

# Agenda

## Adults and wellbeing scrutiny committee

Date: **Wednesday 13 January 2021**

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Time: **10.00 am**

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Place: **Online meeting**

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# **Agenda for the meeting of the Adults and wellbeing scrutiny committee**

## **Membership**

**Chairperson**            **Councillor Elissa Swinglehurst**  
**Vice-chairperson**   **Councillor Jenny Bartlett**

**Councillor Sebastian Bowen**  
**Councillor Helen l'Anson**  
**Councillor Tim Price**  
**Councillor Alan Seldon**  
**Councillor Kevin Tillett**

## Agenda

	Pages
<b>1. APOLOGIES FOR ABSENCE</b>	
To receive apologies for absence.	
<b>2. NAMED SUBSTITUTES (IF ANY)</b>	
To receive details of any member nominated to attend the meeting in place of a member of the committee.	
<b>3. DECLARATIONS OF INTEREST</b>	
To receive any declarations of interests in respect of schedule 1, schedule 2 or other interests from members of the committee in respect of items on the agenda.	
<b>4. MINUTES</b>	9 - 16
To approve the minutes of the meeting held on 23 November 2020.	
<b><i>How to submit questions</i></b>	
<i>The deadline for the submission of questions for this meeting is 5.00 pm on Thursday 7 January 2021.</i>	
<i>Questions must be submitted to <a href="mailto:councillorservices@herefordshire.gov.uk">councillorservices@herefordshire.gov.uk</a>. Questions sent to any other address may not be accepted.</i>	
<i>Accepted questions and the responses will be published as a supplement to the agenda papers prior to the meeting. Further information and guidance is available at <a href="http://www.herefordshire.gov.uk/council/get-involved/3">www.herefordshire.gov.uk/council/get-involved/3</a></i>	
<b>5. QUESTIONS FROM MEMBERS OF THE PUBLIC</b>	
To receive any written questions from members of the public.	
<b>6. QUESTIONS FROM COUNCILLORS</b>	
To receive any written questions from councillors.	
<b>7. 2021/22 BUDGET SETTING</b>	17 - 28
To seek the views of the adults and wellbeing scrutiny committee on the budget proposals for 2021/22 as they relate to the remit of the committee.	
<b>8. COMMITTEE WORK PROGRAMME</b>	29 - 44
To consider the committee's work programme.	
<b>9. DATE OF NEXT MEETING</b>	
The next scheduled meeting is Monday 29 March 2021, 2.30 pm.	



## The public's rights to information and attendance at meetings

Herefordshire Council is currently conducting its public committees, including the adults and wellbeing scrutiny committee, as 'virtual' meetings. These meetings will be video streamed live on the internet and a video recording maintained after the meeting. This is in response to a recent change in legislation as a result of Covid-19. This arrangement will be adopted while public health emergency measures, including social distancing for example, remain in place.

Meetings will be streamed live on the Herefordshire Council YouTube channel at [www.youtube.com/HerefordshireCouncil](http://www.youtube.com/HerefordshireCouncil)

The recording of the meeting will be available shortly after the meeting has concluded through the relevant adults and wellbeing scrutiny committee meeting page on the council's website at <http://councillors.herefordshire.gov.uk/ieListMeetings.aspx?CId=955&Year=0>

### You have a right to:

- Observe all 'virtual' council, cabinet, committee and sub-committee meetings unless the business to be transacted would disclose 'confidential' or 'exempt' information.
- Inspect agenda and public reports at least five clear days before the date of the meeting. Agenda and reports (relating to items to be considered in public) are available at [www.herefordshire.gov.uk/meetings](http://www.herefordshire.gov.uk/meetings)
- Inspect minutes of the council and all committees and sub-committees and written statements of decisions taken by the cabinet or individual cabinet members for up to six years following a meeting.
- Inspect background papers used in the preparation of public reports for a period of up to four years from the date of the meeting (a list of the background papers to a report is given at the end of each report). A background paper is a document on which the officer has relied in writing the report and which otherwise is not available to the public.
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**The Seven Principles of Public Life  
(Nolan Principles)**

**1. Selflessness**

Holders of public office should act solely in terms of the public interest.

**2. Integrity**

Holders of public office must avoid placing themselves under any obligation to people or organisations that might try inappropriately to influence them in their work. They should not act or take decisions in order to gain financial or other material benefits for themselves, their family, or their friends. They must declare and resolve any interests and relationships.

**3. Objectivity**

Holders of public office must act and take decisions impartially, fairly and on merit, using the best evidence and without discrimination or bias.

**4. Accountability**

Holders of public office are accountable to the public for their decisions and actions and must submit themselves to the scrutiny necessary to ensure this.

**5. Openness**

Holders of public office should act and take decisions in an open and transparent manner. Information should not be withheld from the public unless there are clear and lawful reasons for so doing.

**6. Honesty**

Holders of public office should be truthful.

**7. Leadership**

Holders of public office should exhibit these principles in their own behaviour. They should actively promote and robustly support the principles and be willing to challenge poor behaviour wherever it occurs.





## Minutes of the meeting of Adults and wellbeing scrutiny committee held online on Monday 23 November 2020 at 2.30 pm

**Present:** Councillors Elissa Swinglehurst (Chairperson), Jenny Bartlett (Vice-chairperson), Sebastian Bowen, Helen I'Anson, Tim Price, Alan Seldon and Kevin Tillett

Councillors in attendance: Councillor Pauline Crockett (Cabinet member - health and adult wellbeing)

Officers: Assistant director for adult social care operations, Head of community commissioning and resources, Democratic services officer, Deputy solicitor to the council, Governance support assistant, Assistant director all ages commissioning, Head of care commissioning and Director for adults and communities

Others in attendance: Ian Stead (Healthwatch Herefordshire)

### 10. APOLOGIES FOR ABSENCE

All committee members were present.

Apologies were noted from Councillor Yolande Watson, cabinet support member - adults and communities.

### 11. NAMED SUBSTITUTES (IF ANY)

There were no substitutes.

### 12. DECLARATIONS OF INTEREST

No declarations of interest were made.

### 13. MINUTES

**Resolved: That the minutes of the meeting held on 21 September 2020 be approved as a correct record and be signed by the chairman.**

### 14. QUESTIONS FROM MEMBERS OF THE PUBLIC

No questions had been received from members of the public.

### 15. QUESTIONS FROM COUNCILLORS

No questions had been received from councillors.

### 16. BRIEFING ON THE HEREFORDSHIRE MARKET POSITION STATEMENT 2020-2025 FOR ADULTS AND COMMUNITIES

The head of care commissioning presented the Market Position Statement 2020-2025, the principal points included: the statement was not a statutory duty of the council but was considered good practice; the statement was aimed at providers to indicate the

strategic direction for the council and to enable providers to align their business plans to meet needs and demand now and in the future; this statement was more diverse than the previous iteration, with greater emphasis on the strengths based approach, technology enabled living, and prevention; attention was drawn to the implications of the ageing population and increasing demand on services, with the consequential need to explore alternative models of support and locality based commissioning responses; providers needed to engage with people on their health and care needs as individuals, rather than centring on particular conditions or disabilities; the commissioning intentions section was an important part of the document and reflected the council's move to an all ages commissioning approach; further analysis and information for providers would be available through the Understanding Herefordshire website in due course (<https://understanding.herefordshire.gov.uk>); feedback had been received from other consultees and the statement would be updated accordingly.

The chairperson welcomed the report and invited questions and comments from attendees, the principal points included:

- i. A committee member commented that falls had been an enduring issue and questioned the progress that had been made. The head of care commissioning provided an overview of the work that had been undertaken and reported that a project was underway, led by the director for adults and communities, to establish an effective system wide falls prevention approach.
- ii. A committee member said that an overriding theme was the council's reliance on its partners and sought assurances about the resilience of the care home sector and of Primary Care Networks (PCN).

