

## **Adult Social Care and Health Committee**

**Monday, 27 April 2015 at 10:30**

**County Hall, County Hall, West Bridgford, Nottingham, NG2 7QP**

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### **AGENDA**

- |   |   |         |
|---|---|---------|
| 1 | Minutes of the last meeting held on 30 March 2015   | 3 - 6   |
| 2 | Apologies for Absence   |         |
| 3 | Declarations of Interests by Members and Officers:- (see note below)<br>(a) Disclosable Pecuniary Interests<br>(b) Private Interests (pecuniary and non-pecuniary)            |         |
| 4 | Innovative Partnership Model Established for Middle Street Resource Centre, Beeston   | 7 - 12  |
| 5 | Charges for Deferred Payment Agreements and Brokerage of Community Based Support for Self Funders - Outcome of Consultation and Response to Consultation on the Care Act 2014 | 13 - 26 |
| 6 | Outcome of Sector Led Improvement Peer Challenge 2014   | 27 - 32 |
| 7 | Establishment of Temporary Social Work Post for New Cross Support Team - Ashfield District Council  | 33 - 36 |
| 8 | Work Programme  | 37 - 44 |
| 9 | Care Home Provider Suspensions  | 45 - 48 |

10 Exclusion of the Public

The Committee will be invited to resolve:-

“That the public be excluded for the remainder of the meeting on the grounds that the discussions are likely to involve disclosure of exempt information described in paragraph 3 of the Local Government (Access to Information) (Variation) Order 2006 and the public interest in maintaining the exemption outweighs the public interest in disclosing the information.”

Note

If this is agreed, the public will have to leave the meeting during consideration of the following items.

11 Care Home Provider Suspensions Exempt Appendix

- Information relating to the financial or business affairs of any particular person (including the authority holding that information);

**Notes**

- (1) Councillors are advised to contact their Research Officer for details of any Group Meetings which are planned for this meeting.
- (2) Members of the public wishing to inspect "Background Papers" referred to in the reports on the agenda or Schedule 12A of the Local Government Act should contact:-

Customer Services Centre 0300 500 80 80

- (3) Persons making a declaration of interest should have regard to the Code of Conduct and the Council's Procedure Rules. Those declaring must indicate the nature of their interest and the reasons for the declaration.

Councillors or Officers requiring clarification on whether to make a declaration of interest are invited to contact Paul Davies (Tel. 0115 977 3299) or a colleague in Democratic Services prior to the meeting.

- (4) Councillors are reminded that Committee and Sub-Committee papers, with the exception of those which contain Exempt or Confidential Information, may be recycled.
- (5) This agenda and its associated reports are available to view online via an online calendar - <http://www.nottinghamshire.gov.uk/dms/Meetings.aspx>

Meeting ADULT SOCIAL CARE AND HEALTH COMMITTEE

Date 30 March 2015 (commencing at 10.30 am)

**Membership**

Persons absent are marked with an 'A'

**COUNCILLORS**

Muriel Weisz (Chair)  
Yvonne Woodhead (Vice-Chair)

Roy Allan  
Alan Bell  
John Cottee  
Sybil Fielding  
Andy Sissons

Pam Skelding  
Stuart Wallace  
Jacky Williams  
Liz Yates

**OFFICERS IN ATTENDANCE**

Caroline Baria, Service Director, ASCH&PP  
Sue Batty, Service Director, ASCH&PP  
Paul Davies, Advanced Democratic Services Officer, PPCS  
Steve Jennings-Hough, Occupational Therapy Project Lead, ASCH&PP  
Jennie Kennington, Senior Executive Officer, ASCH&PP  
Paul McKay, Service Director, ASCH&PP  
Jon Wilson, Temporary Deputy Director, ASCH&PP

**ALSO IN ATTENDANCE**

Rebecca Larder, Director of Transformation, South Nottinghamshire

**MINUTES OF THE LAST MEETING**

The minutes of the meeting held on 2 March 2015 were confirmed and signed by the Chair.

**MEMBERSHIP**

It was reported that Councillor Roy Allan had been appointed in place of Councillor Michael Payne, for this meeting only.

**DECLARATIONS OF INTEREST**

There were no declarations of interest.

## **JON WILSON**

The Chair indicated that this would be Jon Wilson's last meeting of the committee before taking up his new post with Leicestershire County Council. On behalf of the committee, she thanked him for his contribution.

## **HEALTH AND SOCIAL CARE INTEGRATION IN SOUTH NOTTINGHAMSHIRE**

Rebecca Larder gave a presentation on the integration of health and social care services in South Nottinghamshire, and responded to questions and comments.

### **RESOLVED 2015/025**

That the progress in developing the transformation programme across South Nottinghamshire for integrated health and social care services be noted.

## **TRANSFORMATION RESOURCE – OVERVIEW OF DEPARTMENTAL REQUIREMENTS**

The committee asked for reports to a future meeting on the risk assessment of changing from double to single care (resolution 1 below) and the integrated meals production and delivery service (resolution 4).

### **RESOLVED 2015/026**

- (1) That an additional 3.5 fte Occupational Therapy posts be created for one year to support delivery of the Double to Single Care approach as part of the existing Younger and Older Adults' Community Care projects at a total cost of £151,000.
- (2) That the change of funding source for the Trading Standards Project Management post to departmental reserves be approved.
- (3) That the creation or extension of additional temporary posts, as outlined in Appendix 1 to the report be approved, to support delivery of the new savings projects (2015/16 to 2018/19) as approved at the February 2015 Full Council Budget meeting, at a total cost of £1,465,000.
- (4) That one-off revenue expenditure of £194,000 be approved to help develop a single integrated meals production and delivery service.
- (5) That the existing temporary Project Manager post in the OT Service be extended for one year at a total cost of £53,000.
- (6) That an additional temporary Commissioning Officer post be created for one year to support delivery of the Care Act Programme at a total cost of £49,000.
- (7) That approval be given to the permanent establishment of 4.92 FTE Community Care Officers in the OT Intake Team, at a total cost of £153,000 pa, and the permanent transfer of the existing District Teams' staffing budgets to the OT Intake Team's staffing budget.

- (8) That a permanent Service Advisor Hub post be created in the OT Intake Team, at a total cost of £24,000 pa.
- (9) That an existing part-time permanent Social Worker post within the ADVIS team be merged with a full-time vacant Community Care Officer post, to create a 1.0 FTE Social Worker post at a cost of £43,000 pa.

### **ADVOCACY SERVICES**

#### **RESOLVED 2015/027**

- (1) That consultation be undertaken on the future of Advocacy Services;
- (2) That a further report be presented on consultation outcomes and recommendations for action.

### **IMPLEMENTATION OF THE ADULT SOCIAL CARE STRATEGY 2014/15**

#### **RESOLVED 2015/028**

- (1) That the progress made to date with implementation of the Adult Social Care Strategy be noted;
- (2) That a further progress update be presented in November 2015;
- (3) That the revised Adult Social Care Strategy, updated in line with the Care Act 2014, be recommended to Policy Committee for approval.

### **NEW RATES FOR INDEPENDENT SECTOR CARE AND SUPPORT SERVICES**

#### **RESOLVED 2015/029**

- (1) That an index linked inflationary increase of 1% be applied for the adult social care services to older people's care home placements payable from the start of the financial year 2015/16;
- (2) That an in-depth analysis of provider costs be undertaken to determine the cost to the authority of paying an inflationary uplift and the impact on external providers of paying their staff the new minimum wage, with recommendations to be brought to Adult Social Care and Health Committee in 2015.

### **YOUNG CARERS**

#### **RESOLVED 2015/030**

- (1) That the update on work with and support to young carers in Nottinghamshire be noted;
- (2) That 3.5 fte Community Care Officers (Grade 5, scp 24-28) be established with approved car user status as detailed in the report.

## **OCCUPATIONAL THERAPY**

### **RESOLVED 2015/031**

- (1) That the progress with projects being undertaken within Occupational Therapy and improvements made to date to improve and streamline services be noted;
- (2) That a further progress report be presented including the outcomes of the hub evaluation in October 2015;
- (3) That a 1fte temporary Hub Service Advisor post be established for one year, as described in the report.

## **WORK PROGRAMME**

### **RESOLVED 2015/032**

That the Work Programme be noted, subject to further reports on the risk assessment of changing from double to single care, and on the integrated meals production and delivery service.

The meeting closed at 12.25 pm.

