

Public Document Pack

MONMOUTHSHIRE COUNTY COUNCIL

**Minutes of the meeting of Adults Select Committee held
at Council Chamber, County Hall, The Rhadyr, Usk, NP15 1GA on Wednesday, 10th
January, 2018 at 10.00 am**

PRESENT: County Councillor S. Howarth (Chairman)
County Councillor (Vice Chairman)

County Councillors: L.Brown, L.Dymock, M.Groucutt, P.Pavia and
J.Pratt

Also in attendance County Councillor V. Smith:

OFFICERS IN ATTENDANCE:

Julie Boothroyd	Head of Adult Services
Claire Marchant	Chief Officer Social Care, Health & Housing
Wendy Barnard	Democratic Services Officer
Hazel Ilett	Scrutiny Manager
Sian Schofield	Management Information Officer
Tyrone Stokes	Accountant

APOLOGIES:

County Councillors R. Edwards and S. Woodhouse

1. Declarations of interest

County Councillor P. Pavia declared a personal, non-prejudicial interest as Research and Policy Lead, ADSS Cymru.

2. Public Open Forum

Mr. P. Farley, Chair of Chepstow Senior Citizens Welfare Trust was present in connection with agenda item 7 "Cabinet Member's Draft Response to Aneurin Bevan University Health Board Consultation on Older Adult Mental Health Services.

3. To confirm the minutes of the previous meeting held on 30th October 2017

The minutes of the meeting held on the 30th October 2017 were confirmed and signed as a true record.

4. Medium Term Financial Plan 2018/19 to 2021/22 and Draft Budget Proposals 2018/19 for consultation

Context:

- To highlight the context within which the Medium Term Financial Plan (MTFP) will be developed for 2018/19 to 2021/22.
- To agree the assumptions to be used to update the MTFP, and provide an early indication of the level of budget savings still to be found.
- To receive an update with the implications arising out of the provisional settlement announcement of Welsh Government.
- To consider the 2018/19 budget within the context of the four year Medium Term Financial Plan (MTFP) to be incorporated within the emergent Corporate Plan.

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- To receive detailed draft proposals on the budget savings required to meet the gap between available resources and need to spend in 2018/19.

Key Issues:

The Select Committee scrutinised the Social Care, Health and Safeguarding budget proposals, as outlined in the report, which related to the Social Care, Health and Safeguarding Directorate Budget.

Member Scrutiny

The report was introduced by the Finance Manager, noting that since the report was initially scheduled for consideration, final settlements have been announced. Members were informed that this and a Joint Select Committee, were opportunities to put forward ideas to alter the proposed budget. Questions were invited as follows:

A Member remarked on the increase to Council Tax of 4.95% and questioned if that proposal would remain as the final settlement was slightly better than expected. It was confirmed that this was the case to ensure the budget gap did not increase e.g. there was no addition to the settlement to cover the public sector pay increase.

The Chair asked if there was any possibility of exceeding 4.95% and it was responded that there were no proposals to do so. Elected Members were informed that English counties can set a higher precept as they have an adults' social care precept specifically for social care but that doesn't apply in Wales. It was explained that Council Tax is not the main source of income for the authority and that the bulk comes from the Welsh Government settlement. The impact of the Police precept was queried but it was confirmed that the authority just collects and pays the precept to the Police and town/community councils.

It was confirmed that work will now take place to see how the Council can bridge the funding gap; task groups will look at alternatives. The Chair asked when it will be known if and when the gap is fixed. It was confirmed that this information will be available in February. Members were reminded that 1% increase in Council Tax raises roughly £300,000.

A Member provided information that the final Welsh Government budget will not be finalised until next week so some changes may still occur. It was queried what impact the pay award would have locally in terms of the fragility of the local independent market. It was agreed that it is a burden but the increase to the Living Wage is welcomed in the care market as investment is needed to ensure an appropriate workforce. Discussions are in progress about the viability of using accommodation as an incentive to recruitment. It was also clarified that, in terms of the capital threshold issue, the authority has only 27% of the market as the rest are self-funding or funded through community health care. The strategy remains to encourage people to stay strong in the community.

