

Adult Social Care Committee

**Minutes of the Meeting Held on Monday, 04 September 2017
at 10:00am in the Edwards Room, County Hall, Norwich**

Present:

Mr B Borrett (Chairman)

Mr Tim Adams

Miss K Clipsham

Mrs S Gurney (Vice-Chair)

Mrs B Jones

Mr J Mooney

Mr G Peck

Mr W Richmond

Mr M Sands

Mr M Storey

Mr H Thirtle

Mr B Watkins

1. Apologies

1.1 Apologies were received from Mrs S Squire

2. To confirm the minutes of the meeting held on 10 July 2017

2.1 The minutes of the meeting held on 10 July 2017 were agreed as an accurate record and signed by the Chairman.

3. Declarations of Interest

3.1 There were no declarations of interest.

4. Urgent Business

4.1 There was no urgent business discussed.

5. Public Question Time

5.1 There were no public questions

6. Local Member Questions / Issues

6.1 There were no local Member questions.

7. Chairman's Update

7.1 The Chairman updated Members about an email from Councillor Brociek-Coulton thanking them for appointing her as Carers' Champion. She was attending a meeting on 21 September 2017, and, having been co-opted onto the Making it Real board, would bring an update from their next meeting to the October Committee meeting.

8. Update from Members of the Committee regarding any internal and external bodies that they sit on

- 8.1 Councillor Thirtle updated Members on concerns raised at the James Paget Hospital Governors meeting about blocked beds of which there were currently 42.

9. Executive Director's Update

- 9.1 The Executive Director of Adult Social Services updated the Committee on:
- area reviews by the Care Quality Council due to take place to test how well Council and NHS partners were managing integration; the Executive Director of Adult Social Services had agreed to be on the Area Review Team for York;
 - work to finalise the better care fund (BCF) submission due to be submitted, with agreement of the Health and Wellbeing Board, by the end of September 2017;
 - the recruitment of 50 more social workers discussed at the Committee meeting on 10 July 2017; 40 enquiries and 12 applications had so far been received;
 - implementation of the Liquid Logic social care system, which was due to go live for Adult Social Care and Financial Services in the week commencing 20 November 2017. Members would receive a briefing on this;
 - a formal review of the Social Care senior management team being carried out to reflect commissioning developments in the Sustainability Transformation Plan.

10. Internal and External Appointments

- 10.1.1 The Committee considered the positions detailed within the report and the request received for a Member to serve on the Norfolk Safeguarding Adults Board (NSAB).
- 10.2.1 Prior to the meeting, Councillor Peck put himself forward to serve on the NSAB and was proposed for this position by the Chairman. In the meeting, Councillor Clipsham proposed Councillor B Jones for this position, seconded by Councillor Watkins.
- 10.3.1 With 7 votes for and 5 votes against the Committee appointed Councillor Peck as Member on the NSAB.
- 10.3.2 No nominations were received for the 2 Member Champion positions; the Chairman proposed opening these to all Members on the Council (see resolution b)
- 10.4 The Committee:
- a) **APPOINTED** Greg Peck as Member to serve on the Norfolk Safeguarding Adults Board;
 - b) **AGREED** that the positions of Member Champion for Physical Disability and Sensory Impairment or Member Champion for Learning Difficulties be opened to all Members of the Council.

11. Adult Social Care Finance Monitoring Report Period 4 (July) 2017-18

- 11.1.1 The Committee discussed the financial monitoring report based on information to the end of July 2017, setting out variations from the budget, progress against planned savings and actions being taken by the service to remain within budget.

