

# **ADULT SERVICES COMMITTEE**

## **DECISION RECORD**

6 January 2014

The meeting commenced at 10.00 am in the Civic Centre, Hartlepool

**Present:**

Councillor: Carl Richardson (In the Chair)

Councillors: Keith Fisher, Ged Hall, Alison Lilley and Brenda Loynes  
In accordance with Council Procedure Rule 5.2 (ii) Councillor  
Jim Ainslie was in attendance as substitute for Councillor Linda  
Shields

Also Present: Councillor Geoff Lilley  
Edwin Jeffries, Secretary, Joint Trade Unions  
Steve Thomas, Margaret Metcalfe, Maureen Lockwood and  
Judith Gray, Healthwatch  
David Brown, Director of Operations, Tees Esk and Wear Valley  
NHS Foundation Trust

Officers: Gill Alexander, Director of Child and Adult Services  
Jill Harrison, Assistant Director, Adult Services  
Jeanette Willis, Head of Strategic Commissioning, Adult  
Services  
Geraldine Martin, Head of Service, Adult Services  
Neil Harrison, Head of Service, Adult Services  
David Ward, Head of Finance (Child, Adult Services and Public  
Health  
Denise Wimpenny, Principal Democratic Services Officer

### **59. Apologies for Absence**

Apologies for absence were submitted on behalf of Councillors Shields and  
Sirs.

### **60. Declarations of Interest**

None

**61. Minutes of the meeting held on 25 November 2013**

Received.

**62. Review of Contribution Policy for Non-Residential Services** (*Assistant Director, Adult Services*)

**Type of decision**

Key Decision – Forward Plan Reference CAS018/13

**Purpose of report**

To provide feedback from a consultation exercise regarding the proposed change to the Contribution Policy for Non-Residential Services and to propose that the Committee agree the implementation of a revised Contribution Policy for Non-Residential Services from April 2014.

**Issue(s) for consideration**

The Assistant Director presented the report which provided background information in relation to the Council's discretionary powers to require adult recipients of non-residential support services to contribute to the cost of their provision.

Over the last 12 months the Council had supported approximately 4,600 people to live in their own homes. Of this number, approximately 1,680 people were eligible for a personal budget, so were financially assessed to determine whether they should contribute towards the cost of their ongoing support. Between 500 and 550 people of this 1,680 were assessed as nil charge owing to their low incomes and this number will remain constant irrespective of any proposed change. Of the 1,680 people assessed, between 630 and 700 would not contribute any more for their care than they did now as they currently contributed to their maximum ability. This meant that between 380 and 430 people could be asked to contribute more if the proposed change was implemented.

A consultation exercise had been undertaken in relation to the proposals, feedback from which was included in the report.

The proposed changes to the Contribution Policy, as detailed in the report, would contribute to the challenging savings target required of the department. Members were advised that further detail regarding how many people would be affected was set out in Appendix 5 and the revised Contribution Policy was attached at Appendix 6.

Members' views were sought in relation to the following options, further details of which were included in the report.

- Option 1 – retain the current policy and continue to subsidise 25% of all care packages
- Option 2 – raise the maximum amount that people contributed based on a financial assessment and the ability to pay from 75% to 95%
- Option 3 – remove the current subsidy of all care packages requiring people to pay up to 100% of the costs of their support based on a financial assessment and their ability to pay
- Option 4 – implement the changes on a phased approach raising the maximum amount the people contributed from 75% to 95% from 1 April 2014 and then removing the current subsidy requiring people to contribute up to 100% from April 2015.

The option recommended by officers was Option 3 and the reasons for the recommendation were outlined.

In the lengthy discussion that followed some members of the public in attendance raised concerns regarding the financial impact on individuals as a result of the proposals. Whilst Members were sympathetic to such concerns and highlighted their reluctance to support the savings proposals relating to Adult Services when they had been considered at the November budget meeting, it was emphasised that difficult decisions of this type had been forced upon the Council as a result of extensive Central Government budget cuts.

A representative from Healthwatch indicated that the impact on social care services was their main concern and provided initial feedback from a recent investigation into domiciliary care which was generally positive. However, Healthwatch was aware of additional pressures in relation to acute hospital services and hospital discharges and, in particular, the additional support required in the community as a result of the drive for people to spend less time in hospital. This was the subject of a further investigation which would be reported to the Committee in due course.

Following further debate on the potential implications of removal of the current subsidy, the majority of the Committee expressed their support in relation to Option 3 noting that it achieved the maximum available saving with no impact on frontline social care services.

## **Decision**

- (i) That option 3 to remove the current subsidy of all care packages be agreed.
- (ii) That the implementation of a revised Contribution Policy requiring people to contribute up to 100% of the costs of their support based on a financial assessment and their ability to pay be approved from 1 April 2014.
- (iii) It was noted that this option would achieve the required saving with no impact on front line social care services for vulnerable people.

