

# **ADULT SERVICES COMMITTEE**

## **MINUTES AND DECISION RECORD**

22 JUNE 2017

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

### **Present:**

Councillor Stephen Thomas (In the Chair)

Councillors: Lesley Hamilton, Brenda Loynes and Carl Richardson (Vice-Chair).

Also Present: Councillor Dave Hunter as substitute for Councillor Paul Beck in accordance with Council Procedure Rule 5.2.

Daniel Maddison, Hartlepool and Stockton-on-Tees Clinical Commissioning Group.

Frank Harrison, Years Ahead Forum  
Members of the Public – Evelyn Leck, Sue Little, Gordon and Stella Johnston.

Officers: Sally Robinson, Director of Child and Adult Services  
Jill Harrison, Assistant Director, Adult Services  
Neil Harrison, Head of Services  
Alastair Rae and Oliver Brewis, Public Relations Team  
David Cosgrove, Democratic Services Team

### **1. Apologies for Absence**

Councillors Paul Beck and Mike McLaughlin.  
Judith Gray, Hartlepool HealthWatch.

### **2. Declarations of Interest**

Councillor Stephen Thomas declared a personal interest as an employee of Hartlepool HealthWatch.

### **3. Minutes of the meeting held on 2 March, 2017**

Confirmed.

#### **4. Hospital Discharge Update** (*Director of Child and Adult Services*)

##### **Type of decision**

For information.

##### **Purpose of report**

The purpose of the report was to provide the Adult Services Committee with an update in relation to hospital discharges and delayed transfers of care.

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

The Assistant Director, Adult Services reported that following this issue being raised at the Health and Wellbeing Board, there had been a consideration of Delayed Transfers of Care by the Audit and Governance Committee.

The report to the Audit and Governance Committee on 23 March 2017 identified that, while the very challenging target within the Better Care Fund plan was not being achieved, local data showed a significant improvement in performance in recent months.

The Assistant Director highlighted that the number of delays reported in the week commencing 6 March 2017 was three for Hartlepool; the lowest number of delays since this measure was introduced. Of these three, one was a lengthy delay relating to a patient choice issue; the other two were short delays while people were waiting for Pre Admission Assessments to be undertaken by their chosen care home.

The position was expected to improve further over the next six to twelve months with one new care home operational from May 2017 and another planned development early in 2018. The new Rossmere Park Care Centre had significantly increased availability of both residential and nursing care beds within Hartlepool and would reduce reliance on out of area placements for those people who wish to stay within Hartlepool.

Members welcomed the news of the reduction in delays. A Member reported experience with patients being told that they could leave hospital on a morning but not being able to leave until early evening due often to delays in receiving prescribed medication. The Assistant Director indicated that such delays would not be included within these statistics as delays on day of discharge are not captured in this measure. It had been acknowledged previously that shorter delays,

such as these need to be addressed.

The Chair commented that Healthwatch had noted a trend around these delays and would be undertaking some additional work on this issue. The Chair also considered that some additional work around admissions was warranted as with some additional support, fewer elderly residents in particular, may need to be admitted to hospital in the first place. The Assistant Director confirmed that work on admission avoidance was being undertaken under the remit of the Better Care Fund.

### **Decision**

That the report be noted.

## **5. Update: Care Homes for Older People** *(Director of Child and Adult Services)*

### **Type of decision**

For information.

### **Purpose of report**

To provide the Adult Services Committee with an update in relation to care home provision for older people.

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

The Assistant Director, Adult Services provided an update on the situation in relation to care homes for older people in Hartlepool highlighting the following key points: -.

- Rossmere Park Care Centre successfully opened for residents on 22 May with an official opening planned in late June.
- Since the last report officers had been working closely with providers, managers and staff to implement any actions required from the various Action Plans. The home rated as Grade 3 in the Council's Quality Standards Framework had been allowed a three month period to make required improvements and the Assistant Director was pleased to report at the meeting that the home had been re-assessed and achieved Grade 2, which now meant that all homes in the town were rated Grade 1 or 2.
- A summary of current CQC ratings was submitted which showed that two homes had recently been re-inspected and rated as 'Requires Improvement'.
- Work was continuing on the redevelopment of the Admiral Court

Care Home by a new provider.

- Regular discussions with proprietors and managers continue and there is good engagement from care home providers. These sessions continue to have an excellent attendance rate and feedback regarding relevance is good.
- Since the last update report North Tees and Hartlepool Education Alliance had been launched. This was a partnership approach between Hartlepool Borough Council, Stockton-on-Tees Borough Council, Hartlepool and Stockton on Tees CCG, North Tees and Hartlepool NHS Foundation Trust, Tees Esk and Wear Valley Foundation Trust and Alice House Hospice to provide a range of training for care homes.

The Chair indicated that he had visited the recently opened Rossmere Park Care Centre and commented that it was a very welcome new facility for the town. The Chair encouraged other Members of the Committee to take the opportunity to visit the home when its official opening took place on 27 June. The Chair also welcomed the increase in both residential and nursing beds in the town which showed a significant improvement over the situation over the past 12 to 24 months ago and showed what could be achieved through working with existing and new partners.

