

Document Pack



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

MONDAY, 13 MAY 2019

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, - COUNTY HALL, CARMARTHEN. SA31 1JP. AT 1.00 PM ON MONDAY, 20TH MAY, 2019** FOR THE TRANSACTION OF THE BUSINESS OUTLINED ON THE ATTACHED AGENDA.

Mark James CBE

CHIEF EXECUTIVE



PLEASE RECYCLE

Democratic Officer:	Emma Bryer
Telephone (Direct Line):	01267 224029
E-Mail:	ebryer@carmarthenshire.gov.uk
Ref:	AD016-001

SOCIAL CARE & HEALTH SCRUTINY COMMITTEE

14 MEMBERS

PLAID CYMRU GROUP – 7 MEMBERS

- | | | |
|----|------------|------------------------|
| 1. | Councillor | Kim Broom |
| 2. | Councillor | Karen Davies |
| 3. | Councillor | Tyssul Evans |
| 4. | Councillor | Jean Lewis |
| 5. | Councillor | Emlyn Schiavone |
| 6. | Councillor | Gwyneth Thomas [Chair] |
| 7. | Councillor | Dorian Williams |

LABOUR GROUP – 4 MEMBERS

- | | | |
|----|------------|------------|
| 1. | Councillor | Rob Evans |
| 2. | Councillor | Amanda Fox |
| 3. | Councillor | Gary Jones |
| 4. | Councillor | Ken Lloyd |

INDEPENDENT GROUP – 2 MEMBERS

- | | | |
|----|------------|-------------------------------|
| 1. | Councillor | Sue Allen |
| 2. | Councillor | Ieuan Wyn Davies [Vice-Chair] |

NEW INDEPENDENT GROUP – 1 MEMBER

- | | | |
|----|------------|-----------------|
| 1. | Councillor | Louvain Roberts |
|----|------------|-----------------|

AGENDA

1. APOLOGIES FOR ABSENCE
2. DECLARATIONS OF PERSONAL INTERESTS INCLUDING ANY PARTY WHIPS ISSUED IN RELATION TO ANY AGENDA ITEM.
3. PUBLIC QUESTIONS (NONE RECEIVED)
4. ADULT SOCIAL CARE COMPLAINTS & COMPLIMENTS REPORT 1ST APRIL 2018 TO 31ST MARCH 2019 5 - 20
5. REVENUE & CAPITAL BUDGET MONITORING REPORT 2018/19 21 - 42
6. EXPLANATION FOR NON-SUBMISSION OF SCRUTINY REPORT 43 - 44
7. FORTHCOMING ITEMS 45 - 46
8. TO SIGN AS A CORRECT RECORD THE MINUTES OF THE MEETING HELD ON THE 17TH APRIL, 2019 47 - 54

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SOCIAL CARE & HEALTH SCRUTINY COMMITTEE 20TH MAY, 2019

ADULT SOCIAL CARE COMPLAINTS & COMPLIMENTS REPORT 1ST APRIL 2018 TO 31ST MARCH 2019

PURPOSE:

To enable members to exercise their scrutiny role in relation to the complaints and compliments received within Adult Social Care.

To consider and comment on the following issues:

The nature and number of complaints and compliments received in the Adult Social Care Team for the financial year 2018-19.

Reasons:

- To enable members to understand and review the complaints and compliments received and identify any areas of concern or good practice.
- To enable Members to exercise their scrutiny role in relation to compliments and complaints.

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

Name of Head of Service:

Neil Edwards

Report Author:

Silvana Sauro

Designations:

Interim Head of Integrated
Services

Performance, Analysis & Systems
Manager

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SOCIAL CARE & HEALTH SCRUTINY COMMITTEE

20TH MAY 2019

Adult Social Care Complaints & Compliments Report 1st April 2018 to 31st March 2019

With effect from 1 August 2014 revised legislation came into effect, bringing the Social Services complaints procedure into line with other complaints procedures across public services, in particular the process for NHS '*Putting Things Right*'. The Social Services Complaints Policy reflects the requirements of the new legislation and full details of the new policy. The legislation requires the reporting of additional information which has been incorporated into this report.

SC Adult Services are committed to ensuring that concerns raised are listened to and resolved quickly and efficiently. Lessons learned from this process are fed back to relevant teams and used wherever possible to improve future service delivery.

Our aim is to resolve complaints at the earliest opportunity and teams are encouraged to be proactive in achieving this goal.

The attached report sets out the Adult Social Care complaints and compliments that have been received for the 2018/19 financial year. The report summarises the number of complaints and compliments that have been received and provides information on the type of complaint and the service area relating to complaints and compliments.

DETAILED REPORT ATTACHED ?

YES

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: Neil Edwards, Interim Head of Integrated Services

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

1. Policy, Crime & Disorder and Equalities

The implementation of an effective complaints procedure supports the Feeling Fine theme of the Community Strategy as well as the building blocks of equalities and social inclusion in giving a voice to vulnerable service users. The findings of complaints investigations inform policy development and changes. The annual report includes recommendations for the further improvement of the complaints procedure.

2. Legal

The production of an annual social services complaints report is a statutory requirement.

3. Finance

The report has no immediate financial implications, although the full implementation of the recommendations in the report may have implications for further investment. The outcomes of complaints investigations contribute to the effective use of resources.

4. ICT

The complaints procedure is currently managed via the department's Carefirst database.

5. Risk Management Issues

The effective management of complaints contributes to the management of risk in highlighting areas where improvements are needed. Dealing effectively with complaints can also prevent further action by complainants e.g. referral to the Ombudsman or legal action.

7. Staffing Implications

The effective management of complaints requires the ongoing support and training of staff.

CONSULTATIONS

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

Signed: Neil Edwards, Interim Head of Integrated Services

1. Local Member(s)

Not applicable

2. Community / Town Council

Not applicable

3. Relevant Partners

Not applicable

4. Staff Side Representatives and other Organisations

The report will be made available to staff

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
Complaints records		Personal information not available for public inspection.

Department for Communities

Adult Social Care Complaints & Compliments Report

1st April 2018 – 31st March 2019

April 2019

Introduction

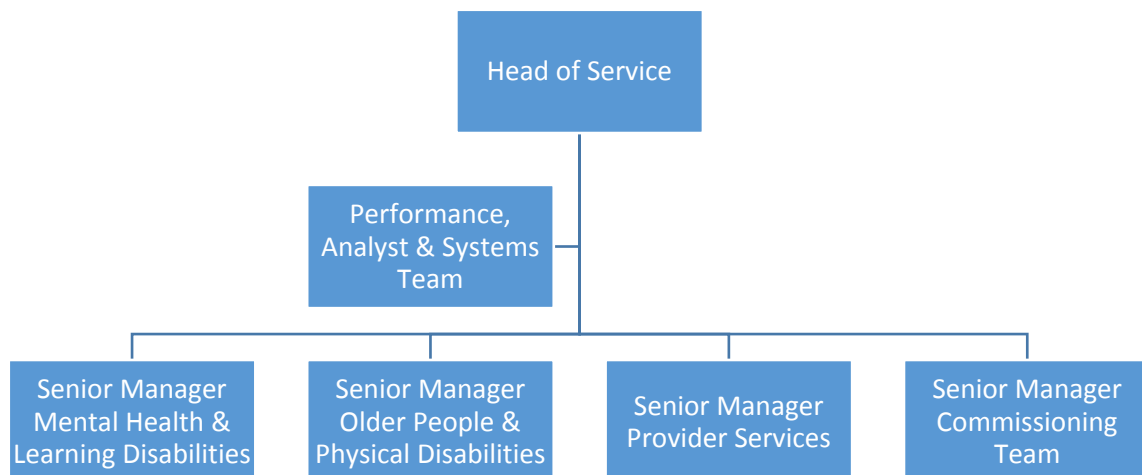
Carmarthenshire County Council welcomes complaints, compliments and comments as a way of improving service delivery. Complaints from customers are important to us and provide a valuable insight into the quality of the services we provide and commission.

The Council's Complaints and Compliments Policy was established on 1 August 2014 in accordance with The Social Services Complaints Procedure (Wales) Regulations 2014 and The Representations Procedure (Wales) Regulations 2014. This report provides a summary of the complaints received relating to Adult Social Services for the period 1st April 2018 to the 31st March 2019.

Service Improvement

As part of a recent re-structure, responsibility for Adult Social Care complaints transferred over to the Performance, Analyst & Systems Team within the Department of Communities. The transfer commenced on the 1st May 2017.

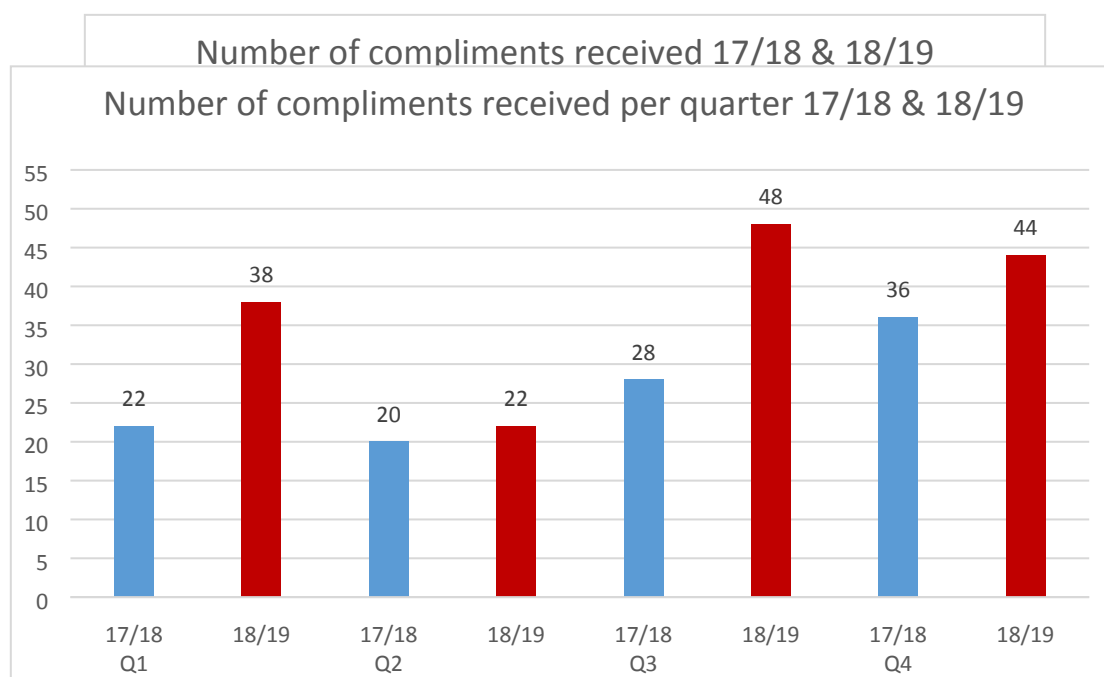
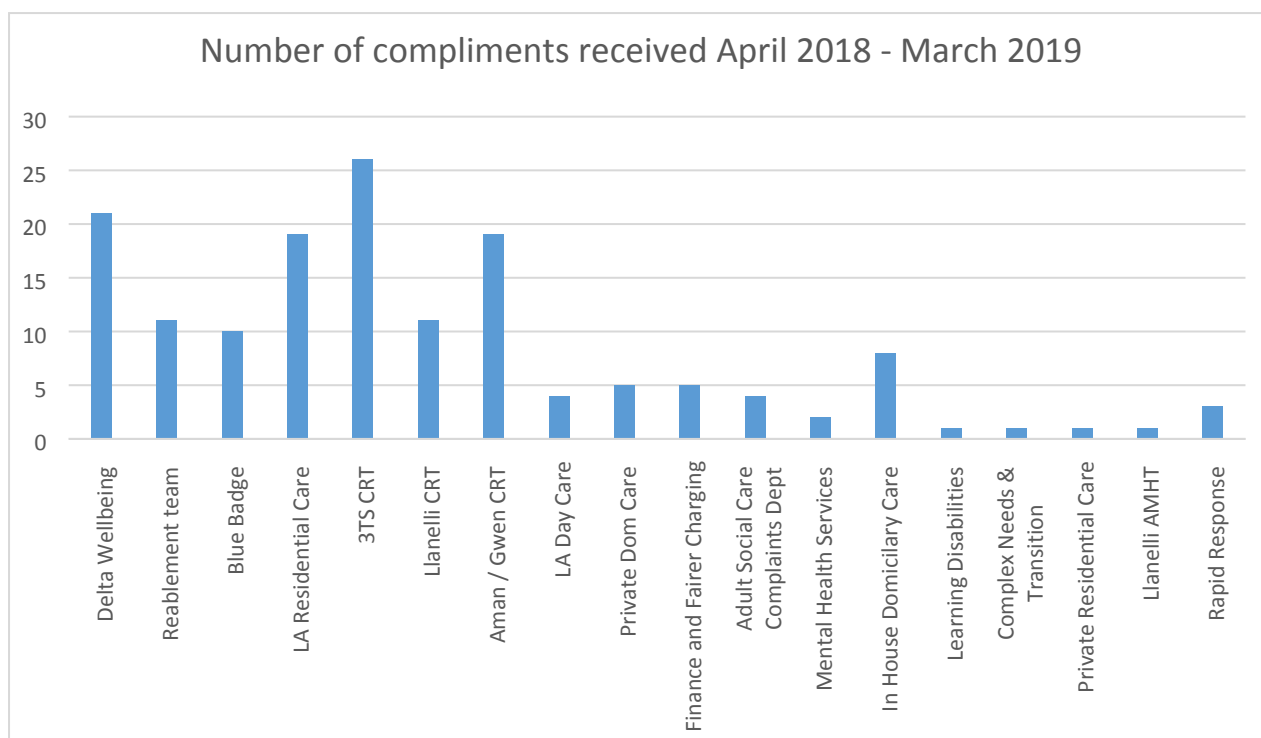
Governance Arrangements



