

ADULT SERVICES COMMITTEE MINUTES AND DECISION RECORD

7 JULY 2014

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

Present:

Councillor Carl Richardson (In the Chair)

Councillors: Paul Beck, Geoff Lilley, Brenda Loynes, Kaylee Sirs,
George Springer and Stephen Thomas.

Also present: Members of the public E. Leck and F. Harrison.

Officers: Gill Alexander, Director of Child and Adult Services
Jill Harrison, Assistant Director, Adult Services
Neil Harrison, Head of Service
Jeanette Willis, Head of Strategic Commissioning
David Cosgrove, Democratic Services Team

1. Apologies for Absence

None.

2. Declarations of Interest

None at this point in the meeting. At Minute No. 8 Councillor Thomas declared a personal interest.

3. Minutes of the meeting held on 1 May 2014

Confirmed.

In relation to Minutes No. 91 “Section 136 Mental Health Act (MHA) 1982/2007 Place of Safety Pilot Evaluation” the Chair indicated that he had requested that copies of the surveys undertaken be circulated to the Committee. The Head of Service stated that he had contacted Tees, Esk and Wear valleys NHS Foundation Trust (TEWV) who considered that the small number of surveys they had received (six) wouldn't be of great value in determining satisfaction levels on the revised arrangements introduced. The Trust commented that many of the patients did not complete exit surveys when they were discharged. The Chair requested that a further request for the surveys be made to the Trust.

4. Moving Forward Together – The Vision for Adult Services in Hartlepool 2014-17 (*Director of Child and Adult Services*)

Type of decision

Budget and Policy Framework.

Purpose of report

To seek approval from the Adult Services Committee for 'Moving Forward Together – The Vision for Adult Services in Hartlepool 2014-17'.

Issue(s) for consideration

The Assistant Director, Adult Services reported that the original vision document covering 2011-14 had been endorsed by Cabinet in January 2012 following a consultation process in 2011 with a wide range of stakeholders. The updated document now submitted followed the original model and set out the direction of travel for the next three years. The document looked at what had been achieved in recent years, sets out the vision for adult services and outlined the priorities for 2014-17, reflecting the impact of the Health and Social Care Act 2012 and the Care Act 2014.

The transformational change of adult social care began in 2006 and would continue to be driven forward by three key component principles:

- Preventing ill-health and intervening early to keep people well;
- Focusing on community-based approaches and public health initiatives to encourage people to take care of their own health and well-being;
- Delivering personalised care and support through personal budgets.

Local authorities would continue to work with other statutory, independent, voluntary and third sector providers, people who used services and their carers to shape provision and increase the number of people determining how they are supported or commissioning their own services.

The Assistant Director commented that Moving Forward Together 2014-2017 reflected the direction of travel from the transformational change driven forward by the Health and Social Care Act 2012 and the Better Care Fund in its priorities and the high level action plan provided the framework for the detailed work required to deliver against this agenda.

The vision document also sets out the outcomes that must be achieved over the next three years to successfully deliver this vision for adult social care in Hartlepool: -

- excellent information in a range of formats;
- a diverse market place offering choice;
- strong partnerships across key organisations;

- safe services that promote people's independence;
- robust support for carers;
- preventative services;
- integrated services;
- keeping people out of hospital as the default position;
- supporting people to manage their own long term conditions;
- excellent residential services where these are needed;
- lean, fit-for-purpose systems to deliver adult social care;
- competent, flexible workforce able to work across boundaries;
- an authentic 'learning organisation' that celebrates what it does well and uses complaints and performance evaluation to identify where it can do better.

A Member commented that care needed to be exercised when entering into any contractual relationships with voluntary and third sector providers in light of recent experiences. Consideration needed to be given to their back office capacity as well as their ability to provide the front line services. The Chair commented that that accountability processes also needed to be assured. The Chair also had concerns in relation to the referral of 'lean services'; these services should not be cut back to the point that they then start to fail to deliver.

