



ADULT SOCIAL CARE AND COMMUNITY SAFETY SCRUTINY COMMITTEE

THURSDAY, 16 NOVEMBER 2017

10.00 am CC2, COUNTY HALL, LEWES

MEMBERSHIP - Councillor Angharad Davies (Chair)
Councillors Trevor Webb (Vice Chair), Charles Clark, Martin Clarke,
Nigel Enever, Jim Sheppard and John Ungar

A G E N D A

- 1 Minutes of the meeting held on 14 September (*Pages 3 - 8*)
- 2 Apologies for absence
- 3 Disclosures of interests
Disclosures by all members present of personal interests in matters on the agenda, the nature of any interest and whether the member regards the interest as prejudicial under the terms of the Code of Conduct.
- 4 Urgent items
Notification of items which the Chair considers to be urgent and proposes to take at the appropriate part of the agenda. Any members who wish to raise urgent items are asked, wherever possible, to notify the Chair before the start of the meeting. In so doing, they must state the special circumstances which they consider justify the matter being considered urgent.
- 5 Forward Plan (*Pages 9 - 18*)
The latest edition of the Forward Plan. The Committee is asked to make comments or request further information.
- 6 Prevention (*Pages 19 - 20*)
- 7 Overview of commissioned community provision (mental health) (*Pages 21 - 26*)
- 8 Reconciling Policy, Performance and Resources (RPPR) 2018/19 - November (*Pages 27 - 38*)
- 9 Scrutiny committee future work programme (*Pages 39 - 44*)
- 10 Any other items previously notified under agenda item 4

PHILIP BAKER
Assistant Chief Executive
County Hall, St Anne's Crescent
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8 November 2017

Contact Claire Lee, 01273 335517,
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ADULT SOCIAL CARE AND COMMUNITY SAFETY SCRUTINY COMMITTEE

MINUTES of a meeting of the Adult Social Care and Community Safety Scrutiny Committee held at County Hall, Lewes on 14 September 2017.

PRESENT Councillors Angharad Davies (Chair) Councillors Trevor Webb (Vice Chair), Charles Clark, Martin Clarke, Nigel Enever and Jim Sheppard

ALSO PRESENT Keith Hinkley, Director of Adult Social Care and Health
Martin Hayles, Assistant Director
Graham Bartlett, Independent Chair of East Sussex Safeguarding Adults Board
Claire Lee, Senior Democratic Services Adviser

9 MINUTES OF THE MEETING HELD ON 22 JUNE 2017

9.1 RESOLVED to approve the minutes.

10 APOLOGIES FOR ABSENCE

10.1 Apologies for absence were received from Cllr Ungar.

11 DISCLOSURES OF INTERESTS

11.1 There were none.

12 URGENT ITEMS

12.1 There were none.

13 FORWARD PLAN

13.1 RESOLVED:

- (1) To note the Forward Plan.
- (2) To add Older People's Day Opportunities Strategy to the Scrutiny Committee work programme for 16 November 2017.

14 SAFEGUARDING VULNERABLE ADULTS ANNUAL REPORT 2016-17

14.1 The Chair of the Committee and the Chair of the Safeguarding Adults Board (SAB) paid tribute to the work of Angie Turner, former Head of Safeguarding, who had sadly passed away recently.

14.2 The Chair of the SAB introduced the Safeguarding Annual Report, highlighting the close work between agencies and an innovative pan-Sussex review of agencies' capacity to undertake safeguarding which had been undertaken. He drew the committee's attention to three key themes from the report:

- i) The completion of the first statutory Safeguarding Adults Review (SAR), which are required in cases where an adult has died within the local authority area, had care and support needs and where there is an indication that neglect or abuse played a role. The SAR report will be published in late October or early November and will include 23 recommendations covering seven areas.
- ii) The increase in the proportion of safeguarding enquiries related to domestic abuse (from 2% to 9%). The increase may be a positive trend related to work carried out through a multi-agency review and other awareness raising activity about the safeguarding aspects of domestic abuse. The audit undertaken identified many strengths and also areas for improvement. There has been significant work with primary care over the last year and there is now a named GP for safeguarding and piloting of a co-location worker from the domestic abuse Portal in Health and Social Care Connect.
- iii) The partnership protocol developed between the SAB, Local Safeguarding Children Board, Safer Communities Board and Health and Wellbeing Board in recognition that a number of priorities cut across these Boards. Its purpose is to clarify responsibility and accountability for various areas of work and it will be evaluated in a few months time, after 1 year in place.

14.3 The following additional points were made by the Director of Adult Social Care and Health in relation to the additional information on home care which had been requested by the committee:

- There are home care representatives on the SAB and safeguarding awareness and training work does cover this sector. The SAB has recognised the particular vulnerability in relation to home care, which doesn't have the same level of oversight in the home as other paid services.
- There are three layers of assurance in relation to home care: 1) CQC regulates and rates the sector, including setting clear expectations in areas such as training and safeguarding 2) ESCC undertakes direct work with providers to support improvements in quality 3) the core safeguarding process, including awareness raising across all stakeholders and service users. Awareness raising ensures that people know how and when to raise concerns, and this is built into care planning and the set-up of care packages.
- Safeguarding activity is monitored, with oversight of the data by the SAB. There will increasingly be comparative data available in relation to home care.

14.4 The Director also advised the committee of plans to undertake an Association of Directors of Adult Social Services (ADASS) peer review of safeguarding in early 2018 and to revisit this work as accountable care develops in East Sussex.

14.5 The following additional points were made in response to the committee's questions:

- There are pan-Sussex protocols in place for agencies to refer cases which may potentially require a SAR to the relevant SAB. The case subject to the recent SAR was referred by the Police. The SAB Chair, in consultation with a multi-agency panel, decides whether a referral meets the criteria for a SAR and then commissions external support to do the review. If the SAR threshold is not met other options can be pursued such as a

multi-agency review. Learning from non-statutory reviews is also reported to the Board with an action plan which is then monitored.

- SARs are funded by the Board which is in turn funded by contributions from partners. External costs mainly relate to the independent reviewer, which is a necessary element of the process, but other work is done in house by local agencies.
- Contributions to the SAB budget have been sought from other agencies and this will continue, particularly if the budget comes under pressure. However, ESCC will always underwrite the costs of the Board given its critical function.
- The Care Act requires safeguarding concerns to be reported to the local authority which holds the record of all reported concerns. However, it is more difficult to know how comprehensively reports reflect actual safeguarding issues and whether people understand when to refer. There are now better arrangements for determining when quality issues become safeguarding issues and a number of referrals have been received through this route.
- It is important to look at how we audit and compare our performance to other local authorities, particularly to identify if we are an outlier. A joint Quality Assurance Officer has been appointed with Brighton and Hove to help with this work.
- The Local Authority Designated Officer (LADO) is an employee of the local authority and they have good relationships with Children's Services.
- There is crossover with areas such as community safety. Partnerships like SAB and the Safer Communities Board enable collective agreement about best use of resources and common priorities.
- There has not been a significant change in the proportion of safeguarding concerns related to home care over time. There will always be challenges in this area, for example the use of direct payments leads to a wider range of providers due to client choice.
- Home care providers are receptive to training and it is part of their core requirements. ESCC continues to offer additional free training and views this as a priority. There are challenges related to the workforce both because it is largely unqualified and there are significant recruitment and retention issues.
- E-learning is used wherever possible. The broader ESCC training offer covers core statutory training and opportunities to develop practice, tiered from unqualified staff new to the sector through to qualified social workers. It is important to go beyond the staff providing direct care as a key issue is the quality of the registered manager and the leadership provided within a service.

