

Monmouthshire Select Committee Minutes

Meeting of Adults Select Committee held at County Hall, Usk - Remote Attendance on Tuesday, 27th July, 2021 at 10.00 am

Councillors Present

County Councillor S. Howarth (Chairman)
County Councillor L. Brown (Vice Chairman)

County Councillors: R. Edwards, R. Harris,
M. Powell, S. Woodhouse, M. Lane

Also in attendance: C. Bowie and T. Crowhurst

Officers in Attendance

Julie Boothroyd, Chief Officer Social Care,
Safeguarding and Health
Eve Parkinson, Head of Adult Services
Hazel Ilett, Scrutiny Manager
Robert McGowan, Policy and Scrutiny Officer
Emma Davies, Performance Officer

APOLOGIES: None

1. Declarations of interest

Chris Bowie declared a non-prejudicial interest as Chief Exec of My Monmouthshire, as it receives financial assistance from the MCC funding stream.

2. Public Open Forum.

No members of the public were present.

3. Performance Reporting

Emma Davies presented the report and answered the members' questions with Julie Boothroyd and Eve Parkinson.

Challenge:

What is the position for vulnerable residents who have difficulty connecting? How do we deal with that?

Staff have supported those who need help or assistance to access the technology or get the right kit. There has been very high uptake, exceeding expectations. An unintended benefit has been that it has given people other skills: so, as well as meeting physically, there is now the ability to meet virtually. People have taken to everything really well.

Do we know the amount or percentage of people that haven't engaged or have lost patience?

We aren't aware of anyone who has said that that is an issue. If anyone has had difficulties, we have helped them through it. The technology really has been more of an enabler than a barrier for people.

Are there any plans that can be shared about the future of My Mates?

We are currently looking at what we should be doing next, by talking to people. We're finding that there is a lot of support for the newer ways of working. As well as virtual work, we've done many things physically, such as one-to-one visits and taking people out. Now, as restrictions are

easing, friends and groups are meeting. Things have been a lot more person-centred over the past year. A number of people and families say that they like this way better, which we are bearing in mind in discussions about how we will work in the future.

Many are still volunteering – could we hear more about that?

People have put in an amazing effort to this. From the perspective of health and social care, the joining of work with the community and partnerships team has been really helpful – the coordination has been very strong. A lot of very good work was going on in the volunteer sector pre-pandemic, so we were in a good position to build on that when the pandemic hit. The numbers have gone up and down, as expected, but there's a strong foundation in place. The network of health and social care, community and partnerships and third sector has bolstered that. An example is that we now have a social worker based in the community and partnerships team, which has added great depth to their ability to act across that sector. We have a strong, embedded infrastructure that should manage the peaks and troughs.

Could we have a comment on the percentages and targets in the summary table at the end regarding reablement after 6 months?

That is one of our national indicators, which we are requested to record for benchmarking purposes. We haven't done so this year because the information hasn't necessarily been robust enough for the local authorities in Wales to share – ordinarily, there would have been that comparison with other authorities. Regarding the change this year, it's one of the national measures that has been updated, so we've been asked to record it in that slightly re-worded way. We've included it so that you have the information but it doesn't necessarily compare with the way that the measure was recorded last year – the figures wouldn't necessarily lead on from each other. The reablement process aims to help people to become independent following a period of needing support, so it's a measure of how many people who have been through that system have gone on to independence.

How has Monmouthshire gone out of its way to capture disabled people who aren't on the radar of social services or leisure?

This is a very important point: not everyone is on our radar, or needs to be. One of our core principles is to help people to live their own lives. Over the years we've tried, at a grassroots level, to understand communities, and provide support where needed but not necessarily create dependence through service. Therefore, we don't actively seek people. If people move towards us, or if they are signposted to us from services such as leisure, we will help in a proportionate way. But we don't want to actively interfere in people's lives. The combined work with community and partnerships has allowed us to have many more 'eyes and ears' in the community, making it easier for people to be signposted to us. This will continue to be valuable going forward. Work such as street monitors has broadened our ability to be aware of those who might need help, and support them in more appropriate ways than solely going through the social services route.

It would be helpful to know – separate from the report – what the underlying problems are and how we can help as a committee.

The report in the next item will flesh out and describe these issues.

The next 5 year plan will be totally different – how will you judge that? What direction will it take? How much influence will Welsh Government have?

There are many factors for us to consider, such as the Wellbeing of Future Generations Act, the Local Government and Elections Act, etc. There is also a great deal of learning from the last 18 months to consider. We started a piece of work on this recently; much like the Corporate Plan annual update, we are putting together an annual review of the pandemic and its effects, our learning, and the changes it has wrought. This will all contribute to the review of the Corporate Plan – that review would happen now anyway, as it's due for renewal, but the pandemic ensures it will be a bigger and more far-reaching reconsideration. Some fundamental things will continue to be a focus.

Chair's summary:

The committee agreed to the recommendations.

4. Annual Report of the Chief Officer for Social Services

Julie Boothroyd presented the report and answered the members' questions with Eve Parkinson.

