

ADULT SOCIAL CARE AND COMMUNITIES SCRUTINY COMMITTEE

Minutes of the meeting of the Adult Social Care and Communities Scrutiny Committee held at Shire Hall, Gloucester on Tuesday 18 July 2023.

Present	Cllr Cate Cody	Cllr Lisa Spivey (Chair)
	Cllr Tim Harman (Vice-Chair)	Cllr Susan Williams
	Cllr Stephen Hirst	Cllr Suzanne Williams (Remote)
	Cllr Steve Robinson	Cllr Alan Preest

1. APOLOGIES

Apologies were received from Cllrs Terry Hale, (substituted by Cllr Alan Preest), and Pam Tracey.

Cllr Suzanne Williams joined the meeting via remote access.

2. DECLARATIONS OF INTEREST

No declarations of interest were made at the meeting.

3. MINUTES

3.1 The minutes of the meeting held on 16 May 2023 were agreed as a correct record of that meeting. The committee also noted the summary of actions from the meeting.

3.2 Chair, Cllr Spivey, referred to a draft letter circulated to the committee as an expression of the committees' concerns in relation to the White Ribbon Charity Organisation accreditation process. The concerns were raised at the committee meeting in March. It was noted that the draft letter had been circulated the previous week and had received several messages of support. Seeking consensus on the letter, (to be sent to the White Ribbon Charity on behalf of the committee), it was agreed that the letter be sent. **Action by – Democratic Services**

3.3 The committee noted the recent announcement, (announced on the GCC website), confirming that Gloucestershire County Council had been accredited as a White Ribbon organisation.

The announcement stated:

3.4 Having submitted our application for White Ribbon Accreditation in June, we heard at the end of last week (week ending 7 July 2023) that we had been successful. White Ribbon Accreditation is a demonstration of the council's commitment to continuously work towards culture change in order to eradicate violence against women, and to upskill all of us to become change-makers.

3.5 As a White Ribbon Accredited organisation, we must develop a plan of action that works towards ending men's violence against women in Gloucestershire.

3.6 Work on the council's three-year plan is already underway, led by the White Ribbon Steering Group, chaired by Rob Ayliffe, Director of Policy, Performance & Governance.

3.7 An important focus of the work of the Group will be to raise awareness of organisations and groups where people can go for help, advice and support, of which there are many both locally and nationally.

3.8 Claire Procter, Assistant Director of Prevention, Wellbeing and Communities, gave an update on the progress of actions relating to Motion 908: Violence Against Women and Girls. A draft cabinet report to be presented to Cabinet on 20 September 2023 to be circulated to the committee for comment. The committee's views and comments to be incorporated in the report, along with any actions agreed by the Police Crime Panel and outcomes from an All Member Briefing held on 18 April 2023. **Action by – Democratic Services**

3.9 It was confirmed that a visit to the Coroner's Court, Gloucester, would be arranged later in the year. **Action by – Democratic Services**

4. QUARTER 4 PERFORMANCE SCORECARD

4.1 To view the Adult Social Care and Communities Performance Scorecard, (Quarter 4 2022-23), please refer to the link [here](#).

4.2 Members noted the scorecard and considered responses to questions submitted in advance of the meeting, including: -

1) Statement from Helen Gentles (Healthwatch Gloucestershire)

The scorecards are a mine of rich information and give an indication of the quality of care people in Gloucestershire are receiving. It is not always easy to translate the numbers and percentages into what this really means in terms of care for people. There are clearly many successes to celebrate, (identified by green stars). Areas where a greater understanding of what the figures mean and hearing what plans are in place to make improvements would be useful. Time at committee meetings is precious and impractical to discuss each indicator in detail. Would the committee consider focussing on a few indicators from each scorecard in order to better understand and scrutinise what the figures mean for the people of Gloucestershire?

The statement was noted and agreed, with a proposal that a small selection of indicators be highlighted as areas of interest for consideration at future meetings. The performance indicators to be identified at committee agenda planning meetings. **Action by – Democratic Services**

2) Transforming Adult Social Care Delivery (page 3)

Hospital discharge and Reablement (page 3) – why are the figures not available? It was explained that there is often a period of delay to transfer the

information. The performance team to provide the information after the meeting.