**CHAIR**



**27 April 2015**

**Agenda Item: 4**

## **REPORT OF THE SERVICE DIRECTOR, SOUTH NOTTINGHAMSHIRE**

### **INNOVATIVE PARTNERSHIP MODEL ESTABLISHED FOR MIDDLE STREET RESOURCE CENTRE, BEESTON**

#### **Purpose of the Report**

1. To inform the Committee of a Service Level Agreement (SLA) and one year licence to be granted to a new local charity called Beeston Community Resource CIO (Charitable Incorporated Organisation) which was approved by Finance and Property Committee on 23 March 2015. This innovative partnership between the Council and BCR CIO will enable significant social care outcomes to be realised by people in Beeston and surrounding areas, and has the potential to deliver cashable financial benefits to the Council in future.

#### **Information and Advice**

2. The site on Middle Street in Beeston was purchased by the County Council in 1970 from Beeston & Stapleford Urban District Council for the purpose of building and operating a 'Psychiatric Day Centre'. Construction of the new building was completed in 1972 and a day centre with a mental health focus has operated on the site since that time. The day centre was refurbished in early 2013 including providing office space in part of the building.
3. The day service for people with mental illness integrated into the former Barncroft Centre (Sunnyside Road, Chilwell) to form the Broxtowe Day Service in 2013. After refurbishment of the Middle Street building, it was used as a base both for day service activities and for the operation of Mental Health Co-production.
4. From March 2014, the day service ceased to operate from the Middle Street base as it became more efficient to concentrate staffing and activities at the main day service site in Chilwell. Mental Health Co-production continued to operate from the Middle Street base and a variety of new community initiatives have been encouraged to flourish in the sections of the building that were no longer being used by the day service.
5. As part of the day service savings programme agreed by Full Council in February 2014, it was agreed that the day service will release the Middle Street building-related budgets as a recurrent saving, since the service had no further use for the building.

6. One third of the Middle Street building was developed into office accommodation in 2013 and this will be used by the Broxtowe and Hucknall Community Mental Health Team, which is relocating some of the staff from the NHS property in Beeston known as the Hope Centre.
7. The future of the remaining two thirds of the building was unclear until representatives of the people who access the community activities approached the Council to ask for the opportunity to take over the management of this part of the building, so that it could continue to be used by the existing mental health service users and others from the local community who benefit from the activities. These representatives have formed the new charity called BCR CIO, for the sole purpose of running the community side of the building. They have committed to maintain the existing activities of music, gardening, crafts and educational courses together with a widening range of support services and to make the centre available and used by the local community.
8. The purpose of the service is to enable people suffering from mental ill-health, social exclusion or other social disadvantages the opportunities to gain support and advice with a wide range of needs, in order to deliver outcomes that promote health, well-being and quality of life. The Centre will be available for use by charities whose members comprise mainly mental health service users, but other members of the community will not be excluded. A wide range of support services will be provided, including:
  - peer to peer support
  - training in computer and internet skills
  - support in using the internet to access social benefits on-line
  - advocacy
  - social and recreational activities.
9. BCR CIO's aims are consistent with Nottinghamshire County Council's Strategic Plan Priority 4 'Providing Care and Promoting Health', and with the proposed strategic priorities in the 'No Health without Mental Health, Nottinghamshire's Mental Health Framework for Action (2014 – 2017)'. The Adult Social Care Strategy also supports this development as it emphasises that "we must focus resources on support that prevents, delays and reduces the need for care and support.... we will expect to share responsibility with individuals, families and communities to maintain their health and independence".
10. This partnership will not only maximise the usefulness of Middle Street Resource Centre for the local community in general, but will also provide additional opportunities for activities across a wide spectrum of participants, encouraging social interaction and helping to dispel the stigma which often attaches to disability and social isolation.
11. BCR CIO has been granted a licence to use the building for 2015/16, free of any charges (excepting additional use of caretaking and cleaning staff beyond normal working hours). This will give the group time to establish an income stream from their part of the centre, to prove that it would be viable for them to contribute to the running costs, from 2016/17 onwards. During 2015/16, BCR CIO is expected to:



- generate sufficient new income to show that it can cover the on-going costs of two thirds of the building in future, by hiring out rooms to external organisations and submitting successful funding bids for grants
  - meet the outcomes specified in the SLA
  - adhere to the terms and conditions detailed in the licence.
12. The total budget for building-related expenses at Middle Street was £79,000 in 2014/15. This will continue to be funded by the Adult Social Care, Health and Public Protection (ASCH&PP) department.
  13. Regular monitoring reports against the outcomes specified in the SLA will be prepared by BCR CIO, so that progress can be tracked and support offered to BCR CIO by the Council as necessary. Monitoring will be undertaken by the ASCH & PP department.
  14. If BCR CIO proves its viability against the indicators outlined at paragraph 10, then an updated business case will be submitted to the Finance and Property Committee, as per the requirements of the Community Asset Transfer Policy. This business case will identify how the organisation is able to support the Council's corporate objectives. Any lease will need to be at market rental level and it will be for BCR to outline in the business case how its activities meet corporate objectives to justify the difference in value between market rent and rent payable.

### **Other Options Considered**

15. The report is for noting only.

### **Reason/s for Recommendation/s**

16. The report is for noting only.

### **Statutory and Policy Implications**

17. This report has been compiled after consideration of implications in respect of crime and disorder, finance, human resources, human rights, the NHS Constitution (Public Health only), the public sector equality duty, safeguarding of children and vulnerable adults, service users, sustainability and the environment and ways of working and where such implications are material they are described below. Appropriate consultation has been undertaken and advice sought on these issues as required.

### **Financial Implications**

18. The financial implications are that the current budget for building-related expenses at Middle Street will be retained for 2015/16.

### **Human Resources Implications**

19. Monitoring work will be undertaken by an Officer from the ASCH & PP Department. Corporate Property and a member of the Community Mental Health Team (CMHT) will be involved in joint meetings with BCR CIO to ensure effective operation of the Middle Street building. Current staff management of the caretaker and cleaner will continue.

## **Public Sector Equality Duty Implications**

20. The implications of this new partnership are that activities to deliver social benefit and emotional well-being will continue to be provided and expanded at Middle Street, for people with mental illness or distress, and anyone who is experiencing social exclusion for any reason or requires assistance in developing the capacity and skills to overcome social disadvantage. There is no Equality Impact Assessment as this proposal does not produce any identified negative impacts on people with disabilities.

## **Implications for Service Users**

21. The new partnership will ensure that anyone in the local community, who is suffering from mental illness or distress, is experiencing social exclusion for any reason or requires assistance in developing the capacity and skills to overcome social disadvantage will continue to be welcome at Middle Street. BCR CIO intends to make Middle Street available to serve a wide range of community activities and interests. This will not only maximise its usefulness for the local community in general, but will also provide additional opportunities for activities across a wide spectrum of participants, encouraging social interaction and helping to dispel the stigma which often attaches to disability and social isolation.

## **Implications for Sustainability and the Environment**

22. This partnership has the potential to improve the financial sustainability of the Middle Street building from 2016, assuming that the viability of the BCR CIO business case is proven during 2015/16.

## **Ways of Working Implications**

23. Some of the staff from the CMHT are able to move into the office accommodation at Middle Street, which is more appropriate than current accommodation at the Hope Centre.

## **RECOMMENDATION/S**

- 1) That the Committee notes the development of the new partnership between the Council and the Beeston Community Resource Charitable Incorporated Organisation.

