

**Health & Social Care
Overview and Scrutiny Committee
Recommendations 2010-2011.**

Please note that the Update from the Executive Member is in bold

To Policy and Review November 2010 from Health & Social Care Overview and Scrutiny Committee.

- 1) Approve the Health and Social Care Overview and Scrutiny Committee recommendations on alcohol detailed in paragraphs 2.4.1 – 2.4.5.

To Policy and Review December 2010 from Health & Social Care Overview and Scrutiny Committee.

- 2) Approve the Health and Social Care Overview and Scrutiny Committee recommendations on the Executive Members' Financial Position Statements, the Day Service Review, alcohol, mental health reconfiguration and non emergency patient transport services detailed in paragraphs 2.1, 2.2, 2.5, 2.7 and 2.8 above.
- 3) Agree that the Leader of the Council and the Chair and Vice Chair of the Health and Social Care Overview and Scrutiny Committee write to the Secretary of State for Health expressing grave concern at the way the Meeting Patients Needs matter outlined in paragraph 3.0 above has been dealt with by Lancashire County Council.

To Policy and Review February 2011 from Health & Social Care Overview and Scrutiny Committee.

- 4) That the Executive Member for Adult Social Care be advised that it is recognised that both national and local drivers will lead to a radical change in the future commissioning and provision of health and social care services. Members also recognise that day care provision cannot continue in its present form and some changes in future service facilities and delivery will need to be made;
- 5) That in order to develop a suitable "mix" of sustainable community based services the Executive Member for Adult Social Care be requested to consider.

Day Services

- 6) The rationalisation of day care provision to concentrate specialist facilities at certain Day Centres including a review of the use of Tower View, Darwen with any review for the development of day service provision for the people of Darwen, examining the potential for the improved and increased use of facilities at Darwen Leisure Centre;

The Committee will be aware that Tower View Day Centre in Darwen was closed at the end of the March 2011, and Mill Hill Resource Centre was shut down permanently at the same time. In addition to this the Department withdrew from delivering day services at Accrington Road Community Centre. These major changes occurred alongside a significant reduction in staffing levels, needed to realise the Departmental efficiency targets. Service users (many of whom take a long period to adapt to change) and staff are still to an extent working through the impact of these upheavals.

Day service officers and managers are working actively to ensure the maximum possible take up of facilities at Darwen Leisure Centre for adult social care users within available staffing resources. The Leisure Centre is used by an increasing number of people from the 2 remaining day service hubs and attendance across the two is coordinated to ensure maximum opportunities for people.

- 7) The need for appropriate Adult Social Care and Darwen Leisure Centre staff to take all necessary steps to ensure the £350K financial contribution made towards the costs of the Centre's disabled provision/facilities is maximised in ensuring the number of disabled/wheelchair users attending activities at the Centre, including the designated 1st floor activity room at any one time is not unnecessarily restricted;

The need to maximise the usage of dedicated space within Darwen Leisure Centre for adult social care users is acknowledged and referred to in paragraph 6) above

- 8) The potential to provide opportunities for people with moderate needs to access day care provision so that such facilities are not just available to those who are assessed and eligible for social care and have substantial and critical needs, but are also provided for people with moderate needs who are able to financially contribute to the cost of their service provision;

With regard to provision of the services for people whose needs do not fall within the Department's eligibility criteria. This would be difficult to achieve in the short term due to the fact that the two centres are working to capacity in meeting the needs of people who do meet our eligibility criteria.

Provider services are in the process of developing a 3-5 year business plan which would look to examine and quantify any opportunities for self funding individuals to use day provision. Any provision to this group would be a major policy shift for the Council, given that services have only been provided for those meeting our eligibility criteria up to now.

- 9) The feasibility of extending the opening times of the borough's Day Centres to include evening and weekend provision;

The impact of major changes in day service provision centred around the reduction in staffing and buildings to two referred to above, as well as the period of adjustment needed for frail and disabled adults and older people, has meant that the extension of opening times has as yet not been achieved. It remains our intention to implement this as part of the longer term business plan as and when staffing resources allow

- 10) Encouraging a consistent approach to the provision of activities at all Day Centres in terms of the development of a more inclusive approach through increased engagement utilising the involvement and skills of volunteers, local communities, service users and by the promotion of meaningful employments to empower and up-skill service users where possible;

The 2 day centre hubs are accessing the local communities and the use of volunteers is a clear priority for the coming months. The development of the centre for independent living referenced below will provide a key way in which the role of the community in meeting the needs of day service users can increase. It will also provide a source of volunteers who can be linked into day services.