- 3) Hospital Discharge and Reablement (page 3)** - delayed transfers of care from hospitals due to Adult Social Care per 100,000 population - measures suspended 1 March 2020. By whom? Not considered an effective performance measurement, the indicator was suspended by the Department for Social Care.
- 4) Hospital Discharge and Reablement (page 3)** - delayed transfers of care from hospitals due to Adult Social Care per 100,000 population - measures suspended 1 March 2020. Why does it continue to remain on the scorecard if there's no data? No new national indicator had been introduced. It was suggested that, in preparation for the Care Quality Commission Inspection of Adult Social Care Services in Gloucestershire, the performance scorecard be reviewed and updated to include more relevant indicators.
- 5) Adult Safeguarding (Page 3)** What is meant by inconclusive and what happens next? The question was noted. A response to be provided after the meeting.
- 6) Adult Safeguarding (Page 3)** Enquiries open for more than 26 weeks. Why are there no figures on this in the comments? The question was noted. A response to be provided after the meeting.
- 7) Transforming Adult Social Care Commissioning (page 3) Quality Assurance (Page 4)** What is the difference between good and outstanding? The information to be explored on the Care Quality Commission website and a response provided after the meeting.
- 8) Quality Assurance (Page 4)** The target looks high as the subject covers good and outstanding, yet requires improvement is increasing and shares the same comments box. Should it have its own target? It was agreed this was a good suggestion. To be explored after the meeting.
- 9) Quality Assurance (Page 4)** What is happening to the 3 providers rated as inadequate? As sensitive information, this information is embargoed. If reported/available on the Care Quality Commission website as inadequate, details can be shared with the committee.
- 10) Learning disability (Page 4)** 225 adults with learning disabilities not in settled accommodation. Where are they and what is being done to get them settled? It was agreed the information was not very clear. The performance team recognised this and was working to resolve the matter.

5. ADULT SOCIAL CARE, WELLBEING AND COMMUNITIES PRESENTATION

5.1 Professor Sarah Scott, Executive Director for Adult Social Care, Well-being and Communities, gave a detailed overview of the work of the Adult Social Care Team,

(within the scope of the committee terms of reference), including anticipated issues and activities that may require consideration during 2023-24.

5.2 To view the **slideshow presentation** presented at the meeting, please refer to the link [here](#)

5.3 To view the recommended **video screenings**, please refer to the links below:

Proud to Care: <https://www.youtube.com/@proudtocareglos1751/videos>

Recruitment <https://www.gloucestershire.gov.uk/health-and-social-care/adult-social-care-asc-recruitment/asc-careers-with-us/social-work-and-social-care/inhouse-service-careers/watch-a-video-about-inhouse-services/>

Responding to questions, the following information was clarified at the meeting: -

5.4 The 'Your Circle' Website is a useful source of information, advice and support available to the residents of Gloucestershire to enable people to stay independent, safe and well. Your Circle is run by Gloucestershire County Council, with support from statutory, health, social care and community sector partners across the county. To visit the 'Your Circle' website at www.yourcircle.org.uk please open the link [here](#) or visit the Gloucestershire County Council website at the link [here](#)

5.5 Outlining the management and spending of the Adult Social Care net budget 2023/24, (agreed at £183,851,000 and constituting approximately 32% of the Gloucestershire County Council total budget), it was confirmed that approximately £40 million of the net budget was funded by the Adult Social Care Levy and approximately £20 million by the Improved Better Care Fund (iBCF). The aim of the Improved Better Care Fund is to ensure the right care is provided to those people who need it the most.

5.6 It was explained that an additional £19.6 million of funding was received by way of service user contributions, plus an additional £31.6 million from the Better Care Fund National Programme and from other joint funding. The gross budget constituted £235 million, (of which approximately 25% is contributed via the NHS).

5.7 Launched in 2015, the Better Care Fund (BCF) is a national programme of funding, through which local areas agree how to spend a local pooled budget in accordance with national requirements. The budget is made up of NHS funding as well as local government grants, one of which is the iBCF (improved Better Care Fund).

5.8 Responding to questions on the budget, it was confirmed that spending was very closely monitored throughout the year, with a degree of confidence that the current breakeven forecast would remain on target for the end of year budget. Every effort was made to improve and promote services from the co-producing/commissioning of services and from continuing to develop a strong relationship with the NHS Gloucestershire Integrated Care Board (ICB).

5.9 Responding to a question about the joint working relationship between the County Council and District Councils in terms of Adult Social Care, it was explained that the County Council budget concentrated more on mental health than on mental wellbeing. It was agreed, however, that it might be an appropriate time to revisit the county's work with the districts.

