# ADULT AND COMMUNITY BASED SERVICES COMMITTEE AGENDA



**Thursday 15 November 2018** 

at 10.00am

in Committee Room B, Civic Centre, Hartlepool

MEMBERS: ADULT SERVICES COMMITTEE

Councillors Brewer, Hamilton, Little, McLaughlin, C Richardson, Thomas and Young

- 1. APOLOGIES FOR ABSENCE
- 2. TO RECEIVE ANY DECLARATIONS OF INTEREST BY MEMBERS
- 3. MINUTES
  - 3.1 To receive the Minutes and Decision Record in respect of the meeting held on 11 October 2018 (for information as previously circulated).
- 4. BUDGET AND POLICY FRAMEWORK ITEMS
  - 4.1 Savings Programme 2019/20 Director of Adult and Community Based Services
- 5. **KEY DECISIONS**

No items.

6. OTHER ITEMS REQUIRING DECISION

No items.



#### 7. ITEMS FOR INFORMATION

- 7.1 Care Homes for Older People Director of Adult and Community Based Services
- 7.2 Quality Ratings for Commissioned Services *Director of Adult and Community Based Services*
- 7.3 Dementia Friends Session

#### 8. ANY OTHER BUSINESS WHICH THE CHAIR CONSIDERS URGENT

#### FOR INFORMATION

Date of next meeting – Thursday 6 December 2018 at 10.00am in the Civic Centre, Hartlepool



## ADULT SERVICES COMMITTEE MINUTES AND DECISION RECORD

11 OCTOBER 2018

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

#### Present:

Councillor: Stephen Thomas (In the Chair).

Councillors: Lesley Hamilton, Sue Little, Mike McLaughlin, John Tennant,

Carl Richardson and Mike Young.

Also present: Donna Owens, North East Commissioning Support Unit

Gordon and Stella Johnston

Officers: Jill Harrison, Director of Adult and Community Based Services

Neil Harrison, Head of Safeguarding and Specialist Services

David Cosgrove, Democratic Services Team

#### 22. Opening Comments

The Chair welcomed Councillor Mike Young to his first meeting of the Committee after his appointment at Council.

#### 23. Apologies for Absence

Apologies for absence were received from Frank Harrison (National Pensions Convention/Years Ahead Forum), Judith Gray (Healthwatch) and Evelyn Leck.

#### 24. Declarations of Interest

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

### 25. Minutes of the meeting held on 8 September 2018

Received.

### **26.** Transforming Care – North East and Cumbria (Director of Adults and Community Based Services)

#### Type of decision

For information.

#### **Purpose of report**

To provide the Adult Services Committee with an update on progress of the North East and North Cumbria Transforming Care Programme.

#### Issue(s) for consideration

The Head of Safeguarding and Specialist Services reported that following the Winterbourne View scandal a national programme was launched aimed at reducing reliance on long stay learning disability hospitals. As a result the transformation programme was developed, and the North East and Cumbria were awarded 'fast track' status.

A transformation plan was developed which identified that by improving the community infrastructure, supporting the workforce and avoiding crisis by focusing on earlier intervention and prevention, the North East and North Cumbria would be able to support people in the community more effectively thus avoiding the need for hospital admission.

The plan focused on a systematic reduction and closure of learning disability assessment and treatment beds over the five years to March 2019 across the North East and North Cumbria. The Transforming Care Partnership Board (TCPB) agreed a work programme which identified priority areas and established associated work streams.

During 2017/18 the TCPB demonstrated positive progress against delivery of its local plan through achievement of planned trajectories and bed closures. A collaborative commissioning hub for Durham, Darlington and Tees had been established to ensure sustainable delivery.

The Tees area had effectively reduced its contracted inpatient assessment and treatment bed capacity. There had been a coordinated effort to reduce reliance on inpatient beds and prevent inappropriate admissions.

Within Hartlepool there had been investment in community infrastructure through the delivery of an enhanced community support service (provided by Tees Esk and Wear Valley NHS FT), shifting investment from bed based provision to the community and providing a greater degree of resilience to those people being resettled from long stay inpatient care who require a high degree of intensive support. Additional funding had also been awarded by NHS England to enable an intensive in reach provision that supports people and families to prevent crisis and social care providers to enable effective discharges.

Along with other Local Authority areas, Hartlepool has submitted plans for

those with an indicative discharge date before March 2019 and the financial impact has been reported back to the TCPB via regional finance leads.

Appendix 1 to the report provided an overview of the funding invested to support the Transforming Care programme across Tees, Durham and Darlington.

The Head of Safeguarding and Specialist Services highlighted that there had been a risk identified from a case heard by the Court of Protection (MM Case: [2017] EWCA Civ 194) in which it had been determined that, in the case of conditional discharge of MHA s.37/41 restricted patients, neither the Secretary of State nor the tribunal had a power to deprive a person of their liberty outside of a hospital setting. Such a power 'would have to be prescribed by law and it is not'. Nor was it necessary to imply such a power. To do so would create a power that was 'unconstrained, without criteria, time limits or protections', with inferior review rights in the community when compared with those in hospital, which would be discriminatory'. The implications of the MM case on those people with Mental Health Act restrictions had halted the proposed discharge of several people until further clarity was sought, which means that discharge in the near future was unlikely.