**Caroline Baria**  
**Service Director, South Nottinghamshire**

**For any enquiries about this report please contact:**

Wendy Lippmann  
Strategic Review Manager  
T: 0115 9773071  
E: [wendy.lippmann@nottsc.gov.uk](mailto:wendy.lippmann@nottsc.gov.uk)

## **Constitutional Comments**

24. As this report is for noting only, no Constitutional Comments are required.

## **Financial Comments (KAS 30/03/15)**

25. The financial implications are contained within paragraph 18 of the report.

## **Background Papers and Published Documents**

Licence of Middle Street, Beeston, approved by Finance and Property Committee on 23 March 2015

Annual Budget Report 2014/15 Appendix C, approved by Full Council on 27 February 2014

Nottinghamshire County Council's Strategic Plan, 2014 - 2018

'No Health without Mental Health – Nottinghamshire's Mental Health Framework for Action, approved by the Health and Wellbeing Board meeting held on 3 September 2014

Adult Social Care Strategy, approved at the Full Council meeting held on 27 March 2014

Redefining Your Council strategy - approved at the Policy Committee meeting held on 7 May 2014

BCR CIO Business Case, 19 January 2015

Service Level Agreement between Nottinghamshire County Council and BCR CIO

Licence to use Middle Street Resource Centre by BCR CIO

## **Electoral Division(s) and Member(s) Affected**

Beeston South and Attenborough

Councillor Kate Foale



**27 April 2015****Agenda Item 5****REPORT OF THE SERVICE DIRECTOR FOR ACCESS AND PUBLIC  
PROTECTION****CHARGES FOR DEFERRED PAYMENT AGREEMENTS AND BROKERAGE  
OF COMMUNITY BASED SUPPORT FOR SELF FUNDERS – OUTCOME OF  
CONSULTATION AND RESPONSE TO CONSULTATION ON THE CARE ACT  
2014****Purpose of the Report**

1. To report on the views expressed in the public consultation on the introduction of charges for Deferred Payment Agreements (DPAs) and the introduction of charges for brokerage of community based support for self-funders.
2. To seek approval of proposed charges for Deferred Payment Agreements and brokerage of community based support for self-funders.
3. To provide a summary of the Council's response to the Department of Health's consultation on the Care Act 2014 on the way care and support is funded and the proposed appeals system.

**Information and Advice****Deferred Payment Agreements**

4. In 2014 it was estimated that there are 154,000 people over the age of 65 living in Nottinghamshire, and this is predicted to rise to 196,000 by 2025 (an increase of 27%). Available data indicates that at the end of March 2014 there were 2,840 older people in residential placements financially supported by the Council and a further 700 adults aged 18-64 years.
5. The Local Government Information Unit (LGIU) published a report in July 2013 which stated that over half the people living in residential or nursing care fund some or all of their own care.
6. At present, Nottinghamshire County Council operates a Deferred Payments Scheme (DPS) that allows people entering long term residential care to defer some of the costs of their care against the value of their property by entering into a Deferred Payment Agreement (DPA). The care costs incurred are ultimately recouped either when the DPA is terminated or the person dies and the property is sold. The legal (eg. land registry) and administration costs of a DPA are currently met by the Council.

7. The Care Act 2014 introduces a new Universal Deferred Payments Scheme, which will allow anyone with eligible needs who owns property or land, and cannot afford their residential fees, and has assets under £23,250, to apply for a DPA. There will be an increase in the number of DPAs that Nottinghamshire County Council enters into following national publicity about the scheme, with resulting increased costs to the Council. Current estimates are that DPA numbers will increase from the current 60 to 610 by 2017. Many other local authorities have made a charge to cover their legal and administrative costs for some time.
8. The Care Act allows local councils to charge the legal and administration costs to individuals entering a new DPA, and the consultation seeks views on the introduction of these charges. Previous reports to this Committee on 5 January 2015 are available as background papers.

### **Brokerage**

9. The Care Act expects local councils to have more involvement in arranging support for people who are able to pay the full costs of their own support whilst living in the community (called self-funders), and allows councils to charge an administration fee for this service – called Brokerage.
10. Brokerage could range from staff informing service users about what support providers are available and have capacity, to arranging visits, liaising between support providers and service users, confirming or negotiating costs, commissioning and invoicing for the support.

### **Response to the Department of Health's consultation on the Care Act 2014**

11. The Council provided a response to the Department of Health's consultation on the draft statutory guidance and regulations on changes to the way care and support is funded and the policy proposals for a new systems of appeals. These changes are due to come into effect in April 2016.
12. The Council also contributed to the East Midlands ADASS (Association of Directors of Adult Social Care) response following an East Midland's workshop.
13. The Council's response included concerns about the challenges of implementing the changes for April 2016 within a very short timescale and the potential for significant changes to the draft guidance and regulations between May and October 2015. The response also raised concerns about the uncertainty of costs for 2016/17 and how these costs will be adequately funded.
14. The consultation sought responses to specific consultation questions and there are three main areas. Firstly, there is an issue about how local authorities will calculate the independent personal budget, i.e. the amount that the local authority would pay to meet a person's eligible needs. There is a concern that local authorities would face a challenge about how to calculate this without undertaking a full assessment of eligible need and support plan. This would increase bureaucracy and assessment and care management costs. Secondly, there is a question about the cap on care for working aged adults. In the

consultation there are three models proposed, but in all three options there is a cliff edge at which people become significantly disadvantaged financially. The Council proposed an alternative model which included a reform of the minimum income guarantee (the minimum amount a person receiving care outside a care home must be left with each week after charging for care and support) to bring it into line with that for older adults, a review of the disregard for personal injury compensation and the introduction of a universal cap on care costs of £72,000 for all adults. Lastly, the Council responded to the question on a new appeals system to allow people to challenge care and support decisions. The Council's view is it would add a further level of bureaucracy and it would be more effective to enhance the current complaints process and issue good practice guidance.

15. The Department of Health consultation ran from 4<sup>th</sup> February 2015 to 30<sup>th</sup> March 2015. The government will publish a response along with the final statutory guidance and regulations. The final guidance and regulations is expected in October 2015.

### **The public consultation**

16. The consultation questionnaire is attached as **Appendix A**. The public consultation ran for 4 weeks, with 338 responses received. People were informed and invited to respond by a variety of communications – Twitter and Facebook, online information on the public website, communication to providers, charities and voluntary organisations and people who receive services, communication with the Citizens' Panel, information sent out in invoices, carers were contacted, and social work teams were emailed. Two focus groups were held which comprised social care staff and members of the public. Views were very different in each group, and all participants completed their own questionnaires. Responses could be online or by requesting paper copies – 26 paper copies were sent out. The results of the questionnaire are attached as **Appendix B**.

### **Proposals**

17. The following are proposed as a result of the consultation, and are based on the views of respondents.

### **Deferred Payments Agreements**

18. The following recommendations are based on the views expressed by consultation respondents, and refers **ONLY** to **new** Deferred Payment Agreements:
  1. a charge of £195 to cover legal costs should be introduced for all **new** DPAs
  2. a charge of £235 to cover administration associated with the set up of a DPA should be introduced for all **new** DPAs
  3. a flat rate annual fee of £25 should be introduced to cover costs of maintaining the DPA – including the production of regular statements for service users. The charge would only apply to **new** DPAs
  4. interest should be charged on the accruing debt for **new** DPAs based on the interest rate charged to the Council for borrowing money (currently 2.65%).

5. DPAs to be made available to people moving into supported living-type accommodation
6. DPAs should be available to people who do not own any property but own land.

#### **Brokerage for community based support**

1. regarding charges for brokerage for self-funders living in the community, an initial charge of £100 for brokerage of support to be introduced, however no further charges for brokerage if needs change

#### **Other Options Considered**

19. Not charging for Deferred Payment Agreements – this would increase costs to the Council in view of the projected increase in numbers.
20. Not charging for Brokerage of support – potential increase in brokerage for self-funders would increase current workloads, and may lead to the requirement for more staff.

#### **Reason/s for Recommendation/s**

21. Recommendations were based on the views of consultation respondents, with charging levels set to meet costs to the Council but not to profit from the charges.

#### **Statutory and Policy Implications**

22. This report has been compiled after consideration of implications in respect of crime and disorder, finance, human resources, human rights, the NHS Constitution (Public Health only), the public sector equality duty, safeguarding of children and vulnerable adults, service users, sustainability and the environment and ways of working and where such implications are material they are described below. Appropriate consultation has been undertaken and advice sought on these issues as required.

#### **Financial Implications**

23. Introduction of these charges will require some re-design of processes to incorporate the charge amounts, which will be done within Adult Care Financial Services (ACFS). The charges, if introduced, will cover the costs of the re-design and the subsequent costs of administering the DPAs. A Brokerage charge will cover the costs of frontline workers undertaking this task for self-funders.

#### **Human Resources Implications**

24. As a result of resource modelling, ACFS was awarded an additional 6.5 fte posts with one of these, a Finance Assistant at Scale 4 (£18,376 - £20,840), to work on DPAs. Other posts were in view of other demands on ACFS such as the increase in work from referrals for self-funders, and these posts will be involved in new systems to charge for Brokerage.