14.6 RESOLVED:

- (1) To request that the SAR report and action plan be circulated to the committee on publication.
- (2) To request a further annual report in September 2018, to include a breakdown of safeguarding concerns by sector and by the agency making the referral.
- (3) To receive a further report on the Adult Social Care training offer.
- (4) To receive a further report on the (ADASS) peer review in due course when findings are available.

15.1 The Assistant Director - Strategy, Commissioning and Supply Management introduced the report, making the following observations:

- Many of the issues outlined in the report are not unique to East Sussex but are part of general national and international trends.
- The direction of travel in response to these trends is to use services differently and develop new forms of care.
- There are ongoing programmes of work in East Sussex to mitigate the issues through East Sussex Better Together (ESBT) and Connecting 4 You (C4You).
- Supplier relationship work has resulted in identifying a number of nursing home beds which can potentially be block contracted as and when needed.
- The homecare supplier development programme has had a real impact on the sector and on care workers pay and conditions.
- A bedded care strategy is being developed in order to obtain a more coherent view and subsequently recalibrate capacity.
- Changes to the structure of ESCC's contacting and supply team should have a real impact.

15.2 The following additional points were made in response to the committee's questions:

- Providers coming forward for the Care Home Plus scheme are not getting sufficient business from self funders. suggesting they may not be of the quality needed. This suggests that the care homes may not be of the quality required to provide the scheme. Higher quality providers are being proactively sought to offer the Care Home Plus model.
- Social care assessments have never been a significant cause of delayed transfers of care (DTOCs).
- Although there are nursing home vacancies evident in the data, these are not necessarily in the right place – fewer in the west of the county than the east. There is a further issue related to choice – people sometimes want to wait for a preferred placement.
- There are a number of specialised developments advertised across the south east and marketed to people with high levels of income. ESCC is not in a position to pay the rates charged by these developments, both in relation to the cost of individual placements and due to the risk of inflating fees across the market.
- Demographic pressures are reviewed as part of the budget setting process, using the Joint Strategic Needs and Assets Assessment (JSNAA) to identify projected need in different cohorts and therefore the type of services needed. Key cohorts are residents aged 75+ and particularly 85+, where needs for health and social care increase considerably. A modelling tool is in development through ESBT which will use current demand as a baseline and demonstrate the effect of making changes to the numbers of people supported in different ways (e.g. via technology). This will increase the availability and reliability of data but ultimately there will always be judgements about what is required.
- The bedded care strategy is important in identifying demand and need and will be linked to an estates strategy as there will be a need to build or develop new nursing homes. East Sussex has numerous small and medium sized providers rather than more robust larger providers.
- Historic fee levels did present real challenges for the market but budget reductions limited the Council's ability to increase these over the last eight years. There was a choice between increasing fees or meeting eligible need. The fee increases which have

been possible this year have focused on areas of capacity concern and have been a direct result of the extra government funding provided over two years. This additional funding will end in 19/20 unless there is further Government action to address the funding gap.

- The fee rise appears to have stabilised the market compared to last year and there have been fewer closures. However, it hasn't increased the capacity to the levels needed and it doesn't bring local authority fees close to the self funded rate. Initial modelling suggests around 50 vacancies a week are needed to make the system work and these levels are not currently available.
- Local authority placements make up 40% of the market and offer providers stability of funding and a high level of certainty of occupancy for homes. For these reasons most homes have a mixed economy of local authority and self-funded clients.

15.3 RESOLVED to note the report.

16 RECONCILING POLICY, PERFORMANCE AND RESOURCES (RPPR) 2018/19

16.1 In response to a request from the committee, the Director of Adult Social Care and Health provided some additional context for the report as follows:

- Differing approaches are being taken in the ESBT area and the C4You area:
 - ESBT has a Strategic Investment Plan covering the total health and social care budget of c£864m. ESCC remains responsible for its share but budgets are fully aligned and there is a joint plan for making savings across the budget, based on reducing demand into acute care. This has meant that the NHS budget mitigates the impact of budget reductions in Adult Social Care as investment in social care reduces demand on more costly NHS services.
 - There have been discussions about aligning budgets in a similar way in the C4You area but High Weald Lewes Havens (HWLH) Clinical Commissioning Group (CCG) is currently taking a different approach based on aligning budgets with other CCGs. This means the Adult Social Care budget will continue to be set in a more traditional way in the HWLH area.
- There has been a £27.8m savings requirement in Adult Social Care over three years (from 16/17). ESBT funding and additional Better Care Fund (BCF) money offset the level of savings required significantly in the current year (2017/18).
- The original announcement of additional BCF monies indicated it was to be used in three ways: 1) to meet need; 2) to stabilise the market (hence fee increases); 3) to develop health and social care integration.
- Delayed BCF planning guidance issued in July shifted the focus towards reducing Delayed Transfers of Care (DTCs) and related performance indicators. Extremely challenging targets have been set for each local authority area. These changes led to the Local Government Association withdrawing support for the BCF guidance.
- DTC targets are based on the number of days of delay in hospital per 100,000 population. In East Sussex the NHS will be expected to reduce health related delays from 14.8 to 7.2 (i.e. c50% improvement). The social care delays starting point was 7.8 with an expectation to reduce to 2.9.
- Local areas were required to submit a plan for using the BCF funding by 11 September and plans will be subject to an assurance process by October. Locally the impact of changes in

direction has been well managed due to the existing partnerships in place, particularly in relation to ESBT as support for social care was already in the jointly agreed plan.

- The DTOC target covers the whole year but there will be a review of progress in November based on the current trajectory. There have been suggestions that if the trajectory is not being met there will be some risk to local authority funding. However, a reduction in funding is likely to worsen the situation in areas not meeting the target.
- The focus on DTOCs is linked to expectations of a very challenging winter for the NHS and social care. Part of the NHS Winter Plan is to reduce hospital bed occupancy to 85% by November and to hold this level through to March, something which has not been achieved in the past.
- In terms of outlook, the 2018/19 position is sustainable due to the extra BCF funding but the department will continue to seek further efficiencies and savings to free up resource for front-line care.
- A more significant issue is how to plan for 2019/20 without making long term commitments in the absence of a clear picture of longer term funding.

16.3 RESOLVED:

- (1) To receive a further update on proposed savings, including an update on the BCF, in November 2017.
- (2) To include previous reports on the impact of savings as appendices to the November RPPR report.
- (3) To establish an RPPR Board comprising all Members of the committee to meet on 21 December at 10am to consider the developing portfolio plans and savings proposals and to submit scrutiny's final comments to Cabinet in January 2018.

17 SCRUTINY COMMITTEE FUTURE WORK PROGRAMME

17.1 RESOLVED:

- (1) To postpone the item on services to prisons (post Care Act) from November to March.
- (2) To update the work programme as discussed during the meeting.

The meeting ended at 12.15pm

Councillor Angharad Davies
Chair

EAST SUSSEX COUNTY COUNCIL'S FORWARD PLAN

The Leader of the County Council is required to publish a forward plan setting out matters which the Leader believes will be the subject of a key decision by the Cabinet or individual Cabinet member in the period covered by the Plan (the subsequent four months). The Council's Constitution states that a key decision is one that involves

- (a) expenditure which is, or the making of savings which are, significant having regard to the expenditure of the County Council's budget, namely above £500,000 per annum; or
- (b) is significant in terms of its effects on communities living or working in an area comprising two or more electoral divisions.

