

ADULTS COMMITTEE: MINUTES

Date: Thursday 14 January 2021

Time: 2.00 p.m. to 3.07 p.m.

Present: Councillors A Bailey (Chairwoman), D Ambrose-Smith (Vice-Chairman), A Costello, S Crawford, J French, M Goldsack, N Harrison, M Howell, L Jones and G Wilson

Apologies: Councillor D Wells

334. Apologies for Absence and Declarations of Interest

Apologies received from Councillor D Wells – Councillor J French substituting.

335. Minutes – 10 December 2020

The minutes of the meeting held on 10 December 2020 were unanimously agreed as a correct record and would be signed by the Chairwoman when next possible.

336. Action log

The action log was noted.

337. Petitions and Public Questions

There were no petitions or public questions.

338. Development of Asset-Based Area (ABA) Approach to Commissioning and Delivery

The Committee received a report on the proposed implementation of the Asset-Based Area (ABA) approach. This approach required significant system transformation of existing commissioning and delivery models. The relevant resource would be requested from the General Purposes Committee to enable an early adopter site to be set up, and to pump prime the development and refinement of the new approach.

Given the rapid growth in the older population in Cambridgeshire and Peterborough over the next 15 years, there will be a significant increase in the number of elderly residents potentially requiring care and support. It was vital to have models of care, commissioning and delivery that provided sustainable

care options affordable to both residents and the local authority. The proposed approach builds upon the success of the Community Hubs developed in response to COVID-19 and the Neighbourhood Cares pilot, ensuring people can remain living at home happily and independent for longer. The approach seeks to empower communities by developing grass roots informal support and mutual aid, delivering services that are more efficient and more localised, and making best use of existing resources by working closely with partners and communities.

The first phase of the Asset-Based Area approach would be to establish an early adopter site, and it was proposed that this would be East Cambridgeshire. Transformation funding would be requested from General Purposes Committee to enable the early adopter site to be set up and implemented, and also resource an independent evaluation of the Asset-Based Area approach. Following evaluation, the intention was to roll out the Asset-Based Area approach across the county.

Arising from the report, individual Members:

- welcomed the focus on the Asset-Based Area approach. Whilst welcoming the independent evaluation focused on outcomes, the Member asked whether this would be time limited, noting the £70K budget allocated for this purpose;
- asked what evaluation had already happened which could inform this process, particularly in relation to Community Hubs. Responding, the Chair acknowledged that it had been difficult to evaluate and capture some of the softer outcomes of the Neighbourhood Cares pilot, beyond monetary outcomes, but agreed that the learning from that pilot could be built on. Officers agreed that these points would be factored in when the evaluation was developed, and added that the evaluation needed to consider not just individual outcomes but also economies of scale, i.e. whether commissioning at a very local level brought benefits to communities, and recognising those services and needs which needed to be delivered on a larger scale;
- cautioned against the potential risks from local structures “taking on a life of their own”, as people often had strong views on how structures should be organised, and as a result, the predicted savings may not necessarily be forthcoming. It was suggested that close attention needed to be given to the degree of autonomy involved. Officers agreed that there was a potential tension, and Asset-Based Area working should focus on bringing all key partners and providers together to identify all the existing resources and assets, and to develop a single shared understanding of need and the direction of travel and pattern of provision required, so that all involved were working together towards that shared vision;

- supported the comments made about independent evaluation, pointing out that it was not just about cost avoidance but also about adding value for service users. The Member queried the lack of specific KPIs. It was noted that the Business Case did provide high level indicators in terms of key objectives and outcomes, and officers advised that it was not possible to identify specific indicators in terms of savings, demand management, etc, until the first Asset-Based Area approach had been rolled out;
- asked why the roll out was taking place in East Cambridgeshire, and not another District? Officers advised that East Cambridgeshire had been chosen because it provided a mixture of rural and urban environments, which would require different models of commissioning. Additionally, it built on the Neighbourhood Cares legacy, having well-established community and voluntary sector networks – replicating this in other areas would add another 6-12 months to the roll out process. East Cambridgeshire also had the ideal volumes for an early adopter site, there being around 500 existing local authority adult clients in this area. The Member acknowledged the rationale for selecting East Cambridgeshire, but observed that if it was implemented in other Districts following the East Cambridgeshire early adopter roll out, it would require longer;
- asked about the role of Community Hubs as a locus where people could go and discuss their needs and issues, specifically libraries. Officers advised that Community Hubs were important as there was real potential for them to be a focus for engaging with the communities they serve. The Chairwoman commented that during the Neighbourhood Cares pilot, she had visited Soham Library and St Ives community building frequently, and it was really important to have those access points, with rooms available for voluntary groups to meet, and this was an important part of the success of Neighbourhood Cares;
- commented that evaluation should not just be limited to outcomes, but also *process* evaluation, i.e. the issues such as leadership, trust and delivery which were bound up in the process of rolling out and implementing the Asset-Based Area approach, so it could be established those elements that worked well and those that did not.

