

## **Minutes of the Adult Social Care Select Committee**

**Wednesday 17<sup>th</sup> January, 2024 at 6.30 pm  
In Committee Room 2, at the Council House,  
Priory Road, Dudley**

### **Present:**

Councillor L Johnson (Chair)

Councillor J Elliott (Vice-Chair)

Councillors A Aston, S Bothul, T Crumpton, A Davies, M Hanif, A Hopwood and A Qayyum.

### **Dudley MBC Officers:**

M Bowsher (Director of Adult Social Care), J Vaughan (Head of Assessment & Independence) and H Mills (Senior Democratic Services Officer)

### **Also in attendance:**

Councillor M Rogers (Cabinet Member for Adult Social Care)

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### 31 **An Apology for Absence**

An apology for absence from the meeting was submitted on behalf of Councillor R Collins.

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### 32 **Appointment of Substitute Member**

No substitutes were appointed for this meeting.

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33 **Declaration of Interest**

No Member made a declaration of interest in accordance with the Members' Code of Conduct.

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34 **Minutes**

**Resolved**

That the minutes of the meeting held on 15<sup>th</sup> November, 2023, be confirmed as a correct record and signed.

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35 **Public Forum**

No issues were raised under this agenda item.

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36 **Corporate Quarterly Performance Report – Quarter 2 (1<sup>st</sup> July – 30<sup>th</sup> September, 2023)**

The Director of Adult Social Care presented a report on the Quarter 2 Corporate Quarterly Performance of the financial year 2023-24, covering the period 1<sup>st</sup> July to 30<sup>th</sup> September 2023, aligned to the 2022-25 Council Plan.

During the presentation, it was reported that of the 11 Adult Social Care Corporate Key Performance Indicators (KPI's) four were underperforming, namely:-

PI.2620 – Number of people with a learning disability support reason awaiting a Care Act review where the last review or assessment was over 12 months ago.

PI.2621 - Number of new people aged over 65 into residential care or nursing care.

PI. 2626 – Percentage of Section 42 individuals with outcomes expressed, fully achieving their outcomes.

PI.2627 – Percentage of Section 42 individuals with outcomes expressed, fully and partially achieving their outcomes.

In referring to PI.2620, it was acknowledged that whilst performance had improved during the quarter, achievement still remained below target. A direct payments project had been implemented and a dedicated team established who were working to fast-track reviews and it was envisaged that an improvement would be evidence moving forward.

In referring to PI.2621, it was reported that it was the Governments preference to see a low number of people moving into residential and nursing care provisions, however there had been a stepped increase during the current financial year due to hospital demand and the level of activity within the care system. It would therefore be unlikely that this KPI target would be achieved for 2023/24.

In referring to PI. 2626 and PI. 2627, it was described that the two KPI's related to the safeguarding process and what a person who had entered the system wanted to achieve from the process. It was acknowledged that some of the expectations were not always achievable, however the Safeguarding Team were positive that performance would be improved by the end of the financial year.

The Director of Adult Social Care then referred to the Adult Social Care Outcomes Framework (ASCOF) and in doing so advised that the data collected from ASCOF's set of agreed indicators would be used to measure how well care and support services were provided in the Borough, and would be shared nationally, regionally and locally to identify strengths and weaknesses across the system. It was reported that an improvement had been reported on 16 of the 18 ASCOF indicators compared to the previous reporting year and Dudley's position on the national league table had improved.

The Director of Adult Social Care reported on the indicators with particular reference made to the two areas that required improvement, namely the proportion of adults with a learning disability in paid employment and the proportion of older people (aged 65 or over) who received reablement/rehabilitation services after discharge from hospital. It was reported that work with employment support agencies, the job centre, as well as apprenticeships would be explored to improve employment opportunities for adults with learning disabilities.

The Committee were advised that in comparison to the previous year approximately 562 additional people were now accessing care and support, which had reflected upon the Directorate's spending position, however the quality of services that people were receiving across the board remained good and improving.

Arising from the presentation of the report, members made comments, asked questions and responses were provided where necessary, as follows:-

- a) In referring to the proportion of adults with a learning disability in paid employment, Councillor T Crumpton commented on the need for a holistic approach within the Council to provide support to this cohort of adults, in particular the transition from a young person to an adult.

In responding the Director of Adult Social Care commented that COVID had significantly impacted upon employment for people with learning difficulties, as companies were operating more online, with fewer physical roles available, together with competition for job roles. It was considered important to hear from people who were supported about their experiences to gain a better understanding of how to support people into work. Further work was required to re-establish job coaches and to raise the profile to encourage local organisations, businesses and charities to engage.

