# Public Document Pack OXFORDSHIRE **COUNTY COUNCIL**

## Notice of a Meeting

# **Adult Services Scrutiny Committee** Monday, 17 December 2012 at 10.00 am **County Hall**

## Membership

Chairman - Councillor Jim Couchman

Deputy Chairman - Councillor Mrs Anda Fitzgerald-O'Connor

Councillors: Jenny Hannaby John Sanders

> Alvas Ahmed Dr Peter Skolar

Charles Mathew Richard Stevens

Alan Thompson David Wilmshurst

Notes:

Date of next meeting: 10 January 2013

## What does this Committee review or scrutinise?

• Adult social services; health issues;

## How can I have my say?

We welcome the views of the community on any issues in relation to the responsibilities of this Committee. Members of the public may ask to speak on any item on the agenda or may suggest matters which they would like the Committee to look at. Requests to speak must be submitted to the Committee Officer below no later than 9 am on the working day before the date of the meeting.

## For more information about this Committee please contact:

Chairman Councillor Jim Couchman

E.Mail: jim.couchman@oxfordshire.gov.uk

Committee Officer Simon Grove-White, Tel: (01865) 323628

simon.grove-white@oxfordshire.gov.uk

Peter G. Clark

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**County Solicitor** December 2012

## **About the County Council**

The Oxfordshire County Council is made up of 74 councillors who are democratically elected every four years. The Council provides a range of services to Oxfordshire's 630.000 residents. These include:

schools social & health care libraries and museums

the fire service roads trading standards land use transport planning waste management

Each year the Council manages £0.9 billion of public money in providing these services. Most decisions are taken by a Cabinet of 9 Councillors, which makes decisions about service priorities and spending. Some decisions will now be delegated to individual members of the Cabinet.

## **About Scrutiny**

## Scrutiny is about:

- Providing a challenge to the Cabinet
- Examining how well the Cabinet and the Authority are performing
- Influencing the Cabinet on decisions that affect local people
- Helping the Cabinet to develop Council policies
- Representing the community in Council decision making
- Promoting joined up working across the authority's work and with partners

## Scrutiny is NOT about:

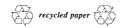
- Making day to day service decisions
- Investigating individual complaints.

## What does this Committee do?

The Committee meets up to 6 times a year or more. It develops a work programme, which lists the issues it plans to investigate. These investigations can include whole committee investigations undertaken during the meeting, or reviews by a panel of members doing research and talking to lots of people outside of the meeting. Once an investigation is completed the Committee provides its advice to the Cabinet, the full Council or other scrutiny committees. Meetings are open to the public and all reports are available to the public unless exempt or confidential, when the items would be considered in closed session

If you have any special requirements (such as a large print version of these papers or special access facilities) please contact the officer named on the front page, giving as much notice as possible before the meeting

A hearing loop is available at County Hall.



## **AGENDA**

## 1. Apologies for Absence and Temporary Appointments

## 2. Declarations of Interest - see guidance note

## **3. Minutes** (Pages 1 - 8)

To approve the minutes of the meeting on November 13<sup>th</sup> 2012, and discuss any matters arising.

## 4. Speaking to or petitioning the Committee

Laura Price will address the committee regarding the proposed rise in fees for Day Opportunities in Oxfordshire, and in particular for the Elms Centre in Witney.

# 5. Day Opportunities and Transport Strategy Consultation (Pages 9 - 22)

10:05

Councillor Arash Fatemian, Cabinet Member for Adult Services, will introduce the report on the recent consultation on the Day Opportunities and Transport Strategy.

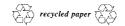
The committee are invited to:

- Consider the feedback
- Discuss the proposals and provide guidance on any changes
- Comment on possible ways forward.

## 6. Update on Care Quality Commission Meeting

10:50

The Chairmen of the Adult Services Scrutiny Committee and Health Overview Scrutiny Committee will give a verbal briefing to the committee on their recent meeting with the Care Quality Commission.



## 7. Director's Update

11:00

The Director of Social and Community Services will update the committee on recent developments in Adult Services at the local and national level.

# 8. Developing the Project Agreement with the Oxfordshire Care Partnership (Pages 23 - 44)

11:40

It is **RECOMMENDED** that the public be excluded for the duration of item 8 (since it is likely that if they were present during that item there would be disclosure of exempt information as defined in Part I of Schedule 12A to the Local Government Act 1972 (as amended) and specified below in relation to that item and since it is considered that, in all the circumstances of the case, the public interest in maintaining the exemption outweighs the public interest in disclosing the information on the grounds set out in that item.

THE REPORT RELATING TO THE EXEMPT ITEM HAS NOT BEEN MADE PUBLIC AND SHOULD BE REGARDED AS STRICTLY PRIVATE TO MEMBERS AND OFFICERS ENTITLED TO RECEIVE IT.

The information in this case is exempt in that it falls within the following prescribed categories:

3. Information relating to the financial or business affairs of any particular person (including the authority holding that information)

and it is considered that, in all the circumstances of the case, the public interest in maintaining the exemption outweighs the public interest in disclosing the information, in that otherwise commercially sensitive information would be disclosed to the detriment of the companies involved.

John Jackson will introduce the paper outlining progress in the negotiations towards the project agreement for the Oxfordshire Care Partnership. Stephen McHale, County Procurement Manager, and Christian Smith, Contracts Solicitor, will be present to provide further technical detail as required.

