

CHESHIRE EAST COUNCIL

Minutes of a meeting of the **Health and Adult Social Care and Communities Overview and Scrutiny Committee**
held on Thursday, 9th November, 2017 at Committee Suite 1,2 & 3,
Westfields, Middlewich Road, Sandbach CW11 1HZ

PRESENT

Councillor B Dooley (Acting-Chairman)

Councillors Rhoda Bailey, G Baxendale, S Brookfield, E Brooks, S Edgar, O Hunter, L Jeuda, S Pochin, J Rhodes, L Smetham, A Stott, M Warren, Bratherton and M J Weatherill

42 ALSO PRESENT

Councillor Janet Clowes- Portfolio Holder for Adult Care and Integration
Councillor Paul Bates- Portfolio Holder for Finance and Communications
Councillor Liz Wardlaw- Portfolio Holder for Health
Councillor Stuart Gardiner- Deputy Cabinet Member
Linda Couchman- Interim Director of Operations, Adult Social Care
Fiona Reynolds- Director of Public Health
Nichola Glover-Edge- Director of Commissioning
Tracy Parker-Priest- Executive Director of Transformation and Commissioning
Jamaila Tausif- Associate Director of Commissioning South Cheshire Clinical Commissioning Group

43 APOLOGIES FOR ABSENCE

Councillor C Chapman.

44 MINUTES OF PREVIOUS MEETING

RESOLVED- That the minutes of the meeting held on 12 October 2017 be confirmed as a correct record and signed by the Chairman.

45 DECLARATIONS OF INTEREST

There were no declarations of interest.

46 DECLARATION OF PARTY WHIP

There were no declarations of the existence of a party whip.

47 PUBLIC SPEAKING TIME/OPEN SESSION

There were no members of the public present who wished to speak.

48 **A REVIEW OF THIRD SECTOR GRANT PROVISION IN SOUTH CHESHIRE**

Jamaila Tausif, Associate Director of Commissioning and Tracy Parker-Priest, Executive Director of Transformation and Commissioning at South Cheshire and Vale Royal Clinical Commissioning Group (CCG) attended the meeting to speak on the Third Sector Grant Provision in South Cheshire.

Jamaila explained that South Cheshire and Vale Royal CCG had undertaken a review of the Third Sector as part of an initiative to achieve financial stability. A panel of commissioners, patient representatives, GP's, Quality Leads and an Equality and Diversity Officer had evaluated each individual 3rd Sector grant.

The review had found that a number of Third Sector Grants had been dual funded, for example the Carers Trust had received a Third Sector grant through the CCG alongside funding through the Better Care Fund.

The panel had reached an agreement on each individual Third Sector grant offer, and some of these had included joint commissioning with the council. Further work with the council was ongoing to provide a joint strategy for the Third Sector.

The Committee considered the proposed change in funding allocation. There was some discussion about patient understanding of where funding came from. Tracy advised that with some contracts, they had moved from an NHS Activity Contract to a formal NHS Contract in order to join up and streamline services. The Committee acknowledged the vital role of the Third Sector, and questioned if the service users would notice any difference in service delivery. Tracy assured the Committee that direct engagement had been sought from providers, and conversations were ongoing to ensure providers knew where to get support from. The impacts of the reduction to grants would be monitored for the next three months.

RESOLVED: That Jamaila and Tracy be thanked for their presentation.

49 **RESPITE REVIEW**

The Committee was advised that over the last five years, there had been a greater demand for Respite Care with 250 people accessing the service. However it had become apparent that service users required different aspects of care as part of their overall respite care package and that the council needed to formalise its respite care offer. Nichola Glover-Edge, Director of Commissioning had worked with carers to explore different kinds of respite to consider a more flexible, enhanced approach for service users with improved quality.

The Committee asked for clarification of all the role of the Council in the process. The development of an Integrated Carer's Hub model contributed to a 'Whole System Redesign' for Carers outcomes, services and pathways. The service would provide a single point of contact for Carers, professionals and the community across the whole of Cheshire East offering both access to a range of intervention and support services, and a route through to other appropriate support services. With this approach, it could mean a confederation of agencies, including the council, rather than the procurement of one single agency.

