

ADULT SERVICES SCRUTINY COMMITTEE

MINUTES of the meeting held on 8 July 2009 commencing at 10.00 am and finishing at 12.54 pm

Present:

Voting Members:

Councillor Don Seale - in the chair

Councillor Mrs Anda Fitzgerald-O'Connor

Councillor Arash Fatemian

Councillor Anthony Gearing

Councillor Timothy Hallchurch MBE

Councillor Jenny Hannaby

Councillor Sarah Hutchinson

Councillor Dr Peter Skolar

Councillor Larry Sanders (in place of Councillor Chip Sherwood)

Councillor Alan Thompson

Other Members in Attendance:

Cabinet Member for Adult Services (Councillor Jim Couchman)

Officers:

Whole of meeting: K. Coldwell & D. Fitzgerald (Corporate Core)

Part of meeting: Director for Social & Community Services

Agenda Item

Officer Attending

- | | |
|-----|---|
| 6. | S. Collins & T. May (Shared Services); S. Kearey (Social & Community Services) |
| 7. | Director for Social & Community Services & S. Thomas |
| 8. | B. Leigh & G. Humphrey (Restore); F. Trevillion (Oxfordshire PCT); Director for Social & Community Services |
| 9. | A. Sinclair (Social & Community Services) |
| 10. | D. Fitzgerald (Corporate Core) & Director for Social & Community Services |

The Scrutiny Committee considered the matters, reports and recommendations contained or referred to in the agenda for the meeting, together with a schedule of addenda tabled at the meeting and the following additional documents:

- *Restore's Annual Review in relation to agenda item 8*
- *Officer response in relation to points made by the Older People's Panel in relation to agenda item 9*

and agreed as set out below. Copies of the agenda, reports, schedule and additional documents are attached to the signed Minutes.

3/09 APOLOGIES FOR ABSENCE AND TEMPORARY APPOINTMENTS

Apologies for absence and temporary appointments were received as follows:

Apology from	Temporary Appointments
Councillor Chip Sherwood	Councillor Larry Sanders

4/09 ORDER OF BUSINESS

It was **AGREED** to vary the order of business as indicated in the Minutes.

5/09 INTRODUCTIONS

Given the recent changes in membership on this Committee, each Member was asked to give a brief outline of their interest and experience in the Adult Social Services field.

6/09 DECLARATIONS OF INTEREST

There were no declarations of interest.

7/09 MINUTES

The Minutes of the meeting of the Committee held on 16 June 2009 were approved and signed subject to changing 'in the chair' to 'Chairman' next to Councillor Don Seale's name under 'Present – Voting Members'.

The Minutes of the meeting held on 24 March 2009 were noted but not signed (due to the fact that the Committee's remit had now changed).

8/09 SPEAKING TO OR PETITIONING THE COMMITTEE

The following request to address the meeting had been agreed:-

Request from	Agenda Items
Ms Pam Blustin (Chair of the Oxfordshire Older People's Panel)	6, 7 and 9

9/09 MONEY MANAGEMENT SERVICE: UPDATE ON WAITING LISTS (Agenda Item 6)

In December the Social & Community Services Scrutiny Committee had considered a report on the council's money management service which had set out the nature of the service, current levels of provision, the size of the existing team and key current issues. This service sits in Shared Services

but relates to clients who are over 18 and have been referred by a care manager in Social & Community Services. Costs are also recharged to Social & Community Services.

The Committee had agreed to review the operation of the waiting lists for the money management service following the implementation of the new client database which was due to 'go live' in April 2009.

The Committee had also commented to the Cabinet via the Corporate Governance Scrutiny Committee as follows:

- there is likely to be increased demand on the Money Management Service in future, especially in light of the introduction of self directed support and the increased take up of direct payments;
- the establishment figures for the team need to be reviewed to ensure that sufficient numbers of staff are provided to the service.

A report on the current situation was now before the Committee (AS6(a)), together with a minute of the Social & Community Services Scrutiny Committee's discussion at its December meeting (AS6(b)).

