

**ADULT SOCIAL CARE AND HOUSING
OVERVIEW & SCRUTINY PANEL
20 JANUARY 2015
7.30 - 8.27 PM**



Present:

Councillors Harrison (Chairman), Allen (Vice-Chairman), Blatchford, Brossard, Finch, Mrs McCracken, Mrs Temperton, Virgo and Ms Wilson

Executive Member:

Councillor Birch

Also Present:

Andrea Carr, Policy Officer (Overview and Scrutiny)
Neil Haddock, Head of Performance and Resources
Mira Haynes, Chief Officer: Older People & Long Term Conditions
Simon Hendey, Chief Officer: Housing
Zoë Johnstone, Chief Officer: Adults & Joint Commissioning
John Nawrockyi, Interim Director of Adult Social Care, Health and Housing
Amanda Roden, Democratic Services Officer

26. Minutes and Matters Arising

The Chairman welcomed John Nawrockyi, Interim Director of Adult Social Care, Health and Housing.

RESOLVED that the minutes of the meeting of the Adult Social Care and Housing Overview and Scrutiny Panel held on 16 September 2014 be approved as a correct record, and signed by the Chairman.

Minute 20:

In relation to: 'All Bracknell retailers had been invited to the dementia awareness training but the take up had been disappointing'. Training had been extended further and the take up had been better.

27. 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.

28. Public Participation

There were no submissions from members of the public in accordance with the Council's Public Participation Scheme for Overview and Scrutiny.

29. **2015/16 Draft Budget Proposals**

The Panel considered key themes and priorities for Adult Social Care and Housing as outlined in the Council's Draft Budget Proposals for 2015/16.

The Executive agreed the Council's draft budget proposals for 2015/16 at its meeting on 16 December 2014 as the basis for consultation with the Overview and Scrutiny Commission, Overview and Scrutiny Panels and other interested parties. The consultation period would run until 27 January 2015, after which the Executive would consider the representations made at its meeting on 10 February 2015, before recommending the budget to Council.

Attached to the report were extracts from the 2015/16 Revenue Budget and Capital Programme. The extracts were comprised of Revenue Budget Report, Commitment Budget, Draft Revenue Budget Pressures, Draft Revenue Budget Savings Proposals, Proposed Fees and Charges, Capital Programme Report and Summary and Proposed Capital Schemes.

In response to Members' questions, the following points were made:

- National statistics were used when looking at the demography of the borough. There were increasing numbers of people in the borough, mostly due to the older population growing by approximately 1-2%. Bracknell might have a slightly more accelerating older population than other areas but it was thought to be slowing now. It was likely due to people who moved to the area in the 1960s.
- There was help available to prevent people from going into residential care. The aim was to find ordinary accommodation such as a person's own home and provide more support to enable them to live there.
- The care home near to Popes Meadow was outside of the Council's remit and could be expensive, so would be difficult for the Council to use.

30. **Quarterly Service Report (QSR)**

The Panel considered the latest trends, priorities and pressures in terms of departmental performance as reported in the QSR for the second quarter of 2014/15 (July to September 2014) relating to Adult Social Care and Housing. An overview of Quarter 3 was provided.

Older People and Long Term Conditions

The Emergency Duty Service was Pan-Berkshire and the contract was up for renewal in June 2015, so the service was due to be reviewed. There was a Sensory Needs Conference in March 2015, and presentations would be held on the Care Act. As part of the Winter Well Being Initiative, people were being contacted to make sure they were alright. An options appraisal for future service delivery options in the Drug and Alcohol Action Team was being undertaken.

Adults and Joint Commissioning

There was a Learning Disability action plan in response to the Joint Commissioning Strategy. A Draft Joint Commissioning Strategy for Adults with Autism would be considered by the Executive in January 2015. The Safeguarding team were developing a detailed implementation plan on the safeguarding elements of the Care Act. Additional capacity was in place to enable timely responses to Deprivation of

Liberty Safeguards (DoLS) applications. A number of best interest assessors had been taken on in relation to the Care Act implementation plan.

Housing

Reports to the Executive included: potential residential developments in the town centre, Clement House extra care scheme nominations, acquisition and disposal of sites in the Borough as part of the Older People Accommodation Strategy, and Forestcare 'take-away' model. There was an information pack for people going into hospital to inform of, for example, how to have a lifeline installed. The funding formula aspect of Phase 2 of the Care Act had caused some concern.

Performance and Resources

There would be a major upgrade to the Care Management system in readiness for the Care Act changes in April 2015; assistance was being given with the upgrade to the Abrisas system in Housing; there was a detailed analysis of Care Act Phase 2 guidance; and the E-Monitoring Finance Manager was now live.

31. **Care Quality Commission (CQC) State of Care 2013/14 Annual Report**

The Panel considered the Care Quality Commission (CQC) State of Care 2013/14 Annual Report and the implications for Bracknell Forest Council which complemented the review of regulated Adult Social Care services recently undertaken by a Working Group of the Panel.

The report had been requested to ensure that the Panel understood the CQC response. At present all domiciliary care homes in the borough and used by the Council were fully compliant and would be monitored when there was a changeover in registered manager to ensure continuance of quality. Work was undertaken with providers and workforce issues included recruiting high quality care staff.

In response to Members' questions, the following points were made:

- Local recruitment difficulties stemmed from high employment levels, the requirements for high standards of work in this demanding and responsible occupation, low rates of pay and unsocial working hours.
- Care visits needed to be adhered to in relation to the recording of arrival and departure times and this was monitored. Care workers would not be paid if they did not stay for the required or expected amounts of time. The electronic finance monitoring system gave data regarding this. New agencies had a period of time before they were signed up.
- The Council did not monitor providers' terms and conditions in areas such as rates of pay, sick pay and travelling payments but there were some statutory requirements in place.
- Where the Council did not have a contractual relationship with providers they were not required to share information regarding the people they supported, however, if there were safeguarding concerns the CQC might bring them to the attention of the Council.

