

**ADULTS SCRUTINY COMMITTEE
 9 DECEMBER 2015**

PRESENT: COUNCILLOR C E H MARFLEET (CHAIRMAN)

Councillors R C Kirk (Vice-Chairman), W J Aron, S R Dodds, B W Keimach, Mrs H N J Powell, Mrs A E Reynolds, Mrs N J Smith and M A Whittington.

Councillors: Mrs P A Bradwell (Executive Councillor Adult Care and Health, Children's Services) and C R Oxby, (Executive Support Councillor Adult Care).

Barry Earnshaw (Chairman and Director of Lincolnshire Care Association) was also in attendance.

Councillor Mrs J M Renshaw attended the meeting as an observer.

Officers in attendance:-

Katrina Cope (Senior Democratic Services Officer), Simon Evans (Health Scrutiny Officer), Samantha Francis (Quality and Development Manager, Business Improvement Team), Glen Garrod (Director of Adult Care), Alina Hackney (Senior Strategic Commercial and Procurement Manager), Steve Houchin (Head of Finance), David Laws (Adult Care Strategic Financial Adviser), Emma Scarth (Commissioning Manager Performance, Quality and Workforce Development) and Pete Sidgwick (Chief Commissioning Officer - Frail, Elderly and Long Term Conditions).

36 APOLOGIES FOR ABSENCE/REPLACEMENT MEMBERS

Apologies for absence were received from Councillors J R Marriott, Mrs A Reynolds and Mrs S M Wray.

37 DECLARATIONS OF MEMBERS' INTERESTS

No declarations of Councillors' interests were received at this stage of the proceedings.

38 MINUTES OF THE MEETING OF THE ADULTS SCRUTINY COMMITTEE
 HELD ON 28 OCTOBER 2015

RESOLVED

That the Minutes of the Adults Scrutiny Committee held on 28 October 2015, be confirmed and signed by the Chairman as a correct record.

39 COMMUNITY SUPPORT PROCUREMENTS

**ADULTS SCRUTINY COMMITTEE
9 DECEMBER 2015**

Consideration was given to a joint report from Pete Sidgwick (Chief Commissioning Officer – Frail Elderly and Long Term Conditions) and Alina Hackney (Senior Strategic Commercial and Procurement Manager – People Services, Commercial Team), which provided the Committee with the background to decisions, activities and outcomes resulting from the current year's Community Support Procurement Programme, which included Homecare Services, Community Supported Living Services and Children with Disability Homecare Services.

The Committee received a joint presentation from the Chief Commissioning Officer – Frail Elderly and Long Term Conditions and the Senior Strategic Commercial and Procurement Manager – People Services, Commercial Team which made reference to:-

- The context for the Procurement exercise;
- The background behind the services, the need for the Council to meet its statutory needs as determined by the Care Act;
- The New Homecare Model - It was highlighted that the new Homecare Model had been designed to address a number of escalating concerns, and to better manage increasing demand in an environment of decreasing budgetary resources;
- Community Supported Living – The Committee were advised as the Community Supported Living operated in a different way to the Homecare Model, a separate procurement exercise was conducted with the establishment of an 'Open Select List', a flexible framework that would retain existing quality and continuity of care to service users; and it also allowed the Council to make strategic sourcing decisions for the future;
- Market Rate – It was reported that Homecare had started from a zero base and that an hourly rate had been constructed taking into consideration all component costs associated with delivering services. Paragraphs 4.1 to 4.5 of the report provided full details of the financial modelling;
- Communication – The Committee was advised that with the Communications Team support, a number of activities had been planned to support the programme. Paragraphs 5.1 to 5.4 of the report provided details of the communications planning;
- Market Engagement – Full details was contained in paragraphs 7.2 to 7.4 of the report presented;
- Governance and Decision Making – It was noted that there had been robust governance arrangements in place to provide the necessary oversight, and carry out the required decision making in line with the Council's Constitution. The Committee was advised of the key decision dates and the governance gateways. Appendix A to the report presented provided the Committee with details of the Community Support Procurement – Governance Overview;
- Tender Process – The Committee was advised that for Homecare there had been a two stage process, Pre-qualification and Invitation to Tender. These had been split into two parts, one for the provision of Adults Homecare, and one for the provision of Children with Disabilities Homecare. The Committee was advised further that bidders had been able to bid for one or both. At the

pre-qualification stage 31 bids had been received (26 for adults only, 3 for adults and children and 2 for children's only), with 24 organisations having been approved to proceed to the stage.

