MINUTES of the meeting of the HEALTH AND ADULT CARE SCRUTINY SUB-COMMITTEE, held on OCTOBER 13 2008 at 7:00PM at the Town Hall, Peckham Road, London SE5 8UB

PRESENT: Health and Adult Care members:
Councillor Adedokun Lasaki [Chair]
Councillor Susan Elan Jones [Vice-Chair]
Councillor Michelle Holford
Councillor Caroline Pidgeon
Councillor Martin Seaton
Councillor Danny McCarthy

ALSO PRESENT:
Councillor David Noakes

OFFICERS PRESENT:
Sarah Feasey – Principal Lawyer
Ruth Abe – Scrutiny Team

ALSO PRESENT:
Rod Craig, Director of Client Group Commissioning, Southwark Health & Social Care
Susanna White, Chief Executive [Southwark PCT] and Strategic Director of Health & Community Services
Michael Parker, Chairman King’s College Hospital NHS Foundation Trust

APOLOGIES FOR ABSENCE

Apologies were received from Councillor Jonathan Mitchell.

NOTIFICATION OF ANY OTHER ITEMS WHICH THE CHAIR DEEMS AS URGENT

None.

DISCLOSURE OF INTERESTS AND DISPENSATIONS

None.
RESOLVED: That the minutes of the Health and Adult Care Scrutiny sub-committee meeting held on 8th September 2008 be agreed as an accurate record of the meeting.

That the following Agenda Item for Foundation Trusts be included in the work plan:

1. What are you doing to engage patients and the local community in the Foundation Trust? What difference has it made being a Foundation Trust? What has it enabled you to do differently than you would have been able to do as a normal NHS Trust?

2. What added value has the community got from your hospitals as a direct result of you being a Foundation Trust?

ELIGIBILITY CONSULTATION BEFORE EXECUTIVE DECISION- Introduction to the Eligibility Consultation process by Cllr. David Noakes followed by a presentation by Rod Craig, Director of Client Group Commissioning, Southwark Health & Social Care

1. The chair welcomed Cllr. David Noakes, executive member for health and adult care.

1.1 Cllr. David Noakes explained that the consultation on eligibility has taken place because of the council’s need to find budget savings. The council has continued to offer moderate, substantial and critical care but demand in social care has continued to exceed the resources the council has put in and therefore has not kept up with inflation.

- People are living longer therefore more people will need social care
- More people with complex needs are also living longer
- Southwark is currently one of only eight boroughs in London still offering moderate level of care.

Cllr. Noakes stressed that it is important to note that Southwark council has done a lot to manage the budgets for instance increase in charges for meals on wheels. He explained that the government is currently debating on how councils manage their adult social care and emphasised that councillors should understand why cuts are being made.

1.2 Rod Craig gave his presentation on Access to Adult Social Care Services. He gave detailed presentation of the process and consultation findings please see Item 11.

1.3 The chair invited queries and suggestions from members. The following queries were raised:

1.4 A member asked how many service users in Southwark are currently receiving substantial and critical care levels of services. Rod Craig responded that about 2000 service users in Southwark have been assessed as needing substantial and critical care.

1.5 A member asked how much Southwark typically spends on the provision of care for an individual service user with substantial or critical care needs. Rod Craig responded that it is difficult to be precise as there are so many users with different care needs for example, services users with mental health, users with complex care needs etc.
1.6 In relation to moderate level of care, a member asked Cllr. Noakes how he (Cllr. Noakes) would compare the standard of care being provided by those London councils that are currently providing moderate level of care to their service users to that being provided by Southwark council. Cllr. Noakes responded that it is difficult to make informed comparison on how the above councils manage or provide the moderate level of care. However, Southwark’s immediate neighbours, Lambeth, Lewisham and Croydon are no longer providing moderate level of care to their service users.

1.7 A member commented that this is an emotive subject as it is about vulnerable people. He said that social infrastructures have changed and by taking away the moderate level of care more people could end up in care in the long term he emphasised that more people will suffer because some services users may not be given the appropriate services to meet their needs. The member commented that people living next to each other who are currently receiving moderate care may end up with different level of care needs after the re-assessment. Therefore if one of the users is assessed as needing more care than the other, a problem may arise because the user who has not been assessed as needing the higher level of care may complain. He further queried whether the savings i.e budgetary cuts from the adult social care budget was going to be diverted to another section/department. The member queried whether decisions were going to be taken out for review, and reiterated that the council needs to ensure that what it is doing is right.

