

SCRUTINY COMMITTEE FOR ADULT SOCIAL CARE AND COMMUNITY SAFETY

MINUTES of a meeting of the Scrutiny Committee for Adult Social Care and Community Safety held at County Hall, Lewes on 9 June 2011

PRESENT:	Councillor Pragnell (Chairman) Councillors Barnes, Healy, Taylor and Mrs Tidy Janet Colvert, LINK representative
Chief Officer:	Keith Hinkley, Director of Adult Social Care
Scrutiny Lead Officer:	Claire Lee, Scrutiny Lead Officer
ALSO PRESENT	Councillor Bentley, Lead Member for Adult Social Care Jane Goldingham, Workstream Manager – Access and Self-Directed Support Martin Robinson, Head of Operations (Mental Health)

CHAIRMAN'S BUSINESS

The Chairman expressed his and the Committee's gratitude to Councillor Joy Waite who had chaired the Committee for the past two years.

1. MINUTES OF LAST MEETING

1.1 RESOLVED to confirm as a correct record the minutes of the last Scrutiny Committee meeting held on 3 March 2011.

2. APOLOGIES

2.1 Apologies for absence were received from Councillors Ost and Scott and Dr Laurie Bush.

3. DECLARATIONS OF INTEREST

3.1 Janet Colvert declared a personal interest as a service user. She did not consider this interest to be prejudicial.

3.2 Councillor Taylor declared a personal interest in relation to item 10 as he was the owner of a residential care home offering County Council funded respite care. He did not consider this interest to be prejudicial.

3.3 Councillor Healy declared a personal interest as a Trustee of Age Concern Eastbourne. She did not consider this interest to be prejudicial.

3.4 Councillor Pragnell declared a personal interest in that his parents were in receipt of respite care, not believed to be funded by the County Council. He did not consider this interest to be prejudicial.

4. REPORTS

4.1 Copies of the reports referred to below are included in the minute book.

5. SCRUTINY COMMITTEE TERMS OF REFERENCE

5.1 The Committee considered its revised terms of reference which included the remit for scrutiny of community safety matters. It was noted that the Lead Member for Community Safety was Councillor Elkin.

5.2 It was clarified that the Committee's remit did include Supporting People issues.

5.3 RESOLVED - to:

(1) Note the revised terms of reference;

(2) Arrange an away half-day for the Committee to receive a briefing on community safety matters; and

(3) Consider any further changes to the community safety grants regime for 2012/13 through the Reconciling Policy and Resources process.

6. HEALTH REFORM UPDATE

6.1 The Committee received a verbal update from the Director of Adult Social Care on the current progress with the national reforms to the health service. Key points included:

- The government pause and listening exercise ended on 31 May and further detail regarding changes to the legislation were expected by the end of June.
- In the meantime, local transitional work was continuing, including the establishment of a shadow Health and Wellbeing Board, GP Commissioning Consortia and Primary Care Trust cluster.
- There would be consultation on local proposals for the Health and Wellbeing Board.
- It was hoped that proposals for integrated joint commissioning for key client groups would be ready later in the summer with a view to consideration of any new arrangements by Cabinet and NHS Boards in the autumn. The Committee may also need to consider these proposals.
- Work was continuing on the development of integrated care, particularly in relation to long-term conditions.
- Public Health staff had now been assigned to the County Council and a review was underway which was expected to generate proposals for future arrangements

6.2 In response to questions from the Committee the following points were made:

- The consultation on Health and Wellbeing Board proposals would focus on key stakeholder organisations and individuals and would include attendees at the recent public health conference.
- The best way to secure scrutiny involvement in the public health review would need to be considered – it would potentially be through the Health Overview and Scrutiny Committee.

6.3 RESOLVED - to note the update and receive further reports in due course.

7. IMPLEMENTATION OF SELF-DIRECTED SUPPORT WITHIN ADULT SOCIAL CARE

7.1 The Committee considered a report by the Director of Adult Social Care outlining the progress which had been made towards the implementation of self-directed support.

