

Notes of the Informal Adult Care and Well Being Overview and Scrutiny Panel

Online only

Thursday, 8 July 2021, 10.00 am

Present:

Cllr Shirley Webb (Chairman), Cllr David Chambers, Cllr Lynn Denham, Cllr Paul Harrison, Cllr Matt Jenkins, Cllr Adrian Kriss, Cllr Jo Monk (Vice Chairman) and Cllr James Stanley

Also attended:

Cllr Adrian Hardman
Cllr Richard Morris
Cllr Tom Wells
Shirley Evans, University of Worcester
John Taylor, Healthwatch Worcestershire

Paula Furnival, Strategic Director of People
Kerry McCrossan, Assistant Director for Adult Social Care
Hannah Perrott, Assistant Director - Communities and People
Steph Simcox, Head of Finance
Samantha Morris, Scrutiny Co-ordinator
Emma James, Overview and Scrutiny Officer

Available Papers

The members had before them:

A. The Agenda papers (previously circulated);

(Copies of document A will be attached to the signed Minutes).

1 Apologies and Welcome

The Chairman welcomed everyone to the meeting and explained that the meeting was an informal one, and being held remotely due to ongoing Covid restrictions and the current Government guidance to work from home. Therefore the meeting was not classed as a public meeting but was being livestreamed on Youtube so that members of the public could observe.

There were no apologies.

2 Declarations of Interest

Regarding Agenda item 4 (Dementia Centres), Cllr Lynn Denham declared an other disclosable (non pecuniary) interest as she was Chair of Worcester Dementia Action Alliance which had involved setting up dementia centres.

3 Strengths Based Approach to Social Work

In attendance for this item were:

- Paula Furnival, Strategic Director of People
- Kerry McCrossan, Assistant Director for Adult Social Care
- Hannah Perrott, Assistant Director for Communities
- Adrian Hardman, Cabinet Member with Responsibility for Adult Social Care

The Strategic Director of People introduced the report, which was a very important area, since social work was so much more than assessing people and criteria and social workers worked with complex family situations; the strengths based approach was about the rich conversations involved.

The Assistant Director for Adult Social Care summarised the main points of the report, which explained how the Strengths Based Three Conversation (3C) approach had been introduced in 2017, and the subsequent refresh in 2020 as part of the People Directorate Strategy. The 3C approach was very much the obvious way in which social workers worked with and listened to people and found meaningful support for them within local communities which built resilience into their lives.

In 2020 an independent review had been commissioned, to look at how to maintain momentum, resulting in a set of actions to help embed the 3C approach, including the Council's work with partners.

The Chairman invited questions and the following main points were raised:

- Panel members felt the 3C approach was very positive.
- When asked whether any areas of the approach were working less well, the Officers pointed to the importance of listening to residents and staff and data intelligence was being developed to improve this. Mechanisms were also in place to understand more about the fluctuations in compliments and complaints. One big area of change was trying to ensure first conversations happened as soon and as locally as possible, thereby reducing the need for escalated help.
- In terms of co-production, it was explained that the original 3C launch involved considerable time reaching out to a whole range of organisations which had continued as the model was developed. Feedback mechanisms had been developed with Healthwatch, although this needed further work.

- The dip in numbers of conversations occurring in April/May 2020 were due to Covid, however a significant number of welfare checks had been done and thousands of people had been contacted during these periods, which were not recorded on the database.
- The Officers acknowledged the need to bring the number of days to allocation (the duration between contact and time allocated to a worker for new referrals) figures for those with learning disabilities or mental health into line with other client groups, nonetheless 11 days for 'conversation 1' was a significant improvement on historical ways of working and the return of mental health social work staff to the Council would provide greater oversight. The Directorate did not want anyone to be waiting and did not operate waiting lists which some councils did, therefore a lot of resources was being invested in order to improve allocation times.
- The Officers agreed the importance of clear information for the public, and an example was a leaflet on direct payments. Information was provided on the internet but also by telephone and face to face support.
- When asked what individuals could be missed and end up in crisis, the Strategic Director explained that the People Directorate Strategy was underpinned by the need to reach people earlier and to focus not just on critical care. The Here2help system was part of this work, and it was important to build staff awareness across all sorts of settings so that they knew how to respond to different issues.
- The Chairman asked whether more public roadshows were planned and was advised that there were no current plans. The Cabinet Member with Responsibility for Adult Social Care agreed that the roadshows had been very successful in some areas although did require a lot of effort; Covid restrictions prevented such events but more may be planned in the future.
- The Officers explained there were various means to reach those who may be reclusive, for example through Here2help volunteers. Work with health partners and the voluntary sector (through the Integrated Wellbeing Offer) looked at how to identify such people and how the community could help. There was increasing demand through Here2help and teams were all trained from a wellbeing perspective and volunteers matched accordingly.

4 Dementia Centres

In attendance for this item were:

- Paula Furnival, Strategic Director of People
- Hannah Perrott, Assistant Director for Communities
- Dr Shirley Evans, Lead for this work (University of Worcester)
- Adrian Hardman, Cabinet Member with Responsibility for Adult Social Care

Dr Shirley Evans from the association for Dementia Studies, summarised the main points of the presentation included in the agenda. Dementia was a disease of the brain; numbers of sufferers were increasing as well as needs for support.