As a matter of good practice, the Council's Forward Plan includes other items in addition to key decisions that are to be considered by the Cabinet/individual members. This additional information is provided to inform local residents of all matters to be considered, with the exception of issues which are dealt with under the urgency provisions.

For each decision included on the Plan the following information is provided:

- Page 9 -
- the name of the individual or body that is to make the decision and the date of the meeting
 - the title of the report and decision to be considered
 - groups that will be consulted prior to the decision being taken
 - a list of other appropriate documents
 - the name and telephone number of the contact officer for each item.

The Plan is updated and published every month on the Council's website two weeks before the start of the period to be covered.

Meetings of the Cabinet/individual members are open to the public (with the exception of discussion regarding reports which contain exempt/confidential information). Copies of agenda and reports for meetings are available on the website in advance of meetings. For further details on the time of meetings and general information about the Plan please contact Andy Cottell at County Hall, St Anne's Crescent, Lewes, BN7 1UE, or telephone 01273 481955 or send an e-mail to andy.cottell@eastsussex.gov.uk.

For further detailed information regarding specific issues to be considered by the Cabinet/individual member please contact the named contact officer for the item concerned.

EAST SUSSEX COUNTY COUNCIL
County Hall, St Anne's Crescent, Lewes, BN7 1UE

For copies of reports or other documents please contact the officer listed on the Plan or phone 01273 335274.

FORWARD PLAN – EXECUTIVE DECISIONS (including Key Decisions) –3 November 2017 TO 28 February 2018

Additional notices in relation to Key Decisions and/or private decisions are available on the [Council's website](#).

Cabinet membership:

Councillor Keith Glazier - Lead Member for Strategic Management and Economic Development

Councillor David Elkin – Lead Member for Resources

Councillor Bill Bentley – Lead Member for Communities and Safety

Councillor Rupert Simmons – Lead Member for Economy

Councillor Nick Bennett – Lead Member for Transport and Environment

Councillor Carl Maynard – Lead Member for Adult Social Care and Health

Councillor Sylvia Tidy – Lead Member for Children and Families

Councillor Bob Standley – Lead Member for Education and Inclusion, Special Educational Needs and Disability

Date for Decision	Decision Taker	Decision/Key Issue	Decision to be taken wholly or partly in private (P) or Key Decision (KD)	Consultation	List of Documents to be submitted to decision maker	Contact Officer
14 Nov 2017	Lead Member for Resources	To consider a report seeking authority to declare 3 Council Cottages, Selmeston, surplus and for disposal		Local Members	Report, other documents may also be submitted	Kate Nicholson 01273 336487
14 Nov 2017	Lead Member for Resources	To consider a report seeking authority to declare Old Nursery and land at Catsfield Road, Crowhurst		Local Members	Report, other documents may also be submitted	Kate Nicholson 01273 336487
14 Nov 2017	Lead Member for Resources	School Appeals Digital Project Next steps for the School Appeals Digital Project	P		Report, other documents may also be submitted	Paul Dean 01273481751

27 Nov 2017	Lead Member for Adult Social Care and Health	Employment Opportunities – Future arrangements To consider the future arrangements for successful supported employment and skills development pathways for people with learning disabilities.			Report, other documents may also be submitted	Kay Holden 01323 464470
11 Dec 2017	Lead Member for Education and Inclusion, Special Educational Needs and Disability	Enlargement of Polegate School - Final decision To consider the final decision regarding the enlargement of Polegate School - Final decision		Local Members	Report, other documents may also be submitted	Gary Langford 01273 481758
11 Dec 2017	Lead Member for Education and Inclusion, Special Educational Needs and Disability	To consider the outcome of the ESCC funding formula consultation with Schools and Academies. Proposed changes to the ESCC's school funding formula were put forward for consultation with Schools and Academies and now require lead member approval.	KD	All Primary and Secondary Schools and Academies in East Sussex.	Report, other documents may also be submitted	Ed Beale 01273 337984
11 Dec 2017	Lead Member for Children and Families	To approve the business case for submission of the planning application for extension of Lansdowne Secure Unit To determine whether East Sussex County Council should submit a planning application develop and extend the existing Secure Unit to add capacity for 5 more beds to the Unit		Local Members	Report, other documents may also be submitted	Nicky Scott 01323 466030

12 Dec 2017	Cabinet	Annual Audit Letter 2016/17 To consider the Annual Audit letter and fee update from the External Auditor.	KD		Report, other documents may also be submitted	Ola Owolabi 01273 482017
12 Dec 2017	Cabinet	Council Monitoring: Quarter 2 2017/18 The consider a Reconciling Policy, Performance and Resources (RPPR) update and the Council Monitoring report for Quarter 2, 2017/18.			Report, other documents may also be submitted	Jane Mackney 01273 482146
12 Dec 2017	Cabinet	Highways Grass Cutting Service Proposals 2018/19 To seek approval from Cabinet for the proposals for savings prior to proceeding to public consultation	KD		Report, other documents may also be submitted	Dale Poore 01273 481916
12 Dec 2017	Cabinet	Household Waste Recycling Site (HWRS) Service Review 2017 To consider a report seeking approval to go out to public consultation on possible Household Waste Recycling Site (HWRS) Service changes.	KD		Report, other documents may also be submitted	Anthony Pope 01273 481657
12 Dec 2017	Cabinet	Looked After Children Annual Report To consider the Looked After Children's Annual Report			Report, other documents may also be submitted	Teresa Lavelle-Hill 01323 747197
12 Dec 2017	Cabinet	Strengthening Our ESBT Alliance Arrangements for 2018/19 Proposals designed to strengthen the ESBT	KD	Engagement will take place with a range of key stakeholders through a range	Report, other documents may also be submitted	Phil Hall 01273 335808 Vicky Smith 01273 482036

		<p>Alliance working arrangements, including:</p> <ul style="list-style-type: none"> • Integrated governance and leadership arrangements for strategic commissioning based on population health and care needs • Setting up an Integrated Commissioning Fund between the Council and EHS CCG and HR CCG to underpin this • Extension of the ESBT Alliance Agreement arrangements until March 2020 		of mechanisms, including and Equalities Screen of the proposals for integrated leadership of strategic commissioning and the Integrated Commissioning Fund.		
12 Dec 2017 Page 13	Cabinet	<p>Treasury Management Annual Report 2016/17 and mid year report 2017/18 To consider a report on the review of Treasury Management performance for 2016/17 and for outturn for the first six months of 2017/18, including the economic factors affecting performance, the Prudential Indicators and compliance with the limits set within the Treasury Management Strategy.</p>	KD		Report, other documents may also be submitted	Ola Owolabi 01273 482017
18 Dec 2017	Lead Member for Transport and Environment	<p>Rescinding of highway improvement scheme at Broad Oak, Brede</p> <p>To seek Lead Member approval to rescind the highway improvement scheme at Broad Oak, Brede and declare such land as necessary surplus to CET requirements</p>		Four week consultation with local residents	Report, other documents may also be submitted	Jonathan Wheeler 01273 482212
20 Dec 2017	Lead Member for	Registration Service Income Generation			Report, other	Steve Quayle

