

**ADULT SOCIAL SERVICES POLICY OVERVIEW AND
SCRUTINY COMMITTEE**

MINUTES of a meeting of the Adult Social Services Policy Overview and Scrutiny Committee held in the Council Chamber, Sessions House, County Hall, Maidstone on Tuesday, 30 March 2010.

PRESENT: Mr P W A Lake (Chairman), Mrs A D Allen, Mr R Brookbank, Mr L Christie, Mrs P T Cole, Mr N J Collor, Mr J Cubitt, Mr D A Hirst, Mr M J Jarvis, Mr S J G Koowaree, Mr J E Scholes and Mr C P Smith

ALSO PRESENT: Mr M J Angell and Mr G K Gibbens

IN ATTENDANCE: Mr O Mills (Managing Director - Adult Social Services) and Miss T Grayell (Democratic Services Officer)

UNRESTRICTED ITEMS

46. Minutes of the meeting held on 13 January 2010
(Item A3)

RESOLVED that the minutes of the meeting held on 13 January 2010 are correctly recorded and that they be signed by the Chairman.

There were no matters arising which were not already covered by other items on the agenda.

47. Chairman's Announcements
(Item A4)

1. The Chairman stated his intention to visit the Boughton Mount Centre later in the month as he was unable to take part in the visit already arranged for 7 April. He invited any Member of the POSC who wished to accompany him on the second visit to do so. The outcome of the public consultation exercise about the closure and alternative service provision would be reported to the POSC's next meeting on 25 June 2010.

2. There had been media coverage that morning of the White Paper, which was due to be published later in the day.

48. Cabinet Member's and Director's Update (oral)
(Item A5)

1. Mr Mills announced that the White Paper would be published at lunchtime on the same day as the POSC meeting, and undertook to send all POSC Members a copy of the Paper and any responses to it which were issued in the following days. He added that the presentation on Active Lives at the County Council meeting on 1 April would be updated to take account of the impact of the White Paper, although Mr

Gibbens added that he hoped the latter would not make any significant change to the County Council's Active Lives strategy.

2. Mr Mills reported that the Personal Care at Home Bill was continuing its progress through Parliament, and was due to return to the House of Commons shortly, so it would soon be possible to see its implications for the KCC. Mr Gibbens said the proposals in the Bill were continuing to receive media coverage so were being kept in the public eye. He repeated the view that he had voiced when the Bill had been debated by the POSC at its January meeting, that the Bill's proposals were simply not affordable in the current economic climate.

3. Mr Mills reassured Members that the post of Director of Operations would not be deleted from the establishment but would be appointed to as soon as a suitable candidate could be found. Unfortunately, it had not been possible to shortlist any of the candidates who responded to the advertisement, so the post was still unfilled. There was a shortage of suitable candidates for this sort of post, so other local authorities across the UK were experiencing the same problem, but Mr Gibbens emphasised that it was this and not any financial issue which had prevented the post from being filled. Mr Mills set out how the work would be allocated in the interim period, with himself taking a lead on mental health issues and Margaret Howard taking on a general deputy role.

49. Presentation - Safeguarding Adults

(Item)

Mr M Thomas-Sam, Head of Policy and Service Standards, was in attendance for this and the following item.

1. Mr Mills and Mr Thomas-Sam presented a series of slides setting out definitions and statutory guidance relating to adult safeguarding and the way in which issues were addressed by multi-agency working.

2. It was acknowledged that the presentation and items B1a and B1b on the agenda were very closely linked, and the discussion which arose from the presentation included points which could equally relate to the other items. In discussion of the issue, and in Mr Mills' and Mr Thomas-Sam's responses to Members' questions, the following points were highlighted:-

- a) the increase in the number of safeguarding alerts could be explained partly by an increase in care staff's understanding of the issue and willingness to report suspected abuse. It is vital that care staff are fully trained and know what to look for and what to do. The identity of 'whistleblowers' is now more protected and they feel more able to report poor practice;
- b) KASS officers work closely with Children's Social Work colleagues to look at safeguarding issues which might arise in any family unit. It was always more difficult to identify safeguarding issues amongst families who were not known to Social Services, and difficult to reach those who did not attend day centres, children's centres, etc, but partner organisations could help to reach them;