In terms of care homes, the head of care commissioning advised that the council was working continuously with the provider sector on business continuity planning and, whilst noting the significant impact on the sector nationally and locally, said that the implications of Covid-19 on long term goals and aspirations were uncertain at this stage. The assistant director adult social care operations said that the document set out some of the different models and approaches that would be needed in order to sustain the increase in demand, and the development of the council's own services and accommodation offer would be key to managing this.

The assistant director all ages commissioning advised that an unforeseen outcome of Covid-19 was that system working, out of necessity, had improved vastly to ensure that citizens and providers were supported and protected. The relationship with the PCNs was described as now being much stronger and the PCNs were more forthcoming in their approach; references were made to the provider forum and the Enhanced Health in Care Homes programme.

The assistant director all ages commissioning contrasted the local pattern of care home ownership with the national position, confirmed that care home sustainability was monitored carefully, and provided an overview of the support provided to care homes. In recognition of the support provided during the pandemic, Herefordshire now hosted and chaired the West Midlands provider forum. However, capacity remained an issue, especially given the high proportion of self-funders, and the county could not be wholly reliant on the independent sector. Therefore, the development of a care home facility remained a priority.

The committee member suggested that, in view of the fragmentary nature of the health sector, the committee may wish to explore partnership relationships and resilience further as part of its work programme. The assistant director adult social care operations provided further examples of the improved working relationships

and interdependence between different departments and agencies, reflecting the changing paradigm in the approach to community-based care.

iii. The vice-chairperson:

- noted that this was a huge piece of work and congratulated the officers involved;
- recommended that stronger links be made in the document with the social value areas that the council was moving into;
- with attention drawn to agenda page 51 which referred to 'in April 2020 NHS mental health and learning disability services will transfer' and to agenda page 55 which referred to the 'recently agreed and will implement a new Herefordshire and Worcestershire Living Well with Dementia Strategy', it was recommended that these paragraphs be updated to reflect the current positions;
- with attention drawn to agenda page 57 'How well the council is doing', noting references to the Adult Social Care Survey and the comment that 'The voice of residents and the wider workforce will be key to capture for future design principles and delivery', it was recommended that the committee receive an update on progress in twelve months' time, in the form of a written briefing note; and
- with attention drawn to agenda page 59 'Commissioning intentions' which referred to 'Increase and improve services that support complex and challenging behaviours such as autism or dementia', it was recommended that this should also include learning disabilities.

The assistant director all ages commissioning: recognised that it was essential for commissioners who design services to listen to their customers; provided an overview of the customer and service user engagement work being undertaken through the 'Making it Real Board'; and advised that Healthwatch Herefordshire had recently been awarded a new contract for the continued provision of the Healthwatch service. He added that, whilst the statement was a provider focussed document, the views of customers and services users in the design of services was just as important; as a further example, it was noted that the Making it Real Board would be involved in the design of an assessment centre at the Hillside Care Centre.

- iv. A committee member noted that Council had set aside £13.1 million for its own 'care home and extra care development' but he could not identify any obvious reference to this in the statement and had expected some expression of intention to be made.

The head of care commissioning said that the general intention to deliver in-house care and support provision had been included but acknowledged that reference to the actual development should be made explicit in the document.

- v. A committee member: supported the all ages approach; considered the glossary helpful; felt that some phrases, such as 'home and family can be best', could be perceived as glib assertions by some; drew attention to the rate of first time entrants to the criminal justice system which had reduced but was still higher than the national average, and to the higher rate of looked after children compared to statistical neighbours; noted the commissioning of new accommodation based services for care leavers with complex needs; questioned whether it was appropriate to reference 'Locally the political leadership has changed with a renewed focus on People and Communities' in the 'Local Context' section; and

commented on the merger of GP surgeries in Ledbury and that, despite the launch of a new website, outdated information on other websites and on social media was causing confusion for local residents.

The head of community commissioning and resources advised that, since the publication of the agenda, amendments and additions to the commissioning intentions and other text had been proposed, including matters relating to care leavers and other vulnerable young people. He also provided an overview of service developments in terms of the all ages approach.

vi. A committee member expressed relief that transition in care was being addressed positively and, noting difficulties with local authority care homes in the past, commented on the need for ongoing vigilance in terms of in-house developments.

vii. The chairperson made observations, including:

- the statement was a dense document but was well laid out and user friendly;
- on the issue of 'develop new locality based model(s) by PCN' (agenda page 46), there was a need to address the cohort of Herefordshire residents who were not served by PCN footprints;
- the ambition to have a diversified offer which was almost bespoke was supported;
- it was noted that there was enormous potential in terms of the shared lives offer but it was also felt that there were potential synergies and aggregated benefits in the concept of home share, particularly for older people living alone currently; whereby people could be supported to remain in their own homes by sharing their living space with someone in need of accommodation or perhaps someone wanting to gain experience in the care industry;
- with attention drawn to agenda page 41, it was suggested the statistics on predicted increases in dementia should be clarified, particularly in terms of the period covered; and
- with attention drawn to agenda page 40, the chairperson said that she was curious about the reasons behind the increasing costs which could not be accounted for by inflation.

The assistant director adult social care operations: said that it was difficult to understand some of the cost increases but it was felt that there may be a degree of lag locally, resulting in sudden increases in order to realign with the costs of delivering care; work was being carried out in terms of the learning disabilities pathway; with the acceleration in progress made in response to Covid-19, it was a good time to reflect on relationships with the PCNs and also on technological innovation; and it was recognised that further work was needed on the supported living accommodation offer, potentially including the concept of home share. The chairperson added that home share could be particularly relevant to self-funders and could contribute to achieving better balance in the market.

The director for adults and communities said that there was a need to revisit the historic trends and the reasons why additional costs had come into the system; for example, a shift in learning disabilities towards direct payments had increased the cost of some packages without necessarily improving quality in terms of the care that was being delivered. He said that there was also a need to reflect the issue of higher acuity in the statement. The assistant director adult social care operations commented on the increased levels of data captured in recent months which was being interrogated, particularly in terms of the discharge to assess process.

- viii. The vice-chairperson questioned workforce implications in terms of the care home and extra care development, ageing population demographics, and rural sparsity.

The assistant director all ages commissioning said that it was likely that the care home and extra care development would be staffed by people employed by Hoople, with the council as the registered provider of the service, in a similar arrangement to that used for the majority of Home First care staff. He commented on the need to attract, recruit and retain younger people, and act strategically to lower the statistical average age of the population in Herefordshire. References were made to work with Skills for Care and to marketing of the care sector to people working in retail currently.

A committee member commented on the need to ensure that salaries were competitive, that there were opportunities for career progression, and there were incentives for young people to return to the county once they had gained qualifications and experience elsewhere.

The chairperson noted that recruitment and retention was crucial across a number of activities, and recommended that a written briefing note be provided on this.

- ix. The vice-chairperson, drawing attention to agenda page 45, considered the proportion of NHS Continuing Healthcare (CHC) commissioned care (2%) to be surprisingly low compared to council commissioned care (59%), and questioned what was being done to manage this situation.

The assistant director adult social care operations said that an assessment was being undertaken for the period between March and September 2020 in order to map outcomes, to compare these to NHS predictions, and to inform further discussions. She also said that consideration was being given to a project, including the development of an algorithm, to establish an external process in terms of funding arrangements. She added that the position for self-funders had been particularly difficult to establish in the past.

The chairperson recommended that a written briefing note be provided to update committee members on these developments in due course.

