

MINUTES OF A MEETING OF THE PEOPLE AND FAMILIES SCRUTINY
COMMITTEE HELD AT COUNTY HALL, CHELMSFORD, ON THURSDAY 12 MARCH
2015

County Councillors:

* I Grundy (Chairman)

* D Blackwell

* R Boyce

* J Chandler

* M Danvers

* K Gibbs

* A Goggin

* C Guglielmi

T Higgins

* P Honeywood

* R Howard

* A Jackson

M McEwen

* C Seagers

* J Whitehouse

Non-Elected Voting Members:

* Mr R Carson

Ms M Uzzell

*present

The following Member was also present:

Councillor K Bobbin

Item 6

The following officers were present in support throughout the meeting:

Robert Fox

Scrutiny Officer

Matthew Waldie

Committee Officer

The meeting opened at 10.00 am.

1. Apologies and Substitutions

The Chairman reported the receipt of the following apologies:

Apologies	Substitutes
Cllr T Higgins	Cllr J Whitehouse
Cllr A Jackson	

2. Declarations of Interest

There were no new declarations of interest.

3. Minutes of previous meeting

The minutes of the People and Families Scrutiny Committee meeting of 15 January 2015 were approved and signed by the Chairman.

4. Questions from the Public

There were no questions registered from Members of the Public.

5. The Care Act

Members received Report PAF/05/15, which had been considered by the Cabinet on 16 December 2014. The Chairman welcomed Cllr Dick Madden, Cabinet Member for Adults and Children, Cllr Anne Brown, Cabinet Member for Communities and Healthy Living, James Bullion, Director for Adult Operations, and William Snagge, Director of Strategic Development and Delivery, Essex Coalition of Disabled People.

Mr Bullion gave a brief presentation, highlighting certain elements.

Approximately half of those meeting the eligibility criteria for receiving adult social care come from the community, the other half from hospitals. And a proportion of people from the community would be children who continued through childhood and into adulthood with social care needs.

The Act does not fundamentally change the way in which the care system works; however, it is built around a modern interpretation of wellbeing. Some major features:

- It puts carers on the same legal footing as those they care for
- It puts prevention on a statutory footing (ie it becomes mandatory)
- It creates a legal basis for personal budgets and choice
- It creates a cap on costs of £72,000 on top of a £118,000 capital threshold, and deferred payment is possible
- Eligibility is national, and aid is portable, but there is a flexibility that allows for local situations to be taken into consideration
- Social workers have more power to ensure people receive the best provision
- New protections are in place to ensure individuals receive appropriate care.

Most features are effective from April 2015, but the extended means test, capped charging system and the care accounts have been deferred until April 2016. As for managing individuals' money, anyone using the facilities will be offered a Council Agreement, to register how much is paid out.

Financially, the changes represent a significant change in approach and so present quite a challenge to the authority.

There are three themes:

- i. Workforce & Practice. The workforce itself is an extended one, including all those who engage with the care industry. A cultural shift is required, enabling people to live their own lives, bringing in carers as well.
- ii. Culture Change & Integration. Those working for the Council are enablers rather than experts, helping people to make their own decisions and individual plans about their own lives. And Integration extends beyond

- health and social care, to involving the community itself. These are significant changes in approach.
- iii. Market. There is an emphasis on the customers, who will have choice and control. For the County Council, half of the work is assessing the situation – working with GPs and relevant parties – and the other half is the provision of suitable care. There is no direct simple correlation between the quality of care and the cost. However, there is a direct relationship between the quality of management and the quality of care.
 - iv. Demand Avoidance. Encouraging people to have greater resilience, reducing their demands on the care system and so allowing better targeting and use of resources.
 - v. Expectations. In times of austerity these must change, but this need not be a negative outcome. People will be encouraged to help themselves, which can in itself have a positive impact.
 - vi. Sustainability. This needs good leadership and management to make all these elements come together and work.

Cllr Madden confirmed that Members will receive periodic briefings to keep them informed of developments. He pointed out that “What can we do for you?” will be the mantra for those working in adult care, as it has been in children’s.

Members then received responses to a number of issues they raised.

IT will be a key factor in the success of this. Mosaic is being introduced in April, which has the capability of linking with the NHS systems. County uses the NHS number on its system, which is very important.

If someone is assessed and not found eligible for care, Essex still has a duty to offer information and guidance on organising their own care. This might include putting them in touch with a voluntary organisation.

Approximately 2000 people have accounts, and most of these have a “fully managed service,” where the patients themselves do not control the spending. At present, almost £1,000,000 is returned to the Council each year, as unused funds.

