

Minutes of the Adult Care and Well Being Overview and

Scrutiny Panel

County Hall, Worcester

Friday, 14 January 2022, 10.00 am

Present:

Cllr Jo Monk (Vice Chairman), Cllr Lynn Denham, Cllr Paul Harrison,
Cllr Matt Jenkins, Cllr James Stanley and Cllr Emma Stokes

Also attended:

Cllr Adrian Hardman, Cabinet Member with Responsibility for Adult Social Care
Simon Adams, Healthwatch Worcestershire

Michael Hudson, Chief Financial Officer
Steph Simcox, Deputy Chief Finance Officer
Kerry McCrossan, Assistant Director for Adult Social Care
Samantha Morris, Scrutiny Co-ordinator
Emma James, Overview and Scrutiny Officer

Available Papers

The members had before them:

- A. The Agenda papers (previously circulated);
- B. The Minutes of the Meeting held on 15 November 2021 (previously circulated).

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

411 Apologies and Welcome

Cllr Jo Monk welcomed everyone to the meeting and explained that the Chairman of the Panel, Cllr Shirley Webb was unable to attend, therefore she would be chairing the meeting.

Apologies had also been received from panel members David Chambers, Adrian Kriss and from the Strategic Director for people, Paula Furnival.

412 Declarations of Interest

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Date of Issue: 09 February 2022

None.

413 Public Participation

None.

414 Confirmation of the Minutes of the Previous Meeting

The Minutes of the Meeting held on 15 November 2021 were agreed as a correct record and signed by the Chairman.

415 Budget Scrutiny 2022/23

In attendance for this item:

Michael Hudson, Chief Financial Officer
Steph Simcox, Head of Finance
Kerry McCrossan, Assistant Director of Adult Social Care
Adrian Hardman, Cabinet Member with Responsibility for Adult Social Care

As part of the Budget scrutiny process, the Panel considered the draft 2022-23 budget for areas within its remit. The Chief Financial Officer (CFO) highlighted the main points to note from the draft budget and the medium-term financial plan including:

- The 2022/23 Draft Budget report to Cabinet on 6 January set out the proposed budget, and the discussion with this Scrutiny Panel formed part of broader engagement, with feedback from Scrutiny due to be discussed by the Overview and Scrutiny Performance Board on 26 January.
- The overall net Council budget for 2022-23 was £373.2m, compared to the gross budget for 2021-22 of £349.7m.
- The most significant pressures on the budget included £15.7m for People Services, £10.3m for pay and contract inflation and £5.9m (£7.9m gross) for Worcestershire Children First (WCF) relating to social care.
- Several Government grants had been received for 2022-23 including a further £6.1m in recognition of the pressures in Adults and Children's social care, which totalled £12.6m in additional grant funding.
- The final settlement from the Government was expected in early February.
- There remained an efficiencies programme of £8.1m, of which around £3m had already been identified and for the remainder of the efficiencies, Directorates would look at general good housekeeping of budgets for example staff travel expenses.
- The Panel received a graph benchmarking Council Tax for County Councils in 2021-22 (without Fire). The Panel noted that Worcestershire's average Council Tax (£1,344) was at a lower level

than the average, but highlighted the graph was difficult to breakdown in terms of area.

- An increase in Council Tax of 3.94% was proposed. This comprised 2% ring-fenced for adult social care services, carried forward from 2021/22 plus a further 1% Adult Social care Levy for 2022/23 in order to contribute to existing cost pressures due to Worcestershire's ageing population - together with 0.94% increase to provide financial support to continue to fund investments in areas highlighted by the public as important.
- Worcestershire's Council Tax was likely to remain in the lower quartile when compared with comparable councils.
- The Council's reserves were assessed by the CFO as adequate.