Dementia meeting centres were based on a research evidence base dating back 20 years, resulted from a collaboration between local stakeholders and were for people with mild to moderate dementia living at home and had a focus on both the person with dementia and the family carer. People attending experienced better self-esteem, feelings of happiness and sense of belonging and family carers felt better able to cope.

Since Covid, there had been 'an explosion' of interest across the country, with four new meeting centres being funded in Worcestershire this year.

The Worcestershire Meeting Centre Community Support Programme included £540,000 from Worcestershire County Council, and there were nine centres with up to £20k per meeting centre per year for three years. An Investment Panel met regularly to review progress and investment with the meeting centres, to determine sustainability and access to further funding. A key aspect was to have coverage across Worcestershire.

The Chairman invited questions and the following main points were raised:

- Panel members agreed the dementia meeting centres were a brilliant idea.
- A member asked whether the centres reached out to a wide demograph, for example those with less family support and Dr Evans explained that they were required to demonstrate ongoing community engagement, although Covid had had an impact.
- When asked about prevention work and barriers within the community, Dr Evans referred to the successful Leominster dementia-friendly community, which demonstrated the potential for synergy between a centre and its community. Lockdowns had presented a challenge but dementia friendly communities was an area to be taken forward through training and education.
- Cllr Denham, who had been involved with dementia centres through her role as Chair of Worcester Dementia Action Alliance asked about the sustainability and capacity of centres, since while she absolutely welcomed the Council's funding and vision, the work was challenging and the charge, for example £25 a day at the Worcester Centre, could represent good or bad value, depending on an individual's circumstances. Regarding capacity, the Strategic Director explained that Covid had presented difficulties however it was important to continue with this programme and from experience, further enrichment would follow. Whilst day care could cost from £60-80 a day, she acknowledged that it was important not to exclude those for whom £25 was a lot. The Assistant Director for Communities explained that sustainability was an essential part of the work with centres and decisions about where to direct funding. Centres were also being helped to look at economies of scale. Dr Evans added that she was also very aware of sustainability, and that the centre at Droitwich had been sustained for six years, and Leominster for five.
- The Cabinet Member with Responsibility for Adult Social Care explained that the ambition was to link dementia centres to Primary Care Networks.

- Those involved in Dementia Centres were trained in the preventative role of nutrition, interaction with the community etc.
- The Panel Chairman agreed the importance of working with organisations to try to keep costs down, something she had been involved with in Bromsgrove.

In thanking everyone present, the Panel Chairman asked whether Panel members could visit a dementia Centre such as the one at Leominster, and it was agreed that this would be organised once Centres were again able to accept visitors.

5 Performance and In-Year Budget Monitoring

In attendance for this item were:

- Paula Furnival, Strategic Director for People
- Kerry McCrossan, Assistant Director for Adult Social Care
- Steph Simcox, Head of Finance
- Adrian Hardman, Cabinet Member with Responsibility for Adult Social Care

In place of the Principal Management Information Analyst, who was unable to attend, the Assistant Director provided a summary of the performance information relating to quarter 4 (January to March 2021).

Indicator: Long-term support needs of younger adults met by admission to residential and nursing care homes, per 100,000 population (ASCOF 2a (i)) – the data for Worcestershire was 14.4 (49 young people) for young people in the year to end March 2021, against comparator authorities 14.7 although benchmarking data would only be available from the Autumn.

Indicator: Long term support needs of older adults met by admission to residential and nursing care homes (ASCOF 2a (ii))

At the end of last year, numbers had previously been much higher, and had reduced significantly, however had since increased and it was important to note that a number of people had been discharged from hospital particularly in March as ‘discharge to assess’ and had been in a care home for a period of around six weeks and during Covid, these timescales had been quite significantly extended which had led to more people remaining. Certainly, the Council would continue its work to work with individuals and families to support people to maintain their independence at home. As part of system-wide work to reduce these numbers, there was also a strong focus on early advice and information so that people were aware of their options.

Indicator: Proportion of people with no ongoing social care needs following a reablement service (ASCOF 2d) – performance for 2021 was 76%, a slight drop but comparably very good during the pandemic and the fact that community reablement had only started in 2020.

Indicator: Older people remaining at home following hospital discharge and a reablement service (Ascof 2b) - performance for 2020-21 was 81.8, slightly lower than the previous year but a good result during the pandemic.

Indicator: Annual care package reviews completed in those 12 months or whose review is in progress at that point – this very important priority had a target of 95%, with current overall performance of 85.8%; there was more work to do and quite a difference across different client groups, with improvements being sought for mental health and learning disabilities. It was important to note that many welfare checks had also been carried out and these were not captured here.

