

Minutes

HEALTH AND SOCIAL CARE SELECT COMMITTEE

19 July 2022

Meeting held at Committee Room 5 - Civic Centre,
High Street, Uxbridge



HILLINGDON
LONDON

	<p>Committee Members Present: Councillors Nick Denys (Chairman), Philip Corthorne (Vice-Chairman), Tony Burles, Reeta Chamdal, Alan Chapman, June Nelson (Opposition Lead) and Sital Punja (In place of Barry Nelson-West)</p> <p>LBH Officers Present: Dan Kennedy (Corporate Director of Central Services), Jan Major (Head of Direct Care Provision), Sandra Taylor (Executive Director of Adult Services and Health), Tony Zaman (Interim Chief Executive) and Nikki O'Halloran (Democratic Services Manager)</p>
13.	<p>APOLOGIES FOR ABSENCE (<i>Agenda Item 1</i>)</p> <p>Apologies for absence had been received from Councillor Barry Nelson-West (Councillor Sital Punja was present as his substitute).</p>
14.	<p>DECLARATIONS OF INTEREST IN MATTERS COMING BEFORE THIS MEETING (<i>Agenda Item 2</i>)</p> <p>There were no declarations of interest in matters coming before this meeting.</p>
15.	<p>MINUTES OF THE MEETING HELD ON 22 JUNE 2022 (<i>Agenda Item 3</i>)</p> <p>RESOLVED: That the minutes of the meeting held on 22 June 2022 be agreed as a correct record.</p>
16.	<p>EXCLUSION OF PRESS AND PUBLIC (<i>Agenda Item 4</i>)</p> <p>RESOLVED: That all items of business be considered in public.</p>
17.	<p>COUNCIL STRATEGY 2022-2026 CONSULTATION (<i>Agenda Item 5</i>)</p> <p>The Chairman welcomed those present to the meeting. Mr Tony Zaman, the Council's Interim Chief Executive, advised that the report gave details of the Council's strategy, rather than providing Members with a plan, which set out the authority's ambitions over the next four years. The anticipated outcomes would provide benefits for the Borough's residents, such as carbon reduction. There would be an annual plan that would be developed that would underpin the strategy to help deliver these outcomes in line with the Medium Term Financial Forecast (MTFF). Although individual issues would still be measured, they could be brought together in a single narrative.</p> <p>Mr Dan Kennedy, the Council's Corporate Director of Central Services, advised that this was a high level strategy document that set out the Council's ambitions for its residents at a place level. It set out five commitments to residents: 1) safe and strong communities; 2) thriving, healthy households; 3) a green and sustainable Borough; 4) a</p>

thriving economy; and 5) a digital-enabled, modern, well-run Council.

Consultation on the draft Council Strategy 2022-2026 had started on 8 July 2022 and would end on 9 September 2022. It had been promoted through various communication channels including through social media and proactive contact had been made with around 350 organisations from across the Borough. The document would be finalised in October and ready for consideration by Council on 17 November 2022.

It was agreed that the Committee would want to look at the relevant plans once they had been developed. Members were keen to see a link between the high level aspirations for the authority and how that translated into actual performance. Furthermore, they requested that a baseline was provided to establish the impact (positive or negative) of any changes that were subsequently made.

Mr Zaman advised that phrases such as 'more than' and 'less than' had been avoided as it had been recognised that things changed. Service plans would provide a baseline along with an explanation of any changes that were apparent in the results. A balanced scorecard-type approach would be used to help the Council to achieve continuous improvement.

Consideration was given to the digitisation agenda and the impact that this would have on services within the Committee's remit. Mr Zaman noted that this would be more about how services were supported rather than how they were delivered. Members were assured that digital did not mean automating all telephone calls and that officers would still be available to deal with complex enquiries and vulnerable residents. The digital agenda would mean different things in different areas of the Council. To some extent, there would be a need to enable residents to become good consumers of the services provided.

It was recognised that technology provided opportunities but that some residents would not be able to use it. As such, the Council would not be assuming complete change without providing alternative options for engagement to ensure that these individuals were not disenfranchised. Mr Zaman advised that the Council had intelligence with regard to how receptive different residents would be in different parts of the Borough to digital services which meant that a tailored approach could be developed.

Members were advised that a lot of the technology already being used had been based on artificial intelligence (AI). Members were advised that telephone services could be built up using commonly used phrases to make the conversation more fluid but that there would always a point during an automated call where the caller could opt to speak to a person. Mr Zaman advised that, when the development had progressed sufficiently, officers would be able to provide Members of the Committee with a demonstration.

Members applauded visionary thinking and felt that, when the interaction was transactional, AI was a good fit. However, as soon as there was a problem, the caller needed to talk to a person. It would be important to have strong plans with real markers of progress to ensure that the system was working and continuously adapting to the locality and the information that was available.