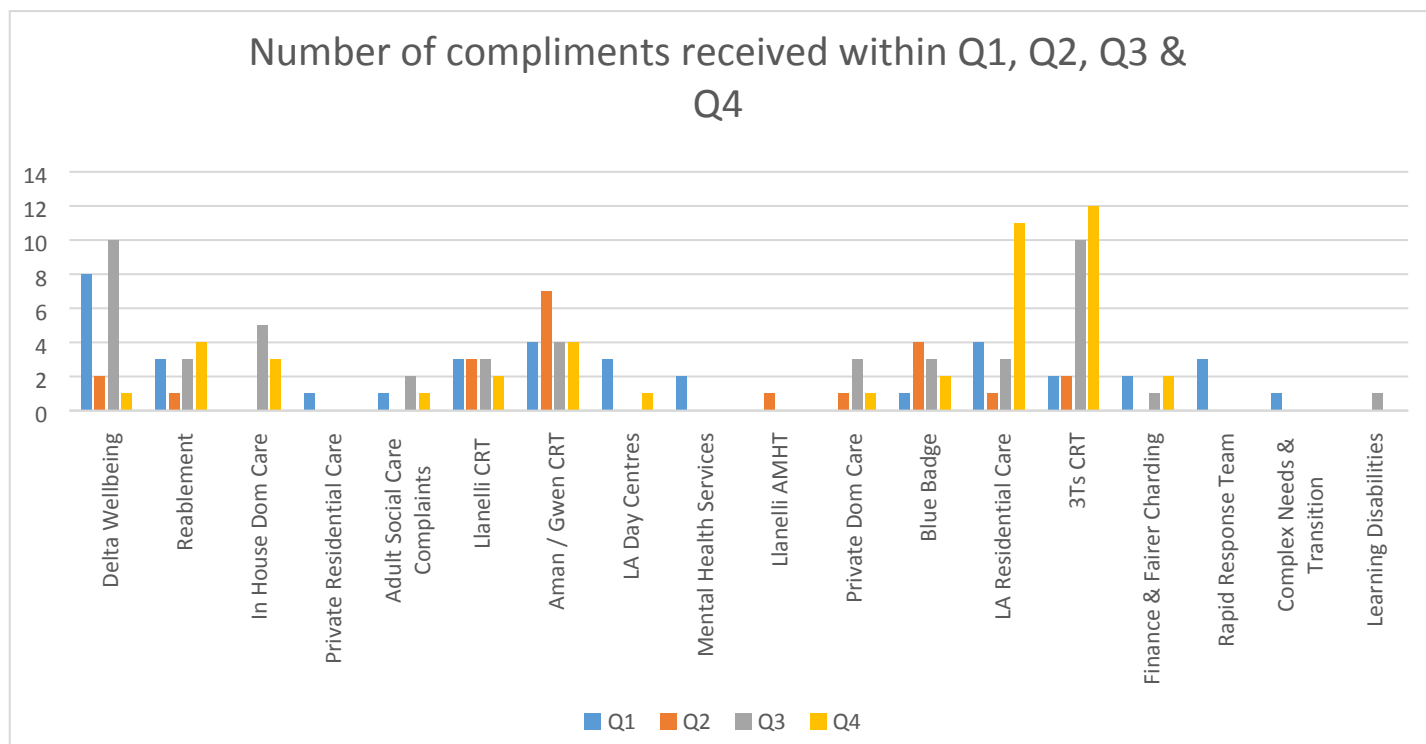
This report provides information on adult social care complaints and compliments for Q1 through to Q4 18/19. It provides a generally positive picture of the department's performance in the context of 5,556 individuals received a social care service from Carmarthenshire County Council during this period.

Compliments

A total of 152 Adult Social Care compliments were received throughout the year.



There has been an increase of 46 compliments when compared to the compliments received for the same period last year. The highest volume of compliments received are within the Community Resource Teams, Residential Care and Delta Wellbeing.



Examples of compliments

- Thank you ever so much Mark you have been extremely helpful. It is lovely to have spoken to someone who understands the situation.
- We would like to thank you for all your help and support with my father. We were able to keep him independent for as long as possible with your help. Yourself and your team have sometimes gone above and beyond what you need to do to help us. We really appreciate all the help we have received and can't thank you enough! Social services deserve much more praise considering outside circumstances at the moment. Thank you so much!
- I felt compelled to contact you to compliment you on your professionalism and efficiency in dealing with my complaint from 21st Dec 2018 onwards. As first point of contact for your department, I could not have asked for better. You were timely in your despatch of letters, and always polite and professional on the telephone. Thank you very much for making a difficult situation so much easier

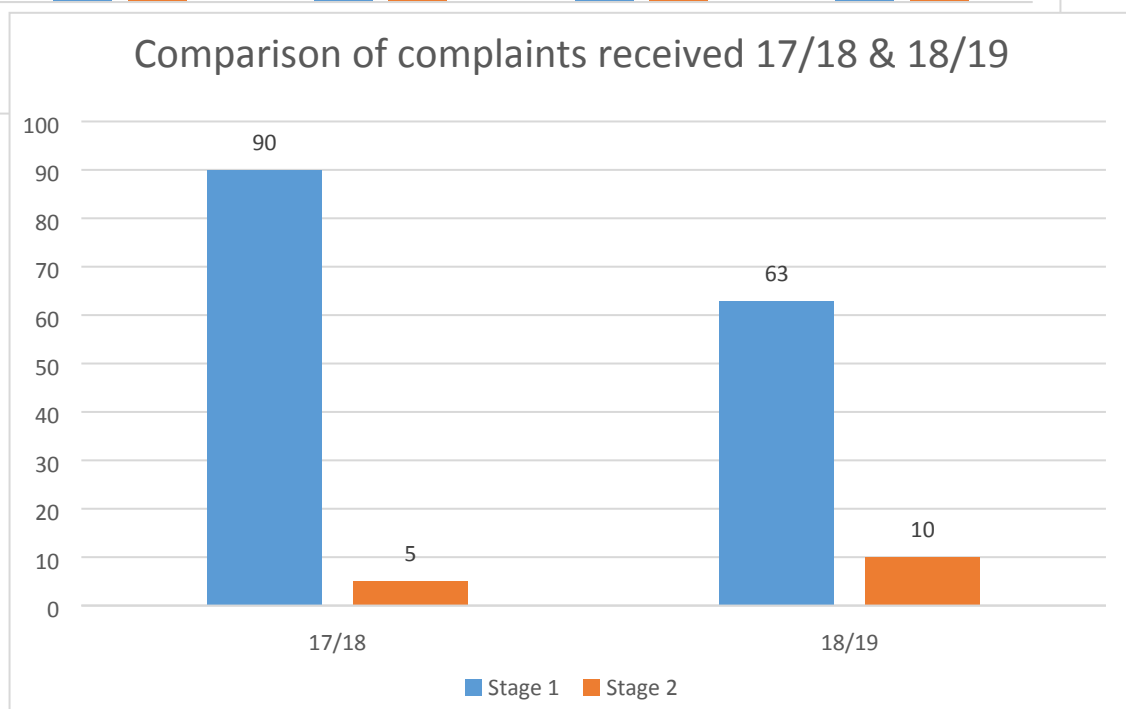
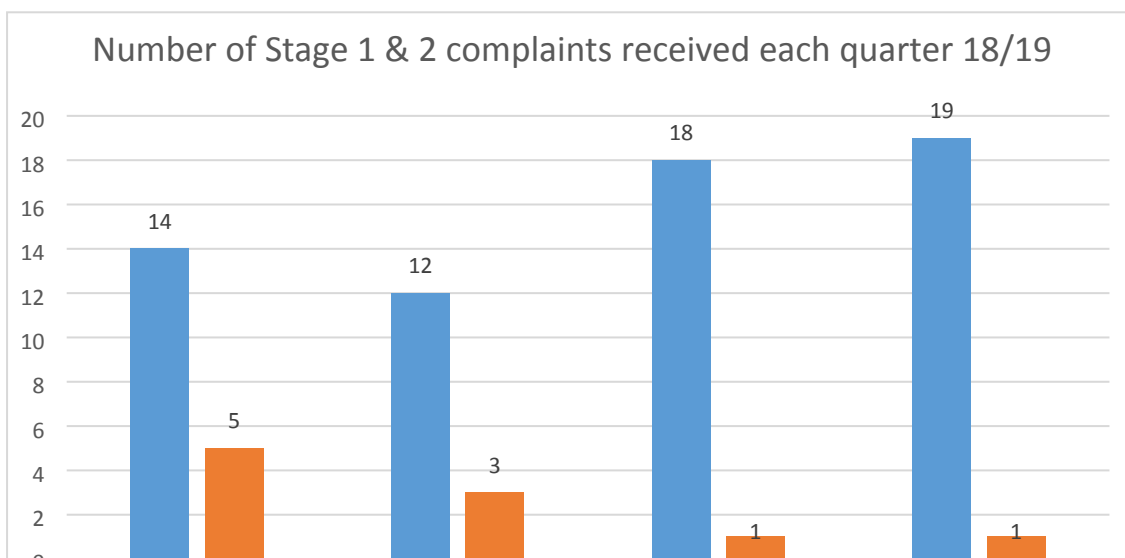
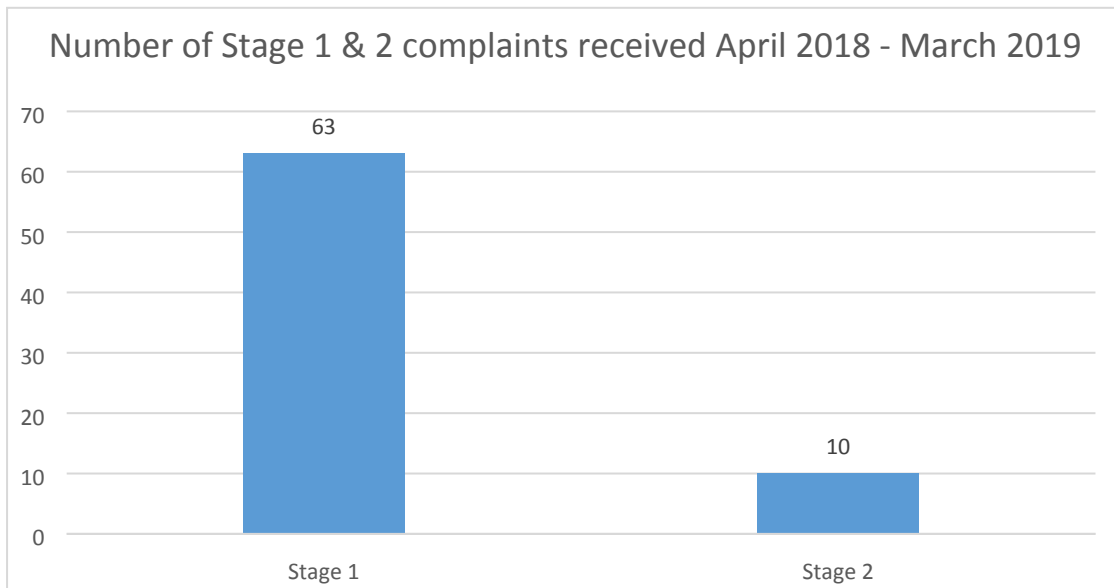
- I just want to let you know that I'm so grateful for everything that your company has done for me. And the girls that have been coming out to me have been so fab and great and I'm going to miss them.
- Diolch o galon am dy help a'th gefnogaeth drwy gyfnod hunllefus i ni
- I feel I must extend my gratitude and appreciation to Sarah who has provided support and guidance to a close family member who recently returned home after a hospital stay. She has been supportive to us as a family at a difficult time, being flexible and providing ongoing information regarding support and help from the Red Cross etc.
- I would like to take this opportunity to thank ALL the ladies who cared for my wife during enablement period following a long period of hospitalisation. My wife, I'm pleased to say is doing well at the moment. Much of her progress was instigated by the devotion shown by the CCC carers and I again thank you for this invaluable service.