At the Invitation to Tender stage 19 bids had been received for adults and 4 bids for children's.

The Committee was advised that for Adults the top 12 bidders had been allocated zones based on their evaluation scores and preference. There had been total coverage for all zones with 12 individual providers; within the 12 successful bids there had been five collaborative bids, and one bid from a new national provider.

In respect of Children's the top two bids allocated multiple zones. It was noted that midway through the process, one bidder had withdrawn, resulting in all zones being allocated to one provider.

With regard to the Community Supported Living there had been 25 applications received. Once evaluated, 21 had been invited to join the Open Select List. It was highlighted that the 21 successful bidders accounted for 99% of existing service provision, and that there had been no service user impact, as a result of the procurement outcome.

The Committee noted that overall the Tender process had been very robust with lots of dedicated support from the support team. It was highlighted that there had been no legal challenges, and it was noted that full services had commenced on 26 September 2015;

- Homecare Transition – The Committee were advised that the transition for Homecare had been vast and that there had been a three month transition period. Officers advised that overall the process had gone very well with over 3,500 service users being transferred to the new prime providers. It was noted that on the 26 September 2015 there were 29 cases that did not transfer successfully. With close management the number of cases had dropped over the following week with all service users now receiving care. Full details of the Challenges with regard to Transfer of Undertakings Protection of Employment (TUPE); increase in direct payments; relocation and higher demands of service quality were detailed on page 26 of the report presented;
- Service User Experience – The Committee were advised that the Adult Care Quality Team had undertaken a sampling of cases that had transferred to the new provider during the transition period. It was noted that services users had welcomed these calls, and the feedback had been that 65% felt that their experience had been positive; 26% had said it had been negative; and 8% had been unsure. It was noted that a planned quality assurance customer survey of homecare would be taking place in quarter one 2016/17; and then annually thereafter;
- Post Transition – The Committee were advised that Homecare Services had historically been very difficult to source effectively and reliably due to a number of issues which the new model sought to address. It was noted that

**ADULTS SCRUTINY COMMITTEE
9 DECEMBER 2015**

issues remained within the market around improving workforce capacity; staff recruitment and retention, managing rurality and social isolation; and the impact of the National Living Wage. Whilst there continued to be some concern with a small number of prime providers, there was evidence of genuine improvement. It was highlighted that the Lincolnshire Care Association (LinCA) had offered to act in a central support and co-ordination role; and

- Contract Management – The Committee was advised that there was a dedicated officer assigned to prime providers. The prime provider was responsible for ensuring that sub-contracted work was carried out to the same standard as set out in the specification and contract; and that they also met the required standards to deliver homecare. The Committee were advised further that contract management meetings would be held to monitor the performance of the contract.

In conclusion, the Committee were advised that the Community Support Procurement Programme had represented a considerable achievement for the Council. It was felt that the new commercial model now in place allowed for a much closer strategic relationship with its Care Providers, and that the Council was now in a stronger position to be able to deal with the rapidly escalating risks and pressures facing the social care system as a whole.

The Chairman invited Barry Earnshaw, (Chairman and Director of LinCA) to address the meeting. The Committee were advised that the Providers were working together to see what was working well, and also what was not working so well, and how these issues could be overcome to the benefit of the customer. The Committee were also advised that there was to be a joint recruitment fair in the New Year across the County.

