

Nottingham City Council

Health and Adult Social Care Scrutiny Committee

Minutes of the meeting held at Ground Floor Committee Room, Loxley House, Station Street, Nottingham, NG2 3NG on 16 December 2021 from 10.00 am - 11.23 am

Membership

Present

Councillor Georgia Power (Chair)
Councillor Michael Edwards
Councillor Samuel Gardiner
Councillor Maria Joannou
Councillor Angela Kandola

Absent

Councillor Cate Woodward
Councillor Kirsty Jones
Councillor Anne Peach
Councillor Nayab Patel

Colleagues, partners and others in attendance:

Sara Storey - Director of Adult Health and Care
Councillor Adele Williams - Portfolio Holder for Adults and Health
Jane Garrard - Senior Governance Officer
Emma Powley - Governance Officer

44 Committee membership change

The Committee noted that Councillor Nayab Patel had been appointed to a vacant seat on the Committee.

While not a member of the Committee, the Committee noted that Ajanta Biswas had stood down as a member of the Healthwatch Nottingham and Nottinghamshire Board and Sarah Collis would be representing Healthwatch at future meetings of the Committee.

45 Apologies for absence

Councillor Nayab Patel (leave)
Councillor Anne Peach (unwell)
Councillor Cate Woodward (personal)
Councillor Kirsty Jones (personal)

46 Declarations of interest

In relation to Agenda Item 5 - Platform One Practice: Update on transition of patients – in the interests of transparency Councillor Michael Edwards stated that he was a registered patient at the Practice.

47 Minutes

The minutes of the meeting held on the 11 November 2021 were agreed and signed by the Chair.

48 Adult Social Care Medium Term Financial Position and Transformation Programme

Councillor Adele Williams, Portfolio Holder for Adults and Health, and Sara Storey, Director of Adult Health and Care, spoke to the Committee about the financial position in relation to Adult Social Care, including relevant proposals within the draft Medium Term Financial Plan (MTFP) and aspects of the Council's Transformation Programme relevant to Adult Social Care. In addition to the information set out in the written report they provided the following information:

- a) There is increasing demand for services and coupled with a challenging financial position and a lack of certainty over future funding, impacting on the Council's ability to carry out any long term financial planning.
- b) A key potential solution to pressures facing the organisation is transformation of services leading to different models of delivery. Information on the Council's Transformation Programme, to support delivery of the Recovery and Improvement Plan, was presented to the Overview and Scrutiny Committee in October 2021.
- c) In developing the Medium Term Financial Plan, some of the most significant challenges relate to Adult Social Care and Children's Services. It is anticipated that there would be an increase in the number of people needing care, an increase in cases that involved a complexity of issues and an increased cost per unit of care.
- d) The 'Better Lives, Better Outcomes Strategy' has been built upon and a number of engagement sessions held with staff about the transformation programme, discussing how the transformation of services could lead to different models of delivery.
- e) The Service is committed to supporting people to live independently in their own homes and consideration is given to supporting and developing the workforce to achieve this. Consideration had been given to what support and assistance could be given to staff to enable them to be most effective in carrying out their duties, included looking at the provision of additional equipment or IT services.
- f) The impact of previous decisions to make financial savings e.g. freezing 15 posts last year, has been felt this year with an increase in waiting times for assessment and care. As a result, the draft MTFP does not include any proposals for further staffing reductions and capacity will have to be put back into the service in order to meet longer term pressures. Requirements of the Care Act, including a focus on prevention, are statutory and the Service must operate in a safe and legally-compliant way. Therefore, any associated impact of financial decision making will be highlighted.

During subsequent discussion and in response to questions, the following points were made:

- g) There are challenges in forecasting demand pressures over the four years of the Medium Term Financial Plan, particularly in terms of the numbers of people requiring care and the level of care required. The methodology used for forecasting is sound but it is impossible to fully predict demand and this is concerning from a financial planning perspective.
- h) Some councillors raised concern about the level of investment in supporting transformation, including the engagement of external consultants, and whether it could be better delivered in-house. The Director of Adult Health and Care responded that officers do have the skills and knowledge but, due to the lean nature of the Service, there is a lack of capacity to support transformation and change while delivering services, particularly given challenges created by the Covid pandemic. In terms of the challenges in delivering change, the Committee was informed that there is a range of evidence from other local authorities who have achieved similar change over a four year period. The key is having sufficient capacity and any delays in deploying that capacity will impact on the ability to both make sufficient savings and make a positive difference for citizens.
- i) In response to questions about demand management and ensuring individuals receive the appropriate level of care, the Committee was informed that Adult Social Care colleagues work closely with health colleagues to ensure appropriate care packages are in place for those discharged from hospital. There can be a tendency for health colleagues to over-assess the level of care needed and this can result in unnecessary financial pressures. There is recognition that care needs cannot properly be assessed until a person has been discharged. At this point the level of need is assessed and it is important that the Service has sufficient capacity to regularly review need and ensure an appropriate level of care is in place.
- j) It was suggested that there are opportunities for greater levels of partnership working with partners beyond those commissioning and delivering health services, for example housing providers. There were examples of positive partnership working, such as with Housing and Independent Living Schemes, and whilst there is participation with the Integrated Care System and Independent Care Providers, this did not always align completely with the strategic priorities of the Council. It was acknowledged that the Covid pandemic has had an impact on partnership and multi-disciplinary working.
- k) The Director of Adult Health and Care acknowledged that, in the past, engagement with service users about change has tended to focus on formal consultation and she is keen to move towards greater co-production and partnership working. Change has to be acceptable to people.
- l) In response to a question about the impact of wider savings proposals on adult social care, the Director of Adult Health and Care responded that any changes that affect people are likely to impact on those with complex needs and vulnerabilities even more. She assured the Committee that plans are shared

across the Council to try to identify and mitigate negative impacts. This includes looking holistically at people's needs, examining the long term support that they may need as they transition through the various services, including with partners such as the NHS and schools.

- m) The use of a strengths-based approach has started this week and it is anticipated that delays in accessing services will be gone by 4 January. The focus on activity will then move to reablement and it is intended that the waiting list will have reduced by the end of January.

The Chair stated that the Committee's comments will be fed into discussions at the Overview and Scrutiny Committee meeting on 5 January for inclusion in Scrutiny's response to the budget consultation.

The Chair also noted that the Adult Social Care Workforce Plan will be presented to the Committee at its meeting in January 2022.

49 Platform One Practice - Update on transition of patients

The Chair introduced the report from Nottingham and Nottinghamshire Clinical Commissioning Group updating the Committee on the transition of patients from the Platform One Practice to either the Parliament Street Medical Centre or other general practices.

The Committee commented that, following scrutiny earlier in the year, the process of transition appeared to have been relatively smooth but some concerns remained about the impact on Emergency Department attendance, which can only be assessed in the medium-longer term. The Committee noted the current position and agreed to consider reviewing wider impacts of the change in due course.

50 Work Programme

The Chair, Councillor Georgia Power, reported that since the last meeting a range of additional evidence had been gathered in relation to the Committee's areas of concern regarding Nottingham University Hospitals NHS Trust (NUH). This included a meeting with the NHS England Midlands Regional Medical Director and representatives of trade unions representing employees of NUH. The Committee has invited the Trust to attend its meeting in February specifically in relation to maternity services and prior to that meeting the Committee will be seeking evidence from the Royal College of Midwives.

The Committee noted its current work programme for the remainder of the year.