

CHESHIRE EAST COUNCIL

Minutes of a meeting of the **Adults and Health Committee**
held on Monday, 26th September, 2022 in the Committee Suite 1,2 & 3,
Westfields, Middlewich Road, Sandbach CW11 1HZ

PRESENT

Councillor Moran (Vice-Chair, in the Chair)

Councillors P Butterill, J Clowes, A Critchley, S Gardiner, L Jeuda, D Murphy
and J Weatherill

OFFICERS IN ATTENDANCE

Jill Broomhall, Director of Adult Social Care
Shelley Brough, Head of Integrated Commissioning
Helen Charlesworth-May, Executive Director, Adults, Health and Integration
Mark Hughes, Senior Commissioning Manager
Stephen Kelly, Senior Communications Officer
Roisin Beressi, Principal Lawyer (Adults & Education)
Patrick Rhoden, Lead Finance Business Partner
Karen Shuker, Democratic Services Officer
Nichola Thompson, Director of Commissioning
Dr Matt Tyrer, Director of Public Health

24 APOLOGIES FOR ABSENCE

Apologies for absence were received from Councillor B Evans, Councillor
A Kolker, Councillor J Rhodes (Councillor C Bulman attended as a
substitute) and Councillor N Wylie.

25 DECLARATIONS OF INTEREST

There were no declarations of interest.

26 MINUTES OF PREVIOUS MEETING

RESOLVED

That the minutes of the meeting held on 18 July 2022 be approved as a
correct record.

27 PUBLIC SPEAKING/OPEN SESSION

There were no public speakers.

28 ADULT SOCIAL CARE PERFORMANCE SCORECARD - QUARTER 1 2022/23

Consideration was given to a report that outlined the performance data and measures related to services that fell within the responsibility of the Adults and Health Committee, from Quarter 1 of 2022/23. In response to questions by members, officers commented as follows

- Although there had not been an agreed approach to the distribution of the Adult Social Care Discharge funding, there had been indications that this would come via the Better Care Fund and that it would talk about activities to support discharge in its broadest sense.
- The draft Code of Practice in respect of the Liberty Protection Safeguard Process came out in April and the consultation period closed at the end of July. The consultation returns had gone back to Parliament but it was expected that a decision would not be reached until the new year.
- In respect of the reduction in the assistive technology figures this had not been a result of removal of telecare for the over 85's. The contract had been recommissioned and there had been some data issues with the transfer of data over to the new provider.

RESOLVED

That the report be noted.

29 CHESHIRE EAST LIVE WELL FOR LONGER PLAN 2022-2027

In March the committee approved the draft plan for the basis of consultation. Following the consultation period the committee considered the report which detailed the strategic integration structures underpin the Cheshire East Live Well for Longer (LWfL) Plan 2022 – 2027 and the approach to taken to develop the Plan.

The LWfL Plan had been coproduced with residents and stakeholders using an insight-based approach which examined behavioural drivers to produce a set of principles which would underpin commissioning intentions across the System.

The insights gathered from residents identified three pillars that must be fulfilled to enable living well for longer:

- Confidence and Self-Motivation
- Navigation
- Tailored to my Needs

The feedback from residents had been very positive during the coproduction and consultation process and they were keen to be part of the ongoing monitoring and evaluation process.

The committee agreed that it was a positive and interesting report. Comments and questions were received from members in relation to the following

- Had there been any duplication of people completing the survey?
- Consideration needed to be given to engage those residents who may not engage in digital services or may be in the harder to reach cohort;
- There needed to be more awareness around gender reassignment in the older population;
- Were there any processes in place to have a single link or point of contact to as part of the joined up working?

The officers welcomed the comments and feedback which would help improve areas such as the Equality Impact Assessment and providing information for residents on how to access services in the community.

RESOLVED (Unanimously) That the Adults & Health Committee

1. Approve and adopt the LWfL Plan as outlined in Appendix 1 of the report.
2. Noted the insight-based approach to consultation and engagement, which had led to a fully coproduced Plan.
3. Noted that the principles of the LWfL Plan would underpin commissioning intentions across the Health and Social Care system.
4. Noted that the LWfL Plan would provide a foundation for refreshment of the 'Together' guide to coproduction.
5. Noted that the LWfL Plan was organic and would be subject to ongoing monitoring and scrutiny by those residents involved in its coproduction.

30 ADULT SOCIAL CARE WINTER PLAN

The committee received an update on the progress of the winter plan which would be considered by committee at the November meeting. A review of the winter plan for 2021/22 had taken place and the key areas where learning had taken place included:

- Collaborative working with partners was key
- System wide communication – ensuring messages were clear
- Weekend flow would be vital – ensuring people could be discharged from hospital seven days a week.
- Develop a structured approach to escalation – to manage issues collectively.
- Engagement with the third sector.
- Reduction of bureaucracy and duplication.

Scenario planning was underway as this winter was expected to be more challenging due to the cost of living crisis, limited recruitment within the

social care sector, and the possibility of a bad flu season. A good winter would include:

- Supporting people to remain healthy as possible at home
- Having responsive and effective services;
- Having a system that would be resilient and resolution focused with a shared vision to deliver meaningful positive health and wellbeing outcomes for people.

To deliver those objectives the following would take place

- A high uptake of flu and covid vaccination boosters
- Effective wellbeing and support for staff
- Clear exit routes and provision for people to get out of hospital
- A reduction in the number of emergency department visits and fewer ambulance delays
- Increase use of the faith and voluntary sector
- Robust governance and oversight

A system plan had been developed following a self-assessment carried out with NHS colleagues which helped identify risk areas which would help create the system plan that committee would receive in November.

Comments and questions were received from members in relation to the following:

- Did the voluntary and faith sector have capacity to help support those objectives outlined?
- Was there any support to relieve the pressure of rising costs for third sector partners?
- Was a good record of vaccination uptake being kept?
- Further information requested on Warm Hubs

It was agreed that an implementation plan would be brought back to committee in respect of the Warm Hubs.

Although it was expected to be a difficult winter there was agreement that the implementation of a joint plan should be seen as a positive step.

RESOLVED:

That the update be noted.

31 ADULT SOCIAL CARE REFORM UPDATE

The committee received an update in respect of adult social care reform. There were two areas which were progressing quickly which were the charging reform and the costing and pricing reform around that. As a trailblazer Cheshire East were ahead of the rest of the country. There would be more information available following the review from the Secretary of State.

Social Care Assurance was another element which was progressing well. The Care Quality Commission (CQC) had started to provide feedback about how they would conduct assurance. Informal feedback that had been received from Manchester described an extensive process that would include significant volumes of preliminary information that would be used to prioritise inspections.

It has been suggested by CQC that assurance may be carried out on an Integrated Care System (ICS) footprint. The nine local authorities would be reviewed in a single tranche with the inspections commencing in April 2023.

Collaborative working had begun with local authority partners across the north of England to gain a collective view of what 'good' looks like in a local authority and the Executive Director for Adults, Health and Integration would be chairing the Board that looked at service provision.

In respect of the charging reform element, local implementation was going well. There were a number of work streams that include data analysis, recruiting additional staff, implementing a training programme, and developing a communications and engagement strategy.

Comments and questions were received from members in relation to the following:

- Shared concerns around social care assurance process in respect of the significant size of the ICS footprint;
- Must not lose a sense of 'Place';
- Should not be, as an ICS, averaged down to a common denominator;
- Looking forward to further discussions in the member briefing on the charging reform;
- Had any thought been given to what the results of the inspection would mean?
- Had the CQC got capacity and expertise to be dealing with this?

In response to questions by members, officers commented as follows:

- The inspection based on ICS footprint was most likely, reflective of the aims of the Department of Health & Social Care.
- CQC has consulted extensively on the process and format of the self-assessment
- Everything was being done in great detail to prepare for the inspection
- The inspection would be of the local authority and what they spend rather than what the NHS spends.
- The Local Authority are reviewing resources in preparation.
- The CQC are currently undertaking a restructuring and recruitment process to meet the additional responsibilities.

