

Adult Social Care Committee

Minutes of the Meeting Held on Monday, 19 June 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 T Smith Mr M Storey Mr H Thirtle Mr B Watkins

1. Apologies

- 1.1 No apologies were received.
- 1.2 The Chairman proposed that the meeting would adjourn at 10:50 for the raising of the Flag ceremony in commemoration of Armed Forces Week, and the minute silence for the victims of the Grenfell tower fire.

2. To confirm the minutes of the meeting held on 06 March 2017

2.1 The minutes of the meeting held on 06 March 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 were no items of urgent business.

5. Public Question Time

- 5.1 One public question was received from Mrs Gardenchild see appendix A.
- 5.2.1 Mrs Gardenchild asked a supplementary question: She noted dementia was a condition which progressed and developed. Mrs Gardenchild lived in sheltered housing. While here she had known of 2 people who developed dementia whilst in the housing who had not received the support needed, one of whom was aggressive and caused concerns for local residents and sheltered housing residents. She asked for

reassurance that those diagnosed while in sheltered housing and the communities they lived in would receive support.

5.2.2 The Executive Director of Adult Social Care offered reassurance that it was the intention of Adult Social Care that everyone in sheltered housing and other tenures diagnosed with dementia would be offered an assessment on an individual needs basis, taking into account risks for the individual and their community.

6. Local Member Questions / Issues

6.1 There were no local member questions.

7. Chairman's Update

7.1 The Chairman had nothing further to add at this time.

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

8.1 No updates from members were heard since appointments to bodies were due to be made at item 10 on the agenda.

9. Executive Director's Update

- 9.1 The Executive Director of Adult Social Care:
 - Gave thanks and praise to volunteers and provider organisations who had supported during the recent elections;
 - Reported that during the extended purdah period, work had continued with NHS colleagues, and proposals from these discussions would be brought to the next committee meeting in July 2017;
 - Welcomed to the James Paget Hospital Trust their new Chair, Anna Davidson;
 - Noted that a new Chief Officer had been appointed to west Norfolk CCG, John Webster, and expressed thanks and best wishes on behalf of the Committee to the outgoing Chief Officer.

10. Internal and External Appointments

- 10.1.1 Mr M Sands put himself forward to be considered for Member Representative on the Norfolk Council on Aging. The Chairman proposed that he be considered for Older Peoples' Champion in line with this; Mr M Sands agreed with this proposal.
- 10.1.2 There were no proposals for Member Champion for Learning Difficulties or Member Champion for Physical Difficulty and Sensory Impairment.
- 10.1.3 It had been suggested that the Council have a dementia champion; the Chairman proposed the Committee agree this position and supported a proposal made by Mr C Foulger to be put forward for the role.

- 10.1.4 Mrs K Clipsham proposed herself for the position of dementia champion.
- 10.2.1 With 7 votes for Mr C Foulger and 5 votes for Mrs K Clipsham:
 - Mr C Foulger was **DULY APPOINTED** as Member Dementia Champion.
- 10.3.1 With 13 votes in favour to 0 against, the Committee **DULY AGREED**:
 - To **APPOINT**
 - Chairman Mr B Borrett and Vice-Chair Mrs S Gurney to the Independence Matters Enterprise Development Board;
 - o Mr M Sands as Member Representative on the Norfolk Council on Aging;
 - Mrs J Brociek-Coulton as Members Carers Champion;
 - Mr M Sands as Members Older Peoples' Champion;
 - To **DEFER** appointments to Member Champion for Learning Difficulties and Member Champion for Physical Disability and Sensory Impairment to the next meeting in July 2017.

