

Adult and Safer City Scrutiny Panel

28 March 2017

Time 6.00 pm **Public Meeting?** YES **Type of meeting** Scrutiny

Venue Committee Room 2 - 3rd Floor - Civic Centre

Membership

Chair Cllr Paula Brookfield (Lab)

Vice-chair Cllr Patricia Patten (Con)

Labour

Cllr Ian Claymore
Cllr Dr Michael Hardacre
Cllr Rupinderjit Kaur
Cllr Linda Leach
Cllr Elias Mattu
Cllr Lynne Moran
Cllr Anwen Muston
Cllr Rita Potter

Conservative

Cllr Barry Findlay

UKIP

Cllr Malcolm Gwinnett

Quorum for this meeting is three Councillors.

Information for the Public

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Agenda

Part 1 – items open to the press and public

<i>Item No.</i>	<i>Title</i>
1	Apologies
2	Declarations of Interest
3	Minutes of previous meetings (Pages 3 - 12)
4	Matters arising
5	Update on the Dementia City (report to follow) [Paul Smith, Interim Manager for Commissioning (Older People), to present report]
6	Older People Assessment and Case Management - promoting independence approach - update (report to follow) [David Watts, Service Director - Adult Social Care, to present report]

Adult and Safer City Scrutiny Panel

Agenda Item No: 3

Minutes - 31 January 2017

Attendance

Members of the Adult and Safer City Scrutiny Panel

Cllr Paula Brookfield (Chair)
Cllr Ian Claymore
Cllr Barry Findlay
Cllr Malcolm Gwinnett
Cllr Dr Michael Hardacre
Cllr Rupinderjit Kaur
Cllr Linda Leach
Cllr Elias Mattu
Cllr Lynne Moran
Cllr Anwen Muston
Cllr Rita Potter

Employees

Manjeet Garcha	Director of Nursing and Quality
Karen Samuels	Head of Community Safety
David Watts	Service Director Adult Social Care
Julia Cleary	Systems and Scrutiny Manager

Part 1 – items open to the press and public

Item No. *Title*

- 1 Apologies**
Apologies were received from Cllr Patten and Cllr Samuels.
- 2 Declarations of Interest**
Cllr Hardacre declared that he was a resident of Park Ward.
- 3 Minutes of previous meetings**
Resolved: (a) That the minutes of the previous meeting be agreed as a correct record;
(b) That the Clerk liaise with Councillor Muston in relation to wording in the minutes of the meeting held on 25 October 2016 before these minutes be approved.
- 4 Matters arising**
There were no matters arising from the minutes.

5 **Public Space Protection Order**

The Panel received a report requesting it to contribute towards the consultation on proposals to introduce a Public Space Protection Order to tackle alcohol-related anti-social behaviour in the city. The report provided information from a review of the existing city-wide Designated Public Place Order (DPPO) which had been in force since April 2013 and sought the Panel's views on the introduction of a Public Space Protection Order (PSPO) to address alcohol-related anti-social behaviour (ASB) in the city.

To date there had been 95 Responses to the consultation which centred on 5 questions including whether residents associated street drinking with nuisance and disorder (70% so far agreed that this was the case). The responses so far showed an overwhelming level of support for the proposals.

Officers stated that care was being taken to ensure that the proposals were enforceable and did not impact on any legitimate business activity. Officers also confirmed that the restrictions could be waived if there was an organised event taking place. The Panel expressed some concern in relation to the additional pressure that a city wide ban might place on the Police and it was agreed that a report be brought back in 6 months to update the Panel.

The Panel considered the issues relating to the possible inclusion of a street drinking ban for St Peter's and Park wards, which included the City Centre. The Panel considered that some of the issues seen in the wards could be linked to irresponsible licensees and that note needed to be taken in relation to the large numbers of HMOs and vulnerable people in high concentration. The Panel also noted that with regard to the Park ward the figures quoted related to a largely residential area whilst with regard to St Peter's ward the area was largely in the Town Centre.

Concern was expressed by some Members in relation to the restriction affecting residents who only wished to enjoy a glass of wine with a picnic in the park and whether the Police would have discretion to allow this. Officers stated in relation to the proposed drinking ban that there would be no discretion but that in relation to the city-wide Designated Public Place Order, officers had to link their actions to antisocial behaviour. Members considered that the Council did not want to keep people out of the parks but at the same time didn't want people to feel intimidated due to other people drinking in the parks.