## 9. Close of Meeting

12:30



## **Declarations of Interest**

## The duty to declare.....

Under the Localism Act 2011 it is a criminal offence to

- (a) fail to register a disclosable pecuniary interest within 28 days of election or co-option (or reelection or re-appointment), or
- (b) provide false or misleading information on registration, or
- (c) participate in discussion or voting in a meeting on a matter in which the member or co-opted member has a disclosable pecuniary interest.

#### Whose Interests must be included?

The Act provides that the interests which must be notified are those of a member or co-opted member of the authority, **or** 

- those of a spouse or civil partner of the member or co-opted member;
- those of a person with whom the member or co-opted member is living as husband/wife
- those of a person with whom the member or co-opted member is living as if they were civil partners.

(in each case where the member or co-opted member is aware that the other person has the interest).

#### What if I remember that I have a Disclosable Pecuniary Interest during the Meeting?.

The Code requires that, at a meeting, where a member or co-opted member has a disclosable interest (of which they are aware) in any matter being considered, they disclose that interest to the meeting. The Council will continue to include an appropriate item on agendas for all meetings, to facilitate this.

Although not explicitly required by the legislation or by the code, it is recommended that in the interests of transparency and for the benefit of all in attendance at the meeting (including members of the public) the nature as well as the existence of the interest is disclosed.

A member or co-opted member who has disclosed a pecuniary interest at a meeting must not participate (or participate further) in any discussion of the matter; and must not participate in any vote or further vote taken; and must withdraw from the room.

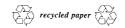
Members are asked to continue to pay regard to the following provisions in the code that "You must serve only the public interest and must never improperly confer an advantage or disadvantage on any person including yourself" or "You must not place yourself in situations where your honesty and integrity may be questioned.....".

Please seek advice from the Monitoring Officer prior to the meeting should you have any doubt about your approach.

#### **List of Disclosable Pecuniary Interests:**

**Employment** (includes "any employment, office, trade, profession or vocation carried on for profit or gain".), **Sponsorship**, **Contracts**, **Land**, **Licences**, **Corporate Tenancies**, **Securities**.

For a full list of Disclosable Pecuniary Interests and further Guidance on this matter please see the Guide to the New Code of Conduct and Register of Interests at Members' conduct guidelines. <a href="http://intranet.oxfordshire.gov.uk/wps/wcm/connect/occ/Insite/Elected+members/">http://intranet.oxfordshire.gov.uk/wps/wcm/connect/occ/Insite/Elected+members/</a> or contact Rachel Dunn on (01865) 815279 or <a href="mailto:rachel.dunn@oxfordshire.gov.uk">rachel.dunn@oxfordshire.gov.uk</a> for a hard copy of the document.





## **ADULT SERVICES SCRUTINY COMMITTEE**

**MINUTES** of the meeting held on Tuesday, 13 November 2012 commencing at 10.00 am and finishing at 12.05 pm

Present:

**Voting Members:** Councillor Jim Couchman – in the Chair

Councillor Mrs Anda Fitzgerald-O'Connor (Deputy

Chairman)

Councillor Jenny Hannaby Councillor Alyas Ahmed Councillor Charles Mathew Councillor John Sanders Councillor Dr Peter Skolar Councillor Richard Stevens Councillor David Wilmshurst

Other Members in Attendance:

Councillor Arash Fatemian

By Invitation:

Officers:

Whole of meeting John Jackson

Sara Livadeas Lucy Butler

Simon Grove-White

Part of meeting Andrew Colling

Virginia Moffatt Mary Judge Sheila Browne Adrian Chant

Agenda Item Officer Attending

The Scrutiny Committee considered the matters, reports and recommendations contained or referred to in the agenda for the meeting and agreed as set out below. Copies of the agenda and reports are attached to the signed Minutes.

## 239/12 APOLOGIES FOR ABSENCE AND TEMPORARY APPOINTMENTS

(Agenda No. 1)

Councillor Alan Thompson sent apologies.

## 240/12 DECLARATIONS OF INTEREST - SEE GUIDANCE NOTE

(Agenda No. 2)

None

## **241/12 MINUTES**

(Agenda No. 3)

The minutes of November 13<sup>th</sup> were signed and approved, subject to the clarification in Item 10 that the terms of reference of the workgroup will be reconsidered following the election in May.

## 242/12 SPEAKING TO OR PETITIONING THE COMMITTEE

(Agenda No. 4)

None

## 243/12 DIRECTOR'S UPDATE

(Agenda No. 5)

The Director for Social and Community Services discussed his attendance at the recent national Conference for Directors of Social Services. It was highlighted that despite recent ministerial changes, the political agenda for social care remains broadly similar, with an emphasis on prevention, early intervention, and care in the community. On the question of the likely implementation of Dilnot recommendations, the Director highlighted that there appeared to be differences of opinion within the government. The officer view remains that whilst the Dilnot recommendations would address an important source of inequality within the system, they will not resolve the issue of a future shortfall in funding as a result of demographic pressures.

The Director also discussed his recent attendance at a meeting of the Health Select Committee, which looked at the implications of the spending review on the health and social care system. It was AGREED that the Committee Officer would distribute the transcript of the meeting to members of this committee.

The Director made the following statement regarding the recent Panorama documentary on Winterbourne View aired on October 29<sup>th</sup>:

"On 29<sup>th</sup> October, Panorama ran a follow up to its previous piece on Winterbourne View, a hospital for people with learning disabilities and mental health needs.

The programme was put together to coincide with the sentencing of employees working at Winterbourne View, a facility run by a private company called Castlebeck, for offences committed and filmed by Panorama in 2011.

An inpatient facility in Wiltshire run by the Ridgeway Partnership (the Oxfordshire Learning Disability NHS Trust), Postern House was featured in the follow-up as two of the service users featured in the programme had spent time there.

Neither of the individuals featured in the Panorama programme are from Oxfordshire. However, as the county council commissions significant services from Ridgeway, it is important that we brief you on the content of the programme and on ongoing work that the county council undertakes to ensure these services meet high standards.

The programme did not suggest that there has been systematic unchallenged abuse at Postern House as in the case of Winterbourne View. However, the programme did make reference to incidents involving the two individuals which required investigation and action by Ridgeway.

The safety of service users is of the utmost importance. If concerns are raised about services purchased by us we investigate to ensure people are safe and being looked after properly. Oxfordshire County Council works with the NHS Buckinghamshire & Oxfordshire PCT and our providers to ensure services for people with learning disabilities are of high quality and appropriate for the needs of the service users. Following the original exposure of abuse by Panorama, Oxfordshire reviewed its commissioning arrangements and has strengthened processes for pre-placement quality checks, tools for reviewing placements, and guidance for staff.

In Oxfordshire we have processes in place that regularly review adults with learning disabilities in inpatient hospital services. This includes monthly reviews of all patients, their care needs and their progress and an annual review of services which includes interviews with patients, staff, carers and families, unannounced visits of services and review of care and progress. We also look at any reviews undertaken by the Care Quality Commission who have recently reviewed inpatient services and found services in Oxfordshire fully compliant.

In view of the fact that the Ridgeway facility was featured in the Panorama programme, we have been working with the NHS Buckinghamshire & Oxfordshire PCT to:

- Assure ourselves that Oxfordshire patients are safe and well supported
- Ensure Oxfordshire service users and families who are supported by Ridgeway (especially the 10 people in inpatient services) are assured of their own safety, and have access to information and support"

It was AGREED that Southern Health should be invited to a future meeting of the committee.

The committee were informed that the chairmen of Adult Services and Health Overview Scrutiny Committees have scheduled a meeting with the Care Quality Commission. It was AGREED that Sara Livadeas would attend the meeting and that the committee would be informed of the outcome of the discussions.

The Director gave the committee a preliminary update on the response to the day opportunities consultation. A full report will be brought to the December 17<sup>th</sup> meeting of the scrutiny committee.

The response to the consultation was felt to be broadly positive. It was emphasised that primary importance would be given to the responses of the services users affected by the consultation (i.e. users not eligible for financial support under the fairer changing scheme).

The Cabinet Member for Adult Services stated that he appreciates the challenge given by the committee on the matter and that a full report will be presented to Adult Scrutiny Committee on 17<sup>th</sup> December 2012 prior to going to cabinet in January 2013.

Sara Livadeas AGREED to distribute an updated summary on the structure of County Council funded Day Opportunities.

## 244/12 LINK REPORT ON CARE HOMES VISITS AND UPDATE

(Agenda No. 6)

Mary Judge and Sheila Browne gave an overview of the work done by the LINk in visiting care homes in Oxfordshire. 30 volunteers visited 50 care homes across the county. All volunteers were CRB checked and given a clear set of guidelines on what to look for and how to conduct themselves during visits. Where concerns were raised a follow up visit took place.

The most persistent issue arising from conversations with service users and families was that it is often difficult or confusing when sourcing information about the options for care.

It was also found that there was sometimes a lack of awareness among users of the role of the Local involvement Network. It was felt that this emphasised the importance of Healthwatch establishing a strong profile early in their existence. It was emphasised that transition work was ongoing to this effect.

The committee were complementary of the quality of the project and the conclusions of the report.

The Deputy Director for Joint Commissioning distributed a note outlining the directorate's response to the report's findings. See below for full text:

"I welcome the report from the Local Involvement Network (LINk).

I feel very strongly that we have a collective responsibility to ensure that older and vulnerable people are safe and experience good quality care in their old age. The responsibility for the quality of care that older people receive sits first and foremost with the service provider. The primary relationship is between the care home provider and the older person and we, along with CQC, health professionals, elected members, the community and the LINk have an important role in supporting that relationship, and in alerting should things go wrong. It is our aspiration to improve the quality of services that people are receiving in Oxfordshire and we have a great deal of work going with that aim in mind. The work of the LINk contributes to this overall plan. Later on in this agenda I will be reporting on the work that my contracts team carry out to assure the quality of services that we buy from care homes through our contract monitoring.

There are about 150 registered care homes in Oxfordshire; about 108 of these are care homes that provide services for older people. This translates into over 4,200 beds for older people - the Council buys about 1/3 of these.

The general approach that we are promoting is one that

- to promote care homes as being a key part of the community;
- to encourage providers to develop quality standards that are developed in line with the quality principles set out in the Social Care White Paper (eg start with the person, co-production, transparency, workforce etc);
- encourage providers to seek feedback on their services.

