

ADULT SOCIAL CARE AND PUBLIC HEALTH COMMITTEE

Monday, 7 June 2021

Present: Councillor Y Nolan (Chair)

Councillors	I Camphor	M Jordan
	K Cannon	M McLaughlin
	T Cottier	S Mountney
	S Frost	C O'Hagan
	P Gilchrist	J Walsh

1 APOLOGIES

No apologies for absence were received.

2 MEMBER DECLARATIONS OF INTEREST

Members were asked to consider whether they had any disclosable pecuniary interests and/or any other relevant interest in connection with any item(s) on this agenda and, if so, to declare them and state what they were.

The following declarations were made:

Councillor Clare O'Hagan	Personal interest by virtue of her employment in the NHS.
Councillor Tony Cottier	Personal interest as a director of a construction company contracted by the NHS.
Councillor Mary Jordan	Personal interest by virtue of her employment for the NHS, her son's employment for the NHS and her involvement as a trustee for 'incubabies'.
Councillor Ivan Camphor	Personal interest by virtue of the being a General Practitioner at Heatherlands Medical Centre, Medical Secretary for Mid-Mersey Local Medical Committee, General Practitioner Committee Representative for Cheshire and Mid Mersey, British Medical Association Chair of the Committee on

	Community Care and his wife's employment in the NHS.
Councillor Moira McLaughlin	Personal interest by virtue of her family's employment in the NHS and Wirral Council's Children's Services.
Councillor Yvonne Nolan	Personal interest by virtue of her son's employment at a local testing centre.

3 MINUTES

Resolved – That the accuracy of the minutes of the meeting held on 2 March 2021 be agreed.

4 PUBLIC QUESTIONS

The Chair outlined that Mr David Jones had indicated he wished to make a statement in relation to Wirral Evolutions Ltd, but that he would be invited to make his statement following the conclusion of that item.

The Chair further reported that notice had been given of a petition to be presented. The petition was presented by Mr George Lamb, who at the invitation of the Chair introduced the petition which had 1,030 signatories and sought to keep the Wirral Evolutions ran Highcroft Day Centre open.

The Chair thanked Mr Lamb for presenting the petition to the Committee and reaffirmed that the Committee was receiving a progress report from Wirral Evolutions and not making a decision on the closure of day centres.

5 WIRRAL EVOLUTIONS LTD: PROGRESS UPDATE AGAINST APPROVED SAVING PROPOSAL

Jean Stephens, Managing Director of Wirral Evolutions presented the report which provided the Committee with the first quarterly report detailing the progress against Wirral Evolution's saving proposals and plans to modernise the Company's operating model to ensure the delivery of service was within the contract value of £5.015m for 2021/22.

The report detailed how the Company had based its decision to modernise on its mission, vision and values outlined in its 5-year business strategy. This contained two key elements, firstly organisational restructure to enable improved personalised outcomes for the people with a learning disability to reach their full potential, and secondly consolidation of locations to work towards providing an improved community integrated offer for people with a learning disability, supporting more independent life skills. It was intended that the outcomes of the plan would enable greater personalised outcomes,

smaller ratios based on levels of support needs, greater social value and benefit to service users and a leaner and modern outward focused workforce structure.

The Committee was advised that the formal organisational restructure workforce consultation was launched on 22 March 2021 and concluded on 19 May 2021 and weekly engagement meetings had taken place with Trade Unions and Wirral Council Human Resources. The consultation with service users, parents and carers commenced on 24 May 2021, and Zoom sessions had taken place with 105 parents and carers and 92 online surveys had been submitted, with personalised conversations to have taken place with all service users by 13 June 2021. The emerging themes from the consultation process were reported to the Committee, with issues such as transport to new locations, level of staffing, level of service and the opportunity for transition all being raised. It was reported that the feedback would be collated and discussed with service users and that Wirral Evolutions was committed to enabling the best outcomes for those service users.

Members queried the rationale around the withdrawal of the Highcroft centre and sought clarification on what the community integrated services were.

Councillor Phil Gilchrist proposed the following:

“Having received the presentation and concerns raised by petitioners, committee welcomes the assurances that Wirral Evolutions has given to date, but requests that they produce more detail on the outcome of the consultation for the meeting in July, and in so doing Committee would like to hear how the consolidation, economies of scale and community hubs will be of genuine benefit to the users of the services, and how staff skills will be retained, and how service users view the future prospects.”

Councillor Yvonne Nolan raised concern at the timeline and proposed an amendment Councillor Phil Gilchrist’s suggested motion, replacing “July” with “September”.

