

Adult Social Care and Health Select Committee

A meeting of Adult Social Care and Health Select Committee was held on Tuesday, 14th June, 2022.

Present: Cllr Evaline Cunningham (Chair), Cllr Clare Gamble, Cllr Lynn Hall, Cllr Mohammed Javed, Cllr Steve Matthews, Cllr Paul Weston

Officers: Angela Connor, Peter Otter, Rob Papworth (A&H); Martin Skipsey, Gary Woods (CS)

Also in attendance: Pam Rodgers (Five Lamps); Asfana Ali (PPL); Gail Dawson, Michelle Marlborough, Jenni Pearson (Creative Support)

Apologies: Cllr Jacky Bright, Cllr Ray Godwin

ASH 1/22

Evacuation Procedure

The evacuation procedure was noted.

ASH 2/22

Declarations of Interest

There were no interests declared.

ASH 3/22

Minutes of the meeting held on 10 May 2022

Consideration was given to the minutes from the Committee meeting held on the 10th May 2022.

AGREED that the minutes of the meeting on the 10th May 2022 be approved as a correct record and signed by the Chair.

ASH 4/22

Action Plan for Agreed Recommendations - Scrutiny Review of Day Opportunities for Adults

The Committee was presented with a draft Action Plan setting out how the agreed recommendations from the recently completed Scrutiny Review of Day Opportunities for Adults will be implemented and target dates for completion.

Attention was drawn to recommendation 7 (SBC ensures, as far as possible, that work experience undertaken by those individuals accessing day services is appropriately recognised) and the proposed action that an achievement scheme be developed to recognise the successes of people accessing day opportunities (including work experience roles). It was noted that a conversation with those individuals accessing day opportunities around how such recognition should look was intended, an approach which was subsequently welcomed by the Committee.

Since most of the due dates for the proposed actions were listed for late-2022 / early-2023, it was felt appropriate that the first update on progress of these actions should be presented to the Committee in February / March 2023.

AGREED that the content within the presented draft Action Plan in relation to the recently completed Scrutiny Review of Day Opportunities for Adults be approved.

Monitoring the Impact of Previously Agreed Recommendations

Consideration was given to the assessments of progress on the implementation of the recommendations from the previously completed Scrutiny Review of Care Homes for Older People. This was the third update following the Committee's agreement of the Action Plan in July 2020, and key developments were outlined to Members, including:

- Recommendation 2 (That the importance of personalised care be promoted through all contacts the Council and partners have with Care Homes; in particular the development and deployment of a varied activities programme tailored to individual needs and co-ordinated by a designated member of staff): 11 Activity Coordinators across seven care settings completed the CPD Funky Feet 'train the trainer' programme in December 2021, giving them the necessary skills to eventually lead their own independent Funky Feet sessions in their settings (between their residents and their local schools). Regarding the HenPower project, Aspen Gardens had secured £10,000 from the National Lottery Community Fund to further invest into the project as a direct result of the support from HenPower.
- Recommendation 3 (That the benefits of technology for supporting personalised care are championed and promoted to all care homes in Stockton on Tees; in particular, the deployment of electronic solutions for records and medicine management should be supported by the Council): The implementation of the new dedicated Data Security and Protection Toolkit (DSPT) and NHS Mail Digital Support Team for adult care homes across the Tees Valley footprint was highlighted. It was also important to note that any use of technology is viewed as an enabler to the provision of better care (rather than merely being used for the sake of it).
- Recommendation 4 (That contract monitoring and quality assurance systems ensure that appropriate staffing levels are maintained in care homes): Actions now fully achieved as all older persons residential homes had received a PAMMS assessment which includes the consideration of staff dependency levels and Business Continuity Plans (BCPs). Any required actions from these assessments are monitored by the Council's Quality Assurance and Compliance (QuAC) officers. PAMMS assessments are considered on a quarterly basis by this Committee, and an inaugural PAMMS Annual Report was also presented to the Committee last month describing the overall yearly ratings and findings of common themes that were discovered whilst conducting the assessments.
- Recommendation 5 (That the Council works with all stakeholders to promote and improve the local standing of careers in adult social care): Permission was granted to commence a six-month pilot focusing on recruitment and retention in the care sector. This pilot was broken down into four key areas: recruitment of new care staff in the sector, retention of care staff in the sector, health and wellbeing of care staff, and a communications agenda. Currently, an interim evaluation is underway and will be used to refine the pilot over the coming months (expecting to report back on the ultimate outcome of the pilot in September / October 2022).

