

**ADULT SOCIAL CARE OVERVIEW AND  
SCRUTINY PANEL  
10 JANUARY 2011  
7.30 - 9.06 PM**



**Present:**

Councillors Turrell (Chairman), Harrison (Vice-Chairman), Baily, Blatchford, Mrs Fleming, Leake, Phillips and Mrs Shillcock

**Executive Member:**

Councillor Birch

**Apologies for absence were received from:**

Councillor Ms Wilson

**Also Present:**

Councillor Edger

Simon Broad, Head of Adult Safeguarding

Andrea Carr, Policy Officer (Overview and Scrutiny)

Mark Gittins, Performance Manager

Mira Haynes, Chief Officer: Older People & Long Term Conditions

Zoë Johnstone, Chief Officer: Adults and Commissioning

Glyn Jones, Director of Adult Social Care and Health

Amanda Roden, Democratic Services Assistant

**25. Minutes and Matters Arising**

**RESOLVED** that the minutes of the meeting of the Adult Social Care Overview and Scrutiny Panel held on 12 October 2010 be approved as a correct record, and signed by the Chairman.

Arising from the minutes, training would be arranged for Councillors in relation to Deprivation of Liberty Safeguards, the Mental Capacity Act and Safeguarding Adults as part of the 2011/12 Member Briefing Seminar programme.

**26. Declarations of Interest and Party Whip**

There were no declarations of interest relating to any items on the agenda, nor any indications that members would be participating whilst under the party whip.

**27. Urgent Items of Business**

There were no urgent items of business.

**28. 2011/12 Draft Budget Proposals**

The Director of Adult Social Care and Health presented a report on the key themes and priorities for the Adult Social Care and Health Department as outlined in the Council's Draft Budget Proposals for 2011/12. The key themes included draft budget pressures, draft budget savings, draft budget net position, capital spend, staffing

implications, and fees, charges and other income. The Panel was advised that there was a need to identify further savings in excess of £1m in addition to those included in the budget proposals due to the lateness, complexity and scale of reduction of the Provisional Local Government Finance Settlement.

Draft budget pressures included purchased care for Adult Social Care for young people reaching adulthood, increasing numbers of older people and those with dementia, increasing numbers of people with long term conditions, and support for carers. Draft budget pressures consisted of £809,000 altogether.

Draft budget savings included improved commissioning in relation to residential and supported living costs, drugs and alcohol, the meals at home service and the resettlement service. The subsidy in relation to the meals at home service had been removed. The residential home at 8 Portman Close had been de-registered resulting in a reduction in support costs. A joint rehabilitation service was now being provided on behalf of the Primary Care Trust (PCT). There had been a 6% saving last year in relation to the consolidated rate for domiciliary care, and greater contributions regarding continuing health care.

Mobile working, and therefore spending less time in the office, had enabled staff in Adult Social Care to undertake visits more frequently. A vacant post had been deleted in relation to day opportunities. Some buildings would possibly be affected by the maintenance programme. The total draft budget savings were estimated at £1,382,000, leaving the net position at £573,000 once the budget pressures totalling £809,000 had been accounted for.

There were no major capital developments planned from the Corporate Capital Programme at present. The personal Adult Social Services Capital Grant of £183,000, designed to support the three key areas of personalisation, reform and efficiency, was unallocated at present. A Section 88 transfer had been undertaken in relation to the Learning Disability Grant of £7,764,000. The net position had been increased by income streams.

The PCT had contributed funding of £175,000 for re-ablement enhancing and end of life care. Next year the NHS funding for social care would be £961,000. Work was being undertaken with the PCT to agree how to use this funding to improve support and services. There would be increasing opportunities for joint working with the health sector and other organisations such as bordering local councils. There had been no reduction in Adult Social Care services as a consequence of the budget savings which resulted from work over the past two years to identify efficiencies and adopt improved working practices.

Arising from Members' questions and comments the following points were noted:

- The current year budget saving relating to additional support for carers had not resulted in any service reduction and had been achieved through use of the Council's Ladybank service and other providers reducing the need to purchase respite care services from external providers. An increase in the range of support for carers created a budget pressure of £100,000 in 2011/12.
- Focus had been given to improving purchasing amongst other cost saving exercises.
- A budget pressure of £709,000 had arisen primarily from children with disabilities transferring from Children's Services to Adult Social Care when they reached 18 years of age and increasing numbers of older people and people with long term conditions requiring support living longer.

