



HEALTH, SOCIAL CARE AND WELLBEING SCRUTINY COMMITTEE

MINUTES OF THE MEETING HELD AT PENALLTA HOUSE, TREDOMEN,
YSTRAD MYNACH ON TUESDAY, 21ST OCTOBER 2014 AT 5.30 P.M.

PRESENT:

Councillor L. Ackerman - Chair
Councillor Mrs P. Cook - Vice Chair

Councillors:

Mrs E.M. Aldworth, A.P. Angel, Mrs J. Gale, N. George, C. Gordon, Mrs P. A. Griffiths, G.J. Hughes, S. Morgan, J.A. Pritchard, A. Rees.

Together with:

D. Street (Corporate Director Social Services), G. Jenkins (Assistant Director Children Services), J. Williams (Assistant Director Adult Services), M. Jones (Finance Manager), J. Jones (Democratic Services Manager), S.M. Kauczok (Committee Services Officer).

Users & Carers: Mr C. Luke, Miss L. Price and Mrs M. Veater MBE.
Aneurin Bevan University Health Board: Mrs S. Crane.

WELCOME

The Chair welcomed representatives of PricewaterhouseCoopers, Torfaen County Borough Council and Newport City Council to the meeting.

1. APOLOGIES FOR ABSENCE

Apologies for absence had been received from Councillors Mrs G. Bevan, L. Binding, L. Gardiner and R. Woodyatt; Mrs B. Bolt (ABUHB), Mrs J. Morgan (Users and Carers).

2. DECLARATIONS OF INTEREST

Councillor L. Ackerman declared an interest in agenda items 6 and 9 in that her mother is in receipt of care.

Councillors Mrs P. Cook, C. Gordon and Mrs E.M. Aldworth declared an interest in agenda item 10 as they have relatives who receive the Telecare service. Mrs M. Veater also declared an interest in agenda item 10 as she receives the service herself.

3. MINUTES

RESOLVED that the minutes of the following meeting be approved as a correct record and signed by the Chairman: -

1. Health, Social Care and Wellbeing Scrutiny Committee held on 9th September 2014 (minute nos. 1-12).

4. CONSIDERATION OF ANY MATTER REFERRED TO THE SCRUTINY COMMITTEE IN ACCORDANCE WITH THE CALL-IN PROCEDURE

There had been no matters referred to the Scrutiny Committee in accordance with the call-in procedure.

5. REPORT OF THE CABINET MEMBER

Councillor R. Woodyatt, Cabinet Member for Social Services, had tendered his apologies for the meeting. There was therefore no Cabinet Member's report on this occasion.

SCRUTINY REPORTS

Consideration was given to the following: -

6. PRESENTATION - ABUHB STROKE SERVICE REDESIGN UPDATE

The Chair welcomed Michelle Graham, Martin Lane and Alison Shakeshaft, representing the ABUHB Stroke Service Redesign Project Team, who had been invited to give an update on the implementation of the stroke service redesign project.

It was noted that stroke is the leading cause of adult disability in Wales and the third most common cause of death after cancer and heart disease. Approximately 900 strokes occur every year in the ABUHB area. ABUHB's vision is to help people minimise the risk of having a stroke and where stroke does occur, to provide the best quality care and support to maximise survival and return to independence as quickly as possible.

The key features of the ABUHB new model for stroke services in Gwent are: an increased focus on prevention; a centre of excellence for hyper-acute care and early rehabilitation; community based Early Supported Discharge services; fewer inpatient stroke rehabilitation units providing specialist rehabilitation; ongoing general rehabilitation, complex care planning and palliative care in a local hospital or home setting as appropriate and multi-agency support for life after stroke and secondary prevention.

It is proposed that stroke patients will receive specialist care in a centre of excellence that meets clinical standards. Access to specialist care will be more equitable and consistent and stroke patients will be able to return home sooner with Early Supported Discharge which improves outcomes and patient/carers satisfaction.

