

HEALTH & SOCIAL SERVICES SCRUTINY COMMITTEE

MONDAY, 17 APRIL 2023

PRESENT: Councillor H.A.L. Evans (Chair) (In Person)

Councillors (In Person):

B.A.L. Roberts B. Davies M. James H. Jones

Councillors (Virtually):

M. Donoghue A. Evans P.T. Warlow J. Williams
M.J.A. Lewis (substitute)

Observer (In Person):

Councillor S.L. Davies
Councillor J.P. Hart

Also Present (In Person):

A. Bracey, Head of Adult Social Care
A. Williams, Head of Integrated Services
J. Morgan, Head of Housing and Public Protection
C. Richards, Senior Safeguarding Manager
H. Toller, Hywel Dda University Health Board
J. Owens, Democratic Services Officer
M. Runeckles, Members Support Officer

Also Present (Virtually):

Dr. P. Kloer, Medical Director, Hywel Dda University Health Board
Dr. G. Shankar, Director of Health Protection, Public Health Wales
Professor K. Neal, Public Health Consultant
J. Coles, Head of Children and Families
C. Harrison, Head of Strategic Joint Commissioning
A. Thomas, Group Accountant
V. King, Environmental Health Practitioner
K. Evans, Assistant Democratic Services Officer
S. Hendy, Member Support Officer
S. Rees, Simultaneous Translator

Chamber - County Hall, Carmarthen. SA31 1JP and remotely - 10.00 am - 12.06 pm

The Committee was advised that, in accordance with Council Procedure Rule 2(3) the order of business on the agenda would be varied to enable Agenda Item 5 to be heard earlier in the meeting.

1. APOLOGIES FOR ABSENCE

Apologies for absence were received from Councillors K. Davies and F. Walters.

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

Councillor	Agenda Item	Nature of Interest
S. Davies	4. Presentation from the Hywel Dda University Health Board in connection with the recently published external review report on the TB outbreak in the Llwynhendy area in Llanelli.	Councillor for Llwynhendy and a family member has latent TB.
J. P. Hart	4. Presentation from the Hywel Dda University Health Board in connection with the recently published external review report on the TB outbreak in the Llwynhendy area in Llanelli.	Family member has latent TB.

There were no declarations of any prohibited party whips.

3. PUBLIC QUESTIONS (NONE RECEIVED)

The Chair advised that no public questions had been received.

4. PRESENTATION FROM THE HYWEL DDA UNIVERSITY HEALTH BOARD IN CONNECTION WITH THE RECENTLY PUBLISHED EXTERNAL REVIEW REPORT ON THE TB OUTBREAK IN THE LLWYNHENDY AREA IN LLANELLI

[Councillors S Davies and J.P. Hart, having earlier declared an interest in this item, remained in the meeting as observers and did not partake in the discussions or voting thereof].

The Committee received a presentation from Dr P. Kloer, Medical Director for Hywel Dda University Health Board (HDUHB), Dr G. Shankar, Director of Health Protection Public Health Wales (PHW) and Professor K. Neal, Public Health Consultant which summarised the outcome of the external review commissioned by HDUHB and PHW on the tuberculosis (TB) outbreak in the Llwynhendy area.

The presentation focussed upon the public health management and response to the four phases of the outbreak. Members were informed that initiation of an outbreak control team (OCT) during the first phase had been closed down prematurely and was subsequently reopened on three other occasions. The findings of the report indicated that the initial response was deemed inadequate, however processes had since been significantly strengthened with the introduction of a formal TB service in 2014 and a dedicated TB nurse in 2019. In this regard, an overview of the progress made in recent years, together with the organisational learning to enhance management of the outbreak was provided to

the Committee and it was recognised that there was scope for further development and improvements to be made in this regard.

An assurance was provided to the Committee that the recommendations set out within the report had been fully accepted and a joint action plan had been implemented within HDUHB and PHW to address the issues raised and ensure closer working arrangements between both organisations.

The issues/observations raised by the Committee were addressed as follows:- Reference was made to the conclusions set out at section 8 of the report whereby the Public Health Consultant confirmed that whilst the national rate of TB continued to fall, there were no figures available beyond 2018 and he was not aware of any new cases since 2018.