- x. Ian Stead, chair of Healthwatch Herefordshire, made a number of comments, including: Healthwatch Herefordshire was pleased that a new contract had been awarded for the continued provision of the service and looked forward to continuing the good relationship with the council ; Healthwatch Herefordshire had been very impressed by the work undertaken during Covid-19, particularly in terms of the discharge arrangements and care homes, and contrasted this with the position elsewhere nationally; Healthwatch Herefordshire had submitted its own comments on the Market Position Statement, commending the wider approach to commissioning and suggesting some matters for further consideration, such as young carers and accessibility to the internet; and the PCNs were in their early stages of development and had the potential to work well with the Talk Community agenda.

The assistant director all ages commissioning noted that the relationship with Healthwatch Herefordshire provided a balance of challenge and pragmatic support.

- xi. The cabinet member – health and adult wellbeing: thanked the officers involved for producing an in depth Market Position Statement and for responding to questions from the committee; although not a statutory requirement, it was considered important to produce the document to acknowledge the changing needs of

Herefordshire residents, both adults and children; the challenges of austerity were recognised and resources needed to be managed appropriately; learning from the past enabled the council to plan for the future; and members were thanked for the debate and the recommendations of the committee would be welcomed.

- xii. The assistant director all ages commissioning also thanked the committee for its scrutiny of the statement, noting that members were well sighted on the key issues in health and social care in Herefordshire, and praised the officers involved for producing such a well-received document. He added that the statement was important to how the authority would operate going forward, it would be an organic resource that would be updated to reflect the changing local position, and he looked forward to updating the committee on progress with the delivery of the commissioning intentions in due course.

The chair said that the level of engagement with providers and the commitment of the team was exemplary, and endorsed the movement towards diversity and a broad base of offer to meet need.

The committee discussed draft recommendations. During the discussion: the director of adults and communities provided additional information on the falls prevention project and the intention to move from a react and respond model to a predict and prevent model; the director also commented on the work undertaken by the adults social care workforce development team on the recruitment of social workers but noted that there were now significant pressures in terms of occupational therapists; and the chairperson proposed that, as well providing a written briefing note, the executive be asked to give consideration to an all-member workshop on recruitment and retention across council services. The committee then discussed amended recommendations and agreed the following resolution.

**Resolved:**

1. **That the committee welcomes the development of the Market Position Statement and recommends:**
  - a. **That a written briefing note be provided to the committee on progress in twelve months' time, including how service users have been engaged in the development and design of specific care and support services.**
  - b. **That the importance of the social value elements be made more prominent in the document.**
  - c. **The document be refreshed to reflect the current positions in terms of the new arrangements for mental health services and the adopted dementia strategy.**
  - d. **Learning disability services be included under commissioning intention 3.**
  - e. **Explicit reference be made to the Council's intentions for care home and extra care development, and any associated workforce implications.**
  - f. **That consideration be given to clarifying the situation for Herefordshire residents that are not served by the footprints of Primary Care Networks.**

- g. That consideration be given to synergies and diversified offers (such as home share) to meet the needs of people needing care (both those funded by the council and those funding themselves) and people prepared to provide support in exchange for accommodation and / or to gain experience in the care industry.
  - h. That the statistics included on page 15 (agenda page 41) on predicted increases in dementia be clarified.
  - i. That identified trends in page 14 of the statement (agenda page 40) be reviewed and be supported by additional narrative, as appropriate.
  - j. That a written briefing note be provided on NHS Continuing Healthcare, including the development of a related algorithm and the progress made on retrospective cases.
  - k. That a written briefing note be provided on recruitment and retention issues, and the executive consider the usefulness of an all-member workshop, so that all members can be apprised of the challenges.
  - l. That a written briefing note be provided on the falls prevention service.
2. That issues of resilience and business continuity in the care home sector and the Primary Care Networks be included in the committee's work programme, potentially in the suggested task and finish group on the Covid-19 system response.

## 17. COMMITTEE WORK PROGRAMME

The chairperson reported that committee members had considered potential items of business and priorities at a scrutiny work programming session, held on 20 November 2020, and outlined the updated work programme, as follows.

- |                 |   |
|-----------------|---|
| 11 January 2021 | Agenda item on: 2021/22 budget.   |
| 29 March 2021   | Agenda items on: emergency and urgent care; and carers strategy review. |
| (tbc) May 2021  | Agenda items on: mental health; and learning disability services.       |
| 21 June 2021    | Agenda items on: out of hospital care; and domestic abuse strategy.     |

It was suggested that an all-member seminar be arranged on Talk Community and written briefing notes were requested on: Herefordshire Safeguarding Adults Board annual report; sexual health service; and substance misuse.

The chairperson drew attention to the schedule of recommendations and responses, in appendix 1 to the report, which had been updated to reflect the recommendations made at the last meeting in relation to 'suicide prevention strategy implementation' and thanked the head of community commissioning and resources and the cabinet member – health and wellbeing for their prompt and full responses.

### **Resolved: That**

1. The work programme for 2020/21 be agreed; and
2. The updated schedule of recommendations and responses be noted.

**18. DATE OF NEXT MEETING**

Monday 11 January 2021 at 2.30 pm \*

[\* note: this meeting was moved to Wednesday 13 January 2021 at 10.00 am subsequently]

The meeting ended at 4.30 pm

**Chairperson**





<b>Meeting:</b>	<b>Adults and wellbeing scrutiny committee</b>
<b>Meeting date:</b>	<b>Wednesday 13 January 2021</b>
<b>Title of report:</b>	<b>2021/22 budget setting</b>
<b>Report by:</b>	<b>Leader of the Council</b>

## Classification

Open

## Decision type

This is not an executive decision

## Wards affected

(All Wards)

## Purpose

To seek the views of the adults and wellbeing scrutiny committee on the budget proposals for 2021/22 as they relate to the remit of the committee.

The draft proposals show an overall increase of £1.2m in the proposed base revenue budget for adults and communities. This follows a review of the base budget requirement and the identification of savings to enable a funded budget to be proposed.

The budget proposes increasing council tax by 4.99% inclusive of a 3% adult social care precept. The 3% adult social care precept will generate additional income of approximately £1m, this income is ring-fenced to adults and communities.

The committee is invited to make recommendations to inform and support the process for making Cabinet proposals to Council regarding the adoption of the budget and associated budget framework items, including providing constructive challenge to the Cabinet's proposals.

## Recommendation

**That:**

- (a) the committee determine any recommendation it wishes to make to Cabinet in relation to the 2021/22 budget proposals specifically affecting adults and wellbeing.**

## Alternative options

1. There are no alternatives to the recommendations; Cabinet is responsible for developing budget proposals for Council consideration and it is a function of this committee to make reports or recommendations to the executive with respect to the discharge of any functions which are the responsibility of the executive. The council's budget and policy framework rules require Cabinet to consult with scrutiny committees on budget proposals in order that the scrutiny committee members may inform and support the process for making Cabinet proposals to Council.
2. It is open to the committee to recommend alternative spending proposals or strategic priorities; however given the legal requirement to set a balanced budget should additional expenditure be proposed compensatory savings proposals must also be identified.

