

ADULT SOCIAL CARE CABINET COMMITTEE

Friday, 17th May, 2019

10.00 am

Darent Room - Sessions House

AGENDA

ADULT SOCIAL CARE CABINET COMMITTEE

Friday, 17 May 2019 at 10.00 am
Darent Room - Sessions House

Ask for: **Emma West**
Telephone: **03000 412421**

Tea/Coffee will be available 15 minutes before the start of the meeting

Membership (15)

Conservative (12): Mrs P T Cole (Chairman), Ms D Marsh (Vice-Chairman), Mrs C Bell, Mrs A D Allen, MBE, Mrs P M Beresford, Mrs S Chandler, Ms S Hamilton, Mrs L Hurst, Mr D D Monk, Mrs P A V Stockell and Vacancy x2

Liberal Democrat (2): Mr S J G Koowaree and Ida Linfield

Labour (1) Dr L Sullivan

Webcasting Notice

Please note: this meeting may be filmed for the live or subsequent broadcast via the Council's internet site or by any member of the public or press present. The Chairman will confirm if all or part of the meeting is to be filmed by the Council.

By entering into this room you are consenting to being filmed. If you do not wish to have your image captured please let the Clerk know immediately

UNRESTRICTED ITEMS

(During these items the meeting is likely to be open to the public)

- 1 Introduction/Webcasting Announcement
- 2 Election of Vice-Chairman
- 3 Membership
To note that Mr Homewood has resigned as a Committee Member.
- 4 Apologies and Substitutes
To receive apologies for absence and notification of any substitutes present.
- 5 Declarations of Interest by Members in items on the agenda
To receive any declarations of interest made by Members in relation to any matter on the agenda. Members are reminded to specify the agenda item number to which it refers and the nature of the interest being declared.

- 6 Minutes of the meeting held on 12 March 2019 (Pages 5 - 14)
To consider and approve the minutes as a correct record.
- 7 Verbal Updates by Cabinet Member and Corporate Director (Pages 15 - 16)
To receive verbal updates from the Cabinet Member for Adult Social Care and the Corporate Director of Adult Social Care and Health.
- 8 Adult Social Care and Health (including Lifespan Pathway) Safeguarding Arrangements (Pages 17 - 28)
To receive a report which provides an update on the improvements that have been made to the management of the Older Persons Residential and Nursing Contract and options for its renewal.
- 9 Older Person's Residential and Nursing Contract Update (Pages 29 - 38)
To receive a report which provides an update on the improvements that have been made to the management of the Older Persons Residential and Nursing Contract and options for its renewal.
- 10 Work Programme 2019-20 (Pages 39 - 44)
To receive a report from General Counsel on the committee's work programme.

EXEMPT ITEMS

(At the time of preparing the agenda there were no exempt items. During any such items which may arise the meeting is likely NOT to be open to the public)

Benjamin Watts
General Counsel
03000 416814

Thursday, 9 May 2019

Please note that any background documents referred to in the accompanying papers maybe inspected by arrangement with the officer responsible for preparing the relevant report.

KENT COUNTY COUNCIL

ADULT SOCIAL CARE CABINET COMMITTEE

MINUTES of a meeting of the Adult Social Care Cabinet Committee held at Darent Room - Sessions House on Tuesday, 12th March, 2019.

PRESENT: Mrs P T Cole (Chairman), Mrs C Bell (Vice-Chairman), Mrs P M Beresford, Mrs S Chandler, Mrs M E Crabtree (Substitute for Ms D Marsh), Mrs T Dean, MBE (Substitute for Mr S J G Koowaree), Ms S Hamilton, Mrs L Hurst, Ida Linfield, Mrs P A V Stockell (Substitute for Mrs A D Allen, MBE) and Dr L Sullivan

ALSO PRESENT: Graham Gibbens

IN ATTENDANCE: Michelle Goldsmith (Finance Business Partner - Adult Social Care and Health), Clare Maynard (Head of Commissioning Portfolio - Outcome 2 and 3), Anthony Mort (Policy Manager), Richard Smith (Interim Portfolio Manager), Penny Southern (Corporate Director, Adult Social Care and Health), Hannah Stone (Transformation Project Manager), Michael Thomas-Sam (Strategic Business Adviser, Social Care), Anne Tidmarsh (Director of Adult Social Care and Health Partnerships), David Whittle (Director of Strategy, Policy, Relationships and Corporate Assurance) and Emma West (Democratic Services Officer)

UNRESTRICTED ITEMS

134. Membership
(Item. 2)

The Committee noted that Mr Pascoe was no longer a member of the Committee and that Mrs Bell has taken over as Vice Chairman from Ms Marsh.

(Post meeting note – it was clarified that when the meeting was held Ms Marsh had not formally resigned as Vice-Chairman. Formal notification was received on 26 March 2019 and an item would be placed on the agenda of the next meeting of the Committee to note the resignation from this role and elect a Vice-Chairman.)

135. Apologies and Substitutes
(Item. 3)

Apologies had been received from Mrs Allen, Mr Homewood, Mr Koowaree, Ms Marsh and Mr Monk.

Mrs Stockell attended as a substitute for Mrs Allen, Mrs Dean attended as a substitute for Mr Koowaree, and Mrs Crabtree attended as a substitute for Ms Marsh.

136. Declarations of Interest by Members in items on the agenda
(Item. 4)

No declarations of interest were received.

137. Minutes of the meeting held on 22 January 2019
(Item. 5)

RESOLVED that the minutes of the meeting of the Adult Social Care Cabinet Committee held on 22 January 2019 are correctly recorded and that they be signed by the Chairman.

138. Verbal Updates by Cabinet Member and Corporate Director
(Item. 6)

1. Graham Gibbens (Cabinet Member for Adult Social Care and Public Health) gave a verbal update on the following issues:

a) Kent and Medway Joint Health and Wellbeing Board

The Kent and Medway Joint Health and Wellbeing Board had recently focused on addressing health inequalities across Kent. Mr Gibbens expressed the importance of addressing health inequalities and confirmed that a report would be submitted to the Health Reform and Public Health Cabinet Committee on 13 March 2019 which would set out the work that Kent County Council had undertaken to collaborate and coordinate a whole-systems approach through the Sustainability Transformation Partnership, and with wider partners, to address widening health inequalities.

b) Meeting with Age UK Chairs in Kent

An annual Age UK meeting took place on 25 February 2019 in which the Chairmen of Age UK's across the county gathered together to discuss the proposed plans to change Age UK's current grant arrangements to a commissioned basis. Mr Gibbens said that the event was well attended and that the discussions in relation to supporting small organisations and providing better outcomes for Kent residents were positive.

c) Safeguarding Update

A Safeguarding Member's briefing took place on 26 February 2019 and case studies which related to safeguarding issues in Kent were shared.

d) Sustainability and Transformation Plan Update

A Local Government Association summit took place on 27 February 2019 which focused on addressing local care needs, reducing admissions to A&E and increasing focus in relation to GP practices.

2. In response to a question relating to accommodation for ex-offenders, Mr Gibbens confirmed that Kent County Council received a letter from the Ministry of Justice which could be shared with Members of the Committee outside of the meeting. The letter stated that The National Probation Service for England and Wales were responsible for caring for individuals on a one-to-one basis once they had been released from custody. He said that a further update on the matter could be provided at the next meeting of the Committee.
3. Penny Southern (Corporate Director of Adult Social Care and Health) welcomed Richard Smith (Interim Portfolio Manager) to his first meeting of the Adult Social Care Cabinet Committee, and then she gave a verbal update on the following issues:

a) Past Year Reflection

Mrs Southern reflected upon the key events and achievements within Kent County Council's Adult Social Care and Health directorate in 2018, as she had been in post as Corporate Director of Adult Social Care and Health for a year. Some of the key events highlighted were: staff members had been shortlisted for the Social Worker of the Year awards, the Kent Supported Employment team received two awards, the County Placement team received a Chairman's Award, and Emma Peasgood, a Senior Practitioner Social Worker received a scholarship from the Winston Churchill Memorial Trust and visited Finland and Sweden to work with Deaf children, digital technology global screening, and Kent's Learning Disability Services Day Opportunities received a Chief Constable certificate.

b) Visit to Hertfordshire

Mrs Southern talked about a recent visit to Hertfordshire and said that a positive meeting had taken place in which Kent County Council and Hertfordshire County Council shared knowledge and experiences in relation to Adult Social Care and Health and obtained information relating to Hertfordshire County Council's 15-year direction of travel, accommodation strategy and assisted technology strategy.

4. RESOLVED that the verbal updates be noted.

139. 18/00067 - Proposed Revision of Rates Payable and Charges Levied for Adult Services in 2019-20
(Item. 7)

Ms Goldsmith (Finance Business Partner – Adult Social Care and Health) was in attendance for this item.

1. Ms Goldsmith introduced the report which set out the proposed rates and charges for Adult Social Care Services for the forthcoming financial year, along with any potential changes to the Adult Social Care charging policy.