The representative from the North East Commissioning Support Unit commented that the appendix identified the investment that was being made which was going some way towards alleviating the pressures on the system. The focus was now moving very much more towards supporting people within their own homes.

Members questioned the issue of finance which was not yet settled and also raised issues around the transfer of information between agencies to ensure there were no gaps in the transfer processes. The representative from the North East Commissioning Support Unit commented that in terms of financing the programme created financial pressures across health and social care. It was noted that the Tees-wide planning group aimed to ensure that available resources were used effectively to meet identified needs. There were processes in place to ensure that information was tracked and agencies did work collaboratively.

A Member questioned the process for crisis admissions and the work being undertaken to reduce them and also the potential budget savings around the new processes. The representative from the North East Commissioning Support Unit stated that intensive support teams were in place. There had been a move of some resources out of hospitals into the community to support people with the aim of preventing admissions. Service providers were reporting, however, that the level of complexity of need for those requiring support was increasing. Community based support was also more expensive to provide; the support packages for patients in the community were resource intensive. That may reduce over time but the move to community based services was the correct direction.

A Member expressed concern that, alongside other service areas, this could be seen as a cut in NHS in-patient services and would these changes mean that should patients require hospital treatment would they be sent further afield than at present. The Member also questioned the ease of accessing services through GPs. The representative from the North East Commissioning Support Unit stated that there was a process of reducing in-patient beds across the north east. Historically, there had been a significant over-reliance on in-patient care across the north east in relation to adults with learning disabilities and complex needs and this process was, therefore, quite a significant culture change for all involved. In terms of the issues with GPs, that had not been raised as an issue to date but the representative from the North East Commissioning Support Unit indicated that she would investigate further. A Member subsequently asked if GPs were getting better at supporting mental health patients in the community and the representative from the North East Commissioning Support Unit indicated that a lot had been done to provide primary care staff including GPs with information, advice and training.

A Member questioned the retention of mental health professionals. The representative from the North East Commissioning Support Unit stated that as part of these processes a regional workforce plan was being developed to assess the current situation and to target training needs for the future.

A Member commented that stigma was still one the greatest issues around mental health and questioned what in the wider scope was being done to break down some of these barriers that often prevented people from seeking help. The Head of Safeguarding and Specialist Services stated that tackling stigma was part of the wider agenda on access to services. A mental health event using the Working Together for Change methodology was being organised for 12 December which would include work around this issue. The Chair requested that all Members of the Committee should be invited to that event and that a follow up report on the event be submitted to the Committee in the new year.

Concern was expressed by a Member at the issue of finances and the transfer of the financial 'dowry' from the NHS to local services when the inpatients were discharged to community care. Twelve such patients were being discharged into the community in Hartlepool but only in four cases was there finance attached. The Head of Safeguarding and Specialist Services indicated that each case was assessed on its own merits as to whether funding was an NHS or adult social care responsibility. The representative from the North East Commissioning Support Unit indicated finances were being reviewed across the north east and there would be a shift in finances but there was a lot of finance tied into infrastructure. It was acknowledged that this issue was a financial pressure.

In closing the debate the Chair commented on the Winterbourne View scandal, and confirmed that the provision of care closer to people's homes

was something that was fully supported by the Council. The issue of finance was, however, still a big concern particularly at a time when local government finances were under extreme pressure. The annual cost of some individual care packages could easily extend into six figures and this was a matter the authority would have to keep under close review moving forward.

The Chair added that the second major issue was the up-skilling of the local workforce as many of the individuals being discharged had significant and complex needs and needed the correct support structures to be in place. This was still a developing picture and the Chair was concerned that at this time it did not appear the correct resources were in place. Members supported the underlying principle of discharging people from long term in-patient care but did feel that there were still some quite significant questions yet to be answered.

#### **Decision**

That the report be noted and the progress against the regional plan be noted.

### **27. Shared Lives Provision** (Director of Adults and Community Based Services)

#### Type of decision

For information.

#### **Purpose of report**

To provide the Adult Services Committee with an update on the development of Shared Lives provision within Hartlepool.

#### Issue(s) for consideration

The Head of Safeguarding and Specialist Services reported that everyone who lives with or visits a Shared Lives carer, as well as the carer, were part of a local Shared Lives scheme. There were around 150 Shared Lives schemes across the UK. Schemes matched people who need support with a Shared Lives Carer - giving each person time to get to know each other, and choose to share their family and community lives together - whether for day support, respite, or to move in with their Shared Lives carer's family.

Shared Lives schemes were responsible for recruiting, training and approving Shared Lives carers. They carry out Disclosure and Barring Service (DBS) checks on the Shared Lives carer; and ensure the property meets fire, electrical and gas safety regulations. All Shared Lives schemes in England are registered and inspected by the Care Quality Commission (CQC). Shared Lives provision is consistently rated better than most other types of social care.

Shared Lives schemes are either directly run by local authorities or by

charities and social enterprises. Almost all Shared Lives schemes operate geographically on the same boundaries as the local council body that has responsibility for Adult Social Care.