The Head of Finance drew the Panel's attention to the position for Adult Social Care. The £17.1m pressures from demand and growth increases in Adult Care would be funded by the 3% Adult Social Care Council Tax Precept of £8.1m, the increase in the social care grant of £3.5m, the increase in the Improved Better Care Fund income of £0.5m and the Market Sustainability and Fair Cost of Care Fund of £1.6m. Investment in Adult Social Care resulted from detailed assessments carried out in liaison with partners and providers, with staffing costs being a priority for providers. The funding to be bridged was £3.4m and the potential for joint funding with health was being explored.

It was clarified that the People Directorate Service budget summary in the presentation included services from the communities element of the Directorate's work, which would be scrutinised by the Corporate and Communities Overview and Scrutiny Panel.

The Panel appreciated the clarity of the budget presentation which picked out the salient points of the budget report to Cabinet.

During the discussion, the following main points were noted:

- In response to a query about the Council's rationale for the apportionment of the Adult Social Care Levy which, when Government had announced had said could be spread across 2021-23, capped at 3%. The Cabinet Member with Responsibility (CMR) for Adult Social Care explained that as a 2% increase in 2021/22 had not in fact been needed but in view of projected increased pressure on budgets further down the line, it was felt that the approach to opt for 1% in 2021/22 and a further 2% levy be applied for 2022/23, was the sensible approach. The Chief Financial Officer advised that nationally, there had been a 50/50 split between some Council's taking the same approach as Worcestershire or taking 3% at the start of the period.
- The Panel discussed with the CMR and Council's officers, the fact that a significant proportion of the Government's settlement for adult social care was in the form of grants. It was understood that many grants had been renewed for several years because of the delays in the Government's plans to reform adult social care funding, which was an unsettling situation when planning services. The Adult Social Care

Reform White Paper had been published recently for Consultation, however the ensuing transition would be a key risk to local authorities.

- The adequacy of the budget and whether there would be any savings incurred from increasing the use of IT and assistive technology when planning for individual care needs was discussed. Officers confirmed that in order to retain an individual's independence, the Council would always consider low level technology early on in the process. Officers also worked with health and district partners closely throughout the planning process. The CMR hoped that the increased use of technology would result in cost saving but thought that there were limitations. The increased role and cost benefit of assistive technology to support people's independence and to complement the role of staff was added to the Panel's Work Programme.
- Responding to a query about cost pressures and the longer-term vision for Adult Services, the CMR advised that he was pretty confident in the demographic models available. He also felt an important point to note was that those funding their own care (self-funders) were the dominant players in the care market, and not the Council.
- It was observed that any impact from the Integrated Care System development on budgets was not anticipated during the first year.
- The CMR outlined that following the recent publication of the Adult Social Care Reform White Paper, which was broadly in step with the Council's approach, the Council would be looking to update its 2018 Strategy and link with the new Corporate Plan.
- It was clarified that the Improved Better Care Fund (IBCF) was specifically for local authority use, whereas the BCF was allocated in liaison with clinical commissioning groups, although the aims of the funds were linked.
- Comment was invited from the Healthwatch Worcestershire representative present (Simon Adams, Managing Director), who welcomed the focus on service users and appreciated the challenges at play. Use of technology required connectivity and he was aware this was also being worked on by the Council.

The Chairman thanked everyone for their contribution and explained that a summary of the panel's main comments would be submitted to the Overview and Scrutiny Performance Board on 26 January.

416 Fair and Transparent Care Project

In attendance for this item:

Kerry McCrossan, Assistant Director of Adult Social Care
Adrian Hardman, Cabinet Member with Responsibility for Adult Social Care

The Assistant Director of Adult Social Care provided a summary of the review of funding arrangements between the Council and Herefordshire and Worcestershire Clinical Commissioning Group (CCG), as set out in the Agenda report, following an earlier overview to the Panel on 15 March 2021.

The Council had initiated the Review in September 2020, which was carried out by a specialist organisation, Liaison Care. A series of engagement sessions had been held with managers to understand fully the current position, and use the findings to agree new and effective ways of working with the CCG to ensure there was fair, equitable and transparent approach to funding of Continuing Health Care (a package of care for people who are not in hospital and have been assessed as having a primary health need), joint packages and S117 cases (aftercare funding designed to cover the cost of meeting all a person's mental health related support needs). Live sample cases were reviewed for 170 service users across these categories.