11. Norfolk Adult Social Services – a review of the current position and issues

- 11.1.1 The Committee received the report setting out the position for Adult Social services focussing on the main issues influencing and driving demand and costs and other pressing issues shaping direction of travel for the service in the medium term.
- 11.2.1 The Assistant Director for Strategy & Transformation clarified that funding was passed on by Norfolk County Council to support the market to move towards paying staff the national living wage.
- 11.2.2 With reference to delayed transfers of care and patient turnover, flexibility of funding was queried. The Executive Director of Adult Social Care reported that a full set of proposals for allocation of funding in 2017-18 would be reported to the Committee in July 2017. Conditions to the funding meant there was some flexibility and some limitation to its use: support the social care market; support social services unmet need; and support the NHS and discharge from hospital.
- 11.2.3 The Executive Director for Adult Social Care explained that the 3 year approach to use of funding would give less flexibility in years 2 and 3. The report did not give detail on the approach to business rates and income tax but this would be incorporated into the Adult Social Care Budget report at the meeting in July 2017.
- 11.2.4 The Care Charter had been incorporated into the home care contract and an audit of home care providers carried out. The Quality Assessment Report shown at Item 14 of the agenda indicated a high staff turnover, therefore a number of areas would be looked into further. A report would be brought to the Committee providing more information on the market and market risks.
- 11.2.5 A new service for carers was due to launch in autumn 2017, working with the Carers' Council to identify and support "hidden carers". There were 1700 carers aged 0-15 recorded in the most recent census.
- 11.3 With 13 votes in favour and 0 against, the Committee DISCUSSED and AGREED:
 a) the analysis and conclusions set out in section 5 of the report;
 b) the priorities Adult Social Care Committee and the vision in section 4.

12. Adult Social Care Finance Outturn Report Year End 2016-17

- 12.1 The Committee **considered** the report providing a review of the budget position for the last financial year, 2016-17, based on information to the end of March 2017.
- 11.2.1 It was clarified that the reserve expenditure related to money held back in reserve until detail had been known about the budget required for items such as the care market.
- 11.2.2 Progress with the Better Care Fund agreement with Clinical Commissioning Groups was queried. The 3 year agreement made in 2016-17 was reflected in the figures.
- 11.2.3 The figure of £8m owed to Norfolk County Council by the Clinical Commissioning Groups was queried. The Assistant Director of Finance clarified this debt was due to be worked through this year, 2017, and allowances had been made in the budget.
- 11.3 The meeting adjourned at 10:51am for the flag raising ceremony and minute silence and reconvened at 11:15am.
- 11.4.1 Finance Business Partner (Children's Services) **agreed** to obtain more detailed clarification regarding the underspend noted in the budget for management finance and HR discussed on page 29 of the report.
- 11.4.2 Variance in cost of hired transport was noted; targets to tackle and reduce spend had been set as reported to the Committee in March 2017.
- 11.5 With 13 votes in favour and 0 against, the Committee DULY AGREED:
 a) The outturn position for 2016-17 Revenue Budget of an overspend of £4.399m;
 b) The outturn position for the 2016-17 Capital Programme
- 11.6 The Executive Director for Adult Social Care gave an update on the budget forecast; the forecast was within budget for spend on purchase of care, which was because Adult Social Care were forecasting to achieve a slightly higher level of income and were expecting to deliver savings in full. There was however a need to mitigate some of the financial risks that the service was facing including managing costs arising changes to service and some home closures, as well as recognising the ongoing risks in relation to demand management and the forecast provision would take account of this.

13. Performance Management report

- 13.1.1 The Committee received the report presenting performance against the committee's vital signs indicators.
- 13.1.2 The Delivery Manager gave background to the report.
 - Benchmarking data would be received in around October;
 - Delayed transfers of care had worsened;
 - The number of people aged 65+ permanently admitted to residential care had increased; this was related to delayed transfers of care;
 - Performance remained challenging related to people with learning disabilities and with mental health conditions in paid employment.

- 13.2.1 Delayed transfers of care at the Norfolk and Norwich University Hospital were similar to other hospitals in Norfolk but had increased significantly in 2016; the cause was being looked into. Delayed transfers of care had increased across the country. The Acting Director of Integrated Commissioning **agreed** to circulate figures to Members. The Chairman requested assurance that reporting at all three hospitals was the same, however it was noted this was not the case at that time.
- 13.2.2 The Assistant Director of Social Work confirmed that NHS teams worked closely with social work teams, meeting daily to discuss patients on the social work pathway and delayed transfers; referrals from hospitals to social work teams were prioritised.
- 13.2.3 The closure of the Henderson ward was discussed and Members felt that similar provision would be beneficial. The Executive Director of Adult Social Care reported that proposals for accommodation based reablement services would be considered.
- 13.3 With reference to section 3 of the report, for each vital sign that had been reported on an exceptions basis, with 13 in favour and 0 against when taken en-bloc, the Committee:

a. DISCUSSED and AGREED the performance data;

b. **AGREED** the actions to address performance in the vital signs report cards; c. **AGREED** to **DELEGATE** to the Director the submission of data for statutory returns;

d. **AGREED** to **RECEIVE** a report in September 2017 showing targets for 2017/20.