Hartlepool Borough Council previously held a small contract with an Adult Placement provider but due to low uptake, the contract was terminated in 2008/09. With the development of Shared Lives Plus, and following conversation and further exploration of the model with ADASS North East, there is now a strong case to develop a new Shared Lives model for Hartlepool.

Several iterations of the model had been discussed for Hartlepool and the option of developing a Tees model had been considered. Development of a Tees Shared Lives model would require investment up front and would take time to become established. An alternative option was, therefore, explored with Durham County Council (DCC) and it was determined that it would be preferable for Hartlepool to build on the well-established Durham model, which is operated with the support of DCC and Shared Lives Plus. The Durham model would enable Hartlepool to spot purchase provision and would fully realise the benefits of being linked to the UK network.

A Member questioned how many users could be expected in Hartlepool, would there be a local coordinator and what costs were anticipated. The Head of Safeguarding and Specialist Services indicated that initially seven individuals had been identified that would potentially benefit from Shared Lives provision and these cases would be considered in December. There would be an advertising campaign, however, in the near future to raise awareness and hopefully recruit additional Shared Lives Carers. The costs to the Council of operating a scheme solely for Hartlepool would be at least £100,000. At the present time, based on the initial number of individuals identified, and the need to grow the scheme, it was considered beneficial to commission support from elsewhere but this may be subject to review in the future. The Chair requested that, as the scheme develops, it was linked into the Council's offer through the Centre for Independent Living.

#### **Decision**

That the update and progress on the development of Shared Lives provision be noted.

## 28. Annual Report of Adult Social Care Complaints and Compliments 2017/18 (Director of Adults and Community Based Services)

#### Type of decision

For information.

#### **Purpose of report**

To present the Annual Report of Adult Social Care Complaints and

Compliments for 2017/18 to the Committee.

#### Issue(s) for consideration

The Director of Adult and Community Based Services submitted a report setting out an analysis of complaints and compliments during 2017/18 and drawing comparisons with previous years. A total of 18 complaints were received during 2017/18. The number of complaints received had decreased by one from last year. Of the 18 complaints received, 4 complainants withdrew their complaints leaving a total of 14 investigated in 2017/18. This was a decrease of one from 2016/17 where 15 complaints were investigated. Of the 14 complaints investigated in 2017/18, 13 have concluded local statutory complaints processes and one remained ongoing. To date, 2 complainants, from the 13 complaints that had concluded local statutory complaint processes, have approached the Local Government and Social Care Ombudsman (LGSCO) with their complaint.

The Director stressed that it was important to focus on the compliments the services received, as well as learning from complaints, and particularly to ensure that staff received positive feedback regarding their work. During 2017/18, 57 compliments were received relating to adult social care. These ranged from an expression of thanks and appreciation in the form of a thank-you cards to written communication. In addition to this, verbal expressions of thanks and appreciation were received from service users, carers and their families who had participated in providing feedback about newly qualified social workers. Appendix 1 to the report provided some examples of compliments received during the period.

A Member commented that there appeared to be an increase in complaints from service users with physical disabilities or sensory loss and requested a breakdown of how many related to sensory loss. The Director indicated that she did not have those details to hand but with the overall numbers being so low it would be difficult to identify any particular trends. Overall, adult services within the Council supported some 5,000 people, so the numbers of complaints were very small and there were none that she could recall that stood out in relation to sensory loss. The authority did have an appropriate number of workers trained in sensory loss that could provide more specialised support. The Chair requested that a breakdown of the figures be provided for Members information after the meeting.

A Member questioned what support there was available to members of staff who had complaints made against them, particularly when they were simply the subject of human error. The Director stated that the service did not operate a blame culture; mistakes were opportunities to learn and often lead to improvements. The Director indicated that in her experience none of the complaints made were due to deliberate actions by a member of staff and confirmed that any staff involved in complaint investigations were offered appropriate support..

Members welcomed the lower number of complaints reported and the low number in general, though a Member did question if the complaints procedure itself needed to be reviewed to assure no one was being put off complaining. The Director indicated that low level concerns could often be resolved quite quickly and simply without recourse to the formal complaints procedure. The complaints recorded were those that could not be resolved in this fashion and had been pursued through the formal route.

Members also welcomed the number of compliments recorded and referred to some of the comments made by people thanking the council for the service they had received. The Chair referred to a recent compliment that had been received from the family of a service user who wished to return home from hospital so that he could die in his own home. Those arrangements had been made by the department within one day and the gentlemen died two days later at home. His family were extremely grateful for the work undertaken by social workers to make the transfer from hospital to home happen in such a short period of time and the whole incident reflected how our staff regularly go the extra mile to make such things happen.

#### **Decision**

That the contents of the Annual Report of Adult Social Care Complaints and Compliments be noted and that the report be published online.

### 29. Any Other Items which the Chairman Considers are Urgent

None.

The Committee noted that the next meeting would be held on Thursday 15 November 2018 at 10.00 am in the Civic Centre, Hartlepool.

The meeting concluded at 11.00 am.