- c) it is also difficult for some vulnerable people to be able to identify that they are being mistreated and that there are people who can help them. It was suggested that a wallet-sized card could be produced which would set out key signs to help identify abuse and how and where to report incidents and access help;
 - d) KCC needed to be able to ensure that care staff (e.g., those working in residential homes) are being given appropriate training, and would need to be confident that all partner organisations were equally committed to delivering training and addressing the issue. Working with trade associations would spread the message to those homes who were members of one, and the joint KCC/NHS Quality in Care Initiative set out a preventative approach to safeguarding within care homes, agreeing a plan of action to address areas for improvement and monitoring progress;
 - e) for the 1500 adults with learning difficulties who had been placed in Kent by other local authorities, responsibility for safeguarding issues fell to KCC, not the placing authority; and
 - f) the structure of the Kent and Medway Safeguarding Vulnerable Adults Board had been inspected by the Care Quality Commission in March 2009 and had been praised. Mr Mills assured Members that he was confident that it was fit for purpose, although the structure would shortly be reviewed.
3. RESOLVED that the information given in the presentation and in response to Members' questions be noted, with thanks, and that KASS officers take forward Members' suggestion of a wallet-sized card setting out key signs to help identify abuse and how and where to report it and access help.

50. Safeguarding Adults Annual Report 2008/09

(Item B1a)

Mrs P Huntingford, Transforming Social Care Lead Officer, was in attendance for this and the following item.

1. Mr Mills and Mr Thomas-Sam introduced the item and assured Members that, although the annual report presented at the meeting was for 2008/09, the report for 2009/10 would be presented to the POSC in autumn 2010, and that, thereafter, reports would be presented annually in a regular pattern.
2. In discussion, and in Mr Mills', Mr Thomas-Sam's and Mrs Huntingford's responses to Members' questions, the following points were highlighted:-
 - a) although the number of staff training sessions delivered had reduced, Members were reassured that training had not been cut back but had been delivered in fewer, larger sessions, to include all staff;
 - b) Members expressed concern that the personalisation agenda meant that clients engaging care staff directly would be potentially more vulnerable to making a bad choice and being at risk of mistreatment.

Mrs Huntingford agreed that this had been a concern when moving to personalised care, but that this concern had not been borne out by national evidence, which had not shown any increase in the levels of risk;

- c) Mrs Huntingford reassured Members that safeguarding was explicit in all staff roles, both for KCC staff and those employed by partner organisations, and was built into the contractual and funding arrangements between KCC and its partners; and
- d) Kent was a net 'importer' of clients placed by other local authorities, and the responsibility for a client's safeguarding passed with them to Kent. This was a major issue for authorities across the UK, and Mr Gibbens said that Kent should continue to lobby vigorously to change this trend.

3. Throughout discussion of this item, Members made a number of detailed comments on the layout and presentation of the information included in the annual report and made suggestions for changes which would make future reports fuller and clearer. Officers welcomed these comments as helpful feedback and undertook to address them when preparing the 2009/10 annual report.

4. RESOLVED that the information set out in the report and given in response to Members' questions be noted, with thanks, and that Members' comments and suggestions on the layout and content of the information be taken into account when preparing the 2009/10 annual report.

51. Care Quality Commission - Annual Performance Assessment Report for Adult Social Care

(Item B1b)

1. Mrs Huntingford introduced the report and answered questions from Members. Points highlighted were as follows:-

- a) Members welcomed the report and the improvement in the number of 'excellent' scores achieved, compared to previous years;
- b) in the personalisation agenda, advocacy increased in importance, as KCC had less influence over who was employed by a client using direct payments; and
- c) Mrs Huntingford said she was confident that the KASS officers who met with the CQC inspectors in December 2009 and March 2010 had presented the fullest information possible to meet their requirements and that the inspectors had been satisfied.

2. RESOLVED that the information set out in the report and given in response to Members' questions be noted, with thanks.

52. Kent Adult Social Services Debt Position, February 2010

(Item B2)

Miss M Goldsmith, Directorate Finance Manager, was in attendance for this item.

1. Mr Gibbens welcomed the inclusion of this item on the agenda as an excellent example of the POSC exercising its scrutiny role. The item had been specifically requested when the POSC had considered its regular budget monitoring report at its January meeting.

2. Miss Goldsmith introduced the report and pointed out that this was the first year in which debt figures had been reported to the POSC, in response to the POSC's request to see them, having previously only been reported to the Governance and Audit Committee.

3. The main type of debt was client-related debt, split between secured and unsecured. Cases in which a debt is secured against the client's home needed to be also carefully monitored, as some properties may now be worth less than the value of the debt secured against them.

4. It is anticipated that the new system of managing debt, introduced in January 2010, would have a beneficial effect. The original Visiting Officer who carried out the initial financial assessment would contact a client as soon as the client defaulted on a payment, then visit again regularly to encourage payment, the aim being to address the situation early and prevent the debt from building to an unmanageable level.

