



# Buckinghamshire County Council

## Minutes

### *SELECT COMMITTEE ON PARTNERSHIP*

AGENDA ITEM: 4

**MINUTES OF THE MEETING OF THE SELECT COMMITTEE ON PARTNERSHIP HELD ON FRIDAY, 30 MARCH 2001 IN MEZZANINE ROOM 3, COUNTY HALL, AYLESBURY, COMMENCING AT 10.00 AM AND CONCLUDING AT 12.10 PM**

#### **MEMBERS PRESENT**

Mr T J Fowler (in the Chair)

Mrs P M Bacon, Mr J W Cartwright, Mr D C T Graves, Mr R Lingham-Wood,  
Mr D J Rowlands

#### **APOLOGIES FOR ABSENCE/CHANGES IN MEMBERSHIP**

Apologies were received from Mr P Cochrane, Mr C Jones, Mrs E M Lay and  
Mrs C S Willetts

#### **IN ATTENDANCE**

Mr Hugh Carey – Cabinet Member for Adult Care Services  
Mr Roger Edwards – Policy Support Officer  
Ms Clare Gray – Committee Administrator

#### **DECLARATIONS OF INTEREST**

There were no declarations of interest.

#### **1 MINUTES**

The Minutes of the Meeting held on 23 February 2001 and 1 March 2001, copies of which had been circulated, were confirmed.

#### **2 REPORT ON WINTER PRESSURES**

The Chairman introduced the report. He was pleased to report that one of the main conclusions of the review was that there was a strong partnership between Health and Social Services and there was a commitment on behalf of the Cabinet Member to strengthen this partnership. However, there were some issues that needed to be addressed in relieving winter pressures. The Cabinet

Member had been invited to the meeting to address the recommendations of the report.

### **Working Hours and Assessment Meetings**

- The Committee considered that there was an urgent need to review the present cover arrangements that Social Workers provide in acute hospitals within the County. The review should consider the practicability of Social Workers working more flexible hours so that assessments could take place into the evening and at weekends.
- The Chairman referred in particular to the information received at the site visit to Wycombe Hospital where patients had to be admitted overnight because it was difficult to get an assessment after 4.30pm. Members noted that there was a Social Service's Emergency Team and a Duty Team based at the hospital who dealt with emergency situations but did not have the resources to deal with routine assessments. The Cabinet Member agreed to look into this issue and report back to the Committee in September.
- In relation to fuller assessments, the Committee suggested that steps should be taken to increase the frequency of assessment meetings. The Cabinet Member referred to the difficulty of placing some patients as they wanted to be allocated a specific residential home which had no vacancies. There were also issues around funding, particular if the client was self-funding. The Cabinet Member agreed to look into this issue to report back to the Committee in September.

### **Late Notice to Social Workers**

- The report referred to the fact that, if GPs were to undertake their rounds earlier in the day it would be easier for assessments to be made so that, where appropriate, clients could leave hospital before the evening. There could be some benefit if social workers were alerted as soon as possible about the admission of a client to hospital. The Social Worker could then trace the client's records.
- It was noted that one GP Surgery had a Social Worker attached to the Practice which overcame this problem, however, this required sufficient resources and the ability to recruit enough Social Workers. The Cabinet Member reported that ideally Social Worker should be attached to Primary Care Groups/Trusts to have direct contact with GP Surgeries. He agreed to raise this issue at the Joint Health and Social Services Management Board and report back to the Committee in September.

### **Staff Recruitment**

- The Committee was made aware of a number of measures that were being taken to improve Home Care recruitment. These included improved pay levels and guaranteed hours. The Cabinet Member reported that the domiciliary care services had achieved the quality standard ISO 2002. He reported that 50% of services were provided by the Independent Sector and 50% were provided internally, therefore co-operation between the two

sectors was vital. The Cabinet Member reported that recruitment and retention would be discussed at his next Policy Advisory Group. He also referred to the shortage of occupational therapists and physiotherapists. He agreed to look into the issue of reviewing Home Care Provision and of how Home Care jobs were advertised, particularly in rural areas.

### **The Voluntary Sector**

- The Committee asked the Cabinet Member to provide a report by September on the possibility of extending the involvement of the voluntary sector which he agreed to investigate. He reported that the main difficulty with involving the voluntary sector was the need for security checks. Members noted that volunteers were particularly helpful in making the return of patients from hospital more comfortable, since they were able to attend the tasks that might normally be outside the range of Intermediate Care Nurses or Home Carers. A member commented that in small rural communities the community often dealt with this area itself.

