

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

**Monday, 04 March 2013 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 4 February 2013  | 3 - 8   |
| 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 | Update on the Living at Home Programme   | 9 - 14  |
| 5 | Equalities and Human Rights Commission Survey on Older People and Human Rights in Home Care:<br>County Council Response  | 15 - 20 |
| 6 | Promotion of Dignity in Care in Adult Care Services  | 21 - 26 |
| 7 | Expenditure of Carers' Funding Allocation - Proposed Plans   | 27 - 36 |
| 8 | Work Programme   | 37 - 42 |

### **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.

## minutes

Meeting ADULT SOCIAL CARE AND HEALTH COMMITTEE

Date 4 February 2013 (commencing at 10.30 am)

### **Membership**

Persons absent are marked with 'A'

### **COUNCILLORS**

Kevin Rostance (Chairman)  
Stuart Wallace (Vice-Chairman)  
Reg Adair  
Ged Clarke  
John Doddy  
Rachel Madden  
Geoff Merry  
Alan Rhodes  
Martin Suthers  
Chris Winterton  
Jason Zadrozny

A Ex-officio (non-voting)  
Mrs Kay Cutts

### **OTHER COUNCILLORS IN ATTENDANCE**

Councillor Mel Shepherd

### **OFFICERS IN ATTENDANCE**

Caroline Baria, Service Director, Joint Commissioning, Quality and Business Change  
Paul Davies, Democratic Services Officer  
Sarah Gyles, Committee Support Officer  
David Hamilton, Service Director, Personal Care and Support (Older Adults)  
Jennie Kennington, Senior Executive Officer  
Paul McKay, Service Director, Promoting Independence and Public Protection  
David Pearson, Corporate Director, Adult Social Care, Health and Public Protection  
Anna Vincent, Independent Group Administration/Research Officer  
Jon Wilson, Service Director, Personal Care and Support for Younger Adults

### **MINUTES**

The minutes of the last meeting held on 7 January 2013 were confirmed and signed by the Chairman.

## **CHAIRMAN'S ANNOUNCEMENT**

On behalf of the committee, the Chairman thanked the staff of the Adult Social Care, Health and Public Protection Department for their work during the recent wintry weather.

## **MATTER ARISING**

In relation to the item on the Social Care Workforce Efficiency Project, Councillor Wallace asked for an update on how the project would be delivered. Jon Wilson informed the committee that it was now likely that the project would be carried out by Business Administrators rather than university students.

## **DECLARATIONS OF INTEREST**

There were no declarations of interest.

## **FAIR PRICE FOR CARE - OLDER PERSONS CARE HOME FEES**

### **RESOLVED: 2013/014**

- (1) That the findings of the local Fair Price for Care consultation process and the fee proposals arising from this be noted;
- (2) that the proposals to further support improvements in the quality of care provision through the development of initiatives for allocation of a higher level of payment for high quality dementia services and through the introduction and implementation of a 'Beacon Status' award be noted;
- (3) that the proposed changes be recommended to Policy Committee for approval.

## **NATIONAL POLICY DEVELOPMENTS ON MONITORING AND REGULATING CARE STANDARDS**

### **RESOLVED: 2013/015**

- (1) That the report be noted;
- (2) That the intention to produce a response to the consultation on market oversight of adult social care be supported;
- (3) That the response be delegated to the Corporate Director, Adult Social Care, Health and Public Protection in consultation with the Chairman and Vice-Chairman of the Adult Social Care and Health Committee;
- (4) That a meeting involving all members of the committee be held to help inform the response to the consultation.

## **TRANSFORMING CARE: NOTTINGHAMSHIRE'S RESPONSE TO WINTERBOURNE VIEW HOSPITAL, GLOUCESTERSHIRE**

### **RESOLVED: 2013/016**

- (1) That the content of the report be noted and that approval be given to the local actions proposed to meet the requirements set out in the "Transforming care: A national response to Winterbourne View Hospital Department of Health Review: Final Report" document; and specifically:
  - a) The assessment of all people placed out of the local area in hospital settings and care home environments
  - b) The resettlement of any persons assessed as being placed inappropriately
  - c) The development of local intermediate care services to prevent future inappropriate placements and reduce the length of hospital stays
  - d) The commissioning and provision of locally based accommodation and care for people placed out of the local area.
- (2) That the following temporary posts be established with effect from 5<sup>th</sup> February 2013 for a period of 18 months until 4<sup>th</sup> August 2014:
  - a) 0.5 fte (18.5 hours) Team Manager post, Pay Band D, scp 42-47 (£35,430 - £39,855 pro rata per annum) and the post be allocated authorised car user status
  - b) 2 fte (74 hours) Care Manager posts, Pay Band B, scp 34-39 (£28,636 - £32,800 pro rata per annum) and the post be allocated authorised car user status
  - c) 1 fte (37 hours) Occupational Therapy post, Pay Band B, scp 34-39 (£28,636 - £32,800 pro rata per annum) and the post be allocated authorised car user status
  - d) 0.5 fte (18.5 hours) Business Support Administrator post, Grade 3, scp 14-18 (£15,725 - £17,161 pro rata per annum).
- (3) That the committee receive a progress report in six months.

### **UPDATE OF POLICY AND STAFF GUIDANCE: REVIEWING PERSONAL BUDGETS**

After discussion it was agreed to amend the penultimate bullet point in the list of key changes to read: Whilst different types of reviews are described, if during a 'telephone' review it becomes clear a 'face-to-face' review is needed, or if the service user or their representative requests it, then the review types can be immediately changed.

**RESOLVED: 2013/017**

That subject to the above amendment, the Reviewing Policy for Personal Budget and staff guidance be approved and recommended for adoption by Policy Committee at its next meeting.

**CHANGES IN RELATION TO LOCAL AUTHORITY RESPONSIBILITIES FOR DEPRIVATION OF LIBERTY SAFEGUARDS**

**RESOLVED: 2013/018**

- (1) That 1 fte (37 hours) Senior Practitioner post, Pay Band C, scp 39-44 (£32,800-£37,206 per annum) be established within the Safeguarding Adults Practice team, with an authorised car user allowance at a cost of £1,350 p.a. with effect from 1<sup>st</sup> April 2013;
- (2) That funding of £19,768 be allocated from the Learning Disabilities and Health Reform Grant for the continuation of current business support arrangements.
- (3) That funding of £2,000 be allocated from the Learning Disabilities and Health Reform Grant for the annual legal training of Mental Health Assessors.
- (4) That the shortfall in the Learning Disabilities and Health Reform Grant compared to existing provision from the PCTs be met from within existing service budget.

Councillor Merry asked that it be recorded that he did not vote on this item, as he had been out of the room during discussion on it.

**OVERVIEW OF ADULT SOCIAL CARE AND HEALTH SAVINGS AND EFFICIENCIES PROGRAMME**

**RESOLVED: 2013/019**

That the report be noted.

