



**ADULTS AND COMMUNITY
WELLBEING SCRUTINY COMMITTEE
22 MAY 2019**

PRESENT: COUNCILLOR C E H MARFLEET (CHAIRMAN)

Councillors Mrs E J Sneath (Vice-Chairman), B Adams, R J Kendrick, Mrs C J Lawton, Mrs M J Overton MBE, C E Reid, C L Strange and M A Whittington

Councillors: attended the meeting as observers

Officers in attendance:-

Alex Craig (Commercial and Procurement Manager - People Services), Simon Evans (Health Scrutiny Officer), Glen Garrod (Executive Director of Adult Care and Community Wellbeing), Alina Hackney (Senior Strategic Commercial and Procurement Manager - People Services), Carolyn Nice (Assistant Director, Adult Frailty & Long Term Conditions) and Rachel Wilson (Democratic Services Officer)

1 APOLOGIES FOR ABSENCE/REPLACEMENT MEMBERS

Apologies for absence were received from Councillor Mrs J E Killey and Councillor Mrs P A Bradwell OBE (Executive Councillor for Adult Care, Health and Children's Services).

2 DECLARATION OF MEMBERS INTEREST

Councillor MA Whitington wished it to be noted that his mother was in a residential care home in Grantham and was funded by LCC.

3 MINUTES OF THE MEETING HELD ON 10 APRIL 2019

RESOLVED

That the minutes of the meeting held on 10 April 2019 be signed by the Chairman as a correct record.

During consideration of the minutes, the following points were noted:

- In relation to rural and coastal communities in Lincolnshire, and neighbourhood teams using community assets, it was planned to bring a report to this Committee in September 2019.
- The KPMG report had not yet been published, and the Assistant Director, Adult Frailty & Long Term Conditions would make enquiries regarding the publication date and notify the Chairman. Once the report was available it would be circulated to the Committee.

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- It had been very interesting to hear the views of the representatives from Libertas and this was something which needed to be followed up.
- It was noted that the Councillor Development Group had recently arranged a session on Dementia awareness, and it was commented that it was excellent, and 18 members had attended, and it was suggested that it may be beneficial to run the session again.
- It was highlighted that an Autism Awareness session was being held on 26 June 2019 and members were encouraged to attend.
- It was queried whether it would be possible to run the dementia session for parish councils in order to make them aware of all the facilities. This would be looked into by officers and it was thought that the team would be prepared to visit the parish councils. It was queried whether the communications team could help get the message out to parish councils. The positive comments in relation to the session would also be passed back to staff.
- In relation to pre-decision scrutiny items, it was suggested that it would be helpful for the Committee for the outcome of the decision after going to the Executive to be included in the minutes.
- Further to the briefing on Autism that the Committee received at the previous meeting, members commented that they would like to have more awareness of the number of people.

4 ANNOUNCEMENTS BY THE EXECUTIVE COUNCILLOR AND LEAD OFFICERS

There were no announcements.

5 WINTER FUNDING UPDATE REPORT

Consideration was given to a report which provided a summary to Members on Winter Funding for Adult Social Care Services, supporting an aim to alleviate winter pressures on the NHS. It was reported that in October 2018 the Secretary of State for Health and Social Care had announced £240m of additional funding for council's in England to spend on Adult Social Care Services, and this had been divided between the local authority, with Lincolnshire County Council receiving £3,367,950.

The key areas that Lincolnshire County Council focused on fell broadly into the categories of supporting hospital discharge with a focus on flow through the hospitals, and admissions avoidance. Members were guided through the various schemes which were set out in the report and provided with the opportunity to ask questions to the officers present and some of the points raised during discussion included the following:

- Lincolnshire as a system had improved its performance, whilst many other areas had not improved. For example, in Lincolnshire Delayed Transfers of Care (DTOC) had reduced from 3.5% to 2.6%.
- In relation to the housing link worker, it was noted that they would be based at Lincoln County Hospital as that was where the greatest demand would be, but they would cover all the other hospitals as well.