### **Intermediate care and home care**

- The Chairman reported that some Intermediate Care staff had been recruited from within the ranks of the Council's Home Care service. Members noted that with training and professional nursing supervision home care employees could provide Intermediate Care.
- Members had queried whether Aylesbury Vale Intermediate Care Services (AVICS) were competing for the same staff as Social Services as AVICS relied heavily on unqualified nursing staff and former Home Care worker had the right experience to fill their vacancies. The Committee therefore suggested that a review be carried out of the possibility of bringing about closer working between Home Care and Intermediate Care services by July. The Cabinet Member commented that he would raise this issue as an agenda item for the Management Board.

### **Financial and Other Pressures**

- The Committee commented on the need for greater clarity on funding issues and that the Council should do all it can to drive forward this issue with a view to urgently agreeing funding issues. The Cabinet Member reported that he was attending a meeting with the Chief Executive and the Chairman of the Health Authority to discuss the complexity of funding issues and in particular to stress the effect on Buckinghamshire on having such a low Standard Spending Assessment. The Committee particularly asked the Cabinet Member to report on the changed financial criteria for providing nursing and residential care and the change to the threshold at which clients became responsible for social care charges.
- The Committee commented that they would welcome a report which produced clear targets to measure success for the partnership and a process for monitoring.

- The Committee also asked for a report on how the remaining winter pressure monies would be used and the criteria for using the 'Promoting Independence' grant money.

### **Independent Sector**

- The Cabinet Member agreed to submit a progress report to the Committee on the issue of nursing and residential care purchasing.

The Committee thanked the Cabinet Member for his help and co-operation during the study of winter pressures and also added that they would welcome his views on the NHS Plan; Joint Working and a progress report on developing relations with the private sector at the appropriate time.

The Committee thanked the Policy Support Officer for his work on the Report.

### **RECOMMENDED**

- 1 Review the possibility of more flexible hours for Social Workers to enable assessments to take place in evenings and at weekends – (paragraph 17 - report back to the Committee in September)**
- 2 Increase the frequency of assessment meetings – (paragraph 19 - report back to the Committee in September)**
- 3 Assess the benefits that could be gained from alerting Social Workers earlier of admissions and how this could be done – (paragraph 22 - report back to the Committee in September)**
- 4 Review whether there is any possibility of extending in some way the Attached Social Worker system – (paragraph 22 - report back to the Committee in September)**
- 5 Consider training residential home staff to provide more nursing care – (paragraph 28)**
- 6 Review the possibility of closer working between Home Care and Intermediate Care – (paragraph 31 – report back to the Committee in July)**
- 7 Review Home Care provision – (paragraph 34 – report back to the Committee in July)**
- 8 Review Home Care advertising methods from both Social Services and Human Resources – (paragraph 35 – report back to the Committee in July)**
- 9 Review and report on the implications for the Social Services adult care budget of the cost of nursing placements being transferred from Health to Social Services at the end of March – (paragraphs 39/40 – report back to the Committee in July)**

- 10 **Produce criteria for using the “Promoting Independence” grant money – (paragraph 44 – report back to the Committee in June)**
- 11 **Produce clear targets to measure success for the partnership and a process for monitoring – (paragraph 53 - report back to the Committee in October)**
- 12 **A review of the possibility of greater involvement of the voluntary organisations – (paragraph 54 – report back to the Committee in September)**
- 13 **While not being recommendations, the Committee has identified specific topics on which they would welcome the views of the Portfolio Holder for Adult Care Services. These are, the NHS Plan (para 13); Joint Working (paras 41-43) and a progress report on developing relations with the private sector.**

### **3 ACTION PLANNING**

The Committee discussed a possible work programme for the Committee and agreed that the following areas should be looked at in the new Council Year:-

Partnership with Voluntary Organisations and how the Council fund them. A number of representative organisations (large/small) would be invited to the Committee from a range of Council Services around the County.

Capacity of the voluntary and private sectors to expand their service delivery (this would follow-on and be linked to the previous project)

New responsibility for scrutinising the Health Service

Partnership with District Councils

It was agreed that the first meeting should be used a background discussion to the first review on voluntary organisations and that the second meeting should be held a few weeks after where an officer who administers voluntary grants should be invited to the meeting. Other issues would be addressed at the appropriate time at the Select Committee, such as the issues surrounding the Fremantle Trust.

### **4 DATES OF FUTURE MEETINGS**

It was agreed that meetings should be held monthly as follows (Friday at 10am);

- 27 July 2001
- 28 September 2001
- 26 October 2001
- 30 November 2001
- 25 January 2002
- 22 February 2002
- 22 March 2002 [to avoid Good Friday]

26 April 2002

The Chairman thanked the Select Committee for all their work in the past few months on the winter pressures project. The Committee then thanked the Chairman for his leadership.

**MR T J FOWLER**  
**CHAIRMAN**