**TRANSFER OF THE INDEPENDENT LIVING FUND TO LOCAL AUTHORITIES**

**RESOLVED: 2013/020**

That the report be noted.

**BENEFITS, TRAINING AND ADVICE SERVICE - PERMANENT ESTABLISHMENT OF A SENIOR BENEFITS ADVISER POST**

**RESOLVED: 2013/021**

That 1 fte (37 hours) Senior Benefits Adviser Post, Pay Band B, scp 34-39 (£28,636-£32,000 per annum) be established on a permanent basis in the Adult Access Team at the Customer Service Centre and the post continue to be allocated casual car user status.

## **WORK PROGRAMME**

### **RESOLVED: 2013/022**

That the work programme be noted.

The meeting closed at 12.20 pm.

### **CHAIRMAN**





**4<sup>th</sup> March 2013****Agenda Item: 4****REPORT OF THE SERVICE DIRECTOR PERSONAL CARE AND SUPPORT  
(OLDER PEOPLE)****UPDATE ON THE LIVING AT HOME PROGRAMME****Purpose of the Report**

1. The purpose of the report is to update Members on the progress of the Living at Home Programme.

**Information and Advice**

2. Councillors Kevin Rostance and Stuart Wallace launched the Living at Home Programme to Adult Social Care and Health operational frontline staff during October and November 2012. The purpose of these events was to engage frontline staff in the delivery of the programme and to highlight the key aims and objectives of each of the six projects within the programme. During November and December the programme team then took forward a series of consultation and information events with a range of partners, stakeholders, service users and their carers to further develop links and collaborative opportunities across Nottinghamshire.

**Total permanent residential and nursing placements (adults aged 65+) were 2,822:**

Independent Sector Residential	<b>1,898</b>
Independent Sector Nursing	<b>773</b>
Local Authority	<b>151</b>

**A total of 745 people were receiving free nursing care:**

some at a basic rate of £108.70 a week  
some at the higher rate of £149 a week

**16 older people received continuing health care, where Nottinghamshire County Council joint fund with Health** (the amounts paid by health here are higher than the free nursing)

**Project Updates****Care and Support Centres (Retained Residential Care Homes)**

3. The project plan for the Care and Support Centres identifies a plan of work to increase the number of short term care and support services to suit local needs. Staff (Community Link Workers) from each centre are undertaking research in their local communities to identify what additional services could be provided to local people from the Care and Support

Centres. As a result of this work two of the centres are taking part in pilot activity to provide brief respite periods for carers or older adults where the caring relationship is at risk of breaking down, one Centre is also going to trial a bathing service.

4. Work is also being done to link in with work already being undertaken by the voluntary sector, such as Age UK and Alzheimer's Society to see how we can work together to support the overall aims of the Living at Home Programme. To assist with this, one of the Centres is also hosting a meeting of the voluntary sector groups at a venue in the centre of the County easily accessible for all of the groups.
5. Further work is also underway with regards to the finance of the Centres and existing contracts for plumbing, maintenance, utilities, food etc are being looked at. Corporate Procurement are assisting to establish that these contracts are as cost effective as possible and represent value for money. A briefing has been offered to each of the political parties about the programme.
6. A schedule of works has been developed to complete some landscaping and redecoration to improve the physical environment in the Care and Support Centre and this work has been completed or started in four of the centres with the other two planned to start soon.
7. In addition to this work additional funding has been identified to purchase new furniture and soft furnishings and linens as required for each of the bedrooms within the six Centres.

#### **Extra Care**

8. The recent procurement exercise identified a preferred bidder for the schemes in Eastwood and Retford. Work is continuing to ensure that formal contracts are completed and signed as soon as possible.

#### **Department of Health Bid to the Care and Support Specialist Housing Fund with Mansfield District Council**

9. The joint bid was submitted on 18<sup>th</sup> January 2013 with decisions expected in May 2013. There was an article in the Mansfield Chad that was very favourable with feedback from local people welcoming the scheme.

#### **Gedling Homes**

10. Officers are working with Gedling Homes and Gedling Borough Council to deliver an Extra Care Housing Scheme. The Council is able to enter into a public to public partnering arrangement and deliver a scheme designed to the Council's design brief in the Gedling District. The County Council would pay a subsidy to Gedling Homes who are investing in the refurbishment of the whole site so that the end result meets the Council's requirements in terms of it being suitable for people with Extra Care needs. As the work progresses and the exact funding required is established a further report will be submitted to Committee for formal approval to proceed.

#### **Ashfield**

11. Ashfield District Council have accommodation in Hucknall that they have been considering demolishing for some years. Officers and Councillor Rostance in the past have visited Ashfield District Council to enquire as to whether they would consider developing an Extra

Care Scheme on the site. This work was not progressed however, following a recent press release about the site in December 2012 contact was again made with Ashfield District Council with regards to the possibility of working in partnership in the delivery of an Extra Care scheme, they have also been given the Council's design brief so that when they were looking at the design of the scheme they could establish whether or not they could work with the requirements of the Council.

12. On 6<sup>th</sup> February 2013 there was a further meeting with the officer at Ashfield District Council who has agreed to look at the costings as a part of the appraisal of the scheme and come back to the Council as soon as possible. A letter has been drafted to this effect.

### **Assistive Technology (AT)**

13. A draft project plan has been completed with timescales to agree the review of the current Nottinghamshire County Council website information for AT and the establishment in three Nottinghamshire County Council Care and Support Centres to enable staff, service users and carers to see AT equipment working in a real environment.

### **Admissions to Care**

14. A briefing report has been completed identifying the current processes and procedures that are in place for operational staff to agree applications for admissions into long term care. This report has formed the basis of an options appraisal and business process review, which will enable more robust consideration of all applications prior to decisions being taken to agree an admission into long term care.

### **Joint Working with Health and Other Partners**

15. A report has been completed focussing on the facilitation of hospital discharges and the future proposals for developing further the work with integrated discharge teams to reduce the numbers of people going into long term care directly from hospital. An officer will shortly begin working with the Community Programme (NUH); this is a collaborative opportunity between Nottinghamshire County Council and the trust to support the development of Comprehensive Geriatric Assessments for older people moving from hospital settings back into the community. Work is also underway across a number of Clinical Commissioning Group areas exploring better ways of working together across Health and Social care.

### **Reablement Project**

16. Further work has been undertaken to increase the number of people accessing Reablement services and to develop and increase the number of assessment beds. The two main workstreams of activity include an assessment of the size of the service required for the future which in collaboration with health partners will identify key areas for expansion and secondly an activity to map existing processes to identify areas for improvement within the Reablement services generally.

### **Communications and Cultural Change**

17. In addition to the projects outlined above there is a change management programme which will be implemented acknowledging and addressing the current cultural issues within the organisation and within partnering organisations. The programme has developed an intranet page as a tool to engage with operational staff and to ensure external partners can access

the relevant information. External partner publications have been utilised to promote the programme and bespoke presentations to Community Geriatricians, carers and service users, voluntary sector organisations and Trade Union colleagues have also been undertaken.

