MINUTES of the meeting of the **ADULT SOCIAL CARE SELECT COMMITTEE** held at 10.00 am on 14 May 2015 at Ashcombe Suite, County Hall, Kingston upon Thames, Surrey KT1 2DN.

These minutes are subject to confirmation by the Committee at its meeting on Thursday, 25 June 2015.

Elected Members:

Mr Keith Witham (Chairman)
Mrs Margaret Hicks (Vice-Chairman)
Mr Graham Ellwood
Miss Marisa Heath
Mr Saj Hussain
Mr George Johnson
Mr Colin Kemp
Mr Ernest Mallett MBE
Ms Barbara Thomson
Mrs Fiona White
Mr Richard Walsh

Ex officio Members:

Mr David Munro Mrs Sally Ann B Marks, Chairman of the County Council

In attendance:

Mr Richard Wilson

25/15 APOLOGIES FOR ABSENCE AND SUBSTITUTIONS [Item 1]

Apologies were received from Colin Kemp, Richard Wilson acted as a substitute.

26/15 MINUTES OF THE PREVIOUS MEETING: 10 APRIL 2015 [Item 2]

The minutes were agreed as a true record of the meeting.

27/15 DECLARATIONS OF INTEREST [Item 3]

None received.

28/15 QUESTIONS AND PETITIONS [Item 4]

None received.

29/15 RESPONSES FROM THE CABINET TO ISSUES REFERRED BY THE SELECT COMMITTEE [Item 5]

None received.

30/15 DIRECTOR'S UPDATE [Item 6a] Declarations of interest:

None

Witnesses:

Dave Sargeant, Strategic Director, Adult Social Care Mel Few, Cabinet Member for Adult Social Care Nick Markwick, Director, Surrey Coalition of Disabled People

Key points raised during the discussion:

• The Strategic Director (SD) began his update by responding to comments made by the BBC in Surrey which suggested there would be a wholesale review of the delivery of adult social care services in Surrey as a result of the closure of the Merok Park care home. The media appear to have misinterpreted a report about ASC reviewing its quality assurance to ensure the right partners are involved. The SD reiterated that it was Surrey County Council (SCC) who had called in the Care Quality Commission (CQC) following concerns about the delivery of care at Merok Park and that ASC staff worked tirelessly to ensure that residents were moved to another home safely.

- A response was also provided to recent news reports which highlighted concerns over the treatment of staff and the quality of care delivery by social care companies working under the auspices of the umbrella company Mihomecare, some of which operate in Surrey. The Committee received assurance from the SD that he is working with the Chief Executive of Mihomecare.com to ensure that the companies which do operate in Surrey deliver the right care residents.
- The Director of Surrey Coalition of Disabled People (DSCDP)
 gave the Committee the service users' perspective of the quality
 of care provided by Mihomecar. Particular emphasis was placed
 on the long hours worked by care workers and the fact that they
 aren't paid for the time spent driving between appointments
 which had led to a large turnover of staff that has had a direct
 impact on the continuity of care.
- The Committee requested further information on the private care providers that ASC commissions services from and asked whether contracts with private providers state that all employees are paid the living wage. The SD stated that ASC asks any qualified providers of home care pay the living wage to their staff. In response to concerns by Members about care workers not being paid between appointments, the SD highlighted that this arrangement is the industry standard.
- The SD drew the Committee's attention to the success of the Get Wise Surrey initiative which has so far helped Surrey residents claim £6.5 million in benefit payments that they were not previously aware they were entitled to and that this has been at limited cost to the Council. This has been particularly beneficial for carers who have had their benefits backdated from before they knew they could claim.
- The Committee asked the SD whether he had any idea of where the £12bn in benefits cuts mooted by the government would fall. The SD highlighted that that budget reductions on ASC have been significant and it has been part of the ASC's strategy to consider the impact of these cuts on the delivery of social care in Surrey. Members were informed by the SD that he is not sure of where savings arising from an additional £12bn in reductions to benefits will be made at this time.