## **63. Strategic Financial Management Report as at 31 October 2013** *(Director of Child and Adult Services and Chief Finance Officer)*

### **Type of decision**

For information

### **Purpose of report**

The report informed Members of the 2013/14 Forecast General Fund Outturn; 2013/14 Capital Programme Monitoring, and provided details for the specific budget areas that the Committee was responsible for.

### **Issue(s) for consideration**

The Assistant Director indicated that the latest report submitted to the Finance and Policy Committee advised Members that there would be an overall underspend in the current year. The report also advised Members that this position reflected action taken by the Corporate Management Team to achieve underspends to help address the significant financial challenges facing the Council over the next few years and to fund one-off commitments not provided for in the approved 2013/14 budget as these items were not known at the time.

Members were advised of the overall budget position for Child and Adult Services by Committee, the reasons for the forecast outturn together with planned capital expenditure, as detailed in the report.

### **Decision**

That the contents of the report be noted.

## **64. Mental Health Services in Hartlepool - Presentation** (Director of Operations, Tees Esk and Wear Valley NHS Foundation Trust))

### **Issue(s) for consideration**

The Chair welcomed the representative from Tees Esk and Wear Valley NHS Foundation Trust who had been invited to attend the meeting as a result of concerns raised at previous meetings regarding the impact of proposals to relocate the place of safety from Sandwell Park in Hartlepool to Roseberry Park in Middlesbrough and to close rehabilitation and crisis beds at Victoria Road. Members were particularly concerned regarding the potential impact on individuals and had also requested information on the future strategic intention for mental health services in Hartlepool

The Director of Operations provided a detailed and comprehensive presentation which included an overview of Mental Health Services in Hartlepool and focussed on the following:-

- Hartlepool Profile/Statistical information of number of people accessing mental health services excluding those receiving psychological therapies
- What currently exists/what has changed
  - early intervention
  - crisis services provided Teeswide
  - new triage service
- Reduction in overall number of Section 136 admissions
- Potential impact of reduction in budget allocations to local authorities.
- Continuing reduction in demand for rehabilitation beds. Plans to support/teach more people in their own homes and increase community services
- Reduce burden of administrative work
- Reduce cost of inpatient staffing – introduced electronic rostering

In the lengthy discussion that followed, concerns were reiterated regarding the proposal to remove further services from the town and to close the place of safety at Sandwell Park given the potential impact on individuals as a result.

A Member suggested that the Trust be asked to reconsider their proposals to transfer the Place of Safety to Middlesbrough and explore the feasibility of adapting the current building to enable the service to be retained in Hartlepool. In response, the Director of Operations indicated that 98.5% of users of the services received services in Hartlepool and only 1.5% travelled outside of the town. In terms of service provision, emphasis was now being placed on community provision and those services provided outside of Hartlepool were very specialist and often provided for the whole of the North East.

The Director of Operations provided clarification in response to issues highlighted in the presentation which included clarification on the requirements of the Mental Health Act, how changes in service provision were being monitored and the reasons such decisions had been taken including the financial considerations. A number of concerns were raised regarding the health and safety implications of introducing twelve hour shifts for staff and the impact on service provision and staff health and wellbeing as a result. Members were advised that whilst changes in working patterns had been introduced as a result of pressures to reduce costs, a number of benefits had been identified including continuity of care. It was highlighted that there was no evidence at present to support the suggestion that 12 hour shifts had a detrimental impact on the quality of care provided.

Following further debate in relation to the removal of crisis beds from Hartlepool and the Director's comments that demand for assessment and treatment beds had diminished and the importance of funding crisis team activities as opposed to crisis beds, the Chair advised that a letter had been submitted to the CCG on behalf of this Committee in relation to this issue to which a response was awaited.

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#### **Decision**

That the contents of the presentation and comments of the Committee be noted.

#### **65. Any Other Items which the Chairman Considers are Urgent**

The Chairman ruled that the following item of business should be considered by the Committee as a matter of urgency in accordance with the provisions of Section 100(B) (4)(b) of the Local Government Act 1972 in order that the matter could be dealt with without delay.

#### **66. Any Other Business – Potential Charges for Accident and Emergency Services**

A Member shared with the Committee a query that had been raised by a member of the public prior to today's meeting that a £10 charge was being introduced for utilising accident and emergency services at North Tees Hospital and the One Life Centre. Whilst the Chair was of the view this was potentially a rumour, he agreed to explore the issue following the meeting.

The meeting concluded at 11.35 am.

**P J DEVLIN**

**CHIEF SOLICITOR**

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