5.10 Noting several questions on the provision of respite care for carers and people requiring care, it was agreed to provide a written overview after the meeting, including the number of respite beds provided by the council. It was acknowledged, however, that the focus remained on how best to support people in their own homes. **Action by – Adult Social Care Team**

5.11 Included in the Adult Social Care improvement plan was an aspiration to promote direct payments.

5.12 Cllr Carole Allaway-Martin, Cabinet Member for Adult Social Care: Commissioning, clarified that the County Council represented one partner involved in a whole partnership approach to delivering adult social care. Focussing on patient centred goals, real advances were being made in providing dementia care. Good, strong, relationships with NHS Gloucestershire and the voluntary sector enabled the County Council to maximise its ambitions.

The update was noted.

6. PUBLIC HEALTH PRESENTATION

6.1 Siobhan Farmer, Director of Public Health, gave a detailed overview of the work of the Public Health Team, (within the scope of the committee terms of reference), including anticipated issues and activities that might require scrutiny during 2023-24.

6.2 To view the report published with the agenda for the meeting, please refer to the link [here](#)

6.3 The slide show presentation presented at the meeting is attached to the minutes for information.

6.4 Members recalled that under the Health and Social Care Act 2012, responsibility for public health had transferred from the NHS to upper tier and unitary local authorities in April 2013. Under the Care Act, the County Council has a statutory duty to take appropriate steps to improve the health of the local population, including appointing a Director of Public Health, and delivering a number of mandated public health services.

6.5 Outlining the statutory role of the Director of Public Health, including that of principal adviser on health matters, it was explained that not all public health work was the responsibility of the public health team. A large proportion of work was fulfilled in partnership with others, including extensive collaboration with the Gloucestershire Fire and Rescue Service. The role of the public health team was to provide a leadership role and to influence and offer guidance on public health.

6.6 Inequalities and inconsistencies evident between different groups of people/people living in different areas of Gloucestershire is a key area of work. At the request of members, it was agreed to provide data on some of the disparities that exist between male and females and between people living in non-deprived and deprived areas of the county. **Action by – Public Health Team**

6.7 Reporting on the Public Health Budget, it was confirmed that the total budget was approximately £37.6million, (excluding Covid and Homes for Ukraine funding). The majority of funding came from the ring-fenced public health grant, awarded at £26,075,974 in 2023/24, (a 3.2% increase on 2022/23).

6.8 It was confirmed that between 60% and 70% of the public health grant was attributed to providing treatment services, the remaining balance of which was invested in deterrence and prevention. Other 'additional' funding was sometimes made available to the council during the year. Reporting a comfortable financial position, members were advised that it may be necessary to absorb some of the public health reserves accrued in recent years.

6.9 Members noted the work of the public health team to support delivery of the three 'Exemplar Themes' identified as priority areas by the One Gloucestershire Integrated Care Strategy. The themes included: i) reducing smoking, ii) prevention of high blood pressure, and iii) creation of employment and skills opportunities. The team was also working with partners to develop a new Prevention and Health Inequalities toolkit.

Responding to questions, the following points were raised at the meeting: -

6.10 Questioning the level of work undertaken in association with district partners, it was explained that, post Covid, this had reduced slightly, and acknowledged that now might be an opportune time to consider reconvening joint discussions between the county council and the 6 district councils. Members were reminded that each district had their own Health and Wellbeing Plan, for which the scrutiny of the plan was the individual responsibility of the relevant authority. The Director of Public Health agreed to circulate information on the council's work with the district councils after the meeting. **Action by – Director of Public Health**

6.11 Referring to the additional grant funding awarded annually by the Department of Levelling Up, Housing and Communities (DLUHC) to meet the council's statutory duties introduced by the Domestic Abuse Act in 2021, it was suggested that details of the bidding processes involved and list of projects for which funding had been awarded be circulated after the meeting. **Action by – Public Health Team**

6.12 A specific area of focus for the members of both the Adult Social Care and Communities Scrutiny Committee and the Gloucestershire Health Overview and Scrutiny Committee was child and adult obesity. In response to consideration of Motion 881: Tackling Poverty and Deprivation at the Full Council meeting on 8 September 2021, and the request for 'regular progress reports on the Health and Wellbeing Boards 7 Strategic Priorities to HOSC, (Health and Overview and Scrutiny Committee)', it has recently been agreed that the ASCC committee work

plan items relating to Obesity and ACES, (Adverse Childhood Experiences), should be included in a Health and Wellbeing Board Strategy update at a joint meeting of both committees on the planned HOSC meeting date of 11 January 2024. The date of the ASCC meeting planned for 16 January 2024 is no longer required and should be removed from members calendars. **Action by – ASCC members/officers**

6.13 Responding to questions on the investment in prevention initiatives for the county, including tackling knife crime, members attention was drawn to publication of the Serious Violence Duty in December 2022, and the requirement for councils and local services to work together to share information and target interventions to prevent and reduce serious violence. The duty to be reviewed by the end of December 2023.

