

Agenda

Adults and wellbeing scrutiny committee

Date: **Monday 6 September 2021**

Time: **2.30 pm**

Place: **Herefordshire Council Offices, Plough Lane, Hereford,
HR4 0LE**

Notes: Please note the time, date and venue of the meeting. Watch the meeting on the Herefordshire Council YouTube channel through the link: <https://youtu.be/tfOsM8nwtY4>

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Agenda for the meeting of the Adults and wellbeing scrutiny committee

Membership

Chairperson **Councillor Elissa Swinglehurst**
Vice-chairperson **Councillor Trish Marsh**

Councillor Carole Gandy
Councillor Tim Price
Councillor Alan Seldon
Councillor David Summers
Councillor Kevin Tillett

Agenda

		Pages
1.	<p>APOLOGIES FOR ABSENCE</p> <p>To receive apologies for absence.</p>	
2.	<p>NAMED SUBSTITUTES (IF ANY)</p> <p>To receive details of any member nominated to attend the meeting in place of a member of the committee.</p>	
3.	<p>DECLARATIONS OF INTEREST</p> <p>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.</p>	
4.	<p>MINUTES</p> <p>To approve the minutes of the meeting held on 21 June 2021.</p>	9 - 12
<p>HOW TO SUBMIT QUESTIONS</p> <p>The deadline for the submission of questions for this meeting is 5.00 pm on Tuesday 31 August 2021.</p> <p>Questions must be submitted to councillorservices@herefordshire.gov.uk. Questions sent to any other address may not be accepted.</p> <p>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 www.herefordshire.gov.uk/getinvolved</p>		
5.	<p>QUESTIONS FROM MEMBERS OF THE PUBLIC</p> <p>To receive any written questions from members of the public.</p>	
6.	<p>QUESTIONS FROM COUNCILLORS</p> <p>To receive any written questions from councillors.</p>	
7.	<p>BRIEFING PAPER ON OUT OF HOSPITAL CARE</p> <p>To consider the attached paper on out of hospital care, including Continuing Healthcare, discharge pathway and self-funders, and to determine any recommendations the committee wishes to make.</p>	13 - 22
8.	<p>COMMITTEE WORK PROGRAMME</p> <p>To consider the committee's work programme.</p>	23 - 54
9.	<p>DATE OF NEXT MEETING</p> <p>The next scheduled meeting is Monday 1 November 2021, 2.30 pm.</p>	

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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 at Three Counties Hotel, Belmont Road, Belmont, Hereford, HR2 7BP on Monday 21 June 2021 at 2.30 pm

Present: Councillor Elissa Swinglehurst (chairperson)
Councillor Trish Marsh (vice-chairperson)

Councillors: Kevin Tillett, Tim Price, Alan Seldon, David Summers and Carole Gandy

In attendance: Councillors Pauline Crockett (Cabinet Member - health and adult wellbeing)

Officers: Deputy solicitor to the council, Head of care commissioning, Senior commissioning officer and Assistant director for adult social care operations

Others present: Jenny Dalloway, lead for mental health, learning disability and children (NHS Herefordshire and Worcestershire Clinical Commissioning Group)

10. APOLOGIES FOR ABSENCE

All committee members were present.

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 2 June 2021 be approved as a correct record and be signed by the chairperson.

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. LEARNING DISABILITY STRATEGY UPDATE

The committee noted an error in paragraph 6 of the report where the figure should have read 2000, instead of 200.

The head of care commissioning introduced the item. The committee received a presentation led by the senior commissioning officer. The presentation included video

clips recorded by two residents with learning disabilities about their lived experience. The chairperson requested that thanks be passed on to them on behalf of the committee.

The chairperson invited questions and comments from committee members to which officers responded. The principal points of the discussion are summarised below:

1. Officers confirmed there were no specific criteria for identifying young people who would be able to live independently with support. All cases were considered on an individual basis with a focus on setting as many achievable goals as possible in line with the strengths based approach. It was sometimes necessary to have honest but sensitive conversations and to challenge the perceptions of young people, their parents or carers and those working with them about what was achievable.
2. The committee heard about a supported living scheme which had accommodated 9 people who needed support to live independently. Officers explained that Herefordshire has quite low numbers in supported living compared with other councils so pathways and systems were being developed to pick up individuals who might benefit from such housing earlier and to be better sighted on vacancies. Agreements with social landlords were in place and the council's housing team were very supportive.
3. It was noted that there were challenges where individuals had been living in residential care for some time to get them to consider different arrangements.
4. All young adults who appeared to be needing health and social care were now referred to one transitions team who would then work with experts to see what pathways were suitable for each individual.
5. The committee heard that the supported living framework, which was aimed at working age people, was currently being revisited.
6. It was disappointing that the council and NHS had not yet progressed becoming exemplar employers of people with learning disabilities.
7. The impact of the coronavirus pandemic may have created opportunities for employment, for example in delivering products, picking and packing, hospitality and in increased home working. The committee felt that these opportunities should be explored as the economy began to recover.
8. The impact of the pandemic had required adaptations to some planned activities and presented challenges for people with learning disabilities but work was in progress to look at opportunities for learning, particularly around the use of assistive technology.
9. Benchmarking was carried out against other authorities locally and nationally, and the council sought to continue to improve against its own past performance;
10. Retention of social workers was not a significant problem, but it did sometimes prove hard to appoint experienced people when vacancies occurred. Officers reported they were working with HR on ways to attract more experienced social workers as well as developing the skills of existing staff. In relation to a query on continuity of contact with a designated social worker, officers confirmed that records held in the mosaic system were audited by a separate team to make sure they were of good quality and ensured that when new social workers were assigned to an individual they did not need to cover the same ground over again.
11. It had always been challenging to recruit nursing staff and the exit from the EU had not had any particular impact on recruitment of caring staff.