It was agreed that the Democratic Services Manager would draft the comments of the Committee for inclusion in the report to Cabinet.

RESOLVED: That the Committee's comments on the Council Strategy 2022-26 be submitted to Cabinet.

18. **SOCIAL CARE AND PUBLIC HEALTH UPDATES** (*Agenda Item 6*)

Ms Sandra Taylor, the Council's Executive Director of Adult Services and Health, advised that the review of assisted living technology (ALT) undertaken by the Families, Health and Wellbeing Select Committee had highlighted ALT as being a positive and effective way of supporting care in the Borough. Assessments needed to be undertaken as soon as possible and might identify that Telecare could meet the resident's needs, but this was just a small part of what was available. Vulnerable older people were not necessarily able to use a lot of technology.

Members were advised that there would be significant legislative changes expected in October 2022 in relation to charging reforms for people using social services so it was important that the authority established how these services were being used. It was anticipated that the demand for Care Act assessments would increase, after which the resident could ask for the (£86k) care cap clock to start. This new development would have an impact on care providers as well as providing a significant challenge for social care.

Grant funding had been made available for Hillingdon to establish what the pressure would be. As such, between now and 14 October 2022, action was being taken to draft a plan to understand how many residents were likely to come through the system so that this could be reported back to the Department of Social Care. Although most of these residents would likely already be known to the Council, there would be some that were not. It was anticipated that the Council would have the plan in place by February 2023 about what happened next but that effort would be made to do Care Act assessments early to smooth the pressure (although they wouldn't get their care cap earlier). It was agreed that the draft plan would be circulated to Members of the Committee once it was ready.

Ms Jan Major, the Council's Head of Direct Care Provision, advised that work had been started on the fair cost of care exercise to engage with care providers. There had been good engagement from providers with a 35% return. Information would also be collected in relation to the self-funding market.

Ms Taylor advised that a new inspection regime had been introduced by the Care Quality Commission (CQC) whereby the safety domain of social care would be inspected at some point between April 2023 and March 2025. Colleagues from across North West London (NWL) had been undertaking peer reviews to help meet the inspection framework which had been circulated in draft but which would not be published until October 2022.

It was noted that Social Work England undertook an annual survey of qualified and unqualified staff. This survey had rated every element measured in Hillingdon as good which meant that caseloads were not too high and that social work staff were able to communicate effectively with their managers. The staff survey undertaken by the Council had been generally positive for Adult Social Care and Health staff but there were queries that needed to be addressed in relation to things like flexible working for social care staff.

Members were aware that there could sometimes be a high turnover of staff in social

care. Ms Taylor advised that the Council could not always compete for staff on salaries but that the authority did benchmark quite high. As such, it was important that Hillingdon was able to compete on other elements such as work/life balance and a comfortable in-office experience. Hillingdon also provided good career progression and training opportunities, including an apprentice programme for social workers.

Although there were recruitment and retention issues, NWL had been developing a recruitment strategy which included recruiting staff from overseas and ensuring that services were formed around localities and wrapped around the community. Hillingdon currently had a full complement of Approved Mental Health Practitioners (AMHP) which the Council had grown itself and apprentice social workers continued to be supported in their post qualifying years.

Insofar as relationships with local universities were concerned, Buckinghamshire New University had been working with nursing students to place them in care homes in the Borough. A lot of work continued to be undertaken with Brunel University including the development of the social work principles.

The employment of agency staff continued to be a challenge, especially when they were needed for care homes where specific agencies were used. The contingent labour model meant that a pool of agency staff were available that were known to the staff and patients in a particular care home. However, using agency staff to cover a social work post was not good practice so recruitment was preferred.

With regard to contracts, Ms Taylor advised that stringent quality monitoring processes had been put in place. A team based in Social Care monitored all social care services provided across the Borough to ensure that the services provided very good value for money and that they met the patients' needs. In addition, the CQC monitored everything that was regulated and a monthly provider risk panel had been set up (unregulated care would be things like housing related support and the provision of support and direction whereas regulated care would be things like physical care and giving medication). This risk panel reviewed a list of providers and made recommendations to the Care Governance Board which was chaired by Ms Taylor. Where issues arose, they were addressed and, in 90% of instances, the provider would be given support and they would improve. This was a corrective process rather than a punitive one.

Ms Major advised that a quarterly forum was held with the neighbourhood teams to talk about providers and any issues that had arisen. Hillingdon Health and Care Partners (HHCP) had also been working with the care home team, sharing information, supporting and directing.

It was noted that the funding for social care services would always be a challenge. As such, the priority was to have an excellent front door and provide excellent interventions to make residents as independent as possible. To this end, it would be important to influence the expectations of residents and their families to get individuals to help themselves. During the pandemic, an increasing number of people had stayed in their own homes with the provision of support and had done really well. This needed to be continued. Ms Taylor would provide the Committee with a breakdown on where the social care budget was spent with information on how much was spent on individual external contracts (it was noted that the placement of care would always be the highest cost to the Council from this budget).