6.14 It was confirmed that the County Council had a shared responsibility with the 6 district authorities, Gloucestershire Police, Gloucestershire Fire and Rescue, and Gloucestershire Health and Care NHS Foundation Trust, to look at serious violence in the county. Several initial meetings had been held, culminating in a number of positive outcomes and endorsement of several priority areas. It was requested that, when available, information on the country's response to the Serious Violence Duty be circulated as a briefing note to the committee. **Action by – Public Health Team**

6.15 The update was noted, with several messages of appreciation and support for the work of the Public Health Team, and as encouragement for the team to invest in more prevention. It was agreed that further investment would only add value to the wellbeing of county in the long term.

7. CHIEF FIRE OFFICER PRESENTATION

7.1 Chief Fire Officer and Director of Community Safety, Mark Preece, gave a detailed overview of the work of the Gloucestershire Fire and Rescue Service in relation to the areas of responsibility within the scope of the committee terms of reference. These include: Coroners Services and Trading Standards.

7.2 To view the slide-show presentation presented at the meeting, please refer to the link [here](#).

7.3 The Chief Fire Officer clarified that, whilst the Gloucestershire Coroners Service was administered locally by the County Council, it was not a department of the Council, but an independent, locally administered branch of the National Judiciary, responsible for dealing with all deaths that required a Coronial input.

7.4 Members were informed of some of the challenges in delivering the service, including: -

- a) Increased revenue and capital costs predicted to increase over the medium term in response to a significant increased demand in cases and in pace with consumable price rises;

- b) Need for essential, critical, building improvements and anticipated replacement of some of the infrastructure due to the age and condition of equipment and machinery;
- c) Reputational risks associated with the option of 'doing nothing' should any of the shortfalls become prolonged;
- d) Recruitment issues brought about by an increased number of retirements and national decline in the number of pathologists

7.5 Members were assured that, in spite of the challenges, there had been no consequential impact on the people/families using the service and in meeting the required delivery standards. The position was being closely monitored and an emergency contingency plan would be put in place, should the need arise.

7.6 Seeking to offer support to the service, members enquired how the committee might offer assistance. The Chief Fire Officer confirmed that the proposed visit to the Coroner's Court, Gloucester, would not only boost morale but also demonstrate a welcome expression of interest in the service by the committee. He confirmed that the County Council and Gloucestershire Police were very supportive, and that it was hoped the recent appointment of an Area Coroner would help reduce some of the pressures. In the long term, member support for bids submitted as part of the councils medium term financial plan would be helpful.

7.7 Reporting on the work of the Trading Standards Service, the Chief Fire Officer informed members that the service was delegated to the Fire and Rescue Service via the Council's Constitution, and was responsible for upholding statutory legislation designed to protect consumers and to support businesses within Gloucestershire.

7.8 Priority areas of work for 2023/24 included:

- a) Animal welfare and disease control in farm animals;
- b) Food Standards;
- c) Product safety, and
- d) Scams and fraudulent home/garden work

7.9 Areas of concern impacting on the service included:

- a) A 50% staff profile of employees aged 50 or over, with 15% currently aged 55 or over;
- b) An anticipated loss of skills and experience over the next 5 year period;
- c) A national shortage of qualified and competent officers;
- d) The need for robust succession planning with a focus on 'growing our own talent

7.10 Seeking responses to questions and asking how members might support the service, the committee received updates on the increased number of cases in bird flu and online fraud. Similar to the Coroners Service, the Chief Fire Officer advised

that, in the long term, member support for bids submitted as part of the councils medium term financial plan would be useful in safeguarding the service.

The report was noted.

8. WORK PLAN

8.1 The committee was asked to note the committee work plan on page 63 of the agenda, detailing items considered by the Adult Social Care and Communities Scrutiny Committee, plus items considered at joint meetings with the Gloucestershire Health Overview and Scrutiny Committee, in 2022-23.

8.2 Members were informed that, immediately after the meeting, an informal work planning discussion had been arranged for the committee to scope out and develop the committee work plan for Adult Social Care and Communities Scrutiny meetings in 2023-24.

The work plan 2022-23 was noted.

9. FUTURE MEETINGS

12 September 2023
14 November 2023
16 January 2024
05 March 2024
14 May 2024
23 July 2024
10 September 2024
12 November 2024

CHAIRPERSON

Meeting concluded at 12.15pm