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- It was acknowledged that extending the delivery of equipment from five to seven days a week had not been as successful as hoped and a number of barriers had been identified. However, it was queried whether this was a level of service which was required as in many cases equipment needs could be planned in advance. It was more an issue of culture and how colleagues could be supported with discharge planning. It was suggested that this should be a process which should be started as soon as an individual enters hospital.
- It was noted that Lincolnshire County Council staff were 'ward aligned', which meant they should be informed when a patient was admitted.
- Members praised the work which had been done so far.
- Concerns were raised regarding cross border working, as in the north of the county people were more likely to be taken to an out of county hospital (Grimsby, Hull or Scunthorpe). Members were advised that work was underway to look in more detail at cross border working, and that the location of GP practices played a role in this, as the County Council and NHS boundaries did not directly match up. There was a possibility that the proposed primary care networks might assist in this. If services were devolved to place and locality and there were place based budgets, this may start to resolve some of the issues.
- It was highlighted that some of the work being carried out by the Local Enterprise Partnership (LEP) should help with improving cross border working.
- It was commented that the advance announcement of funding had been positive, and that as a result planning and performance had been improved.
- There was a need for continuity on wards and there would be a ward manager in place and it was the role of management to keep track of what was going on. It was highlighted that this was something that United Lincolnshire Hospitals NHS Trust needed to track.
- In terms of the use of Discharge to Assess Residential beds, it was queried whether they were all in one place, and members were advised that they were spread around the county. The aim was to have one in every locality, and officers were planning to review them to determine whether some were utilised more than others.
- In relation to the conclusion, it was suggested whether the Committee could review the work again in one years' time, as some of the schemes needed more time to embed, and it was hoped that the benefits of this scheme would be seen the following year.
- It was noted that in relation to the quote from the LIVES website (p.27 of the report), some people just needed a bit of company and to check they were ok after a fall, they did not all need to go to hospital.
- In terms of GP (primary care) streaming, those individuals who presented to an emergency department but did not need to see an acute specialist would be streamed to an alternative clinician.
- It was noted that a full evaluation of the impact of the schemes was being completed by the University of Lincoln, and members would be interested to see the outcome of this work. However, it would take another 18 months before the work would be completed.
- It was requested whether an update on the work of the Hospital Avoidance Response Team could be brought back to the Committee at a later date. It

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was noted that the team would be asked to come and talk to the Committee about their work.

- It was reported that officers were working with colleagues across the system and Lincolnshire was performing quite well in terms of DTOC, but reducing the length of stay needed further attention.
- It was important that therapists visited people at home rather than just in hospital, as people would behave differently in hospital, for example with mobility as a hospital was an unfamiliar place, and at home they may have the space set up so to make it easier for them to move around (furniture may be placed so they were able to hold onto it and use it for support etc.)

RESOLVED

That the Committee note the report.

6 GOVERNMENT GREEN PAPER AND FUTURE FUNDING

The Committee received an update from Glen Garrod, Executive Director Adult Care and Community Wellbeing, in relation to the latest position regarding the Government Green Paper and the future funding of Adult Social Care.

It was reported that although the situation was fluid, it was increasingly less likely that a green paper would be published on care and support for older people in the foreseeable future. The original intention had been that the green paper would inform the comprehensive spending review, which in turn would determine the future spending for Adult Social Care. However, the upcoming spending review may only be for one year, to cover the period 2020/21.

The other challenge was that any significant changes would require primary legislation, but now there was not enough time to take legislation through the parliamentary process.

It was highlighted that for 20 years there had been various discussions on how adult care should be funded and there was now a pressing need to address this issue. There were a number of elements which would have been within the green paper, such as support for carers. The Carer's Action Plan had been published in 2018, but there was limited funding to support it.

Members were reminded that the Better Care Fund was due to end on 31 March 2020, if it was not carried forward in some form. It was highlighted that there may be a number of announcements in the next 6 - 12 months, but these may not necessarily present a long term solution. For some councils, there was severe pressure on their adult social care budgets, but this was not the case for Lincolnshire.

(NOTE: Councillor Mrs M J Overton MBE joined the meeting at 11.00am)

Members were encouraged to watch two BBC Panorama programmes which were due to be aired on 29 May 2019 and 5 June 2019 which would be entirely focused on adult social care. These programmes followed a number of different families based

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in Somerset. Somerset County Council had experienced particular difficulties the previous year in relation to adult social care.

In terms of the green paper on *Prevention is Better than Cure*, it was reported there was still a lot of interest from the Government to publish this. It was thought it would cover the areas of digital, some areas of public health as well as housing. It was noted that there was a lot of talk about housing in the context of adult social care, however there would be a need for three government departments to work together and see this as a joint enterprise.

Members were provided with the opportunity to ask questions to the officers present in relation to the information contained within the update, and some of the points raised during discussion included the following:

- Members were advised that the NHS had carried out an exercise to reduce the number of non-medical items provided for free on prescription, some of which were dietary. It was noted that this may be more of a matter for the Health Scrutiny Committee.
- In relation to the Panorama programmes, it was queried whether there was going to be a compare and contrast which would show those areas that were doing well. Members were advised that this was not planned. However, officers were doing work behind the scenes on material which the BBC would be able to use after the programme aired.
- The Local Government Association was doing some work on why some councils were financially challenged, whilst others were not. There had been an attempt to get government funding to support this work. It was noted that it was a very complicated situation.
- Concerns were raised regarding the problems that had been highlighted in the press and media regarding care homes, and how they could be prevented from closing. Members were advised that this would be covered by the next agenda item.
- It was noted that Lincolnshire was one of the best top 10 councils for DTOC's in the country.
- It was noted that it was disappointing news that there was unlikely to be a four year comprehensive spending review. There was a lot of work on carers funding, sparsity and rurality issues. It would be a significant challenge for the adult social care budget if this year was the last budget supported by the Better Care Fund.
- It was noted that there was a lot of work at the moment to try and make a difficult situation better. The Leader of the Council had attended a meeting of the County Council Network on 21 May 2019, and representatives had been arguing for the Government to include consideration of rurality in assessing local authority spending needs. There was recognition that rurality had not previously been given sufficient weighting into local government funding.