Challenge:

Has Social Services been badly affected by the 'Pingdemic' in recent weeks?

It's been more of a collateral problem. We've had some of it in our own parts of the business but not significantly. What has been challenging is when our commissioned providers have been affected by it, and then we have experienced – in the short term – challenges with handing back or packages not being able to be fulfilled by the independent sector. We have then had to support them, point them in the direction of other services that might be able to pick up, or we have incorporated those into our own.

What's happening with regard to, for example, someone needing to leave hospital and go into a care home – do they have to take a LFT before they go?

The care home sector has been incredible through this time. The process around hospital discharges is now very rigorous: everyone has to have a PCR within the 48 hours prior being moved to a residential setting, with a period of isolation once they've transferred over. The efficiency has improved markedly since the early days. Over the past year, we've consolidated some of the relationships with our providers, which includes weekly meetings with them. The guidance has sometimes been challenging, and it can change very quickly. We've given a lot of support and direction regarding the hardship fund. Generally, feedback from providers has been very positive. We are seeing a slight increase now in people going into placement. Regarding PPE, we've done a sterling job. No one has been left without. We have done regular deliveries to all of the sector (care home and residential). Also, if any of our commissioned providers has run short, we've stepped in and supported them. We deliver a huge amount of stuff around the patch regularly.

Are Care At Home providers still using masks and aprons, etc.?

There is no change: everyone is still wearing the same PPE as they have been throughout. Additionally, everyone now does twice-weekly lateral flow testing and weekly PCR, and the residential settings have regular whole-home testing. We have weekly meetings about the residential sector to identify if there have been any incidences, what tracking and tracing needs to do, if any support is needed around infection control, etc.

Who are the 'providers' described as the main source of reports in this period?

This is a term for anyone who delivers a service, so it could be independent sector, residential care homes, Llanarth Court (one of our main contributors to adult safeguarding referrals), etc.

There seems to be a discrepancy between some of the figures given. What about the 51% of enquiries dealt with in the first 7 days?

The figures aren't necessarily meant to total up in a way that is consistent, as some of the referrals into our system get screened out – but, yes, it would be useful for us to either take out the 'screened out' figures, or clarify the different numbers and percentages where they subsequently don't match. We will make that amendment. The 51% is one of those metrics where we need to satisfy a Welsh government target. We think it is an inappropriate one, as it depends on how the system is set up. In Monmouthshire, we have a central safeguarding team but each of our teams that run social work services also deal with safeguarding. Sometimes, pulling that data together to give a proper representative figure isn't quite recorded properly. Where it says that enquiries haven't been followed up within 7 days, they will have been after that time. The teams will have their safety plan in place. This is about metric reporting against a data point – each of those will be elaborated on and fully explained for the report to council.

Have we retained or increased recruitment? What are some of the issues?

The section on workforce is not complete but it will be in the subsequent main report. It will cover how many staff we employ, the issues we might have had and are facing now in this sector. The systems and processes that we have developed for recruitment over the past year have been really useful, especially regarding care at home. We have increased our care at home headcount significantly to manage some of the problems in the independent sector, and the demand. Despite recruiting constantly, we still can't fulfil 1100 hours per week. These are out to 'brokerage': people waiting for packages of support or care in reablement and care at home. Much of this is that the numbers have increased but also the complexity of the effect of lockdown on people has increased significantly, hence why we have declared 'red' in reablement since early in the year and now also from a care at home perspective. Though we are recruiting as fast as we can, the complexity and numbers grow every week. We have had temporary funding through various streams but our ability to recruit to those temporary posts have been very compromised, partly due to a shortage in the market for various professions and people not wanting to move to a temporary post, rather than a permanent one. We have therefore sometimes had to hand some of the money back and are in a more difficult situation now, in fact, than we were last year.

Does a new formula for recruitment need to be considered, therefore?

From a professional point of view, our retention is quite good. Our rurality and demography can add to the problems in Monmouthshire but shortages in certain occupations is a national problem. It is encouraging that we get interest in our permanent posts. A lot of work is going on into how we improve recruitment and retention, and problems that we have with care at home. One problem we have is with 'growing our own' i.e. staff come from outside the county, where it's cheaper to live. We are considering other options such as microcarers, how to improve the direct payment offer, etc. But it's hard to focus on how we promote and be proactive in our models and how we deliver when we are in the thick of the frontline.

On the Adults Safeguarding Report, what is the staffing blip in January 2021?

We will need to check this.

Chair's summary:

The committee agreed the recommendations, and added another to Cabinet: that council reports should include a one-page summary at the start, and provide numbers wherever percentages are given.

5. Adults Select Committee Forward Work Programme

A date for the Gypsy & Travellers workshop will be organised with officers.

6. Cabinet and Council Forward Plan

7. To confirm the minutes of the previous meeting

The minutes were confirmed and signed as an accurate record.

8. Next Meeting: 21st September 2021

The meeting ended at **11.42 am**