During discussion, the following issues were raised:-

- Issues surrounding recruitment and retention;
- The responsibility of Providers to ensure that sub-contractors complied to the required standard;
- TUPE issues surrounding the changeover;
- Ensuring that staff employed had received the necessary training, and had the knowledge required to perform the duties of the job they had been employed to carry out. The Committee were reassured that quality checks would be done to ensure that quality of service provision was maintained. It was also highlighted that Providers wanted to make sure that the service they were providing was the best. A suggestion was put forward for an award/accolade system to maintain quality. The Committee were advised that this would be an issue LinCA would be discussing with Providers at their meetings;
- The impact of Direct Payments on the contract. The Committee were advised that the impact of the Direct Payments scheme would not affect the contract, as Direct Payments were moving forward at a steady rate with regard to older people, and that this trend was being replicated nationally;
- That work was being done to look at the 34% of service users who in effect were not happy with the service they were receiving. It was noted that the

issue highlighted was capacity, as there had been a reduction in the number of staff coming through. Also, the Committee noted that some users had not been aware that their service had changed, as the same people were still providing the service;

- Whether the reduction in service providers from 73 to 12 had reduced the number of homecare hours for service users. The Committee were advised that the Council had a statutory duty to meet assessed and eligible need;
- Cost pressures and whether this could be mitigated. The Committee noted that the Contract Regulations had changed, and that the Council was supporting suppliers in the interim to supply services in rural communities;
- The challenges facing Lincolnshire with regard to rurality and the best way that should be managed;
- That the Committee should receive regular updates from LinCA;
- That the Committee should be updated in the New Year with regard to staffing, recruitment, living wage, travel costs, blockages and the recruitment fair; and
- Some members suggested that representatives from some of the Providers should be invited to attend a future meeting.

RESOLVED

1. That the report and presentation be noted.
2. That the Committee's work programme should include an item co-ordinated by the Lincolnshire Care Association on the issues relating to the recruitment and retention of staff in the care sector.

40 ADULT CARE 2015/16 OUTTURN PROJECTION

The Committee gave consideration to a report from David Laws, Financial Advisor, Adult Care, which asked the Committee to consider the budget outturn for 2015/16.

In guiding the Committee through the report, particular reference was made to:-

- It was highlighted that Adult Care was likely to balance its budget of £145.647m net and was expected to end up with an underspend. The Committee noted that the report presented was the first of two budget monitoring reports that would be presented within the financial year;
- That Adult Care was now organised into the four key commissioning strategies, these being: Adult Frailty & Long term Conditions; Specialist Services (Mental Health, Autism and Learning Disability); Safeguarding Adults; and Carers;
- The role of the Safeguarding Adults Strategy – It was highlighted that the budget was £3.2596m, and it was projected that this would be balanced by the end of the financial year;
- The role and purpose of the Carers Strategy. It was highlighted that the current budget was £2.044m and that it was projected that it would be balanced by the end of the financial year;
- Care Act - It was reported that the Council had received £6.4m additional funding in relation to additional duties and costs due as a direct result of implementing the first phase of the Care Act in 2015/16. £400k of this was not utilised by Adult

**ADULTS SCRUTINY COMMITTEE
9 DECEMBER 2015**

Care and was made available to the Council to address overall budgetary pressures. It was anticipated that the authority would utilise all of this funding in 2015/16;

- Better Care Fund – The Committee were advised that £20m had been allocated to the Council in 2015/16 predominantly in Adult Care and that this would help fund the costs of the Care Act and protect adult care services; and
- Adult Care Savings Programme – It was reported that the 2015/16 budget also included a commitment from the service to deliver £3.388m worth of savings during the financial year from a number of initiatives including a Senior Management and Workforce Development review. It was highlighted that at the end of October 2015, Adult Care had achieved £2.085m in savings, with an expectation that an additional £1.003m will be delivered by the end of the year.

In conclusion, it was reported that this would be the fourth year in succession that Adult Care had achieved an underspend position.

