

**ADULT SOCIAL CARE AND SERVICES SCRUTINY PANEL**

A meeting of the Adult Social Care and Services Scrutiny Panel was held on 8 October 2018.

**PRESENT:** Councillors McGee (Chair), Coupe, Dryden, Higgins (as substitute for Walters), McGloin, Uddin and J Walker.

**ALSO IN ATTENDANCE:** J Cain – Press.  
K Charlton – Home Manager, The Gables Care Home.  
A Donohue – Regional Director, Dale Care.  
L Holmes – Operations Manager for Teesside, Dale Care.  
A Towers – LGBT Development Worker, Hart Gables.  
M Whitelock – Regional Manager, The Gables Care Home.

**OFFICERS:** L Grabham, D Lloyd, C Lunn and E Scollay.

**APOLOGIES FOR ABSENCE:** Councillors P Purvis and Walters.

**DECLARATIONS OF INTERESTS**

There were no Declarations of Interest.

**MINUTES - ADULT SOCIAL CARE AND SERVICES SCRUTINY PANEL – 5 SEPTEMBER 2018**

The minutes of the Adult Social Care and Services Scrutiny Panel meeting held on 5 September 2018 were submitted and approved as a correct record.

**MATTERS ARISING**

A Member made reference to page five of the minutes and the potential for a training/briefing session to be offered to Elected Members in relation to trans awareness. The Democratic Services Officer advised that this had been referred to appropriate officers and was currently being looked into. It was anticipated that a wider equality and diversity programme/series of sessions would be pursued, although this would be confirmed in due course.

**NOTED****INTEGRATION OF HEALTH AND SOCIAL CARE - VERBAL UPDATE**

The Director of Adult Social Care and Health Integration provided the Panel with an update regarding the Integration of Health and Social Care.

The Panel heard that the integration between Health and Social Care had been progressing for a number of years; however, although there were a number of examples where integrated services were working well, it was acknowledged that further progress was required. This had potentially been complicated more recently as a consequence of the financial position facing health partners. Reference was made to the South Tees Clinical Commissioning Group (CCG), which was currently in special measures following a financial deficit last year. It was explained that a large part of the CCG's focus this year was upon financial recovery, which would require a detailed response to NHS England. A financial recovery plan had been put in place and officers from the Local Authority were working very closely with the CCG to minimise any knock-on impact to the Authority, and individuals receiving services, wherever possible.

Members were advised that the Acute Hospitals Trust had recently signed a new contract locally with the CCG, which comprised a three-year block contract for the transferring out of both the acute and community services. Officers from the Local Authority would continue to work closely around this contract with both the CCG and the Acute Hospitals Trust to ensure that the best possible services were offered, which was always strived for.

Work was currently taking place around the formation of the Integrated Care Partnership (ICP) (formerly the Sustainability and Transformation Partnership (STP)). Following previous updates to the Panel, it was explained that South Tees CCG had come together with four other CCGs and a single Accountable Officer had been appointed.

Officers would be attending an upcoming meeting of the Joint Health and Wellbeing Board to present a proposal around a move towards a more integrated way of working. It was explained that the Health and Wellbeing Board had requested that officers explore potential models around commissioning and provision. Work around this had been progressed by way of an illustration showing the system working based on three key elements: Shared data sets and the optimisation of available information; Operationalisation of joint commissioning and what this would mean; and Improved service delivery. The paper focused upon planning for the next three months. The tasks of the Joint Commissioning Board, which comprised Middlesbrough Council, Redcar and Cleveland Borough Council and South Tees CCG, would be two-fold, i.e. to make a determination as to what commissioning should look like on the ground, and undertaking practical ground work. Mention was made of the contract recently signed by the Acute Hospitals Trust and the potential need for representation at Board meetings.

In response to an enquiry, Members were informed that Integrated Care Systems (ICSs) were previously known as STPs (Sustainability and Transformation Plans). STPs were introduced in 2016; 44 had been created nationally to look at closing three key gaps within the NHS, which were based on finance, service accessibility and quality. Previously, the STP for the local area ran up to Durham. The communication between Local Authorities and Health in respect of STPs was acknowledged to be poor and insignificant. The STP title subsequently became Sustainability and Transformation Partnerships, and more recently an ICS. The area covered by the ICS had expanded considerably, spanning Middlesbrough to Cumbria. Consideration was given to the potential implications of attempting to maintain local planning whilst working on a large regional footprint. The example of differing detox statistics between local areas, and the combination of these to give one regional indication, was provided to Members. ICSs comprised a number of smaller Integrated Care Partnerships (ICPs). The ICP for this local area comprised five CCGs.

A Member commented that, as raised at the 5 September 2018 meeting, an illustration or diagram indicating how these various organisations/concepts interacted would facilitate understanding. A further suggestion was also made to provide a list of related acronyms. As change was constant, it was likely that any information provided would need to be date marked and regularly updated, but efforts would be appreciated.