Page 14	Communities and Safety	<p>For the Lead Member to note the breadth of income generation schemes currently being progressed within the Registration Service and consider proposals to:</p> <p>1) refer customers who are getting married to an approved Will writer, in return for a referral fee (predicated on the fact that marriage annuls all former wills).</p> <p>2) refer customers to an approved insurance broker to organise Ceremony insurance for them in return for a fee from the insurance broker.</p> <p>3) hold funeral services and wakes at Southover Grange.</p> <p>4) offer a fee reduction of up to 25% for non-statutory optional ceremonies if they are booked at the same time as the customer transacting other business with the service.</p>	KD		documents may also be submitted	01273 337148
20 Dec 2017	Lead Member for Communities and Safety	<p>Road Safety Policies Update To consider a report regarding the updates to Road Safety Policies.</p>			Report, other documents may also be submitted	Claire Scriven 0345 6080193
21 Dec 2017	Lead Member for Adult Social Care and Health	<p>Older People's Day Opportunities Strategy To consider a New Model of delivering "Day Care Services" for Older People in the context of broader transformational programmes</p>	KD		Report, other documents may also be submitted	Mick Moorhouse 07712 542497

22 Jan 2018	Lead Member for Education and Inclusion, Special Educational Needs and Disability	Education Commissioning Plan 2017-2021 To seek approval for publication of the Education Commissioning Plan 2017-2021	KD		Report, other documents may also be submitted	Gary Langford 01273 481758
22 Jan 2018	Lead Member for Education and Inclusion, Special Educational Needs and Disability	Final decision on a proposal to enlarge Willingdon Community School For the Lead Member to take the final decision on the proposal to enlarge Willingdon Community School from 1 September 2020	KD		Report, other documents may also be submitted	Gary Langford 01273 481758
22 Jan 2018 Page 15	Lead Member for Education and Inclusion, Special Educational Needs and Disability	To approve the DSG Budget for 2018/19 The DSG allocations are notified to the Local Authority in December and the DSG budget requires approval.			Report, other documents may also be submitted	Ed Beale 01273 337984
22 Jan 2017	Lead Member for Education and Inclusion, Special Educational Needs and Disability	School age range changes – Ditchling (St Margaret's) CE Primary School To seek Lead Member approval to publish statutory notices in respect of a proposal to lower the age range at Ditchling CE Primary School to enable the governing body to provide early years provision on the school site.			Report, other documents may also be provided	Jane Spice 01323 747425
22 Jan 2017	Lead Member for Education and	School age range changes – Fletching CE Primary School			Report, other documents may	Jane Spice 01323 747425

	Inclusion, Special Educational Needs and Disability	To seek Lead Member approval to publish statutory notices in respect of a proposal to lower the age range at Flectching CE Primary School to enable the governing body to provide early years provision on the school site.			also be provided	
23 Jan 2018	Cabinet	Conservators of Ashdown Forest Budget 2018/19 To consider the Conservators of Ashdown Forest Budget for 2018/19.	KD		Report, other documents may also be submitted	Ian Gutsell 01273 481399
23 Jan 2018	Lead Member for Strategic Management and Economic Development	Local Growth Fund - Amendments to spend profiles 2017/18 To seek approval for the changes to 2017/18 Local Growth Fund profiles			Report, other documents may also be submitted	Ben Hook 01273 336408
23 Jan 2018	Cabinet	Reconciling Policy, Performance and Resources (RPPR) 2018/19: Draft Council Plan To consider the revenue budget, savings proposals, capital programme and draft Council Plan for 2018/19.	KD		Report, other documents may also be submitted	Jane Mackney 01273 482146
23 Jan 2018	Cabinet	Treasury Management Strategy 2018/19 To consider the Treasury Management Strategy for the financial year 2018/19.	KD		Report, other documents may also be submitted	Ola Owolabi 01273 482017
19 Feb 2018	Lead Member for Education and Inclusion, Special	Final decision on School age range changes – Ditchling (St Margaret's) CE Primary School			Report, other documents may also be submitted	Jane Spice 01323 747425

	Educational Needs and Disability	For the Lead Member to take the final decision on the proposal to lower the age range at Ditchling CE Primary School to enable the governing body to provide early years provision on the school site.				
19 Feb 2018	Lead Member for Education and Inclusion, Special Educational Needs and Disability	Final decision on School age range changes – Fletching CE Primary School For the Lead Member to take the final decision on the proposal to lower the age range at Fletching CE Primary School to enable the governing body to provide early years provision on the school site.			Report, other documents may also be submitted	Jane Spice 01323 747425

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Report to: Adult Social Care and Community Safety Scrutiny Committee

Date of meeting: 16 November 2017

By: Director of Adult Social Care and Health

Title: Prevention

Purpose: To prompt an exploratory discussion about the issues related to preventative services.

RECOMMENDATIONS:

The Scrutiny Committee is recommended to:

- (1) discuss the issues and questions raised in the report; and**
 - (2) identify any areas for further scrutiny.**
-

1. Background

1.1 Prevention can be broadly understood in the following ways:

- Services and support that enhance an individual's or communities' health and well-being and therefore reduces the likelihood of them becoming unwell or needing help from others (this can include initiatives to address obesity, social isolation or promote exercise and healthy living)
- Targeted services and support that reduces the need for more acute types of help (this can include housing related support, community wellbeing hubs or initiatives to support parents)

1.2 Key environmental factors such as educational attainment, employment and housing also impact significantly on health and wellbeing with levels of deprivation affecting demand for health and social care support.

1.3 In the context of integrated working with the NHS investment in healthy living, proactive primary and community care and crisis response will also prevent or reduce demand for more costly hospital services. Similarly re-ablement services will help prevent or reduce an individual's likelihood of becoming unwell again or needing ongoing support from statutory agencies.

2. Key issues

2.1 Financial challenges across the NHS and local government means that resources are focused on meeting immediate need and not on prevention – for East Sussex County Council this will mean prioritising safeguarding, assessment and care management and funding personal care for those with eligible need, which is set nationally at critical and substantial.

2.2 The Public Health Grant is ring-fenced for 2018/19 but the position moving forward is unclear.

2.3 Investments in prevention can take a long time to take effect – for example reducing obesity for children will have an impact over a twenty year plus timeframe.

2.4 Providing evidence, and therefore justifying, investment in preventative services is not always easy to achieve. There is evidence that social isolation can impact on mental health and well-being but this does not necessarily equate to investment in these areas directly reducing demand for statutory services.

3. Conclusion and reasons for recommendations

3.1 The committee is invited to discuss the issues raised above and identify any areas for further scrutiny.

KEITH HINKLEY
Director of Adult Social Care and Health

Contact Officer: Claire Lee, Senior Democratic Services Adviser (01273 335517)

Local Member: All

Report to: Adult Social Care and Community Safety Scrutiny Committee

Date of meeting: 16 November 2017

By: Director of Adult Social Care and Health

Title: Overview of commissioned community provision (mental health)

Purpose: To provide an overview to the Scrutiny Committee of commissioned community mental health services, both current and planned, as part of East Sussex Better Together (ESBT)

RECOMMENDATION

The Committee is recommended to consider the development of commissioned community provision for Mental Health in East Sussex

1. Purpose

- 1.1. This paper will set out the range of mental health community support services that have been commissioned as part of the delivery of East Sussex Better Together (ESBT) and East Sussex Mental Health Strategic Transformation.
- 1.2. It is important to note these services are commissioned by Adult Social Care but contain a range of funding from East Sussex Clinical Commissioning Groups.
- 1.3. The services have been commissioned and procured in two phases. Phase 1 with services starting 1 October 2017. Phase 2 with services due to commence from 1 April 2018.