## **Public Sector Equality Duty implications**

25. Equalities information showed that most respondents consider themselves to be unlikely to ever access the DPS, with 86.88% above the age of 46, and 40.94% over 65 years. There was a roughly equal number of male / female respondents, with 75.63% not having any long term health problem or disability. Respondents were mostly white (95.5%), heterosexual (96.52%) and either Christian (55.97%) or of no religion (40.96%).
26. An EIA has been undertaken and is available as a background paper. Decision makers must give due regard to the implications for protected groups when considering this report.

## **Implications for Service Users**

27. All charges for new DPAs will accrue against the value of the property, and so in spite of increasing their overall debt to NCC will not deplete the service user's savings or income. The Brokerage charge will involve an extra £100 payment for service users who have in excess of £23,250 in savings or investments.

## **RECOMMENDATION/S**

That the Committee:

- 1) notes the views expressed in the public consultation on the introduction of charges for Deferred Payment Agreements (DPAs) and the introduction of charges for brokerage of community based support for self-funders.
- 2). approves the proposed charges for Deferred Payment Agreements and brokerage of community based support for self-funders as detailed in paragraph 18.
- 3). notes the summary of the Council's response to the Department of Health's consultation on the Care Act 2014 on the way care and support is funded and the proposed appeals system.

**Paul McKay**  
**Service Director, Access and Protection**

**For any enquiries about this report please contact:**

Jackie Brown  
Team Manager (Communication), Adult Care Financial Services  
T: 0115 9774014  
E: [jackie.brown@nottscg.gov.uk](mailto:jackie.brown@nottscg.gov.uk)

## **Constitutional Comments (CEH 14/04/15)**

28. The recommendations are within the remit of the Adult Social Care and Health Committee by virtue of its terms of reference.

## **Financial Comments (KAS 14/04/15)**

29. The financial implications are contained within paragraph 23 of the report.

## **Background Papers and Published Documents**

Except for previously published documents, which will be available elsewhere, the documents listed here will be available for inspection in accordance with Section 100D of the Local Government Act 1972.

Charging provisions of the Care Act - report to Adult Social Care and Health Committee on 5 January 2015

Deferred Payment Scheme - report to Adult Social Care and Health Committee on 5 January 2015

Submission to the Department of Health on 2016/17 Care Act reforms

Equality Impact Assessment

## **Electoral Division(s) and Member(s) Affected**

All.

## **APPENDIX A**

### **Survey to ascertain your views on proposed changes to the Deferred Payments Scheme and arranging support for people who fund their own support**

At present, Nottinghamshire County Council operates a Deferred Payments Scheme (DPS) that allows people entering long term residential care to defer some of the costs of their care against the value of their property by entering into a Deferred Payment Agreement (DPA). The care costs incurred are ultimately recouped either when the DPA is terminated or the person dies and the property is sold. The legal (e.g. land registry) and administration costs of a DPA are currently met by the Council.

The Care Act 2014 introduces a new Universal Deferred Payments Scheme, which will allow anyone with eligible needs who owns property or land, and cannot afford their residential fees, and has assets under £23,250, to apply for a DPA. This will increase the number of DPAs that Nottinghamshire County Council enters into and result in increased costs to the Council.

The Care Act allows local councils to charge the legal and administration costs to individuals entering a new DPA. We would like your views on proposed changes to the current arrangements by completing this short questionnaire.

- 1 The current legal costs of arranging a DPA are £195. To what extent do you agree that the County Council should claim back this cost?

Strongly Agree      Agree      Neither      Disagree      Strongly Disagree

If you disagree or strongly disagree, please give your reasons?

- 2 The current administrative costs of arranging a DPA are £235. To what extent do you agree that the County Council should claim back this cost?

Strongly Agree      Agree      Neither      Disagree      Strongly Disagree

If you disagree or strongly disagree, please give your reasons?

- 3 Should the County Council charge a flat rate annual fee of £25 for maintaining the DPA?

Yes      No

If No. Please indicate why not?

- 4 At present there are no interest charges whatsoever on any DPA accruing debt, which makes the scheme very expensive for the County Council. Should the County Council charge interest for the debt, based on the interest rate charged to the Council for borrowing money? This rate changes every January and July and is currently 2.65%.

Strongly Agree      Agree      Neither      Disagree      Strongly Disagree

If you disagree or strongly disagree, please give your reasons?

- 5 At present when someone moves from their own home into supported living accommodation they cannot have a DPA. Should a DPA be offered to people who move into supported living accommodation?

Yes      No

If No. Please indicate why not?

- 6 Should a DPA be offered to potential clients who have sufficient land, but not property, that would eventually meet the support and care costs?

Yes      No

If No. Please indicate why not?

- 7 At present the DPS allows any third party top-up charges made by a residential home to also accrue against the property. It is proposed to discontinue this policy, to bring it in line with people not on a DPA. This will mean that a third party (for example a friend or relative) will have to pay the charge. To what extent do you agree with this proposal?

Strongly Agree      Agree      Neither      Disagree      Strongly Disagree

If you disagree or strongly disagree, please give your reasons?

--

The Care Act expects local councils to have more involvement in arranging support for people who are able to pay the full costs of their own support whilst living in the community (called self-funders), and allows councils to charge an administration fee for this service.

- 8 Should the County Council charge a flat rate fee (currently calculated at £100) for the initial brokerage of support.

Yes

No

If No. Please indicate why not?

--

- 9 Should the Council charge a flat rate fee (currently calculated at £100) for each occasion when there is a significant change in support which is not as a result of a provider no longer providing a service?

Yes

No

If No. Please indicate why not?

--

Nottinghamshire County Council is committed to treating people fairly. So that we can monitor that what we are providing is meeting people's needs and is fair and effective, we would be grateful if you could answer the following questions about yourself. Please be assured the information you give will be used for no other purpose and will remain confidential.

- 10 In relation to DPS are you?

Currently on a DPA

Relative and or friend of a person accessing DPS

Likely to access the DPS

Most Unlikely to access the DPS

- 11 What is your age?

Under 16		46-55	
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16-25		56-65	
26-35		Over 65	
36-45			

12 What is your gender? Male Female

13 Do you have a long term health problem or disability? Yes No  
If yes, please specify the type of impairment(s).

Mobility		Mental Health	
Hearing		Communication	
Vision		Other (please specify)	
Learning			

14 What is your ethnic origin?

White		
Black		
Asian		
Chinese		
Mixed		
Other (please specify)		
I do not wish to specify		

15 Which of these statements best describes you?

I am heterosexual/straight	
I am a lesbian or gay woman	
I am a gay man	
I am bisexual	
I am transsexual	
I do not wish to specify	

16 Please use this section to make any other comments about the DPS or brokerage of support that you may want to bring to the attention of the County Council.

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**APPENDIX B**  
**QUESTIONNAIRE RESULTS**

**Consultation results:**

Results to each question, from questionnaires, are as follows:

**Deferred Payments Agreements:**

**The current legal costs of arranging a DPA are £195. To what extent do you agree that the County Council should claim back this cost?**

Agree = 60.84%

Disagree = 30.12%

Neither = 9.04%

**Recommendation – To introduce this charge for all new DPAs**

**The current administrative costs of arranging a DPA are £235. To what extent do you agree that the County Council should claim back this cost?**

Agree = 52.74%

Disagree = 36.58%

Neither = 10.67%

**Recommendation – To introduce this charge for all new DPAs**

**Should the County Council charge a flat rate annual fee of £25 for maintaining the DPA?**

Agree = 51.9%

Disagree = 48.91%

**Recommendation – To introduce this charge to attempt to offset administration charges for the annual statements required. DPA numbers are estimated to rise to 600 in the next 5 years, this charge would produce an annual income of £15,000.**

**At present there are no interest charges whatsoever on any DPA accruing debt, which makes the scheme very expensive for the County Council. Should the County Council charge interest for the debt, based on the interest rate charged to the Council for borrowing money? This rate changes every January and July and is currently 2.65%.**

Agree = 47.43%

Disagree = 35.95%

Neither = 16.62%

**Recommendation – To introduce interest charges based on the interest rate described**

**At present when someone moves from their own home into supported living accommodation they cannot have a DPA. Should a DPA be offered to people who move into supported living accommodation?**

Agree = 82.45%

Disagree = 17.55%

**Recommendation – Action this. it is likely to be a rare situation, however we would not wish to be discriminatory by not allowing it**

**Should a DPA be offered to potential service users who have sufficient land, but not property, that would eventually meet the support and care costs?**