5. In discussion, and in response to Members' questions, the following points were highlighted:-

- a) Members welcomed the more transparent way of reporting debt, the new system of debt management, to address debt while low to avoid it getting out of hand, and the positive effect this seems to have had in reducing number of cases of outstanding debt;
- b) when considering writing-off a debt, cases were always considered individually, never *en bloc*. Only debts of over £10,000 would be referred to the Governance and Audit Committee. Miss Goldsmith undertook to provide Members outside the meeting with a breakdown of the number of cases, the size of debts being written off;
- c) the role of the KCC's Internal Audit Unit was discussed, and Miss Goldsmith agreed to ask them to look at both the debt recovery process and the write-off procedures;
- d) Mr Mills emphasised that client debt and debt management was taken very seriously, and a decision to write off a debt would only be taken if there was no chance of retrieving the amount owed, or if doing so would be uneconomical, compared to the amount owed;
- e) having assessed a client's ability to pay when assessing their care package, KCC had a duty to collect the payments due for the services

provided. Not to do so would disadvantage those clients who paid regularly and responsibly;

- f) much of the debt existing when the new debt management system was introduced in January 2010 was historical, so it was not yet possible to identify how much the new system would help to identify new clients who might be likely to get into debt in the future;
- g) apart from client-related debt, the other main type was NHS debt, which registered as a 'debt' each month mainly due to the timing of payments. This type of debt did not build up in the same way as client debt, and was currently at its lowest level ever; and
- h) there was no benchmarking system which would allow Kent to compare its level of debt with those of other local authorities. Kent had a higher level (45%) of clients paying using direct debit than most other local authorities (30 - 40%).

6. RESOLVED that the information given in the report and in response to Members' questions, be noted, with thanks.

53. 'Live it Well' - Mental Health Strategy for the Next Five Years (Item C1)

Ms L Kavanagh, Director of Commissioning for Mental Health, NHS Medway, and Mr D Woodward, Social Care Commissioner for Mental Health, were in attendance for this item.

1. Ms Kavanagh introduced the report and emphasised that, as the first joint Mental Health and Care Strategy, it set out a new and different approach to Mental Health care provision. The draft strategy set out ten commitments, to meet four key aims, and the main part of the document set out how these ten commitments would be achieved. POSC Members had the opportunity to comment on the strategy as part of the six-week public consultation exercise.

2. In discussion, the following comments were made:-

- a) Members welcomed the opportunity to comment on the draft strategy, and praised its excellent, clear layout and the wording of the ten commitments;
- b) it would be good to include some comments from service users as part of the foreword;
- c) it would be useful to cross-reference the Live it Well strategy with the reports produced by the Autistic Spectrum Disorder and Alcohol Misuse Select Committees, and the three would make a useful suite of related documents;
- d) the need for good training for GPs, to help them identify Mental Health issues, perhaps delivered jointly with training for social care providers,

was important and should be emphasised. Joint training will establish useful links between the two disciplines;

- e) the importance of good housing provision for clients with mental health needs should also be emphasised;
- f) the strategy was certainly visionary and aspirational, but its proposals were not costed. Members would need to be confident that proposals were practical and deliverable; and
- g) the key performance indicators given for each of the ten commitments did not include any indicators for reducing the number of suicides.

3. Mr Mills confirmed that the implementation of the strategy would be monitored and an annual report made to the POSC.

4. RESOLVED that the draft Live it Well strategy be welcomed, and the comments contributed by Members, set out in paragraph 2 above, be taken into account as part of the consultation exercise.

54. Adult Social Services Budget Out-turn Report 2009/10 for the Third Quarter

(Item C2)

Miss M Goldsmith, Directorate Finance Manager, was in attendance for this item.

1. Miss Goldsmith introduced the report and said the Directorate was committed to achieving a balanced budget at the end of the financial year.

2. RESOLVED that the information in the report and given in response to Members' questions be noted, with thanks.

55. Update on Select Committee Work

(Item F1)

1. Miss Grayell reported that, at its meeting on 19 March, the Extended Services Select Committee had elected Mr R B Burgess as its Chairman.

2. In response to a question from Mr Christie, the Chairman said that the Scrutiny Board on 22 April would discuss and decide the way forward for the Dementia Select Committee.

3. RESOLVED that:-

- a) the progress of the Renewable Energy and Extended Services Select Committees, the further Select Committee work which is planned to start in the summer of 2010, and the arrangements for monitoring the outcomes of the Autistic Spectrum Disorder (ASD) Select Committee, one year on from the publication of its report, be noted; and.
- b) Members consider if there are any topics they would like to put forward for possible inclusion in the future topic review programme, and advise the Democratic Services Officer of any such topics.