

# Minutes



To: All Members of the Adult Care  
& Health Cabinet Panel, Chief  
Executive, Chief Officers, All  
officers named for 'actions'

From: Legal, Democratic & Statutory Services  
Ask for: Elaine Manzi  
Ext: 28062

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## ADULT CARE & HEALTH CABINET PANEL TUESDAY 14 NOVEMBER 2017

### ATTENDANCE

#### MEMBERS OF THE PANEL

E H Buckmaster; L A Chesterman (*substituting for E M Gordon*); S Gordon; K M Hastrick; T Howard; D J Hewitt; F R G Hill (*Vice Chairman*); J S Kaye; P V Mason (*substituting for F Guest*); N A Quinton; R G Tindall; C B Wyatt-Lowe (*Chairman*)

#### OTHER MEMBERS IN ATTENDANCE

None

Upon consideration of the agenda for the Adult Care & Health Cabinet Panel meeting on 14 November 2017 as circulated, copy annexed, conclusions were reached and are recorded below:

*Note: No conflicts of interest were declared by any member of the Cabinet Panel in relation to the matters on which conclusions were reached at this meeting.*

### PART I ('OPEN') BUSINESS

#### 1. MINUTES

- 1.1 The Minutes of the Cabinet Panel meeting held on 18 October 2017 were confirmed as a correct record and signed by the Chairman.

#### 2. PUBLIC PETITIONS

- 2.1 There were no public petitions.

#### ACTION

### 3. ADULT SOCIAL CARE PERFORMANCE MONITOR – QUARTER 2 - 2017/18

Officer Contact: Alex Ogle- Adult Social Care Performance Manager (01438 844291)

- 3.1 Members were presented with the Adult Social Care Performance Monitor for Quarter 2 for 2017/18. It was noted that a majority of the indicators were set by central government through their Adult Social Care Outcomes Framework (ASCOF).  
<https://www.gov.uk/government/statistics/measures-from-the-adult-social-care-outcomes-framework-england-2016-17>
- 3.2 The Panel were advised that in regards to the direct payments target, the Adult Care Services board would be seeking to reduce the 2017/18 target to 27% from 30%, further to a revised review of performance in this area.
- 3.3 During general discussion regarding direct payments in was recognised that the care market has changed in the 20 years since direct payments were introduced, and consequently, the perception of what was classified as a 'good target' also needed to be reviewed. Members heard that a specific initiative to review long term family carers receiving direct payments has been undertaken to ensure that people are receiving the most appropriate form of support. Members received assurance that a report on this would be presented to the March 2018 Adult Care & Health Cabinet Panel.
- 3.4 Members were pleased to note the reduction in delayed transfers of care from hospital, although expressed concern that this remained a challenge in the west of the county. To give an idea of the challenge that was being faced with regards this, Members were detailed that 22 notices of discharge had been received from Watford General Hospital the day prior to the panel and in order to avoid these becoming a delayed transfer of care statistic; they needed to have their care transferred within 48 hours.
- 3.5 In response to a Member question, it was noted that independent assessments to aid decisions about discharge are broadly the same in the east and the west of the county, but the east's methodology was to plan these more effectively in advance of a scheduled discharge date, as sometimes they can take 3-4 days to arrange with the assessor. Members acknowledged that inevitably a delay in assessment impacts on delayed transfers of care.
- 3.6 Members were also advised that the office accommodation for adult social care workers at the Watford General Hospital was not ideal which also had an impact on the service provision.

