

Adult Social Care Committee

Date: **Monday 17 November 2014**
Time: **10am**
Venue: **Edwards Room, County Hall, Norwich**

SUPPLEMENTARY A g e n d a

2. Minutes of the last meeting

To agree the minutes of the meeting held on 23 October 2014

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Adult Social Care Committee

**Minutes of the Meeting Held on Thursday 23 October 2014
10:00am Edwards Room, County Hall, Norwich**

Present:

Ms S Whitaker (Chair)

Mr B Borrett

Ms J Brociek –Coulton

Mr D Crawford

Mr J Dobson

Mr T Garrod

Ms D Gihawi

Mrs S Gurney

Mr C Jordan

Miss A Kemp

Ms E Morgan

Mr R Parkinson-Hare

Mr A Proctor

Mrs A Thomas

Mr E Seward

Ms M Somerville

Mr B Watkins

1. Apologies

1.1 Apologies for absence were received from Tim East (substituted by Eric Seward).

2. Minutes

2.1 The minutes of the meeting held on 22 September 2014 were approved by the Committee and signed by the Chair.

3. Declarations of Interest

3.1 Mrs Gurney declared an “other interest” in that her son worked for Norse.

3.2 Mr Parkinson-Hare declared an “other interest” in that his daughter had learning difficulties.

3.3 Ms Somerville declared an “other interest” in that a member of her family received a personal budget.

4 Items of Urgent Business

4.1 There were no items of urgent business

5 Local Member Questions / Update from Members of the Committee regarding any internal and external bodies that they sit on

5.1 There were no local Member questions.

5.2 The Chair reported that she had attended a meeting of the Board of Governors for the Mental Health Trust which had talked about the transfer of staff back to the Council. The Norfolk and Suffolk Foundation Trust predicted a deficit budget in the forthcoming year.

5.3 The Chair had attended a meeting of the Chairs and Vice Chairs of the Service Committees. The meeting had reviewed the Policy and Resources Committee agenda and had discussed how the committees were progressing with their proposed savings in their departments.

6. Recommissioning Homecare

6.1 The annexed report (item 6) by the Director of Community Services was received. The report set out proposals that would enable the Council to secure home care services, provide core care in a prevention framework and with a clear strategy to secure and improve quality. The Director of Integrated Commissioning gave a presentation (appendix A) which highlighted the main points of the report, and is attached to these minutes.

6.2 During the discussion the following points were made;

- It was confirmed that there were criteria set out for selecting the correct sourcing options. These would include training and retention of staff to ensure the appropriate wage was paid to the workforce. Work was being carried out with care providers to provide training. There was useful evidence to suggest that working more flexibly with service users was likely to be more engaging for staff. The department was also working closely with providers to move away from the current working hours arrangements from zero hours contracts to increase guaranteed hours. It was announced that as an example, Care UK had agreed to recruit in Norfolk on a guaranteed full time basis, with an hourly rate of £7.50 on a weekday, and £8.50 at the weekend. A zero hours contract would only be given if it suited the individual.
- Using spot contracts with providers instead of block contracts cost approximately an additional £500k per year. However, there was a need to achieve the correct level of spot and block contracts as spot contracts provide the flexibility which the Council needs.
- It was reported that 50% of Independence Matters' (IM) turnover is providing for the elderly, therefore they had vast experience in this field which could be expanded and developed. NCC would seek to gradually increase their delivery of home care services.
- The contracts written with the providers would clearly state the expectations of service that NCC required of the service provider; therefore NCC would be

able to take action if they were not adhered to.