12. Committee members were concerned that achieving savings could have an impact on users. Officers confirmed that all projects came from the premise of making improvements and that it was expected savings would be delivered by getting the right level of care and support for each individual. The challenge was to think differently rather than take services away and to make sure that all services were accessible for people with learning disabilities. This aligned with the strengths based approach adopted in the adults and communities directorate.
13. Committee members requested more detail in future updates, that a list of partners in partnerships and networks be provided and that future reports were clear what was meant by the term partners in each context.
14. Committee members praised the bill of rights and felt it was important this be promoted.
15. The health needs of individuals with learning disabilities were noted, with annual health checks being available and promotion of support for carers. Officers highlighted the work of the LeDeR programme and that no individuals with learning disabilities had been lost to covid. The next piece of work will focus on the primary care networks and how to be more proactive on health for this group. The issues caused by Herefordshire residents accessing healthcare through GPs based in Wales were highlighted as a complication.
16. Officers explained that healthwatch had developed information around reasonable adjustments which had recently been published on their website. It was hoped that in future there would be a scheme for businesses to achieve accreditation for standards on reasonable adjustments.
17. The plan to reduce waiting times for assessments for autism was welcomed. The aim was to be an 18 week period from referral to starting the process. The service for children was previously taking up to a year for an assessment but this was reducing as additional capacity had been put in. The adults' service had only recently been commissioned. Covid had caused delays as some elements of the assessment required face to face contact that could not be replicated online.

The cabinet member health and adult wellbeing addressed the committee. She highlighted that:

- the strategy was a joint endeavour between the council and CCG and the importance of continuing to collaborate;
- the priority was to look after the needs of residents and the strategy showed the holistic approach;
- the relationship between someone in need of support and the supporter was important;
- the savings target was spread over 16 months;
- non-financial benefits of projects and activities to improve services were also important.

The lead for mental health, learning disability and children at Herefordshire and Worcestershire CCG addressed the committee. She highlighted the importance of collaboration between the council, the CCG and other partners and how the governance structures functioned. Despite the join up of the CCG with Worcestershire, there

continued to be a focus on Herefordshire and the larger footprint provided opportunities to work across the wider area on projects such as the complex needs strategy.

The committee considered recommendations. The recommendations below were proposed by Councillor Alan Seldon and seconded by Councillor Tim Price. The recommendations were agreed unanimously by the committee.

It was resolved that the committee recommends the following:

- a) Herefordshire Council and NHS partners urgently progress becoming exemplar employers of people with learning disabilities (ref LD2.09);
- b) the council take advantage of employment opportunities emerging during the recovery from coronavirus, such as in the hospitality industry and utilising increased working from home;
- c) Include in the dashboard benchmarking against local and national comparators to give a clearer picture of the council's performance;
- d) Include in the dashboard figures on the numbers of complaints and appeals to illustrate the impact of savings plans on service users;
- e) That the bill of rights be widely promoted;
- f) A briefing note be provided to the committee on continuity of contact with social workers for regular service users; and
- g) A briefing note be provided on providers.

17. COMMITTEE WORK PROGRAMME

The chairperson drew attention to the proposed work programme which had been published as a supplement to the agenda papers following the work programming session held on 16 June.

The principal agenda item for the next committee meeting was proposed to be 'out of hospital care' to include continuing healthcare, discharge pathway and self-funders. The chairperson noted the ongoing interest in continuing healthcare and that more weight would be given to this element due to concerns raised by a member of the public.

Resolved: That the committee:

- a) **Agrees the work programme in Appendix A**
- b) **Notes the schedule of previous recommendations and responses in Appendix B.**

18. DATE OF NEXT MEETING

The next scheduled meeting was noted as Monday 6 September 2021.

The meeting ended at 4.30 pm

Chairperson



Title of report: Briefing paper on out of hospital care

Meeting: Adults and wellbeing scrutiny committee

Meeting date: Monday 6 September 2021

Report by: Acting Director for adults and wellbeing & Chief Nursing Officer, & NHS Herefordshire and Worcestershire CCG

Classification

Open

Decision type

This is not an executive decision

Wards affected

(All Wards);

Purpose

To consider the attached paper on out of hospital care, including Continuing Healthcare, discharge pathway and self-funders, and to determine any recommendations the committee wishes to make.

Recommendation(s)

That the committee:

- a) considers the paper on out of hospital care (Appendix A) ;and
- b) determines any recommendations it wishes to make to a responsible NHS body and/or to the executive.

Alternative options

1. It is a function of the committee to review and scrutinise any matter relating to the planning, provision and operation of the health service within its area. The committee also has the function to make recommendations to a responsible NHS body on any NHS matter it has reviewed or scrutinised, and to make reports or recommendations to the executive with respect to the discharge of any functions which are the responsibility of the executive. As such, there are no alternative options.

Key considerations

2. The adults and wellbeing scrutiny committee has statutory health scrutiny powers including the review and scrutiny of any matter relating to the planning provision and operation of health services (not reserved to the children and young people scrutiny committee) affecting the area and to make reports and recommendations on these matters.
3. NHS Continuing Healthcare (NHS CHC) means a package of ongoing care that is arranged and funded solely by the NHS where the individual has been assessed and found to have a 'primary health need'. Such care is provided to an individual aged 18 or over, to meet health and associated social care needs that have arisen as a result of disability, accident or illness.
4. The adults and wellbeing scrutiny committee considered an item on 'NHS Continuing Healthcare Framework applicable to Herefordshire' at the meeting on 20 September 2018. Details of this item, including the report, appendices and minutes of the debate can be viewed here: [Issue - items at meetings - NHS Continuing Healthcare Framework applicable to Herefordshire - Herefordshire Council](#)
5. The recommendations of the committee and the responses received from the CCG were as follows:

Recommendations

Response

a) a small number of senior social workers be upskilled to ensure that there is a common understanding of the medical terminology when dealing with disputes;

b) the CCG be requested to commit to seeking to lift Herefordshire out of its current position of 6th from the bottom in the national CHC eligibility by 50k population and to report its progress against this commitment at a future adults scrutiny committee;