2. Background

- 2.1. These strategic developments are consistent with national (Five Year Forward View, Care Act 2014) and local priorities East Sussex Better Together, Connecting for You (C4Y) which are transformation programmes developing in partnership with the District and Borough Councils of East Sussex. They are also designed to support the Sussex and East Surrey Sustainability and Transformation Partnership (STP), and wider integrated planning and Accountable Care organisational developments.
- 2.2. This provision is an overview of community mental health provision delivered by third sector organisations. The main aims and objectives of the support are to enhance opportunities for people to access support at an earlier stage of their illness. This will reduce crisis, develop self-management and build resilience.
- 2.3. The Five Year Forward View promotes that the support people get for mental health in the community should include easy access to support and a quick response from service providers. The Care Act (2014) recommends that the local statutory offer should include outcomes linked to wellbeing, prevention, reduction, health, educational, voluntary and employment and social opportunities.
- 2.4. All of the service provision has been co-designed and developed with people with lived experience. Service user representation was also part of the commissioning panel during the procurement process.

2.5. The enduring outcome from these strategically designed services are to reduce the financial impact and burden on crisis and secondary care services and improve the outcomes of individuals by supporting people at an earlier stage of their mental health condition.

3. Phase 1 - Community Network of Mental Health Support

3.1. The Community Network consists of 4 elements:

- Wellbeing/drop-in Centres
- Peer Support
- Specialist Personality Disorder Service
- Crisis Café/Safe Space

3.2. Wellbeing/Drop-in Centres - People with a variety of mental health support needs can access the drop-in Wellbeing Centres, which are based at venues in key populated areas across East Sussex. The Centres are staffed by the third sector and offer “safe” environments where people are encouraged to develop their own recovery plans, gain and maintain good mental health, and are encouraged to participate in opportunities in their communities. These “Community Hubs” will incorporate additional services and support wider local priorities (ESBT and C4Y) They also support public health functions such as improving health, physical health and wellbeing. The centres will work with other support agencies ensuring people have access to a range of support relevant to their needs, including (not exhaustively) benefits/welfare advice, housing, employment.

3.3. There are seven Wellbeing Centres across East Sussex.

- Eastbourne
- Hailsham
- Hastings
- Bexhill
- Lewes
- Newhaven
- Uckfield/Crowborough

3.4. They will offer a wide range of practical support including group activities, 1:1 support, advice and guidance and will aim to support people at an early stage with mental health as well as support people who may become unwell and require support or interventions to avoid going into crisis.

3.5. Wellbeing Centres are expected to work with approximately 3000 people across the county.

3.6. Peer Support – Peer support is evidence based. Although it will be embedded in Wellbeing Centres, It will be developed to thread through all aspects of community support. Evidence highlights success in engaging with people, particularly some hard to engage groups, to take control of their condition. Its aim is to improve mental health and wellbeing through mutually supportive relationships, education, and the ability to self-manage, cultivating independence and resilience and reducing the need for secondary mental health care, crisis and emergency services. The provision will develop a resource of specifically trained paid and voluntary peer workers. They will deliver 1:1 Peer Support, Drop-in Groups, and advice and guidance around peer support to other providers. Peer support is expected to work with approximately 300 people across the county.

3.7. Personality Disorder Service - will operate from the Wellbeing Centres in Hastings and Eastbourne and will address the needs of a small number of people with a diagnosis of Personality Disorder, who are currently placing a disproportionately high demand on health and social care, by providing a specialist community day service. The service will be delivered by a dedicated peripatetic team consisting of third sector (Southdown) and Sussex Partnership NHS Foundation Trust (SPFT) clinical staff who will provide treatment and support services for people with complex needs (Personality Disorder), targeting and engaging people who are impacting on the system elsewhere, thereby reducing the demand on other services and meeting their needs more effectively. This service is in addition to the support delivered by SPFT's secondary mental health Assessment and Treatment Services (ATS). This service will work with a targeted cohort of 75 people, however it is expected that the consistency and skill levels this will create in Wellbeing Centres will increase the levels of people with personality disorder accessing their generic support.

3.8. Crisis Cafes/Safe Spaces - The service will be provided by third sector providers Southdown and SPFT, making available extended out of hours provision for clinical and non-clinical support at required key times. It will provide a safe space for individuals, in central Hastings and Eastbourne. The service aims to reduce mental health hospital admissions by providing an alternative solution for patients and an opportunity to self-manage their condition or de-escalate their current position. The service is in addition to other mental health crisis and emergency services, such as the Crisis Resolution and Home Treatment Teams (CRHT) and A&E. This support will be closely interconnected with services such as CRHT, emergency accommodation, Homeworks, local charitable homeless shelters and other active provision which targets the street community.

4. Phase 2 – Mental Health Support (commencing April 1st 2018)

4.1. There are four key areas of service provision to be procured using previously established models.

- Employment support (IPS)
- Community Connector Service (Social Prescribing)
- Service user engagement and involvement (SUEI)
- Support for hard to engage vulnerable people

4.2. Employment support – East Sussex uses an evidence based employment model. This intervention supports people with severe mental health difficulties into employment. It involves intensive, individual support, a rapid job search followed by placement in paid employment, and time-unlimited in-work support for both the employee and the employer. This provision will also ensure people retain their employment if they become unwell and at risk of losing their jobs due to their mental health. This service will work with a target beneficiary level of 500 people.

4.3. Community Connector Service (Social Prescribing) - A Social Prescribing/Life Support intervention is consistent with an integrated care and support model – namely, to improve access to services and sources of support that improve health outcomes and quality of life for people, avoiding mental ill-health, improving physical health and the impact on frontline statutory services. This provision provides support workers located close to or within targeted GP practices. This service will work with a target beneficiary level of 1500 people.

4.4. Service user engagement and involvement - All good practice highlights the importance of people with mental health problems, their families and carers, being engaged to represent client and carers' views on service delivery and design. They will influence and lead commissioning decisions, support the development of good quality, performance and outcomes of services and

the effectiveness of care pathways. This service will work with a target beneficiary level of 90 people.

4.5. Hard to Engage Vulnerable People (Hastings St Leonards) - There are significant evidence based reports on the impact of complex comorbid mental health, rough sleepers, homelessness and the street community on their health. This included the need for targeted support for people with comorbid complex needs alongside partnerships with statutory services in order to meet their needs. People with a variety of mental health support needs can access a drop-in hub in central Hastings and St Leonards areas. The current service levels of support are in the region of 550-600 service users over the year. The Hub will facilitate and host a range of other services and provision such as community nursing, podiatry or Peer Support, housing and welfare support and advice. These should be delivered as “safe” environments that will engage people, where people are encouraged to develop their own recovery plans, as well as gain and maintain good mental health.

4.6. The drop-in “Hub” facility’s main aim is to engage with this cohort of individuals. They will offer a small range of targeted activities within the centre, for those who may feel socially isolated and are finding it difficult to move forward. People can access one to one support to work on improving their wellbeing and achieving their own personal goals in the community; People will require support around accommodation or welfare however other support may be recreational, educational, health and fitness related or vocational.

