

Minutes of a meeting of the Adults and Communities Overview and Scrutiny Committee held at County Hall, Glenfield on Monday, 7 November 2022.

PRESENT

Mr. T. J. Richardson CC (in the Chair)

Mrs. L. Broadley CC Mr. B. Champion CC Mr. N. Chapman CC Mr. L. Hadji-Nikolaou CC Mrs. A. Wright CC

In attendance

Mrs. C. M. Radford CC – Cabinet Lead Member for Adults and Communities Mr. T. Parton CC – Cabinet Support Member Mr Joe Johal – Healthwatch Leicester and Healthwatch Leicestershire (Via Microsoft Teams)

32. Minutes.

The minutes of the meeting held on 5 September 2022 were taken as read, confirmed and signed.

33. Question Time.

The Chief Executive reported that no questions had been received under Standing Order 34.

34. Questions asked by members under Standing Order 7(3) and 7(5).

The Chief Executive reported that no questions had been received under Standing Order 7(3) and 7(5).

35. Urgent Items

There were no urgent items for consideration.

36. Declarations of interest.

The Chairman invited members who wished to do so to declare any interest in respect of items on the agenda for the meeting.

Although not a member of the Committee, Mr Joe Johal, representative from Healthwatch Leicester and Healthwatch Leicestershire who was attending the meeting as a participating observer, declared that he was a Company Director for a care firm in Leicestershire.

37. <u>Declarations of the Party Whip in accordance with Overview and Scrutiny Procedure Rule</u> <u>16.</u>

There were no declarations of the party whip.

38. <u>Presentation of Petitions under Standing Order 35.</u>

The Chief Executive reported that no petitions had been received under Standing Order 35.

39. Progress In Delivering the Social Care Reform Programme.

The Committee considered a report of the Director of Adults and Communities, the purpose of which was to update the Committee with the progress on the Social Care Reform Programme in respect of charging reform, digital and system development, and assurance. A copy of the report marked 'Agenda Item 8' is filed with these minutes.

Arising from discussion the following points arose:

- (i) The County Council's main commissioning partner was the NHS. It was explained that, at the same time the Care Quality Commission (CQC) would be assuring the competence of local authorities, they would also be assuring the competence of Integrated Care Boards (ICBs) using the same framework and themes of inspection. The CQC would expect to see read-across between the two assurance processes. Working more closely with the ICB was noted as an area for further development.
- (ii) One of the themes in the CQC assurance framework was leadership, which linked directly to elected members. It was expected the CQC would seek to assure itself that the Lead Member for Adults and Communities, the Cabinet and the Adults and Communities Overview and Scrutiny Committee Members had an understanding of Adult Social Care Strategy and how that was being delivered, and the outcomes and performance.

RESOLVED:

That the report on progress in delivering the social care reform programme be noted.

40. <u>Update on the Provision and Procurement of Community Life Choices Services (Day Services).</u>

The Committee considered a report of the Director of Adults and Communities, the purpose of which was to provide an update on the provision and procurement of commissioned Community Life Choices (CLC) services and the progress in supporting existing service users to transfer from in-house CLC services to appropriate alternative services. A copy of the report marked 'Agenda Item 9' is filed with these minutes.

Arising from discussion the following points were raised:

(i) It was asked if the one example of the successful transition of service included in the report was the norm from the 93 people that had been transitioned to alternative provision. In response, the Committee was advised that, whilst data regarding

satisfaction was not collected, regular reviews were undertaken and there was evidence that people were attending the alternative provision.

- (ii) A Member requested an update outside of the meeting on the position of Roman Way to share with Members in his division.
- (iii) It was reported there had been 13 redundancies from the 43 members of staff as part of the action plans. Staff impacted by the closures have been notified of ongoing opportunities within A&C. It was noted that the 13 redundancies were people who had either taken early retirement of had moved to other employment. There were plenty of redeployment opportunities or training provision for those who wanted to remain.
- (iv) Procurement of the new CLC framework had resulted in 27 extra providers, including those delivering services for people with profound and multiple disabilities. It was noted that in the Market Harborough area where difficulties had been expected in transferring some people, particularly those with profound and multiple disabilities, all affected service users had successfully transferred to new providers. The total number of CLC providers would be provided to Members outside of the meeting.
- (v) It was noted that the County Council had concentrated on finding long term providers as this met the needs of the affected 112 service users. The County Council's inhouse expertise was being used to provide respite and crisis care through the Short Breaks service which already operated 24 hours a day. There were usually three or four cases a month that required crisis or short-term provision.
- (vi) The procurement framework had focused on matching people with provision in their local area. Some people had chosen not to go to a traditional day service but had chosen to have a direct payment and purchase different activities. Each service user had been reviewed individually to identify which provider or providers would best meet their needs. The remaining 19 service users were subject to the same process and most had a transition plan in place. Any service user who was unable to transition to an alternative provider would be transferred to the in-house short breaks service.
- (vii) Members requested detail on usage of the short term and crisis CLC service for the last six months and projected figures for the next six months. It was queried whether it was economic to provide the service for a small number of service users. However, the Committee was advised that the short term and crisis CLC service was provided from the existing short breaks service and was not an additional provision. A report would be brought to the Committee at a future meeting.
- (viii) A Member asked if there was an independent provider that provided crisis care, and what services for people with learning disabilities continued to be provided by the County Council. The Chairman suggested that the two points raised be discussed as future agenda items for the Committee.

