

**MINUTES OF A MEETING OF THE HEALTH AND CARE SCRUTINY COMMITTEE
HELD AT ON WEDNESDAY, 22 JULY 2020**

PRESENT

County Councillor G I S Williams (Chair)

County Councillors J Charlton, D E Davies, A Jenner, G Morgan, L Rijnenberg,
K M Roberts-Jones, D Rowlands, A Williams, J M Williams and R Williams

In attendance: County Councillors

Cabinet Portfolio Holders In Attendance:

Officers: Alison Bulman

Other Officers In Attendance:

Apologies for absence were received from County Councillors S M Hayes, R Powell
and MC Alexander

1. APOLOGIES

The next meeting is scheduled to take place on Friday 11 September 2020 at 10am.

2. DECLARATIONS OF INTEREST

There were no declarations of interest.

3. DISCLOSURE OF PARTY WHIPS

There were no disclosures of party whips.

4. 11:00 FINANCIAL OUTTURN -2019/20
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Documents:

- Financial Outturn – 2019/20

Discussion:

- Pressures of £6.25M in Children's Services had been identified
- Pressures of £9M Adult Services had also been identified but there was more confidence in the plans which had been put in place to mitigate those pressures
- At the time the budget was agreed, the Section 151 Officer had insisted that a budget reserve be established which, whilst it would not cover all of the pressures identified in Children's Services, it would offset some overspend. This budget reserve was retained within the Corporate budget.

- The Committee would like to be informed of cost reductions made and in what particular area, and, similarly with those that had not been achieved. The Corporate Director indicated that a new tracking system was in place for the current year with workshops in August to allow officers to map risks and pressures for future years.
- Some cost reductions were only achieved partially during the previous financial year but will be fully achieved during the current year
- Members had had concerns about the ambitious nature of some of the proposed cost reductions. It was suggested that tracking of these could be undertaken through the relevant working group. Discussions with partners to close some of the gaps were ongoing but it was acknowledged that the Covid pandemic had delayed some savings.
- There was further concern that overspends occurred year on year and that this could not be allowed to continue. Pressures must be recognised, and budgets set accordingly. The Corporate Director reiterated that new processes had been implemented which recognised challenges and pressures. When she had first come into post, there had been limited commissioning capacity within the service but positive investment has taken place and clear plans have been developed.
- The targets which were set had not recognised the improvement journey – there had been £2.3M of cost reductions with no plans in place
- It was acknowledged that the service was demand led and that presented a challenging in forecasting but there had been investment and improvement in preventative services. It was key to ensure the correct models were in place. Further work could be undertaken in the working groups in relation to managing demand.
- The Committee were pleased to note that the reliance on agency workers was diminishing
- An update on how many children were cared for out of county was being prepared and would be circulated. The Children’s Services Working Group would consider this data alongside plans to return Children Looked After (CLA) to the County. Caution was urged when considering those children who may be placed just outside of the county’s borders. Consideration would also be given to how the pandemic has affected numbers and forward planning as lockdown eases
- Edge of Care was due to be reviewed and the findings would be presented to a future meeting

5.	11:30	ANNUAL COMPLAINTS, COMPLIMENTS AND REPRESENTATIONS REPORT
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Documents:

- Annual Complaints, Compliments and Representations Report

Discussion:

- The report is a statutory requirement which will be submitted to the CIW together with an improvement plan
- The number of complaints has reduced over recent years, particularly within Children’s Services
- The report highlights that early intervention is having an effect

- Themes relating to complaints have been identified. One such theme relates to communication. There is a commitment to keep clients informed as continual dialogue gives assurance. In the past some may have felt there was insufficient support to move issues forward. A much more stable management tier is in place to offer such support.
- The service has developed a culture of continuous improvement
- Members asked if the complaints team was sufficiently independent as it sat within the Service. Due to a reduction in capacity of the corporate complaints team, this function was transferred to Social Care in 2019. The complaints process is two stage – Stage 1 allows the service to put any complaint right. Stage 2 consists of an independent review with the outcome reported to the Corporate Director. If the client is not satisfied with the resolution, they have the option to take their complaint to the Ombudsman.
- It was suggested that there should be some form of advocacy available to complainants
- The Committee asked if the outcomes of complaints were available to the public – this would not be appropriate due to confidentiality. The annual report was the only publicly available document.
- It was recognised that complaints can be seen as positive

6.	12:00 CHOICE POLICY FOR ADULT SOCIAL CARE
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Documents:

- Report of the Portfolio Holder for Adult Services

Discussion:

- An assessment of need will also include emotional and psychological need
- Where a client's preferred choice is more expensive, a third party top up is sought. If the first choice is no more cost effective and meets the clients needs, a top up is not appropriate.
- The Committee were aware that there were a number of empty beds at the moment and questioned the sustainability of the market. The Corporate Director, in acknowledging the significant capacity at the moment, informed the Committee that there had been a decrease in demand, any home with a case of Covid 19 was closed to new admissions and the criteria has changed during the pandemic. Work is underway to assess the needs of the population.
- Local culture and tradition was also an important consideration in delivering social policy in rural areas. This was not clearly explained within the Impact Assessment. The Corporate Director agreed to review the Impact Assessment.
- An explanation of why the project had been classified as medium risk was sought. The risk rating would be kept under review. Any change of policy or practice carries a level of risk and this, coupled with a global pandemic has determined the level of risk. If a client's first choice is a home which is closed to admissions for 28 days, that choice cannot be met, and interim arrangements need to be in place to allow the client to be discharged from hospital.

- The financial implications were neutral, but the pandemic continues. The Corporate Director believed the policy was transparent and made the best use of available resources for both the client and the service.
- There were 37 care homes in the County. Capacity was not shared evenly across those homes. There was a greater impact on nursing homes. The vacancy rate was higher than usual. The market was fragile, and the pandemic has exacerbated this. Support is being accessed through the Welsh Government's Hardship Fund. A breakdown of vacancies and whether these were nursing homes or residential homes would be circulated following the meeting.

7.	12:20 TRACK, TRACE AND PROTECT
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The Committee received a presentation on Track, Trace and Protect.

Discussion:

- The Public Health Wales Plan was operational in Powys from 4 May 2020
- It would be possible to increase capacity if there were to be a local spike
- There had been 50 positive cases, of which 100% of contacts had been tracked
- The advisers were all redeployed staff and it was not known how long they would be needed for
- Testing was not available unless someone had symptoms. Further information would be sought on private testing.

8.	ACCESS TO INFORMATION
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RESOLVED to exclude the public for the following item of business on the grounds that there would be disclosure to them of exempt information under category 3 of The Local Authorities (Access to Information) (Variation) (Wales) Order 2007).

9.	12:40 CMHT IMPROVEMENT PLAN
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Documents:

- CMHT Improvement Plan

Discussion:

- The Improvement Plan was developed following a routine inspection by CIW and Health Inspectorate Wales as the service is jointly run by Powys County Council and Powys Health Board
- There were no statutory improvement notices
- The Committee were briefed on the outcome of the inspection

10.	DATE OF NEXT MEETING
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County Councillor G I S Williams (Chair)