### **Current activities**

18. Each of the projects has now produced their project plans, aims, objectives, initial business cases, risks and issues logs and benefits realisation plans. This work has also been done at a programme level. The full financial modelling is not yet completed as work is still underway with regards to the Base Budget Review.
19. The Living at Home board has been established and meets monthly to monitor risks, issues and report on highlights and project progress. The Board membership includes John Gladman, Professor of the Medicine of Older People at the University of Nottingham who has agreed to be a “critical friend” for the programme. In addition to this the programme produces monthly Highlight Reports for the Transformational Board.

### **Statutory and Policy Implications**

20. This report has been compiled after consideration of implications in respect of finance, the public sector equality duty, 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.

#### **Implications for Service Users**

21. Equality Impact Assessments are to be developed for each of the projects as they progress.

#### **Financial Implications**

22. The financial implications are set out in paragraph 5 of the report.

### **RECOMMENDATION/S**

- 1) It is recommended that the contents of the report are noted.

**DAVID HAMILTON**

**Service Director for Personal Care and Support - Older Adults**

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

Cherry Dunk

Strategic Development Programme Manager

Tel: (0115) 97 73268

Email: [cherry.dunk@nottscc.gov.uk](mailto:cherry.dunk@nottscc.gov.uk)

23. As the report is for noting only no constitutional comments are required.

### **Financial Comments (CLK 11.02.13)**

24. The financial implications are contained within the body of the report.

### **Background Papers**

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

- a) 10<sup>th</sup> April 2008 – Modernising Services for Older People in Nottinghamshire – County Council (published):

[http://dominoapps.nottscc.gov.uk/apps/pr/diary/memdiary.nsf/0/A04E3B8C7477E472802572CA0034B2E9/\\$file/09r\\_Modernising%20Services%20for%20Older%20People%20in%20Notts.pdf](http://dominoapps.nottscc.gov.uk/apps/pr/diary/memdiary.nsf/0/A04E3B8C7477E472802572CA0034B2E9/$file/09r_Modernising%20Services%20for%20Older%20People%20in%20Notts.pdf)

- b) 14<sup>th</sup> July 2010 – Aiming For Excellence - Cabinet report (published):

[http://dominoapps.nottscc.gov.uk/apps/ce/memman/memman.nsf/26959B6CD01BFC578025761000320E95/\\$file/R10\\_aiming%20for%20excellence.pdf](http://dominoapps.nottscc.gov.uk/apps/ce/memman/memman.nsf/26959B6CD01BFC578025761000320E95/$file/R10_aiming%20for%20excellence.pdf)

- c) 25<sup>th</sup> February 2010 – Aiming for Excellence - Council report (published):

[http://dominoapps.nottscc.gov.uk/apps/ce/memman/memman.nsf/AEB0F3B095DA5E80802575FD0031ED98/\\$file/11\\_aiming%20for%20Excellence.pdf](http://dominoapps.nottscc.gov.uk/apps/ce/memman/memman.nsf/AEB0F3B095DA5E80802575FD0031ED98/$file/11_aiming%20for%20Excellence.pdf)

[http://dominoapps.nottscc.gov.uk/apps/ce/memman/memman.nsf/AEB0F3B095DA5E80802575FD0031ED98/\\$file/11\\_Aiming%20for%20Excellence%20App1.pdf](http://dominoapps.nottscc.gov.uk/apps/ce/memman/memman.nsf/AEB0F3B095DA5E80802575FD0031ED98/$file/11_Aiming%20for%20Excellence%20App1.pdf)

- d) Equality Impact Assessment.

- e) ITT documentation for Aiming for Excellence – Tender for Extra Care Housing.

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

**All**

ASCH109



**4<sup>th</sup> March 2013****Agenda Item: 5****REPORT OF THE CORPORATE DIRECTOR, ADULT SOCIAL CARE,  
HEALTH AND PUBLIC PROTECTION****REPORT ON COUNCIL'S RESPONSE TO SURVEY BY EQUALITIES AND  
HUMAN RIGHTS COMMISSION ON OLDER PEOPLE AND HUMAN RIGHTS  
IN HOME CARE****Purpose of the Report**

1. The report summarises the Council's response to the Equality and Human Rights Commission's survey. This followed up the report and recommendations produced in 2011 in relation to their inquiry into the provision of home care for older people and their human rights.

**Information and Advice**

2. In November 2011 the Equality and Human Rights Commission (EHRC) launched the final report and recommendations of its statutory inquiry into older people and human rights in home care, [Close to Home](#). The inquiry examined the extent to which the human rights of older people who require or receive home care are promoted and protected by public authorities, together with the adequacy of the legal and regulatory framework.
3. The inquiry was conducted by the EHRC using its legal powers under the Equality Act 2006, and as a result organisations have a legal duty to 'have regard' to the recommendations. Hence the survey in November 2012 which looked to ascertain the extent to which relevant organisations have complied with the inquiry recommendations. The report from the survey will set out the findings that have emerged from the evidence gathered. In order to highlight examples of good practice that have been gathered during the inquiry and assist their dissemination, local authorities may be named in the report with their permission.
4. Our response to the survey was submitted by the required deadline of 30<sup>th</sup> November 2012. Further to this we were contacted by the research organisation conducting the survey on behalf of the EHRC and asked to provide some supporting material about areas of good practice in Nottinghamshire.
5. The survey was split into 3 main areas: reviewing policies and practices, changes in the law on age discrimination and complying with recommendations from the 2011 inquiry report, around supporting user choice, mainstreaming human rights in home care commissioning

and rewarding and retaining care workers. The survey had to be completed electronically, so the responses have been summarised in this report.

## **Reviewing policies and practices**

6. In relation to our home care commissioning policies and practices we were able to report that we have reviewed them and are confident that there is no age related bias or differential treatment linked to age in care planning and support, as we operate only one resource allocation system (RAS) for all service users. In the supporting information we provided a factsheet on our resource allocation system that is given to service users and carers. The RAS is a method for calculating the average cost of social care support. It is based on the information obtained through the community care assessment and it establishes the value of an individual's personal budget.
7. We also highlighted the number of different methods made available for people to raise concerns and/or make complaints, such as the website, the Customer Service Centre, direct to the Complaints Team or via the Social Worker or Reviewing Officer. Service users are provided with a factsheet – [Have your say](#) – which includes full details of how to make a complaint.

## **Changes in the law on age discrimination**

8. In the section relating to changes in the law on age discrimination we were able to answer that we were already confident that our actions in this area are compliant with the law.

## **Recommendations on supporting user choice**

9. In relation to the recommendations made in the inquiry report we were able to give a number of examples of how we have taken action, and continue to act, to support user choice and to make it easier for older people to manage and arrange their own care. These include:
  - development of the [Support with Confidence scheme](#) – a register of people looking for work as Personal Assistants (PAs). Members of the scheme undergo an enhanced CRB check, provide references and receive essential training. The register is available on the Council website.
  - development of the pre-payment debit card for the cash allocation of direct payments, which makes it easier for individuals to purchase care and support.
  - work in partnership with the Alzheimer's Society on a dedicated post to improve the take-up of direct payments for people with dementia.
  - publication of a list of local micro-providers<sup>1</sup> which includes proof of insurance, CRB checks and references.