Members acknowledged the excellent achievements highlighted within the vision document but were concerned that nationally it was recognised that adult social care was at breaking point due to budget pressures. Every service had its cost and with the growing numbers of elderly people, many with complex needs, those costs would only grow. The delivery models now being discussed with partner organisations placed much more emphasis on those services provided and coordinated through the local authority.

The Chair reflected on the comments made by Members and members of the public in relation to private sector providers and commented that appropriate accountability routes must be established. The Assistant Director assured Members that there was appropriate and robust contract monitoring. There were also processes in place to monitor personal budgets.

Reference was made to the HealthWatch investigation into domiciliary care where, while there were high satisfaction rates, there was still some concern expressed by service users about time allocations and consistency of workers. The Assistant Director indicated that there were actions being taken as a result of the HealthWatch report and a report would be considered later on the agenda..

A Member commented that he was aware of issues affecting the discharge procedures from Sandwell Park. These appeared to be centred on discharge letters and medication.

The Assistant Director commented that through the Better Care Fund the

local authority, working in partnership with the Foundation Trust and the Clinical Commissioning Group (CCG), would look to the provision of services within the community that would reduce the need for hospital admissions unless absolutely necessary. The discharge procedures for those that had to be admitted to hospital needed to be robust so that all the appropriate services were coordinated. This was all the more difficult when all partners were being faced with severe financial pressures.

Decision

That Moving Forward Together – The Vision for Adult Services in Hartlepool 2014-17 be approved and that updates on the action plan be submitted to future meetings of the Committee.

5. Mental Health Joint Implementation Plan (*Director of Child and Adult Services*)

Type of decision

Non key decision.

Purpose of report

To seek approval from the Adult Services Committee to develop a joint Mental Health Implementation Plan for Hartlepool with key stakeholders, and to consult with Hartlepool citizens on the development of the plan in partnership with Hartlepool and Stockton on Tees CCG.

Issue(s) for consideration

The Head of Service reported that Hartlepool Mental Health Forum, chaired by Hartlepool HealthWatch, aimed to promote collaborative working across statutory, private and voluntary sector organisations in partnership with people who use mental health services, their carers and families.

It was proposed that a Task and Finish Group be established led by officers from the Council and the Clinical Commissioning Group to support the development of a local Mental Health Implementation Plan.

The proposed timescales were tight with reports to this Committee and the Health and Wellbeing Board in the autumn: -

| | |
|----------------|--|
| June 2014 | Establishment of Task and Finish Group |
| July 2014 | Consultation and co-production of local plan |
| August 2014 | Produce draft plan for consideration |
| September 2014 | Report to Adult Services Committee |
| October 2014 | Joint report to Health and Wellbeing Board |

Members welcomed the report but requested that the consultation process was robust.

Decision

1. That the development of a joint Mental Health Implementation Plan which will be produced in partnership with people who use mental health services, their carers and families be approved.
2. That the local Mental Health Implementation Plan be presented to the Adult Services Committee in September 2014 for approval.

6. Joint Health and Social Care Learning Disability Annual Self Assessment Framework (2012/13) *(Director of Child and Adult Services)*

Type of decision

Non key decision.

Purpose of report

To update the Adult Services Committee on the results of the eighth annual learning disability performance and self assessment framework (SAF) and to seek approval to share the findings of the report with the Health and Wellbeing Board and agree the Learning Disability Partnership Board key priorities for 2014/15.

Issue(s) for consideration

The Head of Service reported that an independent inquiry into access to healthcare for people with learning disabilities was established under Sir Jonathan Michael's leadership in May 2007. The inquiry found convincing evidence that people with learning disabilities have higher levels of unmet need and receive less effective treatment. Valuing People Now, a three year strategy for people with learning disabilities, identified that a key priority for delivery was to secure access to, and improvements in healthcare.

