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Mark James LLM, DPA, DCA Prif Weithredwr, Chief Executive, Neuadd y Sir, Caerfyrddin. SA31 1JP County Hall, Carmarthen. SA31 1JP

THURSDAY, 23 FEBRUARY 2017

TO: ALL MEMBERS OF THE **SOCIAL CARE & HEALTH SCRUTINY COMMITTEE**

I HEREBY SUMMON YOU TO ATTEND A MEETING OF THE SOCIAL CARE & HEALTH SCRUTINY COMMITTEE WHICH WILL BE HELD IN THE CHAMBER, 3 SPILMAN STREET, CARMARTHEN AT 10.00 AM ON MONDAY, 6TH MARCH, 2017 FOR THE TRANSACTION OF THE BUSINESS OUTLINED ON THE ATTACHED AGENDA.

Mark James CBE

CHIEF EXECUTIVE



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Ref:	AD016-001



SOCIAL CARE & HEALTH SCRUTINY COMMITTEE

14 MEMBERS

PLAID CYMRU GROUP - 5 MEMBERS

1. Councillor T.T. Defis

2. Councillor W.T. Evans

Councillor D.J.R. Llewellyn
 Councillor G. Thomas (Chair)

5. Councillor J.S. Williams

INDEPENDENT GROUP - 3 MEMBERS

1. Councillor S.M. Allen (Vice-Chair)

Councillor I.W. Davies
 Councillor E.G. Thomas

LABOUR GROUP – 4 MEMBERS

Councillor K. Madge
 Councillor E. Morgan

3. Councillor B.A.L. Roberts

4. Councillor J. Williams

PEOPLE FIRST (CARMARTHENSHIRE) – 1 MEMBER

1. Councillor S.M. Caiach

<u>UNAFFILIATED - 1 MEMBER</u>

1. Councillor J. Owen



AGENDA

1.	APOLOGIES FOR ABSENCE	
2.	DECLARATIONS OF PERSONAL INTERESTS	
3.	DECLARATION OF PROHIBITED PARTY WHIPS	
4.	PUBLIC QUESTIONS (NONE RECEIVED)	
5.	FORTHCOMING ITEMS	5 - 6
6.	DEPRIVATION OF LIBERTY SAFEGUARDS	7 - 16
7.	IMPROVEMENT PLAN PERFORMANCE MONITORING REPORT 2016/17 - QUARTER 3	17 - 36
8.	REVENUE & CAPITAL BUDGET MONITORING REPORT 2016/17	37 - 50
9.	EXPLANATION FOR NON-SUBMISSION OF SCRUTINY REPORT	51 - 52
10.	TO RECEIVE THE MINUTES OF THE JOINT EDUCATION & CHILDREN AND SOCIAL CARE & HEALTH SCRUTINY COMMITTEE HELD ON 25TH JANUARY 2017	53 - 56
11.	TO SIGN AS A CORRECT RECORD THE MINUTES OF THE MEETING HELD ON THE 25TH JANUARY 2017	57 - 62



SOCIAL CARE & HEALTH SCRUTINY COMMITTEE 6TH MARCH 2017

Forthcoming items for next meeting – Thursday 20th April 2017

Discussion Topic	Background
Communities Business Plan	This item will enable the Committee to consider and comment on the departmental business plans relevant to its remit.
Local Action Plan in response to Jasmine Report (including CSSIW Escalating Concerns Procedures)	This information was requested by the Committee at the meeting held on12 th December 2016.
Welsh Language in Social Care "More than Just Words"	A report on the Communities Department's progress with regards to the Welsh Government's Strategic Document 'More than Just Words', which sets out the importance of the Welsh language when caring for older people. The report will include a full data profile and an action plan for building on the existing skill levels and addressing any shortfall.
Actions & Referrals Update	These quarterly updates provide details on progress made in relation to actions and requests from previous meetings.





SOCIAL CARE & HEALTH SCRUTINY COMMITTEE 6TH MARCH, 2017

DEPRIVATION OF LIBERTY SAFEGUARDS

Purpose:

To update Members regarding the implementation of the Deprivation of Liberty Safeguards (DoLS) legislation, the effect of developing case law and the action being taken to mitigate the associated risks.

To consider and comment on the following issues:

Members are asked to consider the report and note the impact of the legislation.

Reasons:

To inform members of the current situation and future strategy to respond to the requirements of the DoLS legislation.

To be referred to the Executive Board / Council for decision: NO

EXECUTIVE BOARD MEMBER PORTFOLIO HOLDER:-

Cllr. J. Tremlett (Social Care & Health portfolio holder)

Directorate

Communities

nunities Designation

Name of Head of Service:

Avril Bracey

Designations:

Head of Mental Health & Learning

Disabilities

Tel Nos.

01267 242492

E Mail Addresses:

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SOCIAL CARE & HEALTH SCRUTINY COMMITTEE 6TH MARCH, 2017

DEPRIVATION OF LIBERTY SAFEGUARDS

1. Purpose

To advise Members of the significant impact of the Deprivation of Liberty Safeguards (DoLS) legislation and developing case law, and the action being taken to mitigate the associated risks.

2. Interface with key council strategies and partnership plans

The report supports key council plans such as the Corporate Strategy 2015-2020 and the Local Service Board's Integrated Community Strategy 2011-2016 specifically in relation to the objectives concerning people feeling safer and healthier. The Mental Health and Learning Disabilities Business Plan also includes priorities to respond to the DoLS requirements.

3. Strategic context

- 3.1 The Deprivation of Liberty Safeguards (DoLS) form part of the Mental Capacity Act 2005 and were introduced in England and Wales in April 2009. They were introduced to give a legal framework to vulnerable people who lack mental capacity in care homes and hospitals. The safeguards exist to provide a proper legal process and suitable protection in those circumstances where deprivation of liberty appears to be unavoidable, in a person's own best interest. The responsibility for DoLS is held within the Safeguarding Team and a data base is held of all applications and authorisations. A statistical return is provided to Welsh Government on an annual basis.
- 3.2 The Deprivation of Liberty Safeguards has without doubt brought human rights to the fore. The spotlight has been focused on some of the most vulnerable people in our society. Because of this significant legislation, a light has been shone on the conditions of care, maximising empowerment and upholding the rights of the individual.
- 3.3 In March 2014 a Supreme Court judgment [P v Cheshire West and Chester Council; P& Q v Surrey County Council] effectively lowered the threshold for DoLS referrals. The Supreme Court confirmed that to determine whether a person is objectively deprived of their liberty there are two key questions to ask, which is described as the 'acid test':



- Is the person subject to **continuous supervision and control** (all three aspects are necessary).
- Is the person free to leave (The person may not be asking to leave or making an attempt to leave but the issue is about how staff would react if the person did try to leave
- This now means that if a person is subject to both continuous supervision <u>and</u> control <u>and</u> is not free to leave, they are deprived of their liberty.
- 3.4 The Supreme Court also held that a Deprivation of Liberty can occur in a domestic setting where the State is responsible for meeting care arrangements. This will include a placement in supported living accommodation, foster placement, shared living accommodation (formerly known as adult placement schemes) and extra care housing. Recent case law, which is currently subject to an application for permission to appeal, has also indicated that where it is brought to the local authority's attention that there is a potential deprivation of liberty in the community, the local authority has a responsibility for ensuring the deprivation is appropriately authorised even if they are not providing or funding the care. If there is or likely to be a deprivation of liberty in these situations it must be authorised by the Court of Protection.
- Authorities and Health Boards to act as Supervisory Bodies (SB) for the Deprivation of Liberty Safeguarding scheme. The Council is responsible for considering requests from Residential/Nursing Homes (who are known as Managing Authorities) for people they believe lack mental capacity and are deprived of their liberty. The Supervisory Body (Carmarthenshire County Council) is responsible for managing the process and commissioning the assessments. The assessment consists of six individual assessments which are undertaken by a Best Interest Assessor and a Doctor and must meet all the legal criteria for the authorisation to be granted. If all the assessments meet the qualifying requirements then the Supervisory Body is obliged to authorise a deprivation of liberty. The assessments must be completed and authorised within 21 days or 7 days if it has been submitted as urgent.
- 3.6 The Best Interest Assessor role is a statutory responsibility under the Mental Capacity Act 2005 and forms an integral part of the assessment process alongside the Medical Assessor. Best interest Assessors are the lynchpin on which the entire edifice of DoLS rests and they have a range of duties that fall to them within the operation of the safeguards.
- **3.7** Fundamental to the process is the appointment of a representative who can advocate for the person subject to the deprivation. This is usually an appropriate family member however in some instances an independent advocate will need to be appointed.