Ms Goldsmith then responded to comments and questions from Members, including the following: -

a) Ms Goldsmith referred to the pay award for 2019-20 and confirmed that the rates payable and charges levied for adult social care services for 2019/20 would increase by either the council's agreed pay award for 2019/20 of 2.8% or in line with the Consumer Price Index as at September 2018 of 2.4%. She said that whilst it was unlikely that the rates payable and charges levied for adult social care services for 2019/20 would be reviewed, a key decision would be brought to the Adult Social Care Cabinet Committee in such an instance.

b) Ms Goldsmith referred to Client Contributions for Residential Care within the report and confirmed that the preservation of the status quo was open-ended, although a key decision would be brought to the Adult Social Care Cabinet Committee if it were to be reviewed.

2. RESOLVED that the decision proposed to be taken by the Cabinet Member for Adult Social Care and Public Health, to

- a) approve the proposed changes to the rates payable and charges levied for adult social care services in 2019-20 as set out in sections 2.5.1, 2.5.2, 2.6.4, 2.8.3, 2.10.2, 2.10.3, 2.12.1, 2.13.1, 2.14.1, 2.16.1, 3.2 and 3.3 of the report; and
- b) delegate authority to the Corporate Director for Adult Social Care and Health, or other nominated officer, to undertake the necessary actions to implement the decision,

be endorsed.

140. 19/00011 - Partnership Arrangements for the Provision of Mental Health Social Care and Health Services in Kent
(Item. 8)

Ms Stone (Transformation Project Manager) was in attendance for this item.

1. Ms Stone introduced the report which set out details relating to the review of the current legal arrangements supporting the partnership working between Kent County Council and Kent and Medway Partnership Trust to deliver mental health social care and health services across Kent.

Mrs Southern then responded to comments and questions from Members, including the following: -

- a) Mrs Southern said that many productive changes were being made in relation to mental health social care and health services and emphasised the importance of integrated working.
- b) Mrs Southern talked about the effectiveness of partnership working within social care and health and the need to work seamlessly with individuals in mental health. She suggested that a progress report be submitted to a future meeting of the Committee, Members of the Committee supported this.
- c) Mrs Southern referred to the Cabinet Member decision which had been taken in July 2017 (17/00053 - Direction of future provision of social care and support to adults with mental health needs) and briefly explained the importance of the decision-making process.
- d) Mrs Southern drew Member's attention to the background documents that were listed within the report and explained the rationale behind each stage of the journey.
- e) Mrs Southern said that robust processes were in place in relation to confidentiality within mental health social care and health services and explained how information could be shared across social care systems.
- f) Mrs Southern provided further information to Members in relation to The Forensic Service and explained that social workers undertook forensic training which allowed them to work with individuals with complex needs that had been discharged from acute care hospitals.

2. Mr Gibbens (Cabinet Member for Adult Social Care and Public Health) reiterated the importance of mental health services and the need for a progress report to be submitted to a future meeting of the Committee.
3. RESOLVED that the decision proposed to be taken by the Cabinet Member for Adult Social Care and Public Health, to
 - a) approve the new legal framework to support the partnership arrangements for the provision of mental health social care and health services in Kent; specifically, approval for Kent County Council to terminate the existing Kent County Council and Kent and Medway Partnership Trust Section 75 Agreement (based on mutually agreed termination between Kent County Council and Kent and Medway Partnership Trust) and approval for Kent County Council to enter into a Service Level Agreement with Kent and Medway Partnership Trust; and
 - b) delegate authority to the Corporate Director of Adult Social Care and Health, or other nominated officer, to undertake the necessary actions to implement the decision,

be endorsed.

141. Care and Support in the Home Services (Phase 1)
(Item. 9)

Ms Schneider (Senior Commissioner) and Ms Maynard (Head of Commissioning Portfolio - Outcome 2 and 3) were in attendance for this item.

Prior to the discussion, Ms Schneider provided a Care and Support in the Home Cluster Map to Members of the Committee as an additional piece of information.

1. Ms Maynard introduced the report which set out the process and outcome in relation to undertaking the procurement of the new integrated Care and Support in the Home Service for adults and children with assessed needs from April 2019.

Ms Schneider and Ms Maynard then responded to comments and questions from Members, including the following: -

- a) Ms Maynard talked about Kent's consideration for small providers within the service and said that within the lotting strategy, Kent had restricted the number of providers within each of the lots and the amount of lots that each provider could bid for to ensure that smaller providers were encouraged to work and form partnerships with other providers.
- b) Ms Schneider referred to the cluster map that was provided to Members of the Committee as additional information and said that Kent had worked closely with providers to ensure that all areas within each of the clusters were covered.
- c) Ms Schneider talked about the relationship between providers and individual's that received the care and support in the home services and

said that measures were in place to ensure that disruption to residents was minimal and to maintain continuity of care.

- d) Ms Maynard confirmed that care workers within the workforce received the National Living Wage.
- e) Ms Tidmarsh talked about the support that was offered to providers in relation to learning and development and said that a learning and development hub was available which was part-funded by the NHS and Kent County Council, and Kent County Council were launching a Leadership strategy, training and support for providers to assess development needs and be of support in every way possible. She confirmed that the majority of the training support that was offered to providers was funded by Health and Social Care to support the sector.
- f) Ms Maynard referred to the award criteria and quality questions appendix within the report and confirmed that the criteria and questions were regularly reviewed to ensure that they accommodated changing needs.
- g) Ms Schneider referred to the cluster map that was provided to Members of the Committee as additional information and talked about provision and workforce issues in Sevenoaks, Canterbury, Dartford, Gravesham and Swanley.
- h) Ms Southern talked about the robust contingency plans that were in place within Adult Social Care and Health in regard to Brexit.
- i) Ms Tidmarsh added that the contract would allow staff to work in a more flexible way and said that a pilot would be undertaken to understand how best to incorporate night-time cover for individuals.
- j) Ms Maynard explained the moderation process in detail, and the advantages and disadvantages of the process.

2. RESOLVED that the report be noted.

142. Community Navigations (Care Navigation and Social Prescribing Service)
(Item. 10)

Members of the Committee indicated that they would be referring to information contained within the exempt appendices and therefore consideration of this item was deferred to the exempt part of the meeting (Minute 149 below refers).

143. Community Day Opportunities for Individuals with Disabilities (SS15087)
(Item. 11)

Ms Sheppard (Commissioning Manager - Community Support) and Ms Maynard (Head of Commissioning Portfolio - Outcome 2 and 3) were in attendance for this item.

- 1. Ms Sheppard and Mrs Southern introduced the report which provided an update on the Community Day Opportunities for Individuals with Disabilities

Contract and detailed the background to the recommissioning of day opportunities and the performance of the current contract.

Ms Sheppard and Mrs Southern then responded to comments and questions from Members, including the following: -

- a) Ms Sheppard said that the Community Day Opportunities for Individuals with Disabilities was a contract specifically for individuals with disabilities, as opposed to older people with dementia.
- b) Ms Sheppard referred to the figures detailed within the report in relation to lot providers and explained the importance of tracking the number of contract providers that delivered lots and the number of providers that worked with individual contracts.
- c) Mrs Southern talked about Kent County Council's robust in-house market commissioning and how gaps were identified and addressed.
- d) Ms Sheppard said that Kent had liaised with providers in relation to supporting and encouraging individuals with disabilities into employment. Mrs Southern emphasised the positive progress that Kent had made in regard to supporting individuals with disabilities into employment and the range of opportunities that were available to assist with ensuring that these individuals entered and remained in employment.

2. RESOLVED that the report be noted.

144. Development of the Strategic Delivery Plan
(Item. 12)

Mr Whittle (Director of Strategy, Policy, Relationships and Corporate Assurance) was in attendance for this item.

- 1. Mr Whittle introduced the report which set out the Strategic Delivery Plan (SDP) which would become the strategic business plan for Kent County Council, which supported the delivery of the outcomes in the Strategic Statement.

Mr Whittle, Ms Tidmarsh and Mr Thomas-Sam then responded to comments and questions from Members, including the following: -

- a) Mr Whittle and Ms Tidmarsh confirmed that although information relating to staffing, workforce and career pathways was not contained within the SDP, it would be covered in Adult Social Care and Health's directorate strategies.
- b) Mr Whittle confirmed that he would liaise with Corporate Board to find out whether or not they wished to include recommendations from recent Select Committee meetings relating to social isolation within the Strategic Delivery Plan, as the Select Committee had not been concluded during the timeframe in which the plan had been developed.
- c) Mr Whittle said that a statistical analysis indicated that a projected 73% of shortlisted activity identified the need for strategic commissioning

support. He talked about the advantages of the SDP, one key advantage being that the plan allowed officers to identify areas in need of strategic commissioning support more easily.