Mr Sean Collins (Assistant Head of Shared Services – Financial Services), together with Mr Tarquin May (Money Management Team Leader), Mr Simon Kearey (Head of Strategy & Transformation – Social & Community Services) and the Cabinet Member for Adult Services attended before the Committee in order to answer Members' questions.

The Committee had before it a number of comments from Ms Pam Blustin, Chair of the County's Older People's Panel, who made the following points:

- the current report made clear in some detail both the type and extent of the "pressures" that the service continued to face since the earlier report to Committee last December;
- it also indicated that the situation had not improved as further staff shortages had occurred and there was growing pressure of need;
- the report spelt out (paragraph 16) some of the implications of running the service, with the pressures described including risk to both clients (paragraph 17) and to the council itself (paragraph 18). Despite this, the conclusion "invites the scrutiny committee to continue to review the serviceand to receive a further reportbefore the setting of the 2010/11 budget";
- the Panel found it extremely worrying that this increasingly needed service seemed, by an apparently continuing delay to 'grasp the nettle' – to be set on a course of increased risk of failing such vulnerable people.

Mr Collins highlighted the main issues set out in the report to the Committee in December, stating that pressures on the service had grown since then. A more permanent pressure on the Team had resulted from the changes introduced by the Mental Capacity Act 2007 whereby greater powers had

been given back to the individual. This in turn meant that in Court of Protection Deputyship cases, the Deputy was required to consult fully with the client on all significant issues/decisions and could no longer act independently in the best interests of the client without reference back to them. These requirements had increased the workload of the Team - in terms of the time now required to consult with each client at each stage of a significant event - for example, selling of property or moving to new accommodation. A stricter auditing scheme was now in place in light of the Act.

The Committee then conducted a question and answer session.

A selection of the Committee's questions, together with the officers' and Cabinet Member's responses, is listed below:

- **Were any clients using the service as a result of having taken up self directed support or direct payments?**

No. Current referrals included clients who were vulnerable, for example, with addiction or mental health difficulties, who had been assessed by the Care Management Service and had met the statutory eligibility criteria.

- **Had there been many cases of financial abuse amongst clients?**

An increasing number of referrals to the service had been due to concern that financial abuse was occurring. There had been eighteen safeguarding cases since December and safeguarding cases were given top priority.

- **What was the current position with regard to the new client database which had been due to "go live" in April 2009?**

The database had not been implemented in April due to problems with the supplier. It had still not been fully implemented and was three months behind schedule. It was hoped that it would be in place by the end of the month and there was considerable pressure on the system supplier to deliver the outstanding elements of the system as a matter of urgency. However, the database would not do the work of the money management officers, although it would provide better management information. It was important to move clients through the system as quickly as possible and the database would help to better target resources. Officers needed to be looking at how the database would save the service money in the current financial climate rather than putting more money into the service.

- **Should the service be provided by the council given that it was not a statutory requirement and was something that Oxfordshire County Council had decided to provide? Not all councils provided this service.**

Mr May had been working with other money management services across the country and it was notable that other authorities were currently increasing the size of their teams and increasing support to the community. This had been largely driven by the requirements of the Mental Capacity Act. However, cutting back on the service was always an option.

- **If the County Council decided not to provide the Money Management Service, who else could/should/would?**

Assistance was provided by care managers in some authorities, who performed this function as part of their job. Officers in this authority felt that care managers would not have the correct skills for the task as both jobs required different skill sets. Money Management required complicated financial management.

Solicitors in the community could provide this service, as could anyone in the wider community who was deemed to be capable of doing so. Using a solicitor would be more costly to the client than using the Money Management Service. The service assisted some people who had insufficient funds for a solicitor to handle their affairs, as solicitors had standard fees and hourly charges and a person would need to have a considerable sum of money for a solicitor to take them on. Some voluntary sector organisations did not always want to deal with rough sleepers, or people with addictions or mental health difficulties.

The Money Management Service tended to be provided to people with no relative or suitable other person who could do this for them or if the person was at risk of financial abuse.

A member of the Committee stated that it was misleading to view the service as an “add on extra”. He asked how a situation could be ignored once a care manager had seen that someone could not manage their money or was being abused, stating that care managers and social workers were too busy to offer this type of service and that it was a very complex area. In his view, it seemed more efficient to have specialists focussing on this area as devolving the service would be less efficient and was likely to result in crises.

Mr Kearey then made the following points:

- he was aware of the importance of the Money Management Service;

- he reviewed the debtors list every month for people that owed the council money as part of care charges and there were a considerable number of people being assisted by the Money Management Service who owed the council money;
- officers were in the process of recruiting a safeguarding officer who would be specifically looking at financial abuse;
- Information Technology did not necessarily produce efficiency savings and it would be more productive to review the current clients using the service in order to see whether there were alternative methods of provision, for example, family members or other carers;
- promoting independence and signposting clients to alternative services was also important. Officers could look at whether clients had made use of the Citizens' Advice Bureau or Age Concern for financial and debt advice. It was hoped that clients had made use of these services before they were referred to the Money Management Service and more checking that this had taken place needed to be done in future.

The Committee Member commented that whilst the Citizens Advice Bureau (CAB) and Age Concern both provided excellent services, it was important to monitor the extent to which they were able to assist clients in light of the demand on those services. He added that it could take weeks to get through to the CAB answering service and that if people could not manage their money then it should be the council's responsibility to assist them.

The Cabinet Member for Adult Services stated that there had been other losses since December, for example, vacancies arising from staff moving to other jobs. Whilst it was commendable that the county council operated such a good scheme which should be protected, the council was operating in a difficult financial climate and it was unlikely that the number of full time staff working for the service could be increased.

- **Some clients had been on the service's waiting list for a considerable amount of time. Were there any safeguards in place to protect them whilst they were awaiting assistance?**

Some clients had been on the waiting list for up to eight months. They were clients who had been deemed as "safe". For example, they could be in a care home, needing someone to administer their benefits. Interim measures would be put in place to support them without them taking on the whole service provided by the Money Management Service. In practice, this would be to ensure that the client had food and shelter. The debt issue would not be dealt with at that point in time.

- **Were the criteria for accepting referrals still appropriate? Assistance seemed to be based on the amount of money involved rather than how desperate a person was.**

The criteria were still appropriate. Assistance was dependent on whether the person was deemed to have the capacity to deal with the problem or not. Court of Protection Deputyship gave the person assisting the individual the right to act as if they were the individual themselves, subject to liaison with the individual concerned on all significant issues/decisions. Appointeeship involved administering a person's state benefits and was carried out in negotiation with the individual concerned.

- **Who would be refused assistance and what would happen to them?**

People who had able but unwilling family members or where solicitors were dealing with their affairs would not be assisted.

- **Was there not a hidden saving to be made if the council helped people before they got into a bad way?**

Yes, there were hidden savings to the council in relation to the work on debt management, as this had implications for the payment of care home fees and charges for domiciliary care. This was hidden income as far as the Money Management Service was concerned as it could not claim the money.

Following discussion the Committee **AGREED** to:

- thank officers for their report;
- note that there were still problems within this service which officers were trying to eradicate through the use of IT and other techniques; and
- advise the Cabinet that a further report on this "essential" service would be brought to this Committee's December meeting to enable it to consider – prior to the setting of the 2010/11 budget – whether the situation had improved as a result of the implementation of the specialist money management database.

This report would include the results of the current benchmarking work being undertaken by the Association of Public Sector Deputies (APAD) and the impact that the new joint panel arrangements would be having on both the waiting lists and the numbers of clients supported to return to independent living in the community.

10/09 INTRODUCTIONS TO ADULT SOCIAL CARE

(Agenda Item 7)

The Committee had before it the following documents:

- Care Quality Commission Self Assessment for Annual Performance Process;
- Update on the Care Quality Commission Independence, Wellbeing and Choice Inspection of Adult Social Care.

The Director for Social & Community Services, together with Mr Steve Thomas (Performance Information Manager – Strategy and Transformation – Social & Community Services) attended before the Committee in order to answer any questions which members may have wished to ask.

Care Quality Commission Self Assessment for Annual Performance Process

The Committee noted that the assessment would look at outcomes for adults generally in Oxfordshire, not just service users that the council was responsible for. The work of Oxfordshire PCT, Health, the district councils and voluntary sector services would also be assessed. Other areas that the Directorate would be assessed on included the quality of its leadership, the quality of its commissioning (80% of its services are provided by external providers), the quality of services provided and how well the scrutiny function was operating.

Adult Social Care Inspection

Ms Blustin, Chair of the County's Older People's Panel, informed the Committee that at the Inspectors' request, four members of the County Older People's Panel, together with four members from the Health and Social Care Panel (facilitated by Age Concern), had met with an Inspector interested in older people's involvement with policy. They had spent a very useful 1 ½ hours looking at this and the Older People's Panel looked forward to the outcome of the inspection with interest.

The Director for Social & Community Services reported that the draft report would be received for comment in a few weeks' time but the inspection results would not go into the public domain until they were reported at Cabinet. The view on the feedback to date was that it was very comprehensive and fair and that the vast majority of points covered issues that the Directorate had already been intending to action.

A selection of the Committee's questions, together with the officers' responses, is listed below:

- **The robustness of the council's out of hours adult safeguarding arrangements had been flagged up in the Inspectors' initial feedback as an area for further exploration. Was the Directorate working on this?**

The Director for Social & Community Services responded that there was a 24 hour emergency duty team in place operating 365 days a year and that any referrals should go to them. With regard to the recent correspondence that had been raised at the Oxfordshire Joint Health Overview and Scrutiny Committee and referred to this Committee, he had responded to the GP concerned to remind her of the arrangements in place and to the PCT to ask them to remind all GPs of this process.

- **With regard to the survey (What older people and their carers using services have told us so far) (30 respondents) how were the respondents chosen, how were the questions put and could the figures be trusted?**

The Inspectors had wished to focus on a relatively small number of people and to meet their carers, their care manager and their manager, in order to look at practice and process.

The Inspectors had asked to see 100 safeguarding cases and 200 older people's cases. From the 200 older people's cases, 150 questionnaires had been despatched, eliciting a response rate of only 30 people. Therefore the Inspectors had told the Directorate not to place too much credence on the findings. The responses were however, a useful context for what was evidenced in the detailed work.

11/09 RESTORE PRESENTATION AND Q&A

(Agenda Item 8)

Restore is a mental health charity that works across Oxfordshire and is partly funded by the county council.

The Committee had been invited to hear how Restore was spending county council money and the impact this had in enabling people with mental health difficulties to access employment.

A briefing paper on the work of Restore was before the Committee, together with a copy of Restore's Annual Review, which was circulated at the meeting.

Mr Benedict Leigh (Chief Executive – Restore) attended to give a presentation about Restore, accompanied by Ms Gemma Humphrey (External Relations Manager).

Ms Fenella Trevillion, Lead Commissioner for Mental Health Services for both Oxfordshire County Council and Oxfordshire PCT also attended for this item to give her perspective.

Mr Leigh briefly presented the key points as summarised below. A copy of the presentation is appended to the signed Minutes.

- over the past year Restore had supported 125 unemployed people to start work. This was a very high success rate compared to other parts of the country;
- Restore used an evidence based model for employment related support (Individual Placement and Support (IPS)) which started with a rapid job search before people were trained for work. The evidence from a large scale blind trial in America and Europe was that training people prior to looking for jobs was less effective;
- intervening early when people went off sick with mental health problems was crucial, as people who had been off work for a year with mental health problems were unlikely to return to work for seven years;
- 6,000 people in Oxfordshire were workless, receiving incapacity benefit (IB) and severe disability allowance (SDA) due to mental health problems;
- 54% of those people on IB/SDA in Oxford were as a result of having mental health problems, meaning that Oxford was in the top 5 worst performing districts in England, worse than the average figure for England and the South East figure. Oxfordshire was the 39th worst county in England in this respect;
- keeping people with mental health problems sat in a bedsit with nothing to do made them more unwell and increased admissions to hospitals and subsequent pressure on services;
- in terms of commissioning, Oxfordshire was lucky to have a strong, active and large group of local provider organisations who were committed to the county. In Restore's view, there was a risk that individually sensible decisions about direct purchasing of services created a local market that was bad for Oxfordshire. Local organisations could bring money into Oxfordshire, which was generally difficult as government funding was related to issues such as deprivation. National organisations tended to target their bid writing in areas where it was easier to gain funding such as in the North of the country and the South East coast. In his view, commissioners needed to think about shaping the market as well as directly purchasing individual services.

Ms Humphrey invited all members of the Committee to visit the Restore facilities and to contact Ms Coldwell for contact details if they wished to visit.

The Committee then conducted a question and answer session. A selection of the Committee's questions, together with the officers' and Cabinet Member's responses, is listed below:

- **Did the PCT see the work undertaken by Restore as a way to address the increase in the number of people with mental health problems? Was this going to be the ongoing commissioning pattern even though funding for the NHS might be problematical in the future? Could Oxfordshire PCT (OPCT) work with other PCTs in its commissioning approach?**

Ms Trevillion responded as follows:

- OPCT did work with the Strategic Health Authority (SHA), which was in the early stages of developing its direction of travel, with particular regard to mental health and would shortly be providing a strong lead on this;
 - Mental Health and Wellbeing was now one of the PCT's objectives and it had invested a considerable amount of money into this area over the past few years (circa £2.500K in the past 2 years). In addition, over £1.5m from the government had been invested in Oxfordshire to increase access to psychological services and this was the largest area of investment nationally;
 - OPCT's commissioning strategy had prioritised employment, as its benefits were well documented. It had been the PCT's focus over the past 6 – 9 months as there had been a change of focus nationally, with the shift to wellbeing. This put pressure on the county council and the PCT's commissioning budgets, which were focused on secondary services and now needed to be reshaped to include the whole pathway of care including well being;
 - OPCT was in the process of reviewing the voluntary organisations it commissioned and as mentioned, this was being carried out though focussing on the whole pathway of care.
- **The briefing paper stated that the funding from Oxfordshire County Council to Restore over time saved substantial amounts of social care costs – people were less likely to go into hospital, less likely to need ongoing social [services] support, more likely to be working and not be in receipt of benefits. How could this be quantified?**

Mr Leigh stated that the evidence was primarily from America. However, a large trial was due to start this year in the UK. IPS trials showed that people were spending 20% less time in hospital as a result and that people who worked consumed less social care support. They were also paying taxes once they were working.

- **Would it be possible to provide data on how much money this type of support was saving Oxfordshire in future?**

Ms Trevillion stated that officers would try to do this, commenting that measuring outcomes in mental health was difficult. However, the

Strategic Health Authority was working on developing metrics for mental health and this would include those mentioned.

- **How could the county council play a greater role in mental health without costing too much and was there any way in which scrutiny activity could add value?**

Ms Trevillion stated that county council involvement was very important, as was the New Horizons policy. The PCT's focus was extensively on wellbeing, early intervention and prevention. The county council could assist with this in conjunction with the district councils. Employment and leisure were vital to this.

The Director for Social & Community Services reminded the Committee that Ms Trevillion was the Lead Commissioner on behalf of Oxfordshire County Council and the PCT in terms of services for adults with mental health problems. The Council was the lead commissioner in terms of learning disabilities. He added that the Health and Wellbeing Partnership Board had drawn up three core priorities on which to focus: prevention of ill age in older people, obesity and mental wellbeing.

The Cabinet Member for Adult Services stated that there was now a major pooled budget for mental health. This would lead to a more co-ordinated service between Oxfordshire County Council, the PCT and Oxfordshire and Buckinghamshire Mental Health NHS Foundation Trust (OBMHT). He added that in terms of savings, there was a distinction to be made between savings and costs avoided and that in his view, costs avoided was more important.

Mr Leigh stated that there were plenty of actions that could be taken to assist people with mental health problems that were not costly. The county council, the district councils and Health were major employers in the county. Preventative action could be taken to reduce sickness absence, increase staff wellbeing, and increase the recruitment of people with mental health problems.

The Director for Social & Community Services stated that the council had an employment service that was designed to increase the recruitment of people with disabilities, especially people with mental health problems. If people with mental health problems were put on their books they would be treated in the same way as staff that went through the council's redeployment process, meaning that they would be automatically considered for a post if they met the criteria. He added that Oxfordshire County Council was keen to encourage other key local employers to follow this lead as people with mental health problems were an untapped resource who could make a valuable contribution.

Ms Trevillion confirmed that work with other key employers was already underway.

Following the question and answer session, the Committee thanked Mr Leigh for his informative presentation and Ms Trevillion for her contribution.

12/09 TRANSFORMING ADULT SOCIAL CARE: PRESENTATION, PROGRESS UPDATE AND Q&A

(Agenda Item 9)

It had been agreed that a report on transforming Adult Social Care would be brought quarterly to this Committee (AS9) and would include detail on self directed support.

The Committee was invited to track progress, conduct a question and answer session and nominate at least two Councillors to join the Self Directed Support Task Group.

Ms Pam Blustin, Chair of the County's Older People's Panel, had requested to speak at this item and made the following points:

- the Panel welcomed the much needed development of collaborative working across central and local government, the NHS, the third sector and the private sector to achieve the aim of independent living for all adults;
- as to reported progress, on Stakeholder engagement (paragraph 8) it was noted that there was an awareness that networks and reference groups could be expanded and it was hoped that the value of linking with the Panel would be recognised;
- on the progress of specific project areas (paragraph 11 onwards) the Panel:
 - congratulated the council on being chosen as an information accreditation pilot site and wished to record its pleasure both in being asked to review "The Information" – the council's source book for older people and carers – and to have found it to be such an accessible and useful publication;
 - was concerned to see that steps would be taken wherever possible to protect vulnerable people from neglect and abuse in whatever form or circumstances it might occur;
 - noted that under 'Reshaping the Supply Market' the council was developing a scheme to accredit non-registered and non-traditional providers of social care schemes. Bearing in mind the persistence of reports of instances of less than satisfactory service – no doubt a very small number in the scheme of things – the Panel hoped that the Committee would consider it important to be assured that all providers were to be subject to requirements to provide a high standard of service by appropriately trained staff, that there would be a diligent monitoring and swift action taken in the event of adverse reports, with 'whistle blower' protection built in;
 - asked the Committee to consider what action would be appropriate in order to ensure that vulnerable people were safeguarded.

The Committee noted the Directorate's response to the Panel's concern, a copy of which is appended to the Minutes (Refer Appendix 1) and to the signed Minutes.

Mr Alan Sinclair (Programme Director – Transforming Adult Social Care) then gave a brief presentation to the Committee, a copy of which is attached to the signed Minutes.

Mr Sinclair made the following points:

- the government wanted significant progress on Transforming Social Care to have been made by March 2011, although it had not defined what was meant by 'significant';
- Everyone eligible for a personal budget must have been provided with one by March 2011;
- officers needed to ensure that changes were sustainable rather than just ticking the box. This was a challenge;
- there was all party support for the Transforming Social Care agenda;
- there were a number of additional challenges/opportunities:
 - this was about whole system change and not just change at the margins;
 - increasing numbers of people would need support;
 - funding/financial sustainability in a climate of efficiency savings – how could this be sustained beyond the £5m that had been provided for the three year implementation period;
 - support to all people who require adult social care services – a shift towards supporting the whole community, not just those adults who met the council's eligibility criteria. Officers would need to think about how they could help people not to hit the eligibility criteria as soon or at all, and to avoid needing future services (a shift to early intervention and prevention and what would work for Oxfordshire);
 - working with key partners – the PCT, OCC and the third sector. Services would be developed in conjunction with a wide range of stakeholders including people who currently used and would be using social care; and
 - a Green Paper on the future of social care was due out next Wednesday and would probably push the personalisation agenda even further;
 - in terms of the supply market the message was that no-one was obliged to buy traditional services (e.g. go to a day centre);
 - quality information provision was crucial to ensure that service users could make informed choices, whether it was provided by the council, Heath or the third sector. Information would also be provided to people who did not meet the eligibility criteria but had money to spend to purchase services;
 - people would be supported to live independently, to stay healthier and recover from illness more quickly, to have maximum control over their lives, to be active and equal members of society (e.g.

- encouraging more older people to volunteer and to have the best quality of life);
- there were potential risks involved. Officers needed to be provided with information on how to manage risk, conduct good assessments, reviews and support plans;
- the reshaping of the supply market would address many of the issues raised by the Older People's Panel;
- the self directed support pilot in Banbury was bringing up more questions than answers regarding how to make the self directed support model sustainable for the future.

Following the presentation, the Committee **AGREED** to:

- thank Mr Sinclair for his informative presentation;
- nominate Councillors Sarah Hutchinson and Jenny Hannaby to join Councillors Larry Sanders and Lawrie Stratford on the Self Directed Support Task Group.

13/09 SCRUTINY WORK PROGRAMME

(Agenda Item 11)

Members of the Committee were asked to put forward areas which they would wish to look at in future as part of this Committee's Scrutiny Work Programme or in conjunction with any other of the Scrutiny Committees where relevant.

Members were reminded that any suggested items should be supported with a clear explanation of the expected outcome of the proposed work.

The Committee was asked to agree a preferred list of ideas which the Policy & Review Team would consider in more detail through the scrutiny proposal form procedure. The proposal forms would be presented to the Committee for consideration at its September meeting when it would be asked to agree its future work programme.

The Director for Social & Community Services provided the following suggestions to the Committee:

- **Dementia** – the national Dementia Strategy had said that local authorities were not doing enough, especially in conjunction with the Health Service. It would be useful for this Committee and/or the Oxfordshire Joint Health Overview & Scrutiny Committee to look at actions underway in Oxfordshire in relation to dementia;
- **Green paper on Care and Support** – this Committee needed to be aware of the proposals and to offer comment on them;
- **Carers** – the Directorate had received positive feedback from the Carers' Conference but there was more to be done and this was at the heart of the prevention agenda;

- **Care Quality Commission Inspection** – it would be advisable for the **Committee** to monitor the results of this and to identify specific issues for scrutiny activity;
- **Council efficiency savings** – £60m savings on top of the previously identified £30m savings would need to be made over a five year period, a significant amount of which would have to be made in Adult Social Care.

Following discussion, the Committee **AGREED** to:

- (a) put forward the following items to be worked up into scrutiny proposal forms and considered at its September meeting:
 - domiciliary care (how it's working in practice - outcomes)
 - telecare
 - dementia
 - carers' strategy
- (b) consider the following items at its October 2009 meeting:
 - Green paper on Care and Support – for information and comment;
 - Dementia
- (c) place 'Impact of Council Financial Planning on Adult Services' (effect of any budget changes over the next five years on the provision of Adult Social Care services) on future agendas from October 2009 onwards;
- (d) consider if there were any areas for scrutiny activity arising from the recent 'Independence, Wellbeing and Choice' Inspection of Adult Social Care services*.

All members of this Committee were invited to attend the Cabinet meeting for the Performance Assessment Item – where a presentation and action plan would be given by the Care Quality Commission on their 'Independence, Wellbeing and Choice' Inspection of Adult Social Care services. The exact date would be confirmed shortly.

- (e) express the wish for members of this Committee to visit the House of Commons to view a select committee in action (e.g. Westminster Explained Seminar Series).

Councillors were also urged to watch a select committee in action on the parliamentary channel.

Councillor Larry Sanders undertook to speak to Des Fitzgerald outside of Committee regarding his suggestions for activity around residential homes and the Relatives and Residents Association.

The Cabinet Member for Adult Services stated that the council conducted safeguarding checks on its homes but that the registration of homes was not within the council's remit.

Councillor Sanders was advised that nominated members within the Local Involvement Networks (LINKs) had the right of access to these establishments.

Ms Coldwell undertook to provide the following suggestion from Councillor Larry Sanders to Mr Gibson, for consideration at the September meeting of the Safer and Stronger Communities Scrutiny Committee:

Community building and social capital as part of the prevention agenda.

Building social care into villages in the county – how this can be done.
½ day workshop – hear from voluntary sector partners including Age Concern plus the community. What it might mean in terms of how services are delivered.

(community cohesion and the voluntary and community sector fall under the remit of that Committee).

14/09 FORWARD PLAN
(Agenda Item 10)

The Committee was asked to suggest items from the current Forward Plan on which it might have wished to have an opportunity to offer advice to the Cabinet before any decision was taken.

This item had been covered under the Scrutiny Work Programme.

.....in the Chair

Date of signing.....2009

ANNEX 1

Directorate response to a specific point made by the Chair of the Older People's Panel

Item 9. Transforming Adult Social Care (AS9)

On Progress of specific project areas (Para 11 et seq) :-

The Panel is concerned to see steps taken wherever possible to protect vulnerable people from neglect and abuse in whatever form or circumstance it may occur.

The Panel notes that under 'Reshaping the Supply Market' the Council is developing a scheme to accredit non -registered and non-traditional providers of social care schemes.

Bearing in mind the persistence of reports of instances of less than satisfactory service - no doubt a very small number in the scheme of things -the Panel hopes that the Committee would consider it important to be assured that all providers are to be subject to requirements to provide a high standard of service by appropriately trained staff, that there will be a diligent monitoring and swift action taken in the event of adverse reports, with 'whistle blower' protection built in.

Directorate response

- Our traditional contracting processes involve us specifying service standards to our suppliers.
 - a. For registered providers these are based around National Minimum Standards plus any additional requirements we stipulate.
 - b. For non-registered providers we stipulate service requirements that reflect best practice.
- Safe recruitment of staff is a major theme that runs throughout our contract documentation. Provisions are included in both the Contract and our Service Specifications; in this way we require our providers to ensure that they stop those who might do harm to vulnerable service users from entering the social care market.
- Training is another key area where specific requirements are laid down for our suppliers to adhere to. We require providers to ensure that staff allocated to deliver service are trained and competent to do so, and that they record the same.
- Whistleblowing is a standard condition in our Contracts.
- The Social & Community Services Scrutiny Committee previously received a report about the Commission for Social Care Inspection's (CSCI) (now Care Quality Commission (CQC)) Star Rating System when it agreed that whenever possible the County Council will purchase services from registered providers rated as Excellent or Good.

- My staff do respond with swift action when adverse reports are received either through safeguarding procedures or contract monitoring or a combination of both. We believe we are very effective in both areas and have considerable success in raising service standards throughout our provider portfolio. This is evidenced by improvements in star ratings that providers achieve when we work with them and the compliments we receive from them about this.
- An internal R.A.G. Traffic Light system is used to alert Adult Services staff to providers where we have concerns.
- More recently we have developed a new Schedule to our contracts that covers 'Safeguarding'. We are consulting a number of our key providers on the content and expect comments and responses soon. The intention is to introduce and append this schedule to all of our contracts.

Scrutiny will be aware that the Putting People First agenda requires a shift in direction to more of a hands-off arrangement by Oxfordshire County Council (OCC) with the service user being more in-control. Under 'Self Directed Support', Brokers and Service Users will be able to requisition services through traditional Council contracts or Council-provided services as at present if they wish. They will then have the full protection of contract monitoring processes as set out above.

Some Service Users will opt for more choice and control, and will receive their Personal Budget via a Direct Payment. They may choose to spend their budget on services which are not regulated by CQC, and are not contracted or monitored directly by the Council. For example, they may ask a neighbour to provide personal care or help with bathing, and the neighbour would be paid by the Service User. This local, informal type of arrangement is strongly encouraged by 'Putting People First'. There would be a regular review of outcomes, and if the needs of the User were not being met, there could be some intervention by the Care Manager to insist on a more formal care input.

Where Service Users request a non-registered service such as a Personal Assistant or Support Broker, they will be encouraged to use a Provider Approved under the 'Care with Confidence' scheme. The criteria for Approval will include CRB and Vetting/Barring checks, references, suitable mandatory training and monitoring. In the event of performance being found to be below standard, Approval can be withdrawn. At present, it is not considered appropriate to insist that only Approved Providers can be used, as this would restrict choice and flexibility. A Service User could ask a family member to act as their Personal Assistant, and such a person would not usually be Approved under Care with Confidence, although training could be offered.

Scrutiny Committee will appreciate that the benefits of choice and control brings some increase in risk. However, each Support Plan will be signed off by a Care Manager or Unit Manager, and safeguarding issues will be a high priority in deciding if a proposed arrangement is safe and effective.