- 11) The potential to provide more opportunities for Day Centre service users to have trips away from the Centres;

Day service users continue to access local community provision, albeit within the staffing resource limitations referred to above.

- 12) Exploring the opportunities that may be available to upgrade/repair computer and information technology facilities for service users at the Day Centres including the feasibility of improved user access to the internet and the establishment of email accounts in accordance with approved Council IT User policies;

This continues to be an issue for the Department given capital resource constraints and will be picked up as part of the investment requirement for the business plan referred to above.

- 13) The potential for increased therapy and personal care provision at the Centres. Also the promotion of a range of available community and leisure facilities across the borough including disabled toilet facilities for access to more universal and shared community centre facilities e.g. therapies such as foot care, healthy legs etc at community centres.

Personal care provision is an integral part of the service on offer within the two day service hubs. The Department is increasing the provision of occupational therapy and moving and handling within the reablement service. Therapy requirements for service users are considered at the social work review of individual needs and any necessary onward referrals made. Efficiency targets within the Health service mean that bespoke therapy provision in day services is highly unlikely to be provided in the short term

Personalisation

The provision of personalisation training and development for appropriate Adult Social Care staff to ensure staff are fully informed in promoting the choices, freedoms and control the development and use of personal budgets could provide for service users in meeting their individual approved eligible social care needs. Increased take-up of Personal budgets would promote greater independence for service users and in some cases could delay the need for residential care;

There is a formal training programme within the Department which includes specific courses on personalisation. The take up of personal budgets is increasing and we can confirm to the committee that over one thousand people were in receipt of a personal budget as of 31st March 2011, which roughly equates to 30% of all users and meets the nationally set target.

14) All necessary steps are taken to ensure Safeguarding for Vulnerable Adults is embedded across all the “personalisation” processes as changes in service delivery continue to be developed;

Those service users wishing to take up a direct payment are assessed according to their ability to manage this process, as are any third parties requested to manage such an arrangement on their behalf. A risk assessment is completed and the Council would agree to a direct payment and only if and when it is satisfied as far as possible that the arrangement is safe and sound. The Council does refuse to provide direct payments in some instances dependent on this assessment. Direct payment users have to regularly prove how funding has been spent and if it transpires that money is not being spent on the intended purpose then the Council can and does cease the direct payment and instead, For example, commission care directly from a service provider. Direct payment accounts are also audited by the service.

15) The establishment, maintenance and future development of a Personal Assistants Register on the basis of that service and the provision of quality assured Personal Assistants being offered through a social/community enterprise;

The Department has established a quality accreditation scheme for personal assistants, organisations providing personal assistants and support brokerage. This brings with it the right balance of checks and safeguards on the one hand, while still promoting personal choice, control and independence on the other

Nine organisations have been selected as accredited providers of personal assistants within the Borough. This will in turn fulfil the requirement around maintaining a database of personal assistants. The eventual chosen model for the centre for independent living will determine if this is delivered through a social enterprise or some other organisational means.

- 16) The continued development in promoting the independent advice and support offered by the Direct Payment Support Services in order to maintain and develop awareness of the Support Service for users.

The Direct Payment Support Service has recently relocated to Blackburn Library and we are in the process of identifying how existing Council resources can be freed up to help resource this team and ensure that it is able to facilitate the large increase of people receiving direct payments that we are expecting in the coming years.

Transport

- 17) That subject to all necessary consultation, welfare transport for service users be provided on the basis of new service users attending Day Centres in their locality - this will aid community development and reduce journey times for some service users as well as reducing the number of people transported to Centres across the borough. It is acknowledged there will be exceptions for those users who need to access extreme and intense services.

Welfare transport has been reconfigured to take account of the changes to the closure of Tower View, Accrington Road and Mill Hill. New users would be encouraged to use the day service hub nearest their own homes. At this point in time we have not seen a significant move away from users choosing to take up traditional day services, but we hope to see a gradual change in this as the take up of personal budgets increases and the “word of mouth” effect of those taking this option becomes a feature.

