

SOCIAL CARE & HEALTH SCRUTINY COMMITTEE

19th NOVEMBER 2015

Present: Councillor G. Thomas (Chair)

Councillors: S.M. Allen (Vice-Chair), S.M. Caiach, I.W. Davies, D.J.R. Llewellyn, K. Madge, P. Edwards, E.G. Thomas and J.S. Williams

Councillor J.K. Howell – Substitute for Councillor W.T. Evans

Councillor J.D. James – Substitute for Councillor E. Morgan

Councillor B.A.L. Roberts – Substitute for Councillor J. Williams

Also in attendance:

Councillor L.D. Evans – Executive Board Member for Housing (and Older People / 50+ Champion)

Councillor J. Tremlett – Executive Board Member for Social Care & Health (and Older People / 50+ Champion)

The following officers were in attendance:

Mr. J. Morgan – Director of Community Services

Mr. A. Maynard – Interim Head of Mental Health & Learning Disabilities

Ms. C. Harrison – Head of Strategic Joint Commissioning

Mr. N. Edwards – Safeguarding & Commissioning Manager (Item 7)

Mr. D. Eldred – Group Accountant (Item 9)

Mr. K. Pett – Policy, Consultation & Engagement Officer (Item 8)

Mrs. C. Poulter – Locality Manager (Aman & Gwendraeth)

Ms. S. Sauro – Performance Review Officer

Mr. L. Walters – Senior Business Support Manager (Social Care)

Mr. M. Hughes – Assistant Consultant

Also in attendance for Item 6:

Dr. M. Thomas – Consultant in Public Health, Public Health Wales

Mrs. L. Williams – County Director & Commissioner, Hywel Dda University Health Board

Present as an observer:

Mr. M. Evans – Senior Manager (Mental Health & Learning Disabilities Services)

Venue: Chamber, County Hall, Carmarthen (10:10am – 1:10pm)

1. APOLOGIES FOR ABSENCE

Apologies were received from Councillors T.T. Defis, W.T. Evans, H.I. Jones, E. Morgan and J. Williams.

The Chair noted that Councillor J. Williams had recently been in hospital but was now at home and on behalf of the Committee, wished her a speedy recovery.

SOCIAL CARE & HEALTH SCRUTINY COMMITTEE

19th NOVEMBER 2015

2. DECLARATIONS OF PERSONAL INTEREST

Councillor	Minute Item(s)	Nature of Interest
Councillor K. Madge	Items 6-10	Wife is a sister at Amman Valley Hospital and daughter works in Social Care Services.
Councillor B.A.L. Roberts	Item 6	Daughter owns a shop in a local hospital.
Councillor G. Thomas	Item 8	Husband is a driver for Country Cars.

3. DECLARATION OF PROHIBITED PARTY WHIPS

There were no declarations of prohibited party whips.

4. PUBLIC QUESTIONS

The Chair noted that no public questions had been received.

In response to a query as to whether a public question would be read out if the questioner was not present, the Chair suggested that as at County Council meetings, the individual posing the question would be expected to attend to ask their question but that she would clarify this.

5. FORTHCOMING ITEMS

The Committee **RESOLVED** that the list of forthcoming items to be considered at its next meeting scheduled for the 14th December 2015, be endorsed.

6. CARMARTHENSHIRE FOUNDATIONS 4 CHANGE

Councillor K. Madge declared a personal interest in that his wife is a sister at Amman Valley Hospital.

Councillor B.A.L. Roberts declared a personal interest in that her daughter owns a shop in a local hospital.

The Chair welcomed Mrs. Linda Williams, the County Director & Commissioner of Hywel Dda University Health Board and Dr. Michael Thomas, Consultant in Public Health at Public Health Wales to the meeting.

SOCIAL CARE & HEALTH SCRUTINY COMMITTEE

19th NOVEMBER 2015

The Committee received a presentation on the Carmarthenshire Foundations 4 Change, an English performance assurance model being piloted in Wales by the Hywel Dda Health Board.

The following issues were raised in relation to the presentation:

In response to a question regarding the Bronze level Investors in Carers for GP practices, the County Director & Commissioner confirmed that all GP practices in Carmarthenshire had achieved this level but work was still on-going to ensure that all practices reached the Silver level by April 2016.

It was asked why an English model had been used rather than a home-grown solution to the unique needs of the health service in Wales and how its aims could be achieved when certain parts of the service were 'broken' and there was significant difficulty in attracting key workers to West Wales. The Consultant in Public Health and the County Director & Commissioner noted that regardless of its origin, the key aims of the model were aspirations that everyone would wish to sign up to and seek to emulate. The County Director & Commissioner acknowledged that recruitment for the Hywel Dda region was difficult and this was a key issue that the Board was seeking to address. However, she stressed that Carmarthenshire was better placed than other counties in the region, particularly due to the teaching hospitals and collaboration with the Swansea University Medical School.