1.8 Cllr. Noakes responded to the member’s comments that the consultation process is taking place because this council needs to look at its budget. As a member of the executive he has a duty to ensure the council’s finances are balanced.

1.10 Cllr. Jones asked Cllr. Noakes and Rod Craig a series of questions:

(i). Cllr. Jones stated that in 2007/2008, the Council spent money on consultants, payments for housing staff as part of the ‘Change for the better’ programme, etc is on track to spend more money this year on agency staff. She added that the council is committed to spending more money for a new building in Tooley Street. She emphasised that there is money for all this, yet not to keep services for elderly and disabled people at their current excellent level.

(ii). Cllr. Jones queried if these proposals will raise costs for both the council and other bodies, rather than lower them, due to increased demand for preventative services and the effects of withdrawing support for those at ‘moderate’ care level. What assessment has been made of this possibility?

(iii). She asked when the re-assessments will be carried out and what is the minimum notice that any service user will receive of the withdrawal of their care? Cllr. Jones queried whether all those currently in receipt of moderate care are guaranteed its continuation until the end of March 2009.

(iv). She asked if the council can be assured that this is a real commitment to intensive monitoring and not simply a tick-box exercise? How will the monitoring of the impact of service withdrawal on users, carers and service providers be carried out and over what timescale?
(v). Cllr. Jones asked can you provide further details of the proposed ‘re-design’ of the community equipment and telecare services? Is this re-design intended to be budget neutral?

(vi). Cllr. Jones asked given the increased reliance that Southwark proposes for those at moderate care level or risk on their families for care and other support, how does the council intend to assist those whose families cannot or will not support them?

(vii). Cllr. Jones asked what evidence has the council gathered from other local authorities where similar changes have been made on the impact of the changes on the mental health of those losing their eligibility to services and of the impact on local mental health services?

1.12 Cllr. Noakes and Rod Craig responded to the member’s comments and questions as follows:

1.13 (i). Cllr. Noakes responded that council staff currently based at Southwark Town Hall are moving to Tooley Street because the Southwark Town Hall building is expensive to run. He explained that the Tooley Street building is financially viable and as a consequence the council will save money.

(ii). Rod Craig responded that any change in the eligibility criteria will raise costs to carers. He explained that it is extremely difficult to make any clear outcome or predict what the spending would be. He added that the council has worked hard to rehabilitate some service users to become more independent and reduce costs.

(iii). Rod Craig responded that when services are being withdrawn away from existing users with moderate care needs, the services will have to be withdrawn in a measured way so that not all are withdrawn at the same time in March 2009.

(iv). In relation to monitoring, Rod Craig responded that the council will use the quality assurance technique and professionals such as social workers to do the assessments on all of the 1000 service users currently receiving moderate level of care.

(v). In terms of the proposed ‘re-design’ of the community equipment and telecare services, Rod Craig responded that service users will have alarm systems, care line alarms, zimmer frames, and other preventative services and adaptations that are more cost effective.

(vi). Rod Craig responded that the council does not expect service user’s family to take on caring roles.

(vii). Rod Craig responded that the council has good drop-in services available for mental health service users. He further stated that carers, police officers, wardens and everyone in the community need to understand that they have a duty to care for people in Southwark and this could be assisted by providing service users with high quality information and signposting (by making known where one can find assistance) appropriate services.
1.14 A member queried how the council would save money on cutting down services for users with learning disabilities as their need are so high. Having noticed the ethnic breakdown see pp.8 in the report Access to Adult Social Care, the member further commented that there are so many gaps in services (dietary, social, cultural etc) and stated that he did not believe that the gaps in services would be met. The member queried whether the consultation exercise is about saving money and if the money saved from the cuts in services delivered to adults with moderate level of care, would be diverted somewhere else.

