whether additional scrutiny was required given the size of the budget and time constraints. However, Members involved in the Peer Review commented that there was a general lack of understanding regarding the governance arrangements of the Council.
- Questioned whether the level of Member involvement was strong enough and questioned the level of progress made regarding paragraph 3.2 of the report. Officers informed Members that the relationship with the Clinical Commissioning Group (CCG) was stronger and was demonstrated in the sustainable transformation programme enabling organisations to work as a system in which Members were involved.

- Noted that Transforming Lives provided the overarching strategy through which all other strategies would progress.
- Expressed concern regarding audits carried out on care files that found 50% of those audited required improvement. Officers explained that a quality assurance process had recently been developed and it was not therefore unexpected that so many required improvement. Each worker would be provided an action plan regarding improving the quality of their case recording.
- Noted a meeting was scheduled to take place between the Chairman, Vice-Chairwoman and officers at which Member involvement would be discussed. It would also be added to the Spokes agenda **(ACTION)**
- Emphasised the importance of the role played by small providers and charities that are struggling following reductions in local authority funding. The organisations were crucial to the successful delivery and implementation of Transforming Lives. Officers informed Members that a register of providers was being established that would ensure equality of treatment of all providers.

It was resolved to:

- a) Note the findings of the Peer Review
- b) Agree the contents of the Action Plan

210. TOTAL TRANSPORT – CHANGING DAY CENTRE SESSION TIMES

Members received a report that set out the issues that would be presented to the General Purposes Committee (GPC) on 29 November 2016. The recommendations that would be developed for the report would reflect the feedback received from Adults and Children and Young People's Committee. Members noted the public consultation that received fewer responses than expected. Transport was repeatedly raised as a barrier to accessing services and the role transport could play in supporting preventative services.

During the course of discussion Members:

- Noted paragraph 2.17 of the report and questioned what additional cost food would incur for the Council. Officers agreed to confirm the costs and provide the information to Members. **(ACTION)**
- Noted the contrasting responses of Larkfield and Bedford House, highlighting that the transport should meet the demand and meeting the needs of individuals rather than a "one size fits all approach". Officers highlighted the Flexible Minibus Service as an enabler for residents and informed Members that more time was required to establish how it would respond to the needs of residents.

- Questioned whether there were individuals that would be able to access services more easily if the hours were changed.
- Noted that work was ongoing regarding Day Centre flexibility, the plans for which would be shared with Members.
- Members noted that Bedford Houses positive response to the proposed change in hours.
- Noted that Total Transport solutions were complex and unique to each area, requiring a large amount of resource to work up.

It was resolved:

- a) to comment on the proposed approach of not changing day centre times due to the significant impact this would have, with only a limited potential saving
- b) to note the alternative approach of considering the Flexible Minibus Service as an enabler for residents, helping them maintain their independence and access community-based solutions.

211. DISABLED FACILITIES GRANTS REVIEW.

The Committee received an update on the review of Disabled Facilities Grants (DFGs). The aim of the review was to take a more strategic approach to housing adaptations, that encompassed the current service model and the capital and revenue funds contributed to the DFG process by a range of partners. The review group comprised of representatives from each District Council, the County Council the Clinical Commissioning Group (CCG) and Foundations (the national body for Home Improvement Agencies).

During discussion Members:

- Welcomed the fact that the proposal had been worked up in collaboration with District Council partners.
- Welcomed additional funding that would ease pressures and improve the service noting that at East Cambridgeshire District Council the issues experienced were resulting from a lack of funding rather than inefficiency.
- Noted that the current system was very different for children and adults. Long standing relationships between Occupational Therapists and children they support led to over-prioritisation of cases and the revised pathway was designed to address equity issues.
- Noted that a £150k saving had been taken out of the revenue budget for 2017/18 together with a saving for the CCG and it was the intention to remove all revenue at

the end of the year 2017/18. It was noted that there had been up front investment in the Early Help team, which was a more appropriate point of intervention. As the pathway developed it was envisaged that the Early Help team would expand its remit and revenue would be invested to support the expansion.

- Questioned why Peterborough City Council were able to implement DFGs more quickly than other areas. Officers explained that Peterborough was a unitary authority which made the process more efficient. Peterborough did however provide a good example of how DFGs could be delivered differently and were included in the review.
- Noted the poor performance of Huntingdonshire District Council due to overly bureaucratic processes used by the shared service HIA with City and South Cambs. In response to a question the Committee was informed that any capital underspend that occurred would be retained by the Local Authority, but there was a drive to spend the money and generate fees.
- Noted that management information that profiled the spending of DFG funding and requested that they be shared with Members. **(ACTION)**
- Noted that the Joint Housing Adaptations Agreement replaced the existing grant top-up policy and questioned how top-ups would be allocated. Officers explained that the top-ups as a proportion of the total budget were relatively small, £50k - £100k out of a total of £3.6m. The district councils had agreed to use an element of the increased capital funding to administer the top up grants in line with criteria set by the County Council. This was being formalised in the Agreement, which was in the process of being finalised by each organisation.
- Questioned how Occupational Therapists (OT) could be perceived as being too close to families. Officers explained that in many cases OTs had worked with families for many years and had a strong bond with the family. There was also a degree of traditional practice where houses were developed or modified when a disabled child reached a certain age. However, it was suggested that there were other options that could be considered that might be more appropriate.
- Expressed concern regarding the performance of Huntingdonshire District Council, South Cambridgeshire District Council and Cambridge City Council as adaptations were vital to vulnerable people being able to remain in their own home. Officers explained that housing adaptations formed part of the Council's preventative strategy and delays resulted in cost to other parts of the health and social care system. Officers from all councils involved in the review were committed to the changes required and welcomed the support of Members during the implementation of the changes.
- Questioned how involved Luminus were in the DFG process as a housing provider. Officers explained that under the arrangements negotiated when the housing stock was transferred to Luminus, individuals would apply for a DFG following the normal process. Luminus would provide adaptations up to a value of around £400, anything beyond that would require a DFG application. This was a much less generous approach than other Housing Associations in Cambridgeshire and