Complaints

Summary

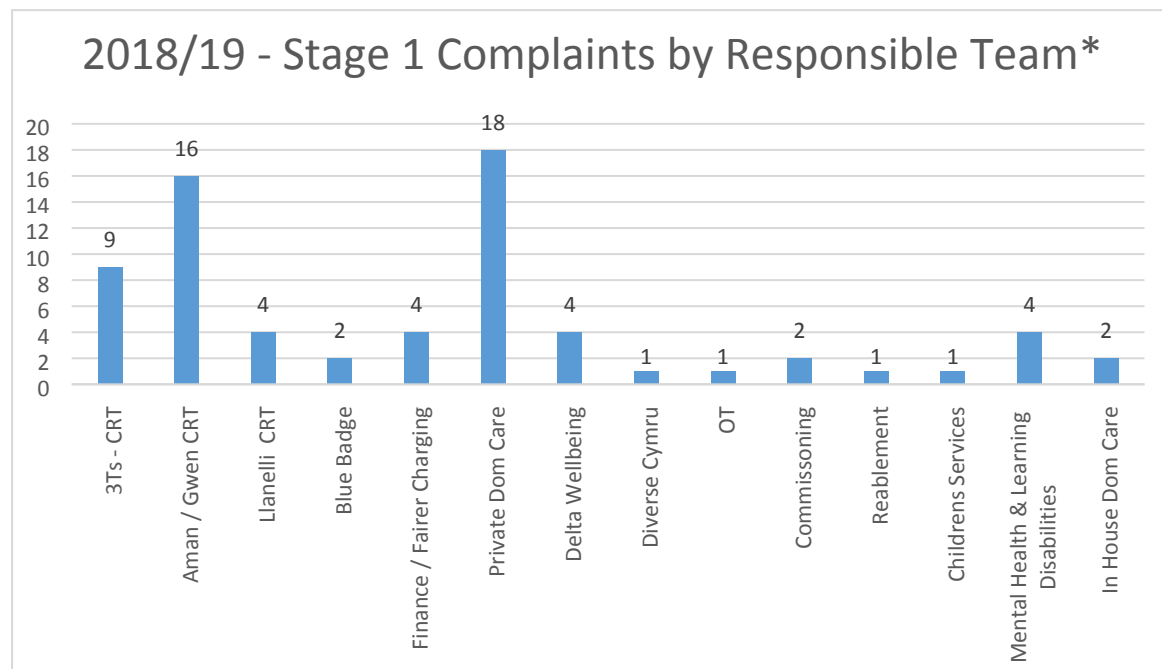
A total of 73 complaints were recorded at either Stage 1 or 2 in relation to Adult Social Care 18/19. This means that 1.3% of individuals complained about the service they received.

- 63 of the Adult Social Care complaints were investigated at the local resolution Stage 1.
- 10 were recorded under the formal investigation of Stage 2
- A further 60 complaints were dealt with by the department and recorded either as Redirects, No Further Action or on hold pending safeguarding.



There has been a decrease in the number of Stage 1 complaints being dealt with by the department when compared to the same period last year. However the department has seen an increase of double the number of Stage 2 complaints.

Complaint by Responsible Team

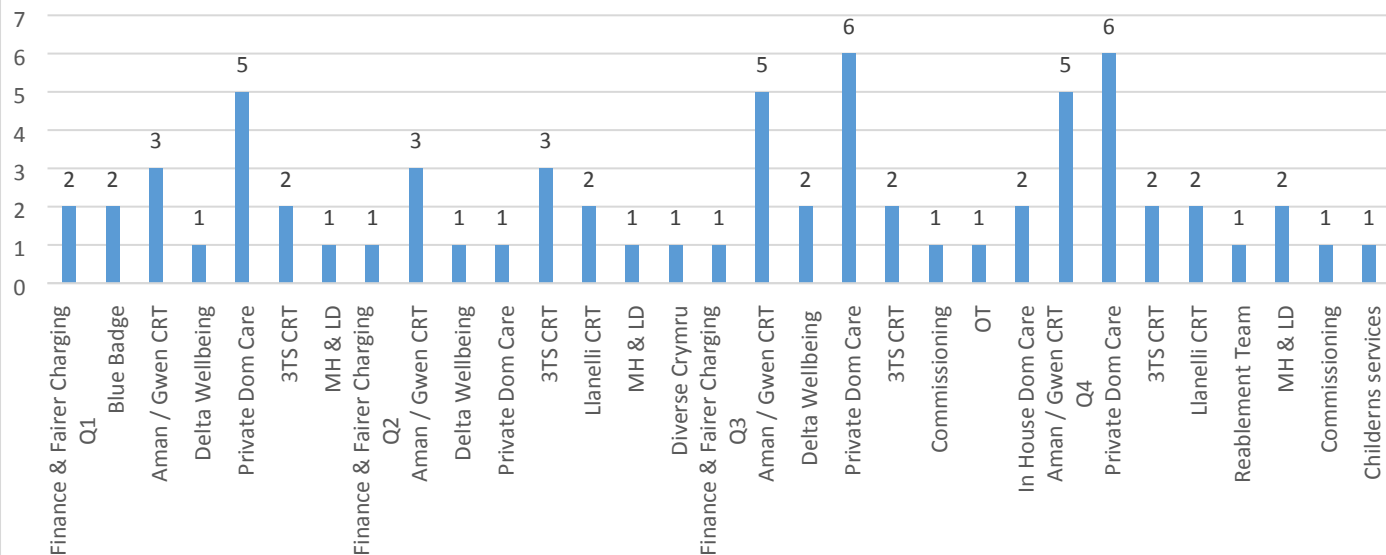


*Please note that a complaint could cover more than one area

Examples of Stage 1 Complaints

- Complaint about lack of support in regards to financial assessment and advise for family
- Poor standard of care that has been provided by Private Dom Care provider, including carers turning up late/no apology given for turning up late and the number of different carers that her mother receives.
- Length of time that he has been placed in the care home
- The length of time her transition assessment from Neath Port Talbot to Carmarthenshire has taken.
- Feels that her mother has been neglected by Social Services.

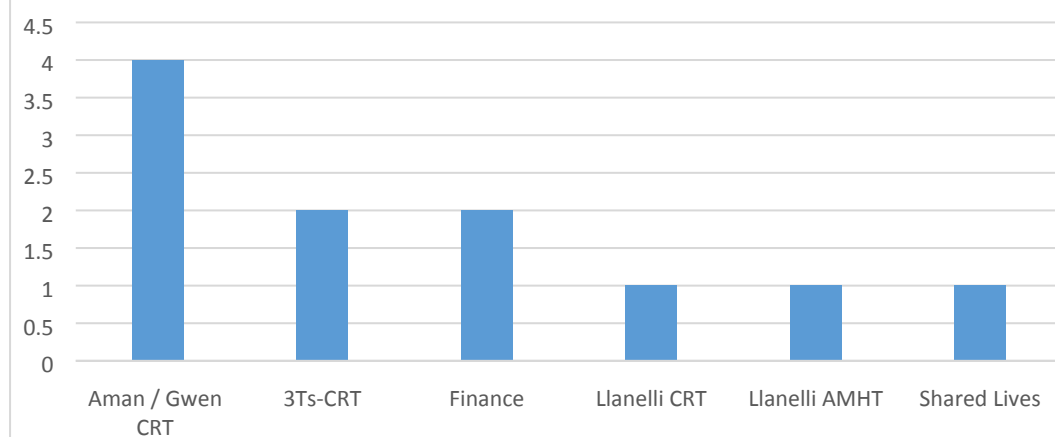
2018/19 - Stage 1 Complaints by Responsible Team breakdown per quarter*



***Please note that a complaint could cover more than one area**

In three out of the four quarters, Private Domiciliary Care have received the highest number of complaints.

2018/19 - Stage 2 Complaints by Responsible Team*



***Please note that a complaint could cover more than one area**

Examples of Stage 2 complaints

- Unprofessionalism of social work staff including
 - failure to provide an advocate
 - aligned/prioritised towards siblings
 - failed in the duty of care
 - replies have been abrupt and unprofessional
 - adult services have been very unsympathetic and not very helpful
- The complaint relates to the lack of information (or no information) provided by the Social Worker for temporary placement at Care Home.
- Lack of support by Carms SS Dept since her move to Carmarthenshire.

