

# SOCIAL CARE & HEALTH SCRUTINY COMMITTEE

Thursday, 22 November 2018

**PRESENT:** Councillor G. Thomas (Chair)

**Councillors:**

S.M. Allen, K.V. Broom, D.M. Cundy (In place of E. Morgan), I.W. Davies, K.Davies, R.E. Evans, W.T. Evans, M.J.A. Lewis, A. Lenny (In place of E.M.J.G. Schiavone), K. Lloyd, B.A.L. Roberts and D.T. Williams

**Also in attendance:**

Councillor J. Tremlett, Executive Board Member for Social Care & Health

**The following Officers were in attendance:**

N. Edwards, Interim Head of Integrated Services  
J. Morgan, Acting Head of Homes & Safer Communities  
S. Sauro, Performance, Analysis & Systems Manager  
J. Wilkinson, Locality Manager  
A. Thomas, Group Accountant  
M. Evans Thomas, Principal Democratic Services Officer  
E. Bryer, Democratic Services Officer

**Chamber, - County Hall, Carmarthen. SA31 1JP. - 10.00 am - 1.35 pm**

**1. APOLOGIES FOR ABSENCE**

Apologies for absence were received from Councillors A. McPherson, E. Morgan and E. Schiavone.

**2. DECLARATIONS OF PERSONAL INTERESTS INCLUDING ANY PARTY WHIPS ISSUED IN RELATION TO ANY AGENDA ITEM.**

Councillor	Minute No(s)	Nature of Interest
Councillor G. Thomas	Minute No. 6 – Country Cars	Her husband drives for Country Cars.

There were no declaration of prohibited party whips.

**3. PUBLIC QUESTIONS**

The Chair advised that no public questions had been received.

**4. ORDER OF BUSINESS**

The Chair advised the Committee that, in accordance with Council Procedure Rule 2(3) she was going to vary the order of business on the agenda to enable the presentation by the Local Health Board to be considered later in the meeting.

## 5. CARMARTHENSHIRE'S APPROACH TO PREVENTION TO SUPPORT HEALTH AND WELLBEING

The Committee considered a report on the approach taken by integrated Services to deliver effective preventative services. The report and presentation summarised the approach taken.

The following questions / observations were raised after presentation of the report:-

- Concern was expressed over the elderly living in cold conditions as they are worried about putting the heating on and officers were asked what can be done to get the message across that they must stay warm to stay health. The Committee was advised that it is difficult for people to change the habits of a lifetime if they have always been careful or frugal. Officers are working on a more proactive approach in this regard;
- Asked what can be done to help families who cannot afford to fund sports equipment and clothing for their children. Advised that there is no definitive answer but it is recognised that physical activities are important for prevention and general wellbeing. Welsh Government are also aware of the importance;
- Reference was made to DEWIS and how this resource is kept updated. Advised that community workers encourage 3<sup>rd</sup> sector organisations to maintain their details. A working group has also been established to drive this forward;
- Asked how prevention services are promoted and encouraged in rural locations where there may be no internet coverage. Advised that contact had been made with Community and Town Councils however limited interest had been shown. If any Town & Community Councils would like officers to visit and give a presentation on Prevention they can contact Julia Wilkinson or email [CommunityResilience@carmarthenshire.gov.uk](mailto:CommunityResilience@carmarthenshire.gov.uk).
- It was felt that in order to assist in spreading the message regarding the prevention services provided by the Authority, that officers be invited to give this presentation at a meeting of Full Council. The Committee was advised that arrangements are being made for Council to receive a presentation on Dementia and another one on Carmarthenshire is Kind, Cusp etc.;
- Asked if engagement had been made with the religious sectors in Carmarthenshire as the churches and chapels are important to the rural locations. Advised that due to long term illness there was only one Community Resilience Coordinator covering the whole of Carmarthenshire therefor communication is one of the biggest challenges. It is acknowledged that the message needs to be communicated.
- Asked if 'Carmarthenshire is Kind' message also included a message regarding combating bullying. Advised that this was one of the messages that was promoted.

The Committee thanked Julia for her presentation and agreed that it would be beneficial if the message could be cascaded to a wider audience.

**RESOLVED that the report and presentation be received.**

## 6. PRESENTATION - COUNTRY CARS.

[Note: Councillor G Thomas had earlier declared an interest in this item].

The Chair welcomed Sarah Powell (Systems & Finance Officer – Environment Department) and Karyn Morris (Commissioned Services Operations Manager - Royal Voluntary Service)

The Committee thereupon received a presentation providing an overview of the service provided by Country Cars.

Key points of note were:

- Country Cars is designed to be a public transport 'safety net', providing links to bus and train, or door-to-door transport when needed;
- The service is not to compete with other transport providers such as local buses, trains and taxis;
- There is a limit of 20 passenger miles per journey and only one journey per week which must be in Carmarthenshire;
- The service is for essential use only, for individual and occasional use. It is for essential journeys only when there is no other reasonable means of transport;
- The service consist of 12 independently based schemes as it is easier to manage a local pool of volunteer drivers;
- RVS is contracted by the Council to recruit drivers and to operate the scheme. This involves recruiting, mandatory training, safeguarding, data protection, undertaking DBS checks and maintaining and supporting a pool of volunteer drivers;
- RVS contract is renewed annually;
- Funding received by RVS purchases 10% of the managers time;
- The service receives more requests for transportation than they can fulfil.

Following the presentation the following observations / questions were raised:-

- Asked what expenses the volunteers receive. Advised that Carmarthenshire pays volunteers expenses at the same rate as defined by HMRC (45p per mile). There would be tax implications if the payment was any higher. Cost of telephone calls and any other relevant expenses are also reimbursed;
- Asked what about the cost to service user. Advised that the cost is slightly higher than what it would typically be for using the bus. There is also a concession of 50% for 5 to 15 year old and for those who have a current bus pass;
- Asked what security checks if any were made on users of the service. Advised that checks were only made on the volunteer drivers;
- Asked how the service is advertised. Advised that the service is not on DEWIS but is advertised on posters in GP surgeries and all buildings with a social aspect i.e. Post Offices, libraries etc. There is a continual recruitment drive which is done via social media and word of mouth, leaflets, posters and talks. Information is also available on the Council website. It was

suggested that Country Cars contacts Radio Carmarthenshire for free advertising.

The Chair thanked Sarah and Karyn for attending the meeting and for their presentation and extended her appreciation for the service.

**7. ADULT SOCIAL CARE COMPLAINTS & COMPLIMENTS REPORT - 1ST APRIL 2018 TO 30TH SEPTEMBER 2018.**

The Committee considered a report detailing the Adult Social Care complaints and compliments received for the period 01/04/18 – 30/09/18. The report summarised the number of complaints and compliments received and provided information on the type of complaint and the relevant service area.

The following question was asked in relation to the report:-

- Asked if all the appropriate staff have received the necessary training, the Committee was advised that the training was directed in the first instance to managers and those officers that deal with complaints. However, the information is disseminated to all staff who deal with service users. The department strives to ensure that all staff continuously deal with customers to a high standard. The training is undertaken every 18 months so that the message is continuously re-iterated and it is cascaded right through the department.

**RESOLVED that the report be received.**

**8. MEALS ON WHEELS CUSTOMER EVALUATION REPORT.**

The Committee considered a report providing an evaluation of the satisfaction levels of service users following the decision made by the Royal Voluntary Service (RVS) to end the meals on wheels service that they provide on behalf of the Local Authority.

The following questions/observations were raised on the report:-

- Asked what measures are in place to ensure that older people do not succumb to malnutrition, the Locality Manager explained that officers are working on raising awareness of malnutrition. Several initiatives are being worked on in this regard including the possibility of commissioning CUSP and working with the Social Prescribers. She added that this is a national concern and it has been recognised that work needs to be done in this area;
- Reference was made to the fact that the last update presented to Committee reported that 17 service users' needs had not been met and officers were asked if this had been addressed. The Interim Head of Integrated Services informed the Committee that these service users were re-visited and have now moved on to alternative arrangements for meal provision.

**RESOLVED that the report be received.**

**9. REVENUE & CAPITAL BUDGET MONITORING REPORT.**

The Committee considered the Revenue and Capital Budget Monitoring Report in relation to the Social Care and Health Service which provided an update on the latest budgetary position as at 31<sup>st</sup> August 2018, in respect of the 2018/19 financial year.

The Social Care and Health Service was projecting an overspend of £746k on the revenue budget and a net variance of -£2k against the 2018/19 approved capital budget.

The following questions / observations were raised on the report:-

- Asked what the £22k underspend was in Support (Appendix A). Advised that this was due to staffing;
- Raised concerns around staff vacancies in the care management teams. Advised that workforce pressures is one of the main problems facing the sector. There has been a turnover of staff / retirement. A concerted effort has been made this year to ensure that the Community Resource Teams remained at full complement. Recruitment is a pressure but it is being addressed. Staff who have retired have returned to provide support while recruitment is being undertaken;
- Asked how much of the £20m funding announced by Rebecca Evans A.M. the Authority had received. Advised that it is normally based on a formula and the Authority receives 6% funding from the Welsh Government which is based on an adult population formula. Advised that the £20m referred to was funding released by the Welsh Government to alleviate workforce pressures;
- Asked why so much is being spent on agency staffing. Advised that a lot of work has been done to reduce dependency on agency staff including more effective rotas and reducing sickness levels. Hoped to see more positive results over the next 6-12 months;
- Concern raised about staffing issues especially as there is high unemployment. Advised that in the more rural areas it was easier to recruit but in the towns it was difficult to compete with retail outlets. There is a career path via the NVQ qualification but there is a need to make it a more attractive career path in schools;
- Reference was made to the announcement by NHS England of £3.5b of additional funding for social care and officers were asked if Wales was likely to receive something similar. An announcement regarding the Support Grant settlement is expected late December;
- Asked about the on-going vacancies within the Occupational Therapy service and how this was being addressed. Advised that there have been issues over recruiting, however, these have been resolved and staff who had moved to other areas have now returned to Carmarthenshire. There has been a lot of recruitment and we now have a very strong Occupational Therapy service;
- Asked what the impact will be for the Authority regarding the recent announcement that Allied Healthcare will cease trading. Advised that there was a contingency plan in place as the company had warned that it was in financial difficulties. Advised that ongoing negotiations were being undertaken to ensure the service would not be affected and staff (c80) would be transferred into the employment of the Authority.

- Asked how long schemes remain on budget monitoring reports following completion. Advised that they continue to be monitored until the accounts have been finalised.

**RESOLVED that the report be received.**

## **10. PRESENTATION - TRANSFORMING CLINICAL SERVICES - POST CONSULTATION AND NEXT STEPS**

The Chair welcomed to the meeting the following from Hywel Dda University Health Board – Mrs Bernardine Rees (Chair), Mr Steve Moore (Chief Executive), Helen Annandale (Head of Physiotherapy and Carmarthenshire Therapies Lead), Bethan Lewis (Head of Nursing at Glangwili Hospital) and Lisa Davies (Principal Project Manager). They had been invited to the meeting to give a presentation on Transforming Clinical Services – Post Consultation and Next Steps.

The Committee thereupon received a presentation providing an overview of the Transforming Clinical Services Consultation Closing Report.

The report consolidated the work undertaken as part of the public consultation that took place from 19<sup>th</sup> April to 12<sup>th</sup> July, 2018. Key items presented included:-

- Programme background
- Summary of findings
- Key themes
- Conscientious consideration
- Recommendations to the Board
- Next Steps

The presentation was followed by a question and answer session during which the following questions / observations were raised:

- Asked what the anticipated timescales and cost would be for delivering the new facility, the Committee was advised that there is a sense of urgency to deliver the new facility as there are concerns about the current system, however, at this stage confirmation of cost and timescales could not be provided. The full business case may take a few years for completion and until this has been completed the funding could not be secured;
- Asked if the Trust had applied for Welsh Government funding for integration and transformation. Advised that the Trust is currently in the last stage of the bid and had been working closely with Social Care and 3<sup>rd</sup> sector organisations. The trust re-affirmed their commitment to working across the various public sector services and that they will focus on the need to be a 'care organisation'. The trust is working closely with ABMU and gave assurance that negotiation will consider the best interests of patients;
- Asked if it would be practical to consider having a medical school attached to any new hospital, the Committee was advised that a lot of training is already undertaken at the existing facilities. Opportunities at the Wellness Village will significantly improve options in that regard;
- Asked about the location of the new facility and how this can be justified to the population. Advised that as the service is currently spread over several sites, the expertise is therefore spread out too and causes problems with



staffing and rotas. By bringing all the services together at one location it should improve the work/life balance for staff and will also make it easier for patients to access specialist services such as neurology. The need for improved infrastructure to make the new facility accessible to all is recognised and is a challenge that will have to be addressed;

- Asked what plans are in place to address winter pressures. Advised that the Health Board will be meeting next week to discuss plans and make sure that they are prepared to face the pressures. Flu vaccination programme and social care/domiciliary care to help with the flow. £2m funding has been received from Welsh Government for winter planning;
- Reference was made to transport and travelling and to the presentation the Committee received earlier on Country Cars and the question was asked if the Board intended to using the 3<sup>rd</sup> sector more. Confirmed that they are working with the 3<sup>rd</sup> sector, however, trying to redesign things and placing the emphasis on trying to bring people into hospital less and only bring those people to hospital that really need to an focus on making sure that they have the care they need;
- Reference was made to the widespread problem people are experiencing in trying to get through to their surgery to make an appointment and it was pointed out that if people could be seen by their GP then perhaps less would go to the hospital. The Board was asked if there were any plans to address this problem. Advised that this is exactly what the Board is trying to do by creating a social model. Unfortunately, there will never be enough GPs and people more often than not don't need to see a GP, they need to see a nurse or a physiotherapist. There are some great examples of this model which will be rolled out;
- Asked what the Board was doing to reduce the cost of agency staff. Advised that the Board had the highest cost in Wales but since introducing a cap for expenditure on agency staff it has seen the highest reduction across Wales;
- Asked about the possibility of integrating health and social care so that there is some sort of career progression for care. Advised that this is where modular training comes in "Grow Your Own" and the Wellness Village will have huge potential in this regard;
- Asked where the Board is with regards to IT infrastructure and what are they trying to achieve. Advised that there is a national debate with regards to IT and how to deliver. Need to look at the best use of digital technology. Need to spend time with clinicians and the public to find the best way forward. It is early days and there is a need for an all Wales debate but the aspiration would be for an electronic patient record.

The Chair thanked the representative from the Hywel Dda University Health Board for attending the meeting and for an informative presentation. The Chair acknowledged that there is a lot of work to achieve, however, integration is the way forward.

#### DURATION OF MEETING

At 1.00 p.m., during consideration of the above item, the Committee's attention was drawn to Corporate Procedure Rule 9 "Duration of Meeting" and the fact that the meeting had been underway for three hours and it was

**UNANIMOUSLY RESOLVED that Council Procedure Rules be suspended to allow the remaining items of business on the agenda to be considered.**

**11. SOCIAL CARE & HEALTH SCRUTINY COMMITTEE ANNUAL REPORT 2017/2018.**

The Committee received an Annual Report detailing the work of the Committee during the 2017/18 municipal year. The report had been prepared in accordance with Article 6.2 of the Council's Constitution which requires Scrutiny Committees to prepare an annual report giving an account of the Committee's activities over the previous year.

The report provided an overview of the Committee's work programme and the key issues considered during the year. The report also provided details of development sessions and site visits arranged for the Committee as well as attendance data.

**RESOLVED that the Social Care & Health Scrutiny Committee's Annual Report 2017/18 be received.**

**12. EXPLANATION FOR NON-SUBMISSION OF SCRUTINY REPORT.**

The Committee received an explanation for the non-submission of the following scrutiny report which was scheduled to be considered at today's meeting:-

- Regional & Partnership Working Update

**RESOLVED that the explanation for the non-submission be noted.**

**13. FORTHCOMING ITEMS.**

**RESOLVED that the list of forthcoming items to be considered at the next scheduled meeting on the 17<sup>th</sup> December, 2018 be noted.**

**14. TO SIGN AS A CORRECT RECORD THE MINUTES OF THE MEETING HELD ON THE 25TH SEPTEMBER, 2018.**

**RESOLVED that the minutes of the meeting of the Committee held on the 25<sup>th</sup> September, 2018 be signed as a correct record.**

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**CHAIR**

\_\_\_\_\_  
**DATE**