Following a scoping and feasibility study, which commenced in February 2013, the preferred model was approved by ABUHB on 28th May 2014. The proposed outline model consists of one hyper-acute stroke unit, a community Neuro Rehab Team and specialist stroke rehabilitation units. General rehabilitation/complex care management would be undertaken at local hospitals and there would be greater emphasis on primary and secondary prevention.

Moving towards the implementation phase, questionnaires had been circulated to 500 residents in Gwent outlining the proposed changes. A Community Neuro Rehab Team had been established and there is ongoing engagement with CHC's, local authority scrutiny committees, the Frailty Programme, NCN's, the public, staff, 3rd sector groups and Powys HB. The next steps include the development of a stroke website, commencement of ESD via the Community Neuro-rehabilitation Service, ongoing engagement/appraisal of the preferred interim model and a move towards implementation of the preferred interim option, early 2015.

The Chair thanked the officers for their informative presentation and during the course of the ensuing discussion matters were raised in relation to the following: -

A Member queried whether thrombolysis (a very effective treatment if a patient is seen quickly as it can break down and disperse a clot that is preventing blood from reaching the brain) could be rolled out to other hospitals. Officers responded that as the stroke patient needs to be seen by a clinician quickly and have a scan, the number of places where the treatment could be administered is limited.

Arising from questions raised in relation to staffing levels within stroke units and Welsh Ambulance Service targets, it was noted that work with the Welsh Ambulance Service was ongoing and a decision had recently been taken to ring fence stroke beds at the Royal Gwent and Nevill Hall Hospitals. Much work had been undertaken in terms of the future bed model and the intention was that there would be stroke wards in the right place with more staff available.

Members were advised that stroke passports would be drawn up with patients and their families. The interactive document is designed to help stroke patients feel fully informed and engaged in their recovery and to link information provided by NHS, social and voluntary services, especially after they are discharged from hospital. The passport would cover the different stages of the stroke journey, early (hospital) treatment, rehabilitation and life after a stroke.

The Chair thanked Michelle, Alison and Martin for their attendance and contribution to the meeting.

7. BUDGET MONITORING REPORT (MONTH 5)

The report summarises the projected financial position for the Social Services Directorate based on information available as at month 5 of the 2014/15 financial year. The report also identifies the 2014/15 savings targets that have been achieved by the Directorate and the progress that has been made towards delivering the targeted savings that have not yet been achieved.

Members were advised that the projected underspend must be viewed in the context of an anticipated cut in WG funding for the forthcoming financial year which is likely to restrict the amount of additional funding available to meet demographic pressures in 2015/16 and require budget cuts within the directorate.

The 2014/15 revenue budget settlement for Social Services included targeted savings of £2.062m. The projected overspends and underspends take account of these savings targets. Progress made against the individual savings targets included in the £2.062m is summarised in paragraph 4.7.2 of the report.

Of the £2.062m directorate savings target for 2014/15, £1.848m will be delivered in 2014/15 with a further £0.184m delivered in 2015/16 as a result of actions already taken. This leaves just £30k of savings to be identified within the direct care management structure. It was noted that although the actual savings delivered in 2014/15 fall short of the £2.062m target, there will be no need to draw upon service reserves as other underspends are anticipated in 2014/15.

In response to questions raised by Members in relation to the savings targets set out in the table at paragraph 4.7.1, Officers explained that it had been possible to identify certain posts for deletion following a review of services. Where underspends had been identified in certain areas these would help to deal with any additional demand on services, for example, during a hard winter. In terms of the reference in SS25 to the Woodland Day Project, which ended on 31st July, Officers advised that this had been a small project in Wattsville used by residents of Torfaen. The service users had since been re-located.

Sam Crane, ABUHB, indicated that she would like to report back to the Scrutiny Committee in the future on the good work that is taking place around integrated working.

Reference was made to the projected underspend of £334k under Fostering and Adoption and a Member queried whether the support offered to families through the Special Guardianship and Residence Orders could be sustained in the event of the increasing financial challenges.

It was moved and seconded that the recommendations contained in the report be approved. By a show of hands this was unanimously agreed.

Members noted the projected underspend of £2,131k for 2014/15 together with the progress made against the savings targets included in the 2014/15 budget settlement for the Directorate.

