

minutes

Social Care and Health Standing Committee

Monday, 20 February 2012 commencing at 10 am

Membership

- absent

Councillors

- Ged Clarke (Chairman)
- Fiona Asbury (Vice-Chair)
- Victor Bobo
- John Clarke
- Barrie Cooper
- Mike Cox
- Jim Creamer
- Bob Cross
- Vincent Dobson
- Rod Kempster
- Geoff Merry
- Carol Pepper
- Alan Rhodes
- Mel Shepherd
- Chris Winterton
- Brian Wombwell
- Vacancy

Officers

Paul McKay - Service Director, Promoting Independence and Public Protection
Dr Chris Kenny - Director of Public Health
Jon Wilson - Service Director, Personal Care and Support (Younger Adults)
Caroline Baria - Service Director, Joint Commissioning, Quality and Business Change
Nicola Peace - Group Manager, Reablement Services
Martin Gately - Scrutiny Coordinator
Paul Davies - Governance Officer

Others in attendance

Andrew Owusu - Service User

1. Minutes of the last meeting

The minutes of the meeting held on 9 January 2012 were confirmed and signed by the Chair.

2. Apologies for absence

None.

3. Declarations of interest

There were no declarations of interest.

4. Fostering Aspiration - Social Care and Health: Progress on Personalisation

Paul McKay introduced a progress report on the introduction of personal budgets for adult social care. The authority expected all service users eligible for a personal budget to be receiving one by 31 March 2012, well ahead of the Government's 2013 target. Andrew Osuwu gave a first hand service user's perspective on the benefits of personalisation. They responded to members' questions and comments.

- Members praised the progress made in achieving personalised budgets for service users.
- What advice and support did service users receive on managing payments and employment law? - Mr Osuwu said that he had been used to hiring and firing employees from his previous employment. Sheffield University Hospital had advised him on clinical questions to ask interviewees. ACAS had advised on conditions of service. Carers now had a contract of employment. He employed an accountant to look after the payroll and tax payments. Mr McKay explained that the authority offered a range of support services to service users.
- Did a service user's benefit payments form part of their personal budget? - Benefits were a separate matter, and the authority worked to ensure people received the right benefits. A personal budget could not be used for heating or transport, for example. The introduction of universal credit would not affect personal budgets.
- What services were available for people who were self-funding their care? - They had access to reablement, assessment and planning services.
- What about service users who were less able to look after their own affairs?
 - Everyone was assessed and put on a personal budget. They were then asked whether they preferred direct payments or a managed budget. The authority accepted that it might take a long time before someone felt comfortable about direct payments, and would intervene if someone was not spending their budget properly.
- How was the personal budget calculated? - The assessment produced a score which equated to a sum of money. The authority then worked with the individual on a support plan. Officers had discretion to vary the budget to a degree. Overall, personal budgets had generated savings of £4m.

On behalf of the committee, Councillor Ged Clarke thanked Paul McKay and his team for the success with personal budgets. He also thanked Mr Owusu for his contribution to the meeting. It was agreed to note the report.

5. Role of Public Health

Dr Chris Kenny introduced a report on the role of public health and the changes proposed by the Health and Social Care Bill. He responded to members' questions.

- Was there a continuing problem of access to NHS dentistry? - There was sufficient capacity for anyone who wanted dental treatment under the NHS. Under the Bill, dentistry would be commissioned by the National Commissioning Board.
- Were there protocols for the provision of contraception to 12 and 13 year olds without their parents' consent? - This depended on a clinical judgement about whether the young person understood the consequences of their actions.
- Would the moving public health to the County Council bring opportunities for joint working? - There would be a good deal of joint working, with the Health and Wellbeing Board taking a lead on this.
- Would the budget for public health transfer to the County Council? - The Department of Health would split the public health budget, with a share coming to local authorities.
- Would the allocation of responsibilities become clearer by April 2013? - Dr Kenny assured members that this would become clearer, with the transition plan as a key tool.
- Who would decide in the priorities for public health? - This was the responsibility of the Health and Wellbeing Board.

It was agreed to note the report.

6. Local Peer Review of Adult Safeguarding in Nottinghamshire

Caroline Baria introduced the report on the recent peer review of adult safeguarding services. She drew attention to the findings of the review and action to be taken arising from them. It was intended to report progress to members in the autumn. She responded to members' questions and comments.

- Identifying risk was important. - Each referral was assessed for risk, with less than half resulting in a safeguarding assessment. The authority worked with partners to reduce risk, and offered alternative services to people not eligible for social care.
- How were the Police involved? - Through the Social Protection Unit. If the Police picked up someone and regarded them as vulnerable, they would refer the case to the relevant team, who would conduct an assessment to judge whether a full safeguarding assessment was necessary. There were specific requirements under the Mental Health Act.

- Ms Baria explained that in contrast to the Children's Safeguarding Board, there was no statutory requirement to have a safeguarding board for adults. However, the Nottinghamshire Safeguarding Adults Board had agreed to operate as though it were a statutory body.

It was agreed to note the report, and that a report on implementation of the action plan be presented to the relevant committee in six months time.

7. Work Programme

Martin Gately reported that the Independent Reconfiguration Panel had been expected to report its findings about the Newark Review to the Secretary of State for Health on 17 February. It was anticipated that it might be 28 days until the Secretary of State responded to the County Council. An additional meeting of the standing committee might be called if necessary. Business for the meeting on 16 April was as shown.

Some members referred to the County Council's decision to adopt a committee system, and expressed concern about unfinished scrutiny business and suggestions for future reviews. Mr Gately pointed out that it was planned to complete current reviews before the annual meeting of the Council. Councillor Ged Clarke indicated that any suggested reviews or unfinished business would be referred to the relevant committee under the new arrangements. However it would be a matter for that committee to decide what to do with the referrals.

Members agreed the work programme for 16 April 2012, and that an additional meeting should be arranged if required, and noted the Chairman's comments about the transition to the new arrangements.

The meeting closed at 12.05 pm.

CHAIRMAN