**H MARTIN** 

**CHIEF SOLICITOR** 

**PUBLICATION DATE: 22 OCTOBER 2018** 

## ADULT AND COMMUNITY BASED SERVICES COMMITTEE





**Report of:** Director of Adult and Community Based Services

**Subject:** SAVINGS PROGRAMME 2019/20

#### 1. TYPE OF DECISION/APPLICABLE CATEGORY

1.1 Budget and Policy Framework.

#### 2. PURPOSE OF REPORT

2.1 The purpose of this report is to enable Adult and Community Based Services Committee to consider proposals to achieve further savings in 2019/20 and to provide feedback on these proposals to the Finance and Policy Committee meeting on 26 November 2018.

#### 3. BACKGROUND

- In response to the multi-year funding settlement provided by the Government for 2016/17 to 2019/20 the Council previously developed a four year financial strategy. This strategy was designed to address the impact of a further four years of cuts in Government funding. By 2019/20 Hartlepool's core Government funding will be 45% less than in 2013/14 a reduction of £20.9m.
- 3.2 The plan was underpinned by:
  - the use of one off reserves to provide a longer lead time to address the front loading of Government funding cuts over the period 2016/17 to 2019/20; and
  - the achievement of housing growth, which over the period 2016/17 to 2019/20 had increased the number of properties by nearly 10%. By 2019/20 this housing growth will have achieved new recurring Council Tax income of approximately £3.6m to partly offset the impact of Government grant cuts and thereby avoid even higher budget cuts.

- 3.3 A comprehensive report on the 'Medium Term Financial Strategy 2019/20 and Financial Outlook from 2020/21' was considered at the Finance and Policy Committee on 3 September 2018. The report advised Members that since the previous plan was developed councils, including Hartlepool, have faced significant increased financial pressures, which have not been reflected in the funding provided by Government to councils in 2018/19 and 2019/20, in relation to:
  - Looked after Children the Local Government Association has estimated that by 2020 this pressure will reach £2 billion.
  - Ending of the 1% Public Sector pay cap alongside the four year funding settlement for councils the Government previously indicated that a 1% public sector pay cap would continue until 2019/20. Recently agreed pay settlements across the public sector have exceeded the 1% pay cap. For Local Government employees a two year national pay settlement was agreed for 2018/19 and 2019/20 and for the majority of staff provides annual cost of living pay increases of 2%. For lower paid staff higher annual pay increases will apply. By 2019/20 the national pay award will increase the Council's recurring pay costs by 5.8%, which is slightly above the national average of 5.7%.
- As a result of the additional unfunded budget pressures outlined above and a further cut in Government funding in 2019/20 the Council now faces a net 2019/20 budget deficit of £5.987m. Clearly, on the back of eight years of austerity and cuts to the Council budget, the position facing the Council for 2019/20 is the most challenging so far.
- 3.5 However, as reported to the Finance and Policy Committee, it is anticipated that further budget deficits will arise in 2020/21 and 2021/22 as it is expected that further cuts in Government funding will be made. At this stage it is extremely difficult to forecast funding in 2020/21 as the Government are proposing to make significant changes to the Local Government funding system. At this stage there is no information available to assess the potential impact of the Prime Minister's recent statement that austerity has ended and at best any financial benefits for local government are not anticipated until 2020/21. If the Government was to end austerity for Hartlepool for 2019/20 a grant increase of 27% would be needed just to cover the Revenue Support grant cut previously announced for 2019/20. To completely end austerity and cover the £6m deficit and to freeze Council Tax, a 41% grant increase would be required.
- Therefore, the immediate challenge facing the Council is the development of a strategy to address the 2019/20 deficit of £5.987m. This strategy will be underpinned by a review of reserves to identify one off funding to provide a slightly longer lead time to make permanent savings. However, this strategy does not remove the need to make these savings.
- 3.7 The strategy for 2019/20 will also be underpinned by identifying new savings which can be implemented in 2019/20 and detailed proposals for this Committee are provided in the next section.

### 4. SAVINGS PROPOSALS 2019/20 – INCLUDING FINANCIAL CONSIDERATIONS

4.1 For 2019/20 the total value of savings proposed for consideration by the Adult and Community Based Services Committee is £237,500 which is made up as follows:

#### 4.1.1 Review of Grant Income - £97,500

A review of grant income has identified two areas where savings can be made with minimal or no impact for people using services.

The first proposal relates to the Disabled Facilities Grant (DFG), specifically the administration / management fee that is payable from the grant to offset costs incurred by the Council in administering and managing the DFG process. This is currently set at 12% and it is proposed to increase this to 15%, generating a saving of £37,500. This increase would not result in the Council being an outlier for administration / management fees as other local authorities in the region apply fees of 15%. There would be no impact on individuals receiving grants as the administration / management fee will be top sliced, and the maximum grant award maintained at £30,000. The increase in the administration / management fee will enable the service to absorb the pay award, as required by other grant regimes, as well as maintaining current waiting times.