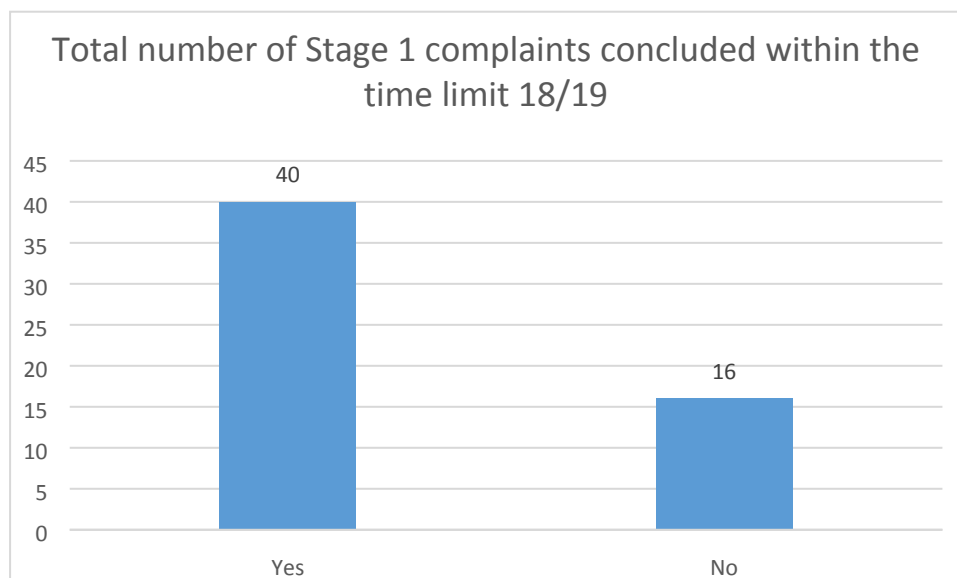
Complaints budget

The Stage 2 complaints budget for the 18/19 financial year is £13,618. There has been a total of £22,772.80 spent with two complaints currently ongoing. The department is dealing with increasingly complex complaints and as a result there are more Stage 2 investigations which are taking longer to complete.

Complaints that have been concluded

At the end of Quarter 4 we have closed a total of 56 Stage 1 complaints. There were a total of 10 ongoing cases as of 3rd April 2019, these include complaints regarding external care providers or complaints that have been put on hold due to a safeguarding issue.

Response to complaints within statutory time-scales

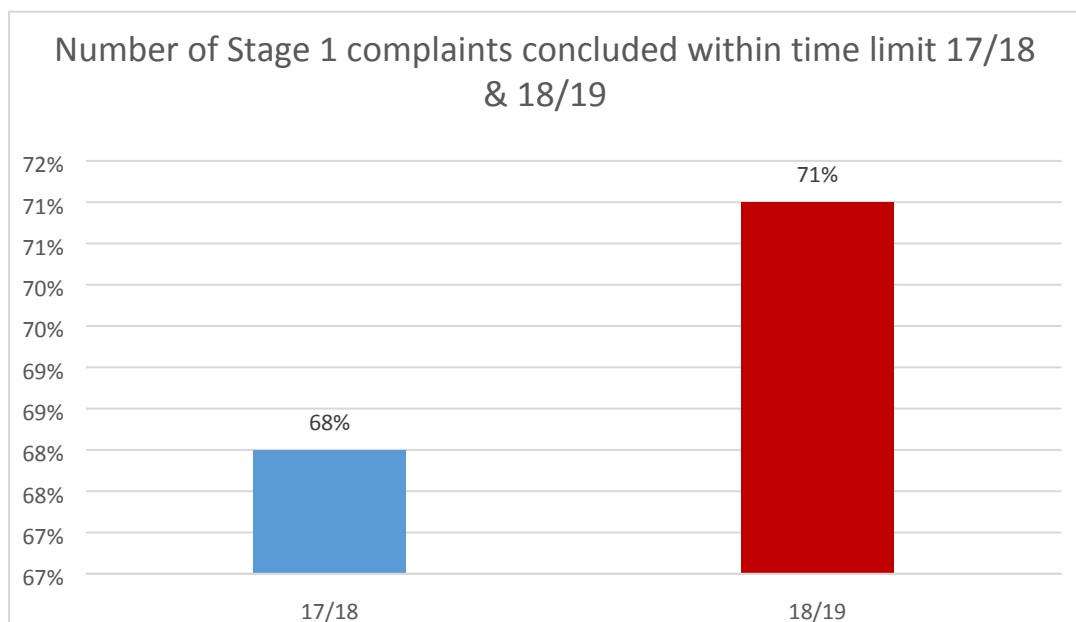


The statutory timescales for all Stage 1 complaints (local resolution stage) is 10 working days from the date that the complaint is acknowledged. This timescale may only be extended in exceptional circumstances with the agreement of the complainant.

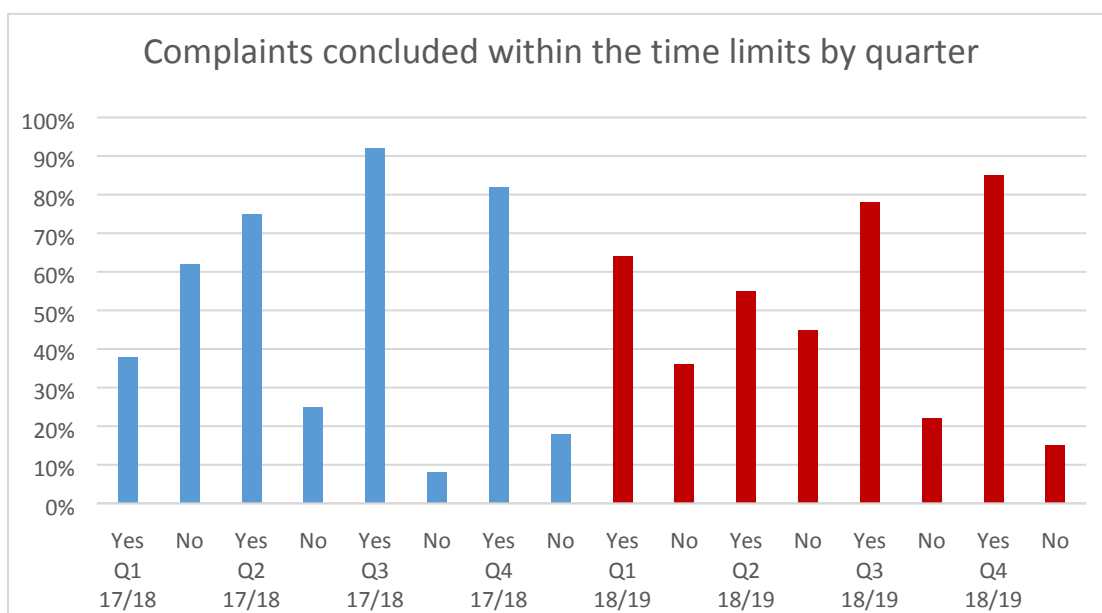
Of the 56 Stage 1 complaints that have been concluded, the number concluded on time was 40 and the number not concluded on time was 16. A small number of complaints were delayed due to un-foreseen circumstances. For example the complainants were unable to meet the investigating officer until after the 10 working days had passed.

We had a few instances where the investigating officer requested an extension to the complaint as they needed more time to investigate the complaint. These extensions were approved by the complainant. There have also been issues in achieving the 10 day target date when a complaint is forwarded to private care providers to investigate

It must be noted that complaints can often be complex, requiring multi-agency co-operation to resolve the complaint. Complaints regularly require lengthy investigations including information gathering, setting up of meetings and action plan agreements.

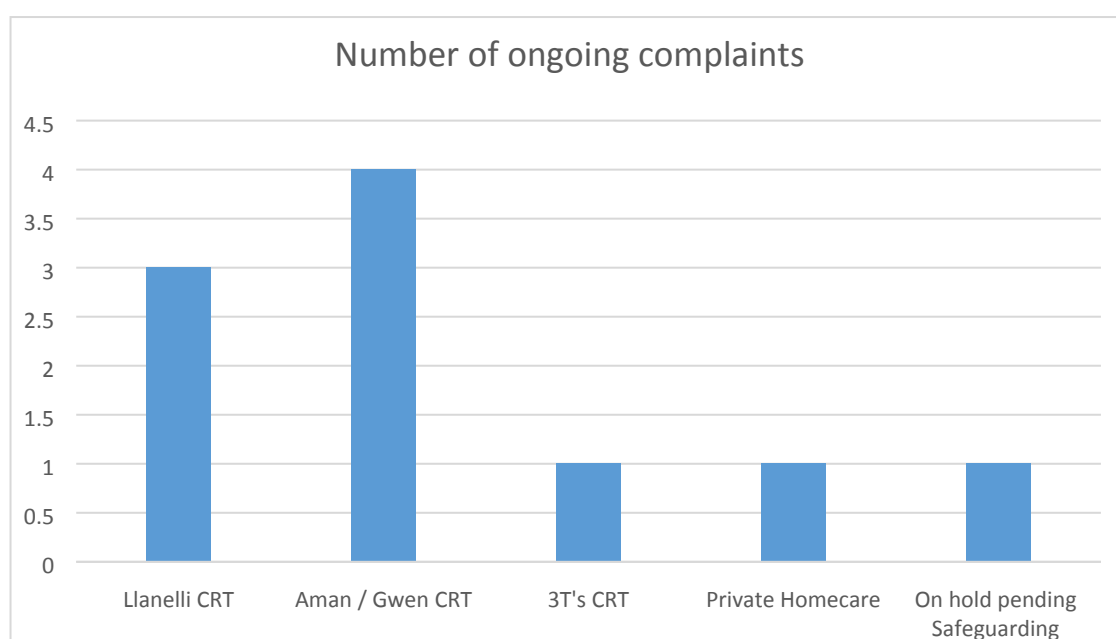


Overall, 71% of Stage 1 complaints were concluded within the timescale, this is a positive increase compared to the same period last year 17/18.



The proportion of complaints that are resolved within the statutory time scale has improved throughout the year.

Ongoing complaints



There are currently 10 complaints open to the Adult Social Care complaints team. 7 complaints are being investigated at Stage 1, 2 complaints are currently being investigated by an Independent Investigator under Stage 2 and 1 complaint is on hold pending safeguarding.

SOCIAL CARE & HEALTH SCRUTINY COMMITTEE 20th MAY 2019

Revenue & Capital Budget Monitoring Report 2018/19

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 28th February 2019, in respect of 2018-19.

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 Director: Chris Moore	Director of Corporate Services	01267 224120 CMoore@carmarthenshire.gov.uk
Report Author: Chris Moore		

EXECUTIVE SUMMARY

**SOCIAL CARE & HEALTH SCRUTINY
COMMITTEE
20th MAY 2019**

**Revenue & Capital Budget
Monitoring Report 2018/19**

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 £760k overspend.

Appendix B

Report on Main Variances on agreed budgets.

Appendix C

Detailed variances for information purposes only.

Capital Budgets

Appendix D

Details the main variances, which shows a forecasted net spend of £380k compared with a working net budget of £444k giving a -£64k variance. The variance will be incorporated into future year's budgets.

Appendix E

Details a full list of schemes.

Savings Monitoring

Appendix F

The savings monitoring report.

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: **Chris Moore** Director of Corporate Services

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 £760k.

Capital – The capital programme shows a net variance of **-£64k** against the 2018/19 approved budget.