8. DEPRIVATION OF LIBERTY SAFEGUARDS

This report was requested at a previous meeting of the Scrutiny Committee by Councillor L. Binding. Due to unforeseen circumstances Councillor Binding was unable to attend the meeting and it was therefore agreed to defer the report to the next meeting of the Scrutiny Committee.

9. EXTERNAL REVIEW OF THE GWENT FRAILTY PROGRAMME

Members received a presentation on an independent review undertaken of the Gwent Frailty Programme. In order to obtain an external perspective on the effectiveness of the Frailty programme the Gwent Frailty Joint Committee agreed to commission an external review which, following a tendering exercise, was undertaken by Cordis Bright Ltd. The report summarises the key findings and recommendations of the review and explains how the recommendations have been considered and will be implemented.

The Assistant Director highlighted the key issues from the review which evaluated whether the Gwent Frailty Programme is delivering the objectives set out in the original business case and whether they are still fit for purpose i.e. is the service provision effective; what is the impact on other systems; is it going in the right direction and does it have the correct information for decision-making and service planning.

A copy of the full report is attached as an appendix to the report. The report is very thorough in its examination of the impact of the Gwent Frailty Programme and provides a series of recommendations. The summary provided in pages 6-20 of the review outlines the 20 main recommendations identified by Cordis Bright. Following receipt of the draft report these recommendations were considered by both the Frailty Joint Committee and the Operation Co-ordinating Group and the responses from both groups are recorded in column 3 of the table. In addition a more detailed explanation of the recommendations and responses are contained in paragraphs 6.11.1 to 6.11.36.

Particularly significant recommendations are to appoint a senior leader for the programme; to review the governance structure, including terms of reference and membership of the joint committee / OCG and to ensure that all areas are providing a consistent service with a similar skill mix (although the posts do not have to be identical) and available at a minimum at the times set out in the core standards (in particular until 7pm). Clearly the appointment of the senior leader will be key in ensuring the recommendations of the review are implemented. The implementation will also be overseen by the revised governance structure.

The Chair thanked the Assistant Director for the informative presentation. During the course of the ensuing discussion, a Member queried whether the term 'frailty' could be perceived as being negative and contradicts what is actually being achieved. It was noted that some service users are put off by the 'frailty' label and dislike being referred to as frail.

Several Members sought further information with regard to the tendering exercise and the cost to undertake the review. Officers confirmed that the tender exercise, which had been undertaken by the Procurement Service, had attracted no interest from public sector organisations. The cost of the review (£33k) had been jointly funded by the Frailty Programme through the participating Authorities and the Programme itself is supported by repayable Welsh Government Invest to Save funding of £7.3 million which is being used to "pump prime" the development of services.

Reference was made to the eligibility criteria for referral, which differs across the Gwent Authorities. A Member felt that the description in paragraph 3.4.6 was too general and that there should be more emphasis on falls and their prevention. In this context, reference was made to a valuable screening service which had been provided in the past for the over 75's, which had ceased when the funding from Welsh Government had come to an end.

In terms of future scrutiny, Members were advised that the appointment of a senior leader for the programme employed by ABUHB, will be key in ensuring the recommendations of the review are implemented. The implementation will also be overseen by the revised governance structure and fed back into existing scrutiny arrangements.

A Member expressed concern with regard to the reference in Recommendation 4, to implement the Medical Model across all local authority areas and stressed the need for there to be more emphasis on how people are going to be looked after in the community. The Assistant Director advised that there is currently inconsistency of service across Gwent and that reference to the Medical Model was more to do with clinical governance.

Another Member referred to the excellent Community Resource Team (CRT) initiative and queried how public awareness of it could be raised. Officers agreed that more work was needed on the promotional aspect of this initiative.

The Chair thanked Members and Officers for their contributions to the debate. It was agreed that an update report would be presented to the Scrutiny Committee in due course.

10. CHARGING FOR TELECARE SERVICES

Councillors P. Cook, E. M. Aldworth and C. Gordon declared an interest and left the meeting during consideration of this item. Mrs M. Veater also declared an interest in this matter.

