

# **OVERVIEW AND SCRUTINY MANAGEMENT COMMISSION**

## **MINUTES OF THE MEETING HELD ON**

### **TUESDAY, 10 DECEMBER 2013**

*Note: These Minutes have been amended.*

*Please see Minutes of meeting held on 21 January 2014 for amendment.*

**Councillors Present:** Jeff Beck, Brian Bedwell (Chairman), Sheila Ellison, Dave Goff, Mike Johnston, Alan Macro, Gwen Mason, Tim Metcalfe, Garth Simpson, Tony Vickers, Virginia von Celsing, Quentin Webb, Emma Webster and Laszlo Zverko

**Also Present:** Nick Carter (Chief Executive), Gabrielle Esplin (Finance Manager (Capital and Treasury Management)), Jan Evans (Head of Adult Social Care) and Andy Walker (Head of Finance), Gabrielle Alford (Berkshire West CCGs), Sarah Bellars (Berkshire East CCGs), David Lowe (Scrutiny & Partnerships Manager), Councillor Joe Mooney (Community Care, Insurance), Charlene Myers (Democratic Services Officer) and Samantha Ward (South Central Strategic Health Authority)

**Apologies for inability to attend the meeting:** Councillor Jeff Brooks and Councillor Andrew Rowles

## **PART I**

### **49. Minutes**

The Minutes of the meeting held on 2 September and 29 October were approved as a true and correct record and signed by the Chairman, subject to the following amendments:

- Minutes from 2 September would be amended to reflect Mel Brain's name correctly

### **50. Declarations of Interest**

Councillor Tony Vickers and Councillor Roger Hunneman declared an interest in Agenda Items 10 & 12, and reported that, as their interests were personal and not prejudicial, they determined to remain to take part in the debate and vote on the matter.

Councillor Emma Webster declared a potential interest in Agenda item 10 and reported that as her interest was not personal or prejudicial but a disclosable pecuniary interest that she would leave the meeting should the discussion lead to the mention of financial arrangements.

### **51. Actions from previous Minutes**

It was confirmed that the Homelessness Strategy had been offered as an agenda item for the next District Parish Conference but that the agenda had not yet been set.

Item 2.4 contained the response from Councillor Alan Law in respect of the letter written by the OSMC to request sight of the Revenue and Capital Budget Report prior to its submission in to Executive.

Councillor Tony Vickers queried the response to item 2.7 as he thought that the Executive's acceptance of the recommendation meant that the item would form part of the Homelessness Strategy. It was confirmed that the item formed part of the work conducted by the scrutiny task group and that the subsequent action was for the Portfolio Holder to raise the item with Newbury Town Council (NTC). Item 2.7 provided the Commission with the response from the NTC.

Item 2.8 would be amended so that the additional 'would' from the end of the sentence was removed from the sentence.

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Councillor Alan Macro expressed his concern about the suggested waiting times illustrated in Appendix A. This was echoed by Councillor Jeff Beck who asked whether resource was identified to ensure the statistics improved. Jan Evans explained that funds had been found for four agency workers to target waiting times and discussions would take place to fund one full time, permanent employee from 2013/14.

Councillor Roger Hunneman suggested that the volume of people waiting for assessments would increase when the revised Government Care Bill was introduced in 2015 and asked Jan Evans to explain whether she felt the service had sufficient resource to manage the demand.

Jan Evans advised that the Government Care Bill was not expected to disadvantage local authorities as resource would be provided to meet the Care Bill requirements. Jan Evans informed the Commission that the service had approximately 600 people on the Adult Social Care books.

Councillor Gwen Mason requested that the use of acronyms within professionals' reports was kept to a minimum and where possible explained in full.

**Resolved that** the report be noted.

### 52. **West Berkshire Forward Plan December 2013 to March 2014**

The Commission considered the West Berkshire Forward Plan (Agenda Item 5) for the period covering December 2013 to March 2014.

**Resolved that** the Forward Plan was noted.

### 53. **Overview and Scrutiny Management Commission Work Programme**

The Commission considered its work programme for 2012/13.

