

## APPENDIX 1

### SOCIAL CARE AND ADULT SERVICES SCRUTINY PANEL

A meeting of the Social Care and Adult Services Scrutiny Panel was held on 17 October 2016.

**PRESENT:** Councillors McGee (Chair), Branson, Coupe, Goodchild, Higgins and J Walker.

**OFFICERS:** C Holt, C Lunn and M Sharman.

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

#### SAFEGUARDING VULNERABLE ADULTS - AN INTRODUCTION

By way of introduction, the Chair advised that in light of the recent changes to the administration of Scrutiny Panels, introductory reports by Democratic Services Officers were no longer provided.

C Holt, Head of Specialist and Lifelong Services, and M Sharman, Safeguarding Adults Team Manager, presented a report, the purpose of which was to provide Members with an introduction and overview of the work undertaken in respect of Safeguarding Adults in Middlesbrough. As a preliminary, it was indicated to the Panel that the report was presented from the operational management perspective of Adult Safeguarding work.

It was explained to Members that Safeguarding was a general term; now more widely known as Safeguarding Adults. It was considered to be a broad term that had incorporated a wide range of services and interventions, which were linked into the personalisation, prevention and protection agendas.

Reference was made to the Care Act 2014 and the changes that had taken place since enactment, with Safeguarding becoming a statutory function. The Act reinforced the fact that services needed to be personalised and preventative in order to ensure the principle of wellbeing. Examples of personalisation included people directing and choosing their own care and identifying what outcomes they desired. Prevention included the safe commissioning of services and quality assurance of service provision. It could have also included family support, signposting to relevant services, and care management of people who received a service. The example of Social Worker assessment and completion of timely reviews of care packages in order to prevent any deterioration in condition was provided to Members.

It was highlighted that, essentially, personalised and preventative day-to-day activity should have been undertaken as part of everyday health and social care work in order to help avoid the Safeguarding Adults protection process from arising.

It was explained to Members that the protection agenda often arose when the personalisation or the prevention agenda had not worked, or that the adult was unable to protect themselves from harm or abuse. Following the inception of the Care Act 2014, Local Authorities, in such instances, should have been able to carry out timely enquiries, otherwise known as investigations.

Members were informed that initial enquiries should have been triaged at an early stage if it became evident that the matter was not of Safeguarding concern; alternative provisions could then have been established in order to support that vulnerable adult. Alternatively, if the matter did meet the criteria of Safeguarding, then a Section 42 enquiry would be generated. A duty was placed on Local Authorities to cause enquiries if:-

- a) The adult at risk had needs for care and support (whether or not the authority was meeting any of those needs);
- b) Was experiencing, or was at risk of, abuse or neglect; and
- c) As a result of those needs, was unable to protect himself or herself against the abuse or neglect, or the risk of it.

Members heard that initial enquiries may have led to either further intervention or further signposting and support. If enquiries did progress to further intervention, it was likely that Safeguarding protection policies

and procedures would be utilised/initiated, which would include the undertaking of strategy meetings and case conferences. These multi-agency meetings should have involved representation from organisations such as the NHS, commissioning bodies and the Police, as appropriate.

Reference was made to mental capacity and the importance of ensuring that vulnerable adults demonstrating this were actively involved in the enquiry process at point of receipt of concern. It was indicated that it was important to be mindful of their wishes; if they did not wish to take support or guidance on how to be protected, or to press any charges, then this could have resulted in situations whereby only recommendations could be made. In terms of assessing mental capacity, it was felt that all health and social care workers should have been able to carry out assessments, for example - to determine the capabilities of an individual in deciding what to eat, managing personal finance, etc. Assessments should have been carried out as part of the care management process.

Members' attention was drawn to page 8 of the submitted report and instances which, under Section 14.9 of the Care Act 2014, would not have been suitable for Safeguarding procedures. In essence, these matters referred back to the preventative agenda. These were conveyed to the Panel as follows:

- Providers' responsibilities to provide safe and high-quality care and support;
- Commissioners regularly assuring themselves of the safety and effectiveness of commissioned services;
- The Care Quality Commission (CQC) ensuring that regulated providers complied with the fundamental standards of care, or by taking enforcement action; and
- The core duties of Police to prevent and detect crime and protect life and property.

In response to an enquiry regarding providers' responsibilities, it was explained to Members that if an individual entered residential care or was in receipt of home care, that person should have been afforded the service of what they or the Local Authority were paying for - receipt of meals and medication in a timely fashion, for example.

It was clarified that providers had a responsibility for raising a Safeguarding concern, but not for initiating an enquiry; the Local Authority held responsibility for triggering an enquiry. For example, if a number of medication errors were taking place in a short space of time from a particular care home, a decision would be made that if Safeguarding procedures were met, officers in Contracts and Commissioning, or from associated health establishments such as Pharmacies, would be asked to investigate. It was explained that the Local Authority did not undertake all enquiries, but may cause others to do so, for example - the police would conduct a criminal-based investigation. It was indicated that action would be initiated as soon as concerns were raised; providers had a clear responsibility to provide a safe service and the Care Act 2014 emphasised that.

A Member commented on the origins of Safeguarding concerns, for example - medication errors within care homes, and queried how assurance to the safety of individuals receiving care was being achieved, particularly as reliance upon staff working within independent care homes (to raise alerts) was being made.

In response, it was acknowledged that it was difficult for individuals who were not able to act for themselves. There were processes in place and there was a contractual obligation that any Safeguarding concerns be referred. Mention was also made of inspections undertaken by the CQC.

Reference was made to a care home within Middlesbrough that had been subjected to the serious concerns protocol. It was indicated that improvement works were continuing. Work had been undertaken in partnership with the CQC; regular communication between the Contracts and Commissioning department and the care home was taking place, and progress continued to be made. The Chair made reference to the potential Terms of Reference for this Scrutiny investigation, which would be considered later in the meeting. One gave consideration to activity within Middlesbrough, which could take into account any local examples that Members had.

A short discussion ensued in respect of the referrals processed for homeless individuals that required care. Reference was made to the Social Care Access Point and parts of the Community Safety Partnership that could have potentially offered support in these circumstances. Mention was made of the Community Safety Team and the work undertaken.

A Member commented that the Council could potentially have had increased contact with care providers in instances where authority-funded care was being made.

A query was raised regarding concerns within care homes, in particular to residency status, care home operation and assurances given to residents. In response, it was indicated that the determinant of any action taken would be the complexity of the issues being experienced within the home; admission would be suspended if there were real concerns. As part of the process, appropriate partners and organisations would collaborate to prepare an action plan in order to achieve the improvements needed. There would be an expectation on the provider to complete the improvements before taking any suspension action.

Reference was made to the authority's Care Home booklet and associated star ratings. It was felt that this was a very useful resource. Mention was made of a previous Scrutiny Panel investigation and it was commented that CQC attendance at a meeting as part of that review may have been beneficial.

A discussion ensued with regards to the closure of care homes. It was indicated to Members that the Local Authority could not close a care home as they were independent businesses, but it could have stopped commissioning a care home. It was highlighted that there was a difference between stopping the commissioning of a service and stopping admissions into a service. Admissions could have been stopped and re-implemented on a phased basis once service improvements had been achieved, which was felt to be both beneficial to both the Local Authority and the provider: the Council could assess the provider's performance and the provider, through the establishment of an open and transparent relationship with the Council, could assess their own performance. It was felt that the systems that had been implemented over the past few years had improved the performance of the authority in dealing with such matters; previously a block would have been placed on a care home and no further action taken.

In response to an enquiry regarding private care homes, it was indicated that the CQC inspected care homes as all facilities were regulated. A Member referenced a planning application that had recently been granted in respect of an extra care housing and care home facility in the Stainton area.

In response to an enquiry regarding private-paying residents of care homes experiencing Safeguarding concerns, it was indicated that the authority would act in exactly the same way as dealing with authority-funded residents who may have had concerns. Reference was made to the Care Act and the authority's stance in having involvement in all cases.

Regarding the core duties of the Police, it was indicated to the Panel that these were very specific. The authority worked very closely with Cleveland Police's Protecting Vulnerable People's Unit; they had interest in cases where agencies/authorities had custody care or control of individuals - residents in care homes, for example. Cases taking place on the street would be referred to the district police for action.

Members heard that, in response to the Care Act 2014, the Department of Social Care had recruited a small team of Safeguarding Adults officers to carry out enquiries and chair Safeguarding Adult Protection meetings; all of the authority's Social Workers would be expected to undertake enquiries.

Reference was made to the table on page 8 of the submitted report, which illustrated the number of Safeguarding concerns that were referred to the department, and then subsequently referred to Safeguarding Adults procedures. In response to an enquiry, Members were informed that the jump in the number of concerns being raised in 2011/2012 (832 concerns) to 2012/2013 (1083 concerns) were as a result of awareness raising campaign work. It was indicated that the figures had reached a plateau over the last couple of years. Reference was made to a previous Scrutiny review and concerns being raised by Members at that time that not enough people were reporting concerns, but then this had increased in light of this campaign work, which had been very positive. The importance of raising concerns and having the opportunity to investigate these properly was highlighted to the Panel.

It was highlighted that currently, on average, there was currently a 32% conversion rate of received concerns that progressed on into policies and procedures; approximately 68% of concerns were being signposted elsewhere. It was important to ensure effective and efficient intervention at the early information-gathering stages in order to avoid delays and inconvenience, and to ensure that the wellbeing principle was upheld. This work needed to be undertaken with the Middlesbrough Adult Access team as per other Local Authorities in the area that followed the Teeswide Safeguarding Adults Board Policy and Procedures.

A Member commented that in order for effective and efficient practice to take place, it was imperative that communication channels between the different service areas of the Council were fully opened. Reference was made to partnership working, with mention being made of the Middlesbrough Independent Living Centre on Corporation Road, which had undertaken some excellent work in respect of service provision. It was indicated that the challenge for the Council was to ensure that all residents were aware of the appropriate information sources, key contacts and services available.

Reference was made to Appendices 1 and 2 of the submitted report, which detailed the activity of the Safeguarding Adults Team for July and August 2016. It was explained to the Panel that there had been approximately 118 concerns made in August 2016, which was an increase on the number of concerns received in June (70) and July (92). Ongoing work was taking place for cases subjected to Safeguarding procedures, which included review meetings, protection plans and risk assessments.

It was highlighted to Members that work had been undertaken with other Local Authorities, which had involved looking at their processes and systems. It was felt that Middlesbrough Council was quite unique in comparison to its Tees partners, as there were two large hospitals in the area that were increasingly becoming regional centres - James Cook University Hospital and Roseberry Park. It was considered important that this be borne in mind from a demand on services point of view.

Members were advised that there was a requirement under Section 43 of the Care Act that each Local Authority establish a Safeguarding Adults Board. Middlesbrough was a Member of the Teeswide Safeguarding Adults Board, alongside Stockton Borough Council, Hartlepool Borough Council and Redcar and Cleveland Borough Council. An associated business unit had been established, which worked to consider policy, procedure and direction of travel. Five Sub-Groups derived from that business unit, all of which worked in conjunction with the Board. These were:

- Community and Engagement Sub-Group;
- Policy and Procedures Sub-Group;
- Performance and Quality Sub-Group;
- Serious Adult Review Sub-Group; and
- Workforce and Development Sub-Group.

In response to a Member enquiry, it was explained that Membership at Board level tended to consist of professionals at Director or Assistant Director level, co-opted from other Local Authorities and organisations such as the health authorities and Police. In terms of political Membership, it was indicated that Middlesbrough Council's Executive Member for Adult Health and Social Care sat on the Board. The Board was Chaired by an independent person.

It was explained to Members that there was a dual-side to Safeguarding: one operational-based and the other strategic-based; it was felt important to be mindful about how best to engage with these elements.

The Panel gave consideration to governance arrangements and how best to ensure that what emulated from the Board linked into the operational side of Safeguarding - the externalisation and communication of any policies, for example. A Member commented that the involvement of laypersons was important in gaining a wider perspective. A short discussion ensued in respect of the role of Scrutiny in this regard; Members also considered the Scrutiny process involved in conveying the outcomes of this review to the Teeswide Safeguarding Adults Board. The Panel felt it important to gather feedback as the review progressed through the system. Consideration was given to monitoring this process and keeping abreast of developments/feedback.

A discussion ensued with regards to Members reporting constituents' Social Care-related concerns to the relevant department(s) within the Council, and the current processes in place for facilitating this. It was indicated that, depending upon the issues being raised, the Adult Safeguarding Team may or may not have been involved. Consideration was given as to how matters could be progressed for care home residents, or for those in sheltered accommodation. Reference was made to accessibility issues and a dropped-kerb programme that had previously been undertaken.

Members heard that the Association of Directors of Adult Social Services (ADASS) was signed up to the North East Regional Safeguarding Adults Network, whereby Local Authorities could meet on a quarterly-

basis to share practice and develop guidance, and link to national agendas and drivers. Reference was made to a radio campaign around the issue of Safeguarding Adults, which had been funded through ADASS and undertaken in the North East region.