- The reduction in Government grant formed part of the £809,000 draft budget pressures.
- There would be a Section 75 agreement in relation to the transfer over of services to a GP Consortium when the PCT's were disbanded in order to maintain established links with the health sector.
- A Council wide contingency fund formed from underspends last year had met the cost of redundancies associated with service closures during this year.
- There had been no further care worker redundancies identified as part of the 2011/12 budget.

Panel Members asked for their thanks and appreciation to be passed to staff in the Adult Social Care and Health Department for all their hard work.

## 29. **Performance Monitoring Report (PMR)**

The Director of Adult Social Care and Health presented the Performance Monitoring Report (PMR) for the second quarter of 2010/11 (July to September) relating to Adult Social Care. An overview of the third quarter was also provided.

The Director of Adult Social and Health would lead on significant changes in health and social care proposed by the Government. Work would continue with service improvement, specifically in the areas of re-commissioning support for people with learning disabilities, enhancing intermediate care, and end of life care.

The 'Safe Place' scheme had been launched and the Personalisation Team had been nominated for a better care award. Although the team did not win in this instance it showed recognition of their work. The Panel expressed their thanks to Adult Social Care staff whose contribution had helped to achieve the nomination.

A National Commissioning Body would be established. A GP Consortia would replace PCTs, and PCTs and Strategic Health Authorities would be abolished by 2013/14. Local authorities would be responsible for health improvements and HealthWatch would replace Local Involvement Networks. A Statutory Health and Well Being Board would also be established. Many health related government documents had become available recently and there was a considerable amount of work to be undertaken in this area.

The operating framework would be more explicit in relation to funding and expenditure with a particular focus on outcomes. A paper summarising health reforms would go to a meeting of the Executive. A Bracknell Forest version of the Autistic Spectrum new strategy would be developed.

Bracknell Forest Council had completed a 'First Contact' survey during the summer of 2010 in which forty nine mystery shoppers had contacted various Adult Social Care services. Arising from the survey, one area of Adult Social Care had been challenged and the results of the survey would be published by the Care Quality Commission (CQC).

Arising from Members' questions and comments the following points were noted:

- Panel Members would be provided with an update on work with a local public house to provide rehabilitative day-care, two days each week (page 13 of the PMR).
- An Intermediate Care budget overspend, principally relating to in-house residential care for Older People and Long Term Conditions, was forecast

owing to the financial status of people in need of care, many of whom were in receipt of income support.

- The Panel would be advised as to whether a final decision had been reached on the preferred option for in-house mental health services.
- Panel Members would be provided with an update on the figures regarding the take up of the 'Safe Place' scheme.
- Many compliments relating to Adult Social Care had been received during the quarter whilst the level of complaints received had reduced.

### 30. **Care Quality Commission (CQC) Adult Social Care Performance Judgement 2010**

The Director of Adult Social Care and Health presented a report regarding the 2010 Annual Performance Judgement in respect of Adult Social Care from the Care Quality Commission (CQC). The Panel was invited to endorse the related Action Plan for improvement for forwarding to the CQC. This would be the last judgement of its type by the CQC. There would be less of a monitoring role by the CQC in relation to Adult Social Care in the future and a new local performance framework was being developed to replace it.

The CQC judged Bracknell Forest as Performing Well, which showed continued improvement in Adult Social Care and represented the best performance to date, placing the Council at the top of the second performance quartile nationally. There were no 'Excellent' graded local authorities in the South East, three quarters of which had achieved the same result as Bracknell Forest. The Director of Adult Social Care and Health expressed thanks to staff in Adult Social Care and for the collective work undertaken through the management team.

Arising from Members' questions and comments the following points were noted:

- There were no key areas for improvement in Bracknell Forest arising from the report.
- Preventative services would be a key focus in future.
- The outcome of the Annual Performance Judgement was not related to a local authority's self declaration of how they were performing.
- The self-assessment judgement was felt to be right during a two year improvement strategy and without knowledge of the changes with the CQC.
- Forty one local authorities were graded as 'Excellent' altogether, mainly in London and the Northern Metropolitan areas.

The Panel expressed thanks to staff in Adult Social Care for their hard work, especially during the period of bad weather in December 2010. The Chairman commented on the good performance grading of the report for Adult Social Care.