A Member expressed concern about the authority's ability to deal with unforeseen events and requested more information on the approved reserve strategy. The Officer explained that our reserves are at the minimum Wales Audit Office recommended level and if they are spent, they have to be replenished. Therefore the money has to be well spent and recoverable for the future. It was added that there are always in-year demands referring to the forecast reports where overspends are predicted. These are balanced through underspends in other departments or via reserves.

A Member mentioned proposals to cut buses on a Sunday and expressed concern about the implications for public transport to hospitals and also to the development of the Crick Road

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facility. It was accepted that any variation will have an impact and it was agreed to pass the comment to the Head of Service.

It was commented that this was an opportunity to campaign against transport cuts due to reductions to Welsh Government grants citing the impact on wellbeing of future generations. It was confirmed that there were proposals for savings to the Adults Services budget for 2018/19 of £638,000 (budget reduction for social care next year within a strategy of practice change) and £536,000 thereafter to the end of the Medium Term Financial Plan. It was explained that there is no opportunity for income generation.

The Chair stressed the importance of quality impact assessment being added to reports.

The Chair asked if residents will retain quality of service through the changes. It was confirmed that this has been a transformation process supported by practice change based on a tiered system of the right support at the right time. This has proved successful due to the integrated platform and good training and staff; quality is not in question. It was added that the savings targets have been met and there are good quality staff. Assurances were given that due diligence is carried out before introducing new proposals.

Committee Conclusions:

On behalf of the Select Committee, the Chair thanked officers for presenting the report.

The Select Committee thoroughly scrutinised the budget proposals. Of concern was the proposal to make cuts to Sunday bus services and the Officer will provide this feedback to the Head of Service accordingly

The Select Committee expressed concern that the County always receives the least funding allocation and grants.

The Chair sought assurance and it was confirmed that quality of service is not currently an issue. All Officers were reminded of the importance of completing quality impact assessments to accompany reports.

5. Draft Capital Budget Proposals 2018/19 to 2021/22

Context:

To scrutinise the proposed capital budget for 2018/19 and the indicative capital budgets for the three years 2019/20 to 2021/22.

Key Issues:

Capital Medium Term Financial Plan (MTFP) issues:

- The four year capital programme is reviewed annually and updated to take account of any new information that is relevant.
- The major component of the Capital MTFP for the next few years is completion of the Council's Tranche A Future schools programme. Colleagues are working through options in relation to a future Welsh Government Tranche B programme. No presumption has been made to add such costs into this next four year

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window as yet, as costs of proposals and their affordability are still to be established.

- As part of the 2017/18 budget setting process, Members identified five additional priorities that had not been costed at the time of budget setting, but for which they added an un-hypothecated borrowing assumption of £500,000 per annum to the 2017/18 budget.
- During this year, some of those scheme costs have crystallised and the following indicates the related presumption within the capital programme together with an indication of the revenue consequences. In all cases an asset life of 25 years has been presumed:
 - Monmouth Pool – commitment to re-provide the pool in Monmouth as a consequence of the Future Schools Programme, £7.3 million project afforded by £1.9 million Future Schools Programme, £985,000 Section 106 funding, core treasury funding in the region of £835,000, and £3.58 million prudential borrowing afforded by the Leisure Service through additional income predictions.
 - Abergavenny Hub – commitment to re-provide the library with the One Stop Shop in Abergavenny to conclude the creation of a Hub in each of the towns. £2.3 million.
 - Disabled Facilities Grants – the demand for grants is currently outstripping the budget, work is being undertaken to assess the level of investment required to maximize the impact and benefit for recipients. Members ultimately chose to put a one year commitment of £300,000 into the base capital programme in 2017/18.
 - City Deal - 10 Authorities in the Cardiff City region are looking at a potential £1.2 billion City Deal. Agreement to commit to this programme is being sought across the region in January 2018 and would impact on the capital MTFP. The potential impact on individual authority budgets is currently being modelled in advance of decisions on specific projects and profiles in order for authorities to start reflecting the commitment in their MTFPs. The potential is for the 10 authorities to provide collectively £120 million over time, with individual contributions being reflective of populations. Monmouthshire's indicative liability during the forthcoming capital MTFP is likely to be:

Contributions predicted during forthcoming MTFP window:

Year	Amount
2018-19	£83,000
2019-20	£482,000
2020-21	£472,000
2021-22	£729,000

Contributions predicted following the MTFP window:

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2022-23	£729,000
2023-24	£1,207,000
2024-25	£1,206,000
2025-26	£1,206,000
2026-27	£1,206,000
Total	£7,320,000

MRP is presumed to start in the year after the contribution is made.

- J and E Block – the office rationalization programme is being considered to see if there is a solution that would enable the Magor and Usk sites to be consolidated, releasing funding to pay for the necessary investment to bring the blocks into use. The current presumption included in Treasury figures is £1.4million expenditure with MRP starting in 2020/21. No revenue savings from central accommodation or the Magor building have been presumed in the capital modelling, as those savings are unlikely to be realized until that building is vacated.
- A strategy that enables the core programme, Future Schools and the above schemes to be accommodated is being developed. Notwithstanding this, there will still remain a considerable number of pressures that sit outside of any potential to fund them within the Capital MTFP and this has significant risk associated with it. Cabinet has previously accepted this risk.
- The current policy is that further new schemes can only be added to the programme if the business case demonstrates that they are self-financing or the scheme is deemed a higher priority than current schemes in the programme and therefore displaces it.

In summary the following other issues and pressures have been identified:

- Long list of back log pressures – infrastructure, property, DDA work and Public rights of way. None of these pressures are included in the current capital MTFP, but this carries with it a considerable risk.
- In addition to this, there are various schemes / proposals (e.g. Alternative Delivery Model for Leisure, Tourism and Culture Services, Tranche B Future Schools, any enhanced DFG spending, waste fleet vehicle replacement, community amenity site enhancement) that could also have a capital consequence, but in advance of quantifying those or having Member consideration of these items, they are also excluded from current capital MTFP.
- Capital investment required to deliver revenue savings – this is principally in the area of office accommodation, social care, property investment and possibly Additional Learning Needs. The level of investment is currently being assessed. However, in accordance with the principle already set, if the schemes are not going to displace anything already in the programme then the cost of any additional borrowing will need to be netted off the saving to be made.

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- The IT reserve is depleted so funding for any major new IT investment is limited. Any additional IT schemes will need to either be able to pay for themselves or displace other schemes in the programme.
- Base interest rates were increased by 0.25% to 0.5% on 2nd November 2017. That pressure is more likely to be felt in the Revenue MTFP as it will increase the cost of borrowing over time. However, it may also impact adversely upon the viability of capital business case developments and their ability to demonstrate self-affordability. Given this very recent change, it hasn't been possible to fully work through the consequences in the initial revenue and capital MTFP. That will instead manifest itself through the budget setting process.

Member Scrutiny

The Finance Manager introduced the report and drew Select Committee Members' attention that any new capital items would have to be self-financing or displacing an existing scheme. Questions were invited:

The Chair sought clarification about the use of the former caretaker's bungalow at King Henry VIII Comprehensive School and it was confirmed that the building has been taken over as a Contact Centre. This used mainly capital funding.

It was noted that there were no other projects for consideration.

Committee Conclusions:

The Chair, on behalf of the Select Committee thanked the Officer for presenting the report and responding to questions.

The Select Committee considered the capital budget assumptions and priorities affecting the Adults Select portfolio area and noted that there were no other capital projects under consideration.

6. Cabinet Member's Draft Response to Aneurin Bevan University Health Board Consultation on Older Adult Mental Health Services

Context

To present a draft Monmouthshire County Council response to the Aneurin Bevan University Health Board (ABUHB) consultation *Redesigning Mental Health Services for Older People* for scrutiny, requesting that Members provide comments to inform the final response to be presented to Council on the 18th January 2018.

Recommendations

That Select Committee scrutinise the attached draft consultation response (Appendix A) and makes recommendations as appropriate.

Key Issues

1. ABUHB approved recommendations at its Board meeting on 27th September 2017 to enter into formal public consultation a preferred option for the redesign of older adult mental health services.
2. The public consultation process was agreed between ABUHB and the Community Health Council to run between November 2017 and January 2018.
3. The ABUHB consultation document is included as Appendix B to this paper. The consultation sets out a vision for older adult mental health services and describes the challenges faced by

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the Health Board in recruiting a registered mental health nursing workforce to safely provide quality inpatient services. The consultation advises of urgent changes to services that were made in January 2016 to ensure that safe services could be provided. The consultation then sets out and appraises a number of options for future service provision. There is a preferred option described in the paper, to consolidate the number of older adult mental health wards, to 3 dementia wards and 1 functional mental health ward. This option would mean that dementia inpatient services would no longer be provided from St Pierre Services at Chepstow Community Hospital. This would mean that people from Monmouthshire requiring this service would access either St Woolos Hospital or Ysbyty Tri Chwm Hospital in Ebbw Vale.

4. Monmouthshire County Council Members have actively engaged in the ABUHB consultation process. In addition to an all Member seminar, there have been a number of public engagement meetings well attended by Councillors. At the all Member seminar, and in public meetings, a number of concerns have been raised regarding the consultation proposals, the lack of consideration in the options appraisal to Monmouthshire's demographics – current and projected- and prevalence of mental ill health. Concerns have also been consistently raised regarding transport and access issues, the impact on carers, lack of detail around investment in enhanced community services and the impact of service withdrawal on the viability of Chepstow Community Hospital. These concerns mean the consultation response is not supportive of the preferred option. It is proposed that Council expresses a view that a more robust option appraisal is undertaken considers fully all relevant information, and puts in place a plan for quality older adult mental health services – community and inpatient which meet the needs of current and future generations.

5. Notwithstanding the consultation response, it is important to emphasise the absolute commitment of Monmouthshire County Council to work in partnership to deliver integrated health and social care services. The commitment of the Health Board to a positive future for Chepstow Community Hospital, and the work being taken forward to plan for service provision in South Monmouthshire through the group co-chaired by the Chief Operating Officer, ABUHB and the Chief Officer, Social Care and Health, Monmouthshire County Council is welcome. To instil confidence, it needs to deliver detail of how primary and community health, social care and wellbeing services will be enhanced, making best use of the hospital and other physical assets.

Member Scrutiny:

The draft response was introduced by the Chief Officer, Social Care, Health and Safeguarding explaining that the draft consultation response reflected members' views expressed at a seminar. The Cabinet Member acknowledged that this was a significant recommendation, and the decision to present the draft response has not been taken lightly. The response identifies the severity of feeling about the proposals and everybody's views and ideas are welcomed. Questions and comments were invited.

A Member thanked the officers Elected Members and the public, for their involvement and also commented that it was an excellent report that reflected what the public are saying. It was added that the future of Chepstow Hospital for the south of the county (and for Monnow Vale for the north in terms of travelling to services) is a significant issue. The County Council were urged to support the draft response.

A Member had personally sent a detailed response to the ABUHB and was pleased the Council was arguing against the preferred option and urged support of Option 1. This option avoids the issue of no provision in Monmouthshire where there is a higher than average percentage older population, would reduce the stress on patients, families and carers in terms of travelling, prevents under-utilisation of Chepstow Hospital and has the benefit of staff already being in place. The view was added that Option 3 is not practical in terms of limited public transport and car parking. If the ward was closed, concern was expressed that 7 dementia beds in the region

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would be lost overall, there will be insufficient inpatient care for dementia patients. Chepstow patients may have to travel to Ebbw Vale or Ystrad Mynach. The Health Board were urged to take account of the stress on carers adding that the resultant strain will absorb the projected savings.

The Chief Officer welcomed the view of Select Committee Members regarding positive identification of Option 1.

Mr. P. Farley valued the remarks made. He expressed his displeasure with the quality of Health Board engagement and provided examples of shortcomings. Accordingly, he asked that the following points were considered for the Council's response:

1. An offer to work together on future consultations, and at an earlier stage, adding that, at a recent event there had been no opportunity hear information e.g. the good work undertaken by Adults Services.
2. An offer to help with staff recruitment and retention by e.g. offering favourable access to leisure services or use of underused housing to meet staff accommodation requirements.
3. In terms of transport, it was questioned if the Council, as a transport provider, could influence services and support the amendment of routes, in collaboration with other councils, as necessary, to improve public transport to hospitals.
4. How the south of the county becomes engaged in such issues in future. There is no accessibility for particular age and other groups to consultation as there is no forum for older people in the south of the county (unlike Monmouth and Abergavenny). The support of Chepstow Senior Citizens Welfare Trust was offered in this respect.

A Member felt the report was good, noting the initial focus was clinical safety and challenges of future workforce planning but there is no focus on improving services. It was agreed that transport is a massive challenge and that workforce is a national issue. It was suggested that the Health Board has responsibility as a commissioner of educational posts and staff training. The Health Board, in preferring Option 3, refers to savings to reinvest in local services but it was the Member's view that whilst this would not necessarily disappear into the new SCCC, there was reticence to confirm that it would be allocated to the south of county. It may, therefore, be used to address pressures elsewhere in the region. The Member recommended that, as the Council wasn't involved in the initial option appraisal, it's not in a position to endorse any option. It was suggested that there should be a start from scratch on an integrated approach with involvement in the developmental process.

The Member suggested that Option 1 should be included in the response to work towards but that there should be better consultation on option appraisal. It was observed that there is a need to define the local offer before any service is added or removed.

A Member agreed that it is necessary to return to foundations with the Health Board and Council working in harmony from the start.

The Cabinet Member questioned why Chepstow has been chosen instead of other areas.

A Member commented that the Health Board had reported, at a ward residents' meeting, that the Council is formulating a plan for transporting patients. The Member supported Chepstow Hospital as a Centre of Excellence instead of St. Woolos Hospital. The Chief Officer responded that the Council is involved in forming transport plans and had hoped to attract integrated care funding with resource from the Health Board that would be added to the integrated transport structure. The Health Board accepts that, with all changes re SCCC, it needs to have a transport plan but it is not just for the Gwent region Councils to resolve in isolation.

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A Member raised the issue of loneliness and isolation, especially in rural areas and linked it to the stress encountered by carers who may not have the support of family or friends. The availability of local services and the ability to visit relatives locally can provide relief so it is important not to underestimate demand for local health services where there is need and advocated Option 1 adding that Option 3 has not been adequately considered.

A Member observed that the Health Board approach has been wrong from the start and did not support an unsustainable proposal that will negatively impact quality of life.

A Member questioned what happened between the Clinical Futures meeting on the 8th September 2017, the Lower Wye Area Committee Meeting on the 20th September 2017 and the proposals to make changes on the 27th September 2017. The Member supported Option 1 to retain the status quo temporarily to allow broader consideration of dementia care linked to the proposed Crick Road provision.

The Chair recalled that previous scrutiny called for a long-term, county wide strategy on dementia care and suggested this could be included in the draft response to Council.

Committee Conclusion:

Having carefully scrutinised the draft response to the Aneurin Bevan University Health Board (ABUHB) consultation Redesigning Mental Health Services for Older People, we firmly support Option 1 as our preferred option due to the reasons outlined below:

1. Challenging transport issues in the County's rural areas will present significant problems and detriment to older people.
2. The process undertaken to reach the decision on options did not sufficiently involve the County Council.
3. Previous scrutiny of older person's care needs resulted in the following recommendation for a longer term model: "As a committee, we are in agreement with the principle that the Council should take a lead in providing a future long-term sustainable care model for Monmouthshire. Given the success of the Raglan Project, we understand the advantages of the Council providing care facilities to ensure a high quality service. We recognise that our primary objective remains to support people to live independently for as long as possible, but that a range of services will be needed to support future complex care needs such as dementia, given the increasing ageing population." [Adults Select Committee: 30th October, 2017].

As such, bearing in mind the above remarks, we were strongly of the opinion that a poor decision would be made and outcomes could not be supported.

7. Performance Report: Adults Services (quarter 2)

Purpose:

To present the 2017/18 quarter 2 performance information under the remit of Adults

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Select Committee, this comprises:

- Information on how we are performing against a range of nationally set measures related to adult services used by all councils in Wales that were introduced in 2016/17 as part of the Social Services and Well-being Act. A report card has been used that gives context to these.
- Report benchmarking data to demonstrate how we performed during 2016/17 against the Welsh average.
- To present information on how the Council is performing in 2017/18 against national performance indicators "Public Accountability Measures" set by Data Unit Wales that are under the remit of Adults Select Committee.

Recommendations

That Members scrutinise how well the authority is performing on these range of nationally set measures and seek clarity from those responsible on whether performance can improve in any areas of concern identified.

Key Issues

1. The council currently has an established performance framework, this is the way in which we translate our vision - building sustainable and resilient communities - into action and ensure that everyone is pulling in the same direction to deliver real and tangible outcomes. The framework was presented to the Committee in July 2017, further information on the council's performance framework for members is available on the Council's intranet, The Hub.
2. The report card explains Adult social services key process and performance in quarter 2 2017/18 as well as presenting benchmarking of performance in 2016/17. This comprises of data from the new measurement framework introduced in 2016/17 as part of the Social Services and Well-being Act. The performance measures are a blend of quantitative (numerical) data and qualitative data which includes asking people about their experience of social services and whether this has contributed to improving their well-being.
3. Welsh Government have highlighted that the first year of data collation (2016/17) of the Social Services and Well-being Act performance measurement framework has provided some challenges and some quality issues with the data and as a result they have not published local authority level data performance data for 2016-17. Wales level, means and quartile data have been published which has allowed us to undertake some benchmarking, although this is caveated in how much reliance can be placed on this given the quality issues raised.
4. There are ongoing discussions and workshops, which we have been part of, on potentially revising the standards and measures as part of the framework in the future.
5. The qualitative measures within the framework are derived from questionnaires to adult service users and carers that social services are working with at the beginning of September. While we continue to send out adult questionnaires monthly from April, questionnaires are sent to carers starting at the beginning of September, therefore at quarter 2 we are only able to present data on one month of responses.
6. Another important nationally set framework used to measure local authority performance is 'Public Accountability Measures' set by Data Unit Wales. This includes some of the indicators for adults services that are part of the Social Services and Well-being Act measurement framework as set out in the scorecard. Appendix 2 contains the performance in quarter 2 2017/18 for further performance indicators related to Homelessness and Disabled Facilities Grants that are part of this framework and are under the committee's remit.

Member Scrutiny:

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The Performance Report for Adult Services was presented and questions invited:

A Member, with reference to safeguarding, challenged the downturn in performance for delayed transfer of care (DTC) speculating that the reason is related to an inability to find carers and questioned strategy to resolve the decline.