- d) Mr Whittle referred to the compliance risks that had been raised within the SDP in relation to the sufficiency of equalities and data protection analysis and recognised that the number of Equality Impact Assessments (EQIA) that were undertaken needed to increase. He added that the Corporate Management Team and the General Counsel were providing leadership on the issue to ensure that activity would be unable to proceed without having met compliance requirements and address any immediate risks.
- e) Mr Whittle said that many district Council's in Kent had requested a refreshed Kent Design Guide to assist with planning documentation. He added that Kent County Council Member's had commented on the need for environmental needs and place-shaping to be reflected more strongly within the SDP. He reassured Members of the Committee that the Leader of Kent County Council had recognised the need to refresh Kent County Council's Strategic Statement.
- f) Mr Whittle referred to the new approach for Business Planning for 2019/20, for which a report was submitted to the Policy and Resources Cabinet Committee in June 2018 and said that elected Members had been actively engaged in the development of the SDP through the Commissioning Advisory Board, Political Group meetings and Member's briefings. He added that a review of the business planning process would take place and a report on the review would be submitted to a future Policy and Resources Cabinet Committee meeting.
- g) Mr Whittle talked about integration and partnership working and emphasised the importance of public services collaborating and integrating with partners, working across the public, private and voluntary and community sectors and added that he recognised the need to review Kent County Council's Voluntary and Community Sector policy.
- h) Mr Whittle referred to specific issues raised by Members which had not been contained within the SDP and said that the issues were addressed within detailed directorate strategies. He added that he would provide further information to Members of the Committee outside of the meeting in relation to addressing period poverty in Kent.
- i) Mr Gibbens (Cabinet Member for Adult Social Care and Public Health) welcomed the SDP and emphasised the importance of addressing social isolation and loneliness in Kent.
- j) Mr Whittle reassured Members of the Committee that they could direct any additional comments that they had in relation to the SDP to him.

2. RESOLVED that the report be noted.

(Dr L Sullivan asked that her vote against the recommendation be recorded in the minutes)

145. Risk Management - Adult Social Care
(Item. 13)

Mr Mort (Customer Care and Operations Manager) was in attendance for this item.

1. Mr Mort introduced the report which set out a brief summary of the risks associated with Adult Social Care.
 - a) Mrs Southern talked about the risks that were associated with the Adult Social Care and Health system replacement from Swift to Mosaic and the future developments that were taking place.
2. RESOLVED that the report be noted.

146. Adult Social Care Performance Dashboard
(Item. 14)

1. Mrs Southern introduced the report which set out the performance dashboard which provided Members with the progress against targets set for key performance and activity indicators for January 2019 for Adult Social Care.
 - a) Ms Tidmarsh referred to the figures within the Performance Dashboard and highlighted the positive trend in individual's that were able to remain independent for longer and said that fewer people required ongoing domiciliary care.
 - b) Mr Gibbens (Cabinet Member for Adult Social Care and Public Health) and Mr Thomas-Sam referred to a health inequalities tracker which was a key policy objective within the NHS' long-term plan and Mr Thomas-Sam confirmed that he could provide further information to Members of the Committee outside of the meeting in relation to the work that Public Health were undertaking with Kent's CCG's on addressing health inequalities in Kent.
 - c) Ms Tidmarsh referred to the figures which related to Social Care delays within the Performance Dashboard and commented on the positive progress that had been made throughout the last two years on improving delays within Social Care.
 - d) Mr Gibbens, Mr Thomas-Sam and Mrs Southern referred to Adult Social Care's Deprivation of Liberty Safeguards (DoLS) backlog project and explained the application process in relation to DoLS applications. Mr Gibbens said that the increasing number of DoLS applications was a national issue.
 - e) Mrs Southern talked about the number of people in Kent with mental health needs that had been provided with care and support packages and said that the demand for care and support packages had been met.
2. RESOLVED that the report be noted.

147. Work Programme 2019/20
(Item. 15)

1. RESOLVED that the work programme for 2019/20 be noted, subject to the inclusion of the following items:
 - Annual Equalities Report
 - Community Based Welling Service Contract Update
 - Partnership Arrangements for the Provision of Mental Health Social Care and Health Services in Kent (19/00011)

148. Exclusion of Press and Public

RESOLVED that under Section 100A of the Local Government Act 1972 the press and public be excluded from the meeting for the following business as it involves the likely disclosure of exempt information as defined in paragraph 3 of Part 1 of Schedule 12A of the Act.

Exempt Items
(open access to minutes)

149. Community Navigations (Care Navigation and Social Prescribing Service)
(Item 10)

Ms Sheppard (Commissioning Manager - Community Support) and Ms Maynard (Head of Commissioning Portfolio - Outcome 2 and 3) were in attendance for this item.

1. Ms Sheppard introduced the report which summarised the activity and outlined both the process and outcome of the procurement exercise for the provision of a Community Navigation and Social Prescribing Service.

Ms Sheppard and Ms Maynard responded to comments and questions from Members, including the following: -

- a) Ms Sheppard confirmed that a young carer's contract was available within Kent's Commissioning team for children and young people that cared for relatives with disabilities.
 - b) Ms Sheppard talked about contract investments and the different types of service lots within the contract.
 - c) Ms Sheppard emphasised the importance of communication and talked about the communication methods that were being used for both stakeholders and individuals.
 - d) Ms Sheppard and Ms Maynard talked about the variety of providers that were available and explained the provider evaluation process.
2. RESOLVED that the report be noted.

From: **Graham Gibbens, Cabinet Member for Adult Social Care and Public Health**
Penny Southern, Corporate Director of Adult Social Care and Health

To: **Adult Social Care Cabinet Committee – 17 May 2019**

Subject: Verbal update by the Cabinet Member and Corporate Director

Classification: Unrestricted

Electoral Divisions: All

The Cabinet Member will verbally update Members of the Committee on: -

- 19 March – Attended a meeting at the Diocese of Canterbury regarding Safeguarding the vulnerable
- 21 March – Spoke at the Esther Inspiration Day
- 12 April – Visited the Canterbury Oast Trust & Rare Breeds Centre with Penny Southern and the Chairman of the Council
- 23 April - Observed the CHOC and MDT Meeting at Northgate Medical Centre in Canterbury

The Director of Partnerships, Anne Tidmarsh (covering for the Corporate Director) will verbally update Members of the Committee on: -

- Update on the Adult Social Care and Health Structure
- Care Sector Workforce Development

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From: Graham Gibbens, Cabinet Member for Adult Social Care and Public Health
Penny Southern, Corporate Director of Adult Social Care and Health

To: Adult Social Care Cabinet Committee – 17 May 2019

Subject: **Adult Social Care and Health (Including the Lifespan Pathway Service) Safeguarding Arrangements**

Classification: Unrestricted

Past Pathway of Paper: Adult Social Care Cabinet Committee 30 November 2018

Future Pathway of Paper: None

Electoral Division: All

Summary: This report provides an overview of how safeguarding activity is undertaken across the Adult Social Care and Health, including the Lifespan Pathway Service, Directorate. It will provide clarity as to the different functions and accountabilities within the operational and strategic elements of the service, as well as details of the function of the Kent and Medway Safeguarding Adults Board. The report will also provide clarity and detail as to how the new Strategic Safeguarding Service will function.

Recommendation(s): The Adult Social Care Cabinet Committee is asked to **CONSIDER** and **COMMENT ON** the content of this report.

1. Introduction

- 1.1 This report follows on from the paper previously presented to the Adult Social Care Cabinet Committee on 30 November 2018, which detailed the design and implementation of the new Adult Social Care and Health (including the Lifespan Pathway Service) Operating Model.
- 1.2 It will provide an overview of the changes which have taken place within the Operational Services including the Deprivation of Liberty Safeguards (DoLs) Team as well as an insight into the new Strategic Safeguarding arrangements and the Kent and Medway Safeguarding Adults Board (KMSAB). The report will provide oversight and describe the governance arrangements together with the responsibilities and accountabilities across the spectrum of safeguarding as the Adult Social Care and Health (including Lifespan Pathway Service) Directorate continues to move towards a single operating model which is aligned to Local Care and delivers outcome focused care to all the people we support.

2 Strategic Statement and Policy Framework

2.1 There are a number of national and local policy initiatives that have helped shape the new operating model and will support the delivery of the council's strategic outcomes. The key relevant national drivers in respect of this area of work include:

- **Mental Capacity Bill** The introduction of the Bill marked the beginning of the replacement of the Deprivation of Liberty Safeguards (DoLS) with Liberty Protection Safeguards (LPS)
- **Think Local Act Personal (TLAP)** The sector wide framework for person centred care and support planning.
- **Care Act 2014** The legislation describes the responsibilities of the Principal Social Worker, specifically in respect of this work as requirement that "Local authorities should therefore, ensure that principal social workers lead on ensuring the quality and consistency of social work practice in fulfilling its safeguarding responsibilities."