CCG response: NHS Herefordshire CCG is committed to ensuring its practice in relation to CCG eligibility continues to be in line with the revised CCG national framework and subject to quality assurance. This has been tested by NHS England and assurance received that the CCG is applying the framework appropriately so will continue with current practice and governance. The CCG will be happy to share the outcomes from the NHS England review with the local authority and the committee once it has been received and reviewed by the CCG internal governance processes.

c) the CCG be called back to the committee to report on progress made against their action plan recommendations in six months' time

specifically –

- to update the committee on progress against the recommendations that have not been completed to date, and
- to report on the progress made as a result of the recommendations completed and implemented;

CCG response: The CCG is more than content to return to the scrutiny committee in relation to the recommendations of the external review completed by Ms A Parry. The CCG would request that this attendance and the update on progress relating to the recommendations is done in partnership with Herefordshire Council colleagues.

d) the CCG be requested to influence the report of the NHS England to be a system review and to include the local authority within that review

CCG response: CCG will raise the issue of LA engagement in NHS England review.

6. The CCG provided a further briefing paper which was considered by the committee at the meeting on 2 March 2020. Details of this item, including the report, appendices and minutes of the debate can be viewed here: [Issue - items at meetings - Briefing paper on NHS Continuing Healthcare \(NHS CHC\) - Herefordshire Council](#)

7. The recommendations of the committee and the response received from the CCG was as follows:

Recommendations

Response

In collaboration with Herefordshire Council, where appropriate, it be recommended to the clinical commissioning group:

a) 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.

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

- b) 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.
- c) To provide details on the numbers of NHS Continuing Healthcare appeals and the number of successful appeals before and since 2016.
- d) 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.
- e) 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.
8. Due to covid-19, there were no further meetings of the scrutiny committee until September 2020 and the subsequent work programme was revised.
9. A briefing note was circulated to members of the committee in May 2021. This included a further response to the recommendations of 2 March 2020 and made the following proposal for scrutiny to consider as a way forward:
- An agreed joint working plan will be developed, which takes in to account the “Parry” recommendations, as well as any other development opportunities not included within the “Parry” report.
 - Progress against the development plan be reported, in person, by senior managers from both organisations to Scrutiny. The frequency of reporting would be agreed with Scrutiny.
 - Front-line practitioners from both organisations will attend Scrutiny updates to provide feedback on working practices.
 - Updates will, where relevant, include activity levels and national benchmarking data.
- restart date / process yet to be defined.
- 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.

10. The briefing note also highlighted that Health and Social Care partners were undertaking a review of discharge processes, includes the checklist process for CHC at the point of discharge by trusted professionals. The long-term discharge to assess model was proposed to be reported to Adult Wellbeing and Scrutiny Committee well before the current funding arrangements of discharge to assess finishes on 30 September 2021.
11. The latest update from the CCG is attached at appendix A.

Community impact

12. In accordance with the adopted code of corporate governance, Herefordshire Council achieves its intended outcomes by providing a mixture of legal, regulatory and practical interventions. Determining the right mix of these is an important strategic choice to make sure outcomes are achieved. The council needs robust decision-making mechanisms to ensure its outcomes can be achieved in a way that provides the best use of resources whilst still enabling efficient and effective operations and recognises that a culture and structure for scrutiny are key elements for accountable decision making, policy development and review.
13. This scrutiny activity contributes to the corporate plan – county plan 2020-24 ambition ‘strengthen communities to ensure everyone lives well and safely together’.
14. Within the NHS, there has been increasing emphasis on the need to understand and respond to the views of patients and the public about health and health services. Responding positively to health scrutiny is one way for the NHS to be accountable to local communities.

Environmental Impact

15. The work of the scrutiny committee will have minimal environmental impacts, although consideration has been made to minimise waste and resource use in line with the council’s Environmental Policy.
16. The committee should be mindful of the potential environmental impacts of any recommendations it may put forward, and responses to such recommendations and any decisions arising from these should also consider the environmental impact.

Equality duty

17. 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.
18. 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

19. There are no resource implications associated with the recommendation. The resource implications of any recommendations made by the committee will need to be considered by the responsible NHS body or the executive in response to those recommendations or subsequent decisions.

Legal implications

20. Section 9FA of and Schedule A1 to the Local Government Act 2000, Regulations 5 and 11 of the Local Authorities (committee system) (England) Regulations 2012 and Regulation 30 of the Local Authority (Public Health, Health and wellbeing boards and Health Scrutiny) Regulations 2013 make provision for local scrutiny functions to review and scrutinise matters relating to the planning, provision and operation of the health service in the area.
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. None in relation to this report; scrutiny is a key element of accountable decision making and may make recommendations to certain NHS bodies with a view to strengthening mitigation of any risks associated with the proposed decisions. The committee may make reports and recommendations to certain NHS bodies and expect a response within 28 days.

Consultees

23. The committee requested further consideration of this topic following the agenda items set out in the key considerations above.

24. Councillors and members of the public are able to influence the scrutiny work programme by suggesting a topic for scrutiny or by asking a question at a public meeting. For further details please see the 'get involved' section of the council's website:

www.herefordshire.gov.uk/getinvolved

Appendices

Appendix A – Briefing paper from CCG

Background papers

None identified.

Glossary

CCG	NHS Herefordshire and Worcestershire Clinical Commissioning Group	Clinical Commissioning Groups are clinically-led statutory NHS bodies responsible for planning, buying (commissioning) and monitoring health care services in their local area. Herefordshire and Worcestershire CCG was formed through a merger in April 2020.
NHS CHC	NHS Continuing Healthcare	A package of ongoing care that is arranged and funded solely by the NHS.

Update for Adults and Wellbeing Scrutiny Committee

Report author	Jane Lodwig, HWCCG Associate Director of Nursing and Quality
Presented by	Jane Lodwig, HWCCG Associate Director of Nursing and Quality
Purpose	Assurance <input checked="" type="checkbox"/> Decision <input type="checkbox"/> Approval <input type="checkbox"/> Information/noting <input checked="" type="checkbox"/>

In response to a request for information on the NHS Continuing Healthcare (CHC) service, NHS Herefordshire and Worcestershire is providing a position statement regarding the progress made in partnership with Herefordshire Council.

