



ADULTS AND COMMUNITY WELLBEING SCRUTINY COMMITTEE 6 SEPTEMBER 2017

PRESENT: COUNCILLOR C E H MARFLEET (CHAIRMAN)

Councillors Mrs E J Sneath (Vice-Chairman), M T Fido, R J Kendrick, P M Key, Mrs C J Lawton, A P Maughan, C E Reid and S R Dodds

Councillor Mrs P A Bradwell attended the meeting as an observer

Officers in attendance:-

Andrea Brown (Democratic Services Officer), Michelle Colbourne (Area Manager - Hospital Teams and Customer Services Centre), Alex Craig (Commercial and Procurement Manager - People Services), Simon Evans (Health Scrutiny Officer), Glen Garrod (Executive Director of Adult Care and Community Wellbeing), Steve Houchin (Head of Finance (Adult Care)), Theo Jarratt (County Manager - Performance, Quality and Development), Karen Shooter (County Domestic Abuse Manager) and Amy Smithson (Commissioning Officer)

14 APOLOGIES FOR ABSENCE/REPLACEMENT MEMBERS

Apologies for absence were received from Councillors M A Whittington and Mrs J E Killey.

The Chief Executive reported that, under the Local Government (Committee and Political Groups) Regulations 1990, he had appointed Councillor S R Dodds to the Committee in place of Councillor Mrs J E Killey for this meeting only.

It was also reported that Councillor B M Dobson had stood down from the Committee and that there was a current vacancy on the Committee as a result.

15 WELCOME

The Chairman welcomed the Committee following the summer break and introduced Matthew Akintoye, a recently appointed Trainee Solicitor within Legal Services, who was spending two weeks with Democratic Services.

The Chairman advised that he had authorised an urgent item to be considered by the Committee. Item 9 – *Domestic Abuse Support Services Re-procurement* had been brought forward for consideration and circulated to all Members. An early decision on the matter would assist the procurement process and enable a new contract to be awarded and implemented by 1 April 2018. Early consideration would allow the Executive Councillor to make a decision on 15 September 2017. It was proposed,

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and agreed, to consider this item after item 7 on the agenda, prior to the Work Programme.

16 DECLARATIONS OF MEMBERS' INTERESTS

In relation to Item 9 – *Domestic Abuse Support Services Re-Procurement*, Councillor A P Maughan advised that West Lindsey Domestic Abuse Services (WLDAS) was a client of the accountancy firm of which he was employed. Councillor Maughan advised that he would remain in the meeting but would not take part in the discussion.

There were no further declarations of Member's Interests at this point in the proceedings.

17 MINUTES OF THE MEETING OF THE ADULTS AND COMMUNITY WELLBEING SCRUTINY COMMITTEE HELD ON 26 JULY 2017

RESOLVED

That the minutes of the Adults and Community Wellbeing Scrutiny Committee held on 26 July 2017 be agreed as a correct record and signed by the Chairman.

18 ANNOUNCEMENTS BY THE CHAIRMAN, EXECUTIVE COUNCILLOR FOR ADULT CARE, HEALTH AND CHILDREN'S SERVICES AND EXECUTIVE DIRECTOR OF ADULT CARE AND COMMUNITY WELLBEING

The Executive Director for Adult Care and Community Wellbeing advised the Committee that the first meeting of the Housing, Health and Care Delivery Group had taken place and that an update report would be presented to the Committee at its meeting in November. Councillor Mrs C J Lawton advised that she had attended the meeting as the representative for South Holland District Council and confirmed that it had been both a worthwhile and good meeting.

There were no announcements by the Chairman or the Executive Councillor for Adult Care, Health and Children's Services.

19 2017/18 ADULT CARE AND COMMUNITY WELLBEING QUARTER 1 THEMED PERFORMANCE REPORT

Consideration was given to a report by the Executive Director of Adult Care and Community Wellbeing which provided an update on 2017/18 Q1 performance of the Adult Care Business Plan measures within the four Commissioning Strategies.

Theo Jarratt (County Manager – Performance, Quality and Development) introduced the report and explained that this report had been submitted to the Committee prior to the workshop arranged to take place after the meeting of the Committee in October 2017. The aim of the workshop was to provide further understanding of the national

reporting requirements for the Directorate and to shape future areas of performance focus for this Committee.

The report had, therefore, been themed around Hospital Services and focussed on the following areas:-

- The major impact on Lincolnshire residents;
- The prime government priority area for Health and Social Care; and
- The priority area for the Council and its NHS partners in terms of budget and activity.