We believe that by encouraging and fostering this relationship we can help to champion the needs of older people living in the area and promote good quality care and support. It is for this reason I welcome the work that the LINk does and for this same reason that I am promoting initiatives such as Adopt a Care Home. It is extremely helpful to have these independent views of people's experiences in a care home setting.

I would now like to comment on the report.

What the LINk is reporting generally concurs with our findings when OCC staff visit care homes. That is that residents are generally well looked after, they are comfortable and live in a safe and secure environment.

The LINk has also found that residents are under occupied and perhaps not participating in activities. They are not participating in exercise. The quality of provision tends to vary between homes, often linked to the quality of local management and leadership of the service provider. In common with the LINk we would like to see more participation in activities. There are clear benefits to maintaining mobility and activity for people of all ages.

However we also recognise that this involvement in activities may be a matter of personal choice. In this respect I think that one of the key issues we need to consider is the quality of the interaction between residents and staff member. In accepting that this may at times be of a short duration I believe that the

challenge for us all must be to ensure that interaction is personal to the resident and of a consistent high quality throughout.

I'm very pleased to hear the comments in this report about the commitment of staff. We know that staff work hard at a local level to deliver a good service.

I would also like to reflect on satisfaction levels that we have found from our annual survey across Oxfordshire. The view appears to be that people are generally happy with services they receive. A survey of 546 social care clients was undertaken in February 2012 and the questionnaire's returned in respect of care home services indicated that overall 91% were satisfied with services (71% of them being extremely or very satisfied), and only 2% were dissatisfied. But this is not a reason for complacency - the LINk's report provides a useful reference document that we can use to help drive forward our quality agenda.

- One initiative we have started is the establishment of a Quality Network.
   Membership is mainly made up of providers supported by officers from the
   Council. The group is considering how best we can promote quality across a
   range of services in Oxfordshire. Care home providers are part of this group and
   I will make sure that the LINk's report is shared with them.
- NHS Oxfordshire operates a Care Homes Support service (CHSS). Review of the Care Home Support Service provided by Oxford Health and commissioned by the PCT. I will make sure that through our liaison with that team that the LINk's comments about End-of-Life services and Dementia inform that review.
- Members will also be aware that Oxfordshire Clinical Commissioning Group (OCCG has been successful in receiving money to support four dementia projects. One of the projects involves creating a "personalised" service for people with dementia who are in care homes or hospitals but who also have other physical and mental needs. I am sure the LINk's report will provide a useful reference for this work."

## 245/12 VIDEO: OLDER PEOPLE COMMISSIONING STRATEGY

(Agenda No. 7)

The committee viewed the video on the Joint Commissioning Strategy for Older People, produced in partnership with NHS officers.

Draft copies of the accompanying Joint Commissioning Strategy were distributed to the committee.

## 246/12 ENSURING QUALITY IN COMMISSIONED SERVICES

(Agenda No. 8)

Andrew Colling, Quality and Contracts Manager, and Virginia Moffatt, Unit Manager for LD Commissioning, introduced the report on Contract Monitoring.

The committee were informed that the development of a risk-based approach to contract monitoring is a work in progress and forms part of a wider approach to ensuring quality. Whilst all contracts will receive an annual contract review, greatest attention will be given to areas of most concern.

The committee sought clarity on how the monitoring processes worked for out of county placements. Officers responded that in these cases, the county council relies on assurances from the relevant local authority. It was emphasised that out of county placements are only used in exceptional circumstances.

247/12	CLC	SE	OF	MEE.	<b>TING</b>

(Agenda No. 9)

The meeting clos	sed at 12:05.	
		in the Chair
Date of signing		

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## **Adult Services Scrutiny Committee - 17 December 2012**

## **Day Opportunities and Transport Strategy Consultation**

Report by Lucy Butler, Deputy Director, Adult Social Care

## **Introduction and Background**

- 1. This paper provides feedback on the public consultation which took place from 1<sup>st</sup> June to 31<sup>st</sup> October 2012 in Tier 2 and Tier 3 services providing day opportunities for older people and people with a physical disability. The proposals are to introduce transport charges in Tier 2 services and increase charges in Tier 3 services for attendance and transport.
- 2. Tier 2 services are provided by small and medium sized voluntary sector organisations in small local venues such as village halls or community centres. Tier 3 services are the 8 larger resource centres providing support to people with higher needs. Seven of which are run by the County Council internal service and one by Leonard Cheshire in Witney. The relevant Tier 3 services are listed in Appendix 1
- 3. On 6<sup>th</sup> March 2012 scrutiny committee received a report on the Day Opportunities and Transport Strategy, which detailed Social & Community Services commissioning intentions in regard to 3 Tiers of day service provision for older people and people with a physical disability, including transport.
- 4. The report discussed the need for sustainable services and the introduction of charges which better reflected the cost of providing services, although not the full cost. A high percentage of people using the day services are not eligible for social care support but may prefer to have access to the service and pay for it.
- 5. Full consultation was required and scrutiny committee was asked to review the results of the consultation, consider any changes to the proposals and comment on ways forward.

## The Proposals

- 6. Tier 2 services
  - Introduce daily transport charges of £5 for a return journey.
- 7. Tier 3 services
  - Increase the attendance charge (from £4.18 per day to £15.00 per day) for a 5 hour day (10am-3pm).
  - Introduce the option of a 3 hour day for £9, (11am to 2pm)
  - Increase the transport charge from 82p to £5 for a return journey
  - Offer of additional subsidised services to support health & wellbeing such as basic foot care, massage and seated exercise classes.