Telecare Service

- 18) The continued development and promotion of the Telecare facilities based at the Mill Hill Independent Living Centre in providing support to users, their families and carers;

In terms of the Telecare, performance within the Department continues to go from strength to strength and increased from sixty installations in 2009/10 to three hundred 2010/11. The Department is on course to undertake six hundred installations during 2011/12. The results from Telecare are very encouraging in terms of increased independence and delivering large scale efficiencies.

- 19) Investigating the potential to install, maintain and “roll out” the use of the latest P6 Telecare software system;

The procurement for a joint Telecare/ telehealth service and integrated response is due to go out to tender via the Northern Housing Consortium in October 2011. This process will include the preferred method for a local telecare software system which will take account of our response requirements.

- 20) Investigating the feasibility of establishing the Telecare contact facility as part of the Council’s Bdirect contact call service and extending the availability of the Telecare contact service to those other providers in the borough who currently provide an alarm service to residents/tenants;

The procurement exercise referred to above will identify the preferred way forward in terms of linkages between the service, Bdirect, the out of hours service and other stakeholders across health and social care.

- 21) Examining the current Bdirect call service location in terms of practicalities and effective use of resources in providing a 24/7, 365 day Telecare service.

See points 19) and 20) above. The out of hours enhanced and integrated pilot referred to below will also take this into consideration

- 22) Using suitably trained mobile wardens to operate within the borough in providing a 24/7, 365 day basis response service for the benefit of service users when they have activated a call to the Telecare Alarm Service;

The Department is currently in discussion with colleagues from Care Trust Plus around the implementation of an enhanced, integrated out of hours pilot service which will commence in late 2011. It is proposed that in due course this service will have formal links with the Telehealthcare response service during out of hours

- 23) Investigating the feasibility of the development of the Telehealth system provision.

The Tele health system is an integral part of the joint Tele health care procurement as referred to as above and will be one of a small number of fully integrated services developed nationally thus far

- 24) Examining whether the Council's current number of Residential Care Homes need to be rationalised if there are no future plans to utilise any over-capacity that may exist as part of the future overall development of more integrated social care provision;

As mentioned above, the in house provider management team are in the process of putting together a business plan for the next 3-5 years which will capture proposals and options around the further retention and development of the Council's care homes.

- 25) That whilst Members accept the services cannot continue in their current form, the Council should continue to make use of existing adult social care staff in utilising their skills and experience in the delivery and future development of high quality crisis response, rehabilitation, reablement service provision;

We agree that the Council must try to make continuing use of the expertise within existing adult social care staff. This has to be balanced against the fact that the Council made an explicit policy decision to try and protect people from compulsory redundancies earlier in the year, and in consequence of which it must be acknowledged that some staff with considerable skills and expertise have left our employ in order to prevent other employees leaving compulsorily. Staff that have moved to new jobs post-remodel have been inducted and trained as required.

- 26) Retaining "in house" the development and provision of reablement, respite and rehabilitation services;

The Committee can be assured that the Department is intending to retain the provision of re-enablement and rehabilitation services in house. The plan is to use some of the section 256 funding from health to expand the re enablement service during 2011/12 and this is being implemented currently. The longer term retention of respite services in-house will be part of the options considered in preparation of the aforementioned business plan

- 27) Bringing into use the 2 properties currently vacant at the rear of Blakewater Lodge for the future delivery and development of integrated "in house" services;

Consideration will be given to the future use of two properties currently vacant at the rear of Blakewater lodge as part of the

business plan for in-house provision referred to elsewhere in this report.

- 28) Taking all necessary steps to ensure elected members involvement in any community/ social enterprise that may be established in the future;

The Executive Member for Adult Social Care would like to extend an invitation to the Health and Children's overview and scrutiny committee to nominate a representative to take up a place on the steering group for the centre of independent living, which will be formed in the near future. This will be an important way in which the committee can add value to the work of the Department in a forward-looking and pre-decision sense on a crucial part of our strategy to deliver personalisation.

- 29) Having agreement in adopting the current "Think Family" approach in adult social care provision;

The Executive Members for Adult Social Care and Children's Services met recently to discuss the potential synergies and overlap between the Think family and Personalisation Programme, and further opportunities to link the work on these two programmes is underway. The Centre for Independent Living is likely to be a key element of this.