Recommendations:

1. The Committee to routinely receive details of the Directorate's responses to media reports.

Actions/ further information to be provided:

- Strategic Director to provide statement given to the media on Myhomecare
- 2. Strategic Director to follow up on Surrey Coalition of Disabled People Director's comments and report to the Committee at its next meeting

Committee next steps:

None

31/15 CABINET MEMBER'S UPDATE AND ADULT SOCIAL CARE SYSTEM SCRUTINY [Item 6b]

The Chairman proposed that item 6b be considered before item 6a and this was agreed by the Committee.

Declarations of interest:

None

Witnesses:

Mel Few, Cabinet Member for Adult Social Care
Dave Sargeant, Strategic Director for Adult Social Care
Nick Markwick, Director, Surrey Coalition of Disabled People
Toni Carney, Head of Resources, Adult Social Care
Lorraine Juniper, Programmes Manager, Information Management and
Technology

Key points raised during the discussion:

• Members were informed that Mr. Steve Cosser has taken the decision to step down from the role of Cabinet Associate for Adult Social Care and that this vacancy would be filled at the meeting of the Council on 19 May 2015. The Cabinet Member gave his thanks for the work Mr Cosser had done on the safeguarding, carers and Dementia Friendly Surrey agendas. Insights were also given into some of the projects that the Cabinet Member for Adult Social Care and the new Cabinet Associate would be taking on over the coming months. The Cabinet Member for Adult Social Care also drew attention to his

priorities for 2015/16 such as achieving savings of £37 million, promoting closer integration with Health, overseeing the Older People's Homes project and implementing the Care Act including the second phase of the act being introduced in April 2016.

- The Committee were given detail of the new IT system by Liquidlogic that is being recommended by ASC and that will be considered by the Cabinet at its next meeting on 26 May 2015. The Cabinet Member stated that the proposed contractual relationship would be part of an existing agreement with East Sussex County Council who are acting as a central purchasing body for other local authorities and already use Liquidlogic as their adult social care delivery system.
- The Cabinet Member drew attention to some of the features of the new software which will offer significantly improved functionality over the system currently used by ASC. For example, Liquidlogic's software will facilitate mobile working for care workers, it is an intuitive system that staff will find easy to use while there will also be more frequent updates to further improve the functionality of the system. Moreover if no action is now taken to replace the Adult Social Care IT system, there is a risk that the council will not be compliant with the Care Act by April 2016 and will not have the necessary functionality to manage the increased demand for assessments
- Members requested further information on any financial benefits that Liquidlogic's software will offer ASC. The Cabinet Member advised that the costs of contracting the new software will be similar to the current system but that there is the potential to make significant savings arising from the increased efficiency in service provision that the new software will provide. The opportunity for staff to work remotely has been identified as a particular area where savings could be achieved due to the fact that it will allow care workers to update people's records in the field rather than having to return to the office in order to do this which will also help to ensure that records are up to date.
- Opportunities for improved data sharing were discussed by the Committee who inquired whether the new system will enable relevant services and partners to access people's records and information so that those with care needs only need to tell their story once. This will not only improve the experience of these

individuals in dealing with ASC but will also help to make care delivery more efficient. The Cabinet Member confirmed that this is part of the Council's digital strategy and that Liquidlogic are working to deliver this functionality although it is not part of their current software package but as it is an open source platform it should allow simple linking to other software packages used by external partners.

