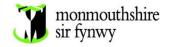
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Neuadd y Sir Y Rhadyr Brynbuga NP15 1GA

Dydd Mercher, 24 Mehefin 2020

Hysbysiad o gyfarfod

Pwyllgor Craffu Oedolion

Dydd Iau, 2ail Gorffennaf, 2020 at 10.30 am Cyfarfod o Bell

AGENDA

BYDD CYFARFOD CYN I AELODAU'R PWYLLGOR 30 COFNODION CYN I'R CYCHWYN Y CYFARFOD

Eitem ddim	Eitem	Tudalennau
1.	Ymddiheuriadau am absenoldeb	
2.	Datganiadau o Fuddiant	
3.	Fforwm Agored i'r Cyhoedd.	
4.	Trosolwg o'r System Olrhain a Diogelu sy'n gweithredu yng Ngwent.	1 - 4
5.	Trosolwg o Gartrefi Gofal i Bobl Hŷn yn Sir Fynwy ac effaith COVID- 19.	5 - 10
6.	Cadarnhau cofnodion y cyfarfod blaenorol	11 - 16
7.	Blaen-raglen Waith y Cyngor a'r Cabinet.	17 - 66

Paul Matthews

Prif Weithredwr

CYNGOR SIR FYNWY

MAE CYFANSODDIAD Y PWYLLGOR FEL SY'N DILYN:

Cynghorwyr Sir: F. Taylor

L. Brown L. Dymock

R. Edwards M. Groucutt

R. Harris P. Pavia M. Powell

S. Woodhouse

C. Bowie

T. Crowhurst

Gwybodaeth Gyhoeddus

Mynediad i gopïau papur o agendâu ac adroddiadau

Gellir darparu copi o'r agenda hwn ac adroddiadau perthnasol i aelodau'r cyhoedd sy'n mynychu cyfarfod drwy ofyn am gopi gan Gwasanaethau Democrataidd ar 01633 644219. Dylid nodi fod yn rhaid i ni dderbyn 24 awr o hysbysiad cyn y cyfarfod er mwyn darparu copi caled o'r agenda hwn i chi.

Edrych ar y cyfarfod ar-lein

Gellir gweld y cyfarfod ar-lein yn fyw neu'n dilyn y cyfarfod drwy fynd i www.monmouthshire.gov.uk_neu drwy ymweld â'n tudalen Youtube drwy chwilio am MonmouthshireCC. Drwy fynd i mewn i'r ystafell gyfarfod, fel aelod o'r cyhoedd neu i gymryd rhan yn y cyfarfod, rydych yn caniatáu i gael eich ffilmio ac i ddefnydd posibl y delweddau a'r recordiadau sain hynny gan y Cyngor.

Y Gymraea

Mae'r Cyngor yn croesawu cyfraniadau gan aelodau'r cyhoedd drwy gyfrwng y Gymraeg neu'r Saesneg. Gofynnwn gyda dyledus barch i chi roi 5 diwrnod o hysbysiad cyn y cyfarfod os dymunwch siarad yn Gymraeg fel y gallwn ddarparu ar gyfer eich anghenion.

Nodau a Gwerthoedd Cyngor Sir Fynwy

Cymunedau Cynaliadwy a Chryf

Canlyniadau y gweithiwn i'w cyflawni

Neb yn cael ei adael ar ôl

- Gall pobl hŷn fyw bywyd da
- Pobl â mynediad i dai addas a fforddiadwy
- Pobl â mynediad a symudedd da

Pobl yn hyderus, galluog ac yn cymryd rhan

- Camddefnyddio alcohol a chyffuriau ddim yn effeithio ar fywydau pobl
- Teuluoedd yn cael eu cefnogi
- Pobl yn teimlo'n ddiogel

Ein sir yn ffynnu

- Busnes a menter
- Pobl â mynediad i ddysgu ymarferol a hyblyg
- Pobl yn diogelu ac yn cyfoethogi'r amgylchedd

Ein blaenoriaethau

- Ysgolion
- Diogelu pobl agored i niwed
- Cefnogi busnes a chreu swyddi
- Cynnal gwasanaethau sy'n hygyrch yn lleol

Ein gwerthoedd

- Bod yn agored: anelwn fod yn agored ac onest i ddatblygu perthnasoedd ymddiriedus
- **Tegwch:** anelwn ddarparu dewis teg, cyfleoedd a phrofiadau a dod yn sefydliad a adeiladwyd ar barch un at y llall.
- **Hyblygrwydd:** anelwn fod yn hyblyg yn ein syniadau a'n gweithredoedd i ddod yn sefydliad effeithlon ac effeithiol.
- **Gwaith tîm:** anelwn gydweithio i rannu ein llwyddiannau a'n methiannau drwy adeiladu ar ein cryfderau a chefnogi ein gilydd i gyflawni ein nodau.



Agenda Item 4

SUBJECT: Test Trace and Protect

MEETING: Adults Select Committee

DATE: 2nd July 2020

DIVISIONS/WARDS AFFECTED: AII

1. PURPOSE

1.1 To provide the committee with an overview of the Test Trace and Protect system operating in Gwent.

2. RECOMMENDATIONS

2.1 The committee is invited to use the information to inform its understanding of the role of contact tracing arrangements in preventing the spread of the virus and enabling the easing lockdown restrictions.

3. KEY ISSUES

- 3.1 Test Trace and Protect (TTP) is the name given to the contact tracing scheme operating in Wales. Contact tracing is a proven method that has been used by public health professionals for many years to prevent the spread of communicable diseases. This is the process of identifying, assessing, and communicating with people who have been exposed to a disease to prevent onward transmission. When applied systematically it will break the chains of transmission of COVID-19 and is an essential public health tool for controlling the virus.
- 3.2 The scheme requires contacting people who have received a positive test and gathering information about those who they may have been in contact with them while they have been in their infectious stage. A *Contact Tracer* makes this call. In Monmouthshire Environmental Health Officers perform this role on a rota basis alongside their existing workload. Once we have details of the people who the infected individual may have been exposed to, the process of tracing and contacting all of these people begins. This is done by a larger team of *Contact Advisors*, made up of 7.5 FTE staff re-deployed from a broader range of professions including from our contact centre, community hubs and the Borough Theatre. Those contacted are assisted to book tests, if symptomatic, and required to self-isolate for up to 14 days. They receive daily follow-up calls to check on symptoms so the virus can be tracked and those who are infected can be prevented to spreading the virus to the wider population.
- 3.3 A contact is defined as someone who has been within 1 metre of an infected person and met other conditions such as had a face-to-face conversation or skin-to-skin contact for 1 minute or longer. It could also be someone who has been within 2 metres of the index case for more than 15 minutes. This would include things like car journeys. People working in professional roles who have correctly used personal

- protective equipment (PPE) or work behind an appropriate screen or partition are not regarded as part of a contact for these purposes. The period of recommended self-isolation will be 14 days from the point of most recent contact with the index case.
- 3.4 Monmouthshire County Council has partnered with Aneurin Bevan University Health Board, Public Health Wales and neighbouring local authorities to collaborate on a Gwent-wide approach. This provides economies of scale maximising the benefits of the professional expertise such as clinical leadership provided by Public Health Wales.
- 3.5 The system began operating fully on the 1st June and is based at Torfaen County Borough Council's premises at New Inn. It operates 7 days a week from 8am 8pm. The initial modelling was based on an assumption that around 20% of tests would come back positive. However at present the proportion of tests resulting in a positive diagnosis is closer to 1%. This is an incredibly positive position to be in since it suggests that the virus is not spreading as modellers initially forecast. This does mean that some are presently not at full capacity. However, having this system in place is an essential part of easing lockdown. This virus does not move, people move and as lockdown is eased and people once again start to go about their daily lives there are more opportunities for the virus be passed from person-to-person.
- 3.6 All contact tracing systems in Wales use the Microsoft Dynamics system which allocates and presents case management workflows to local contact tracing teams. This is now live and also features integrated telephony. There are challenges for Monmouthshire, as a border county as we have a high number of people who travel between England and Wales as the Dynamics Platform is not used in England necessitating a manual process of information exchange.
- 3.7 Members will be aware of recent outbreaks such as those on Anglesey, Wrexham and in Merthyr Tydfil which illustrate how quickly an outbreak can spread, and the importance of contact tracing to minimise onward transmission. TTP is operating in a dynamic situation. For this reason this report does not attempt to cover every aspect of the system or the current situation on the ground as it is likely that further changes will have occurred between the drafting and presentation of this report. It is anticipated that a fuller update will be provided verbally at the committee meeting.
- 4. EQUALITY AND FUTURE GENERATIONS EVALUATION (INCLUDES SOCIAL JUSTICE, SAFEGUARDING AND CORPORATE PARENTING):
- 4.1 National modelling indicates that the virus appears to have a disproportionate effect on BAME groups and older people while younger people are less likely to experience the worst health impact.

5. REASONS:

5.1 To ensure that members have an understanding of the arrangements in place to deliver effective contact tracing and are able to evaluate its contribution to easing lockdown restrictions.

6. RESOURCE IMPLICATIONS:

6.1 At present the service is being resourced by redeploying staff from other areas. However, as the service continues beyond the initial three month period it is anticipated that a more sustainable staffing model is put in place. ABUHB are the lead organization for TTP and will submit a funding case for the cost of the service to Welsh Government. Welsh Government have confirmed that they will reimburse any ICT costs incurred by local authorities in the initial phase of the work.

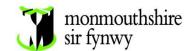
7. AUTHOR:

David Jones, Head of Public Protection e-mail: davidjones3@monmouthshire.gov.uk

Telephone: 01633 644101



Agenda Item 5



SUBJECT: CARE HOMES FOR OLDER PEOPLE AND COVID-19

MEETING: Adult Select Committee

DATE: 2nd July 2020

DIVISION/WARDS AFFECTED: AII

1. PURPOSE:

To provide the Select Committee with an overview of care homes for older people in Monmouthshire and the impact of coronavirus.

2. RECOMMENDATIONS:

That members note the report.

3. KEY ISSUES:

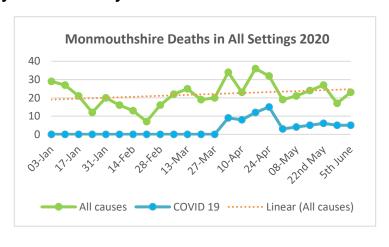
- (a) **Background:** Set out below are the key features of care homes in Monmouthshire:
 - There are 16 independent sector care homes in Monmouthshire providing care for people over the age of 65, alongside Severn View and Mardy Park.
 - The care homes in Monmouthshire cover a wide spectrum ranging from small converted care homes to large modern purpose built homes operated by corporate organisations.
 - There are 659 useable independent sector bed spaces available in Monmouthshire.
 - Based on vacancy data provided by homes to the Council weekly, in 2019/20 homes had an average occupancy of 92%.
 - Of those bed spaces, a point in time snapshot for February 2020 the Council commissioned an average of 168 beds. This equates to 26% of beds at the time, which is consistent with analyses in previous years. Given the level of market penetration the Council is merely a material influencer in the care homes market.
 - **(b)** Coronavirus and Monmouthshire Care Homes: Looking at the wider picture, the Gwent area was the first in Wales to have reported cases and deaths due to Covid-19. Within Gwent, there has been a discernible pattern in numbers of Covid-19 cases in care homes; which peaked some weeks after peaks in numbers of hospital cases.

Within Monmouthshire there have been 27 deaths in care homes. The tables and graphs below show:

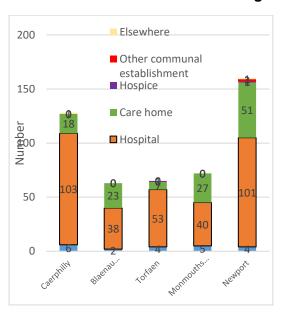
- The dates when Covid-19 deaths peaked in care homes in Monmouthshire.
- Care home deaths in Monmouthshire, relative to all deaths.
- The number of deaths in all settings, including care homes across all Gwent local authorities.
- The impact on occupancy levels.

ONS: Deaths by local authority as at 5th June 2020

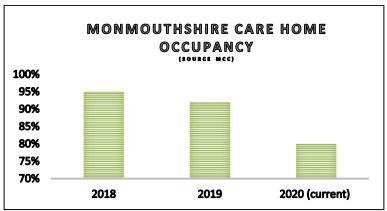
Week	Deaths in Care Homes			
week	All causes	COVID-19		
20-Mar	3	0		
27-Mar	7	0		
03-Apr	6	0		
10-Apr	4	1		
17-Apr	7	2		
24-Apr	7	3		
01-May	6	2		
08-May	8	1		
15-May	10	4		
22-May	11	5		
29-May	9	4		
05-June	8	5		



ONS – Gwent LA Covid-19 deaths by place of death, for deaths occurring up to 5th June and registered up to 13th June 2020



LA Area	Home	Hospital	Care home	Hospice	Other communal establishment	Elsewhere	Totals
Caerphilly	6	103	18	0	0	1	128
Blaenau Gwent	2	38	23	0	0	0	63
Torfaen	4	53	7	1	0	0	65
Monmouthshire	5	40	27	0	0	0	72
Newport	4	101	51	1	2	1	160
ABUHB Area	21	335	126	2	2	2	488



Currently care home occupancy stands at an average of 80% across Monmouthshire. Whilst occupancy levels in most care homes remain high, factors in a very small number such as a new large care home starting to take placements, restrictions on admissions due to the Escalating Concerns process as well as Covid-19 make the average vacancy level much lower.

(c) <u>Key Issues for Care Homes</u>: There have been a number of issues that have had a significant effect on care homes and their ability to respond to the pandemic:

Partnership with Providers: Right from the outset care homes were presented with a monumental challenge. They became responsible for the health and well-being of our most vulnerable citizens at a time of unprecedented anxiety about a deadly virus. With that came a raft of requirements that needed to be responded to immediately, combined with a stark reminder of the consequences should these not be adhered to.

As an authority, our approach has been one based on an understanding that we all have important roles to play in an unprecedented and challenging situation and that this will be best achieved in partnership. We have worked on the basis of positive and productive relationships built up over time and have actively communicated with providers, to provide safe and trustworthy places to seek advice and support and also reliable flows of information in a quickly changing environment. Some of the specific ways this has been achieved are:

- The Commissioning Team undertaking regular, often daily, check-ins with care providers.
- Issuing a Daily Report to senior managers updating on the number of cases within care homes in Monmouthshire.
- Weekly virtual get togethers held with care at home providers, care homes for older people and younger adult support providers.
- Officers from Environmental Health, Finance, Business support, PPE all playing an active role.

Personal Protective Equipment (PPE): At the outset of the pandemic the provision of Personal Protective Equipment was a source of real anxiety for care home providers. There was a lack of clarity about the equipment required and it became very difficult to source. When supplies became available via the Welsh Government a weekly PPE ordering and delivery system was introduced. The system has worked well and feedback suggests that it has offered the necessary peace of mind.

Infection Control: Care homes have been issued with a plethora of guidance relating to various aspects of infection control. To support providers, Environmental Health Officers have built relationships with care homes and have acted as a source of advice on infection control, guidance interpretation, the use of PPE and testing.

This relationship and advice has been particularly important with the more specific and more intensive work undertaken with care homes with outbreaks of coronavirus.

In addition, the Gwent Standard Operating Procedure requires that anyone being discharged from hospital to a care home must have had a Covid-19 test with a negative result within 48 hours prior to discharge; a fourteen day isolation period will then be required.

Testing: Over the weeks the testing regime has changed and with it responsibilities. Initially there was limited information provided to care homes about mass testing visits

and what to expect. There is also concern about the time taken for test results to be provided.

The introduction of Test, Trace and Protect has generated an anxiety amongst care home operators. The immediacy of the response to someone testing positive and needing to leave a shift, alongside the potential impact of any further staff needing to isolate due to contact could prejudice operational viability. Care home providers are naturally concerned about this possibility.

Financial Sustainability: It is vital that social care providers are able to provide care and support during and after the period of the pandemic and as such we have a role in ensuring their financial sustainability and that they have access to sufficient resources, eg. staffing. From the outset a message of support that the Council would assist if they are experiencing any financial difficulty was given.

The Welsh Government made a Hardship Fund available and enabled social care providers to make claims via the Council for any additional costs as a result of Covid-19. The Council has supported providers through the claims process and has provided specific financial support to providers particularly affected by coronavirus.

In addition, the Council's Business Support Adviser attends Get Togethers and has made information regarding business grants and support available.

4. REVIEW AND NEXT STEPS

We are operating in a period of uncertainty. Whilst we might now be on the 'downward curve' of the pandemic we do not know whether the more robust Test, Trace, Protect regime will potentially expose previously asymptomatic cases and contacts and indeed, whether and when we might endure a second wave. It is unlikely that we will go back to 'normal' at any time soon, if ever.

In our 'new normal' there will inevitably be uncertainty amongst providers about the sustainability of the sector and there may be an altered public perception of care homes that may affect care management and admission decisions.

We have reviewed progress on our interface with care homes in the pandemic to date and looked at the likely landscape in the next few months and would suggest the following as priority areas to be pursued:

- Continue to have an open and multi-faceted partnership approach with care providers. The blend of individual conversations, virtual meetings and electronic communications has elicited a high percentage response from providers across the sector.
- Work with the sector to understand likely demand and capacity for care home beds as we move forward and consider how this can be responded to in a mutually supportive manner.
- Ensure that stocks of PPE continue to be available to providers as needed and that the system of distribution remains in a manner that is proportionate to that need.

- Keep in place the system of active and prompt support to providers regarding infection control. Key Environmental Health Officers have developed relationships with providers and have become a trusted source of support in an unclear and changing environment.
- Continue to offer a suite of financial support options to ensure the financial sustainability of the sector and be proactive in making such offers where sustainability is considered likely to be an issue. Lobby Welsh Government to ensure that funding is available to providers post 30th June 2020 and give consideration to future Council funding.
- Explore pragmatic solutions to the impact the requirement for 28 days post confirmed case to have elapsed before new admissions to care homes are possible with the sector.
- Influence an improved communication flow around testing and test results for care providers to enable them to be better informed of timescales, procedures and expectations.

5. RESOURCE IMPLICATIONS:

There are no financial implications directly arising from this report. However, as a Council we need to be mindful of the potential financial impact of Covid-19 on care homes and social care providers generally. Specifically it would be prudent to give consideration to funding issues post the provision of Welsh Government funding and the impact of the 28 days post Covid-19 requirement.

6. CONSULTEES:

Social Care and Health DMT – 24th June 2020

7. BACKGROUND PAPERS:

Office for National Statistics website

8. AUTHORS:

Shelley Welton, Lead Commissioner, Transformation Ceri York, Service Manager, Commissioning and Disability Services

9. CONTACT DETAILS:

E-mail: shelleywelton@monmouthshire.gov.uk

ceriyork@monmouthshire.gov.uk



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Monmouthshire Select Committee Minutes

Meeting of Adults Select Committee held at The Council Chamber, County Hall, The Rhadyr, Usk, NP15 1GA on Tuesday, 10th March, 2020 at 10.00 am

Councillors Present

Officers in Attendance

County Councillor L. Brown (Vice Chairman)

Eve Parkinson, Head of Adult Services Hazel llett, Scrutiny Manager

County Councillors: R. Edwards, R. Harris,

M. Powell and S. Woodhouse

Mr. T. Crowhurst – The Disability Advice Project

Also in attendance County Councillors:

APOLOGIES: County Councillors F. Taylor, L. Dymock, M. Groucutt, P. Pavia and C. Bowie (MIND).

1. Declarations of interest

None.

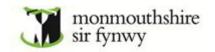
2. Public Open Forum

3. <u>Scrutiny of the Care Inspectorate Wales Report on Monmouthshire's Older Adults Inspection</u>

The report being brought to the committee presented the findings and proposals for improvement of a joint inspection undertaken by Care Inspectorate Wales and Health Inspectorate Wales Scrutiny on Monmouthshire's older adult services. The chair reminded members that the role of the scrutiny committee was to consider whether the service was performing and to offer their comments for inclusion in the Council's formal response to the report.

The Head of Adult Services presented her cover report and advised that the additional supporting documents 1b provided the departments' response and 1c, the full inspection report. The chair confirmed that the committee would discuss the appendix 1b in full rather than the full report, because it helpfully highlighted the main findings of the report and the way forward for each recommendation.

The Head of Adult Services discussed the report 1b in great detail talking some questions from members through her presentation. She explained that the report was aligned to the Social Services and Well-being Act requirements. She highlighted that overall, the service was satisfied with the findings of the report and felt the inspection was fair and that the service is performing fairly well. She confirmed that the inspection that was held in May 2019 had been extremely thorough and that case workers had



interviewed staff, service users, families, care providers and the prisons to inform the report. She confirmed that the service area officers regularly meet inspectors as a matter of course.

Challenge:

Has telecare improved and is it still relevant with other technologies?

Careline equipment has improved and there is the potential for assisted technologies to really assist in the preventative agenda and to help with rural isolation. We are constantly looking at what sort of things would keep people in their homes and their communities. We believe that technology similar to Alexa may enable people to join a conversion, even if they are housebound, e.g. 6 people who are housebound and want to watch a football match. We would like to see those who are isolated to meet up if there are shared interests, but if they cannot, this is an alternative social interaction. There is also the potential for intergenerational work where younger people could teach people how to use the technology. New technology such as 'Armed' can identify if someone is about to have a fall, for example by identifying that the blood pressure has dropped and can then advise the person to sit down and rest.

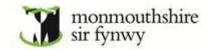
 In terms of hospital discharges, is there effective communication between staff and social services, as my personal experience with a family member was not positive - no discussion with the family and no opportunity to have the conversation about needs and home circumstances.

We have our own team of staff who go into Nevill hall every day to see and assess our people. We know these people, their families, the services around the person. This type of in-reach, person centred approach where you know the person, their history, their strengths and they know you and feel comfortable with you is really important to us. Previously, the situation was that someone who didn't know them or anything about their personal situation would assess them and often in the wrong place. We feel it's important to go to the person's home.

 There hasn't been any mention of housing the document, and yet when you talk about quality of life for people, it's such a critical part, so what integration goes on with housing colleagues?

We work very closely with housing colleagues and housing associations. When Welsh Government's 'Healthy Wales' report was published, initially it seemed that each service was looking to fulfil their role, but independently, rather than integrating. We now have 'community conversations' where we consider the strengths and weaknesses of a community and housing is an integral part of this. The loneliness and isolation work we've done has particularly been with housing colleagues. For example, Carline sits within Housing services, so there is a lot of overlap and whilst it didn't seem to feature in the inspection report, it's not a reflection on how we work together as that relationship is positive.

 I recognise that social housing tends to incorporate disability requirements, but new private housing doesn't seem to consider the need for 'homes for life', for example, a downstairs shower room and toilet.



I agree, we should be building 'homes for life'.

 You have mentioned recruitment being an issue and your report refers to winter monies. Is there a possibility of that money running out?

We have taken a variety of measures to mitigate that. We put a lot of effort into recruiting after the Christmas period. The monies have kept us afloat but it has been hard to manage on the ground. We are fairly confident we can manage it.

It seems that you are doing well but under not great circumstances. Is there
anything that we can support you with?

I think it's very important to say thank you to staff. Staff work in a phenomenally difficult role in very difficult circumstances. We know staff care, but sometimes it's nice to hear that you are doing a great job. We encourage staff to be kind and compassionate to each other in work. A quality workforce that is valued and respected and people really appreciate a simple thanks.

 Have other councils had the same inspection and how did they fare? How do we compare?

Not everyone is inspected at the same time, Torfaen was inspected at the same time as us. As we work with our colleagues across Wales, we read each other's reports to see what we can take form them and we also share good practice. We are fairly content with the findings of our service and feel that we are performing well.

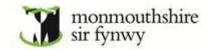
Do we have enough staff? Particularly given the flooding and the coronavirus?
 Are we adequately prepared for the rurality of this county, supplies, medicines?
 Are we able to cope?

We are doing our contingency planning now and we are going be looking at how we care for people with the virus and what we do if we have a depleted workforce. We're looking at what we really need qualifications wise for practical everyday tasks. For example, do you really need a food hygiene certificate to heat a meal? Can somebody light a fire? We are working with colleagues to look at how we can best support people.

When you assess people and talk to them about what matters to them, do you
also seek the views of loved ones and family? I have concerns that sometimes
people who are very independent may underplay their needs.

If a person has capacity, what matters to the person is obviously very important, but we also ask their family and spouses. If we are working with people who haven't got capacity, then we are relying in the family to give us the insight of what matters to them, to offer a window into their life and tell us what a good day would look like.

Who undertakes the risk assessments for falls?



Assessing the risk for falls is everyone's business. We all do those kind of assessments on rugs and slippers and so forth, but we also have a specialist falls team who can put in a programme to minimise risk and teach them what to do if they do fall.

When will the safeguarding team be fully staffed?

We have recruited to the positions, so we are just waiting for people to finish their notice period with their previous employers.

 How do you ensure as best as you can that there is continuity in carers? Do you monitor external agencies?

It's an issue at the moment and we can't always guarantee that continuity, but our plans to go 'place based' from a care perspective would help this a lot. You only need to have one or two members of staff ring in sick to need to redo the schedules. We're on our way with this, but we are not there yet.

 The Gwent Mental Health out of hours emergency number over the Christmas period was not taking calls. Are you aware of this? I had an urgent case to discuss and I received no feedback, so I couldn't report to people progress.

I will discuss this with other heads of service to see if they had a problem, but this may well have been a capacity issue.

• What is the discharge process if someone visiting Wales is taken ill and requires hospitalisation? Is the person assessed prior to discharge and is there liaison with the social services department of the council where that person lives, particularly if it is England? My experience of this was very negative, in that Occupational Therapists (OT) staff at the Royal Gwent Hospital claimed they were unable to liaise with the Occupational Therapists at the council where my visitor lived. Is there a gap in service provision and a lack pf joint working?

This is difficult for me to comment, but we have our own OT's in hospitals and they would support them, but even if there isn't that structure in place, there are teams within hospitals who should be assessing and liaising with the person's host county. In effect, they should be supporting anybody, regardless of where they live and that is what should happen.

• I would like to state that we don't have treatment facilities in Wales for rare diseases and Welsh people are being discriminated against by not being able to access centres of excellence in England. My other question is around whether we are supporting carers, because many are unidentified?

I cannot answer the first point, but in terms of supporting carers, yes we do, however, we need to be more proactive in finding out who these people are. When we know who they are, we try to hear their voice as well as the patients and we try to support them in the best way that suits them, whether that involves offering respite or support for dementia. The support needs to be bespoke to the individual.

Outcome and Chairs Conclusion:

The committee has discussed this report in great detail and has posed some challenge. We have also offered some comments around housing, safeguarding, telecare and continuity of care. The recommendation would be that our comments are taken into account. We would like to thank all the staff for doing their job in very difficult circumstances, particularly most recently and in the current climate. We will ensure the Executive is aware of our discussions around the very valuable work that our staff undertakes.

4. Confirmation of Minutes

Minutes of 20th January 2020 ~ agreed.

5. Adults Select Committee Forward Work Programme

The work plan was discussed, members being informed that the date for the workshop with Aneurin Bevan University Health Board will need to be rearranged as a result of the coronavirus and availability of key individuals. The Scrutiny Manager will inform members and advise the new date as soon as possible.

6. Council and Cabinet Forward Work Planner

The programme was noted and no requests were made for reports to be brought to the committee.

7. Next Meeting

Tuesday 21st April 2020 at 10.00am.

The meeting ended at 11.45 am.

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Agenda Item 7

Cabinet, Council and Individual Cabinet Member Decisions (ICMD) Forward Plan

Monmouthshire County Council is required to publish a forward plan of all key decisions to be taken. Council and Cabinet items will only be considered for decision if they have been included on the planner no later than the month preceding the meeting, unless the item is considered urgent.

	Committee / Decision Maker	Meeting date / Decision due	Subject	Purpose	Author	Date item added to the planner	Date item originally scheduled for decision
	Council	01/03/22	LDP for Adoption	Check Date	Mark Hand	23/01/20	
	Cabinet	02/06/21	Budget Monitoring report - month 12 (period3) - outurn	The purpose of this report is to provide Members with information on the forecast outturn position of the Authority at end of month reporting for 2020/21 financial year	Peter Davies/Jon Davies	02/04/20	
	Council	01/06/21	Final Deposit Plan for submission to WG	Check Date	Mark Hand	23/01/20	
Dage 1	Cabinet	14/04/21	Welsh Church Fund Working Group meeting	The purpose of this report is to make recommendations to Cabinet on the Schedule of Applications 2020/21 - meeting 9 held on 4th March 2021	Dave Jarrett	02/04/20	
7	Council	04/03/21	Council Tax Setting		Ruth Donovan	02/04/20	
	Cabinet	03/02/21	Welsh Church Fund Working Group meeting	The purpose of this report is to make recommendations to Cabinet on the Schedule of Applications 2020/21 - meeting 8 held on 14th January 2021	Dave Jarrett	02/04/20	
	Council	14/01/21	Deposit Plan	Endorsement of Deposit Plan	Mark Hand	23/01/20	
	Council	14/01/21	Council Tax Reduction Scheme		Ruth Donovan	07/04/20	

Welsh Church Fund Working Group meeting The purpose of this report is to make recommendations 16/12/20 to Cabinet on the Schedule of Applications 2020/21 -Dave Jarrett 02/04/20 Cabinet meeting 7 held on 3rd December 2020 Council Tax base and associated matters To agree the Council Tax Base figure for submission to the Welsh Government, together with the collection IMCD 09/12/20 Ruth Donovan 02/04/20 rate to be applied for 2021/22 and to make other necessary related statutory decisions Budget Monitoring Report - month 7 (period 2) The purpose of this report is to provide Members with information on the forecast outturn position of the 02/12/20 Peter Davies/Jon Davies 02/04/20 Cabinet Authority at end of month reporting for 2020/21 financial year. Local Housing Market Assessment Update 04/11/20 Mark Hand 04/11/20 Cabinet Welsh Church Fund working group The purpose of this report is to make recommendations Cabinet Cabinet 04/11/20 to Cabinet on the Schedule of Applications 2020/21 -Dave Jarrett 02/04/20 meeting x held on x x 2020 Gypsy Traveller Accommodation Assessment 2020 **Cabinet** 07/10/20 Mark Hand 23/06/20 Welsh Church Fund Working Group The purpose of this report is to make recommendations Cabinet 07/10/20 to Cabinet on the Schedule of Applications 2020/21 -Dave Jarrett 02/04/20 meeting x held on x x 2020 Housing Register Review ICMD 23/09/20 Mark Hand 23/06/20 MCC Audited Accounts (formal approval) To notify Council of completed Audit process and 10/09/20 Peter Davies/Jon Davies Council 02/04/20 resultant accounts - To go to Audit Committee ISA 260 report - MCC Accounts - attachment above 10/09/20 Peter Davies/Jon Davies 02/04/20 Council

Youth Service Cabinet 02/09/20 Ian Saunders 15/06/20 Financial Sustainability Report 29/07/20 Cabinet Jonathan S Davies 12/06/20 Longterm Homelessness Solutions 29/07/20 Cabinet Mark Hand 15/06/20 Climate Emergency Update 16/07/20 Hazel Clatworthy 10/06/20 Council CEx Report Council 16/07/20 Matt Phillips 18/06/20 Cabinet decision re Gilwern Council 16/07/20 Matt Phillips 27/05/20 Welsh Church Fund Working Group meeting The purpose of this report is to make recommendations Cabinet 15/07/20 to Cabinet on the Schedule of Applications 2020/21 -Dave Jarrett 02/04/20 meeting 1 held on 30th June 2020 Outdoor Education - Service Update 15/07/20 Marie Bartlett Cabinet 09/07/20 Public Toilets Cabinet 15/07/20 5G Rural test bed Cabinet 15/07/20 Cath Fallon/Frances O'Brien

COVID-19 Evaluation of Recovery Phase and Establishing Aims for Response Stage Cabinet 01/07/20 17/06/20 Home to School Transport Policy 01/07/20 Cabinet Deferred 20/05/20 Household Waste Recycling Centres 01/07/20 20/05/20 Cabinet Deferred Revenue and Capital Monitoring Outturn To provide Members with information on the outturn Cabinet 17/06/20 Peter Davies/Jon Davies 02/02/20 position of the Authority for the financial year LDP Strategy Cabinet 17/06/20 Mark Hand 20/05/20 Licensing Act Policy Council 04/06/20 Linda O'Gorman Estyn Report Council 04/06/20 Will Mclean Safeguarding Covid19 Position Statement Council 04/06/20 Julie Boothroyd Chief Officer, CYP Annual Report' 04/06/20 Will Mclean 11/03/20 Council 04/06/20 Refit Programme Ian Hoccom 28/02/20 Council

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Safeguarding Cabinet 27/05/20 Julie Boothroyd Active Travel and Town Centres Cabinet 27/05/20 Paul Sullivan 14/05/20 Mark Hand 19/09/19 Council LDP Preferrred Strategy Endorsement of final preferred strategy 14/05/20 Constitution Review Matt Phillips 14/08/19 Council The purpose of this report is to make recommendations Cabinet 06/05/20 Welsh Church Fund Working Group to Cabinet on the Schedule of Applications 2020/21 -Dave Jarrett 02/04/20 meeting 1 held on 2nd April 2020 GUARANTEED INTERVIEWS FOR CARE NCMD 08/04/20 **Gareth James** 23/03/20 LEAVERS Momouthshire Registration Service Collaborative **ICMD** 08/04/20 Jennifer Walton 23/03/20 Working Agreement Staffing re-alignment: Community Hubs and Contact 01/04/20 Cabinet Matt Gatehouse 11/03/20 Centre EAS Business Plan Cabinet 01/04/20 Will Mclean 04/03/20 Cabinet 01/04/20 Gareth James 28/02/20 Guaranteed Interview Scheme for Care Leavers

for approval of the adoption of a High Street and Retail Non Domestic Rates: High Street and Retail Rate **ICMD** 25/03/20 Rate Relief Scheme for 2020/21, in accordance with Ruth Donovan 12/02/20 Relief 2020/21 Welsh Government guidance. **ICMD** 25/03/20 Contract Extension Tracey Harry 14/02/20 05/03/20 Sally Thomas 23/01/20 Council Pay Policy 05/03/20 Annual Safeguarding Report Julie Boothroyd 06/02/20 Council Page Council 05/03/20 Strategic Equality Plan Alan Burkitt 26/09/19 N Council 05/03/20 LDP Preferred Strategy Endorsement to consult on Preferred Strategy Mark Hand 23/01/20 Council 05/03/20 Council Tax Resolution To set budget and Council Tax Ruth Donovan 18/04/19 Mid Term Review of the Corporate Plan Council 05/03/20 Matt Gatehouse **Investment Committee** Cabinet 04/03/20 Peter Davies 13/02/20 CHARGING APPLICANTS FOR THE MONITORING **ICMD** 26/02/20 Phil Thomas 06/02/20 OF SECTION 106 AGREEMENTS

ICMD 26/02/20 Non Domestic Rates - Application for Hardship Relief Ruth Donovan 14/01/20 The purpose of this report is to present to Cabinet for approval the 2020/21 Investment and Fund Strategy for 2020/21 Education and Welsh Church Trust Funds Trust Funds for which the Authority acts as sole or Cabinet 19/02/20 **Dave Jarrett** 18/04/19 Investment and Fund Strategies custodian trustee for adoption and to approve the 2019/20 grant allocation to Local Authority beneficiaries of the Welsh Church Fund Cabinet 19/02/20 Mid Term Review of the Corporate Plan Matt Gatehouse The purpose of this report is to make recommendations Cabinet 19/02/20 Welsh Church Fund Working Group to Cabinet on the Schedule of Applications 2019/20, Dave Jarrett 18/04/19 meeting 7 held on 5th December 2019 Consideration of Final Revenue and Capital Budget Cabinet 19/02/20 Peter Davies 03/10/19 Proposals Nikki Wellington Cabinet 19/02/20 Proposal to change the school funding formula. Cabinet 19/02/20 Marie Bartlett 18/10/20 Strategic Review of Outdoor Education Rights of Way Improvement Plan (ROWIP) review/ To seek approval of the Review of the ROWIP and Cabinet 19/02/20 Policy Statement - Results of statutory consultation Matthew Lewis 18/07/19 associated policies and proposed Final Plan Various roads, county wide Amendment No. 1 of **ICMD** 29/01/20 Paul Keeble 13/01/20 consolidation order 2019 (part 2)

	Council	16/01/20	Council Tax Reduction Scheme		Ruth Donovan	18/04/19	
	Council	16/01/20	Mid Term Review of the Corporate Plan		Peter Davies	26/09/19	
	Council	16/01/20	Local Development Plan Preferred Strategy		Mark Hand	06/09/19	
	Council	16/01/20	Constitution Review		Matt Phillips	14/08/19	
Page	Council	16/01/20	Safeguarding - Annual Report to Council		Jane Rodgers	20/06/19	
24	Council	16/01/20	Proposed Development Company		Deb Hill-Howells	16/09/19	
	ICMD	15/01/20	Archaeology Planning Advice	Adoption post-guidance	Mark Hand	19/09/19	Deferred
	ICMD	15/01/20	SPG S106 guidance note	To clarify how S106 contributions are calculated	Mark Hand	01/05/19	Deferred
	Cabinet		Ethical Employment code of practice - Approval Paper Draft		Scott James	08/11/19	
	Cabinet	08/01/20		The purpose of this report is to provide Members with information on the forecast outturn position of the Authority at end of month reporting for 2019/20 financial year.	Mark Howcroft	18/04/19	

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	Cabinet	08/01/20	Redundancy implications within MonLife	Marie Bartlett	07/11/20	
	Cabinet	08/01/20	Homelessness Report	Deb Hill-Howells	07/11/19	
	Cabinet	08/01/20	Primary School Places Reiview in Caldicot	Matthew Jones	02/10/19	
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