The main aim of the service will be to support and develop resilience and self-management and will work with other strategically designed services to facilitate and deliver a co-ordinated range of local mental health provision that will support people in crisis, and enable people to stay well.

5. Associated expenditure

5.1 Phase 1 expenditure

- Wellbeing Centres £996,000
- Peer Support £85,000
- Crisis Café £200,000
- Personality Disorder Service £240,000
- Total = £1,521,000

5.2 Phase 2 expenditure

- IPS Employment Support £327,000
- Community Connector (social prescribing) £453,000
- Service User Engagement and Involvement £61,000
- Hard to Engage Vulnerable People Service £118,000

Total current and planned expenditure is £959,000.

6. Conclusion

6.1 The developments outlined in the report are consistent with the NHS Five Year Forward View, Care Act 2014 responsibilities and local priorities within ESBT and C4Y. The programmes of work have been developed in partnership with the District and Borough Councils of East Sussex. They are also designed to support integrated working and the development of planning for Accountable Care.

6.2 The Committee is therefore recommended to consider the development of commissioned community provision for Mental Health in East Sussex.

KEITH HINKLEY
Director of Adult Social Care and Health

Lead Officer: Kenny MacKay, Strategic Commissioning Manager
Tel: 01273 463946

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Report to: Adult Social Care and Community Safety Scrutiny Committee

Date of meeting: 16 November 2017

By: Chief Executive

Title: Reconciling Policy, Performance and Resources (RPPR)

Purpose: To provide an update on the Council's business and financial planning process (Reconciling Policy, Performance and Resources) and the Committee's comments and requests for further information.

RECOMMENDATIONS:

The Scrutiny Committee is recommended to:

(1) consider any additional information requested at the September Scrutiny Committee meeting on RPPR;

(2) review the updated savings plans for 2018/19 and areas of search for savings in 2019/20 and 2020/21, as outlined in the RPPR Cabinet report of 10 October 2017, and suggest any amendments or potential alternatives that should be explored; and

(3) identify any further work or information needed to aid the Scrutiny Committee's contribution to the RPPR process for consideration at the December RPPR Board or as part of the Committee's ongoing work programme.

1. Background

1.1 As reported in September, the Council is currently in year two (2017/18) of a three year service and financial plan which was agreed by Council in February 2016. This was developed against a background of permanent reduction in the size of the public sector, including councils. The Council will have seen Revenue Support Grant fall from £100.2m in 2010 to £15m in 2018/19. By the end of the planning period it will no longer exist. Demand for services continues to grow due to demographic change, particularly for older people, and Council Tax rises are currently capped below the rate of inflation.

1.2 It was reported in September that Chief Officers were continuing to develop plans for savings of £21.9m (6% of the net revenue budget) in 2018/19, broadly in line with the allocations agreed by Council in February 2017. Consideration was also being given to high level proposals for further savings required across the subsequent two years, 2019/20 and 2020/21. Cabinet had asked Chief Officers to bring updated savings proposals for 2018/19 and areas of search for 2019/20 - 2020/21 to its meeting on 10 October 2017 for initial consideration.

1.3 The report to Cabinet in October updated the Medium Term Financial Plan, set spending and savings priorities in 2018/19, articulated the implications of the need to make further savings of an estimated £36.2m over the two years 2019/20 and 2020/21 and suggested areas of search in those two years.

2. Scrutiny engagement in RPPR

2.1 At the September meeting the scrutiny committees discussed the current Portfolio Plans and Savings Plans for 2017/18 for those services within their remit. The Committee also reviewed the existing savings proposals for 2018/19 and made comments or requests for further information.

2.2 The **November 2017 scrutiny committees** are invited to:

- consider any additional information requested at the September meeting in preparation for the RPPR Board in December;
- review the updated savings plans for 2018/19 and areas of search for savings for 2019/20-2020/21 and suggest any amendments or potential alternatives that should be explored; and
- fine tune the scrutiny committee's work programme to ensure the Committee is in the best position to contribute to the ongoing RPPR process.

Appendix 1 contains extracts from the 10 October Cabinet RPPR report, which detail the updated savings plans for 2018/19 for those services within the remit of this committee and the proposed areas of search for savings across the Council for 2019/20 and 2020/21.

Appendix 2 contains the additional information requested at the September scrutiny committee meeting – previous reports on the impact of savings.

2.3 The **RPPR scrutiny board** will meet on 21 December 2017 to agree detailed comments and any recommendations on the emerging portfolio plans and savings proposals to be put to Cabinet on behalf of their parent scrutiny committees in January 2018. The Chairs of all the scrutiny committees are invited to attend all the scrutiny review boards.

2.4 The **March 2018 scrutiny committees** will review the process and their input into the RPPR process and receive feedback on how scrutiny input has been reflected in final plans. Any issues arising can be reflected in the future committee work programme.

2.5 Running alongside this process, there will be a number opportunities for Members to engage in the RPPR process.

BECKY SHAW
Chief Executive

Contact Officer: Claire Lee, Senior Democratic Services Adviser (01273 335517)

Local Member: All

Background Documents:

10 October Cabinet RPPR Report.

East Sussex County Council

Updated Savings 2018/19 and Estimated Savings 2019/20 & 2020/21

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Department	2017/18 Net Budget £'000s	2018/19 Updated Savings	Estimated Savings Required		
			2019/20 £'000s	2020/21 £'000s	Total £'000s
Business Services/Orbis	20,984	1,396			
Children's Services (excl. schools)	68,757	5,335			
Communities, Economy & Transport	63,384	2,119			
Governance Services	6,414	84			
Centrally Held Budgets	35,835	0			
TOTAL ESCC (excluding ASC/ESBT)	195,374	8,934			
Adult Social Care	39,220	2,359			
East Sussex Better Together	129,491	10,576			
Members' Allowances	866	n/a			
TOTAL	364,951	21,869	17,504	18,725	36,229

MTFP:	
savings adjustment re additional IBCF	445
savings	21,424
	21,869

Adult Social Care: outside ESBT SIP 2018/19 Savings			Gross budget *	Updated Savings
			2016/17	2018/19
Service description	Description of savings proposal	Impact assessment	£'000	£'000
Carers	Stop Adult Social Care contribution to the Better Care Fund	Potential reduction in total funding available for Carer support and services. Direct impact on carer support and therefore Carers ability to continue in their caring role which is likely to result in increased demand and cost pressure on the Community Care budget	1,141	136
Supporting People	Review Supporting People funding for floating housing support services: Home Works for people aged 16-64 and STEPS for people aged 65 and over	Potential reduction in funding will directly impact vulnerable people with housing support needs, including those who have a disability. The services support people who are homeless or at risk of homelessness to achieve and maintain suitable accommodation and build resilience. The impact would be broadly the same on people of all ages as removal of support to people who are homeless or at risk of homelessness is not age specific. Clients with multiple and complex needs are prioritised and vulnerability, need and risk of homelessness are key determinants of eligibility.	1,681	795
Substance Misuse	Review Substance Misuse Contracts	Potential impact on the following areas of work and activity listed below from a 20% reduction in funding. Impacts would also include reduced co-ordination of services and support for people in treatment and recovery who are often very vulnerable and living volatile lifestyles. <ul style="list-style-type: none"> •Coordinating the countywide implementation of the national drug and alcohol strategies •Producing drug and alcohol needs assessments •Commissioning recovery focused drug and alcohol treatment and support services •Coordinating partnership activity aimed at promoting good health and reducing drug and alcohol harm 	68	21
Commissioned Services Subtotal				952
Management and Support	Review of Training and Development; Staffing structures within Strategy, Commissioning, Planning, Performance & Engagement, and Contracts and Purchasing Unit	Review of the provision and access to training and development, with potential impact on support and training to operational staff. Review of staffing and capacity across Strategy and Commissioning, Planning Performance & Engagement and Contracts and Purchasing. Potential impact on staffing numbers.	3,184	716

