

ADULT SOCIAL CARE AND SERVICES SCRUTINY PANEL

A meeting of the Adult Social Care and Services Scrutiny Panel was held on 3 December 2018.

PRESENT: Councillors McGee (Chair), Coupe, Dryden, Uddin, J Walker and Walters.

ALSO IN ATTENDANCE: J Brown – Bankfields Parent’s Group.
J Cain – Press.
E Devanney – Head of Service for Adult Learning Disabilities for Tees Esk and Wear Valley (TEWV) – Provider of Aysgarth and Bankfields Respite Facilities.
D Gardner – Director of Operations for Teesside for Tees Esk and Wear Valley (TEWV) – Provider of Aysgarth and Bankfields Respite Facilities.
K Hawkins – Director of Commissioning and Transformation for Hartlepool and Stockton and Darlington CCGs, also representing South Tees CCG.
J Heaney – Head of Commissioning and Strategy for Hartlepool and Stockton and Darlington CCGs, also representing South Tees CCG.
E Lowther – Trans Aware.
S Wall – Team Manager, Adult Social Care.
Councillor A Watts – Redcar and Cleveland Borough Council.
G Widdowfield – Bankfields Parent’s Group.

OFFICERS: C Breheny, C Lunn and E Scollay.

APOLOGIES FOR ABSENCE: Councillors Davison and McGloin.

DECLARATIONS OF INTERESTS

There were no Declarations of Interest.

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

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

MATTERS ARISING

A Member made reference to the Transgender Day of Remembrance (TDoR) that took place on 20 November 2018; the Mayor and several Councillors had attended a commemorative event at MIMA.

The representative of Trans Aware expressed her gratitude to Middlesbrough Council for the support provided in respect of the TDoR. Mention was made of the transgender flag being flown at the Town Hall on the day.

NOTED**LEARNING DISABILITIES RESPITE REVIEW - UPDATE**

The Chair welcomed the various representatives that had been invited to the meeting in respect of this topic. By way of introduction, the Democratic Services Officer responsible for supporting the Health Scrutiny Panel provided some background information.

Members heard that in response to a learning disabilities respite review undertaken by the Clinical Commissioning Groups (CCGs), Middlesbrough Council and Redcar and Cleveland Borough Council, via the South Tees Health Scrutiny Joint Committee, had taken the decision to submit a referral to the Secretary of State. It was felt that the decisions taken were not in the best interests of the health service in the area, and issues concerning the consultation process had also been identified. A response was currently awaited from the Secretary of State.

The evidence submitted to the Secretary of State from the Local Authorities had also been provided to the CCGs in advance of the submission, for information. It was explained that the Secretary of State could take a decision upon the referral directly, or alternatively refer the matter to the Independent Reconfiguration Panel (IRP) for determination.

In order to gain reassurance for parents and carers, clarification had been sought from the CCG as to the plans for the interim period. In response, the CCG, in partnership with TEWV, had provided a written response to advise that the current arrangements would continue until September 2019. However, within that same letter, information regarding a new assessment tool being 'ready for testing' was also conveyed. During the consultation process, the CCG had advised that a new assessment tool would be developed with the assistance of parents and carers, and tested with them accordingly.

The Adult Social Care and Services Scrutiny Panel, at its meeting on 20 December 2017, had agreed to review the assessment processes surrounding the provision of learning disability respite services. The Chair of the Panel, together with the Chair of the Health Scrutiny Panel, had requested that today's meeting be utilised for this purpose. The Panel would examine how the proposed new assessment tool had been developed and what involvement the parent/carer representatives had had in that process.

The representative of the CCGs indicated that the Secretary of State had requested further information regarding the referral. It was explained that although the proposal would affect Hartlepool Borough Council and Stockton-on-Tees Borough Council residents, a referral had not been submitted by either Local Authority. Clarification had therefore been sought from the Secretary of State's office in that regard. In addition, as not all four Local Authorities had submitted a referral, representatives of the CCG's had contacted NHS England for clarification around next steps in terms of progressing to implementation.

It was acknowledged that there had been very little communication with parents and carers and Local Authority colleagues since July 2018, and engagement needed to be re-established.

The Democratic Services Officer explained that, in preparation for today's meeting, a series of questions had been forwarded to the representatives of the CCGs, which parents, carers and Members wished to receive information on. The questions were in relation to the letter that the CCG had forwarded to parents and carers, and were as follows:

- What was the purpose of this tool and how were parents going to be categorised?
- In what ways did the new tool depart from the previous assessment and allocation imperatives?
- Why were the meetings to design this tool with parent representatives suspended in July?
- How was the tool now 'ready for testing' on families, sidelining the parent representatives?

In response to the question posed, the CCG representative indicated that the tool itself had three elements; it was recognised that the terminology may have caused some confusion in this regard. These three elements were as follows:

- Assessment of the person's clinical needs (which was already undertaken);
- Assessment of the carer's support needs - this was a new/additional element that had been identified as being required to ensure that respite provided support to both the individual and parents and carers; and
- The calculation which applied a weighting to each part of the person's assessment - it was about ensuring that the weighting was correctly applied and fit for purpose.

The CCG representative explained that the person's assessment was already carried out by TEWV. It was this element that was being refined and where it was hoped that input from the parents and carers would be received. The carer's aspect had not yet been developed and therefore not tested. Once the weighting element had been completed, details would be discussed with stakeholders in order to validate its sensitivity and authenticity.

In response to a Member's comments regarding assurances that parents and carers would be involved in the design and testing of the new assessment process, the Panel was advised that there was nothing to test at the moment. It was acknowledged that use of the word 'testing' within the letter to parents and carers was inappropriate; apologies were conveyed for any confusion and anxiety caused by this. It was explained that an allocation based on parents/carers' needs was currently being looked at, but this could not be developed or tested until parents and carers had been involved. This had not yet been undertaken as work had paused following the referral to the Secretary of State. It was recognised that a whole systems approach would be required; communication with all stakeholders would be undertaken accordingly in due course.

Consideration was given to the role of respite and who it was designed for, i.e. for individuals, parents/carers, or both. The Panel heard that respite was intended to support both parties and therefore any future assessment work should take into account the needs of carers. It was reiterated that a carer's assessment was not currently undertaken and was an element that required development.

In response to a Member's request for clarification, it was explained that a clinical assessment was undertaken for any person wishing to access Aysgarth or Bankfields. This had always been in place and was the tool that TEWV used to determine whether a person had physical health needs that would require access.

Regarding carers' needs, it was explained that when the consultation work was undertaken, it had been determined that these should be considered as part of the assessment because the current approach and process around this was insufficient. Currently, respite allocation was based on the number of people wishing to access the service divided by the total number of nights available, and not necessarily based on the differing needs of the individual or their carer. This carer's assessment had not been developed and, pending the decision of the Secretary of State, would need to be co-produced with families.

It was acknowledged that the lack of communication between July and December had been disappointing, although representatives of the Local Authorities had been involved in some operational meetings. Work would continue in order to keep communication channels open, with all stakeholders being actively engaged throughout.

A comment was made regarding the proposed weighting assessment and the carer's assessment elements. Details regarding the processes followed within Adult Social Care to calculate an individual's support package were provided. It was highlighted that the involvement of the Local Authorities and other stakeholders in the development of the assessment processes would be vital. It was acknowledged that there were interdependencies across the Local Authorities and the CCGs. The principles of the weighting were to be based on the carer's assessment, achieved via a series of questions that would calculate the number of nights of eligibility for respite. The questions had yet to be formalised.

It was explained to the Panel that the recognition of carers' needs was fundamental; progressing forward with only the clinical assessment would fail to achieve this.

In response to a query regarding the questions to be formulated in respect of the carers' assessment, Members heard that other assessment tools had been referred to as a potential starting point, including Decision Support Tools (DSTs) that were used in Continuing Healthcare; this was a new area for the CCG. The needs of carers had never been considered alongside access of respite care from a CCG perspective previously, as this had not formed part of the CCG's statutory responsibility.

A representative of Bankfields Parent's Group detailed their experiences to date. Concerns were expressed around the lack of communication that had taken place since the submission of the referral to the Secretary of State, although this was anticipated to a degree because the Secretary of State's decision could not be pre-empted. Reference was made to the contents of the letter that parents and carers had recently received, which indicated that respite would be extended up until September 2019, but also that parents and carers would be required to

undertake a new assessment. It was felt that these two elements should not have co-existed in one letter, and that the parents/carers who had been accessing Aysgarth and Bankfields for many years should not be expected to undertake a new assessment.

In response, the representative of the CCGs reiterated the reason for the pause in communications, i.e. for clarification to be obtained from NHS England in terms of the action that could be taken following the referral to the Secretary of State. It was indicated that, concurrently, queries were also being received from Members (on behalf of parents and carers) in respect of holiday planning, and how this could be undertaken when all communication had ceased. It was explained that the extension of respite provision to September 2019 was provided in order to assist with people planning holidays, etc. It was acknowledged that coverage of the two points within one letter and use of the term 'testing' was erroneous, with apologies being reiterated for this.

The representative of TEWV indicated that the sole purpose of the letter sent to parents and carers, from his perspective, was to advise families that they were able to book respite provision until September 2019. It was explained that clear concerns had been raised about peoples' ineligibility to plan for the year ahead. It was recognised that the reference to 'testing' within the letter had caused significant concern and consternation to people, and that two separate letters ought to have been sent. The need to begin the process of re-engaging with stakeholders was supported.

From the perspective of the Local Authority, Members were informed of the involvement of officers until the point of pause in July 2018. Clarification was provided to the representatives of the CCGs as to which officers of the Local Authority should be invited to future operational meetings. Officers offered their support, wherever possible, to progress this matter forward.

A comment was made with regards to the assessment process, including how the non-statutory carer's assessment questions would determine the amount of respite awarded, and how this would work financially. In response, the Panel was advised that this aspect had not yet been developed; partnership work with officers of the Local Authorities, who had extensive experience in this field of work, would be important.

A Member commented that one of the key issues regarding the referral related to the financial envelope of £1.5m, i.e. this figure could not be capped, and to do so would indicate improper assessment.

The representative of Bankfields Parent's Group explained to the Panel that parents had confidence with TEWV as a source of all assessment. It was felt that TEWV had a history of full compliance with care and the care environment for the level of demand that the severe and profoundly brain damaged from birth required. Of concern to parents and carers was the introduction of a 'weighting'. It was felt that parents and carers' personal situations would provide an opportunity to skewer weighting, which at the moment did not exist. It was the view of parents and carers that having a brain damaged person in their 40s and 50s and living at home was the eligibility for 33 nights of respite. Concerns were raised as to how individual circumstances would impact the number of points awarded, and consequently the number of respite nights provided.

From the perspective of parents and carers, it was felt that eligibility was based on the clinical demand level of the individuals when in the care of others. The level of brain damage being discussed required compliance within the NHS, and could not be satisfied by a tool that was used in a social care environment. In terms of communication methods, it was highlighted that many of the parents that accessed Aysgarth and Bankfields did not utilise e-mail. It was highlighted that communication ought to be undertaken by post and with everybody.

With regards to future communications, the representatives of the CCGs advised that the point regarding e-mail contact had been acknowledged. Meetings would be held with parents, carers and wider stakeholders to determine preferred communication methods going forward.

In response to a Member's comments regarding the establishment of the new assessment processes, the Panel heard that support would be obtained from experienced colleagues in achieving this. Reference was made to the excellent working relationship between TEWV and the CCG, which would continue. It was highlighted that this exercise was not concerned with cost-shifting, but was instead focused on achieving the most positive results for all stakeholders.

In terms of progressing this matter forward, the representative of Bankfields Parent's Group felt that the availability of bedsits, caravans, B&Bs, etc. was wholly inappropriate and ought to be removed from the agenda. It was explained that such facilities did not reflect the needs of the families accessing Aysgarth and Bankfields. Clarity was therefore required in terms of which individuals were being referred to when discussing these facilities. In addition, it was felt that the term 'weighting' needed to be scrutinised in greater detail before being taken further. It was indicated that there were only three families accessing Bankfields from the Hartlepool area, which was the reasoning behind their withdrawal from the referral process. Parents and carers wanted the respite service to be recognised, honoured and continued.

A Member commented that if the care element was to be reviewed and assessed, it was essential to bear in mind that the needs of parents and carers would increase with age, which would more than likely require increased respite provision. Building reviews into support packages was vital in order to recognise this. Members expressed concerns regarding the lack of communication and the contents of the letter that had been sent to parents and carers.

The representative of Bankfields Parent's Group commented that there were 2000 NHS beds in Teesside and this matter concerned 11 of those beds. In response, the representative of the CCGs indicated that bed provision within respite services was being maintained, which was hoped would offer reassurance to parents and carers.

A Member commented on the current financial position of the CCG and the reductions that were required.

It was anticipated that an initial decision as to whether it would be the Secretary of State or the IRP making a final judgement on the referral would be taken early in the New Year. With this in mind, it was agreed that an update would be provided to the Panel at the 11 February 2019 meeting. In the interim, the Chair advised that any further comments could be forwarded to the Democratic Services Officer for circulation to the Panel Members, as required.

The Chair thanked the representatives for their attendance and contributions; the invited representatives left the meeting at this point.

AGREED that:

1. **An update in respect of this topic would be provided at the 11 February 2019 Panel meeting; and**
2. **The information, as presented, be noted.**

INTEGRATION OF HEALTH AND SOCIAL CARE - VERBAL UPDATE

As there were no further updates at the present time, it was agreed that this item would be deferred to the next scheduled meeting.

AGREED that this item be deferred to the 7 January 2019 meeting.