The second proposal relates to a grant made to councils linked to financial assessment and the implementation of new duties. The grant was made to compensate local authorities for income lost as a result of the changes; however the new duties were already being undertaken within Hartlepool, managed from within existing resources. Payment of this grant effectively recognises the impact of good practice previously adopted by the Council and means the Council does not have to subsidise this service from the General Fund. The £60,000 can therefore be used to contribute to offset the Council's financial position.

#### 4.1.2 Recovery of Direct Payment Contingencies - £65,000

A new approach to contingency funding within Direct Payments was introduced in April 2017. Historically, personal budgets for people who chose to take a direct payment and employ personal assistants were calculated based on the hourly rate paid to the person, plus on-costs with an element of contingency funding included in order to meet any unforeseen costs associated with sickness and / or redundancy. In the majority of cases, the contingency funding has not been required and work has been undertaken over the last two years to recover this funding through reconciliation of Direct Payment accounts. In future, departmental reserves will be used to meet any unforeseen costs associated with Direct Payments. Ongoing payments to users of service have reduced to remove funding for contingencies, which will avoid significant sums of money building up in service user bank accounts in the future. Based on work undertaken to date and the number of outstanding reconciliations, it is estimated that a further saving of £65,000 can be achieved in 2019/20.

#### 4.1.3 Inflation Freeze / Salary Abatement - £75,000

In addition to the potential savings identified relating to income (outlined above), it is proposed that Adult Services implements an inflation freeze for all non pay budgets (excluding contracts that include annual inflationary uplifts). This, combined with a review of all supplies and services budgets that have historically underspent, will achieve a saving of £25,000.

A departmental salary abatement target of £200,000, which accounts for vacant posts and incremental drift across the department, was introduced from April 2016. This has been closely monitored and it is proposed that the target can be increased by a further £50,000 for 2019/20. This may only be a short term proposal as, when officers move through the pay grade towards the top of their pay scale, the ability to contribute towards this target will reduce, but is dependent upon staff turnover and recruitment.

#### 5. RISK IMPLICATIONS OF PROPOSED SAVINGS

- There are a number of risks implicit in the delivery of any package of savings and it is important to recognise these as part of any decision making. The primary risk relates to maintaining capacity to deliver front line services and support to the Council / departments.
- There are specific risks associated with a further increase to the departmental salary abatement target as vacancies may not arise during the year or may be filled immediately and staff may move through pay grades and reach the top of pay scale quicker than anticipated i.e. qualification and experience based progression for Social Workers and Social Care Officers.
- In relation to Direct Payment contingencies, there is a risk that departmental reserves are exhausted at some point in the future, leaving one-off costs to be managed in future years. The potential financial implications cannot be quantified at the present time but this is considered a relatively low risk given the minimal call on contingency funds to date.

#### 6. EQUALITY AND DIVERSITY CONSIDERATIONS

6.1 There are no equality and diversity considerations identified in relation to these savings proposals.

#### 7. LEGAL CONSIDERATIONS

7.1 The proposals outlined in this report ensure that the Council continues to fulfil its statutory duties in relation to the provision of adult social care in line with the Care Act 2014 and other relevant legislation.

7.2 There are no specific legal considerations identified in relation to the savings proposed in this report.

#### 8. CHILD AND FAMILY POVERTY

8.1 No child and family poverty considerations have been identified.

#### 9. STAFF CONSIDERATIONS

9.1 There are no staffing considerations identified related to the savings proposals detailed in this report, and no potential redundancies identified.

#### 10. ASSET MANAGEMENT CONSIDERATIONS

10.1 No asset management considerations have been identified.

#### 11. CONSULTATION

- 11.1 Consultation will be undertaken with Trade Unions regarding the proposed savings.
- 11.2 No staff within Adult Services will be affected by these proposals.

#### 12. CONCLUSION

- 12.1 The Government has previously confirmed that Local Government funding cuts will continue until 2019/20. This means the sector will have faced nine consecutive years of funding cuts which is unprecedented.
- 12.2 Councils, including Hartlepool, also face additional unfunded budget pressures in relation to Looked after Children and the national pay award for Local Government employees.
- As a result of this funding cut and unfunded budget pressures the Council faces a 2019/20 budget deficit of £5.987m. This is a very significant deficit and means that 2019/20 is the most difficult year the Council has ever faced. Addressing this deficit will require significant changes in services which will take time to implement and a detailed plan is being developed. This plan includes the savings proposals detailed in this report.

#### 13. RECOMMENDATION

13.1 It is recommended that Members of the Committee note the content of the report and formulate a response to be presented to the Finance and Policy Committee on 26 November 2018.

#### 14. REASON FOR RECOMMENDATION

14.1 The proposals included in this report have been identified as being sustainable and deliverable.

#### 15. BACKGROUND PAPERS

Finance and Policy Committee: 3 September 2018 - Medium Term Financial Strategy (MTFS) 2019/20 and Financial Outlook from 2020/21.

#### 16. CONTACT OFFICER

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## ADULT AND COMMUNITY BASED SERVICES COMMITTEE





**Report of:** Director of Adult and Community Based Services

**Subject:** CARE HOMES FOR OLDER PEOPLE

#### 1. TYPE OF DECISION/APPLICABLE CATEGORY

No decision required; for information.