Savings Report

The expectation is that at year end £155k of Managerial savings put forward for 2018-19 will not have been delivered however Policy savings are projected to be on target

CONSULTATIONS

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

Signed: **Chris Moore** Director of Corporate 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
2018/19 Budget	Corporate Services Department, County Hall, Carmarthen

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Social Care & Health Scrutiny Report
Budget Monitoring as at 28th February 2019 - Summary

Division	Working Budget				Forecasted				Feb 2019 Forecasted Variance for Year £'000	Dec 2018 Forecasted Variance for Year £'000
	Expenditure £'000	Income £'000	Net non- controllable £'000	Net £'000	Expenditure £'000	Income £'000	Net non- controllable £'000	Net £'000		
Adult Services										
Older People	56,802	-22,719	2,655	36,739	57,259	-22,856	2,655	37,059	320	309
Physical Disabilities	6,955	-1,364	208	5,799	7,116	-1,466	208	5,857	58	85
Learning Disabilities	37,017	-9,801	1,308	28,524	37,601	-10,111	1,308	28,798	274	316
Mental Health	9,258	-3,368	234	6,124	9,517	-3,628	234	6,123	-1	151
Support	6,107	-2,727	985	4,364	6,190	-2,702	985	4,473	108	69
GRAND TOTAL	116,139	-39,979	5,390	81,550	117,684	-40,763	5,389	82,310	760	930

Social Care & Health Scrutiny Report

Budget Monitoring as at 28th February 2019 - Main Variances

Page 26

Division	Working Budget		Forecasted		Feb 2019 Forecasted Variance for Year £'000	Notes	Dec 2018 Forecasted Variance for Year £'000
	Expenditure £'000	Income £'000	Expenditure £'000	Income £'000			
Adult Services							
Older People							
Older People - Commissioning	3,541	-596	3,376	-636	-205	Staff vacancies in care management teams approx 6%: equivalent to 0.33FTE Approved Mental Health Practitioner (£14k) - left post during year; 0.86 Care Management Assistant (16k) 2 staff left post during year; 1.8FTE Domiciliary Support Workers (£42k); 0.8FTE Domiciliary Care Support Worker - Therapy Support (£19k) staff transferred to other posts in CCC; £22k Rehabilitation Officer maternity leave; 1.7FTE Social Workers (£71k) 4 currently vacant; £7 staff travelling in Llanelli Community Resource Team linked to use of pool car	-118
Older People - LA Homes	7,347	-4,436	7,449	-4,436	102	Cost of agency staff due to workforce recruitment issues in parts of the county.	67
Older People - Private/ Vol Homes	21,579	-11,897	22,099	-12,100	317	Performance data shows increased demographic pressure on demand in line with national information that shows a year on year increase in Older People of 3.4%pa. Preventative work continues to be reviewed to mitigate the effects of this.	338
Older People - LA Home Care	6,153	-544	6,241	-540	92	Significant change since October position: Allied contract now provided by in-house Domiciliary Care service. This is offset by a decrease in packages bought in the private sector, however overall across Domiciliary Care, the growing number of Older People at 3.4% pa continues to put pressure on the budget.	-20
Older People - MOW's	195	-50	127	-50	-68	Withdrawal of the WRVS service	0
Older People - Private Home Care	9,732	-2,164	9,913	-2,126	219	There has been a significant increase in demand for domiciliary care that has only been partly offset by a fall in residential care placements. There is significant departmental work to monitor and manage demand by audit assessment practice and by continuing to promote independent living through Integrated Care Fund initiatives such as Releasing Time to Care resulting in lower demand eg for double handed care packages. We are currently reviewing whether this initiative requires additional resources to yield the necessary financial savings.	331
Older People - Enablement	2,165	-586	1,845	-444	-177	Significant change since October monitoring report: Allied contract now provided by in-house Domiciliary Care Service	-118
Older People - Day Services	1,115	-71	1,155	-75	35	Staff vacancies - recruitment and strategic issues being addressed.	-39
Physical Disabilities						Outstanding unmet efficiency relating to in house Day services provision from 2016-2017 £202k offset by lower spend in remaining in-house provision and placements.	

Social Care & Health Scrutiny Report

Budget Monitoring as at 28th February 2019 - Main Variances

Division	Working Budget		Forecasted		Feb 2019	Notes	Dec 2018
	Expenditure £'000	Income £'000	Expenditure £'000	Income £'000	Forecasted Variance for Year £'000		Forecasted Variance for Year £'000
Phys Dis - Commissioning & OT Services	575	-81	478	-80	-95	Vacancies within the Occupational Therapy Team - being addressed	-65
Phys Dis - Private/Vol Homes	589	-66	741	-169	49	Performance data shows pressure on demand as complexity of placement increases with this client group. Preventative work continues to be reviewed to mitigate the effects of this.	45
Phys Dis - Group Homes/Supported Living	1,239	-160	1,193	-160	-46	Costs increasing as a result of successful deregistration of residential beds - promotes independence for clients and has lower costs overall across the spectrum to packages of care. However increasing complexity of client needs continues to put pressure on this budget.	-34
Phys Dis - Direct Payments	2,282	-555	2,452	-555	170	Direct Payments increasing across client groups linked to promoting independence and cost avoidance.	165
Learning Disabilities							
Learn Dis - Employment & Training	1,838	-483	1,767	-274	138	Workchoice project decommissioned - was projected to contribute net income to budget therefore project termination has a detrimental effect in year of £132k	151
Learn Dis - Private/Vol Homes	9,759	-2,733	10,119	-3,276	-183	Costs reducing as various projects begin to take effect: work on alternative provision, deregistration, Positive Behaviour Service intervention for additional hours etc.	-167
Learn Dis - Direct Payments	2,167	-526	2,399	-526	232	Direct Payments increasing across client groups linked to promoting independence and cost avoidance.	236
Learn Dis - Group Homes/Supported Living	8,604	-2,158	8,930	-2,257	226	Costs increasing as a result of successful deregistration of residential beds - promotes independence for clients and has lower costs overall across the spectrum to packages of care	261
Learn Dis - Adult Respite Care	914	-812	866	-812	-48	Vacant Manager post, several staff not in pension scheme.	-110
Mental Health							
Mental Health - Private/Vol Homes	6,105	-2,573	6,309	-2,816	-39	Work continuing to promote independent living and reduce cost of care packages accordingly. Client group difficult to forecast costs as demand led at short notice; forecasts are based on existing levels of packages and work is ongoing to develop alternative provision options	71
Mental Health - Group Homes/Supported Living	876	-397	1,023	-420	125	Work continuing to promote independent living and reduce cost of care packages accordingly. Client group difficult to forecast costs as demand led at short notice; forecasts are based on existing levels of packages and work is ongoing to develop alternative provision options	134

Social Care & Health Scrutiny Report
Budget Monitoring as at 28th February 2019 - Main Variances

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Division	Working Budget		Forecasted		Feb 2019	Notes	Dec 2018
	Expenditure £'000	Income £'000	Expenditure £'000	Income £'000	Forecasted Variance for Year £'000		Forecasted Variance for Year £'000
Support							
Adult Safeguarding & Commissioning Team	1,232	-21	1,272	0	61	Professional fees re Deprivation of Liberty Standards (DoLS) caseload	63
Other Variances - Adult Services					-146		-263
Grand Total					760		930

Social Care & Health Scrutiny Report
Budget Monitoring as at 28th February 2019 - Detail Monitoring

Division	Working Budget				Forecasted				Feb 2019 Forecasted Variance for Year £'000	Notes	Dec 2018 Forecasted Variance for Year £'000
	Expenditure £'000	Income £'000	Net non- controllable £'000	Net £'000	Expenditure £'000	Income £'000	Net non- controllable £'000	Net £'000			
Adult Services											
Older People											
Older People - Commissioning	3,541	-596	454	3,399	3,376	-636	454	3,194	-205	Staff vacancies in care management teams approx 6%: equivalent to 0.33FTE Approved Mental Health Practitioner (£14k) - left post during year; 0.86 Care Management Assistant (16k) 2 staff left post during year; 1.8FTE Domiciliary Support Workers (£42k); 0.8FTE Domiciliary Care Support Worker - Therapy Support (£19k) staff transferred to other posts in CCC; £22k Rehabilitation Officer maternity leave; 1.7FTE Social Workers (£71k) 4 currently vacant; £7 staff travelling in Llanelli Community Resource Team linked to use of pool car	-118
Older People - LA Homes	7,347	-4,436	925	3,837	7,449	-4,436	925	3,938	102	Cost of agency staff due to workforce recruitment issues in parts of the county.	67
Older People - Supported Living	91	0	0	91	91	0	0	91	0		0
Older People - Private/ Vol Homes	21,579	-11,897	246	9,928	22,099	-12,100	246	10,245	317	Performance data shows increased demographic pressure on demand in line with national information that shows a year on year increase in Older People of 3.4%pa. Preventative work continues to be reviewed to mitigate the effects of this.	338
Older People - Private Day Care	27	0	0	27	27	0	0	27	0		-5
Older People - Extra Care	755	0	10	765	755	0	10	765	-0		0
Older People - LA Home Care	6,153	-544	386	5,995	6,241	-540	386	6,087	92	Significant change since October position: Allied contract now provided by in-house Domiciliary Care service. This is offset by a decrease in packages bought in the private sector, however overall across Domiciliary Care, the growing number of Older People at 3.4% pa continues to put pressure on the budget.	-20
Older People - MOW's	195	-50	16	161	127	-50	16	93	-68	Withdrawal of the WRVS service	0
Older People - Direct Payments	1,156	-287	4	872	1,237	-359	4	882	10	Direct Payments increasing across client groups linked to promoting independence and cost avoidance.	-1
Older People - Grants	411	-202	12	221	398	-193	12	216	-5		-0

Social Care & Health Scrutiny Report
Budget Monitoring as at 28th February 2019 - Detail Monitoring

Page 30 Division	Working Budget				Forecasted				Feb 2019 Forecasted Variance for Year £'000	Notes	Dec 2018 Forecasted Variance for Year £'000
	Expenditure £'000	Income £'000	Net non- controllable £'000	Net £'000	Expenditure £'000	Income £'000	Net non- controllable £'000	Net £'000			
Older People - Private Home Care	9,732	-2,164	110	7,678	9,913	-2,126	110	7,897	219	There has been a significant increase in demand for domiciliary care that has only been partly offset by a fall in residential care placements. There is significant departmental work to monitor and manage demand by audit assessment practice and by continuing to promote independent living through Integrated Care Fund initiatives such as Releasing Time to Care resulting in lower demand eg for double handed care packages. We are currently reviewing whether this initiative requires additional resources to yield the necessary financial savings. Significant change since October monitoring report: Allied contract now provided by in-house Domiciliary Care Service	331
Older People - Ssmss	905	-168	187	924	916	-179	187	924	0	Vacant posts and supplies & services	-125
Older People - Careline	1,630	-1,719	101	12	1,630	-1,719	101	12	-0		-0
Older People - Enablement	2,165	-586	108	1,687	1,845	-444	108	1,510	-177	Staff vacancies - recruitment and strategic issues being addressed.	-118
Older People - Day Services	1,115	-71	97	1,142	1,155	-75	97	1,177	35	Outstanding unmet efficiency relating to in house Day services provision from 2016-2017 £202k offset by lower spend in remaining in-house provision and placements.	-39
Older People Total	56,802	-22,719	2,655	36,739	57,259	-22,856	2,655	37,059	320		309
Physical Disabilities											
Phys Dis - Commissioning & OT Services	575	-81	42	536	478	-80	42	441	-95	Vacancies within the Occupational Therapy Team - being addressed	-65
Phys Dis - Private/Vol Homes	589	-66	6	530	741	-169	6	579	49	Performance data shows pressure on demand as complexity of placement increases with this client group. Preventative work continues to be reviewed to mitigate the effects of this.	45
Phys Dis - Group Homes/Supported Living	1,239	-160	24	1,103	1,193	-160	24	1,057	-46	Costs increasing as a result of successful deregistration of residential beds - promotes independence for clients and has lower costs overall across the spectrum to packages of care. However increasing complexity of client needs continues to put pressure on this budget.	-34
Phys Dis - Community Support	179	0	1	180	166	0	1	167	-13		-20
Phys Dis - Private Home Care	291	-85	0	206	291	-85	0	206	0		0
Phys Dis - Aids & Equipment	968	-397	123	694	962	-397	123	688	-6		0
Phys Dis - Grants	171	-20	0	151	171	-20	0	151	-0		0
Phys Dis - Direct Payments	2,282	-555	11	1,737	2,452	-555	11	1,908	170	Direct Payments increasing across client groups linked to promoting independence and cost avoidance.	165
Phys Dis - Manual Handling	4	0	0	4	4	0	0	4	-0		-7
Phys Dis - Independent Living Fund	658	0	0	658	658	0	0	658	-0		-0
Physical Disabilities Total	6,955	-1,364	208	5,799	7,116	-1,466	208	5,857	58		85