Councillor Tony Vickers questioned the future review dates for item OSMC/13/150. The Commission agreed as item OSMC/12/143 was due to conclude its activity then there would be resource available to start the a review of the factors causing disproportionate numbers of young families to become homeless in the new year.

**Resolved that**

- A task group would be established to examine the circumstances surrounding homelessness in young families.

### 54. **Items Called-in following the Executive on 28 November 2013**

Councillor Brian Bedwell introduced the request to review the current parking policy. Members agreed that the item would be considered in more detail at the next meeting.

**Resolved that**

- The item would be added to the next agenda for discussion.

### 55. **Councillor Call for Action**

There were no Councillor Calls for Action.

### 56. **Petitions**

There were no petitions to be received at the meeting.

### 57. **Continuing Health care**

Jan Evans presented information to the Commission in respect of Continuing Healthcare (CHC) arrangements in Berkshire.

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Jan Evans advised that the NHS CHC was a package of continuing care arranged and solely funded by the NHS when the individual had a primary health need which met the NHS eligibility criteria. The Council had set its own eligibility for social care criteria at "critical" but this was for a separate purpose and the two were not connected. The CHC assessments considered the complexity of an individual's presenting needs, if deemed eligible for care then the service would be provided at no cost to the client. Jan Evans explained that in the past care provision was provided in hospitals.

The Commission heard that the CHC assessment process initially involved the use of a checklist following a referral. At the initial stage the threshold was set low and with the use of the Decision Support Tool the NHS would collate evidence to assess whether the individual met the eligibility criteria. If the decision was disputed then the case could be reviewed at a Multi Disciplinary Team (MDT) meeting and a recommendation submitted to the Clinical Commissioning Group (CCG) for a final decision.

Jan Evans explained that following concerns around the application of the CHC process, an independent review took place in 2012. The review provided 52 recommendations, highlighted within five key areas for review by the then PCT and LA Adult Social Care:

- Policies and procedures
- Dispute process
- Hospital discharge
- End of life
- Joint training

Jan Evans explained that the first four items had been addressed. The joint training programme took time to establish but successfully completed training in October 2013 for 600 staff across the two acute trusts and six unitary authorities.

In order to monitor progress of those actions the few areas that were outstanding, representatives from Berkshire West and Berkshire East local authorities met with the Assistant Director for CHC to review the agreed action plan. The group's purpose was to monitor the implementation of changes, the Management Information (MI) disseminated by the CCGs, the implications of the changes made to policies and procedures and review the dispute policy. The group would formally review all changes one year after implementation.

Jan Evans advised that the three main areas for consideration by the group were;

- Management Information produced by the CCGs
- The assessment times and waiting lists associated with initial assessment
- The number of individuals funded by the CCGs that met the NHS eligibility criteria