Councillor Sam Frost proposed a further addition of the following wording to the suggested motion:

“Wirral Evolutions is also requested to extend the consultation to wider members of the community and provide further detail on the community groups it was seeking to make links with, and their response.”

The revised motion was moved as an alternative to the recommendations in the report by Councillor Phil Gilchrist, seconded by the Chair and agreed by assent, and it was therefore:

Resolved – That having received the presentation and concerns raised by petitioners, the Adult Social Care and Public Health Committee welcomes the assurances that Wirral Evolutions have given to date, but requests that more detail be produced on the outcome of the consultation for its meeting on 8 September 2021. The Committee would also like to hear how the consolidation, economies of scale and community hubs will be of genuine benefit to the users of the services, as well as how staff skills will be retained, and how service users view the future prospects. Wirral Evolutions is also requested to extend the consultation to wider members of the community and provide further detail on the community groups it was seeking to make links with, and their response.”

6 STATEMENT

Following the conclusion of the Wirral Evolutions Ltd item the Chair invited David Jones to address the committee. Mr Jones spoke regarding the organisational restructure of Wirral Evolutions Ltd, outlining concerns regarding the consultation process, salary and contracted hours reductions for staff and urging that the service be brought back under Council control.

The Chair thanked Mr Jones for his statement.

7 ADULT CARE AND HEALTH COMMISSIONING ACTIVITY 2021

Jayne Marshall, Community Care Lead Commissioner, introduced the report of the Director of Care and Health which was to notify the Committee of the commissioning activity for Quarter 2 of 2021, and seek approval of the re-tendering of a number of existing services and new service provision.

The detail of the existing services to be re-commissioned was outlined to the committee, including the Mobile Nights Service, Early Intervention and Prevention and Carers Services, Wirral Advocacy Hub and Cardigan House. It was reported that the Beach Accessible Wheelchairs service was a new service request, following Council expressing an ambition to introduce the service.

Concerns were raised by some members around the level of detail in the report given the significant cost of the contracts. Members were advised that all but one of the contracts were existing services funded from existing budgets.

It was proposed by Councillor Simon Mountney, seconded by Councillor Ivan Camphor, that the item be deferred until the July meeting and that more detail on the services be provided.

The motion was put and lost (3:8).

It was moved by Councillor Kate Cannon, seconded by Councillor Tony Cottier that the recommendations in the report be agreed.

The motion was put and carried (8:1) (2 abstentions).

Resolved (8:1) (2 abstentions) – That:

- 1. authorisation be given to the Director of Care and Health to proceed with the procurement for:**
 - **Mobile Night Service (5-year contract)**
 - **Beach Accessible wheelchairs (2-year contract)**
 - **Early Intervention and Prevention services (3-year contract)**
 - **Wirral Advocacy Hub (3-year contract)**
 - **Cardigan House (2-year contract)**

- 2. Delegated authority be given to the Director of Care and Health to award the tender to the successful bidders following the tender process.**

8 INFECTION PREVENTION AND CONTROL SERVICE COMMISSION

Julie Webster, Director of Public Health introduced the report which sought the Committee's agreement to progress the proposed commissioning intentions for Community Infection Prevention and Control Services.

Members were reminded how the Covid-19 pandemic and response had highlighted the vital importance of infection prevention and control and the specialist support required to ensure that high standards of infection prevention and control could be implemented and maintained. The current contract was delivered by Wirral Community Health and Care NHS Foundation Trust and was due to end on 31 March 2022, therefore authority was sought to commence the re-commissioning of the service. The details of the service were outlined to the Committee, which included providing a proactive service to ensure there were the tools and information available to maintain high standards in all community settings.

The significant work that had to be undertaken in nursing homes to ensure high levels of infection prevention and control was acknowledged and it was proposed that an overview of that work would be useful for members in the future.

Resolved – That

- 1) the Director of Public Health be authorised to re-commission the Wirral Community Infection Prevention and Control Service totalling up to £2,450,000 (£350,000 per annum) for an initial five-**

year contract (1 April 2022 – 31 March 2027) with the option of two one-year extensions.

- 2) delegated authority be given to the Director of Public Health to award the tender to the successful bidder following the tender process.**

9 DISCHARGE TO ASSESS (D2A) AND REABLEMENT SERVICES'

Jason Oxley, Assistant Director for Care, Health and Commissioning for People introduced the report of the Director of Care and Health, which outlined a proposal to transfer the Discharge to Assess bed-based service provision from the current range of services in the independent care home sector, to a single site service operated by the NHS.