The Act does not specify a minimum time for patients to be seen, but the hospital set these and the Council can be fined if it does not meet the standard. Patients should normally be assessed within 48 hours of discharge from hospital; in reality, these range from within 4 hours (for urgent cases) to a week, although more complex cases can go beyond a month for all work to be completed.

As quality commissioners, Essex should define the standard of care provided, and these are written into the specifications. With regard to the minimum standards of pay, for example, of those providing the care, Essex is one of a range of purchasers and so is not in a strong position to directly influence how

the whole market acts. There is however a best practice that the Council follows. The level of care expected is defined, and there is a team engaged in review of services, to ensure appropriate levels of care. The system for Members' visits is currently under review and a new process will be put in place after April.

Regarding the assessment of an individual's capital situation, if there is a spouse remaining at home, then the house will not be included in the assessment, but if there is nobody remaining, then everything will usually be taken into consideration. The authority is also able to access previous financial transactions to see if efforts have been made to dispose of capital. Many of the details of how this part of the process will be accomplished have yet to be worked out.

With regard to the £72,000 cap on costs, this refers to the cost of care and so does not include 'hotel' costs. The average length of stay of a person varies: in residential care 2.4 years is typical and 18 months typical in nursing care.

There may be social pressure exerted on family, neighbours and/or friends to look after someone who really needs residential care. This is very current issue that is being considered carefully and, again, details remain to be worked out. In some locations, there are community agents in place to monitor the situation, and efforts are being made to engage other parties such as the police and fire brigade, to see how this can best be approached. It is certainly true that the work already done by families and friends is immense and is important in releasing resources to assist others. Without it, social services would be stretched to the limit.

The Government's view is that people should be encouraged to take out some kind of insurance product to cover the cost of their future care – but this seems a challenge for it to happen in large measure in the foreseeable future. The Act makes demands on the local authority to provide care, but it is as yet unclear where the money will come from. The Government has promised extra funding initially, and Essex has a balanced book for this coming year. But in 2016/17, Essex believes there will be a £40 million shortfall, and this is an issue very much under scrutiny at the moment.

Getting the message across to people, that change is imminent, will be a challenge, and is under active planning. As well as advice and support from the Council, people will be encouraged to look to their own resources more in terms of how individuals can help themselves, within their own families and communities. The voluntary sector and the internet, social media, etc, represent two channels that are critical in making people aware of these changes and in making the new system work.

Maintaining personal dignity will be a very large element of the arrangements. Essex believes this to be important and it wishes to ensure that it does not just achieve the minimal requirements of the Act but does so fully.

The Chairman thanked Cllrs Madden and Brown, Mr Bullion and Mr Snagge for their contributions and suggested that the Committee should revisit this in 2016, to monitor progress and to see how the detailed changes of the second phase would be implemented.

6. Educational Attainment Data for Essex

Members received Report PAF/05/15, providing an overview of 2014 educational achievement in Essex, with an Annex providing detailed data. The Chairman welcomed Cllr Ray Gooding, Cabinet Member for Education and Lifelong Learning, Chris Kiernan, Interim Director of Commissioning: Education and Lifelong Learning, Clare Kershaw, Head of Commissioning: Education and Lifelong Learning, Pippa Shukla, Lead Strategic Commissioner – Pupil and School Intelligence, and Huw Jones, Senior Analyst, Performance and Business Intelligence.

Cllr Gooding, introducing the item, reminded Members that the paper represented a snapshot of the situation at a particular moment, and that figures are constantly changing.

Mr Kiernan reminded Members that Essex had received £2 million of dedicated schools grant for the improvement of schools, to which the County Council had added a further £1 million. He then drew attention to certain results.

In Primary schools:

- Overall, for EYFS, Phonics, KS1 & 2 in reading writing and maths, percentages are up on 2013 within every measure; and the Essex performance is equal to or better than the East of England results in every measure but one, and is equal to or better than England results in only two measures.
- Within EYFS, Essex is at or above national average levels in all areas of learning
- KS2 attainment at Level 4+ in reading, writing and maths combined reached its highest level in 2014, on a par with the national average
- Regarding Progress from KS1 to KS2: in reading Essex is level with the national average rate; in both writing and maths Essex is below the national average, but it is diminishing the gap in both areas.

In Secondary schools:

- With regard to attainment at KS4, changes in the way the figures are calculated make comparisons with previous years inappropriate, but Essex schools have maintained their position relative to the national average
- Regarding progress from KS2 to KS4: great improvement has been shown in English, with Essex climbing above the national average, rising from 101st nationally in 2012, to 67th; in maths, in which Essex has been strong historically, its position dropped to 77th and the national average level.

For disadvantaged pupils:

- At KS2 level, the gap has lessened considerably over the past two years, now running at the national average level

- At KS4 level, comparisons are harder to make, because of the changes made last year; however, Essex children have been less affected by the changes and the gap is now at a lower level than the national one.

