

Adult Care and Well Being Overview and Scrutiny Panel

Tuesday 6 November 2018, County Hall, Worcester-10.00am

Present:

Minutes

Mrs J A Brunner (Chairman), Mr R C Adams, Mr T Baker-Price, Mr A Fry, Mr P B Harrison, Mrs E B Tucker (Vice Chairman), Ms S A Webb, Mr P Middlebrough, Mrs M A Rayner, Mr M Chalk, Mr C Bloore, Mr R P Tomlinson and Mrs F Smith

Also attended:

Mr A I Hardman, Deputy Leader and Cabinet Member for Adult Social Care
Mr J H Smith, Cabinet Member with responsibility for Health and Wellbeing

Avril Wilson (Interim Director of Adult Services),
Dr Frances Howie (Director of Public Health),
Michael Hudson (Chief Financial Officer),
Samantha Morris (Scrutiny Co-ordinator) and Jo Weston (Overview and Scrutiny Officer)

Available Papers

The members had before them:

- A. The Agenda papers (previously circulated);
- B. Presentation handouts (circulated at the Meeting)
- C. The Minutes of the Meeting held on 12 September 2018 (previously circulated).

(Copies of documents A and B will be attached to the signed Minutes).

292 Apologies and Welcome

Apologies had been received from Mr P Grove.

The Chairman welcomed everyone to the meeting, including Members from the Health Overview and Scrutiny Committee (HOSC) and Lead Member for Crime and Disorder, who had been invited to participate in the joint discussion of reviewing the budget position for Adult Services and Public Health.

293 Declarations of Interest

None.

294 Public Participation

Mrs Anne Duddington, a Parent Carer of an adult with learning disabilities, read out a statement to the Panel.

In summary, Mrs Duddington raised three points:

- The importance of co-production when discussing

future services to share experiences and establish how any change would impact on lives and how everyone can work together to find pragmatic solutions

- Carers were extremely concerned to read that the number of Learning Disability Partnership Board meetings would be cut in half from 6 to 3 a year and that most of the sub groups would also be cut
- The above does not fulfil the principle of co-production as defined in the Care Act 2014.

The Chairman thanked Mrs Duddington for her participation and promised a written response.

295 Confirmation of the Minutes of the Previous Meeting

The Minutes of the Meeting held on 12 September 2018 were agreed as a correct record and signed by the Chairman.

296 Budget Scrutiny: Reviewing the Budget Position for Adult Services and Public Health

By way of introduction, the Director of Adult Services highlighted some facts from the previously circulated presentation, mainly:

- At the end of Period 5 (end of August) there was a £15.2m overspend out of £125.4m net service Budget. Additional savings had been identified to reduce the overspend to £14.3m
- The population of Worcestershire was 583,491. 77,377 were aged 65-74 and 56,678 were over 75, meaning that nearly one in four were over 65
- The Council's 2018/19 budget for Adult Social Care was £187.671m
- £97.036m was spend relating to older people and £60.083m was spend relating to adults with a learning disability
- Increasing numbers of adults were requiring care, not only due to an ageing population but also due to people who had previously funded their own care becoming eligible for care due to depleting resources and young adults with disabilities whose own parents were becoming infirm
- Costs were increasing, ranging from market forces such as the national minimum wage and fuel costs, to adults living longer with more complex needs and requiring more intensive care
- It was important to better forecast demand and capacity, set out key priorities and work with the market to provide a position statement.

In the ensuing discussion, the following main points were raised:

- Whilst Members understood the current position and the continual shift towards promoting independence, they were keen to know what any changes would mean to residents. In response, it was suggested that whilst making savings, every effort would be made to protect front line services. However, as a result, back office changes may result in response times being slower
- The new model of social work (3 Conversation Model), had already seen some success and there would be a shift in collective community based services providing a greater offer than at present. In addition, increased information advice and guidance would be available as self-help tools
- The Panel was delighted to note additional central Government funding, however, agreed that a long term national solution was required
- In relation to staff morale, it was reported that there was some nervousness in back office functions, but it was important to have honest discussions with those affected. Morale was good in the locality teams and learning disability teams
- Everyone agreed that the population needed to focus on prevention, to stay healthy and independent for longer. It was reported that there was a good take up of NHS Health Checks in the County, designed for those aged 40 to 74 to identify early signs of conditions such as diabetes, stroke, heart or kidney disease. However, there was a drop in childhood immunisations, such as measles, which was a cause of learning disability
- A Member asked about the benefit of assistive technology to be informed that this was a fast growing market. The Director added that the next development would be the use of the data from the technology, such as knowing that a person is dehydrated and alerting them to have a drink. When asked whether technology saved money, it was reported that it wholeheartedly did
- One Member asked what could be learned from Japan, which had the highest proportion of people aged 100+, to be told that self-care and a lower calorie intake helped, whereby Japanese people were recommended 80% of the UK recommended calorie intake
- The County Council was awaiting the Government's Green Paper on Adult Social Care and the responses to it
- One Member questioned why the Commissioning Strategy was only until 2019, to be informed that it was due to the market position statement being

developed, which would in turn inform future strategies.

In relation to specific budget monitoring, as at August 2018, the Chief Financial Officer (CFO) reiterated that in 2018/19 a £15.188m overspend in Adult Social Care was forecast. Reasons included the growth and complexity of care packages and the delay in achieving savings targets, such as with the 3 Conversation Model, due to lack of clear data. In addition, Directorate Reserves had been used in previous years to mitigate overspend and demand pressures, but these were now fully committed.