The update confirms actions that are already underway and highlights progress that has been made through the CHC Partnership Board.

Work currently in progress:

- The CCG and Herefordshire Council are working together to complete the new Dispute Policy and Choice and Equity Policy. Once the Council feedback has been incorporated, the final policies will be submitted through the Council and CCG governance processes.
- Dispute cases are being proactively worked through at present with an aim to resolve all outstanding issues. The intention is then to move forward with the new policy and collaborative approach to resolve disputes in a timely manner, embedding learning across all teams.
- The CHC website is being further developed to include links for all partners
- A joint training programme is already in progress which is based on the national CHC Competency Framework. This provides an opportunity to reflect and learn together, identify common themes and develop bespoke training modules to meet local needs.
- The CHC Action plan has been shared with all partners, identifying current issues and plans to address them with increased focus on quality across CHC processes.
- An end-to-end stakeholder review of the CHC process with an agreed output (e.g. potentially a Memorandum of Understanding) is currently being planned. This will take approximately six to nine months in total and is anticipated to commence in October, subject to agreement with all partners.

In the context of increasing numbers of referrals to CHC and challenges faced by the entire health and social care sector following the Covid-19 pandemic, it is more important than ever that the CCG and the Council work together to meet the demands on our respective services and deliver efficient and effective services to all who rely on us for their care and support.



Title of report: Work programme review and tracking of recommendations

Meeting: Adults and wellbeing scrutiny committee

Meeting date: Monday 6 September 2021

Report by: Democratic Services Officer

Classification

Open

Decision type

This is not an executive decision

Wards affected

(All Wards);

Purpose

To review progress against previous recommendation, review the work programme for 2021/22 and agree any necessary updates.

Recommendation(s)

That the committee:

- a) Notes the updated recommendation tracker in appendix 1;
- b) Reviews the work programme at appendix 2 and discusses any additional items of business or topics for inclusion in the work programme.

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. The committee needs to develop a manageable work programme to ensure that scrutiny is

Further information on the subject of this report is available from
Sarah Buffrey, Tel: 01432 260176, email: sarah.buffrey@herefordshire.gov.uk

focused, effective and produces clear outcomes. Topics selected on the work programme should reflect issues of current importance facing adults and wellbeing services at Herefordshire Council.

Key considerations

Tracking of resolutions made by the committee which require a response or action

2. A schedule of recommendations previously made by the committee which require a response or action is appended to this report as appendix 1.
3. Key changes since the last meeting include:
 - Cabinet met on [24 June 2021](#) and, as part of its consideration of new arrangements for commissioned home care, approved responses to the recommendations made by the scrutiny committee on 2 June 2021.
 - Recommendations arising from the learning disability strategy update discussed on 21 June 2021 have been added to the tracker.

Forward plan

4. The constitution states that scrutiny committees should consider the forward plan as the chief source of information regarding forthcoming key decisions. Forthcoming decisions of the children and families directorate will be highlighted by the clerk to the committee as part of the work programming item at each committee meeting.

Suggestion for scrutiny from members of the public

5. Suggestions for scrutiny are invited from members of the public through the council's website, accessible through the link below. There have been no suggestions for scrutiny received from members of the public since the previous meeting of the committee.

https://www.herefordshire.gov.uk/info/200148/your_council/61/get_involved/4

Work Programme

6. The work programme needs to focus on the key issues of concern and be manageable allowing for urgent items or matters that have been called-in. The work programme will be reviewed at each meeting of the committee and may be amended as required.
7. The latest agreed work programme for 2021-2022 is attached at appendix 2.
8. Should committee members become aware of any issue they think should be considered by the committee they are invited to discuss the matter with the chairperson, vice chairperson and the statutory scrutiny officer.
9. A request has been made to consider scrutiny activity regarding service user communication and reducing the need for service users to provide the same information multiple times. At the request of the chairperson this has been added to the list of potential agenda items to be considered during future work programming.

Budget setting 2022/23

10. It has been suggested that it would be beneficial for the scrutiny committees to review proposals for the 2022/23 budget earlier in the consultation process. This would be in addition to the usual scrutiny activity which is currently scheduled for January 2022. Council is due to consider proposals on future scrutiny arrangements at its meeting on 8 October 2021 and this may result in opportunities for joint scrutiny activity rather than each committee reviewing proposals separately. The committee is invited to consider if and when it would wish to undertake additional scrutiny of budget proposals.

Constitutional Matters

Task and Finish Groups

11. 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 but the review is likely to be attended by all members of the committee and chaired by the chairperson.
12. The scrutiny committee will approve the scope of the activity to be undertaken by a task and finish group, 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 2 members of the committee, other councillors 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.
13. The committee is asked to determine matters relating to the convening of a task and finish group including the scope of the review to be undertaken, the chairperson, membership, timeframe, desired outcomes, what will not be included in the review and whether to co-opt any non-voting members to the group. Such co-optees could consist of individuals with valuable skills and experience that would assist a task and finish group to undertake a review (see co-option below).
14. On 29 March 2021 the committee requested that a scoping statement be prepared for a potential task and finish group on health impact of the intensive poultry industry. Production of this scoping statement has been delayed by demands placed on the public health team during the covid 19 pandemic but has now begun. The draft statement will be presented to the committee for approval as soon as possible.

Co-option

15. 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.

16. The committee is asked to consider whether it wishes to exercise this power in respect of any matters in the work programme.

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.

Environmental Impact

18. Whilst this is an update on the work programme and will have minimal environmental impacts, consideration has been made to minimise waste and resource use in line with the council's Environmental Policy.

Equality duty

19. 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.

20. 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. As this report concerns the administrative function of the children and young people scrutiny committee, it is unlikely that it will have an impact on our equality duty.