2.2 The key adult social care strategies and documents that have supported the development of the new operating model are detailed below:

Your Life, Your Wellbeing: A vision and strategy for adult social care 2016 – 2021 was endorsed by the Adult Social Care and Health Cabinet Committee on 6 December 2016. The strategy was refreshed in October 2018 to respond to the changing environment with a new vision and strategy for adult social care by bringing together all our change and improvement work into a single new operating model across adult social care, children and young people with a disability. The ambitions in the strategy will be accomplished by working together with our partner organisations using a shared approach to deliver care and support.

<https://www.kent.gov.uk/about-the-council/strategies-and-policies/adult-social-care-policies/your-life-your-wellbeing>

Kent and Medway Safeguarding Adults Board Annual Report 2017/18

This was presented to full County Council on 13 December 2018. The document is available on the following link:

https://www.kent.gov.uk/_data/assets/pdf_file/0009/14040/Kent-and-Medway-Safeguarding-Adults-Board-annual-report.pdf

3. Kent and Medway Safeguarding Adults Board

3.1 The Kent and Medway Safeguarding Adults Board (KMSAB) is a statutory service which exists to make sure that all member agencies are working together to help keep Kent and Medway's adults safe from harm and protect their rights. The Board is chaired independently and meets three times a year. Board Membership includes the following agencies.

- Kent County Council
- Medway Council
- Health – Kent and Medway Clinical Commissioning Group

- NHS England
- South East Ambulance Service (SECAMB)
- Healthwatch
- Kent Mental Health Trust
- Kent Police
- Kent Fire and Rescue Service
- Prison Service
- District Council Chief Executive
- Kent Integrated Care Alliance (KICA)

3.2 Kent County Council representatives on the Board are the Cabinet Member for Adult Social Care and Public Health and the Corporate Director of Adult Social Care and Health.

3.3 The board's work is supported by the following working groups:

- Quality Assurance Working Group (QAWG)
- Learning and Development Working Group (L&DWG)
- Practice, Policy and Procedures Working Group (PPGWG)
- Risk Threats and Vulnerabilities Working Group (RTVWG)
- Safeguarding Adults Review Working Group (SARWG)

3.4 Each group relies on multi-agency collaborative working.

3.5 The board is hosted within the Adult Social Care and Health Directorate and the board support team sits within the line management of the Head of Strategic Safeguarding, Practice and Quality Assurance (Principal Social Worker). The board team is funded by multi-agency contributions and Kent contributes £110,000 to the overall costs.

4. Strategic Safeguarding

4.1 The structure and function of strategic safeguarding activity was subject to a period of formal consultation which commenced in December 2018. At the conclusion of this a finalised structure was published and recruitment activity expedited. The new structure was implemented on 2 April 2019. The strategic function now sits within the Business Deliver Unit in the Strategic Safeguarding, Practice and Quality Assurance Service. A structure chart for this service is attached as Appendix 1.

4.2 The Strategic Safeguarding, Practice and Quality Assurance Service will initially focus on developing and embedding a quality assurance framework and set of standards to support practice and performance across the directorate, building and maintaining a high practice performance culture across safeguarding and social care. The council's Internal Audit Service is acting in an advisory capacity to ensure that the framework and its intrinsic processes are both rigorous and robust.

- 4.3 The new Policy, Practice and Strategic Safeguarding Manager will work with the Practice Development Officers, Policy and Quality Assurance Team and the Strategic Safeguarding Team to take collective responsibility for quality monitoring processes, professional standards and audit. This will establish a culture of continuous improvement as part of a reflective approach to practice support and guidance to secure sustainable service improvement and excellent outcomes for service users and their families. The support will be informed by outcomes from the audit process as well as national and local drivers.
- 4.4 The Strategic Safeguarding, Practice and Quality Assurance Service will lead the safeguarding and quality assurance audit processes across the directorate to promote effective safeguarding and quality practices. The audit process will capture a broader spectrum of practice, to consider both those adults who are within the focus of a safeguarding enquiry and those in receipt of services to meet their care and support needs. This broadened approach will build upon learning from recent Serious Adult Reviews and Domestic Homicide Reviews, as the subject were often not considered in the context of a safeguarding enquiry. This approach will promote professional curiosity and build upon the culture of reflective and inquisitive practice.
- 4.5 In order to provide support and challenge to operational teams the County Safeguarding Group will be chaired by the Head of Strategic Safeguarding, Practice and Quality Assurance and attended by representatives from the Strategic Safeguarding, Practice and Quality Assurance Service together with operational safeguarding leads. Attendees at the meeting are required to act as a conduit for promote effective information sharing through the breadth of the directorate. This meeting in turn reports to the Divisional Management Team Safeguarding Group, for which a quarterly report, which includes both quantitative and qualitative information is provided to support a focused discussion.

5. Operational Safeguarding within the Divisions

5.1 Central Referral Unit (CRU)

- 5.1.1 This service, hosted within the Older People and Physical Disability (OPPD) Division, acts as the point of entry for all new adult safeguarding referrals and provides a consultation service to partners to support appropriate referrals being made or signposting in the event that an alternative approach might be considered. The service commence any safeguarding activity necessary to ensure that this progressed in a timely way, any ongoing activity is passed to the appropriate service. This service is to be reviewed in line with the continued organisational redesign.

5.2 Lifespan Pathway Service

Disabled Young Persons Team (DYPT) (18- 25)

- 5.2.1 The Lifespan Pathway Service was implemented in April 2017. Safeguarding activity within this service can be complicated because staff are required to

follow two legislative frameworks given that they work with both children and young adults. Since 1 April 2019 the service now has its own Specialist Senior Practitioner for Safeguarding and DoLS; one in East Kent and one in West Kent. They are line managed by the DYPT Area Managers.

Community Learning Disability Teams (26 +)

- 5.2.2 Since 1 April 2019 the Safeguarding Adults at Risk Co-ordinators (SARC) now oversee and hold the designated senior officer role for all safeguarding concerns and consultations. There are five SARCs, who are line managed by the LD Safeguarding Service Manager.

5.3 Community Mental Health and Social Care Service

- 5.3.1 Safeguarding activity has been overseen by staff employed by the council since April 2016. This arrangement predates the transfer of Community Mental Health Social Care Teams in October 2018 and the Approved Mental Health Practitioners (AMHP) in April 2019 back to KCC management. Safeguarding enquiries are overseen by area co-ordinators and the process is well understood by social care practitioners.

5.4. Older People and Physical Disability

- 5.4.1 This specialism has undergone the greatest change as the new operating model which was implemented in August 2018. This saw the establishment of Promoting and Supporting Independence Teams/Services as well as specialist Social Work and Safeguarding Services Countywide. This has enabled a sharper focus on those identified with the most complex and enduring needs and supported more focused and rigorous safeguarding enquiries when necessary.
- 5.4.2 The additional capacity together with improved performance reporting tools has facilitated a more rigorous approach to safeguarding enquiries and quarter on quarter the data continues to improve. The table, attached as Appendix 2, demonstrates the service improvement in relation to the focus on closing longstanding investigations together with an improved focused and attention to timeliness in the new structure.
- 5.4.3 A Quality in Care team has also been established to focus on supporting service improvement for residential providers where safeguarding concerns are the most concerning. This is further complemented by the work of the Design and Learning Centre which offers peer learning for service providers to support standards to be raised across the provider estate.

5.5 Deprivation of Liberty Safeguards (DoLS)

- 5.5.1 The Deprivation of Liberty Safeguards is the procedure prescribed in law when it is necessary to deprive of their liberty a resident or patient who lacks capacity to consent to their care and treatment in order to keep them safe from harm. The Supreme Court judgement in March 2014, referred to the “acid test” to

identify if a person was being deprived of their liberty and referred to two specific questions:

- Is the person subject to continuous supervision and control? and
- Is the person free to leave?

5.5.2 This led to a national surge in referrals and Kent established a DoLS team with the Strategic Safeguarding Service in order to manage the demand. Rigorous screening of applications has developed in sophistication and nationally the use of the Association of Directors of Adult Social Services (ADASS) screening tool has supported an approach which ensures that the most vulnerable are assessed as a priority. However, demand for assessments has continued to outstrip the assessment resource available and a backlog of assessments continued to build. This was mitigated in Kent by the inception of a DoLS Backlog Project in February 2018. The detail of the impact of this project will be covered separately later in this report.

5.5.3 The Countywide DoLS service function was considered within the context of the Countywide review of Safeguarding Arrangements. This acknowledged that the scale and nature of the work being undertaken would be more appropriately sited within an operational service. Given the demographic of the client group OPPD was identified as the appropriate location. The service has therefore been transferred to the line management of the service whilst continuing to provide assessment for adults of any age. The function and future operational structure of the service is currently being considered and will be re-designed taking into account the much awaited legislative changes which will come about when the Liberty Protection Safeguards Bill (LPS) is implemented in Spring 2020.