Michelle Colbourne (Area Manager – Hospital Teams and Customer Service Centre) was invited to introduce the section on Hospital Services which was pertinent to the theme of this meeting.

The Chairman invited the Committee to ask questions on this section of the report and, during discussion, the following points were noted:-

- Demand on hospital teams had increased and, as identified on page 12 of the agenda, 7609 new requests for support from the Council following discharge from hospital had been made. This had increased on the previous year by 700 requests;
- It was clarified that intermediate care was nursing and therapy support, provided by the NHS, and reablement care was social care provided by the council;
- Performance of the reablement services provided by Allied Healthcare (commissioned by Lincolnshire County Council (LCC)) and Lincolnshire Community Health Services (LCHS) NHS Trust (commissioned by the Clinical Commissioning Groups (CCGs)) was discussed. It was advised that the main reason for the lower performance of LCHS was the shortage of nursing staff, occupational therapists and physiotherapists. Despite previous suggestions to the CCGs to consider a pooled-budget commissioning arrangement with LCC this had been declined. The Committee asked that a referral be made to Councillor Mrs S Woolley (Executive Councillor for NHS Liaison and Chairman of the Lincolnshire Health and Wellbeing Board) to consider if this matter could be pursued by the Health and Wellbeing Board;
- It was reported that Lincolnshire required 250 nurses to be able to cover basic service provision but this was near impossible in the current climate;
- It was expected that CCGs would ask Adult Social Care to arrange homecare and residential care on their behalf. A report would be presented to the Committee in early 2018 giving further information;
- Clinical evidence suggested that if a person stayed at home 90 days after discharge from hospital then it was likely that they would remain at home hence the significance of the national performance measurement of "People Still at Home 91 days after Reablement";

The County Manager – Performance, Quality and Development continued to present the report where it was reported that Delayed Transfers of Care (DTOC) was expected to receive national attention and ministerial interest over the winter period therefore it was suggested to add this to the Work Programme as a regular item.

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The Committee was given a demonstration of the LG Inform website which provided details and figures of the DTOC figures for each authority. It was reported, however, that figures would only appear if they had been signed off in the hospitals. Members were encouraged to look at the site and, in particular Stoke and Cumbria by way of a comparison with Lincolnshire. <http://lginform.local.gov.uk/reports/view/lga-research/quick-view-dtoc-summary-delayed-days-for-a-single-authority-1?mod-area=E10000019&modify-report=Apply>

During discussion, the following points were noted:-

- The provision of convalescent facilities was suggested as a method of alleviating pressure on DTOC figures within the county;
- Analysis undertaken during the development of the Lincolnshire Health and Care (LHAC) programme had found that if people lived close to a hospital then they would utilise the services there but if they did not live close by they would find alternative provision, suggesting that the availability of a service would predetermine it's use;
- The statistics given were based on the registered home address and were attributable to the GP with which patients were registered. Should the patient leave Lincolnshire and attend a hospital out-of-county, it was confirmed that the money would follow that patient, particularly for cases of specialist surgery; and
- It was confirmed that Grantham Hospital remained an Acute Hospital at this time.

RESOLVED

1. That the report and comments be noted;
2. That the Lincolnshire Health and Wellbeing Board be asked to investigate the possibility of a pooled-budget commissioning arrangement between the Clinical Commissioning Groups and Lincolnshire County Council in relation to reablement services; and
3. That Delayed Transfers of Care (DTOC) be added to the Committee's Work Programme as a regular item.

20 ADULT CARE & COMMUNITY WELLBEING 2017/18 OUTTURN PROJECTION

Consideration was given to a report by the Executive Director of Adult Care and Community Wellbeing which provided an opportunity for the Committee to consider the budget outturn projection for 2017/18 for Adult Care and Community Wellbeing.

Steve Houchin (Head of Finance (Adult Care and Community Wellbeing)) introduced the report which covered five key commissioning strategies within Adult Care:-

- Adult Frailty and Long Term Conditions;
- Specialist Services (Mental Health, Autism and Learning Disability);
- Safeguarding Adults;

- Carers; and
- Community Wellbeing

The net budget of Adult Care & Community Wellbeing (AC&CW) was £183.066m and despite being at an early stage in the financial year, it was estimated that AC&CW was likely to balance its budget at the end of 2017/18 based on the current information available up to 31 July 2017. The Committee noted that this would be the sixth year in succession where Adult Care & Community Wellbeing had managed services within its budget allocation.