Social Care & Health Scrutiny Report
Budget Monitoring as at 28th February 2019 - Detail Monitoring

Division	Working Budget				Forecasted				Feb 2019 Forecasted Variance for Year £'000	Notes	Dec 2018 Forecasted Variance for Year £'000
	Expenditure £'000	Income £'000	Net non- controllable £'000	Net £'000	Expenditure £'000	Income £'000	Net non- controllable £'000	Net £'000			
Learning Disabilities											
Learn Dis - Employment & Training	1,838	-483	371	1,726	1,767	-274	371	1,864	138	Workchoice project decommissioned - was projected to contribute net income to budget therefore project termination has a detrimental effect in year of £132k	151
Learn Dis - Commissioning	906	0	113	1,019	870	0	113	982	-37		-41
Learn Dis - Private/Vol Homes	9,759	-2,733	82	7,108	10,119	-3,276	82	6,925	-183	Costs reducing as various projects begin to take effect: work on alternative provision, deregistration, Positive Behaviour Service intervention for additional hours etc.	-167
Learn Dis - Direct Payments	2,167	-526	0	1,641	2,399	-526	0	1,873	232	Direct Payments increasing across client groups linked to promoting independence and cost avoidance.	236
Learn Dis - Group Homes/Supported Living	8,604	-2,158	46	6,492	8,930	-2,257	46	6,718	226	Costs increasing as a result of successful deregistration of residential beds - promotes independence for clients and has lower costs overall across the spectrum to packages of care	261
Learn Dis - Adult Respite Care	914	-812	110	212	866	-812	110	164	-48	Vacant Manager post, several staff not in pension scheme.	-110
Learn Dis - Home Care Service	270	-148	0	122	270	-148	0	122	-0		1
Learn Dis - Day Services	3,717	-468	376	3,625	3,643	-429	376	3,590	-35		14
Learn Dis - Transition Service	519	0	85	604	507	0	85	592	-13		-26
Learn Dis - Community Support	2,238	-154	17	2,101	2,250	-165	17	2,102	1		-2
Learn Dis - Grants	295	-25	3	273	295	-25	3	273	0		0
Learn Dis - Adult Placement/Shared Lives	2,965	-2,294	60	731	2,864	-2,200	60	725	-6		1
Learn Dis/M Health - Ssmss	349	0	45	394	345	0	45	390	-4		-3
Learn Dis - Independent Living Fund	2,477	0	0	2,477	2,477	0	0	2,477	0		0
Learning Disabilities Total	37,017	-9,801	1,308	28,524	37,601	-10,111	1,308	28,798	274		316

Social Care & Health Scrutiny Report
Budget Monitoring as at 28th February 2019 - Detail Monitoring

Page 32	Division	Working Budget				Forecasted				Feb 2019 Forecasted Variance for Year £'000	Notes	Dec 2018 Forecasted Variance for Year £'000
		Expenditure	Income	Net non- controllable	Net	Expenditure	Income	Net non- controllable	Net			
		£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000			
	Mental Health											
	M Health - Commissioning	837	-69	70	838	825	-69	70	826	-12		-17
	M Health - Private/Vol Homes	6,105	-2,573	51	3,583	6,309	-2,816	51	3,544	-39	Work continuing to promote independent living and reduce cost of care packages accordingly. Client group difficult to forecast costs as demand led at short notice; forecasts are based on existing levels of packages and work is ongoing to develop alternative provision options	71
	M Health - Private/Vol Homes (Substance Misuse)	136	-32	0	105	136	-32	0	105	-0		0
	M Health - Group Homes/Supported Living	876	-397	4	482	1,023	-420	4	607	125	Work continuing to promote independent living and reduce cost of care packages accordingly. Client group difficult to forecast costs as demand led at short notice; forecasts are based on existing levels of packages and work is ongoing to develop alternative provision options	134
	M Health - Direct Payments	141	-42	1	100	142	-42	1	101	1		11
	M Health - Community Support	542	-85	9	465	496	-85	9	419	-46		-22
	M Health - Day Services	225	-10	49	264	219	-3	49	265	1		14
	M Health - Private Home Care	79	-27	0	53	79	-27	0	53	-0		0
	M Health - Substance Misuse Team	317	-132	50	235	288	-134	50	204	-31		-40
	Mental Health Total	9,258	-3,368	234	6,124	9,517	-3,628	234	6,123	-1		151
	Support											
	Departmental Support	2,037	-216	698	2,519	2,079	-216	698	2,562	43		6
	Performance, Analysis & Systems	295	-42	51	304	289	-37	51	303	-2		0
	Adult Safeguarding & Commissioning Team	1,232	-21	130	1,341	1,272	0	130	1,402	61	Professional fees re Deprivation of Liberty Standards (DoLS) caseload	63
	Regional Collaborative	1,044	-810	18	252	1,044	-810	18	252	-0		-0
	Holding Acc-Transport	1,499	-1,638	88	-51	1,506	-1,639	88	-45	6		0
	Support Total	6,107	-2,727	985	4,364	6,190	-2,702	985	4,473	108		69
	TOTAL FOR SOCIAL CARE & HEALTH SERVICE	116,139	-39,979	5,390	81,550	117,684	-40,763	5,389	82,310	760		930

Capital Programme 2018/19						
Capital Budget Monitoring - Report for February 2019 - Main Variances						
	Working Budget			Forecasted		
	Expenditure £'000	Income £'000	Net £'000	Expenditure £'000	Income £'000	Net £'000
DEPARTMENT/SCHEMES						
COMMUNITIES						
- Social Care	1,141	-697	444	836	-456	380
Learning Disabilities Developments	80	0	80	9	0	9
Other Projects with Minor Variances	1,061	-697	364	827	-456	371

Variance for Year £'000
-64
-71
7

Comment
Slight day in delivering project to enhance service delivery at a Day Service establishment in Llanelli. To commence early 2019/20.

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Social Care**Capital Budget Monitoring - Scrutiny Report for February 2019 - Detailed Variances**

		Working Budget			Forecasted		
Scheme	Target Date for Completion	Expenditure £'000	Income £'000	Net £'000	Expenditure £'000	Income £'000	Net £'000
Swansea Bay City Region Projects	Ongoing	24	0	24	29	0	29
Swansea Bay City Region - Older People's Accommodation (including Llanelli Area)		24	0	24	29	0	29
Learning Disabilities Accommodation Developments	Mar-20	80	0	80	9	0	9
Learning Disabilities Developments		80	0	80	9	0	9
Extra Care Schemes		340	0	340	342	0	342
Cartref Cynnes Development Carmarthen	Completed	330	0	330	330	0	330
Ty Dyffryn Development Ammanford	Completed	10	0	10	12	0	12
Intermediate Care Fund (ICF) Projects	Ongoing	697	-697	0	456	-456	0
NET BUDGET		1,141	-697	444	836	-456	380

Variance for year £'000	Comment
5	
5	
-71	Slight delay in delivering project to enhance service delivery
-71	
2	
0	
2	
0	
-64	

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2018-19 Savings Monitoring Report
Social Care & Health Scrutiny Committee
20th May 2019

1 Summary position as at : 28th February 2019 £155 k variance from delivery target

	2018-19 Savings monitoring		
	2018-19	2018-19	2018-19
	Target	Delivered	Variance
	£'000	£'000	£'000
	2,459	2,304	155
Communities(Social care & Health services)	2,459	2,304	155

2 Analysis of delivery against target for managerial and policy decisions:

Managerial £155 k Off delivery target
Policy £0 k ahead of target

	MANAGERIAL			POLICY		
	2018-19	2018-19	2018-19	2018-19	2018-19	2018-19
	Target	Delivered	Variance	Target	Delivered	Variance
	£'000	£'000	£'000	£'000	£'000	£'000
	2,144	1,989	155	315	315	0
Communities(SC&H services)	2,144	1,989	155	315	315	0

3 Appendix F(i) : Savings proposals not on target

Appendix F(ii) : Savings proposals on target (for information)

Department	Scrutiny Indicator	2017-18 Budget	FACT FILE	'2018-19 Proposed	'2018-19 Delivered	'2018-19 Variance	EFFICIENCY DESCRIPTION	REASON FOR VARIANCE		
		£'000		£'000	£'000					
Managerial - off Target										
Communities										
<u>Homes and Safer Communities</u>										
<u>Care and Support</u>										
Residential Homes	Social Care	2,890	People may move into a care home because they have gradually found it more difficult to manage at home, or because an illness or accident has affected their ability to live independently. Residential care homes offer services such as laundry and meals and help with personal care. Some homes offer short-term stays but normally they provide more long-term or permanent care. As of the 30th September 2017 there were 858 clients funded in a Residential Care Home across all sectors.	175	100	75	Additional income by reshaping existing service to residential reablement and release of underutilised beds. Beds previously commissioned by Local Health Board for convalescence will be used for Social Care commissioning.	Implementation later than anticipated resulting in part year delivery of savings		
<u>Divisional</u>										
Divisional Staffing costs	Community / Env&PP / SC&H	2,257	The staffing complement of Housing (Council Fund) ,Public Protection and Support & care services total nearly 400 FTE's with a pay budget of over £8M. Reviews of service provision will include staffing as part of that process, which will produce savings over the medium term. This also includes acceptance of severance requests.	160	80	80	Amend staff budgets to reflect vacancy factor 2018-2019 £30k; Divisional restructure to include on-going severences for Housing, Public Protection and Care & Support Services.	Divisional re-structures ongoing , with implementation not from beginning of financial year resulting in delays in savings delivery.		
Total Homes and Safer Communities				335	180	155				
Communities Total										
				335	180	155				

Policy - off Target

Department	Scrutiny Indicator	2017-18 Budget	FACT FILE	'2018-19 Proposed	'2018-19 Delivered	'2018-19 Variance	EFFICIENCY DESCRIPTION
		£'000		£'000	£'000	£'000	