## Key considerations

3. The proposed 2021/22 revenue budget for adults and communities supports the ambitions stated in the council's county plan, shown below:-

<ul style="list-style-type: none"><li>Minimise waste and increase reuse, repair and recycling</li><li>Improve and extend active travel options throughout the county</li><li>Build understanding and support for sustainable living</li><li>Invest in low carbon projects</li><li>Identify climate change action in all aspects of council operation</li><li>Seek strong stewardship of the county's natural resources</li><li>Protect and enhance the county's biodiversity, value nature and uphold environmental standards</li></ul>	<ul style="list-style-type: none"><li>Ensure all children are healthy, safe and inspired to achieve</li><li>Ensure that children in care, and moving on from care, are well supported and make good life choices</li><li>Build publicly owned sustainable and affordable houses and bring empty properties back into use</li><li>Protect and improve the lives of vulnerable people</li><li>Use technology to support home care and extend independent living</li><li>Support communities to help each other through a network of community hubs</li></ul>	<ul style="list-style-type: none"><li>Develop environmentally sound infrastructure that attracts investment</li><li>Use council land to create economic opportunities and bring higher paid jobs to the county</li><li>Invest in education and the skills needed by employers</li><li>Enhance digital connectivity for communities and business</li><li>Protect and promote our heritage, culture and natural beauty to enhance quality of life and support tourism</li><li>Spend public money in the local economy wherever possible</li></ul>
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4. The 2021/22 base budget proposals are based on the provisional local government financial settlement and an assumed total council tax increase of 4.99%, 1.99% increase in core council tax and a 3% adult social care precept. This increases the band D equivalent charge to £1,652.30 representing an increase of £1.51 per week (£6.54 a month). This is the maximum increase permitted, a higher increase would require the support of a referendum.
5. The 3% adult social precept will generate additional income of approximately £1m (this reflects the lower council tax base proposed, see paragraph below). This income is ring-fenced to fund the adults and communities base budget pressures arising from demands for services.
6. The council tax base for 2021/22 has declined by 2% to 68,355.22 band D equivalent properties. This reduction reflects an increase in excess of 25% of working age council tax reduction claimants, an increase of 1,400 households throughout the county receiving council tax discount due to the low level of income the household receives. This is a direct local consequence of the economic impact of Covid-19 which is a national issue being faced by all councils. Expectations are that tax bases are expected to recover in a couple of years' time.

7. The current financial year is facing unprecedented pressures in response to the national pandemic Covid-19. Central government has awarded grants to local authorities to manage these pressures, however this is expected to cover around 70% of the cost. Adults and communities are currently forecasting a £3.7m overspend in 2020/21 of which the majority is directly related to Covid-19 pressures, for example personnel protective equipment the cost of which will be funded through a central government grant.
8. Other budget pressures reflected in the 2021/22 budget proposal include:
  - Potential increase in social care customers
  - More costly residential and nursing care home placements
  - Increased demand for more complex homecare packages to enable people to remain in their own homes
  - Increase in numbers of self-funders falling below the capital threshold for social care
  - Increased pressures on carers resulting in increased support needs.

#### **Proposed adults and communities 2021/22 revenue budget**

9. The proposed adults and communities revenue budget for 2021/22 is shown below:-

<b>Directorate</b>	<b>21/22 gross budget £k</b>	<b>20/21 revised base £k</b>	<b>21/22 pressures £k</b>	<b>21/22 savings £k</b>	<b>21/22 base budget £k</b>
Adults and communities	101,605	57,751	4,458	(3,270)	<b>58,939</b>

10. In addition to the net budget proposal above is the improved better care fund which will continue in 2021/22 at £6.6m. The adults and communities gross budget includes the expected public health grant. The net base budget represents 37% of the total council net budget.
11. Of the pressures, just over £1m relates to transitional clients moving from children's services to adults in the 2021/22 financial year. These clients are identified as likely to require adult social care support alongside any continuing educational needs.
12. The remainder of the demand pressure falls in the older client group and is due to a combination of factors i.e. client demand, particularly within homecare as people with increased needs are supported in their own homes rather than a care home setting, but also the cost of maintaining that same care at home for people with higher needs, quite often requiring either double up packages of care or additional hours/more frequent visits per day to keep them safe in their own homes.
13. During this past 9 months, adult social care have supported a higher proportion of older people at home, with fewer people being discharged into 'long stay' care home placements due to the impact of Covid-19. A large proportion of admissions to care homes during this current Covid-19 period are initially on a short stay basis after being discharged from hospital. They are then reviewed regularly to ensure the appropriateness of their ongoing care provision and their support is adapted as and when appropriate to do so.
14. As the end of the financial year approaches and hopefully the pandemic eases, it will be become more apparent what the likely 'long term' outcomes are for those currently being

supported and as a result, the proportion of those being supported at home versus those requiring a care home placement is likely to change.

15. To enable a funded budget to be proposed, savings are required. These are summarised below and attached at Appendix A is the key directorate challenges and issues of delivering these savings:

<b>Description</b>	<b>£000</b>
Modernising assessment, commissioning and services delivery for learning disability clients	1,500
Targeted review of complex cases followed by system challenge	1,250
Implementing changes to client charging policy and income disregards	520
<b>TOTALS</b>	<b>3,270</b>

16. A full equalities and environmental impact assessment of these savings is underway. The savings targeted are grouped by theme in the table below:-

<b>Streamlining business</b>	<b>Income generation</b>
Modernising assessment, commissioning and services delivery for learning disability clients	Implementing changes to client charging policy and income disregards
Targeted review of complex cases by external provider followed by system challenge	
<b>2,750</b>	<b>520</b>

### **Budget setting timetable**

17. Council will be asked to approve the 2021/22 budget on 12 February 2020; this will follow confirmation of the final financial settlement for 2021/22 which is expected in late January. Council will also be asked to approve the updated medium term financial strategy (MTFS), treasury management strategy, council tax reduction scheme and the capital strategy at the same meeting. This 2021/22 budget setting timetable is shown below:-

<b>Action</b>	<b>When</b>
Consultation with parish and town councils	Nov-20
Independently led focus group consultation (this will include businesses)	Nov-20
Online survey	19-Dec-20 – 08-Jan-21

Children and young people scrutiny	12-Jan-21
Adults and wellbeing scrutiny	13-Jan-21
General scrutiny	15-Jan-21
Cabinet – consultation responses, proposed budget, capital and Medium Term Financial Strategy (MTFS)	28-Jan-21
Council – approval of budget, capital and MTFS	12-Feb-21
Council – council tax setting	05-Mar-21

## Community impact

18. The budget proposals demonstrate how the council is using its financial resources to deliver the priorities within the County plan and associated delivery plan.
19. The council is committed to delivering continued improvement, positive change and outcomes in delivering key priorities.
20. In accordance with the principles of the code of corporate governance, Herefordshire Council is committed to promoting a positive working culture that accepts, and encourages constructive challenge, and recognises that a culture and structure for scrutiny are key elements for accountable decision making, policy development, and review.

## Environmental Impact

21. Herefordshire Council provides and purchases a wide range of services for the people of Herefordshire. Together with partner organisations in the private, public and voluntary sectors we share a strong commitment to improving our environmental sustainability, achieving carbon neutrality and to protect and enhance Herefordshire's outstanding natural environment.
22. Whilst this overarching budget setting document will not detail specific environmental impacts, consideration is always made to minimising waste and resource use in line with the council's environmental policy. A specific environmental impact assessment for the service specific budget proposals will be considered as appropriate to seek to minimise any adverse environmental impact and actively seek opportunities to improve and enhance environmental performance.

## Equality duty

23. Under section 149 of the Equality Act 2010, the 'general duty' on public authorities is set out as follows:

A public authority must, in the exercise of its functions, have due regard to the need to -

- (a) eliminate discrimination, harassment, victimisation and any other conduct that is prohibited by or under this Act;

- (b) advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it;
  - (c) foster good relations between persons who share a relevant protected characteristic and persons who do not share it.
24. Service specific equality impact assessments will be completed when the service specific proposals are developed to assess the impact on the protected characteristic as set out in the Equality Act 2010. The duty means that the potential impact of a decision on people with different protected characteristics is always taken into account when these assessments have been completed then we will consider mitigating against any adverse impact identified,

## **Resource implications**

25. The financial implications are as set out in the report. The ongoing operational costs including, human resources, information technology and property resource requirements are included in the draft budget and will be detailed in separate governance decision reports as appropriate.

## **Legal implications**

26. When setting the budget it is important that councillors are aware of the legal requirements and obligations. Councillors are required to act prudently when setting the budget and council tax so that they act in a way that considers local taxpayers. This also covers the impact on future taxpayers.
27. The Local Government Finance Act 1992 requires a council to set a balanced budget. To do this the council must prepare a budget that covers not only the expenditure but also the funding to meet the proposed budget. The budget has to be fully funded and the income from all sources must meet the expenditure.
28. Best estimates have to be employed so that all anticipated expenditure and resources are identified. If the budget includes unallocated savings or unidentified income then these have to be carefully handled to demonstrate that these do not create a deficit budget. An intention to set a deficit budget is not permitted under local government legislation.
29. The council must decide every year how much they are going to raise from council tax. The decision is based on a budget that sets out estimates of what is planned to be spent on services. Because the level of council tax is set before the year begins and cannot be increased during the year, risks and uncertainties have to be considered, that might force higher spending on the services than planned. Allowance is made for these risks by: making prudent allowance in the estimates for services; and ensuring that there are adequate reserves to draw on if the service estimates turn out to be insufficient.
30. The council's budget and policy framework rules require that the chairmen of a scrutiny committee shall take steps to ensure that the relevant committee work programmes include any budget and policy framework plan or strategy, to enable scrutiny members to inform and support the process for making Cabinet proposals to Council.
31. Section 106 of the Local Government Finance Act 1992 restricting councillors voting on certain matters where they are in arrears of council tax, does not apply to scrutiny function as the views from scrutiny on the budget are not a recommendation for approval, a resolution or any other type of decision. As a result a s106 check of councillors arrears has not been undertaken.

## Risk management

32. Section 25 of the Local Government Act 2003 requires the S151 officer to report to Council when it is setting the budget and precept (council tax). Council is required to take this report into account when making its budget and precept decision. The report must deal with the robustness of the estimates included in the budget and the adequacy of reserves.
33. The budget has been updated using the best available information; current spending, anticipated pressures and the provisional settlement. This draft will be updated through the budget setting timetable.
34. The impact of the worldwide pandemic, Covid-19, continues to provide uncertainty and have far ranging consequences throughout the county. The challenges to our economy, to the vulnerable members of our communities and to our continued wellbeing are huge. The budget proposals prioritise keeping resident's safe.
35. The known most substantial risks linked to the pandemic have been assessed as part of the budget proposals in this report and reasonable mitigation has been made where possible. Continued financial support from central government has been confirmed as part of the provisional financial settlement for 2021/22. Risks will be monitored through the year and reported to Cabinet as part of the budget monitoring process.
36. There are also the additional general risks to delivery of budgets including the delivery of new homes, EU exit, government policy changes and unplanned pressures. We are maintaining a general fund reserve balance above the minimum requirement and an annual contingency budget to manage these risks.
37. Demand management in social care continues to be a key issue, against a backdrop of a demographic of older people that is rising faster than the national average. This report provides an update on the measures being implemented to address these risks.

## Consultees

38. The council's constitution states that budget consultees should include parish councils, health partners, the schools forum, business ratepayers, council taxpayers, the trade unions, political groups on the council, the scrutiny committees and such other organisations and persons as the leader shall determine.
39. Local consultation with parish and town councils, businesses and organisations was completed in November, 17 events were held with 96 participants. Responses supported:-
  - People said it was important to avoid short-termism
  - Working with partners was supported
  - Transferring assets to communities was supported
  - Discretionary services least valued were street lighting, archive services and parks and open spaces
  - Increasing charges for parking and cremation were least popular
  - People wanted a high quality service and value for money for social care
  - Use of technology was seen as both an opportunity and a threat to vulnerable residents

- 45% of people thought the proposed council tax and social care precept increase of 4.99% was about right
  - Over 70% of people wanted to support households in financial difficulty
  - The majority said they would support a Herefordshire Community Lottery and Herefordshire Voluntary Community Contribution Scheme
  - Overall local priorities matched the council's priorities in the County Plan and Delivery Plan
40. An online public consultation was open between 18 December 2020 and closes on 8 January 2021 in the form of a Residents Survey and Organisation Survey. The results of this survey will be reported to Cabinet.

## **Appendices**

Appendix A Savings proposals, key directorate challenges and issues

## **Background papers**

None identified



**Adults and wellbeing  
scrutiny committee  
13 January 2021  
Savings proposals**

<b>Adults and communities</b>	
<b>Savings proposal</b> <ul style="list-style-type: none"> <li>• Modernising assessment, commissioning and services delivery for learning disability clients</li> </ul>	<b>£1.5m</b>
<b>Consequences</b> This work aligns to the existing programme of work for further promoting and embedding a strengths based model of practice and improving services and outcomes for Herefordshire residents.	
<b>What will change</b> <ul style="list-style-type: none"> <li>• Greater independence, wellbeing, choice and control</li> <li>• Higher levels of employment</li> <li>• Increased accommodation options</li> <li>• Connected community using digital solutions</li> </ul>	
<b>Challenges</b> <ul style="list-style-type: none"> <li>• Pace and scale of change across the system</li> <li>• Assessment and review capacity due to Covid-19 pressures</li> <li>• Co-dependency on other projects and developments</li> </ul>	

<b>Adults and communities</b>	
<b>Savings proposal</b> <ul style="list-style-type: none"> <li>Targeted review of complex cases followed by system challenge</li> </ul>	<b>£1.25m</b>
<b>Consequences</b> That independence is achieved via a model of support which enables people to be supported with their health and social care needs even if they are very high or delivered jointly	
<b>What will change</b> Assurance that residents needs are met <ul style="list-style-type: none"> <li>with the right level of support</li> <li>from the right agency</li> <li>with appropriate funding</li> </ul>	
<b>Challenges</b> <ul style="list-style-type: none"> <li>Assessment and review capacity due to Covid-19 pressures</li> <li>System change and support</li> <li>Appetite for legal challenge if required</li> </ul>	

<b>Adults and communities</b>	
<b>Savings proposal</b> <ul style="list-style-type: none"> <li>Implementing changes to client charging policy and income disregards</li> </ul>	<b>£0.52m</b>
<b>Consequences</b> Change policy position on client charging and income disregards so that it applies to all client groups equitably.	
<b>What will change</b> Those 'favoured' by the current arrangements would see income from disability related benefits and state pension factored in to future council charging. This would result in lower retained income for some clients	
<b>Challenges</b> <ul style="list-style-type: none"> <li>Assessment and review capacity due to Covid-19 pressures</li> <li>Policy development and sign off</li> <li>Public consultation and lead in period to implementation (18 – 22 weeks)</li> </ul>	



<b>Meeting:</b>	<b>Adults and wellbeing scrutiny committee</b>
<b>Meeting date:</b>	<b>Wednesday 13 January 2021</b>
<b>Title of report:</b>	<b>Committee work programme</b>
<b>Report by:</b>	<b>Democratic services</b>

## Classification

Open

## Decision type

This is not an executive decision

## Wards affected

All wards

## Purpose

To consider the committee's work programme.

## Recommendations

That the committee:

- (a) reviews the work programme and discusses any additional items of business or topics for inclusion; and
- (b) considers the activity to be undertaken in terms of the proposed Covid-19 response task and finish group.

## Alternative options

1. It is for the committee to determine its work programme to reflect the priorities facing Herefordshire. The committee needs to be selective and ensure that the work programme is focused, realistic and deliverable within existing resources.