A query was raised in respect of page 23 of the appendices and the issue of open Safeguarding referrals. In response, it was explained to the Panel that open cases dated from 12.05.2014, potentially due to a combination of issues. A small number of the active cases were open from a criminal perspective and, from a technical point of view, issues had been experienced. However, following system upgrades, a review would be taking place to determine the current status of the cases. It was indicated to Members that the list included all matters within the authority's remit, including any private care home concerns.

A Member sought clarification on the location of Middlesbrough Grange care home, which was noted on page 5 of Appendix 2. The Head of Specialist and Lifelong Services would clarify this.

A short discussion ensued regarding the care home brochure. It was indicated to the Panel that hard copies were circulated to all Councillors on an annual basis. As the publication had last been circulated prior to Councillor Branson being Elected, a request was made for a copy to be forwarded.

A query was raised in respect of the acronym MDT show on page 1 of Appendix 1; in response it was indicated that this referred to Multi-disciplinary Team.

The potential Terms of Reference for this Scrutiny investigation were tabled for Members' consideration. These were as follows:

1. To identify the various types and indicators of abuse within Adult Safeguarding.
2. To receive details pertaining to Adult Safeguarding activity in Middlesbrough.
3. To examine the Local Authority's role and responsibilities in respect of Adult Safeguarding.
4. To clarify the purpose and remit of the Teeswide Safeguarding Adults Board.
5. To determine the policies, practices and procedures that aim to increase public awareness and improve outcomes for people experiencing abuse and neglect.
6. To identify the measures and strategies that could be implemented to further enhance/develop Adult Safeguarding practices.

Members agreed that terms 1, 4, 5 and 6 were suitable and did not require any amendments.

Regarding term 2, in light of the discussions that had taken place concerning training matters, Members requested that a slight addition be made to incorporate reference to staff training requirements. Amendment to be made as follows:

**"2. To receive details pertaining to Adult Safeguarding activity in Middlesbrough, including requirements for staff training."**

During discussion, Members felt that the Terms of Reference had covered all bases for the Scrutiny review.

The Safeguarding Adults Team Manager indicated that the Teeswide Safeguarding Adults Board produced an annual report and business plan, which would have provided information on work being undertaken by the other partner authorities. The Panel felt that this would be useful for comparative purposes.

With regards to collaborative working, Members were advised that officers from Corporate Performance had recently started to undertake work with the Performance and Quality Sub-Group of the Teeswide Safeguarding Adults Board, which may prove useful for the Scrutiny review.

Reference was made to a piece of work that Internal Audit would be commencing in November 2016, which would be looking at the Safeguarding processes. The Panel felt that this would prove timely to its review.

Members felt that staffing was an important area to look at as part of the review, particularly in terms of retention once fully trained - how the Council retained Social Workers, for example. It was acknowledged

that this issue would need to be considered within the Adult Safeguarding remit. Members discussed other issues such as pay, working patterns and rapid turnover in respect of care home staff.

A discussion ensued with regards to staff conduct within care homes, and the importance of giving individuals the confidence to report any concerns. Members heard that, as part of the contractual agreement, each organisation was expected to have a whistleblowing policy in place. The Panel felt that it was important to understand the commissioning process as part of this review topic. Following discussion, Members agreed that term 3 of the proposed Terms of Reference be amended to reflect this; to read as follows:

**"3. To examine the Local Authority's role and responsibilities in respect of adult safeguarding, including contracts and commissioning processes."**

Members requested that the amended Terms of Reference be circulated via e-mail.

The Panel considered the potential for site visits in respect of this topic, and the appropriateness of undertaking these. It was acknowledged that a lot of emphasis had been placed on care homes, which was imperative, but it was equally important to retain an awareness of the large percentage of people within their own homes who were also receiving care, and Safeguarding that population as well.

A Member made reference to Task and Finish Group work that had been undertaken in relation to a previous Scrutiny review; it was felt that this had been particularly useful to that investigation. It was indicated that a Task and Finish Group could potentially carry out a site visit, which may not appear as intrusive to care home staff and residents. It was felt that it would be useful for Members to reflect individually on the notion of potential site visits with the aim of discussing this further at a later date.

Mention was made of the changes to the Scrutiny review process and it was felt that, in light of this, Task and Finish Group activity could potentially add further quality to this review. Members acknowledged that there would be an increased responsibility for independent work, such as research and report work.

In terms of commissioning, Members considered the guidance around contracts of employment. The Council was a living wage employer and the Panel queried whether there would be any discussion with providers around this. It was felt that it would be useful to follow this up at a later date under Term of Reference 3.

A Member queried the registration of care workers, particularly in relation to dismissal from employment. In response, reference was made to the Disclosure and Barring Service (DBS); care homes had a duty to inform the organisation if they had dismissed a member of staff. It was indicated to the Panel that DBS was an independent organisation, based in Darlington but which operated nationally. When dismissed from a care home, a hearing process would be undertaken to determine whether or not that person should be listed on a register, which would effectively prevent them from applying for further work in the sector. Employers were able to access that register. A Member commented that, unfortunately, DBS checks could not be enforced, and therefore if a person employed a friend or relative to care for them, it was difficult to control in those circumstances.

A discussion ensued with regards to the commissioning and sub-contracting of services, particularly in relation to staffing issues, the Health and Safety at Work Act, and the Council's duty of care. The Panel agreed that Contracts and Commissioning was an area that it would like to investigate further as part of this review. It was acknowledged that this was a large topic area, and would therefore need to be made manageable as part of the Safeguarding Vulnerable Adults remit.

A Member commented that Social Care was potentially one of the highest spending areas of any Council in the country. The Panel briefly discussed funding pressures and the current services available, including those such as Rapid Response.

A short discussion ensued regarding the previous Scrutiny review of Safeguarding Adults in Residential Care. The Safeguarding Adults Team Manager indicated that there was a Quality Assurance Framework made available as part of that review, which may crossover well into this current one. A Member indicated that relevant agendas and reports were available on E-Genda, the Council's Committee Management system.

The Chair thanked the Head of Specialist and Lifelong Services and the Safeguarding Adults Team Manager for their attendance and contributions to the meeting.

**AGREED** that:

1. The Head of Specialist and Lifelong Services would clarify the location of Middlesbrough Grange care home.
2. The Democratic Services Support Officer would forward a copy of the care home brochure to Councillor Branson.
3. The Democratic Services Support Officer would revise the Terms of Reference, as detailed in the preamble, and circulate them via e-mail to Members.
4. The information, as provided, be noted.

## APPENDIX 2

### SOCIAL CARE AND ADULT SERVICES SCRUTINY PANEL

A meeting of the Social Care and Adult Services Scrutiny Panel was held on 16 November 2016.

**PRESENT:** Councillors McGee (Chair), Branson, Coupe and Higgins and Walters.

**OFFICERS:** L Grabham, C Lunn and G Parker.

**APOLOGIES FOR ABSENCE:** Councillors Dryden, Goodchild, P Purvis and J Walker.

### MINUTES - SOCIAL CARE AND ADULT SERVICES SCRUTINY PANEL - 17 OCTOBER 2016

The Minutes of the Social Care and Adult Services Scrutiny Panel meeting held on 17 October 2016 were submitted and approved as a correct record.

As per the agreed actions set out in those minutes, the Head of Specialist and Lifelong Services had clarified the location of Middlesbrough Grange Care Home; the Democratic Services Support Officer informed Members that this was located on Fosdyke Green on the Netherfields Estate.

The Democratic Services Support Officer had forwarded a copy of the care home brochure to Councillor Branson as requested; copies were also made available at the meeting for further distribution, if required.

The Democratic Services Support Officer had revised the Terms of Reference for the Panel's investigation and circulated them to Members via e-mail, as agreed.

### NOTED

### SAFEGUARDING VULNERABLE ADULTS - CONTRACT MONITORING PROCESS

L Grabham, Head of Commissioning and Strategic Procurement, and G Parker, Contracts Team Leader, presented a report, the purpose of which was to provide the Panel with an introduction and overview to the work undertaken by the Contracts and Commissioning Team, in support of Safeguarding Adults in Middlesbrough.

It was explained to Members that the Council had a small Contracts and Commissioning team that was located within the corporate unit. Activities were focused primarily upon Adult Social Care and Children's Social Care, which linked to the Safeguarding Agenda; proactive contract monitoring work was undertaken as part of this work.

Members heard that due to the volume of contracts in place, the team had adopted a risk-based approach, which was primarily based on cost and volume. Members' attention was drawn to Appendix A of the submitted report, which detailed this information. It was explained that, in instances of high cost and high volume of people, increased focus was given towards these contracts; however, all contracts were regularly reviewed/monitored, with various methods undertaken to achieve this. For example: Site visits/inspections, which may have included such activity as detailed perusal of individual care plans and observation of individuals administering medication; Desk top reviews based on self-assessment; Business meetings with providers; Questionnaires completed by staff, service recipients and representatives; Contract value analysis and benchmarking; and Safeguarding compliance visits.

With regards to the questionnaires, it was highlighted that the team always aimed to capture service user views in order to capture their thoughts and feelings on how they were being treated. It was highlighted that ensuring dignity and ascertaining how individuals felt about service provision was of paramount importance to the team.

In response to a Member enquiry regarding service providers and obtaining their opinions, it was explained that, as part of the contract monitoring process, staff would be asked about such matters as how they felt they were treated as employees, and the policies and procedures that were in place. They would not be asked for their opinions on service delivery.

It was explained that at the end of any site visit or review process, the Contract Monitoring Officer(s) would meet with representatives of the service provider (e.g. the care home manager) to provide timely verbal feedback, which would then be followed-up in writing. The purpose of this was to allow the service provider time to undertake appropriate action, should any urgent matters be uncovered. It was indicated that, in order to ensure a balanced approach, positive feedback would also be provided. In terms of addressing any gapped areas, service providers would be asked to put forward a remedial action plan, with stipulated timescales. Follow-up inspections would then be undertaken to ensure that this work had been completed.

A Member queried what levels of concern the team would respond to, and how quickly this would be achieved. In response, it was explained that this would be dependent upon the nature and seriousness of the concern. In terms of Safeguarding for example, enquiries were reported to the Access team for initial assessment. If at this time the enquiry was felt to be more of a contractual issue and did not require progression towards formal Safeguarding processes, the matter would be referred to the Contracts and Commissioning team for action. However, if the enquiry progressed into a section 42, i.e. formal Safeguarding procedures, and it referred to a commissioned service, a member of the Contracts and Commissioning team would always attend Safeguarding meetings and, invariably, a member of the Commissioning team would undertake the investigation (as they would have knowledge of the providers and their activities). Findings would be subsequently reported back to the Safeguarding meetings.

With regards to whistleblowing reports – i.e. staff or family members raising concerns over inappropriate action witnessed within a service area – the Panel was advised that caution needed to be exercised in these circumstances as, occasionally, it could have been the result of an issue between the employer and the employee. Nevertheless, all reports were assessed and never ignored. If the concern was considered urgent, action could be taken the same day; it was indicated that a two-hour response time was achieved in respect of a recent Safeguarding concern that had arisen from a care home.

A discussion ensued in respect of financial matters and payments to home care staff. A Member queried time allocation for appointments and whether staff received payments for travel time. In response, the Panel was advised that, across the sector, some contracts specified a travel time, whereas others included it within an hourly rate. In terms of the Local Authority's contracts with home care providers, a standard hourly rate was in place, within which there was an element of time for travel between services, which would then have covered that provider's payments to its staff. It was acknowledged that, although the hourly rate had increased to reflect the Living Wage, Middlesbrough's payments were one of the lowest. It was indicated that all of the home care contracts were up for renewal next year; consideration was currently being given as to how home care could be undertaken differently.

A Member felt that both staff payments and the time allocated to home care appointments required addressing, indicating that additional financial resource was needed in order to make care workers feel more valued. In response, it was indicated to the Panel that additional financial resource had been secured and factored into the Council's medium term financial plan, which would result in significant increases next year. It was expressed that one of the issues being faced at the moment revolved around a lack of carers, both locally and regionally. A discussion ensued around this. It was felt that the culture around caring needed to be changed; work needed to be undertaken in order to present caring as a vocation and a profession to be proud of.

In order to aid the Panel in its investigation, a Member queried if there was any comparative data available in respect of the different levels of pay for care workers across the country. The Head of Commissioning and Strategic Procurement would research this and update the Panel as appropriate.

A discussion ensued with regards to the system for contract monitoring. A Member raised concerns that, in respect of contracts that were lower than £10,000 in value, service reviews were not routinely carried-out. From a risk assessment perspective, it was felt that monitoring a small random sample would assist in detecting any issues that may have arisen from smaller providers. Concerns were also raised regarding the potential for one single person or organisation holding a number of contracts under the value of £10,000, unless there was a condition built into the contractual process to deter this. It was felt that if this occurred, there would be no way of monitoring whether one provider was causing multiple issues, as they would all fall under the Band D contract value.