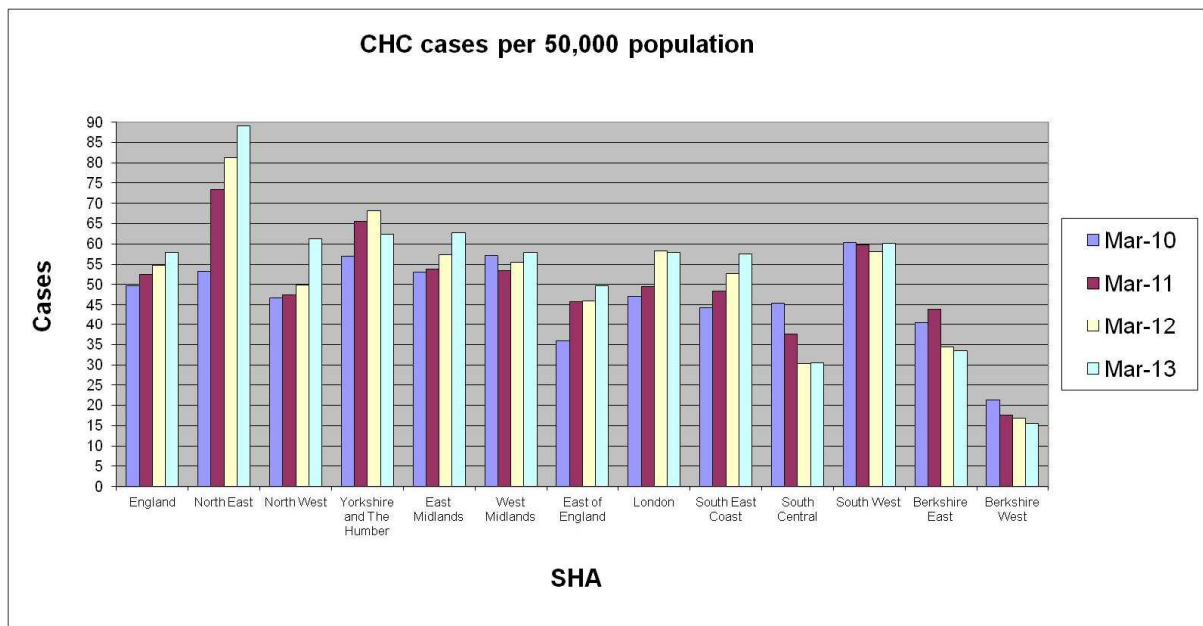
The Independent review recommended that NHS Berkshire and the Unitary Authorities met regularly to use benchmarking data to monitor their performance both regionally and national trends. In order to address the recommendation the CCG's appointed an analyst whose role would be to establish and maintain a database for the seven Berkshire CCG's and prepare monthly reports.

Jan Evans referred the Commission to the Local Data for 2013/2014. The information showed how many CHC cases were funded by the CCGs across the country (graph 1:1). Further detail suggested that 23 individuals were assessed and their checklist accepted for CHC provision. 12 cases had proceeded to MDT for further review, 2 were held by the MDT and zero assessed as eligible. Jan Evans referred the Commission to the CCGs' month six expenditure report which suggested that there was a 3% reduction in spend

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between 2012/13 and 2013/14. The report stated that the CCGs' forecast outturn for the same period would increase by 13%.

Graph 1:1



Councillor Brian Bedwell thanked Jan Evans for her presentation.

In response to questions asked, Sarah Bellars advised that the budgetary figures and subsequently the percentages referred to within the supplementary report, would be confirmed and reported back to the Commission.

The Commission heard that if an individual was not deemed eligible for CHC funded by the NHS then, due to their presenting needs, it was possible that they may meet the eligibility criteria for LA care. Sarah Bellars advised that the criteria for assessing eligibility was factual and well structured. The Commission collectively expressed their concern that if that was indeed the case, then why did there appear to be a significant variation between the number of CHC cases in Berkshire West to those in other areas.

Councillor Webster highlighted the possibility that whilst residents waited for decisions from the CCGs it was likely that either the Council or the resident would have to pay for interim care. In response, Sarah Bellars stated that the assessment process considered a lot of evidence over a period of time, in order to gain a comprehensive review of the individual's needs and that if an individual was deemed eligible for care then the CCG would backdate the funding to cover the period prior to the decision being made.

Councillor Bedwell suggested that the public perception of CHC working successfully was affected by the differing performance statistics compared to other local authority areas. Sarah Bellars stated that the CHC assessment framework was applied consistently across Berkshire with the same team working on all cases.

The Commission acknowledged that the CCGs provided the statistics to compare performance at a national level, however, it was suggested that in order to truly understand the effectiveness of the CHC framework in Berkshire West then the CCGs needed to compare performance directly with neighbouring local authority areas.

Councillor Webb highlighted his concern about the assessment waiting times in Berkshire West and suggested that the CCGs should have had the capability to report on this area in detail. Sarah Bellars advised that the performance reported against by the CCGs was agreed with the Council as part of the review recommendations. Sam Ward advised that

the CCGs worked to the national benchmark process which looked at the number of people eligible for CHC via the various routes of referral, costs to CCGs for CHC provisions, number of joint funded cases and the effectiveness of the management tool. The CCGs were expected to report against the number of assessments conducted within the 28 days from the date on which the checklist had been issued, as outlined within the national guidelines. Sam Ward advised that part of the information was made publicly available.