4. Risks

- 4.1 As a result of the sudden increase in DoLS since March 2014 and the lack of available BIAs most local authorities throughout the UK have accrued a significant backlog of applications. Without additional resources it has been difficult to meet this demand and fulfil our statutory obligations. This is a significant risk to the local authority in terms of legal challenge and financial penalty.
- 4.2 When an application for a DoLS is received by the Local Authority (Supervisory Body) there is an implied acknowledgement of the Deprivation of Liberty. If the deprivation is not assessed and authorised within the prescribed timescales and the person continues to be deprived of their liberty, then it is a clear breach of human rights (Article 5).
- 4.3 If an unlawful deprivation of Liberty is challenged in the Court of Protection the Local Authority, as Supervisory Body, will be liable to pay between £3,000 and £4,000 for every month the deprivation has continued without authorisation. The Managing Authority will not be accountable for any breaches in this process. The amount quoted above does not include any other penalties such as damages that the Judge feels it can and should award nor does it include legal fees or court costs. These additional costs could easily double or triple these figures.
- 4.4 A number of legal firms locally and nationally have already identified delays in processing and authorising a DoLS as a potential opportunity for challenge and the number of challenges is steadily increasing. Neighbouring authorities are also reporting the same concerns in relation to this. It is unfortunate that even if the Local Authority gets to a position where it is able to meet all the statutory timescales for DoLS the historical delays and gaps in authorisations can still be challenged.

5. Current Situation

- 5.1 The Supreme Court judgment referred to earlier in this report which effectively lowered the threshold for DoLS had an immediate impact on the referral rate to the Deprivation of Liberty Safeguards scheme. This resulted in a tenfold increase in referrals in Wales in 2014/15.
- Prior to the judgement Carmarthenshire Council received an average of 57 referrals each year. In 2014/15 we received 856 applications and authorised 165. In 2015/16 we received 629 applications and authorised 173. In the current year to date we have received 506 applications and authorised 104. Included in these figures are the urgent applications which have to be completed within 7 days and renewal applications.

Carmarthenshire continues to receive between 30 and 40 referrals a month. The current number of applications waiting to be assessed is **630** compared with **685** in September 2016. This figure reflects a similar position across Wales with Councils continuing to find it difficult to meet the unprecendented demand and respond to the financial impact.



- 5.3 The Deprivation of Liberty Safeguard Annual Monitoring Report for Health and Social Care 2014/15 (CSSIW & HIW) records that Carmarthenshire County Council has one of the highest rates of referral per 100,000 population in Wales. This is attributable to the very high number of residential/nursing establishments within the boundaries of the Council and the very proactive working done with Managing Authorities to ensure they refer all residents that meet the 'acid test'.
- 5.4 In 2015 the Welsh Government issued guidance on managing the demand for authorisation under the Deprivation of Liberty Safeguards scheme. The tool based on a traffic light system of red, amber and green was developed to assist the prioritisation of referrals to the Supervisory Body (Carmarthenshire County Council) and to manage demand. The Council currently has 374 referrals in the red category.
- 5.5 Local authorities continue to receive small grants from Welsh Government to help manage the volume of DoLs referrals. During this financial year 2016/17 Carmarthenshire County Council received a total of £29,962.00 which consisted of £12,328.00 annual recurring funding and a one off non-recurring grant of £17,634.00. An application was submitted to Corporate Risk funds in 2015 to appoint additional Best Interest Assessors to undertake DoLs assessments. This bid was successful and 2 dedicated Best Interest Assessors have been appointed on a temporary secondment for a period of one year.
- 5.6 The council has trained 45 Social Workers as Best Interest Assessors (BIA's) {39 continue to work for the LA} to meet its statutory obligations but they continue to struggle to undertake the role due to increasing demands in the community social work teams. 2 Full Time temporary BIA's have been seconded to work solely on the DoLs assessments and they are making some progress in tackling the backlog. The number of independent assessors has diminished during the last twelve months however, this pool is steadily increasing.

6. Costs

- **6.1** The current cost of appointing Section 12 Doctors to undertake the medical assessments is £173.37 per client together with mileage at 45p per mile.
- **6.2** The cost of using an Independent BIA is £125.93 (7.5 hours at £16.79 per hour) together with mileage at 45p per mile.
- **6.3** The total cost of commissioning a Section 12 doctor and external BIA is at least £299.30 per authorisation.

7. Future Strategy

7.1 The Senior Safeguarding Manager appointed in October 2016 is currently developing a strategy to ensure we meet our statutory responsibilities more effectively and reduce the risk to the council. The engagement of the BIA's in the community teams will be critical in helping us reduce the backlog significantly over the next year in conjunction with the dedicated posts referred to in 5.5 above.



- **7.2** A draft plan for addressing the current backlog and the ongoing flow of DoLS applications will be presented to Senior Managers in February. The plan will include the following recommendations:
 - To train all Adult Services Social Workers as Best Interest Assessors (This will be achieved by providing refresher training to Social Workers already trained on 7th and 13th March and by providing training for Social Workers not already trained during April and July 2017).
 - To contain the existing risk to Authority by drawing a line under the existing backlog. This backlog will be managed by the 2 full time BIA's and a small number of additional BIA's over a set period of time.
 - To agree a date from which all new applications will be managed within timescale (This mitigates future risk to the Local Authority) utilising all trained BIA's
 - To introduce an equitable process for allocating Assessments to Care
 Management teams on the basis of resources. This will include setting realistic
 targets for the number of assessments completed by each team.
 - To obtain a commitment from external BIA's to regularly undertake Urgent and Out of County assessments.
 - To ensure Social Work Teams recognise DoLS assessments as a Statutory Duty and adhere to the legal timescales and requirements of this.
 - To enhance the DoLS admin resource to ensure assessments are allocated, monitored and collated within timescales and all paperwork distributed appropriately.
 - To train all Senior Managers and Team Managers as Supervisory Body signatories who are able to scrutinise and authorise assessments.
 - To introduce robust quality monitoring systems to ensure consistent and lawful practice.
 - To provide regular updates to Managing Authorities to ensure ongoing compliance
- 7.3 The Law Commission has identified that the current system for DoLS is unsustainable and not fit for purpose. A Consultation Paper was produced in July 2015 which outlined recommendations to adopt an enhanced human rights based approach into care management which would minimise the number of individuals needing a DoLS. The Law Commission was due to finalise its recommendations to UK Government by December 2016, however this has now been delayed and we await a new timescale. It is unlikely that any new legislation will be enacted before 2018 at the earliest. The current system together with its challenges and risks will therefore remain until the legislation is revised.

DETAILED REPORT AT	TTACHED ?
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NO



IMPLICATIONS

I confirm that other than those implications which have been agreed with the appropriate Directors / Heads of Service and are referred to in detail below, there are no other implications associated with this report:

Signed: Avril Bracey Head of Mental Health & Learning Disabilities

Policy, Crime & Disorder and Equalities	Legal	Finance	ICT	Risk Management Issues	Staffing Implications	Physical Assets
NONE	YES	YES	NONE	YES	YES	NONE

2. Legal

A failure to meet our legal responsibilities to assess and authorise in the required manner and within the statutory timescales could result in a legal challenge and the potential costs associated with this. In particular, a failure to ensure that a deprivation of liberty is properly authorised is unlawful and could give rise to a claim for compensation for a breach of human rights.

3. Finance

The Local Authority's requirements in relation to the DoLS legislation does present a number of financial challenges:

- Staff resource to undertake the assessments
- Legal costs associated with Court of Protection applications
- Potential costs of legal challenge

5. Risk Management Issues

Failure to meet our obligations in respect of the legislation would mean that vulnerable people lacking mental capacity in care homes may be subject to unlawful deprivation.

7. Staffing Implications

The Authority has trained 45 Social Workers as best interests assessors who are based in community teams. Pressures and demands within the community teams has impacted on their ability to undertake this role and subsequently on the number of outstanding referrals.

CONSULTATIONS

I confirm that the appropriate consultations have taken in place and the outcomes are as detailed below

Signed: Avril Bracey Head of Mental Health & Learning Disabilities

- 1.Local Member(s) N/A
- 2.Community / Town Council N/A
- 3.Relevant Partners N/A
- 4.Staff Side Representatives and other Organisations N/A

Section 100D Local Government Act, 1972 – Access to Information List of Background Papers used in the preparation of this report:

THESE ARE DETAILED BELOW

Title of Document	File Ref No.	Locations that the papers are available for public inspection
Supreme Court Judgement / Deprivation of Liberty Safeguards		https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/485122/DH_Consolidated Guidance.pdf
CSSIW National Review of the use of Deprivation of Liberty Safeguards		http://cssiw.org.uk/our-reports/national-thematic-report/2014/review-of-the-use-of-deprivation-of-liberty-safeguards-in-wales/?lang=en
Law Commission Consultation on Deprivation of Liberty Safequards		http://www.lawcom.gov.uk/project/mental-capacity- and-deprivation-of-liberty/





SOCIAL CARE & HEALTH SCRUTINY COMMITTEE 6th MARCH, 2017

2016/17 Improvement Plan Performance Monitoring Report

Quarter 3 - 1st April to 31st December 2016

To consider and comment on the following issues:

That the Committee scrutinises the 2016/17 Improvement Plan Performance Monitoring Report for Quarter 3. The report includes:

 Actions and measures in the 2016/17 Improvement Plan relevant to the Committee's remit.

Reasons:

- To ensure that any areas of concern are identified and relevant action taken.
- To enable members to exercise their scrutiny role in relation to performance monitoring.