Members asked what assumptions had been made during the fair cost of care exercise with regard to the impact on the Medium Term Financial Forecast (MTFF). Ms Taylor advised that work on the assumptions had not quite been completed but that there would be an impact on care providers and social care. It was hoped that the grant that had been received for the first year would address the funding gap. A draft would be available by October 2022.

Tendering for public health services would be undertaken in the near future where the Council would be looking for generational changes in new models of working. It was anticipated that this would provide the Council with huge opportunities to deliver services differently to residents. Discussions had already taken place with the current provider of some services which included the sexual health clinic, substance misuse, school nursing, district nursing and midwifery which were all provided through public health contracts. These contracts had been in place for 5-7 years so consideration needed to be given to where they would be best placed now with market warming taking place later this year. It was agreed that the Director of Public Health would be asked to provide the Committee with an update on this process in due course.

Concern was expressed that some residents found it difficult to get specialist help for individuals with autism. Ms Taylor advised that stand alone services were not provided for those with autism but that their needs were being met through the learning disability service as they had the most relatable skills. However, there were some specialised services available and further work with special educational needs would be vital in looking at this in the future.

The positive behaviour support team (PBST) was a Council-commissioned service that was provided in-house. To help some adults with autism and learning difficulties that needed additional support with challenging behaviour, the PBST provided a support plan.

In terms of performance information, Ms Taylor advised that work was currently underway to pull this together into a dashboard which she would circulate to Members in due course.

Members queried how Discharge to Assess (D2A) was progressing and whether or not it had had an impact on delayed discharge from Hillingdon Hospital. The decision to use D2A had been taken before the pandemic had started whereby a care service would go to a resident's home within two hours of discharge from hospital to have an assessment. Within five days, a decision would be made on how to best meet an individual's care needs. Currently, 460 hours of care were provided to residents across the Borough in their own homes each week. The care was provided by Comfort Care and other services such as physiotherapy and occupational therapy were also provided to support the carers. This model was being standardised and rolled out across NWL as it had been so effective.

The Committee asked Ms Taylor to pass on its thanks to her team for the excellent services that they provided.

RESOLVED: That:

- 1. the draft plan to identify the work that would be associated with the Care Act Assessment be circulated to Members of the Committee;**
- 2. Ms Taylor provide the Committee with a breakdown on where the social care budget was spent with information on how much was spent on**

	<p>individual external contracts;</p> <p>3. the Director of Public Health be asked to provide an update on the market warming process being undertaken in relation to letting the public health contracts;</p> <p>4. Ms Taylor circulate performance information to the Committee once work on the dashboard had been completed; and</p> <p>5. the content of the report be noted.</p>
19.	<p>ANNUAL SAFEGUARDING ADULTS BOARD REPORT (<i>Agenda Item 7</i>)</p> <p>It was noted that this item had been withdrawn from the agenda and would be considered at a future meeting.</p>
20.	<p>CABINET FORWARD PLAN MONTHLY MONITORING (<i>Agenda Item 8</i>)</p> <p>Consideration was given to the Cabinet Forward Plan.</p> <p>RESOLVED: That the Cabinet Forward Plan be noted.</p>
21.	<p>WORK PROGRAMME (<i>Agenda Item 9</i>)</p> <p>The Chairman asked that Members of the Committee give some thought to possible review topics which they could either raise during the discussion the meeting on 14 September 2022 or forward to the Democratic Services Manager in the interim. Options would then be presented to the Committee at its meeting on 12 October 2022. Members also agreed that the Annual Safeguarding Adults Board Report would be rescheduled for the meeting on 12 October 2022.</p> <p>It was agreed that the Care Act and public health procurement information requested would be scheduled for the meeting on 22 November 2022 and that an update on public health be scheduled for 26 January 2023.</p> <p>As it would be towards the end of the municipal year, it was agreed that the Cabinet Member for Health and Social Care be invited to attend the Committee's meeting on 26 April 2023 to provide Members with the highlights and challenges that the Council had faced over the last year.</p> <p>RESOVLED: That:</p> <ol style="list-style-type: none"> 1. Members identify possible review topics for discussion at the meeting on 14 September 2022; 2. Annual Safeguarding Adults Board Report be rescheduled for the meeting on 12 October 2022; 3. the Care Act and public health procurement information be considered at the meeting on 22 November 2022; 4. a public health update be scheduled for the meeting on 26 January 2023; 5. the Cabinet Member for Health and Social Care be invited to attend the meeting on 26 April 2022; and 6. the Work Programme be noted.
	<p>The meeting, which commenced at 6.30 pm, closed at 8.08 pm.</p>

These are the minutes of the above meeting. For more information on any of the resolutions please contact Nikki O'Halloran on 01895 250472. Circulation of these minutes is to Councillors, Officers, the Press and Members of the Public.