Councillor Webb advised that the Health Scrutiny Panel first reviewed the item in December 2012, at which point they recommended that the CCGs invested in appropriate measures to ensure they had the necessary resource to report on the performance of the service which would be useable at a local level. Sarah Bellars advised that the CCGs appointed an analyst to report on areas as agreed with the LAs.

The Commission highlighted that four residents had waited over a year for an assessment. It was suggested that by allowing the waiting period to exceed the national framework of 28 days residents expectations were being damaged. The CCG's were asked to provide information regarding their action plan to address the issue.

The Commission expressed their dissatisfaction with the extended waiting times and the agreements in place for funding. Sam Ward explained that the process for funding interim care was not set at a national level.

Councillor Macro asked how the Berkshire West CCG compared to other CCGs in terms of assessments conducted within 28 days of the checklist being issued. Sam Ward agreed to obtain the figure and report back to the Commission

Councillor Gwen Mason raised her concern that following the review in 2012 many changes had been made to policies and procedures, however, the issue around waiting times remained. Sarah Bellars advised that the CCGs inherited cases from the PCT which they have had to manage.

The Commission requested sight of the action plan the CCG's had in place to improve waiting time and areas of reporting. Sarah Bellars agreed to respond to questions and provide detailed statistics at the Commission meeting in February 2014.

### **Resolved that**

- The CCGs would be asked to confirm the total value in which the percentage forecast and overspend had been measured.
- Sam Ward would ask NHS England to provide the comparative data to show the number of assessments conducted within 28 days of the checklist being issued in Berkshire West and neighbouring local authorities.
- David Lowe will identify, and then communicate to the Health Service representatives, measures of CHC performance for consideration at the Commission's February 2014 meeting.

## **58. Revenue and Capital Budget**

Andy Walker introduced the Revenue and Capital Budget report to the Commission. Andy Walker stated that this was the second report as part of the financial reporting cycle for the 2013/14 financial year. The forecast revenue overspend for the 2013/14 financial year was £261k which was a worsened position from Quarter One when an underspend of £51k was reported.

Andy Walker stated that the Public Health service had found a saving of £80,000 within the first year due to using existing support services which helped towards delivering its schemes and which could be recharged to the service.

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Councillor Zverko asked why Appendix 1a on page 71 showed a forecast overspend of £75,500 on Capital Financing and Management. Gabrielle Esplin explained that this was because of a forecast shortfall in interest earned on the Council's investments because of a reduction in the interest rates being paid by the banks and building societies with which the Council deals. Councillor Zverko also identified an error in the table in Appendix 1b on page 73. Gabrielle Esplin explained that the column showing the budget remaining to be committed was incorrect. She thanked Councillor Zverko for highlighting the error and advised that the report would be amended accordingly.

Councillor Beck questioned the status of the reintegration service as stated on page 68 of the agenda. Nick Carter advised that the Moorside and Riverside centres aimed to find more suitable premises.

Councillor Beck queried the reference on page 82 of the agenda to a payment being pursued from the Kennet School. Nick Carter advised that this referred to an issue with the school transferring to academy status and the leisure facilities onsite. Nick Carter advised that he could not provide any more information at this stage.

Councillor Roger Hunneman referred to paragraph 2.2 of the report which stated that expenditure across Children's non-placement budgets and all other Community Services budgets were being deliberately slowed in order to address the projected overspend within the Directorate. He asked what effect this action would have on service users. Andy Walker responded that areas where there was a pressure for services would not be slowed and there would therefore be no detrimental effect to the most vulnerable clients. Andy Walker agreed to confirm the areas affected by the decision and report back to the Commission.

Councillor Beck noted that on page 56 of the agenda there was mention of GT. It was suggested that the GT site referred to the Gypsy & Traveller site at Four Houses Corner.

Councillor Simpson asked for an explanation of the ASC Risk Fund. Andy Walker explained that the fund was created within the service budget as a contingency for identified areas of risk.

