

**MINUTES OF A MEETING OF THE COMMUNITY & OLDER PEOPLE
POLICY AND SCRUTINY COMMITTEE HELD AT COUNTY HALL,
CHELMSFORD AT 10.00 AM ON 8 DECEMBER 2011**

Membership

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|-----------------------------|------------------------------------|
| * W J C Dick (Chairman) | |
| * L Barton | * S Hillier |
| * R Chambers | * R A Pearson |
| P Channer | * Mrs J Reeves (Vice-Chairman) |
| J Dornan | * C Riley |
| * M Garnett | Mrs E Webster |
| * C Griffiths | * Mrs M J Webster |
| * E Hart | Mrs J H Whitehouse (Vice-Chairman) |
| | * B Wood |
| * T Higgins (as substitute) | |
| * Present | |

The following also were in attendance: Councillors A Naylor (Cabinet Member) and A Brown (Deputy Cabinet Member), and P Coleing, Co-Chair and Ms M Montgomery, Deputy Co-chair of Essex Older People's Planning Group.

93. Attendance, Apologies and Substitute Notices

The Committee Officer reported apologies had been received from Councillors Mrs P Channer, Mrs E Webster and Mrs J Whitehouse (for whom Councillor T Higgins attended as substitute).

94. Declarations of Interest

No interests were declared.

95. Minutes of last meeting

The Minutes of the Committee held on 9 November 2011 were approved as a correct record and signed by the Chairman of the meeting subject to them showing Councillor T Higgins in attendance as substitute for Councillor J Whitehouse.

96. Cabinet Member statement on carers

Councillor A Naylor, Cabinet Member for Adults Health and Community Wellbeing, took the opportunity to confirm ECC's commitment to support those with a caring responsibility living in Essex whilst also protecting their own health and wellbeing needs. Recent research had calculated that there were approximately 139,000 carers in Essex. Only a small percentage of these were known to Social Care Services. ECC was committed to ensuring that the priorities for support identified by carers were reflected in future strategy and commissioning decisions.

97. Budget update

The Committee received a report (CWOP/50/11) on the Adults Health and Community Wellbeing Directorate (AHCW) projected budget outturn for 2011/12. Liz Chidgey, Deputy Executive Director, AHCW and Bev Winter, Interim Senior Finance Business Partner, were in attendance to present the item and answer questions.

(a) Overspend and recovery plans

The 2011/12 forecast revenue position for AHCW, as at Period 7, reflected a £1.788 million overspend, representing 0.47% of the net budget for the Directorate. It was stressed that projections often would vary marginally from budget during the course of the financial year.

There was currently an overspend on the ECC managed budget for individual mental health care packages (which was separate to funding allocated to MHTs) and for which a recovery plan existed with a reduction in the overspend already achieved month on month since Period 3.

Recovery plans had been produced in relation to a £4.284 million over spend forecast for Care and Support (which incorporated spend on Older People, Physical and Sensory Impairment and Learning Disabilities). However, the recovery plan would not fully offset it and the over spend would also continue to be offset, in part, by under spends elsewhere within the directorate. It was likely that the 2010/11 under spend of £1.771 million would carry forward to be fully utilised to offset potential demand pressures which might arise during the financial year.

(b) Other mitigating actions

There were other measures that could be taken that might improve the efficiency of services being provided to the end user. These included considering alternative delivery models. In addition, action had been taken to ensure that the eligibility criteria adopted by the Council for adult social care, "substantial and critical" as set out in Prioritising Need (Department of Health Guidance note 2010) was being correctly applied. Analysis at monthly outturns also included identifying pressure points in the budget, identifying if these were temporary or permanent trends, and whether lower priority work could be deferred so as to be able to divert resources to address these pressure areas. AHCW was also looking to operate leaner back-office functions.

(c) Future challenges

It was emphasised that the service were not underestimating the significant challenge faced in the next financial year, which would mean balancing budgetary pressures with the projected changes in demographics in the county that would increase demand for AHCW services. It was **agreed** that further information on projected demographic trends and future challenges would be presented to the next meeting of the Committee.

Mental Health services often suffered from a low profile compared to other care needs. ECC were working with the two commissioners of mental health services in Essex to improve future outcomes.

98. Member residential home visits: My Home Life

The Committee received a report (CWOP/51/11) from Jan Lockyer, Project Manager, on a proposed new approach for Members visiting residential care homes. To date, after Members had visited a care home, they completed a Members Quality Monitoring proforma which prompted feedback on specified areas of care and lifestyle in the home.

(a) My Home Life

My Home Life was a national movement aimed at promoting quality of life for older people living and dying in care homes and for those visiting and working with them, through relationship-centred care and evidence-based best practice. The movement encouraged the use of 'appreciative enquiry', ascertaining what aspects of a home were working well and then using that analysis to identify areas of care not working well. The movement was operational in a number of locations in the UK. It was reported that care home managers had been empowered by the process and some evidence of service improvements.

