

minutes

Meeting ADULT SOCIAL CARE AND PUBLIC HEALTH SELECT COMMITTEE

Date 12 June 2023 (commencing at 10.30am)

Membership

COUNCILLORS

Roger Jackson (Chairman)
David Martin (Vice Chairman)

Reg Adair Eric Kerry
Steve Carr Philip Owen
Dr John Doddy Mike Pringle
Sybil Fielding Tom Smith

Paul Henshaw

OTHER COUNTY COUNCILLORS IN ATTENDANCE

Councillor Matt Barney
Councillor Scott Carlton

OFFICERS IN ATTENDANCE

Sue Batty Service Director for Community Services and Aging Well Bridget Cameron Interim Service Director for Strategic Commissioning and

Integration

Martin Elliott Senior Scrutiny Officer

Ainsley Macdonnell Service Director for Community Services and Living Well

Kate Morris Democratic Services Officer

Emma Shand Interim Group Manager Aging Well Services

OTHERS IN ATTENDANCE

Scott McKechnie – Independent Chair, Nottinghamshire Safeguarding Adults Board

1. TO NOTE THE APPOINTMENT AT FULL COUNCIL ON 11 MAY 2023 OF COUNCILLOR ROGER JACKSON AS CHAIRMAN AND COUNCILLOR DAVID MARTIN AS VICE-CHAIRMAN OF ADULTS SOCIAL CARE AND PUBLIC HEALTH SELECT COMMITTEE FOR THE 2023-24 MUNICIPAL YEAR

The Committee noted Council's appointment of Councillor Roger Jackson as its Chairman and Councillor David Martin as its Vice-Chairman for the 2023/24 municipal year.

2. TO NOTE THE MEMBERSHIP OF THE COMMITTEE FOR THE 2023-24 MUNICIPAL YEAR

The Committee noted its membership for the 2023/24 municipal year as:

Councillors Reg Adair, Steve Carr, Dr John Doddy, Sybil Fielding, Paul Henshaw, Eric Kerry, Philip Owen, Mike Pringle and Tom Smith

3. MINUTES OF THE LAST MEETING HELD ON 13 MARCH 2023

The minutes of the last meeting of the Adult Social Care and Public Health Select Committee held on 13 March 2023, having been previously circulated, were confirmed and signed by the Chairman.

4. APOLOGIES FOR ABSENCE

None

5. <u>DECLARATIONS OF INTEREST BY MEMBERS AND OFFICERS</u>

None.

6. <u>NOTTINGHAMSHIRE SAFEGUARDING ADULTS BOARD, REPORT ON PROGRESS AGAINST 2022-23 STRATEGIC PRIORITIES</u>

Scott McKechnie Independent Chair of Nottinghamshire Safeguarding Adults Board (NSAB) attended the meeting to present a report on the Nottinghamshire Safeguarding Adults Board's progress against its strategic priorities. Sue Batty, Service Director Community Services and Aging Well was also in attendance.

A **summary** of the report is detailed below:

- The external communications subgroup had been reviewed and improved to provide more focus on communication with both communities and statutory partners. A new Chair had been appointed to the subgroup and the development of a communication plan was underway. The input into the development of the communication plan that had be made from members was welcomed.
- Following discussions at the December Committee around placement of asylum seekers and refugees, a piece of work was undertaken by the Safeguarding Adults Board to seek assurance that safeguarding adult procedures were in place for those people in both long and short-term accommodation. Work had been undertaken with the accommodation provider to look at safeguarding procedures and had established that dedicated Safeguarding Team and Risk and Security Teams for the region were in place that managed information from accommodation settings. Safeguarding training was also provided to all staff as part of their induction and a programme of mandatory annual refresher training was also in place.
- The Safeguarding Team and the Risk Management Team reviewed all reports of incidents centred on the accommodation to look for themes or trends in safeguarding issues. This was done as a holistic review for each setting, and assurance had been given around the interventions that could be used in terms of Safeguarding, including Health and Wellbeing services.