The Chair did express a slight concern at the cascading down of training to staff through organisations/homes, particularly in areas such as dementia awareness. The Chair suggested that this was an issue that should be discussed at the next Managers Forum. The Assistant Director indicated that she would include the matter on the agenda for the meeting. Members commented that a similar situation appeared to exist in hospitals.

In light of the recent Grenfell Tower tragedy, Members sought assurance that appropriate fire safety measures existed in residential and nursing care settings throughout the Borough. Officers stated that all homes had to have regular fire safety checks and hold appropriate fire safety certification to maintain their registration. It was unknown if any of the homes had a sprinkler system in place, or whether this was a requirement in current regulations, as this would potentially be linked to age of the building.

The Chair requested that an update report be submitted to the Committee in the near future setting out the current requirements and the actual picture within homes in the borough for the Committee's information. Members of the public referred to concerns expressed in the past when residents with dementia were housed on the first or upper floors of premises which could prove difficult to evacuate should there be a fire. Concern was also expressed regarding situations when elderly and infirm patients had to be evacuated and lifts would be unavailable. The Assistant Director advised that homes were required to have evacuation plans in place for all residents, regardless of where

they lived within the building. The Assistant Director also advised that care homes were regulated by the Care Quality Commission who assess compliance with health and safety requirements, and confirmed that health and safety issues are also addressed in the Council's Quality Standards Framework.

The Vice-Chair sought details of how the ratings of homes in Hartlepool compared with other neighbouring authorities. The Assistant Director commented that only the CQC ratings could be compared; the Quality Standards Framework rating was a Hartlepool only assessment. There was also a time lag in up-to-date CQC ratings being published. Comparison information will be included in future routine update reports when available. The Chair reported that officers were visiting one of the few residential care homes locally that had an 'outstanding' CQC rating to assess firsthand what that actually meant, though it was anticipated that the level of fees paid by residents may be a factor.

### **Decision**

1. That the report be noted.
2. That a report be submitted to a future meeting setting out the current fire regulation requirements for residential and nursing care homes and the existing standards within Hartlepool homes.

## **6. Direct Care and Support Services – Outcome of CQC Inspection** *(Director of Child and Adult Services)*

### **Type of decision**

For information.

### **Purpose of report**

To inform Adult Services Committee of the outcome of a recent Care Quality Commission (CQC) inspection into the Direct Care and Support Service provided by Hartlepool Borough Council.

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

The Head of Service reported that the Direct Care and Support Service, based at the Centre for Independent Living was registered with the CQC and regulated by the Health and Social Care Act (Regulated Activities) Regulation 2014.

The Direct Care and Support Service (Hartlepool) is a domiciliary care service which provides reablement support, a 'telecare' response

services and an emergency respite care service for family carers to over 2,000 people in the Hartlepool area.

The CQC undertook an inspection of the Direct Care and Support Service provided by Hartlepool Borough Council on 10, 16 and 17 February 2016 and rated the service as 'Requires Improvement' in three of the five domains and 'Requires Improvement' overall.

An action plan was implemented to address the issues identified by the CQC, and to deliver the required improvements and the CQC had undertaken a re-inspection of the service on 25 April, 26 April and 5 May. The re-inspection report gave all the domains a 'good' rating and the service overall was also declared 'good'.

The Head of Service recorded his thanks to the Healthwatch team that had assisted with a pre-inspection report and also the Council's own Commissioned Services Team for their assistance in supporting the service to deliver the required improvements. The Chair echoed the comments and requested that the Committee's congratulations be extended to all the staff involved for the improvements made to the service.

Members and members of the public present highlighted the general compliments that the service received from people who have used the service, which reflected the efforts of the dedicated staff team.

#### **Decision**

1. That the inspection report and the improvements that have been delivered be noted.
2. That the Committee's congratulations be extended to all the staff in the service thanking them for the improvements made.

## **7. Transforming Care – Respite Services Review Update** (*Director of Child and Adult Services*)

#### **Type of decision**

For information.

#### **Purpose of report**

To update the Adult Services Committee on the review of health funded respite care for adults with a learning disability and complex needs linked to the wider Transforming Care agenda.

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

The Head of Service reported that Hartlepool and Stockton-on-Tees Clinical Commissioning Group and South Tees Clinical Commissioning Group (the CCGs) had been requested to review existing respite care services for adults with a learning disability in relation to the intentions of the national Transforming Care agenda. The review focused on health respite services for people with learning disabilities and complex needs in the CCG areas. This was to ensure that these services appropriately meet the needs of the population now and into the future.

Work had been undertaken to map respite services currently available, commissioned directly by the CCGs, by Local Authorities and by other means. Analysis of capacity and activity within service settings had been undertaken in significant detail to enable a robust understanding of the current operation of the NHS respite services.

Stakeholder engagement activities had been undertaken by local voluntary community sector organisations and had sought views and involvement from approximately 120 individuals across the two CCG areas. In addition 86 completed parent-carer surveys had been received.