The Committee was advised that Discharge to Assess was a pathway model for people who were clinically ready for discharge from hospital and who no longer required an acute hospital bed, but who may still require care services including short-term, funded support. The ethos was to discharge people to remain in their own home wherever possible. However, some people required a period of extended short-term support, assessment and therapy within a bed-based Discharge to Assess service before they could return to their home or to their onward care arrangements. The report outlined that a review had been undertaken of the average length of stay and future capacity and demand requirements, and it was felt that a single site offer operated by the NHS would be more effective and give greater opportunity for patients to return home sooner.

Members had concerns over the reduction in available beds as part of the proposals. The Assistant Director for Care, Health and Commissioning for People advised the Committee that 30 additional independent care home beds would be available for 6 months over the winter period to provide additional support during the transitional period, and that the commissioners had good monitoring of pressure triggers and would be responsive to any issues.

It was moved by Councillor Phil Gilchrist and seconded by Councillor Mary Jordan, that an addition to the recommendation contained in the report, be made as follows:

'In the event of capacity stresses arising in the proposed arrangements, officers be requested to report back to the Adult Social Care and Public Health Committee to advise on the steps being taken to address this.'

The addition was agreed by assent, and it was therefore –

Resolved – That

- 1) the current D2A independent care home contracts held by the Council due to expire on 30 September 2021 be supported.
- 2) the progression of proposals for D2A bed-based services to be commissioned by the NHS as a single site NHS offer from 1 September 2021 be supported.
- 3) the proposal for up to an additional 30 community independent care home beds to be commissioned for a period of 6 months (ending on 31 March 2022) to support the transition from the current model and to support with the additional demand on the care and health system expected due to winter pressures be supported.
- 4) a further report be presented to a future Committee with detail of the D2A service arrangements.
- 5) In the event of capacity stresses arising in the proposed arrangements, officers be requested to report back to the Adult Social Care and Public Health Committee to advise on the steps being taken to address this.

10 **FEE SETTING FOR 2021/22 (OUTCOME OF PROVIDER FEE SETTING ENGAGEMENT)**

Jayne Marshall, Community Care Lead Commissioner introduced the report of the Director of Care and Health which outlined the outcome of the annual engagement exercise with the Local Community Care Market for fee rates to be paid to care providers for 2021/2022, which included Residential and Nursing, Supported Living, Extra Care, Care and Support at Home and Direct Payments.

The report set out the duty on the Local Authority to promote diversity and quality in the care and support provider market to produce a sustainable and diverse range of care and support providers to deliver good quality and cost-effective services. As part of this, the Council must set what fees it pays to care home providers in an open, fair and transparent way, which takes into account the providers' costs, efficiencies and planned outcomes for people using services. The Committee was advised that the fee setting had taken into account the legitimate current and future costs, as well as incentivising providers to pay the Real Living Wage.

Resolved – That

- 1) approval be given to the rates that apply to services commissioned by Wirral Council and jointly commissioned

services between Wirral Council and NHS Wirral Clinical Commissioning Group (CCG), in relation to Residential and Nursing, Supported Living, Extra Care, Care and Support at home and Direct Payments, as detailed in the report.

- 2) approval be given to the backdating of the rates to apply from 1 April 2021.**

11 NATIONAL DRUG TREATMENT AND RECOVERY GRANT FUNDING

Julie Webster, Director of Public Health, introduced the report which provided an overview of the Government's national grant funding programme for drug treatment and recovery, and outlined the proposals on how best to utilise the funding to reduce drug related deaths, offending and reduce the prevalence of drug use.

It was reported that there were significant issues with illegal drug misuse and associated health problems in Wirral and that in January the government had announced £148m funding package to help tackle this issue nationally. Committee was informed that Wirral Council had been awarded £1.4m as part of the programme, which needed to be spent within the 2021/22 financial year. The report further outlined the partnership approach that would be undertaken as part of the proposals alongside colleagues from a range of sectors such as police, justice service and housing.

Members welcomed the approach and urged the Director of Public Health to ensure that schools were involved in the partnership approach as one of the key partners for prevention.

Resolved – That

- 1) the acceptance of the £1.4m national Drug Treatment and Recovery Grant funding be agreed.**
- 2) the proposals for spending the £1.4m Drug Treatment and Recovery Grant funding as set out in Appendix 2 be agreed.**

12 PROPOSALS FOR INTEGRATED CARE PARTNERSHIPS

Graham Hodkinson, Director of Care and Health introduced the report which provided an update on the proposed strategic changes in the NHS and outlined the implications for the Council of such emerging arrangements.