- The Safeguarding Board had been working with the provider around data monitoring with new ways to record data and tracking data trends being recently established. Data sharing with statutory partners was also in place and the provider fed information into the Safeguarding Board's annual performance assurance tool for monitoring and tracking of outcomes for the Annual Report.
- Links had been established between the provider and the Safeguarding Team to ensure
 advice and guidance was easily accessible and the Safeguarding Board had received the
 assurance that processes were in place to manage adult safeguarding within the
 accommodation settings that this committee had gueried in December.
- The Safeguarding Board was working to develop strategies to work with and engage people with lived experiences to develop training and other work streams. The Our Voice Co-Production project fed into the Quality Assurance subgroup and the learning development to understand how to continue to improve the engagement and ensure the right offer was provided.
- Work on quality assurance had been started following the investigation and subsequent BBC "Panorama" programme around how adults at the Edenfield Centre in Manchester were treated. A Task and Finish Group had been set up jointly with the Integrated Care Board to establish how assurance could be sought that similar things could not happen in Nottinghamshire. The recommendations from that Task and Finish Group were due to be presented to the Safeguarding Board and its Executive later in June 2023. Recommendations, subject to approval, included an independent survey with carers, families, and service users, what advocacy support looked like for service users, links into out of area commissioners, and close links to the CQC to work together on the issue.
- A new Chair had been appointed to the Quality Assurance Subgroup and had been tasked with ensuring the right data was received and that good quality of data was received from across the partnership. This information would then be fed into the NSAB annual report.
- Regional work across the East Midlands had taken place around the learning from Safeguarding Adults reviews. This was then distilled back into the Nottinghamshire Board with ideas for improvements to be reviewed and taken forward by the appropriate partner organisation.
- The Learning and Development Subgroup had been working to collate learning from Safeguarding Adults reviews and the quality assurance subgroup to then develop a learning offer. This also had input from service users with lived experience to ensure high quality training and development.
- A new Executive Group had been established that above the Safeguarding Adults Board.
 It included members from Partner organisations, subgroup Chairs and the Independent
 Chair. The Executive Board would focus on decision making, progress against strategic
 priorities and risk information.

In the discussion that followed, Committee members raised the following points and questions:

- Members queried how developed the risk register was, and whether it would be possible to share it with members of this committee.
- Members asked what elected member representation was on the Nottinghamshire
 Safeguarding Adults Board, noting that they would expect Councillor representation, in

particular the responsible Cabinet member and the Chair for Adult Social Care and Public Health Select Committee as was seen in other areas.

- Members raised concerns around the public's confusion that could occur between refugees and illegal immigrants, and those who encouraged misinformation for local residents causing issues such as those seen in Ashfield earlier in the year.
- Members asked about access for refugees and asylum seekers to specialist support services particularly around neurodivergence and the increased risk of suicide and selfharm in this group.
- Members also asked about early diagnosis of neurodivergent conditions and how much emphasis was put on early diagnosis and support.
- Members asked how services ensured that any language barriers experienced by refugees and asylum seekers were overcome.
- Members asked what training was available to help improve the services in closed cultures. Members also requested access to the recommendations from the Task and Finish group that had examined the issue in Nottinghamshire.

In relation to the points raised by the Committee, the Independent Chair and Officers provided the following responses:

- As part of the work undertaken as a result of the improvement plan the risk register had been developed further to ensure identified risks and learnings were fed into the business plan. The register held by the Safeguarding Adults Board was high level and strategic and so could be shared with Committee Members. More detailed risk registers were held by departments throughout the Council and by partner organisations that were fed into the Safeguarding Adults Risk register.
- A review of the representation on the Board had identified a number of gaps, including academia and independent lay members. The Cabinet Member for Adult Social Care and Public Health sat on the Board and discussions would take place around further elected member representation.
- A system to ensure referrals to support services for neurodivergent adults was in place and data around the referrals was monitored by the Quality Assurance Subgroup. Wider partner organisations fed data into the Subgroup and were responsible for the more direct work with adults, within the Council this issue had been highlighted in learning from Safeguarding Adult Reviews and learning events, training was also available. The information from reviews and learning events was all fed into the Quality Assurance Group and then into the business plan to provide a strategic overview. The Chair had not been made aware of any case where a person had had a wrongful diagnosis and had then gone on to become a safeguarding concern.
- Early diagnosis and support for neurodivergent conditions was a priority, however
 national data had shown that coming out of the pandemic there as a significant backlog
 and delay in formal diagnosis. Demand for diagnosis was outstripping the current
 provision. A similar situation also existed for Children's services, and particular focus was
 needed around the transition from Children's to Adult's services and the support offered
 at that time.