Agree = 85.28%

Disagree = 14.72%

**Recommendation – Action this**

**At present the DPS allows any third party top-up charges made by a residential home to also accrue against the property. It is proposed to discontinue this policy, to bring it in line with people not on a DPA. This will mean that a third party (for example a friend or relative) will have to pay the charge. To what extent do you agree with this proposal?**



Agree = 25.23%

Disagree = 57.54%

Neither = 17.23%

**Recommendation – Continue to allow top-up charges to accrue against the property. If we did not allow this, there may be difficulties in placing people in some areas where all residential homes charge above the banded rate. Top-up charges allowed to accrue however should be individually scrutinised to ensure the property value is sufficient to cover charges**

**Brokerage for community based support:**

**Should the County Council charge a flat rate fee (currently calculated at £100) for the initial brokerage of support.**

Agree = 51.67%

Disagree = 48.33%

**Recommendation – Views on this were split. We recommend that this charge is introduced.**

**Should the Council charge a flat rate fee (currently calculated at £100) for each occasion when there is a significant change in support which is not as a result of a provider no longer providing a service?**

Agree = 34.86%

Disagree = 64.14%

**Recommendation – Introduction of this further fee may prove difficult to administer and we recommend that it is not introduced. However, there is an option to increase the initial brokerage fee to cover any future brokerage work required**

**Comments made on the questionnaires:**

Each question contained space for comments, as well as a space at the end for more general comments. Comments were split between those who felt that people

should have to pay towards their support and care if they can afford to, and those who felt that care and support should be provided free of charge, and that those people who strived to own their own property, and have savings, were being unfairly penalised. Comments were generally more negative about the introduction of charges than the scoring indicates.

Comments made by people from negatively impacted groups are covered in the Equality Impact Assessment

**27 April 2015****Agenda Item: 6**

## **REPORT OF THE SERVICE DIRECTOR, SOUTH NOTTINGHAMSHIRE**

### **OUTCOME OF SECTOR LED IMPROVEMENT PEER CHALLENGE 2014**

#### **Purpose of the Report**

1. The report updates the Committee on the departmental response to the areas of development highlighted by the regional sector led improvement peer challenge process that took place between July and September 2014, and proposes that Committee receives a further report in October 2015 when this year's peer challenge process is completed.

#### **Information and Advice**

2. As part of the sector led improvement process the department is required to complete a self-assessment template on an annual basis which challenges the Council to assess and illustrate how well it is performing against 6 key themes:
  - Enabling maximum choice and control
  - Helping people to stay well and independent
  - Enabling accessible information and positive advice and support
  - Keeping people safe
  - Leadership
  - Use of resources.
3. The self-assessment formed the basis of a 'local challenge' in July 2014 involving the Deputy Director, Adult Social Care, Health and Public Protection, and an independent social care consultant with regard to the Council's current performance in adult social care, its strengths and the areas for development. Further to this the cycle of challenge was completed with a summit in September involving all the Directors of Adult Services in the East Midlands meeting to share and discuss their progress; a regional action plan was developed following the summit. A report on this process and the outcomes was considered by the Committee on 1<sup>st</sup> December 2014.
4. The Senior Leadership Team considered the areas for development identified in the local challenge and leads were identified to update on current work and progress against these areas (some of the identified areas were already known to the department) and what further improvement actions were required and planned.
5. Further to this process the Committee will be aware that the department recently took part in a peer challenge process focused on performance against new standards called

Commissioning for Better Outcomes. The department is currently awaiting the full report from the peer challenge team and a report on this will be brought to Committee in due course. As there is overlap in some of the areas identified for improvement it is intended to combine the action plans where it makes sense to do so, and the improvement work undertaken will be reviewed at the departmental Performance Board.

## **Areas for improvement**

6. There were seven areas highlighted by the challenge process as areas for improvement. The first three of these are on a performance indicator basis, and the intention is that these should be monitored alongside other departmental performance indicators through the Performance Board. The first area concerns the employment of people with mental health needs, identified as low with a slight drop from the previous year. The challenge process looked at performance data for 2013/14 - 3.9% which is half that of the comparator group (8.2%).
7. The Young Adults Mental Health, Learning Disability and Sensory Neurological Impairment Integrated Commissioning Group has a number of associated actions and milestones for 2015/16. These include: evidence based packages of care being offered in a person's recovery and rehabilitation that will provide access to appropriate training and employment; development of an integrated approach between health and social care to reduce the number of Employment and Support Allowance claimants; ensuring those off work due to mental health problems have early access to mental health interventions (included in the Nottinghamshire Workplace Award Scheme), and quarterly monitoring of the Council's Co-production service performance outcomes indicator that measures the number of people accessing the service in voluntary or paid employment.
8. Also relating to mental health services, the second area identified was a low number of people in contact with secondary mental health services who are living independently (25.7% against 50.8% in the comparator group). It is Nottinghamshire Healthcare Trust that collects and provides the performance information on people living independently through the Care Programme Approach documentation. The Council intends to work with the Trust to understand the information they produce and to look at whether this can be aligned with the Council's data.
9. As a result of the Mental Health Utilisation Review (2013/14) the Council has helped to move 28 people from NHS care to supported independent living. Using an integrated health and social care approach at least 15 people are due to move into independent living accommodation by June 2016. A joint partnership approach is in place with Nottinghamshire Healthcare Trust, the Clinical Commissioning Groups and the Council to review housing support options for people with complex care needs. The Council also has an accommodation panel to ensure that the most appropriate accommodation support is identified, and the use of residential care is reduced.
10. The third area is the high number of older people funded by the Council in residential and nursing care homes. Over the past three years there has been a steady reduction in the number of older people supported in residential and nursing care across the County. The figures for 2013/14 (1,900 per 100,000 population for adults over 65 years) are very close to the East Midlands average (1,860 per 100,000 population).

11. The work undertaken by the Council to reduce new admissions to permanent residential and nursing home care has been successful, and this work continues. The number of admissions per 100,000 population has reduced consistently over the past year (2013/14 figures – 650 per 100,000 population) and are now below both the East Midlands and national averages (710 and 680 respectively).
12. It is suggested that the remaining four areas for improvement are incorporated into the action plan that will be developed in response to the recent peer challenge on Commissioning for Better Outcomes.
13. The fourth area identified was in relation to the Council having a high proportion of support packages that were at a very low level. Work is underway to identify the current number of packages in question so that review work can be undertaken. The department and Public Health colleagues have undertaken an audit of service users receiving short homecare visits, and a separate audit of homecare providers. Findings have been shared with care providers and commissioners to inform the suitability of commissioning these visits.
14. One of the ongoing issues in this area is the need to clarify the position on whose responsibility it is to commission, fund and provide visits to people who require a prompt for taking medication, as this is not currently undertaken by community health providers.
15. The fifth area identified for improvement was that there is more for the Council to do in respect of developing strong and robust community capacity, to help support people with social care needs. A Cross Council Community Empowerment and Resilience Programme led by the Council's Corporate Director for Policy, Planning and Corporate Services is now in place and is looking at:
  - understanding communities and the Voluntary and Community Sector (VCS) in Nottinghamshire
  - enabling the VCS to grow, be more sustainable and to better support the communities it serves to be more resilient
  - building capacity within communities to enable them to be more empowered and resilient
  - exploring how the approach and use of resources is optimised both within the Council and with other stakeholders to maximise positive impacts on communities and reduce reliance on public services
  - exploiting opportunities for collaborative working to benefit communities (e.g. creating an innovative and trusting relationship which will enable partnership bids for appropriate and significant funding).
16. The Council is also currently working on a new short term prevention service, which should be in place by Autumn 2015. This will be focused on targeted short term support with an emphasis on self-care for older people and people with long term conditions. This is being developed with the input of older people in the community, and in conjunction with Public Health and Clinical Commissioning Groups. Nottinghamshire Help Yourself, an online directory for advice, information and support across the County, became available from March 2015. The website is a partnership between health, social care and the voluntary sector to bring information and advice together in one central repository.