Members were invited to ask questions, during which the following points were noted:-

- The Government was expected to produce a green paper on the future funding of social care. The Commission on Care and Support, led by Andrew Dilnot, had previously proposed raising the means tested capital threshold for contributions to social care from £23,250 to £100,000 to protect inheritance. A further ceiling of £35,000 for lifetime care costs had also been included. It was expected that Government would be looking at how to cover the cost of adult social care, with insurance schemes and increased taxation as some of the options being considered;
- The increase in homecare capacity was anticipated to have a knock-on effect on DTOC reductions which was a positive outcome for the council;
- Individual business cases were implemented where a person required a large scale adaption and the Council were asked to fund the work;
- Concern was noted in relation to the balance between the human position and the financial position of each individual case and the relationship between the families and social workers as a result. It was acknowledged that there were many complex issues to consider and that, of course, parents strive for the very best for their children but the Committee was reminded that it was national Government which dictated what families were eligible for, not the Council; and
- Work was currently ongoing to bring agencies together where cases crossed over into other areas, for example domestic abuse cases which were not going through the criminal justice system.

RESOLVED

That the budget outturn projection for 2017/18 be noted.

At 11.30am, Councillor P M Key left the meeting.

21 STRATEGIC MARKET SUPPORT PARTNER PROCUREMENT

Consideration was given to a report by the Executive Director of Adult Care and Community Wellbeing which invited the Committee to consider a report due for decision by the Executive Councillor for Adult Care, Health and Children's Services which sought approval for a change in commissioning arrangements.

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At 11.34am, Councillor P M Key re-entered the meeting.

Alex Craig (Commercial and Procurement Manager – People Services) and Michelle Colbourne (Area Manager – Hospital Teams and Customer Service Centre) introduced the report and gave a presentation to the Committee which covered the following points:-

- Summary – the Council had in place a number of grant agreements directly supporting the care market; the agreements had been in place for over two years and had shown excellent results overall; and the recommendation was to establish a formal contract for these services and to broaden the scope of the work;
- Context – a contract would be established to deliver vital market functions for Adults Social Care services; offer workforce and skills support; supports the Council to meet its obligations under the Care Act 2014; and continue the Care Home Trusted Assessors (CHTA) service;
- Background –existing Workforce Development grant success; success in securing additional funding; and over 1000 bed days saved relating to the Care Home Trusted Assessor programme;
- Challenges – continuing pressures across Health and Social care; improving the profile of care work as a career; and strengthening links with health workforce for better career pathways;
- What outcomes we are trying to achieve – greater support and resource provision; improved recruitment and retention; and a service more capable of meeting changing and increasing need;
- What we are looking for from the provider – countywide provision; comprehensive and high quality training solution; strategic coordination with key bodies; promotion of Social Care as a career; enhanced support to the Health and Care system; and strategic partnership working with the Council;
- Proposed model;
- Tender process and contracting – regulation details; Article 77; and a PIN which was published on 25th July 2017;
- Timeline;
- Other aspects – contract length; transition and mobilisation; and contract go live date of 1st April 2018; and
- Conclusion – through a procurement exercise, the Council would establish a formal, sustainable, service which would build on the success of the prior grant agreement and provide vital support to the local market for Adult Social services.

It was explained to the Committee that care home assessments in hospitals were undertaken to ensure that a particular care home continued to meet the patient's needs. The Care Home Trusted Assessor would undertake that assessment on behalf of the care home, if they agreed. This had sped up the process and, as a result, had saved 1000 bed days in 2016/17.

During discussion, the following points were noted:-

- The Department of Health had published a report in August 2017 which included a number of good practice sites. The Committee was pleased to note that Lincolnshire appeared in the top three of 400 sites which were assessed;
- Grant funding was used to develop a number of other activities but once these services had shown some viability, it would be appropriate for Adult Care and Community Wellbeing to convert them into a contract state. The Committee agreed that it was beneficial to have a legally binding contract in place for services wherever possible;
- It would be possible for a care provider out-of-county to challenge a decision of the Trusted Assessor as they would not be part of LINCA and therefore would not have built a relationship with the assessor. It was costly to do this independently but the Committee noted that some providers do prefer to do this themselves;
- The NHS also insisted upon three quotes for this type of care which resulted in a 3-5 day delay. The Trusted Assessor model was therefore being promoted to the NHS to persuade them to also use this model;
- Provisions within the regulations stated that providers must have certain structures in place to be considered for the contract. These structures could be quite prescriptive to ensure the best provision was sought;
- The importance of the preferred provider having knowledge of the local community and organisations was also thought to be essential.

