

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

**Wednesday 20<sup>th</sup> November, 2024 at 6.00 pm  
In Committee Room 2, Council House, Dudley**

### **Present:**

Councillor S Turner (Chair)  
Councillor A Smith (Vice-Chair)  
Councillors A Aston, A Davies, S Edwards, A Hopwood, L Johnson, A Qayyum, C Reid, and I Sandall.

### **Dudley MBC Officers:**

C Conway (Head of Adult Safeguarding), M Spittle (Head of Service - Access and Prevention), N Boerm-Hammond - Call Centre Manager – (Access and Prevention, Commissioning, Performance and Complaints), All Directorate of Adult Social Care, V Buchanan - Independent Chair Safeguarding Board (Commissioning and Support), Directorate Children's Services, and L Jury (Democratic Services Officer), Directorate of Finance and Legal.

### **Also in attendance:**

One Member of the Press

---

#### **23 Apology for Absence**

An apology for absence from the meeting was submitted on behalf of Councillor T Russon.

---

#### **24 Appointment of Substitute Members**

No substitute Members were appointed for this meeting.

---

#### **25 Declaration of Interest**

Councillor C Reid declared, a non-pecuniary interest, for transparency reasons, that she worked as a support provider for people 18 years and over in the Borough.

---

26 **Minutes**

**Resolved**

That the minutes of the meeting held on 18<sup>th</sup> September, 2024, be confirmed as a correct record and signed.

---

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

In providing an update on the Progress Tracker, the Chair confirmed that all responses had been provided.

Members noted the future business items for 2024/25.

**Resolved**

That the information contained in the Adult Social Care Select Committee Progress Tracker and Future Business 2024/25, be noted.

28 **Public Forum**

No issues were raised under this item.

---

29 **The Dudley Telecare Service**

Members considered a report of the Director of Adult Social Care on an update regarding the implementation of the digital alarm receiving centre (ARC), charging policy and progress made towards the replacement programme as part of the analogue to digital switchover.

In introducing the item, the Head of Service (Access and Prevention) referred to a report submitted to a previous meeting on the Telecare system where an update had been requested and introduced the Call Centre Manager – (Access and Prevention, Commissioning, Performance and Complaints) who was in attendance to provide a presentation to the Committee, a copy of which would be circulated to Members for information.

The Call Centre Manager advised that the presentation included information relating to the charging strategy now the final phase had been rolled out, price increase options that were being considered for the next three years, and had been attached as an Appendix to the report submitted, the Medium Term Financial Strategy (MTFS) savings and how the Directorate were looking to achieve this from Telecare, the current position with regards to the digital alarm receiving centre (ARC), the analogue to digital switchover and progress that had been made, the advantages that digital would bring, and a summary of performance and the future of Telecare.

Arising from the presentation the Chair referring to the delay in the uplift to the cost of 9.8% increase from April 2025 questioned whether a final decision had been made. In response, the Head of Service (Access and Prevention) stated that in terms of the charges, the service had been asked to consider Telecare as part of a functional review towards the whole MTFS for the Council, to look at the Telecare system to be a self-sustaining service, with no reliance on the general fund due to the Council's current financial situation and reference was made to the Appendix to the report in relation to the options that would be considered over the next three years. It was anticipated that the change from analogue to digital would bring in more commercial opportunities and therefore, the 3% would be retained to keep the service self-funding however if this were not achieved, further charges would need to be considered. It was emphasised that the service was a not-for profit service.

In relation to the proposed 9.8% increase which would result in the monthly charge rising to £23.40, the Chair questioned what other local authorities charged. In response, the Call Centre Manager advised that benchmarking against other authorities had been undertaken and had been presented to a previous meeting of the Committee, and it was noted that Dudley were still one of the lowest charging authorities but with the highest offer. It was noted that other Councils charge a base rate of approximately £4.00 per week which consists of monitoring only, with different charging levels being levied throughout depending on additional requirements necessary due to a decline in a person's health. It was noted that not all local authorities offered the falls response service, and if this were required, it would be provided at an additional cost. Dudley would request one charge with no additional costs.