To be referred to the Executive Board for decision: NO

Executive Board Member Portfolio Holder: Cllr. Jane Tremlett (Social Care & Health)

Directorate: Communities	Designations:	Tel Nos./ E-Mail Addresses:
Names of Heads of Service: Avril Bracey	Head of Mental Health & Learning Disabilities	01267 242492 abracey@carmarthenshire.gov.uk
Rhian Dawson	Head of Integrated Services	01267 228900 rhian.dawson@wales.nhs.uk
Report Author: Silvana Sauro	Performance, Analysis & Systems Manager	01267 228897 ssauro@carmarthenshire.gov.uk



EXECUTIVE SUMMARY

SOCIAL CARE & HEALTH SCRUTINY COMMITTEE 6TH MARCH, 2017

2016/17 Improvement Plan Performance Monitoring Report

Quarter 3 – 1st April to 31st December 2016

The attached report sets out the progress against the ac 2016/17 Improvement Plan relevant to the Committee's 2016.	ctions and measures in the remit, as at 31st December
DETAILED REPORT ATTACHED? YES	



IMPLICATIONS

We confirm that other than those implications which have been agreed with the appropriate Directors / Heads of Service and are referred to in detail below, there are no other implications associated with this report.

Signed: Rhian Dawson Head of Integrated Services

Avril Bracey Head of Mental Health & Learning Disabilities

Policy, Crime & Disorder and Equalities	Legal	Finance	ICT	Risk Management Issues	Staffing Implications	Physical Assets
YES	YES	NONE	NONE	YES	NONE	NONE

- **1. Policy, Crime & Disorder and Equalities –** Performance Indicators are set to monitor the performance of services and targets set. If the Authority is to deliver its promises to citizens and stakeholders, then indicators underachieving need to be addressed.
- **2. Legal –** Performance Indicators are set to monitor the performance of services and targets set. If the Authority is to deliver its promises to citizens and stakeholders, then indicators underachieving need to be addressed.
- **5. Risk Management Issues –** This report refers to all actions and measures in the 2016/17 Improvement Plan within the Committee's remit. Potential risks addressed are:
- regulatory report recommendations
- comments on not meeting our own goals actions and measures
- improvement and comparative data for national measures

www.carmarthenshire.gov.wales

CONSULTATIONS

We confirm that the appropriate consultations have taken in place and the outcomes are as detailed below:

Signed: Rhian Dawson Head of Integrated Services

Avril Bracey Head of Mental Health & Learning Disabilities

1. Local Member(s) - N/A

2. Community / Town Councils - N/A

3. Relevant Partners - N/A

4. Staff Side Representatives and other Organisations – All departments have been consulted and have had the opportunity to provide comments on their performance and progress.

Section 100D Local Government Act, 1972 – Access to Information List of Background Papers used in the preparation of this report:

THESE ARE DETAILED BELOW:

Title of Document	File Ref No. / Locations that the papers are available for public inspection
CCC Annual Report 2015/16 & Improvement Plan 2016/17	http://www.carmarthenshire.gov.wales/home/council-democracy/consultation-performance/performance-reports/#.V765x0_2b2A
Performance Measurement Records	Performance Management Unit, Regeneration & Policy Division
Departmental Business Plans 2016/17	Performance Management Unit, Regeneration & Policy Division
Carmarthenshire Integrated Community Strategy 2011-16	www.thecarmarthenshirepartnership.org.uk
CCC Corporate Strategy 2015-20	http://www.carmarthenshire.gov.wales/media/998105/corporate-strategy.pdf
Budget Monitoring Reports	Corporate Services Department





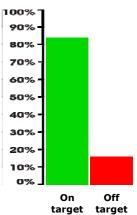


Filtered by: Organisation - Carmarthenshire County Council Source document - Improvement Plan 2016/17

The table below provides a summary progress against target for the Actions and Measures contained within the selected document

Performance against Target

		Total	On target	Off target	Not reported	Not available	Annual / Not started	% on target	Overall % on target
C. People in	Actions	17	14	3	0	N/A	0	82%	0.50/
Carmarthenshire are healthier	Measures	4	4	0	0	0	0	100%	86%
E. People who live, work and visit	Actions	3	3	0	0	N/A	0	100%	
Carmarthenshire are safe and feel safer	Measures	1	0	1	0	0	0	0%	75%
Overall Performance	Actions and Measures	25	21	4	0	0	0	84%	



OFF TARGET





Action	12047	Target date	31/03/2017					
Action promised	We will develop a commissioning plan for Learning Disability and Mental Health services							
Comment	Considerable needs data has been obtained and analysed to inform the Strategy: the work of the Population Needs Assessment, a series of lockdowns with the Learning Disabilities teams to collate accommodation needs and a recent TIC review in the in house provider services.							
Remedial Action	A revised strategic format is to be developed by document for all stakeholders	December 2017 that will provide a more access	ssible and relevant					
Service Head: Ch	ris Harrison	Performance status: Off target	8					
Action	12049	Target date	31/03/2017					
Action promised We will develop an Information Strategy for Deprivation of Liberty Safeguards to ensure that we meet the needs of staff and the public.								
Comment	Information leaflet already provided to Residential /Nursing Homes for relatives and friends of residents who are referred to Carmarthenshire County Council for assessment under the Deprivation of Safeguards scheme. The MCA & DoLS Manager is currently reviewing this leaflet and is also producing information for the general public so that they are well informed about the Deprivation of Liberty Safeguards scheme.							
Remedial Action	A leaflet for the general public will be created and updated information relating to Deprivation of Liberty Safeguards will be available on the Corporate Website prior to 31st March 2017							



Service Head: Rhian Dawson

Report A Scrutiny measures & actions full monitoring report Social Care and Health scrutiny - Quarter 3 2016/17



	me: C. People in Carmarthenshire are healt ducing inequities in health	hier				
Action	12055	Target date	30/06/2017 (original target 31/03/2017)			
Action promised	Action promised We will identify the strengths and resources within communities which can contribute to promoting and supporting the health and wellbeing of their population					
Comment	Asset mapping from a community level has pro- mapping information available to wider professi populating infoengine which included third sector private and the third sector to be included on the to gather and check this information and now the have compromised the progress - but this is be	onals and the public. To or information and has ne Dewis website. A signis is being uploaded of	he first tranche of this work was involved in now progressed to include all services public, nificant amount of work has been progressed			
Remedial Action	With 1 officer now back in work they are supporting Dewis work from within IAA. IAA is also resourcing this work and when 2nd post is back in work this action will be identified as a priority and it is envision that this first stage of work will be completed in the next quarter.					
			1			

Performance status: Off target





Theme: E. People who live, work and visit Carmarthenshire are safe and feel safer Sub-theme: E5 Safeguarding all people from abuse, victimisation, neglect and exploitation							
	2015/16 Comparative Data			2016/17 Target and Results			
Measure Description	Best Quartile	Welsh Median	Our Actual	Quarter 1	Quarter 2	Quarter 3	End of Year
The percentage of adult protection enquiries completed within 7 days	Not a	pplicable	New measure	Target: 75.00	Target: 75.00	Target: 75.00	Target: 75.00
SCA/18				Result: 73.00	Result: Not available	Result: 72.45	
						Calculation: (397÷548) × 100	
This is a new performance me Wellbeing Act. Of the 548 end timescale. This figure was ma processes and are working wend.			iiries undertake ginally off targe	n to date, et in quarte	151 were not er 3 however	t completed within we have introduce	the 7 day d new
Remedial Action	See above cor	nment					
Service Head: Avril Bracey			Performance status: Off target			8	

ON TARGET ETC.





Theme: C. People in Carmarthens Sub-theme: C2 Preventing ill hea			ving				
	C	2015/16 Comparative Da	ta	:	2016/17 T	arget and Result	s
Measure Description	Best Quartile	Welsh Median	Our Actual	Quarter 1	Quarter 2	Quarter 3	End of Year
The number of people referred to the "Vitality Scheme" (NERS – National Exercise Referral Scheme)	Not applicable		Q3: 810	Target: 252	Target: 504	Target: 756	Target: 1008
3.4.2.5			End Of Year: 1129	Result: 272	Result: 585	Result: 909	
Comment	On Target						
Remedial Action	Continue to w	ork with referral	partners to mai	ntain refer	ral numbers	5.	
Service Head: Ian Jones			Performance	status: Or	n target		
	C	2015/16 Comparative Da	ta	:	2016/17 1	arget and Result	s
Measure Description	Best Quartile	Welsh Median	Our Actual	Quarter 1	Quarter 2	Quarter 3	End of Year
The percentage of people referred to the National Exercise Referral scheme that attend the initial	Not a	oplicable	New measure	Target: 56.0	Target: 56.0	Target: 56.0	Target: 56.0
consultation of the programme				Result: 66.7	Result: 60.9	Result: 57.4	
3.4.2.6						Calculation: (522÷909) × 100	
Comment	On target						
Remedial Action		ork hard with the RS hours to furth			erformance	. We are in the pro	cess of
Service Head: Ian Jones			Performance	status: Or	n target		
	C	2015/16 Comparative Da	ta	2016/17 Target and Results		s	
Measure Description	Best Quartile	Welsh Median	Our Actual	Quarter 1	Quarter 2	Quarter 3	End of Year
The percentage of people referred to the National Exercise Referral scheme that complete the 16 week programme	Not a	oplicable	New measure	Target: 49.6 Result:	Target: 49.6 Result:	Target: 49.6 Result:	Target: 50.0
3.4.2.7				62.1	56.2	54.3	
						Calculation: (226÷416) × 100	
Comment	On target						
Remedial Action		ork hard to imprond refe			tes. We are	currently backfillin	g vacant
Service Head: Ian Jones			Performance	status: Or	n target		





