

MINUTES OF THE HEALTH AND SOCIAL CARE REVIEW GROUP

THURSDAY 31ST JULY 2014 AT 6.00 PM – COMMITTEE ROOM 3

PRESENT: Councillor Foord (Chair), Councillors, Campbell, J. Davies, D. Moles, Bailey (Substitute for Gale), and T. Malik.

CO-OPTED MEMBER

Mr. Norris Bullock

Mrs. Farrah Gilani – Healthwatch Luton

SUPPORT OFFICERS / ADVISORS:

Tracey Brennan	- Joint Commissioning Manager (LBC)
Maud O’Leary	- Head of Adult Social Care (LBC)
Ian Hilsden	- (LBC)
Jon Cox	- (LBC)
Mike McMahon	- Head of Community Living (LBC)
Gerry Taylor	- Director of Public Health (LBC)
Carol Hill	- CCG - Luton
Nicky Poulain	- Director of Commissioning and Integration (CCG)
Eunice Lewis	- Democracy and Scrutiny Officer (LBC)
Chris Morris	- (LBC)
Diane Walsh	- (LBC)
Kay Kokabi	- Healthwatch Luton

ACTION

36	APOLOGIES FOR ABSENCE (REF: 1)	
	Resolved: Apologies for absence from the meeting were received on behalf of Councillors Gale, Knight and Zia.	
37	MINUTES (REF: 2.1)	
	Resolved: That the minutes of the meeting held on 18 th June 2014 be taken as read, approved as a correct record and the Chair be authorised to sign them.	
38	CHAIR'S UPDATE (REF: 6)	
	<p>The Chair acknowledged and welcomed Mrs. Farrah Galani (co-opted member from Healthwatch) and Mrs. Nicky Poulain, CCG Director of Commissioning and Integration.</p> <p><u>Update on Repeat Prescribing through Pharmacies - CCG</u></p> <p>Carol Hill from Luton CCG, gave a brief progress update on repeat prescribing issues raised at previous meeting of the HSCRG. She advised that the CCG were taking steps to review the prescribing process through a phased way, with a working group which includes Luton Healthwatch and other stakeholders.</p> <p>Members were further advised as follows:</p> <ul style="list-style-type: none">• Need to initially identify categories of patients affected• A whole system review through planning groups and stakeholders before roll out of the programme across the town• Need to identify the impact of the change on service users to ensure a robust new system inclusive of the voice of the patient• Planned detailed progress to be reported to the HSCRG in three months' time.	

	<p>Resolved: (i) That the update from the CCG on repeat prescribing and the Chair's update be noted.</p> <p>(ii) That Carol Hill, CCG be requested to submit a Progress Report on the Review of Repeat Prescribing through Pharmacies to a future meeting of the Committee in three months' time.</p>	
39	LEARNING DISABILITY – JOINT COMMISSIONING STRATEGY 2014 – 2017/DELIVERY PLAN (REF: 7)	
	<p>Tracy Brennan Joint Commissioning Manager submitted a report on the Learning Disabilities Joint Commissioning Strategy and Delivery Plan advising of timescales of the delivery plan developed to meet the objectives and the vision of the Strategy. The Strategy had received sign off from the Learning Disability Partnership following a 3 months consultation period.</p> <p>In response, to Members questions/ comments, Tracey Brennan provided further information on the key actions of the Delivery Plan as follows:</p> <ul style="list-style-type: none"> • GP Services signed up additional health services to carry out more health checks for people with learning disabilities. In 2012/13, 244 health checks were completed by GP's, 208 of those were carried out in the last quarter. Up to five GP practices failed to sign up for health check in 2012/13. • In 2013/14, 342 health checks were successfully completed and only 2 surgeries did not take part. • The Service receives specific funding stream from LLAL monitored by the Service to ensure a significant number of carers are engaged in the process. <p>Members were further informed of the "getting a new life" project carried out by the Service. This project offered service users the opportunity to choose the service that best suits their circumstances in terms of access to support services and independent living and relocation.</p> <p>In answer to a question about the proposals for change regarding the Day Centre at Bramingham, the Joint Commissioning Manager advised that the service building at Bramingham will close down. The proposals were approved at the Council's Executive meeting last night.</p> <p>Resolved: (i) That the report on the Learning Disabilities Joint Commissioning Strategy 2014/17 and Delivery Plan be noted.</p> <p>(ii) That the Joint Commissioning Manager be requested to submit a further progress on the Learning Disability Joint Commissioning Strategy and Delivery Plan at a future meeting of the Committee on 8th January 2015.</p>	

40	PROGRESS REPORT ON THE IMPLEMENTATION OF THE LUTON CARER'S STRATEGY – CARING FOR CARERS (REF: 8)	
	<p>Chris Morris, Purchasing and Quality Assurance Manager reported on the progress of the implementation of the Luton Carer's Strategy – Caring for Carers.</p> <p>Members were informed that the Strategy received clearance and sign off by the Health and Wellbeing Board in January 2014. He advised that one area of challenge for the Service was to identify good quality care providers in Luton not commissioned to work with the CCG but who are equally good and could potentially add value to the provision of care in Luton. The need to identify unknown hidden carers highlighted.</p> <p>He explained that the review of the Strategy would continue till September with a number of additions to the action plan. He further explained that the Care Act June 2014 has significant implications for the future direction of the Strategy and the services for carers. The Act puts carers on a much more even footing, by strengthening and recognising a clear path and direction of support for carers to access and receive more services. He advised of the need to understand and recognise where the gaps were within the service in order to continue to incorporate actions into the Strategy.</p> <p>Following questions and comments by Members, Chris Morris further advised;</p> <ul style="list-style-type: none"> • Support for young carers sit within the Children Services and a Young Carer support programme has been commissioned. • The assessment requirement is quite clear in regards to carer assessments; there are a variety of services based on eligibility, such as home care, respite, short breaks, residential and direct payments funding to purchase a place in residential home, etc. From the stats there are lots of carers who do not wish to be classed as carers. They consider themselves as family members rather than carers and this is acknowledged by the Service. • Need to ensure preventative measure for carers to prevent crisis, this area would be explored further by the service. There was real opportunity to remodel the service to engage with people and understand the outcomes for the individuals and not the organisation. • The care staffs carries out a number of carer's assessment in relations to mental health. • Every GP surgery has a carer assessment support staff and referrals are received from several organisations. • The criteria for supporting carers remain the same and those entitled to support will continue to receive support; there was also progress with schools and GP's. 	

	<ul style="list-style-type: none"> • The Service has an obligation to provide care for all carers; the challenge for the service is how to reach a substantial number of hidden carers that the Service was unable to engage with. It was hoped that these will come through in terms of the action plan being developed and the Carers Strategy. <p>Carol Hill explained that the CCG have a priority around carers; there is awareness that longer assessment period was required. The need to prioritise and be more sensitive to appointments was also highlighted.</p> <p>A Member stated that the Jelly Fish programme by the CCG informs people about services and there is need to encourage this.</p> <p>Resolved: (i) That the progress update on the Implementation of Luton's Carer's Strategy be noted;</p> <p>(ii) That a further progress on the Implementation of Luton's Carer's Strategy be submitted to a future meeting of the Committee on 8th January 2014.</p>	
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41	JNSA AND PNA PROGRESS UPDATE (REF: 9)	
	<p>Jon Cox provided Members with a brief progress summary on the work to refresh the Joint Strategic Needs Assessment (JSNA) and the Pharmaceutical Needs Assessment (PNA). The report sought commendations from Members on the two pieces of work.</p> <p>He advised of the timeline for the completion of the JSNA for 2014 and 2015 and stated that the Service was presently in the process of trying to agree a set of priorities and to take a systematic approach in setting these priorities. It was expected that the JSNA would receive final sign off from the Health and Wellbeing Board by January 2015.</p> <p>In regards to the PNA, he advised that it was a statutory requirement of the Health and Wellbeing Board to carry out assessment to look at the adequacy of the pharmaceutical services and its effectiveness. Each HWB must publish a PNA by 1st April 2015 covering a 3 year period and maintain the document issuing supplementary statements regarding need for pharmaceutical services as required.</p> <p>He further advised that a PNA document must include some of the following:</p> <ul style="list-style-type: none"> • A statement of the pharmaceutical services provided necessary to meet the needs required across the town. • How the assessment has been carried out • Services have secured improvements to pharmaceutical service in the area, etc. <p>A Member stated that there was a shortage of Pharmacies in Luton as a whole. Pharmacies were not evenly spread across the town but some areas were more affected than others. In response, Jon Cox advised that the Service will have input into new Pharmacies being set up depending on the population need in the area. There were strict rules and guidance around control of dispensaries in terms of instant sufficiency in the area. The Service would like to see development of a range of services delivered in the area, including pharmaceutical services.</p> <p>It was expected that the PNA document would be finalised in February and final sign off by the HWB in March 2015.</p> <p>Resolved: (i) That the progress report on JSNA and PNA be noted by the Committee; and that a further progress be reported back to the Committee after March 2015.</p> <p>(ii) That a further progress on the JSNA be submitted at the HSCRG in January for comments prior to sign off by the HWB in January 2015;</p> <p>(iii) That a further progress on the PNA be submitted to a future meeting of the HSCRG in March 2015 for comments prior to signing off by the HWB in</p>	