Following the presentation, Members of the Select Committee raised questions, made comments and responses were provided where necessary as follows:

- (a) Councillor C Reid stated that she had been contacted by Council tenants who had indicated that they were withdrawing from the service due to the increase in costs in areas such as rent and the withdrawal of the Winter Warmth payment, and concern was raised at the risk that this would pose to the elderly, vulnerable tenants. In response, the Head of Service (Access and Prevention) advised that if someone vulnerable contacted the service to inform them that they wished to withdraw from the service, a follow-up would be undertaken, requesting contact with the vulnerable person's family or carers, to encourage the person to look at maximising the benefits they could claim such as Pension credit, to increase their income to continue with the service.

It was noted that the service had only experienced a minimal withdrawal from people who needed the service with the majority of withdrawals from tenants that stated that they had not used the service, which they had inherited with the property, but since receiving a letter regarding charging for the service, had made contact to confirm that they did not require the service. With regard to those who had indicated that they wished to withdraw from the service, a review of their call history had been undertaken and if necessary, contact had been made with family/carers to discuss the risks associated with the impact of the withdrawal. Every effort was made to try to reduce the risk of any vulnerable person being left without the support they required.

- (b) Councillor C Reid raised a further concern with regards to vulnerable people in the community who do not have family or social services connections and questioned how this vulnerable group would be targeted to ensure that they had access to the care service they required. In response, the Head of Service (Access and Prevention) referred to the different initiatives and opportunities to connect with people across access and prevention, such as Pleased to Meet You, and community support, where relationships were developed with vulnerable people to provide support. In response, Councillor C Reid proposed that Telecare work with housing who had allocated the properties to certain individuals to obtain this information.

- (c) In relation to the actual number of people who had withdrawn from the system from phase two, either from a financial perspective or as they did not use the system, Councillor S Edwards requested that these figures be provided to the Committee.
- (d) Referring to page 31, paragraph 28, in relation to the number of council tenants leaving the service and the number of private tenants joining the service since February 2024, Councillor A Aston questioned how progressively the service was being marketed. In response, the Head of Service (Access and Prevention) stated that the objective was to first stabilise the customer base and when moved fully to digital from analogue and once staff had been fully trained in the digital use, the service would be fully promoted across adult social care, working with the communities and health hubs to maximise the offer to them to help reduce the cost of the service.
- (e) In response to a question raised by the Vice-Chair in relation to corporate opportunities to ensure that the cost would not be passed on to the users going forward, the Call Centre Manager referred to the Lone worker system which was currently contracted out externally, however, when fully digital this could be done internally, and the service would look to explore other areas that could be run through the service, maximising the use of the service going forward and extending and marketing the out of hours service to other local authorities. In this regard, reference was made to Walsall Council who had offered their customers to Dudley when they had made the decision not to continue offering the service, however at that point, Dudley were unable to accept the offer. It was acknowledged that currently the service was a cost to the Council, however, following the analogue to digital switchover and once the infrastructure was in place, the main priority would be to ensure that connections were safe and the customer base was stabilised, and then consideration would be given to maximising the corporate opportunities such as, exploring call monitoring opportunities for other local authorities and organisations, moving forward.