In response to these comments, the Panel was informed that service providers would, as part of the contract, be expected to forward information to the Contract Monitoring Officers on a routine basis, which

would provide indication as to how the service was performing. The returns would be analysed and if the service was not performing to the required standard, then appropriate action would be taken. This activity was based upon a self-assessment methodology, which was reflective of the resources available.

Reference was made to page 6 of the submitted report. It was highlighted that, in addition to the monitoring work undertaken by the Contract Monitoring Officers for Band D contracts, contract value analysis and benchmarking against similar services was also completed by the Lead Commissioner in relation to future procurement options of the contract. The Lead Commissioner may therefore have made provisions to hold meetings with providers, as required, e.g. quarterly, annually or six monthly. The duties involved in the roles of Contract Monitoring Officers and Commissioners were briefly outlined to the Panel.

With regards to one single person or organisation holding a number of contracts, Members were informed that this had not occurred within Social Care, and would have been unlikely to occur. In addition, the contracts were quite sizeable and therefore the number below £10,000 was minimal. In light of this, it was felt that, potentially, it would not be too time consuming to undertake a random sample of inspections, though this would depend upon the exact value and nature of the contract. For example: a small contract involving care workers delivering care to individuals in their own homes across multiple locations would be a different type of inspection to reviewing files all in one vicinity, e.g. a care home. Timing would depend upon the nature of the services, as would the (un)announced status of it. Reference was made to independent supported living; it was not possible for Monitoring Officers to arrive for inspections unannounced, as they did not hold the right of entry on private tenancies.

A query was raised in respect of the expertise of the officers involved in undertaking inspections. In response, Members were advised that this differed between Council officers – some had had previous knowledge of Social Care whereas others had been fully trained in order to undertake the work involved. With regards to medical administration and the observation of this, it was explained to the Panel that officers had received training from Clinical Commissioning Groups, which allowed for completion of this element of the inspection toolkit. It was highlighted that, where there was a gap in skillset, or if there was a more appropriate body to undertake a particular aspect of the toolkit, work would be undertaken to address this (whether through the completion of further training, or the distribution of the work to others).

A discussion ensued in respect of private care homes. Members were advised that, from a Safeguarding perspective, the Council had a responsibility to safeguard all residents. If the establishment was private and a contract was not in place with the Local Authority, routine contract monitoring inspections would not be undertaken; however, if a Safeguarding concern was raised, it would be investigated. Reference was made to the role of the Care Quality Commission (CQC) in respect of care home inspections, and the role of the Local Authority in investigating any raised concerns.

A Member made reference to a private care home that was currently being built in Stainton Ward. It was agreed that once the works had been completed, the Head of Commissioning and Procurement would provide an update as to whether a contract between the Council and the care home had been established.

A discussion ensued with regards to the CQC as care home regulators. In response to an enquiry regarding the CQC's relationship, as a Government department, with the Local Authority, it was acknowledged that information-sharing could be improved. Reference was made to Belle Vue Care Home in Longlands and Beechwood Ward in this regard, particularly in light of the recent press coverage that had been observed in relation to this home. Outline details pertaining to the timeframe involved in the formulation and publication of CQC reports were provided to the Panel; concerns were raised that if any delays occurred, it could have taken some time for serious matters to be addressed. It was indicated to Members that, in respect of the recent media coverage, the reports had contained largely historical information.

Members agreed that in order to help address this issue, correspondence would be forwarded, on behalf of the Panel, to appropriate representatives of the CQC. This matter would be pursued accordingly.

A discussion ensued with regards to Belle Vue Care Home, particularly in relation to the events that had occurred, the responsive work that had been undertaken and its current status. A chronology of the events that had taken place was provided to the Panel.

It was highlighted to Members that the concerns arising from Belle Vue were not associated directly with

the standard of care being provided, but were based more on the lack of recording information. Reference was made to the training that had been undertaken with staff in respect of this matter; although this continued to pose an issue (during staff handovers for example). The Panel considered the possible reasons for this, which may have related to literacy levels, language barriers and problems with recording equipment. A further comment was made in respect of management change, of which there had been several instances in a short space of time.

In response to a comment from a Member, it was indicated that there was more staff on duty in the home than may have perhaps been expected. Reference was made to a management plan that had been produced and the subsequent implementation of a designated nursing unit that had been achieved in the initiation of that plan.

It was the opinion of the officers in attendance that the Council had supported the home as fully as possible in rectifying the concerns raised; activities had included the completion of inspections, business meetings with the operators, and meetings with residents' families, which had been highly welcomed and appreciated. It was acknowledged that the providers had been fully cooperative with the Authority; however, Members were advised that work was continuing. A decision regarding the Council's contract with the home would be undertaken, in collaboration with the CQC, in the near future.

In response to a request from a Member, the Head of Commissioning and Strategic Procurement agreed to provide the Panel with updates as the situation progressed. In addition, although discussed at today's meeting, it was also agreed that the Panel would be provided with a formalised report offering full appraisal of the Belle Vue Care Home situation.

A Member queried whether it would be possible for summaries of CQC reports, pertaining to care homes and problems identified within the Middlesbrough area, to be forwarded to the Panel for information. In response, the Chair advised that the Executive Member for Adult Health and Social Care may have received such reports in capacity of that role; the Chair would discuss this matter with the Executive Member. The Contracts Team Leader advised the Committee that, dependent upon the outcome of previous inspection reports, some care homes may not have received a visit from the CQC within two years, and therefore a significant amount of the information may have been historical (if management or essential change had taken place within that period, for example).

A discussion ensued regarding staff payments. In response to a Member enquiry, it was explained that some care home staff did not get paid for handover time; some carers may have been expected to arrive early for their handover, but not receive payment for it. It was indicated that some care homes had started to adjust their rotas in order to ensure that staff were paid for handover periods.

The Panel was informed that, in respect of care homes, the authority was not the lowest payer; comparing well to other Local Authorities. It was explained to Members that the authority would not be informed of the amounts of money that the care providers paid their staff; a bed per week rate was payable by the authority, part of which would be utilised by the provider for their overheads. Reference was made to the quality grading system employed by the authority; it was felt that this indicated that the number of homes quality graded at a grade 5 illustrated that excellent care could be delivered for the rate at which the authority was currently paying.

A Member queried whether or not the authority could make any demands on what commissioned services paid their staff. In response, it was indicated that whilst there was a contractual obligation for all providers to pay the national Living Wage, there was no expectation on them to adopt the Council's principle of being a national Living Wage Foundation employer.

Members were advised that, in respect of payment of the Basic Living Wage (as this is what the Council expected contracted providers to pay), it would cost the Council £800,000 to fund this. This figure referred to 2016/2017 only, was applicable only to the residential care market of Social Care, and would increase year-upon-year.

A discussion ensued with regards to the hourly rate that contractors paid their staff. It was felt that although not the fault of the Council in instances where handover periods were not paid, there was a responsibility to ensure that contractors treated their staff fairly. The Panel was advised that, although the authority could not stipulate to a provider how much this hourly rate ought to have been, other than they must have

paid staff the Basic Living Wage, there were other opportunities available to the Council in supporting those employees. Reference was made to the residential care quality grading tool that the Council had in place; it was explained that the higher the quality of service that contractors provided, the potential for an additional £10.00 payment per bed to be attained. It was indicated that improved staff treatment or service to residents could have accrued higher marks for providers during the assessment process, which would have had a positive impact.

The Panel considered legality and the potential scenario of a serious incident taking place involving a member of staff who was not being paid, during a handover period, for example. A Member made reference to Social Action, Responsibility and Heroism (SARAH) legislation, which had been introduced to encourage individuals to provide assistance in emergency situations without the fear of facing legal action if a negative result was attained. It was felt likely that this legislation would form the basis for defence in such a scenario. Members discussed business insurance and the application of a blanket policy to cover employees.

A Member made reference to the liability bestowed upon the Council if a contractor were to underperform and breach Health and Safety legislation.

A Member indicated that they had previously requested the opportunity to spend time with domestic carers undertaking house calls; the purpose being to ascertain the amount of time carers spent travelling between calls, and to determine how much carers were able to spend supporting clients in their home. The findings of any such activity would be reported back to the Scrutiny Panel for information/consideration. This request would be discussed in further detail with the Head of Commissioning and Strategic Procurement after the meeting to determine a way forward; the Chair requested that any updates be provided to the Panel in due course.

As a final point of note, the Head of Commissioning and Strategic Procurement made reference to a cohort of almost 900 individuals who were in receipt of direct payments. As these individuals were direct employers, the Council had no authority to monitor those situations. It was felt important that this be borne in mind when considering the topic of Safeguarding. In response to an enquiry, it was clarified that these were clients whom had taken the option of a direct payment in order to employ their own personal assistant. As it was not a contract, the authority did not have a relationship with them; this was the one aspect of Social Care that the Contracts and Commissioning Unit did not inspect.

The Chair thanked the officers for their contributions to the meeting; Members felt that the session had been very informative.

**AGREED** that:

1. The Head of Commissioning and Strategic Procurement would research the different levels of pay for care workers across the country and provide the Panel with any available comparative data.
2. With regards to a private care home facility currently being developed in Stainton and Thornton Ward, an update regarding contractual establishment with the Council would be provided by the Head of Commissioning and Procurement in due course.
3. The matter pertaining to the Local Authority's communication with the CQC would be addressed accordingly.
4. The Head of Commissioning and Strategic Procurement would provide the Panel with a formalised report, together with updates regarding Belle Vue Care Home, as required.
5. The Chair would discuss the matter regarding CQC reports being submitted to the Panel, for information, with the Executive Member for Adult Health and Social Care.
6. The information, as presented, be noted.

## APPENDIX 3

### SOCIAL CARE AND ADULT SERVICES SCRUTINY PANEL

A meeting of the Social Care and Adult Services Scrutiny Panel was held on 12 December 2016.

**PRESENT:** Councillors J McGee (Chair), Branson, Dryden, Goodchild, J Walker and Walters.

**OFFICERS:** R Beard, C Lunn and E Scollay.

**APOLOGIES FOR ABSENCE:** Councillors Coupe, Higgins and P Purvis.

### MINUTES - SOCIAL CARE AND ADULT SERVICES SCRUTINY PANEL - 16 NOVEMBER 2016

The Minutes of the Social Care and Adult Services Scrutiny Panel meeting held on 16 November 2016 were submitted and approved as a correct record.

The Chair provided the following updates, in relation to the agreed actions set out in those minutes:

- Page 6 - "The Head of Commissioning and Strategic Procurement would research the different levels of pay for care workers across the country and provide the Panel with any available comparative data." - This matter was currently on-going; the Head of Commissioning and Strategic Procurement would provide the data in due course.
- Page 6 - "The matter pertaining to the Local Authority's communication with the CQC would be addressed accordingly." - Work was currently on-going with officers in the service area. It was suggested that this matter form a recommendation of the Scrutiny investigation.
- Page 6 - "The Head of Commissioning and Strategic Procurement would provide the Panel with a formalised report, together with updates regarding Belle Vue Care Home, as required." - It was explained that the information contained in the report would be confidential. Information would be circulated via e-mail and update reports provided as necessary.
- Page 6 - "The Chair would discuss the matter regarding CQC reports being submitted to the Panel, for information, with the Executive Member for Adult Health and Social Care." - The Chair would pursue this matter.
- Page 8 - "Councillor Branson's feedback report be circulated to the Executive Member for Adult Health and Social Care, and senior managers within Social Care for information" - This had been actioned.

Reference was made to Councillor Higgins' request regarding the possibility of shadowing home care workers. In the period since the meeting, the Head of Commissioning and Strategic Procurement had advised that this would have been achievable. The Panel acknowledged that, in order to ensure that all relevant processes and procedures were carefully adhered to, any such activity would have needed to be undertaken in close consultation with the service area, with particular reference being made to gaining clients' consent.

Members briefly discussed care home visits that they had carried out within their Wards, and the positive relationships that had been developed as a consequence of this.

Councillor Branson made reference to the monitoring arrangements of 'Band D' contracts (those under £10,000 in value). The Panel was directed to page 3 of the Minutes; it was felt that a formal monitoring or evaluation process, perhaps on a random sample-basis, should have been undertaken, rather than relying upon contractors to provide information to the Council. In response, the Director of Adult Social Services indicated that the matter would be discussed with the Head of Commissioning and Strategic Procurement in terms of addressing it; the Panel would receive a response accordingly. However, Members were advised that this matter concerned adherence to a contract and was not the only check that was made in respect of safeguarding. It was explained that contracts were with registered providers and therefore primary assessment would have been undertaken by the Care Quality Commission (CQC); further assessment by the Council was undertaken in order to monitor adherence to the contract. It was acknowledged that resources had most likely been focused towards larger contracts.

A Member queried whether any contracts had been withdrawn as a consequence of a failure to deliver on agreed outcomes. The Director of Adult Social Services indicated that there had been; examples would be sought and details reported back to the Panel accordingly.

**AGREED** that:

1. The Director of Adult Social Services would discuss the matter pertaining to the monitoring of 'Band D' contracts with the Head of Commissioning and Strategic Procurement, and report back to the Panel accordingly.
2. The Director of Adult Social Services would identify instances of contracts being withdrawn as a consequence of a failure to deliver on agreed outcomes, and report back to the Panel accordingly.
3. The information, as provided, be noted.

## **SAFEGUARDING VULNERABLE ADULTS**

R Beard, the Council's Community Safety Partnership Manager, was in attendance to provide the Panel with information/discussion points regarding Community Safety, in relation to Safeguarding Vulnerable Adults.

As a preliminary point of note, it was highlighted to the Panel that if any Member of Community Safety staff had any safeguarding concerns, an immediate referral would have been made to the appropriate safeguarding team; there would not have been any delay.

It was explained to the Panel that Neighbourhood Safety Officers investigated Anti-Social Behaviour (ASB) and low-level crime. Consequently, officers may have been faced with a variety of different situations, for example: people experiencing substance misuse issues; individuals with mental health issues; and matters involving elderly persons. Such scenarios would have required staff to undertake immediate vulnerability assessments of those involved. The Neighbourhood Safety Team worked with a multitude of different agencies, which had resulted in referrals across organisations, joint visits and partnership working.

It was indicated to Members that two client groups were in existence - the first concerned individuals that could immediately be assessed and referred to the appropriate services. The second group, which the Neighbourhood Safety Team predominantly dealt with, consisted of individuals that appeared to sit on the border of safeguarding - i.e. they held capacity to make their own decisions, but often made very poor choices, which resulted in the appearance of safeguarding issues/concerns.

The Panel was informed that the Community Safety Partnership Manager chaired monthly Complex Clients Case Conference meetings, which involved representatives from various agencies meeting to discuss individual cases and tailoring the necessary support to each one. It was indicated that these individuals may have been experiencing such issues as homelessness, mental health and/or substance misuse. There were fifteen/sixteen active cases currently on the agenda. It was highlighted to Members that although, on paper, such individuals may have appeared to require safeguarding support, if that person held the capacity to make the decision that there was not a role for Social Services to support them then, unfortunately, due to legislation, this could not be forced upon them. Members acknowledged that this was a very difficult situation.

Reference was made to capacity assessments and the various locations where these could have been completed, for example: in Police custody and in prison settings. It was explained to Members that it was fundamentally important during these assessments to determine whether the individual concerned was making an informed choice about the issues involved. In respect of Community Safety, reference was made to such legislation as the Care Act and the Community Safety Act in supporting individuals; however, it was reiterated that, if it had been established that the person concerned held capacity to make their own decisions, aside from continue to work with that person and to try and persuade them to access the appropriate services and participate in support-based activity, unfortunately, further action was limited.

It was highlighted that, in respect of the complex cases, the partnership work and continuous communication involved had been excellent, and had ensured that clients had been appropriately supported. For example: if clients with substance misuse issues had been referred onto the needle

exchange programme, attendance could be monitored and the Street Wardens or Police contacted if any concerns were raised.

A Member commented on the transience of the population in relation to job security and affordability; it was felt that this would become a significant problem within Middlesbrough in the future. It was projected that young people would be forced to constantly move home because of such matters as temporary, part-time or zero-hour contract work, rent arrears, and tenancy contracts reaching an end. It was suggested that family disruption and social problems would inevitably follow. In response, it was indicated that the Community Safety Partnership Team commissioned the homelessness service. The service was currently operated by the Thirteen Housing Group, with a significant amount of prevention work being undertaken; matters such as tenancy expiration would be addressed as part of this. Work to support individuals and families in accessing suitable accommodation, with at least disruption as possible, was undertaken. Reference was made to housing and bed and breakfast accommodation that was available within Middlesbrough, provided through a combination of public and private sector entities.

Consideration was given to private sector housing in respect of zero-hour and temporary work contracts. Concerns were raised that, in these circumstances, salary payments would fluctuate and potentially result in rent arrears and termination of tenancy agreements. Members briefly discussed the welfare system, impending Universal Credit, and the potential implications for claimants and their landlords.

A discussion ensued in respect of private landlords. Information pertaining to Selective Landlord Licensing was provided to the Panel. It was explained that population transience was evident in some areas of the town, for example: North Ormesby, which was part of the reason why Selective Landlord Licensing work was currently being undertaken in that area. It was intended that a current work programme would assist in the identification of who was moving into the area, assess how quickly the turnover was, and would facilitate the regulation of Landlord Licensing. It was felt that closer regulation and working with landlords would assist in dealing with some of the problems that were being identified. It was acknowledged that there was a very high number of good private landlords in Middlesbrough that the Council had developed excellent working relationships with; however, there were still instances of single individuals residing in sub-standard accommodation, which Landlord Licensing would hopefully help to address.

It was expressed to the Panel that the individuals that the authority was working with in the safeguarding arena had, predominantly, experienced some form of prior contact with professionals, such as Community Nurses and Social Workers. This indicated that referrals often originated from facilities and care homes where Council staff already had access and were providing support. It was felt that this had facilitated further safeguarding work with these individuals. It was acknowledged that complex cases where vulnerability was high but engagement with services was low were of particular concern, and there were always active cases of this.

Details in respect of a system entitled E-CINS were conveyed to the Panel. It was explained that the system had been created by the Home Office to facilitate multi-agency working and information sharing. Consisting of a database with various categories available that could have been applied to casework, it was highlighted that notes and flags of concern could also have been inserted, which would have been visible to partner organisations.

A Member commented that, quite often, authorities were reactive in taking appropriate action. Consideration was given as to whether it would be possible to commission work in order to identify some of the emerging trends, and therefore work more strategically and proactively.

The Director of Adult Social Services informed Members that the Teeswide Safeguarding Adults Board (TSAB), which the Tees Local Authorities centrally paid into, employed a small Business Unit that undertook data analysis work. Reference was made to a Safeguarding Mapping Report that the Business Unit had recently completed. Some of the key findings of the report were outlined to the Panel, which included reference to such matters as housing, ethnicity, and areas of affluence and non-affluence. It was indicated that the Independent Chair of the TSAB would be attending the 16 January 2017 of the Social Care and Adult Services Scrutiny Panel. Members felt that it would be useful to discuss the strategic overview, and the potential for the TSAB to be a commissioning body, at this meeting.

In response to a Member enquiry regarding the utilisation of data findings, the Community Safety

Partnership Manager made reference to the work of the commissioned homelessness team. Their remit involved preventative work and it was explained that if an issue around homelessness and housing emerged that the authority had not previously been aware of, then that could potentially have assisted with future commissioning activity. The Panel felt that a recommendation for the Scrutiny investigation may have been a possibility in this regard.

Members were advised that Cleveland Fire Authority had undertaken mapping report work in order to ascertain high risk areas and focus resources upon those, which had been achieved with great success. It was felt that a similar approach could be undertaken in respect of safeguarding, with the granularity of the detail coming to the forefront and offering the sufficient operational-level data that managers required.

A Member commented that in order for data to be successfully utilised in respect of strategic and operational planning, it was imperative that operational staff were made sufficiently aware of appropriate information, and trained to respond accordingly.

In response to a Member enquiry regarding information sharing and the E-CINS system, it was explained that, at present, three organisations were involved - the Local Authority, the Police and Thirteen Group; it was anticipated that the number of organisations involved would increase in time. In respect of complex case work, it was hoped that substance misuse services, the hospital, mental health services, and third sector organisations, would all enrol in the future. It was felt that a preliminary step in expanding membership of the system would be to introduce other departments of the Local Authority to it. Reference was made to the E-CINS contract, which was due for renewal in March 2017. Mention was made of a 'Single Point of Access' for social care, community nursing, hospitals and voluntary services; it was anticipated that the E-CINS system would interconnect with this facility, although further consideration would be required.

A discussion ensued in respect of a potential age-related relationship in the future; a Member commented that as employment became more insecure, younger people in particular would experience problems. Reference was made to 'work poverty', a situation whereby individuals in work found themselves with an insufficient amount of money to live on; the example of irregular work hours as a potential cause of this was provided. It was felt that the wider system that was in place was arranged to deal with permanent employment situations and not ones that may have changed, which could have posed problems in the future. It was felt that this instability of income could potentially have an impact upon safeguarding. Members agreed that this would be a useful discussion point for the Panel's January 2017 meeting with the Chair of the TSAB.

With regards to complex cases, the Panel was informed that gaining employment was always an aspiration for clients; however, the primary needs of food, clothing and shelter would need to have been addressed first. It was highlighted to the Panel that the Community Safety Team had worked with individuals who had progressed onto further education and employment.

In response to an enquiry regarding vulnerability and safeguarding in the context of domestic violence, the Community Safety Partnership Manager advised Members that a Domestic Abuse Operational Coordinator sat within the team. Mention was made of the Tees Wide Adult Interagency Safeguarding Policy in respect of work undertaken. In addition, the following information pertaining to the Violence against Women and Girls strategy (VAWG) was provided to the Panel:

*"The Violence against Women and Girls strategy (VAWG) (March 2016) identified specialist training across health and social care professionals, and improved understanding of referral processes and pathways between specialist service providers, as being fundamental to support efforts to tackle VAWG and complement the commitment to service transformation. Therefore the Domestic Abuse Operational Coordinator was working closely with Safeguarding leads and had recently written a training specification to commission level 3 training across the whole of adult and children social care in relation to responding to domestic abuse. The training would increase understanding of the dynamics, impact, risks, procedures and specialist services available for victims, perpetrators and children affected by domestic abuse. It would equip staff with the skills and knowledge to safely ask about abuse and respond appropriately."*

Mention was made of the Council's Preventing Domestic Abuse Strategy, which had been refreshed in September 2016.

In specific reference to campaign/publicity work, Members were informed that the team had recently held a Domestic Abuse Awareness week and promoted the National White Ribbon Campaign. This involved working with a wide range of statutory and voluntary organisations, including specialist service providers, health professionals/hospitals, education establishments, the Police, and employers. The work incorporated a multitude of activities, including: school assemblies; public pledge events; seminars; football tournaments; and staff sign-up. Campaign work had been supported by the MFC Foundation and the Cleveland Police and Crime Commissioner; ambassadors had been recruited and social media utilised to encourage conversation about domestic abuse becoming 'everybody's business.'

Members heard that men were the primary target audience for this campaign work, which had focused upon raising awareness amongst people who would not necessarily have experienced it previously at any point in their lives. An action plan was currently in the process of being completed, which would evidence the scope of activity that had been taking place across Middlesbrough. It was highlighted to the Panel that the Council had recently secured a White Ribbon Town Award, which was an excellent achievement for Middlesbrough and promoted a clear message of zero tolerance to violence or abuse. This accreditation lasted for three years and the Domestic Abuse Coordinator would be reviewing and promoting this throughout the year, along with other national campaigns.

In response to a Member enquiry regarding male victims of domestic abuse within Middlesbrough, it was explained that, whilst there was not a specific service for male victims, provision would be available if a male victim did present. For example: the Council commissioned dispersal units so should a male victim have required support, then this would have been available. These units, which were also available to families with children over the age of 14, were private properties that were linked to and given the support of a refuge, but were actually based in a different location. Reference was made to two domestic abuse support services that were currently in operation within Middlesbrough - My Sister's Place and Harbour.

A Member commented that, from a Scrutiny investigation perspective, it would have been useful to consider how gaps were identified and potentially addressed. In response, the Community Safety Partnership Manager indicated that one aspect of this could have related to the promotion of policies that were currently in existence. As referral processes were already in place, it was perhaps about individuals understanding the policies, the services available, and directing people as appropriate.

The Chair thanked the Community Safety Partnership Manager for her attendance and contribution to the meeting.

The Director of Adult Social Services explained to the Panel that, in respect of the Term of Reference being considered - "To determine the policies, practices and procedures that aim to increase public awareness and improve outcomes for people experiencing abuse and neglect" - two documents from the TSAB had been circulated: the 2015/2016 Annual Report and the November 2016 Bulletin.

In response to a Member enquiry, it was indicated that the TSAB Business Unit was now into its third year, and was therefore still relatively new.

The November 2016 Bulletin provided a snapshot of the work that had been taking place and the progress that had been made; it was indicated to Members that a number of projects and activities had been taking place in order to raise awareness.

The Annual Report provided information in respect of each of the Board's Sub-groups and related to 2015/2016 engagement. Further reference was made to the Safeguarding Mapping Report, which was felt to be highly significant in terms of the issues and gaps that it had identified.

A discussion ensued in relation to social demographics, financial deprivation and safeguarding.

It was highlighted to the Panel that those who lived in one of the five most deprived Wards of the town were three-to-four times more likely to have been involved in a safeguarding process than the wider community. It was indicated that this may not have been related to an individuals' economic situation, but may have been because, within those Wards, individuals would have been more likely to engage with professionals, such as Social Workers and Community Nurses. Members heard that the vast majority of Middlesbrough's safeguarding referrals came from professionals, which positively indicated

the understanding of identifying and responding to safeguarding issues.

The Panel discussed the volume of referrals being made from residential care homes. Reference was made to page 28 of the TSAB Annual Report and Members considered the data in comparison to neighbouring Local Authorities. With regards to Middlesbrough, it was felt unclear as to what the data presented - i.e. whether there were more safeguarding alerts being made, or whether staff were being more alert. Consideration was also given to the figures in relation to the number of alerts being raised within the 'own home' category, and the potential reasoning for the low figures in comparison to other Local Authority areas. It was indicated that the statistics were based on per 10,000 head of the population; it appeared that Middlesbrough was currently average.

The referrals process was outlined to Members. Consideration was given to the statistics and the potential differences between Local Authorities in recording safeguarding matters. It was explained that, in order to improve the accuracy of data comparison, additional categories would be added to the reporting base. It was acknowledged that further work in understanding the data, to further support the delivery of adult social care, was required.

In response to a Member enquiry, it was indicated that there was a high concentration of care homes within Middlesbrough, which were used disproportionately in comparison to other Local Authorities. It was felt that the effects of this were apparent; however, these could be levelled out in order to facilitate comparison between areas.

Reference was made to the quarterly data reports, in respect of a growing range of performance indicators, which were provided to the TSAB Business Unit. These were provided in reference to reported safeguarding incidents. A short discussion ensued in respect of the success rate of reported incidents and the potential timeframes involved in resolving concerns. In terms of outcome performance indicators, it was explained to Members that these concerned the achievement of the outcome that had, as per the 'Making Safeguarding Personal' guidance, been agreed with the individual involved. Success rate and timeframes varied depending upon the individual case.

The Panel discussed Section 42 enquiries in respect of the statistics detailed in the TSAB Annual Report. Consideration was given to the parameters involved in determining whether a Section 42 enquiry would have been partially or fully substantiated, and the effectiveness of the data in line with this. Members were reassured to hear that statistical data was being used; however, it was acknowledged that further consideration needed to be given as to its effectiveness as an evaluation tool. For example: were Middlesbrough's statistics high because the Council was responding effectively to its population, or were there twice as many problems because of the lack of intervention?

With regards to the Safeguarding Mapping Report, it was explained to the Panel that resources had been devoted to the undertaking of a larger and more elongated piece of work that would have assisted the Council from a different perspective. For example: the identification of, geographically, some of the problems being experienced. It was indicated that this data could have been cross-referenced with some of the statistics that Middlesbrough Council held.

A discussion ensued in respect of supporting individuals with mental capacity who had appeared to make choices that would otherwise have placed them within the safeguarding remit. Reference was made to television programmes on the topic of hoarding, and individuals residing in eyesore and structurally damaged properties. Members discussed legislative powers in this regard, referencing such matters as public nuisance, public health and the Human Rights Act.

The Chair thanked the Director of Adult Social Services for his attendance and contribution to the meeting.

In preparation for the attendance of the Independent Chair of the TSAB at the 16 January 2017 meeting of the Panel, Members considered potential discussion topics. It was agreed that questions would be formulated and forwarded to the Independent Chair in advance of the meeting. The areas that Members agreed to consider at the meeting, in addition to learning of any information that the Independent Chair wished to present, were as follows:

- The implications for safeguarding vulnerable adults in relation to temporary/zero-hour contract work, with reference also being made to facilitated access to welfare support;
- The implications for safeguarding vulnerable adults in relation to the instability of income and the insecurity that arose from moving from place to place (e.g. family disruption, mental health issues and social problems). Members also considered future-proofing in respect of this, particularly as young people would have been faced with these concerns as time progressed;
- Regarding changes to the Council Tax levy in relation to social care payments (i.e. the introduction of the social care precept that allowed Local Authorities to charge an extra 2% on top of their Council Tax rates) - the extent to which the change in funding payments would impact upon vulnerable adults within the social care system;
- The Independent Chair's view on the role of Scrutiny Panels in supporting the work of the TSAB;
- The Safeguarding Mapping Report;
- The E-CINS system and the role of the TSAB; and
- The methods for identifying gaps, sudden and impending issues that may have impacted upon safeguarding, and the commissioning of research work around this.

With regards to the matter pertaining to the Council Tax levy, the Chair tabled a media article that had recently been published. Members discussed the contents of the article, which considered the affluence of an area in relation to the amount of money that would have been received; concerns were raised that Middlesbrough would be at an increased deficit. It was requested that the article be circulated to Members of the Panel for information.

The Chair thanked Members for their attendance and contributions.

**AGREED** that:

1. In preparation for the attendance of the Independent Chair of the TSAB at the 16 January 2017 meeting of the Panel, questions pertaining to the agreed discussion topics, as detailed in the preamble, would be formulated and forwarded to the Independent Chair in advance of the meeting.
2. The tabled media article pertaining to changes to the Council Tax levy would be circulated to Members of the Panel, for information.
3. The information, as provided, be noted.

## APPENDIX 4

### SOCIAL CARE AND ADULT SERVICES SCRUTINY PANEL

A meeting of the Social Care and Adult Services Scrutiny Panel was held on 16 January 2017.

**PRESENT:** Councillors McGee (Chair), Branson, Coupe and Dryden and Walters.

**ALSO**

**IN ATTENDANCE:** A Baxter, Independent Chair of the Teeswide Safeguarding Adults Board.

**OFFICERS:** C Lunn.

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

### MINUTES - SOCIAL CARE AND ADULT SERVICES SCRUTINY PANEL - 12 DECEMBER 2016

The Minutes of the Social Care and Adult Services Scrutiny Panel meeting held on 12 December 2016 were submitted and approved as a correct record.

The Chair indicated that, in relation to the agreed actions that were set out on page 1 of the Minutes, there were still some items outstanding that would be followed up. The Chair and Democratic Services Officer would action this, as appropriate.

In response to the agreed actions set out on page 2 of the Minutes, the following information had been provided by the Director of Adult Social Services, and was tabled for Members' perusal:

*"1. The Director of Adult Social Services would discuss the matter pertaining to the monitoring of 'Band D' contracts with the Head of Commissioning and Strategic Procurement, and report back to the Panel accordingly."*

*"ANSWER: The introduction some years ago of 'banding' for contracts was intended to allow a more proportionate focus of resources on large, complex services. While a 'Band D' contract (a contract of value less than £10,000 per year) may have fewer physical visits by Contracts Monitoring Officers each year, there is still regular scrutiny of service delivery. A schedule of information is requested from the service by the allocated Contracts Monitoring Officer on at least a quarterly basis, more regularly in some instances, and the information requested may vary from period to period depending on the focus of the Contracts Monitoring Officer at the particular time - much of it can be confirmed or checked against other sources to provide a test of assurance. The Contracts Monitoring Officer will have other, on-going contact with the service and will be aware of other 'business intelligence' relating to the service from such sources as service users; Social Workers and the Care Quality Commission and all of this will be considered as part of the regular 'desk-top review' of the contract. If any concerns emerge from any source then the level of monitoring will be reviewed and this may lead to physical visits; more regular calls for information or more interventionist involvement as required. The monitoring of these 'Band D' contracts is therefore not a passive process where Contracts Monitoring Officers wait for unscrutinised information to be provided, it is a rigorous monitoring process proportionate to the scale of the contracts."*

*"2. The Director of Adult Social Services would identify instances of contracts being withdrawn as a consequence of a failure to deliver on agreed outcomes, and report back to the Panel accordingly."*

*"ANSWER: The intention of the contracts monitoring process is to identify any shortcomings in the delivery of a contract as early as possible and to work with the provider to resolve those issues. This approach, following on from the high level of scrutiny applied at the point of contract award, is generally successful in ensuring that contracts are sustainable and service delivery is of a good quality. It is only as a last resort that a contract would be withdrawn. It is some years since a contract was withdrawn by the department but following failed attempts to resolve issues of quality a contract was withdrawn for one of our main domiciliary care providers. The domiciliary care provider was a contract of far greater value than a 'Band D' contract but exactly the same principles apply: identification of shortcomings in service delivery will lead to proportionately increased monitoring and scrutiny along*

*with attempts to resolve the delivery problems. If these efforts fail the contract will be terminated as a last resort."*

Members briefly discussed this information and felt that a good explanation had been provided.

**AGREED** that:

1. The Chair and Democratic Services Officer would follow-up the actionable items that were currently outstanding.
2. The information, as presented, be noted.

## **SAFEGUARDING VULNERABLE ADULTS**

A Baxter, the Independent Chair of the Teeswide Safeguarding Adults Board (TSAB) had been invited to the meeting in order to provide Members with information pertaining to the Board, and the work being undertaken in support of Safeguarding Vulnerable Adults in Middlesbrough. Members welcomed the Independent Chair to the meeting.

As agreed at the 12 December 2016 meeting of the Panel, questions pertaining to the topics of interest had been formulated and forwarded to the Independent Chair. Copies of these were tabled for Members' reference.

The Independent Chair introduced herself to the Panel, indicating that her position on the TSAB was to have offered independence in relation to all of the public organisations that formed a part it (and therefore offering objectivity to the chairing arrangements). With Members' agreement, it was explained that the TSAB's Annual Report would be presented, followed by the addressing of the questions that the Panel had previously raised.

Members heard that this has been a significant year for the TSAB, which remained one of the few Boards that covered more than one Local Authority. This year had seen the implementation of the Care Act, which was the statutory basis for the Board.

The Board was now into its second year of operation; it had been well established and consolidated with support being provided by a central Business Unit. Mention was made of the personnel involved in this Unit, which worked across the Board and the four Tees Local Authorities.

Reference was made to the work undertaken by the TSAB's Sub-Groups, with specific mention being made of the Performance and Quality Sub-Group that was chaired by Middlesbrough Council's Director of Adult Social Services.

It was indicated to the Panel that a number of challenges had faced the TSAB this year, particularly in respect of the wider climate affecting Local Authorities and Social Care departments. The following key challenges were highlighted: Issues around the availability of nursing homes, particularly in relation to staff recruitment and retention, which had seen some providers removing themselves from the market; An increase in Deprivation of Liberty Safeguards, which had caused pressures for Local Authority and health service colleagues; An increase in the registration of domestic abuse as a category of abuse for adults (it was highlighted that this was one of the areas that spanned both adults and children's services); and Increasing pressures around needs - reference was made to the demographic pressures within Middlesbrough and the reduction in resources available to have met those needs. It was explained that this challenge was not only being experienced within Local Authorities, but also within the TSAB's other main statutory partners, i.e. the Police and health services.

Despite the challenges being faced, it was felt that the Board had continued to work well. Feedback from the public had remained positive, with the general position being that those involved in safeguarding services had found the experience positive. It was highlighted that comments had been received that indicated that service users had felt safer as a result.

It was pointed out to the Panel that, over the last year, the TSAB had seen an increase in the number of safeguarding concerns raised with Local Authorities that had then been progressed to enquiries.

It was explained to Members that it had been a year of increased engagement for the TSAB. Reference

was made to a Tees website that had been developed, which had been receiving around 500 visits per week from both professionals and the general public. A survey involving 800 participants had also been undertaken, which had led to the development of the TSAB's Strategic Objectives. These were detailed in the Annual Report. It was highlighted that the two key priorities of this engagement work had been to raise awareness in respect of safeguarding, and to increase the routes available to people in terms of accessing support services.

It was explained to Members that there were a number of advantages of having the Teeswide structure in place, which included: More effective and efficient resource allocation/utilisation; The ability of having a broader overview of the trends in data and learning from each other, i.e. observation of what had occurred in areas and sharing knowledge and experience; A wider participation of colleagues across the Tees area had allowed the Board to undertake a consistent approach (reference was made to Tees policy and procedure documents that had been created in this regard); and Formation of a Board training strategy that had focused on the different levels of awareness and accountability within the safeguarding process (including facilitated access to e-learning portals, that were available free of charge to all staff). It was highlighted that the TSAB had actively encouraged staff in the independent care sector and the domiciliary care sector to access these facilities, as this was where a number of safeguarding referrals had originated from. In addition, multi-agency targeted training had been arranged, with the TSAB also offering bespoke training opportunities to professionals involved in safeguarding.

It was explained to the Panel that the TSAB arranged annual conferences. Last year, the focus of this had been on self neglect, which was a new category under the Care Act. It was explained to Members that this was a particularly difficult area whereby individuals held the capacity to determine their own life choices, but that decisions taken may have raised concerns amongst friends, relatives and neighbours. The TSAB had seen an increase in related areas such as hoarding; development of knowledge around this and other areas was continuously being undertaken. The focus of the conference this coming year would be on the topic of domestic abuse.

Members heard that preparations were currently underway for a development day for the TSAB, which would focus upon data analysis. It was felt that data was useful in the identification of trends, asking questions, and understanding what was occurring across Tees in comparison to the wider region and country as a whole, which would hopefully have offered opportunity for benchmarking and further analysis to have been undertaken.

It was explained to the Panel that the TSAB were focusing on increasing awareness of safeguarding and prevention practice this year, which was a key issue. It was highlighted that the Board had strived for pro-activity within its work, and had therefore worked closely with partners in raising awareness (whilst also ensuring that those accessing services were actively involved in development work).

In summary, it was conveyed to the Panel that the TSAB was performing well, particularly in light of the challenges faced, and was well attended and well-focused. The Independent Chair paused at this stage for feedback and general questions.

The Chair of the Panel thanked the TSAB Independent Chair for this information, and indicated that the TSAB's Annual Report, together with its November 2016 Bulletin, had previously been circulated for information, which had been very useful and informative.

A discussion ensued in relation to care homes in Middlesbrough. Consideration was given to the financial costs involved in the operation of care homes and whether there was a market for private facilities within Middlesbrough. It was acknowledged that there were people who had wealth in Teesside and that the market would have reflected this. Mention was made of land and property prices in the area and the influence that this may have potentially had in larger providers purchasing properties. The Panel discussed Contracts and Commissioning processes and the quality of care being offered in both private and public facilities. Reference was made to the Care Quality Commission (CQC) in the regulation of care home quality, and the involvement of the Local Authority in addressing safeguarding concerns arising from private care homes. Members discussed evidence that had been provided at a previous meeting of the Panel, which had highlighted issues in relation to the timeliness of inspection reports. A Member felt that if the Council did not have any commissioned places within private care homes, this may have had implications for safeguarding.

With regards to premises, a Member queried that, if a care home facility had been left standing empty, could the Local Authority have found an alternative provider to take over the facilities, given the shortage of places within Tees. In response, it was indicated that officers within the Contracts and Commissioning team would have been more appropriately placed to provide a response to this. The Democratic Services Officer would follow this up.

Members' attention was drawn to the series of questions that had been forwarded to the Independent Chair of the TSAB.

*"Q1. What are the implications for safeguarding vulnerable adults in relation to people on temporary/zero-hour contracts, or in non-secure work? How could DWP/Universal Credit be made easier to access not only at times of crisis, but for people facing vulnerability because of work situations such as these?"*

A Member explained to the Independent Chair that concerns were being raised that, should vulnerable people have relied on carers that were in temporary/zero-hour/non-secure work, the nature of their employment may have affected the continuity of the service given to those in need. As an extension, it was being queried how potential issues could have been addressed in relation to DWP or Universal Credit payments, in order to have ensured that carers were not leaving their employment mid-week because income had been stopped.

In responding to both elements of this question, it was conveyed to the Panel that the topic of staff recruitment and retention was felt to have been a significant issue. It was indicated that one of the challenges facing the sector was that, once fully trained, staff may have subsequently left the profession to take up employment in other sectors, such as retail or customer service. It was acknowledged that there had been national cases of individuals receiving care from a high number of different domiciliary care workers in a single week.

It was felt that this was a similar situation to that facing care homes, i.e. the Local Authority could have commissioned domiciliary providers and instilled quality contracts, and the subsequent monitoring of those, but it was an open market; private providers could have entered and commenced trading at any time. Reference was made to National Minimum Wage and Living Wage salary amounts.

The concerns that had been raised were acknowledged. It was indicated that this was about ensuring that the quality of care continued to be monitored, and that people were enabled to express their concerns, through safeguarding, when required.

In response to an enquiry regarding the TSAB's impact in terms of policy development in this area of work, it was indicated that there was a national network of chairs that shared the challenges being raised through the Boards; meetings with officials at the department of health to discuss such matters had been undertaken. At a local level, it was indicated to the Panel that the Director of Adult Social Services was a Member of the Association of Directors of Adult Social Services (ADASS), and therefore challenges and data could have also been shared from that perspective.

A discussion ensued regarding the Council's responsibility in relation to employment terms, private care provision and safeguarding. Members considered the Council's role in the event of a serious incident occurring at a private care home, particularly in terms of accountability.

A Member commented that, in instances where different care workers had supported one individual, the discontinuation of seeing the same person may have proven detrimental to that person's mental or physical health, as care by the same person may have resulted in the recognition of certain trends.

*"Q2. What are the implications for safeguarding vulnerable adults in relation to the instability of income (e.g. through the increase in temporary/zero-hour contracts or non-secure work) and the insecurity that arises from moving from place to place because of job loss/searching for work, etc. (e.g. family disruption, mental health issues and subsequent social problems)?"*

A Member explained that, following on from question one and the subsequent discussion, this question focused on the implications for vulnerable adults if carers did not have secure employment, and were

consequently moving from place to place. Taking the example of a vulnerable person becoming malnourished in a care home that had not been commissioned by the Council, and the reason for that malnourishment being rapid staff turnover, a supplementary enquiry was raised as to whether the Council would have been responsible in any way.

In response, it was indicated to Members that responsibility would not have been a factor; however, follow-up work would have been required. Reference was made to serious case reviews, which were multi-agency reviews of incidents that had occurred. Mention was made of lessons being learnt from reviews, which was considered to have been one of the advantages of the Tees structure in that these could then have been shared between areas. When incidents occurred, the lessons learnt were published and training with staff undertaken. A comparison was made to education services and academies in that the Council had a statutory responsibility for children, but could not have exerted any influence.

In relation to staff training, a Member queried whether there was a minimum requirement for training, including literacy, with regards to the provision of private care. In response, it was indicated that there was not; however, should an individual have wished to establish a private care home, they would have needed to have employed an on-site manager and have been registered with the CQC. In terms of literacy, at a minimum level there would have needed to have been someone available with the capability of completing the required paperwork.

It was indicated that a reduction in the number of nursing homes had been seen in recent times, potentially as a consequence of tighter regulation, planning permission, etc.; however, a national structure around the qualification of care staff was not currently in place.

A brief discussion ensued in relation to the amount of money that was paid to care home providers for the provision of services, with reference being made to profit margins and the current state of the market.

Members discussed the issue of neglect. Consideration was given to: The procedures involved in staff recording instances of care home residents failing to eat; The staff to resident ratio set by the CQC; The availability of free training to care staff offered by the TSAB; The prevention and awareness work that was undertaken by the TSAB in making safeguarding 'everybody's business'; and The referral of matters to the Council should poor quality of care have been witnessed. It was indicated to the Panel that Council officers were authorised to enter private care homes if a complaint had been received. In serious cases, the CQC would have been responsible for closing a home if required; Members heard that three care homes in the Tees area had been closed within the last year.

*"Q3. Regarding changes to the Council Tax levy in respect of social care payments - to what extent will this change impact upon vulnerable adults within the social care system?"*

It was indicated to the Panel that there was a wide range of views around the potential impact of the levy, but it was felt that the general consensus was that it would not have solved the issues that faced social care in their entirety. It was explained to Members that there was a view that there was a potential danger of raising expectations of the Council, that the disparity in wealth and deprivation between areas was being seen, and that the levy may not have made a significant difference across the Teesside area.

A short discussion ensued in relation to the additional amount of money that would have been gained through the levy, the potential ways that this could have been utilised to improve the quality of care, and the level of demand for those care services.

*"Q4. How would you see the Scrutiny mechanism supporting the work of the TSAB?"*

The Panel was advised that a Local Government Association document had been produced in 2010 that detailed how Scrutiny could have supported Adult Safeguarding; it was felt that this document was still pertinent. A link to the copy of the document would be provided to the Democratic Services Officer.

It was explained to Members that, in essence, asking questions and challenging obtained the best checks and balances. It was indicated that an open and transparent system was required; Health and Wellbeing Boards and Scrutiny Committees provided the opportunity for people not involved in the

system to ask those questions. The opportunity of undertaking specific reviews within Scrutiny, not just of Local Authority services but linked to partners across health services, was highlighted to the Panel.

Consideration was given to the active role that Councillors played in ensuring that services were planned with the most vulnerable in mind. It was indicated that although safeguarding covered aged 18 to death, it tended to have been focused mainly towards the elderly and frail, people with mental health problems, and people with physical and learning disabilities - who were often the most marginalised in society. It was imperative that those most vulnerable knew how to seek support when required. Reference was made to Ward Surgeries and other methods of communication that was available for residents to contact their Councillors, who, it was felt, were often the conduit for referring messages onto officers and professionals. In terms of service planning, it was highlighted that safeguarding ought to have been a part of those discussions, for example: when specialist services were commissioned, that they were focused upon those individuals that had the least capacity to have represented themselves. Councillors, in essence, were the voice of the people that did not have a voice.

A discussion ensued with regards to specific Scrutiny review topics and the varying Panels that both Middlesbrough and the other Local Authorities had had in place. Reference was made to a review that Stockton Council had recently undertaken in respect of Deprivation of Liberty Safeguards (DoLS). It was explained that, in terms of partnership working and knowledge sharing, officers had presented the findings of that review to the TSAB, which had been particularly beneficial as the findings were able to have been discussed and shared more widely. Members felt that Middlesbrough Council could have also shared the outcomes of its Scrutiny reviews in the same way. Locally, a Member commented on the cross-working that had taken place between Middlesbrough Council's Scrutiny Panels, with reference being made to the Community Safety and Leisure Scrutiny Panel and the referral of a safeguarding matter from that Panel, to this Scrutiny Panel, for investigation.

The Panel discussed the topic of DoLS, with reference being made to: The findings of Stockton Council's Scrutiny review; The assessment work and subsequent private industry that had been developed around this area (i.e. individuals undertaking work as Independent Assessors); The advantages of the TSAB structure in supporting this area of work (e.g. resource and knowledge-sharing); The varying groups of people that this legislation had applied to (e.g. patients with dementia, physical and learning disabilities, and patients who were comatose); The support for advocacy with regards to this area; Power of Attorney and the provision of consent to a person's liberty being deprived; and The Mental Health Act. It was agreed that the Democratic Services Officer would obtain and circulate a copy of Stockton Council's DoLS Scrutiny report to the Panel Members, for information.

*"Q5. Please could you talk Members through the Safeguarding Mapping Report that has recently been prepared by the TSAB Business Unit? Would copies of this be available for Members?"*

Members were informed that, as this was now the second year of the TSAB's operation, accumulation of comparable data between the partner organisations had been achieved. A mapping report had been produced, which looked in some detail at the activity across level processes of safeguarding, and comparing and benchmarking it per 10,000 of the population.

A development day for the TSAB had been scheduled for March 2017, which would focus upon the contents of the report. It was suggested that once the development day had been held, a copy of the report be forwarded to the Panel for information. Members agreed with this.

A Member made reference to page 28 of the Annual Report, in relation to Annexe A - Concerns and Section 42 Enquiries, and queried the potential reasons as to why Middlesbrough Council's statistics for care home reports were significantly higher than those of the other Local Authorities. In response, it was indicated that this was not known at present; however, this was an excellent example of the types of discussions that the TSAB aimed to have had. Consideration was given to some of the other statistics illustrated in the Annual Report, and to the size of the authorities in relation to those figures.

A Member commented that it could have been either positive or negative that Middlesbrough Council had the highest number of substantiated enquiries, and referred to the work of the TSAB in ensuring standardisation across the area. Consideration was given to safeguarding in relation to poverty and deprivation, and to the potential link between the number of substantiated enquiries and

Middlesbrough's demographic profile.

In response to an enquiry regarding the measurement of standardisation across the Tees area, it was explained to the Panel that all accumulated data would have been discussed in detail by the TSAB. Benchmarking with Local Authorities both in Tees and the wider region would then have been undertaken. It was felt that if all partners in the Tees area followed the same policies and procedures, as had been devised, then consistency and standardisation would have followed. A Member made reference to national networking and the advantages that were available to the TSAB in terms of utilising these to make a difference.

A Member commented that consistency was important in terms of care home inspections being carried out, with potential issues being identified and acted upon. In response, it was indicated to the Panel that the TSAB had recently embarked upon a piece of work; officers within the four Local Authorities were scheduled to audit each other in order to determine whether safeguarding concerns that had been raised would have been progressed to enquiry status, within their own authority. It was felt that this work would have assisted with ensuring consistency across the Tees area.

A Member made reference to public engagement and the importance of this in ensuring that everyone became involved in safeguarding. In response, it was indicated to the Panel that radio campaign work had been undertaken in 2016, which had resulted in increased visits to the TSAB website. In addition, Members heard that staff from the TSAB Business Unit had also been operating a stall and undertaking drop-in sessions in various locations, in order to distribute information and discuss safeguarding.

The Panel discussed the level of service that should have been expected as standard from all of the care homes in Middlesbrough; staff working in the homes; levels of pay; and the potential impact of 'Brexit' on the future operation of facilities.

*"Q6. Please could you provide Members with information regarding the E-CINS system and the potential role of the TSAB within that?"*

Members were advised that E-CINS was a cloud-based multi-agency case management system that facilitated communications between partner organisations, which provided consistency by ensuring that all users accessed the same documentation. The examples of Social Work teams, domiciliary care staff and hospital staff were provided.

E-CINS had been commissioned by the Home Office and, to date, the system had been used in Anti-Social Behaviour situations, which had proven both positive and useful.

It was explained that, in February 2016, the Chief Executives of the public service organisations had agreed, in principal, to explore the system within Teesside, and had signed up to an information sharing agreement. The system was currently being trialled in Hartlepool, and Middlesbrough partners had also agreed to review it. It was acknowledged that there were challenges around information-sharing, e.g. ensuring that appropriate systems and procedures were in place to ensure security of the information, and determination of who would have had access to the information, etc. It was indicated that the TSAB would be considering the E-CINS system further at the March 2017 meeting of the Board.

*"Q7. How are we identifying gaps, sudden and impending issues that may potentially impact upon safeguarding? Could the TSAB potentially commission work to help identify future trends?"*

Members were referred back to the Safeguarding Mapping Report. It was hoped that the more that was understood of the work currently being undertaken in respect of safeguarding, and identification of the key issues and trends, the more that this would have assisted with the identification of risks and potentially what could have occurred in the future.

Reference was made to the varying networks and national associations that officers and colleagues across Local Authorities, Police and health services had access to, and the importance of utilising these in successfully undertaking prevention work.

With regards to the commissioning of work, Members were advised that the TSAB could have commissioned activities; however, as resources were limited, the preferred approach was to have

utilised the knowledge and expertise that Board Members and partners offered.

It was felt that the key challenge was to ensure that sufficient time was taken to fully reflect and understand what was occurring, in order to try and predict what would happen next. It was acknowledged that there would have been wider issues, such as 'Brexit', whereby the impact upon services was unknown. Conversely, there were some issues that could have been seen - the rise in scam activity, for example. It was indicated to the Panel that work in relation to this issue was to be undertaken by the TSAB in the coming year.

A Member made reference to Children Looked After and the links between the safeguarding boards, particularly in relation to the transition of individuals from the child category to the adult category, and sought the Independent Chair's views in respect of this. In response, it was explained to the Panel that there may have been potentially stronger links established within the TSAB structure if a single adult's board and a single children's board were to exist, as opposed to the current arrangements of four children's boards and one adult's board. It was indicated that a meeting between the chairs of the boards would be undertaken to discuss what information needed to be shared, for example: Information regarding children with lifelong disabilities; Patterns in different communities; and Categories of abuse that spanned both groups, e.g. sexual exploitation. It was felt that increased joined up working would have also assisted with pro-activity.

With regards to the linked up working between Scrutiny Panels, a Member made reference to a review concerning sexual exploitation that the Community Safety and Leisure Scrutiny Panel was currently undertaking. It was indicated that a survey amongst schools in Middlesbrough would be utilised in relation to this. It was felt that this survey may have also been relevant to individuals within the context of the TSAB; the Independent Chair agreed to review the questionnaire in order to determine the possibility of assisting with the Panel's research. Members discussed the topic of sexual exploitation in relation to the detrimental impact that it had on people's lives, the importance of ensuring traceability of any occurrences within the system (particularly in respect of child to adult transition), and the operation of care facilities for both children and adults, in particular the background checking of staff appointed to work in the provision of this care.

A discussion ensued regarding the challenges that faced Social Care, particularly in relation to an increase in service demand due to an ageing population, and the reduction in the resources available.

A Member made reference to CQC inspections and the importance of the Authority developing its links with the organisation, particularly in terms of the notification of the outcome of inspections (i.e. formal reports to the Authority). It was felt that the timescale for receipt of these required improvement. It was indicated to the Panel that, if during inspection, the CQC felt that someone was unsafe, the Authority would have been immediately advised, and there had been examples of when telephone contact had been made the same day to advise that some residents needed to be removed from that care home. Members felt that, in instances where there were potential concerns within a care home (pending further inspection), a shorter report to notify the Authority of this would have been welcomed.

Members acknowledged that there were a lot of examples of good public and private care homes in the Tees area, but there were occasions when things did go wrong. It was felt that it would have been useful for Members to have been appraised of how investigations worked, how issues were prevented, and the thresholds involved in the CQC taking action, e.g. notifying the Local Authority and potentially closing care homes down. Members agreed that it would have been useful for the Director of Adult Social Services to have been invited to the 13 February 2017 meeting of the Panel to discuss this.

A discussion ensued in relation to malnutrition, neglect and self-neglect. Consideration was given to: Malnutrition in local hospitals and other care settings; Lifestyle choices and capacity to make those decisions; and Challenges associated with these areas. The role of the Independent Chair in relation to the work undertaken by Local Authorities was reflected upon. The Panel subsequently discussed the Living Wage, the Council's budget, and the commissioning of care services.

A Member made reference to the utilisation of technology within the safeguarding process, and the benefits that this had offered (particularly in relation to the transition of information between the child and adult categories). It was felt that further integration of database systems would have continued to facilitate this.

A Member queried the potential recommendations that the TSAB would have liked to have seen from this Scrutiny Panel, in order to have assisted in the work that it carried out. In response, it was indicated to the Panel that the recommendations should have related to safeguarding being seen as Middlesbrough's core business, i.e. every service in Middlesbrough should have been designed to have met the needs of the most vulnerable people within the community. Members made comparison of this to the Authority's Corporate Parenting role. Members considered the role of the Council's Communications Team in developing this concept further, with reference being made to the Love Middlesbrough Magazine in raising awareness.

The Panel thanked the Independent Chair for her attendance and contribution to the meeting.

**AGREED** that:

1. The Chair and Democratic Services Officer would follow-up on outstanding actions from previous Panel meetings.
2. The Democratic Services Officer would contact the Contracts and Commissioning team to determine whether or not the Local Authority could have found an alternative provider to take over empty care home premises/facilities.
3. The Independent Chair of the TSAB would provide the Democratic Services Officer with the link to the referenced Local Government Association Scrutiny report.
4. The Democratic Services Officer would obtain and circulate a copy of Stockton Council's DoLS Scrutiny report to the Panel Members, for information.
5. A copy of the TSAB Safeguarding Mapping Report would be forwarded to Members following the Board's development day in March 2017.
6. A copy of the questionnaire being circulated around Middlesbrough schools, in relation to the Community Safety and Leisure's Scrutiny Panel review into sexual exploitation, would be forwarded to the Independent Chair of the TSAB for review.
7. The Director of Adult Social Services would be invited to the 13 February 2017 meeting to discuss the processes and thresholds involved in CQC inspections, notification of outcomes to the Authority, and the timescales involved in undertaking action - e.g. care home closure.
8. The information, as provided, be noted.

## APPENDIX 5

### SOCIAL CARE AND ADULT SERVICES SCRUTINY PANEL

A meeting of the Social Care and Adult Services Scrutiny Panel was held on 13 February 2017.

**PRESENT:** Councillors McGee (Chair), Branson, Coupe, Goodchild, P Purvis, J Walker and Walters.

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

**APOLOGIES FOR ABSENCE:** Councillors Dryden and Higgins.

### MINUTES - SOCIAL CARE AND ADULT SERVICES SCRUTINY PANEL - 16 JANUARY 2017

The Minutes of the Social Care and Adult Services Scrutiny Panel meeting held on 16 January 2017 were submitted and approved as a correct record.

The Chair provided the following updates in relation to the agreed actions set out on page 10 in those Minutes:

- 'The Chair and Democratic Services Officer would follow-up on outstanding actions from previous Panel meetings.' - This had been actioned.
- 'The Democratic Services Officer would contact the Contracts and Commissioning team to determine whether or not the Local Authority could have found an alternative provider to take over empty care home premises/facilities.' - The Head of Commissioning and Strategic Procurement was in attendance at the meeting; this enquiry would be raised.
- 'The Independent Chair of the TSAB would provide the Democratic Services Officer with the link to the referenced Local Government Association Scrutiny report.' - This had been actioned. Members felt that this had been a very useful document that had offered guidance as to how the issue of safeguarding could have been kept on the agenda, and focused on as part of the Scrutiny process.
- 'The Democratic Services Officer would obtain and circulate a copy of Stockton Council's DoLS Scrutiny report to the Panel Members, for information.' - This had been actioned. Members felt that this report had provided an interesting insight as to how Stockton Council were managing their Deprivation of Liberty Safeguards (DoLS), and highlighted the increase in work that had been experienced within that area. Brief consideration was given as to how DoLS were being managed in Middlesbrough. In relation to future Scrutiny investigation procedures, the Panel felt that it would have been beneficial to review neighbouring authorities' Scrutiny reports when they had investigated similar issues to Middlesbrough Council. It was commented that this would have helped to avoid duplication from occurring with the Tees Valley area, and to shape potential ideas for reviews.
- 'A copy of the TSAB Safeguarding Mapping Report would be forwarded to Members following the Board's development day in March 2017.' - This was still pending.
- 'A copy of the questionnaire being circulated around Middlesbrough schools, in relation to the Community Safety and Leisure's Scrutiny Panel review into sexual exploitation, would be forwarded to the Independent Chair of the TSAB for review.' - This had been actioned.
- 'The Director of Adult Social Services would be invited to the 13 February 2017 meeting to discuss the processes and thresholds involved in CQC inspections, notification of outcomes to the Authority, and the timescales involved in undertaking action - e.g. care home closure.' - This had been actioned.

A Member made reference to page 6, paragraph 3, which referred to three Teesside care homes being closed within the last year, and queried whether further details were available as to which homes these were. In response, the Head of Commissioning and Strategic Procurement indicated that The Gateway facility within Middlesbrough had closed within the last twelve months; the remaining homes were outside of the Middlesbrough area.

The Panel was appraised of the future regarding The Gateway premises. It was explained that officers from Social Care had recently met with local representatives of the new prospective owners, who were

currently progressing Care Quality Commission (CQC) registration to open the building as a neuro-rehabilitation centre, which would have offered the same provision as The Gateway. A further meeting with the Regional Manager would be taking place in due course. In light of the work required to obtain registration status, it was anticipated that the new facility would not have taken their first phased intake of ten clients for at least a six month period. Members discussed the provision previously offered by The Gateway and the importance of such facilities in the Teesside area. In addition to ensuring the availability of full financial support for the success of the project, reference was made to the significant partnership working that needed to be undertaken between the provider and local health services, particularly in relation to potential clients, the funding of placements, and the availability of specialist nursing staff within the area.

## **NOTED**

### **SAFEGUARDING VULNERABLE ADULTS - FURTHER INFORMATION**

The Chair indicated that two follow-up reports had been provided to Members following the initial circulation of the agenda. The first report was a non-confidential item that referred to hourly homecare rates, and the second report, which was a confidential item, referred to Belle Vue Care Home. Both reports had been provided in response to the actions that were agreed at the 16 November 2016 meeting of the Panel.

Prior to passing a resolution to exclude the press and public from the meeting, the Panel considered the first report in relation to hourly homecare rates.

The Head of Commissioning and Strategic Procurement explained to the Panel that officers had carried out research to determine the rates of pay that were made to homecare workers, both locally and regionally. In relation to research undertaken by the United Kingdom Homecare Association (UKHA), national data had also been acquired.

As a preliminary, Members were informed that, in instances where providers had not had a direct contractual relationship with the Local Authority, many had not wished to disclose their direct rates, as this information was commercially sensitive. Consequently, a slightly different approach had been undertaken, whereby officers instead ascertained the hourly rate that organisations and Local Authorities paid for an hour of care, which was able to provide an indication as to what staff were paid. It was explained that the hourly rate paid for care encompassed other breakdown costs, including insurance, travel time where applicable, office overheads for administration, utilities, training, CQC registration and Inspection costs, PPE and profit.

The Panel was advised that this research had confirmed previous awareness that, regionally, Middlesbrough was one of the lowest paying, with the hourly rate for homecare currently £12.32; South Tyneside was the lowest paying at £12.20. Northumberland was the highest, with a maximum rate of £15.20 (for more rural areas). The average for the North East region was £12.60.

Members were informed that, with regards to the Council's contracts with providers, carers were paid the National Living Wage, which was currently £7.20 per hour. This would be increasing to £7.50 per hour in April 2017, and scheduled to increase to £9.00 per hour by 2020. The incremental rates between April 2017 and 2020 were not known at present, as these would be set by the Government.

Members were referred to page 2 of the submitted report, which illustrated the results of the national research undertaken by the UKHA, and published in its 2016 'The Homecare Deficit' report. The data showed the average prices paid per hour for homecare in each of the nine government regions and three developed administrations, which were compared against the UKHA's minimum price expectation of £16.70 per hour for homecare across England (broken down into £11.94 for care worker costs, £4.26 for running the business and 50p for profit). The North East was the lowest-paying region in England at £12.60; the highest-paying was the South West at £16.86. The Panel briefly discussed these findings and acknowledged that the homecare deficit was being experienced nationally.

Members were advised that the Authority had recognised that it was one of the lowest-paying, and therefore that rates needed to be increased. Reference was made to the Council's Medium Term

Financial Plan (MTFP) and the inclusion of this increase within that.

The Panel was informed that the Council currently contracted with four homecare providers, which were due to expire in November 2017. It was explained that excellent working relationships had been formed with the providers, with work currently being undertaken with them in relation to the re-modelling of commissioned homecare services. It was intended that this work would have provided a move away from more traditional models of service delivery, resulting in more effective and efficient homecare by addressing such issues as inconsistency and lack of continuity around the homecare worker, and rigidity around appointment times/duration. Additional research around this re-modelling work had included review of international service delivery models in places such as Sweden and Holland, in order to determine what, if anything, could have been learnt from those. A tendering exercise would be undertaken in due course, with the new care arrangements in place from November 2017.