8. It is important to note that these charges will only apply to people who do not meet the criteria to receive services under FACS. Fair Access to Care Services which is the criteria against which support is allocated. People who are assessed as having Critical and Substantial needs under FACS, and do not have alternative means, will continue to have their care funded by the Council via a personal budget. For these people a charge applies against their Support Plan, so they are effectively already paying towards their day service. Therefore these proposals are to extend this charge to people who do not have a personal budget. In Tier 3 services approximately 30% of current users are FACS eligible, however all service users have been encouraged to seek an assessment if they are uncertain of their eligibility. Basic information and guidance on FACS eligibility was made available in each centre for all users. The locality teams have been made aware to support any additional resource planning should demand exceed capacity; however the number of people requesting the assessment is low. Some people will have enquired through the Social & Health care team but they are not reporting increases. Tier 3 centres mangers have recorded 6 expressions of interest by people whom they have supported to contact their locality team accordingly.

#### Consultation - Tier 2 Services

9. The consultation took place from 1<sup>st</sup> June to 31<sup>st</sup> October 2012. Each service user was sent a questionnaire with an explanatory letter. The questionnaires were distributed by the local centres who worked with people on any queries they had.

#### Consultation results - Tier 2 Services

10. Approximately 150 questionnaires were sent out and 73 responses were returned, which is a high level of response.

Table 1: Number of responses from centres

Centre	No of surveys returned	Centre run by:
Bromsgrove,		
Faringdon	5	u/k charity
Bullingdon		
Community Club	1	Age UK
Christchurch Centre	1	Age UK
Grove	4	Independent charity
Hinton Waldrist	7	Age UK
Long Hanborough	4	Independent charity
Marston Court	14	OSJ
Eynsham	7	Independent charity
Cutteslowe	1	Age UK
Oakwood House	8	Age UK
Shipton on Cherwell	2	Age UK
St Francis Court	10	Age UK
Not Identified	9	

- 57% of respondents that stated their age were aged 75-90
- 29% that stated their age were aged 90+

## Responses to questions about changes to the cost of transport.

- 11. Of those who responded:
  - Just over half (52%) said they would continue to use the transport at the proposed cost.
  - Under half (44%) said they would not reduce the number of days they attend if the cost increased to the proposed level.
  - Under half (44%) of those that stated they would not reduce the number of days they attend only attend one day a week.
  - Less than 1 in 5 (19%) said they would want to find alternative transport e.g. asking a friend or relative

Table 2: Numbers of responses to questions

Response	Changes to the cost of transport.			
	Would you continue to use the transport service if it cost £5?	Would you change the number of days you attend if the transport cost £5?	Would you want to find alternative transport? e.g. asking a relative or friend?	
Yes	33	25	14	
No	38	32	52	
N/A	2	16	7	

## **Analysis of comments on surveys**

12. In addition to the answers to the "closed" questions reported above, 37 people gave their views on the survey in the "general comments" box. There were various comments but the main ones relating to key themes are listed below:

Issue	No. of comments
Comments on not wanting/able to pay in advance	18
Expressing concern about the rise in cost	17
Concern that would not be able to afford it	14
Comments on attendance at the centres being very	9
important for social contact	
Suggestions to phase the implementation of charges	6
more gradually or to levy a lower cost	
Expressing concern about the impact on carers	2
Concern that it will isolate people living in villages	2
Suggestion that this charge should be means tested	1

- 13. It must be noted that transport is a major proportion of the cost for attending one of the Tier 2 services and that whilst there has been considerable feedback from people and the centres themselves that they welcome transport still being provided increasing the charges, as shown above, may impact their attendance patterns.
- 14. Many of the Tier 2 providers organise their own transport and it is thought that this might happen in even more cases.

## Consultation - Tier 3 Health & Wellbeing Resource Centres

- 15. The consultation took place from 1<sup>st</sup> June to 31<sup>st</sup> October 2012 and involved:
  - People who attend the centres
  - Families and carers.
  - Staff and volunteers
  - The general public and friends of local centres.
- 16. We engaged with people through a survey, focus groups with service users and families in the centres, public meetings and through local contact.
- 17. Each service user was sent a questionnaire with a letter which explained why we were undertaking the consultation and other information, which included who to contact for help, some useful questions and answers about the proposals and details of the proposed additional services.
- 18. Staff at the local centres discussed and clarified queries from service users but did not support people to fill out the surveys to avoid any risk of the findings being influenced by staff. Local volunteers were made available in the centres to support people to complete the questionnaires and the survey was also available on the County Council public website.
- 19. Fifteen focus groups were facilitated by local and senior managers, two in each centre run by the internal service and one in the Witney centre run by Leonard Cheshire. These events took place in June and gave people who use the services and their families the opportunity to discuss the proposals, give their views and for officers to share useful information such as advice on FACS eligibility and support to complete the questionnaires. These meetings were minuted and a copy of the questions and answers from each centre was made available to service users, families and carers.
- 20. Three public meetings were facilitated by local and senior managers in the local centres, two evening ones in Bicester and Abingdon on 11<sup>th</sup> and 17<sup>th</sup> July and one in Oxford on Saturday 14<sup>th</sup> July.
- 21. Throughout the consultation local managers talked with service users and families, recording and answering queries where possible, and forwarding them to the engagement team and managers for responses as appropriate. These were also included in an overall Question and Answer document, which was made available for all stakeholders in addition to local ones coming out of the focus groups.