5.6 Deprivation of Liberty Backlog Project

5.6.1 In February 2018 Kent County Council secured one-off funding of £1.54m for the processing of historic non-prioritised DoLS applications, received up to and including 31 March 2017.

5.6.2 A project team was set up, comprising of a team manager (one day per week), a project lead (full time), two authorisers (14.5 hours per week) and two full time administrators.

5.6.3 An external provider, ICS Assessment Services, was commissioned to undertake the Best Interests Assessments (BIA) from 23 July 2018. The terms of the contract are flexible to maximize the output from the funding secured, to automatically terminate upon the depletion of funding or after 24 months, whichever occurs first.

5.6.4 Mental Health Assessments are provided by SEMAS, the same contractor for the priority DoLS applications. The SEMAS contract was extended to become co-terminus with the BIA contract, pending changes in legislation, so they can be let as one contract in the future, if necessary.

5.6.5 The project team periodically undertake data cleansing of the backlog folders (post April 2017), and regularly report on the backlog of applications received post April 2017. The table below provides the last six months' figures.

NON PRIORITY (BACKLOG SINCE APRIL 2017)				
PERIOD	Remaining backlog Apr 2017 - Mar 2018	Remaining backlog Apr 2018 - Mar 2019	Applications received per month	% Prioritised
Oct, 2018	1954	1409	525	40%
Nov, 2018	1749	1587	484	44%
Dec, 2018	1713	1785	357	42%
Jan, 2019	1620	2063	516	41%
Feb, 2019	1564	2189	471	42%
Mar, 2019	1535	2410	475	41%

5.6.6 Based on the current rate of assessments and authorisations, the project will conclude processing all backlog within scope (up to April 2017), significantly ahead of the planned end date of 31 July 2020. There is an opportunity to maximise the project output with effective deployment of available resource to tackle additional backlog cases, post April 2017. This was discussed at the Safeguarding and Quality Assurance Directorate Management Team meeting on 7 May 2019 and it was agreed further scoping work would be undertaken to maximise the investment opportunity. This is particularly important in light of recent criticism of Staffordshire Council by The Local Government Ombudsman for having no plan in place to tackle their cases awaiting assessment.

6. Conclusions

6.1 As demonstrated in this report the directorate continues to focus on practice improvement, with a clear purpose and focus on ensuring that those in greatest need are provided with a timely and focused intervention. The recent redesign activity has established a firm foundation on which continuous improvement can continue.

7. Recommendation(s)

7.1 Recommendation(s): The Adult Social Care Cabinet Committee is asked to **CONSIDER** and **COMMENT ON** the content of this report.

8. Background Documents

Report to Adult Social Care Cabinet Committee on 30 November 2018

<https://democracy.kent.gov.uk/documents/s88089/Item%208%20-%20Adult%20Social%20Care%20and%20Health%20including%20Lifespan%20Pathway%20Service%20New%20Operating%20Model.pdf>

Equality analysis: liberty protection safeguards - Mental Capacity (Amendment) Bill

<https://www.gov.uk/government/publications/mental-capacity-amendment-bill-equality-analysis>

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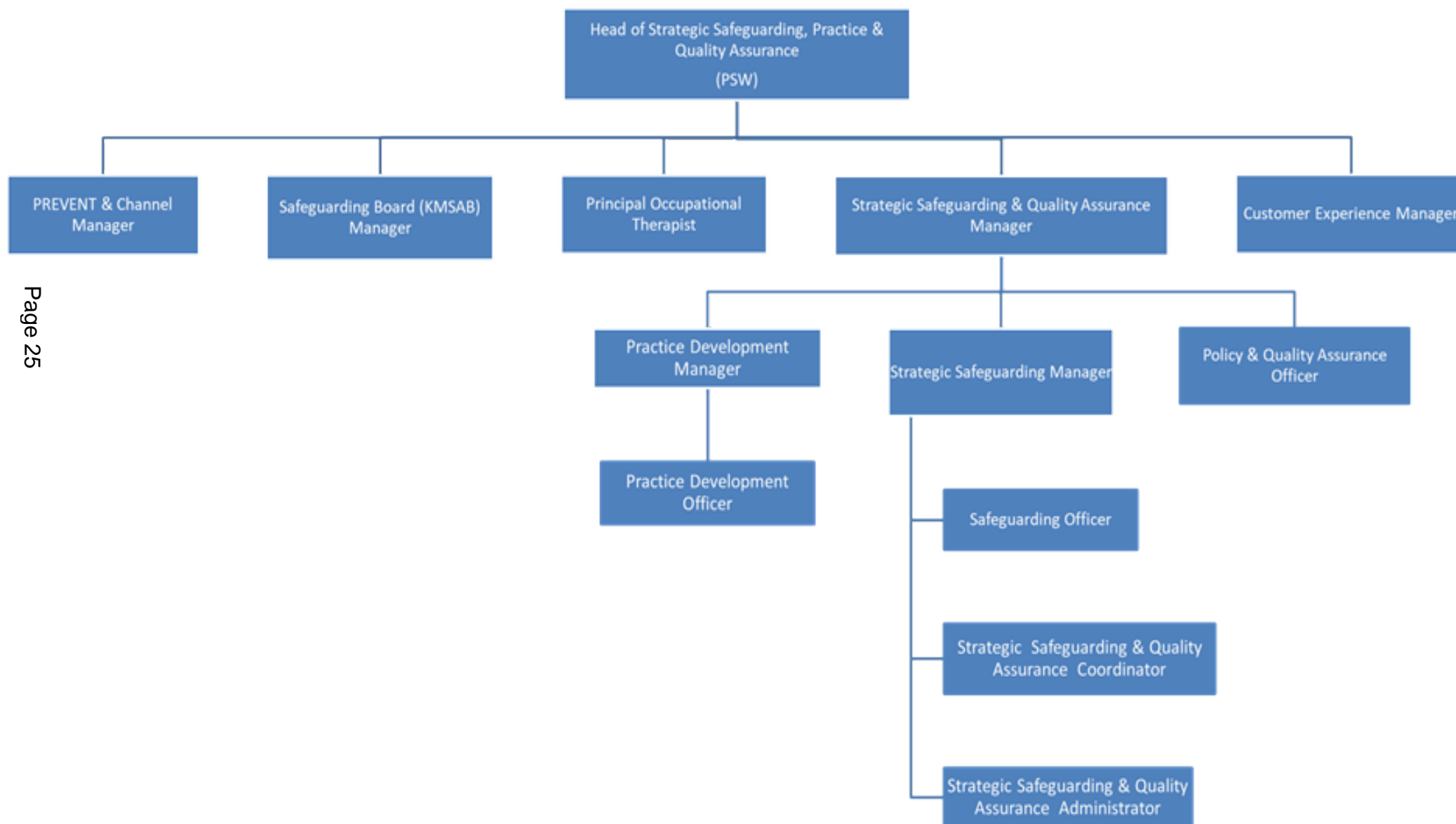
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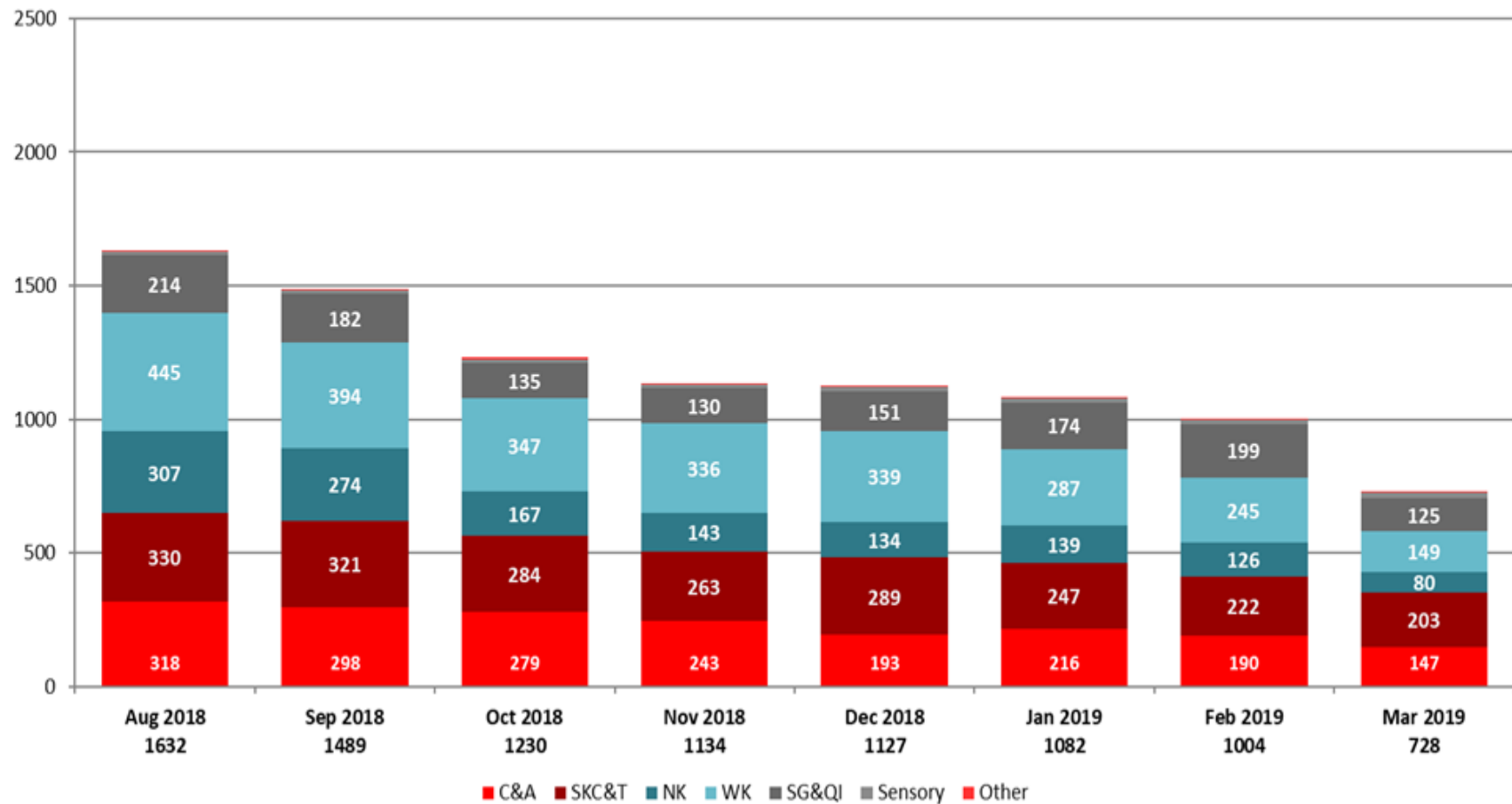
Strategic Safeguarding, Practice and Quality Assurance Service Structure Chart



