

HEALTH AND ADULT CARE SCRUTINY COMMITTEE

Minutes of the meeting of the Health & Adult Care Scrutiny Committee held on 26 February 2019 at 2.00pm in Meeting Rooms G3-G4, Addenbrooke House, Ironmasters Way, Telford, TF3 4NT

Present: Cllrs A J Burford (Chair), M Boylan, E A Clare, V A Fletcher, L A Murray, T J Nelson and RJ Sloan; Co-optees C Henniker, H Knight and D Saunders

In Attendance: S Bass, Commissioning, Procurement & Brokerage Service Delivery Manager; J Eatough, Assistant Director: Governance, Procurement & Commissioning; C Jones, Director of Children and Adult Services; R Pervis, Team Leader, Projects, Policy & Quality; S Worthington, Senior Democratic and Scrutiny Services Officer.

HACSC-23 Apologies for Absence

Councillors S P Burrell and N A Dugmore and Co-optee J Gulliver

HACSC-24 Declarations of Interest

None.

HACSC-25 Minutes

It was noted that in respect of Neighbourhood Working, the sentence 'local GPs who ran the neighbourhood areas' should read 'local GPs who led the neighbourhood areas'.

Resolved – that the minutes of the meeting of the Health & Adult Care Scrutiny Committee held on 18 December 2018 be confirmed and signed by the Chairman, with the above amendment.

HACSC- 26 Adult Social Care & Commissioning Improvement Plan 2018

The Assistant Director: Governance, Procurement & Commissioning explained that the report provided an explanation of the role of commissioning in the improvement plan. The service was as flexible as possible and it was vital that the important role of carers was never forgotten. The report highlighted the challenges that were to be faced in the future, including an increased number of residents with dementia and a significant increase in the demand for domiciliary care.

A discussion took place and Members asked the following questions.

It was noted that Telford had the second lowest rates in the West Midlands of residents in residential care. This was excellent if there was support for people to live at home, was this the case?

The Commissioning, Procurement & Brokerage Service Delivery Manager advised that a high number of residents accessed domiciliary care and that the aim of the service was to keep people well at home. Some residents were also moving out of residential care into supported living accommodation.

Did other Local Authorities' in the West Midlands ask for strategies used in Telford and Wrekin?

It was confirmed there was a commissioners group for the West Midlands where good practice was shared.

Although it was positive that good rates were being sourced by the Council for residential beds, did this have a knock on effect on rates for self-funders?

The Assistant Director: Governance, Procurement & Commissioning stated that this was comparing different markets, Authorities did have buying power that enabled them to secure lower rates than self-funders could.

There was a concern that the Council was 'chasing targets' for keeping people out of residential settings, rather than listening to their needs.

It was confirmed that there were no targets and it was important that residents accessed the right care. Assessments are completed on an assets based approach. There are occasions where a resident had five calls a day, which far outweighed the cost of a residential bed in the Borough, however, this was the best choice for that person.

The move to smaller units for people with dementia was welcomed. It was noted that it was vital that as well as the commissioners, the Committee needed to hear from providers and service users.

Could an explanation be provided on the 'zones'.

In the Vale of Glamorgan, it was noted that there were a huge number of providers working within very small areas, a tender was put out for a provider to cover one area covering all service users within that area. The scheme worked very well and it was being rolled out to other areas and other Councils. Local providers were very keen to do this. There were over 20 active providers in the Borough.

In regards to recruitment, was local training being expanded? There needed to be a shift in attitudes for the skills of care workers.

The Department of Health and Social Care had recently launched a national recruitment campaign and the Council are linking into this to support a local campaign. The Council was working with the skills team and Telford College, who had recently established a Virtual Reality training area. There were a number of different training approaches used in the Borough, as well as across Shropshire and the wider West Midlands. It was noted that the care market did not conform to Local Authority boundaries and many providers were shared with Shropshire and Staffordshire. The Council were working with the local University and SaTH to provide a career pathway for domiciliary care workers to become state registered nurses and noted that care workers were skilled professionals in their own right.

A discussion was held regarding care packages on discharge from hospital. Members shared their own positive and negative experiences of this process.

The Council worked with the hospital to ensure patient flow and there was a dedicated team

supporting this.

The Attendance Allowance form was incredibly complex, was there supported offered to complete this form?

Age UK offered volunteers to help with this and officers from the Council's Financial Case Management Team were also available to assist.

HACSC- 27 Unmet Needs Report

The Chair welcomed the report of Healthwatch. The Committee received a presentation from Healthwatch.

A discussion took place and the following questions were asked.

Was there a list available of all organisations where residents could get help? Could this list be provided in places across the Borough, and not just online?

Care navigators were present in each GP practice who could signpost to services. A new service, Live Well Telford, would soon be launched which would be accessible across the Borough and available to professionals and Members. This would be a Wikipedia type site where the community could update and populate the site to ensure it remained up to date.

As part of their license, all taxi and PHV drivers in the Borough accessed dementia training, however, this did not seem to be working and some drivers refused to take Zimmer frames. What more could be done.

Taxi and PHV drivers who operated in the Borough could be licensed outside of the Borough, such as in Shropshire or Wolverhampton. Ongoing liaison was taking place with other Local Authorities on these issues.

A concern was expressed regarding the turnover of Social Workers.

The Service had worked hard to reduce turnover of Social Workers and this had been successful. There was a comprehensive records system in place in the service area.

Where there long waiting times to access services, such as occupational therapists.

Community hubs were being developed with bookable appointments available at locations across the Borough. Waiting times for assessments with occupational therapists had decreased.

Although there was not enough data to form a conclusion, a member of the review group advised that from the surveys, it was users who had older responses who had more negative experience, people with more recent experiences tended to have a more positive experience.

A member shared experiences of residents who had issues accessing more complex items

from occupational therapists. Minor adaptations were sourced very quickly but there was a very long wait for more complex areas.

The Director of Children's and Adults Services advised that this would be investigated and brought back to Scrutiny.

The report seemed to focus on users of the My Choice service who would therefore be aware of My Choice.

The questionnaires were sent to people outside My Choice, as well as those who had accessed the service, around half were completed by users of Day Centres.

The question of unmet needs in wider society was not answered.

This survey was only a small sample and was not intended to answer a wider question. This report was to inform areas for further work and in-depth review. It was noted that there were almost no other reports on this subject.

HACSC- 28 Neighbourhood Working

The Chair welcomed the report of the Director of Children's and Adult Services. The report provided a chronology of events and it was noted that neighbourhood work had not been given the priority it needed within the STP. It was noted that it was important to retain Telford's identity as an area separate to the rest of Shropshire.

The Chair advised that it was heartening to see this report. The JHOSC had been clear that without staffing and resources being put into neighbourhood work, then Future Fit could not work.

In respect of GPs perspectives on neighbourhood working, the GPs interviewed were clear that the work they have done was not in relation to this programme but was good practice.

The Committee had previously heard good news stories where work done through the neighbourhoods programme had changed people's lives. Experiences were shared of the Fit for All Falls clinic and dementia services.

Members considered that preventative work was key. Members considered that there was too much focus on the acute sector.

HACSC- 29 Chairs Update

The Chair noted that this was the Committee's last meeting before the Council's Borough Elections in May 2019. The Chair thanked the Members of the Committee for their work during the cycle.

Members were advised that the CCG had recently cut funding for the dementia drop in centres in the Borough. The Chair agreed to write to the CCG in regard to this.

The meeting ended at 16.04pm.

Signed:

Date: