

SCRUTINY FOR POLICIES, ADULTS AND HEALTH COMMITTEE (VIRTUAL MEETINGS FROM MAY 2020 DUE TO CORONAVIRUS)

Minutes of a Meeting of the Scrutiny for Policies, Adults and Health Committee (virtual meetings from May 2020 due to Coronavirus) held in the Microsoft Teams Meeting, on Thursday 12 November 2020 at 10.00 am

Present: Cllr H Prior-Sankey (Chair), Cllr M Healey (Vice-Chair), Cllr P Clayton, Cllr M Caswell, Cllr A Govier, Cllr A Bown, Cllr G Verdon and Cllr J Lock (sub)

Other Members present: Cllr M Chilcott, Cllr S Coles, Cllr G Frascini, Cllr D Huxtable, Cllr T Munt, Cllr C Paul and Cllr L Redman

Apologies for absence: Cllr B Revans

24 **Declarations of Interest** - Agenda Item 1

There were no new declarations.

25 **Minutes from the previous meeting held on 09 September 2020** - Agenda Item 3

The minutes were approved and signed.

26 **Public Question Time** - Agenda Item 4

There were no public questions.

27 **Somerset Safeguarding Adults Board Plan and Annual Report** - Agenda Item 5

The Committee heard a comprehensive presentation summarising the forward plan and annual report of the Somerset Safeguarding Adults Board (SSAB). Keith Perkin, the Independent Chair of the Somerset Safeguarding Adults Board started by thanking Richard Compton; the previous chair of the Board for his dedicated stewardship. The SSAB's role is to have an oversight of safeguarding arrangements within the County, not to deliver services or become involved in the day to day operations of individual organisations, including those of Somerset County Council. The main objective of the SSAB is to seek assurance that local safeguarding arrangements and partner organisations act to help and protect people aged 18 and over who:

- have needs for care and support; and
- are experiencing, or at risk of, abuse, neglect or exploitation; and
- are unable to protect themselves from the risk of, or experience of, abuse or neglect as a result of their care and support needs.

The SSAB is required by The Care Act 2014 to produce and publish an Annual Plan and an Annual Report for each financial year. The SSAB developed a new 3-year strategic plan for 2019-2022 in early 2019, incorporating comments from Scrutiny for Policies, Adults and Health Committee, and this has been refreshed for 2020-21. This refresh was originally due to be considered by the Committee in the spring, but this did not happen due to the Coronavirus Public Health Crisis. As part of the refresh the plan has been amended to reflect the competing demands on partners during the ongoing crisis.

The Board has undertaken an audit challenge for smaller agencies. The focus has been in three areas

- self-neglect,
- people in a position of trust and
- “what to do if it is not Safeguarding” – poor care or Safeguarding.

The Board has a primary drive of being a ‘can do’ organisation with a strong desire to listen and learn through monitoring and sharing both great practice and when things go wrong. The Board decided to publish a practice briefing on the referral of ‘Kevin’. This related to a referral that did not meet the threshold for a Safeguarding Adults Review to be commissioned, but which offered valuable learning that had been identified while considering the referral.

At the start of the first lockdown the Board took a decision to suspend all the sub-groups but the executive continued to meet. That decision did not diminish the commitment to safeguarding arrangements. The annual report is testament to the achievements in what has been a very challenging year. The Committee discussed the report and echoed thanks to Richard Compton and added thanks to Stephen Miles. The Committee was interested to know how children services were included in the Boards model. They were assured that although there was no representative from Children’s Services on the Board there are strong links with partners supporting children.

The Committee asked for clarification on the apparent rise in numbers of DoL’s (Deprivation of Liberty), this year there was a recorded 18% rise. The Committee wanted to know if this rise was in line with the national levels. They were assured that an increase reflects an increase in the number of people being appropriately supported and the more accurate recoding of these interventions. It was agreed that the comparison with national levels would be included in the next published performance data for the Committee

The Committee were also interested in any opportunities for reaching more vulnerable people as a result of the pandemic and the increased awareness of vulnerable groups. It was acknowledged that the pandemic had led to

more groups becoming vulnerable. The Board had decided that the sub-groups would focus on any learning the pandemic offered and this would be reflected in the next annual report.

The Somerset Scrutiny for Policies for Adults and Health:

- **Considered the Somerset Safeguarding Adults Board's 2020/21 Annual Plan and 2019/20 Annual Report,**
- **Noted progress highlights during 2020, and**
- **Committed to continue to promote adult safeguarding across the County Council and in the services that are commissioned.**

28 Winter Planning - Presentation - Agenda Item 6

The Committee were given a presentation on the Adult Social Care Winter Plan. This plan is aligned with the actions required by LA's detailed in the DHSC (Department of Health and Social Care) plan. It also takes the opportunity to highlight additional work that has been undertaken by both the LA and wider system to date, that will continue during the winter period or which it is planned to undertake. The Winter Plan references current and previous work on two related returns, namely the Service Continuity and Care Market Review and the Infection Control Grant. All LA's are required to confirm to the DHSC that they have produced their own Winter Plan by 31/10/2020. This is a condition of the Infection Control Fund extension, which has allocated £ 7,123,388 to Somerset. In addition to this LA's have also been asked to complete a Service Continuity and Care Market Review (SCCMR) and have strict new reporting requirements for the Infection Control Fund.

The Somerset Adult Social Care Winter Plan has been structured around the same themes as the DHSC plan. These are:

- Preventing and controlling the spread of infection in care settings
- Collaboration across health and care services
- Supporting people who receive social care, the workforce, and carers
- Supporting the system

It covers all actions for LAs contained in the DHSC Winter Plan. Some actions are a simple confirmation, for example that the Infection Control Fund allocation has been distributed. Others contain more detailed information on the actions we have taken, will continue or plan to take.

In pulling together the plan there were three areas of concern: -

- (i) Care Provider workforce,
- (ii) Increase in volume and level of dependency of those who require support and

(iii) Mental Health demand.

The Committee heard that this coming winter period is likely to be extremely challenging for the entire system. While Somerset has, to date, seen relatively low number of Coronavirus cases the numbers are rising. Coupled with normal winter pressures it is expected the system will experience unprecedented levels of stress if current trends continue. The care provider workforce, as with many other Local Authorities, is fragile – it can be normally be affected by things such as school holidays, caring responsibilities and poor wages. The mitigations include a relaunch of the “Proud to Care” recruitment drive. All this is heightened by isolating, shielding and Covid related sickness during the pandemic. Somerset is seeing an increase in contacts to social care but also a change in presentation and an increase in complexity (and therefore cost), particularly in relation to the care of people with dementia. There is a recognition of the fragility of people’s mental health and there is evidence starting to come through of the impacts on this on those of all ages.

The Infection Control Fund is an additional £7.1 million to support providers and care homes to reduce the risk of infections being acquired and transmitted. To secure each tranche of this fund it is necessary to comply with regular reporting on a monthly basis. It equates to £677 per bed in a care home and £143 per homecare patient.

The Committee discussed the presentation and welcomed the detail contained in the published Winter Plan. The current policy on visiting Care Homes was raised and the most up to date information was shared. Clearly this is a flexible policy and reflects the risks and state of infection in each Care Home. Some may be able to offer greater access than others depending on the type of residents, the physical arrangements in place and whether or not Covid 19 is present. Each home is RAG rated depending on its current position, but the underlying aim is to keep visiting open if it is possible. Care Homes have used some of the Infection Control fund to create facilities to allow visiting (screens, heated outside space etc). Should a Care Home have Covid 19 present then it will be closed to visiting as that is the right thing to do.

The Committee asked whether the Infection Control Fund was ringfenced and was assured it was. It was explained that 80% of the fund was spend on prescribed activities but the remaining 20% could be spent more flexibly and it is this flexible element that is being used to introduce innovations that allow more visiting.

The Committee welcomed the breadth of the report and asked if consideration could be given to raising scam awareness in the most vulnerable as this has increased during the pandemic as criminals have increased targeting of vulnerable people.

The Somerset Scrutiny for Policies Adults and Heath Committee:

- **considered the Adult Social Care Winter Plan for Somerset,**
- **supported the actions contained in the Adult Social Care Winter Plan for Somerset and**
- **noted the risks to the system during the coming winter period.**

29 **Scrutiny Review - Presentation** - Agenda Item 7

The Committee had a presentation giving an update on the Scrutiny Review that started in 2018. A Peer Challenge identified that a review of scrutiny function was required in order to make it more effective, ensure all councillors are equipped to play an active role and contribute to policy making and key decisions and governance arrangements need to reflect this. There were eleven recommendations and the Committee were given the following update on the status of each: -

- **Recommendation 1 Completed** A Scrutiny review has been completed by the nationally renowned Centre for Public Scrutiny and their report and 11 recommendations were agreed by Full Council in January 2020.
- **Recommendation 2. Partially completed.** Reduction in number of Committee meetings planned from March 2020, however plan has had to be amended due to Committee's expectation of public monthly Coronavirus updates. Changed ways of working has also led to delays in increasing Task and Finish Groups, although 2 recent T&F Groups have proved successful, especially the Schools Exclusion focused work, which resulted in Cabinet welcoming and agreeing all recommendations proposed. Have run informal workshops - next one scheduled for 7th October, a joint workshop between adults and children's scrutiny committees.
- **Recommendation 3. Partially completed.** Some Cabinet members have now started presenting reports at Scrutiny Committee meetings, with support from senior officers although further work to be done.
- **Recommendation 4. Completed.** As far as we are aware the political pre-meetings have ceased.
- **Recommendation 5. Partially completed.** In terms of work planning and agenda setting, there is a more stringent approach to information reports on all agendas, however pandemic has made this more challenging. Further tweaks are required to new information sharing process with Committee's between meetings in order to free up further agenda time for key considerations.
- **Recommendation 6. Completed.** All agendas now have a maximum of four main items of business. Between October and March 2021 the aim is to reduce the average to three.
- **Recommendation 7.** New Scrutiny work programme methodology to be drafted and agreed with 3 Scrutiny Chairs, relevant Cabinet Members

and lead director by the end of October 2020, for implementation in November cycle. Intention is to maintain a standardised approach across all 3 Committees.

- **Recommendation 8. Partially completed.** This had been implemented prior to introduction of virtual meetings, however this will need revising once formal meetings are resumed in County Hall and as we work towards a hybrid meeting solution.
- **Recommendation 9. Partially completed.** All agendas provide a public question slot and virtual meetings mean the meetings are far more accessible to the public. Work still to be done on increasing wider public engagement and input. Research has been completed with other Authorities to establish alternative ways of working. The newly recruited Scrutiny Officer will be tasked with embedding new practice.
- **Recommendation 10.** Member training and specifically scrutiny training is an area of work that the Democratic Services have had to reduce due to capacity pressures and the pandemic, however with the recruitment of new staff with training expertise, this is a priority area for the team in autumn 2020 and during much of 2020 the training focus for Members has for necessity been IT specific.
- **Recommendation 11. Partially completed.** Similar to update above, however research has been completed by the team on Chairs' training programmes being run virtually, which will be shared to all six Chairs and Vice Chairs by end of September, supplemented by further support from the Centre for Public Scrutiny. This support will also provide for further training and support for all Scrutiny Committee members. It is worth noting that the level of Chairing has considerably improved during the virtual process and the adaptability of all three Chairs has been impressive.

The next steps are further work on recommendation five, seven and ten during the winter of 2020 with a further update to the Scrutiny Committees.

Recommendation eleven proposes some training and until recently there was not the capacity in Democratic Services to undertake this but with the recent addition of a This update is to be discussed at Full Council on 18 November 2020.

The Committee discussed the presentation and raised the question of public participation in scrutiny meetings. It was recognised that since the introduction of virtual meetings there has been a marked reduction in the number of public questions and attendance. The Committee acknowledged that progress had been made in relation to clarity around the roles on Scrutiny Committees making it clearer for members of the public to be able to identify the members of Committees and Officers supporting.

The Somerset Scrutiny for Policies Adults and Health: -

- **Welcomed the update and welcomed the proposed additional planned work over the winter.**

30 **Devon Doctors Out of Hours - report** - Agenda Item 8

The Committee had a report on the Integrated Urgent Care Service provided by Devon Doctors Limited. Devon Doctors Limited is a social enterprise group which is run by healthcare professionals and reportable to a board of directors. The organisation does not have any stakeholders and is a non-profit organisation. Meddcare Somerset, a trading name of Devon Doctors Limited, is the provider of Somerset's Integrated Urgent Care Service. The Integrated Urgent Care Clinical Assessment Service delivers a "consult and complete" model of urgent care access that streamlines and improves patient care across the urgent care system. Patients will receive a complete episode of care concluding with either: advice, a prescription, or an appointment for further assessment or treatment.

In July 2020, the Care Quality Commission (CQC) carried out an announced focussed inspection of the service which resulted in the application of urgent conditions to the provider registration of Devon Doctors Limited. The Care Quality Commission Report was published on 14 September 2020 and noted some Requirement Notices relating to regulations that had not been met. The Care Quality Commission took account of the exceptional circumstances arising as a result of the Covid-19 pandemic when considering what type of inspection was necessary and proportionate.

The report has resulted in plans to improve the out of hours service, improve governance and improve safety. This inspection has resulted in a drive to change the service and the Committee were invited to give feedback. The Committee were given some examples of improvements that have been put in place: -

- (i) **Introduction of comfort calling.** Comfort calling is a safety mechanism whereby patients who breach the time of their allocated call back are given a call by the Clinical Assessment Service to ensure the condition has not worsened.
- (ii) **Introduction of an Integrated Urgent Care Service Lead Clinician.** Clinical cases enter the Somerset Integrated Urgent Care Service clinical queues from multiple sources, including NHS 111; healthcare professional direct lines; and repeat prescriptions. The newly created role of Lead Integrated Urgent Care Service Clinician plays a critical role in monitoring clinical queues, both to ensure that cases are correctly prioritised and also that response times are appropriate and based on clinical acuity.
- (iii) **Clinical Recruitment Plan.** Devon Doctors Limited has produced a Clinical Recruitment Plan to support recruitment of clinicians into the service, including GPs. Somerset Clinical Commissioning Group provided feedback from clinicians as to the 'front end' aspect of the process, which Devon Doctors Limited immediately incorporated into its recruitment process.

- (iv) **Change in Performance Metrics.** Both Somerset and Devon Clinical Commissioning Groups have worked with Devon Doctors Limited to review the performance metrics within the existing contracts to bring them into line with current requirements.
- (v) **Performance Improvement.** Devon Doctors Limited's 'Care Quality Commission Improvement Plan' includes measures to improve performance for Integrated Urgent Care Clinical Assessment Service triage and face to face (treatment centre and home visit) activity.
- (vi) **Clinical Governance structure changes.** Internal changes within the organisation have taken place with regards to clinical governance. Both Somerset and Devon Clinical Commissioning Groups' Quality Teams are also attending internal meetings within governance changes.the organisation to observe implementation of proposed clinical

None of these improvements have been done in isolations there has been collaborative working. Staffing levels have been a challenge and turnover was high. The CQC report and findings was a disappointment but the changes introduced will deliver a better service.

The Committee discussed the report and asked why is took such a challenging report to introduce these changes as the service must have been aware of failings. It was recognised that the previous leadership arrangements were not open to learning but that has changed. The Committee asked about staffing levels as it was recorded that sometimes rotas were significantly unfilled. It was recognised that it is a struggle but that at peak times the rota is filled at between 80 and 95%. The struggle to get qualified GP's and other clinicians is nationwide. The drive to upskill healthcare professionals is gaining pace with more nurse practitioners and paramedics getting qualified.

The Somerset Scrutiny for Policies Adults and Health:

- **Welcome the candour of the presentation and the changes that have already been made,**
- **Agreed to promote careers in the Care Sector on the widest basis and**
- **Agreed to keep this on the Work Programme for an update on progress in 6 months' time.**

31 Scrutiny for Policies, Adults and Health Committee Work Programme - Agenda Item 9

The Committee was invited to make suggestions for items to be included in the Work Programme. The Committee agreed that the proposed timing for the

feedback from the workshop in October should be brought forward as the proposed date was too far away from the actual event. It was agreed that it might be appropriate to have written feedback circulated to all Councillors and made available to the public in the New Year.

The Committee considered and noted the Council's Forward Plan of proposed key decisions in forthcoming months including Cabinet meetings up to date.

32 Any other urgent items of business - Agenda Item 10

There were no other items of business.

(The meeting ended at 12.14 pm)

CHAIR