- Recommendation 7 (That the Council works with the Care Quality Commission to facilitate effective dialogue between the two organisations in order to share updates of projects and initiatives being developed by the Council and partners and shape the future of the care home market): The agreed actions were now considered fully achieved, with strong dialogue between the Council and the CQC evidenced.
- Recommendation 8 (That Healthwatch be asked to report back the Adult, Social Care and Health Select Committee on the implementation of their recommendations to care homes following further enter and view visits to homes): With the Healthwatch 'enter and view' programme curtailed by the COVID-19 pandemic, and their workplan for 2022-2023 not including older people care homes, the intended actions associated with this recommendation had not been achieved.
- Recommendation 9 (That the summary of Care Quality Commission inspection results, reported each quarter to the Adult Social Care and Health Select Committee should include greater context including trend information of quality ratings and information about providers): Changes to the CQC inspection regime resulting in reduced regularity of (and detail within) published reports has seen a shift to a reliance on the Council's PAMMS assessments to provide accurate and current assessments of the quality of service the Borough's providers deliver. The agreed actions for this recommendation have therefore been achieved as far as possible.

With reference to the developments around recommendation 6 (That all care homes be required to work towards Dementia Friendly accreditation as part of the new contract arrangements), the Committee expressed disappointment that, despite some reported progress within some care homes, so few settings were seemingly involved. Members were keen that this endeavour was encouraged by the Council, and officers provided subsequent assurance that the agreed actions in relation to this recommendation would be delivered as originally planned.

The Committee was also concerned by the continued absence of plans by Healthwatch Stockton-on-Tees to resume care home contact via their previously well-established 'enter and view' visits (recommendation 8). Members were reminded that Healthwatch representatives were due to present their latest Annual Report to the Committee after the summer recess, and that this may provide an opportunity to ascertain future intentions. Healthwatch was, however, commended for still being visible to care homes in the early stages of the COVID-19 pandemic.

In terms of the CQC inspection regime changes (recommendation 9), the Committee continued to be frustrated with the seemingly sporadic nature of the regulator's care home oversight, particularly when considering medication practice which had previously been identified as an issue in many reports. Members were reminded that the PAMMS assessments provided to the Committee did cover medication management, and that the recent PAMMS Annual Report highlighted the work being undertaken with the NHS North of England Commissioning Support (NECS) Medicines Optimisation Team to strengthen medication handling and documentation.

AGREED that:

- 1) the progress update be noted and the assessments for progress be confirmed.
- 2) a further update regarding outstanding actions be provided in early-2023.

**ASH
6/22** **Scrutiny Review of Care at Home**

Scrutiny Review of Care at Home

Cllr Mohammed Javed wished it to be recorded for transparency purposes only that he had a family member who worked at a Care at Home provider covering Thornaby and Middlesbrough.

This second evidence-gathering session for the review of Care at Home focused on Care at Home providers who operate within the Borough. Contributions were received from representatives of three existing services, and consideration was also given to the results of a provider survey undertaken by Stockton-on-Tees Borough Council (SBC) in mid-2021. In related matters, the Committee was updated on the national 'Fair Cost of Care' exercise.