The Council acknowledged that the overspend would not be able to be clawed back by the end of the financial year. However, additional in year savings had now been identified, resulting in a new forecast of £14.3m overspend.

There was an ongoing focus the size and shape of the Council going forward, whilst being mindful of meeting statutory commitments.

Members raised the following main points:

- There was general agreement that the issues faced in Worcestershire were replicated nationally and it was hoped that the Government's Green Paper would address some concerns
- The Panel hoped that the distribution of costs between health and social care was fair, with the CFO reporting that a true open book policy was required for transparency as health economy partners were part of the same system and everyone needed to work together to provide an integrated health and social care service
- One Member asked about the Council Tax precept to be informed that, if increased, it would provide a one off investment, however, there needed to be a national solution to allow for long term planning rather than one off grants
- The Cabinet Member reported that the system had to change. A recent national poll had found that only 2% of respondents thought there was a problem with adult social care. He went on to say that an information piece was required to promote that care was not free and discussions had to place across the generations
- Discussions had taken place previously on whether to establish a Council owned domiciliary care company, however, there was not enough self-funded care packages to make it viable

- The next stages were to stabilise the budget and manage the business by promoting prevention.

The Director of Public Health reminded Members of her areas of responsibility, mainly in relation to prevention and the statutory duty of improving health and wellbeing and narrowing health inequalities across the County.

Members noted that financially, the Directorate was predicting a small surplus as of August 2018.

In the general discussion that followed, the main points included:

- The national Public Health Ring-Fenced Grant (PHRFG) had been reducing year on year and was time limited, yet savings had to be achieved whilst delivering statutory duties
- Financially, there was a risk when the ring-fence was removed, in 2020, as significant use was made of the grant outside core areas
- There was now the opportunity to refocus on prevention services and work with partners to focus combined efforts to deliver statutory duties
- One key message was to re-engage with the community about personal and community responsibility
- Members were concerned about the demand for services in the future if the house building proposed for the County was delivered. The Director quoted that around £70,000 had been invested into planning teams to ensure supplementary planning guidance included standards for homes, greenspaces etc
- The Cabinet Member added that conversations were due to take place with Planners to ensure access to services, such as hospitals, were taken into consideration
- There was a general agreement that Public Health could have a stronger role in planning matters. The Director was pleased to report that objections had been raised at, and acted upon, recent District Council Licensing Committees in relation to the sale of alcohol and fast food
- In response to a query about funding for domestic abuse, it was reported that funding was delegated to District Councils
- One Member questioned the level of joined up working with other agencies, such as bus companies, citing that if bus services did not run, there was an adverse effect on health and

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Staffing**

wellbeing due to increased isolation

- A question was asked about what would happen if a service was no longer provided, such as 'quit smoking'. In response, the Panel was advised that there would need to be closer monitoring and action taken if figures changed.

The Chairman thanked everyone for a very useful discussion and summarised the following actions:

- The Panel requested regular updates on the Business Plan, especially on Provider services, financial forecasting and partnership working
- The Panel supported the Cabinet Member in his wish to put pressure on central Government over adult social care funding
- The Director of Public Health was congratulated for the forecasted surplus and the Panel hoped that partnership working would continue for prevention services

Further information was sought on how cost sharing with the NHS was undertaken, to establish what proportion was social care and what was health.

The Director of Adult Services had provided an overview of Adult Services absence as part of the Agenda and highlighted the following points:

- County Council recruitment in adult social care was less problematic than in children's services, however, external Providers continued to report their difficulties
- Providers currently had 130 vacancies for nursing or social care assistants across the County. Reasons cited included challenging circumstances, a low wage, the suggestion that caring as a profession was not attractive and more recently the uncertainty over EU workers being able to stay after Brexit
- There was concern that generally, the age profile of the workforce was older
- Nursing was now a graduate profession
- In response to a question about the Council promoting a career in caring, the Director highlighted the Council's social work academy, the opportunity to study for a degree and the corporate adverts that promote Worcestershire as a beautiful place to live and work
- Members asked about levels of pay, to be informed that the national living wage was rising

each year, however, nationally the sector was not well paid

- The Director suggested that to overcome some of the challenges, there needed to be a societal change and promote that a career in care is valued with the opportunity to change someone's life
- The Cabinet Member added that the care industry in the County employed over 15,000 people.

In relation to absence rates across the Directorate of Adult Services, it was acknowledged that the reported average 14.43 days of absence per person during 2017/18, was considerably higher than every other Directorate, with the County Council average being 8.71 days.

In a general discussion, the following key areas were noted:

- The Director suggested that those working in social care would perhaps be more susceptible to neck and back injuries and that it was important to establish whether everyone was undertaking manual handling correctly and organise training if required
- In response to a question about the level of support available to employees, the Director stated that a new Attendance Policy had been recently introduced, which included the types of support available to colleagues, including occupational health
- Managers needed to understand the issues and respond accordingly, especially as Stress was another key reason for absence. Return to Work interviews were carried out and sometimes exit interviews were undertaken
- When asked about the impact on services due to absence, the Director stated that there should always be sufficient staff to cover the service
- The Panel requested further information on the reasons for absence and the new Attendance Policy.

The meeting ended at 12.30 pm

Chairman