ACTIONS - Theme: C. People in Carmarthenshire are healthier Sub-theme: C3 Improving the Emotional, Mental Health and Well-being of all people in the County						
Action	12048	Target date	31/03/2017			
ACTION NYOMISEA	We will review how we meet the needs of young adults who are physically disabled as part of transitional arrangements.					
Comment	We have arranged a meeting with colleagues from children's services and adult social care in Q4. We will undertake a scoping exercise which will help us to determine whether we need to realign our services or develop care pathways to consistently meet the needs of this user group.					
Service Head: Avril Bracey		Performance status: On target				





	2015/16 Comparative Data			2016/17 Target and Results			
Measure Description	Best Quartile	Welsh Median	Our Actual	Quarter 1	Quarter 2	Quarter 3	End of Year
The rate of delayed transfers of care for social care reasons per 1,000 population aged 75 or over SCA/19	2.44	4.33	Q3: 2.42 End Of Year: 4.69	Target: 1.11 Result: 1.23	Target: 2.23 Result: 2.46	Target: 3.34 Result: 3.32 Calculation: (62÷18675) × 1000	Target: 4.51





	C4 Reducing inequities		I
Action	12050	Target date	31/03/2017
Action promised	We will develop a robust a	and efficient Information Advice & Assistance se	rvice
Comment	enable us to provide a corbeen working alongside C	areline staff on the proof of concept for the new vices will form the proof of concept for other soo	ed on the NVQ level 4 qualifications for IAA to eam of social care and health professionals have a service for the last 10 weeks to deliver an IAA cial services. This is providing excellent learning
Service Hea	d: Rhian Dawson	Performance status: On target	
Action	12051	Target date	31/03/2017
Action promised	We will manage the risks	associated with outstanding reviews and Depriv	ration of Liberty Safeguards applications
Comment		to train all adult social care workers as BIA`s and the assessments to be shared amongst social was assessments.	and to make arrangements for a planned work teams. This will make significant inroads to
Service Hea	d: Avril Bracey	Performance status: On target	
Action	12052	Target date	31/03/2017
Action promised	We will conduct a populat line with the new SSWB V	ion assessment at locality level to inform popular	ation needs assessment and service planning in
Comment	completed with Carmarthe		defined in themes. this report has now been the regional older adults report. the intelligence ocality plans which looked at needs specifically in
Service Hea	d: Rhian Dawson	Performance status: On target	
Action	12053	Target date	31/03/2017
Action promised		marthenshire's Vision for Sustainable Services	under the Social Services Well-Being Act and the for Older People for the Next Decade' and the
Comment	We continue to progress a	according to programme timescales.	
Service Hea	d: Rhian Dawson	Performance status: On target	
Action	12054	Target date	31/03/2017
Action promised	We will take forward the I relevant partners.	Delivery Plan for Ageing Well in Wales and ensu	re we link to other Council plans and with other
Comment		n produced to show Council performance for the preflect Ageing Well Plan priorities.	e period 2015-16. Work is underway to ensure
Service Hea	d: Wendy S Walters	Performance status: On target	
Action	12056	Target date	31/03/2017
Action promised	We will effectively commisoutcomes for our populati	ssion short term assessment and interventions to on	to maximise independence and wellbeing
Comment	Rapid Response service to		Health & Provider services. discharges from hospital from December to end
Service Hea	d: Rhian Dawson	Performance status: On target	
Action	12057	Target date	31/03/2017
		s within the Carmarthenshire Dementia Action B	oard plan across health and social areas in
Action promised	Carmarthenshire		
	Further work has been co support an identified prior living with dementia and t	mpleted on the realignment of CDAB. A meeting ity from the action plan. This meeting was about on ensure an appropriate MDT response. The revised structure an aligned action plan for Cl	it effective commissioning practices for those gional strategic group has now been convened f





		rthenshire are healthier and social care for all people including v	vulnerable groups				
Action	12061	Target date 31/03/2017					
Action promised	We will promote the Wel	elsh language and ensure compliance with the 'Active Offer' across all service areas					
Comment	We continue to progress	against action plan which is monitored and overseen by Welsh Language Strategic Group					
Service Head: Rhia	n Dawson	Performance status: On target					
Action	12062	Target date 31/03/2017					
Action promised	We will develop a multi a their families	We will develop a multi agency transition strategy and implement in partnership with disabled young people and their families					
Comment	developing a multi agend We have also planned to their families for the futu and the forthcoming Add	ned IPC (Institute of Public Care) to undertake a further detailed audit of cases and assist us in agency strategy. ed to hold a series of meetings with senior officers to develop a vision for disabled children and a future. This will take into account the requirements of the Social Services and Well-being Act and Additional Learning Needs reforms. his vision with key stakeholders before publishing a strategy later this year.					
Service Head: Stef	an Smith	Performance status: On target					
Action	12063	Target date	31/03/2017				
Action promised	We will ensure that disableisure opportunites.	oled children and young people are supported	d to access work, education, training and				
Comment	We have now recruited to the Cynnydd project and staff have begun working with Education colleagues to ensure that we are identifying disabled children who maybe at risk of becoming `NEET`. Work is also underway to review our direct service provision within the Community Inclusion division. This will be an opportunity to ensure that services are modernised and focused on the needs of young people.						
Service Head: Stef	an Smith	Performance status: On target					





ACTIONS -	Theme: C. People in Car	marthenshire are healthier						
	Reducing drug and alco							
Action	12066	Target date	31/03/2017					
Action promised	We will evaluate and implement options to integrate Substance Misuse Team & Integrated Family Support Team							
	Proposals will be brought forward to finalise the structure for the substance misuse services in Q4.							
Comment	This will be aligned with the structure in adult social care but with a clear commitment towards a family based approach.							
	The structure will enable	us to deliver our obligations under the Social S	ervices and Well-being Act.					
Service Head:	e Head: Stefan Smith Performance status: On target							
Action	12067	Target date 31/03/2017						
Action promised	We will review the transition arrangements for young people with substance misuse problems to ensure there is a seamless pathway as they move from children to adult services.							
	Audit plan developed in Q3. Report with recommendations to be produced in Q4.							
Comment	Report will be shared with	n the Area Planning Board.						
Service Head:	Stefan Smith	Performance status: On target						
Action	12068	Target date 31/03/2017						
Action promised	We will review the impact of substance use upon adults with mental health problems. This includes older people and those with Alcohol Related Brain Damage (ARBD)							
	Training relating to ARBD	was commissioned and delivered across the de	epartment.					
Comment		There was no attendance from mental health colleagues so we will evaluate how to address this with senior managers. Substance Misuse colleagues scheduled to attend the AHMP (Approved Mental Health Professional) forum in Q4 to discuss.						
	A plan is being developed	I to led on this are of working by the health boa	ard.					
Service Head:	Avril Bracey	Performance status: On target						





Action	12147	Target date 31/03/2017					
Action promised	We shall embed a quality	cy assurance system within safeguarding, assessment and care management teams					
Comment		a culture of "challenge" has been accepted	re. Assessing performance is a standing agenda by all partners. Additionally a regional quality				
Service Head: A	Avril Bracey	Performance status: On target					
Action	12148	Target date 31/03/2017					
Action promised	We shall establish regula best practice	egular forums for Investigating officers and Adult Services Managers to learn lessons and share					
Comment	regularly share and feed	back on practice and improvement opportublish a larger pool of Investigators this will	e co-ordinators within the safeguarding team who unities including cases in common with Dyfed I form part of an ongoing dialogue in department				
Service Head: A	Avril Bracey	Performance status: On target					
Action	12149	Target date 31/03/2017					
Action promised	We shall undertake a rev	We shall undertake a review of existing processes to ensure they are streamlined effectively					
Comment		A comprehensive review of our current safeguarding arrangements has been undertaken to ensure an effective response through all stages of the process and ensures that the service users voice is heard.					
Service Head: A	Viril Pracov	Performance status: On target					



SOCIAL CARE & HEALTH SCRUTINY COMMITTEE 6th March 2017

Revenue & Capital Budget Monitoring Report 2016/17

To consider and comment on the following issues:

• That the Scrutiny Committee receives the budget monitoring report for the Social Care & Health Service and considers the budgetary position.

Reasons:

 To provide Scrutiny with an update on the latest budgetary position as at 31st December 2016, in respect of 2016-17.

To be referred to the Executive Board for decision: NO

Executive Board Member Portfolio Holders:

- Cllr. David Jenkins (Resources)
- Cllr. Jane Tremlett (Social Care & Health)

Directorate: Corporate Services	Designation:	Tel No. / E-Mail Address:
Name of Head of Service: Owen Bowen	Head of Financial Services	01267 224886 obowen@carmarthenshire.gov.uk
Report Author: Owen Bowen		



EXECUTIVE SUMMARY

SOCIAL CARE & HEALTH SCRUTINY COMMITTEE 6th March 2017

Revenue & Capital Budget Monitoring Report 2016/17

The Financial Monitoring Report is presented as follows:

Revenue Budgets

Appendix A

Summary position for the Social Care and Health Scrutiny Committee. Services within the Social Care and Health Scrutiny remit are forecasting a £392k overspend.