- b) Councillor T Crumpton expressed his concern that the budget proposals specifically relating to Adult Social Care would not be presented to the Select Committee and asked for the views of the Director of Adult Social Care on how budget proposals would impact service delivery and performance.

The Director of Adult Social Care responded that due to the ongoing impact following COVID and pressures within the NHS, there had been a high demand for services/support during the current financial year, beyond expectation and financial limits. Every effort would be made to ensure that the Directorate remained within its allocated budgets for the 2024/25 financial year. The impact current services had, and the structure of services would need to be reviewed, and services would need to be creative in their delivery and open to change as it was recognised that it would be inevitable that difficult decisions would need to be made.

Whilst it was appreciated that the Local Authority had a statutory duty in terms of setting a legal budget, the Director of Adult Social Care emphasised the statutory responsibility and accountability he had to the residents of Dudley, and should at any time Dudley not meet its statutory obligations, regardless of the financial context of the Council, this position would be made evidently clear. It was considered that the fundamental factor was that funding allocated by Central Government was not commensurate with the level of demand for services or the costs required to pay staff who deliver that care, which was something that needed to be addressed by Government.

The Director of Adult Social Care assured Members that he would be transparent with service changes as a result of budget implications.

- c) Councillor T Crumpton suggested that it would be useful during the next year when developing new ways of dealing with spending controls, for the Committee to be advised in order of priority, so that the Committee could establish a good understanding of the services that the Local Authority was legally obligated to deliver and those that were not required and how a balance would be established.

In response, the Director of Adult Social Care advised that Dudley's strategy for a number of years had been to focus on prevention. A range of services i.e. telecare service, dementia gateways, carer hubs and dementia advisers, were currently offered by Dudley although were not a statutory duty to provide. However, it was considered that to take those services away, would have a negative impact on a person's independence and quality of life and consequently increase the demand for statutory care.

- d) Councillor A Aston referred to PI.2620 and in doing so observed that the target had never been met and questioned what the barriers were that prevented the service achieving the target and requested clarification as to what the target was based on.

In responding, the Director of Adult Social Care advised that there had been staffing issues within the Dudley Disability Service which had impacted upon performance levels, together with the rate of agency pay offered by other Local Authorities being higher than Dudley's pay scale which resulted in a challenge with recruitment. A further factor related to the range of people that had come into the service in the last 12 month period as a result of a closure of care providers, ownership transfer or that the care provider no longer provided care for an individual due to the costs paid by the Council not covering the aspiration of the business. In these circumstances the ongoing care and support would become a priority, therefore planned review work would again be deferred.

It was commented that to try to alleviate a delay in annual reviews, a triage system that regularly reviews all risks had been implemented. Any individual identified as having increased concerns would be prioritised.

It was acknowledged that the target had been set high to drive the service as hard as possible, with additional challenges which had to be prioritised. Recruitment continued to be of great concern, and reviews were undertaken to ensure that there was sufficient capacity to cover what was legally required.

- e) In responding to a question from Councillor A Davies in relation to ASCOF, the Director of Adult Social Care clarified that 3.7% of adults with a learning disability in paid employment, related to the population of adults with learning disabilities that was supported by the Council and had Care Act eligible needs. An analysis of the range of performance would be circulated to Members following the meeting.

- f) Arising from a further question from Councillor A Davies with regard to the non-statutory services that were provided by Dudley and whether these services could be provided by an alternative provision, the Director of Adult Social Care advised that he was not aware of any other Dementia Gateway in the UK. It was acknowledged that there were a range of voluntary sector organisations who specialised in providing support for people with dementia, although in terms of providing a whole approach this was not currently available outside of the Local Authority. It was considered that it may be possible for elements of the service to be delivered in a different way by other organisations, but the totality of the service could not be re-provisioned.

Members commended the Director of Adult Social Care and his teams for their dedication and ongoing commitment in providing care and support to residents of the Borough.

### **Resolved**

That the Quarter 2 Corporate Quarterly Performance report and the Directorate service summary sheets, be received and noted.

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### **37 Dudley Adult Social Care Activity – Average Number of People Delayed**

A report of the Director of Adult Social Care was submitted to provide an overview of supported hospital discharge activity assisting residents to return home.

In presenting the report, the Director of Adult Social Care referred to the critical incident that had been declared by Russell Halls Hospital, due to limited capacity in the hospital as a result of high admissions. It was commented that a winter plan across the whole health and care system had previously been agreed, which required the Local Authority to deliver approximately 5 discharges per day in order to keep the hospital flowing, although in realistic terms this had equated to 8 to 10 discharges per day since the Christmas period in order to meet hospital pressures. Financial support to balance the cost of the additional demand had been submitted to the Integrated Care Board, due to the Council's current financial position, and a response to that request was awaited.

