

ADULTS AND PUBLIC HEALTH SERVICES PORTFOLIO DECISION RECORD

12 April 2010

The meeting commenced at 10.00 a.m. in the Civic Centre, Hartlepool

Present:

Councillor Gerard Hall (Adult and Public Health Services Portfolio Holder)

Officers: Pamela Simpson, Strategic Lead in Safeguarding and Vulnerability
Neil Harrison, Strategic Commissioner - Working Age Adults
Beverley Thompson, Strategic Commissioner – Mental Health
Sarah Bird, Democratic Services Officer

34. Hartlepool Vulnerable Adults Protection Committee Quarterly Statistics and Update *(Strategic Lead in Safeguarding and Vulnerability)*

Type of Decision

Non key

Purpose of Report

To present the Safeguarding Vulnerable Adults quarterly statistics and provide an update on safeguarding activity.

Issues for Consideration

The report provided information concerning Safeguarding Vulnerable Adults Quarterly Statistics including the 1st, 2nd and 3rd Quarters to allow for comparison. An updated version of these statistics was handed to those present and is available on the Council's website.

There had been 38 alerts of possible cases of abuse/neglect during the third quarter which was the same as the previous quarter. Most of these cases were from care homes where service users mostly those with dementia, had assaulted other service users. Work was ongoing to address this possibly by having more Community Psychiatric Nurses available. The majority of victims were over 65 and two thirds of these were over the age of 80. The Tees-wide Safeguarding Adults Board was in the process of appointing a

Business Manager. The Strategic Lead in Safeguarding and Vulnerability attended the Policy and Procedure Sub Group of this Board which was looking to update policies. The National Health Service Information Centre had implemented a national data set for the collection of information on the Abuse of Vulnerable Adults on 1 October 2009. The Improvement and Development Agency had run a training session in March for members of the board to assist with progressing work on identifying outcomes. The Portfolio Holder was informed of the outcome and recommendations following a Serious Case Review following the death of an individual.

The Strategic Lead was also involved with the screening of taxi drivers. The Portfolio Holder agreed that this involvement with licensing was important as taxi drivers regularly came into contact with vulnerable people, both children and adults.

The Strategic Lead continued to attend Multi Agency Public Protection Meetings and Child Protection training had been provided to relevant people in adult social care. Awareness raising events had been undertaken in relation to Deprivation of Liberty Safeguards (DOLS) as well as the provision of training for these processes. Meetings had taken place with the Safeguarding Lead in Tees, Esk and Wear Valley Trust to try and reinforce the use of the safeguarding referral procedure. Training issues had been identified for Local Authority staff and these were being addressed. Also a Workforce and Development sub group had been established which would collate data on training. This was more difficult to monitor in the independent sector as these companies usually provided their own training, however there had been 19 referrals for Local Authority training courses recently. The Portfolio Holder asked what monitoring took place on private establishments' staff training and was informed that it was a requirement during the commissioning process that this was adhered to, as well as monitoring through the Care Quality Commission. If it was identified that staff were not properly trained then an action plan would be put into place to ensure that appropriate training was given.

The Portfolio Holder welcomed the National Government campaign raising awareness of dementia and highlighted the importance of dignity in care. It was established that higher numbers of safeguarding referrals did not necessarily mean that cases were increasing, but that there was a confidence in reporting mechanisms and procedures, and appropriate support for victims and witnesses.

It was established that those incidents which had taken place in Hartlepool, but where the victim was under the care of a Social Worker from another Authority, were not included in Hartlepool statistics.

The Portfolio Holder commented that there was extensive joint

working arrangements between the Local Authority and Health Trusts and that there was a shared responsibility for sharing information. The Strategic Lead outlined that training had been provided for health staff to raise awareness of safeguarding vulnerable people.

Decision

The Portfolio Holder noted the report.

35. Integrated Mental Health Services *(Strategic Commissioner – Mental Health)*

Type of Decision

Non key.