Appendix B

Report on Main Variances on agreed budgets.

Appendix C

Detail variances for information purposes only.

Capital Budgets

Appendix D

Details the main variances, which shows a forecasted net spend of £575k compared with a working net budget of £2,565k giving a -£1,990k variance. The variance will be slipped into future years, as the funding will be required to ensure that the schemes are completed.

Appendix E

Detail variances on all schemes for information purposes only.

DETAILED REPORT ATTACHED?

YES – A list of the main variances is attached to this report



IMPLICATIONS

I confirm that other than those implications which have been agreed with the appropriate Directors / Heads of Service and are referred to in detail below, there are no other implications associated with this report.

Signed:	Owen Bower	n Head of	Financial Serv	vices		
Policy, Crime & Disorder and Equalities	Legal	Finance	ICT	Risk Management Issues	Staffing Implications	Physical Assets
NONE	NONE	YES	NONE	NONE	NONE	NONE

3. Finance

Revenue – The Social Care & Health Service is projecting that it will be over its approved budget by £392k.

<u>Capital</u> – The capital programme shows a net variance of -£1,990k against the 2016/17 approved budget.

CONSULTATIONS

I confirm that the appropriate consultations have taken in place and the outcomes are as detailed below:

Signed: Owen Bowen Head of Financial Services

- 1. Local Member(s) N/A
- 2. Community / Town Council N/A
- 3. Relevant Partners N/A
- 4. Staff Side Representatives and other Organisations N/A

Section 100D Local Government Act, 1972 – Access to Information List of Background Papers used in the preparation of this report:

THESE ARE DETAILED BELOW:

Title of Document	File Ref No. / Locations that the papers are available for public inspection
2016/17 Budget	Corporate Services Department, County Hall, Carmarthen





Social Care & Health Scrutiny Report Budget Monitoring as at 31st December 2016 - Summary

		Working	g Budget			Forec	Dec 2016 Forecasted	Oct 2016 Forecasted		
Division	Expenditure £'000	Income £'000	Net non- controllable £'000	Net £'000	Expenditure £'000	Income £'000	Net non- controllable £'000	Net £'000	Variance for Year £'000	Variance for Year £'000
Adult Services Older People	50,344	-17,689	3,124	35,778	51,202	-18,089	3,124	36,237	458	560
Physical Disabilities	5,989	-748	92	5,333	6,097	-1,076	92	5,114	-219	-239
Learning Disabilities	31,060	-8,425	1,349	23,984	30,974	-8,199	1,349	24,125	141	221
Mental Health	9,154	-3,379	130	5,904	9,443	-3,569	130	6,004	100	-15
Support	4,753	-1,638	830	3,944	5,323	-2,296	830	3,856	-88	-135
GRAND TOTAL	101,299	-31,880	5,525	74,944	103,040	-33,228	5,525	75,336	392	392

Social Care & Health Scrutiny Report

Budget Monitoring as at 31st December 2016 - Main Variances

age		_	_	_	Dec 2016		Oct 2016
J 96	Working	Budget	Forec	asted			
	Ε̈́		Ϋ́		Σaπ		≲ ਨ
A Division	Expenditure	Income	Expenditure	Incom	Forecasted Variance for Year		Forecasted Variance for Year
Division	nd	Ö	nd	Š	nc ea	Notes	nc
	iŧ	ne	₹	ne	ste e fo		ste e fo
	re		6		for		for
	£'000	£'000	£'000	£'000	£'000		£'000
Adult Services							
Older People							
Older People - Commissioning	2,855	-10	2,787	-20	-79	Staff vacancies	-61
Older People - LA Homes	6,932	-3,852	6,873	-3,846	-52	Supplies & Services	-34
Older People - Private/ Vol Homes	17,537	-8,954	18,693	-9,229	880	Net loss in placements insufficient to meet savings target	764
Older People - Extra Care	719	0	870	0	150	Lower than anticipated saving from contract renegotiations	151
Older People - LA Home Care	6,039	-419	5,870	-291	-41	Reduction in income at Cartref Cynnes	0
Older People - Direct Payments	614	0	708	0	94	Increase in packages	73
Older People - Grants	268	0	237	0	-31	Reduced grant payments	-31
Older People - Ssmmss	1,171	-228	1,029	-275	-189	Staff vacancies, reduced spend on supplies & services and additional income	-180
Older People - Careline	1,060	-1,165	1,204	-1,378	-68	Additional staffing & other costs offset by additional income	-104
Older People - Enablement	2,405	-800	2,086	-800	-318	Staff vacancies	-191
Older People - Day Services	1,123	-76	1,207	-64	97	Slower than anticipated restructure	167
Physical Disabilities							
Phys Dis - Commissioning & OT							
Services	600	-79	509	-79	-91	Staff vacancies	-81
Phys Dis - Private/Vol Homes	561	-111	516	-111	-45	Reduction in packages	-46
Phys Dis - Group Homes/Supported							
Living	1,358	-116	1,327	-116	-31	Reduction in packages	-50
Phys Dis - Direct Payments	1,831	0	1,792	0	-39	Reduction in packages	-22
Learning Disabilities							
Learn Dis - Employment & Training	2,416	-903	2,294	-718	62	Reduction in grant for Workchoice programme.	140
Learn Dis - Commissioning	890	0	865	0	-25	Staff vacancies	8
Learn Dis - Private/Vol Homes	10,047	-3,157	10,126	-3,087	147	Increase in packages	84
Learn Dis - Direct Payments	1,275	0	1,411	0	136	Inflationary fee uplift	112
Learn Dis - Group Homes/Supported							
Living	6,180	-1,010	6,095	-1,010	-85	Decrease in packages	32
Learn Dis - Adult Respite Care	932	-812	818	-812	-115	Staff vacancies	-67
Learn Dis - Day Services	3,067	-267	3,187	-260	128	Increase in packages of care	-29
Learn Dis - Transition Service	502	0	434	0	-68	Staff vacancies	-52
Learn Dis - Community Support	2,150	-137	1,944	-137	-206	Reduction in packages	-136
Learn Dis - Grants	156	0	280	0	124	Efficiency slippage	90
Learn Dis - Adult Placement/Shared							
Lives	2,766	-2,139	2,851	-2,174	50	Increase in packages	43
Lives	2,766	-2,139	2,851	-2,174	50	Increase in packages	43

Social Care & Health Scrutiny Report Budget Monitoring as at 31st December 2016 - Main Variances

	Working	j Budget	Forecasted		
Division	Expenditure	Income	Expenditure	Income	
	£'000	£'000	£'000	£'000	
Mental Health					
M Health - Commissioning	837	-69	763	-69	
M Health - Private/Vol Homes	6,268	-2,874	6,551	-3,059	
M Health - Group Homes/Supported					
Living	590	-186	632	-186	
M Health - Community Support	673	-98	743	-98	
M Health - Substance Misuse Team	338	-142	319	-147	
Support					
Departmental Support	1,896	-71	1,868	-92	
Performance, Analysis & Systems	226	0	190	0	
Adult Safeguarding & Commissioning					
Team	1,123	0	1,097	0	
Other Variances - Adult Services					
Grand Total					

	Dec 2016	
	Forecasted overiance for 60 Year	
Ì	2000	
1	-74	
1	-74 98	
	42	
Ī	42 70	
	-23	
1	-49 -36	
1	-36	
	-26	
1		
1	7	
	392	

Notes
Staff vacancies
Inflationary fee uplift partly offset by reduced placements
Increase in placement costs Increase in packages Staff vacancy
Reduced spend on supplies & services
Staff vacancy & maternity leave
Staff vacancy

392

Social Care & Health Scrutiny Report Budget Monitoring as at 31st December 2016 - Detail Monitoring