- Although the report does not refer specifically to the Harwood Care Charter, it was still a big part of the quality of service in the future and would be brought to the Committee at the next meeting as part of a Quality Assurance framework report.
- As 5000 service users would be affected by changes to the service it was noted that it was important to ensure that the implementation was closely monitored to avoid any unnecessary disruption.
- As this was a major transformation of the services it would be undertaken in a staged process. Many individuals receive domiciliary care, and this staged changed was purposely done to avoid unnecessary disruption to their care.
- Members noted that the cost of the salaries of the proposed additional Quality Assurance staff seemed high. These salaries were the standard contract officer scale at scale K. The figures quoted in the report included all on costs, such as pension contributions, tax and national insurance.
- Mrs Somerville proposed, duly seconded by Mrs Gurney, the following amendment to recommendation D in the report:

“That the Officers bring back to this Committee the business case for the proposed increased investment in the quality assurance and monitoring of home care on an “invest to save” basis”

Upon being put to the vote, the motion was **CARRIED**.

6.3 RESOLVED

- To approve the implementation of the new service model for home care services in Norfolk as set out in appendix 1.
- To approve the implementation of the proposed sourcing strategy to procure block contracted services from the market alongside the development of an arm’s length Council home care provider to promote resilience, quality and workforce issues in the market.
- To confirm it’s commitment to the care workforce through the Unison Ethical Care Charter stages 1 and 2 and that these are reinforced in future contracts and that stage 3, including payment of the living Wage, is scoped for future implementation.
- That the Officers bring back to this Committee the business case for the proposed increased investment in the quality assurance and monitoring of home care on an ‘invest to save’ basis. This was intended to come back to the Committee in January 2015.
- That officers were requested to further scope the potential to invest more in reablement in order to reduce demand on future services as an invest to save opportunity, and bring back to this Committee.

7 Strategic and Financial Planning 2015-18

7.1 The annexed report (7) by the Director of Community Services was received. The report set out proposals which would contribute towards the County Council setting a legal budget for the 2015/2016 which sees its total resources of £1.4billion spent on meeting the needs of residents.

7.2 During the discussion, the following points were made;

- Period four of the yearly budget was already showing significant financial pressure and to date that pressure had increased. Work had been carried out to identify the most pressured areas and an action plan would be brought to the next Committee meeting for the Committee's consideration. It was noted by members that if the figures were currently worse than those in the report, it should be high on the list of the Council's priorities, as an overspend could not be allowed.
- The residential care reserve was accommodation that could be used for individuals with mental and physical difficulties. However, a self contained flat block was being built in the West of the County to allow those with learning difficulties the independence to live by themselves but with close support nearby.
- Members heard that whilst West Norfolk Clinical Commissioning Group (CCG) had been happy to invest in the Better Care Fund, it would be a phased investment over two years.
- Historically, there had been many cases of individuals with mental difficulties in residential care. It would not be cost-effective to move them currently but as NCC had taken over the management of Mental Health Trust staff, it was developing alternative strategies to moving those individuals.
- The well-being part of personal budgets had been altered as a result of the 2014 budget decisions. This alteration had applied to new service users from 1st April 2014. Existing service users were unaffected until 2015/2016 but were being told at this year's annual review how the change would affect them. It was difficult at this stage to assess the overall impact of implementing this agreed reduction.
- There were currently 44 vacancies in the housing with care units, (8 in Thetford). Members were assured that the department were working with the social work teams, district councils and housing associations to try and fill the vacancies. They also heard that although there were vacancies, NCC was not liable for the missed rents, however there were missed opportunities. The criteria for eligible people were being reviewed, and although the care providers wanted to ensure that the units were filled, NCC had a responsibility of ensuring that individuals requiring care were given a place. Members asked for a list of the empty units, and would promote them within their divisions.

- Mrs Gurney proposed, duly seconded by Ms Somerville, the following amendment to recommendation A;

‘To note the schedule of additional savings as set out in Appendix A on a basis for further work and research by Officers, who can then report back to this committee with further recommendations, including finding an alternative to the £1 million Norse capital.’

Upon being put to a recorded vote (appendix B), with 8 votes for, and 9 against, the motion fell.