- (f) Councillor A Qayyum questioned whether the new service charge proposals would meet the MTFs targets as stated in the report. In response, the Call Centre Manager stated that the targets for 2025/2026 would be achieved from the uplift and savings against staff vacancies and other expenditure savings as referred to in the report, and for 2026/2027 the service would endeavour to become more robust in terms of meeting the targets and referred to the 3 options as set out in the Appendix. It was stated that the service was aware of what was required to achieve the targets and were endeavouring to be transparent on how the targets would be achieved, would depend on which charging option was chosen moving forward.
- (g) In response to a further question raised by Councillor A Qayyum with regards to staff training, the Call Centre Manager confirmed that formal training commenced in September for all the staff who worked in the call centre to ensure that they were fully trained on the system. One hundred and sixty-two hours had been programmed for robust testing and training, utilising their skills and ensuring that all learning from the formal training had now embedded into the new practice and navigation of the system. It was envisaged that call centre staff would be taking a variety of calls and every scenario would be tested before going live and if any doubt occurred about the efficiency of the system, the roll out would be delayed until issues had been addressed.
- (h) In response to a question raised by Councillor A Davies in relation to the discrepancy between Accountancy and Telecare, as set out in paragraph 36 of the report, in relation to the current number and how significant a risk was this issue, the Call Centre Manager gave an explanation as to how this discrepancy had occurred and confirmed that numbers now had decreased from approximately five hundred to around one hundred and it was acknowledged that the team were still working on a back-log and work was being undertaken closely with them and the service's own accountancy team matching data.

As it was confirmed that the Options for a price increase over the next three years, as set out in the Appendix to the report, could result in a price increase of 9.88% each year, for three years, a discussion ensued as Members raised concerns on the impact on service users. As a result of the discussion, and issues raised earlier in the meeting and comments made by Members, the Chair proposed that following the switchover to digital and following the budget proposal to be considered in January 2025, this item be submitted to a future meeting for further consideration.

## **Resolved**

- (1) That the information presented in relation to the implementation of the digital alarm receiving centre (ARC), charging policy and progress made towards the replacement programme as part of the analogue to digital switchover, and the comments made by Members as above, be noted.
  - (2) That the Call Centre Manager provide Members with numerical information on the number of people who had withdrawn from the Telecare system due to the proposed increase in the service charge.
  - (3) That, the Director of Adult Social Care be requested to submit a further report to the Committee for consideration on the completion of the switchover from analogue to digital once further information was available on those withdrawing and joining the service.
- 

### **30 Questions under Council Procedure Rule 11.8**

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

---

### **31 Urgent Item – Annual Adult Safeguarding Report and Deprivation of Liberty Safeguards (DOLs)**

A report of the Director of Adult Social Care was submitted summarising the last twelve months of performance in relation to Adult Safeguarding and Deprivation of Liberty safeguards (DOLs) and ongoing preparations to meet the regulatory framework for the Care Quality Commission (CQC) Inspection of Adult Social Care.

In introducing the item, the Head of Adult Safeguarding advised that, V Buchanan, the Independent Chair of the Safeguarding Board, was in attendance to present the Annual Report and the Dudley Safeguarding Peoples Partnership Annual Report and it was advised that she had been appointed in April 2024 and the report covered the previous year.

In presenting the report, the Independent Chair of the Safeguarding Board, advised on the role of the Independent Chair to provide an independent review of the current situation, and to act as a critical friend and challenge the local authority and all partners who deliver safeguarding. Reference was made to the commitment over the next twelve months to hear directly from Dudley residents and front-line staff and to meet with people who were sharing information from a strategic perspective and to check this information with residents and staff who deliver the services.

Reference was made to page 5 of the report, in relation to the demographics in Dudley noting the number of people 75 years and over was 10.3%, being greater than the rest of the West Midlands region and subsequently the impact this would have on adult social care services.

In relation to domestic abuse-related incidents, it was noted that the rate was higher in Dudley however, it was acknowledged that this could be attributed to increased awareness and better reporting and was not necessarily that there were more incidents but people could be engaging in services and front-line staff were recognising abuse and recording incidents.

Referring to page 4 of the report in relation to data for Dudley over 2023/2024, specific reference was made to the increase in safeguarding concerns from the previous year. It was again acknowledged that this could be due to increasing awareness but it was recognised that work needed to be undertaken across the partnership to ensure that the referrals were coming through at the right level, to ascertain whether the person had a support need, however the concern was coming through to safeguarding, and ensuring that the right help was being administered as quickly as possible.