TI		Working	Budget			Forec	asted		Dec 2016		Oct 2016
Page 44	Expenditure 00	Income 500	Net non- 00 controllable ฉี	£'000	Expenditure 00	Income £'000	Net non- 00 controllable นี	£'000	Forecasted ovariance for Survey	Notes	Forecasted overiance for Survival Year
Adult Services											
Older People											
Older People - Commissioning	2,855	-10	411	3,257	2,787	-20	411	3,178	-79	Staff vacancies	-61
Older People - LA Homes	6,932	-3,852	1,147	4,226	6,873	-3,846	1,147	4,174	-52	Supplies & Services	-34
Older People - Private/ Vol Homes	17,537	-8,954	75	8,659	18,693	-9,229	75	9,539	880	Net loss in placements insufficient to meet savings target	764
Older People - Private Day Care	14	0	0	14	20	0	0	20	6		7
Older People - Extra Care	719	0	4	724	870	0	4	874	150	Lower than anticipated saving from contract renegotiations	151
Older People - LA Home Care	6,039	-419	587	6,207	5,870	-291	587	6,166	-41	Reduction in income at Cartref Cynnes	0
Older People - MOW's	287	-181	12	117	298	-183	12	127	9		0
Older People - Direct Payments	614	0	1	615	708	0	1	709	94	Increase in packages	73
Older People - Grants	268	0	2	270	237	0	2	239	-31	Reduced grant payments	-31
Older People - Private Home Care	9,320	-2,003	157	7,473	9,320	-2,003	157	7,473	-0		0
Older People - Ssmmss	1,171	-228	308	1,251	1,029	-275	308	1,062	-189	Staff vacancies, reduced spend on supplies & services and additional income	-180
Older People - Careline	1,060	-1,165	191	86	1,204	-1,378	191	17	-68	Additional staffing & other costs offset by additional income	-104
Older People - Enablement	2,405	-800	104	1,709	2,086	-800	104	1,391	-318	Staff vacancies	-191
Older People - Day Services	1,123	-76	124	1,171	1,207	-64	124	1,268	97	Slower than anticipated restructure	167
Total Older People	50,344	-17,689	3,124	35,778	51,202	-18,089	3,124	36,237	458		560
Physical Disabilities											
Phys Dis - Commissioning & OT Services	600	-79	48	568	509	-79	48	477	-91	Staff vacancies	-81
Phys Dis - Private/Vol Homes	561	-111	1	451	516	-111	1	406	-45	Reduction in packages	-46
Phys Dis - Group Homes/Supported Living	1,358	-116	6	1,249	1,327	-116	6	1,218	-31	Reduction in packages	-50
Phys Dis - Community Support	90	0	0	90	101	0	0	101 414	10		-7
Phys Dis - Private Home Care	414 986	-442	0 35	414 578	414 1,304	-769	0 35	570	-9		-20
Phys Dis - Aids & Equipment	140		0	140	1,304	-7 69	0	126	-14		-20
Phys Dis - Grants Phys Dis - Direct Payments	1,831	0	3	1,834	1,792	0	3	1,795	-14	Deduction in postures	-13
Phys Dis - Manual Handling	1,031	0	0	1,034	1,792	0	0	8	-39	Reduction in packages	0
Total Physical Disabilities	5,989	-748	92	5,333	6,097	-1, 076	92	5,114	-219		-239
Total Filysical Disabilities	3,363	-740	92	3,333	0,037	-1,070	92	3,114	-219		-239
Learning Disabilities											
Learn Dis - Employment & Training	2,416	-903	332	1,845	2,294	-718	332	1,908	62	Reduction in grant for Workchoice programme.	140
Learn Dis - Commissioning	890	0	74	964	865	0	74	939	-25	Staff vacancies	8
Learn Dis - Private/Vol Homes	10,047	-3,157	16	6,907	10,126	-3.087	16	7,054	147	Increase in packages	84
Learn Dis - Direct Payments	1,275	0	0	1,275	1,411	0	0	1,411	136	Inflationary fee uplift	112
Learn Dis - Group Homes/Supported Living	6,180	-1,010	10	5,180	6,095	-1,010	10	5,095	-85	Decrease in packages	32
Learn Dis - Adult Respite Care	932	-812	105	226	818	-812	105	111	-115	Staff vacancies	-67
Learn Dis - Home Care Service	141	0	0	141	141	0	0	141	0		0
Learn Dis - Day Services	3,067	-267	316	3,116	3,187	-260	316	3,243	128	Increase in packages of care	-29
Learn Dis - Transition Service	502	0	64	567	434	0	64	499	-68	Staff vacancies	-52
Learn Dis - Community Support	2,150	-137	5	2,018	1,944	-137	5	1,812	-206	Reduction in packages	-136

Social Care & Health Scrutiny Report Budget Monitoring as at 31st December 2016 - Detail Monitoring

		Working	Budget			Forec	asted		Dec 2016		Oct 2016
Division	Expenditure 000	Income £'000	Net non- 0 controllable น	Net £'000	Expenditure 00	Income 5000	Net non- 0 controllable นี	£'000	Forecasted ovariance for Survey	Notes	Forecasted overlance for Survival Year
Learn Dis - Grants	156	0	7	162	280	0	7	286	124	Efficiency slippage	90
Learn Dis - Adult Placement/Shared Lives	2,766	-2,139	76	703	2,851	-2,174	76	753	50	Increase in packages	43
Learn Dis/M Health - Ssmss	536	0	344	880	529	0	344	873	-7		-4
Total Learning Disabilities	31,060	-8,425	1,349	23,984	30,974	-8,199	1,349	24,125	141		221
Mental Health											
M Health - Commissioning	837	-69	74	842	763	-69	74	768	-74	Staff vacancies	-39
M Health - Private/Vol Homes	6,268	-2,874	9	3,403	6,551	-3,059	9	3,501	98	Inflationary fee uplift partly offset by reduced placements	9
M Health - Group Homes/Supported Living	590	-186	0	404	632	-186	0	446	42	Increase in placement costs	-38
M Health - Direct Payments	132	0	0	132	140	0	0	140	8		8
M Health - Community Support	673	-98	2	576	743	-98	2	646	70	Increase in packages	83
M Health - Day Services	223	-10	16	228	202	-9	16	209	-20		-13
M Health - Private Home Care	93	0	0	93	93	0	0	93	0		0
M Health - Substance Misuse Team	338	-142	30	225	319	-147	30	202	-23	Staff vacancy	-25
Total Mental Health	9,154	-3,379	130	5,904	9,443	-3,569	130	6,004	100		-15
Support											
Departmental Support	1,896	-71	594	2,419	1,868	-92	594	2,370	-49	Reduced spend on supplies & services	-83
Performance, Analysis & Systems	226	0	0	226	190	0	0	190	-36	Staff vacancy & maternity leave	-28
Adult Safeguarding & Commissioning Team	1,123	0	176	1,300	1,097	0	176	1,273	-26	Staff vacancy	-47
Regional Collaborative	0	0	0	0	636	-636	0	0	0		-0
Holding Acc-Transport	1,508	-1,567	59	-0	1,532	-1,568	59	23	23		23
Total Support	4,753	-1,638	830	3,944	5,323	-2,296	830	3,856	-88		-135
TOTAL FOR COOLAL CARE A											
TOTAL FOR SOCIAL CARE & HEALTH SERVICE	101,299	-31,880	5,525	74,944	103,040	-33,228	5,525	75,336	392		392

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Capital Progra	amme 20							
Capital Budget Monitoring - Report	for Dece							
	Wor	king Bu	dget	F	orecaste	ed	. <	
DEPARTMENT/SCHEMES	Expenditure £'000	Income £'000	Net £'000	Expenditure £'000	Income £'000	Net £'000	Variance for Year £'000	Comment
Social Care	2,565	0	2,565	575	0	575	-1,990	
Learning Disabilities Accomodation Developments	228	0	228	0	0	0	-228	Options are being considered for the location of future learning disability provision as part of a TIC review of the service
Carmarthen Area Extra Care	577	0	577	344	0	344	-233	Contingencies included in contract not fully utilised - final sum yet to be agreed - Savings identified
Ammanford / Llandybie Extra Care	260	0	260	161	0	161	-99	Contingencies included in contract not fully utilised - final sum yet to be agreed - Savings identified
Extra Care - Llanelli Area	1,500	0	1,500	70	0	70	-1,430	Options/Appraisals being considered for potential scheme

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Appendix E

Social Care

Capital Budget Monitoring - Scrutiny Report for December 2016 - Detailed Variances

	Wor	king Bu	dget	Forecasted			
Scheme	Target Date for Completion	Expenditure £'000	Income £'000	Net £'000	Expenditure £'000	Income £'000	Net £'000
Learning Disabilities Accomodation Developments	Ongoing	228	0	228	0	0	0
Extra Care Schemes		2,337	0	2,337	575	0	575
Carmarthen Area Extra Care	Completed	577	0	577	344	0	344
Ammanford / Llandybie Extra Care	Completed	260	0	260	161	0	161
Extra Care - Llanelli Area	Ongoing	1,500	0	1,500	70	0	70
NET BUDGET		5,130	0	2,565	1,150	0	575

Variance for Year £'000	Comment	
-228	Options are being considered for the location of future learning disability provision as part of a TIC review of the service	
-1,762		
-233	Contingencies included in contract not fully utilised - final sum yet to be agreed - Savings identified	
-99	Contingencies included in contract not fully utilised - final sum yet to be agreed - Savings identified	
-1,430		
	Options/Appraisals being considered for potential scheme	
-1,990		

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SOCIAL CARE & HEALTH SCRUTINY COMMITTEE 6TH MARCH 2017

EXPLANATION FOR NON-SUBMISSION OF SCRUTINY REPORTS

ITEM	RESPONSIBLE OFFICER	EXPLANATION	REVISED SUBMISSION DATE
Mental Health Transformation	Avril Bracey, Head of Mental Health & Learning Disabilities	Information is still awaited from Health to produce this report. It has been agreed across the region that we will submit consistent reports across the three Local Authorities. This was initially expected in March but the Health Authority has confirmed that the information will not now be available until May 2017.	May 2017
TIC Project Update	Jon Owen, TIC Programme Manager	The TIC Annual Report/Business Plan is currently under development and will be reported to P&R Scrutiny in May of this year. It is then proposed that a TIC update is also provided to individual scrutiny committees during the course of the year.	2017/18