Councillor Vickers asked whether the Council had considered the use of consultants to take the Market Street regeneration project forward and whether the expenditure had been committed within the 2013/14 budget. Nick Carter explained that the costs for the Market Street regeneration project had been identified within the 2013/14 budget. The London Road project had not yet been identified within the budget and it was suggested that this would form part of the 2014/15 budget.

Paragraph 3.2 of the report stated that "good progress was being made with schemes to deliver additional primary school places". It was felt that the statement was inconsistent with the fact that funding for the scheme to expand Theale Primary School had not yet been confirmed. Gabrielle Esplin undertook to check the status of the Theale Primary scheme with Education Services and to report back.

Gabrielle Esplin advised the Commission that approximately £90,000 from the 2012/13 and 2013/14 members' bids capital budget remained unallocated, but that a further bidding round would take place in January which was expected to allocate some or all of the funds.

Councillor Brian Bedwell thanked the Officers for their report.

### **Resolved that**

- Andy Walker would confirm the areas affected by the decision to slow spending within Children Services and report back to the Commission.

- Gabrielle Esplin would check the status of the Theale Primary scheme with Education Services and to report back to the Commission

## **59. Adult Social Care Eligibility Criteria**

Councillor Webb introduced the Adult Social Care Eligibility Criteria review report to the Commission. The task group conducted the in-depth review over the course of 12 months which included an independent public consultation.

Councillor Webb talked the Commission through the report and directed them toward the task groups recommendations which they would be asked to consider;

1. The Head of Adult Social Care should keep the Council's Fair Access to Care Services eligibility criteria at 'critical' and continue to ensure that appropriate levels of funding remain for the provision of preventative services outside of that required for assessed care packages (currently £700,000 per year).
2. The Head of Adult Social care should ensure, through annual review, that in its operation of the Fair Access to Care Services Policy the Council continues to comply with its statutory duties. In addition to any required policy changes, the reviews should incorporate an assessment of equality impact.
3. The Head of Adult Social Care should monitor the effectiveness of the steps that have been taken to reduce both the time taken to complete Section 47 assessments and the backlog of those cases awaiting assessment. Additionally, a further action might be a cessation of the practise of the Access for All team fielding telephone calls for other social care teams and the allocation of more staff time for the completion of assessments.
4. The Head of Adult Social Care should evaluate the operation of the Access for All team to ensure that its position within the organisational structure provides the most effective operational environment. Any changes to the role, formation or positioning of it should ensure that staff in this crucial team are appropriately trained, resourced, focussed and supported.
5. The Head of Adult Social Care should continue to review and evaluate the effectiveness of the Multifunctional Assessment/Review Document to further improve its effectiveness and ensure that the administrative burden it necessarily imposes is kept to an absolute minimum.
6. The Head of Adult Social Care should ensure that those completing the Multifunctional Assessment/Review Document understand that the information it contains will be used by the Resource Panel to make decisions on the provision of care. If necessary, training should be provided to ensure that the delays caused by incomplete or poorly completed forms are reduced.
7. The Head of Adult Social Care should ensure that all staff undertaking social care assessments understand the need to keep those undergoing the process fully apprised of progress. This should ensure that expectations are managed and that dissatisfaction is resultantly kept to a minimum.
8. The Head of Adult Social Care should ensure that the lessons drawn from the Transitions Project (which examined the period when people move from children's social care to adult social care) are widely communicated and fully understood both by those going through it and the staff supporting them.

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9. The Head of Adult Social Care should undertake further work to test the perception of some stakeholders that some groups, regardless of the level at which the eligibility criteria are set, are being disadvantaged. Specifically on the grounds of their
- Age, particularly older people or those not receiving care from a particular and specific age-related service provider (eg Age UK)
  - Disability, particularly those with
    - remitting or relapsing conditions
    - sensory impairment
    - a condition on the autistic spectrum
  - Gender, particularly women who may have a societal expectation that they should act as a primary carer
  - Religion, particularly those with a cultural requirement for hygiene or washing routines.

