

**ADULT SOCIAL CARE, HEALTH AND
HOUSING OVERVIEW AND SCRUTINY
PANEL**

26 MARCH 2019

7.30 - 8.10 PM



Present:

Councillors Harrison (Chairman), Mrs McCracken (Vice-Chairman), Allen, Mrs Angell, Dr Hill, Mrs Mattick, Ms Merry, Mrs Temperton, Thompson, Tullett and Virgo

Observer:

Mark Sanders (Healthwatch Bracknell Forest)

Executive Members:

Councillor D Birch

Also Present:

Nikki Edwards, Executive Director: People

Melanie O'Rourke, Assistant Director: Adult Social Care Operations

Thom Wilson, Assistant Director: Commissioning

Hannah Doherty, Interim Assistant Director: Early Help & Communities

Sarah Kingston, Adults Transformation Programme Manager

Apologies for absence were received from:

Councillors Peacey

Dr David Norman, Co-opted Representative

55. Minutes and Matters Arising

RESOLVED: that the Minutes of the Adult Social Care, Health and Housing Overview and Scrutiny Panel held on 4 February 2019 be approved as a correct record, and signed by the Chairman.

Issues Arising Since the Last Meeting.

Mark Sanders, Healthwatch Bracknell Forest, advised Members that associated with the NHS long term 10 year plan, Healthwatch had been given some funding for (research) ICS work across the piece, targeting children aged from 0 to 9 years. He explained that:

- 48% of people who attend A&E are children aged 0-9 years (with their parent/carer).
- 80% of these (visits) ends with the provision of information only.
- The 'journey' these children make to A&E would be mapped and a report would be available in mid-June 2019 to assess how service provision could be done differently.
- There was also work on maternity going ahead, looking at how to reach hard to reach and other disadvantaged groups, with a report out in June 2019.

At the 4 February meeting of the Adult Social Care, Health and Housing Overview and Scrutiny Panel, it was raised with Catriona Khetyar, Head of Medicines

Optimisation: East Berkshire Clinical Commissioning Group (CCG) that the collection of sharps boxes was an issue. Patients using sharps were no longer able to take them back to GP surgeries, the boxes had to be left out in patients' front gardens between 7am and midnight for collection. Strangers had entered people's gardens and were looking at the sharps boxes. It was suggested that there needed to be a central point to drop off sharps boxes.

Catriona Khetyar, Head of Medicines Optimisation: East Berkshire Clinical Commissioning Group (CCG) agreed to take this suggestion back to the CCG for Consideration.

Action: Kirstine Berry, Governance and Scrutiny Co-ordinator to contact Catriona Khetyar to obtain an update and clarify for the Panel who is responsible for the policy for and responsibility of the collection of sharps.

56. Declarations of Interest and Party Whip

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

57. Urgent Items of Business

There were no urgent items of business.

58. Public Participation

No submissions had been made by members of the public under the Council's Public Participation Scheme for Overview and Scrutiny.

59. Adult Social Care, Health and Housing Transformation Update and Forward View

Sarah Kingston, Adults Transformation Programme Manager, attended the meeting and provided an update on transformation for 2018/19 and a forward view for how it will affect Adult Social Care, Health & Housing in 2019/20.

In addition to the detail contained in the slide presentation, Sarah Kingston, Adults Transformation Programme Manager advised Members that:

- Transformation was trying to achieve the best outcomes for residents in adult social care and to align with the Council's strategic priorities to deliver value for money and strong, safe, supportive and self-reliant communities.
- The key delivery points of note were:
 - The conversations approach had been embedded
 - The online help yourself market place had been launched.
 - Direct payments had been introduced.
 - A number of initiatives were now operational.
- The Transformation Programme was currently aligning to form the people directorate and to contribute to the People Directorate's vision.
- The Transformation Programme had been through a prioritisation exercise.
- Most transformation reviews within the Adult Social Care area were in the early 'analyse phase' of the transformation cycle.

The current transformation programme was discussed, (with the exception of Heathlands) and the key drivers behind each project and the value it might bring were outlined. It was explained that each review was looking at:

Resource Management:

- Making sure residents were reviewed at the right time, the right care and support was received and that there was the best use of resources. This review was expected to be completed shortly, in May 2019.

Section 117 Reviews:

- Ensuring that those who were entitled to free social care get it and that we work appropriately with partners.

Independence Programme:

- The learning disability community and how best to provide them with an independence programme, provide support to them and their families and the provision of support services such as respite care etc.

Earlier intervention- Mental Health:

- How older adults with mental health conditions can remain at home longer and retain independence.

Residential affordability- Mental Health:

- How local services are commissioned for residents who need placements and how to get value for money and provide placements of suitable quality.

Discharge to Assess in Extra Care:

- The best environment in which to assess people's needs after a hospital stay to increase the number that return home and maintain their independence.

Bridgewell:

- How this site might be used to help support residents locally and in a better way.

Emergency Duty Service (EDS) and Forest Care:

- How to get the best out of both services. EDS was a statutory service and Forest Care was a discretionary service.