	March 2015.	
42	COMMUNITY TRANSPORT UPDATE (REF: 10)	
	<p>Mike McMahon, the Head of Community Living, reported on the progress and position of the Community Transport Service. He advised that the South Beds Dial-a-Ride (SBDAR) has been replaced by a Community Transport service whereby Age Concern Luton would be coordinating the new transport service.</p> <p>He highlighted some of the key areas of the services and proposals as follows;</p> <ul style="list-style-type: none"> • The proposals from Age Concern Luton, included the following elements; expansion of the existing network of volunteer drivers;; development of partnership with other community transport providers and more extended range of options for service users; • The new service was to receive a donation of 11K from LLAL. • There was currently on-going dialogue with Age Concern Luton in terms of implementation, but with an aim that the new service will be up and running within the next two months. • In the meantime, the interim service which has been in place since last August and provided by the PTU will continue to operate until the new service is in place.; • . <p>All Volunteers will be CRB checked and will have needs assessment by Age Concern for every client. .</p> <p>The outcome of a market testing with regards to charges revealed that service users would be willing to pay up to £6.00 per journey.</p> <p>The aspect of insurance and injury for service users will be covered by Age Concern Luton being the main coordinator of the new service.</p> <p>In regards to a question about the details of the scheme and proposals Members were informed that such details are contained in the document between LLAL and Age Concern.</p> <p>In terms of volunteers, Age Concern will make provision to reimburse volunteers to ensure services rendered were not completely free of charge as expenses will be covered.</p> <p>Resolved: That the report on Community Transport Update be noted and that a further progress be reported and submitted to a future meeting of the Committee on 8th January 2015.</p>	
44	HOME CARE SERVICES (REF:11)	

Ian Hillsden, Contracts Manager Adult Social Care, submitted the report on Home Care services advising Members on the effectiveness of the Strategic Partnership and the quality of the service provided. He highlighted some of the areas of improvement evidenced from the reviews carried out. He explained that there was room for further improvement around reliability in terms of the timing of calls and communication with families particularly when carers are running late and in responding to complaints.

He further advised Members that the feedback received from the reviews carried out between 2013 and 2014 demonstrated that individuals and their families were satisfied with some areas of the service, with further improvement required in other areas as follows:

- Carers were seen as being very professional in their approach and also offered choices to service users;
- Regular and consistent care and support received by service users and their families;
- Service users felt well informed, etc.
- Need to have a robust contingency plan in place to respond to calls and improved communication;
- Evidence suggests four main causes of delay; greater demand at certain times; ineffective deployment of carers/planning and fluctuating needs of the individuals.

Members queried some of the figures quoted in the report especially the Prime Care survey figures regarding rating of performance for care provision and the Aura calls ratings.