Resource implications

21. 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 can be subject to an assessment to support appropriate processes.
22. The councillors' allowance scheme contains provision for co-opted and other non-elected members to claim travel, subsistence and dependant carer's allowances on the same basis as members of the council. If the committee agrees that co-optees should be included in an inquiry they will be entitled to claim allowances.

Legal implications

23. The council is required to deliver a scrutiny function. The development of a work programme which is focused and reflects those priorities facing Herefordshire will assist the committee and the council to deliver a scrutiny function.
24. The Scrutiny Rules in Part 4 Section 5 of the Council's constitution provide for the setting of a work programme, the reporting of recommendations to the executive and the establishment of task and finish groups, as below.
25. Paragraph 4.5.28 of the constitution explains that the scrutiny committee is responsible for setting its own work programme. In setting its work programme a scrutiny committee shall have regard to the resources (including officer time) available.
26. Under section 4.5.10 of the constitution 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. 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. It will be a matter for the task and finish group to determine lines of questioning, witnesses (from the council or wider community) and evidence requirements.
27. Under section 4.5.19 of the constitution task and finish groups will report their findings/outcomes/recommendations to the relevant scrutiny committee who will decide if the findings/outcomes/recommendations should be reported to the cabinet or elsewhere.

Risk management

Risk / opportunity	Mitigation
There is a reputational risk to the council if the scrutiny function does not operate effectively.	The arrangements for the development of the work programme should help mitigate this risk.

Consultees

28. The work programme is reviewed at every committee meeting. Additional formal or informal work programming sessions may be arranged as necessary during the year. The work programme may also be reviewed during business planning meetings between the chairperson, vice-chairperson and statutory scrutiny officer.

Appendices

Appendix 1 – Recommendation tracker
Appendix 2 – Work Programme 2021/22

Background papers

None identified

Adults and wellbeing scrutiny committee, schedule of recommendations and responses

21 September 2020

Item	Recommendations	Executive responses
<p>Suicide prevention strategy implementation</p>	<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

30

Item	Recommendations	Executive 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> <p>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.</p> <p>b. That the importance of the social value elements be made more prominent in the document.</p> <p>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.</p>	<p>Agreed, an annual review summary will be written for the executive</p> <p>Agreed and will include</p> <p>Agreed to update</p>

Adults and wellbeing scrutiny committee, schedule of recommendations and responses

<p>d. Learning disability services be included under commissioning intention 3.</p>	<p>Agreed to include</p>
<p>e. Explicit reference be made to the Council’s intentions for care home and extra care development, and any associated workforce implications.</p>	<p>Agreed to include</p>
<p>f. That consideration be given to clarifying the situation for Herefordshire residents that are not served by the footprints of Primary Care Networks.</p>	<p>The market position statement covers all residents living within the county to ensure access to services regardless of PCN and which GP surgery they may fall under</p>
<p>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.</p>	<p>Agreed and has been include in the MPS</p>
<p>h. That the statistics included on page 15 (agenda page 41) on predicted increases in dementia be clarified.</p>	<p>Agreed to consider</p>
<p>i. That identified trends in page 14 of the statement (agenda page 40) be reviewed and be supported by additional narrative, as appropriate.</p>	<p>Agreed to include further information</p>
<p>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.</p>	<p>Agreed as detailed in the actions below:</p> <p>Part A) Agree to provide a briefing note on the plan for people with complex health and social needs. This work includes consideration of a new approach with CCG in identifying individuals with health and care needs requiring single or joint agency commissioning and funding. This work is not yet ready to be taken forward as a proposal to CCG.</p> <p>Part B) With regard to the CHC position and the previous requests from scrutiny to be kept informed on CHC outcomes for Herefordshire citizens, the LA will request an analysis of the CHC and joint funded position in Herefordshire from the CCG. Herefordshire Council will also contribute a report to support the understanding of the committee.</p>

Adults and wellbeing scrutiny committee, schedule of recommendations and responses

	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.	Agreed
	l. That a written briefing note be provided on the falls prevention service.	Agreed

13 January 2021

Item	Recommendations	Executive responses
2021/22 budget setting	<p>The adults and wellbeing scrutiny committee recognises the extraordinary pressures for the council, and for the adults and communities directorate in particular, and acknowledges the significant work that has been undertaken and is ongoing in preparing the budget for 2021/22.</p> <p>The committee recommends that:</p> <ol style="list-style-type: none"> 1. A plain English narrative be prepared to explain the adult social care precept. 2. Clarifications be provided in subsequent budget meetings in terms of the reductions in the council tax base (paragraph 6), the money expected from central government (paragraph 7), how the measures identified in the Market Position Statement might help to address budget pressures (paragraph 8), and the level of public health grant (paragraph 10). 3. That the operational changes and proposals in terms of Learning Disability services, including the impacts on service users, be presented to the committee at the May 2021 meeting. 4. That opportunities be considered to inform service users about charging changes in advance and to stage increases incrementally. 	<p>This has now been commissioned.</p> <p>Noted, additional data provided in this paper and at the additional adults and wellbeing scrutiny meeting on 26th January 2021</p> <p>Noted</p> <p>Residents who will be impacted at the time the decision is made will be contacted and notified of the changes to next year's charging practices in line with statutory and local policy requirements.</p> <p>Application of the changes could not be staged incrementally for three principle reasons. These are:</p>

Adults and wellbeing scrutiny committee, schedule of recommendations and responses

	<p>5. That details of the alternative savings proposals for £330k be circulated to councillors as soon as possible, with a report presented to a future meeting of the committee.</p> <p>6. That consideration be given to additional modelling around potential economic scenarios, including the cessation of the furlough scheme, and the consequential impacts such as the erosion of the council tax base, reduction in other income streams, and on the delivery of services.</p>	<ul style="list-style-type: none"> • due to the binary nature of the decision (either the practice changes or it does not) • for the purposes of meeting equality standards, changes must apply to all residents at the same time (wider equality standards are picked up through the means tested process) • the savings target would be missed due to not applying on a full year basis <p>Meeting of Adults and Wellbeing Scrutiny committee scheduled for 26th January 2021</p> <p>This is captured in the MTFS</p>
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33

26 January 2021		
Item	Recommendation	
21/22 budget saving proposal amendment	That the amended budget saving as proposed be accepted.	