In response to a query regarding the action plan target dates, the Medical Director clarified that progress reports on the actions, together with updated target completion dates would be submitted to the Quality and Safety Committee meetings.

The Public Health Consultant, in response to queries by the Committee, clarified that there was no legal basis to mandate individuals to attend TB service clinics, however a total of 50 of the identified contacts had been interviewed to ascertain the reasons for not doing so and the results would be analysed in an endeavour to address the issue. In accordance with PHW's statutory responsibilities for the surveillance of infectious diseases, the Director of Health Protection provided Committee with a synopsis of the monitoring processes undertaken by the OCT to monitor active and latent cases, profiling of new cases and the use of technology to establish related cases.

Reference was also made to the TB Cohort Review led by the Respiratory Delivery Group which undertook a peer review of the management of cases in a constructive environment to improve services ensure better outcomes for citizens.

Following a question regarding the actions to be implemented to improve the TB service, the Committee was informed of the support mechanisms to be implemented to strengthen the provision following the appointment of a TB Lead Consultant and a dedicated full time TB nurse. Furthermore, it was explained that all chest consultants received standard training in the management of TB which ensured continuation of service provision. An assurance was provided that improvements had been made since the onset of the outbreak and service provision would be further enhanced going forward.

Concerns were raised that there was no national strategy for TB in Wales, despite TB mortality rates being twice as high than that of England. The Director of Health Protection confirmed that the draft TB strategy, prepared by the all-Wales TB Group, was being further refined to take account of the learning outcomes emanating from the pandemic, the improvements made by the HDUHB and PHW approach to TB management and the learning derived from the migrant screening, which included testing of latent and active TB. It was reported that a revised strategy would be put forward to Welsh Government for approval in the coming months.

The Medical Director, in response to a query, agreed to forward up to date figures pertaining to the number of cases for both active and latent TB, the number latent TB individuals over the age of 65 and the number of deaths attributed to TB arising from the outbreak.

Reference was made to recommendation 2 pertaining to the Standard Operating Procedure for the conduct and recording of outbreak management. In this regard an overview of the membership of the OCT was provided to Members. The Committee was further informed that the guiding principles for the management of an outbreak of infectious diseases was laid out within the Communicable Disease Outbreak Plan for Wales and would address the need for consistency in the senior management membership of the OCT as part of its 3 year review scheduled to be undertaken in July 2023.

It was queried whether any potential future outbreak could result in drug resistance due to the prevalence of latent TB in the Llwynhendy area. The Public Health Consultant confirmed that drug resistance in this regard was unlikely. Rather, the concerns of Health professionals centred upon reactivation of undiagnosed latent TB in individuals with underlying health conditions.

In recognition of the ongoing concerns of the residents of Llwynhendy, it was agreed that the contact details of local councillors would be provided to HDUHB and PHW with a view to determining appropriate engagement with residents to address anxiety. The Director of Health Protection noted that the matter would be considered at a meeting of the OCT.

In response to a request by a Member for Welsh Government to be approached to seek financial support for the ongoing TB issue in Llwynhendy and the surrounding areas, the Cabinet Member agreed in the first instance, to make further enquiries in respect of Recommendation 7 pertaining to Welsh Government's funding for a TB plan. Pending the outcome of those enquiries, it was agreed that if appropriate, a letter be sent to Welsh Government requesting financial support.

The Chair and Cabinet Member extended the Committee's gratitude to Dr Kloer, Dr Shankar and Professor Neal for their address to the Committee and the clarity and assurance provided on the endeavours made to deliver the recommendations made within the review.

UNANIMOUSLY RESOLVED

- 4.1 that the report be received.**
- 4.2 Up to date figures pertaining to the number of cases for both active and latent TB, the number latent TB individuals over the age of 65 and the number of deaths attributed to TB arising from the outbreak to be forwarded to the Committee.**
- 4.3 Contact details for local councillors to be provided to HDUHB and PHW with a view to determining appropriate engagement and communication with residents.**

- 4.4 Pending the outcome of enquiries, consideration be given to the submission of a letter to Welsh Government, seeking financial support for the ongoing TB issue in Llwynhendy and the surrounding areas.**

5. REVENUE & CAPITAL BUDGET MONITORING REPORT 2022/23

The Committee considered the Revenue and Capital budget Monitoring Report in relation to Health and Social Services which provided an update on the latest budgetary position as at 31 December 2022 in respect of the 2022/23 financial year.