A North East regional programme of work was launched in April 2008 with the aim of ensuring people with a learning disability are as healthy as possible and have equality of access to health care. The North East regional programme is chaired by Dr Dominic Slowie, the National Clinical Director for Learning Disability, NHS England.

The Head of Service indicated that the report provided an update on the outcome of the joint health and social care learning disability annual self assessment. The report contained a summary of the findings and details of the key challenges and priorities. A copy of the Quality Assurance Report was submitted as an appendix to the report.

Members discussed services for people with autism and the Chair indicated

that such an important area should be discussed in more depth at a future meeting of the Committee. The Assistant Director commented that the wide ranging remit of services that those diagnosed on the autistic spectrum required was one of the reasons for referring reports from this Committee through to the Health and Wellbeing Board to gain a wider ownership with partner organisations.

Members commented that there were some excellent services and groups in the town supporting people with learning disabilities and the example of the process developed by Voice For You to help people with learning disabilities access services through their GP was highlighted.

It was noted from the Quality Assurance Report that the local authority was supporting one service user who was now living in Cornwall and questioned what care management difficulties that created. The Head of Service indicated that while the individual was a hospital in-patient following being placed under s117 of the Mental Health Care Act, their family had moved to Cornwall. When the individual was discharged from hospital, they wished to be placed near where their family was now located. As the responsible authority under s117 Hartlepool was required to manage the case. It had resulted in some management issues but the Council was now working with Cornwall County Council's social services to support the individual.

Members questioned what CQC (Care Quality Commission) inspections had been undertaken of care homes in Hartlepool recently and what, if any recommendations had been made. The Head of Service reported that he had not been informed of any significant issues for the CQC's recent inspections. Members suggested that it would be useful to invite the CQC to a future meeting to discuss their increased involvement with the local authority. The Assistant Director indicated that officers would look to invite the CQC to a meeting which would coordinate with the submission of an update report on quality assessments of care homes for older people and a report on adult safeguarding issues.

Decision

1. That the content of the report and the progress made against key national targets be noted;
2. That the key priorities for improvement for 2014/15 be approved;
3. That the key information be reported to the next meeting of the Health and Wellbeing Board.
4. That representatives of the CQC (Care Quality Commission) be invited to a future meeting of the Committee to discuss adult social care provision in Hartlepool.

7. Deprivation of Liberty Safeguards – Implications of the Supreme Court Judgement (*Director of Child and Adult Services*)

Type of decision

No decision required, for information.

Purpose of report

To inform the Adult Services Committee of the current position regarding Deprivation of Liberty Safeguards and the implications of a recent Supreme Court Judgement.

Issue(s) for consideration

The Assistant Director, Adult Services reported that the Council had the legislative responsibility as Supervisory Body (SB) under The Mental Capacity Act 2005 for the assessment of and the granting, or otherwise, of all Deprivation of Liberty requests for authorisation received from the Managing Authorities (Care Homes and Hospitals) in Hartlepool and for out of area placements for care homes.

The Supreme Court, on 19 March 2014, overturned the Court of Appeal in the cases of P v Cheshire West and Chester Council, and P & Q v Surrey County Council. In what is the most far-reaching human rights case heard in the UK for a decade, the Supreme Court reversed the Cheshire West decision by 7 Justices to 0, and Surrey decision by 4 to 3.

The Supreme Court has decided the test to be applied should no longer include factors the Court of Appeal had suggested were relevant, such as:

- “the relative normality” of the surroundings in which the person is placed,
- whether the person (or their relatives or carers) objects to the placement,
- whether a person with comparable disabilities would be expected to live in a less restricted environment,
- whether the reason or purpose for the placement is a relevant factor.

The Supreme Court ruled that the test as to whether a person is deprived of their liberty is now based on two key components which must both be satisfied:

- The person is under continuous supervision and control; and
- The person is not free to leave.