17. The sixth improvement area identified was in relation to support and services for black and minority ethnic communities. The challenge process suggested that this should be examined further possibly in liaison with Public Health with a view to targeting activity and appropriate support. Discussion has taken place with a Public Health manager with a view to building on the information in the Joint Strategic Needs Assessment (JSNA) and producing a plan on targeting services in the future. A chapter on demography - covering all populations of identity - was developed for the JSNA in March 2014.
18. As part of the Joint Carers' Commissioning Strategy 2015/16, the Council and all Clinical Commissioning Groups have agreed to jointly fund a Commissioning Officer who will work with seldom heard carers, including carers from black and minority ethnic communities. This post will identify carers and work with them to develop information and services which meets their needs.
19. The final area for improvement identified was the need for greater corporate ownership and accountability for adult safeguarding through regular meetings of the Chair of the Board and the lead safeguarding officer, with the involvement of the Chief Executive, Director of Adult Social Care and the Committee Chair. Meetings have been arranged for the Nottinghamshire Safeguarding Adults Board (NSAB) Chair and the new Chief Executive of the Council. The NSAB Chair has also met recently with the Deputy Director of Adult Social Care, Health and Public Protection and will meet with the Corporate Director on his return in April. The NSAB Chair has also attended recent Adult Social Care and Health Committee and Health and Wellbeing Board meetings to highlight the statutory footing the Care Act has brought to Adult Safeguarding Boards and the emphasis on Making Safeguarding Personal agendas.
20. For this year, the annual self-assessment as part of the East Midlands Sector Led Improvement programme will be issued for completion by the end of June 2015, with the follow up local challenge meeting for the Council in August.

#### **Other Options Considered**

21. This report is for noting.

#### **Reason/s for Recommendation/s**

22. This report is for noting.

#### **Statutory and Policy Implications**

23. This report has been compiled after consideration of implications in respect of crime and disorder, finance, human resources, human rights, the NHS Constitution (Public Health only), the public sector equality duty, safeguarding of children and vulnerable adults, service users, sustainability and the environment and ways of working and where such implications are material they are described below. Appropriate consultation has been undertaken and advice sought on these issues as required.

#### **Financial Implications**

24. There are no financial implications.

## **Safeguarding of Children and Vulnerable Adults Implications**

25. One of the recommended areas for improvement identified in the challenge related to ensuring greater accountability and ownership of adult safeguarding at senior levels of the Council. The Care Act has introduced a statutory footing for Adult Safeguarding Boards and Nottinghamshire is well placed to respond to new legal requirements.

## **Implications for Service Users**

26. Improvements in all the areas identified within the report will benefit service users across the County.

## **RECOMMENDATION/S**

That the Committee:

- 1) notes the work undertaken and plans in progress to respond to the areas for improvement raised in the regional sector led improvement peer challenge process.
- 2) receives a further report in October 2015 when this year's peer challenge process is completed.

**Caroline Baria**  
**Service Director, South Nottinghamshire**

**For any enquiries about this report please contact:**

Jennie Kennington  
Senior Executive Officer  
T: 0115 9774141  
E: [jennie.kennington@nottsc.gov.uk](mailto:jennie.kennington@nottsc.gov.uk)

## **Constitutional Comments**

27. As this report is for noting only, no Constitutional Comments are required.

## **Financial Comments (KAS 08/04/15)**

28. The financial implications are contained within paragraph 24 of the report.

## **Background Papers and Published Documents**

Except for previously published documents, which will be available elsewhere, the documents listed here will be available for inspection in accordance with Section 100D of the Local Government Act 1972.

Feedback from Peer Challenge process – report to Adult Social Care and Health Committee on 1 December 2014

## **Electoral Division(s) and Member(s) Affected**

All.





**27 April 2015****Agenda Item: 7****REPORT OF THE SERVICE DIRECTOR, MID AND NORTH  
NOTTINGHAMSHIRE****ESTABLISHMENT OF A TEMPORARY SOCIAL WORK POST FOR THE NEW  
CROSS SUPPORT TEAM – ASHFIELD DISTRICT COUNCIL****Purpose of the Report**

1. To inform Committee about the New Cross project and request approval to establish a one year 1 fte Social Worker post, funded by Ashfield District Council, to join the New Cross Support Team.

**Information and Advice**

2. The Nottinghamshire Prevent Strategy is endorsed by the Safer Nottinghamshire Board. The Strategy seeks to identify new ways of working across partners that can provide effective interventions with individual and families, particularly in areas of high demand where multiple referrals can be made between agencies. It seeks to explore whether services could be better designed and more cost effective if there is an improved understanding of the needs of residents. As part of the Nottinghamshire Prevent Strategy, Ashfield District Council has been successful in gaining funds from the Department for Communities and Local Government (DCLG) Transformation Fund to support the New Cross Support Team.
3. The New Cross area, in Sutton East, has been identified as one of three pilots within Nottinghamshire where there is high demand on a number of services and poor outcomes for the residents. The aim of the team is to trial new and innovative approaches with individuals and families that are identified as using a high level of services across several partners. The team aims to provide a co-ordinated approach to addressing a range of concerns faced by people and seeking to resolve those issues. The Support Team has been running since September 2014 and partners in the team include Police, Fire Service, Job Centre Plus, Catch 22 Community Project and primary health care. There are good links with the Children, Families and Cultural Services department.
4. A request has been made to include an Adults Social Worker within the team. Many of the residents are socially isolated, self-neglecting and suffer with difficulties relating to mental health, learning difficulties and substance misuse. The team works across the age range of residents but the majority of residents are aged between 30 to 50 years.
5. This work fits with the Prevention and Early Intervention agenda of The Care Act and Nottinghamshire's Adult Social Care Strategy. It offers an exciting opportunity for County

and District Council workers to come together in one team and trial new approaches. Additional administrative support is available in order to gather data and evidence to evaluate whether this approach is cost effective for the Council in reducing demand on the Younger Adults Teams and delivering better outcomes for the residents involved.

6. The worker will remain an employee of the County Council and receive professional social work supervision and budget approval from the Team Manager of Mansfield/Ashfield Community Mental Health Team. They will be managed on a day-to-day basis and have work allocated to them by the New Cross Support Team Manager. At the end of the project there is no commitment to continue to fund the additional capacity of this post. Learning from the project will be considered in the light of any future changes in the focus of Younger Adults Community Teams in ASCHPP.

### **Other Options Considered**

7. Establishing a Community Care Officer post was considered instead of a Social Work post, as this could be more cost effective for the team. However, in order to maximise the learning of the project, the preferred option was to create a qualified post so that the worker can reduce the need to refer on, bring safeguarding expertise to the team and share learning on relevant legislation.

### **Reason/s for Recommendation/s**

8. This is an opportunity to try out new ways of working in a team supported by the District Council. The learning from the project will inform whether the approach reduces demand, delivers better outcomes and leads to more innovative, multi-agency solutions.

### **Statutory and Policy Implications**

9. This report has been compiled after consideration of implications in respect of crime and disorder, finance, human resources, human rights, the NHS Constitution (Public Health only), the public sector equality duty, safeguarding of children and vulnerable adults, service users, sustainability and the environment and ways of working and where such implications are material they are described below. Appropriate consultation has been undertaken and advice sought on these issues as required.

### **Crime and Disorder Implications**

10. Crime and anti-social behaviour represent high demand areas in Sutton East. An approach which encourages prevention and reduces demand in these areas would make a significant contribution to this agenda.

### **Financial Implications**

11. The post of 1 fte temporary Social Worker post, at Hay Band (Grade B), scp 34-39, (£28,922-£33,128) with approved car user status, to 31 March 2016, will be funded wholly by the DCLG Grant awarded to Ashfield District Council for the New Cross Support Team.

## **Human Resources Implications**

12. The post would be temporary fixed term until 31 March 2016. Current terms and conditions for a post of this type would be in place.

## **Implications for Service Users**

13. This is an opportunity to work closely with relevant partners to provide an improved service for this marginalised group.

## **Ways of Working Implications**

14. Ashfield District Council will provide the office base. The County Council will be required to provide a mobile device to allow the worker to work flexibly.

## **RECOMMENDATION/S**

That the Committee:

- 1) notes the information on the New Cross project
- 2) approves the establishment of a 1 fte temporary Social Worker post, funded by Ashfield District Council, to join the New Cross Support Team.

**Sue Batty**

**Service Director, Mid and North Nottinghamshire**

**For any enquiries about this report please contact:**

Tessa Diment  
Group Manager, Younger Adults Mid Notts  
T: 0115 8546256  
E: [tessa.diment@nottsc.gov.uk](mailto:tessa.diment@nottsc.gov.uk)

## **Constitutional Comments (SMG 10/04/15)**

15. The Committee has the responsibility for approval of relevant staffing structures. The proposals in this report fall within the remit of this Committee.
16. The Employment Procedure Rules provide that the report to Committee include the required advice and HR comments and that the recognised trade unions be consulted on all proposed changes to staffing structures (and any views given should be fully considered prior to a decision being made).