The Panel also considered the possibility that a drinking ban in specific wards would not solve the problem and the issue would just be displaced. The real answer to the addictive behaviour was support and help.

The Panel considered the issue relating to licensees, especially those selling single cans and that if there was a way to legislate against this that it would be welcomed. Proposal (b) would have no effect on problematic licensees. Officers stated that issues around this had been considered by the Licensing Committee and that this could be looked at again along with refresher training for licence holders and premise supervisors where required.

The Panel were overall in favour of both proposals but did have some concerns in relation to 6.3 (b). The Panel considered that careful monitoring would need to be fed back and an update report provided in 6 months. The Panel welcomed the work

being done but considered that more information and clarification was required and that this approach represented one element of a much bigger piece of work.

Resolved: That the comments of the Panel be fed back as part of the consultation process.

6 **Supporting a Safe and Seamless Transfer From Specialist Care or Hospital Setting**

The Panel welcomed Manjeet Garcha, Director of Nursing and Quality to the meeting. The report sought to provide an outline of the systems and processes in place to support a safe, timely and seamless transfer of patients from a specialist care or hospital setting to their usual or new place of abode.

Over the last few years there had been many reviews and publications on the statistics and effects of delayed transfers of care. The majority of patients that were admitted to hospital for an acute episode of care or planned surgery returned to their usual place of residence with either very little or no required support. However, there were a growing number of a patients, in the main frail elderly but also patients with complex physical and mental health needs that did require discharge to be planned and executed in a safe and seamless manner for the best adjustment to their condition and surroundings.

In Wolverhampton a multi-agency 'Discharge to Assess' programme of work had commenced and it was anticipated that this would further improve the discharge arrangements for individuals from acute care settings. The new programme meant that patients did not always need to attend hospital and that the aim was to get them home first so that they could be assessed there by a physiotherapist or occupational therapist.

Children's Services had also been streamlined and sometimes children had to be sent for specialist care including referral to the Birmingham Children's Hospital and there could be complex planning required to bring them back home.

The Panel considered mental health and learning disability issues relating to patients who had been in an institution and had to undertake treatment reviews and it was confirmed that at the moment all patients were in the right place and that no one in Wolverhampton was waiting for a bed.

Members expressed concern in relation to patients in hospital waiting but unable to be discharged and those who were sometimes discharged too early and then had to return to hospital. Multi agency working was commendable but it would only work if the right resources were in place. The Panel queried whether the number of patients being readmitted after being discharged too early was monitored along with those still waiting to go home.

David Watts, Service Director – Adults stated that daily reports were received and that approximately 40 patients were delayed at any one time (about 60% from Wolverhampton) which was consistent with the national target of 3.5%. Mr Watts stated that it was very important to ensure that patients were discharged in good time to prevent them becoming less dependent or picking up infections. Mr Watts stated that he and his team were very aware of the concerns raised and were working hard

to improve the service where possible through the multi-agency approach. Mr Watts confirmed that a report could be provided in relation to the figures along with readmissions and figures showing how many people were still at home 90 days after discharge.

The Panel queried what was working at the moment and whether the multi-agency approach appeared to be working. Mr Watts stated that the project was still in the planning phase and that the first set of results would not be available until the 91 days had passed.

The Panel questioned what needed to be done to support a reduction in bed blocking and a concern was raised in relation to the closure of forces rehabilitation homes and a lack of mental health provision with vulnerable residents with on-going addictions living in third sector landlord accommodation.

Mr Watts stated that his team were working with the CCG which had responsibility for this area of commissioning and that they were investigating the possibility of more large scale commissioning in relation to mental health provision. Mr Watts also stated that his team were aware of the importance of providing the appropriate resources for when a person was in a crisis.

The Panel also queried the situation regarding the Better Care Fund and requested an update on this for a future meeting.

Resolved: (1) That an update report be provided in 6 months to include detailed information on the discharge processes and up to date figures.

(2) That an update on the Better Care Fund be brought to a future meeting.

7 **Safeguarding Adults Board Annual Report**

The Panel welcomed Alan Coe, Independent Chair of the Wolverhampton Safeguarding Adults Board to the meeting.

Mr Coe presented a report providing the Panel with a copy of the Wolverhampton Safeguarding Adult Board's (SAB) Annual Report to inform the Panel of safeguarding activity 2015/2016 and to present the Panel with progress made against the priorities for 2014-15. Since April 2015 all Safeguarding Adults' Boards were statutorily required to produce an annual report.

