

SOCIAL CARE & HEALTH SCRUTINY COMMITTEE

14th DECEMBER 2015

Present: Councillor G. Thomas (Chair)

Councillors: S.M. Allen (Vice-Chair), S.M. Caiach, I.W. Davies, T.T. Defis,
P. Edwards, W.T. Evans, E. Morgan and J.S. Williams

Councillor W.J.W. Evans – Substitute for Councillor H.I. Jones

Councillor M.J.A. Lewis – Substitute for Councillor D.J.R. Llewellyn

Councillor D.W.H. Richards – Substitute for Councillor E.G. Thomas

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

The following officers were in attendance:

Mr. J. Morgan – Director of Community Services

Mr. O. Bowen – Interim Head of Financial Services

Mrs. R. Dawson – Head of Integrated Services

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

Mr. D. Eldred – Group Accountant

Ms. S. Frewin – Senior Manager (Community Inclusion)

Ms. S. Sauro – Performance Review Officer

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

Mr. M. Hughes – Assistant Consultant

Present as an observer:

Mrs. M. Evans-Thomas – Democratic Services Officer

Venue: Chamber, County Hall, Carmarthen (10:00am – 12:15pm)

1. APOLOGIES FOR ABSENCE

Apologies were received from Councillors H.I. Jones, D.J.R. Llewellyn, E.G. Thomas and J. Williams, as well as Councillor J. Tremlett (Executive Board Member for Social Care & Health).

2. DECLARATIONS OF PERSONAL INTEREST

There were no declarations of personal interest.

3. DECLARATION OF PROHIBITED PARTY WHIPS

There were no declarations of prohibited party whips.

4. PUBLIC QUESTIONS

No public questions were received.

5. FORTHCOMING ITEMS

The Committee **RESOLVED** that the list of forthcoming items to be considered at its next meeting scheduled for the 20th January 2016, be endorsed.

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

The Committee received, for consideration, the Half-Yearly Performance Management Reports relating to Social Care & Health Services for the period 1st April to 30th September 2014. The Chair reminded members that this report had been deferred from the previous meeting in November. The report included:

- Heads of Service Overview of Performance
- The Approach to Measuring Performance – Older Persons and Physically Disabled
- Services and Learning Disabilities and Mental Health Services
- Improvement Plan Monitoring – Actions and Performance Measures

The following issues were discussed during consideration of the report:

In response to a question regarding the use of the GP cluster funding, the Head of Integrated Services stated that in line with the Welsh Government's Primary Care Plan for Wales, each Cluster (Locality) in Carmarthenshire had utilised available funding to support service development in specified areas. However, whilst there was a danger that GPs could see this as an opportunity to fund the work of their practices, the Welsh Government's Health Minister was clear that the funding was to support primary care and the whole of the locality cluster.

Reference was made to the re-design of the Careline service and it was asked whether this would require more staff? The Head of Integrated Services informed the Committee that when the service had been brought into Social Care Services, officers were aware that it needed to be re-developed but the introduction of the Social Services & Well-Being (Wales) Act, to be implemented in April 2016, now placed additional requirements on the service, namely, that those taking calls be working to a higher job specification than they did at present. She acknowledged that this might impact on staff numbers and that the re-design needed to be carried out within the ever tighter budget constraints. Options under consideration included utilising staff with the relevant skills from other service areas.

It was asked whether part of the Third Sector Brokers' roles was to identify duplication of services in the voluntary sector as well as identifying gaps in existing service provision. The Head of Integrated Services informed the Committee that following the continuation of the brokers' roles within the Community Resource Teams, they would now be known as 'Community Resilience Workers. She added that these officers should be monitoring services for on any duplication and that

work was still on-going at a corporate level to identify voluntary sector spend. She also informed the Committee of a new Public Health Wales grant which was part of a Community Resilience Action Programme and used this as an example of how it was essential that any new grant money was being spent on new projects rather than duplicating existing schemes and activities.

Clarification was sought as to the population figures associated with planning services at a community level, in line with the Welsh Government's Primary Care Plan for Wales. The Head of Integrated Services informed the Committee that when planning services at a community level and amongst diverse populations, this was best done for numbers in the region of between 25,000 and a 100,000.