The future of the Transformation Programme was outlined. It was explained that:

- The themes for the Adult Social Care Transformation Programme were about maintaining residents' independence, accurate assessment, keeping residents at home, and avoiding residential placements.
- All reviews, except Resource Management and Section 117 Reviews, were in the early analyse phase.
- The Transformation Team were always looking for ways to improve the services and outcomes for residents.
- The Transformation Team were also doing a large piece of work to develop new work streams by conducting a data analysis exercise to understand how the total spend was made up and how it was changing, to understand if outcomes could be improved in different ways whilst ensuring the principles of quality and consistency.

In response to questions from Members, Sarah Kingston, Adults Transformation Programme Manager explained that:

- The acronym CMHTOA stood for Community Mental Health Team for Older Adults.
- The Transformation Team were trying to understand the driving factors that had contributed to an increase in spend in ASC expenditure long term support. The Heathlands project was aiming to resolve issues around supply of dementia nursing.

Thom Wilson, Joint Assistant Director: Commissioning, advised Members that there had been under capacity locally that Heathlands would help to fill.

Sarah Kingston, Adults Transformation Programme Manager explained that:

- The factors that contributed to spend on residential placements were being looked at. The Transformation Team were working with practitioners and commissioners to see what they thought was driving the cost and were working to understand how best to work with the market to get the best value.

Thom Wilson, Joint Assistant Director: Commissioning, advised Members that:

- A commissioning response was needed.
- The commissioning team being was being redesigned with market development, commissioning and community review functions being introduced.
- Placements will likely be made by a professional placements team.
- Benchmarking was also being carried out.
- Looking at best practice provided a useful tool to assess the best possible options and a more commercial approach to daily provision was needed.
- The commissioning team were in the early stages of development of the best practice approaches.

Nikki Edwards, Executive Director: People added that:

- This was a hugely complex area and that the need was becoming more complex.
- Medical advances affected the type of 'bed' or provision that residents needed.
- The increase in cost was variable and couldn't be easily attributed to a specific area.
- Lots of work had been done around unit and bed pricing, but more work needed to be done. Quality and consistency and the right match for each resident were felt to be the best value.
- Sometimes the market was limited and this affected quality and availability.
- For the residents quality and consistency had equal weighting, it was not just a financial a decision.
- The market was always volatile and could change daily. The detail behind this volatility was looked regularly at by Thom Wilson's Commissioning Team.

Thom Wilson, Joint Assistant Director: Commissioning, advised Members that:

- About 2 years ago there had been some closures locally that had led to increases in cost and loss of provision.
- Since then prices had stabilised and reduced but this year for the CMHTOA had gone up again.
- There were new residential homes opening up locally this year, and so there was no current squeeze on available places.

Mark Sanders, Healthwatch Bracknell Forest advised Members that:

- Those who pay for their own adult social care (Self Funders) historically paid more for their care than those who were being funded by the Council.
- This group were now running out of money faster as care costs had risen.
- With direct payments now being in place, there was anecdotal evidence of residents using the direct payment method, who were approaching domiciliary care providers locally being charged more than those who had arranged their care through the Council.

Thom Wilson, Joint Assistant Director: Commissioning, advised Members that:

- A new and improved commissioning service was needed to manage, shape and develop the market.
- Bracknell Forest needed to work with neighbouring authorities and work together to influence the market.
- Bracknell Forest aspired to have high quality, cost effective services, but more work needed to be done to achieve this.
- The good news was that people were willing to work together and progress was anticipated.
- In respect of residents who were using direct payments being charged more for domiciliary care, the commissioning team were unaware of the issue raised specifically. Block contracts were agreed at preferential rates, so providers could well charge more outside of block contract arrangements and it would be useful to know if there were 2 tier rates with providers.
- It would be useful to understand the anecdotal evidence further.
- If those residents who were receiving direct payments asked the Council to broker their care costs for them, the Council would.

The Chairman gave thanks to Sarah Kingston, Adults Transformation Programme Manager, Members and officers for their valuable contribution.

60. Westminster Forum Project Seminar: Next Steps for Reducing Homelessness

The Chairman deferred this agenda item to the next meeting.

61. Quarterly Service Report (QSR)

The Panel considered the latest trends, priorities and pressures in terms of departmental performance as reported in the Quarterly Service Reports for the third quarter of 2018/19 (October to December 2018) relating to Adult Social Care, Health and Housing. A current comment and an overview of the key issues (risk rated red items) relating to the second quarter was provided for the People Directorate.

Nikki Edwards, Executive Director: People provided the Panel with an introduction to the QSRs and explained that they were the first QSRs under the new directorates.

Melanie O'Rourke, Assistant Director: Adult Social Care Operations, provided commentary on 1.7.22 Adult Social Care 2018-19 transformation savings commitments delivered and advised the Panel that:

- The transformation and review process had already delivered significant savings and future extrapolation predicted further savings, but that these had been offset by growing pressures in the last financial year. These pressures would continue into the new financial year.
- Contingency planning was required.
- Transformation had freed up some revenue to account for the unexpected pressures. Without the transformation process the pressures would have been higher.

No questions about the QSRs had been submitted in advance of the meeting and there were no questions raised by Members during the meeting.

62. Executive Key and Non-Key Decisions

There were no items on the Executive Forward Plan relating to Adult Social Care, Health and Housing.

63. Date of Next Meeting

The next meeting of the Adult Social Care, Health and Housing Overview and Scrutiny Panel has been scheduled for 4 June 2019.

CHAIRMAN