## ADULT SOCIAL CARE AND SERVICES SCRUTINY PANEL

A meeting of the Adult Social Care and Services Scrutiny Panel was held on 13 November 2019.

**PRESENT:** Councillors Platt (Chair), Hill, Lewis, Purvis, Walker and Wilson.

ALSO IN ATTENDANCE: A Sykes (Age UK Teesside).

**OFFICERS:** L Grabham, S Lloyd and C Lunn.

APOLOGIES FOR ABSENCE: Councillors Goodchild, Jones and Smith.

## DECLARATIONS OF INTERESTS

There were no Declarations of Interest.

\*\*The Chair gave a brief statement to politely remind Members and officers that the Purdah period had now commenced.\*\*

# MINUTES - ADULT SOCIAL CARE AND SERVICES SCRUTINY PANEL - 16 OCTOBER 2019

The minutes of the Adult Social Care and Services Scrutiny Panel meeting held on 16 October 2019 were submitted and approved as a correct record.

A Member made reference to page six, paragraph two of the minutes. In response to an enquiry regarding the establishment of a Community Investment Programme, the Advanced Public Health Practitioner advised that this formed part of the Sport England Local Delivery Pilot (LDP). Whilst there was a significant amount of money attached to the project, the team aimed to develop a Community Investment Programme that was different to standard programmes, with investment principles linking in with wider changes that the programme would hopefully achieve. It was indicated that although formal application forms would be required for higher funding requests, submission of video applications for smaller amounts would be possible. In terms of a timescale, this work would be undertaken in the new year.

## INTEGRATION OF HEALTH AND SOCIAL CARE - VERBAL UPDATE

As there had been no update in respect of this standard agenda item since the last meeting, this item was deferred.

## NOTED

## PHYSICAL ACTIVITY FOR OLDER PEOPLE (AGED 65+) - FURTHER INFORMATION

The Council's Head of Strategic Procurement and Commissioning and the Chief Executive of Age UK Teesside were in attendance at the meeting to provide information regarding work activities carried out in relation to this topic.

The Head of Strategic Procurement and Commissioning explained that there was no age limit applicable to exercise: it was crucial to an individual's physical and mental wellbeing and may also improve the quality of life for them and/or their loved ones, including those living with dementia.

The NHS had found that many adults aged 65 and over spent, on average, ten or more hours each day sitting or lying down, and this inactivity was coming at a price, affecting everything from higher fall rates, psychological distress and even early death. There was strong evidence that people who were active had a lower risk of heart disease, stroke, Type 2 diabetes, some cancers, depression and dementia.

There were currently 30 older persons' care homes across Middlesbrough, all of which were privately operated, but had contracts in place with the Council. The total capacity across all 30 homes was 1566 beds, with 1132 people currently placed within these. However, this figure did change daily. Some of the places were funded by the Council, others part funded, and some self-funded.

A Member queried what authority the Council had over privately operated care homes. In response, it was explained that contracts with providers were in place and the Council did carryout monitoring activity. Reference was made to the fees that the Council paid to providers. Inspections were undertaken twice per year, more so if safeguarding concerns had been raised. Depending upon the quality found, this would determine the amount of money that the Council paid per bed, per week. The Council incentivised good quality via a higher fee rate.

Members heard that the threshold for people entering residential care had changed significantly over the last five years, with people remaining at home for longer before entering.

In response to an enquiry regarding Thirteen Group homes, the Panel was advised that Thirteen Group did not have any registered care homes. Thirteen Group provided sheltered housing, which was not registered care. Domiciliary care providers delivered care within sheltered housing facilities as private agencies. A Member made reference to Beechfield Court and Pennyman House and queried whether these facilities provided sheltered housing. In response, it was explained that both were extra care housing facilities and therefore not classed as registered care homes. Residents had their own flats/tenancy agreements in place, with contracted home care agencies attending to deliver care.

Regarding age demographics, it was explained that care homes had different registrations with the Care Quality Commission (CQC), i.e. whether provision was for those over the age of 65, or for younger adults under the age of 65. The example of Aster Care offering provision for younger adults in Middlesbrough was provided.

The Panel heard that 26 of the 30 care homes employed a dedicated Activities Co-ordinator. The CQC was the regulator of care homes, not the Council. It was not a requirement that care homes employed a dedicated Activities Co-ordinator, and therefore the Council could not enforce this. It was explained that some care homes required care staff to provide the activities as part of their core role; however, the majority preferred to employ dedicated Activities Co-ordinators to ensure that activities were not delayed or postponed.

A range of activities were delivered in care homes, which included:

- Arts and crafts;
- Board games;
- Bingo;
- Chair-based exercises;
- Darts;
- Hand massage;
- Bean bag throwing; and
- Indoor golf and skittles.

External activities were also offered, which included:

- Bowling;
- Day trips (Redcar, Whitby, etc.);
- Garden centres;
- Pantomimes;
- Shopping;
- Tea dances;
- Visits to the cinema (dementia friendly);
- Visits to the Little Theatre; and
- Yellow Rose Dementia Cafe.

Activities were provided as part of the care home fees.

The Panel was advised that other agencies visited care homes to provide a variety of activities. These included:

- Choir;
- Class Act Musical Instruments;
- Dog Therapy;
- Mr. Motivator exercises;
- Pat the Pony;
- Singers; and
- Zoology.

Reference was made to a recent care home conference that had been held at the Riverside Stadium, which showcased some of the activities that could be provided.

In response to an enquiry regarding intergenerational activity and whether care homes invited school children to visit their residents, it was explained that some care homes did have relationships with nearby schools. Visits were often seasonal and tended to link in with special occasions, such as religious holidays.

The Panel was provided with further details regarding the Council's monitoring of care homes. It was explained that as part of the monitoring arrangements, there were nine standards, one of which concerned social and leisure standards. Regular monitoring was undertaken twice per year; staff would visit care homes and check that activities, where residents had expressed a desire to participate, had taken place. Staff also checked that an activities programme was available and clearly on display to ensure that residents and their families were aware of what was available to them. Surveys were undertaken with residents once per year to ensure that the opportunities to participate in activities was offered, that activities were of their choice, and that they were made available.

Reference was made to a care home brochure that the Council published annually, which was available via both the Council's website and Civic Centre reception. Contained within this was a 'caring checklist', which helped emphasise the importance of the quality of care being offered, and not only the environment. A checkpoint referring to activities, programmes, outings and holidays was included to ensure that this was being explored when potential residents and their families were viewing care homes.

In terms of the Council's expectations regarding the number of hours of activities being provided to care home residents, it was explained to the Panel that guidelines were in place. These were based on the size of the home, as follows:

- 0 20 beds 20 hours per week;
- 21 30 beds 30 hours per week;
- 31 40 beds 37 hours per week;
- 41 50 beds 42 hours per week;
- 51 60 beds 45 hours per week;
- 61 70 beds 48 hours per week;
- 71 90 beds 54 hours per week; and
- 91+ beds 60 hours per week.

The Panel was informed of the procedures that were in place for addressing any issues with care home standards. It was indicated that the Council had excellent relationships with care home providers, which had been highlighted during a recent peer review. It was acknowledged that issues had been experienced, but the Council did hold providers to account and they were responsive to this.

In response to an enquiry regarding staff to client ratio, it was explained that the Council was not permitted to enforce any requirements. The regulator's standard was that care homes had a sufficient number of staff to meet the dependency needs of the residents within the home at any given time. Care homes were required to assess the dependency of each resident and assign the required number of staff to meet those needs. Providers were required to have a dependency tool, which must have demonstrated the level of staff necessary to meet those needs. Council staff would check this and staff rotas during monitoring visits. Random visits were often undertaken during the night to ensure that a sufficient number of staff was on duty, with reports being made to the regulator as necessary. It was confirmed that only the CQC could close care homes.

The Advanced Public Health Practitioner suggested that a forum or discussion group be established to bring together the 26 Activities Co-ordinators and the Public Health team to share ideas. The Head of Strategic Procurement and Commissioning would raise this at a future meeting of the Care Forum.

The Chief Executive of Age UK Teesside provided details regarding the Phoenix Project, which was funded by Middlesbrough Council. It was originally set-up as a pilot study into the value of social rehabilitation, but had since developed into an established programme, which provided an opportunity for people to spend time with others in a welcoming social environment.

The Panel heard that a variety of activities were offered daily Monday to Friday, all of which were delivered within community settings. It was highlighted that, over the last five years, the importance of introducing physical activity into group activities, at all different levels, had been recognised. Essentially, it was personal preference as to whether individuals participated, but all activities involved some element of physical exercise, in addition to the social aspect. The example of a weekly carpet bowls session was provided, which currently engaged participants aged circa. 50-95 years. Friendships had been formed outside of the group, which was excellent for social inclusion. Other activities included:

- Chair-based exercise and reminiscence sessions these were offered on a weekly basis. Three members of staff were trained to deliver chair-based exercise, which enabled this element to be incorporated into other activities being delivered;
- Dance exercise;
- Friendship Friday, which included lunch, bingo, quiz and chat;
- Lunch and Social, which included board games, ping pong and Nintendo Wii;
- New Age Kurling; and
- Zumba Gold this allowed for older people and those with disabilities to join in at varying levels/abilities.

It was explained that activities were previously held at Age UK Teesside's office, which was based in the Town Centre. However, following a change in accommodation and a move out into the community, activities were now provided at Community Hubs; a walking group had also recently been established to take place fortnightly at Stewart's Park. The walking group was set-up in October 2019, and therefore numbers were relatively low at present. Upon learning from the Chair that a walking group had also recently been established at Middlesbrough Sports Village, the Chief Executive of Age UK highlighted the potential of linking up the groups. Reference was made to other existing walking groups within Middlesbrough, which would also provide further opportunity for link-ups. Having recognised the importance of exercise in older age, it was highlighted that the aim was about ensuring that all abilities were able to participate and that people with dementia and their carers were encouraged to attend.

In response to an enquiry regarding suggestions for future activities and localities, the Panel was advised that Age UK Teesside would be happy to take suggestions, provided that there was a) a demand for it, and b) the capacity to deliver it. A Member advised that contact would be made in respect of Hemlington Community Hub. The Head of Strategic Commissioning and Procurement highlighted that, from the perspective of Adult Social Care, because physical activities kept people fit and well and were therefore seen as a prevention measure, if there was a demand for specific activities, they would certainly be considered.

The Chair thanked the representatives for their contributions to the meeting; the representatives left the meeting at this point.

A discussion ensued with regards to intergenerational activities. Reference was made to Grandparents Plus, a national charity that had recently expanded operations further in Middlesbrough following a successful submission to Sport England's Families Fund. Funding for two part-time workers (one for Middlesbrough and one for Redcar and Cleveland; both based at The Live Well Centre) for a three-year term had been attained. The organisation was now actively signposting opportunities, including intergenerational activities. Reference was made to an investigation undertaken by the previous Children and Learning Scrutiny Panel in respect of Family and Friends Care (Kinship Care). A Member commented on the work being undertaken on a voluntary basis within Thorntree to support kinship carers and their families in accessing physical activities. Mention was made of a television documentary that had examined intergenerational activity between school children and care home residents, and the positive impact that this had achieved. It was indicated that the Public Health team could facilitate further contact between primary schools and care homes if required.

## NOTED

## DATE OF NEXT MEETING - WEDNESDAY, 18 DECEMBER 2019

The next meeting of the Adult Social Care and Services Scrutiny Panel had been scheduled for Wednesday, 18 December 2019.

## NOTED

## ANY OTHER URGENT ITEMS WHICH, IN THE OPINION OF THE CHAIR, MAY BE CONSIDERED.

#### Appointment of Vice-Chair

Following the long-term absence of the Vice-Chair, the Panel discussed the possibility of appointing a replacement.

It was suggested that an interim Vice-Chair be appointed, with the intention that this be made permanent should the existing Vice-Chair not return to the role.

It was agreed that this matter be placed on the agenda for the next meeting.

**AGREED** that the appointment of interim Vice-Chair be placed on the agenda for the 18 December 2019 meeting.