

MEETING:	Overview and Scrutiny Committee -		
	Healthy Barnsley Workstream		
DATE:	Tuesday 19 July 2022		
TIME:	2.00 pm		
VENUE:	Council Chamber, Barnsley Town Hall		

MINUTES

Present Councillors Ennis OBE (Chair), Bellamy, Cain, Clarke,

Eastwood, Lodge, Lowe-Flello, McCarthy, Osborne,

Peace, Smith, Wilson and Wray.

9 Apologies for Absence - Parent Governor Representatives

No apologies for absence were received in accordance with Regulation 7(6) of the Parent Governor Representatives (England) Regulations 2001.

10 Declarations of Pecuniary and Non-Pecuniary Interest

Cllr Eastwood declared a non-pecuniary interest in minutes number 4 & 6 as she is Cabinet Support for Place Health and Adult Social Care.

11 Minutes of the Previous Meeting

The minutes of the following meetings were received by Members for information only: -

Sustainable Barnsley Workstream, 28th June 2022.

12 Better Lives Programme

The Following Witnesses were welcomed to the meeting:

Wendy Lowder, Executive Director Place Health & Adult Social Care, BMBC Linda Middlewood, Head of Service Adult Social Care, Place Health & Adult Social Care, BMBC

Julie Chapman, Service Director Adult Social Care & Health, Place Health & Adult Social Care, BMBC

Kwai Mo, Head of Service Mental Health & Disability, Place Health & Adult Social Care, BMBC

Jacqui Atkinson, Service Manager Improvement, Programmes & Assurance, Place Health & Adult Social Care, BMBC

Dominic Armstrong, Service Manager, Improvement & Quality Assurance, Place Health & Adult Social Care, BMBC

Cllr Jenny Platts, Cabinet Spokesperson Place Health & Adult Social Care, BMBC

Cllr Platts introduced an update on the Better Lives Programme which started in 2021 with the aim of supporting people to stay in their homes for longer. Prevention

and early detection are key priorities in supporting residents to retain their independence.

Initially social workers triage enquiries with signposting, early help and assessment to reduce demand on services. Conversations are focused on residents so that they can make choices on the help they need. The plan is to further develop the 'front door' by exploring locations in which to offer face to face support. Future developments include working with partners including housing and the police. The work which has been carried out has made the enabling service more focused and stronger.

In September 2021 the government announced the funding reform which caps the contribution to care at £86,000 however, this does not come into effect until October 2023 so any contributions to care made prior to this are not covered by the cap. There are changes being made to computer systems to help to identify and monitor financial changes and a report will be produced to keep people updated on this.

The ensuing discussions included: -

It was clarified that a lot of success had been seen in terms of early prevention with signposting to early help or social prescribing. The focus on a network of community support has seen a reduction in requests for long term intervention and a reablement pathway has been put in place to connect people back into their communities.

In regard to involving families in decision making it was stated that it is important to be aware that if a person has the mental capacity, decision making must sit with them, however, it is encouraged to bring their family into discussions. Furthermore, if family members are caring for a person, they have a right to a Carer's Assessment.

The team are exploring community hubs so that people can drop in for early help and support to reduce the number of individuals having to make contact when they reach crisis point. They plan to reach not just elderly people but young people as well and they hope to establish themselves in communities using Age UK and colleges. They are also working hard to co-produce more closely with individuals and communities and are hoping to develop this further through a 'voice and participation' group in the near future.

Members questioned the definition of 'fair' in recent reports (Market Sustainability & Fair Cost of Care) and wanted clarification on this. It was noted there are efforts to adopt consistency across all local authorities in Yorkshire & the Humber and they will work together as a community to develop cost models. Part of this work includes engaging with the care market and, so far, the response rate from providers on what a fair cost of care looks like have been good. Previous decisions taken by the local authority around paying a fair hourly rate for important work have also been taken into account. Care providers are impacted by the 'cost of living' crisis in the same way that residents have – experiencing increases including utilities, fuel and food. A formal submission on the 'fair cost of care' will be prepared and submitted to government in the autumn. In addition, Cllr Platts shared with Members that the annual cost of living uplift papers will be going through cabinet next week.

It was noted that the early intervention model is very successful and this improves lives and reduces cost in the long term. To continue to improve, work is to be done with integrated care partners to look at how the extended primary care role can be utilised to prevent the need for acute care. Additionally, the 'front door' needs to be developed and work needs to be done to get simple pieces of equipment out to residents in a smarter and faster way so that people are not going into crisis.

The 'front door' is seeing quite a lot of young people who have lived complex lives and until this is attended to with trauma work, there is going to be an over-reliance on social care in the future. Due to this, the team will work closely with carers and young people.

There is a transition protocol covering young people with disabilities and autism but a wider offer for people with a range of needs is being explored. This will include people who do not necessarily have a diagnosis but who have an unidentified need. Work is underway with education providers, Children's Social Care and the Child & Adolescent Mental Health Service to scope the offer for young people. This is where co-production is very important because quite often, the young person's voice is not heard. At 16+ they have a choice, and the service uses a strengths-based model to work with the young person before they reach 18 when some come into service where others may just need to be signposted. They look at giving the young person confidence and independence in areas such as travel, and the team will look at statutory and non-statutory services to give the widest combination of offer.

The team are working with community pharmacists who are already delivering a valuable offer; however this requires strengthening and there is more to understand regarding their capacity.

Members offered support to the team and were advised that they can be the eyes and ears in communities. A session will be arranged to train Members on navigating social care so they can then provide this advice to residents. They can look at spotting the signs of when support is needed and work alongside officers and wardens in the community. Additionally, Members were reminded of their duty to safeguard vulnerable people and were advised to take up any online training, such as the Mental Capacity Act, to help them to raise their own knowledge and enable them to discharge good advice. The team is available for information sharing and relationship building as this is not only good for everyone, but also the public purse. If Members are approached by residents they can come to the team for advice and this can be passed to the most appropriate service.

When questioned about the unusually high temperatures being experienced at present, the team stated that every organisation had put heatwave plans in place and they are meeting up regularly to ensure that things are working well. Members requested that any issues from the heat today should be reported back to the committee.

It was raised by a member of the committee that traces of Polio had been discovered in London recently and queried the vaccination rates in Barnsley. As the witnesses in attendance do not deal with vaccinations, the information will be shared with the committee after the session by an officer in Public Health/ NHS England.

RESOLVED that:-

- (i) Witnesses be thanked for their attendance and contribution; and
- (ii) Members note the report
- (iii) Witnesses to provide an information session for Members to provide advice to residents in regard to support
- (iv) Witnesses to provide information on any adverse statistics from this week heatwave
- (v) Scrutiny Officer to consult with Public Health colleagues and share data with committee relating to Pollio vaccinations uptake

13 Exclusion of the Public and Press

RESOLVED that the public and press be excluded from this meeting during consideration of the items so marked because of the likely disclosure of exempt information as defined by the specific paragraphs of Part I of Schedule 12A of the Local Government Act 1972 as amended, subject to the public interest test.

14 Adult Social Care Performance Report March 2022 (Year-End) (Part-Exempt)

Members were invited to consider a report relating to:-

6a Adult Social Care Performance Cover Report March 2022 (Year-End)6b Adult Social Care Performance Data Report March 2022 (Year-End) (Exempt)

Cllr Platts introduced the report which provided Members with the annual review of performance, including a mixture of local and national measures. The majority of indicators have been rated green and amber however, this year the service has been impacted by staffing issues and the cost-of-living crisis. For now, Barnsley has solid staff who will continue to meet needs for 2022/23.

The ensuing discussions included:-

When caring for a family member, the person being cared for must always be allowed to make their own decisions if they have the mental capacity. However, they would be asked for consent to speak to their carer as they often have crucial information to share that can improve outcomes for the individual.

With regard to the very high performance for the percentage of S42 Decisions made within 72 hours — the team informed members that they would like to improve this further and they are now working with partners, including the police, who have joined the 'front door' team and this multi-disciplinary approach is resulting in effective and timely decisions being made, ensuring that safeguarding opportunities are not missed. Data for other local authorities will be shared with Members to allow them to draw comparisons.

The team confirmed they research, identify and use areas of good practice from a variety of sources for projects in adult social care and use benchmarking to determine how they compare to other authorities. Similarly, the team have been approached by other authorities as an originator of good practice.

The recent adult social care reform announcements will signal a new approach from April 2023 and in preparation for this, a sector led improvement board has been established for Yorkshire & the Humber. The new CQC framework means that the approach to performance will be revised to align with the framework and the CQC are introducing relationship managers aligned to Integrated Care Systems.

The key to successful social care is effective patient flow through the health and social care system, and the social work team have been doing an excellent job of getting people home and helping people to stay at home, as this is where people want to be.

RESOLVED that:

- (i) Witnesses be thanked for their attendance and contribution; and
- (ii) Members note the report
- (iii) Witnesses to provide comparator data for other local authorities for the percentage of S42 decisions made within 72 hours

 	 Chair