Reference was made to the Concerns by Source, relating to those who had raised safeguarding concerns, as detailed in the report, noting again an increase in recordings from the previous year.

In relation to Enquiries by Category of Abuse, it was noted that one of the highest areas was related to neglect and acts of omission relating to women, together with the highest proportion of incidents occurring in the victim's own home and it was acknowledged that the partnerships were very aware of this.



Reference was made to section 5 of the report which detailed some of the initiatives that had been undertaken to address some of the concerns around neglect and specific reference was made to Dudley's life course partnership, and whilst this report focused on the adults world, the connection with the children's world was also acknowledged, recognising the support adults provide to children. In terms of neglect, it was noted that a dedicated self-neglect webpage had been produced which provided partners and the public with advice on how to recognise and deal with neglect. Reference was made to the provision of a new hoarding and clutter toolkit to help practitioners recognise the challenges around hoarding and provide advice on how best to tackle the issue and provide support. Reference was also made to the development of an adult neglect strategy which would focus on the wider issue of neglect, and it was noted that this had been reviewed by other regional colleagues.

In relation to the cost of living crisis, it was noted that Public Health had worked with Adult Social Care around the Government's Household Support Fund.

In relation to exploitation across the life course, specific reference was made to the all age screening tool and pathway to ensure that all ages being exploited received the help they needed. It was also noted that work was being undertaken to develop an all age strategy and an exploitation profile for Dudley Borough.

Reference was made to some of the additional work that had been undertaken which included: multi-agency training to assist professionals to understand more about adult social care to ensure that people were referred to the right services to reduce delays, work being undertaken with co-production in mind to ensure that residents' views were considered when creating services, and work being undertaken with the Community Safety Partnership around domestic abuse related death reviews, increasing awareness and recognising the possible impact of domestic abuse on deaths such as suicide.

In conclusion, specific reference was made to the relationship with Healthwatch and the specific work that had been undertaken by Healthwatch and the learning received from the safeguarding adult reviews. It was noted that the purpose of the reviews was to understand what could have been done differently to improve practice, and reference was made to one safeguarding adult review from this year which would be published on the Dudley Safeguarding People Partnership (DSPP) website.

Following the presentation, Members of the Select Committee raised questions, made comments and responses were provided where necessary as follows:

- (a) The Chair sought clarification regarding the role of the Dudley Safeguarding People Partnership (DSPP). In response, the Independent Chair of the Safeguarding Board advised on the three statutory agencies, the Local Authority, the Police and Health who make up the Board and acknowledging the wider engagement with other agencies such as the Community Voluntary Sector (CVS) who work together to ensure that Dudley residents get the support that they need. The Chair's role was to provide an oversight and challenge, sometimes contentious issues, aid discussions, and provide a focus on areas that could be improved. The Chair advised that she felt that the report provided an accurate reflection of the position within Dudley but acknowledging that there were always opportunities for improvement, and specific reference was made to the issue relating to Deprivation of Liberty Safeguarding (DOLs) and waiting times and what the partnership were doing to address this issue, and issues around safeguarding referrals, and continuing challenges going forward.

In relation to safeguarding referrals into the Adult Multi-agency Safeguarding Hub (MASH), the Head of Adult Safeguarding referred to the need to improve safeguarding data identification and recognising the open door approach within adult social care for professionals and people to raise safeguarding concerns, and although not wishing to stop this positive approach, the service recognised the need to ensure that the referrals were more proportioned and work needed to be undertaken with the public and professionals around education as some of the concerns raised may not be safeguarding related but were included in the data, and acknowledging the extra pressure that this would place on staff and the increase already seen in referrals. Members were assured that risk was mitigated by having skilled professionals that provide support and guidance and ensure that all enquires that come in are scrutinised and triaged to the right areas and refence was made to the section 42 enquires.