The Head of Adult Services explained that the DTC figures can be considered an artificial measure gathered on a census day once a month across the authority. This is a trend line which is analysed and reviewed daily. It was acknowledged that there have been difficulties in recruitment of staff and within partner agencies. Consequently, the hours in the system awaiting allocation have been monitored very closely. It was explained that the model of support for moving people from hospital has been in place for 15 years and there are 2 staff members in the Royal Gwent and Nevill Hall Hospitals who make arrangements to move people to their next destination and monitor numbers in hospital requiring ongoing care. Often this is at home but a stoppage point can be transfer to residential homes due to e.g. availability or where care is moved from the council to continuing health care. Attention was drawn to the wider partner context which demonstrate our DTC statistics are significantly lower compared to those cared for at home.

A Member raised the serious issues with care staff recruitment and questioned what strategies are being employed to address this issue. It was responded that this is an ongoing and worsening problem. More information will be brought to Select Committee on the Turning the World Upside Down strategy working with the independent care sector working towards a relationship based care model. Work has begun in the Chepstow area bringing care teams together to maximise opportunities to share care which is much more effective. Additionally, adverts to recruit carers have been posted under a social care and health banner which has proved more successful. It was added that in the longer term, there are plans to introduce a "Dare to Care" campaign to e.g. have a social and health care academy across Gwent and attract people to the sector.

A Member queried the carers and adults questionnaires and changes in percentages from one year to the next. It was confirmed that there has been a change to questions asked (from less service based to more "what matters to you" etc.) to elicit more useful insights and encourage more honest appraisals.

County Councillor P. Pavia declared an interest as Research and Policy Lead, ADSS Cymru. He questioned 1) the early impact of the Social Care and Wellbeing Act especially on users and carers in terms of reducing assessment levels and 2) Disabled Facilities Grant (DFG) the likely reduction in time to deal with applications. It was responded that a lot of the data is tracked and the drop in referrals for support is substantial allowing more concentration on people with more complex needs or frailty. Other people are being supported through wellbeing work. Regarding DFG (for larger adaptations), it was confirmed that there has been a steep fall in average time taken. These applications are implemented by referral to the Housing Department. The steep fall from last year was welcomed. A reminder was provided that there is an extra £33,000 in the DFG programme next year.

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Committee Conclusions:

The Select Committee scrutinised how well the authority is performing on a range of nationally set measures by seeking clarity from Officers on whether performance could be improved in:

- Delayed Transfer of Care;
- Recruitment of carers;
- Disabled Facilities Grant; and
- Feedback from carers.

The Select Committee was generally satisfied with the responses provided and reassured regarding performance.

The officers were thanked for their presentation and responses.

8. Actions from the last meeting

The Actions from the last meeting were noted.

The Council's statutory and non-statutory responsibilities were circulated, and also a breakdown of grant spending.

9. Adults Select Forward Work Programme

The Work Programme for 23rd January 2018 was too large and amended to include the following items:

- Empty Homes Update.
- Gypsy and Traveller Pitch Allocation Policy
- Safeguarding performance and self-evaluation.
- Melin Private Leasing Scheme

A Special meeting on 8th February 2018 at 10.00am was proposed with items to include:

- Care Closer to Home (to be confirmed)
- Turning the World Upside Down
- Re-designation of Shared Housing Accommodation

A Special Joint Children and Young People's and Adults Select Committees was proposed later in February to consider the following items:

- Area Plan
- Disability Transformation Work

Information on work on outreach to address and support people suffering rural isolation and loneliness was requested in terms of initiatives and good practice. Some background information will be provided and contact with workers in the field will be made available. The importance of communities and linking people with natural connectors was agreed.

10. Council and Cabinet Work PLanner

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The Council and Cabinet Work Planner was noted.

11. **To confirm the date and time of the next meeting as Tuesday 23rd January 2018
at 10.00am**

The meeting ended at 12.20 pm

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