24 March 2021		
Item	Recommendation	Responses of NHS Herefordshire and Worcestershire Clinical Commissioning Group
NHS White Paper: integration and innovation	a. It be recommended to the emerging Integrated Care System that proposals be developed, for consideration and agreement by the local authorities, in terms of the 'duty to collaborate', both at the place-based level and in terms of joint scrutiny involving the local authorities, to ensure that modes of communication and engagement are defined clearly.	Noted and agreed. Herefordshire Council has membership of the existing ICS Executive Forum and ICS Partnership Board, where ongoing proposals will be developed. The Council will also be invited to be a member of the new NHS ICS Board and the ICS Health and Care Partnership. Finally, the Council is already a member of the Herefordshire Place Partnership.

Adults and wellbeing scrutiny committee, schedule of recommendations and responses

	<p>b. That scrutiny maintains a distinct function within the duty to collaborate and that acceptable parameters be agreed, including ongoing information sharing.</p> <p>c. That clarification be provided about the power of scrutiny committees to make referrals to the Secretary of State and, if it is potentially at risk, that the system be encouraged to lobby for the retention of this power and for enhanced local accountability generally.</p> <p>d. That the developing Herefordshire and Worcestershire Integrated Care System (ICS) governance arrangements (including the relationships with and degree of autonomy of the Health and Wellbeing Boards, the arrangements for the different ICS boards, and how the voice of public / service users will be heard) and funding mechanisms be presented to the scrutiny committee during 2021/22.</p> <p>e. That the intentions to explore the wider determinants of health and wellbeing and local population health needs, to consider opportunities for the integration and alignment of services, and to work collaboratively on tackling health inequalities at a local level, be supported.</p> <p>f. That consideration be given to the experience for residents who live on geographic and / or system boundaries, especially in terms of seamless data sharing between relevant bodies.</p>	<p>Agreed and welcomed.</p> <p>It is anticipated that further clarifications will be made as the White Paper passes through to Legislation.</p> <p>Agreed and we welcome the opportunity to return to a future scrutiny committee to present on progress.</p> <p>Agreed and we welcome the opportunity to work with Herefordshire Council to ensure that joint working to address the wider determinants of health and to reduce health inequalities are as strong as possible.</p> <p>This recommendation is noted and will be addressed as part of our ICS Digital Strategy and through the development of the Integrated Health and Wellbeing Record.</p>
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29 March 2021		
Item	Recommendation	Responses [to be agreed by the executive]
Carers strategy	<p>That the draft strategy be supported, particularly the level of consultation undertaken and planned, and the following be recommended to the executive:</p> <p>a. That the need for coordination on appropriate solutions, for both the person being cared for and for the carer, be highlighted in the strategy.</p>	

Adults and wellbeing scrutiny committee, schedule of recommendations and responses

35

- b. That consideration be given to specific approaches in terms of urgent crisis situations.
- c. That attention be given to single points of contact, including trusted sources of information and linkages to services that support carers.
- d. That the strategy be shared with the council’s partners and local business groups to raise awareness of the issues for carers who are also employees.
- e. That consideration be given to working with the Department for Work and Pensions (DWP) to raise awareness of carer specific needs.
- f. That the use of colour in the action plan be reviewed to make it clear that these do not relate to red, amber, green ratings.
- g. In view of the changed circumstances and the new strategy, that consideration be given to the carers support service to ensure that the service remains fit for purpose.
- h. That system partners be invited to consider improving the experiences for carers in an integrated way across the system, with specific consideration given to carers as part of the emerging Integrated Care System.
- i. The adults and communities directorate and the children and families directorate jointly review practices and processes to ensure consistency and support across all ages, including the advice and guidance provided on assessments.
- j. Consideration be given to the identification of young carers and the specific needs of young carers in an educational setting.

30 April 2021

Item	Recommendation	Responses [to be sought from the relevant bodies]
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Adults and wellbeing scrutiny committee, schedule of recommendations and responses

<p>Review of mental health provision in Herefordshire</p>	<ul style="list-style-type: none"> a. A spotlight review on the progress with the transformation of community mental health services be undertaken in nine to twelve months, including progress addressing the identified Section 12 and Section 136 issues. b. Herefordshire and Worcestershire Health and Care Trust be asked to provide further details regarding the refurbishment of the Stonebow Unit. c. The adults and communities directorate be asked to provide a briefing note on emerging project work on the mental health needs of people with multiple complex vulnerability. d. The results of the health and wellbeing survey be circulated to all councillors when available. e. The Talk Community programme be invited to consider additional linkages and signposting opportunities to environmental and activity groups, particularly in relation to access to nature and the facilitation of groups to support social prescribing. f. Consideration be given to engaging further with the agriculture community on mutually beneficial arrangements with other communities in terms access to nature and its therapeutic benefits. 	<p>Response from Herefordshire and Worcestershire Health and Care Trust:</p> <p>Overall there is £15m of capital monies being invested in Herefordshire into the Stonebow unit and the work should be finished by end of March 2023 (however this could this be around June 2023 if there is slippage in some areas). There may be a small reduction in the bed base to fit the new environment into the available space (circa 1-2 beds from 39) but this is more than manageable both within our occupancy levels and increased capacity in other parts of the mental health (MH) pathway.</p> <p>This initiative is a really positive step forward across both counties in relation to people being cared for in an inpatient MH environment. It is key to protecting people’s privacy and dignity when they are at their most vulnerable and will ensure that people can benefit from their treatment in a safe environment that promotes their recovery.</p>
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Adults and wellbeing scrutiny committee, schedule of recommendations and responses

