# **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

#### ADULT CARE & HEALTH CABINET PANEL WEDNESDAY 18 OCTOBER 2017

#### ATTENDANCE

#### MEMBERS OF THE PANEL

E H Buckmaster; E M Gordon; F Guest; K M Hastrick; T Howard; D J Hewitt; F R G Hill (*Vice Chairman*); J S Kaye; N A Quinton; R H Smith (*substituting for S Gordon*); 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 18 October 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

# MINUTES SILENCE

Prior to the Cabinet Panel commencing, the Chairman led Members in partaking in a minutes silence to remember Cllr Robert Gordon, Leader of the Council, who had died earlier in the month.

#### 1. MINUTES

1.1 The Part I and Part II Minutes of the Cabinet Panel meeting held on 8 September 2017 were confirmed as a correct record and signed by the Chairman. ACTION

### 2. PUBLIC PETITIONS

2.1 There were no public petitions.

#### 3. 15 YEARS: FUTURE DIRECTION & STRATEGIC AMBITIONS FOR ADULT SOCIAL CARE IN HERTFORDSHIRE 2018-2033 -CONSULTATION

Officer Contact Helen Maneuf, Assistant Director Planning & Resources (Tel:01438 845502)

- 3.1 Members received a report which outlined the draft 15 year forward view for Adult Social Care in Hertfordshire, and provided the strategic ambitions for the future service.
- 3.2 The Panel heard that due to a number of national and local policy changes and financial challenges, Adult Care Services was one of the most scrutinised services nationally. The challenges and solutions are long term in nature and the document therefore sets out a strategic framework within which future planning for care and support services in Hertfordshire would take place.
- 3.3 Consultation on the document with partners, service users, and the voluntary sector would be commencing in November and concluding in December, with the outcomes of the consultation being brought back to panel at a later date.
- 3.4 Members noted that the document focused on four major strategic ambitions and actions in these four areas:
  - Information and advice
  - Community first
  - Valuing Independence
  - Caring well

The details for each area were outlined within the document.

- 3.5 The Chairman stressed to Members that the document was in draft format and acknowledged that the detail was ambitious and would adapt over time, but advised that the outlined key values would be the foundation on which future planning would be built.
- 3.6 During Member discussion it was established that the outlined ambitions were based on the expectation that the current funding received from partners and central government would continue, and Members expressed some concern at the risk that would be presented to the plan if this were to cease being received. Equally, the plan might need to change to reflect a more positive funding outlook if this were to materialise.

CHAIRMAN'S INITIALS

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- 3.7 In response to a Member question about the willingness and ability of the NHS in working with the council in co-creating integrated personal care services it was explained that currently the NHS are the only provider of many of the services required, so it was recognised that the market of service providers needed to be expanded.
- 3.8 Members noted that historically there had been national discussion and debate regarding a cap on adult social care costs but the government's intentions in this area are not yet confirmed. It was established that until legislation had been implemented in this area, insurance providers or other financial providers were not prepared to commit to paying for any potential shortfall in funding. Members learnt that recent communications from the Cabinet Minister indicated that the current government were aware of the full extent of the current and future significant financial challenges presented to Adult Care Services, and it was widely recognised that this could not be fully funded through state contributions.
- 3.9 The Panel received confirmation that the amount of adults selffunding their care was highly likely to increase given the increasing population and the holding of capital thresholds at set levels in recent years. Members noted that the strategy aimed to support self-funders through raising awareness of planning and preparing for older age.
- 3.10 In response to a Member question as to what officers defined as 'community' as part of the 'Community First' strategy, it was explained that this could mean friends, family or the voluntary sector. It was acknowledged that in some cases, families might not geographically, emotionally or physically able to support family members in need of support, but assurance was received that each service user's case is looked at individually to see what support network was currently in place and then tailor the package of support accordingly. It was noted that generally a 'strengthsbased' approach which focusses on how individuals can be supported through their own networks is preferable creating dependency on formalised long term care wherever possible.
- 3.11 During general discussion, it was requested that Members who also have a dual role as District Councillors work with relevant officers within their districts in ensuring that plans for future housing developments included provision for a sufficient range of suitable accommodation for the increasing number of service users with physical or mental disabilities. It was noted that consideration for young adults with long term needs, which formed part of this, had been considered as part of the strategic aims contained within the document.

All Members

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- 3.12 In response to a Member challenge regarding the need to be more explicit and transparent within the document about the significant financial challenges presented now and in the future, it was agreed that consideration would be given to including more information regarding this in the final document or in a covering note. Pressures on private housing sector were also considered as part of this discussion.
- 3.13 Members received assurance that informal discussions on the challenges presented were taking place with local MP's with the hope that this would provide them to make informed decisions and debate in central government.
- 3.14 The Chairman summarised that it was acknowledged that it was a challenge to fully predict future need over such a broad time span, due to a number of factors including the unknown level of need of older people in the future, and the unknown future of funding, but she reassured the Panel that the final document produced would be revisited regularly to ensure that it remained relevant to any future change within the sector.

#### 3.14 Conclusion

Panel noted and commented upon the draft Fifteen Year Direction for Adult Care Services.

