

KENT COUNTY COUNCIL

ADULT SOCIAL CARE CABINET COMMITTEE

MINUTES of a meeting of the Adult Social Care Cabinet Committee held online on Tuesday, 14th July, 2020.

PRESENT: Mrs P T Cole (Chairman), Ms D Marsh (Vice-Chairman), Mr M J Angell, Mr M A C Balfour, Mr J Burden, Mrs L Hurst, Mr S J G Koowaree and Ida Linfield

ALSO PRESENT: Clair Bell and Paulina Stockell

IN ATTENDANCE: Matt Chatfield (Operational Analytics and Systems Manager), Helen Gillivan (Transformation Programme Lead (DCALDMH)), Clare Maynard (Head of Commissioning Portfolio - Outcome 2 and 3), Richard Smith (Corporate Director of Adult Social Care and Health), Dr Robert Stewart (Clinical Design Director), Georgina Walton (Design and Learning Centre Manager) and Emma West (Democratic Services Officer)

UNRESTRICTED ITEMS

209. Membership

(Item. 2)

The Committee noted that Mrs Allen had replaced Mr Northey as a Member of the Committee and that Mr Clinch had resigned from the Committee.

210. Apologies and Substitutes

(Item. 3)

Apologies for absence had been received from Ms Hamilton.

211. Protocols for Virtual Meetings

(Item. 4)

It was RESOLVED that in order to facilitate the smooth working of its virtual meetings, the Committee agreed to adopt the Protocols for Virtual Meetings.

212. Declarations of Interest by Members in items on the agenda

(Item. 5)

No declarations of interest had been received.

213. Minutes of the meeting held on 4 March 2020

(Item. 6)

It was RESOLVED that the minutes of the meeting held on 4 March 2020 are a correct record and that they be signed by the Chairman.

214. Verbal Updates by Cabinet Member and Corporate Director

(Item. 7)

Dr R Stewart (Clinical Designer, Design and Learning Centre) and Ms G Walton (Design and Learning Centre Manager) were in attendance for this item

- (1) Mrs Bell (Cabinet Member for Adult Social Care and Public Health) gave a verbal update on the following issues:

a) Kent Resilience Forum (KRF) Health and Social Care Recovery Cell Impact Assessment

Mrs Bell introduced Dr Stewart and Ms Walton and provided an update on the Design and Learning Centre for Clinical and Social Innovation. The centre's work focused on reducing frailty, developing safe new services and transforming the health and social care workforce by promoting independence and self-care. The centre worked in partnership with health and social care services across Kent and most recently had been recognised as the innovation facility for the Kent and Medway Sustainability and Transformation Partnership (STP) with the Kent, Surrey & Sussex Academic Health Science Network (AHSN). The partnership also worked with a wider network, including the Medway Innovation Hub a University and National Institute for Health Research.

The Health and Social Care Recovery Cell report identified a number of strengths, weaknesses, opportunities and threats resulting from Covid-19 and emphasised the importance of communications with the public, public information campaigns, equality considerations and next steps.

b) COVID-19 Volunteers

During the Covid-19 pandemic, a significant number of volunteers had stepped forward to support vulnerable people within their communities. The positive work of COVID-19 volunteers had been highlighted within the KRF Impact Report and touched upon by the Health and Social Care Cell. In July, Mrs Bell had attended a virtual webinar held by the Local Government Association on Local Outbreak Planning. A series of slides had been presented during the webinar by the Chief Executive of a London Borough where COVID-19 volunteers had been encouraged to register as Community/COVID Champions to support the vulnerable and shielded. The role of local authorities within this was to provide information and develop messages which could be passed onto the Champions who then 'spread the word' in their own way, appropriate to their particular communities. A session would soon be organised, hosted by the Design and Learning Centre, to present the work that had been undertaken to Members.

