

Adult Social Services Overview and Scrutiny Panel

Minutes of the Meeting held on 11 May 2010

Present:

Ms D Irving (Chairman)

Mr D Callaby	Mr J Joyce
Michael Chenery of Horsbrugh	Mr S Little
Mr T Garrod	Mr J Mooney
Mr P Hardy	Mr N Shaw
Mr D Harrison	Mr A J Wright

Substitute Member:

Mr J Shrimplin for Mr M Kiddle-Morris

Also Present:

Mr D Harwood, Non-Voting Cabinet Member Mr B Long, Non-Voting Deputy Cabinet Member

Apologies for Absence:

Apologies for absence were received from Miss C Casimir, Mrs M Chapman-Allen, Mr M Kiddle-Morris, Ms J Mickleburgh, Mr J Perry-Warnes and Mrs A Thomas.

Officers/Others Present:

Mary Ledgard, Norfolk LINk Harold Bodmer, Director of Community Services James Bullion, Assistant Director of Community Services – Prevention Janice Dane, Finance Business Partner, Community Services Catherine Underwood, Assistant Director of Community Services, Commissioning and Service Transformation Mike Gleeson, Head of Democratic Support, Community Services Colin Sewell, Head of Policy Performance and Quality, Community Services Steve Holland, Programme Director, Strategic Model of Care, Corporate Resources Terry Cotton, Quality Assurance Officer, Domiciliary Care, Community Services Kathy Bonney, Senior HR Business Partner, Community Services

1 Minutes

The Minutes of the previous meeting held on 2 March 2010 were confirmed by the Panel and signed by the Chairman.

2 Chairman's Comments – Member Development Day on 28 April 2010 – Presentation on the Role of Adult Social Care within the Community Services Department

The Chairman placed on record her thanks to those Members and officers who had participated in the Member training session on the role of adult social care within the new Community Services Department that took place at County Hall on 28 April 2010. It was agreed that copies of the video used in the presentation should be made available to Panel Members. It was also noted that a further Member training session would be held in due course.

3 Declarations of Interest

Ms D Irving declared a personal interest as a volunteer for the Norfolk and Waveney Mental Health NHS Foundation Trust.

Mr A Wright declared a personal interest as a Member of the King's Lynn and West Norfolk Mental Health Forum.

Michael Chenery of Horsbrugh declared a personal interest because he had a substantive contract with the Norfolk and Waveney Mental Health NHS Foundation Trust.

Mr S Little declared a personal interest as a Norwich City Council Member of the Norwich Access Group for the Disabled.

4 Items of Urgent Business

There were no items of urgent business.

5 Public Questions

There were no public questions.

6 Local Member Issues/Member Questions

There were no local Member issues/Member questions.

7 Cabinet Member Feedback

- (a) Delivering the Strategic Model of Care (Care Homes) Agenda.
- (b) Report to Request the Continuation of the Integrated Community Teams of the Norfolk Learning Difficulties Service and the Assessment and Treatment Service Provided by Hertfordshire Mental Health Foundation Trust.

(c) Delivering the Strategic Model of Care (Care Homes) Agenda – Report from Cabinet Scrutiny Committee.

The annexed report by the Cabinet Member was received and noted.

Members noted that the Cabinet had renewed the current contract for assessment and treatment services with Hertfordshire Mental Health Foundation Trust as an exception to standing orders. This issue had previously been considered by the Panel at the time that the original contract was drawn up.

ITEMS FOR SCRUTINY

8 Delivering the Strategic Model of Care Agenda

The annexed report by the Director of Community Services was received.

The Adult Social Services Panel considered the report and discussed both the development of the business case and the Member involvement in the Strategic Model of Care Project. It noted that the Cabinet Member, Mr David Harwood, was a Member of the Sponsor Group for this project, and that a new Cross-Party Board would be set up to develop and take the strategy forwards.