- (b) In referring to the data in section four of the report, Councillor A Aston expressed his concern in the increase in referrals from over 1,000 to over 7,000 in nine years, however the conversion to enquiries had fallen and he acknowledged the need to educate people and professionals with regards to making safeguarding referrals, and it was questioned what engagement was made with the health sector in this regard. In response, the Chair of the Independent Safeguarding Board advised that this issue had been raised at a recent Board meeting and one concern raised was the safety of the system if it continued to be flooded with referrals as staff have to triage all the referrals to identify the 11% that are actual safeguarding and require an urgent response. It was noted that the Board were constantly training and raising awareness and reference was made to the Continuum of Needs document in Children's Partnership which guides people through the levels of support and it was discussed whether this could be duplicated within the adult arena. The Head of Adult Safeguarding advised that some of the adult social care team worked closely with Learning Development Co-ordinators within the DSPP and have drafted and delivered a lot of training, however the number of colleagues who make referrals within the authority/partnerships was acknowledged and it was noted that a podcast was being developed jointly that could be used by individual agencies with their staff and could be accessed by staff when out in the community to refer to for advice and guidance on safeguarding. Reference was made to the Multi-agency Safeguarding Hub (MASH) Operational Group that meet bi-monthly and examine the data, and it was noted that the ability to extract data in adult social care had improved and was now being used to educate others and identify where improvements could be made.
- (c) In response to a question raised by the Vice-Chair in relation to training, the Head of Adult Safeguarding advised of the training available including job role specific and more experiential learning, looking to develop co-productive training with people with lived experience.

- (d) Councillor C Reid commented that she felt that safeguarding had improved over the last 12 months from reporting to completion and stated that as a provider for people with mental and learning disabilities, they do report any safeguarding issues as they were responsible for their clients. In response the Head of Adult Safeguarding acknowledged the work of the Management Information Team who had assisted with this issue and reference was made to the development of key performance indicators which would allow for better scrutiny and encourage practitioners to work towards a deadline and allow for benchmarking across adult social care. The Independent Chair of the Safeguarding Board advised that the Safeguarding Partnership believe that the data was really important and work was being undertaken to develop a multi-agency data set that would not just focus on the local authority but would provide data from a police and health perspective also.
- (e) In response to a question from Councillor S Edwards in relation to the concerns by source, as set out on page 8 of the report, and the gender split, the Head of Adult Safeguarding advised that the highest proportion of concerns tended to be in the younger age range and females form the highest proportion of concerns across the board. It was noted that improvements on the hoarding toolkit had already become evident when starting to collect data this year and it was hoped to provide support to practitioners and other professionals on early identification and prevention. The Chair of the Independent Safeguarding Board advised that it had been requested that going forward, the data be broken down further as it was acknowledged that the 18 to 64 age group was too large an age range.
- (f) Councillor A Qayyum sought clarification on data set out on page 15 of the report and in response, the Head of Adult Safeguarding provided a detailed explanation relating to the procedure to be followed with Deprivation of Liberty Safeguards (DOLs) and advised that the issue had improved slightly as interventions had been introduced to address this issue and although a high number of referrals were still being received, there is now the ability to triage referrals more effectively but the challenge due to staffing resources was acknowledged.
- (g) Councillor A Aston raised concern with regard to the number of staff vacancies across the Council and the impact that this was having on the delivery of services.

**Resolved**

- (1) That the information submitted summarising the performance over the last 12 months in relation to Adult Safeguarding and Deprivation of Liberty Safeguards (DOLs), and ongoing preparations to meet the regulatory framework for the Care Quality Commission (CQC) Inspection of Adult Social Care and comments made by Members as stated above, be noted.
  - (2) That, the Dudley Safeguarding People's Partnership (DSPP) Safeguarding Annual Report for Adult 2023/2024, be approved.
- 

32 **Urgent Item – Corporate Performance Report Quarter 2, 2024**

As there was no officer in attendance to present this item, the Committee agreed to defer this item to be considered at a future Committee.

---

The meeting ended at 7.40pm.

CHAIR