

**ADULTS AND COMMUNITY WELLBEING
SCRUTINY COMMITTEE
25 MAY 2022**

PRESENT: COUNCILLOR C E H MARFLEET (CHAIRMAN)

Councillors A M Key (Vice-Chairman), T A Carter, M R Clarke, Mrs N F Clarke, K E Lee, Mrs M J Overton MBE, M A Whittington, T V Young and Mrs J Brockway

Councillors: Mrs W Bowkett and C Matthews attended the meeting as observers

Officers in attendance:-

Pam Clipson (Head of Finance, Adult Care and Community Wellbeing), Simon Evans (Health Scrutiny Officer), Glen Garrod (Executive Director - Adult Care and Community Wellbeing), Sean Johnson (Senior Programme Officer, Planning and Environmental Public Health), Samantha Neal (Assistant Director, Prevention and Early Intervention) and Emily Wilcox (Democratic Services Officer)

1 APOLOGIES FOR ABSENCE/REPLACEMENT MEMBERS

An apology for absence was received for Councillor R J Kendrick. It was reported that, under Regulation 13 of the Local Government (Committee and Political Groups) Regulations 1990, Councillor J Brockway had been appointed as a replacement Member for Councillor R J Kendrick, for this meeting only.

2 DECLARATIONS OF MEMBERS' INTERESTS

There were no declarations of interest.

3 ANNOUNCEMENTS BY THE CHAIRMAN, EXECUTIVE COUNCILLOR AND LEAD OFFICERS

There were no announcements by the Chairman, Executive Councillor or Lead Officers

4 MINUTES OF THE MEETING HELD ON 6 APRIL 2022

RESOLVED:

That the minutes of the meeting held on 6 April 2022 be approved as a correct record and signed by the Chairman.

5 SOCIAL CONNECTIONS

Consideration was given to a report by the Assistant Director – Prevention and Early Intervention and the Public Health Programme Manager, which invited the Committee to consider a report on Social Connections.

Members were referred to appendix A to the report, the Social Connection discussion paper, which defined social isolation and loneliness, considers the impacts on different cohorts of people, and listed some of the services currently provided by Lincolnshire County Council (LCC) and others which sought to create the conditions for social connection.

It had previously been suggested that LCC might create a social isolation or social connections strategy. However, following the completion of the social care discussion paper, it had been concluded that social connections should continue to be within the remit of the Health and Wellbeing Board and the developing Integrated Partnership, rather than have its own standalone strategy. It was proposed that the creation of a strategy would add no material value nor should the issues be considered in isolation.

The report suggested that improving social connections should continue to sit within the remit of the Health and Wellbeing Board, the developing Integrated Care Partnership and was already reflected within the priorities of the health and wellbeing strategy.

It was also proposed that improved visibility of needs was developed through the Joint Strategic Needs Assessment (JSNA) which would support commissioning decisions by the Board/Partnership and its constituent members.

Consideration was given to the report and during the discussion the following points were noted:

- The increase in people experiencing loneliness and social isolation was recognised.
- The cost implications of deteriorating health as a result of social isolation and loneliness were emphasised and therefore a preventative approach was recommended.
- The importance of physical touch in responding to loneliness was highlighted as a consideration.
- Volunteer and community groups were credited as a key part of combating social isolation. The Committee highlighted the importance of encouraging people to join community groups.
- It was suggested that some commercial and commissioning activities be refocused to ensure a focus on reducing loneliness. Officers confirmed that this was considered, for example in the current recommissioning of the carers and equipment services and a review of the wellbeing service, all of which had requirements to report on social isolation. The council engaged regularly with services to ensure a focus on new of emerging needs and in the locations with greatest needs.
- It was agreed that report on day services be scheduled for a future meeting of the Committee.

- It was suggested the Council used the County Magazine, Dial-a-Ride or other media outlets to highlight available services and community group offers.
- Connect to Support Lincolnshire was a web-based service directory which allowed people to identify physical assets, buildings and venues which could be used for community group session as well as highlighting services in place already. The need for non-online services to target some of the more vulnerable groups was recognised.
- The customer service centre had been trained to operate with a guided approach to conversations and create a condition where conversations could be reframed to identify the true needs of the individual.
- It was suggested that the absence of street lighting at certain times could be a barrier to social connection for some people.
- It was acknowledged that Covid-19 had contributed to social isolation, particularly as many individuals still felt unsafe in social environments.
- It was suggested that Members familiarised themselves with the Lets Talk Lincolnshire website to identify whether there was a need for a future report.
- The collection of data and analysis of trends continued to take place to better assess need within services. Members were encouraged to keep submitting data and use referral pathways. The Joint Strategic Asset Assessment (JSAA) worked to build data and identify gaps within services and assets, creating an opportunity for members of the public to identify places for volunteer or community groups. A report on the JSAA would be scheduled in due course.
- The difficulties with engaging directly with all the volunteer groups in Lincolnshire were acknowledged. The Council had allocated some funding to the local voluntary sector which would provide an opportunity for them to express themselves at a strategic level and strengthen their voice.
- The Committee expressed a preference for a focus on loneliness to be included in the JSNA as a priority in tackling social isolation.

RESOLVED:

1. That the report be noted and the comments be taken into consideration.
2. That a system-wide approach through the review and development of the Joint Strategic Needs Assessment (JSNA) to improve visibility of local needs, shaping all agencies approaches to reducing social isolation and loneliness be supported as a priority.