The report detailed a projected overspend of £6,329k on the revenue budget and a variance of £503k against the 2022/23 approved capital budget. Committee's attention was also drawn to the savings report which noted that £1,338k of Managerial savings was forecasted to be delivered at year end against a target of £1,603k.

The issues/observations raised by the Committee were addressed as follows:- The Head of Children and Families provided an overview of the national and local position in respect of the current placement capacity crisis, coupled with the change in the demand for mental health service provision needs for young people post-pandemic. An assurance was provided that the division was endeavouring to ensure adequate placement capacity to meet the needs of young people. In response to a query the Cabinet Member for Resources reported that the Authority could consider approaching the Welsh Government with a view to requesting financial support to meet future significant expenditure incurred as a result of unexpected and acute cases. Furthermore, it was noted that, notwithstanding the significant expenditure for out of county placements and the challenges faced by the Authority to meet demand in this regard, waiting times to access mental health services for young people in Wales compared favourably to England and Scotland.

UNANIMOUSLY RESOLVED that the report be received.

6. DOMICILIARY CARE PERFORMANCE UPDATE

Further to the Committee's request at its meeting held on 24 January 2023, consideration was given to an update report in relation to the current pressures on domiciliary care and the challenges faced by the Authority to ensure sufficient capacity to meet demand. The Committee acknowledged the ongoing national workforce challenges faced by the sector which resulted in recruitment and retention issues of care workers.

The report detailed key performance data in the following areas:

- Number of hours commissioned for domiciliary care;
- Number of hours waiting for domiciliary care;
- Number of people waiting in the community for domiciliary care;
- Number of people waiting in hospital for domiciliary care;
- Number of hours released from reviews;

- Future Developments in terms of the expansion of the in-house service and external commissioning of domiciliary care;
- Actions taken to mitigate risk.

The issues/observations raised by the Committee were addressed as follows:-

In considering the external commissioning developments, a Member commended the establishment of the project board and requested an illustration of the number, frequency and a geographical spread of events attended by the Social Care Champions. This was agreed.

In response to a query regarding the care apprenticeship pathway, the Head of Adult Social Care provided an overview of the in-house care academy, whereby a total of 7 individuals were provided with health and social care work experience with career progression incentives and formal accreditation opportunities; this in turn provided the Authority with additional capacity to meet demand in this area. Targeted recruitment events to promote care work as a career of choice in areas of need was also a key focus for the division. The Committee commended Officers in its endeavours to address the recruitment challenges and suggested that councillors could be approached to support local career events.

UNANIMOUSLY RESOLVED

6.1 that the report be received.

6.2 An illustration of the number, frequency and a geographical spread of events attended by the Social Care Champions be provided to Committee.

7. LONELINESS IN CARMARTHENSHIRE TASK AND FINISH REVIEW UPDATE REPORT

The Committee received for consideration an update report in respect of the progress made with the four recommendations emanating from the Task and Finish Review on Loneliness in Carmarthenshire undertaken during the 2018/19 municipal year, as follows:

1. Take a strategic approach to loneliness.
2. Address loneliness as an important shared priority.
3. Focus on building and supporting community assets.
4. Directly address barriers to connection.

The Committee was provided with an assurance that all recommendations and the associated actions had been delivered successfully and a review of the recommendations would be embedded into the Division's business planning process moving forward.

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

Reference was made to the progress achieved to date in respect of Recommendation 2, whereby the Head of Integrated Services confirmed that

initial work on the mapping exercise of all preventative services in Carmarthenshire had commenced and would be progressed as a priority area, with input from members, following the appointment of the Senior Delivery Manager. Furthermore, in light of the concerns raised by Committee in respect of loneliness within rural context, the Head of Integrated Services noted that the mapping exercise could take account of the differences between the 5 geographical areas of the county which mirrored the domiciliary care framework areas and preventative services framework areas with the third sector.