During discussion the Committee made reference to the Agresso IT system, and questions were raised as to when the Agresso was likely to be fully operational. Officers advised that the situation was improving and that all focus was being made on closing year end accounts. The Committee were further advised that issues relating to Agresso were currently being monitored by the Value for Money Scrutiny Committee.

Also some reference was made to:-

- The detail in the report contained on page 35 relating to 'Infrastructure'. The Committee were advised that there was a recruitment problem in Lincolnshire; the challenge was how to retain staff; and
- It was noted that the Mental Health Service was commissioned by the County Council from Lincolnshire Partnership NHS Foundation Trust (LPFT) by way of a Section 75 Agreement. It was noted that there had been an increase in activity, but the expectation was the LPFT budget would remain on target in 2015/16. A total £5.4m was the amount of funding required to deliver the service.

RESOLVED

That the Adult Care budget outturn projection for 2015/16 be noted.

41 QUARTER 2 PERFORMANCE REPORT

Consideration was given to a report from Emma Scarth, County Manager for Performance Quality and Development, which provided the Committee with a summary of the Adult Care performance measures within the four Commissioning Strategies for Quarter 2 of 2015/16.

It was reported that all the measures had been identified as a priority for the authority, and as a result had been included in the Council Business Plan.

Appendix A to the report presented provided the Committee with detailed performance information for 2015/16.

It was reported further that the direct payment measure combined both service user and carer direct payments. From 2016/17 these two indicators would be measured separately. It was noted that there had been an increase in the number of people accessing direct payments.

At the end of Quarter 2, there were 432 permanent admissions into residential and nursing care for adults over 65 years. It was noted that the performance had deteriorated compared to the same period in the previous year when there had been 390 admissions.

It was noted that social care had seen pressures in both homecare and reablement capacity over the summer months, which had led to a small increase in Delayed Transfers of Care attributable to adult care. It was anticipated that the new homecare contracts and reablement contract would deliver increased capacity over the coming months.

The Committee were advised that a number of the indicators within the Adult Specialities Strategy and NHS indicators were still in development. It was noted that there had been a slight increase since the end of Quarter 1 in the proportion of adults with a learning disability, or autism who lived in their own home or with their family. The quarter outturn figure reported was 73.1%.

It was reported that the latest Adult Social Care Survey had identified that 74.9% of people reported that they felt safe. This was an increase of 12.1% compared to the previous year which had placed the Council as a higher ranking authority within its comparator group.

The Committee were advised that performance remained stable at the end of Quarter 2 at 100% for the % of safeguarding cases supported by an advocate. It was noted that overall contacts to adult safeguarding were continuing to increase, and it was anticipated that there would be a 20% increase by the end of March 2016 for the year.

Members of the Committee were advised that the purpose of the carers strategy was to help carers build resilience in their caring role and to prevent young carers from taking on inappropriate caring roles, and protect them from harm.

It was noted that as a result of the introduction of the Care Act 2014, an assessment tool had been developed and implemented. The service currently was in a period of transition shifting practice and processes to meet statutory requirements.

The Committee noted that the Carers Service was a preventative service to carers to help sustain the independence of the person they cared for, and reduce their dependence on funded services. It was noted further that 74% of carers supported were caring for people who were not a client of Adult Care.

**ADULTS SCRUTINY COMMITTEE
9 DECEMBER 2015**

The Committee noted further that a newly commissioned Carers Service would be in place in 2016. The criteria for the new service had been designed to improve performance reporting and monitoring, which would also be supported by the quality assurance framework and improved case management processes.

Appendix A to the report provided the Committee with detailed performance information.