- Mrs Gurney proposed, duly seconded by Mr Jordan, the following additional recommendation was proposed;

‘To ask the Policy and Resources Committee to take a corporate approach to the Councils budget to ensure that resources are directed to the demand led services that are needed by the community of Norfolk.’

Upon being put to the vote, the motion was carried unanimously.

7.3 RESOLVED

- To endorse the schedule of additional savings as set out in Appendix A of the report.
- To recommend the individual savings as set out in Appendix A of the report.
- To note any risks set out in section 7.1 which related to savings already consulted and agreed upon.
- To review arrangements to ensure tight control on revenue budgets and highlight any issues or risks to Policy and Resources Committee.
- To ask the Policy and Resources Committee to take a corporate approach to the council’s budget to ensure that resources are directed to the demand led services that are needed by the community of Norfolk.

Meeting finished at 1.00pm.

CHAIR



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Re-commissioning home care in Norfolk

Adult Social Services Committee

October 2014

Why now?

- Vulnerability of existing service arrangements – Care UK, recruitment
- Care Act duties: market failure and diversity of supply
- Increasing complexity of need and specialist dementia need
- Need to maximise prevention and demand avoidance
- We will need to invest more in home care against reduction in residential care/admission to hospital
- Better value out of our investment in home care
- Existing contracts end

Proposals:

1. A new **service model** for outcomes/prevention
2. A new **sourcing strategy** for quality, resilience and cost
3. Setting the standards for the care **workforce** contractually
4. Invest in **quality assurance** and contract monitoring
5. Scope invest to save in **reablement**

A new service model for home care

- Securing good quality personal care
- Moving to an outcomes-based approach:
 - Flexibility to be agreed with individual and family
 - Promoting independence and reducing care needs
- Connecting people with communities and community resources:
 - Addressing social isolation, looking after the home, advice and information
- Strengthen prevention– reduce demand for residential care
 - Scope reablement investment to reduce levels of need on entry to service
 - Enhance specialist services i.e. dementia care
- Supporting the care workforce to deliver quality care

Proposed sourcing strategy: a mixed model

- Go to the market to test price PLUS
 - Reduce the size of blocks to encourage local presence plus reduce exposure to risk
 - Blocks created around existing infrastructure e.g. GP surgeries – maximise potential for integrated service provision in the future
- Develop our ‘arms length’ offer to provide us with flexibility, contingency and an exemplar – Independence Matters
- Set Unison Ethical Care Charter conditions in contracts:
 - minimise zero hours contracts, specify travel time, equipment and minimum wage
 - Stages 1 and 2
- Increase our quality assurance/contract management to drive out value

Financial implications:

- Existing criteria for service access remain the same.
- The nature of the work that providers undertake under the proposed outcomes-based contracts is not expected to increase costs overall.
- Testing the market will establish a current market price.
- Reduced reliance on more expensive spot contracts could provide some modest savings which are already anticipated in budget planning.
- Potential for investment in demand management through an enhanced rehabilitation service as invest to save.
- An additional investment of £226k to support quality assurance and contract monitoring capability to ensure that the Council gets the full benefits of its substantial investment in the home care market.

**Norfolk County Council
Adult Social Care Committee
Date of Meeting: 23 October 2014
Recorded Voting Sheet – Item No: 7**

NAME	FOR	AGAINST	ABSTAIN
Bill Borrett	X		
Julie Brociek-Coulton		X	
Denis Crawford		X	
John Dobson	X		
Tom Garrod	X		
Deborah Gihawi		X	
Shelagh Gurney	X		
Cliff Jordan	X		
Alexandra Kemp		X	
Elizabeth Morgan (Vice Chair)		X	
Rex Parkinson-Hare		X	
Andrew Proctor	X		
Eric Seward		X	
Alison Thomas	X		
Margaret Somerville	X		
Brian Watkins		X	
Sue Whitaker (Chair)		X	

With 8 votes for, and 9 against, the amendment was LOST.