The Assistant Director stated that there were significant implications for Local Authorities as a result of this judgement in terms of workload, capacity and costs. The judgement and the new test set the bar at which a person may be deprived of their liberty much lower than before. This

means that the Council, as Supervisory Body, will receive more requests for assessment under the DoLS process. This will put pressure on the DoLS function and on the capacity of Best Interests Assessors as well as generating additional work for the legal team and additional applications to the Court of Protection.

The Assistant Director highlighted the impact of the Supreme Court ruling by reporting that in 2013/14 there were 49 requests for authorisation received (from care homes and hospitals) and assessed by Adult Services. In one day last week there had been fifteen such requests.

There has been a meeting of lead officers to discuss the implications of the judgement and the proposed way forward for HBC and a draft action plan has been developed. It was highlighted that this has been done in the context that the legal position presently remains fluid.

The financial implications need to be further analysed and the exact costs would not be known until the number of additional referrals can be quantified. At this early stage it was anticipated that there would be a financial pressure of up to £448,000 in 2014/15 linked to the creation of a new team to deal with the additional work, plus additional mental health assessments by s12 doctors and increased costs for legal advice and court applications.

The Corporate Management Team recommend that costs for 2014/15 should be funded from the use of Child and Adult Services reserves and any under spends within other areas of the Adult Services budget which can be achieved in 2014/15. This funding strategy was designed to protect the Council's overall financial position and had been reported to the Finance and Policy Committee on 30 June 2014. A subsequent report would also be submitted to Council.

The Chair and Members expressed concern as to where the additional funding would be found in light of the severe financial pressures within the department. Members questioned if any collaborative arrangements with other local authorities had been examined. The Assistant Director indicated that since the assessment of and the granting of all Deprivation of Liberty requests had become a local authority responsibility a number of Best Interest Assessors (BIAs) had been trained and it was considered that the department could accommodate the demand from within the borough at this time. The potential for collaboration may then be explored at a later date. The Director of Child and Adult Services confirmed that these issues had been discussed by the region's Directors with the possibility of some shared resource being considered in the future.

Members questioned what the implications were for those care homes that provided care for elderly people with dementia and other complex care needs that had security locks on their doors to protect their residents. The Assistant Director indicated that officers were meeting with the care home providers in the town to discuss these issues with a view to managing and

prioritising referrals. Plans were also in place to offer training to care home providers / managers later in the year.

Decision

1. That the current position regarding Deprivation of Liberty Safeguards and the implications of the recent Supreme Court Judgement be noted;
2. That the approach being taken locally in order to ensure that the Council complies with statutory and legal requirements be noted; and
3. That the proposed funding strategy for addressing the 2014/15 forecast costs, which had been reported to the Finance and Policy Committee within the Medium Term Financial Strategy report on 30th June 2014 for consideration and referral to full Council for approval be noted.

Councillor Thomas declared a personal interest in the following item prior to its commencement.

8. Update on Progress in Response to HealthWatch Investigation into Domiciliary Care in Hartlepool *(Director of Child and Adult Services)*

Type of decision

No decision required; for information.

Purpose of report

The 2013 HealthWatch investigation into domiciliary care made several recommendations. The report provided an update to the Adult Services Committee on the progress made in relation to the providers who were contracted to provide domiciliary care within Hartlepool.

Issue(s) for consideration

The Head of Strategic Commissioning updated the Committee on the progress made in relation to the HealthWatch recommendations to improve domiciliary care. The report set out the progress made in relation to each individual recommendation. Members welcomed the partnership approach that had been undertaken with HealthWatch in progressing the recommendations quickly and effectively.

Members expressed concerns that many working in the adult care sector were on the national minimum wage and frequently zero hours contracts.

Members expressed their thanks to HealthWatch for their investigation into domiciliary care. Members also commented on the excellent work being

undertaken by Council staff and providers in this sector in very challenging circumstances.

Decision

That the progress report be noted and that further reports be submitted as appropriate.