JOINT SCRUTINY COMMITTEE EDUCATION & CHILDREN AND SOCIAL CARE AND HEALTH SCRUTINY

Wednesday, 25 January 2017

PRESENT: Councillor G. Thomas (Chair)

Councillors:

S.M. Allen, D.J.R. Bartlett, S.M. Caiach, C.A. Campbell, J.M. Charles, I.W. Davies, W.T. Evans, W.G. Hopkins, P. Hughes-Griffiths, A. James, M.J.A. Lewis, D.J.R. Llewellyn, E. Morgan, D.W.H. Richards, B.A.L. Roberts, E.G. Thomas, J.E. Williams, J. Williams and J.S. Williams

Mrs. V. Kenny – Roman Catholic Church Representative

Also in attendance:

Councillor J. Tremlett, Executive Board Member for Social Care & Health

The following Officers were in attendance:

S. Smith - Head of Children's Services

M. Palfreman - Head of Regional Collaboration

C. Gadd - Democratic Services Officer

Chamber, 3 Spilman Street, Carmarthen - 10.00 - 10.45 am

1. TO APPOINT A CHAIR FOR THE MEETING

It was **UNANIMOUSLY RESOLVED** to appoint Councillor G. Thomas as Chair for the meeting.

2. APOLOGIES FOR ABSENCE

Apologies for absence were received from Councillors J.D. James, K. Madge and J. Owen as well as Mrs. E. Heyes (Parent Governor Member Llanelli Area), Mrs. K. Hill (Parent Governor Member Dinefwr Area) and Mrs J. Voyle Williams (Church in Wales Representative).

3. DECLARATIONS OF PERSONAL INTEREST

Councillor	Minute No(s)	Nature of Interest
Councillor A. James	Minute No. 6	He uses the Carers' Service and his daughter is a nurse.
Councillor J. Lewis	Minutes No. 6	She sits on the Community Health Council



Councillor E. Morgan	Minutes No. 6	Daughter is a staff nurse
Councillor D.W.H. Richards	Minute No. 6	He uses the Carers' Service
Councillor B.A.L. Roberts	Minutes No. 6	Daughter is a health visitor and she is a co-opted member of the Community Health Council.
Councillor G. Thomas	Minutes No. 6	Her husband drives for Country Cars
Councillor J. Williams	Minutes No. 6	She is an unpaid carer for her husband

4. DECLARATIONS OF PROHIBITED PARTY WHIPS

There were no declarations of prohibited party whips.

5. PUBLIC QUESTIONS (NONE RECEIVED)

The Chair advised that no public questions had been received.

6. PARTNERSHIP ARRANGEMENTS ESTABLISHED IN WEST WALES UNDER PART 9 OF THE SOCIAL SERVICES AND WELLBEING (WALES) ACT 2014 AND THE WEST WALES POPULATION ASSESSMENT

The Committee considered a report on the partnership arrangements established in West Wales under Part 9 of the Social Services and Wellbeing (Wales) Act (SSWBWA) and the West Wales Population Assessment in advance of endorsement by Council.

The report provided an overview of partnership arrangements established within the West Wales footprint to meet the requirements within Part 9 of the Social Services and Well-Being (Wales) Act 2014, which included the establishment of a statutory Regional Partnership Board (RPB). It was noted that the West Wales RPB had been in place since June 2016 and the Terms of Reference were due for review in December 2016. However, Officers explained that it had been agreed to defer a full review of the Terms of Reference to March 2017. It was highlighted that there were regional priorities for RPB, including: integrated commissioning, pooled funds, remodelling mental health and learning disabilities services, information, advice, assistance/prevention and implementation of the Welsh Community Care Information System.

Members were advised of the work undertaken on behalf of the RPB to complete an initial Population Assessment, which had been approved by the Board and had



to be endorsed by the statutory partners, prior to publication by 31st March 2017. The Committee was informed that the Assessment identified the needs for care and support in the region, the levels of care and support currently provided and areas for improvement and development. It was highlighted that a wealth of data had been collated to inform the Assessment and there had been an encouraging return rate of surveys. One of the key messages from the Assessment was the anticipated growth in demand for services over the coming few decades, and in particular for older people. Officers explained that low level preventative community care would be an important aspect of addressing this need. Another area to be addressed was ensuring that services were available in Welsh. The Committee were pleased that attention had been given to the importance of developing the use of Welsh in the health and care sector. Officers explained that following the publication of the Population Assessment the RPB was required to develop an area plan to address the needs identified.

The Committee noted that there was one Elected Member from each Local Authority on the Board and queried whether there was a democratic deficit. It was suggested that it would be useful to increase the number Elected Members and for them to be representative of the community. Officers advised that the minimum statutory requirements were currently being met. However, it was the view of the Board that this could be progressed further and it would be considered as part of the review of the Terms of Reference in March. It was noted that carers and service users were represented on the Board. The Committee highlighted the option of co-opting onto the Board and felt that this option could be beneficial to assist those in underrepresented areas, for example, with such issues as transport.

It was clarified that there was one representative on the Board from the Voluntary Services Councils for the three areas. In addition there was also a representative from a national third sector organisation that helped to provide a broader perspective. The Committee requested a flowchart for ease of reference as to how the different Boards and groups related to each other and their accountability. Officers would consider how best to develop this and it was noted that main pieces of legislation, the Social Services and Wellbeing (Wales) Act and the Well-being of Future Generations (Wales) Act, did not link together seamlessly.

Members asked if the life expectancy of adults should be considered, rather than just life expectancy from birth, as a lot of older people moved into the area at retirement age. Officers agreed that older people coming into the area still required services and they could be a valuable community asset in developing preventative services. This was confirmed by the Executive Board Member for Social Care & Health, who represented the Council on the Board.

Members queried whether the RPB was another layer of bureaucracy. Officers highlighted that if the Board had not been developed in the right way then this could have been the case, however, it had been developed to streamline partnership working and there was a genuine desire from all partners to work collaboratively.

Members asked what data had been used for the Population Assessment as there were concerns that the data used may not have been up to date. Officers explained that a variety of data sources were used, which included a data set from the Data Unit Wales and regularly updated data provided on a regional basis.



The Committee felt that it was a positive step to have pooled budgets, however, some concern was expressed about how they would be managed. Officers highlighted that there would be strict criteria and accountability and they would also need to be flexible enough to work across the system.

The Committee thanked the team for all their work.

UNANIMOUSLY RESOVLED that the report be received.		
CHAIR	DATE	



SOCIAL CARE & HEALTH SCRUTINY COMMITTEE

Wednesday, 25 January 2017

PRESENT: Councillor G. Thomas (Chair)

Councillors:

S.M. Allen, S.M. Caiach, I.W. Davies, T.T. Defis, W.T. Evans, D.J.R. Llewellyn, K. Madge, E. Morgan, B.A.L. Roberts, E.G. Thomas, J. Williams and J.S. Williams

Also in attendance:

Councillor J. Tremlett, Executive Board Member for Social Care & Health

The following Officers were in attendance:

- R. Dawson Head of Integrated Services
- K. Pett Policy, Consultation & Engagement Officer
- J. Wilkinson Assistant Locality Manager
- S. Watkins Information, Advice & Assistance Manager
- N. Morgan Locality Manager
- C. Gadd Democratic Services Officer

Chamber, 3 Spilman Street, Carmarthen - 10.50 am - 12.20 pm

1. APOLOGIES FOR ABSENCE

Apologies for absence were received from Councillor J. Owen.

2. DECLARATIONS OF PERSONAL INTERESTS

Councillor	Minute No(s)	Nature of Interest
Councillor K. Madge	Minutes Nos. 6, 7 & 8	Daughter works in Social Services. Wife works in Amman Valley Hospital.
Councillor E. Morgan	Minutes Nos. 6, 7 & 8	Daughter is a staff nurse.
Councillor B.A.L. Roberts	Minutes Nos. 6, 7 & 8	Daughter is a health visitor.
Councillor G. Thomas	Minutes No. 6	Husband drives for Country Cars.

Councillor J. Williams	Minutes Nos. 6, 7 & 8	She is an unpaid carer for her husband.

3. DECLARATION OF PROHIBITED PARTY WHIPS

There were no declarations of prohibited party whips.

4. PUBLIC QUESTIONS (NONE RECEIVED)

The Chair advised that no public questions had been received.

5. FORTHCOMING ITEMS

RESOLVED that the list of forthcoming items to be considered at the next scheduled meeting to be held on Monday, 6th March, 2017 be noted.

6. CARMARTHENSHIRE'S AGEING WELL PLAN - ANNUAL REPORT

The Committee considered Carmarthenshire's Ageing Well Plan Annual Report. It was explained that as a signatory of the Dublin Declaration for Age Friendly Cities and Communities, the Council committed in 2014, to the production of an Ageing Well Plan and an Annual Report was required by the Older Peoples Commission. The overall aim was to make the most of the capacity of communities to support the independent living of older people.