During discussion, the following issues were raised:-

- Page 70 – 'The health and wellbeing of the population is improved'. It was felt that the three questions on this page needed to be re-worded into Plain English;
- Page 78 – 'The health and wellbeing of the population is improved Adult frailty, long term conditions and physical disability'. That reference to care homes should be removed from this page as it was felt that this was misleading, as the County Council no longer had any care homes;
- Page 45 – It was felt that the Council needed to make sure that needs of individuals were being assessed, rather than making sure that budgets were being met;
- Page 90/91 – Delayed transfer of care from hospitals details. A question was asked whether adult social care or health made the decision. The Committee were advised that it was a joint agreement between the two. It was noted that new guidance was due out in the spring of the following year, and that a copy would be made available to members of the Committee; and
- Page 74 – It was noted that there was a slight decrease from Quarter 1. The Committee were advised that the Mosaic processes would likely increase the rate of referral from Adult Care Teams. It was felt that carer support provided alongside Adult Care services would produce the best outcomes.

RESOLVED

That the report be noted.

42 ADULT CARE LOCAL ACCOUNT 2014/15

The Committee gave consideration to a report from Emma Scarth, County Manager for Performance, Quality and Development, which invited comments on the draft Adult Care Local Account 2014/15, a copy of which was detailed at Appendix A to the report presented.

It was reported that the Local Account was introduced by the Government to inform local residents of the successes, challenges and priorities within their local Adult Care Service. The Local Account was an important part of the Council's commitment to being transparent with the people of Lincolnshire.

Attached at Appendix A to the report was a draft copy of Lincolnshire County Councils Adult Care Local Account 2014/15, which provided information on how Adult Care had performed over the last 12 months, and how the Council's services were

meeting the needs of the customers. It was noted that the document had been compiled by obtaining relevant information to help inform the people of the Councils achievements during 2014/15.

In conclusion, the Committee were advised that the Adult Care Account was a key document in which the Council could report its performance and achievements to the people of Lincolnshire.

During discussion, one member advised that it was very difficult to read text where the boxes were coloured, and a further one advised that the document needed to be checked to see if it was compliant with the Disability Discrimination Act (DDA) requirements.

It was also highlighted that the information contained within page 115 with regard to Direct Payment was confusing, and needed further explanation. It was also felt that reference to the four Commissioning Strategies needed to be included within the text.

Reference was also mentioned for the need for a shorter version of the document to be made available to the public. A suggestion was also made for an electronic version to be made available on the website; and also the potential for a leaflet to be created for use in GP surgeries. Officers agreed to look into a shorter version of the document.

RESOLVED

1. That the draft Adult Care Local Account 2014/15 be noted, subject to the inclusion of the comments detailed above.
2. That agreement be given to the production of copies of the Adult Care Local Account 2014/15 for distribution to key stakeholders.
3. That the Local Account 2014/15 be used to inform the content of the Committee's work programme in 2016/17.

43 LINCOLNSHIRE SAFEGUARDING BOARDS SCRUTINY SUB - GROUP UPDATE

Consideration was given to a report from Richard Wills, Executive Director with responsibility for Democratic Services, which provided the Committee with an overview of the Lincolnshire Safeguarding Boards Scrutiny Sub-Group, in particular the Sub-Group's consideration of adult safeguarding matters. A copy of the draft minutes of the last Scrutiny Sub-Group meeting held on 7 October 2015, were attached at Appendix A to the report presented.

RESOLVED

That the draft minutes of the meeting of the Lincolnshire Safeguarding Boards Scrutiny Sub-Group, held on 7 October 2015 be noted.

44 ADULTS SCRUTINY COMMITTEE WORK PROGRAMME

Consideration was given to a report from Richard Wills, Executive Director with responsibility for Democratic Services, which asked the Adults Scrutiny Committee to consider its work programme for its forthcoming meetings. A copy of the work programme was attached at Appendix A to the report presented.

Simon Evans, Health Scrutiny Officer, introduced the report and associated Appendix for consideration by the Committee.

The following items were put forward by the Committee for inclusion on the work programme going forward.

- Learning Disability Commissioning Strategy;
- Mental Health Strategy;
- Update on Mosaic;
- Sensory Impairment Contracts; and
- Developing the Adult Care Workforce.

RESOLVED

That the work programme as set out in Appendix A to the report presented be noted subject to the inclusion of the items listed above.

The meeting closed at 12.37 p.m.