RESOLVED:

That the update be noted.

32 CHESHIRE EAST LEARNING DISABILITY CONFERENCE - ACTIONS TO BE TAKEN FORWARD IN 2022/23

The Committee received a report outlining the findings and feedback from the Cheshire East Learning Disability Conference which was held on 20 June 2022. Over 200 delegates attended, including partners from across social care, health, care providers, people with learning disabilities and carers.

Following the feedback 3 key actions were formulated

Action 1 - Make things better for people who want to stay up late

Action 2 - Give people more chance to have their say on services and what they want to do

Action 3 - Provide better access to information for people with learning disabilities and carers

An Action Plan was developed to take those actions forward. The Action Plan would consider the tasks needed to be undertaken, the partners involved and how success would be measured. Members agreed that the actions which had helped develop the action plan following the conference were a positive step forward and the committee thanked everyone for all of their hard work.

The committee requested that a report on a review of the initiatives implemented come back to committee in twelve months' time.

RESOLVED (Unanimously)

That the recommended actions and action plan be endorsed.

33 WORK PROGRAMME

Consideration was given to the Committee's work programme.

It was agreed that the following amendments would be made to the work programme

- A review of the Learning Disability Conference initiatives be added to the work programme for September 2023
- A request for the Care at Home Recommission be brought forward to either the November 2022 or January 2023 committee.

It was requested that items for the agenda would only be listed if there was a supporting paper to go with them and that when there are several items

listed on the agenda that consideration be given to either having an additional meeting or notification that the meeting would be longer than usual.

RESOLVED

That the Work Programme be noted subject to the inclusion of the amendments outlined above.

34 REPORTING OF OFFICER DELEGATED DECISIONS

The committee received a summary of the two officer decisions which had been approved since the July committee. These were:-

- Funding for the “Routine Commissioning of Pre-Exposure prophylaxis (PrEP)”
- Uplift of fee rates for Care at Home providers provided by the Better Care Fund.

Comments and questions were received from members in relation to the following:

- Is the Better Care Fund an ongoing situation
- What method do we have that domiciliary providers pass this on to care workers

RESOLVED

That the Officer Delegated Decisions be noted.

35 URGENT BUSINESS: ALL AGE CARERS HUB

In accordance with Section 100B (4) (b) of the Local Government Act 1972, the Chair agreed to an additional item of business relating to The All Age Carers Hub on the grounds that the matter could not wait until the next meeting as the contract needs to be signed.

On 27 September 2021, the Adults and Health Committee received a report on the All Age Carers Hub and Strategy and gave approval for the recommissioning of the All Age Carers Hub contract, ending in December 2022, with Cheshire West and Chester Council and Cheshire Clinical Commissioning Group. Since that decision was taken, it had not been possible to jointly commission in partnership with Cheshire West and Chester Council and, therefore, committee was being asked to note that the re-commissioning would no longer be a joint venture and give approval to continue with the delegation of authority to the Executive Director of Adults, Health and Integration to award the All Age Carers Hub contract.

It was noted that there had been no change to the budget or the model.

Comments and questions were received from members in relation to the following:

- Concerns were raised regarding this urgent business being dealt with verbally and without a briefing paper.
- Sought assurance that there would be no financial charges resulting from the move from a joint to a single commission;
- Concerns around providers being aware that this was now a single commission rather than a joint commission as it may have had an impact on those who wanted to bid.

Officers reassured the committee that there had been no change to the budget following the change, there would be no charges for Cheshire East being a single commissioner, and that all providers were aware that it was a single commission when it had gone out to tender.

RESOLVED (by majority)

That the Adults and Health Committee:

1. Acknowledged that this recommissioning was no longer a joint venture with Cheshire West and Chester Council;
2. Delegated authority to the Executive Director of Adults, Health, and Integration to award the All-Age Carers Hub contract.

The meeting commenced at 10.00 am and concluded at 12.10 pm

Councillor A Moran