

# HEALTH & SOCIAL SERVICES SCRUTINY COMMITTEE

WEDNESDAY, 7 JUNE 2023

**PRESENT:** Councillor H.A.L. Evans (Chair)

**Councillors (In Person):**

B. Davies                      P. Hughes-Griffiths (in place of H. Jones)                      M. James

**Councillors (Virtually):**

B.A.L. Roberts              K.V. Broom (in place of K.Davies)              R.E. Evans              M. Donoghue  
A. Evans                      J.P. Jenkins                      D. Owen              F. Walters  
P.T. Warlow                      J. Williams

**Also present Councillors (In person):**

A. Lenny, Cabinet Member for Resources  
J. Tremlett, Cabinet Member for Health & Social Services

**Also Present (In Person):**

R. Matthews, Hywel Dda UHB – Integrated System Director  
J. Morgan, Director of Community Services  
A. Williams, Head of Integrated Services  
J. Coles, Head of Children and Families  
J. Jones, Senior Delivery Manager  
A. Eynon, Principal Translator  
S. Hendy, Member Support Officer  
E. Bryer, Democratic Services Officer

**Also Present (Virtually):**

R. Page, Senior Business Support Manager  
M. Runeckles, Members Support Officer

**Chamber - County Hall, Carmarthen. SA31 1JP and remotely - 10.00 - 11.35 am**

**1. APOLOGIES FOR ABSENCE**

Apologies for absence were received from Councillors K. Davies and H. Jones.

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

There were no declarations of personal interest or of any prohibited party whips.

**3. PUBLIC QUESTIONS (NONE RECEIVED)**

The Chair advised that no public questions had been received.

Note: These minutes are subject to confirmation at the next meeting.

#### 4. HEALTH AND CARE SYSTEM FOR WEST WALES: HOW FAR, HOW FAST?

The Committee considered a report detailing the opportunities in Carmarthenshire to develop and implement a health and care system for older people based on 'what matters' to this population and would be fit for purpose both now and into the future.

The Committee welcomed Rhian Matthews (Hywel Dda UHB / Carmarthenshire County Council – Integrated System Director) to the meeting. The Integrated System Director provided the Committee with details of the current state of the health and social care system and the challenges. It was noted that there was an imbalance in terms of demand and capacity relating to managing the needs of the older people population. The frail and elderly population in West Wales was growing in the region of 3% a year and would continue to grow for at least 10 years. The current position would get substantially worse without change and transformation.

It was acknowledged that hospital stays for the severely frail predisposed them to harm and poor outcomes including infection, an increased risk of falls as well as muscle loss and deterioration in previous levels of independence. This in turn increased the need for care and support on discharge increasing the demand on the finite availability of social care. Additionally, poor discharge rates compromise the Emergency Departments' ability to receive patients arriving by ambulance resulting in ambulance handover delays.

The Committee noted that there was a Section 33 Agreement between Carmarthenshire County Council and Hywel Dda University Health Board which supported an integrated management structure across community health and social care for older adults and the development of integrated care pathways (Home First) which had demonstrated in the last twelve months to have reduced care and support requirement for a targeted element of frail and elderly population by up to 85%.

The Integrated System Director clarified that the 'Home First' was an approach (not a service) taken by multi-disciplinary teams of professionals which embedded best practice for managing the frail. It consisted of rapid access to care and treatment for acute health needs within a 1 – 2 hour period providing a safe alternative to hospital. It also provided urgent access to primary care and reablement provision within a 8 – 72 hour period to support people to receive treatment and to recover from injury or illness.

It was noted that Delta Wellbeing provided a digital infrastructure and monitoring of patients being managed at home through the Delta Connect pathway.

The Committee also noted the benefits and governance arrangements as detailed in the plan.

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A number of questions were raised, the main matters were as follows:

- In response to concerns expressed that some patients may request a level of support that may put them in danger, the Integrated Services Director stated that the assessment would always be based on what matters to the individual but that different treatments, the potential risks and alternative options were always considered.
- In response to a question regarding the Ty Pili Pala model, it was stated that the outcomes were better than those who stayed in community hospitals and that the Ty Pili Pala model should be rolled out to community hospitals.
- It was stated that one of the biggest challenges at the current time was changing the mindset and culture of staff from a reactive to preventative approach.
- It was acknowledged that additional work was required regarding the promotion of the Delta Connect service. It was stated that take up was better when referrals were made by health professionals.
- Concern was expressed regarding the loss of care packages when individuals were admitted to hospital for more than two weeks. The Integrated Services Director explained in some cases individuals were losing care packaged unnecessarily and that mitigations were being put in place including referrals to the Home Care First team within 36 hours. It was also noted that often when individuals were in hospital for a period of time packages of care may change due to issues such as muscle loss.
- Officers were asked if resources (staff) were available to implement the packages of care required. In response, the Integrated Services Director stated that workforce availability across the health and social care system was a problem for the whole of the UK but that this different approach would contribute to a more effective and efficient use of resources. Additionally, more attractive roles and reward packaged had been developed and several successful recruitment rounds had resulted in 20 additional staff being employed recently.

**UNANIMOUSLY RESOLVED to recommend to Cabinet the approval of the proposal and high level plan.**

## **5. DOMICILIARY CARE PERFORMANCE UPDATE**

The Committee considered a report they had requested surrounding the current pressure on domiciliary care and the impact that this was having on hospital discharges. The report was to provide assurance that patients were being safely supported to leave hospital and outlined the pressures and how Carmarthenshire County Council was responding to those pressures. This report was the second update the Committee had received which included the latest available data captured on the 9<sup>th</sup> May 2023.

It was highlighted that trends were stabilising and that there was levelling off of the number of hours commissioned in relation to domiciliary care. Despite the

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improvements the Committee was advised that this would be treated with caution and performance monitored closely in the coming months.

**UNANIMOUSLY RESOLVED that the report be received**

**6. REVENUE & CAPITAL BUDGET MONITORING REPORT 2022/23**

The Committee considered the Revenue and Capital Budget Monitoring Report in relation to the Health and Social Services, which provided an update on the latest budgetary position as at 28th February, 2023 in respect of the 2022/23 financial year.

The Health and Social Services was projecting an overspend of £6,920K on the revenue budget and net variance of -£906K against the 2022/23 approved capital budget. The expectation was that at year end £1,338k of Managerial savings against a target of £1,603k were forecast to be delivered.

The main variances on capital schemes showed a forecasted variance of (£362k) against a net budget of £1,761k on social care projects, and a (£544k) variance against the Children Services projects net budget of £975k.

It was noted that the expectation was that at year end £1,338k of Managerial savings against a target of £1,603k were forecast to be delivered.

The following questions / observations were raised on the report:

- In response to a query regarding the additional costs in the Home Care Framework due to supporting rural provision, the Head of Integrated Services advised that this was due to increasing costs to incentivise domiciliary care service providers to work in more rural areas of the County.
- It was noted that the Health Board did not provide funding towards the cost of specialist support for complex needs (Looked After Services). 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. It was highlighted that demand was continually changing and that it was a precarious position and that in previous years the provision of Welsh Government Covid grants had masked the financial position but now the Authority was having to meet the cost of demand itself.
- In response to a query regarding the provision of day services being reduced compared to pre-pandemic levels, officers advised day services was not always the best solution and that day opportunities were being offered. Day opportunities were considered to provide better outcomes for individuals and were often more cost effective. It was recognised that building based service offer was not always the better solution.

**UNANIMOUSLY RESOLVED that the report be received**

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

The Committee received an explanation for the non-submission of the following scrutiny report: unanimously.

- 10 Year Social Services Strategy

**UNANIMOUSLY RESOLVED that the explanation for the non-submission be noted.**

**8. HEALTH & SOCIAL SERVICES SCRUTINY COMMITTEE FORWARD WORK PLAN FOR 2023/24**

The Committee considered its Forward Work Plan for 2023/24, which had been prepared in accordance with the Council's Constitution which required Scrutiny Committees to develop and publish annual forward work programmes identifying issues and reports to be considered at meetings during the course of the municipal year.

**UNANIMOUSLY RESOLVED that the Forward Work Plan for the Health & Social Services Scrutiny Committee for 2023/24 be confirmed.**

**9. FORTHCOMING ITEMS**

**RESOLVED that the list of forthcoming items to be considered at the next scheduled meeting on the 5<sup>th</sup> July 2023 be noted.**

**10. TO SIGN AS A CORRECT RECORD THE MINUTES OF THE MEETING HELD ON THE 17TH APRIL, 2023**

**UNANAMOUSLY RESOLVED that the minutes of the meeting of the Committee held on the 17<sup>th</sup> April 2023 be signed as a correct record.**

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**CHAIR**

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**DATE**

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