## Key considerations

### Work programme

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Further information on the subject of this report is available from  
Ben Baugh, email: [ben.baugh2@herefordshire.gov.uk](mailto:ben.baugh2@herefordshire.gov.uk)

2. The work programme needs to focus on the key issues of concern and be manageable. It must also be ready to accommodate urgent items or matters that have been called-in.
3. Committee members considered potential items of business and priorities at a scrutiny work programming session (held on 20 November 2020) and the following agenda items were agreed for inclusion in the work programme at the last committee meeting (held on 23 November 2020):

**29 March 2021, 2.30 pm**

Emergency and urgent care

Carers' strategy review

**10 May 2021, 2.30 pm**

Mental health

Learning disability services

**21 June 2021, 2.30 pm**

Out of hospital care

Domestic abuse strategy

4. The committee has identified an intention to undertake a task and finish group on the Covid-19 response, see paragraph 12 below.
5. Written briefing notes will be sought on the following for committee members' information:
  - Falls service
  - Herefordshire safeguarding adults board annual report
  - Market position statement update
  - NHS Continuing Healthcare
  - Recruitment and retention
  - Sexual health service
  - Substance misuse
6. It has been suggested that workshops / seminars be arranged on the Integrated Care System, recruitment and retention, and Talk Community.
7. The work programme will remain under regular review to allow the committee to respond to particular circumstances.
8. Should committee members become aware of additional issues for scrutiny during the year they are invited to discuss the matter with the chairperson and the statutory scrutiny officer.

**Schedule of recommendations and responses**

9. Appended to this report (appendix 1) is a schedule of the recommendations made by the committee during 2020 and the responses received. This has been updated to reflect the recommendations made at the last meeting (minute 16 of 23 November 2020 refers) in

relation to 'Briefing on the Herefordshire Market Position Statement 2020-25 for adults and communities'. The executive responses to the recommendations are due to be considered by cabinet at its meeting on 28 January 2021.

### **Constitutional matters**

#### Task and finish groups

10. A scrutiny committee may appoint a task and finish group for any scrutiny activity within the committee's agreed work programme. A committee may determine to undertake a task and finish activity itself as a spotlight review where such an activity may be undertaken in a single session; the procedure rules relating to task and finish groups will apply in these circumstances.
11. The relevant scrutiny committee will approve the scope of the activity to be undertaken, the membership, chairperson, timeframe, desired outcomes and what will not be included in the work. A task and finish group will be composed of a least two members of the committee, other councillors (nominees to be sought from group leaders with un-affiliated members also invited to express their interest in sitting on the group) and may include, as appropriate, co-opted people with specialist knowledge or expertise to support the task. The committee will appoint the chairperson of a task and finish group.
12. At the recent scrutiny work programming session, committee members identified an intention to undertake a task and finish group on the Covid-19 response. To inform the development of the scoping document, the committee is invited to consider the activity to be undertaken. The chairperson and vice-chairperson have suggested that the thematic elements may need to be broader than the usual remit of the adults and wellbeing scrutiny committee in order to capture learning and good practice across the system.

#### Co-option

13. A scrutiny committee may co-opt a maximum of two non-voting people as and when required, for example for a particular meeting or to join a task and finish group. Any such co-optees will be agreed by the committee having reference to the agreed work programme and / or task and finish group membership.

#### Forward plan

14. The constitution states that scrutiny committees should consider the forward plan as the chief source of information regarding forthcoming key decisions. Forthcoming decisions can be viewed under the forthcoming decisions link on the council's website:

[Forthcoming decisions](#)

15. An extract of the forward plan of forthcoming decisions (as at 18 December 2020) for adults and communities is attached (appendix 2).

#### Suggestions for scrutiny from members of the public

16. Suggestions for scrutiny are invited from members of the public through the council's website, accessible through the link below:

[Get involved](#)

## Community impact

17. In accordance with the adopted code of corporate governance, Herefordshire Council is committed to promoting a positive working culture that accepts, and encourages constructive challenge, and recognises that a culture and structure for scrutiny are key elements for accountable decision making, policy development, and review. Topics selected for scrutiny should have regard to what matters to residents.

## Equality duty

18. Under section 149 of the Equality Act 2010, the 'general duty' on public authorities is set out as follows:

A public authority must, in the exercise of its functions, have due regard to the need to -

- (a) eliminate discrimination, harassment, victimisation and any other conduct that is prohibited by or under this Act;
  - (b) advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it;
  - (c) foster good relations between persons who share a relevant protected characteristic and persons who do not share it.
19. The public sector equality duty (specific duty) requires us to consider how we can positively contribute to the advancement of equality and good relations, and demonstrate that we are paying 'due regard' in our decision making in the design of policies and in the delivery of services. All Herefordshire Council members are trained and aware of their Public Sector Equality Duty and equality considerations are taken into account when serving on committees.

## Resource implications

20. The costs of the work of the committee will have to be met within existing resources. It should be noted the costs of running scrutiny will be subject to an assessment to support appropriate processes.

## Legal implications

21. The remit of the scrutiny committee is set out in part 3, section 4.5 of the constitution and the role of the scrutiny committee is set out in part 2, section 2.6.5 of the constitution. The council is required to deliver a scrutiny function.

## Risk management

22.

Risk / opportunity

There is a reputational risk to the council if the scrutiny function does not operate effectively.

Mitigation

The arrangements for the development of the work programme should help mitigate this risk.



## **Consultees**

23. A work programming session involving scrutiny committee members was held in November 2020. The work programme is reviewed at every committee meeting and during business planning meetings between the chairperson, vice-chairperson and statutory scrutiny officer.

## **Appendices**

- Appendix 1      Schedule of recommendations and responses
- Appendix 2      Extract of the forward plan of forthcoming decisions (as at 18 December 2020) for adults and communities

## **Background papers**

None identified.



## Adults and wellbeing scrutiny committee, schedule of recommendations and responses

13 January 2020		
Item	Recommendations	Responses
Minor injury units (MIUs)	<p>In view of the recurring temporary closures of the Minor Injury Units in Leominster and Ross-on-Wye, that the Clinical Commissioning Group be recommended to undertake a full options appraisal, with a more relevant set of statistical information (to include the total number of MIUs in the country and how many have closed during winter periods) and an evidence base obtained from healthcare providers and system partners, on future options for the Minor Injury Units to include an appraisal of the future of the community hospitals.</p> <p>That the Clinical Commissioning Group and Herefordshire Council officers develop a joint protocol or memorandum of understanding (to be produced by the end of April), about how the parties will reach a view as to whether or not any changes in the provision of health services constitute 'substantial development' or 'substantial variation' in relation to the duty on relevant NHS bodies and health service providers to involve and consult the public, including the relevant scrutiny committee(s).</p> <p>That the Clinical Commissioning Group review the approach to consultation and engagement generally where there is a likely to be an impact on communities and service providers.</p> <p>Joined up communications in GP surgeries, pharmacies and other healthcare services to highlight where people need to go to access appropriate healthcare relative to the health conditions they present with.</p>	<p>NHS Herefordshire and Worcestershire Clinical Commissioning Group will undertake the options appraisal of all minor injury units in the county. This will be in response to the repeated winter plans that have led to the closure of Leominster &amp; Ross MIUs. This will include statistical information. Investigation has shown that information on other MIUs temporary closures in England is not available. The options appraisal will include an evidence base. This is underway.</p> <p>NHS Herefordshire and Worcestershire Clinical Commissioning Group is required to operate to NHS England guidance on service change including what constitutes substantial service development or service change. The CCG is developing an engagement framework.</p> <p>NHS Herefordshire and Worcestershire Clinical Commissioning Group has a statutory duty to consult and engage as part of its core function. This includes the engagement work that it directly undertakes and that undertaken in conjunction with other agencies. From April 2020, NHS Herefordshire and Worcestershire CCG has recognised this core function with a Lay member lead for Patient Public Involvement as part of its Governing Body, and a dedicated team for communication and engagement. The team will link to other service providers through the One Herefordshire Communication and Engagement Group, of which the Council is also a member. The CCG will also continue with its established links with Healthwatch Herefordshire, both to inform and to deliver engagement.</p> <p>NHS Herefordshire and Worcestershire Clinical Commissioning Group has undertaken this through the work of the One Herefordshire Communication and Engagement Group. Campaigns include localised amplification of the national 'Help Us Help You' campaign. This is supported by all partners which includes messaging for where to go for help ie local pharmacy, 111/GP services along with rolling seasonal messaging around Flu, Summer safety/allergies.</p>