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Number of Open Safeguarding Cases

Total Number of Open Safeguarding Cases



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From: Graham Gibbens, Cabinet Member for Adult Social Care and Public Health
Penny Southern, Corporate Director of Adult Social Care and Health

To: Adult Social Care Cabinet Committee – 17 May 2019

Subject: **Older Person's Residential and Nursing Contract Update**

Classification: Unrestricted

Past Pathway of Paper: None

Future Pathway of Paper: None

Electoral Division: All

Summary: To update on the improvements that have been made to the management of the Older Persons Residential and Nursing Contract and options for its renewal. To provide details of future improvements being made to contract management within Adult Social Care contracts to enable improved management going forward.

Recommendation(s): The Adult Social Care Cabinet Committee is asked to **CONSIDER** and **COMMENT** on the content of the report.

1. Introduction

1.1 This report provides an update on the Older Persons Residential and Nursing Contract (SS14142) and focuses on Contract Management improvements. Regular progress updates have been taken to Contract Management Review Group (CMRG) since June 2018, where significant progress has been demonstrated. These improvements and developments are now being rolled out across all other contracts within Adult Social Care.

2. Strategic Statement and Policy Framework

2.1 This report links to the third strategic outcome:

- Older and vulnerable residents are safe and supported with choices to live independently.

2.2 This report does not relate to a plan or strategy set out in the Council's Policy Framework (Appendix 3 of the Constitution).

3. The Report

- 3.1 The current Older Persons Residential and Nursing Contract commenced in April 2016. The contract was administered via an updated Dynamic Purchasing System (DPS) where care homes can join the contract at any time in order to be a contracted provider to Kent County Council. Providers set Indicative (maximum) Rates for each care type that they provide, and this is used in conjunction with the council's Guide Prices in order to set the rate for a client entering a home.
- 3.2 There is an initial four-year contract period with two extensions of 12 months each, taking the total contract duration to six years. Following discussions with Kent Integrated Care Alliance (KICA) it is intended to enact these extensions on the basis that contract improvements can be made (as detailed in this report). It is therefore intended that the contract will run until 31 March 2022.
- 3.3 There are currently 194 providers on the DPS and the total annual spend (including non-contracted) is in the region of £100m per annum giving a total contract value of approximately £600m.
- 3.4 The following options have been considered and include:
- **Do Nothing / Extend the current contract:** there are a number of issues which need to be resolved in the current contract identified by our Operational colleagues, via CMRG and via our relationships with Providers and KICA. Therefore, it is deemed that doing nothing or extending the current contract as-is is not a viable option as this will leave a number of issues unresolved.
 - **Extend the current contract with in-contract improvements:** following discussion with Providers and KICA there is an appetite both internally and externally to improve the current contract and make it work better for all.
 - **Retender the service:** we have the option to retender as early as 2019 for the commencement of a new service in April 2020. However, it is not felt that we would gain significant benefits from this approach and it may lead to budget pressures which we would be unable to sustain. There also needs to be significant work done with Health for any future contract to be fit for purpose.
 - **Retender the service with Health synergies:** it is felt that any future contract should be closely aligned to the work that is done by our Health and CCG partners. We currently commission independently and any future contract should look at pulling this together in order to obtain the integration and economies of scale benefits that this will bring. This is not an easy task and therefore the time until 2022 will allow the appropriate planning and preparation.

3.5 A number of contract improvements have been made to date while others are still in development. Below is a summary of these.

3.5.1 Improvements delivered to date

- The processes for administration of the DPS have been reviewed, improved, standardised and updated
- A dashboard has been developed to cover all spend, cost, Care Quality Commission (CQC) information, sanctions, quality, contact information, etc. in one place. This is being developed via the Spend and Cost Oracle system and in the future should be accessible by all teams. Please refer to Appendix 1 for screenshots of the current system. This dashboard will be used to inform which homes are visited and how often based on the 'Kent Model' risk model (as explained in the next point).
- Development of a 'Kent Model' is in progress. This is a risk matrix consisting of ten criteria which are independently RAG rated. Combining these gives the provider a score out of 100 where those with the lowest scores (RED) present the largest risk to the council. Over time it is hoped to link this with the Spend and Cost data to give a complete picture of the service. Please refer to Appendix 2 for screenshots of the current model.
- Contract monitoring resources still remain an issue, however the systems development work taking place will allow for a risk-based approach to contract management/monitoring. Resources have recently been realigned to Clinical Commissioning Group (CCG) areas and will continue to be reviewed moving forward, once the Primary Care Networks (PCN) have been defined. Please refer to Appendix 3 which shows the intention for PCNs along with a map of Ashford and the potential services that a Locality Commissioner will look to integrate with.
- All new contracts are now signed electronically and stored within provider folders to ensure consistency going forward. In the future, this will be via the contract management system.
- A new Key Performance Indicator (KPI) system has been recently implemented for distribution and collection utilising Microsoft Web Forms. This offered efficiencies to both the council and its providers, and a far simpler method than previously employed. Further improvements are possible, and we will continue to look for these. These will feed into the risk matrix and contract management system in time.
- The contract change process has been reviewed, standardised, and documented to ensure the same process happens each time
- Discussions with KICA have taken place for in-contract improvements and these will need to be continued and expanded. The Older Persons Residential and Nursing Contract began in April 2016 and runs until March 2020. There are two twelve-month extensions giving an end date of March

2022. It is intended to take these extensions to allow time to make in-contract improvements and to plan for Health integration in the future contract.

- Extensive work has taken place with colleagues in the Analytics team and are starting to reap the benefits from better data than we have ever had before. This will assist in the future with analysis and planning for any future tenders and contract management itself.

3.5.2 Improvements in progress

- Roles and responsibilities need to be clarified with Operations, the QI team, County Placement Team, Safeguarding for care home monitoring, issue resolution etc.
- Further improvements and development are possible with the implementation of a Contract Management system which has now been approved.
- The implementation of the Adult Social Care and Finance System, Mosaic, will bring further opportunities for improvements in data quality and analysis.
- The new performance reporting system, Power BI, will bring improved performance reporting, and a further information resource that can be used to analyse and link to the dashboard.
- Formal processes need to be established to review the contract, as part of the 2020 retender with all appropriate stakeholders. This will include engagement with providers and KICA
- Provider relationships also need to be improved including communication, attendance at forums/meetings, and the systems offered to them to supply information.
- An in-depth provider survey is being developed which will be distributed via Microsoft Web forms. This will obtain key information for each care home going forward which can feed into the County Placement Team database and provide vital information to the complex needs panel

4. Financial Implications

- 4.1 Implementation of a Contract Management module is planned for 2019. This has been specified and market tested and is available from the current supplier of the Kent Business Portal (Proactis). It is expected to be available in August 2019. There is funding required for this which was obtained via Budget Delivery Group in March 2019.

5. Conclusions

- 5.1 The contract management improvements being made, and the introduction of new tools will allow for better management of contracts and potential risks. The contract management module will enable all information to be held in one place and accessible to all and will be a useful tool to engage and work with providers.