- All services and statutory partners had access to an interpretation service via Language Line that ensured that interpretation happened in real time throughout conversations with services and professionals. Technology was also used to ensure written communications were understood and accessible by service users.
- The recommendations and a summary of the Task and finish group would be included within the NSAB Annual report. A separate briefing for members could be arranged should there be interest, following the report going to the Nottinghamshire Safeguarding Adults Board later in June. The work with the Integrated Care Board on this issue continued to reduce the risk as far as possible of that an incident like that seen in Edenfield Hospital would not happen in Nottinghamshire.

The Chairman thanked Scott McKechnie, Independent Chair Nottinghamshire Safeguarding Board, and Sue Batty, Service Director Community Services and Aging Well for attending the meeting and answering Members' questions.

RESOLVED: 2023/004

- 1. That the report be noted.
- That the following issues raised by the Committee in its consideration of the report of the Nottinghamshire Safeguarding Adults Board against its 2022-23 strategic priorities be progressed:
 - a) That the Nottinghamshire Safeguarding Adults Board Annual Report 2022-23 be received at the December 2023 meeting of the Adult Social Care and Public Health Select Committee.
 - b) That further information on the activity carried out by the Nottinghamshire Safeguarding Adults Board in managing strategic risks be circulated to members of the Adult Social Care and Public Health Select Committee.
 - c) That the Independent Chair, in consultation with partners, gives further consideration to how representatives of Nottinghamshire Safeguarding Adults Board partners are represented at meetings of the Nottinghamshire Safeguarding Adults Board.

7. PROGRESS ON IMPLEMENTATION OF THE DISCHARGE TO ASSESS MODEL & LOCAL AUTHORITY PLAN FOR THE NATIONAL DISCHARGE GRANT

Councillor Matt Barney, Cabinet Member for Adult Social Care and Public Health introduced the report and Sue Batty, Service Director for Community Services and Aging Well presented the details, summarised below.

- The Discharge to Assess model was originally implemented as part of the Covid requirements. Following a peer review from the Local Government Association an action plan with three key recommendations had been produced. They three key recommendations were:
 - Implementation of Transfer of Care Hubs in hospital
 - Implementation of an agreed share data set across partner organisations.
 - Culture shift to improve co-location, and strength-based decision making to focus on outcomes.

- The benefits of the Discharge to Assess model included a focus on retuning people home as soon as possible and reablement to allow people to remain independent for longer. Rehabilitation was an important part of the process.
- The model did require more resources as work took place both in the hospitals prior to discharge and also in people's homes. This was previously all done at the hospital, but the new model of assessment, completed once the patient had returned home meant that no long-term decisions were made before the patient had settled back into their home environment and their ongoing needs had become clear.
- Performance had been improving steadily, and more people were returning home sooner with the use of interim residential home placement having decreased.
- The implementation of the one agreed data set between the partner organisations had been very beneficial and had allowed processes to be simplified and adapted.
- The Joint Health and Social Care Plan, approved at the Health and Wellbeing Board in May 2023 had set out where resources needed to be focused, as identified from the Peer Review and the National Assurance Plan. These areas of focus included significant additional capacity in the Hubs, within the assessment function and enablement capacity, both in hospitals and mental health hospitals.
- A piece of work had been started to establish how the fund could support the independent sector providers to recruit and retain staff which would then feed back into the Integrated Care Workforce strategy and plan.
- Investment had also been focused on services to support more integrated ways of working across the Social Care, Reablement and Community Health and to develop an integrated therapy training programme.

In the discussion that followed, Committee members raised the following points and questions:

- Members asked about the absence of data from North Nottinghamshire, and asked about improvements made to ensure that the challenges of cross-county care were being tackled.
- Members asked about the number of social care staff currently based in the hospitals and what measures were in place to reduce pressure on families that may lead to unsafe discharges.
- Members queried the process for reporting results from this additional funding programme to the government.
- Members asked about the use of technology within the service, including remote monitoring by hospital, similar to the remote wards set up during the pandemic.
- Members asked where the cost for assistive technologies currently sat.
- Members asked how the recruitment of staff would be addressed to ensure the posts identified by the funding programme would be maintained.