Managerial - on Target

Communities

Care and Support

Domiciliary Care - in-house service	Social Care	5,535	Domiciliary Care Services, also known as Homecare, provide practical or personal care for someone in their own home. This could be because health or mobility is declining, or a person may have been in hospital or they have a long term health condition. As at the end of August 2017 there were 1,041 clients receiving a Domiciliary Service.	30	30	0	Due to the nature of the business, shifts have to be covered in times of staff sickness. We aim to continually reduce the annual level of sickness and therefore staffing costs making the business more efficient. We can also make further efficiencies - ie travel logistics, with better rotating (especially following the planned IT investment).
Domiciliary Care - in-house night service	Social Care	5,535	The "Through the Night Domiciliary Service" works in conjunction with other night services providing non-medical personal care to people living in the community through the Community Alarm Service. For the period April 2016 to September 2016 the department carried out 3906 planned night calls and 355 unplanned night calls.	30	30	0	Following a joint review of the service by ourselves and the NHS, it has been agreed to deliver this service in a different way. The proposal brings together the existing service with the accute response team provided by the health service. This will lead to be a better integrated service and reduce costs for both organisations.
Reablement	Social Care	1,658	The reablement service encourages service users to regain their confidence and skills following a period of illness or an injury. The programme is agreed by a multidisciplinary team and supports individuals to meet their expressed goals to return to a level of independence and includes support with daily living activities and other practical tasks. The programme may last up to 6 weeks.	126	126	0	Reduction of 200 hours / 8 posts to reflect changing service demands and alternative service provision from the NHS. These posts are currently vacant and are budgeted for.
Care and Support Management	Social Care	854	Ensuring resilient management of Care and Support services for residential homes, reablement, domiciliary care and sheltered housing services.	20	20	0	Additional recharge to the HRA following divisional restructure to increase management and usage of sheltered housing stock and too complement residential care.
Total Homes and Safer Communities				206	206	0	

Integrated Services

Domiciliary Care	Social Care	5,535	Domiciliary Service, also known as home care, provides practical or personal care for someone in their own home. This could be because health or mobility is declining, or a person may have been in hospital or they have a long term health condition. As at the end of August 2016 there were 1041 clients receiving a Domiciliary Service	500	500	0	Reduce % of Double handed care to match best performing authorities' performance by March 2020. Reduce % of people receiving 4 calls+ per day. Halve the number of small packages of care by 2020. Note that scope to reduce Dom Care will be very limited by Year 3.
Divisional Supplies	Social Care	854	Services provided to Older People and Physical Disabilities client groups have non-staff controllable budgets of approx £34m. The Deapartment has identified that some of these budgets will not have an inflationary uplift and budgets will be held at the same level as the year before.	122	122	0	No inflationary uplift.
Management & Support - staffing reductions	Social Care	854	Management and operational workforce	60	60	0	Review of staffing
Residential Placements	Social Care	10,171	Residential care is provided in local authority and private sector care homes for individuals who can no longer live independently in the community. Depending on the nature of their needs, their placement may be made by the local authority or jointly with the health board, or entirely by the health board if they qualify for free continuing health care (CHC).	145	145	0	Manage the demand from hospitals for residential & nursing placements (including CHC)
Total Integrated Services				827	827	0	

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Department	Scrutiny Indicator	2017-18 Budget £'000	FACT FILE	'2018-19 Proposed £'000	'2018-19 Delivered £'000	'2018-19 Variance £'000	EFFICIENCY DESCRIPTION
<u>Learning Disabilities</u>							
Residential Care, Supported Accommodation and Community Packages - reshaping and re-providing services	Social Care	6,596	People may move into a care home because they have gradually found it more difficult to manage at home, or because an illness or accident has affected their ability to live independently. Residential care homes offer services such as laundry and meals and help with personal care. Some homes offer short-term stays but normally they provide more long-term or permanent care. As of the 30th September 2016 there were 185 Mental Health & Learning Disability clients funded in a Private Residential Care Home.Supported living is a type of residential support that helps vulnerable adults, including people with learning disabilities, to live independently in the community. Supported living arrangements are very flexible and are designed to give each person choice and control over their home and the way they live their life. As of the 30th September 2016 there were 146 Mental Health & Learning Disability clients receiving supported accommodation.	482	482	0	Reviewing and right sizing of residential placements; Stepping down to supported living/Shared Lives; De registration of residential homes to supported living; Collaborative funding opportunities; Recommissioning; Positive behavioural interventions; alternative community provision; costing model in residential care; right sizing of individual packages; implementation of capped rate; maximising potential of assistive technology; releasing time to care; Ordinary Residence issues.
Day Services	Social Care	2,845	During the review and transformation of MH&LD day services we have identified individuals who are spending a long time on transport, at times travelling across the county past services which could support their needs. The current arrangement incurs increased costs and can have a detrimental effect on the person due to th length of time on transport. We will review those identified and propose alternative shorter and mor efficient arrangements which may include individuals having to use their own transport funded by their mobility allowance.	20	20	0	Undertake review of transport in day services with view to establishing more cost effective arrangements
Direct payments	Social Care	1,306	Citizen directed co-operatives are a key theme of the SS&WA. The use of direct payments allows individuals to have more independence when deciding how they achieve what is important to them and increases the oportunity for them to have their support needs met within their community and maximise their own assets. We are currently changing the focus of day services in order to provide more specialist outcome focussed interventions, this will include moving some individuals on from the building based services and into the community with their support being tailored to their specific outcomes and supported via direct payments. Where appropriate at this will include pooled payments based on communities of interest in order to ensure effective use of funds.	48	48	0	Develop social enterprise, citizen centred cooperatives for Direct payments
Divisional Staffing	Social Care	383	An ammended divisional structure will be developed for agreement viathe appropriate process to deliver the new service proposals, with less building based services and a change in function we envisage there will be a reduction in managerial posts.	100	100	0	Divisional staffing costs linked to above Service proposals, ongoing severences and Divisional restructure
Total Learning Disabilities				650	650	0	
<u>Support Costs</u>							
Commissioning Team	Social Care	1,181	The service provides business support for Social Care. The functions include payment of creditors, management of transport and premises; the assessment and collection of income for residential and non residential services; and general business support	47	47	0	Reduction in staffing
Support Services	Social Care	1,673	The service provides business support for Social Care. The functions include payment of creditors, management of transport and premises; the assessment and collection of income for residential and non residential services; and general business support	79	79	0	Supplies and Services (Postage + tel + meetings) £34k, Transport £12K , Staffing - part time reduced hours £13k, staffing - re-structure
Total Support Costs				126	126	0	
Communities Total				1,809	1,809	0	

Department	Scrutiny Indicator	2017-18 Budget	FACT FILE	'2018-19 Proposed	'2018-19 Delivered	'2018-19 Variance	EFFICIENCY DESCRIPTION
		£'000		£'000	£'000	£'000	

Policy - on Target

Communities

Learning Disabilities

Day Services - Opportunities	Social Care	2,845	LD & MH day services currently provide support for approximately 300 individuals across the county utilising 9 different sites. The services provide opportunities for individuals to receive therapy, maintain their health and wellbeing, gain skills, socialise whilst also providing respite for carers. The review of day services has highlighted the need to develop community options and specialist services which will see a decline in the use of building based services. This will provide opportunities for us to develop intergenerational services in partnership with adult services within Coleshill and Manor rd and vacate the premises at Crosshands.	285	285	0	Development and re-commissioning services jointly with Older People's Services, the third sector and leisure (currently working on options appraisal)
Day Services - Complex Needs	Social Care	2,845	Complex needs day services provide support for individuals with profound and multiple disabilities often requiring 1-1 support. We currently rely on external domiciliary care agencies to provide the 1-1 support for some individuals due to a lack of capacity within the services existing budgets. With movement of individuals into community support options there will be increased capacity within building based services which will replace the third sector provision.	30	30	0	Review third party provision within complex needs day services

Communities Total				315	315	0	
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EXPLANATION FOR NON-SUBMISSION OF SCRUTINY REPORTS

SCRUTINY COMMITTEE : **SOCIAL CARE & HEALTH**

DATE OF MEETING : **20TH MAY, 2019**

ITEM	RESPONSIBLE OFFICER	EXPLANATION	REVISED SUBMISSION DATE
Review of Intermediate Care	Neil Edwards, Interim Head of Integrated Services	This review is being led by the Health Board's County Director and is currently still under development. It would be preferable to provide a report once the various elements of the Intermediate Care model have been refined. The Committee will be better advised once the model has been finalised.	24 September, 2019
Update on Continuing Care/NHS Summit	Neil Edwards, Interim Head of Integrated Services	The meeting involving the four partners across the region has yet to be convened. The Interim Head of Service is aiming to convene this meeting during the June/July period.	24 September 2019

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**SOCIAL CARE & HEALTH
SCRUTINY COMMITTEE
20TH MAY 2019**

**FORTHCOMING ITEMS -
JOINT MEETING WITH ENVIRONMENTAL & PUBLIC
PROTECTION SCRUTINY COMMITTEE
10TH JUNE 2019 [10.00 A.M.]**

Discussion Topic	Background
Area Planning Board's Drug & Alcohol Misuse Annual Report 2018	This is the Area Planning Board's annual report on the commissioning of substance misuse services. The report will provide the Committee with information on the strategic objectives regarding the provision of such services, the funding arrangements and services/projects commissioned within the region and county.
Substance Misuse Service Annual Report 2017/18	This report informs members of the work undertaken by the Authority's specialist drug and alcohol services and provides an overview of all the activity in 2017/18 and outlines the objectives for the forthcoming year.

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SOCIAL CARE & HEALTH SCRUTINY COMMITTEE

Wednesday, 17 April 2019

PRESENT: Councillor G. Thomas (Chair)

Councillors:

S.M. Allen, K.V. Broom, I.W. Davies, K.Davies, S.L. Davies (In place of B.A.L. Roberts), R.E. Evans, W.T. Evans, M.J.A. Lewis, K. Lloyd, E.M.J.G. Schiavone and D.E. Williams (In place of D.T. Williams)

Also in attendance:

Councillor J. Tremlett, Executive Board Member for Social Care and Health
Councillors B. Thomas and D. Jones, Mrs V. Kenny members of the Education & Children Scrutiny Committee

The following Officers were in attendance:

G. Morgans, Director of Education & Children's Services
A. Bracey, Head of Mental Health and Learning Disabilities
C. Harrison, Head of Joint Strategic Commissioning
J. Morgan, Head of Homes & Safer Communities
N. Edwards, Interim Head of Integrated Services
A. Phillips, Regional Programme Manager Integrated Commissioning & Prevention
A. Thomas, Group Accountant
J. Antoniazzi, Behaviour & Wellbeing Transformation Manager
B. James, Service Manager Corporate Parenting and Education & Children
S. Sauro, Performance, Analysis & Systems Manager
E. Bryer, Democratic Services Officer

Chamber, 3, Spilman Street, Carmarthen. SA31 1LE. - 10.00 am - 1.30 pm

1. APOLOGIES FOR ABSENCE

Apologies for absence were received from Councillors. A. Fox, G. R. Jones, B. A. L. Roberts and D. T. Williams.

2. DECLARATIONS OF PERSONAL INTERESTS INCLUDING ANY PARTY WHIPS ISSUED IN RELATION TO ANY AGENDA ITEM.

Councillor	Minute No (s)	Nature of Interest
S.L Davies	Minute No. 4 – Services & Support for Children & Young People with Mental Health Issues. Minute No 6 – Scrutiny Agenda Request – Prince Phillip Hospital Phlebotomy Service.	Works in the NHS
K. V Broom	Minute No. 4 – Services & Support for Children & Young People with Mental Health Issues.	Family member has autism.

There were no declarations of prohibited party whips.

3. PUBLIC QUESTIONS (NONE RECEIVED)

The Chair advised that no public questions had been received.