6. Recommendation(s)

6.1 Recommendation(s): The Adult Social Care Cabinet Committee is asked to **CONSIDER** and **COMMENT** on the content of the report

7. Background Documents

None

8. Report Author

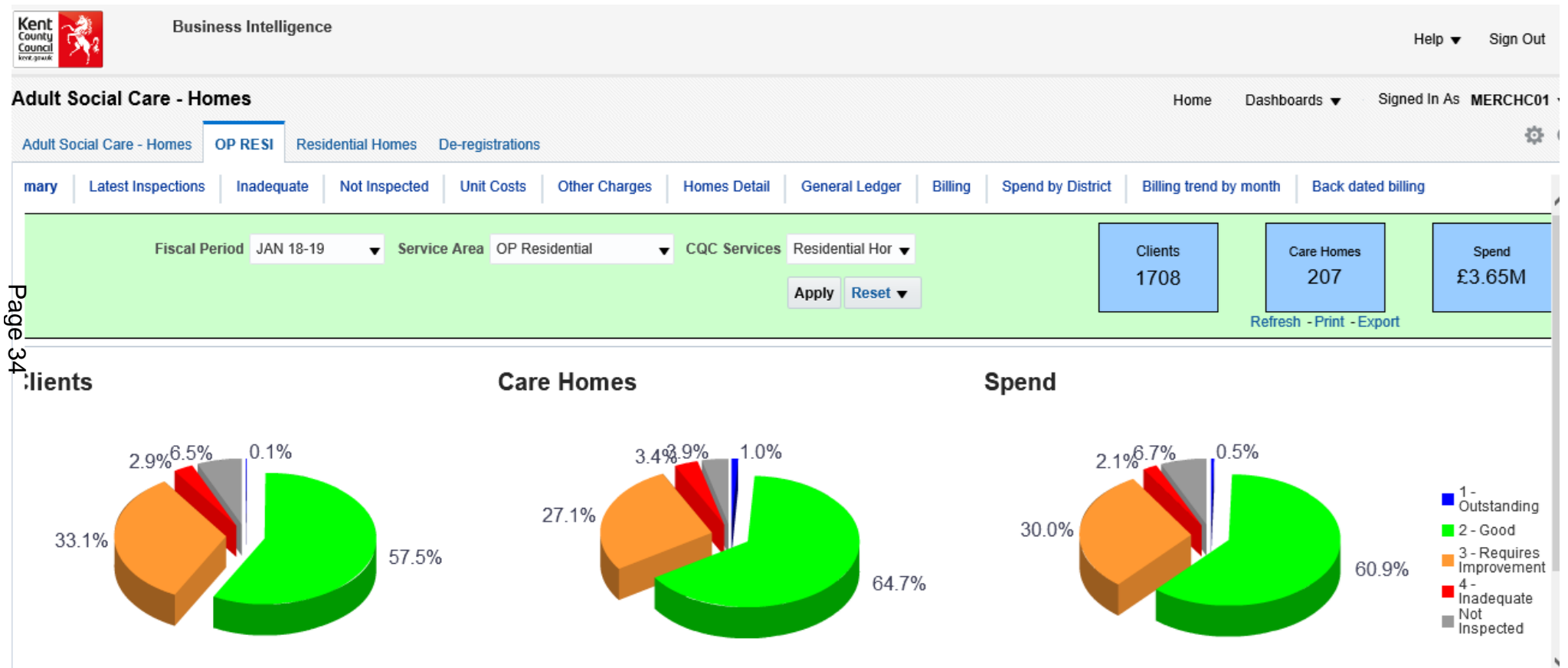
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Appendix 1

Current Dashboard (from Oracle Spend and Cost)



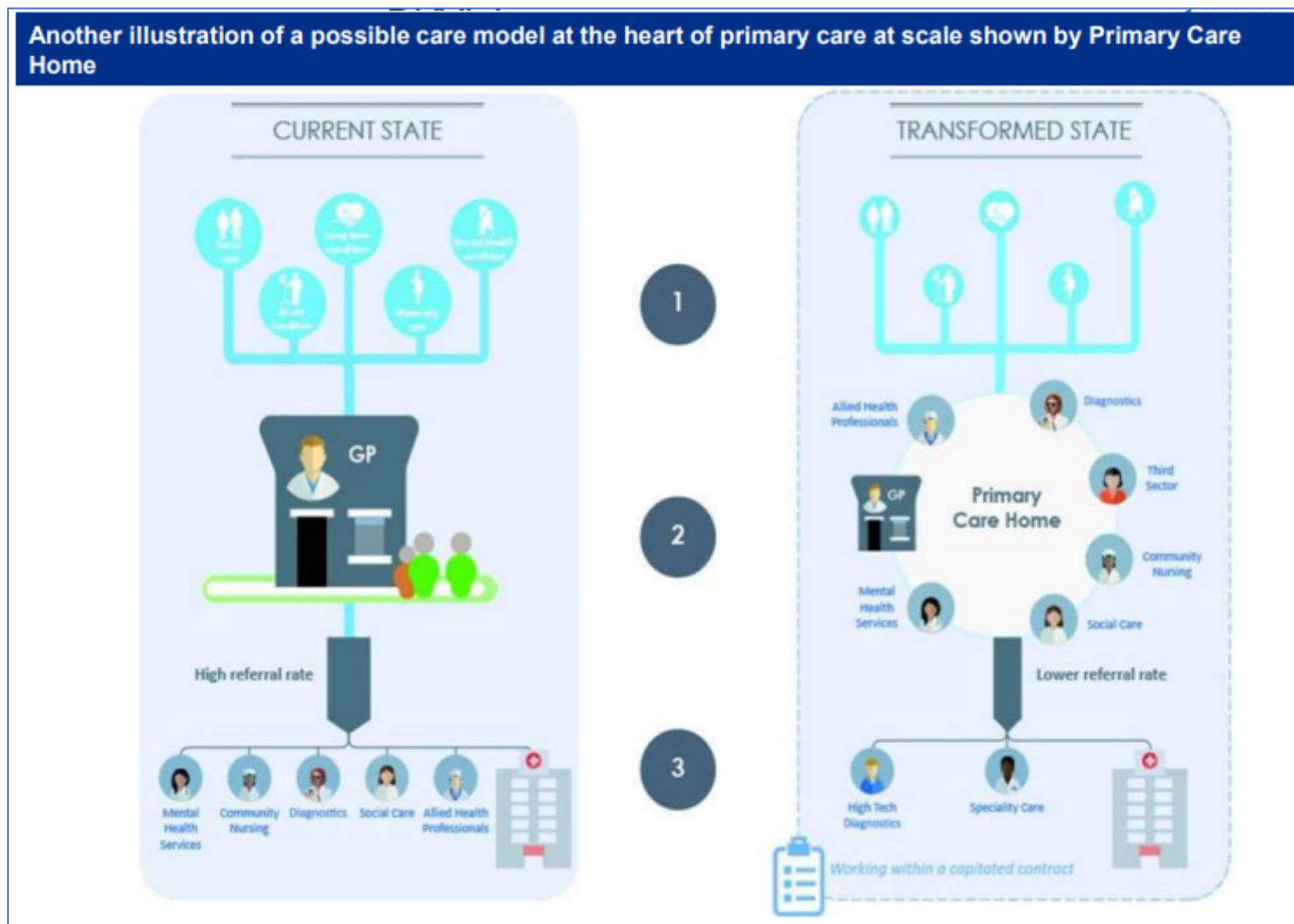
KCC Risk Quality matrix

Management Framework	No. of beds	CCG	District	DPS	1. CQC Overall Rating	2. Ownership Change/ Management Change	3. Provider Self-Assessment	4. Professional Feedback and Experts by Experience Visits	5. Food Hygiene Rating	6. Fire Safety - Observations of Governance and Process
Care Home	22	DGS	Swanley	Yes						
Home	25	SKC	Shepway	Yes						
	47	Ashford	Ashford	Yes						
	32	SKC	Dover	Yes						
	46	SKC	Dover	Yes						
	30	WK	Sevenoaks	Yes						
	38	SKC	Dover	No						
	75	SKC	Dover	Yes						
	17	Thanet	Thanet	Yes						
	88	Thanet	Thanet	Yes						