#### 2. PURPOSE OF REPORT

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

#### 3. BACKGROUND

- 3.1 There have been regular updates to Adult and Community Based Services Committee since October 2015 providing details of CQC inspection ratings, vacancy data and progress in the following areas:
  - Quality Assurance;
  - HBC Care Home Meetings;
  - Fee Negotiations; and
  - Support Provided to the Care Home Market.

#### 4. PROGRESS UPDATE

4.1 Since the last report to the Adult Services Committee in June 2018 there have been a number of developments.

#### 4.1.1. CQC Ratings

A summary of current CQC ratings is attached as **Appendix 1**. Since the last report to Committee two homes rated as 'good' have been re-inspected and rated as 'requires improvement'. The two recently opened care homes, which hadn't been rated at the time of the last report, have also been inspected; one has been rated 'good' and one has been rated 'requires improvement'.

There continue to be no homes rated as 'inadequate'. Homes rated as 'requires improvement' have action plans that are closely monitored by link officers to ensure improvements are made.

As a result of recent changes Hartlepool currently has 10 homes rated 'good' (63%) and 6 rated as 'requires improvement' (37%). The increase in homes rated as requiring improvement is disappointing after a significant improvement in ratings over the previous twelve months.

The Council remains committed to supporting further improvements in care quality through the Care Quality Improvement Programme for 2018/19 which has been reported to Committee previously and will continue to support all care home providers to deliver the best possible outcomes for local people.

#### 4.1.2 Support provided to the Care Home Market

A Manager Forum was held in September 2018 focused on the following topics:

- Hydration and Management of Urinary Tract Infections;
- Proactive support for people with dementia;
- Sharing learning from safeguarding incidents;
- The role of Healthwatch / Enter & View visits; and
- Staff training in relation to dual sensory loss

The Manager Forum continues to be well attended with positive feedback from attendees who welcome the opportunity to share learning and best practice.

#### 4.1.3 Capital Investment

Care homes were allocated capital from the Improved Better Care Fund in February 2018 to improve care environments. Approved plans are different for each home but common themes include creating environments that are more dementia friendly, developing accessible outdoor space and addressing environmental issues identified in CQC inspections. A report summarising how the capital funding has been invested to improve resident experience will be presented to a future meeting.

#### 4.1.4 Annual Programme of Care Home Visits

The Chair of Adult and Community Based Services Committee and Director of Adult and Community Based Services have commenced a programme of visits to all care homes for older people within Hartlepool. At the time of writing this report, nine visits have taken place with the remainder scheduled in November and early December.

The Chair and Director also visited a care home for older people in a neighbouring authority which has been given on overall rating of 'outstanding' to see if there was any learning from this service that could be shared in Hartlepool. The visit was very worthwhile and provided lots of practical ideas and inspiration for consideration locally.

As a result of the visit, an event is being planned for care home providers in the coming months focused on 'delivering outstanding outcomes for older people'. This will involve the Registered Manager from the home with the 'outstanding' rating as well as input from the local CQC Inspection Team.

#### 5. RISK IMPLICATIONS

5.1 There continue to be significant risks associated with availability of sufficient care home places for older people. If places are not available within Hartlepool for older people assessed as requiring residential care, out of area placements increase in order to meet needs. Lack of care home placements can also impact on delayed transfers of care from hospital.

The opening of Rossmere Park Care Centre in May 2017 and De Bruce Court in February 2018 has provided much needed additional capacity and choice for local residents, particularly in relation to nursing care. This has resulted in a reduction in Out of Borough Placements and also had a positive impact in terms of facilitating timely hospital discharge. Work will continue to support existing and potential new providers to ensure sufficiency within a very challenging business environment.

#### 6. FINANCIAL CONSIDERATIONS

6.1 There are significant financial considerations associated with the issue of care home provision, including the fair cost of care and implementation of the National Living Wage. There are no financial considerations specifically linked to this report.

#### 7. LEGAL CONSIDERATIONS

- 7.1 Care home provision for older people supports the Council to fulfill its statutory duties in relation to the provision of adult social care in line with the Care Act 2014 and other relevant legislation.
- 7.2 There are no legal implications specifically associated with this report.

#### 8. CHILD AND FAMILY POVERTY CONSIDERATIONS

8.1 There are no child and family poverty considerations associated with this report.

#### 9. EQUALITY AND DIVERSITY CONSIDERATIONS

9.1 There are no equality and diversity considerations associated with this report.

#### 10. STAFF CONSIDERATIONS

10.1 There are no staff considerations associated with this report.

#### 11. ASSET MANAGEMENT CONSIDERATIONS

11.1 There are no asset management considerations associated with this report.

#### 12. RECOMMENDATIONS

12.1 It is recommended that the Adult and Community Based Services Committee note the contents of this report and receive a further update in six months.

#### 13. REASONS FOR RECOMMENDATIONS

13.1 The Adult and Community Based Services Committee has identified care home provision for older people as a priority due to the role of care homes in supporting vulnerable older people.

