

**HEALTH AND WELL BEING OVERVIEW AND SCRUTINY COMMITTEE  
12 FEBRUARY 2013**

**54 CONSULTATION FINDINGS : WHAT REALLY MATTERS STAGE 2**

Further to minutes 29 (6 November 2012), 40 (5 December 2012) and 44 (16 January 2013), the Committee considered the report of the Chief Executive upon the outcome of the What Really Matters Stage 2 Consultation, which had been considered by the Cabinet at its meeting held on 7 February 2013 (minute 184 refers).

The comprehensive programme of consultation and engagement had been undertaken to inform the development of the Council's Corporate and Financial Plan for 2013-2016 and further to inform the decision making process surrounding significant budget savings. The Cabinet had noted the consultation process and implementation described within the report, and thanked Wirral residents, staff and other stakeholders for their input. Cabinet had also noted the detailed consultation findings in relation to each budget option as contained within Appendices 1, 2 and 3.

Kevin McCallum, Corporate Marketing Officer, Chief Executive's Department gave a brief presentation on the consultation findings and provided information in relation to targeted engagement and the methodology for the geographic and demographic analysis that had been undertaken. Key messages were that the Council should protect the vulnerable, retain responsibility for quality and look to raise income and eliminate waste. The Chief Executive had responded personally to all direct communication from members of staff and a team was in place to ensure Equality Impact Assessments, continued engagement and consultation and to show due regard to concerns raised.

Individual views expressed by Members in relation to the general analysis of consultation responses, were that the comments did not represent a neutral interpretation; for example, 51% being shown as either strong support for an option or, conversely, being a slight majority against. However, Members accepted the accuracy of the figures and noted that the comments were subjective.

The Committee was requested to give consideration to the consultation feedback in relation to the following specific items, which fell within its remit and the Chair proposed that views expressed by Members could form the basis of feedback to Budget Cabinet.

In relation to concerns raised regarding the lesser responses to stage two and asked if this was because of the document being lengthy, Mr McCallum indicated that he did not feel this was the case and explained that incomplete online submissions were taken into account as part of the process.

In relation to ethnicity and consultation with those whose first language was not English, Mr McCallum indicated that the Department had worked with

external agencies to liaise with the hard to reach group; produce and circulate information and assist people in completing the questionnaires. No requests were received for translated documents.

In relation to petitions, emails and comments received, information regarding petitions had been fed in to the consultation process and reported to Cabinet. Emails sent to Chief Executive were being monitored and fed into the process; questionnaire responses were appropriately analysed and all comments published to the Council's website.

Mr Donaldson, Co-opted member representing carers asked about the letters sent to Chief Executive from Mencap in relation to the consultation and asked if these letters would be published. Mr McCallum agreed to look into this issue.

In relation to the impacts the options if taken would have on individuals, service areas and wards, Mr McCallum indicated that policy officers were currently working on these details and once this had been done it would enable officers to feedback to Members.

The Chair indicated that in relation to the proposals detailed within the report, not enough details had been given for the Committee to discuss, and Cabinet may make recommendations at their next meeting, so at this stage the Committee were unable to examine anything until the decision of the Cabinet was known.

The Chair indicated that he proposed to hold a special meeting of the Committee be held in March 2013 to discuss the saving options in more detail.

A Member expressed view that all services and workers in particular social workers and day services need to be retained and protected to assist the elderly and vulnerable and also to undertake the statutory duty in relation to assessments.

Mr Donaldson indicated that he had been contacted by a number of carers raising concern regarding the options to close day services and respite facilities, and welcomed the proposed special meeting to discuss the options further.

Members indicated that an understanding was needed of the proposals, details and planning to enable possible alternatives to be sought.

Mr Hodkinson indicated that quite a lot of information had been circulated to provide a clearer understanding but this was not a business case.

In relation to joint working with the NHS, David Allison, Chief Executive, Wirral University Teaching Hospital indicated that he was in constant dialogue with all partners and at present the hospital was struggling to accommodate patients attending A&E. The hospital was working with social care to tackle

the transition for patients from hospital to social care, however, the NHS were also under pressure to make relative savings.

Ms Wall, co-opted member representing the Older People's Parliament raised concerns regarding the proposals for the specialist transport to services, in relation to the option to remove ineffective transport and asked that if ceased what would be provided for those people who used the transport to access day services etc.

In response to Members questions regarding responsibility for drug, alcohol and domestic violence initiatives and services provision, Mr Hodgkinson indicated that the contract as indicated in the budget options would be dealt with by the Public Health Commission. In relation to patient care Mr Hodgkinson joint working was needed to improve service provision and patient care.

Mr Shanti Saagar, co-opted member representing the BME Community indicated that "bed blocking" had been a big problem historically and suggested that rehabilitation services could be a possible answer. He further indicated that he had recently attended a meeting and received a presentation regarding the 'Torbay experience' and suggested that the Committee could have the same presentation to gauge where we are and where we are going in the future.

#### **Resolved – That**

- (1) the presentation be noted;**
- (2) the report be noted and staff be thanked for all their hard work during the consultation process;**
- (3) it be agreed that a Special meeting be held in March 2013, to allow further consideration of the budget savings; and the Committee Administrator be requested to liaise with the Chair, Director of Adult Social Services and Spokespersons to arrange a suitable date;**
- (4) the Committee Administrator be requested to arrange a presentation in relation to the 'Torbay Experience' for a future meeting of the Committee.**