In response to a query about life expectancy in Carmarthenshire and the increased number of older people, the Consultant in Public Health confirmed that the aim was to increase life expectancy by 3 years across all age groups as well as the areas with the lowest life expectancy. Following an additional question regarding the most deprived areas in Carmarthenshire in terms of health inequalities, the Consultant in Public Health acknowledged that life expectancy for those areas would be lower but that health services were being targeted there to address the problems (e.g. smoking cessation, Iechyd Da).

Concern was expressed that younger people were continuing to consume significantly higher levels of alcohol than previous generations and it was asked what could be done to address this. The Consultant in Public Health informed the Committee that much work was undertaken within educational establishments (e.g. Carmarthenshire Healthy Schools Scheme and Iechyd Da Youth Programme) and that individuals admitted to Accident & Emergency Units as a result from excessive alcohol consumption were signposted for diagnosis and treatment via an alcohol liaison nurse.

Reference was made to the number of armed forces veterans returning from active service and it was asked what GP practices were or could be doing to assist ex-servicemen and women who might have a range of complex issues. The Consultant in Public Health informed the Committee that Public Health Wales had a nominated national lead for veterans' health in order to ensure that all services were ready to recognise and deal with physical, mental or emotional issues experienced by veterans.

SOCIAL CARE & HEALTH SCRUTINY COMMITTEE

19th NOVEMBER 2015

It was asked how well attended the different public engagement events were and it was suggested that the health organisations use existing events (e.g. sporting and cultural events or visiting public houses) in order to engage with more people. The Consultant in Public Health noted that the agency ran a number of events throughout the year although he acknowledged that only a small percentage of the population actually engaged through such activities. However, Public Health Wales was looking at every option possible to engage and disseminate information to the wider public, especially through the media and social media.

A question was asked as to how well the integration of health and social services was being implemented in the region and whether this work was being undertaken quickly enough. The County Director & Commissioner suggested that Carmarthenshire was well progressed in terms of the Hywel Dda region but there was much work to do, especially in relation to funding arrangements. She stressed that this needed to be done well and not rushed through and added that whilst the Welsh Government had, until now, encouraged co-operation amongst the relevant bodies, it was likely that in the near future, the health and social services would be required to integrate through the introduction of measures or specific legislation.

The Chair thanked the County Director & Commissioner and Consultant in Public Health for the comprehensive update and suggested that the Committee should receive an update from Public Health Wales at a future meeting and that all members of the County Council would also benefit from receiving the presentation. The Committee agreed to the proposals.

RESOLVED that:

- 6.1 The presentation be received.
- 6.2 A presentation on the work of Public Health Wales be included in the Committee's Forward Work Programme.
- 6.3 It be suggested that County Council receive a presentation on the Foundations 4 Change model.

7. ANNUAL REPORT ON ADULT SAFEGUARDING 2014/15

Councillor K. Madge declared a personal interest in that his daughter works in Social Care Services.

The Committee considered the Annual Report on Adult Safeguarding for the 2014/15 financial year. The Committee also received a short presentation which gave an overview of the purpose and context of the annual report. The report outlined the national policy context of adult safeguarding including the likely implications of the Social Services & Well-Being Act 2014.

The following issues were raised in relation to the report:

SOCIAL CARE & HEALTH SCRUTINY COMMITTEE

19th NOVEMBER 2015

Whilst the many positive developments and activities highlighted by the report were welcomed, concern was expressed at the apparent lack of prosecutions brought against individuals alleged to be responsible for abuse. The Safeguarding & Commissioning Manager acknowledged that officers shared members' concerns and frustrations but that cases of abuse were often complex and difficult to obtain the necessary evidence to take individuals to court, especially when cases involved adults with limited or impaired capacity to understand the situation, or being unwilling to go to court at all. He added that current legislation did not help officers in their task but hoped that the recent Flynn Report (In Search of Accountability), a review of the neglect of older people living in care homes undertaken for the Welsh Government, would lead to a change in legislation and close this gap. The Director of Community Services noted that when setting thresholds for prosecutions, it was not always in the best interest of the individuals concerned to prosecute. However, he added that where there was clear evidence of pre-meditated intention to harm or abuse, members should be reassured the Authority would advocate for prosecution although this was a matter for the police and the Criminal Prosecution Service.