#### 14. CONTACT OFFICER

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#### **CARE HOMES FOR OLDER PEOPLE**

**CQC Published Ratings** 

Care Home	Publication Date	Rating
West View Lodge	8 April 2016	Good
Lindisfarne	24 August 2017	Good
Queens Meadow	21 October 2017	Requires Improvement
Brierton Lodge	31 October 2017	Good
Stichell House	14 November 2017	Good
Dinsdale Lodge	30 December 2017	Good
Charlotte Grange	3 January 2018	Requires Improvement
Elwick Grange	7 February 2018	Good
Clifton House	15 February 2018	Requires Improvement
Sheraton Court	21 April 2018	Good
Seaton Hall	27 April 2018	Good
Gretton Court	1 June 2018	Good
Wynyard Woods	3 August 2018	Requires Improvement
Rossmere Park	15 September 2018	Good
Warrior Park	17 October 2018	Requires Improvement
De Bruce Court	2 November 2018	Requires Improvement

Vacancy Position: 15 October 2018

Care Provision	Available Beds
Residential Only	36
Nursing Only	5
Residential or Nursing	1*

<sup>\*</sup>Dual registered beds

**Out of Borough Placements** 

Year	Admissions
2013/14	3
2014/15	9
2015/16	15
2016/17	51
2017/18	26

Based on permanent new admissions of over 65s

## ADULT AND COMMUNITY BASED SERVICES COMMITTEE





**Report of:** Director of Adult and Community Based Services

**Subject:** QUALITY RATINGS FOR COMMISSIONED

**SERVICES** 

#### 1. TYPE OF DECISION/APPLICABLE CATEGORY

No decision required; for information.

#### 2. PURPOSE OF REPORT

2.1 Further to an update provided in February 2018 and regular updates relating to Care Homes for Older People, this report provides the Adult and Community Based Services Committee with an update on quality ratings for all other commissioned social care services that are regulated by the Care Quality Commission (CQC).

#### 3. BACKGROUND

- 3.1 Care home provision for older people is discussed regularly at Adult and Community Based Services Committee with updates on pertinent issues and the latest CQC ratings.
- 3.2 There are a number of other services commissioned for adults in Hartlepool that are regulated, inspected and rated by the CQC, which are summarised in this report. These include;
  - Domiciliary care services for older people;
  - Non residential services for working age adults;
  - Residential care for people with learning disabilities; and
  - Residential care for people with mental health needs.
- 3.3 In addition to services commissioned by the Council, there are some services that are regulated by the CQC and provide support to people in Hartlepool, where there is no contract in place with the Council. This includes services

purchased privately, services purchased using Direct Payments and services that are commissioned and funded by the NHS to meet health needs.

#### 4. COMMISSIONED REGULATED SERVICES

- 4.1 All services commissioned by the Council are subject to contract monitoring and the Quality Standards Framework. Regulated services are also required to be registered by the CQC and are subject to regular inspection, which is followed by a published rating.
- 4.2 These services include:

#### 4.2.1 Home Care for Older People

Homecare for older people is commissioned from two providers, one covering the south of the town and one covering the north. There is ongoing monitoring of these services through the Quality Standards Framework and, as for care homes, the services have named link officers within the Commissioned Services team to ensure any issues or support required is dealt with effectively and in a timely manner.

Home care services have recently been tendered as reported to Committee previously, and new contracts will commence in April 2018. The outcome of the tender process has not yet been made public, owing to the legal framework and standstill periods within the tender process. The CQC ratings for homecare services within this report are for the incumbent providers.

#### 4.2.2 Non Residential Services for Working Age Adults

Services that support working age adults in their own homes or in the community, usually those with learning disabilities and / or mental health needs, are commissioned using a framework agreement. This means that a number of providers are accredited to provide these services and the person has a choice about which provider to use (as well as the choice to use a Direct Payment to access alternative services if they wish to do so).

#### 4.2.3 Residential Care for People with Learning Disabilities

There are a number of providers of residential care for adults with learning disabilities within Hartlepool operating small group homes and a building based respite service. In addition to these services, a number of former residential care settings have moved to a supported living model over the last few years. This means that people are supported in their own tenancies and these services are not regulated by the CQC, but are still monitored by the Council.

#### 4.2.4 Residential Care for People with Mental Health Needs

Most people with mental health needs are supported in their own homes or in supported housing settings. In addition, there are a small number of residential care settings that are regulated by CQC and support adults with mental health needs.

#### 4.2.5 Extra Care Support

There a two purpose built Extra Care schemes in Hartlepool. Hartfields was developed in partnership with the Joseph Rowntree Housing Trust, who continue to operate the care services on site and Laurel Gardens was built by the Thirteen Group with care services operated by Dale Care following a recent tendering exercise. There are also a number of virtual Extra Care Schemes where care is operated by Dale Care; these operate in existing Thirteen Group sheltered housing schemes at Richard Court, Albany Court & Bamburgh Court. All of these schemes have criteria for individuals with care needs to access services and allocations panels to ensure there is the correct balance of care needs in each location to ensure that safe and effective care can be delivered. The majority of people accessing these services are over 55 but there are exceptions where those of working age with either learning or physical disabilities who meet specific criteria are having their care needs supported. The service provided by Dale Care in Hartlepool has not yet been inspected, their overarching homecare service based in Durham is rated as 'good'.