- The SD highlighted that much of the challenges around achieving data and information sharing between social care partners and agencies is centred on changing culture and practices across these organisations. It was indicated that progress is being made in the Surrey health and social care community on delivering the changes required to share information between agencies. For example, this is already happening in North East Hampshire and Farnham as part of the Clinical Commissioning Group's (CCGs) Vanguard pilot project. Furthermore, the districts and borough councils and other partners have also been asked to sign an information sharing protocol which will allow partner agencies to access information about patients and their care needs when required.
- The Director of Surrey Coalition of Disabled People (DSCDP) highlighted the importance of the new software being accessible and easy to use for disabled people. The Programmes Manager (PM) stressed that Liquidlogic leads the way in delivering systems for social care services but assured Members that the accessibility of the software will be tested and that the Council would work with Liquidlogic to ensure that feedback is incorporated into how the software is configured.
- Members requested assurances that the bureaucracy and regulations which govern the use of information and IT systems are reviewed to ensure that the full functionality of the new system can be utilised. The Cabinet Member suggested that a recommendation be made to the Cabinet to this effect.
- The Committee asked whether the system had the capacity to function as a single point of contact for care workers and service users. The SD stated that this is the aspiration for the new software and that ASC will be working towards this goal. Members were advised that creating a single point of contact for patients and care workers was also being driven by the need to

mitigate additional demand on ASC services arising from the Care Act and the hope is to allow those with care needs to access the system to trigger their own care accounts in the future.

• More information was requested on the protocols that ASC has in place if there is disruption to the IT system or if it goes down entirely. The Head of Resources (HoR) highlighted that ASC has a business continuity plan which will come into effect if necessary when the IT system fails. This has not happened to date but ASC are confident that it will allow care services to continue to be delivered effectively. The PM advised Members that there are back up servers off site and the new software can be updated overnight to minimise disruption to ASC.

Recommendations:

- 1. The Committee supports the case for entering into a contract with a new provider for the Adult Social Care IT system.
- 2. The Committee recommends that the Directorate, with support from the Cabinet Member for Adult Social Care, explore the integration of the new IT system with the NHS, District & Borough Councils and other relevant agencies.
- 3. Copy the above to the Chairman of the Council Overview and Scrutiny Committee.

None

Committee next steps:

None

32/15 SINGLE HOMELESSNESS IN SURREY [Item 7]

Declarations of interest:

None

Witnesses:

Andrea Cannon, Director of Client Strategy and Delivery, Transform Housing & Support Alison Wilks, Strategic Housing Manager, Mole Valley District Council

Key points raised during the discussion:

- The Director of Client Strategy and Delivery at Transform Housing & Support (DCSD) gave a brief introduction to the report in particular highlighting that homelessness is an increasing problem across Surrey. Attention was also drawn to a judgement made by the Supreme Court on 13 May 2015 that requires local authorities to widen the 'vulnerability test' they apply to assess single homeless people which will have a significant impact as the number required to be accommodated will increase. Generally, Surrey has strong support services for the homeless although there is some concern that CCGs are not fully aware of the type of services that can properly support homeless people in Surrey.
- The Strategic Housing Manager at Mole Valley District Council (SHM) stressed the importance of funding through the Housing Related Support Programme (HRSP) which is critical to ensuring that the districts and boroughs can continue to provide support services to the homeless in Surrey. The issue of accommodating homeless people with complex needs was also raised as a particular challenge as there is a need to ensure that these cases are adequately supported to live in temporary or permanent accommodation. The Department for Communities and Local Government (DCLG) have issued a call for evidence on this issue and subsequently funding may be available to help these cases as a result. The SHM also explained that the HRSP provides critical funding for the Surrey domestic abuse outreach services and Women's refuges.
- Information was requested by the Committee on efforts being made to coordinate the efforts of housing support services with the Family Support Programme. The SHM confirmed that work is being done to join up the work of relevant services to tackle homelessness in Surrey and that funding has been received from DCLG had previously been received in order to achieve this and is known as the Surrey Homeless Alliance. DCLG funding has also recently been received by district and boroughs for initiatives for the single homeless including rough sleepers and two projects have been established in the east (East Surrey

Outreach Service (eSOS)) and west (Single Homeless Alliance West Surrey (SHAWS) of the county. Both work on the Family Support Programme principle of the 'team around the person'. In Surrey Heath the initiative will be located within the Family Support Team and this presents an opportunity to learn the potential benefits.