A Member commented on the scheduling of homecare worker appointments and the potential for this to have presented safeguarding concerns, for example: service users being put to bed mid-afternoon. Consideration was given to the high number of safeguarding concerns arising from care homes, but the low number being reported from service users' own homes, and how monitoring of this could have been improved. It was felt that a revised care model would have assisted in relationship-building between service users and their carers through the continuity of care.

With regards to staffing, Members heard that a sustained publicity and marketing campaign that focused upon the perceptions of the role of carers would be undertaken (in parallel to the introduction of the new service model). It was felt that caring should have been viewed as a highly valued and rewarding profession, not as a low paying job that simply provided an income. In order to have ensured that this message was conveyed, it was felt that publicity needed to be undertaken, both as a Local Authority and a town. This was important for a number of reasons; reference was made to a Health Sustainability and Transformation Plan that was currently being undertaken, which was predicated on the fact that approximately 30% of hospital attendances were cases that could have been supported at home. There was a concern that if the clinical service was moved out, supporting Social Care services must have been made available. Consequently, it was felt that raising the societal worth and value of domiciliary care was fundamental to the Health Sustainability and Transformation Plan. Mention was made of potential joint working with partners across South Tees around the value and sustainability of domiciliary care. Members were advised that a professional marketing company would have assisted with this campaign work.

A Member commented on the issue of loneliness and how this could have been addressed through homecare services. It was suggested that this be acknowledged as part of the publicity and marketing campaign work, by encouraging home carers to understand that their role was far bigger than solely undertaking actual care tasks; they could have been the only person in a service user's life.

A discussion ensued with regards to the differential pay rates being made for homecare across the region. Consideration was given to Middlesbrough Council in relation to its neighbouring Authorities. With regards to staff retention, a Member commented that if the hourly rate for homecare was reflected in the pay rate that care workers received, the Council, as the current lowest-payer in the Tees area, would have experienced instability in terms of retaining the staff to deliver the re-modelled homecare service.

In response to an enquiry regarding homecare services commissioned by Middlesbrough Council, the Panel was advised that, although the hourly rate for homecare was one of the lowest in the region, providers were paying the National Living Wage to their staff. The same rate was being paid by providers who were contracted to other Local Authorities, where the hourly rate for homecare services was higher. It was indicated to the Panel that a shortage of homecare workers was currently being experienced by Local Authorities across the North East region. It was acknowledged that, although not a long-term solution, and part of the reasoning why homecare services and associated hourly rates were being addressed, Middlesbrough had fared well, with very few instances of failing to meet service requirements being experienced.

With regards to the Council's relationship with commissioned homecare service providers, it was explained to the Panel that this extended beyond simply the rate being paid to them, but was

concerned with service provision too. Members heard that Middlesbrough Council operated a broker system, which effectively meant that homecare providers had direct access to officers that could have assisted with such matters as dealing with enquiries, liaising with clients and arranging key holding, which many Local Authorities did not currently offer. It was felt that this facilitated work between the Authority and the providers, as it guaranteed an immediate response to any issues that were raised.

A Member suggested that, as part of the publicity and marketing campaign work, reference should be made to volunteers, particularly in terms of helping to reduce loneliness and isolation. This was acknowledged, with reference also being made to Ageing Better Middlesbrough, a Big Lottery Programme that, in addition to other matters, had focused on volunteering-related issues. The Head of Commissioning and Strategic Procurement currently vice-chaired the core partnership. It was acknowledged that, although further work was required in terms of promoting volunteers and developing the volunteering strands of Ageing Better, there had been an excellent response from some voluntary sector organisations in Middlesbrough. Reference was made to a number of projects that were either currently being undertaken, or were due to commence shortly, in relation to this area - provision of support for carers to those with dementia, for example. Mention was made of the vetting procedures involved and the infrastructure that was required in terms of supporting volunteers. It was felt that any learning outcomes could have potentially been applied to the wider domiciliary care area going forward, as appropriate. A Member commented that all Councillors had the opportunity to approach Ageing Better for assistance in setting-up related work and activities within their respective Wards.

The Panel felt that increased rates of pay and improved job satisfaction were paramount in ensuring that those wishing to work in homecare were actively encouraged to apply.

Members requested that they be kept updated with regards to the progress around the re-modelling of homecare services, and in relation to the impact of the Health Sustainability and Transformation Plan on the Council, particularly in times of austerity when budgets were decreasing, but demand increasing. This was agreed to.

A discussion ensued in relation to the proposed publicity and marketing campaign work around altering the perceptions of caring. Reference was made to the framing and shaping of messages within activities, in particular the use of terminology and how this could have meant different things to different people. It was highlighted that the use of professional marketers would have assisted in ensuring that the intended message was successfully conveyed.

A short discussion ensued with regards to regional administration (i.e. what areas constituted the North East region), and the weighted averages for homecare services that had been paid by those respective Local Authorities.

A lengthy discussion ensued with regards to the MTFP. A Member made reference to attendance at a recent Council budget meeting, where significant reductions in the overall costs of Social Care had been observed. It was queried whether or not the inclusion of additional resource for increased pay rates for homecare workers was predicated on both increased numbers in demand, and an increase in the amount that was currently being paid. In response, it was indicated that in relation to the MTFP, demand would have been factored separately; however, there was a separate line within it specifically for National Living Wage increases that were required within all contracted services across the Council. Within this line, the increase around homecare was factored in. The separate line for Social Care demand was based on potential increases within a number of outturns, such as legislative and benefit-related changes, and therefore the impact of potential demographic changes were already built-in to the MTFP; the MTFP document was effectively a living document that was amended as time elapsed. It was indicated to the Panel that the additional resource for increased pay rates would have been based on the November 2017 pricing, which would then have subsequently increased year-on-year to reflect the National Living Wage increments.

With regards to funding pressures facing the Local Authority, Members raised concern in relation to the increase in the number of elderly people requiring homecare, and the projected increase in funding amounts (i.e. from £7.20 to £9.00 per hour in respect of the National Living Wage, and the increase in the wider hourly rate payable to commissioned homecare providers). Mention was made of the Council Tax Levy for Social Care and consideration given to the potential impact that this may have

had.

Regarding the budget reduction for Social Care, the Panel was informed that, for 2016/2017, this had amounted to £1.9m, and for 2017/2018, had amounted to £4.4m. It was indicated that £1.8m of the £4.4m for 2017/2018 had potentially already been achieved through various mechanisms; a change in the delivery of Social Care was being seen, with increases in the type of support offered by organisations such as Ageing Better Middlesbrough, as well as the increased utilisation of assistive technology in reducing carer-related costs. It was anticipated that, whilst these were exceptionally very challenging times, the savings targets were achievable (without undermining the quality of care that the Council was currently providing).

### **EXCLUSION OF PRESS AND PUBLIC**

**ORDERED** that the press and public be excluded from the meeting for the following item on the grounds that, if present, there would be disclosure to them of exempt information as defined in Paragraph 3 of Part 1 of Schedule 12A of the Local Government Act 1972 and that the public interest in maintaining the exemption outweighed the public interest in disclosing the information.

Further to information being provided at the 16 November 2016 Panel meeting, the Committee considered an exempt report regarding the current position of Belle Vue Care Home.

**ORDERED** that the exclusion of the press and public agreed by the Committee prior to consideration of the above report be lifted for the remainder of the meeting.

With regards to the Panel's Terms of Reference for this investigation, specific consideration was given to Reference 6, which was as follows:

'To identify the measures and strategies that could be implemented to further enhance/develop adult safeguarding practices.'

The Director of Adult Social Services advised Members of the work currently being undertaken in relation to this.

Reference was made to the Teeswide Safeguarding Adults Board (TSAB). It was explained to the Panel that part of the role of the Board was to have identified areas of good practice, and to have then subsequently rolled these out on a Tees-wide basis. This was accomplished in a number of different ways. Details were provided in relation to the TSAB's Performance, Audit and Quality Assurance Sub-Group that the Director of Adult Social Services currently chaired. It was explained that the Sub-Group regularly scrutinised the incoming safeguarding-related data from the Member Authorities, identifying both areas of concern and opportunity, and subsequently progressing these forward to the Board for potential inclusion in its Business Plan. Reference was made to the Safeguarding Mapping Report that had been produced, which was scheduled to be discussed at the TSAB's development day in March 2017.

Members were informed that Middlesbrough Council had continued to undertake annual Quality Assurance Framework (QAF) tasks, which the Authority had piloted for the TSAB last year. The second run had recently been completed, with a submission to the Board that looked at a variety of measures within the Local Authority Safeguarding Framework. It was explained that this had involved completion of a self-audit exercise in terms of current status, followed by the production of an action plan (which was then subsequently forwarded to a Panel operated by the Board, for review). It was indicated that a series of QAF programmes could have been in operation at any given period of time.

The Panel was informed that two pieces of work had recently been undertaken.

The first revolved around internal audit conducting a review of the Council's safeguarding processes. It was explained to Members that, until late 2016, adult safeguarding had been located in the same area as children's safeguarding. Following this change, internal audit had been tasked with reviewing the service's safeguarding processes as part of the annual cycle, in order to obtain a benchmark of the current status. It was highlighted that a draft report in respect of the review had recently been compiled. It was agreed that a copy of the report would be forwarded to the Panel for information. It

was anticipated that this report would have established a series of action plans for officers, which was hoped would overlap with the plans arising from the QAF activities.

The second referred to a piece of work undertaken within the service area, which looked at the handling of initial contact made with the department. It was indicated that a draft report in respect of that review was currently awaited. It was agreed that a copy of the report would be forwarded to the Panel for information, when available.

It was felt that the combination of individual pieces of work with the annual cycle of on-going training that the service delivered to staff, both face-to-face and online-based, allowed for constant incremental improvements to be made.

Reference was made to serious case reviews that were undertaken within children's services when serious concerns were raised. It was explained to Members that, within the TSAB structure, there was a similar serious case review framework in place for adults. Although there been no such reviews undertaken within Middlesbrough, reviews had taken place elsewhere in the Tees area. It was indicated that disseminated learning was provided to all of the Member Authorities in relation to those, and also in respect of near-miss incidents.

The Panel was appreciative of the information provided, and fully supportive of the constant improvement work being undertaken.

As per an agreed action point arising from the last meeting (16 January 2017), a query was raised as to whether or not the Local Authority could have found an alternative provider to take over empty care home premises/facilities. In response, Members were advised that if premises/facilities were privately-owned, the general finding was that they would not have been marketed in the more conventional way of via estate agents. Sales tended to be undertaken more privately; however, the Local Authority had had some involvement in this route previously through contacts that had been made. In terms of finding an owner/operator to take over existing facilities, it was indicated that this would have been unlikely; however, due to the good business relationships that had been developed with local providers, constant dialogue did take place. Consequently, if the Commissioning team had been made aware of a vacant building, then this would potentially have been discussed with providers. The contact channels would have been opened; however, because all sales were private and not commissioned or funded by the Local Authority, further action would have been limited.

The Panel thanked the officers for their attendance and contributions to the meeting.

During discussion, it was explained to Members that work on the draft final report for the investigation had commenced. Regarding recommendations, in order to ensure that these encompassed all of the issues that the Panel wished to have included, Members were invited to discuss potential recommendations that they currently had or, following further consideration, to forward submissions to the Democratic Services Officer by no later than Friday, 24 February 2017. During discussion, Members indicated that the issues of volunteering, loneliness and staff pay should have been included within the recommendations.

Members discussed the progress of the investigation, the topics that had been raised and the wider remits of both safeguarding and Social Care. It was felt that the issue of safeguarding was cyclical in nature and required continuous referral back to. In terms of the future operation of Scrutiny, reference was made to both the TSAB structure and the review work undertaken by Middlesbrough's neighbouring Local Authorities (the recent DoLS review by Stockton Council was highlighted). It was felt that by undertaking closer partnership working, increased work around the scrutinising of safeguarding could have been achieved. Mention was made of the Tees Combined Authority and the potential opportunities that may have been offered.

A discussion ensued around the future of care provision within Middlesbrough, the re-modelling of care services and work undertaken elsewhere in Europe. A Member made reference to a community hub facility that operated in Holland, which had also provided residential facilities for both students and older people. It was felt that the combination of varying age groups and shared responsibility had been exceptionally positive for all those involved. A Member commented on the expansion of Teesside University and considered the potential of such a model within Middlesbrough.

A Member raised concern in relation to the lack of provision for young adults with care needs within Middlesbrough, explaining the critical importance of ensuring that such facilities were available. It was felt that consideration needed to be given by the Council in addressing this matter.

**AGREED** that:

1. The Panel would be kept updated with regards to the progress around the re-modelling of homecare services, and in relation to the impact of the Health Sustainability and Transformation Plan on the Council.
2. The Director of Adult Social Services would forward a copy of the draft report regarding the Audit review of the Council's safeguarding processes, to the Panel, for information.
3. The Director of Adult Social Services would forward a copy of the draft report regarding the piece of work undertaken within the service area, which looked at the handling of initial contact made with the department, to the Panel for information.
4. That the information, as presented, be noted.