9. Provision of Services for Older People and People with Dementia *(Director of Child and Adult Services)*

Type of decision

No decision required; for information.

Purpose of report

The purpose of the report was to provide the Adult Services Committee with an update in relation to the procurement of support, information, social inclusion and lifestyle pathways for older people (over the age of 65 years) and people of any age living with dementia.

Issue(s) for consideration

The Head of Strategic Commissioning reported that as part of the savings programme for Adult Services for 2014/15, it was agreed by the Adult Services Committee in November 2013 that day opportunities, community access and low level support for older people and people with a dementia would be brought together and procured under one contract to achieve a saving of £250,000 for the Council and £50,000 for the CCG. The achievement of this saving involved termination of existing contracts and was expected to have minimal impact on people using existing services.

The procurement process began with the advertisement of the tender opportunity to provide social inclusion, community access and low level support for older people and people with a dementia on the Hartlepool Borough Council website and the North East Procurement Organisation Portal. Two tenders were received and evaluated in December 2013, however, neither submission addressed the key requirements of the service specification and a contract could not, therefore, be awarded.

The tender documentation was re-drafted to include an increased focus on dementia services and a more prescriptive service design to meet the Council's expectations and requirements. The second tender was advertised in January 2014 and two submissions were received and evaluated. The submissions received were not from the same organisations who tendered originally.

The tender submitted by the Trustees of the Hospital of God met with the Council's requirements. The service design had a clear focus on social

inclusion, community access and low level support for older people and people with a dementia. The Council offered the contract to the Hospital of God, however, they were unable to accept owing to issues around the social inclusion elements of the service and particularly in relation to the TUPE responsibilities with outgoing providers.

It had been determined, therefore, to revise the service specification into three separate contracts whilst still incorporating a more innovative approach including the requirements of the Working Together for Change Review undertaken with users and providers of the relevant services. The three new contracts are as follows

- Social Inclusion for People with a Dementia
- Social Inclusion for Older People
- Information and Handyperson Services.

In the interim, Corporate Procurement had confirmed an exemption to the Contract Procedures Rules to extend the existing contracts so that there was no loss of service or disruption for people who currently access these services.

The Council's Corporate Procurement Manager and the Chief Solicitor had been consulted and agreed that, following reference to the Contract Procedure Rules contained within the Constitution, the contracts would be exempt from the procedure rules as they were contracts with professional persons or organisations for the provision of services in which the professional knowledge and skill of such persons or organisations is of primary importance, or where the contract is for the provision of caring services to children or vulnerable persons.

The combined cost of the new services would be £620,000 which would be funded £415,000 from the Council and £205,000 from CCG. Due to the fact that tenders for the new services had not yet been awarded, the anticipated full year saving of £250,000 for the Council would not be achieved in 2014/15 and the shortfall was to be funded from an Adult Services reserve.

The Vice-Chair circulated some information at the meeting which she had found very helpful when dealing with family members diagnosed with the early stages of dementia. The Vice-Chair considered the information to be an excellent example of how such information could be simplified yet remain extremely useful. The meeting briefly discussed the care of elderly dementia patients in care home settings making specific reference to the services provided through the Hospital of God. A dementia information leaflet from the North East Dementia Alliance was also circulated for Members information.

The Assistant Director, Adult Services reported that a report on dementia services was to be submitted to the next meeting of the Committee.

Decision

That the Department's commissioning strategy in relation to the provision of social inclusion for older people and people with dementia be noted together with the Department's intention to:

- (i) Contract with the Trustees of the Hospital of God for the provision of social inclusion for people with dementia
- (ii) Enter into discussions with a preferred provider for the provision of social inclusion for older people
- (iii) Tender for the provision of an information and handyperson service.

10. Any Other Items which the Chairman Considers are Urgent

No items.

The meeting concluded at 11.55 am.

P J DEVLIN

CHIEF SOLICITOR

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