There were currently 43 people from the Hartlepool and Stockton-on-Tees localities regularly accessing services at Aysgarth, Stockton, two of these were from Hartlepool. There are 3 young people (Stockton) who would reach 18 in the next four years who currently access bed based short break respite services at Baysdale, Roseberry Park and who were likely to need similar types of support into their adulthood and who would be likely to be referred to Aysgarth (based on geographic location). There were 60 children and young people known to Hartlepool Borough Council's Transitions Teams who will reach 18 in the next four years who may have respite needs into the future.

In terms of the stakeholder engagement activities, the Head of Service reported that four engagement activities took place in Hartlepool, held at Café 177 and Place in the Park on separate dates, with a total of 29 people being spoken to about their experiences and views of respite now and in the future. The people involved in these conversations were a mixture of parents, families and carers as well as people who use (or who may use) services. A parent carer survey has been developed and circulated to relevant individuals who are currently using NHS provision or who have been identified as being stakeholders in the service.

The information, research on other models, market engagement and informal engagement findings had been utilised to develop a number of possible options for the provision of health respite services for people with learning disabilities and complex needs in the future. Further development work was required to articulate in detail what the options

might look like and it was the intention that these would be developed with individuals, families and parent carers as part of ongoing engagement and consultation opportunities.

The representative from Hartlepool and Stockton-on-Tees Clinical Commissioning Group added that there was a detailed work plan behind the consultation process and financial modelling work was also being undertaken on the options for the future. No changes to any services would be made until there was full assessment of the implications. While the numbers did look low for Hartlepool, residents had access to a wide variation of 'respite' services, mainly through personal budgets, and this was a model that may be extended to other areas.

Members were concerned that demand may be out-stripping supply. The Head of Service indicated that the model in Hartlepool was based around the use of personal budgets so people had the ability to tailor their respite to their own needs, whereas in other areas, short breaks were largely provided through building based services. The Assistant Director highlighted that this report specifically related to a service to people with learning disabilities and other complex needs who require health respite. The Council commissioned a building based short break service at Greenfields Lodge but also supported a large number of individuals with learning disabilities to access short breaks tailored to their needs using a personal budget. This could include weekends away, longer holidays and accessing other interests outside their home. Members should not read from the report that only two Hartlepool residents with learning disabilities access respite as this is not the case.

The Director clarified that the term 'respite' is not helpful, and is no longer used in Children's Services. The term 'short breaks' is more representative of the way that services are now used in a planned way as part of a wider plan to meet an individual's care and support needs. There were occasions when a short break (or 'respite') was needed in an emergency situation and this was commissioned within the Greenfields Lodge service.

The meeting briefly discussed the assessment of children and young people with learning disabilities and other complex needs and eligibility criteria.

The Chair commented that the Transforming Care agenda was still developing and it would be worthwhile the Committee receiving an update report in six months time. It was reassuring to hear that Hartlepool residents were not experiencing difficulty accessing short breaks in general. The Chair did feel that the approach taken by Children's Services in referring to such services as short breaks was a direction that Adult Services may wish to adopt.



## **Decision**

1. That the report be noted.
2. That a report be submitted to a future meeting in around six months time updating the Committee on developments in the Transforming Care agenda.

## **8. Disabled Facilities Grants** (*Director of Child and Adult Services*)

### **Type of decision**

For information.

### **Purpose of report**

To provide the Adult Services Committee with an update regarding Disabled Facilities Grants and progress that had been made to reduce waiting times.

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

The Assistant Director, Adult Services reported that at the time of the last report to Adult Services Committee in December 2015, the average waiting time for a DFG, from referral to completion of the work, was 207 days, and there had been 183 DFGs completed in the past 12 month period.

As at end of March 2017, the waiting list had reduced significantly from 110 at the end of 2015/16 to 48. The average waiting time for a DFG had also reduced significantly to 189 days, when previous average waiting times of 346 days had been reported. This improved performance has been achieved through additional investment in DFGs from the Better Care Fund Pooled Budget.

DFGs were available to both children and adults based on the national criteria. In the financial year 2016/17 213 DFGs were completed, comprising 235 adaptations (as some grants cover multiple adaptations to the same property). 224 of these (95%) were for adults and 65% of the total DFGs in 2016/17 were provided to people aged 65 and over.

The Chair welcomed the update report as excellent progress in improving the situation for people requiring adaptations via a DFG. A Member questioned the requirement that “the owner or tenant of the property [and] intend to live in the property for the period of the grant (five years)”; and what would happen should the service user die within

that period. The Assistant Director indicated that the specific condition was to ensure that significant works were not undertaken in a property when the recipient of the grant intended to move home in the relatively short term. Some works could require extensive modifications to a home such as an extension or downstairs bathrooms for example.

**Decision**

That the report be noted.

**9. Any Other Items which the Chairman Considers are Urgent**

None.

The meeting noted that the date of next meeting had been changed and would now be Thursday 27 July 2017 at 10.00am in the Civic Centre, Hartlepool.

The meeting concluded at 11.05 am.

**P J DEVLIN**

**CHIEF SOLICITOR**

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