2 June 2021

Item	Recommendation	Responses [agreed by the executive 24 June 2021]
New arrangements for commissioned home care	<ul style="list-style-type: none"> a. That consideration be given to assisting self-funders pro-actively through the service specification. b. That consideration be given to the information, advice and support available to clients, including self-funders, linked to the ongoing work with Healthwatch, Talk Community, the Making It Real Board, and the transformation of community mental health services. c. That creative approaches to supported living, including home share, be reviewed as part of the emerging Supported Living Framework. d. That commitments be secured from providers to participate in and to support technology enabled living developments, and innovations to improve environmental performance. e. That provision in rural areas be explored with providers on both sides of the border to avoid any potential gaps in provision. f. That opportunities to work collaboratively on workforce recruitment and retention issues be considered with a view to: <ul style="list-style-type: none"> i. recruiting within communities to deliver services locally, especially to support clients in rural areas and to minimise unnecessary travel; ii. encouraging people to take up or restart a career in the sector, including through the refresh of the care sector website; iii. developing the range of health and care functions being delivered to maximise the value from each visit, to make every contact count, and to enhance career pathways through the upskilling of the workforce. 	<p>Accepted - The service specification will include that the framework will be used to purchase home care on behalf of self-funders.</p> <p>Accepted - Further work to support self-funders will be undertaken with organisations above to produce a self-funders action plan.</p> <p>Accepted – This will be addressed as part of review of supported living services.</p> <p>Accepted – These recommendations will be included in the service specification.</p> <p>Accepted – The framework will place a contractual requirement on providers to deliver home care in rural area.</p> <p>Senior Commissioning Officer will continue working with counterparts in neighbouring authorities.</p> <p>Continue discussions between the Council and Herefordshire and Worcestershire CCG regarding the provision of health related care tasks to include training as appropriate.</p> <p>Rebranding / relaunching of care hero campaign to include a comprehensive recruitment and retention campaign.</p>

Adults and wellbeing scrutiny committee, schedule of recommendations and responses

	<p>g. That a briefing note be provided to the committee in twelve months to evaluate progress, including any consequential impacts on market resilience and on the lived experience of service users in terms of the continuity and enhancement of care.</p>	<p>Accepted – Report for scrutiny committee in 12 months from the beginning of the new framework.</p>
	<p>h. That the executive be invited to write to the Secretary of State to seek clarification about the government’s plans for social care reform.</p>	<p>Accepted – the leader writes on behalf of Herefordshire social care sector to seek clarification about the government’s plans for social care reform.</p>

38

21 June 2021		
Item	Recommendation	Responses
Learning Disability Strategy update	<ul style="list-style-type: none"> a) Herefordshire Council and NHS partners urgently progress becoming exemplar employers of people with learning disabilities (ref LD2.09) b) the council take advantage of employment opportunities emerging during the recovery from coronavirus, such as in the hospitality industry and utilising increased working from home c) Include in the dashboard benchmarking against local and national comparators to give a clearer picture of the council’s performance d) Include in the dashboard figures on the numbers of complaints and appeals to illustrate the impact of savings plans on service users e) That the bill of rights be widely promoted f) A briefing note be provided to the committee on continuity of contact with social workers for regular service users 	

Adults and wellbeing scrutiny committee, schedule of recommendations and responses

	g) A briefing note be provided on providers.	
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**Adults and wellbeing scrutiny
committee**

Approved work programme

2021/22

Summary of agenda items

Monday 21 June 2021, 2.30 pm

Learning disability strategy update

Monday, 6 September 2021, 2.30 pm

Out of hospital care (including Continuing Healthcare, discharge pathway and self-funders)

Monday, 1 November 2021, 2.30 pm

Domestic abuse strategy update

Monday, 10 January 2022, 2.30 pm

Budget setting 2022/23

Monday, 7 March 2022, 2.30 pm

To be confirmed but could include reports from task and finish group(s)

To be confirmed, June 2022

Spotlight review on the progress with the transformation of community mental health services

4/2

Agenda items

Monday 21 June 2021, 2.30 pm

Circulate to reviewers: 19 May 2021
Release report deadline: 8 June 2021
Publication deadline: 11 June 2021
Questions deadline: 15 June 2021

Item:	Origin	Lead officer(s):	Current position:
Learning disability strategy update	Work programming 20 November 2020 and AWSC 13 January 2021 requested 'That the operational changes and proposals in terms of Learning Disability services, including the impacts on service users, be presented to the committee'	Laura Ferguson, Senior commissioning officer; Laura Tyler, Head of care commissioning	Agenda published for 21 June 2021

43

Agenda items

Monday 6 September 2021, 2.30 pm

Circulate to reviewers: 4 August 2021
 Release report deadline: 23 August 2021
 Publication deadline: 26 August 2021
 Questions deadline: 31 August 2021

Item:	Origin:	Lead officer(s):	Current position:
Out of hospital care (including Continuing Healthcare, discharge pathway and self-funders)	AWSC considered agenda items on NHS CHC on 20 September 2018 and 2 March 2020 . AWSC has received questions from the public, including on 29 March 2021 and 2 June 2021 and a paper from a member of the public which was circulated on 17 June 2021.	Mandy Appleby, Assistant director adult social care operations; NHS Herefordshire and Worcestershire Clinical Commissioning Group	After AWSC 29 March 2021 , NHS Herefordshire and Worcestershire Clinical Commissioning Group provided a briefing note which included recommendations for further scrutiny activity.

44

Agenda items

Monday, 1 November 2021, 2.30 pm

Circulate to reviewers: 30 September 2021

Release report deadline: 19 October 2021

Publication deadline: 22 October 2021

Questions deadline: 26 October 2021

Item:	Origin:	Lead officer(s):	Current position:
Domestic abuse strategy update	AWSC 29 January 2019 considered the Domestic abuse strategy 2019-22 and requested an update on progress with implementation to be included in the work programme.	Danielle Mussell, Senior commissioning officer	AWSC 29 March 2021 noted the new Domestic Abuse Act which includes a requirement to refresh the existing strategy, with this likely to be published by October 2021. Work programming 16 June 2021 requested an earlier seminar / workshop from an all ages perspective.