- 11.21 Predicted future pressures on the budget were queried. The Finance Business Partner for Adult Social Services noted that the usual autumn and winter pressures would impact on the budget; this would be monitored closely. The number of residential places remained stable, impacting on forecast savings. Due to the nature of Norfolk's care market and pressures in the domiciliary care market, the Executive Director of Adult Social Services noted care costs could rise in the upcoming year.
- 11.2.2 The Executive Director of Adult Social Services was confident in the Council's strategy of Promoting Independence and a move towards reablement and preventative services, with prevention work targeted more intelligently towards those at risk, in order to make the Care System in Norfolk better suited to the needs of care users.
- 11.2.3 The Finance Business Partner for Adult Social Services clarified that the £4.197m one off funding to support the overspend from 2015-17 required that the cost of purchasing care would reduce by £4m by 2018. Work to enable this was reflected in the Promoting Independence programme and planned work with NorseCare. Additional social care funding was received in March 2017 as part of the Better Care Fund (BCF) arrangements, and it was proposed that any underspend of this in the 2017-18 financial year be put into reserve, as shown in the recommendations.
- 11.2.4 The amount reported in paragraph 2.6.2 to support mental health was questioned and how much would be to support young people. The Finance Business Partner for Adult Social Services explained that use of the funding was not age specific and part of the funding was to support delayed transfers of care related to mental health for all ages, for example, improving capacity to support people leaving hospital.
- 11.2.5 The Finance Business Partner for Adult Social Services confirmed that work with the care market was ongoing to review the price of care, enhance the work of care homes and work to implement strategies and systems, particularly with the homecare market, to enable people to remain independent for longer.
- 11.2.6 Councillor B Jones asked where existing social worker vacancies were located, in which specialities, and where the 50 new social workers would be based. The Executive Director of Adult Social Services **agreed** to provide an update on the recruitment campaign for Committee Members.
- 11.2.7 Teaching partnerships were in place with the University of East Anglia and Suffolk County Council to recruit new and returning Social Workers.
- 11.2.8 The reported closure of Priorsmead Care Home in Thetford was queried. The Executive Director of Adult Social Services clarified that Norse Care had reviewed costs and ability to develop additional capacity at their care homes. They had proposed that Priorsmead would not benefit from further development on the site due to the size of the site and rooms, which were currently too small. No decision had been made to close the site at that time, and a consultation was underway. Capacity of local care homes would be looked at during the consultation and reviews carried out to identify suitable alternative placements for residents of the home.
- 12.2.9 Councillor B Jones gave feedback from the Making it Real Board; Members of the board were directly affected by the decisions of the Committee, and some found the language and jargon in some reports difficult to understand. The Chairman asked Officers to keep reports in language that the general public would understand and thanked Councillor Jones for this feedback.

- 11.3 All recommendations were taken together; with 12 votes for, 0 against and 0 abstentions, the Committee:
- a) **AGREED** the forecast outturn position at Period 4 for the 2017-18 Revenue Budget of £261.313m;
 - b) **AGREED** the planned use of reserves;
 - c) **AGREED** in **PRINCIPLE** to set up a reserve to support the planned actions to be delivered through the improved Better Care Fund;
 - d) **AGREED** the forecast outturn position at Period 4 for the 2017-18 Capital Programme.

12. Strategic and Financial Planning 2018-19 to 2021-22

- 12.1.1 The Committee received the report setting out Policy and Resources Committee's guidance on the actions required to support preparation of a balanced budget for 2018-19, overview of the Council's budget planning process, the principles for this year's (2017) budget-setting activity, and the latest forecast gap for budget planning purposes for the period 2018-19 to 2021-22.
- 12.2.1 The Finance Business Partner for Adult Social Services explained that a report would be brought to Committee in October with detailed proposals; she gave an update on recommendation c) that Officers recommended there were no savings in the current budget plan that could be brought forward due to the work of Promoting Independence and significant contracts, and timetables for implementing changes related to these.
- 12.2.2 Concern was raised over the statement in paragraph 2.3.2 of the report, "the latest estimate of the budget gap for the four year planning period up to 2021-22 was £100.000m", and the impact of this on Adult Social Care service users. The Chairman responded that the Committee had a duty to provide the best service with the money available and continue to lobby for the best possible deal from government.
- 12.2.3 Councillor Watkins **proposed** that the Committee **recommend** that Policy and Resources Committee ask the appropriate representative on the Local Government Association to lobby on behalf of Adult Social Care Committee for more funds for Adult Social Care. This was seconded by the Chairman.
- 12.3 All recommendations were taken together; with 12 votes for, 0 against and 0 abstentions, the Committee :
- a) **AGREED** the budget planning guidance for 2018-19 agreed by Policy and Resources Committee, and in particular **AGREED**:
 - i. the budget assumptions set out in the report;
 - ii. the budget planning principles for 2018-19;
 - iii. the forecast budget gap of £100.000m reflected in the Council's latest financial planning;
 - iv. the allocation of saving targets for the MTFs period 2018-19 to 2021-22 to Departments and Committees, noting the existing savings for 2018-19 and beyond which were agreed as part of the 2017-18 budget round;
 - b) **AGREED** the service-specific budgeting issues for 2018-19 as set out in section 3 of the report.
 - c) **AGREED** that no 2018-19 savings could be implemented during 2017-18 to provide an in-year saving;
 - d) **AGREED** that in order to help close the forecast 2018-19 budget gap (as defined in recommendation a, iii), Officers be commissioned to report to the October