The Policy, Consultation & Engagement Officer explained that the Annual Report demonstrated the Council's performance against the five main priorities: Age Friendly Communities, Dementia Supportive Communities, Falls Prevention, Opportunities for Employment and New Skills and Loneliness and Isolation. It was noted that it was important that the Council changed the way services were planned and provided to ensure that, as the number of older people in Carmarthenshire continued to increase, people could live in good health and be involved with their families and communities as much as possible. It was explained that a broader range of measures were being considered that required lower level interventions to ensure sustainability.

It was highlighted that there had been a lot of work undertaken in developing dementia supportive communities and a good example was Llanelli market becoming the first dementia friendly market in Wales. There had also been significant work in falls prevention and an example of this was the SAVE Scheme across the Public Service Board partners, which was a make every contact count initiative. The Scheme provided training to partners to identify where preventative services could be required when they were in contact with residents. It was highlighted that isolation and loneliness was a silent killer and activities that were of benefit to residents and the communities had been introduced. For example, encouraging active lifestyles, volunteering and theatre concessions.

Members expressed concerns regarding the lack of regular public transport, in rural areas and the cost of using other methods of transport to visit hospitals and other facilities, especially if people had been referred there. The Head of Integrated Services queried if issues regarding access to primary care had been



raised with the Community Health Council. It was proposed and agreed by the Committee that the Community Health Council be invited to a future meeting to discuss such issues.

It was highlighted that transport schemes, such as Country Cars, were not available in all areas of the County. The Committee noted that Country Cars should be advertised further to recruit more volunteer drivers and encourage people to use the scheme for it to expand. The Head of Integrated Services explained that it would have to be ensured that there was capacity to meet an increase in demand before advertising the scheme further. It was suggested that once the service was in a position to increase advertising then the Information, Advice and Assistance Service would be the ideal platform for such advertising. The Information, Advice & Assistance Manager highlighted that as a result of consultation with older people the Service was trying to create communities of people who could share transport.

Members highlighted that Social Services seems to be more flexible in meeting needs of service users than the Health Service, which was more prescriptive. It was pointed out that older people who were placed in hospitals and care homes outside of the main urban areas, for example in Crosshands, resulted in them becoming more isolated partly due to the lack of transport links. It was noted that having a care home in Llanelli would help to address this issue. It was highlighted that information on the ARCH project would be included in the presentation on the City Deal at the meeting of Special Council that afternoon. It was noted that placements in Crosshands had been stepdown beds for an interim period.

The Committee expressed concern that there was a reduction in community classes due to budget efficiencies and it was hoped that new developments, such as the library in Llandelio, would help to encourage more community groups. Members commented that the concessions offered by theatres were good value for money.

Members highlighted that the 50+ Forum had grown and was doing well and the Committee expressed their thanks to the Forum.

UNAMIOULSY RESOLVED

- 6.1 that the report be received:
- 6.2 that the Community Health Council be invited to a future meeting of the Social Care & Health Scrutiny Committee.

7. IMPROVING DEMENTIA SUPPORT IN CARMARTHENSHIRE

The Committee considered a progress report on Improving Dementia Support Services in Carmarthenshire. Members were advised on the national recommendations published by the Older People's Commissioner regarding the improvements needed in dementia services, the regional steering group that had been set up to deliver these improvements and the progress and actions taken at a local level to respond to these recommendations.

The report referred to a recent national publication by the Older People's Commissioner of Wales entitled 'More Than Just Memory Loss', which captured what was important to people living with dementia and their carers from across



Wales. The report outlined that people required consistent support, which included emotional as well as physical support. The Committee was informed of the development of Carmarthenshire's Dementia Action Board and a broad outline of the work that had been undertaken locally. This included the development of Dementia Friendly Communities that supported the national movement aimed at improving society's response to people who have dementia. It was highlighted that the first officially dementia community created in Carmarthenshire was in Pontyberem and Llanelli market had become the first Dementia friendly market in Wales.

It was noted that work was being undertaken with the primary care sector to deliver holistic dementia services. Officers highlighted that the Amman Gwendraeth GP Cluster continued to fund the community memory service which had been recognised nationally as good practice. It was noted that in Llanelli GPs, supported by the Community Team, were diagnosing dementia in the surgeries, which prevented the need for patients to be referred to hospital and resulted in a more timely diagnosis. Work on Commissioning had also been progressed to explore the opportunities to develop a bespoke care and support model for those living with dementia and cognitive impairment. This model would provide a more flexible approach than the traditional domiciliary care model and would better meet the needs of the individual as well as saving money and resources.

Members highlighted that some of the work being undertaken in dementia services had been excellent. In particular, the health and well- being facility Ty Golau was mentioned and it was commented that it was positive to see GPs supporting such beneficial initiatives.

The Committee noted that there were low diagnosis rates of dementia across the Hywel Dda Health Board area. It was queried if this was due to less people in the area having dementia or that the Health Board did not perform as well as other areas in diagnosing it. Officers explained that the figures were from the Alzheimer Society and based on population information, however, it was not an exact science. The Alzheimer Society's findings and the Health Board's own analysis indicated that perhaps there was underperformance in formal diagnoses. It was explained that it was not just low rates but also the length of time for a diagnosis to be made that required addressing.

Members queried if the work being undertaken to improve dementia support would be extended across the County. The Head of Integrated Services explained that the service in Llanelli was mainly funded through primary care and GPs had the lead in how the money should be used. However, all good practice should be shared across Carmarthenshire and examples were provided of where this had happened. The new Locality Manager for the Amman Gwendrith area, Neil Morgan, was welcomed by the Committee and it was noted that he would be working with a new GP lead in that area.

UNANIMOUSLY RESOLVED that the report be received.

8. INFORMATION, ADVICE AND ASSISTANCE SERVICE

The Committee received an update report on the Council's current and future provision for Information, Advice & Assistance (IAA) Services in relation to statutory duties under the Social Services & Wellbeing Act (Wales) 2014.



Members were advised of the current position statement in relation to progress of development of Carmarthenshire's IAA service. Specifically the provision of a single point of access to Social Services for Adults and Children and Housing Services. Officers highlighted that there were numerous access points for Social Services and it had been considered how best to pull them all together into a single access point. It was highlighted that this would assist with the early intervention agenda.

It was noted that Carmarthenshire had a long standing Careline service that dealt with a lot of vulnerable people, 24 hours per day and seven days per week. Consultation had taken place with staff across Social Services and Housing on how to develop the Careline service into the IAA Service. It had been important to ensure sustainability and that the Welsh Language Standards were met. It was highlighted that 85% of employees in the Service were now Welsh speaking (at least level 3). A more structured training scheme had been developed for the Team that allowed them to qualify up to NVQ Level 4 in Information and Advice. There was also one to one training and peer support to allow staff to upskill quickly and there were multidisciplinary practitioners in the room with the team to provide advice. There was now career progression for team members, which had been well received. It was highlighted that Service had been relocated to new premises in Eastgate in Llanelli, which had made a significant difference to its development.

The Service had commenced the proof of concept stage to ensure that it could meet people's needs and it was building on the learning from this stage to provide a robust front door for all Social Services enquiries for Carmarthenshire. It was noted that the IAA Service would be part of the new 111 contact number trial being undertaken by Hywel Dda Health Board. The Executive Board Member for Social Care & Health highlighted to the Committee the amount of work that had been undertaken to develop this service.

Members who had previously used the Careline Service commented that it had always been a good service and it was positive that it was being developed further. The Committee highlighted that it was sometimes beneficial to undertake a mystery shopper exercise to ensure that the information being provided to service users was correct and that there were clear pathways to accessing the information required. Officers took these comments on board and noted that at this stage they were ensuring the Service was robust before it was marketed. Members pointed out that the operational target date was March 2017 and queried if the Service was on track to meet this target. Officers explained that the Service was already broadly compliant with the requirements of the Act and they would continue to develop to ensure it was far more than that. The Committee thanked the team for the progress being made.

UNANIMOUSLY RESOLVED that the report be received.

9. SOCIAL CARE & HEALTH SCRUTINY COMMITTEE ACTIONS AND REFERRALS UPDATE

The Committee considered the update report detailing progress in relation to actions, requests and referrals emerging from previous meetings.



The Executive Board Member for Social Care & Health provided the Committee with a further update on certain actions requested by Members previously.

The Committee was reminded that a visit to the Tŷ Dyffryn Extra Care Scheme had been arranged for 7th February 2017 and further details of the arrangements would be circulated to the Committee.

RESOLVED that the report be received.

10. EXPLANATION FOR NON-SUBMISSION OF SCRUTINY REPORT

The Committee noted the reasons for the non-submission of five reports, which would be presented to future meetings. It was noted that there would be an update on the ARCH project in the Council meeting scheduled for that afternoon. The Head of Integrated Services informed the Committee that more detailed information would be provided in due course.

RESOLVED that the explanation for the non-submission be noted.

11. MINUTES - 17TH NOVEMBER 2016

RESOLVED that the minutes of the meeting of the Committee held on17th November, 2016 be signed as a correct record.

12. MINUTES - 12TH DECEMBER 2016

RESOLVED that the minutes of the meeting of the Committee held on 12th December, 2016 be signed as a correct record.

CHAIR	DATE