The Panel noted the following key points:

- If a viable business model and plan could be developed for a new care company, it would have six directors including the Director of Community Services, an Assistant Director of NCC Community Services and a Senior Clientside Officer. In this way there would be strong links between the new company, within the NORSE Group, and the County Council. If an alternative delivery partner was used then the links with the County Council would not be as strong.
- The new company would be able to take on the expertise of staff currently employed by the County Council who would transfer under TUPE provisions.
- The legal, financial and procurement elements of setting up a new company, including what it could and could not do in terms of generating income streams for the County Council, needed to be clearly defined.
- The articles of association and governance arrangements for the new company had yet to be completed.
- The company would be subject to inspection by the Care Quality Commission.
- The implications of Local Government Review for the delivery of the Strategic Model of Care agenda in the Norwich area had yet to be fully considered.
- Members asked to be given further details about how the weightings of each of the options within the evaluation model led to the scores set out in paragraph 3.5 of the report.
- It was pointed out that the views of older people had been carefully considered in

October 2008 at the time when the Cabinet approved the Strategic Model of Care – Care Homes. At that time it had been noted that older people wanted more choice and preferred housing with care schemes. The current proposals to help deliver the Strategic Model of Care agenda took account of the views expressed by older people at that time.

 The timetable for the delivery of the project, included seeking Cabinet approval in June 2010, to proceed with the development of a detailed business plan to test the viability of the model and the constitutional arrangements for the new company. The subject would then be brought back to the new Panel on 20 July 2010, after which approval for securing the new arrangements would be sought at Cabinet on 9 August 2010.

The Panel noted and endorsed the following:

- (a) The progress made in delivering proposals to help deliver the Strategic Model of Care agenda and provide a lasting legacy of high quality "accommodation with care" to meet growing and changing demand.
- (b) The process made to evaluate and identify a preferred option to achieve the Strategic Model of Care outcomes and the process proposed to test its viability.
- (c) The proposed governance arrangements, including the role of elected Members.

9 First Annual Report on Quality Assessments of Homecare Services

The annexed report by the Director of Community Services was received, together with a map that showed Homecare: Block Contract Areas 2009, that was laid on the table.

The Panel received the first annual report on quality assessments of Homecare Services that showed there was overwhelming positive feedback from service users in respect of the calibre and commitment of homecare workers.

During the course of discussion, the following key points were made:

- The great majority of service users felt that they were treated with respect and dignity and commented on the difference that homecare made to their quality of life.
- When service users did express concern this related mainly to issues about the continuity of care workers and needing to be notified if care workers were running late.
- The ever increasing demand for Homecare Services meant that there was becoming less time available for homecare staff to spend with service users.
- There were national concerns about poor pay and conditions of service for homecare staff and about personal care assistants employed by service users not requiring CRB checks.

• The quality assessment of homecare services involved the random selection of twenty service user files and a review by way of visits and interviews with these service users in their own homes and interviews with their care workers.

The Panel noted that the Quality and Home Care Scrutiny Working Group would be involved in the second year of assessments and participate in some Quality Assessments. The Working Group would be expected to provide regular updates for the new Panel.

10 Forward Work Programme – Scrutiny

The annexed report by the Director of Community Services was received.

The Panel received a report that summarised the scrutiny work programme and gave an update on progress.

It was noted that the delivery of the Strategic Model of Care agenda should henceforth be considered by the Panel as a scrutiny item.

OVERVIEW ITEMS

11 Integrated Performance and Finance Monitoring Report for 2009/10

The annexed report by the Director of Community Services was received.

The Panel received a report that provided current performance and financial monitoring information for 2009/2010. As at the end of period 12 (March) the forecast revenue outturn position for the financial year 2009-10 was a \pounds +2.985m overspend. It was noted that the final year-end (or outturn) position for revenue and capital would be reported to the July 2010 meeting of the Community Services Overview and Scrutiny Panel.

It was pointed out that Norfolk would be entering into what the Care Quality Commission (CQC) termed "rigorous assessment" in three performance areas (improved quality of life, increased choice and control and economic well-being) where Norfolk's Performance Board attempted to achieve an "excellent" performance rating.