The aim was also to ensure people regardless of user group had fair and transparent funding through the correct route, to agree simple methods of apportioning costs for joint funding and to ensure best practice in all areas.

The Review had required some challenging discussions, but the Directorate was very pleased with the progress made, as set out in the report - not purely for the budget implications, but for the individuals and families involved where decisions about funding could not be reached and had often gone on for months and months, therefore delaying decisions around organising care.

As a consequence, there had been a significant reduction in inter-agency disputes, an increase in numbers eligible for CHC funding and an increase in fast track funding eligibility. In terms of finance, the Council's income related to CHC has increased by £1.1m and an additional £1.6m one-off income has been achieved for backdated claims/recharges, from reducing and resolving disputes.

An agreement had been made with the CCG that all clients under S117 of the mental Health act 1983 (mental Health and Learning Disabilities) would be funded – as a 60:40 split from 2021/22 with the Council picking up 60% and the CCG 40% for all clients, compared with the previous split of 50:50 split for mental Health clients only.

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

- When asked whether the Liaison report had been shared with councillors, the Assistant Director explained that it had been shared with the Directorate Leadership Team and with health colleagues; due to level of detail it was not appropriate to share the full report more widely, however highlights would be provided to the Panel.
- An independent organisation had been asked to carry out the Review in order to have an independent view on the position and numbers in Worcestershire compared to nationally. The original cost of the review was around £77,000, with a rebate of around £12,000 once it was felt an appropriate point in the Review had been reached. The original contract allowed the Council to receive support on specific aspects in future, if required.
- Whilst processes were not yet as robust as Officers would like, substantial improvements had been made and there was a S117

working group. Delayed reviews was one area of pressure however the Directorate had robust systems to flag up when reviews were due.

- In terms of benefit to an individual receiving S117 funding, the agreement reached between the Council and the CCG had no personal benefits however it was vital those involved knew they were receiving what they were entitled to.
- A Panel member who had previously been involved in CHC appeal panels was aware of the complexity and conflict which had a profound impact on families involved; the Council was to be congratulated for improving this situation.
- It was confirmed that during the Review there had been direct communications with the families involved in CHC funding, and work was in hand to improve information provided on the website and the integration between health and social care.
- The original report to the Panel would be shared, which would help with understanding of the types of funding involved, for example S117 funding, which was specifically for those who had been detained under the Mental Health Act (1983).
- It was confirmed that the S117 Policy would be shared with the Panel and was due to be discussed by Cabinet in February. The S117 Working Group was led by the CCG and Officer representative from the Council was part of the Group.
- Comment was invited from the Healthwatch Worcestershire representative present (Simon Adams, Managing Director), who reiterated the Cabinet Member's comments in really welcoming the Council's work to readdress the realities around CHC and the new Policy. Regarding involvement of patients in development of the Policy, the Director explained this was a question for health colleagues.
- The Healthwatch representative asked whether an equality impact assessment had been done, and the Director advised this would be available from the CCG.
- The data in the report was for Herefordshire and Worcestershire, although data for each could be separated out.
- The Cabinet Member was particularly pleased that the funding arrangements between the Council and the CCG had been clarified before the Integrated Care Strategy was fully implemented.
- A Panel member suggested it would be helpful to review outcomes from the funding review in approximately six months.
- There were key performance indicators built into the system and reported quarterly to NHS England.

The Chairman thanked everyone for their contribution and asked the Scrutiny Officers present to liaise with the Directorate regarding the information requested.

417 Work Programme

The following items were suggested for the Work Programme, which would be incorporated into agenda planning with the Chairman and Vice-Chairman:

- Assistive technology update
- Update on Learning Disability Services following implementation of outcomes from the Council's Review
- Fair and transparent funding - review outcomes in 6 months
- Update on the domiciliary care market

The meeting ended at 11.55 am

Chairman