Adult Social Care: outside ESBT SIP 2018/19 Savings			Gross budget *	Updated Savings
			2016/17	2018/19
Service description	Description of savings proposal	Impact assessment	£'000	£'000
Management and Support	Assessment and Care Management Staffing; Complaints Unit	Review of staffing levels and support available to operational services including operational guidance; translation of national policy into local practice; Review of capacity to respond to complaints in a timely manner.	3,184	57
Management and Support Subtotal				773
Older People Services	Review Day Centre Services	Potential impact on individuals using these services. Reduced access to services for some people in some rural areas, negative impact on independent living and distress caused by changing provision, potential loss of friendship networks, and increased stress for carers.	203	69
Other Adults	Review Discretionary East Sussex Support Scheme (DESSS)	Potential impact on local residents facing temporary financial hardship where the need cannot be met any other way and there is a significant risk to a person's health and safety.	111	56
Learning Disabilities	Review Wealden Community Support Team	Potential impact on individuals receiving community support in their own homes and in the community. The team support individuals to undertake a range of activities within the home and community. Direct impact on people with learning disabilities to find work on a full time, part time or voluntary basis and participate in community activities	350	175
	Review Supported Employment	Potential impact on individuals receiving community support in their own homes and in the community. Direct impact on people with learning disabilities to find work on a full time, part time, voluntary, or work experience basis.	48	24
Directly Provided Services Subtotal				324
Community Safety	Review funding of Community Safety	Potential impact on staffing levels. Risk to partnership arrangements; funding of domestic abuse and other partnership funded services. Potential impact on vulnerable individuals in the local community.	723	208
Community Safety Subtotal				208
Other	Adjustment for additional funding announced in 2017 Spring budget - to be mapped.			102
TOTAL ASC non-ESBT				2,359

* The gross budgets shown reflect the areas against which savings have been proposed.

East Sussex Better Together (ESBT) 2018/19 Savings			Gross budget *	Updated Savings
			2016/17	2018/19
Service description	Description of savings proposal	Impact assessment	£'000	£'000
Adult Social Care: ESBT Integrated Strategic Investment Plan	ESBT whole system redesign and implementation of integrated health and social care commissioning and delivery	The transformation of the health and social care system at a time of increasing demographic pressures and financial constraint will be challenging. The scale and pace of change required across all services, taking account of the full £864m investment in the health and social care system, will present risks. There will be a need to ensure robust democratic accountability and control, the effective discharge of statutory responsibilities, strong financial control and a clear framework of managing the potential risks of unintended clinical and financial consequences. The formal agreements underpinning the integration will seek to mitigate these risks. There will be potential impacts for service users in how they access services and are supported in the future, which have already been subject to extensive consultation.		10,507
Children's Services: ESBT Integrated Strategic Investment Plan	ESBT whole system redesign and implementation of integrated health and social care commissioning and delivery	The transformation of the health and social care system at a time of increasing demographic pressures and financial constraint will be challenging. The scale and pace of change required across all services, taking account of the full £864m investment in the health and social care system, will present risks. There will be a need to ensure robust democratic accountability and control, the effective discharge of statutory responsibilities, strong financial control and a clear framework of managing the potential risks of unintended clinical and financial consequences. The formal agreements underpinning the integration will seek to mitigate these risks. There will be potential impacts for service users in how they access services and are supported in the future, which have already been subject to extensive consultation.		69
TOTAL ESBT			n/a **	10,576

* The gross budgets shown reflect the areas against which savings have been proposed.

** The Partnership did not formally exist in 2016//17, therefore no gross budget shown.

2019/20 & 2020/21 and beyond (extract from 10 October Cabinet report, section 8)

8.1 The level of uncertainty about the Government's plans and funding for services provided by Local Government means that there could be fundamental changes in both the resources the Council has available and its expectations for service delivery, so the process for the latter two years of the Council's medium term financial plan (MTFP) will, necessarily be iterative. Currently, the MTFP is predicated on the need to make £36.2m of savings during these two years.

8.2 If there are no new resources from Government, by 2021/22 the Council will be left with a minimum service offer. It will provide safeguarding for all ages, will still meet critical and substantial need in ASC and will deal with the highest level of need and risk cases in Children's Services. We will continue to use our influence to assist with the economic development of the county, but will not be able to invest directly in the way we have in the past. We will be able to carry out maintenance on our roads so that they are safe for users. Central services will be reduced to a democratic core with minimum support for departments and more self-service. We will not be able to fund early intervention or prevention services in Adult and Children's Social Care or support to schools to improve attainment. We will have to move away from assets management in highways towards more reactive maintenance, leading to long-term deterioration of condition.

8.3 This challenging outlook places a premium on our lobbying work and the need to explore all our options. Cabinet is asked to endorse a renewed focus on commercialisation and income generation, partnership working and the following areas of search for savings in future years, in order that a balanced budget, focused on priorities, can be achieved in 2019/20 and 2020/21:

- All areas of ASC not directly involved in providing for critical and substantial need;
- Standards and Learning Effectiveness Service;
- Remaining Children's early help offer;
- Highways maintenance;
- Public transport and concessionary fares;
- Road safety and school crossing patrols; and
- All support services.

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Report to: Adult Social Care and Community Safety Scrutiny Committee

Date of meeting: 9 March 2017

By: Director of Adult Social Care and Health

Title: Further update on the impact of the 2016/17 savings

Purpose: To further update the Committee on the impact of 2016/17 savings in relation to Supporting People and the Commissioning Grants Prospectus

RECOMMENDATIONS

- 1) The Committee is recommended to consider and comment on the update of the impact of the Supporting People savings agreed for the 2016/17 Adult Social Care budget.
 - 2) The Committee is recommended to note that the data will continue to be monitored and agree that the Committee be made aware of any further significant impacts on an exception basis.
-

1. Background

- 1.1. The Adult Social Care Reconciling Policy, Performance and Resources (RPPR) savings proposals for 2016/17 included significant savings to the Supporting People programme of funding and to Commissioning Grants Prospectus (CGP) funded support.
- 1.2. A report on the impact was considered by the Committee in September 2016. As the implementation was still at an early stage, the Committee requested that a further update be provided for its March meeting.
- 1.3. In preparing this report we have reviewed relevant data, such as referrals to related services, complaints and provider feedback. The review was carried out in February 2017.
- 1.4. Please note that there is no updated information to report on the Commissioning Grants Prospectus (CGP) savings.

2. Supporting People savings

- 2.1. The Supporting People savings proposals, which came into effect from 10 May 2016, were:
 - Sheltered housing schemes: Removing 100% of Supporting People funding.
 - Extra care housing schemes: Removing 100% of Supporting People funding.
 - Home Works visiting support service: Removing 8% of Supporting People funding to save £300,000. This was a reduction on the original proposed saving of £835,000.
 - Refuge service accommodation based schemes: Removing 20% of Supporting People funding to save just under £80,000.