Mr Coe presented the report and highlighted the importance of partnership working with organisations such as the police and local authorities and the importance of members of these organisations getting directly involved in reporting and highlighting concerns through mechanisms such as the MASH which had seen far more enquiries this year than previously.

Mr Coe highlighted the importance of prevention and praised the excellent work carried out by Trading Standards, especially in relation to vulnerable people.

A concern was raised by a member in relation to religion and belief and an example provided where a transgender woman had been denied access to children on religious grounds, the member also stated that she was aware of issues relating to people being bullied in their own homes on religious grounds due to being transgender or bisexual. Concern was also voiced in relation to the resources available to manage the increase in safeguarding concerns being reported.

Mr Coe stated that yes there were many implications for members of the LGBT community in terms of safeguarding but that statistics were only available if social care services had been required. Mr Coe stated that regarding resources it was often the case that staff had to go at the speed of the people concerned and that this could take a long time but that there had been a big rise in awareness and that matters were being managed well by agencies.

The Panel agreed that the MASH did a fantastic job and that the improvements were clearly visible. Mr Coe agreed and stated that it was vital to continue to raise awareness levels so that people knew how to respond to concerns from the professionals all the way down.

The Panel expressed their thanks for the work carried out by the Safeguarding Panel.

Resolved: (1) That the comments of the Panel be noted;
(2) That the Panel support the delivery of the key challenges for 2016-17.

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Adult and Safer City Scrutiny Panel

Minutes - 25 October 2016

Attendance

Members of the Adult and Safer City Scrutiny Panel

Cllr Paula Brookfield (Chair)
Cllr Ian Claymore
Cllr Dr Michael Hardacre
Cllr Lynne Moran
Cllr Anwen Muston
Cllr Patricia Patten (Vice-Chair)

Employees

Paul Smith – Interim Head of Commissioning
Jacqui McLaughlin - Commissioning Officer
Julia Cleary – Scrutiny and Systems Manager

Part 1 – items open to the press and public

Item No. *Title*

- 1 **Apologies**
Apologies were received from Cllr Kaur, Cllr Leach, Cllr Mattu, Cllr Potter, Cllr Findlay and Cllr Gwinnett.

- 2 **Declarations of Interest**
Cllr Samuels declared a personal interest in that her husband's niece was a member of Positive Participation.

The Chair requested that Cllr Samuels did not take part in the meeting but agreed that she could remain in the room.

Cllr Samuels objected to not being allowed to take part in the meeting but accepted the ruling of the Chair of the Panel.

Cllr Moran declared that she sat on the Board for the Wolverhampton Voluntary Sector. The Chair confirmed with representatives from Positive Participation that it was not a charity but a limited company which chose not to make a profit. Given this it was considered that Cllr Moran did not have any conflicts of interest in relation to the report under discussion.

- 3 **Remodelling and Tender of Mental Health Preventative Contracts**
The Chair introduced herself and the Panel.

Representatives from Positive Participation were present (Gurbax Kaur and Siobhan Samuels) at the meeting but stated that they had not intended to speak to the report and were attending only as public observers. The representatives did however state that they would try to answer any questions that the Panel had.

Paul Smith - Head of Commissioning introduced the briefing note in relation to the consultation that had been carried out regarding the Remodelling and Tender of Mental Health Preventative Contracts.

Officers highlighted that the remit of the Panel was to consider whether the consultation had been undertaken satisfactorily and whether the recommendations that had been presented to the Cabinet Resources Panel on 4th October 2016 were realistic and rational and a true reflection of the finding of the consultation.

Officers directed Members to page 6 of the report which showed that 419 people had engaged in the consultation process which represented a total of 55% of all those invited to participate. 104 (25%) were service users, four (1%) were relatives of a service user, five (1%) were carers, 14 (3%) respondents identified themselves as service providers, 10 (2%) were members of staff, seven people (2%) skipped the question, 263 (63%) were self-help group members and 12 (3%) selected 'someone else' and of that number three stated they were; a Director of a community interest company (CIC) for mental wellbeing, a concerned citizen of Wolverhampton and a user of services for people with on-going mental health issues.

Officers considered that given the above, 85% of users of the system who could have been affected had been consulted and this was considered to be a very strong response rate and would help to influence the direction taken by the Council.

Officers also confirmed that the services were not subject to any budget cuts or efficiency savings and that there was a commitment to maintain funding of £107,000.

At the start of the consultation process a fundamental element had been a model proposing a hub in the City Centre. However as the consultation had progressed it had become clear that service users were not in favour of this idea and as such the hub proposal was abandoned in favour of a model more akin to the current city wide model. Officers stated that this was clear evidence of the Council taking on board the feedback from the consultation and being reactive to the recommendations and concerns of service users.

Officers stated that the Council was supportive of culturally specific services but it was thought that the current provision was too narrow and that services had to be more inclusive to meet the needs of newly arrived minorities including young black males and members of the LGBT community. There was also concern that there was currently some duplication of services in the City which the new model needed to address.

Cllr Hardacre questioned whether the Council would have to cover the £60,225 currently provided by the CCG if the CCG pulled funding for two of the current service providers.

Officers stated that no, the Council was not responsible for replacing that contract but as part of the redesign of services, it was hoped to get better value for money. The

Council would not be replacing any monies currently provided by the CCG if the CCG pulled its funding.

Cllr Claymore queried what was meant by low level mental health preventative services. Officers stated that these were preventative services that sought to stop people having to enter the system at crisis level. The services covered areas such as social isolation assistance and places where guidance and assistance for users could be provided to prevent escalation to a crisis.

Cllr Muston stated that the Council had a statutory duty in employment, consultation and service delivery to all protected characteristics under the Equalities Act and that this included mental health consultation. Cllr Muston expressed concern that the LGBT community had not been invited to participate in the consultation exercise which was contrary to the Equalities Act 2010 and went against the Council's own Compact agreement. Cllr Muston requested clarification as to why LGBT Wolverhampton had not been consulted.

Officers stated that members of the LGBT community would have been consulted as members of the public and officers gave assurances that consultation with the LGBT community and other groups such as ex-servicemen would be addressed in the future.

Officers also clarified that the consultation had been carried out with existing service providers as per the remit of the consultation. Cllr Muston stated that she did not accept this as it was a public sector duty to consult outside of existing users.

Cllr Muston stated that she did not accept this as it was a public sector duty to consult outside of existing users and asked why other groups who did not currently provide services had been consulted.

Cllr Moran acknowledge that processes such as this were fraught and that the removal of the hub element from the proposals did leave a gap regarding what an overarching service would look like and expressed concerns that more money would need to be invested to arrive at a suitable service. The Chair stated that the Council had to take care not to provide too much information regarding specifications prior to the tendering exercise being entered into.

Officers stated that they were considering a lead provider model which would provide a central point of contact but with city wide services and a lead provider to coordinate the services on behalf of the Council. It was stated that such a model was well established in other areas and was in fact being used successfully by Wolverhampton CVS at the moment. Cllr Moran again queried whether the £107,000 would be enough to cover such a model. Officers stated that this could not be confirmed until the tendering process commenced as service providers would be asked to bid against a defined budget and if no bids were received then consideration would have to be given as to whether this was due to the budget or other factors.

Cllr Muston highlighted that other groups such as war veterans had also not been specifically consulted and that the Epic Café was not appropriate as a venue or meeting place.

Cllr Hardacre requested clarification as to whether the Council was just dealing with its own funding areas and looking to improve on them or whether it was all being done in consultation with the CCG. Officers stated that the Council would only be looking at its own areas and the budget of £107,000 and then negotiating with the CCG. The issue at the moment was not knowing what the CCG were planning to do.

The chair stated that issues relating to mental health services for younger people were of concern and requested that this be added to any equality issues in the future.

Officers stated that there had been over 400 responses to the consultation which was deemed a good result and he credited the Officers for the work done to achieve this.

Members considered that this was a good opportunity for the Council to assess the current consultation process in light of the limited resources available. Officers conceded that the process could be improved but that the end result would be a tendering exercise for a more holistic service.

Having taken into consideration the submissions from Officers, the report and documents submitted by Positive Participation, the correspondence from Healthwatch, the assurances that consultation would in the future include LGBT groups and groups such as ex servicemen and having listened to the debate between panel members and officers, the Scrutiny Panel concluded that the consultation had been conducted sufficiently and appropriately.

Resolved: (1) That the consultation was conducted in an appropriate way and that the matter now be moved forward.

(2) That the Council's consultation process be subjected to scrutiny and the list of consultees be updated.

(3) That a report be brought back to the Panel in 12 months' time to evidence how the equalities implications were being addressed.

(4) That an item be added to the Equalities Advisory Group agenda regarding consultation.

(5) That the Panel acknowledge the good work carried out by community groups and note that the process would now enable all eligible groups to tender for the services.

(6) That Officers be thanked for their work in relation to the consultation.