In relation to the points raised by the Committee, Officers provided the following responses:

- The most recent data set from North Nottinghamshire had not yet been received but would be circulated to members when it was available. Systems were also being developed at a local level to facilitate discharge to a facility outside of the county for residents in the far north of the county to reduce travel times. Cross County working had its challenges but there were systems in development to mitigate these.
- Staff were now co-located back in all hospitals, having returned since the Covid pandemic. There were staff available on Saturdays within hospitals and plans were being drawn up to ensure staff could also be available on Sundays. Decisions around discharge were made by the multi-disciplinary team meeting that were attended by social care staff. Where support was needed, services would be put in place for discharge to ensure safe discharge. Staff would then visit people in their own homes and make further assessment of ongoing support needed. Work was also underway looking at accommodation based reablement for those people who are unable to return home and for those with more complex needs.
- The Council would report back to the government on a fortnightly basis demonstrating
 the impact of the grant funding and how the numbers of people discharged were
 increasing and on the time spent in hospital.
- Assistive technology was in place and being used to help with monitoring post discharge. In order to maximise independence, the Reablement Service would always assess what technology would help people be as independent as possible on discharge. This worked alongside therapy and community health support. Pilots had also been taking place within the independent home care sector to use technology for various tasks such as medication reminders and care prompts, though this had not replaced in person visits.
- At present the cost for the assistive technology was not covered by the NHS, however existing smart technology, such as mobile phones, was starting to replace specifically installed equipment.
- Recruitment of staff was a challenge, with a variety of different methods were planned,
 particularly events in the community and social media. A recruitment campaign and
 workforce plan were in place. The recruitment would focus on strengths and values with
 training offered after appointment. The recruitment process for these roles had been
 made less bureaucratic but continued to focus on checks to ensure safety and suitability
 for the roles.

The Chairman thanked Matt Barney, Cabinet Member for Adult Social Care and Public Health, Sue Batty, Service Director for Community Services and Aging Well and Emma Shand, Interim Group Manager Aging Well Services for attending the meeting and answering Members' questions.

RESOLVED: 2023/005

- 1. That the report be noted.
- 2. That the following issues raised by the Committee in its consideration of the report on the implementation of the Discharge to Assess model and local authority plan for the national discharge grant 2023 2024 be progressed:
 - a) That a further progress report on the implementation of Discharge to Assess
 Model and the application of the Discharge to Assess Grant be brought to a future

meeting of the Adult Social Care and Public Health Select Committee at a date to be agreed by the Chairman of the Committee.

b) That updated information on the impact of the Transfer of Care Hubs during the first six months of their implementation be circulated to members of the Adult Social Care and Public Health Select Committee once the data from North Nottinghamshire has been received.

8. <u>ESTABLISHMENT OF A TASK AND FINISH WORKING GROUP ON THE DAY OPPORTUNITIES STRATEGY</u>

The Senior Scrutiny Officer introduced the report seeking to establish a Task and Finish working groups looking at the Day opportunities Strategy. Members from all political groups were encouraged to be involved. The Senior Scrutiny Officer noted that non-committee members could be nominated to take part in reviews if committee members were unable to attend.

RESOLVED: 2023/006

- 1. That a scrutiny task and finish working group be established to carry out further scrutiny work on aspects of the implementation of the Day Opportunities Strategy 2022 27.
- 2. The Chairman and Vice-Chairman, in consultation with officers create a scope that will determine the work of the task and finish working group.

9. WORK PROGRAMME

The Senior Scrutiny Officer presented the Committee's current work programme and highlighted that work would take place with the Chairman and Vice Chairman over the summer to formulate a workplan from September.

RESOLVED: 2023/007

- 1) That the work programme be noted.
- 2) That committee members make any further suggestions for consideration by the Chairman and Vice-Chairman for inclusion on the work programme in consultation with the relevant Cabinet Member(s) and senior officers, subject to the required approval by the Chairman of Overview Committee.

The meeting closed at 12:01 pm.

CHAIRMAN