In response to a query regarding the Task Group led by Carmarthen Town Council to review the issue of loneliness, the Head of Integrated Services expressed that other similar work could be replicated in other local areas and it was acknowledged that the positive initiatives underway to address the cost of living crisis was interlinked with addressing the loneliness agenda.

Following queries from Members, a synopsis of the array of resources available to isolated, vulnerable or lonely residents in Carmarthenshire was given and it was agreed that awareness of these services and events, together with their access routes would be promoted by the division.

UNANIMOUSLY RESOLVED that

7.1 The report be received.

7.2 Awareness of the resources available for isolated, vulnerable or lonely residents in Carmarthenshire, together with their access routes to be promoted by the division.

7.3 An update report on the wider prevention work, including the progress made on the mapping exercise of all preventative services in Carmarthenshire be included on the Committee's Forward Work Plan for 2023/24, and considered by the Committee early 2024.

8. ANNUAL REPORT ON ADULT SAFEGUARDING AND DEPRIVATION OF LIBERTY SAFEGUARDS (DoLS) (2021/22)

The Committee received a report which detailed the role, functions and activities undertaken by the Authority in relation to Adult Safeguarding and Deprivation of Liberty Safeguards during the 2021/22 financial year.

A synopsis of the national, regional and local context of Adult Safeguarding was provided to the Committee and which included local operational arrangements and key performance and activity information.

The report provided an assurance to the Committee that the Social Services and Wellbeing (Wales) Act 2014 and the statutory guidance set out in the Wales Safeguarding Procedures had been firmly embedded into the Authority's practice.

Reference was made to the Regional Safeguarding Board which provided the strategic direction and governance arrangements for adult safeguarding in the

Mid and West Wales region and which had strengthened Carmarthenshire's approach to ensuring the rights of every person to live a life free from abuse and neglect.

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

A Member enquired regarding the implementation date for the Liberty of Progression Safeguards (LPS) which was due to replace the existing Deprivation of Liberty Safeguards (DoLS) that had been deemed "not fit for purpose". The Senior Safeguarding/DoLS Manager confirmed that the new LPS would no longer be implemented by UK Government during this parliament; it was however expected that an alternative version would be implemented by Welsh Government to derive improvements in this regard.

In response to a query regarding the Authority's challenges in meeting its statutory duty to undertake assessments for DoLS in light of the coronavirus pandemic, an assurance was provided to the Committee that the external practitioners had resumed face to face assessments in accordance with the standard set by the Authority. In this regard, the benefits of face-to-face assessments were acknowledged by the Committee.

Following a query made in respect of the Authority's ability to provide assessments through the medium of Welsh, the Senior Safeguarding/DoLS Manager was pleased to report that that the DoLS team were all fluent Welsh speakers which was considered extremely important in the context of mental capacity assessments. It was confirmed that the external commissioning of assessors appointed utilising grant funding from Welsh Government had also been delivered through the medium of Welsh, however difficulties remained in respect of the appointment of Welsh speaking doctors.

The Senior Safeguarding/DoLS Manager, in response to a query, clarified that all safeguarding concerns reported to the Authority whereby the individual met the 'at risk' criteria resulted in an enquiry.

Reference was made to the percentage of urgent DoLS authorisations received that were completed within 7 days of receipt and the percentage of Standard authorisations that were completed within 21 days of allocation. The Senior Safeguarding/DoLS Manager confirmed that completion targets had not been set in this regard as the Supreme Court judgment [P v Cheshire West and Chester Council; P & Q v Surrey County Council] effectively lowered the threshold for the Deprivation of Liberty Safeguards.

UNANIMOUSLY RESOLVED that the report be received.

9. TO SIGN AS A CORRECT RECORD THE MINUTES OF THE MEETING HELD ON THE 9TH MARCH, 2023

The Chair referred to minute 5.1 whereby Committee was informed that a letter expressing concerns regarding the current inequality of S.117 funding arrangements had been drafted and would be sent to the to the Health Board imminently.

UNANAMOUSLY RESOLVED that the minutes of the meeting of the Committee held on the 9th March, 2023 be signed as a correct record.

CHAIR

DATE