impacts on the Huntingdonshire waiting list.

- Expressed concern regarding the disparity regarding the levels of service provided across the county and noted the DFG review represented a root and branch analysis that led to the recommendations before the Committee. Access to level access showers would be fast tracked.
- Noted that DFGs formed part of the Better Care Fund (BCF) and therefore subject to Member scrutiny. Officers agreed to provide regular updates on dealing with the performance disparities on DFGs between district council areas to Spokes.
(ACTION)
- Noted that DFGs would be subject to performance targets and continuous performance monitoring through scrutiny of the Better Care Fund.

It was resolved:

- a) To note the update on the DFG Review
- b) Approve the Joint Housing Adaptations Agreement which replaces the County Council's existing Disabled Facilities Grant Top-Up Policy.

212. HEALTH AND CARE SYSTEM SUSTAINABILITY AND TRANSFORMATION PROGRAMME MEMORANDUM OF UNDERSTANDING: LOCAL AUTHORITY APPENDIX.

Members were presented the Health and Care System Sustainability Memorandum of Understanding. Officers informed Members that the Sustainability and Transformation Plan (STP) was expected to be published at the end of November or beginning of December following its submission to NHS England. Development of the STP had been led by the Health and Care Executive of which the Interim Executive Director: Children, Families and Adults and the Director of Public Health attended as non-voting members.

The memorandum of understanding was designed to facilitate a move to a system wide approach. The final draft set out the ambitions of Chief Executives and represented a sea change in ways of working. The memo was a tool through which understanding the principles and behaviours could be increased. The aspiration was to be able to quote the memorandum and use for a joint response to issues.

During discussion Members:

- Welcomed the STG as an example of co-operation between the Council and NHS and questioned whether it covered the entire Clinical Commissioning Group (CCG) area. Officers confirmed that work had only been undertaken across Peterborough City Council and Cambridgeshire County Council areas and confirmed that there would be involvement in the future from Northamptonshire and Hertfordshire County Councils at some point.

- Emphasised the importance of transformational changes in the delivery of long term savings.
- Questioned whether commitment 5 of the memorandum would result in less accountability for individual components of the health system. Officers explained that accountability would remain but in a different way. In order that greater co-operation was achieved it was necessary to do things differently.
- Noted the challenges faced by staff spending time on transactional issues when their time would be better spent undertaking transformational work.
- Drew attention to commitment 4 that required completion **(ACTION)**
- Emphasised the importance of localism within the memorandum.
- Requested that the language in contained in the third paragraph of the draft appendix be softened to reflect working together and the word 'do' be inserted where it was missing from the second sentence. **(ACTION)**
- Requested that the wording be changed regarding the sixth behaviour listed on page 2 of the appendix be amended as decisions may need to be reviewed once made, and it was more about carrying decisions through. **(ACTION)**
- Noted the DTOC report issued to all Members of the Committee and that it had been added to the Spokes agenda for discussion.
- Expressed concern regarding Member accountability to their electorate and requested that an addition be made that noted the role of Members to their constituents. **(ACTION)**

It was resolved to:

- a) note the Cambridgeshire and Peterborough Sustainability Transformation Programme Memorandum of Understanding for NHS organisations in Cambridgeshire and Peterborough
- b) to delegate the approval of appendix 1: 'Local Authorities and the Cambridgeshire and Peterborough Sustainability and Transformation Plan' to the Chairman and Vice-Chairwoman following amendment prior to sign off by the Health and Wellbeing Board.

213. ADULTS COMMITTEE AGENDA PLAN

It was resolved to note the agenda plan and the oral update provided at the meeting.

Homecare sufficiency – moved from December to January.

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

Members noted the appointment of Councillor Dent as Chairman of the Adults Committee to the Adults Safeguarding Board.

215. NHS CONTINUING HEALTH CARE

Members received a report that provided an update as to the current position regarding NHS Continuing Health Care (CHC).

Due to the confidential appendix and the intention to discuss the appendix from the outset, Members resolved to exclude the press and public from the meeting on the grounds that the agenda contains exempt information under paragraph 5 of Part 1 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 in respect of which a claim to legal privilege could be maintained in legal proceedings.

It was resolved:

To support the actions being taken by the Service Lead for Continuing Health Care, with decisions to be taken following a defined process with Member involvement.

Chairman