An explanation for the role of the Lifestyle Advocates and their training was sought. The Head of Integrated Services informed the Committee that this role had been piloted within the Community Resource Teams in previous months. These officers were now known as 'Lifestyle Advocates' and supported health promotion and associated behaviour change in each GP practice across Carmarthenshire and were supported through the cluster plans and associated funding.

It was asked whether the Adult Mental Health Practitioners were attached to specific teams and whether they were now expected to take part in the 24-hour standby arrangements, as would have been expected of practitioners in the past. The Interim Head of Mental Health & Learning Disabilities Services informed the Committee that the 18 practitioners were part of teams in Wellfield Road, Carmarthen and Goring Road, Llanelli. Others were attached to satellite teams based out in the northern areas of the county. However, a re-design of the service was currently being undertaken with a view to re-align the management structures. He added that the pilot standby project for 24-hour Adult Mental Health Practitioner cover, utilising a dedicated practitioner had proved to be very successful. Discussions were on-going with staff regarding the development of new arrangements and as these had been initially developed in conjunction with the relevant staff, he was confident that the new arrangements would be adopted.

In response to a question about the Transition Team restructure, the Interim Head of Mental Health & Learning Disabilities Services updated the Committee in relation to the realignment of the Carmarthen and Llanelli Community Teams for Learning Disabilities (CLTDs) and the strengthening of the Long-Term Managed Care Teams with responsibility for young adults aged 24-25 following their transition from Children's Services. This work was essential in order to ensure that these young people were reaching and fulfilling their potential. The Senior Manager (Community Inclusion) informed the Committee that the Opportunities Team from the Community Inclusion Service complement this work by developing lifestyle plans and career pathways with these young people in order to avert crisis situations in the longer term.

Following a question on the commissioning and contracting of Learning Disabilities Services, the Interim Head of Mental Health & Learning Disabilities Services noted that extensive work had been undertaken to develop closer working relationships between commissioning and care management to assist the effective and efficient use of resources for learning disabled adults and adults with mental health needs. He referred to the example of an individual with learning disabilities, living in supported accommodation in a neighbouring authority and in receipt of services

from a provider not familiar with Carmarthenshire. Work by the Commissioning and Care Management Team had enabled the individual to return to Carmarthenshire which had not only seen improvements to their health and well-being but had secured savings in excess of £40,000 per year from this move.

It was suggested that whilst there were many voluntary sector services on offer to support those with mental health issues or learning disabilities, it appeared that certain individuals continued to be missed or not assigned the correct support and that there was some confusion as to what voluntary organisations were providing. The Senior Manager (Community Inclusion) acknowledged the concerns and informed the Committee that following on from discussions at its meeting in September 2015, officers were progressing with work relating to the Coleshill Centre for Economic Inclusion Action Plan and that a consultation event was being held in January 2016 with relevant officers, service providers and clients, in order to clearly map and plan future provision. Contract reviews also enabled officers to clarify what services were being provided and ensure that there was no duplication of effort.

The opening of the new Cartref Cynnes Extra Care Development in Carmarthen was welcomed and services commended. Following a suggestion by the Chair, the Committee agreed to visit the new facilities in the new year. The Director of Community Services welcomed the proposal and the opportunity for members to view the new development for themselves.

RESOLVED that the report be received.

7. REVENUE BUDGET STRATEGY CONSULTATION 2016/17 TO 2018/19

The Committee considered the Revenue Budget Strategy 2016/17 to 2018/19 (Appendix A) which had been endorsed by the Executive Board for consultation purposes at its meeting on 16th November 2015. It was advised that Welsh Government had announced the provisional settlement earlier that week (9th December) and that Carmarthenshire would see a 1% cut in budget rather than the 3.3% on which the Strategy was based. The Welsh Government was also protecting schools budgets although the extent of the protection was as yet unclear. The Strategy had been based on there being no protection of school budgets. In summary, the shortfall in efficiency savings identified for 2016/17 might not be needed however, delivery of the £13.6m identified savings was essential. Council tax was set to increase by 5% in the Strategy and a 1% movement equated to £760,000. The Director of Community Services also gave a brief overview of the Social Care Service area.

