

# SOCIAL CARE & HEALTH SCRUTINY COMMITTEE

## 3<sup>rd</sup> JULY 2015

NOTE: THESE MINUTES ARE SUBJECT TO CONFIRMATION BY THE COMMITTEE AT ITS NEXT MEETING)

**Present:** Councillor G. Thomas (Chair)

**Councillors:** S.M. Allen (Vice-Chair), I.W. Davies, K. Madge, T.T. Defis, W.T. Evans, E. Morgan, P. Edwards, H.I. Jones, E.G. Thomas, J. Williams, J.S. Williams

**Also in attendance:**

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

In attendance as observers: **Councillors J.S. Edmunds** and **B.A.L. Roberts**

**The following officers were in attendance:**

Mr. J. Morgan – Director of Community Services

Mrs. R. Dawson – Interim Head of Integrated Services

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

Mr. D. Eldred – Group Accountant (*for Item 6*)

Mr. P. Llewellyn – Assistant Director of Strategic Partnerships, Hywel Dda University Health Board (*for Item 4*)

Mr. J. Rees – Joint Carers Development Officer (*for Item 4*)

Mr. L. Walters – Senior Business Support Manager (Social Care) (*for Item 5*)

Mr. M. Hughes – Assistant Consultant

**Venue:** Chamber, County Hall, Carmarthen (10:05am – 12:25pm)

### 1. APOLOGIES FOR ABSENCE

Apologies were received from Councillors S.M. Caiach and D.J.R. Llewellyn.

### 2. DECLARATIONS OF PERSONAL INTEREST

Councillor	Minute Item(s)	Nature of Interest
Councillor K. Madge	Items 4-6	Daughter works in Social Care Services
Councillor J. Williams	Items 4-6	Is an un-paid carer

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### **3. DECLARATION OF PROHIBITED PARTY WHIPS**

There were no declarations of prohibited party whips.

### **4. HYWEL DDA INFORMATION & CONSULTATION STRATEGY FOR CARERS – ANNUAL REPORT 2014-15**

*The Chair welcomed Peter Llewellyn (Assistant Director of Strategic Partnerships, Hywel Dda University Health Board) to the meeting.*

The Committee considered the Hywel Dda University Health Board's Information & Consultation Strategy for Carers Annual Report for 2014/15. The Assistant Director of Strategic Partnerships gave a brief presentation, outlining the work undertaken during 2014/15 and the key challenges and priorities for 2015/16. The presentation focused on the work of the following groups and initiatives:

- Strategy Implementation Group
- Investors in Carers
- Information Sub-Group
- Young Carers
- Training Group / Carer Aware E-Learning Module
- Performance Monitoring
- Mental Health and Learning Disabilities

The following issues were discussed during consideration of this item:

The repealing of the Carers Measure and the impact of new legislation on the Health Board's future responsibilities in relation to carers was discussed and it was asked why the measure was established in the first place. The Assistant Director of Strategic Partnerships informed the Committee that the measure had originally been introduced to give guidance to the National Health Service in Wales on engaging with carers. However, with the increase in legislation currently proposed by the Welsh Government (e.g. Future Generations Bill and Health & Well Being Act), Ministers were seeing this as an opportunity to repeal the old measure. Officers were concerned that with the loss of the measure, specific support for carers would be lost in the new legislation.

The difficulties faced by young carers were discussed and clarification was sought as to the type of support provided for carers in this age group. The Assistant Director of Strategic Partnerships acknowledged that this was a key group and that it was essential to try and identify individuals in order to establish intervention and support for them as soon as possible. The Health Board and its partners worked with a variety of agencies including schools and school nursing services in order to identify young carers. Support for young carers included providing short breaks so that they could concentrate on their studies or spend time with friends. It was

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thought that there were approximately 1,000 young carers in Carmarthenshire although in reality it was likely that the figure was greater.

In response to a suggestion that school governors should receive training on the needs of young carers, the Assistant Director of Strategic Partnerships stated that the Health Board would continue to work with schools via Head Teacher Forums to highlight the needs of young carers and how schools could assist in supporting them. He welcomed the suggestion and agreed to include this in future work programmes.

The Committee welcomed the progress outlined in the report but expressed concern at the proposed loss of the Carers Measure funding worth £130,900 from April 2016 and the resulting impact on the current fixed term posts and Young Carer services. It was suggested that the reduction in funding would have a detrimental impact on the current work being undertaken and that the Executive Board should be asked to lobby the Welsh Government to stress the importance of this resource and request that it should not be cut. The Committee agreed to the proposal.

In response to a further question on the overall funding allocation being reduced in 2014/15, the Assistant Director of Strategic Partnerships informed the Committee that it been necessary to revisit the initial Implementation Plan halfway through the year. This had resulted in a number of key aims being reduced and revised. This had impacted on the planned development of a comprehensive Carers Outreach Service and employment of a dedicated Project Support Officer to take forward the Young Carers agenda.