The Chair suggested that points raised by Members and information on transition timelines be brought together in a report to be provided at a future meeting of the Committee.

RESOLVED:

(a) That the report on progress delivering the social care reform programme be noted.

(b) That the Chairman and Spokespeople of the Committee be asked to consider the content of a further report on Community Life Choices, including the closure of the inhouse service, provision of short term and crisis care and services provided for people with learning disabilities, to be submitted to a future meeting of the Committee.

41. Managing Demand in Adult Social Care.

The Committee considered a report of the Director of Adults and Communities, the purpose of which was to advise the Committee of the current demand pressures being faced by the County Council's Adults and Communities Department, including people waiting for care and support, an overview of waiting lists and the current allocations across the County Council's Adults and Communities Department Care Pathway Teams. A copy of the report marked 'Agenda Item 10' is filed with these minutes.

In introducing the report, the Director informed the meeting that the report had been brought to enable the Committee to be sighted on challenges in meeting demand in Leicestershire and nationally, and the growing awareness of some of the issues in social care, particularly in terms of unmet need. The report provided context and information on the current position of people waiting for assessment and analysis of how performance in Leicestershire compared to that of other local authorities.

Members were further asked to note that there was no set timeframe within the Care Act for an assessment to be carried out: the requirement was a 'reasonable' or 'appropriate' timeframe. The County Council's position had identified 28 days as a reasonable timeframe, although it was noted that some more complex cases could take longer.

Arising from the discussion the following points were made:

- (i) It was questioned, with the rising numbers of referrals, how many cases were allocated to each worker at any one time. It was reported that through the target operating model that the allocation of cases had been looked at closely and was carefully managed. Waits were triaged and reviewed frequently, to enable workers to manage the cases they had. The benchmark for usual cases for a full-time equivalent worker was no more than 25 cases, with throughput of one to two cases per week for social workers, three cases per week community support workers and three to four cases a week for review officers. The duty team would be used to allocate short term intervention for urgent cases.
- (ii) Members noted that most assessment activity was undertaken by the Home First Team. The client group for this team was predominantly elderly people using the service for the first time; more detail would be provided for members of the types of service user and relevant statistics. Home First also undertook assessments of people being discharged from hospital. These usually took place within one to two days, and very often people would be discharged with support services prior to an assessment taking place. Members requested more detailed performance information relating to hospital discharge.
- (iii) Members referred to the low, medium and high priority weighting for cases for mental health awaiting allocation, noticing in particular the 'high' prioritisation figure which was a large percentage. In response it was noted that the level of risk did not relate to the level of support that was needed: someone of high risk to the Authority might not be at risk of admission to hospital.

- (iv) People who had return visits to hospital would not be identified separately but would be characterised as either being new to the Authority, existing service users, or existing users with increased level of need.
- (v) Members noted the number of people waiting for assessment had risen by 90,000 (44%) in five months. In response it was noted that the highest demand was in hospital discharge which was driving demand in social care at a rate the Authority had not seen before. It was further noted that organisations such as Age UK and Mencap amongst other national voluntary sector organisations had been saying for some years that there were hundreds of thousands of people whose social needs were not being met. The data that was now being presented was corroborating the statements of voluntary organisations. However, not all people awaiting an assessment would be eligible for state funded care.
- (vi) It was noted that, despite a 34.7% increase in demand, Leicestershire only had a 4.6% increase in people waiting for an assessment. It was explained that the Authority had moved from 50 vacancies to 19, which had increased the ability to undertake assessments, and would have had a significant impact on people awaiting assessment. In addition, the work on the Target Operating Model, which had been undertaken pre-pandemic, had enabled officers to have throughput and increased efficiency compared to other authorities in the ADASS survey. A lot of information from the work undertaken with Newton Europe on the Target Operating Model was being rolled out to other interested authorities. Officers were also scoping a piece of work across 10 authorities in the East Midlands looking at people waiting for assessment and care, with a focus on how to engage with people waiting for services and frontline staff, to understand the key issues and how to address them. Work was planned for the New Year, and it was hoped that a bid for funding to the University of Birmingham would be successful.

The Chair noted the report and asked suggested the issue of rising numbers remain as an item to be watched. He further asked the reports contain figures when presenting detail alongside percentages.

RESOLVED:

That the report on managing demand in adult social care be noted.

42. <u>Consultation on Eligibility for Care Technology Services.</u>

The Committee considered a report of the Director of Adults and Communities, the purpose of which was to seek the views of the Committee on a proposed consultation on the eligibility of care technology services that were previously provided on a discretionary basis. A copy of the report marked 'Agenda Item 11' is filed with these minutes.

Following presentation of the report, the Chairman suggested that it would be useful if the Members of the Committee could have sight of the consultation document to ensure the right phraseology was being used, an element where Members could assist.

RESOLVED:

(a) That the report regarding the consultation on eligibility for care technology services be supported.

- (b) That the consultation documentation be shared with Members of the Adults and Communities Overview Scrutiny Committee before the consultation commenced.
- 43. Date of next meeting.

It was noted that the next meeting of the Committee would be held on 23 January 2023 at 2.00pm.

2.00 - 3.38pm 07 November 2022 CHAIRMAN