The Executive Board Member for Social Care & Health informed the Committee of a research project was being undertaken by Carmarthenshire County Council in conjunction with Cardiff Council and Aberystwyth University. The aim of the research was to raise awareness amongst individuals in or receiving care of the options open to them if they felt subjected to any kind of abuse. The research was also aimed at examining the reasons as to why individuals did not wish to pursue prosecutions and the potential role of a 'broker' to mediate between the respective parties in order to reach an acceptable outcome.

Reference was made to the significant increase in the number of referrals received in 2014/15 and it was asked whether this was a one-off or was it as a result of the Authority's improved procedures. The Safeguarding & Commissioning Manager noted that it was difficult to state what the exact reason for the increase had been but that the increase in the attention and publicity given to all kinds of abuse as well as an increase in engagement and better training, may have all contributed to the increase in referrals. He added that in some ways, it was encouraging that individuals felt able to report incidents of abuse and that this might be a mirroring of that which had been happening in relation to historic child abuse cases.

Disappointment was expressed that Care & Social Services Inspectorate Wales (CSSIW) had failed to complete any referrals (as part of a single agency investigation) for the past three years and it was asked why this should be the case. The Director of Community Services acknowledged that it was unusual for there to be no completion of any referrals during this time but that this might be due to existing legislative issues. However, new legislation associated with the Social Services & Well-Being Act 2014 might well assist the CSSIW going forward. He added that the Authority was able to place providers under an embargo which was often a quicker and more effective process than prosecution. The Locality Manager (Aman & Gwendraeth) informed the Committee that during the previous week, the CSSIW had prosecuted a care provider in Swansea and was successful in obtaining the current maximum fine of £2,500.

SOCIAL CARE & HEALTH SCRUTINY COMMITTEE

19th NOVEMBER 2015

It was asked whether the staffing problems experienced by the Safeguarding & Commissioning Team referred to in the report, had impacted on its ability to carry out its work. The Safeguarding & Commissioning Manager informed the Committee that during 2014/15, one team member had been on a period of sick leave and another had taken a career break. This had been included to highlight to members that the Team had been understaffed at times but this had now been rectified and there was now a full complement of staff.

In response to a suggestion that the number of referrals relating to independent sector providers was high, the Safeguarding & Commissioning Manager reminded the Committee that 90% of individuals receiving care in the County were in the independent sector (there are over 90 care homes, 1,200 service users receiving domiciliary care services and 1,500 care home beds) and in light of these figures, the number was comparatively low.

It was suggested that elected members needed to be educated on the work undertaken by the Safeguarding & Commissioning Team, especially as members were working amongst the community or undertook voluntary work which might from time to time, require referring a matter or querying whether a concern should be taken further. The Safeguarding & Commissioning Manager noted that in the past, the service had run member development sessions and this could be done again. Following a suggestion by the Chair that an all-member session be arranged, the Safeguarding & Commissioning Manager indicated that a session would be more beneficial once the new regional arrangements were in place later in 2016. The Committee agreed to this proposal.

In response to a question about the role and pay of care workers, the Safeguarding & Commissioning Manager informed the Committee that the Authority had undertaken a significant amount of work with providers in relation to salary levels as well as contractual arrangements to ensure that care workers were not just doing the work because it was the only option available, but that they were receiving a fair and decent wage for their work.

The Executive Board Member for Social Care & Health paid tribute to the Safeguarding & Commissioning Manager and thanked him for his work in relation to Adult Safeguarding over many years and wished him well in his new role within the department.

RESOLVED that:

7.1 The report be received.

7.2. An all-member development session on Adult Safeguarding & Commissioning be arranged in 2016, once new regional arrangements have been established and implemented.

8. AGEING WELL IN WALES – LOCAL AGEING WELL PLANS

SOCIAL CARE & HEALTH SCRUTINY COMMITTEE

19th NOVEMBER 2015

Councillor K. Madge declared a personal interest in that his daughter works in Social Care Services.

Councillor G. Thomas declared a personal interest in that her husband is a driver for Country Cars.

The Committee considered the draft Local Ageing Well Plan for Carmarthenshire which had been developed to meet two key strategic drivers; the Ageing Well in Wales programme with five themes and the Strategy for Older People in Wales. The Plan linked with the 'Vision for Sustainable Services for Older People', under development within the Communities Department. It also supported the 2015 Well-Being of Future Generations Act, through contributing towards sustainable communities that enable people to age 'in-place'.