The discharge team had continued to work seven days a week to meet with hospital demand, and multidisciplinary team meetings were arranged on a daily basis to discuss any issues that arose. It was reported that there had been a high number of failed discharges, due to an array of reasons, which needed to be addressed and improved moving forward.

In terms of recruitment, it was reported that Senior Occupational Therapists and Assistant Team Managers had now been appointed, together with Senior Supervisors, Care Staff promoting independence and Assistant Therapy assistants. Agency staff continued to be used to fill any predominate gaps in service delivery.

In concluding the presentation of the report, it was acknowledged that there was work to be done in the redesign of resourcing across the system to alleviate pressure in future winter plans.

Arising from the presentation of the report, Members made comments, asked questions and responses were provided where necessary as follows:-

- a) The Chair expressed concern in relation to the number of failed discharges, in particular those patients reported to have been discharged before being medically fit.

The Director of Adult Social Care commented that the number of failed discharges were tracked on a daily basis. Within the last three days there had been 10 failed discharges, which were not necessarily caused by the Local Authority, although resulted in the team doing twice as much work, when that resource could have been focussed on other patients.

- b) Councillor A Aston remarked on the media publication in relation to the critical incident declared at Russells Hall, which implied that pressure had been put on external partners for social care delays.



- c) In referring to patients that were conveyed to other hospitals outside of Dudley, Councillor A Aston questioned if this caused a significant problem with their discharge.

In responding the Head of Assessment and Independence advised that good working relationships had been developed with the discharge teams at out of borough hospitals and the same discharge to access pathways model, as operated at Russells Hall Hospital, was now adopted.

- d) Arising from a further question raised by Councillor A Aston with regards to whether the hospital acknowledged the pressure failed discharges had on the care system, the Director of Adult Social Care advised that failed discharges were reported during the daily 'Gold Call' meeting with the hospital, and a review was currently taking place at Russells Hall Hospital led by Walsall Together, who were an exemplar in the region, looking at pathways out of hospital and as to what could be done to improve discharge flow. Information would also be reported to the A&E delivery Board at the monthly meeting.
- e) Councillor M Hanif suggested that it would be useful if future reports included data with regards to the number of complaints received which related to the discharge process from Russells Hall Hospital. The Director of Adult Social Care confirmed that the Committee had previously received the Annual Complaints Report with the relevant data, but would confirm the specific number of complaints received about the hospital discharge process.

## **Resolved**

- (1) That the information contained in the report and presented at the meeting in relation to Dudley Social Care Activity – Average Number of People Delayed per day, be received and noted.
- (2) That the Director of Adult Social Care provide data with regards to the number of complaints received in relation to the discharge process from Russells Hall Hospital.

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38 **Preparing for Adulthood (PFA)**

Members considered a report of the Director of Adult Social Care on the development of the Preparing for Adulthood Team within Dudley Disability service and how this would improve the outcomes of young people with disabilities and/or autism in Dudley.

The Director of Adult Social Care presented the report and in doing so provided a summary of the aims and objectives of the Preparing for Adulthood team and the progress that had been made.

Members commented positively on the report and the progress of work that was being done to provide support and to give young people aspirations for the future.

Arising from a question raised by Councillor M Hanif with regards to whether recruitment would continue as a result of the current spending controls, the Director of Adult Social Care confirmed that the expertise position in mental health would continue to be recruited despite the recruitment freeze, as it was considered to be a niche area of specialism and would be funded and owned by both the Mental Health service and the Learning and Disabilities service, in the hope to reduce silos working.

**Resolved**

That the report in relation to Preparing for Adulthood be received and noted.

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39 **Adult Social Care Select Committee Progress Tracker and Future Business**

The Committee received the progress tracker and programme of planned future business for the 2023/24 municipal year.

The Director of Adult Social Care suggested that following a recent ADASS Practice Review on adult social care case files undertaken on 2<sup>nd</sup> January, 2024, Members may want to consider receiving a feedback report from the review at a future meeting.

**Resolved**

- (1) That the Adult Social Care Select Committee Progress Tracker and Future Business, be noted.
  - (2) That a feedback report on the ADASS Practice Review, be presented to the Adult Social Care Select Committee at its meeting in March, 2024.
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40 **Questions under Council Procedure Rule 11.8**

There were no questions to the Chair pursuant to Council Procedure Rule 11.8.

The meeting ended at 8.08pm

CHAIR