THE LGB&T COMMUNITY AND ELDERLY CARE - DRAFT FINAL REPORT

A discussion took place in relation to the recent media coverage that the report had attracted, specifically in respect of the insertion of an ampersand to formulate LGB&T. Articles had been produced by local media outlets including the Evening Gazette and BBC Tees, as well as more widely by Pink News and LGBTQ Nation. There had been significant debate around the acronym, which further demonstrated this to be a complex area. Consideration was given to the points of discussion that had been raised on various social media forums. The

representative of Trans Aware thanked the Panel, indicating that this was an enormous step forward and, although progression in relation to this may take time, the fact that the matter was being considered more widely was excellent.

The representative of Trans Aware advised of her availability to deliver Trans Awareness training to Elected Members and Council employees, and to provide assistance to the Authority in relation to any associated policy frameworks, as appropriate.

Members were directed to the conclusions set out in paragraphs 100-110 of the report. The Panel agreed the conclusions as presented, with no amendments being required.

Regarding the Panel's recommendations arising from the investigation, a number of potential suggestions were tabled. Following consideration, Members agreed that the following recommendations, together with the explanatory paragraphs, would be inserted into the report:

'It became apparent during the investigation that there were issues facing the wider LGB&T community that related to the agreed Terms of Reference (and issues not only for elderly LGB&T individuals receiving care). The Panel therefore agreed that, in line with Scrutiny's core remit of making recommendations in respect of matters affecting the Local Authority's area or its inhabitants, it would be remiss not to bring those wider issues to the Authority's attention.

The Panel recognises that extensive work continues to be carried out by officers within the Authority's Equality and Diversity remit, but also feels it has a duty to raise all of the issues discussed so as to contribute and reinforce that work.

Consequently, the Panel has taken the decision to present its recommendations that are specific to the Terms of Reference of the investigation, i.e. issues affecting elderly LGB&T individuals in receipt of care, but also those that are based on wider LGB&T issues.

Recommendations Specific to the LGB&T Community and Elderly Care

- *That activities which raise awareness and celebrate LGB&T be undertaken in care settings to encourage participation in open discussion.*
- *That training and development sessions be undertaken with care providers. Training should focus upon general awareness raising of LGB&T matters, as well as more specific training around the promotion of engagement and open discussion between clients and care staff.*
- *That work be undertaken by officers in Commissioning and Procurement to ensure that contracted providers have policies in place to support the anticipated increase of openly LGB&T residents in the future.*
- *That an online LGB&T awareness raising module be introduced and implemented for all Elected Members and Council employees, which could also potentially be part of the induction process. The Panel would also encourage staff to undertake additional offline training, where possible.*

Recommendations Based on Wider LGB&T Community Issues

- *That consideration be given to the use of the LGB&T acronym across the Council.*
- *That engagement work be undertaken with all communities to raise awareness and understanding of LGB&T issues, which would promote community cohesion and group interaction whilst challenging negative behaviours. This would also assist the relatives and friends of LGB&T individuals who are receiving care support.*
- *That an awareness-raising briefing/training session, or series of sessions, be scheduled for all Elected Members in respect of the issues surrounding LGB&T and wider Equality and Diversity areas, and how to engage with 'hard to reach' groups around LGB&T matters.*
- *That the Local Authority works in partnership with other organisations to further develop LGB&T support provision in Middlesbrough; each service directorate to consider how support can be provided to the LGB&T agenda.*

- *That a wider related project be undertaken by the Health Scrutiny Panel to look at the support being offered to LGB&T individuals within health services, particularly in terms of accessing health facilities and the processing of referrals.'*

The Panel agreed that, following final approval of the recommendations being made via e-mail, the report would be submitted to the Overview and Scrutiny Board for consideration.

A Member commented that the report was excellent and demonstrated how progressive Middlesbrough Council could be. The Panel Members wished to formally record their thanks to the Democratic Services Officer for the work undertaken in preparing the report.

The representative of Trans Aware indicated that, further to discussion at a previous meeting of the Panel, a report detailing the results of a consultation with transgender people about their concerns and aspirations living and growing older in Middlesbrough was now available. It was agreed that a copy of the report would be forwarded to the Democratic Services Officer for circulation to Members.

AGREED that:

1. **Following final approval of the recommendations being made via e-mail, the Panel's final report in respect of 'The LGB&T Community and Elderly Care' would be submitted to the Overview and Scrutiny Board for consideration;**
2. **The representative of Trans Aware would forward a copy of the consultation report (regarding transgender people and their concerns and aspirations living and growing older in Middlesbrough) to the Democratic Services Officer for circulation to Members; and**
3. **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 13 November 2018.

NOTED

DATE OF NEXT MEETING - 7 JANUARY 2019

The next meeting of the Adult Social Care and Services Scrutiny Panel had been scheduled for Monday, 7 January 2019.

NOTED