3. Supporting People: Sheltered housing

- 3.1. As previously reported, we have seen an impact of the removal of funding on the STEPS service, with 23 referrals from previously Supporting People-funded sheltered housing services made in Quarter 1 of 2016/17. We have seen a similar level of referrals

from Q2 up until February 2017, with 47 referrals from sheltered housing to the STEPS service.

3.2. The impact on Home Works from sheltered housing has been limited, as would be expected as Home Works supports clients aged 16-64. There were 3 Q1 referrals and a further 3 from Q2 up until February 2017.

3.3. Adult Social Care no longer has a contractual relationship with any sheltered housing providers, but we will continue to monitor referrals and respond to complaints where relevant.

3.4. There were no complaints relating to sheltered housing during the period Aug 16 to Jan 17. There was a Counsellor enquiry about a concern that withdrawal of funding for a support worker had directly affected a resident's end of life care.

4. Supporting People: Extra care

4.1. As reported in September, we worked closely with providers to manage the removal of Supporting People funding for a scheme manager at each extra care scheme.

4.2. In Quarter 1 2016/17, STEPS received 2 referrals from previously Supporting People-funded extra care schemes. From Q2 up until February 2017, STEPS received a further 4 referrals from extra care schemes. There weren't any referrals to Home Works.

4.3. There were two complaints about extra care during the period Aug 16 to Jan 17. Both related to the same provider who is contracted to provide care services at some of the schemes.

5. Supporting People: Home Works

5.1. As reported last time, the funding reduction has seen a decrease of support hours provided by the service per week and a reduction in staffing levels.

5.2. Demand levels on Home Works continue to be high. Between Oct 16 and Feb 17, the service received 3,107 referrals, of which 1,864 were accepted. Of the referrals that were not accepted nearly half would have been accepted if the service had capacity (605 of 1,243).

5.3. The service is prioritising referrals from statutory services and resourcing is based on deprivation and need within size of population. As a result, the number of self-referrals that are being accepted has reduced (dropping from 40% of the total to 30%).

5.4. Where people aren't eligible for the service, signposting will be provided if appropriate. Where eligible applicants aren't accepted due to low need and capacity issues, they are signposted to well-known agencies who may meet their need. For example, local authorities and organisations which provide advice about benefits.

5.5. The long term impact of the capacity issues could be that more people present to statutory services, but this is not monitored due to the resource that would be required to do so.

5.6. There were no complaints relating to Home Works during the period Aug 16 to Jan 17.

6. Supporting People: Refuges

6.1. As reported in September, we have worked with the provider to agree a revised staff structure and the outcomes that can be achieved with fewer resources.

6.2. Managerial posts were reduced by 50%, meaning there is less capacity for multi-agency work and collaborative work. Managers also have to cover for operational sickness

and leave. The loss of the complex needs worker means less one-to-one work with women with complex needs and a negative impact on outcomes in respect of offending behaviour and substance misuse. There is also less capacity for work linked to self-esteem and healthy relationships.

6.3. There were no complaints relating to Refuges during the period Aug 16 to Jan 17.

7. Conclusion and reasons for recommendations

7.1. Home Works is experiencing considerable demand and is prioritising referrals from statutory services. Between Oct 16 and Feb 17 this led to 40% of referrals not being accepted.

7.2. Refuges have seen an impact on their capacity to take part in multi-agency work and some of the support they can offer to residents.

7.3. The Committee is recommended to consider and comment on this report. It is also recommended to note that the data will continue to be monitored and agree that it will be made aware of any further significant impacts on an exception basis.

KEITH HINKLEY

Director of Adult Social Care and Health

Contact Officer: Samantha Williams, Assistant Director Tel no: 01273 482115

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Work Programme for Adult Social Care and Community Safety Scrutiny Committee



Future work at a glance

Updated: **November 2017**

This list is updated after each meeting of the scrutiny committee.

Items that appear regularly at committee	
<p>The Council's Forward Plan</p>	<p>The latest version of the Council's Forward Plan is included on each scrutiny committee agenda. The Forward Plan lists all the key County Council decisions that are to be taken within the next few months together with contact information to find out more. It is updated monthly.</p> <p>The purpose of doing this is to help committee Members identify important issues for more detailed scrutiny <i>before</i> key decisions are taken. This has proved to be significantly more effective than challenging a decision once it has been taken. As a last resort, the call-in procedure is available if scrutiny Members think a Cabinet or Lead Member decision has been taken incorrectly.</p> <p>Requests for further information about individual items on the Forward Plan should be addressed to the listed contact. Possible scrutiny issues should be raised with the scrutiny team or committee Chairman, ideally before a scrutiny committee meeting.</p>
<p>Committee work programme</p>	<p>This provides an opportunity for the committee to review the scrutiny work programme for future meetings and to highlight any additional issues they wish to add to the programme.</p>

Future Committee agenda items		Author
15 March 2018		
Health and Social Care Connect update	A report providing an update on the performance to date of the Health and Social Care Connect (HSCC).	Keith Hinkley, Director of Adult Social Care and Health
Services to prisons (post Care Act)	A report on the Services to prisons (post Care Act).	Sam Williams, Assistant Director of Planning, Performance and Engagement
Reconciling Policy, Performance and Resources (RPPR) 2018/19 – March	To provide the Committee with an opportunity to review its input into the RPPR process for 2018/19 and suggest improvements to the process.	Becky Shaw, Chief Executive
June 2018		
Association of Directors of Adult Social Services (ADASS)	A report on the Association of Directors of Adult Social Services (ADASS) peer review of safeguarding in East Sussex.	Keith Hinkley, Director of Adult Social Care and Health
Annual Review of Safer Communities Performance, Priorities and Issues	To update the Committee on performance in relation to safer communities in 2017/18 and the priorities and issues for 2018/19 that will be highlighted in the Partnership Business Plan. The report will also include an update on how new partnership arrangements are working and relationships with Joint Action Groups.	Sam Williams, Assistant Director of Planning, Performance and Engagement

Current scrutiny reviews and other work underway		Indicative dates
East Sussex Better Together (ESBT)	Joint Scrutiny Board established with representatives from two other scrutiny committees to consider the ESBT programme and specific policy and service developments arising from it.	Board to meet 11 December 2017
Connecting 4 You (C4Y)	Joint Scrutiny Board established with representatives from two other scrutiny committees to consider the C4Y programme and specific policy and service developments arising from it.	Board to meet 11 December 2017
Reconciling Policy, Performance and Resources (RPPR) Board	<p>A Board comprising all Members of the Committee due to meet to comment on:</p> <ul style="list-style-type: none"> • The Adult Social Care Departmental Portfolio Plans • The draft budget for the 2018/19 financial year • The Older People's Day Opportunities Strategy due to be considered by the Lead Member for Adult Social Care and Health on 21 December 2017 	Board to meet 21 December 2017

Potential future scrutiny work (Proposals and ideas for future scrutiny topics appear here to be prioritised in due course)

- **Adult Social Care Training offer** - The broader ESCC training offer covers core statutory training and opportunities to develop practice, tiered from unqualified staff new to the sector through to qualified social workers. The Committee has requested a report on the ASC training offer to be circulated for information.

Enquiries: Member Services (Democratic Services and Scrutiny)

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