It was resolved unanimously to:

note and endorse the proposed Area-Based Area concept and approve presentation of the business case to General Purposes Committee in January 2021

339. Adult Social Care – Directors Report

The Committee considered an update on Adult Social Care across commissioning and operational functions, and information on the current work of the Service. It was noted that the report had been prepared for the publication of the Committee agenda, so was slightly out of date in the context of the rapidly moving situation with respect to the COVID-19 pandemic.

The report reflected the Adult Social Care position in terms of financial pressures and increase in costs which had mainly arisen from Covid-19, highlighting that some of these costs would not be covered by national funds for COVID-19. Whilst there had been considerable guidance, there were still a number of unknowns. The second round of Infection Control Fund had been received, and the focus was on supporting Care Homes, including testing and vaccinations. The roll out of vaccination of Care Home staff was underway, and GPs were now starting to vaccinate Care Home residents. A lot of advice and support had been provided around visiting at Christmas.

Other points raised included:

- Officers had been working closely with the Clinical Commissioning Group (CCG) to review and identify capacity to support designated setting accommodation for those being discharged from hospital back to a care home, with a COVID-19 positive test;
- The local authority had asked Healthwatch to engage with people who had been discharged from local hospitals during the first phase of COVID-19. Healthwatch undertook a telephone interview with 35 patients, discharged from Addenbrooke's, and Hinchingbrooke and Peterborough City Hospitals. The issues highlighted would be used to plan services going forward;
- Providing Day Services continued to be a challenge, and Day Services were currently operating at 60% capacity due to social distancing;
- Reablement services were working very well, and demonstrating the benefits of investment. The Long Term team was trying to keep up with both their reviews and assessment work.

Officers concluded that all services and partners were working well together, and that the key priority was to keep the flow out of the acute hospitals. New capacity was also being commissioned to support this flow, especially with regard to designated setting accommodation for those who were COVID-19 positive and could not yet return home until they have completed their period of isolation. This was a difficult issue as many care homes are experiencing outbreaks and trying to reduce the risks of spread of infection. Home care providers had also helped facilitate additional capacity, supporting people in the community and also those being discharged from Acute settings.

The Chairwoman thanked officers, acknowledging that it was difficult for them to find the time in the current environment to write these reports, but it was invaluable to put on record what was happening throughout this period, so the public could reference this information at any time. She hoped that the vaccination roll out would signal an improvement, and was pleased to note that many vulnerable people had already been vaccinated. Other Members echoed these comments.

Arising from the report:

- A Member queried issues around the decline in the number of long term packages. Officers advised that this reflected an ongoing national trend, resulting partly from local authorities' focus on early help, promoting independence, use of technology which had resulted in a decline in the number of long term packages required. It was also noted that there had been less demand due to individuals' concerns over COVID-19, i.e. preferring to be supported by family or friends, although those that were now coming through were typically quite complex. When the COVID-19 restrictions were relaxed, a greater volume of cases was likely;
- A Member noted that the COVID-19 vaccine was beginning to be rolled out in Wisbech, but asked when other towns and communities would receive the vaccine. Officers confirmed that groups of GPs in Wisbech and East Cambridgeshire had been some of the first wave to roll out the vaccine, but other Primary Care Networks were coming on stream now, and there would be a significant increase in the numbers being vaccinated over the next few weeks;
- A number of Members praised officers across the Council, and within Adult Social Care specifically, for their continued hard work in difficult times;
- A Member noted the statement in the report that *"At the end of October, Adult Services are forecast to be £9.7m overspent (5.4%), most of which is related to COVID-19, and we expect increased costs once NHS COVID-19 funding is discontinued"*. He queried whether there was any indication of funding pressures for 2021/22. Officers confirmed that funding for the pandemic had been provided by NHS England through the CCG, and that funding was both ringfenced and time fenced. At some point that funding would be discontinued, but there would still be individuals receiving care, and the Council would need to finance this. It was currently unclear whether funding would be continued after March 2021, and much would depend on the impact of the vaccine and the situation at acute hospitals;
- A Member queried the change in the number of Safeguarding referrals, specifically the increasing numbers, and proportion of complex cases. Officers explained that there had been a significant reduction in the number of Safeguarding referrals in the first lockdown from health professionals and social care professionals, but those referrals had now increased. Many safeguarding issues were often resolved through simple investigations;
- A Member queried the variance in Community Reablement referrals from November 2019 to November 2020, noting an increasing number of referrals in the second half of that period. Officers confirmed that cases coming through were increasingly complex, and this could result from individuals not accessing services and referrals being delayed due to the first lockdown, meaning that those individuals now had a higher level of need. It was suggested that there could be more detailed monitoring of this