14. Risk Management

- 14.1.1 The Committee received the report presenting the full departmental risk register for information on the department's risks.
- 14.1.2 RM14237 "Deprivation of Liberty Safeguarding" was discussed; the Assistant Director of Social Work was confident that risks were prioritised appropriately, and reported that Norfolk was the first Council to electronically record issues to support effective risk monitoring.
- 14.1.3 A report on the strengths based approach which had been rolled out to Social Works Teams, called signs of wellbeing, would be brought to the Committee in September.
- 14.1.4 RM13926, "Failure to meet budget savings" was discussed and queried whether this risk would impact on other areas. It was not felt it would and it was recognised that it may take time for culture change to positively impact on this risk rating.
- 14.1.5 It was clarified that suggestions for new risks or risk removals made by the Senior Management Team would be brought to Committee as recommendations for agreement before being added to or removed from the risk register.
- 14.2 With 13 votes in favour to 0 against, the Committee **DISCUSSED** and **AGREED** the risk register as set out in Appendix A of the report.

15. Adult Social Care Annual Quality Report 2016/17

- 15.1.1 Members received the report outlining and containing the annual quality report, setting out the detail and the strategy for further improvement.
- 15.2.1 The "requires improvement to good programme" had brought about improvement in quality of the home care sector, with Norfolk now 49th out of 152 local authorities.
- 15.2.2 A regional ADASS (Association of Directors of Adult Social Services) expert was due to be brought in to evaluate contract management and quality assurance capacity to support quality improvement. There were no cost implications as ADASS was a regional resource.
- 15.2.3 The quality team acted on safeguarding issues where provider performance was a significant factor; a slight but not significant increase in quality assurance related to safeguarding had been seen. Poor leadership was the main area in which providers scored low in inspections.
- 15.2.4 In the event of serious issues related to provider quality the Council could suspend placements and take action. For less serious issues, the quality team worked closely with the CQC and providers to support return to quality care.
- 15.2.5 Risk scores were evaluated using an electronic system into which all reports related to providers were uploaded, allowing resources to be focussed on those who needed it; 7 in 10 providers did not need support from Norfolk County Council.
- 15.2.6 A new suite of self-evaluation resources and tools were due to be developed.
- 15.2.7 Formal monitoring of outcomes by engaging with service users had been introduced in home care; full analysis of this would be brought to a future meeting however it was noted that the approval rating was 92%.
- 15.2.8 Clarification underneath graphs and tables of "other" was requested on future reports.
- 15.2.9 The timescales for the remaining CQC inspections were unknown.
- 15.2.10 Officers **agreed** to look into the definition of how many people could live with a carer before they would need to be registered as a provider.
- 15.3 With 13 votes in favour and 0 against when taken en-bloc the Committee:
 a) CONSIDERED the findings presented and AGREED to publish the annual quality report;
 b) AGREED to a further detailed briefing on the care market.

The meeting finished at 12:14

Bill Borrett, CHAIRMAN, Adult Social Care Committee



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PUBLIC QUESTIONS TO ADULT SOCIAL CARE COMMITTEE MONDAY 19 JUNE 2017

1a. Question from Lyn Gardenchild

How many Norfolk residents in sheltered housing have a diagnosis of dementia and what provision is being made to monitor their condition and its progression so that they are adequately supported in their communities, and that other residents' welfare is not being compromised?

1b. Response from Chair

We are working closely with housing and support providers to ensure that any changes in the services people receive are managed carefully and that there is a good understanding of the health and support needs of sheltered tenants. Health, social care and the voluntary sector continue to ensure that people's wellbeing and health needs are met.

While monitoring the condition of people diagnosed with dementia is primarily the role of an individual's GP, social care and housing teams can and do work closely with health teams to support individuals. We do not know how many people in sheltered accommodation have a diagnosis of dementia but overall, Norfolk's dementia prevalence is high – being third highest in the region behind Suffolk and Southend; it is estimated to affect around 17,000 people. Dementia is likely to be one of the most important drivers of social care need in older people in Norfolk in the next twenty years

Work will continue with sheltered housing providers throughout the rest of this year to make sure that plans are well understood and appropriate support mechanisms, for people who need these, are put in place.