The Committee asked about the sustainability and quality standards for the care packages. Councillor Clowes advised that sustainability was dependent upon the requirements of the carers, but flexibility had been built into the system. Nichola Glover-Edge advised the Committee that the Quality Team have looked at every contract to ensure the quality is of a good standard.

RESOLUTION: That the report be received and noted.

50 ACCOMMODATION WITH CARE

Councillor Clowes explained that work had been done by commissioners to assess how the council worked with providers, if there was clear purpose and if there were alternative options to the current offer.

Councillor Clowes requested that the Committee received weekly Care Quality Commission (CQC) reports that showed published inspection reports on care services across the north of England. Whilst this was useful, the reports were out of date as they were published three months later. The council had a duty of care to both Care Homes and individuals and was unable to share data any earlier than the CQC. The Committee asked that in instances where Care Homes were failing, would it be possible to bring training to help support the Home. Councillor Clowes noted the Clinical Commissioning Group (CCG) had helped towards this by allocating budget towards staff training.

RESOLVED: That the report be received and noted.

51 CARE AT HOME

Councillor Janet Clowes opened the item on Care at Home, this related to domiciliary care in patients homes. The Council was aware, through public engagement, that the preference of people was to stay in their own home. The Council was identifying ways in which it can support people to stay at home, use their personal budgets and direct payments in a more efficient way so the care they receive would be more suited to their needs.

The Council had worked to move away from time and task based processes which was in line with national guidance. This meant that care could be provided as part of a package for a cost rather than costing time and working out care as part of a timed package. This was in partnership with the Clinical Commissioning Groups (CCGs), this was important for the way in which the Council arrange packages of care for known frail people as and when they arrived at hospital.

GPs had reported this had maintained continuity for patients, which was often broken when people went into hospital.

The Committee asked if the Council was up to date in the processing of assessments of care packages. Councillor Clowes advised there were delays and the drop in processing times had happened over the last 3-4 months, but this was linked to an increase in demand. The Council was prioritising and had looked at new methods to accommodate future increases in demand as

Discharge to Assess took priority over someone with lesser needs who needed a care package.

RESOLVED: That the report be received and noted.

52 EVERYBODY SPORT & RECREATION

Mark Wheelton, Leisure Services Manager at Cheshire East Council, Peter Hartwell, CEO at Everybody Sport and Recreation (ESAR) and Donna Williamson, Health and Well-Being Manager at ESAR attended the meeting and presented the ESAR performance report for 2016-17.

Mark explained that ESAR was a Trust in it's fourth year of operation. Cheshire East commissioned the services in line with the council outcomes, primarily 'people live well and for longer'.

Peter highlighted points from the report that showcased performance across the Trust. These included:

- 7,500 children signed up to the Learn To Swim (LTS) programme with an recent increase of 15%.
- The Trust had successfully tendered for the Public Health One You contract.
- The Trust had branched out into the café and catering services, and offered A Taste For Life at Crewe Lifestyle Centre and Holmes Chapel, and won a contract to provide catering services outside of the borough in Newcastle-under-Lyme.
- The Trust had provided new investment opportunities and had worked with the Council to invest £15.1 million in Crewe and with Holmes Chapel Parish Council to invest £1 million. There had been £1.3 million of new gym equipment invested since transfer.

Peter advised the Committee that the Trust had made over £5 million savings, £700,000 of which were management fee savings.

In response to the presentation the committee raised questions about the proposed redevelopment of Crewe town centre and how ESAR could maintain footfall with competition from other leisure businesses.

RESOLVED:

- (a) That Mark, Peter and Donna be thanked for their presentation;
- (b) That the report be received and noted.

53 FORWARD PLAN

The Committee reviewed the Forward Plan.

RESOLVED- That the Forward Plan be received and noted.

54 WORK PROGRAMME

The Committee reviewed its Work Programme.
RESOLVED-

- (a) That the Palliative Care Spotlight Review be changed to an update with a view to further investigation if needed.
- (b) That the Better Care Fund item and the update from Delayed Transfer of Care be presented to the Committee concurrently to avoid any duplication of presentation.
- (c) That the Carers Strategy be removed from the work programme and information be provided to Councillors outside the meeting by email.

The meeting commenced at 10.00 am and concluded at 12.46 pm

Councillor B Dooley (Acting Chairman)