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<sup>1</sup> micro-providers are small organisations that provide support or care to people in their community, have 5 or less workers (paid or unpaid) and are independent of any larger organisation. They give local people more choice and control over the support they get and offer an alternative to more traditional services



- details of local regulated care services available through the Council website with links to Care Quality Commission and signpost to quality checks.
- an advocacy service commissioned jointly with Nottingham City Council and County NHS. This provides a range of statutory, specialist and peer advocacy via a single point of access. One of the providers is Nottinghamshire Age UK.
- development of a pilot brokerage scheme based within the Short Term Assessment and Reablement Team (START) to help put older people in touch with appropriate care providers.

### **Recommendations on mainstreaming human rights in home care commissioning**

10. Further recommendations within the inquiry report relate to obligations under the Human Rights Act (HRA). In relation to taking steps to mainstream human rights into decision making processes and plans, we were able to cite, and provide, our standardised report template – used at all committees – which requires the report author to take account of implications in relation to human rights and equalities when requesting decisions. In addition an equality impact assessment is required where any new policy or service, or change to these, is proposed.
11. The report also made a recommendation that elected Members should receive training on human rights to enhance their leadership role in the commissioning of care for older people. This has been discussed with the Corporate Director for Policy, Planning and Corporate Services and training on the Human Rights Act will be included in the new induction programme for Members currently under development.
12. There were some questions in the survey around the practice of commissioning visits from care providers that are expected to last 15 minutes or less. We clarified that we do commission 15 minute visits where it is appropriate for activities such as health and wellbeing checks, prompts with medication and meal preparation. However, irrespective of the time allocated we allow providers to spend longer with service users if they need to without recourse to reassessment; so there should never be a constraint regarding provision of personal care. Where longer visits are required over a sustained period we will reassess the service user's needs.

### **Rewarding and retaining care workers**

13. This recommendation relates to ensuring that commissioning practices balance the allocation of resources required to meet assessed home care needs with the need to ensure care providers can provide an appropriate wage for care workers. Although not stated explicitly within current contracts, our arrangements with care providers include sufficient payment to cover for care workers travel time between visits and the costs of the travel, and an enhanced rate for visits in rural areas.
14. We identified in the survey that it is our intention in future home care contracting procedures to consider a more explicit breakdown of how providers will include compliance with the national minimum wage for care staff within their quoted price, and further consideration of the 'living wage' (currently £7.20 per hour outside of London).

## **Statutory and Policy Implications**

15. This report has been compiled after consideration of implications in respect of finance, the public sector equality duty, 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.

### **Implications for Service Users**

16. The inquiry and the accompanying report highlighted some areas of concern with regard to the commissioning and provision of home care for older people in relation to their human rights. We have reviewed our practices and procedures against the recommendations made in the report and believe these to be sound, although we acknowledge the need to keep these under review. The current re-tender of home based care and support services affords an excellent opportunity to review our practices in light of the report.

### **Financial Implications**

17. There may be financial implications attached to any change in contracts with care providers.

### **Equalities Implications**

18. The inquiry report and recommendations seeks to ensure that local authorities have the processes in place to ensure older people receive appropriate and good quality care and that they are supported to manage their own care wherever possible.

### **Human Rights Implications**

19. The report and recommendations highlight the need to ensure that the human rights of older people who require or receive home care are promoted and protected by local authorities through their commissioning policies and practices.

### **Human Resources Implications**

20. The report highlights the importance of good quality care workers and includes recommendations on the appropriate payment of these staff to reward their input and ensure retention.

## **RECOMMENDATION/S**

- 1) That committee notes the contents of the report.

**David Pearson**

**Corporate Director, Adult Social Care, Health and Public Protection**

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

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Jennie Kennington  
Senior Executive Officer

**Constitutional Comments (KK 29.01.2013)**

21. The proposal in this report is within the remit of the Adult Social Care and Health Committee.

**Financial Comments (CLK 17.02.13)**

22. The financial implications are contained within the body of the report.

**Background Papers**

None

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

All.

ASCH104



**4<sup>th</sup> March 2013****Agenda Item: 6****REPORT OF SERVICE DIRECTOR, JOINT COMMISSIONING, QUALITY AND  
BUSINESS CHANGE****PROMOTION OF DIGNITY IN CARE WITHIN ADULT CARE SERVICES****Purpose of the Report**

1. This report provides Members with an update on the work being undertaken across adult social care services to promote and support dignity in care.

**Information and Advice**

2. The Dignity in Care Campaign was launched by the Department of Health in November 2006 and it continues to stimulate debate around the need for people receiving care services to be treated with dignity and respect. The campaign has included encouraging people to become 'Dignity Champions' and to advocate for and ensure services meet the 10 dignity challenges. The main activities of the campaign both nationally and locally have included:
  - raising awareness of dignity in care
  - sharing good practice and encouraging innovation to help improve the quality of care
  - supporting individuals and organisations to improve the ways in which services are provided
  - recognising and rewarding staff and teams that make a difference
3. Nottinghamshire County Council continues to be proactive in promoting dignity in care both in its internal care services, through the services it commissions from independent sector providers, and through its training and development.

**Work undertaken with independent sector care providers**

4. Through its quality audits and monitoring activities, the Market Development and Care Standards team measures performance in this area, ensuring not only that care staff have received training in dignity, but also that it is evident in their practice. The Quality Audit Framework is used by Quality Development Officers (QDOs) to assess the standard of care provided. It explicitly refers to the importance of dignity in care services and one of the key standards that QDOs look at is 'respecting and involving people who use services'. Within this standard QDOs are looking for evidence that the 10 dignity

challenges are promoted, that policies and procedures support respect towards service users and that staff have received training in promoting dignity.