Cllr. Noakes responded to the member’s query on saving money, that the proposed cuts in adult care services is being carried out so that the council can save money. However the money saved by cutting services from vulnerable adults with moderate care needs will not be diverted anywhere else. He asserted that making cuts in the budget, the council will control and manage the budget effectively see paragraphs 36 and 38. In regards to cuts in services for people with learning disabilities, Susanna White responded that the council does not expect this proposal to affect learning disabilities service users. Currently around 20 service users with learning disabilities have been assessed as needing moderate level of care. All of the 20 service users are supported by the Supporting People funding and receive professional support from the multi-disciplinary team. Susanna White stated that cuts in services will affect health during discharge from hospital and rehabilitation see paragraph 26. She commented that it is important the council ensures that people have proper services in place before they are discharged from hospital. She added that although it is difficult to monitor services, the council will however use its resources to monitor services carefully and very closely.

1.15 A member asked how many people currently receiving moderate level of care that may move onto higher or lower level of care. Rod Craig responded that the council does not have any statistics for this. He explained that ethnic diversity may affect a person’s risks and needs assessment because of language barrier, culture, isolation etc. However a good assessor will always look into areas such as language, culture, food, social isolation etc. whilst carrying out the assessments and at the same time apply equal opportunities and ensure that an action plan is in place. The council would be more proactive and provide the basic services for example accessibility and basic equipments to service users in order to avoid premature residential and nursing care placement.

1.16 A member queried how service users who are currently receiving moderate care needs will cope once the current care service is taken away from them (see paragraph 41 pp. 39). Rod Craig responded that the council have been reviewing how to meet these needs. There is a need to focus on preventative services such as carers grant, sheltered housing etc so that service user’s needs can be met.

1.17 The chair thanked Cllr. Noakes for his answers and for attending.
1.18 Following a vote, the following resolution was agreed.

1. We acknowledge the outcomes and analysis of the consultation and recognise that a decision to raise eligibility will have an adverse effect on some service users.

2. However we note the difficult financial context in which this decision must be taken and are satisfied that the Executive and officers have exhausted all alternative options to ensure a balanced budget before proposing this difficult option.

3. We further note that Southwark is currently one of only eight Councils in London which continues to provide care to those with a moderate need, and that this is strong evidence of how difficult it is to continue to provide this level of service in the current funding climate.

4. We acknowledge that, should a decision to restrict eligibility be taken, no-one will have care withdrawn without a comprehensive review and assessment to establish their current eligibility by a specialist team of experienced team of social workers.

5. We are keen for officers to ensure that the assessment process is consistent and that all efforts are made to ensure that users are informed about the process, the impact on them individually and any additional services which they might access.

6. We appreciate the steps which the specialist team propose to put in place to reduce and minimise the impact of a decision to restrict eligibility to those currently assessed as ‘moderate’ who may lose their care.

7. We welcome the ongoing efforts of the Council’s Executive to lobby for a review of the funding formula for social care with the local Government Grant Settlement.

2.0 UPDATE ON SAVINGS MADE BY SEPTEMBER 2008 – A report by Rod Craig, Director of Client Group Commissioning

2.1 A member commented that there has been reconfiguration at day centres in Southwark council. The member queried whether the day centre reconfiguration was due to the fact that day centre services were becoming unpopular because there are better services that can meet the needs of service users in the community. Susanna White responded that the less popular day centres are in the North of the borough and have spare capacity. In the South the day centres are more used and usually have full capacity. She added that when service users are in receipt of direct payment services, they tend to opt out of day care services. She informed members that currently building works are in progress in the two day centres (Evelyn Coyle and Southwark Park) and once completed in October /November the day centres will be merged to one site. The council is still operating Evelyn Coyle day centre.

2.2 A member commented that about £400K was saved when some changes were made in management and administration in various projects. However the £400K did not appear to have an impact on projects and services. Susanna White responded that this was a grant given by the government and it is called the Access and System and Capacity Grant. The grant covers some of the delayed discharge funding.
A member asked Susanna White what changes have been made in access to social care (see paragraph 3), and queried if Susanna White would explain the reasons why more service users are choosing frozen meals over hot meals (see paragraph 5).

In reference to changes to access to social care, Susanna White responded that there has been the reallocation of carers grant money managed through carers strategy forum. There was a reduction of £200K and reduced services to carers but not a reduction in respite. In reference to service user’s choice of frozen meals over hot meals (see paragraph 5) Susanna White responded that she will get back to members on this matter.

**RESOLVED:**

The report was noted.

The meeting closed at 9:00 pm.

**CHAIR:**

**DATE:**