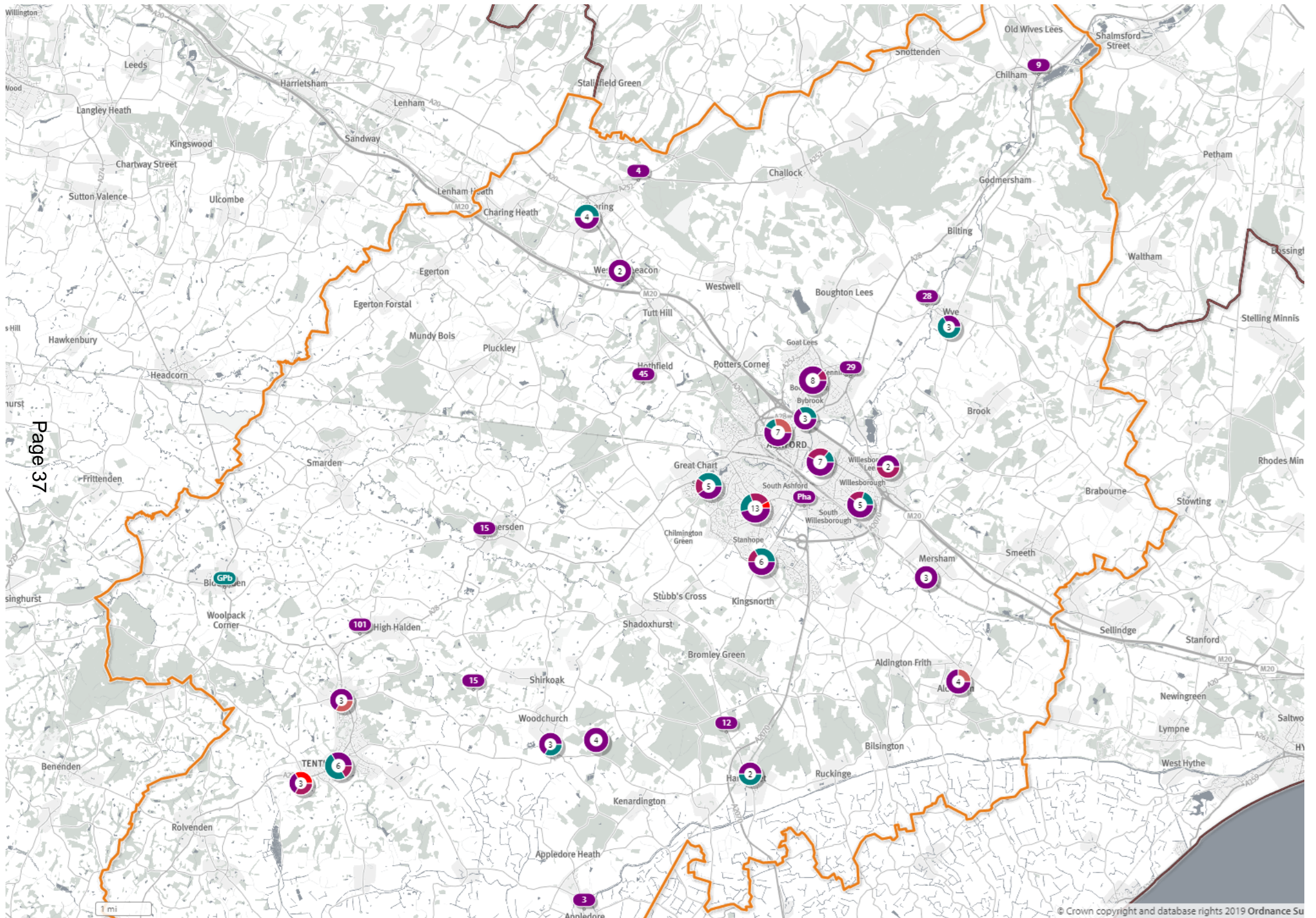
The ten criteria assessed within the model are:

1. CQC Overall Rating
2. Ownership Change/ Management Change
3. Provider Self-Assessment
4. Professional Feedback and Experts by Experience Visits
5. Food Hygiene Rating
6. Fire Safety - Observations of Governance and Process
7. Health and Safety - Site Visit Observations
8. Quality Assurance Audits and Outstanding Actions
9. Current Quality/ Safeguarding/ Commissioning Concerns
10. Current Placement Status

Primary Care Networks and Ashford map



The Map of Ashford on the following page is an illustration of how we can view all services (care homes, home care, GPs, Pharmacies, hospitals, hospices etc.). A locality Commissioner can work with each of these services and aim to assist integration moving forward.



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From: Ben Watts, General Counsel

To: Adult Social Care Cabinet Committee – 17 May 2019

Subject: **Work Programme 2019/20**

Classification: Unrestricted

Past Pathway of Paper: None

Future Pathway of Paper: Standard item

Summary: This report gives details of the proposed work programme for the Adult Social Care Cabinet Committee.

Recommendation: The Adult Social Care Cabinet Committee is asked to **CONSIDER** and **NOTE** its work programme for 2019/20.

1.1 The proposed Work Programme has been compiled from items on the Forthcoming Executive Decisions List, from actions arising from previous meetings and from topics identified at agenda setting meetings, held six weeks before each Cabinet Committee meeting, in accordance with the Constitution, and attended by the Chairman, Vice-Chairman and the Group Spokesmen. Whilst the Chairman, in consultation with the Cabinet Member, is responsible for the final selection of items for the agenda, this report gives all Members of the Cabinet Committee the opportunity to suggest amendments and additional agenda items where appropriate.

2. Terms of Reference

2.1 At its meeting held on 27 March 2014, the County Council agreed the following terms of reference for the Adult Social Care and Health Cabinet Committee: - *'To be responsible for those functions that sit within the Social Care, Health and Wellbeing Directorate and which relate to Adults'*.

2.2 Further terms of reference can be found in the Constitution at Appendix 2, Part 4, paragraphs 21 to 23, and these should also inform the suggestions made by Members for appropriate matters for consideration.

3. Work Programme 2019/20

3.1 An agenda setting meeting was held at which items for this meeting were agreed and future agenda items planned. The Cabinet Committee is requested to consider and note the items within the proposed Work Programme, set out in the appendix to this report, and to suggest any additional topics that they wish to be considered for inclusion to the agenda of future meetings.

3.2 The schedule of commissioning activity which falls within the remit of this Cabinet Committee will be included in the Work Programme and considered at future agenda setting meetings. This will support more effective forward agenda

planning and allow Members to have oversight of significant service delivery decisions in advance.

- 3.3 When selecting future items, the Cabinet Committee should give consideration to the contents of performance monitoring reports. Any 'for information' or briefing items will be sent to Members of the Cabinet Committee separately to the agenda, or separate Member briefings will be arranged, where appropriate.

4. Conclusion

- 4.1 It is vital for the Cabinet Committee process that the Committee takes ownership of its work programme, to help the Cabinet Member to deliver informed and considered decisions. A regular report will be submitted to each meeting of the Cabinet Committee to give updates of requested topics and to seek suggestions of future items to be considered. This does not preclude Members making requests to the Chairman or the Democratic Services Officer between meetings, for consideration.

- 5. Recommendation:** The Adult Social Care Cabinet Committee is asked to **CONSIDER** and **NOTE** its work programme for 2019/20.

6. Background Documents

None.

7. Contact details

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Adult Social Care Cabinet Committee - Work Programme 2019/20

ASC Cabinet Committee meeting dates	Key Decisions	Commissioning Items/Contract Monitoring	Developing Issues	Members' interests/suggestions	Standing Items/Annual Items
17-July-19 <i>(recently changed from 12-July-19)</i>	Adult Social Care Green Paper	<p>Performance Dashboard</p> <p>Update on progress against British Deaf Association of British Sign Language Pledges – to come back to Committee in July 2019</p> <p>Update on Delayed Transfers of Care (DEToC)</p>	<p>Workforce Strategy</p> <p>Accommodation Strategy</p>		<p>Verbal Updates by Cabinet Member and Corporate Director</p> <p>Annual Equalities report</p> <p>Work Programme 2019/20</p>
27-Sept-19	Wayfarers Care Home	<p>Update on Assessment and Rehabilitation Services – Progress report</p> <p>Update on ASC and Health Being Digital Strategy 2019-2021</p> <p>Update on progress: Adult Social Care and Health (including the Lifespan Pathway Service) New Operating Model</p>			<p>Verbal Updates by Cabinet Member and Corporate Director</p> <p>Community Based Wellbeing Service contract update</p> <p>Work Programme 2019/20</p>

27-Nov-19		<p>Performance Dashboard</p> <p>Sensory Strategy Update</p> <p>Update on Partnership Arrangements for the Provision of Mental Health Social Care and Health Services in Kent (19/00011)</p>			<p>Verbal Updates by Cabinet Member and Corporate Director</p> <p>Work Programme 2019/20</p>
16-Jan-20		Corporate Risk Register			<p>Verbal Updates by Cabinet Member and Corporate Director</p> <p>Work Programme 2019/20</p>
27-Mar-20		Performance Dashboard			<p>Verbal Updates by Cabinet Member and Corporate Director</p> <p>Work Programme 2019/20</p>

22-May-20					Verbal Updates by Cabinet Member and Corporate Director Work Programme 2019/20
Future items	<ul style="list-style-type: none"> • Process for indexation of contracts (C Maynard) 				

Updated on: 09 May 2019

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