- The Committee asked why four of the 11 districts and boroughs aren't part of SHAWS. It was advised that the four eastern districts and boroughs have formed a partnership which covers the east of the county and collaborate to improve outcomes for homeless people in Surrey in a similar way. Members were further informed that Transform is supporting the development of a Surrey Homeless Alliance, involving the statutory and voluntary sector, which will coordinate efforts to tackle homelessness across all 11 districts and boroughs to share best practice.
- Concerns were expressed that a chronic shortage of housing supply across the county undermines the capacity of housing support services to tackle homelessness as there is simply not enough suitable accommodation. Members were informed that a number of districts and boroughs are in the process of developing their local plans and so it would be an opportune moment to make representations to them to ensure that they provide adequate provision to house homeless people.
- Members asked what the council can do to help district and borough councils deliver on their statutory duties to support the homeless. The SHM reiterated the importance of the funding that the council allocates to the districts and boroughs through the HRSP and highlighted that the continuation of this funding was crucial to ensure that services to support homeless people in Surrey can be delivered. Attention was also drawn to unused public land and buildings and the SHM suggested that some of these buildings or land might be better used to provide temporary or permanent accommodation for homeless households and those in housing need.
- The Committee asked about what continuing support services are available once accommodation has been found for a homeless person. The SHM explained that the HRSP funds tenancy support services that cover all of Surrey which work with

people who have recently been placed in accommodation to ensure that they receive practical help and support to keep their tenancy and prevent them becoming homeless again. By way of example in Mole Valley the service provider is Parashoot.

- Discussions took place on the planning permission requirements for setting up winter shelter and hostel accommodation and the fact that residents are often resistant to having homeless people sheltered in their neighbourhood. The SHM agreed that there was often resistance, however, as planning authorities the districts and boroughs had to take into account objections from residents when considering planning applications.
- The Guildford area was singled out as having a particularly significant homelessness problem and a brief description of the services available to homeless people in this area was provided to the Committee. Details were also given on how the number of people sleeping rough in a given area is estimated. Partner organisations are often asked to highlight problem areas where they know homeless people congregate and sleep to help provide an accurate assessment. During very cold periods the Severe Weather Emergency Protocol is implemented whereby district and borough councils are required to provide accommodation for homeless people if the weather is forecast to be below zero degrees for three consecutive nights. District and boroughs generally take a pragmatic view and will accommodate homeless people as soon as the temperature falls below zero.
- The SHM advised Members of a website called streetlink which allows residents to report where they have seen a rough sleeper and this information is then passed onto districts and boroughs to investigate.
- The Committee inquired about the contribution made by health services to tackling homelessness given the financial benefits that they receive from these efforts. The DCSD indicated that HRSP monies are now part of the Better Care Fund which is overseen by the CCGs. However, she expressed concern that despite this, CCGs and other health organisation aren't fully aware of the benefits that they derive from efforts to support the homeless population in Surrey such as avoiding Accident & Emergency admissions. It is important to raise awareness

across the CCGs of how HRSP services prevent the need for acute intervention by health.

Recommendations:

The Committee:

- 1. Endorses the current approach to housing related support for single homeless people in Surrey.
- Supports the SHAWS and eSOS initiatives and recommends that the council and partners coordinate their work together to provide year round services that prevent rough sleeping across the county.
- Proposes that the Health and Wellbeing Board consider including homelessness in their priorities when their current strategy is reviewed, to support working across agencies on this issue, and ensure the alignment of commissioning strategies particularly those relating to emotional wellbeing and mental health.
- 4. Proposes that the Housing Related Support Programme develop links with the Supporting Families Programme to explore potential areas of joint work.
- Proposes that the Cabinet Member for Adult Social Care in conjunction with District & Borough's Chief Executives write a joint letter to the Minister with responsibility for planning to highlight the difficulties faced in providing accommodation for homeless people.