#### 4. ANNUAL SAFEGUARDING REPORT

Officer Contact: Liz Hanlon – Independent Chair, Hertfordshire Adults Safeguarding Board. (Tel: 0758 0744113)

- 4.1 The Panel were presented with the Annual Safeguarding Report produced by the Hertfordshire Safeguarding Adults Board (HSAB), detailing the work of the HSAB between 2016/17.
- 4.2 Members were advised that this was the third year that a Safeguarding Report had been produced and the report had been signed off by Healthwatch, both Clinical Commissioning Groups, the Health & Wellbeing Board and Adult Care Services Management Board.
- 4.3 In response to a Member observation that each of the ten district councils within Hertfordshire had provided differing formats for their individual updates, it was noted that ongoing work is being undertaken to ensure a common template is received for future reports.

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Helen Maneuf

4.4	It was noted that with regards to the safeguarding issue of self- neglect, there was not a defined threshold of where self-neglect became a safeguarding issue but any reports or current risks of self-neglect were investigated and managed by understanding and working individually with the person involved. The level of intervention and the judgement of the scale of safeguarding risk was dependent of the assessment by the professional involved.	
4.5	Members were also detailed that a referral to the HSAB is actioned within 48 hours, and there is a clear ongoing learning process with regards how to manage referrals embedded through overarching HSAB action plans, individual service user action plans, and outcomes from Safeguarding Adult Reviews.	
4.6	The Panel learnt that the method of working with service users on an individual basis was had been strengthened as part of the outcomes from the Making Safeguarding Personal survey that had been carried out on service users earlier in the year.	
4.7	Members were advised that the HSAB had a strong working relationship with the Hertfordshire Partnership Foundation Trust (HPFT) to support service users with mental health needs and a lot of work had been undertaken to improve practice in this area.	
4.8	During general discussion it was established that details of how to make a referral were provided through training, the HSAB website and through literature provided through the HSAB. Members noted that any agency can and do make a referral to the HSAB.	
4.9	Members requested that more detail should be provided in next year's Annual Report of the breakdown of where, what and how referrals were made. It was advised that 38% of referrals related to people living in their own home, and that the collection and presentation of data was something that was being developed in line with the ongoing development of the Board.	Liz Hanlon
4.11	It was noted that on the 12 October 2017 a Scrutiny Topic Group was undertaken on the work of the Safeguarding Adults Board's in responding to self-neglect. All reports from the meeting can be found here:	
	http://cmis.hertfordshire.gov.uk/hertfordshire/Calendarofcouncilmee tings/tabid/70/ctl/ViewMeetingPublic/mid/397/Meeting/792/Committ ee/127/Default.aspx	
4.12	In response to Member concern relating to gaps in partner agencies attending HSAB meetings, it was established that continued work was being undertaken to promote the importance of Board attendance from all partner agencies.	

## CHAIRMAN'S INITIALS

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4.13	Members asked that thanks be conveyed to the Board for the ongoing work that was ongoing with regards to adult safeguarding and noted the importance of continued vigilance.	
	Conclusion:	
4.14	Members noted the content of the HSAB Annual report and agreed to provide any further feedback as applicable to inform future business planning.	All Members
5.	LOCAL ACCOUNT FOR ADULT SOCIAL CARE 2016/17 Officer Contact: Matt Chatfield – Adult Social Care Performance Manager (01438 845387)	
5.1	Members were presented with the 2016/17 Local Account for Adult Social Care, a statutory document outlining the performance of Adult Care Services, areas of strength and achievement, and plans for improvement.	
5.2	The Panel attention was drawn to the specific areas of the report as follows:	
	<ul> <li>A 4% increase in service users since 2015/16</li> <li>Ongoing development on information and advice</li> <li>The continued good work of the Money Advice Unit</li> <li>The initiatives undertaken with Learning Disability Services</li> <li>Initiatives undertaken with the physical disability service with an increase of referrals now being received from hospitals.</li> <li>Work on partner integration</li> </ul>	
5.3	Further to a Member observation, it was agreed that a link to Annual Complaints Report would be included within the report in order to provide more detailed information on the complaints received within the service.	Matt Chatfield
5.4	In response to a Member question it was established that Carers Assessments should occur annually, with the view to them being more regular should the service user or carer's circumstances change.	
5.5	During general discussion, the subject of Delayed Transfers of Care (DTOC) was debated and it was noted that this remained a challenge in the west of the county, although assurance was received that improvement work was ongoing, and as a result of this Hertfordshire had risen from 132nd to 77th out of 151 in the national table monitoring DTOC statistics for all 151 Local Authorities. Members were advised that a more detailed analysis on DTOC would be presented at the November 2017 Adult Care and Health Panel where quarterly performance statistics for the	lain Macbeath/Matt Chatfield
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department was due to be presented.

5.6 The Panel also received an update on the April 2017 announcement from the Chancellor of the Exchequer with regard to extra funding being provided for Adult Social Care. Members learnt that negotiations were ongoing with NHS England as to how the allocated funding would be spent and how the national target provided to Hertfordshire had been calculated. Confirmation was received that Hertfordshire's Better Care Fund Plan had now been submitted with the national target and the Panel would be kept updated with any further developments as appropriate.

## **Conclusion:**

5.7 Panel noted the 2016/17 Local Account for Adult Care Services

# 6. OTHER PART I BUSINESS

There was no other Part I business.

### KATHRYN PETTITT CHIEF LEGAL OFFICER

CHAIRMAN



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