The following issues were discussed during consideration of the report:

It was asked how the Authority addressed schools with budget deficits. The Interim Head of Financial Services informed the Committee that in such circumstances, a school would be required to produce a plan to show how it was intending to address its budget deficit. The Director of Community Services noted that very often, schools budgets were affected by falling pupil ratios and it was essential that schools had effective and appropriate financial arrangements in place. The Authority did have powers to intervene in certain situations. In response to an

additional question regarding the uncertainty around protecting school budgets, the Interim Head of Financial Services noted that the Welsh Government was usually quite explicit about how it wished budgets to be protected and so forth. However, following the recent announcement, there was no further guidance on this matter. A meeting of senior local authority officers and the Welsh Government had been held and further discussions were planned in order to come to an agreement and gain clarity on the matter.

An explanation for the reduction in grants to voluntary organisations in relation to Older People & Physical Disabilities and Learning Disabilities Services was sought. The Director of Community Services informed the Committee that the reduction was in relation to the way in which the Authority was now buying provision from these organisations. The Authority was now moving to spot contracts where it paid for the services it used rather than via block contracts and was a far more efficient method of procuring services. In response to a suggestion that these reductions could be spread over three years, the Interim Head of Mental Health & Learning Disabilities Services noted that this could be considered but informed the Committee that some of the reductions had been planned for some time, one example being the Llanelli & District Gateway Club which was due to close in the near future. Other reductions such as the £65,000 for Mencap had been built-in to recently agreed grant funding. The Director of Community Services reassured the Committee that the reductions in grants did not mean that the affected organisations would close and was part of an on-going efficiency drive and that officers had been working closely with the relevant groups.

Clarification was sought with regards to progress in implementing alternative service models for the Local Authority's Residential Homes for Older People either by externalising the service or developing a Local Authority Trading Company model. The Director of Community Services reminded the Committee that this had been approved by County Council following consideration of the Carmarthenshire Vision for Sustainable Services for Older People 2015-2025, at its meeting in October 2015. A business plan was being developed for what was a complex proposal and would be presented to the Committee later in 2016. In response to a further question, the Director advised the Committee that there were a variety of models that could be adopted as well as a number of freedoms delegated to the arms length entity by the Authority, which would remain as the main shareholder. He assured the Committee that the detailed report would provide members with a range of options for its consideration.

In response to a query regarding the reasons for the reduction in private sector residential home placements, the Head of Integrated Services noted that the Delayed Transfers of Care performance did not mean that the Local Authority was not providing social care and that there were often health-related problems which prevented transferring older people from hospital beds back in to their homes or other residential settings. She added that the Transfer of Care & Advice and Liaison Service (TOCALs) provided a real opportunity to work with hospital staff to further progress and improve performance in this area. The Welsh Government had also informed Health Boards that it expected to see improvements in discharge planning.

In response to concerns expressed at the proposed increase in charges for Meals on Wheels, the Director for Community Services reminded the Committee that the increase was not about closing the service but about cost recovery and ensuring

that funding to provide this service was not taken from other service areas. The Director also reminded the Committee that the reality was that the demand for this service was changing significantly. Many individuals, who may have previously received meals in their homes, were now buying frozen meals which could be heated at a time of their choosing. Officers were now working with the WRVS (Royal Voluntary Service) who had been tasked by the Executive Board Member for Social Care & Health to look at how the service could be enhanced to cater for more than just meal delivery, with a special focus on preventing loneliness.

Following further discussion regarding the proposed increase to charges for Meals on Wheels (Appendix Ai) and Community Meals (Appendix C), it was suggested that increasing these charges across three years be explored, rather than introducing it in 2016/17. The Committee agreed to this proposal.

It was asked whether the larger national voluntary organisations operating within the county could operate services by sub-contracting through smaller local groups. The Director of Community Services acknowledged that this was a way in which smaller local groups could be safeguarded and supported and that the Authority had a role to play in ensuring that this was included in any procurement exercise. However, it was often the case that voluntary groups had seen each other as competitors rather than seeking to work together to offer the best services to the county's residents.

RESOLVED that:

- 7.1 The Corporate Budget Strategy for 2016/17 – 2018/19 be received.
- 7.2 The Charging Digest for the Social Care & Health Department be endorsed.
- 7.3 The option for spreading the proposed increases in Meals and Wheels and Community Meals across three years, be explored.

8. EXPLANATION FOR NON-SUBMISSION OF SCRUTINY REPORT

UNANIMOUSLY RESOLVED that the reason for the non-submission of the Capital Programme Budget Setting 2016/17 – 2020/21 report, be noted.

SIGNED: _____ (Chair)

DATE: _____