The following issues were raised during consideration of the report:

Reference was made to the financial implications attached to the report which indicated that the Plan would be cost-neutral and an explanation for this was sought from officers. The Policy, Consultation & Engagement Officer and the Director of Community Services informed the Committee that the Plan was considered to be neutral in the sense that there was no specific part of the document that requested funding and that it was an opportunity to bring different agendas and Authority initiatives together by utilising the services already in existence.

The Executive Board Member for Housing (and Older People / 50+ Champion) suggested that in light of the increasing numbers of older people in the County, the Plan was an opportunity to invest to save by providing older residents with the relevant information in a timely manner and communities with guidance on what they could do to help with this agenda. The Executive Board Member for Social Care & Health (and Older People / 50+ Champion) added that the draft Plan was a holistic strategy and that it was not just about creating a dementia or falls-friendly communities but all-encompassing supportive and resilient communities.

It was also asked whether there were specific funds available for dementia-related care. The Director of Community Services stated that whilst there was not a specific pooled budget for dementia, there were different funding streams from which the Authority could draw funding to undertake information dissemination or promotional activities. He reminded the Committee that the Local Authority was not permitted to use its funds to pay for health care as there were different legal requirements governing the activities of the NHS and local authorities in relation to charging for services.

RESOLVED that the draft Plan be endorsed for consideration by the Executive Board.

SOCIAL CARE & HEALTH SCRUTINY COMMITTEE

19th NOVEMBER 2015

9. REVENUE & CAPITAL BUDGET MONITORING REPORT 2015/16

Councillor K. Madge declared a personal interest in that his daughter works in Social Care Services.

The Committee considered the Revenue & Capital Budget Monitoring Reports relating to the Social Care & Health Service for the period up to 31st August 2015. The Committee noted that the Social Care & Health Service was projecting that it would be over its approved budget by £685,000 at the year end whilst the capital programme showed a net variance of -£228,000 against the 2015/16 approved budget.

The following issues were raised during consideration of the report:

In response to a question about the staff vacancies in the Enablement Service, the Director of Community Services noted that due to the nature of this service and the volume of staff, there was traditionally a high turnover in this area.

Reference was made to the timeliness of the report which was for the period up to the end of August 2015. The Director of Community Services and the Group Accountant reminded the Committee that this was a very complex budget but that as budget monitoring was undertaken on a bi-monthly basis. The most recent update (for the end of October) would not have been ready to meet the agenda deadline for the November meeting. However, for large or significant projects/services, more regular budget monitoring exercises were undertaken by the relevant officers.

RESOLVED to receive the report.

The Committee UNANIMOUSLY RESOLVED to suspend standing orders during consideration of this item so that the remaining agenda items could be considered.

10. HALF-YEARLY PERFORMANCE MANAGEMENT REPORT – 1ST APRIL TO 30TH SEPTEMBER 2015

Councillor K. Madge declared a personal interest in that his daughter works in Social Care Services.

The Director of Community Services suggested that in light of the time, the Committee consider deferring this item to its next scheduled meeting as this would afford members the time to discuss the report in more detail.

The Committee **UNANIMOUSLY RESOLVED** that the report be deferred for consideration at its next meeting on the 14th December 2015.

SOCIAL CARE & HEALTH SCRUTINY COMMITTEE

19th NOVEMBER 2015

11. REFERRAL TO SOCIAL CARE & HEALTH SCRUTINY COMMITTEE

The Committee considered a referral from the Policy & Resources Scrutiny Committee. The Assistant Consultant explained the background for the referral and updated the Committee on the proposals for a new format for the performance monitoring reports received by scrutiny committees which would be shared with elected members at a briefing session on the 14th January 2016 (2:00pm).

RESOLVED that the report be received.

12. EXPLANATION FOR NON-SUBMISSION OF SCRUTINY REPORT

The Chair reminded the Committee of the Joint-Meeting with the Education & Children Scrutiny Committee on Monday 23rd November 2015 which had been arranged specifically for consideration of the Care & Social Services Inspectorate Wales' (CSSIW) Inspection, Valuation and Review of Local Authority Social Services 2014/15 report. She requested that if possible, all members make an effort to attend.

RESOLVED that the explanation for the non-submission of the CSSIW's Inspection, Valuation and Review of Local Authority Social Services 2014/15 report, be noted.

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

The Committee considered an update detailing progress in relation to actions, requests or referrals emerging from previous scrutiny meetings.

RESOLVED that the update be received.

14. TO SIGN AS A CORRECT RECORD THE MINUTES OF THE MEETING HELD ON THE 16TH SEPTEMBER 2015

RESOLVED that the minutes of the meeting held on Wednesday 16th September 2015, be signed as a correct record.

SIGNED: _____ (Chair)

DATE: _____