Regarding Ofsted reports:

- 78% of primary schools are currently rated as Good or Outstanding, up from 73% and at about the national average
- 80% of secondary schools are currently rated as Good or Outstanding, up from 71% and above the national level.

This represents real progress toward one of the County's priority areas in the ECC Commissioning Strategy Outcome 3, namely that every school in Essex be rated at least a good school.

Essex has been very pro-active with regard to school attendance levels. This is an area that Essex has been working hard on and absenteeism has dropped to 4% from 5% in 2014. This represents a significant improvement over a short period of time.

Members then received responses to a number of issues they raised.

Although there is one sort of academy in a legal sense, in practice, there are two kinds: the school that chooses to convert to academy status and the sponsored academy, which has been forced to convert following poor results.

Academies are not under the control of the local authority, but are overseen by the DFE. However, Essex has a very good relationship with the DFE and can at least act in some measure as the eyes and ears for the DFE.

At 3% non-attendance rates at Essex primary schools are almost at their minimum, given the number of pupils that may be off sick at any time. At secondary schools, parents have less control over their children's attendance, so non-attendance rates are higher across the country. Essex is in line with national rates.

When Essex decided to invest an extra £1 million into schools, it was thought best to target the entry point to the system, which means that it may take some time for results to show. Some authorities are looking with interest at what Essex has done.

The size of a school can have a significant impact on data – making the figures for smaller schools figures likely to be more volatile. Essex helps schools to present and explain their figures to Ofsted. Context is an very important element – the loss of just one member of staff can have an enormous impact on a smaller school.

Commissioners work with every school in Essex, with the aim of raising standards. They use a both national and the County's own criteria for data, and an RAG system. They will visit outstanding schools that may not have had an Ofsted inspection for a while, to provide external verification. They have also shown that getting schools to work together can help raise attainment.

Given the relatively poor results in writing at KS2, Essex is working with schools to improve writing, reading and maths. Particularly targeted are boys from a poor, white British background; this group has been shown to perform worse than other ethnic groups.

KS4 results are worse than in previous years. This results from changes in the way the figures are calculated and is mirrored across the country; and Essex has matched this drop.

Essex has taken a hard view on dealing with schools which are seen to be underperforming. The first step is to remove the powers of delegation from the governing body, which takes these from the Board of Governors and the Head Teacher, and to put in place the authority's own Body, which will then work with the leadership of the school. If necessary, the existing Board will be removed and replaced by an interim executive board, although this step needs the permission of the Secretary of State. The aim of such an interim board would be to bring about school improvement and to move the school toward becoming a sponsored academy.

This approach has proved effective and has had a knock-on effect on some other schools whose position had been poor.

The negative impact on the school and community of branding a school as "failing" was acknowledged. Essex try to react quickly, but they have no control over Ofsted, for example, and they rely on the ability to work with schools.

The Chairman thanked Cllrs Gooding and Brown, and Mr Kershaw and his Team for their visit.

7. Carers Strategy Task & Finish Group

Members received an interim report from the Carers Strategy Task & Finish Group (PAF/07/15), and the Essex Carers Strategy (PAF/08/15). The Scrutiny Officer briefly introduced the item.

There are seven recommendations in the report, six of which are directed at the Strategy Report itself – which is going for approval before April Cabinet.

The first recommendation seeks the Committee's approval for the Task & Finish Group to continue its work to the full original remit, to enable it to monitor the agreed Essex Carers Strategy in its first year and to consider any further recommendations for the Cabinet Member to consider.

The Committee AGREED to this recommendation. The Committee also agreed that it should review this in April 2016 and should receive a report from the Cabinet Member at that time.

8. Updates from Task & Finish Groups

Members received a brief oral report on the status of Task & Finish Groups:

Educational Attainment. The Group has continued to gather evidence. It has made site visits to two primary schools in the Basildon area rated good or outstanding by Ofsted. It has received evidence from the Cabinet Member for Education & Lifelong Learning, the executive director of Association of Secondary Headteachers in Essex (ASHE), the Regional Schools Commissioner for the East of England, several district councillors, and representatives of the Essex School Governors Association. Further site visits and meetings are planned. The figures presented for this meeting would be considered.

9. Scrutiny tracker and work programme

The Committee noted the tracker and work programme, and the in particular the new format.

It was noted that there should be a new work programme in place in June.

10. Date of next meeting

The Committee noted the date of the next meeting: Thursday 21 May 2015.

It also noted that the meeting would take place in Harlow, at a venue and time to be confirmed.

The meeting closed at 12:30 pm.

Chairman