The role of neighbours undertaking a 'caring' role, especially in rural areas was highlighted and it was asked how they were supported. The Assistant Director of Strategic Partnerships stated that an individual assisting an elderly or frail neighbour could be registered as a carer via their GP (subject to agreement from the individual and their family) and in turn receive the relevant support for carers.

In response to a question on how funding for carers was allocated to other Health Boards, the Assistant Director of Strategic Partnerships confirmed that funding was allocated according to population and that this did disadvantage the rural counties with smaller populations which were spread out over large areas.

Clarification was sought as to the age of those young carers known to the Health Board and Social Services. The Assistant Director of Strategic Partnerships informed the Committee that the statistics included in the report covered young carers up to 18 years old but that there were some as young as 7-8 who were known to the Health Board and its partners. He agreed to circulate more information about young carers to the Committee.

It was asked whether the pilot undertaken by the pharmacy at Withybush Hospital to include Carers Information leaflets in all 'take home' medicine bags for discharge medicines, would be rolled out to all hospitals within the Hywel Dda region. The Assistant Director of Strategic Partnerships stated that this scheme was going to be

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extended across all pharmacy sites during the year ahead following the successful pilot in Haverfordwest.

### **UNANIMOUSLY RESOLVED that:**

**4.1 The report be endorsed.**

**4.2 The Executive Board be requested to lobby the Welsh Government to stress the importance of the Carers Measure funding and to request that it not be cut from April 2016 onwards.**

### **5. END OF YEAR PERFORMANCE MANAGEMENT REPORT – 1ST APRIL 2014 TO 31ST MARCH 2015**

The Committee received, for consideration, the End of Year Performance Management Report for the services within its remit, for the period 1st April 2014 to 31st March 2015. The Director of Community Services informed the Committee that his management team were currently re-considering the content of the performance monitoring reports to ascertain whether the information provided to members was relevant and useful. His intention was to present a summary of officers' proposals to the Committee at its meeting in September.

The following issues were discussed during consideration of the report:

A question was asked as to the current status of the Glanmarlais Care Home in Llandybie. The Executive Board Member for Social Care & Health informed the Committee that the home had closed that week as the last remaining residents had found alternative accommodation. Staff members were in the process of being re-deployed to other locations or services.

It was asked how well the 24-hour Adult Mental Health Practitioner (AMHP) cover was working in light of the challenge to provide out-of-hours cover on the standby rota. The Interim Head of Mental Health & Learning Disabilities Services informed the Committee that a pilot project had been developed to ensure that there was 24-hour cover, whilst, at the same time, identifying and training staff to strengthen the pool of practitioners. Officers were also considering other options such as revising job profiles to include an element of shift work to support the out of hours cover, as existing practitioners were not duty bound to assist in addition to their substantive role.

Reference was made to the work to encourage people to recruit their own personal assistants using Direct Payments and it was suggested that many individuals were wary of this system as they feared being an 'employer'. It was asked what work was being done to support individuals to take up Direct Payments. The Interim Head of Integrated Services acknowledged the concerns and informed the Committee that work was already underway to understand why individuals had taken up Direct

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Payments in order to assist the Authority in promoting this option for older people and making the relevant information clearer.

Clarification was sought as to the referral process in relation to Deprivation of Liberty Safeguards (DoLS). The Interim Head of Mental Health & Learning Disabilities Services informed the Committee that along with all local authorities, Carmarthenshire had experienced significant challenges during the past year as a result of the UK Supreme Court Judgement. There had been a ten-fold increase in the number of referrals and the Department had subsequently developed an action plan to deal with the situation, including the establishment of a categorisation process to deal with the referrals on the basis of risk (green, amber and red according to the assessed level of risk). A small team of officers had also be established to deal with the most serious cases (red category). In response to a subsequent question about prioritising referrals, he stated that if a referral was received in relation to an individual living in a particular care home about which officers already had concerns, such a referral would be prioritised. However, the Interim Head of Mental Health & Learning Disabilities reminded the Committee that there were further judgements expected in relation to this matter which might impact on the Authority's approach in the future.

The differences in the numbers of unplanned and planned calls to and from the Immediate Response Night Care Service for different geographical areas, were queried. The Interim Head of Integrated Services informed the Committee that without knowing the full details of the cases associated with these calls, it was difficult to specify the reason, although the needs attributed to the individuals involved might be the likely cause. She added that the unplanned calls would be an issue to investigate further as part of a review of the Immediate Response Care Service which was due to commence in the near future. The Director of Community Services suggested that this was another example of an activity statistic whose purpose might no longer be fit for purpose. However, he agreed to circulate more information about this matter to the Committee.

Day Centre provision was discussed and clarification sought as to the actual numbers attending the Carmarthen centre and how these individuals' needs would be met, should changes be made to the day centre service in the future. The Director of Community Services acknowledged that due to the wide variety of needs catered for by the centres, a number of different solutions would be required. For instance, those attending the centre due to loneliness at home would need to be addressed differently to those individuals suffering with dementia. It was envisaged that the new Cartref Cynnes extra care scheme in Johnstown would accommodate those with more specialist needs on a daily basis. He highlighted that as numbers fell in day centres it would be necessary to redevelop the service and a paper to do this would be produced in the coming weeks. Officers also confirmed that the figures in the report were the number of people days available and the number of people days on which individuals attended. The figure of approximately 30 for the Carmarthen Day Centre was the estimated number of actual individuals who between them made up the days' attendance.