- 30) Ensuring the delivery and continued future development of health and social care provision should be more integrated to enhance the service user and patient experience along similar principles to those arrangements seen during the visit to one of Sheffield City Council's Care4You Resource Centres.

As referred to above, officers from the Department are currently in discussion with Care Trust Plus Colleagues regarding the integrated out of hours support service. In addition to this the provision of occupational therapy within the reablement and initial access teams is being progressed and will ensure more close and integrated work between health and social care. Health staff are also to receive training in adult social care eligibility criteria during September

Other Matters

- 31) To note that the Social Appraisal Options Sub Group has been satisfied with the criteria that has been applied throughout the tender and evaluation process;

- 32) That the Sub Group wishes to place on record its recognition of the work undertaken by the Deputy Chief Executive Local Government and Health, the Director of Strategic Commissioning at Care Trust+ and their colleagues and the joint contributions by the local Unison and

Unite trade union representatives. Members have welcomed the opportunity to hold joint Sub Group meetings and undertake a joint visit to Sheffield City Council that has provided opportunities for open discussions and a frank exchange of views/opinions;

- 33) That the Committee be requested to agree to hospital discharges, a previous topic, on the delivery and continued development of joined up hospital discharge procedures to ensure they best meet the needs of patients/service users in the light of future changes in health/ adult social care service provision.

Joint Scrutiny Working Group on the Minimum Pricing of Alcohol

- That the joint report and its following recommendations be endorsed namely:

- 34) To recommend to Central Government that a minimum price of 50 pence per unit of alcohol be implemented nationally;
- 35) That Central Government be requested to review the existing licensing legislation to reduce the current extended opening hours;
- 36) That Central Government be requested to review the existing licensing legislation to include compulsory training for all involved in the licensing industry with particular emphasis on the health impact of alcohol consumption. To include all individuals involved in the sale of alcohol and elected Members with responsibility for enforcement action. Regular refresher training to ensure knowledge is kept updated with any changes, should also be introduced;
- 37) That all north West local authorities that took part in the review and with responsibility for licensing, be reminded to fully implement the existing laws relating to the sale of alcohol, with particular emphasis on underage sales and serving of alcohol to those already intoxicated. To also include more effective law enforcement for alcohol related crime and disorder issues;
- 38) That Heads, Principals (including those of independent schools/academies) and children's services Lead Members be recommended to ensure a coherent programme of alcohol education for over 16's. Alcohol education should also be provided to parents of children of all ages through existing support organisations;

- 39) That Directors of Public Health within the North West be recommended to develop hard hitting impact advertising for use across the North West area;
- 40) To recommend to Central Government that revenue generated from a windfall tax on retailers' profits from the introduction of minimum pricing should be targeted towards measures to prevent alcohol abuse;
- 41) That the report be circulated to the Executive Member for Children's Services, the Local Strategic Partnership, the Executive Member for Regeneration, the Chair of the Licensing Committee, the Director of Public Health, appropriate Chief Officers and any other appropriate persons/organisations for consideration;
- 42) That each of the persons/organisations referred to above be requested to inform this Committee of their response and any subsequent action, such information to be submitted to an early future meeting of this Committee;
- 43) That the committee places on record its thanks to the young people, public protection and children's services officers and Groundwork colleagues who attended and actively engaged in the wider public consultation stakeholders event held at Blackpool Football Club in contributing to the work of the Joint Working Group;
- 44) That copies of the Joint report be sent to every elected Member on this Council;
- 45) That in addition to the action to be taken by Blackpool Council as the lead authority in this joint review in being responsible for the wider distribution of the joint report, this Council also write to the Borough's 2 MP's in reinforcing the report and its recommendations.

Joint Lancashire Health Scrutiny Committee

That the Committee:

- 46) Approved the establishment of a Joint Health Scrutiny Committee on a semi permanent basis to review and scrutinise issues around public health and health service changes planned or provided that will affect more than one upper tier local authority area;
- 47) Recommended that the Chair and the Vice Chair of the Committee be appointed as representatives to serve on the Joint Health Scrutiny Committee for the remainder of the current Municipal Year;

To Policy and Review April 2011 from Health & Social Care Overview and Scrutiny Committee.