5. The Nottinghamshire Partnership for Social Care Workforce Development (NPSCWD) is an organisation that has been set up by care providers and works on behalf of them to develop the social care workforce to meet the needs of current and potential service users within the County and in Nottingham City. Members will recall from a previous committee report that the Partnership receives funding from, and is currently hosted within, the County Council. It provides training and support to all care providers across the County. The Partnership provides a range of courses including: care planning, dementia awareness and activities, equality and diversity, safeguarding, infection control, medication and nutrition. Issues relating to dignity in care are integral to all the courses that are delivered to independent sector providers. Key priority areas for the County have been identified with the Partnership and these include ensuring the effectiveness of the training to deliver improvements to the quality of care for service users; developing the workforce to deliver better dementia care, end of life care, safeguarding and dignity; and improved provision of personalised care services.
6. Between April 2011 and March 2012, 1,566 care workers attended these training courses. From April to the end of December 2012, 1,679 training places were booked by staff from 130 care homes, home care agencies, voluntary organisations and micro-providers. During 2012 the Partnership also delivered safeguarding updates from the Independent Safeguarding Authority to approximately 200 delegates and organised a conference to launch a dementia care programme, which focuses on providing person-centred dementia care, which 100 delegates attended. Future plans include delivery of the 12 month dementia care programme to 2 cohorts of staff starting in February 2013. 80 places have been filled comprising 2-3 people from 28 organisations, who are either owners or managers.
7. The Partnership has also secured additional funding to the value of £88,000 from the Skills for Care Innovation Fund and will use this to deliver:
  - Leadership and Management modules to 40 delegates across approximately 20 care settings
  - action learning sets for Registered Care Managers to help them meet the Care Quality Commission's essential standards across approximately 32 care settings, and
  - a competence framework for moving and handling, specifically looking at dignity and safeguarding, with support from registered trainer assessors to train and assess care staff in moving and handling competence
8. The County Council held a Dignity Event on 1 November 2012 with 120 staff from independent sector care homes attending. There were presentations on falls prevention, business continuity, Mental Capacity Act 2005, safeguarding adults and dementia care, with the focus on dignity as the core feature of care provision. This was organised by the manager of the Safeguarding Adults and Mental Capacity Act Team, who has the departmental lead for dignity in care; the Market Development and Care Standards Team; and Workforce Development Officers, who are based within the Corporate Learning and Development Team.

9. The event was a great success with care home staff engaging and committing to ensure and promote dignity in care in their establishments. Participants were encouraged to make a commitment to being Dignity Champions, via the [Dignity in Care](#) website and to put their good intentions into practice. The intention is to arrange another event this year.

## **Work with Council staff**

10. All staff in the council are able to apply to become a Dignity Champion and information on how to do this is available on the intranet.
11. Within the Short Term Assessment and Reablement Teams (START) all care staff have pledged to become Dignity Champions and uphold the right of service users to privacy and dignity. The START teams are aiming to have all their staff signed up this year and the Mansfield and Ashfield Team has already achieved this. On 1 February, National Dignity in Care day, staff were asked to revisit this pledge and to focus on completion of their Dignity workbooks. With their work rotas for the week they were sent a poem that highlights the importance of seeing the individual rather than someone who needs care and support.
12. The Dignity in Care workbook has been developed by the START service and staff are encouraged to work through this and provide responses to exercises that ask them to reflect on their practice and how they relate to service users. On completion of the workbooks staff are awarded with a certificate. There are copies of the workbook and the certificate in the background papers.
13. The Mansfield and Ashfield START Team was inspected by the Care Quality Commission in September 2012 and was found to be compliant in all areas. In relation to Dignity in Care, the inspectors noted:

‘..there was a Dignity Handbook for all staff. The manager told us they were aiming for all staff to be Dignity Champions and most had already achieved this. We saw records of an observational supervision and the senior worker had recorded positive comments about respect shown and how dignity was maintained. In discussions with us, staff described good practice in maintaining people's dignity whilst assisting with personal care.’
14. Within the six Care and Support Centres, there are nearly 100 Dignity Champions. Dignity is discussed regularly in supervision meetings with staff and they are asked to give examples of their actions in practice that have promoted or achieved dignity for residents.
15. Council day services also make it a priority to treat all service users as individuals, and to help staff to understand how they can do this they are provided with training in Person Centred Planning. All users of day services have documented Person Centred Plans, care plans and support plans; as well as risk assessments. The plans help to ensure that care is delivered safely and appropriately and that individual needs are acknowledged and built into the care provided. Managers look to recognise staff when they observe good practice and to thank them for their contribution to delivering good quality care. The service listens to and values contributions from people who attend the day services via speak-out groups.

16. Members will recall that our staff have enjoyed success at the Great British Care awards, which has a regional event in the East Midlands, in relation to supporting and promoting dignity in our work with service users. At Full Council last year Veronica Bell, a social worker from the Mental Health Reviewing Team, was recognised for receiving the Dignity in Care award. She will now be considered for the national finals in London later this year. Also last year, trainers in provision of end of life care, Elise Adam and Steph Pindor, were recognised for their achievements in the Care Trainer category. Elise and Steph are employed by the NHS but work in partnership with the County Council to promote high quality end of life care across all care providers in the City and the County.
17. In 2011, Jane Buxton was a runner up in the Dignity in Care category for her work with service users at the Ashfield Day Service, and Sue Mercer, Business Support Assistant at Ashfield Day Service, received the Putting People First award for going the extra mile to provide support to service users in developing new skills.
18. The Council continues to promote the Dignity in Care campaign, which has now been running for a number of years, across the care sector in Nottinghamshire. Because of the size of this staff group across the county and inevitable changes in the workforce it has been difficult to maintain an up to date list of Dignity Champions.

## **Statutory and Policy Implications**

19. This report has been compiled after consideration of implications in respect of finance, the public sector equality duty, 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.

### **Implications for Service Users**

20. Dignity in Care is an important issue for all service users, carers and families. It is essential that it is integral to the care we provide and the care that is commissioned by the Council, hence the importance of mechanisms that support and review this.

### **Financial implications**

21. The Nottinghamshire Partnership for Social Care Workforce Development (NPSCWD), which is referred to earlier in the report, is currently hosted by the Council, and funding was agreed at the Committee in October 2012 for a two year period up to 31<sup>st</sup> October 2014, to promote its development into an independent organisation. This is provided from the NHS Support to Social Care funding. The Partnership has also secured an additional £88,000 as the additional funding received from the Skills for Care Innovation Fund.

## **RECOMMENDATION/S**

- 1) That Committee notes the contents of the report.



**Caroline Baria**  
**Service Director, Joint Commissioning, Quality and Business Change**

**For any enquiries about this report please contact:**  
**Jennie Kennington**  
**Senior Executive Officer**

### **Constitutional Comments**

22. As the report is for noting only no constitutional comments are required.

### **Financial Comments (CLK 22/02/13)**

23. The financial implications are contained within paragraph 21.

### **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.

- a. Quality Audit Framework 2011/2012
- b. START Dignity in Care Workbook
- c. START Dignity in Care Certificate
- d. 29<sup>th</sup> October 2012 - NHS Support for Social Care Funding – Report to Adult Social Care and Health Committee (published):

<http://www.nottinghamshire.gov.uk/dms/Meetings/tabid/70/ctl/ViewMeetingPublic/mid/397/Meeting/17/Committee/7/SelectedTab/Documents/Default.aspx>

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

All.



**4<sup>th</sup> March 2013****Agenda Item: 7****REPORT OF SERVICE DIRECTOR FOR OLDER PEOPLE****EXPENDITURE OF CARERS' FUNDING ALLOCATION – PROPOSED PLANS****Purpose of the Report**

1. To notify the ASCH Committee of the availability of an additional £1.5 million recurrent funding from NHS Nottinghamshire County to be spent on support for carers across Nottinghamshire County.
2. To notify the ASCH Committee of the availability of an additional £0.2 million non-recurrent funding from NHS Bassetlaw to be spent on support for carers across Bassetlaw.
3. To share with the Committee outline proposals for use of the funding.
4. To set out the appropriate governance arrangements to ensure robust use of monies and monitoring of the impact on outcomes for carers and the people they care for.