The report proposed a charging policy for Telecare services that would ensure the service is financially sustainable, whilst minimising the impact upon service users.

During 2013/14, Housing Services began a programme of decommissioning the hardwired Telecare equipment based in group housing schemes. On removal of the hardwired equipment, service users have the option to transfer to a lifeline arrangement (dispersed unit) with Social Services. However, many of the hardwired units are located in properties

occupied by less vulnerable people who are unlikely to choose to receive a replacement dispersed unit. This will lead to a reduction in contributions from service users and in the service level agreement charge receivable from Housing Services. This in turn will lead to a budgetary shortfall for the 2014/15 financial year and beyond.

Existing service users living in private accommodation currently pay a maximum of £4.30 per week for their dispersed units. Whereas, existing service users accommodated in group housing schemes currently pay a maximum of £3.10 per week for their hardwired alarms. When these hardwired systems are replaced with dispersed units, service users in public housing group schemes will be paying less than those in private accommodation for what will then be the same service.

Where service users are in receipt of Council Tax Benefit or Housing Benefit they are entitled to a subsidy from the Supporting People Team, which currently stands at £2.48 per week. This is significantly higher than other Welsh Authorities and has been challenged by the Supporting people Regional Collaborative Committee. If this subsidy is reduced it will add to the budgetary pressure within the Telecare service.

The issues highlighted in paragraphs 4.2, 4.3 and 4.4 of the report create a financial pressure for the Telecare Service of around £88k. However, at the same time, a surplus of £65k will be created within the Adult Social Services Supporting People budget as result of the proposed reduction in the Supporting People subsidy to £1.50. It is proposed that this surplus should be vired into the Telecare Service leaving a net shortfall of around £23k.

An inflationary increase of 3% with indefinite protection for existing service users would only raise around £5k in additional income and would not address the inequity between private and public sector service user charges. It is therefore proposed to implement a 3% inflationary increase on the 2013/14 charges but to limit the protection offered to existing service users so that they will only experience a maximum increase of 50p per week each year until they reach parity with new service users.

During the course of the ensuing discussion Members sought details of the rental costs of the Telecare Service which is based at Parc Penrhos, Caerphilly together with information on how the system operates.

It was moved and seconded that the recommendations in the report be approved. By a show of hands they were unanimously agreed. It was therefore recommended to Cabinet that: -

1. The charges identified in the table in paragraph 4.9.1 be implemented with effect from 1st January 2015 in order to maximise income while allowing a reasonable lead in time.
2. The Supporting People Team pay £1.50 per dispersed unit towards the weekly charge for service users in receipt of council tax benefit through the 2014/15 financial year. This will be reviewed for the 2015/16 financial year.
3. £65k be vired on a permanent basis from the Adult Services Supporting People budget into the Telecare Services budget.
4. Existing service users' charges continue to increase by £0.50 per week each year until they reach parity with charges for new service users.

11. REQUESTS FOR ITEMS TO BE INCLUDED ON THE NEXT AVAILABLE AGENDA

The following requests were received.

1. Councillor Gale referred to a previous request she had made for information relating to a private hospital in her ward. Due to the sensitive nature of the information requested, it was agreed that the Corporate Director Social Services would arrange to discuss the matter with Councillor Gale on a one to one basis.
2. A request was made for an update on the feasibility of Members making rota visits to private care homes.
3. Mrs Veater requested a progress report on the Carers' Strategy with particular reference to how the funding is being used. It was agreed that the Corporate Director Social Services would discuss this matter with ABUHB with a view to a report being prepared for a future meeting.

The Democratic Services Manager informed Members that the draft Forward Work Programme for the Scrutiny Committee was on the Council's website for consultation. The work programme for the next 3 months would be formalised following consideration at the Scrutiny Leadership Group on 29th October 2014.

12. ITEMS FOR INFORMATION

The following item was received and noted without discussion.

1. Rota Visits by Members to Social Services Establishments: 1st April 2014 to 30th September 2014.

The meeting closed at 19.35 pm.

Approved as a correct record subject to any amendments agreed and recorded in the minutes of the meeting held on 2nd December 2014.

CHAIR