## **Financial Comments (KAS 10/04/15)**

17. The financial implications are contained within paragraph 11 of the report.

## **Background Papers and Published Documents**

None.

**Electoral Division(s) and Member(s) Affected**

All.

**27 April 2015****Agenda Item: 8****REPORT OF CORPORATE DIRECTOR, POLICY, PLANNING AND  
CORPORATE SERVICES****WORK PROGRAMME****Purpose of the Report**

1. To consider the Committee's work programme for 2015.

**Information and Advice**

2. The County Council requires each committee to maintain a work programme. The work programme will assist the management of the committee's agenda, the scheduling of the committee's business and forward planning. The work programme will be updated and reviewed at each pre-agenda meeting and committee meeting. Any member of the committee is able to suggest items for possible inclusion.
3. The attached work programme has been drafted in consultation with the Chair and Vice-Chair, and includes items which can be anticipated at the present time. Other items will be added to the programme as they are identified.
4. As part of the transparency introduced by the revised committee arrangements in 2012, committees are expected to review day to day operational decisions made by officers using their delegated powers. It is anticipated that the committee will wish to commission periodic reports on such decisions. The committee is therefore requested to identify activities on which it would like to receive reports for inclusion in the work programme.

**Other Options Considered**

5. None.

**Reason/s for Recommendation/s**

6. To assist the committee in preparing its work programme.

**Statutory and Policy Implications**

7. This report has been compiled after consideration of implications in respect of finance, equal opportunities, human resources, crime and disorder, human rights, the safeguarding of children, sustainability and the environment and those using the service and where such

implications are material they are described below. Appropriate consultation has been undertaken and advice sought on these issues as required.

## **RECOMMENDATION/S**

- 1) That the committee's work programme be noted, and consideration be given to any changes which the committee wishes to make.

**Jayne Francis-Ward**  
**Corporate Director, Policy, Planning and Corporate Services**

For any enquiries about this report please contact: Paul Davies, x 73299

## **Constitutional Comments (HD)**

1. The Committee has authority to consider the matters set out in this report by virtue of its terms of reference.

## **Financial Comments (NS)**

2. There are no direct financial implications arising from the contents of this report. Any future reports to Committee on operational activities and officer working groups, will contain relevant financial information and comments.

## **Background Papers**

None.

## **Electoral Divisions and Members Affected**

All.

## **ADULT SOCIAL CARE & HEALTH COMMITTEE - WORK PROGRAMME**

<b><u>Report Title</u></b>	<b><u>Brief summary of agenda item</u></b>	<b><u>Lead Officer</u></b>	<b><u>Report Author</u></b>
<b>27<sup>th</sup> April 2015</b>			
Outcome of consultation on Deferred Payment Scheme, and response to consultation on funding reforms	Report on outcome of the consultation on administering a charge for arrangement of a Deferred Payment Agreement, and confirmation of the Council's response to the DoH consultation on funding reform in part 2 of the Care Act	Service Director, Access and Public Protection	Jackie Brown/Jane North
Development of a community resource centre in Beeston	Outcome of the transfer of the management of Middle Street Resource Centre to a community group in Beeston	Service Director, South Nottinghamshire	Wendy Lippmann
Action Plan from Sector Led Improvement Peer Challenge	Update on the action plan to address areas for development arising from the peer challenge	Service Director, South Nottinghamshire	Jennie Kennington
New Cross project	Update on the development of a project in Ashfield with the District Council and funding from the DCLG	Service Director, Mid and North Nottinghamshire	Tessa Diment
Care home provider contract suspensions update	Overview of live suspensions of care home provider contracts in Nottinghamshire	Service Director Access and Public Protection	Rosamunde Willis-Read
<b>1<sup>st</sup> June 2015</b>			
Overview of departmental savings and efficiencies programme	Progress summary on all departmental savings proposals	Service Director, South Nottinghamshire	Ellie Davies
National Children and Adult Services Conference: 14-16 October 2015	Report seeking approval for Members to attend the NCAS Conference	Corporate Director, Adult Social Care, Health and Public Protection	Jennie Kennington
Direct Payments policy	Report on outcomes of consultation and recommendations for action	Service Director, Mid and North Nottinghamshire	Gill Vasilevskis

**Updated 17/04/2015 – PDM**

<b><u>Report Title</u></b>	<b><u>Brief summary of agenda item</u></b>	<b><u>Lead Officer</u></b>	<b><u>Report Author</u></b>
Carers Information, Advice and Engagement Hub	Outcome of the tender with regard to the Carers Hub	Service Director for South Nottinghamshire/Service Director, Mid and North Nottinghamshire	Penny Spice
Progress report on the delivery of Short Breaks services	Progress report on the provision of short breaks services across the county	Deputy Director for Adult Social Care, Health and Public Protection	Ian Masson
Update on the development of Members' visits to care homes	Update on the development of the process for involving Members in audit visits to residential and nursing care homes	Service Director, Access and Public Protection	Rosamunde Willis-Read
Outcome of Peer Challenge – Commissioning for Better Outcomes	Report on the outcome of the Peer Challenge in March 2015 and draft action plan to respond to identified areas of improvement	Corporate Director, Adult Social Care, Health and Public Protection	Cherry Dunk
Proposed changes to the First Contact Scheme	Report proposes some changes to the scheme in order to improve efficiency	Service Director, Access and Public Protection	Lyn Farrow
<b>29<sup>th</sup> June 2015</b>			
Organisational redesign update report	Progress report on Organisational Redesign within Assessment and Care Management	Service Director, Mid and North Nottinghamshire	Stacey Roe
Independent Living Fund update	Progress report on transfer of funding and fund users to the Council	Service Director, South Nottinghamshire	Paul Johnson
Direct Payment Support Service	Approval to consult on the model and specification for the Direct Payment Support Services	Service Director, Mid and North Nottinghamshire	Gill Vasilevskis
Update on progress with personal budgets for people with dementia	Progress report to review situation one year on from project with Alzheimer's Society to increase no. of people with dementia who have personal budgets and direct payments	Service Director, Mid and North Nottinghamshire	Jane Cashmore
Younger adults residential and community care delivery	Report on progress with savings programmes within this delivery group	Service Director, South Nottinghamshire	Ellie Davies



<b><u>Report Title</u></b>	<b><u>Brief summary of agenda item</u></b>	<b><u>Lead Officer</u></b>	<b><u>Report Author</u></b>
group update			
Performance Update for Adult Social Care and Health	Quarterly update report on the performance of Adult Social Care, including update on latest CQC inspections	Deputy Director for Adult Social Care, Health and Public Protection	Anne Morgan
Update on progress for the ICELS tender and review team	Progress report regarding the ICELS review team work on improving returns	Service Director, Mid and North Nottinghamshire	Jessica Chapman
Health and Social Care Integration in Nottinghamshire	Summary and agreement on plans regarding progression with integration across the county	Corporate Director, Adult Social Care, Health and Public Protection	Caroline Baria/Sue Batty
Older adults residential and community care delivery group update	Report on progress with savings programmes within this delivery group	Service Director, Mid and North Nottinghamshire	Cherry Dunk
Universal Credit	Impact of implementation in Bassetlaw and whether any other areas of the county will be affected in tranche 2	Service Director, Access and Public Protection	Paul Stafford
<b>7<sup>th</sup> September</b>			
Update on work of Health and Wellbeing Board	Summary report on work of HWB over last 6 months	Corporate Director, Adult Social Care, Health and Public Protection	Jennie Kennington
Social Care Clinics	Report to inform and update the Committee on the progress of developing social work clinics for social work and Occupational Therapy assessments	Service Director, Mid and North Nottinghamshire	Ashleigh Quinn
SCOPES and Pre-Elective Surgery		Service Director, Access and Public Protection	Yasmin Raza/ Steve Jennings-Hough
Development of an employment and training hub at the County Horticultural Service	Report on the proposal to develop an employment and skills training hub to support people to develop skills in the fields of horticulture, retail and administration work	Deputy Director, Adult Social Care, Health and Public Protection.	Jane McKay
Market management delivery group update	Report on progress with savings programmes within this delivery group	Service Director, Access and Public Protection	