The FAQ is attached as Appendix 2

#### 22. In addition to these events:

- Information and email links to the County Council consultation pages were sent to County Councillors
- Staff and volunteer briefings took place in all the centres
- Integrated Transport Unit staff attended briefings
- Friends Associations had briefings
- A Unison briefing took place
- Updates for Council staff and associated colleagues were provided
- Information and email links to the County Council consultation pages were sent to related organizations such as LINK, Age UK, Carers Forum, Oxfordshire Advocacy and Broker organisations
- 23. A member of the engagement team also carried out a number of face to face and telephone interviews with centre users in September to explore the themes emerging from the survey returns. 7 interviews were completed, 4 with people who use the services and 3 carers. Although this is a relatively low number the responses concur with the survey and focus group feedback.
- 24. In early September the local and senior managers held meetings in the centres to outline the feedback in order to share with people the results up to then and talk them through the next steps regarding decision making.

#### **Consultation Results - Tier 3**

- 25.830 surveys were posted and 461 were returned. Therefore over 50% of surveys were received back, a high level of response. In comparison, the Social Care User survey is sent out annually by the Directorate and a typical rate of return is 31%.
- 26. There was a good return rate from all centres with the highest return from Bicester and the lowest from Abingdon. 80% of respondents were aged 75 to 90. 69% of respondents were women and 31% are men.

Table 1: Response rates from each centre

Centre	No of Service users who received the survey	No of surveys returned	% returned
1. Abingdon	136	62	45%
2. Banbury	78	43	55%
3. Bicester	129	84	65%
4. Didcot	94	50	53%
5. Oxford Options	119	58	48%
6. Wantage	81	51	62%
7. Wallingford	73	44	60%
8. Witney	120	69	57%
Total:	830	461	Average 55% return

## Responses to questions about increase in the attendance charge

- 27. Of those who responded where the question was applicable to them i.e. non FACS eligible:
  - Over two thirds (70%) said they would continue to attend at the proposed cost.
  - Just under two thirds (65%) said they would not reduce the number of days they attend if the cost increased to the proposed level.\*
  - Three quarters (75%) said they would not be interested in the offer of a shorter day.

Table 2: Numbers of responses to questions:

Question/ response	Would you continue to attend at the	Would you reduce the number of days you attend?	We are offering half day sessions between 11am -2pm for £9. Would you be interested in this.
Yes	proposed cost? 291	125	98
No	124	236	296
N/A	48	102	69

Note: In response to the question about whether people would continue to attend a relatively high number (102) ticked N/A on this question. What is meant by NA on this question is more open to interpretation than on the other questions - it would include people who were only attending 1 day a week and therefore could not reduce further without stopping attending altogether.

## Responses to questions about increase in the transport charge

- 28. Of those who responded where the question was applicable to them i.e. non FACS eligible:
  - Over two thirds (70%) said they would still use the transport at the proposed cost.
  - Over two thirds (69%) said they would not reduce the number of days they attended at the proposed cost.
  - Less than 1 in 5 (17%) said they would want to find alternative transport e.g. asking a friend or relative.

Table 3: Responses to transport questions:

Question/ response	Would you continue to use the transport service if it £5?	Would you reduce the number of days you attend if transport cost £5	Would you want to find alternative transport? e.g. asking a relative or friend?
Yes	241	95	55
No	104	209	268
N/A	118	159	140

## Interest in additional service and support

- 29. People were asked to indicate their interest in a list of subsidised activities that might be included in the centre programme.
  - Over 200 people indicated interest in garden centre visits (236), countryside visits (223), boat trips (219) and pub trips (211).
  - Over 100 people indicated interest in hairdressing (139) and podiatry (123).

• Less than 100 people indicated interest in Sunday lunch club (94) and ten pin bowling (85).

## Analysis of comments on surveys

30. In addition to the answers to the "closed" questions reported above, nearly 200 people gave their views on the survey in the "additional comments" box. There were various comments such as "I don't use transport" but the main ones relating to key themes are listed below:

Table 4: Summary of comments

Issue	No. of comments
Expressing concern about the rises in prices	23
Positive comments about the increase in activities	19
Comments on social contact being very important	16
Will reduce number of days	16
Do not think the increased activities are important and/or	
would like them to be optional rather than have price increase	11
Promoting phasing in	8
Expressing concern about the impact on carers	7

## Calls/Letters of complaints

- 31. Approximately 15 calls from people who had received the survey were taken during June. Most of the calls expressed concern that a decision had been made on the changes and that they were being implemented immediately. People were reassured on the process of consultation, decision making and encouraged to return the questionnaire.
- 32. Nineteen letters of complaint were received and responded to in writing and one personal meeting was requested and held with a family member.