4. SERVICES AND SUPPORT FOR CHILDREN & YOUNG PEOPLE WITH MENTAL HEALTH ISSUES

[NOTE: Councillors K.V. Broom and S.L Davies had earlier declared an interest in this item]

The Committee, in accordance with minute 5 of its meeting on the 5th March, 2018 along with the Education and Children Scrutiny (who were invited to attend item 4 of the minutes) considered a report that provided an overview of the existing services available for young people with emotional and mental health issues.

The report also outlined plans to improve the coordination of services and support through a multi-agency forum.

The following questions / issues were raised on the report:-

- The Committee raised concerns regarding the capacity to deal with the above issues.

The Committee was advised that collaborative working with specialist services and PRU would add capacity to support main stream schools. More efficient ways of working with specialist services had been looked at and also joint resilience project working in conjunction with the Leisure department.

- Concern was expressed regarding the expectations of teachers to be social workers and advocacies.

The Committee was advised that therapy and education are different and that teachers were encouraged to build on existing skills such as communications and interactions with children. Supporting the wellbeing of teachers was a Welsh Government objective.

- It was stated that poverty is also a big issue and that this can have a big impact on mental health. This had recently been compounded by the roll out of Universal Credit.

The Committee was advised that not all families were aware of what support was available and that an audit was being undertaken to enable the production of a global directory of services and support.

- Officers were asked on the timescales between referral to assessment and could a school refer a child directly to Children Services?

It was stated that the Central Referrals Team conduct a triage and that urgent cases were attended to in a matter of days. The Head of Mental Health and Learning Disabilities advised that she would seek further clarification on referrals and time scales.

- Concern was expressed that many schools were reporting zero incidents of bullying due to the current definition of bullying and that the County wide definition should be revised.

Advised that Welsh Government had consulted the Authority regarding the definition of bullying as part of its revised Anti Bullying Policy due for publication in June. The Director of Education & Children's Services advised that all schools have a policy that is relevant to them and that the policy was also inspected. He stated that he would challenge that there was no bullying in schools and stated that he welcomed the Welsh Government review. It was also stated that a directory of services was included in the Wellbeing Strategy and that the directory could be widened.

- Concern was expressed regarding the increase in substance misuse and the decrease in the age of children involved in substance misuse. It was stated that the children were also dealt with using the same procedures used for adults and that this was not appropriate.

The Committee was advised that substance misuse was a pastoral item at schools and that there was a need to address social issues. PRU dealt with issues of substance and alcohol misuse and that prevention measures were undertaken through educating learners of the dangers of substance and alcohol misuse and assisting them with finding alternative ways of coping.

- Officers were asked what had been learnt from Scotland and the improvements that had been made.

The Committee was advised that lessons had been learnt from Scotland and England and that there was now an all Wales advisory group that were looking at the 6 priorities / objectives detailed in Talk to Me 2 National strategy. Three regional forums had been established to support implementation of the objectives. Attendance at a recent conference in Cardiff also provided the opportunity of learning from colleagues from Scotland Northern Ireland and England.

- It was asked why the KiVa Anti-Bullying programme being piloted in Pembrokeshire could not be rolled out in Carmarthenshire.

The Committee was advised that implementing the project in schools was being considered but there were implications to the roll out.

- It was stated that bullying wasn't just between children and could be between teacher and child. It was stated that information analysis needs to be undertaken to establish the level of bullying taking place.

The Committee were advised that it wasn't just about the child and that a restorative approach was undertaken with parents, teachers, service etc.

- It was stated that it was good to see that the gaps in providing support for young people with Autism had been identified, however £13m would not be adequate to address the problem. It was noted that the service has only

been operational for one month and it would be interesting to see the outcomes in due course.

RESOLVED that the report be received.

5. ORDER OF BUSINESS

The Chair advised the Committee that, in accordance with Council Procedure Rule 2 (3) she was going to vary the order of business on the agenda to enable the Scrutiny Agenda Item Request – Prince Phillip Hospital Phlebotomy Service to be considered earlier in the meeting.

6. CLLR R. EVANS - SCRUTINY AGENDA ITEM REQUEST - PRINCE PHILLIP HOSPITAL PHLEBOTOMY SERVICE

[NOTE: Councillor S.L Davies had earlier declared an interest in this item]

The Committee considered a request from Councillor R. Evans to add Prince Phillip Phlebotomy Service as an agenda item at a future meeting under Scrutiny Procedure Rule 10 (1).

Some of the concerns/observations raised by Cllr. Evans included:

- The phlebotomy service was closing its doors early due to high demand for its service.
- GP's in the area are requesting tests for their patients instead of providing the service in-house.
- Additionally, the Antioch Centre is under pressure and patients are having to wait up to 10 days for appointments.
- Potential for patients to miss vital blood tests due to difficulties in attaining appointments.

The Committee was asked by Cllr. R. Evans to note that this had no reflection on the staff who provide a professional service.

UNANIMOUSLY RESOLVED that Neil Edwards, Head of Integrated Services raise the concerns with the Local Health Board using the formal process.

7. REGIONAL ADVOCACY SERVICE

The Committee, in accordance with minute 4 of its meeting on the 23rd January, 2019 considered a report providing information on the work that was underway to develop a co-produced regional advocacy service; the strategic and legislative background and context to this work.

The report also provided detail of the engagement work that had been commissioned to support the development of a co-produced regional advocacy service. Commissioners had gone out to tender for a pilot of the service in Ceredigion, the evaluation of which will inform the basis of a roll out of the regional service to Carmarthenshire and Pembrokeshire.

The following questions / issues were raised on the report:-

- Clarification was sought on what self-advocacy meant.

Advised that self-advocacy was about empowering individuals – voicing control and representing oneself. For example Carmarthenshire People First support people to build confidence and to articulate for themselves.

- It was stated that the concept of self-advocacy was a positive concept and consideration should be given to expand this.

Officers advised that this role will continue and that the NHS were partners to enable the maximisation of resources.

- Question was asked if Carmarthenshire People First and Eiriol would remain independent.

The Committee was advised that this would be dependent on how the tender response was submitted. Some of the Advocacy providers, including Eiriol, Pembrokeshire Peoples First & West Wales Mental Health Advocacy have already formed a new legal entity in anticipation of regional commissioning.

- Question was asked how providers would agree who secures what contract.

In response, Officer advised that this was unknown territory and that the challenges were being worked through with providers. It was stated how important it was to keep local providers and expertise.

- Concern was raised that people would miss out on early intervention and that a directory of available support should be available.

Officers agreed and stated that collaboration was key to early intervention. The Committee was advised that children's advocacy is under a separate contract that is already up and running (Mid & West Wales Advocacy) and that an all Wales directory of services was available in the form of 'Dewis', electronic directory portal.

- It was asked how low key service providers would flourish under the new model.

Advised that the model would assist the smaller providers as a number of local providers don't currently receive funding from the Authority. The revised model would bring them into the commissioning network.

UNANIMOUSLY resolved to receive the report

8. REVENUE & CAPITAL BUDGET MONITORING REPORT 2018/19

The Committee considered the Revenue and Capital Budget Monitoring Report in relation to the Social Care and Health Service, which provided an update on the latest budgetary position as at 31st December, 2018 in respect of the 2018/19 financial year.

The Social Care and Health Service was projecting and overspend of £930k on the revenue budget and a net variance of -£33K against the 2018/19 approved capital budget.

The following questions / observations were raised on the report:

Appendix B

- Concern was raised regarding the vacant Social Worker post in TTTs Community Resource Team.

The Head of Mental health and Learning Disabilities advised that clarification regarding recruitment would be sought from Neil Edwards, Head of Integrated Services.

- Clarification was sought regarding the vacant manager post within Adult Respite Care.

Advised that there had been an acting manager in place and recruitment of a permanent manager was in progress.

- Question was asked why the Workchoice project had been decommissioned.

The Committee was advised that the project had been decommissioned as the wider project ceased due to not winning the tender (DWP).

Appendix F (ii)

- Question was asked why the data for Domiciliary Care (Fact File) was 3 years old.

Officer clarified that the data in the Fact File column was information from when the budget was set and was not routinely updated as part of the report. Efficiency description is the information that is updated.

RESOLVED that the report be received.

Duration of Meeting

At 1:00 p.m. the Committee's attention was drawn to Corporate Procedure Rule 9 "Duration of Meeting" and the fact that the meeting had been underway for three hours and it was

Resolved that Council Procedure Rules be suspended to allow the remaining items of business on the agenda to be considered.

9. PERFORMANCE MONITORING REPORT - QUARTER 3 - 1ST APRIL TO 31ST DECEMBER 2018

The Committee considered the Performance Monitoring Report for the period 1st April to 30th December 2018 (Quarter 3), which set out the progress against actions and measures in the New Corporate Strategy 2018-23 to deliver the

2018/19 Well-being Objectives relevant to the Committee's remit, as at 31st December, 2018.

The following questions / observations were raised on the report:-

Off Target – Theme 10

- Explanation was sought on what amounts to a DTOC (Delayed Transfers of Care) and how the figures were calculated. Were the figures actual for the month/year or per 1000 of the population.

The Head of Mental Health and Learning Disabilities advised that the information would be confirmed by the Head of Integrated Services.

On Target – Action 13223

- Question was asked if it would be possible to receive the outcome of the Quality Assurance Questionnaire on the provision of day opportunities for older people circulated to the Committee.

The Head of Homes and Safer Communities advised that he would arrange for the results of the questionnaire to be forwarded to the Committee.

On Target – Action 13234

- Question was asked if a departmental dementia steering group had been set up.

The Committee was advised that this had been set up as part of the RPB (Regional Partnership Board).

On Target – Action 13226

Question was asked what other work in addition to the half marathon was being done.

The Committee was advised that there was collaboration between Health, Housing and Leisure around the 'Healthier Wales' strategy. The Committee agreed that a joint presentation would be useful.

RESOLVED that the report be received.

10. CORPORATE STRATEGY 2018-23 - DRAFT UPDATE JUNE 2019

The Committee considered sections of the draft update Corporate Strategy 2018-23 (June 2019) together with detailed delivery plans relevant to the remit of the Social Care & Health Scrutiny Committee.

- Question was asked regarding the National Survey for Wales results 2016/17 (Agree there's a good Social Care Service available) and where were Carmarthenshire now.

The Committee was advised that a recent survey demonstrates improvement on the 56.2% against the 56.8% average detailed in the 2016/17 survey.

UNANAMOUSLY resolved to recommend to the Executive Board that the draft updated Corporate Strategy 2018-23 be endorsed.

11. SOCIAL CARE & HEALTH SCRUTINY COMMITTEE ACTIONS & REFERRALS UPDATE.

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

It was noted that several requests for updates had not been actioned. The Committee asked that Officers address these as soon as possible.

UNANAMOUSLY RESOLVED that the report be received.

12. FORTHCOMING ITEMS

The Committee considered the list of forthcoming items and agreed that the items should be presented to the next meeting.

The Head of Mental Health and Learning Disabilities advised that the item on Continuing Care / NHS Summit should be delayed as the Summit will not have taken place prior to the May Committee.

UNANAMOUSLY RESOLVED that subject to report on Continuing Care / NHS Summit being rescheduled for the Committee's meeting on the 3rd July, 2019, the remaining list of forthcoming items be agreed and presented to the next meeting of the Committee to be held on the 20th May, 2019.

13. TO SIGN AS A CORRECT RECORD THE MINUTES OF THE MEETING HELD ON THE 23RD JANUARY, 2019

UNANAMOUSLY RESOLVED that the minutes of the meeting of the Committee held on the 23rd January, 2019 be signed as a correct record.

CHAIR

DATE