(b) New proposal for recording feedback

Using the methodology from My Home Life it was proposed to make changes to the Member feedback process for care home visits. Members would be invited to record their visits on a simple one page form, to be used for reference only, and to log which homes had been visited, when and by whom. The form would also indicate any follow-up action taken as a result of the visit. Good practice in residential care homes would be recorded via the 'My Life My Outcomes' form. The completed form would be sent to the Quality Improvement Team and information might be shared with other care homes to help them improve their own practices. Concerns in respect of the care homes would be recorded via the 'Provider Concerns' form which gave the opportunity to highlight more general concerns, e.g. lack of diverse activities, lack of stimulation for residents etc. The completed form would be sent to the Service Placement Team who would decide on the appropriate course of action. Any concerns regarding safeguarding would be immediately reported to the Essex Safeguarding Adults Line (ASKSAL).

(c) Feedback

Members were concerned that the new proposal for recording feedback on home visits involved the filling-in of multiple forms on the internet as opposed to one hard copy as at present. It was stressed to Members that it was felt that the proposal would simplify the process, requiring the completion of one short form initially and only if Members felt that they wanted to highlight good

practice or an area of concern would a further form be required. By having separate forms for this it was felt that Members would not feel constrained by the wording and questions in the main form. Members acknowledged that it was important to accurately and comprehensively record and monitor their visits. However, they felt that the prompts in the current longer proforma seemed reasonably balanced and was a useful guide as to the areas of care to cover in the visit which might be lost with the proposed new forms.

The Cabinet Member highlighted that the Care Quality Commission and Ofsted had both made recent changes to their monitoring regimes to move away from what they considered a culture of 'box ticking' and that the new ECC proposals for care home visits were intended to also reflect this trend and be more flexible. The Cabinet Member stressed that it was important that Members were 'on board' with the future process for feedback whilst acknowledging their concerns that it also had to be clear and easy to complete.

Officers were appreciative of the feedback received and would look to address the concerns raised and arrange a further specific briefing for Committee Members. An Information Sharing Event for all ECC Members had also been organised for 12 January 2012 at 2pm to help them identify what issues to be aware of when visiting care homes.

Ms Lockyer was thanked for attending and then left the meeting.

99. Forward Look

The Committee received a report (CWOP/53/11) from the Governance Officer outlining the Forward Look for the Committee and the items currently scheduled for meetings through to April 2012 and other issues that had arisen which might require scrutiny in the future. It was **noted** that the Scrutiny Board had requested that the Committee co-ordinate a cross-directorate scrutiny into absence management. Consideration was also being given to looking in future at user satisfaction for services, particularly those delivered at home for the vulnerable such as home visits. It was **agreed** that a representative from Essex Carers would be invited as an expert witness for the review of Carers Strategy.

100. Information Portal (Minute 57: 14 July 2011 refers)

The Committee received a report (CWOP/52/11) from Martin Chaney, Website Content and Strategy Manager, reporting on the consultation undertaken following the migration of content from the Putting Essex People First Information Gateway to the main Essex website. The Committee had previously given feedback on the migration in July 2011. Martin Chaney was in attendance at the meeting to introduce the item and to answer questions.

It was confirmed that ECC had sought participants in the consultation who were most likely to seek on-line information, recognising that other groups and

individuals would seek their information from other, non internet based, sources. There had been a 10% response rate to the consultation. The consultation exercise had asked for user feedback on the relevance and accessibility of the website, and suggested improvements to the signposting on the site. Many of the issues raised in response to the consultation were reiterated by Members during the subsequent discussion.

Members suggested that clearer and simpler signposting and links were required that did not involve navigation of multiple screens, links and lists, or significant screen scrolling, to access information.

Members acknowledged that some of the images, particularly those for screen reader functionality, used on the website were approved images recommended by the Office of Disability Issues. The Website and Strategy Team were looking to introduce further iconography on the website in future.

Members stressed that there needed to be on-screen transcripts of any spoken information available on the web site and that the use of Arial 14 font size, as a recognised disability access presentation, should become standard on the website. The Website and Strategy Team confirmed that they were developing an option for users to increase the font size on the web site.

The Chairman thanked the witnesses for their attendance and requested a further update from them, including a detailed action plan, in six months time. In the meantime a practical test session of the website with a small group of Members would be arranged (Councillors Higgins, Hillier, Miller and Pearson, together with P Coleing, volunteered – a representative from DEN also to be invited).

101. Date of next meeting.

It was noted that the next meeting would be held at 10am on Thursday 12 January 2011 in Committee Room 1.

The meeting closed at 11.40 am

Chairman
12 January 2012