A discussion ensued in respect of funding challenges and how these impacted upon service planning and delivery. Reference was made to Continuing Health Care and the reduction in the CCG's budget across South Tees. Consideration was given to the potential implications for the Local Authority in this regard. The Chair advised that, at the request of the Overview and Scrutiny Board, a small working group comprising Councillors Dryden, McGee and Sharrocks had been formed to look at the reduction in the CCG's contribution to Continuing Health Care funding in greater detail. The outcome of this activity would be reported back to this Scrutiny Panel, the Health Scrutiny Panel and to the Overview and Scrutiny Board.

A Member queried the current position regarding the Continuing Health Care budget, and an element of dispute arising from a point at the end of the last financial year when a balance amount was owed, by the CCG, to the Local Authority. In response, it was explained that, on a monthly basis, the Local Authority recharged the CCG for services commissioned on their behalf. As this amounted to over £2m each month, it was indicated that there was usually around circa. £1m waiting for payment at any given time. Members were appraised of the processes involved in determining an individual's eligibility for services and where needs were derived from, i.e. if they were health or social care based. This in turn subsequently identified where funding would come from. In some cases, care packages would be split between health and social care, for example: where individuals had complex learning disabilities. Funding was not always 50-50, and therefore the percentage amounts payable would differ, which could lead to dispute. The dispute mechanism could be a lengthy one, and therefore there was always money 'floating' in terms of the dispute process. It was highlighted that an

individual would never be left without care: the principle was that care would be provided and the Local Authority and the NHS would then have a discussion around how they wished to approach that dispute. In terms of the balance outstanding from the previous financial year, it was indicated that this matter had been satisfactorily resolved.

Owing to the continually evolving landscape, a Member commented on the importance of receiving regular updates and thanked the Director of Adult Social Care and Health Integration for these. It was felt that the most important people were the service users and it was imperative to ensure that the best possible services were being provided. Openness and transparency were paramount and it was vital that key officers were engaged on every opportunity with the CCG. It was indicated to the Panel that this was a complicated system and large scale cost reductions, unlike anything before, were being required. The input of officers from the Local Authority was therefore fundamental to this process.

The Panel thanked the Director of Adult Social Care and Health Integration for the information provided, and looked forward to receiving further updates at future meetings.

## **NOTED**

### **THE LGB&T COMMUNITY AND ELDERLY CARE - FURTHER INFORMATION**

In order for the Panel to receive information from the perspective of care providers, several had been contacted and invited to attend the meeting. Representatives of The Gables Care Home and Dale Care were in attendance, together with a representative of Hart Gables. Written representation had been received from the Manager of Stainton Lodge and Stainton Way Care Home. The Chair welcomed the representatives to the meeting and thanked them for their attendance.

By way of introduction, the representatives were appraised of the Scrutiny process and the progress that had been achieved to date in respect of this current investigation. It was highlighted that the involvement of care providers was imperative in gaining wider perspective and progressing the investigation forward.

The Manager of The Gables Care Home commenced the discussion by providing the Panel with information regarding her role, and the role of the home as care provider. Members heard that the home provided support for residents requiring nursing, residential, dementia nursing and general care. The organisation had been working with Hart Gables on the 'Age with Pride' project. Residents of The Gables Care Home had been involved in the research and it was hoped that further on-going work could be undertaken in collaboration with Hart Gables.

The Regional Director of Dale Care explained that the organisation was established in 1986 and had been successfully operating in other areas, including Hartlepool, Gateshead and Newcastle; the business was fairly new to the Middlesbrough area. Dale Care provided domiciliary care and extra care facilities. In order to ascertain how they could best provide assistance and support, the representatives were keen to learn of the types of issues that had been raised in respect of this topic. Mention was made of four members of staff who had recently identified as transgender.

A discussion ensued regarding the openness and honesty of individuals sharing information around LGB&T matters. The Manager of The Gables Care Home indicated that, from the point of view of its residents, because some residents had quite complex needs, general communication could be difficult. However, what had been found was that the people who were able and willing to talk about LGB&T matters were of the generation where it was not talked about. It was commented that, even if an individual identified as LGB&T, potentially because of their age, upbringing and experiences, there may have been some reluctance to talk openly about it. Regarding gender, Members heard that females in some extra care facilities were more prone to talking openly about LGB&T and, in general, appeared more accepting. A Member commented that current care home residents may have been raised by parents and/or grandparents born in the Edwardian and Victorian eras, and therefore may have had very different attitudes. It was commented that individuals of the same age may

have held contrasting attitudes, with one example comparing one individual who was fully open to discussion, to another who was not - both were aged 93 years. The representative of Hart Gables felt that progression was not completely linear, i.e. steps were being taken forward, but then being taken back. Continually pushing for change, advancement and acceptance was required in order to break down barriers and remove stigma.

Copies of a briefing note received from the Manager of Stainton Lodge and Stainton Way Care Home were tabled for Members' perusal. The Chair read out the information, which detailed the findings of the work that had been undertaken with Hart Gables. In summary, it was predicted that by 2030, a much more open and diverse group of people would be accessing care services, who were in their twenties in the 1960's and 1970's, and may be more open to participate in similar sessions.