**Information and Advice****Introduction**

5. Nottinghamshire County Council currently spends approximately £4.4 million on care and support for Carers and the people they care for. The services currently available for Carers range from one-off personal budgets (of up to £200.00), Day services and short breaks, crisis prevention schemes and the use of Assistive Technology.
6. NHS Nottinghamshire County received £1.5 million for carers, as part of its financial settlement in 2012/13, and, until this point, this amount has been held as a central reserve by the Primary Care Trust. This paper proposes that £1 million of this is transferred to Nottinghamshire County Council on a recurrent basis, £0.3 million is added to the budget for the provision of Carers' Breaks administered by the NHS and £0.2 million is allocated to the 5 Clinical Commissioning Groups for carers' initiatives.
7. NHS Bassetlaw (Primary Care Trust) has recently agreed a one-off allocation of £200,000 for carers in Bassetlaw for this year.
8. This provides us with a total of £1.2 million across Nottinghamshire. The £1.2 million is the money being transferred to Nottinghamshire County Council; the remainder will sit within the NHS. Proposals are currently being developed and consulted upon.

9. Current health expenditure on carers is principally through the funding of carers breaks – Health pay for the member of staff to administer breaks as part of the continuing health care scheme and circa £300,000 is spent each year on Carer's breaks. There are other funds, much smaller, available in individual Clinical Commissioning Group (CCG) schemes in addition to this amount.
10. Health services are continually being scrutinised to test the level of expenditure on carers, with regular questions through Freedom of Information (FOIs) requests and other channels. Given the recent emphasis on support for carers, it is important and timely to recognise the contribution that carers make in enabling the 'cared for' person to remain at home and out of more costly hospital or other health-related care or long term residential care.

### **What approach should we take?**

11. Proposals are based on the existing Integrated Commissioning Carers' Strategy and will complement existing priority areas.
12. It is important that this additional funding is utilised to secure maximum impact on improving outcomes for both Carers and the people they are caring for. In planning for this, account should be taken of the following:
  - There is already an existing agreed Integrated Commissioning Carers' Strategy between the local NHS and Nottinghamshire County Council.
  - There is a clear connection between investment in carer services to prevent breakdown of care for the 'cared for' person, who might be at risk of admission to hospital or residential care. This is of particular concern over the winter period, when unplanned admissions to hospital increase.
  - Due to the ageing population, as well as the increase in the incidence of dementia, there is a need to consider services that are specific to the needs of those who are carers of people with dementia.
  - There are agreed and clear governance arrangements for Joint Commissioning with Nottinghamshire County Council and the Clinical Commissioning Groups.

### **Discussion with partners**

13. The proposals described below are drawn from priorities identified in the Carers' Integrated Strategy. The proposals will be shared with partners and agreed by members of the Carers' Implementation Group which reports to the Integrated Commissioning Group for Older People.

### **Funding proposals**

14. The following proposals are suggested for the use of an additional £1.5 million on a recurrent basis:

- Immediate increase in funding carers breaks. This budget (held by Health) is under pressure and, now we have generated interest and awareness amongst carers, they need to provide funding for the anticipated increase in demand for this service. **The proposal is for the NHS to double the current investment (an additional £300,000) on a recurrent basis.** This budget will remain within the NHS.
- Health contribute a very small amount to the overall carers spend (about £300,000). The carers' strategy and action plan has been widely consulted on with carers and other stakeholder groups. **The proposal is to transfer £1 million from Health to the Local Authority in 2012/13 and then year on year.**
- The Carers' Implementation Group, which has CCG representation, will develop a prioritised list of recurrent and non-recurrent schemes for use of this investment for approval by the CCG Accountable Officers and the Carers lead for the County Council. **The proposal is that the existing integrated Commissioning Group for Older People, which also has CCG representation, will oversee the use of the funding and account to the CCGs and the County Council for its appropriate use.** The transfer agreement will enshrine these as the appropriate governance arrangements for oversight of this funding.

15. The Carers' Implementation Group will seek to prioritise 'winter' schemes, such as targeted support for carers of frail elderly and those with dementia. (Around 60% of the referrals for Carers Breaks are for Carers looking after those living with Dementia or other memory related conditions). Many of the carers are elderly or have a long term conditions themselves.

16. **The proposal is to allocate the remaining funding (£200,000) on a capitation basis to CCGs.** This will facilitate the development and uptake of a Local Enhanced Service (LES) for GP practices to provide early identification of carers and signposting into support services that currently exist. Many carers do not consider or see themselves as carers. They see looking after the person 'cared for' as just something they have to or want to do. The introduction of a LES and practice register with a commitment to health checks for carers would incentivise the involvement of a wide range of professionals in becoming aware of carer issues and risks. This would mean that an additional 2000 carers could be identified and the associated risks managed. The approximate funding split across the 5 CCGs is shown below:

Mansfield & Ashfield	Newark Sherwood &	Nottingham North & East	Nottingham West	Rushcliffe
30.27%	18.67%	21.66%	13.63%	15.77%
(£60,540)	(£37,340)	(£43,320)	(£27,260)	(£31,540)

Specific suggestions currently are:

#### a. Dementia 'Compass' Support Workers

17. Supporting carers of people with working age dementia is a priority identified by the LINK (Local Involvement Network) and by carers at the Newark Dementia Summit.
18. One proposal is to employ Compass support workers i.e. specialist workers support carers of people with dementia and especially working age dementia. These workers would work along similar lines to 'Admiral Nurses'.
19. Admiral Nurses are all qualified mental health nurses who have specialised, and often have additional qualifications, in dementia care. The purpose of Admiral Nursing is to support the carers and families of people with dementia. To fulfil this aim they work in two main ways:
- Direct casework with family carers, offering, assessment, problem identification, information, signposting, psychological interventions and or support.
  - Offer supportive education to other professionals involved in a caring capacity but lacking in expertise on dementia related topics. These might include, care home staff, district nurses, general hospital staff and even G.P's.
20. The proposal is to appoint 7.5 Compass workers – Mansfield and Ashfield to have 1.5 FTE because of the size of the population). The cost is based on the NHS Band 5 (top of scale full time with on costs) at £33,521. This has been rounded up to £35,000 (for travel and possible pay increase next year).

For south of the county = £35,000 x 6.5 = £227,500.  
For Bassetlaw = £35,000

**The total for the whole county is therefore = £262,500**

#### **b. End of Life Carers Support Service**

21. This is a proposal to commission a service for all carers who are looking after someone at the end of their life. Nottinghamshire's Clinical Commissioning Groups (apart from Bassetlaw) have already passed this proposal through the PCT's procurement panel to be commissioned recurrently.