It was reported that the Committee had received an update on the proposals for Integrated Care Partnerships at its last meeting following the publication of the government's White Paper 'Integration and innovation: working together to improve health and social care for all', and since then the proposals had been

included within the Queen's Speech. The report set out the implications of the changes for the Local Authority, which would take the leadership role in the local 'place' making arrangements. The Integrated Care Partnership would be made up of Wirral Integrated Commissioning, Wirral Provider Collaborative and Place leadership, where the Health and Wellbeing Board would play a critical role in driving local arrangements.

A discussion ensued on where commissioning of services would sit within the system, where it was reported that early indications were that the majority of commissioning would be done at 'Place' level.

Resolved – That

- 1) the Queen's Speech announcing the forthcoming Health and Care Bill, intended to make it easier for different parts of the health and care system to work together and to support place-based joint working between the NHS, local government, community health services, and other partners be noted.**
- 2) the Local Government Association's efforts to secure with Government their commitment that existing local partnerships and democratic structures should be based on local government place be supported, and the importance of the Council's role as that place-level leader be recognised.**
- 3) the Health and Wellbeing Board's role in leading the development of place based partnership necessary to deliver improved outcomes in population health and tackling health inequality and notes the progress currently being made be endorsed.**

13 APPOINTMENT TO STATUTORY COMMITTEE AND MEMBER CHAMPION FOR DOMESTIC ABUSE

Vicki Shaw, Head of Legal Services introduced the report which sought the appointment of members to serve on the Discharge from Guardianship by Wirral Council under the Mental Health Act 1983 Panel, and to appoint a Member Champion for Domestic Abuse.

Resolved – That

- 1) the Monitoring Officer as proper officer be authorised to carry out the wishes of the Group Leaders in allocating Members to membership of the Statutory and Advisory Committees detailed within the report and to appoint those Members with effect from the date at which the proper officer is advised of the names of such Members.**

2) Councillor Yvonne Nolan be appointed the Member Champion for Domestic Abuse.

14 **2021/22 BUDGET MONITORING AND 2022/23 BUDGET PROCESS**

Graham Hodkinson, Director of Care and Health, introduced the report of the Director of Resources which outlined the processes for monitoring the 2021/22 budget and for commencing the budget setting process for 2022/23.

It was reported that following the capitalisation directive of up to £10.7m the Council had received from Ministry for Housing, Local Government and Communities, one of the conditions of that offer was that the Council needed to provide evidence from the assurance review of the authority's financial position and its ability to meet any or all of the identified budget gap without any additional borrowing. Therefore, it was important that the Council had robust processes in place to manage and monitor the in-year financial position, to ensure it is reporting a forecast balanced position to the end of the year and that the process for 2022/23 budget setting was underway early so that an agreed budget could be agreed by Council in March 2022.

A query was raised around the effectiveness of zero-based budgeting, where it was outlined that Adult Social Care and Public Health had undertaken a zero-based budgeting exercise the previous financial year, which meant that the budget for the current financial year was based on that zero-based budgeting exercise and therefore accurately reflected actual spend.

Resolved – That

- 1) the content of the report and the current forecast position of savings for 2021/22 and the ongoing work being undertaken to mitigate any under achievement be noted.**
- 2) agreement be given to the inclusion of the current proposals within the report from the Medium Term Financial Plan from 2022/23 – 2025/26 and that the Director of Adult Care and Health develops them into full business cases, where appropriate, be included in the 2022/23 budget proposals to Policy and Resources Committee at its October meeting for approval.**
- 3) a series of budget workshops be convened to identify any alternative savings/income/reductions in pressures to ensure that a full suite of costed and deliverable proposals can be recommended to the Policy and Resources Committee at its October meeting for approval.**

- 4) the Zero-Based Budgeting project be commenced within the budget workshops to contribute to the overall savings target of £170k in 2021/22.**

15 **CAPITAL AND REVENUE BUDGET MONITORING QUARTER 4**

Mark Goulding, Senior Finance Business Partner introduced the report of the Director of Care and Health, which set out the financial monitoring information for the Adult Social Care and Public Health Committee.

The report provided members with an overview of budget performance for the area, and detailed the year-end revenue position of £1.1m favourable, and year-end capital position of £0.8m favourable. It was reported that the favourable position included £0.6m joint funded income correction relating to two historic invoices, alongside extra funding received for the Covid-19 response from government and Clinical Commissioning Group funding for hospital discharges and deflections. It was reported that Adult Care and Health budget had experienced substantial pressures in 2021/21 which would have led to a significant overspend had it not been for the CCG and Covid-19 grant support.