RESOLVED

That the update be noted.

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Consideration was given to a report which presented the Annual Report (April 2018 – March 2019) of the Commercial Team, which supported the delivery of the Council's objectives for Adult Care and Community Wellbeing.

Members were guided through the report and were provided with the opportunity to ask questions to the officers present in relation to the information contained within the report and some of the points raised during discussion included the following:

- It was queried whether there was an emergency plan in place in the event of four or five residential homes closing. Members were advised that there was a process for such circumstances, and the Commercial Team had a significant role in that. The Team had a co-ordinating role across health and social care, and continued to work with a range of colleagues across multiple agencies. Work had been undertaken with a number of providers where closure had been prevented. The role of the Commercial Team was about supporting the market and was not just about compliance.
- It was queried how reliant the care sector in Lincolnshire was on EU staff, and it was noted that there would be an impact without the EU staff, as there would also be across the whole country. The authority would continue to work with providers and there were contingency plans in place, and some of these risks could be mitigated.
- It was noted that the number of beds available at Louth Hospital had reduced by half, however, members were advised that the NHS had liaised with Lincolnshire County Council on this in terms of measuring the impact and market in this area. The aim as a service was to have more joint working arrangements in place with the NHS. It was believed that the NHS and the local authority could work together more often in commissioning services.
- In terms of the Care Quality Commission (CQC) reports, it was queried what was the difference between a rating of "requires improvement" and "good". It was confirmed that the authority would work with a provider to help them maintain a "good" rating, as well as assisting to move up from a "requires improvement". In the case of a rating of "requires improvement" this could be due to a wide range of factors such as the provider failing to deliver all aspects of their improvement plans, or being late notifying the CQC of changes, or at the other end of the spectrum there could be concerns about care. The Commercial Team would also carry out unannounced visits, if a provider was low risk, they would receive at least one visit per year. The frequency of visits would vary depending on the risk assessment of the provider, and if they were high risk there could be staff visiting the establishment every day. For those providers requiring improvement, there was a lot of intensive support available.
- It was noted that there had been a 20% increase in visits in one year by the Commercial Team, but members were also advised that there had also been an increase in resources. The work of the team was not just about monitoring and compliance, but also about providing support.
- There was more collaborative working between Adult Social Care and health colleagues, which meant a more co-ordinated approach in managing the market.

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- One member highlighted that the Commissioning and Commercialisation Board had received comprehensive reports on four adult social care contracts which were coming up for renewal. The Commercial Team were a valuable part of the process. It was suggested that some of the commissioning strategies could be reviewed by this committee so members could see the amount of work which went into them.
- In relation to the NHS health checks, it was queried whether there was a breakdown of the data available, such as age range and geographic location. It was noted that this was one of the areas where Lincolnshire was one of the best performing in the country. There were contracts in place with GP's and the arrangements were working very well and the Team was able to capture a lot of data.
- It was confirmed that the six weeks of reablement care was still offered to people leaving hospital, and the community hospital model was still in place with transitional beds which were available.
- Members were informed that 2020 was due to be a significant year in terms of contracts as the capacity would be increased as demand for social care services continued to grow, due to Lincolnshire's ageing population. There was a need for work with health colleagues to continue in order to enable the reduction in demand for adult social care.
- The Chairman queried whether a list of the strategies and procurements and the dates they were due to be renewed could be made available, so that it would be easier to plan when they needed to come to the Committee. It was noted that there was a yearly work plan which was signed off by the Adult Care and Community Wellbeing Directorate Management Team, and work was underway on a five year plan. There would be a lot of contracts which would need to be re-procured in 2020.
- There was a desire from health colleagues to work with the council on certain procurements, and by highlighting some of the benefits it gave more confidence, and not just to the NHS, but also towards an increased appetite within the east midlands to work more collaboratively.

RESOLVED

That the report and the contribution made by the Commercial Team to the delivery of the Council's objectives for Adult Care and Community Wellbeing be noted.

8 ADULTS AND COMMUNITY WELLBEING SCRUTINY COMMITTEE
WORK PROGRAMME

Consideration was given to a report which provided the Committee with the opportunity to comment on its work programme for the coming year.

It was reported that there were now eight items listed for the agenda for the meeting on 3 July 2019, and it was suggested that three of them were taken off and deferred to a future meeting. The three items it was suggested that should be moved to the September meeting were as follows:

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- Rural and Coastal Communities in Lincolnshire
- Annual Report of the Director of Public Health
- Homes for Independence Strategy

RESOLVED

That the work programme, including the above amendments, be agreed.

The meeting closed at 12.15 pm