For south of the county = £120,000  
For Bassetlaw = £24,000

**22. The proposal for the whole county is therefore = £144,000**

#### **c. Care and Support Centres**

23. Nottinghamshire County Council currently owns 6 care homes which have been renamed as Care and Support Centres.

24. The 6 Care and Support Centres are located across the county:

- St Michaels, Retford (**Bassetlaw**)
- James Hince Court, Carlton in Lindrick (**Bassetlaw**)
- Kirklands, Kirkby in Ashfield (**Ashfield**)

- Leivers Court, Gedling (**Gedling**)
- Bishops Court, Boughton (**Newark and Sherwood**)
- Woods Court, Newark (**Newark and Sherwood**)

25. As part of the 'Living at Home' programme, there are proposals to expand and develop the use of the buildings as resources for the local community. It is also anticipated that Care and Support Centres can be altered to better meet the needs of carers; e.g. funding for the Care and Support Centres which could give carers a short break.

26. Other proposals include funding home-based provision overnight and at weekends when carer relationships break down due to illness/injury, through use of outreach from Care and Support Centres and/or crisis prevention scheme. This would prevent emergency admissions to care out of hours.

27. The costs below are based on the initial phase; if the plans are then applied to all 6 care and support centres, the cost rises to **£150,700**.

These proposals include:

• Reminiscence Therapy Workshops	£10,000
• Community Link workers	£22,000
• Carers' rooms	£10,800
• Bathing service	£1,950
• Ad hoc drop-in	£72,000
• Outreach work	0
• Assistive Technology Equipment	£12,000
• TOTAL	£128,750

For south of the county = £100,467

For Bassetlaw = £50,233

**The total for the whole county = £150,700**

#### **d. Carers' Personal Budgets**

28. In a paper "Progressing Personalisation: A review of personal budgets and direct payments for carers", produced by the Carers Trust in December 2012, it reports on a survey conducted with Local Authorities. The survey showed wide variation from a maximum of £150 for a carers' personal budget, to more than £1,501.

29. Five local Authorities reported maximum amounts of £1,000, £1,500, £1,560, £2,100 and £4,680 and 19 out of 30 authorities reported a maximum of between £250 and £500. Eleven authorities did not have a maximum. 1 area had a flat budget of £300 per carer.

#### **Current activity**

30. Currently Nottinghamshire County Council awards:

- £150 to carers assessed at substantial level

- £200 to carers assessed at critical level.

31. Based on activity from 1 April 2012 and 31 August 2012, an average of 118 adult (over 18) carers received a Carers' Personal Budget per month (using an average of £175).

32. Therefore, it is expected that 1,416 carers will have received a Personal Budget by 31 March 2013 at a cost of **£247,800 for the 2012-2013** financial year.

### **Projected spend options**

33. In light of the Carers Trust findings, it would be reasonable to increase the maximum / minimum levels of Personal Budgets (PB) in line with other authorities. This would require topping up the Community Care budget for each locality / service area accordingly.

34. If the maximum level was increased to **£300** and the minimum was **£250**, this would equate to **1,416** carers receiving a maximum Personal Budget costing £300 = **£424,800**. The additional £177,000 is to be funded as follows:

For south of the county = £146,910

For Bassetlaw = £30,090

**The total for the whole county = £177,000**

### **e. Carer resilience**

35. This is a proposal to fund research into dementia carer resilience in Bassetlaw and in the Newark and Sherwood area.

For south of the county = £21,000

For Bassetlaw = £12,500

**The total for the whole county = £33,500**

### **f. Consultation with Black and Minority Ethnic (BME) communities**

36. Investigate access to, and suitability of Social Care services for BME carers. This has been identified in the Carers' Strategy and the Day Services review.

For south of the county = £8,333

For Bassetlaw = £1,667

**The total for the whole county = £10,000.**

### **g. 'Looking After Me' carers' courses**

Currently the course 'Looking After Me' is being offered throughout Nottinghamshire except for the Bassetlaw area. To ensure equity throughout the county this proposal is to extend the offer to Bassetlaw.



The Looking After Me course is delivered along the same lines as the generic course i.e. two and a half hours once per week for six weeks.

**For Bassetlaw only = £16,924**

## **h. Evaluation**

This is a significant amount of money and all stakeholders will be interested in the impact and cost effectiveness of these initiatives. It is therefore proposed that some money is committed to fund an in house evaluation, which we estimate the costs to be in the region of:

For south of the County = £16,667

For Bassetlaw = £3,333

**The total for the whole County = £20,000**

## **Other Options Considered**

37. To improve CCGs engagement with the carers agenda, the CCGs are recommended to appoint a **carers' lead** and ask that this responsibility is recognised in the revised memorandum of understanding between the CCGs. Whilst there is not a requirement to have an additional post, the governance arrangements need to ensure that all CCGs are appraised of Carers developments and proposals regarding future expenditure of this recurrent funding.

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

38. Support the recommendations for allocation of the £1.7 million funding set out in this paper:

- a. £1.2 million be transferred to the County Council
- b. £0.3 million be added to the budget for the provision of Carers breaks administered by the CCGs
- c. £0.2 million be allocated to the 5 CCGs for use on Carers initiatives.

39. Agree that the existing governance arrangements will be sufficient to oversee the use of the joint funding on an on-going basis and that these should be set out in the section 256 agreement. However, request, on a one-off basis, the Accountable Officers to 'sign off' the plan when it has been produced by the Carers Implementation Group.

40. Ask the finance team (Health) to enact the necessary funding transfer.

41. To further improve governance, agree the nomination of a Carers Lead in one of the CCGs on behalf of all and tie this in to a revised memorandum of understanding.

42. Agree to the identification of a Carers' lead for CCGs.

## **Statutory and Policy Implications**

43. 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.

### Implications for Service Users

44. The extra funding of £1.7 million will have a positive impact on both carers and by implication on the service users they are looking after as carers will be receiving more support, advice and information to assist them in their role as a carer.

### Financial Implications

45. The total amount of the proposals listed here = £814,624

	NHS Notts County	Bassetlaw	Total
<b>a. Compass</b>	227,500	35,000	<b>262,500</b>
<b>b. End of Life</b>	120,000	24,000	<b>144,000</b>
<b>c. Care &amp; Support Centres</b>	100,467	50,233	<b>150,700</b>
<b>d. Personal Budgets</b>	146,910	30,090	<b>177,000</b>
<b>e. Carer Resilience</b>	21,000	12,500	<b>33,500</b>
<b>f. BME</b>	8,333	1,667	<b>10,000</b>
<b>g. Looking After Me</b>		16,924	<b>16,924</b>
<b>h. Evaluation</b>	16,667	3,333	<b>20,000</b>
<b>TOTALS</b>	<b>640,877</b>	<b>173,747</b>	<b>814,624</b>

46. As the Bassetlaw money is non-recurrent, ongoing commitments will be funded from the NHS Support for Social Care Funding.