## Adults and wellbeing scrutiny committee, schedule of recommendations and responses

2 March 2020		
Item	Recommendations	Responses
<p>Briefing paper on NHS Continuing Healthcare (NHS CHC)</p>	<p>In collaboration with Herefordshire Council, where appropriate, it be recommended to the clinical commissioning group:</p> <p>To provide a rationale, with data (in numbers), as to why Herefordshire is not achieving the expected levels of NHS Continuing Healthcare when compared with other clinical commissioning group and local authority comparator areas.</p> <p>To follow up the request from the adults and wellbeing scrutiny committee on the commitment to provide responses to the recommendations set out in the jointly commissioned Parry report.</p> <p>To provide details on the numbers of NHS Continuing Healthcare appeals and the number of successful appeals before and since 2016.</p> <p>To explain how the various discharge pathways are able to pick up the patients where NHS Continuing Healthcare is deemed, or not deemed, to apply and how further assessments of NHS Continuing Healthcare are triggered.</p> <p>Where there are changes to services that are likely to impact on the wider system, that partners are engaged in conversations at the earliest opportunity.</p>	<p>NHS Herefordshire and Worcestershire Clinical Commissioning Group CHC teams have been deployed to support the level 4 national response. The CHC process has also been suspended during the response phase with restart date / process yet to be defined.</p> <p>Once the CHC team are released from the level 4 response responsibilities, an updated position report covering all the CHC recommendations will be developed with presentation at the July meeting of the Adults and Wellbeing Scrutiny Committee. This response will be completed in full collaboration with the relevant teams in Herefordshire council.</p>

## Adults and wellbeing scrutiny committee, schedule of recommendations and responses

Item	Recommendations	Responses
<p>Performance monitoring – NHS Herefordshire Clinical Commissioning Group</p>	<p>In collaboration with Herefordshire Council, where appropriate, it be recommended to the clinical commissioning group:</p> <p>That a consistent set of system figures are used - going forward - (e.g. Delayed Transfers of Care), including comparative data for Herefordshire and Worcestershire.</p> <p>That it ensure that the new integrated dashboard moves away from the current RAG rating system and moves to the wider statistical narrative provided in the Worcestershire performance dashboard, with Herefordshire based performance commentaries provided.</p> <p>The outcomes of the cohort of residents being treated under the Welsh system be included in the dashboard figures.</p>	<p>NHS Herefordshire and Worcestershire Clinical Commissioning Group formally merged on 1<sup>st</sup> April 2020. In relation to performance reporting:</p> <ul style="list-style-type: none"> <li>• Reporting is moving to the single CCG from the previous 4.</li> <li>• A single performance report is in development which will provide comparative data for Herefordshire and Worcestershire (at county level and regional / national as appropriate)</li> <li>• A single approach to reporting DToC will be agreed with both Herefordshire and Worcestershire local authorities. Due to focus on the level 4 COVID response this has not yet happened but will once capacity in all teams allows.</li> </ul> <p>NHS Herefordshire and Worcestershire Clinical Commissioning Group is developing a new performance report which will report to the Governing Body for the first time in June. This is fully compliant with the recommendations for Herefordshire Adults and Wellbeing Scrutiny Committee and will be shared, respecting the relevant governance timelines.</p> <p>NHS Herefordshire and Worcestershire Clinical Commissioning Group and Wye Valley Trust both report on the Welsh cohort as appropriate. For example, Powys Health Board are currently joining the level 4 incident silver and gold calls. The Powys demand around COVID is fully visible and considered in the demand and capacity modelling and onward flow processes.</p>

## Adults and wellbeing scrutiny committee, schedule of recommendations and responses

**21 September 2020**

Item	Recommendations	Responses
Suicide prevention strategy implementation	<p>That the committee recommends to the executive:</p> <p>(a) That the updated suicide prevention action plan is circulated to the committee with clear organisational leads identified against specific actions within the plan, including the role and responsibilities of the Mental Health Partnership Board; where it is possible and appropriate to do so, to include the relevant Key Performance Indicators (KPIs) of where progress is expected to be made.</p> <p>Noting the resource implications for monitoring the suicide prevention action plan, focus should be given to allocating resource from the Wave 3 funding to ensure that data and trends can be presented and reported on.</p> <p>(b) Consideration is given to a re-prioritisation of our more vulnerable at risk groups as we enter into a more financially and emotionally challenging period.</p> <p>(c) The committee is provided with the updated suicide data for 2019 once the new figures are available.</p> <p>(d) That parish councils, faith groups and other local community points of contact are given information to share and are placed as central stakeholders in assisting the communication/signposting of information and advice about suicide prevention, sources of support and assistance.</p> <p>(e) Consideration is given to comparing Herefordshire's suicide data with other comparable local authority area data to ascertain whether any patterns or trends can be identified that might strengthen our knowledge and targeted interventions in preventing suicides.</p>	<p>The updated action plan will be provided and circulated, as requested.</p> <p>The wave three funding is held by Worcestershire and Herefordshire CCG and has been committed to a project team, which will be largely focused upon direct prevention and awareness work in the community. The team will contribute to implementation of the strategy and performance reporting on those elements. It will not be possible to direct the funding towards wider data collection or reporting.</p> <p>This will be considered in discussion with partner organisations, taking account of the potential to actually identify or reach people at risk and the resources available to support this.</p> <p>The latest suicide data for Herefordshire will be provided as soon as it is received. This will include the year 2019.</p> <p>This can be considered for incorporation in the action plan and some key weblinks and signposting around mental wellbeing and suicide prevention can be provided to parishes and networks through HVOSS and the Diocese and other faith organisations. Opportunities will also be explored through the Parish Summits and other events.</p> <p>This comparative analysis will be undertaken and shared but it is likely that only headline data will be available for other areas. Caution is advised around the statistical significance of headline data on suicides, owing to the very small numbers involved.</p>

## Adults and wellbeing scrutiny committee, schedule of recommendations and responses

	<p>(f) Consideration is given to working with bereaved families and friends to gather soft data and intelligence to strengthen our knowledge of risks and factors that lead to suicide or attempted suicides.</p> <p>(g) Due consideration be given to the LGBT+ communities in relation to assessing the support and interventions provided in supporting individuals and groups at risk.</p> <p>(h) The new GP and patient relationship is changing and there is a need to work with the new Primary Care Networks on suicide prevention.</p>	<p>Whilst this may be very difficult to do retrospectively, it will become more practicable and appropriate once real time reporting of suicides is operational. New operating arrangements can include an invitation to bereaved families to share their experiences at the appropriate time.</p> <p>This will be considered in relation to opportunities to work with local and national groups to identify people at risk and take learning from any initiatives elsewhere. It should be noted that whether someone was LGBTQ+ cannot be identified from suicide data.</p> <p>Engagement is already taking place with PCNs around suicide prevention. It is also proposed that the Director for Adults and Communities raise with PCN Clinical Directors the implications of primary care changes in this area.</p>
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23 November 2020		
Item	Recommendations	Responses
<p>Briefing on the Herefordshire Market Position Statement 2020-2025 for adults and communities</p>	<p>That the committee welcomes the development of the Market Position Statement and recommends:</p> <ul style="list-style-type: none"> <li>a. That a written briefing note be provided to the committee on progress in twelve months' time, including how service users have been engaged in the development and design of specific care and support services.</li> <li>b. That the importance of the social value elements be made more prominent in the document.</li> <li>c. The document be refreshed to reflect the current positions in terms of the new arrangements for mental health services and the adopted dementia strategy.</li> <li>d. Learning disability services be included under commissioning intention 3.</li> </ul>	<p>The executive responses to the recommendations are due to be considered by cabinet at its meeting on 28 January 2021.</p>