- 4.3 A summary of all of the current CQC ratings for all of these services is attached as **Appendix 1**.
- 4.4 It is very positive to note that the vast majority of services (17 out of 18) are rated as 'good'. The one service rated as 'requires improvement' has plans in place to deliver those improvements and is being supported by the Council in terms of their action plans and monitoring of progress.
- 4.5 Both residential and non-residential providers have access to the training and support provided through the Commissioned Services Team and the wider Council. All providers are encouraged to attend regular forums for managers and proprietors to enable networking and the sharing of good practice.

#### 5. **NEW DEVELOPMENTS**

- 5.1 The previous update to Committee made reference to a new development at Whitethorn Gardens, off Seaton Lane which is now providing supported living for adults with learning disabilities and / or mental health needs within four three-bedroom bungalows and sixteen self contained one-bedroom apartments. The support provided is registered with CQC as domiciliary care provision, provided by Elan Care.
- 5.2 A second development is being undertaken by Home Group, which is redeveloping Gainford House (formerly a service for young people) to provide 10 units of supported accommodation for adults with learning disabilities. As with Whitethorn Gardens, this development has been undertaken at the developer's risk with no contract or guarantee that the Council will use the accommodation. Discussions are underway with the provider to understand their service model and costs.

5.3 Along with the development of Shared Lives provision, which was reported to Committee in October 2018, these accommodation offers have the potential to increase the range and choice of local services that can meet local need, but are not without risks.

#### 6. RISK IMPLICATIONS

- 6.1 There are no specific risks associated with existing services at the present time.
- 6.2 As reported previously, there are significant risks associated with managing the care market. Councils have a duty within the Care Act to ensure that services are available locally to meet identified need, but the care market is constantly changing and there is a degree of fragility within some service areas. If there is insufficient provision locally, there is a risk that more people access of out of area placements, which can be costly and are not necessarily the best option to meet needs in the longer term. Conversely, over provision can result in people moving in to an area from other Local Authorities which can place pressure on local services and create financial risks in relation to ordinary residence.

#### 7. FINANCIAL CONSIDERATIONS

7.1 There are significant financial considerations associated with the sustainability of commissioned services, including calculating the fair cost of care and implementation of the National Living Wage. There are no financial considerations specifically linked to this report.

#### 8. LEGAL CONSIDERATIONS

- 8.1 Commissioned care services support the Council to fulfill its statutory duties in relation to the provision of adult social care in line with the Care Act 2014 and other relevant legislation.
- 8.2 There are no legal implications specifically associated with this report.

#### 9. CHILD AND FAMILY POVERTY CONSIDERATIONS

9.1 There are no child and family poverty considerations associated with this report.

#### 10. **EQUALITY AND DIVERSITY CONSIDERATIONS**

10.1 There are no equality and diversity considerations associated with this report. The regulation and rating of services is consistent across all ages and client groups in order to ensure an equitable and consistent approach.

#### 11. STAFF CONSIDERATIONS

11.1 There are no staff considerations associated with this report.

#### 12. ASSET MANAGEMENT CONSIDERATIONS

12.1 There are no asset management considerations associated with this report.

#### 13. RECOMMENDATION

13.1 It is recommended that the Adult and Community Based Services Committee note the contents of this report and receive further updates as required.

#### 14. REASONS FOR RECOMMENDATION

Commissioned services that are regulated by the CQC meet the needs of adults in Hartlepool with eligible social care needs, and the Council has a role in relation to commissioning good quality services to meet those needs.

#### 15. **CONTACT OFFICER**

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#### **QUALITY RATINGS FOR COMMISSIONED SERVICES**

**Domiciliary Care for Older People** 

Provider	Publication Date	Rating
Hartlepool Care Services	24 July 2018	Good
(CareWatch)		
Dale Care	Not yet inspected in	Good (at main service)
	Hartlepool	15 August 2017

Non Residential Care for Working Age Adults

Provider	Publication Date	Rating
Voyage	17 March 2017	Good
Pathways to Independence	21 October 2016	Good
Positive Support in Tees	17 June 2016	Good
Real Life Options	15 September 2017	Good

**Residential Care for People with Learning Disabilities** 

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Provider	Publication Date	Rating	
Creative Support Ltd	23 March 2018	Good	
Voyage: Fivepenny House	15 August 2017	Good	
Voyage: Glendale	14 September 2017	Good	
Voyage: Greenfields Lodge	27 July 2017	Good	
Voyage: South Highnam	4 August 2017	Good	
The Crescent Care Home Ltd	1 March 2018	Good	
Voyage: Belchford	28 November 2017	Good	
My Life: Burbank Mews	14 July 2018	Good	

**Residential Care for People with Mental Health Needs** 

Provider	Publication Date	Rating
Seymour House	31 October 2017	Requires Improvement
Wordsley House	7 July 2017	Good

#### Extra Care Providers

Provider	Publication Date	Rating
JRF: Hartfields	31 May 2017	Good
Dale Care	Not yet inspected in	Good (at main service)
	Hartlepool	15 August 2017