Councillor S R Dodds left the meeting at 11.56am.

The Committee asked that an update be provided on the procurement process at an appropriate time.

RESOLVED

1. That the recommendations to the Executive Councillor for Adult Care, Health and Children's Services, within Appendix 1 to the Strategic Market Support Partner Procurement report, be supported; and
2. That the Executive Councillor for Adult Care, Health and Children's Services be advised that the Committee explored the differences between a grant and a contractual arrangement; the trusted assessor role; and the importance of the provider having knowledge of the local community and organisations.

At 12.00pm, Councillor S R Dodds re-entered the meeting.

22 DOMESTIC ABUSE SUPPORT SERVICES RE-PROCUREMENT

Consideration was given to an urgent report from the Executive Director of Adult Care and Community Wellbeing which invited the Committee to consider Domestic Abuse Support Services and was to be considered by the Executive Councillor for Adult Care, Health and Children's Services on 15 September 2017.

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Alex Craig (Commercial and Procurement Manager, People Services) introduced the report and gave a presentation to the Committee which included the following information:-

- Current Contracts including services, providers and budgets;
- Re-procurement Proposal and Procurement Model;
- Alternatives considered – negotiation of a revised contract with the current provider or to do nothing;
- Recommendations that the Executive Councillor approves the recommissioning of Domestic Abuse Support Services; approves that procurement be undertaken to deliver contracts for each element; and delegates authority to the Executive Director of Adult Care and Community Wellbeing and the Executive Councillor for Adult Care, Health and Children's Services to determine the final form of the procurement and contract; and
- Reason for the recommendations – appointment of a single provider for Outreach Services countywide; a holistic countywide approach to the service based on risk; and an opportunity to enhance services.

The Chairman also welcomed Karen Shooter (County Domestic Abuse Manager) and Amy Smithson (Commissioning Officer) to the meeting.

During discussion, the following points were noted:-

- It was asked if the preferred provider would be expected to work to the Signs of Safety model and be more closely aligned with the police and children's services. It was agreed that, although this was already alluded to within the specification, it could be made more explicit and specifically included;
- The Committee sought clarification on the links to the Sexual Assault Referral Centre (SARC), operated by Lincolnshire Partnership NHS Foundation Trust, and the importance of multi-agency working in this area;
- There was also a tool utilised by the service to identify when a perpetrator was posing as a victim;
- The Committee felt it necessary to work with the perpetrators in order to break cycles often involved in domestic abuse cases and suggested that consideration be given in the future to align any contract for the perpetrator programme to the domestic abuse support service contract;
- It was also acknowledged that some residents, originally from other countries, did not realise that their actions were unacceptable in the United Kingdom and therefore education in relation to cultural change was key within these communities.

RESOLVED

1. That the recommendations to the Executive Councillor for Adult Care, Health and Children's Services, within Appendix 1 to the Domestic Abuse Support Services Re-Procurement report, be fully supported; and
2. That the Executive Councillor for Adult Care, Health and Children's Services be advised that the Committee suggested that future consideration be given to the alignment of any contract for the perpetrator programme to the domestic abuse support services contract.

23 ADULTS AND COMMUNITY WELLBEING SCRUTINY COMMITTEE
WORK PROGRAMME

Consideration was given to a report by Simon Evans (Health Scrutiny Officer) which provided the Committee with an opportunity to consider its work programme for the forthcoming year.

Simon Evans (Health Scrutiny Officer) introduced the report and confirmed that no requests had been received for additions to the October agenda prior to the meeting

Discussions during the meeting had resulted in the following amendments to the Work Programme:-

1. Remove *Domestic Abuse Support Services – Procurement* report, listed for October due to the urgent consideration of this item at this meeting;
2. Add *Delayed Transfers of Care (DTC)* as a regular item for each meeting of the Committee; and
3. Table *Strategic Market Support Partner Procurement Process Update* for an appropriate meeting which would be advised by relevant officers.

Further to the email sent on 14 August 2017, Members were reminded that an Adults and Community Wellbeing Performance Workshop would be held following the next meeting of the Committee on 25 October 2017. The purpose of the workshop was to gain further detailed understanding of the performance measures used in Adult Care and Community Wellbeing, including national performance reporting requirements and also the Better Care Fund (BCF). This workshop was intended to assist the Committee in its future consideration of performance reporting.

RESOLVED

That the Adults and Community Wellbeing Scrutiny Committee Work Programme, with the amendments noted above, be agreed.

The meeting closed at 12.26 pm

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