Committee cycle:

- i. whether any savings identified for 2019-20 had the capacity to be brought forward to 2018-19;
 - ii. to identify alternative new savings for 2018-19;
 - iii. to identify further savings for the future years 2019-20 to 2021-22 to close the budget gap identified in those years;
- e) **RECOMMENDED** that Policy and Resources Committee ask the appropriate representative on the Local Government Association to lobby on behalf of Adult Social Care Committee for more funds for Adult Social Care.

13. Next steps for integration with the health service

- 13.1.1 The Committee received the report detailing the impact of health and care integration to date, and proposing to refresh and renew the current integration arrangements in the context of the shared challenges across the health and social care system.
- 13.2.1 Concern was raised over the statement at paragraph 2.3 of the report "...had not yet established a robust evidence base to show that integration leads to better outcomes for patients in England...". The Director for Health and Integration explained that the report showed the current evidence base which needed building further.
- 13.2.2 The Director for Health and Integration clarified that the Committee had ended working arrangements with Norfolk and Suffolk Foundation Trust (NSFT) due to performance and lack of clarity over delivery of required services. The current model with Norfolk Community Health and Care (NCH&C) had joint senior management posts. Following work on future provision and integrated commissioning with Clinical Commissioning Groups (CCGs) a proposal would be brought to the Committee at a future meeting.
- 13.2.3 The Director for Health and Integration recognised both the complexity of integration and its importance for supporting service users; close working models were underway, for example with GPs and nursing teams, as part of the better care fund (BCF) model.
- 13.2.3 Paragraph 3.33 of the report was queried, and why considerations for shaping mental health services were not also included. The Director for Health and Integration explained the importance of aligning support for mental health with primary support rather than separating it. There was no firm position on the NSFT proposal at the time.
- 13.2.4 An ICT workstream of the STP planning process were looking at a digital road map to allow Health and Social Care ICT systems to be inter-operable, rather than build a single system across services. The Executive Director for Adult Social Care was confident about the inter-operability of the new Social Care reporting system, Liquid Logic, and the NHS had been advised to design ICT systems to be inter-operable with this. The Chairman **requested** an informal training session for the Committee about Liquid Logic.
- 13.3 All recommendations were taken together; with 12 votes for, 0 votes against and 0 abstentions, the Committee **INSTRUCTED** Officers to:
- a) renew our arrangements for the integrated management of community services with Norfolk Community Health and Care to March 2019 by March 2018;
 - b) renew our arrangements for the integrated management of community services with East Coast Community Healthcare to March 2019 by March 2018;
 - c) put in place arrangements to address integrated leadership in mental health

services;

- d) enter negotiations with hospital services to promote a community-based 'inreach' model with a greater focus on admission avoidance and discharge support.

14. 'Living Well – Three Conversations' – a strengths based approach to social work

- 14.1.1 The Committee received the report giving information on the strengths-based social work model, "Living Well" based on the "Three Conversations" model, which aimed to support individuals to remain independent for as long as possible.
- 14.2.1 The Assistant Director of Strategy & Transformation recognised that changing practice in this way was an ambitious change but explained it had been designed to grow manageably. The approach was tried and tested as it had been implemented in 22 other areas.
- 14.2.2 The Assistant Director of Strategy & Transformation confirmed that staff at innovation sites, who were implementing the approach first, were reflecting and evaluating; information on changes related to carers would be included in a future update report on Promoting Independence.
- 14.2.3 The Assistant Director of Strategy & Transformation gave examples of non-traditional services. The Executive Director of Adult Social Services explained that traditional services included day centres, home care and care homes; he gave an example that for people seeking social connections but who did not want to go to a day centre, use of technology and digital methods of connecting socially could contribute to their care.
- 14.2.4 The Executive Director of Adult Social Services confirmed that the requirements of all relevant legislation would be included in the Practice Principles booklet.
- 14.2.5 The Chairman was confident this was an opportunity to put service users' needs first.
- 14.3 All recommendations were taken together; with 12 votes for, 0 votes against and 0 abstentions, the Committee:
- a) **AGREED** plans to implement the Living Well - 3 conversations model;
 - b) **AGREED** to publish the Practice Principles booklet based on the six key principles at paragraph 5.2 of the report.