The Contracts Manager explained that Aura rating tells us when care was provided and the duration in minutes. This forms the basis on which the Partners are paid (actual care delivered and not planned care). Non Aura calls are those where the carers did sign in and sign out and these are reviewed as part of the Service Review.

A Member commented on the issue of low wages for carers. In response, the Contracts Manager explained that a recent examination of this concluded that allowing for travel time the majority of carers were paid above the minimum wage and only small minority (carers using the bus) were at risk of falling below the threshold. Excluding travel time all were paid above the national minimum wage. There is no evidence of carers not being paid or any complaints received to that effect.

He further informed Members that the Service had had significant improvement in terms of carer's travel time, working with Strategic Partners to get the travelling arrangements right and to ensure equity in terms of pay. He advised that he will be happy to look into individual cases.

The Representative from Healthwatch stated that they would be happy to speak to any Member with concerns about individual cases at an early stage.

	<p>Resolved: That the report on the progress made with Home Care Services be noted and that a further progress is submitted to a future meeting of this Committee.</p>	
45	<p>CARE BILL (ACT) JUNE 2014 – UPDATE OF IMPACT ON COMMUNITY (REF:12)</p>	
	<p>Maud O’Leary Head of Community Living gave a presentation on the new Care Act published June 2014.</p> <p>Members were informed of the key changes to the Act under three headings as follows:</p> <p>Change 1</p> <ul style="list-style-type: none"> • Modernises • Clarifies • Provides for the development of national eligibility criteria <p>Change 2</p> <ul style="list-style-type: none"> • Treats carers as equal • Reforms how care and support is funded • Supports the aim to rebalance the focus of care and support on promoting wellbeing and preventing or delaying needs <p>Change 3</p> <ul style="list-style-type: none"> • Provides new guarantees and reassurance to people needing care • Promotes freedom and flexibility needed by local authorities and care professional to integrate with other local services, innovate and achieve better results for people <p>Members were informed that more changes were expected within the next few weeks with ongoing consultations and 12 different fact sheets expected. A link to the fact sheet will be sent to Members.</p> <p>Members were further informed of further key changes of the Care Act 2014 as follows:</p> <ul style="list-style-type: none"> • Introduction of deferred payment scheme – Already operated by Luton • Huge cost of assessment process • Much better forum for information and advice • Prevent needs for care and support • Promote integration of care with health and other • Work with Housing to provide housing assessment • Comply with the safeguarding framework <p>Members received further information on key implementation dates and that a Project Board has now been set up in response to the Care Act and implementation.</p>	

	<ul style="list-style-type: none"> • Before April 2015 Awareness raising • Statutory guidance/regulations just released and consulted on until October 2014 • Universal Deferred payment April 2015 • New Charging framework – single overarching charging system April 2015 • New Legal Framework in place April 2015 • Assessment Regulations in force April 2015 • National Minimum eligibility threshold April 2015 • Financial support – some changes April 2015 <p>The Head of Service advised of an on-going project regarding action plans to ensure more effective way of working and to further develop joint working links with people and organisations, including Luton local Healthwatch.</p> <p>In terms of reaching out to people without internet access, it was hoped that the on-going better together programme would address some of these issues with the involvement of GP services.</p> <p>A progress report is expected within the next three months.</p> <p>Resolved: That the report on progress be submitted at a future meeting of the Committee in three months' time.</p>	
46	WORK PROGRAMME AND DATES OF FUTURE MEETINGS (REF:13)	
	<p>The Democracy and Scrutiny Officer submitted the work programme with proposed items for future meetings. She requested Members to consider that items proposed for the meeting in October be moved to the November. This would ensure that the October meeting was fully dedicated to the Coroners item and implementations of recommendations as previously requested by Members.</p> <p>Resolved: (i) That the Democracy and Scrutiny Team Leader be delegated the responsibility to update the committee's work programme as discussed, following consultation with the Chair.</p> <p>(ii) That the items listed for the October meeting be moved to November meeting to ensure that the October meeting was completely dedicated to hear the report on the Coroner's item.</p>	
	(Note: The meeting ended at 8.30 pm)	