The Chairman invited discussion and the following main points were raised:

- The Officers undertook to check whether there was any data available about the speed of deterioration of those with dementia living in care homes compared to in their own homes.
- The format of the information provided was praised.
- The Officers confirmed that the Directorate regularly liaised with colleagues at a regional and national level to share learning and to pursue any examples of excellence, and Officers undertook to check whether there were any particular local authorities which Scrutiny could learn from.
- The Cabinet Member with Responsibility (CMR) for Adult Social Care explained that he also kept abreast of comparison data with neighbouring areas.
- When asked about the implications for greater support (including to address long Covid) within the community for increased numbers of people with no on-going needs following reablement, the Strategic Director advised that Worcestershire had previously had high numbers of people admitted to residential/nursing care due to a lack of care in the community. However, agreement had just been reached with the Clinical Commissioning Group to invest in reablement and a £4m growth in the Better Care Fund would be entirely invested, which was tremendous, and for which substantial recruitment would take place. This would be an area of focus and a heavy workload was anticipated. The local service response for long Covid was led by health and included a range of support.
- A member referred to the very different patterns of admissions to permanent care pre and during the pandemic and sought assurance about what had happened to those who had not gone into care. The Officers explained that pathways and funding streams had changed during COVID-19 as well as behaviours and the continued trend would not necessarily be clear for some months. Care home vacancies were high, regionally and nationally and Officers predicted more people would continue to receive care at home, although whether this was a long-term trend was not yet clear. There had been some deaths but no one had been 'lost'.

- Care homes were at risk both regionally and nationally, and while the care home market in Worcestershire was buoyant because of demographic assets, individual care homes were more at risk as grant funding during Covid came to an end. The Officers viewed this change as positive and it was important that people were able to make decisions about their care in an informed way, nonetheless the Council worked with the market about care requirements.
- In response to a question, Officers would contact Worcestershire Children First to request information about the impact on young people who may have increased caring responsibilities during Covid.

Financial Update: Year End Position 2020/21

The Head of Finance summarised the information included in the Agenda and explained that the indicative position was a £300k underspend, compared with a £1m overspend in 2019/20, largely due to transformational change from the People Services Strategy to support ongoing efficiencies and demand management.

The Chairman invited discussion and the following main points were made:

- The Directorate was congratulated on balancing the budget.
- Regarding the level of confidence in balancing the budget post Covid, the Head of Finance agreed that demand forecast was often difficult and especially so after a very untypical 12 months, nonetheless the Directorate was investing in services and looking at different ways of service delivery and demand management. She therefore felt the Directorate was in a very good place with good plans and leadership, although the situation would continue to be monitored.
- A member sought assurances about capacity to respond to potential increased demand for mental health services and the Director advised demand had already increased from both adults and children, and that Officers were working closely with health colleagues. Part of the integrated wellbeing offer was to promote local connectivity, since mental health did not start at the crisis stage, and this was not yet as good as it could be. The change in delivery of adult social care mental health provided the Council with greater perspective and included crisis care. The long-term impact of Covid remained to be seen but the Council was ahead of the curve.
- Whilst the budget underspend was an achievement, a member asked how the Council compared with others and the Head of Finance would see if comparative analysis could be incorporated for the September update.

6 Update on Customer Feedback

In attendance for this item were:

- Paula Furnival, Strategic Director for People
- Kerry McCrossan, Assistant Director for Adult Social Care

- Adrian Hardman, Cabinet Member with Responsibility for Adult Social Care

The Assistant Director for Adult Social Care referred to the agenda report, and the information on customer feedback which had been requested by the Panel. Councils were required to carry out annual surveys of people they provide services to and a biennial survey of carers, and there was set guidance for questions, with all responses guaranteed to be kept confidential, the only exception being if someone was unsafe.

Due to COVID19 the carers survey which was due to take place in 2020-21 had been postponed nationally by one full year and would now take place in the Autumn. For the same reason the survey of service users was made non-mandatory and in Worcestershire it was decided that it was not appropriate to run the survey, and the next one would be in January 2022.

Survey responses for Adult Social Care Outcomes Framework (ASCOF) measures, were positive, with most areas in line or better or slightly behind comparative areas.

Survey responses from carers for ASCOF measures were particularly good for overall satisfaction of carers with social services but were slightly behind for some other areas. An additional online survey would be run to gain more up to date feedback on which to help base future provision.

The Chairman invited questions and the following main points were raised:

- Whilst it was not possible to know any areas of dissatisfaction within the overall figure, the Officers would check if the national surveys allowed this to be asked in future questionnaires. What the Directorate did have was the benefit of broader engagement and learning.
- The Officers would check whether the Council provided any assistance to those with dementia to complete the survey, however carers and staff were involved, as was good practice.
- Panel members congratulated the Directorate on the overall level of satisfaction
- Details of the number and rate of responses would be verified.
- A Panel Member suggested it would be helpful to look at how carers interacted with the system, which the Directorate would be happy to provide (subsequently added to the Panel's work programme).

It was confirmed that details on complaints and compliments would be provided to the Panel for the September meeting.

7 Work Programme

The following topics were suggested:

- How the Council works with carers
- Overview of Learning Disability Services

The meeting ended at 12.18 pm

Chairman