Below are recommendations from the Committee's remaining work topics visited during the municipal year:

3.1 Work of the Executive

That in addition to the Committee's previous recommendations on the need to provide more detailed information in the portfolio financial position statements as part of the corporate reporting arrangements, the Committee welcomes the information reported to Committee at its last meeting on:

- 48) the action that has been taken by the Council to put in place strengthened governance arrangements to oversee the substantial budget reductions approved by Finance Council and provide assurance to Members including Scrutiny;
- 49) the proposal that from the 2011/2012 Municipal Year the new Scrutiny Committees will receive more detailed information and assurance on both the achievement of budget option reductions and overall portfolio budget monitoring.

Alcohol

That in addition to the Committee's previous recommendations on this work topic and the Committee's approval of the recommendations of the Joint Health Scrutiny Committee on the Minimum Pricing of Alcohol:

- 50) the new Child and Health Overview and Scrutiny Committee be recommended to agree to the establishment of a Task and Finish Group to consider the alcohol statistics and the issues reported in the individual presentations by the Hospital Trust and the Director of Public Health at the March meeting;
- 51) the Committee welcomes the offer by the Director of Public Health that the alcohol statistics and information presented by Dr Kaushik, Consultant at the Hospital Trust be included in a business case for the commissioning of specialist alcohol support services for consideration by Blackburn with Darwen NHS Teaching Care Trust Plus as part of that Trust's consideration of its overall health and well being commissioning priorities.

Safeguarding Adults Plan

- 52) That the Blackburn with Darwen Local Adults Safeguarding Board review of 2009-2010 and the Business Plan for 2010- 2012 be received and noted.

Annual Performance Assessment Report 2009/2010 – Implementation Update January 2011

53) That the Implementation Update on the areas of improvement highlighted by the Care Quality Commission for incorporation in the strategic plans of the Council and the Blackburn with Darwen NHS Teaching Care Trust Plus be received;

54) That the new Child and Health Scrutiny Committee be recommended to agree to continue to receive progress reports for monitoring purposes.

Rehabilitation Pathway Redesign

55) That the report on the work being undertaken on a proposed future model for sub acute in-patient rehabilitation and intermediate care be noted;

56) That on the basis of the report, the Committee would hope that the proposed service model will enhance the quality of service delivery for the residents of Blackburn with Darwen;

57) That the Committee supports the further engagement of patient groups, LINK and Healthwatch as the service model develops.

Blackburn with Darwen LINK Referral - Mental Health Respite

58) That the acknowledgment of the receipt of the LINK referral within 20 working days and the Committee's consideration of the referral at this first available meeting be noted;

59) That the Committee agrees not to exercise its powers on the Midway Respite and Crisis Care Support LINK referral for the following reasons:

- a. that on 10 February 2011 the Council's Executive Board approved a detailed report relating to the outcome of the option appraisal for Adult Social Care In House Provision. One of the recommendations was to undertake a process of due diligence with the recommended care providers in respect of in-house Extra Care and the Midway Mental Health Service subject to the successful outcome of the process to award initial three year contracts for these services with the transfer of employees under TUPE;
- b. that following a review of the Council's overall future Scrutiny arrangements, this would be the last meeting of the current

Health Scrutiny Committee under the Council's current scrutiny arrangements;

- c. that the Executive Member for Adult Social Care be requested to submit a progress report to the "new" Child and Health Overview and Scrutiny Committee in six months time or at its first meeting in the new Municipal Year, whichever is the sooner;

60) That the Strategic Director for Mental Health Commissioning be requested to contact the Blackburn with Darwen LINK "host" to provide an update on the review of the mental health inpatient provision following the Commissioning Teams presentations at a recent LINK meeting;

61) That the Blackburn with Darwen LINK be informed of the Committee's decision and its reasons following consideration of the referral.

Joint Lancashire Health Scrutiny Committee – Draft Terms of Reference

62) That the Committee notes the decision by the Joint Lancashire Health Scrutiny Committee to request appropriate officers of the three upper tier Lancashire local authorities to hold an early future meeting to finalise the Joint Committee's draft terms of reference to ensure the Joint Committee is formally constituted for the new Municipal Year;

63) That the Chair and the Vice Chair of this Committee be authorised to approve the Joint Committee's draft Terms of Reference.

The Committee is asked to:

64) receive and note the report and any additional information reported at the meeting of the work of the Health and Social Care Overview and Scrutiny Committee and its Task Groups during the Municipal Year.

65) approve the further recommendations of the Health and Social Care Overview and Scrutiny Committee in addition to those previously approved