## Focus groups, Public meetings and General Comments

- 33. The local focus groups were well attended and people gave feedback that these were useful and constructive; however the public meetings were less well attended, particularly in the City and Abingdon.
- 34. Throughout the survey feedback, the focus groups and public meetings some general themes were consistent:
  - The centres and staff are held in high regard by their users, carers and local communities as they are seen as essential to staying well, living independently and supporting carers, many of whom are above retirement age themselves.
  - Families and Carers value the respite and have confidence that loved ones are well cared for at the centres and are concerned that they will not be able to manage if they cannot afford to use them.
  - People recognized that the charges need to increase but felt the proposed increase is too high and will be cost prohibitive for some.
  - Many people suggested a staged implementation over 12 to 24 months would assist.

- People felt that the charges should have been reviewed every year to avoid this level of increase.
- FACS and finance assessments have been offered and some will take this up but others felt this was intrusive on their privacy.
- OCC Integrated Transport drivers are appreciated as very helpful and supportive but need more vehicles and drivers in some areas to avoid long runs and short days.
- People are concerned that if people cannot afford to come to the centres what will happen?
- The improved service offer and the options for a shorter day is appreciated by some
- There were also a number of general comments about ensuring maximum use of building and monitoring attendance.
- 35. In the Witney centre, which is run by Leonard Cheshire, people had concerns about having a bigger increase in attendance charges as they currently only pay £1.30 for attendance as opposed to the £4.18p that OCC charge in the other seven centres. However their current transport charge is £1.00 so the transport increase is fractionally less.

## Face to Face and Telephone Interviews

- 36. It was decided to carry out a small sample of face to face and telephone interview to explore individual feedback in depth. Of the seven people interviewed:
  - 5 people said they would keep attending
  - 2 said they may have to stop or reduce their days.
  - 3 people said they knew of people who were planning to reduce or stop.
  - 1 person said they hoped to increase their days despite the charges
  - A common comment was about needing to attend, "not attending is not an option despite the increase"
  - The carers strongly advocated the centres in terms of the vital respite they provide, knowing the person was well cared for.
  - All people interviewed said attending the centre was their main or only source of social contact (beyond their carer)
  - 5 people used and relied solely on the county council transport provided.
  - The most commonly described benefit of attending the centre was of social contact.
  - Centre staff were highly praised.
  - 3 people commented on the excellent food at the centres but one said more should be done about desserts for people with diabetes.

## **Online and Public Consultation**

- 37. From 1<sup>st</sup> June to 31<sup>st</sup> August the online consultation was directed at service users, families, staff and associated groups such as Age UK. However from 1<sup>st</sup> September the consultation was opened up to the public on the council website and extended to 31<sup>st</sup> October.
- 38. There were 50 responses to the online consultation. 9 from the initial consultation that ended on 31<sup>st</sup> August and 41 from the subsequent consultation which ended on 31<sup>st</sup>

October. All comments expressed opposition (sometimes very strong opposition) to the increased charges. Many of the comments overlapped with those on the questionnaires and other forums and indicated that the responses were from the General Public and one City Councillor.

Issue	No. of comments
Expressing concern about the rises in prices	50
Comments on social contact being very important	15
Expressing concern about the impact on carers	14
Potential impact on other services	9
Potential impact on people's ability to live independently	8
Puts viability of centres at risk	8
Concern that the monitoring of people's health and wellbeing	5
would be lost if people cannot get to centres	
Promoting phasing in increases	4
Concern about additional pressures on people's income -	4
utilities' prices rises, benefit cuts, pension cuts.	

## 39. Service and Community Impact Assessment (SCIA

- 40. As part of the consultation a SCIA was produced and made public on the website. There have been no direct comments on this document however there are themes that have been identified in the SCIA that have been picked up in the responses.
- 41. A key theme is of the ability of people with certain requirements and needs to access transport to services and the choices they face. There are many community transport schemes and volunteer arrangements for people but for many who have wheelchairs or need greater levels of support many of these schemes are not suitable. Therefore ensuring that transport is still available for people is key to addressing needs.
- 42. The other theme is isolation and the ability for people to still access services in the rural parts of Oxfordshire or perhaps in those built up areas such as the City. Ensuring that there are a range of services and continued transport provision, which complements the public transport provision and other local facilities, is key to ensuring fair access to services.

## **Financial Implications**

- 43. The approximate current customer profile of these services is:
  - 30% are FACS eligible customers with assessed care needs
  - 40% are non FACS eligible customers with assessed care needs, which are moderate or low.
  - 30% are self-funding customers without an assessed care need So these proposals directly affect up to 70% of current users.

- 44. The future income is calculated to include possible reductions in attendance, as indicated in the feedback, and the figures are based on 50 weeks delivery per year with average current attendance of 767 days per week in internal resource centres and an average attendance of 30 in Witney. We have taken a very pragmatic view on the numbers we are estimating will attend on a daily basis in order to minimise the risk as far as is practical. It is important to note that the figures are indicative and not definitive at this stage.
- 45. Gross current expenditure on direct delivery of Tier 3 services is £3.7 million. The income projections listed below are modelled on a phased introduction of the proposed increased charges.
- 46. Current position 2012/13 (based on actual current attendance)

Internal Resource Centres

Current charge of £4.18 for attendance and 82p for a daily return journey on OCC transport.

Income £160,303 attendance and £31,447 transport. (Total: £191,750)

Witney Resource Centre, current income £1,236

Overall Total Income: £192,986 (5.2% of gross expenditure)

47. Phase 1 of Charges from September 2013 (assuming a 20% reduction in attendance when new charges are introduced)

Internal Resource Centres Charge

April to August 2013: Current charge of £4.18 for attendance and 82p for a daily return journey on OCC transport.