6 CHARGING FOR SOCIAL CARE

Consideration was given to a presentation by the Executive Director – Adult Care and Community Wellbeing and the Head of Finance – Adults on charging for social care from October 2023.

The changes would see an introduction of an £86,000 care cap for anybody requiring social care. Local authorities would be responsible for maintaining care accounts of anybody

requiring social care. For Lincolnshire, this would increase from around 8,000 to around 20,000. It was proposed that a move to digital software with the introduction of a banking style app for tracking social care would mitigate the need to recruit more staff in areas which were already dealing with recruitment challenges.

Members were reassured that Lincolnshire County Council (LCC) were in a strong position to respond to the changes due to having representation from Linca and a strengthened corporate structure to support the work of the adult social care team.

The presentation also detailed a timeline of the programme of work in preparation for the changes, and the key risks and mitigating actions.

Consideration was given to the report and during the discussion the following points were noted:

- The Committee were satisfied that the timeline and risks were well mapped out.
- The importance of clear communication with the public throughout the transition process was emphasised.
- Concerns were raised over the financial impact the changes were likely to have on the Council.
- The County Council network had estimated that there would be a substantial shortfall in finances nationally to support Councils in implementing the proposed changes.
- There were still choices to make in terms of the fair cost of care and what was deemed the responsibly of the local authority for funding. Officers were working hard to identify self-funding individuals and were working with the communications team to encourage individuals to self-identify with the Council.
- Officers required further information on the criteria for charging for hotel costs before the impact on service users could be properly identified. It was noted that third party payments would be excluded from the care cap calculations.
- Assurance was provided that a programme of work had been created to support the changes.
- Members were pleased to see that the forms and application process was being simplified.
- Local Authorities would have a responsibility within the new guidance to notify individuals 12 months before they were due to reach the care cap threshold.
- The recent report from the County Council Network was agreed to be circulated.
- The Council were working with suppliers to identify what a 'good care account' would look like. Assurance was provided that every known individual would be communicated to about their care account and each statement would include contact details of who to contact with any queries.
- Officers were keen to trial the changes during the current financial year.
- It was estimated that it would take on average around three years for individuals to reach the care cap.

- If it was suspected that individuals had transferred their assets shortly before transferring to care, investigations would be carried out to identify whether the transfers were aligned with the care act policy. Cases were taken on an individual basis.
- Individuals would be able to pay supplements to receive any extra care.
- It was requested that an update be provided, when appropriate, to assess how the pilot was progressing.

RESOLVED:

1. That the update be noted.
2. That a report be scheduled on the progress of the pilot, when appropriate.

7 THE GOVERNMENT'S PROPOSALS FOR HEALTH AND CARE INTEGRATION (WHITE PAPER - JOINING UP CARE FOR PEOPLE, PLACES AND POPULATIONS)

Consideration was given to a presentation by the Executive Director – Adult Care and Community Wellbeing, which provided an overview of the White Paper on Joining Up Care for People Places and Populations

The presentation explained that the white paper was part of the whole picture incorporating the Health and Social Care Bill and Social Care Reform White Paper and should be seen as mutually reinforcing reforms.

The paper highlighted a need for faster integration across health and social care and would introduce a more holistic approach which sought to introduce shared outcomes for person centres reforms; focused at 'place level' with a single point of responsibility accountable for shared outcomes and effective leadership and had ambition for better integration across health and social care services.

There was an expectation that a common performance framework be developed and a national set of priorities and a broader framework for local outcome would be prioritised by April 2023.

There was also an ambition to pool or align budgets, where possible. The introduction of pooled budgets was likely to become simpler.

The changes also came with an expectation that all individuals would hold their own individual health and care record.

Assurance was provided that experience of joined up care in Lincolnshire was already significant compared to other local authorities.

Consideration was given to the presentation and during the discussion the following points were noted:

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- Members were encouraged by the simpler process for pooled budget as current legislation was often seen to stifle innovation on partnership working.
- The Committee supported the integration of health and social care services as a way forward.
- Assurance was provided that the level of scrutiny within local authorities would not be diminished as a result of the changes. Opportunities would still be provided to scrutinise budgets.
- The changes would provide health and social care providers with the opportunity to offer a wider range of housing choices based on their health or social care need. The Council were already engaging with district authorities on the changes.
- The Committee were reassured that all pooled arrangements implemented with the Council had to date been successful. The Council's familiarity with pooled arrangements provided assurance that pooled budgets were beneficial.
- The importance of operating collectively as a council would be essential to ensure the future success of the work.
- The Government were interested in Lincolnshire's approach to digital investments, housing and charging reform. It was hoped that the Council would be able to obtain grant funding in these areas.

RESOLVED:

That the presentation be noted and comments made be taken into consideration.

8 ADULTS AND COMMUNITY WELLBEING SCRUTINY COMMITTEE WORK PROGRAMME

Consideration was given to the Health Scrutiny Officer, which invited the Committee to consider its work programme, as set out on pages 80-82 of the agenda pack.

The Committee also welcomed the following additions to the work programme:

- Tackling all age obesity
- Update on the progress of day services
- Joint Strategic Asset Assessment
- Update on charging for social care

RESOLVED:

That the work programme, as amended, be agreed.

The meeting closed at 1.00 pm