### Equalities Implications

47. The remaining funds will be used to fund any additional initiatives identified through further consultation with Carers.

### RECOMMENDATION/S

It is recommended that the Committee:

- 1) Approve the recommendations for proposed expenditure of the additional £1.5 million funding.
- 2) Receive a further report in April 2013 updating on the Carers Strategy and how the additional funding will be used across Health and Social Care.

**David Hamilton**  
**Service Director for Older People**

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

**Penny Spice**

**Commissioning Manager**

**Email: penny.spice@nottsc.gov.uk**

#### **Constitutional Comments (LM 22.02.13)**

48. The Adult Social Care and Health Committee has delegated authority to approve the recommendations in the report.

#### **Financial Comments (CLK 22.02.13)**

49. The financial implications are contained in paragraphs 45 and 46.

#### **Background Papers**

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.

- a. Carers' Strategy and Action Plan 2012-2013
- b. Proposals for extra funding for Carers: Discussion paper February 2013

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

All

ASCH 107



**4 March 2013****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 2012/13.

**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 Chairman and Vice-Chairman, 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 new committee arrangements, 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. It may be that the presentations about activities in the committee's remit will help to inform this.
5. The work programme already includes a number of reports on items suggested by the committee.

**Other Options Considered**

6. None.

**Reason/s for Recommendation/s**

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

## **Statutory and Policy Implications**

8. 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 (PS)**

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 Division(s) and Member(s) 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>4 March 2013</b>			
Progress update on the Living at Home Programme	Update on the Living at Home Programme including Extra Care Development	David Hamilton	Cherry Dunk
Nottinghamshire County Council's Response to Equalities and Human Rights Commission Survey on Older People's Home Care and Human Rights	To report back on the response to the survey	David Pearson, Corporate Director, for Adult Social Care, Health and Public Protection	Jennie Kennington
Update on Dignity in Care	To provide an update on the work being undertaken across adult social care services to promote and support dignity in care.	Service Director – Joint Commissioning, Quality and Business Change	Jennie Kennington
<b>25<sup>th</sup> March 2013</b>			
Contract Extension for HPAS	To seek approval to extend the contract for the HPAS Service	Service Director – Joint Commissioning, Quality and Business Change	Jane Cashmore / Jane Zdanowska
Welfare Reform Act - Update	To provide an update on the Welfare Reform Act	Service Director for Promoting Independence and Public Protection	Paul McKay
Electronic Roster and Monitoring System	To seek approval for funding for an Electronic Roster and Monitoring System	Service Director for Promoting Independence and Public Protection	Karen Peters/ Nicola Peace
Young Carers Strategy	To present the Young Carers Strategy	Service Director for Personal Care and Support – Younger Adults	Sue Foster
Proposed Reconfiguration of the staffing establishment within Physical Disability Teams	To proposed a revised staffing structure for Physical Disability Teams	Service Director for Personal Care and Support – Younger Adults	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>
Personalisation and Promoting Independence – progress report	To provide an update on progress on personalisation and promoting independence.	Service Director for Promoting Independence and Public Protection	Jane North/ Nicola Peace
Reablement for Younger Adults	Update on the Reablement services being provided to younger adults.	Service Director for Personal Care and Support – Younger Adults	Jon Wilson
Progress update on Day Services Modernisation Programme	To provide an update on the progress made to date with the modernisation of day services.	Service Director for Personal Care and Support – Younger Adults	Wendy Lippmann
<b>22<sup>nd</sup> April 2013</b>			
Update on ASCH performance	Overview of current performance in ASC including key performance indicators, and including review of quality dashboard.	Service Director – Joint Commissioning, Quality and Business Change	Anne Morgan
Think Local, Act Personal – Expenditure Plan for 2013/14	To seek approval for of the Think Local, Act Personal expenditure plan for 2013/14	Service Director for Promoting Independence and Public Protection	Jane North
Services to Support Young People in Transitions - Update	Update on the work taking place on the transition from Children's to Adult Services.	Service Director for Personal Care and Support – Younger Adults	Jon Wilson
Electronic Monitoring System	To seek approval for the purchase of an electronic monitoring system to monitor care provided by the independent sector providers of Home Care.		Sue Dumelow
<b>May 2013</b>			
<b>June 2013</b>			
Project to develop the Nottinghamshire partnership for social care workforce development training function to shape the independent social care workforce	Update on progress of the Social Care Workforce Development	Service Director for Personal Care and Support – Older Adults	Anita Astle/Richard Burke
Supporting People Deaf	To provide an update on progress made with	Service Director – Joint	Beth Cundy



<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>
Floating Support Service Commissioning Update	commissioning the deaf floating support service	Commissioning, Quality and Business Change	
Day Service Modernisation Programme – Outcome of consultation on the transfer of all day services catering services	To report on the outcome of the consultation on the transfer of all day service catering staff and associated catering budgets to the Catering and Facilities Team	Service Director for Personal Care and Support – Younger Adults	Wendy Lippmann
Living at Home – Extra Care – Care and Support Specialist Housing Fund Bid	To report on the outcome of the bid for funding to the Department of Health and the Home s and Communities Agency's Care and Support Specialised Housing Fund.	Service Director for Personal Care and Support – Older Adults	Cherry Dunk/ Paul Boyd
Proposals for redesign of community based services	Update on redesign of community based care services.	Service Director – Joint Commissioning, Quality and Business Change	Kate Revell
<b>July 2013</b>			
Shared Lives Policy	To report back to Committee on the implementation of the Shared Lives Policy	Service Director for Personal Care and Support – Younger Adults	Cath Cameron Jones
Care Quality Commission – Secondment of an Officer – progress report	To report on the progress of the Secondments.	Service Director – Joint Commissioning, Quality and Business Change	Caroline Baria
Funding For Substance Misuse Social Worker Posts	To report back on the outcome of the consultation period regarding the social care element of residential placements for substance misuse and that any therapeutic element of the placements is sought from the NHS.	Service Director for Personal Care and Support – Younger Adults	Tessa Diment
<b>September 2013</b>			
Update on the progress of assistive technology use in maintaining the independence of vulnerable people	Update on the progress on the Assistive Technology (see report of the 29 <sup>th</sup> October 2012)	Service Director for Personal Care and Support – Older Adults	Mark Douglas

<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 – Nottinghamshire’s Response to Winterbourne View Hospital	To provide an update on the local action being taken to respond to the national concerns.	Service Director for Personal Care and Support – Younger Adults	Jon Wilson
<b>October 2013</b>			
NHS Support for Social Care	To report back to Members as stated in the report on the 29 <sup>th</sup> October 2012	Service Director for Personal Care and Support – Older Adults	Jane Cashmore
<b>November 2013</b>			
<b>December 2013</b>			
<b>January 2014</b>			
Care Quality Commission – Secondment of an Officer – final report	To report on the conclusions of the Secondments.	Service Director – Joint Commissioning, Quality and Business Change	Caroline Baria