c) Update on Assistive Technology

In mid-March, as the country signalled a move into lockdown and imposing significant social and service restrictions, Kent County Council engaged with Alcove and Rethink partners to progress the deployment of 2,000 video care phones to support the most vulnerable members of the local community to stay connected to care and support services and loved ones during a period of significant challenge. The first devices were despatched at the end of April and it was anticipated that the roll-out would take 12 weeks. However, there had been some delay in deployment. It'd taken longer than originally planned to

identify and obtain consent for people to receive the care phones and engagement with domiciliary providers had presented some challenges. Mrs Bell stated that the Assistive Technology project was a one-year project and had not limited vulnerable people from immediately benefiting from the increased social engagement that the device had provided during the most challenging period of lockdown.

- (2) In response to a question regarding the Health and Social Care Recovery Cell's Action Plan, Mrs Bell confirmed that the plan was currently in draft form and she would update the Committee in due course. She pointed out that high on the list of priorities in the Action Plan was preparedness for winter. Mr Smith added that in relation to winter planning, there was a well-rehearsed, well-documented, comprehensive process in working across Health and Social Care to prepare for winter. He said that the directorate were planning for winter in a way that prepared for a second wave of COVID-19 and seasonal flu.
- (3) In response to a question, Mrs Bell referred to the KRF and Health and Social Care Recovery cell and confirmed that two out of three of the stages had been completed. The focus would shortly move back to Kent County Council as the body responsible for recovery.
- (4) Dr Stewart and Ms Walton presented a series of slides to Committee Members which set out information relating to the digitalisation of care homes and the way in which the Design and Learning Centre co-designed better, safer, cheaper and different care through innovation, digital technology, practice and improved outcomes, person-centered care (ESTHER), co-production with communities, volunteer work, DLC Training Hub, Funding, Research evaluation and links to Kent and Medway Medical School.
- (5) Dr Stewart responded to a series of comments and questions from Members which included the following points:
 - The prevention of individuals having to physically attend hospital or GP appointments
 - ESTHER model – Knowledge of aspects important to the individual
 - The improvement of digital capacity within care homes, prisons and libraries
 - Utilising keen volunteer workers
 - Co-production in technology and finding new, innovative ways to upskill and make it easier for individuals to use technology to stay connected
 - Home monitoring to identify and prevent
- (6) The Chairman suggested that Dr Stewart and Ms Walton present further information to a future meeting of the Cabinet Committee with regards to the work of the DLC, Members wholeheartedly supported this.
- (7) Mr Smith (Corporate Director of Adult Social Care and Health) gave a verbal update on the following issues:

a) Digitalisation of our workforce, systems and the people of Kent

Mr Smith emphasised the importance of collaboration between operational teams and of the DLC's work in providing solutions and fuelling initiatives. He agreed with the comments which had been made by Committee Members in relation to ensuring a person-centred approach to digitalisation.

b) The diagnostic of ASC and the partnership with PwC

Mr Smith referred to the discussions which had taken place at DMT and CMT in relation to the reorganisation to assist with the diagnostic of Adult Social Care and in terms of response, recovery and long-term sustainability. In relation to the challenges ahead, he stated that the key aspects to focus on in coming months were practice, innovation and meaningful measures. In referring to the partnership arrangements with PwC, Mr Smith confirmed that the outcome of a report which identified areas of opportunity within Kent would be shared with Members in due course. He stated that the piece of work that was commissioned with PwC was not about efficiencies, it was about ensuring that the organisation was fit for purpose and in a position to meet the ongoing challenges that lay ahead.

c) The structure of ASC and new appointments

Mr Smith welcomed Chris McKenzie, Director for West Kent, on his first day in post, completing the recruitment of the two Directors of both East Kent (Janice Duff) and West Kent. Over the coming weeks, ASC would recruit five Assistant Directors from a selection of internal and external candidates and the AD would focus on ASC's learning and response from the restructure, but also a structure that would develop and support partnerships. Mr McKenzie and Ms Duff would be locality-based, enabling them to work alongside Integrated Care Partnerships, health colleagues and voluntary organisations. Mr Smith stated that he would provide a progress update at the next meeting of the Cabinet Committee.

d) Introduction to the Kent Academy

At the beginning of July 2020, Mr Smith and Mr Dunkley (Corporate Director Children, Young People and Education) launched the Kent Academy, a one-stop-shop online service for professionals to access national and international research and support their day to day practice. There were two elements to the Kent Academy, one focusing solely on Adult Social Care, and the other focusing on Children and Young People. He referred to an enlightening presentation which was shown during the launch of the Kent Academy by one of Kent's carers and emphasised the importance of the carers voice and a mother's journey into social care. He said that over 250 people from multi-disciplinary and social work teams across the organisation joined the launch and thanked the team.

(8) RESOLVED that the verbal updates be noted.

215. 20/00066 - Adult Social Care Digital Implementation Support Service (Item. 8)

Ms H Gillivan (Head of Adult Social Care and Health Business Delivery Unit) was in attendance for this item

- (1) Ms Gillivan introduced the report which provided an overview of the next stages of the Adult Social Care Digital Implementation Programme and the required investment. The workstreams included payments and charging, MOSAIC citizen and professional portal, operational business process and data quality.

Officers then responded to a number of comments and questions from Members, which included the following: -

- a) Ms Gillivan referred to the consultation which had taken place with Mrs Bell, Cabinet Member for Adult Social Care and Public Health, and reassured Committee Members that Mrs Bell had been kept up to date throughout the implementation of MOSAIC and would continue to be kept up to date.
 - b) Ms Maynard referred to the G-Cloud framework which presented the opportunity to reduce selection criteria based on the services that ASC were looking for. She added that providing the proposed decision was approved, officers would be able to search the G-Cloud and reduce the number of providers that could potentially be offered this solution, allowing the proposed timescales to take place.
 - c) Ms Gillivan said that there were a number of additional capabilities that had come through MOSAIC as the system was being upgraded and developments being improved. She emphasised the importance of continuing to ensure that the system was being used as efficiently as possible and continuing to adapt and improve.
 - d) Ms Gillivan referred to investment in MOSAIC and the need to look more closely at the additional elements in relation to the payment system and move into the digital MOSAIC portal for citizens. She emphasised the importance of ensuring that the case management system was correct before building on the system going forward. She added that she would provide additional information to Committee Members outside of the meeting in relation to the procurement in the first phase of MOSAIC.
- (2) Mrs Bell (Cabinet Member for Adult Social Care and Public Health) and Mr Smith reassured Committee Members that the agreed governance procedures would be followed in relation to the decision-making process and appropriate scrutiny.
 - (3) Mr Smith explained that MOSAIC phase one and the digital implementation of MOSAIC were separate matters. He provided some background information in relation to MOSAIC phase one, the delays associated with the programme, the programmes ambitions to focus on case management system, billing system and a charging system and the collaborative work and dedication from both internal staff and external staff. He referred to the digital implementation of MOSAIC and emphasised the need for staff to engage with individuals, oversight of appropriate interfaces with the market, interaction through the portal, starting to think about self-assessment, advice offer and supporting the market and providers with regards to sustainability.

- (4) Mrs Bell confirmed that further information would be sent to Committee Members outside of the meeting in relation to the timescales of the proposed decision and implementation.
- (5) Mr Smith confirmed that further information would be provided to Ida Linfield outside of the meeting in relation to the exact costs associated with the proposed decision.
- (6) RESOLVED that the decision proposed to be taken by the Cabinet Member for Adult Social Care and Public Health to
 - a) award a contract to the successful company, identified by a competitive procurement procedure, to provide digital implementation support services, and
 - b) delegate authority to the Corporate Director of Adult Social Care and Health to take relevant actions, including but not limited to finalising the terms of and entering into required contracts or other legal agreements, as necessary to implement the decision,

be endorsed.

Ida Linfield asked that her abstention from the recommendation be noted within the minutes

216. 20/00067 - Infection Control Fund (Part 2) - Wider Social Care Market Support
(Item. 9)

- (1) Ms Maynard introduced the report which set out information relating to the role of social care providers in responding to the COVID-19 pandemic and how the social care provider market had been significantly affected by rising costs associated with the COVID-19 pandemic.
- (2) In response to a question relating to section 3.3 of the report, Ms Maynard confirmed that membership fees would be suspended for a period of one year and the cost of the proposal would be approximately £100k.
- (3) In response to a question, Ms Maynard referred to COVID-19 recovery plans and the work that continued to be undertaken across the sector with health colleagues to learn from the early stages of the outbreak of COVID-19 and the work that would be undertaken moving forward. She added that Kent had had the lowest number of infections across the South East and one of the lowest in the country with regards to care homes.
- (4) RESOLVED that the decision proposed to be taken by the Cabinet Member for Adult Social Care and Public Health to
 - a) agree for the Corporate Director of Adult Social Care and Health to allocate the 25% of the Infection Control Fund Grant in line with the proposals co-developed with the market as outlined in section 3.2 of the report; and

- b) delegate authority to the Corporate Director of Adult Social Care and Health to take other relevant actions, including but not limited to entering into and finalising the terms of relevant contracts or other legal agreements, as necessary to implement the decision,

be endorsed.

217. Adult Social Care Performance Dashboard - Quarter 4 2019/2020

(Item. 10)

Mr M Chatfield (Operational Analytics and Systems Manager) was in attendance for this item

- (1) Mr Chatfield introduced the report which provided an overview of the progress for Key Performance Indicators and activity measures for ASC to March 2020. He provided more information in relation to the four red indicators within the Performance Dashboard and stated that both the Delayed Transfers of Care Indicator and the number of older people aged 65 and over in supported residential care were decreasing and moving in the right direction.

Mr Chatfield responded to a number of comments and questions from Members, which included the following: -

- a) Mr Chatfield said that during the lockdown period of COVID-19, ASC produced a health check dashboard which was updated weekly. The dashboard measured the number of people in Kent that had been discharged out of hospital, workforce-related statistics and service demands. He added that ASC were now in the process of undertaking an analysis on the repercussions of COVID-19, increases and decreases in activity and demand and projections going forward.
 - b) Mr Chatfield suggested that a report be submitted to the next meeting of the Cabinet Committee which would provide comparative data in relation to the impact that COVID-19 had had on ASC services. Members generally supported this.
 - c) Mr Chatfield briefly referred to enablement services and the long-term benefits of enablement.
 - d) Mr Chatfield referred to safeguarding services and the comparative, trend analysis work which had recently been undertaken, he said that it was difficult to predict future trends during these unprecedented times.
- (2) RESOLVED that the information contained within the Performance Dashboard be noted.

218. Decisions Summary Report - For Information

(Item. 11)

- (1) Mrs Bell (Cabinet Member for Adult Social Care and Public Health) provided a brief overview of the report and stated that many decisions had been taken throughout the COVID-19 pandemic to support Kent's care sector.

- (2) Mrs Bell referred to decision number 20/00044 (Covid-19 Block Beds for Older Persons Residential and Nursing) and confirmed that Kent County Council did not commission the full number of beds that were incorporated within the decision as the additional beds were not needed.
- (3) Mr Smith extended his thanks to staff officers and Members for their constant support and engagement during these unprecedented times which had enabled ASC to work in such a responsive way.

219. Work Programme 2020-21

(Item. 12)

- (1) RESOLVED that the work programme for 2020-21 be noted, subject to the inclusion of the following items: -
- An update regarding the work of the Design and Learning Centre
(Dr Stewart)
 - An update re the structure of ASC and new appointments
(Mr Smith - likely to be part of his verbal update)
 - A report which presents comparative data in relation to the impact that COVID-19 had had on services within ASC
(Mr Chatfield)