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3.7	It was explained to Members why and how Deprivation of Liberty Safeguards (DoLS) applications were implemented. DoLS provide protection for vulnerable people who are accommodated in hospitals or care homes in circumstances that amount to a deprivation of their liberty and who lack the capacity to consent to the care or treatment they need. It was noted that there had been an increase in DoLS since 2014 when a court judgment in Cheshire had reviewed the appropriateness of a DoLS in an individual case. This had resulted in an increase in DoLS applications Hertfordshire from circa 250 applications per annum to circa 5,500 applications per annum.	
3.8	Further to a Member question, it was noted that all clients and their carers who have contacted Adult Care Services for help or advice remain on the database, irrespective of whether or not they receive self-directed support, and it was felt that as such there was adequate tools for ongoing monitoring of their needs.	
3.9	The Panel were advised that the amount of time allocated post discharge care support from the hospital was now reduced from nine to four weeks, however referrals were made to social care, and other support services such as physiotherapists. It was noted that colleagues from the Adult Care Services Team were working with colleagues from the King's Fund to ascertain what was the most used and most useful post hospital care (sometimes called Intermediate Care) that patients receive in order to create a dataset and make better use of targeted funding.	
3.10	In response to a Member question it was noted that discharge delays from Addenbrookes Hospital were contained within the 'other trusts' in the pie chart presented at the end of the report. It was agreed that the specific delays relating to Addenbrookes would be circulated.	Alex Ogle
3.11	Members were reassured that the Hertfordshire Safeguarding Adults Services Board (HSAB) closely monitor any safeguarding concerns raised and a more detailed breakdown of the level and types of abuse were detailed in the Annual Safeguarding Adults Board report.	
3.12	In addressing a Member concern it was established that there should never be a gap between re-enablement services ceasing and homecare services commencing, and any individual cases that were brought to Members attention to be referred to the Adult Care Services Board Members as appropriate.	All Members

- 3.13 Members then discussed the Herts Care Quality Standard monitoring the ratings set for the standards of the contract providers. It was confirmed that currently Hertfordshire County Council Adult Care Services are placed third in the region for the success of contract monitoring services.
- 3.14 The Panel were pleased to note the high score of 81.25% from Providers Assessment Market Management Solution (PAMMS) in regards to the Residential Learning Disabilities Accommodation.
- 3.15 It was established that the information provided within the Care Quality Standard was reported regionally, and although it was acknowledged that there was some overlap with the Care Quality Commission (CQC) monitoring, it was noted that the CQC monitor only every 2-3 years, and the Care Quality Standard Report is undertaken quarterly, thus enabling a much more stringent and robust monitoring and enabling any required interventions to take place at an early stage. It was further noted that the standards were built in to procurement processes for any contracted care providers.
- 3.16 Members were advised that it was widely recognised that retaining staff was key in maintaining quality standards, and it had been established that to achieve this, the flexibility of zero hours contracts was preferred by service providers and staff.
- 3.17 The Quality Monitoring Summary was also noted by Members, and further to a member query, assurance was received that the suitability of staffing was included as part of the monitoring process.

### **Conclusion**

- 3.18 Members noted and commented upon the Performance of the Adult Care Services Directorate for Quarter 2 – 2017/18.

## **4. IMPLEMENTATION OF SUPPORTED ACCOMMODATION STRATEGY**

Officer Contact: Frances Heathcote- Assistant Director-  
Commissioning (01992 556343)

- 4.1 Members received a report providing an update on the Implementation of the Supported Accommodation Strategy, previously discussed at Adult Care & Health Cabinet Panel on 3 July 2017.

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- 4.2 The Panel heard that Local Accommodation Boards had been created with seven District and Borough Councils and were working well and early discussions had been held regarding the setting up a Memorandum of Understanding with District Councils and Service Providers.
- 4.3 In response to a Member question, it was confirmed that consideration was ongoing with regards to planning for supported accommodation through Section 106 agreements and Supported Independent Living Services.
- 4.4 A Member suggestion for the Council to consider the possibility of building its own supported accommodation in order to control and oversee the specifications to match the need in Hertfordshire was acknowledged.
- 4.5 Members heard that in terms of recruiting nurses to work within the supported accommodation, early discussions had been held with the Hertfordshire Care Providers Association to consider the best way forward with how to successfully recruit and retain staff.
- 4.6 During discussion it was agreed that consideration should be given to the provision of appropriate accommodation for families where one or more family members had a disability.
- 4.7 Members who were also District Councillors were reminded of the need to use their roles within the Districts to discuss with and influence their District housing team's decisions with the provision of appropriate supported accommodation within their areas.
- 4.8 In response to a Member question, it was clarified that the Invest to Transform Bid, as detailed in point 5.2 of the report was currently in the planning stages. Members heard that it was the intention that more nursing rather than more care homes should be built in Hertfordshire and that the funding for these would be sourced from a collaborative budget with districts and health providers, however it was acknowledged that both individual districts and health providers would have competing priorities and conflicting ideas regarding this.
- Conclusion:**
- 4.9 The Panel noted and commented upon the initial stages of implementation of the Supported Accommodation Strategy.