## Adults and wellbeing scrutiny committee, schedule of recommendations and responses

- e. Explicit reference be made to the Council's intentions for care home and extra care development, and any associated workforce implications.
- f. That consideration be given to clarifying the situation for Herefordshire residents that are not served by the footprints of Primary Care Networks.
- g. That consideration be given to synergies and diversified offers (such as home share) to meet the needs of people needing care (both those funded by the council and those funding themselves) and people prepared to provide support in exchange for accommodation and / or to gain experience in the care industry.
- h. That the statistics included on page 15 (agenda page 41) on predicted increases in dementia be clarified.
- i. That identified trends in page 14 of the statement (agenda page 40) be reviewed and be supported by additional narrative, as appropriate.
- j. That a written briefing note be provided on NHS Continuing Healthcare, including the development of a related algorithm and the progress made on retrospective cases.
- k. That a written briefing note be provided on recruitment and retention issues, and the executive consider the usefulness of an all-member workshop, so that all members can be apprised of the challenges.
- l. That a written briefing note be provided on the falls prevention service.



## Forward plan of forthcoming decisions at 18 December 2020

Report title and purpose	Decision Maker and Due date	Lead officer and lead cabinet member	Directorate	Notice of decision first published / ID	Issue Type and exemptions
<p><b>Independent Living Demonstration &amp; Assessment Centre</b></p> <p>To agree for the project to spend up to the budget of £199,000.00, and to award and sign a build contract for the works, and awarding a contract for a small number of equipment items not available from the Council's equipment provider.</p> <p>The project aim is to develop an area within the Hillside building, to be used as a facility for demonstration and showcasing of equipment and adaptations, including technology, and also to support the provision of advice and Occupational Therapy assessment. The Centre will be designed to provide an environment that reflects a domestic house setting, giving a more realistic representation of how the equipment will feel and work within the customer's own home. The Centre will provide opportunities to support our operational offer and approach to the Prevention agenda, as well as providing advice and support self-funders, and also providing an outreach element to support the Care Homes run by Herefordshire Council.</p>	<p>Director of adults and communities 10 December 2020</p>	<p>Amy Swift, Senior Project Manager <a href="mailto:amyswift@herefordshire.gov.uk">amyswift@herefordshire.gov.uk</a></p> <p>Cabinet member health and adult wellbeing</p>	<p>Adults and Communities</p>	<p>28 September 2020 150035299</p>	<p><b>Non Key</b> Open</p>

Report title and purpose	Decision Maker and Due date	Lead officer and lead cabinet member	Directorate	Notice of decision first published / ID	Issue Type and exemptions
<p><b>Capital grant for homelessness hub</b>            To approve a capital grant to Citizen Housing for improvement works to enable the launch of a homelessness hub in Hereford.</p> <p>It is proposed to make a grant of capital to Citizen Housing to enable redecoration and refreshment of the accommodation at 107a Whitecross Road. The grant for works to create a homelessness hub will funded be entirely from a capital grant awarded for the purpose to the council by the Ministry of Housing, Communities and Local Government (MHCLG)</p> <p>The hub will launch during April 2021 and provide drop-in advice and support, eight units of emergency accommodation and four self contained flats for transition.</p>	<p>Cabinet member health and adult wellbeing            16 December 2020</p>	<p>Ewen Archibald, Head of community commissioning and resources            Ewen.Archibald@herefordshire.gov.uk            Tel: 01432 261970</p> <p>Cabinet member health and adult wellbeing</p>	<p>Adults and Communities</p>	<p>2 December 2020            I50036097            NEW</p>	<p><b>Non Key</b>            Open            Urgent</p>

Report title and purpose	Decision Maker and Due date	Lead officer and lead cabinet member	Directorate	Notice of decision first published / ID	Issue Type and exemptions
<p><b>Hillside - Review of technological opportunities</b> To approve funding to undertake a comprehensive review of the current technology in Hillside Care Centre, Pentwyn Avenue, Hereford and to set-out the short, medium and long term technological opportunities so that focused improvements, and appropriate solutions can be integrated into services to enhance the quality of care and life, support independence and increase safety as set out in the Herefordshire's 2020 – 2024 County Plan below: "Technology is another key component for promoting and supporting wellbeing, particularly for those with high levels of need. Technology can be very liberating and empowering where it can improve independence without relying on formal and often intrusive levels of care. This includes such things as prompts to take medication, voice-activated response services when crisis occurs (such as a fall), health and wellbeing apps etc. Over the coming years, we will continue to develop our technology strategies and make further investments in this important, exciting and fast moving area of service transformation."</p>	<p>Director of adults and communities 29 January 2021</p>	<p>Davinder Johal, Senior Project Manager <small>Davinder.Johal@herefordshire.gov.uk</small></p> <p>Cabinet member health and adult wellbeing</p>	<p>Adults and Communities</p>	<p>18 November 2020 I50035831</p>	<p><b>Non Key</b> Open</p>
<p><b>Procurement arrangements for Disabled Facilities Grants services and supplies</b> To agree a new procurement process through a Dynamic Purchasing System (Adaptation, Repair, Maintenance and Improvement - ARMI) operated by Independence CIC, to fulfil the requirements for supplies and services associated with the provision of Disabled Facilities Grants.</p>	<p>Director of adults and communities 29 January 2021</p>	<p>Lisa Bedford, Senior Commissioning Officer <small>lisa.bedford@herefordshire.gov.uk</small> <small>Tel: 01432 260943</small></p> <p>Cabinet member health and adult wellbeing</p>	<p>Adults and Communities</p>	<p>23 October 2020 I50035599</p>	<p><b>Non Key</b> Open</p>

Report title and purpose	Decision Maker and Due date	Lead officer and lead cabinet member	Directorate	Notice of decision first published / ID	Issue Type and exemptions
<b>Recommissioning of Independent Advocacy Services</b> To recommission services for the provision of independent advocacy for adults.	Cabinet member health and adult wellbeing 3 February 2021	Amy Whiles, Refugee and asylum seeker coordinator awhiles@herefordshire.gov.uk Tel: 01432 261920  Cabinet member health and adult wellbeing	Adults and Communities	27 November 2020 I50036010  NEW	<b>KEY</b> Open

**Forward plan of forthcoming Cabinet decisions at 18 December 2020**

Report title and purpose	Decision Maker and Due date	Lead officer and lead cabinet member	Directorate	Notice of decision first published / ID	Issue Type and exemptions
<b>Herefordshire Market Position Statement 2020-2025 for Adults and Communities</b> To approve the Herefordshire Market Position Statement 2020-2025 for Adults and Communities.	Cabinet 28 January 2021	Laura Tyler, Head of care commissioning ltyler@herefordshire.gov.uk Tel: 01432 260641  Cabinet member health and adult wellbeing	Adults and Communities	11 March 2020 I50033612	<b>KEY</b> Open