Further information was sought on the progress of Assistive Technology installations which had been delayed due to the pandemic.

Resolved – That the year-end revenue outturn position of £1.1m favourable and the £0.8m favourable position of the capital programme, as reported at quarter 4 (Apr-Mar) of 2020-21 be noted.

16 **ADULT SOCIAL CARE AND HEALTH PERFORMANCE REPORT**

Jason Oxley, Assistant Director for Care, Health and Commissioning for People introduced the report of the Director of Care and Health, providing an update on performance in relation to Adult Social Care and Health.

Key elements of the performance report were highlighted, including the situation with residential and nursing care homes where there were increasing vacancy rates which now stood at 18.9%. It was reported that there were a small number of care homes closed to admissions as a result of Covid-19. The Committee's attention was also brought to the Care Quality Commission's (CQC) notifiable incidents as outlined in the report, the reporting process for which was still under development following a request from members for that information. It was further highlighted that the statistics for reablement showed that the main reason for ending of care packages was that people had achieved their aims.

The Committee welcomed the figures on reasons for end of care packages and sought further information in future reports on the CQC's notifiable

incidents pre-covid, as well as further detail on national or Liverpool City Region averages on performance data for comparison.

Resolved – That the report be noted.

17 **TACKLING HEALTH INEQUALITIES THROUGH REGENERATION: HEALTH & EMPLOYMENT**

Julie Webster, Director of Public Health introduced the report which outlined the Council's collaborative investment to address health related worklessness and improve social, economic and health outcomes.

It was reported that good employment protects health and that there were lots of challenges with health issues associated with unemployment. The pandemic had highlighted the need to focus on work to support people to enter the job market with good quality jobs, therefore the report outlined the work that had taken place to address these issues.

The report included data around unemployment and Universal Credit claimants, which showed that there were 31,352 people in Wirral claiming Universal Credit, of which 11,131 were in employment. Members raised concerns over the significant number of people in work claiming Universal Credit and highlighted that employment wasn't lifting people out of poverty. Further points were made in relation to housing standards and lower attainment for children living in deprived communities and it was suggested that an anti-poverty strategy could be developed.

Resolved – That the report be noted.

18 **COVID-19 RESPONSE UPDATE**

Julie Webster, Director of Public Health introduced the report which provided the Committee with an update on surveillance data and key areas of development in relation to Wirral's Covid-19 response and delivery of the Local Outbreak Management Plan.

It was reported that the 7 day incidence rate had significantly increased from 15 cases on 20 May to 153 cases on 4 June, which translated to an increase from 4.6 cases per 100,000 to 47.2 cases per 100,000. There had been a significant increase in cases in the young age groups, particularly 10-19 and 30-39, but it was reported that there hadn't yet been a big increase in hospital admissions, with two patients in Arrowe Park with Covid-19 illnesses as at 4 June.

Further outbreaks were being reported in school and hospitality settings, who were working hard to put measures in place. There had also been some outbreaks in care homes, but often these were as a result of the increased

testing programme as opposed to due to people having symptoms or becoming ill which was testament to the vaccination programme. The Director of Public Health further outlined that any further relaxation of the roadmap would increase case rates therefore residents were encouraged to continue to practice the core principles of hands, face and space.

Members highlighted the links between deprivation and concerns around reporting as unwell due to concerns of support and pay, alongside the links between Houses of Multiple Occupancies and the spread of the virus.

Resolved – That the contents of the report, the progress made to date and to support the ongoing COVID-19 response be noted.

19 **WORK PROGRAMME**

Vicki Shaw, Head of Legal Services introduced the report of the Director of Care and Health which provided the committee with an opportunity to plan and review its work across the municipal year.

Resolved – That

- 1) the work programme be noted.
- 2) the budget workshops be added to the work programme.

20 **EXEMPT INFORMATION - EXCLUSION OF THE PRESS AND PUBLIC**

Resolved – That

- 1) under section 100 (A) (4) of the Local Government Act 1972, the public be excluded from the meeting during consideration of the following item of business on the grounds that it involves the likely disclosure of exempt information as defined by paragraph 3 of Part I of Schedule 12A (as amended) to that Act. The Public Interest test has been applied and favours exclusion.
- 2) further to Minute No.11, the content of the exempt appendix circulated with the agenda, be noted.