Frances  
Heathcote

5. **ADULT CARE SERVICES SMART WORKING:  
ESTABLISHMENT OF A LOCAL AUTHORITY TRADING  
COMPANY TO PROVIDE ADULT SOCIAL CARE SERVICES**

Officer Contact: Steven Lee-Foster - Assistant Director – Provider Services (01992 555748)

- 5.1 Members were provided with a report on the Adult Care Services department's intention to establish a Local Authority Trading Company. The purpose of this would be to create stability in the care provider market where officers were faced the dual challenges of increasing demand for services alongside increasing risk of care providers withdrawing from service. It was noted that the report would be subject to final approval by Cabinet.
- 5.2 Further to Member concerns as to how the Trading Company would work in practice, assurance was received that further work and consultation with other existing local authority traded companies would be undertaken prior to the Company being formed to ensure that the operational mechanics of the company would be as robust and efficient as possible.
- 5.3 Further assurance was received that officers would be able to provide the resilience required to respond promptly on a practical level, and a recent incident of where a care home had gone into administration and a large number of Adult Care Services staff had worked hard to ensure that all residents care was transferred promptly, efficiently, and appropriately was provided as an example to evidence this.
- 5.4 Members also noted that the Trading Company was not intended to undermine the work of existing carer providers, but to adapt and strengthen the council's ability to fulfil its statutory duty to service users and meet the changes and commercial needs within the care market.
- 5.5 During general discussion it was established that the purpose of the trading company would be mainly two fold; firstly to act as a 'bolster' to provide support and assistance to a care provider who was experiencing short term difficulties, or secondly to step in on a temporary basis to provide support to service users whose care provider had completely failed, as per the example outlined in 5.3. It was noted that because of this, TUPE arrangements would not necessarily need to be considered.
- 5.6 Members were advised that the detail as to how the Trading Company's operating would be funded had not been provided in the report as this would need to be subject to a separate business case. Members learnt that innovative solutions to funding would be

part of the considerations. It was confirmed that as a Trading Company the company would have its own separate bank account.

- 5.7 Further to a Member concern, it was agreed that further consideration should be made to extending the indemnity insurance to all directors (including any elected members) and not just officers appointed to the Trading Company's Board.

Steven Lee  
Foster

#### **Conclusion:**

- 5.8 The Panel UNANIMOUSLY agreed that it should recommend to Cabinet that Cabinet:

Deborah  
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i. approved the business case for, and the establishment of, the wholly owned trading company as referred to in this report;

ii. delegated to the Director of Adult Care Services in consultation with the Director of Resources, the Executive Member for Adult Care & Health and the Executive Member for Resources, Property & the Economy and the Chief Legal Officer the authority to agree such documents and arrangements and to take such other actions as are appropriate to establish the company;

iii. authorised the Chief Legal Officer, in consultation with the Director of Adult Care Services, to appoint officers as directors of the company;

iv. delegated authority to the Director of Resources to exercise the rights of the Council as shareholder including attending and voting at meetings, and requesting the Directors to take or refrain from taking action.

- 5.9 The Panel had MAJORITY agreement that it recommended to Cabinet that Cabinet

v. agreed to provide indemnities (or equivalent insurance) under the Local Authorities (Indemnities for Members and Officers) Order 2004 to employees of the Council who are appointed as Directors of the company and delegates to the Chief Legal Officer the power to finalise and issue the indemnities.

One Member of the Panel disagreed with this recommendation and stated that indemnity insurance should be extended to all directors (including any elected members) and not just officers appointed to the Trading Company's Board.

## **6. OTHER PART I BUSINESS**

**CHAIRMAN'S  
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There was no other Part I business.

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**KATHRYN PETTITT**  
**CHIEF LEGAL OFFICER**

**CHAIRMAN**\_\_\_\_\_

**CHAIRMAN'S**  
**INITIALS**

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