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ADULT SERVICES AND HEALTH OVERVIEW AND SCRUTINY PANEL

TUESDAY, 2 FEBRUARY 2016

PRESENT: Councillors Mohammed Ilyas (Chairman), Michael Airey (Vice-Chairman), Lynne Jones, John Lenton and Lynda Yong

Also in attendance: Councillor Coppinger and Sheila Holmes (WAM Healthwatch)

Officers: Alison Alexander, Alan Abrahamson, Angela Morris and David Cook.

APOLOGIES

Apologies for absence were received by Cllr Hollingsworth, Cllr Mills attended as a substitute.

DECLARATIONS OF INTEREST

There were no declarations of interest received.

MINUTES

The minutes of the meeting held on 19th November 2015 were approved as a true and correct record.

EAST BERKSHIRE STROKE PROJECT

Ricky Chana, Project Manager Slough CCG, attended the meeting to inform the Panel of proposed plans to reconfigure the way acute stroke services are delivered in East Berkshire and particularly in Windsor, Maidenhead and Slough.

The proposed plans were to reconfigure stroke services in East Berkshire to deliver a modified version of the 'London Model', which ensured that all suspected stroke patients were conveyed to a Hyper Acute Stroke Unit (HASU) for their care. The Thames Valley Clinical Senate had endorsed this reconfiguration in East Berkshire.

Currently, patients who lived in Ascot or Maidenhead most likely went to Frimley Park Hospital or The Royal Berkshire Hospital. Both hospitals offered excellent stroke services and the decision on which hospital patients went to was based on a number of factors, including the speed at which patients could be transported there.

Stroke patients from Windsor and Maidenhead were likely to be treated at Wexham Park Hospital, which was not a HASU. In order to ensure that Windsor and Maidenhead patients receive the optimal standard of care should they suffer a stroke, it was proposed that they should be treated at the nearest HASU, which for the majority is Wycombe hospital. Frimley would continue to be used for those closer to it.

During the discussion the following points were made:

- It was questioned if Wexham would be used once turned around however this had been discounted as they would require a certain volume of patients to maintain a HASU standard.
- It had been noted that getting the right level of rehabilitation after leaving hospital was important. After the standard 6 weeks rehabilitation patients would be able to access specialist services at local hospitals and in the community.

- The Panel were reassured that the move away from Wexham would be done in a seamless way.
- The change was driven by quality of service and outcomes rather than budget.
- There was no age limit on the treatment and types of drugs used.
- They would be looking at transport options and payment for transport.
- Capacity levels at Wycombe had been examined and the hospital had identified wards to increase its physical capacity.
- It was not expected to be implemented until the next financial year and services will remain as they are until then.

Resolved that the Panel note the update.

SLOUGH WALK IN CENTRE - ITEM WITHDRAWN

Item withdrawn.

FINANCE UPDATE

Alan Abrahamson introduced the report that provided an update to members on the Council's financial performance with services currently projecting a £192k underspend. The combined General Fund Reserves sat at over £6m which was £1m more than when the budget was set.

The Directorate was reporting a projected £52k underspend for the year. Most of this underspend came from a successful award of continuing healthcare funding for a high cost placement. The budget position took into account the additional budget allocation by Council in December 2015.

The Panel were also informed that the Council would be reviewing its Contribution Policy. The Care Act 2014 provided revised guidance for councils in respect of the treatment of higher rates of the Disability Living Allowance (DLA) and Attendance Allowance (AA). This guidance allows councils to include these higher rate payments, which residents receive, within financial assessments for establishing how much a resident can afford to contribute towards the costs of their non-residential social care. It is proposed that amendments to the Council's Adult Social Care financial Contribution Policy to cover both these changes is consulted upon.

Cllr Jones mentioned that some people used their allowance for help with everyday things such as shopping, could this impact their independence. The Panel were informed that the persons assessment would look at needs and costs would be taken into account.

Resolved that the report be noted.

BUDGET 2016/17

Alan Abrahamson gave a presentation on the proposed 2016/17 budget that included an overview of the national and local context. This included issues such as an increased demand for adult social care and a decreased grant settlement. The Panel were informed that appendix J detailed the Medium Term Financial Plan that set

out areas such as out income and expenditure assumptions over next three years, 1000 new houses per year and Adult Social Care precept of 2% pa. The Panel were shown the recommendations and main points which were contained within the budget report including the proposed freeze in council tax at band D rate of £906.95.

With regards to Adult Social Care issues these were shown to be:

- Growth of £3.6m to meet demographic pressures.
- Efficiency savings of £1.2m.

- Homecare charge frozen at £16/hour.
- Challenges for 2016-17:
 - Recruiting and retaining social workers and managers.
 - Development of the “Outcome-based” Homecare service.
 - Working with the CCG to reduce non-elective admissions to hospital.
 - Planning for integration with Health Services.
 - Managing the Deprivation of Liberty Safeguarding process.
 - Managing the residential and nursing home market.

The Panel were informed that there would be the following areas of growth:

- £900k for Homecare and Direct Payments.
- £600k for Residential & Nursing Care
- £400k for services to people with Mental Health needs.
- £700k for Learning Disability Services.
- £400k to meet impact of DOLS.
- £600k other growth.

The Panel were also provided with a list of saving proposals which totalled £1.2m.

With regards to the Capital programme Members were asked to comment on or give their support to any of the following projects:

- Boyne Grove Personal Care Area
- Remodelling and De-registration of Winston Court and Homeside Close
- Supported Independent Living for LD and Challenging Behaviour
- Learning Disability Service Accommodation for young adults in transition.

The Panel supported all projects with specific support being given to Boyne Grove Personal Care Area and Learning Disability Service Accommodation for young adults in transition.

Cllr M Airey asked why mental health service was showing as having increased funding but also showing proposed savings, the Panel were informed that the savings related to agency staff in key posts that were hard to recruit to. Proposals were being put forward to make the positions more attractive to permanent employment rather than relying on agency staff.

Cllr Jones mentioned that the report contained many references to the Council Tax being ‘frozen’ when in fact it was increasing by 2%; she was in support of the increased spend but it needed to be clear Council Tax was increasing.

Councillor Jones also mentioned that there had been historic issues over the recruitment and retention of social workers and if we could expect an improvement. The Panel were informed that a business case was being produced at improving social workers pay and conditions and this should help increase retention.

Resolved Unanimously: that the Panel note the report and Cllr Jones raised that although there was a 0% increase in Council Tax because of the 2% precept for Adult Services Council Tax would be increased.

The Panel supported the following Capital Bids:

- **Boyne Grove Personal Care Area**
- **Remodelling and De-registration of Winston Court and Homeside Close**
- **Supported Independent Living for LD and Challenging Behaviour**
- **Learning Disability Service Accommodation for young adults in transition.**

TENDER FOR RESIDENTS AND NURSING BEDS - ITEM WITHDRAWN

Item Withdrawn.

WORK PROGRAMME

The Panel noted the work programme.

LOCAL GOVERNMENT ACT 1972 - EXCLUSION OF THE PUBLIC

RESOLVED: That under Section 100(A)(4) of the Local Government Act 1972, the public be excluded from the remainder of the meeting whilst discussion takes place on items 5-8 on the grounds that they involve the likely disclosure of exempt information as defined in Paragraph 3 of part I of Schedule 12A of the Act

The meeting, which began at 6.00 pm, finished at 8.15 pm

CHAIRMAN.....

DATE.....