Should a disproportionate adverse effects be determined to be present then measures should be introduced to mitigate them.

10. The Head of Adult Social Care should review and then re-issue the guidance to staff about the necessity to ensure a holistic assessment is carried out in line with the 'Cross team working protocol'.
11. The Head of Adult Social Care should give consideration to the introduction of measures to meet the needs of carers, especially
- Their capacity to provide care and the impact that it may have on the effective delivery of support packages
  - The beneficial effects of preventative respite care
  - The widespread and early provision of the Carer's Handbook
  - The production of a newsletter or bulletin

12. The Head of Adult Social Care should strengthen the links between their service and GPs to ensure that the unique and trusted status of GPs is used to identify an early need for social care or the provision of support for carers.

13. The Head of Adult Social Care should disseminate widely to their service the report on the findings of the public consultation in order that improvements in operational systems, processes and practise might be further identified.

The Commission heard that the Strategic Support team stored a copy of the agendas, minutes and reports produced and considered during the course of the review.

Councillor Quentin Webb passed his appreciation to David Lowe, Charlene Myers, Leigh Hogan and Jan Evans for their support during the review. The Commission extended their thanks to the task group.

Jan Evans was asked to provide her comments on the recommendations, she advised that she had reviewed the recommendations prior to the meeting and was content that each one was achievable locally.

Councillor Beck requested clarity around the costs associated with the change from 'Critical' to 'Substantial'. David Lowe advised that the Council would incur a one off fee of £1.2 million, followed by an estimated annual cost of £1.9 million.



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Councillor Hunneman raised his concerns about the suggested waiting times for an eligibility assessment. He requested that the item was revisited at future meetings to monitor the backlog. The Commission agreed that recommendation three would be amended to incorporate a request to review the waiting time for assessments on a quarterly basis.

Councillor Bryant asked what the associated costs would be to implement the recommendations. David Lowe advised that it was not for the Commission to consider.

Councillor Garth Simpson asked what comparisons had been made against other Local authorities in respect of residents being signposted to alternative services if deemed not to meet the eligibility criteria. David Lowe advised that the consultation responses suggested that residents were generally highly satisfied with the service. The Commission heard that the Adult Social Care service provided £700,000 of funding to preventative services and an annual survey established feedback from the users of those services.

Councillor Simpson asked whether the struggle to establish NHS Continuing Health Care funding impacted on the Council's capacity to manage the demand on services. Jan Evans advised that the Council had a duty of care to conduct an assessment on any person over the age of 65 years old and, through various avenues, residents outside this age group could be referred for an assessment. Jan Evans explained that the service was resource intensive.

Councillor Vickers expressed his concern that it appeared as though the NHS and West Berkshire Council utilised stringent frameworks when assessing local residents. Jan Evans informed the Commission that the process of delivering care, from volunteer services aimed to provide preventative measures, through to the use of end of life services for those residents with the most significant presenting needs. Jan Evans explained that the process could include regular reviews in order to ensure the individuals needs were being met, the agency providing those services would change dependant on the complexity of the case.

Councillor Goff asked whether residents could be assessed within alternative local authorities. The Commission acknowledged that due to the differing levels of eligibility criteria within local authorities, it was possible that a resident could be deemed eligible for care if assessed outside of West Berkshire.

Councillor Brian Bedwell proposed acceptance of the task group's recommendations, subject to the amendment being made to item three. The Commission unanimously agreed to accept the recommendations.

**Resolved that**

- Recommendation three would be amended to read:  
The Head of Adult Social Care should monitor the effectiveness of the steps that have been taken to reduce both the time taken to complete Section 47 assessments and the backlog of those cases awaiting assessment. Additionally, a further action might be a cessation of the practise of the Access for All team fielding telephone calls for other social care teams and the allocation of more staff time for the completion of assessments. Reports on effectiveness and progress should be made quarterly to the Overview and Scrutiny Management Commission.
- The recommendations were accepted and the report noted by the Commission.

*(The meeting commenced at 6.30 pm and closed at 8.40 pm)*

**CHAIRMAN** .....  
**Date of Signature** .....