32. **Homeless Strategy**

The Panel considered a report on the Homeless Strategy at an early stage of its formulation. The Homeless Strategy met the requirement of the Homelessness Act 2002 for all local authorities to carry out a homeless review and formulate and publish a strategy based on that review. It would directly support the Council's priority to

sustain economic prosperity and medium term objective 10 to continue to find ways to enable people to secure a suitable home.

It was difficult to help people to access the private rented market due to the high level of rents; half as many people had been helped this year compared to last year. A report on the Homeless Strategy would be considered by the Executive in the autumn of 2015.

The Chairman thanked officers for the report and clear priorities.

33. **Joint Commissioning Strategy for Adults with Autism 2015-2020**

The Panel considered the Joint Commissioning Strategy for Adults with Autism 2015-2020.

The development of this strategy had followed the usual process and there had been a focus on adults with autism and their carers. Priorities were included in the report, which would be considered at the Executive meeting next week. The aim was to enable people to live ordinary lifestyles and the biggest challenge was the availability of affordable suitable accommodation locally. Focus was being given to ways of increasing accommodation provision for people with autism or learning disabilities.

In response to Members' questions, the following points were made:

- The number of representations received in response to the Joint Commissioning Strategy consultation was sought. If the Council was not aware of people with autism or learning disabilities then it was unable to target information and consultations at them.
- Better health outcomes had been identified in the Health and Well Being Strategy but the aim was for people to learn to manage and live with autism. People with autism could become depressed and specialist help might be needed in relation to, for example, sensory integration. There was a gap in provision which was being looked at. Challenges for this group were different to other care groups.
- The Clinical Commissioning Group had commissioned the Berkshire Healthcare Trust to undertake some work regarding diagnostics, GPs were becoming more aware of mental health issues related to autism and the in-house team at the Council worked with partners to increase awareness.

34. **Feedback from the Carers' Strategy Consultation**

The Panel considered a report providing feedback from the Carers' Strategy Consultation and the work undertaken to engage people in the consultation process for the development of the Joint Commissioning Strategy for Carers. The consultation had been launched in July 2014 and emerging themes and areas for development included equality of access to support, access to information and advice, assessment, personal budgets and direct payments, respite, social and emotional support, and transport.

In response to Members' questions, the following points were made:

- In terms of continuity, quality of care and communication between teams, some people in a caring role expressed concerns about the turn over of staff, especially home care and the irregular timing of visits. This was a general comment and an issue nationally. The electronic monitoring system assisted

in this area and work was being undertaken with the independent sector in relation to recruitment and training.

- Statistics were obtained when the Dementia Team was part of the Council and the quality factor would not be lost owing to the dementia service being outsourced.
- If a carer needed a break from caring for a holiday, to socialise or for a hobby, respite care could be offered. This was an individual's decision and the service remained flexible to carers' needs. There were different opportunities for this to be taken and no issue with provision of respite care being available locally.

35. Regulated Adult Social Care Services Overview and Scrutiny Working Group Report - Executive Response

The Panel received a report on the Executive response to the report of the Overview and Scrutiny review of the Council's role in Regulated Adult Social Care Services undertaken by a working group of this Panel.

The Executive Member for Adult Services, Health and Housing thanked the Working Group for a detailed and excellent report produced at a particularly interesting time for Adult Social Care service delivery. He was pleased to note that the review had found that there were sufficient care homes / places locally to meet demand, that care homes and domiciliary agencies in the Borough were generally of a high standard and that the Council fulfilled its duty of care to people in need of social care.

The Executive accepted recommendations 6.3 and 6.4 concerning the implementation of a missing person's procedure and the expansion of the Validation Guidelines to address benchmarks and service performance measuring. Recommendation 6.3, which related to collecting the views of people who self-funded their own care, was partially accepted due to the difficulties in accessing this information, however, the implementation of the Care Act was expected to increase the Council's awareness of such people and their views would be sought. Although the Executive did not accept recommendation 6.1 regarding the emergency evacuation of care / nursing home premises as this did not fall within the Council's remit, it was agreed that the Executive Member and the Panel Chairman, who led the review, would write to Royal Berkshire Fire and Rescue to convey the Working Group's concerns around the regular practice of evacuation of residents with disabilities and conditions.

The Chairman thanked the Executive Member for Adult Services, Health and Housing for a comprehensive response and commented that officers work in this area had been good.

36. Work Programme 2015/16

The Panel considered its Work Programme for 2015/16. It was agreed that no further review work would be commenced before the end of the current municipal year due to the short period of time in which to complete working group reports. Any urgent matters arising could be considered at the next Panel meeting. It was suggested that future review topics be selected following the Elections in May 2015 and housing supply and homelessness were identified as priorities.

37. **Overview and Scrutiny Progress Report**

The Panel noted the bi-annual Progress Report of the Assistant Chief Executive on Overview and Scrutiny activity over the period June to November 2014 and local and national developments in Overview and Scrutiny.

38. **Executive Key and Non-Key Decisions**

The Panel noted the forthcoming Key and Non-Key Decisions relating to Adult Social Care and Housing.

Item: I048672

The re-development of Coopers Hill had not been finalised at the business stage yet.

Item: I051404

Intermediate Care Services Contract referred to support for the Bridgewell Centre to ensure continuity of care.

CHAIRMAN