15. Transforming Care Partnership Update

- 15.1.1 The Committee considered the report giving an update on the Norfolk and Waveney Transforming Care Partnership and detail on the Norfolk and Waveney Transforming Care Plan end of year report June 2017.
- 15.1.2 The Director for Health and Integration introduced Alison Leather, Director of Quality from South Norfolk Commissioning Group, who was working as head of the 5 CCGs.
- 15.2.1 The term "behaviour which challenges" was queried; the Director for Health and Integration clarified this was a widely used term within health and social care and was when someone felt challenged by someone's behaviour or someone's own behaviour was challenging to themself.
- 15.2.2 Engagement with the Autistic Spectrum Disorder (ASD) community was queried. The

Director of Quality from South Norfolk Commissioning Group reported that Opening Doors, a group of people with learning disabilities, including those with ASD and Aspergers, had worked with transforming care to help them design services.

- 15.2.3 The Director of Quality from South Norfolk Commissioning Group explained targets shown in the end of year report were a joint initiative between the NHS and local CCGs, to tackle the long amounts of time some patients were spending in hospital.
- 15.2.4 The Director for Health and Integration felt that having the Director of Quality from South Norfolk Commissioning Group's as head of the 5 CCGs had been helpful in coordinating CCGs working together.
- 15.2.5 Norfolk County Council was leading on the role of developing a housing and accommodation plan.
- 15.2.6 NHS services at Astley court and New Plumstead Hospital were being redesigned to reconfigure community support in order to prevent admission to hospital, support moving people on and settle them into the community when appropriate. The number of beds would be reduced further to invest in community support.
- 15.2.7 Further information on the learning disability death review was requested. The Director for Health and Integration clarified that it was required to carry out a review of all people with a learning disabilities who had passed away since April 2017 to see what happened in the lead up to their death, if anything could have been done differently and what went well; this was being led by Bristol university. Norfolk had so far recruited 20 reviewers. Initial trends identified were that those with a learning disability were likely to die between 40-60yrs and may have other health conditions.
- 15.3 All recommendations were taken together; with 12 votes for, 0 votes against and 0 abstentions, the Committee:
- a) **SUPPORTED** the recommendation to develop a local Risk Share Agreement with the CCGs and NHS England Specialised Commissioning for people with a learning disability and/or autistic spectrum disorders with behaviour which challenges;
 - b) **SUPPORTED** the recommendation to commission new services specifically aimed at reducing the number of hospital admissions and facilitating the discharge from long term hospital settings into the community, including crisis accommodation, settled accommodation and a skilled and sustainable workforce;
 - c) **SUPPORTED** an increase in the use of integrated Personal Health and Social Care Budgets.

16. Transport

- 16.1.1 The Committee received and discussed the report providing an update on work being carried out to deliver savings from Adult Social Services transport, following on from previous reports to Adult Social Care Committee.
- 16.2.1 The Assistant Director of Early Help and Prevention confirmed that a strategic review would go to Policy and Resources Committee with proposals of work to remove the need for transport.
- 16.2.2 A query was raised over work being done to reduce the amount of vehicles leased to

service users. The Assistant Director of Early Help and Prevention confirmed that, now a policy was in place, more conversations were being held with service users about their eligibility for Motability and recorded. No more lease cars would be agreed moving forward and conversations were being held over the remaining 17 lease cars; 6 had been returned to date.

- 16.3 Both recommendations were taken together; with 12 votes for, 0 votes against and 0 abstentions, the Committee:
- a) **AGREED** to amend the transport savings to £0.700m in 2018-19 (from £3m) and £1m in 2019-20 (from £0.800m);
 - b) **AGREED** to meet the difference of £2.1m in savings through the purchase of care budget as a result of changes to patterns of care.

The meeting finished at: 11:58 AM

**Bill Borrett, Chairman,
Adult Social Care Committee**



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