Actions/ further information to be provided:

 Scrutiny Officer to share Streetlink website address with Members.

Committee next steps:

None

33/15 TRANSFORMING DEMENTIA DAY CARE [Item 8]

Declarations of interest:

None

Witnesses:

Jen Henderson, Senior Commissioning Manager, Adult Social Care Dave Sargeant, Strategic Director, Adult Social Care

Key points raised during the discussion:

- The Senior Commissioning Manager (SM) provided the Committee with a brief introduction to the report outlining ASC's proposal to transform the services that it offers to residents with care needs arising from dementia. Members were informed that the one size fits all model based around days centres has become outdated as they aren't able to offer the breadth of services required to support people at different stages of dementia. This is particularly true for individuals with early onset dementia for whom the services provided day centres often aren't appropriate.
- In light of this, ASC has done a great deal of work with existing providers as well as people with dementia and their carers' in an effort to move away from block contracts towards commissioning bespoke services that can support people with all stages of dementia. Members were advised, however, that there is still a place for day centres particularly for in supporting individuals with advanced dementia and so some services will continue to be provided from day centres.
- Some concern was expressed by Members that the model proposed by ASC for transforming the delivery of services to people with dementia could lead to a more fragmented access to services. Assurances were requested that ASC would continue to be able to deliver the suite of services across the county that were previously accessible through day centres. The SM stated that day centres will continue to be an important part of the framework through which services will be provided but the commissioning of bespoke services is about recognising that day centres aren't suitable for everyone.
- The Committee asked how ASC are planning to monitor providers to ensure that they are delivering good outcomes for people with dementia. In particular, Members asked what provisions there will be for assessing smaller providers who can't necessarily deliver all of the desired outcomes but are still providing a valuable service to dementia sufferers. The ASM

stated that providers commissioned by ASC to deliver services will be required to sign up to an outcomes framework against which their performance in relation to stipulated objectives will be evaluated. There will be some flexibility for smaller, lessestablished providers, such as community groups, who provide valuable support but don't necessarily meet the outcome criteria, when they are ready they can join part the framework as it is a dynamic system

- Members inquired about what provisions are being developed to help people who don't know or refuse to acknowledge that they have dementia. The ASM acknowledged that there are a significant number of people who don't know they have dementia with some estimates suggesting that 39% of people in Surrey with dementia aren't aware they have it. SCC is currently working closely with health providers to promote timely diagnoses for people living with the illness to ensure they get the support they need.
- Information was requested on the progress of Dementia Friendly Surrey amid concerns by Members that the initiative appears to have lost momentum recently. The Committee were informed that the focus has moved to dementia friendly towns and that work on commissioning dementia services has been more closely aligned with work being done on the Family, Friends and Community Support programme.

Recommendations:

 The Committee endorses the direction of change for dementia day care services and note the improvements that this will make for older people and carers in Surrey.

Actions/ further information to be provided:

None

Committee next steps:

None

George Johnson left the meeting at 11.50

34/15 AN UPDATE ON THREE AREAS OF SAFEGUARDING IN SURREY: SAFEGUARDING ACTIVITY 2014/15, NEW SAFEGUARDING DUTIES UNDER THE CARE ACT 2014, RESPONSE TO THE CLOSURE OF MEROK PARK [Item 9]

Declarations of interest:

None

Witnesses:

Vernon Nosal, Interim Head of Quality Assurance and Adults Strategic Safeguarding, Adult Social Care Simon Turpitt, Independent Chair, Surrey Safeguarding Adults Board Dave Sargeant, Strategic Director, Adult Social Care

Key points raised during the discussions:

- The Independent Chair of Surrey Safeguarding Adults Board (IC) gave the committee a brief overview of the work that the Board has undertaken since his appointment 18 months ago. Information was provided to Members on the work done by the IC to improve the Surrey Safeguarding Adults Board (SSAB) including promoting it as a multiagency board rather than just focused on ASC as well as developing a person-centred approach to conducting safeguarding enquiries. It was further highlighted that the introduction of the Care Act has given SSAB more powers to ensure that recommendations made to partners are actually acted on.
- The Interim Head of Quality Assurance and Adults Strategic Safeguarding (IHQA) provided the Committee with an outline of some of the work being done by ASC to continue to improve adults safeguarding in Surrey. This includes the distribution of literature to people and providers covered by safeguarding legislation to ensure that all parties are aware of their rights and responsibilities in relation to safeguarding. Members were further advised that where individuals don't want to receive support from ASC efforts will be made to utilise FFC to ensure that this person is monitored and that an intervention takes place, if required, before they reach crisis point.
- Attention was also drawn to the number of safeguarding alerts received which has been attributed to having strong communication culture in relation to safeguarding and that the preference is to have more alerts but fewer referrals. Members were also informed about the Multi-Agency Safeguarding Hub

(MASH), a forum developed for the rapid exchange of information between agencies. Efforts are currently being made to optimise the work of the MASH by exploring best practice from other local authorities.

- The IHQA also talked briefly about the lessons learned by ASC as a result of the closure of Merok Park. A summit involving all relevant partners highlighted that people weren't aware of how to report concerns, subsequently it has been agreed to implement a system whereby ASC and its partners have a coordinated approach to dealing with homes that are presenting challenges. Work is presently being done to consider what intelligence is required to facilitate a coordinated response as well as determining what this response will look like.
- Members expressed concern that the number of safeguarding alerts has tripled in the past five years. The IC advised that this is primarily a result of better awareness of adults' safeguarding which, unlike children's safeguarding, was not given a great deal of consideration until four or five years ago. The IHQA indicated that ASC has been active in promoting awareness of safeguarding among patients and partners.
- The witnesses were asked whether they had any insights on why instances of neglect are continuing to rise. The IHQA advised Members that ASC are in the process of analysing data to gain a better understanding of the setting and circumstances in which neglect takes place so that strategies can be devised to tackle it. The IC informed Members that self-neglect is now classified as a form of abuse and will have a significant impact on the number of referrals relating to neglect which will cause considerable challenges for SCC.
- Members asked whether SSAB is receiving adequate support from partners in relation to information and data sharing. It was highlighted by the IC that all partners have committed to an information and data sharing agreement in general and that he will actively ensure that partners comply with this agreement where this isn't happening.
- The education of staff and care workers on recognising safeguarding issues and encouraging them to report when they have concerns. The IHQA informed the Committee that work is

being done to illustrate to staff and families what good care looks like so that they have a better understanding when the care being given to patients/ family members falls short.

 The IHQA was asked to shed light on how poor care delivery happens. It was advised that there are numerous reasons why care delivery can fall below the standard expected. The work of registered managers was seen as being particularly important, however, who are able to delivery of consistently high quality care. Often when there is a high turnover of managers the quality of care seems to suffer.

Recommendations:

- The Committee recommends that it continues to receive safeguarding updates with the future report to include updates from each of the project groups and the progress made on interagency data sharing.
- 2. The Committee endorses the current and planned work being undertaken with regard to the Care Act 2014 safeguarding implementation paper and Quality Assurance project.

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Committee next steps:

None

35/15 RECOMMENDATION TRACKER AND FORWARD WORK PROGRAMME [Item 10]

Key points raised during the discussion:

None

Recommendations:

None

Actions/ further information to be provided:

None

	Committee next steps:
	None
36/15	DATE OF NEXT MEETING [Item 11]
	It was noted that the next meeting Adult Social Care Select Committee was scheduled for 25 June 2015.
	Meeting ended at: 12.45 pm
	Chairman