### 31. **The Vision for Adult Social Care: Capable Communities and Active Citizens and Think Local, Act Personal - Next Steps for Transforming Adult Social Care**

The Director of Adult Social Care and Health presented a report on The Vision for Adult Social Care: Capable Communities and Active Citizens and Think Local, Act Personal - Next Steps for Transforming Adult Social Care and asked how Panel Members would like to contribute to work to ensure local strategies and plans would be aligned to the new Adult Social Care agenda.

The Director of Adult Social Care and Health commented that there had been a ministerial presence at the recent Local Government Association / Association of

Directors of Adult Social Services National Children's and Adult Services Conference which had conveyed a positive approach.

The three main themes from the Coalition programme were integration of health and social care funding to deliver preventative action, extending the roll out of personal budgets to give people more control and the use of direct payments to carers, and better community based provision to improve access to respite care. There had been no draw back from the initiative in relation to personal budgets and services would change to accommodate this. This initiative highlighted the important role of carers.

The seven principles of The Vision for Social Care: Capable Communities and Active Citizens were: prevention, personalisation, partnership, plurality, protection, productivity, and people. Intervention would be undertaken where needed but communities would be encouraged to maintain independence together. The way social care was managed would change from financial management systems to block contracts. If someone was receiving a preventative service, they would not be eligible for ongoing care as well.

There was a large range of providers who were able to deliver support to people who needed it. Small enterprises, user led organisations and voluntary organisations would be encouraged to compete to deliver personalised services. The use of pooled funding would be encouraged at a local level.

Focus would be given to maximising spending on frontline services. In 2011 councils would be invited to consider the formation of social work practices. The Partnership Agreement: Think Local, Act Personal reinforced personalisation as the core direction of travel for social care development. There would be more efficient and effective service delivery which would be integrated where appropriate.

Arising from Members' questions and comments the following points were noted:

- The report on The Vision for Adult Social Care: Capable Communities and Active Citizens would be submitted to a meeting of the Executive on 18 January 2011.
- The Government's priorities for Adult Social Care set out in the two publications were supported by members and built on good work already undertaken by local authorities.
- Panel Members commented that people in communities needed to understand the Mental Capacity Act and the consequences of their care decisions. There would be increased levels of mental infirmity in the future and it was a challenge for professionals to safeguard people without restricting their liberty.
- A member welcomed the proposed creation of a new College of Social Work together with the benefits and opportunities it would bring.
- The Panel recognised that the Vision for the reform of Adult Social Care represented an evolution in public accountability and created a need to design services to meet the wishes of the community. Members felt that the emerging White Paper would inform future Adult Social Care strategies and plans which should reflect the new Vision.

### **32. Transparency in Outcomes: A Framework for Adult Social Care**

The Director of Adult Social Care and Health presented a briefing report in respect of the Transparency in Outcomes: A Framework for Adult Social Care publication launched by the Department of Health, which set out a consultation on proposals for a new outcome framework for implementation in 2011/12.

The government published the above consultation paper on 16 November 2010 and requested that councils forward responses to the document by 9 February 2011. Panel Members were invited to forward any comments on the document to the Director of Adult Social Care and Health if they wished any comments to be included with Bracknell Forest Council's response to the document.

A web link to the full document could be found in the briefing report and the consultation questions were listed in Appendix A of the briefing report.

There would be a move from focus on inputs to focus on outcomes in relation to Adult Social Care. The formal consultation response would be published by the government in March 2011 and some elements would come into effect from April 2011.

Arising from Members' questions and comments the following points were noted:

- The Adult Social Care and Health Department's response to the Transparency in Outcomes: A Framework for Adult Social Care consultation would be circulated to Panel Members.
- The level of accountability was being examined and would change for Councillors nationwide. Constitutions and decision making processes would be considered, and a course for Councillors would be piloted when reforms were undertaken.
- In terms of the Council's future accountability for Adult Social Care services, public facing local answerability could be challenging and there was a need to develop accountability mechanisms including increasing public information and accessibility to services. Changes in care providers were identified as a risk area.

**33. Supporting People Service**

The Panel noted the progress update report on the Supporting People Service which included future work to be pursued.

**34. Executive Forward Plan**

The Panel noted the forthcoming items relating to Adult Social Care on the Executive Forward Plan.

Item I025328: Autism Joint Commissioning Strategy

Panel Members would be provided with further information on the Executive Decision regarding the Autism Joint Commissioning Strategy, specifically in relation to links with Education.

**CHAIRMAN**