04

Agenda items

Monday, 10 January 2022, 2.30 pm

Circulate to reviewers: 7 December 2021
Release report deadline: 24 December 2021
Publication deadline: 31 December 2021
Questions deadline: 4 January 2022

Item:	Origin:	Lead officer(s):	Current position:
Budget setting 2022/23	Annual item to seek the views of AWSC on the budget proposals as they relate to the remit of the committee.	Andrew Lovegrove, Chief finance officer; Josie Rushgrove, Head of corporate finance	

Agenda items

Monday, 7 March 2022, 2.30 pm

Circulate to reviewers: 3 February 2022
Release report deadline: 22 February 2022
Publication deadline: 25 February 2022
Questions deadline: 1 March 2022

Item:	Origin:	Lead officer(s):	Current position:
To be confirmed but could include reports from task and finish group(s)			

47

Agenda items

[to be confirmed] June 2022

Circulate to reviewers: tbc
 Release report deadline: tbc
 Publication deadline: tbc
 Questions deadline: tbc

Item:	Origin:	Lead officer(s):	Current position:
48 Spotlight review on the progress with the transformation of community mental health services	AWSC 30 April 2021 recommended: 'A spotlight review on the progress with the transformation of community mental health services be undertaken in nine to twelve months, including progress addressing the identified Section 12 and Section 136 issues'	Ewen Archibald, Head of community commissioning and resources; Herefordshire and Worcestershire Health and Care NHS Trust	

To be scheduled (1/2)

Potential agenda items			
Item:	Origin:	Lead officer(s):	Current position:
Emergency and urgent care	Work programming 20 November 2020 suggested combining: Minor Injuries Units, community services redesign, West Midlands Ambulance Service performance, NHS 111	To be confirmed	Work programming 16 June 2021 indicated that members may prefer to deal with elements separately.
Health and wellbeing board	Suggested by the chairperson and noted at work programming 16 June 2021.	To be confirmed	Work programming 16 June 2021 noted that the timing could be influenced by the emerging ICS developments (see below)
Integrated Care System (ICS) governance and funding	AWSC 24 March 2021 requested an item on ICS governance arrangements and funding mechanisms.	Director of adults and communities; NHS Herefordshire and Worcestershire Clinical Commissioning Group	Work programming 16 June 2021 noted that the timing could be subject to the decisions on legislation to be made by Government and Parliament.

To be scheduled (2/2)

Potential agenda items			
Item:	Origin:	Lead officer(s):	Current position:
Access to health and care for Herefordshire residents living on the border with Wales	Work programming 16 June 2021	To be confirmed	To be scheduled.
Social prescribing	Following AWSC 30 April 2021 , the chairperson suggested that the realities of social prescribing could be explored.	To be confirmed	To be scheduled.
Wider determinants of health (potentially including housing and climate emergency)	Work programming 16 June 2021	To be confirmed	Could be an area for joint scrutiny activity following re-thinking governance proposals for a revised scrutiny structure.
Service user communication	Requested by councillors and added to long list of potential items by chairperson 13 Aug	To be confirmed	The ICS and the new proposed Integrated Care Record may present an opportunity to address this issue across the system. To consider provision of written briefing ahead of any future scrutiny activity.

50

Workshops / seminars

Topic:	Origin:	Lead officer(s):	Current position:
Domestic abuse (all ages perspective)	Work programming 16 June 2021	Danielle Mussell, Senior commissioning officer	To be requested.
Recruitment and retention	AWSC 23 November 2020 recommended that a briefing note be provided and an all-member workshop be considered.	Mandy Appleby, Assistant director adult social care operations; Lorna Simpson, Employee relations business partner; Paul Smith, Assistant director all ages commissioning	Agreed by Cabinet 25 February 2021
5 Talk Community	Work programming 20 November 2020 suggested an all-member seminar	Amy Pitt, Assistant director Talk Community programme	The assistant director welcomes the suggestion for later in the year.

Task and finish groups

Topic:	Origin:	Lead officer(s):	Current position:
GP access	Work programming 16 June 2021	To be confirmed	Scoping statement to be progressed.
Health impact of the intensive poultry industry	AWSC 29 March 2021 requested that a scoping statement be prepared	Becky Howell-Jones, Acting director of public health	Scoping statement to be progressed.

Briefing notes (1/2)

Topic:	Target date:	Lead officer(s):	Current position:
Community wellbeing survey	July 2021	Amy Pitt, Assistant director Talk Community programme	Requested by AWSC 30 April 2021
Hillside centre	To be identified	Mandy Appleby, Assistant director social care operations; Paul Smith, Assistant director all ages commissioning	To be requested, arising from work programming 16 June 2021
Legislative framework	To be identified	Adults and communities directorate / Legal services	To be requested, arising from work programming 16 June 2021
Multiple complex vulnerability	To be identified	Ewen Archibald, Head of community commissioning and resources	Requested by AWSC 30 April 2021
West Mercia Ambulance Service performance	To be identified	To be identified	To be requested, arising from work programming 16 June 2021
Vaccinations for key workers	To be identified	Mandy Appleby, Assistant director social care operations; Paul Smith, Assistant director all ages commissioning	To be requested, arising from work programming 16 June 2021

52

Briefing notes (2/2)

Topic:	Target date:	Lead officer(s):	Current position:
Market Position Statement update	31 January 2022	Paul Smith, Assistant director all ages commissioning	Agreed by Cabinet 25 February 2021
Commissioned home care update	1 June 2022	Laura Tyler, Head of care commissioning	Requested by AWSC 2 June 2021
Continuity of contact with social workers for regular service users	To be identified	Laura Tyler, Head of care commissioning	Requested by AWSC 21 June 2021 arising from discussion of Learning Disability Strategy update
Learning Disability Strategy providers	To be identified	Laura Tyler, Head of care commissioning	Requested by AWSC 21 June 2021 arising from discussion of Learning Disability Strategy update

53