Purpose of Report

To update the Portfolio Holder on key issues in relation to Integrated Mental Health Services

Issues for Consideration

There had been significant progress in a number of areas that the Portfolio Holder should be aware of including:-

New Horizons – this had replaced the Mental Health National Service Framework following a consultation programme to elicit the views of people using mental health services and providers. One outcome of this was improved access to Child and Adolescent Mental Health Services (CAMHS) for 21 years old and a new service for young adults aged 18 – 26 with transition work beginning earlier. The Portfolio Holder welcomed the longer transition period for young people. The feedback from the consultation event had been postponed until May 2010 because of the ‘Purdah’ period.

Day Services Update – this was currently under review. A tender was currently being prepared to re-commission the ‘Moving Forward Service’. The current contracts with Hartlepool MIND, Artrium and Peoples’ Relief of Pressure (PROP) had been extended until September 2010 to enable a full tender process to be completed. The Portfolio Holder noted that although services were being provided more than adequately by groups there was still the legal requirement to tender for services. Officers confirmed that assistance in relation to business support would be given to voluntary groups to enable smaller groups to compete for tenders. This was funded by the Department of Health.

Dementia Strategy – the national Dementia Strategy was now

embedded into action plans and strategies across health and social care including housing.

Personal Budgets/Personal Health Budgets – Currently 711 people use mental health services in Hartlepool. The pilot for personal health budgets was underway and should increase choice and control for people with mental illness. A Tees launch event had been held on 26 March 2010 which had been well attended. Hartlepool was an exemplar site for the use of personal budgets. It was noted that these were not just for mental health, but any service user. It was noted that Hartlepool had 45% of service users taking up their personal budget compared with 30% nationally.

Update of the new Mental Health Act – the Portfolio Holder was informed of the Deprivation of Liberty (DOLS) orders, Independent Mental Capacity Advocacy (IMCA) and Independent Mental Health Advocacy (IMHA) services. The Portfolio Holder asked whether the Hartlepool Citizens Advice Bureaus were involved in the IMHA. He was informed that IMCA and IMHA were funded by the Department of Health and that there was a collaborative approach across the Tees Valley.

Improving Access to Psychological Therapies (IAPT) – the service commenced at the end of September 2009 although it was anticipated that the full impact would not be seen until late 2010. Significant investment had been put into in-house services.

Social Prescribing – the six month pilot had been extended until September. It was expected that this could cause a drop in the prescribing of antidepressants as alternative health services were offered.

Partnership Agreement – Hartlepool Borough Council delivers mental health services in partnership with the Tees, Esk, Wear Valley Trust but this is currently under review. The Portfolio Holder asked whether there was sharing of data and was informed that both Primary Care Trust and Local Authority data bases could be accessed so that any trends could be identified.

Social Inclusion Initiatives – Details were given of the social inclusion plan as well as the Shape Up Programme. The success of the Allotments Project (Waverley Terrace) was applauded.

Integrated Mental Health Service Staffing – Staffing details were outlined as detailed in the report.

Employment Link Services – the Strategic Commissioner gave details of those using the Employment Link Services.

Mental Health Promotion Action Plan – the Strategic

Commissioner informed the Portfolio Holder that this would form part of the New Horizons agenda.

Out of Area Placements – those who had out of area placements would, where appropriate be returned to this local authority.

Performance – details were outlined to the Portfolio Holder about the new information system PARIS which should ensure the robust collection of statistics.

Areas for Development and Risks – in relation to the National Autism Strategy legal obligations had to be met by local authorities. The Portfolio Holder had been at the launch of the autism aware card. He said that it was good to see that autism and initiatives in relation to this were being recognised in ways beyond health issues, i.e. social inclusion, employment and training.

Community Development Workers – initially this had been delivered through the Stockton International Family Centre but as this company had ceased trading, emergency provision had been given by MIND. It was noted that there had been no referrals from BME groups.

The Portfolio Holder asked what the average caseload of Social Workers was and was informed that each whole time equivalent post was allocated an average of 40 cases.

Decision

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P J DEVLIN

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The meeting concluded at 11.12 am.

P J DEVLIN

CHIEF SOLICITOR

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