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It was asked what progress had been made in relation to pooled budgets with the Hywel Dda University Health Board. The Director of Community Services informed the Committee that whilst in principle, the aim was to reach this position, in reality, it was a very complex matter to deliver on a day to day basis. One example would be the different legal requirements governing the activities of the NHS and local authorities in relation to charging for services (e.g. Continuing Health Care Funding). The Director added that the Department was about to commission some research work to investigate the matter further.

**Resolved that the report be received.**

### **6. REVENUE AND CAPITAL BUDGET MONITORING REPORT 2014/15**

The Committee considered the Revenue & Capital Budget Monitoring Reports relating to Social Care Services, in relation to the end of year position for the 2014/15 financial year. The Committee noted that the Communities Department's revenue budget showed an overspend of £1,605,000 at the year end whilst the capital programme showed a variance of -£2,353,000 against the 2014/15 approved budget.

The following issues were raised in relation to the report:

In response to a question on the £345,000 efficiency savings slippage in Older People Day Services, the Group Accountant informed the Committee that the Department had previously put forward proposals for restructuring the Day Services but that these had been moved on to the 2016/17 financial year.

Reference was made to the underspends due to vacant posts and it was asked whether these posts would be filled. The Director of Community Services informed the Committee that this was generally a reflection of the turnover within such a large department where there were always staff commencing employment, moving to new posts or leaving the Authority. The Department did not seek to keep posts vacant for no reason.

It was asked whether or not the overspends on additional packages in the Older People and the Learning Disabilities Services could be predicted and provision planned. The Group Accountant and Director of Community Services stated that this was simply due to demand for the services but it was also linked to the fact that the Department had not yet met the targets to reduce spend in certain areas.

*The Committee was briefly adjourned in order to observe a minute's silence to remember the victims of the recent terror attack in Tunisia.*

It was acknowledged that seeking efficiencies was important but that some of the proposals outlined in the report were questioned, especially in Adult Respite Care and Substance Misuse services and further clarification was sought as to what the efficiencies would mean in terms of service provision going forward. The Director of

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Community Services noted that the focus was not only about getting cost effective services but ensuring that individuals were receiving the correct services in the first place. He highlighted that for some individuals, services would be reduced but that the Department was seeking to mitigate any impact by operating in different ways. The Interim Head of Mental Health & Learning Disabilities Services concurred stating that the efficiencies in Adult Respite Care were not about cutting services but about improving and being more efficient. He added that the Substance Misuse Service had been realigned but there had been no redundancies.

It was suggested that officers had very good ideas for improving services and so on but it appeared that legislation and various policies from central or regional governments hampered their implementation. The Director of Community Services acknowledged that there were many barriers to negotiate but one of the most difficult was to win the 'hearts and minds' of residents and of those directly affected by any changes to services. It was therefore important that the Authority was able to articulate the case for change effectively and in a way that people understood.

Reference was made to the Extra Care Schemes in Ammanford and Carmarthen and it was asked whether officers were confident that these were on track and would be completed as planned. The Director of Community Services stated that both projects were on course for completion within the agreed timescales although there were some technical issues at the Ammanford site which the contractors were in the process of resolving. In response to a further question on applying for a place at the new facilities in Carmarthen, the Director informed the Committee that whilst neither project was completed, it was not possible to allocate leases but that individuals could register an interest through the Department.

It was asked what the Authority intended to do with the Glanmarlais Care Home site in Llandybie, now that all the residents had left. The Director of Community Services highlighted that as yet no decision had been made as individuals had, until that week, been living in the home. Once the home had been decommissioned, work could begin on determining the future of the site and the relevant local members would be kept informed of developments.

**Resolved that the report be received.**

### **7. EXPLANATION FOR NON SUBMISSION OF SCRUTINY REPORT**

**RESOLVED** that the explanation for the non-submission of the Complaints Section of Performance Management Report (Item 5), be noted.

### **8. SOCIAL CARE & HEALTH SCRUTINY COMMITTEE ACTIONS AND REFERRALS UPDATE**

**RESOLVED** that the update detailing progress in relation to actions, requests or referrals emerging from previous meetings, be received.

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### **9. FORTHCOMING ITEMS**

**RESOLVED** that the list of forthcoming items to be considered at its next meeting scheduled for the 16th September 2015, be endorsed.

### **10. TO SIGN AS A CORRECT RECORD THE MINUTES OF THE MEETING HELD ON THE 22<sup>nd</sup> MAY 2015**

**RESOLVED** that the minutes of the meeting held on Friday 22nd May 2015, be signed as a correct record.

**SIGNED:** \_\_\_\_\_ (Chair)

**DATE:** \_\_\_\_\_