situation, providing a break down in terms of user groups. It was agreed that this analysis would be circulated to the Committee. **Action required;**

- A Member asked if there was any evidence that there were differences in the rollout rate of vaccinations between large and small care homes, as evidenced in some areas of the country. Officers advised that they were unaware of any cases in Cambridgeshire where the size of care homes had been a barrier to roll out, and GPs were very keen to roll out vaccinations in care homes. It was noted that coordination was key to the roll out of the vaccine. The messages from the CCG with regard to vaccines was that (i) individuals should wait to be contacted by their GP, i.e. not to telephone their GP to enquire about the vaccine; (ii) individuals should not turn up too early for their vaccine appointments.

It was resolved unanimously to:

- a) Note the information contained in this update report.

340. Adult Social Care Transport

The Committee received a report on the refreshed Adult Social Care Transport Policy. Members noted the related Business Planning Savings proposal that had been approved in December 2020, and the associated Transformation project to drive further improvements, which would start in 2021.

A Transport Project Group had been established which was looking to analyse and rationalise current use of transport, and the demand for transport, to realise efficiencies. The starting point of this work was whether the existing policy was fit for purpose, and feedback from practitioners implementing the policy was that it was not. The policy had been reviewed against other local authorities' policies, and whilst the criteria and decision making framework were not at fault, some of the complexity had been reduced to make it clearer and more concise, with clear links to the Care Act legislation. It was confirmed that the policy covered all adult client groups i.e. those aged 18+, but excluding education transport.

Arising from the report:

- A Member asked if the pandemic had impacted on Adult Social Care transport. Officers confirmed that there had been a significant impact, and whilst there was less demand for transport, observing social distancing in vehicles was key, and this was being monitored regularly;
- A Member queried the "note on reasonableness" with regard to assessors, and asked how reasonableness in this context was defined, as it was a subjective term, and whether it would be possible to define this more clearly to assist assessors. Officers agreed that reasonableness was

potentially a subjective term, but that it would be informed by the individual's situation at that specific point in time, taking into consideration family and other factors;

- A Member commented that she would have expected to see the policy reviewed following the transformation bid, and noted that the report also referred to reviewing the policy again following the transformation bid. Officers explained that they had reviewed the policy to determine whether it was fit for purpose, as it would be undesirable to compound any problems as a result of practitioners not understanding the policy. The revised document presented was effectively a quick refresh, and it would need to be updated again if the transformation bid resulted in changes. It was noted that the focus was on dealing with inherent inefficiencies through redefining and optimising routes, which would drive savings, rather than reviewing entitlement;
- One Member asked whether the policy was being reviewed from an environmental perspective, i.e. carbon reduction, which should be a key consideration whenever any of the Council's policies were reviewed. Officers confirmed that from an environmental perspective, the optimisation of routes would result in fewer routes, so there would be a beneficial environmental impact.

It was resolved unanimously to:

- a) Note a refresh of the Adult Social Care Transport Policy;
- b) Acknowledge the links to the Business Planning Savings proposal already approved in December 2020 and the associated Transformation project to drive further improvements that will start in 2021;
- c) Approve the recommendation to review the policy again once the Transformation project is complete to ensure the policy still promotes the best possible outcomes.

341. Adults Committee Agenda Plan

In discussing the agenda plan it was noted that the Annual Self Assessment process was likely to be postponed which would require the March agenda item to be moved later in the year.

The agenda plan was noted.