7.2 The following points were made in response to questions from the Committee:

- All service users in receipt of an ongoing support package receive a personal budget but some cannot or choose not to have an active role in the deployment of this budget.
- An increasing number of service users opt for a mix of direct payment and local authority management of their personal budget. For example a service user may choose that the Council organises their domiciliary care but the service user may organise their own respite care.
- Work is ongoing to simplify processes for direct payments to encourage more people to take them up, for example the use of pre-payment cards which enable service users to pay for care without becoming an employer. Where people do need to become an employer, they are often reassured by the support available to them through the department's contract with A4E.
- There are very few examples of service users trying direct payments and then choosing not to continue with them. Most people find that the approach works.
- The department intends to make use of telephone assessment in appropriate circumstances and would continue to use face to face assessment where necessary. The use of telephone assessment reflects the need for a balance in the resources devoted to assessment and to care delivery, in the context of an increasing workload.
- There is a need to develop and diversify the market in care services alongside the introduction of self-directed support. This is part of a wider cultural change needed amongst service users, carers and providers to support innovation.
- An online resource directory is in development which will assist people (whether funded by the County Council or not) in finding services to meet their needs and budget. Eventually this may be accessible via digital TV.
- Quality of care must be maintained alongside the introduction of new ways for people to manage their care. The department is addressing this through real-time telephone monitoring as well as ongoing surveys and interviews.

7.3 RESOLVED - to:

(1) congratulate the department on significantly exceeding the national target in relation to personal budgets.

(2) request further information on the relative transactional costs of a personal budget, direct payment or mixed method of arranging care.

(3) request a report at a future meeting on the department's work to develop the local market in care services.

(4) request a further report on progress with self-directed support in June 2012.

8. UPDATE ON THE IMPLEMENTATION OF LEAN WITHIN ADULT SOCIAL CARE

8.1 The Committee considered a report by the Director of Adult Social Care.

8.2 The following points were made in response to questions from the Committee:

- Initial feedback from staff involved in the pilot project had been positive, with enthusiasm about the opportunity to improve processes.
- The department intends to retain separate learning disability and mental health assessment teams due to the level of specialisation in these areas and

the specific skills which need to be retained. These teams will, however, remain multi-disciplinary.

- The set-up costs of £90k represent an investment in the very detailed process of analysis required to implement LEAN. The Council did not have the required expertise in-house to undertake this work but, through the pilot project, this expertise is being developed and spread across the Council.
- The estimated savings to be achieved through LEAN are from staff costs as a result of streamlined processes.
- The pilot will be evaluated using a range of data including the speed of the process and feedback from staff and service user questionnaires.
- One immediate benefit identified from the first few weeks of the pilot was a reduction in the number of enquiries from service users about the progress of their assessment because they now receive a date and information at the outset of the process.

8.3 RESOLVED - to request a further report on the evaluation of the pilot in November 2011.

9. MENTAL HEALTH SERVICES

9.1 The Committee considered a report by the Director of Adult Social Care which provided an update following the transfer of the management of mental health social care staff to Adult Social Care in April 2010.

9.2 The following additional points were made by the Head of Operations (Mental Health) by way of introduction:

- The Adult Social Care team structure was designed to reflect the relevant health service structure in order to support joint working.
- Adult Social Care undertakes all safeguarding work. There has been a significant improvement in safeguarding practices in the context of an increased number of alerts and a number of complex investigations.
- The biggest risk associated with the transfer of staff related to the two different information systems used in health and social care. Clear protocols and systems were put in place to ensure information was safeguarded and no specific issues have emerged.

9.2.1 The following points were made in response to questions from the Committee:

- There had been a period of adjustment whilst staff became familiar with new information systems.
- It had been possible to avoid the potential risk of duplicate assessments and no complaints or concerns had been received.
- The transfer of staff to Adult Social Care was a necessary step in order to facilitate the introduction of self-directed support and the improvements to performance which have since been achieved. It is recognised that there are some disadvantages to the change but overall it has been effective.
- Future priorities will include a focus on integrated care and greater partnership with primary care.

9.4 RESOLVED - to request a further update report in June 2012.

10. SCRUTINY REVIEW OF RESPITE CARE

10.1 The Committee considered a report by the Scrutiny Review Board which included the final report of the review.

10.2 The Committee noted the challenges in encouraging people to identify themselves as carers and agreed to consider this as a future topic for scrutiny at the Committee's away half-day.

10.3 RESOLVED to: (1) forward the report to Cabinet for comment and County Council for approval; and
(2) thank the Review Board and the Scrutiny Lead Officer, Gillian Mauger, for their work on the review.

11. SCRUTINY COMMITTEE WORK PROGRAMME

11.1 The Committee considered its current work programme. It was noted that an update report on telecare would be circulated to the Committee for information in the autumn and that this would enable the Committee to decide whether to undertake further work on this topic.

11.2 RESOLVED - to note the work programme.

12. FORWARD PLAN

12.1 The Committee considered the Forward Plan for the period 1 June 2011 to 30 September 2011.

12.2 RESOLVED - to note the Forward Plan.