Sept 13 to March 14: £7.50 for 5 hours and £4.50 for 3 hours plus £5 for a daily return journey on OCC transport.

Annual Income: £179,600 attendance and £99,600 transport. (Total: £279,200)

Witney Resource Centre income £9,000

**Overall Total 2013/14: £288,200 (**7.8% of gross expenditure)

## Phase 2 of charges from April 2014 to March 2015

Internal Resource Centres Charge

£10 for 5 hours and £6 for 3 hours plus £5 for a daily return journey on OCC transport.

Overall Total: £425,300 (11.5% of gross expenditure)

#### Phase 3 of charges from April 2015 to March 2016

Internal Resource Centres Charge

Charge of £15 for 5 hours and £9 for 3 hours plus £5 for a daily return journey on OCC transport.

Overall Total: £ 560,300 (15.1% of gross expenditure)

#### Conclusion

48. It is apparent that the Tier 2 and Tier 3 services are highly valued by the current users, their families and carers and play an important role in the overall prevention and ageing successfully agendas. They support and enable carers, many of whom are above retirement age. They reduce social isolation and in addition the Tier 3 centres

- provide health and wellbeing support and monitoring to people who may live alone, therefore enabling people to live at home longer by reducing the likelihood of admission to hospital, residential or nursing care.
- 49. The Tier 3 centres have developed local partnerships to support community use and improved services for users and carers through shared use of buildings. Over the next 18 months they plan to increase shared use to support best use of resources and develop accessible local community services. The current and proposed partners include Guideposts, The Alzheimer Society, The Stroke Association, County Council and Health services such as the Blue Badge team, Occupational Therapy and Physiotherapy. It is anticipated that this should improve local access and encourage people into the buildings who may not otherwise have been aware of them.
- 50. At the March scrutiny committee the idea to consider a waiver scheme was put forward. Waiver is a term used in the Fairer Charging process and is currently intended to apply after a financial assessment has been completed. If a person is assessed as needing the Tier 3 service but the charges are cost prohibitive, and not attending would be particularly detrimental to them, this could be taken into consideration and potentially result in a reduced charge. However further work would be required to develop this and agree appropriate procedures, which could passport people accordingly.
- 51. There is an obvious tension in how best to fund the Tier 3 centres and ensure a programme of continuous improvement and development so that they remain an attractive and vibrant resource in their local communities. There are risks in increasing the charges; however the current rates are not sustainable. Whilst the current charges only represent a fraction of the actual costs even with the proposed increase the County Council will still be subsidising the attendance and transport costs significantly. It is estimated that the actual cost of attendance is £30 per day and the actual transport costs are £15 per person for a return journey so the subsidy would be over 50% by the authority. However as preventative services they reduce potential expenditure on more expensive services such as residential and nursing care or hospital admissions, particularly as they support people with higher needs. They provide support to family carers. They reduce loneliness.
- 52. The income of any increases should support development of the Health & Wellbeing model and assist with future efficiencies.
- 53. Based on peoples feedback and the concerns raised about the level of increase it is proposed that the charges are introduced over a phased two year period commencing September 2013.

## **Next Steps**

- 54. Scrutiny committee is asked to:
  - Consider the feedback
  - Discuss the proposals and provide guidance on any changes
  - Comment on possible ways forward.

## **Proposals**

## 55. Tier 2 Services

• Introduce the transport charges of £5 per return journey from September 2013.

## 56. Tier 3 Services

- 1. As of September 2013 introduce increased transport charge of £5 per return journey.
- 2. Phase the implementation of increased attendance charges commencing September 2013.
- 3. As of September 2013 increase charge to £7.50 per person for 5 hours and £4.50 per person for 3 hours.
- 4. As of April 2014 increase charge to £10 per person for 5 hours and £6 per person for 3 hours.
- 5. As of April 2015 increase charge to £15 per person for 5 hours and £9 per person for 3 hours.
- 6. Further work should be carried out on passport options for reduced charges where the costs are too prohibitive.
- 7. Introduce a comprehensive scheme to invoice and receive payments through the banking system to reduce payments made at the local centres.
- 8. Ensure any future increases are reasonable and service users are made aware of them well in advance of implementation dates.

#### RECOMMENDATION

57. The Adult Services Scrutiny Committee is RECOMMENDED to: Agree the proposals.

LUCY BUTLER
Deputy Director, Adult Social Care

**Background Papers:** 

Contact Officer: Karen McIndoe

## Appendix 1

## Oxfordshire County Council Resource Centres

Wallingford Resource Centre Westgate House, Millington Road Wallingford, OX10 8FE

Bicester Resource Centre Launton Road, Bicester OX16 7DJ

Oxford Options Resource Centre Horspath Driftway, Oxford OX3 7JQ

Wantage Resource Centre Stirlings Close, Garston Lane, Wantage OX12 7AQ

Didcot Resource Centre The Meadows, Britwell Road Didcot, OX11 7JN

Banbury Resource Centre Stanbridge Hall, Ruskin Road Banbury OX16 9FZ

Abingdon Resource and Wellbeing Centre Audlett Drive, Abingdon OX14 3GD

## Leonard Cheshire Resource Centre

Witney Resource centre 6 Moorland Road Witney, OX286LF This page is intentionally left blank

# Agenda Item 8

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