12 Risk Management within Adult Social Care

The annexed report by the Director of Community Services was received and noted.

The Panel received and noted a report on the approach being taken to manage risk within that part of Community Services formerly known as Adult Social Services.

During discussion, Members said that should a new company within the NORSE Group of companies be set up for the delivery of the Strategic Model of Care, then the risks facing Community Services, and the controls in place to manage those risks, should be reviewed and updated at Member level on a regular basis.

It was noted that three risks within the Department identified in the report were not on target due to a lack of budget and demographic changes rather than insufficient management. It was further noted that there had been improvement in the risk

management self-assessment score between 2007 and 2009 which reflected the work undertaken and the Department's commitment to effective risk management.

13 Developing Joint Commissioning with the Health Service

The annexed report by the Director of Community Services was received.

The Panel received a report on the approach being undertaken with NHS Norfolk Primary Care Trust to develop a shared approach to commissioning of health and social care services.

The Panel were informed that a third joint post was proposed by the partners to provide integrated leadership for mental health and that this would remain within existing resources. It was noted that while informal arrangements with NHS Norfolk had been in place for some time, the formalisation of integrated management would provide a robust structure of joint accountability.

Members endorsed the proposal set out in the report (subject to the provision of a third joint post) to develop joint accountability arrangements with NHS Norfolk for locality and strategic commissioning under Section 75 of the Health Act 2006 integrated management arrangements.

ITEMS FOR SCRUTINY (Continued)

14 Exclusion of the Public

The Panel was presented with the following reasons for exclusion:

The next report on the agenda contained information relating to the financial and business affairs of a particular organisation. It contained legal advice which was needed to inform fully the County Council in its decision making. This information could be subject to challenge and needed to be treated as protected by legal professional privilege. The public interest in maintaining this exemption on the above grounds outweighed the public interest in disclosing the information for the following reasons:

The report provided advice as to the options open to the County Council.

These were short-term future options which would have long-term effects.

Disclosure might compromise the improvements that were being implemented.

Resolved -

That the public be excluded from the meeting under section 100A of the Local Government Act 1972 for the following item of business on the grounds that it involves the likely disclosure of exempt information as defined in Paragraphs 3 and 5 of Part 1 of Schedule 12A to the Act.

15 Further Update Report – CareForce and the Provision of Home Care Services in Norwich and South Norfolk

The Panel received a report (containing exempt information) that provided a further update on the performance of CareForce and its provision of homecare to service users in the Norwich and South Norfolk localities that showed how the current situation had been reached.

The Panel noted the outcome of the recent Inspections by the Care Quality Commission (CQC) in respect of the CareForce Norwich Branch and CareForce Loddon Branch (South Norfolk) and a follow-up Quality Assessment undertaken by Adult Social Services in respect of CareForce Norwich Branch.

The Panel noted:

- (a) In respect of the Norwich Branch:
 - The outcome of the Care Quality Commission Inspection (assessed as delivering a "good" rating and two stars).
 - The follow-up Quality Assessment undertaken by Adult Social Services in respect of CareForce Norwich Branch.
 - The continued improvement of services by CareForce, confirmed by service users.
 - Endorse that a follow-up assessment take place in six months time.
 - Confirm that the Norwich contracts now be subject to standard monitoring arrangements.
- (b) In respect of the Loddon (South Norfolk) Branch:
 - The contractual requirements set out in paragraph 6.3 of this report be noted.
 - The outcome of the Care Quality Commission Inspection (their initial draft report assessed CareForce as delivering an "adequate" rating and one star). The contractual decisions for the County Council set out in paragraph 6.7 should CareForce not ensure sustained improvements in the provision of homecare to service users from the Loddon Branch and in particular comply with the actions required by the Care Quality Commission to ensure that the service continues to be rated as "adequate" as a minimum.
 - Confirm that Loddon contracts should continue to be subject to follow-up assessment monitoring arrangements.

The meeting concluded at 12.30 pm

Chairman



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