The representative of Hart Gables circulated copies of the 'Age with Pride' project's final report, which was entitled: 'A Forgotten Community: Provision for Middlesbrough's Older LGBT Care Home Residents'. The report comprised the following sections: 'Statistical Need'; 'The Needs of the Older LGBT Community'; 'Methodology'; 'Methods of Engagement'; 'Key Findings, Middlesbrough Care Home Staff and Management'; 'Key Findings, Middlesbrough Care Home Residents' and 'Our Suggested Key Actions'. It was indicated to Members that nine care homes engaged with the project; 29 had been contacted in the initial stages. It was acknowledged that there were various reasons for this, including limited resources. In response to an enquiry regarding further pursuit of those care homes that did not participate, Members were advised that Hart Gables would very much like to engage with as many care homes as possible across the region. Further contact would be made wherever possible with them again in the future.

In response to an enquiry regarding commissioning matters, the Council's Head of Strategic Commissioning reiterated that, although this investigation predominantly focused upon care homes, it was important to take into consideration wider care delivery options across Middlesbrough, including domiciliary care. In terms of any recommendations arising from the Panel's review, these would be rolled out to the local care sector across the board. It was indicated that the Authority's five approved domiciliary care business partners would need to be kept informed of activities around the care home sector.

With regards to Hart Gables' 'Age with Pride' project work, it was felt that some valuable learning had been attained and it was important now to consider next steps, which would take matters such as staff training into consideration. Reference was made to quality surveys that were undertaken with care home residents. It was explained that when these were first introduced, a question pertaining to sexual orientation was included; however, this was subsequently removed following negative feedback. It was felt evident that, from the work that Hart Gables had carried out, there was a sensitive way of holding these conversations, which now required further consideration. It was acknowledged that care home environments were exceptionally busy and therefore any proposed actions would need to bear this in mind. The Head of Strategic Commissioning emphasised the importance of understanding why there was a need for services to know an individual's sexual orientation. It was highlighted that it was not about prying, but was instead concerned with ensuring that a person's personal needs (their holistic and person-centred needs) could be identified, respected and met.

The Panel considered a potential lack in understanding around some of the concepts and terminology of LGB&T, particularly in relation to older people. It was felt that that this could make empathising difficult and result in feelings of loneliness and/or social isolation for some individuals identifying as LGB&T. The representative of Hart Gables indicated that the organisation aimed to bring communities together and raise awareness. It was felt that promotion of activities celebrating LGB&T, such as through art and culture and on specific calendar dates, would help to enrich the lives of all individuals, and not only those identifying as LGB&T.

A Member suggested that in relation to, for example, BME and individuals with learning difficulties, there could potentially be barriers to discussing LGB&T matters with particular groups/individuals. With this in mind, it was felt that it would be beneficial to involve Elected

Members in any proposed training in order to facilitate this process. In addition, the Panel thanked the Hart Gables representative for the excellent 'Age with Pride' report, and requested that a copy be circulated to all Elected Members, for information; the Democratic Services Officer would undertake this.

A Member commented on the importance of recognising and appreciating the unique traits of individuals and how, as a Local Authority, ensuring that unique and personalised care was provided. Mention was made of individuals sometimes facing active discrimination and the role of the Local Authority and its partners in taking a lead to eradicate this. The Panel was congratulated for raising this subject and bringing the issues to the forefront.

The representative of Dale Care indicated that, whilst domiciliary care was a difficult industry, there was positivity here in that clients did build up close relationships with caregivers and they did develop trust; good quality care was being provided. The Chair emphasised the importance of good news stories and communicating these to local communities.

In response to a Member's request, the representative of Hart Gables advised that leaflets and posters promoting the organisation would be forwarded to the Democratic Services Officer for distribution to Panel Members, as required.

The Commissioning Officer for nursing indicated that, although a lot of discussion had taken place around individuals in terms of care, it was also essential to recognise the importance of offering support and educational opportunities to wider family members. The Manager of The Gables Care Home indicated that the work undertaken with Hart Gables had stemmed from passion for development in this area. Further partnership work was currently being undertaken, including establishment of a LGB&T Dementia Cafe based at The Gables. This would be open to all, including residents of The Gables Care Home, other care homes and the community, and would be a point for family members to attend.

Consideration was given to the progress of the Scrutiny investigation. The Chair indicated that work on the preparation of the draft final report would commence shortly. Once completed, this would be forwarded to all of the representatives that had provided information for comments/feedback. The Chair thanked the representatives for their contributions and reiterated the support for the work being undertaken in this area.

#### **AGREED**

1. **That the Democratic Services Officer would circulate a copy of Hart Gables' 'Age with Pride' report to all Elected Members, for information.**
2. **That the representative of Hart Gables would forward promotional literature/materials to the Democratic Services Officer, for subsequent circulation to the Panel Members, as required.**
3. **That the information, as presented, be noted.**

#### **OVERVIEW AND SCRUTINY BOARD UPDATE**

The Chair provided a verbal update on the matters that were considered at the Overview and Scrutiny Board meeting on 2 October 2018.

#### **NOTED**

#### **DATE OF NEXT MEETING - MONDAY, 5 NOVEMBER 2018**

The next meeting of the Adult Social Care and Services Scrutiny Panel had been scheduled for Monday, 5 November 2018.

#### **NOTED**