<b><u>Report Title</u></b>	<b><u>Brief summary of agenda item</u></b>	<b><u>Lead Officer</u></b>	<b><u>Report Author</u></b>
Transforming Care-Response to Winterbourne View Report	6 monthly update to include Finance information as detailed in 2 March report	Service Director South Nottinghamshire	Cath Cameron-Jones
Services to Carers	Progress report regarding work commissioned by the department for carers	Deputy Director for Adult Social Care, Health and Public Protection	Penny Spice
Proposed changes to the First Contact Scheme – outcome of consultation	Report on outcomes of consultation and recommendations for action	Service Director, Access and Public Protection	Lyn Farrow
Just Checking pilot project		Deputy Director, Adult Social Care, Health and Public Protection	Mark Douglas
Care home & home care provider contract suspensions update	Overview of live suspensions of care home & home care provider contracts in Nottinghamshire	Service Director Access and Public Protection	Rosamunde Willis-Read
<b>5<sup>th</sup> October</b>			
Direct Services delivery group update	Report on progress with savings programmes within this delivery group		
Organisational redesign board update	Progress report on Organisational Redesign within Assessment and Care Management		Stacey Roe
Progress report on development of alternative models of delivery within Direct Services		Corporate Director, Adult Social Care, Health and Public Protection	Jennifer Allen
<b>2<sup>nd</sup> November</b>			
Savings and efficiencies delivery group update	Report on progress with savings programmes within this delivery group		Ellie Davies
<b>30<sup>th</sup> November</b>			
Care home & home care	Overview of live suspensions of care home &	Service Director Access and	Rosamunde Willis-Read

<b><u>Report Title</u></b>	<b><u>Brief summary of agenda item</u></b>	<b><u>Lead Officer</u></b>	<b><u>Report Author</u></b>
provider contract suspensions update	home care provider contracts in Nottinghamshire	Public Protection	
<b>11<sup>th</sup> January</b>			
<b>8<sup>th</sup> February</b>			
<b>7<sup>th</sup> March</b>			
Care home & home care provider contract suspensions update	Overview of live suspensions of care home & home care provider contracts in Nottinghamshire	Service Director Access and Public Protection	Rosamunde Willis-Read
<b>18<sup>th</sup> April</b>			
<b>16<sup>th</sup> May</b>			
<b>13<sup>th</sup> June</b>			
Care home & home care provider contract suspensions update	Overview of live suspensions of care home & home care provider contracts in Nottinghamshire.	Service Director Access and Public Protection	Rosamunde Willis-Read
<b>11<sup>th</sup> July</b>			

## **ASCH 212**



**27 April 2015****Agenda Item: 9****REPORT OF THE SERVICE DIRECTOR FOR ACCESS AND PUBLIC  
PROTECTION****CARE HOME PROVIDER SUSPENSIONS****Purpose of the Report**

1. The purpose of the report is to give an overview of live suspensions of care home provider contracts in Nottinghamshire.

**Information and Advice**

2. Nottinghamshire County Council places significant emphasis on monitoring the standard of the care which it commissions through independent sector providers, and supporting providers to make improvements. The authority undertakes this monitoring work in partnership with other agencies, including the relevant Clinical Commissioning Groups (CCG), Healthwatch, and on occasion, the Care Quality Commission (CQC), and shares information routinely with these organisations to build up a picture of risk levels and impact on outcomes for people accommodated at the services.
3. Quality Development Officers undertake annual quality audits for older people's care homes within Nottinghamshire that the authority contract with to inform the allocation of a 'banding' to which a fee level is attributed. The same staff also undertake audits for younger adults care homes and both work programmes are determined and managed through a risk based approach. Since April 2014, these work programmes have been conducted in partnership, where possible, with quality monitoring staff from the appropriate CCG, which enables both health and social care commissioners to identify and act on shortfalls in outcomes for people in partnership.
4. Concerns expressed by people accommodated at a service, care workers, professionals and other agencies, safeguarding referrals, and inspections by CQC result in additional responsive visits by our Quality Development Officers and CCGs. The authority and health partners might at this point issue an improvement notice, which is warranted where a breach of contract has been evidenced. If subsequent improvement is not forthcoming, is protracted, or there is a significant potential of or actually evidenced poor outcomes for people accommodated at the service, then the authority and health partners jointly might move to a position of suspending the contract with the provider. This means that no further authority and CCG-funded users would be placed in that facility to enable the provider to focus on making improvements. A voluntary undertaking not to admit people who fund their own care and support to the service might also be sought from the provider. Whilst this is not legally binding, it does signal a more positive approach to

partnership working and commitment to improve from the provider. It does not exclude the formal contract suspension being evoked at a later point.

5. The authority's Care & Support Services Directory provides the following information on and explanation of suspensions to people researching services:

*While all care homes/care homes with nursing are required to be registered with the Care Quality Commission, if we are contributing to your care fees, then we will have a separate agreement in place with the care home/care home with nursing. This is done to ensure that the Council and the care home/care home with nursing know exactly what is required from the service.*

*Occasionally it may be necessary to temporarily suspend placements into a care home/care home with nursing.*

*This may be done for a variety of reasons:*

- *to investigate a concern*
- *to allow time for improvements to be made*
- *to take the pressure off a care home/care home with nursing if they are experiencing a problem.*

*Sometimes a care home/care home with nursing itself may request a temporary suspension of placements so that it can make changes.*

*While a placement suspension is in place no further local authority placements will be made to the care home/care home with nursing and alternative placements should be sought.*

*If there are serious concerns about a care home/care home with nursing, residents and/or their relatives will be informed of the situation.*

6. If, despite the intervention of a suspension and further support, improvements are not forthcoming, are exceptionally slow, or if poor quality care continues to be evidenced, the authority would consider a move to terminate the contract with that provider.
7. Currently the contracts for 11 care homes are suspended by the authority. Further detail is given in the exempt appendix to this report.
8. The authority makes a range of agencies and internal stakeholders, including operational staff and ward Councillors, aware of a suspension. Information relating to suspensions is not in the public domain more generally at present, although a mechanism for providing this information to the public is being considered. If a service is suspended then people accommodated and their relatives are notified by us in partnership with the provider, the CCG and CQC, where relevant, via a relative's meeting, along with the reason for suspension, prior to more general public information release.
9. The lifting of a suspension is undertaken once the authority, and partner agencies, are satisfied that improvements can be sustained, and in discussion with the provider.

10. Some information relating to this report is not for publication by virtue of Schedule 12A of the Local Government Act 1972 and is therefore included in an exempt appendix. Having regard to all the circumstances, on balance the public interest in disclosing this information does not outweigh the reason for exemption because the information would add a limited amount to public understanding of the issues but may damage the financial or business affairs of any particular person (including the Council).

### **Other Options Considered**

11. The methodology for the authority's risk escalation procedure and its relationship with other relevant agencies has been developed through a partnership approach over many years. No other options have therefore been considered.

### **Reason/s for Recommendation/s**

12. The report is for noting.

### **Statutory and Policy Implications**

13. This report has been compiled after consideration of implications in respect of crime and disorder, finance, human resources, human rights, the NHS Constitution (Public Health only), the public sector equality duty, safeguarding of children and vulnerable adults, service users, sustainability and the environment and ways of working and where such implications are material they are described below. Appropriate consultation has been undertaken and advice sought on these issues as required.

### **Financial Implications**

14. There are no financial implications.

### **Implications for Service Users**

15. Some of the most vulnerable adults are in care home placements. It is imperative that the services that they receive are of good quality and are delivered with dignity and respect. Suspensions of services seek to reduce and wherever possible eliminate poor quality care home provision and enable providers to consolidate and improve the care and support to people accommodated.

### **RECOMMENDATION/S**

- 1) That the Committee notes the overview of live suspensions of care home provider contracts in Nottinghamshire.

**Paul McKay**  
**Service Director for Access and Public Protection**

**For any enquiries about this report please contact:**

Rosamunde Willis-Read  
Group Manager, Quality & Market Management  
T: 0115 9772380  
E: [rosamunde.willis\\_read@nottsgov.uk](mailto:rosamunde.willis_read@nottsgov.uk)

**Constitutional Comments (SLB 14/04/2015)**

16. As this report is for noting only, no Constitutional Comments are required.

**Financial Comments (KAS 17/04/15)**

17. The financial implications are contained within paragraph 14 of the report.

**Background Papers and Published Documents**

None.

**Electoral Division(s) and Member(s) Affected**

All.