FIVE LAMPS

The Registered Manager of Five Lamps Homecare was in attendance and referred to a pre-prepared report which outlined the following:

- **Service Overview:** Five Lamps is a registered charity and not-for-profit organisation, and currently deliver around 2,700 hours of care per week (up from around 450 hours only 18 months ago) in Stockton, Thornaby, Ingleby, Yarm and Billingham – they also have the contract to provide care in Parkside Court Extra Care Scheme and have a contract to deliver a Rapids / D2A service. As a charity, they try hard to be a different kind of care company and constantly work on making a difference, not just for service- users but for staff as well. Getting involved in the local community is important too (e.g. attaining a Dementia Friends Award and delivering fish and chips and food hampers to local elderly residents).
- **Promotion of / Access to Service:** The majority of work comes from SBC referrals (it was noted that the service had also helped with individuals being discharged from hospital, particularly during the COVID-19 pandemic), but Five Lamps do receive work from private funders, which is normally through 'word of mouth' referrals. Depending on staffing resources, Five Lamps drop leaflets in order to advertise its services.
- **Support from SBC:** Good working relationships with officers from SBC exist, with a named Contracts Officer who is supportive and accessible. A lot of work has been undertaken with the SBC Transformation Manager for Residential Care on various projects aimed at supporting providers, including the Care Academy. Five Lamps is able to challenge if they have any issues and SBC do listen – there are opportunities to help shape the service and the organisation receive high levels of support from the Council.

- **Staff Training / Development / Support:** Five Lamps has a high quality, comprehensive training programme with their own trainer, and hold a full week's induction, with new staff then shadowing trained Training Mentors for six months (from the start of employment to the end of their probation period). All staff get paid for all training attended (including induction) and excellent feedback is received about the programme. The current offer is achievable as all profits go back into the business.
- **Service Improvement Mechanisms:** Regarding the Rapids / D2A service, feedback cards are put in every client file so that everyone has the opportunity to provide views at any time (quarterly surveys are not appropriate as this service only lasts two weeks). General feedback was severely hampered during COVID as Five Lamps were unable to hold team meetings, service-user meetings, etc. Efforts to counter this included having 1:1 meetings with residents at Parkside Court, additional spot-checks and supervisions with staff, regular newsletters to staff and service-users, regular messages to staff with updates on various topics including COVID, and, when safe to do so, smaller meetings by patch were held with staff (note: all staff are paid for their time coming to meetings or supervisions) – there has been a gradual improvement of the feedback received (staff seem happier and rotas more settled). Five Lamps have an open-door policy and have a 'You said, We did' board in their staff lounge.
- **Impact of COVID-19:** Several COVID-related issues had been experienced, including staff having to isolate (including office staff) which made covering visits extremely difficult at times. Some staff chose to leave the industry, turnover was high, and recruitment was challenging. Testing was very time-consuming – whilst IPC funding was accessed, Five Lamps had to allocate staff to do the testing both at Head Office and at Parkside Court, and the tests needed to be registered and posted. As previously indicated, holding meetings and supporting staff was difficult (when they needed it most), and training was reduced to very low numbers per session to allow for social distancing (further impacting on recruitment capabilities). Keeping up with rapidly changing guidance and cascading this to staff required additional staffing resources which the organisation did not have.
- **Key Current & Future Issues:** Five Lamps is concerned that the recruitment and retention fund has come to an end as this was particularly useful (a recruiter on a fixed-term contract was employed using the fund and this had made a huge impact on recruitment, enabling an increase in the packages picked-up from Council referrals – if the fund ends, the recruiter's contract will have to be terminated). Staff wages is always an issue, and Five Lamps are simply not able to be competitive against companies like Amazon, etc. Fuel price is becoming a bigger issue week-on-week (lot of work is rural, and whilst staff are paid the maximum 45p per mile allowance, they say it is no longer covering their costs) – would like to look at some green initiatives / electric vehicles, but do not have the budget to invest and would need support to achieve this. Work undertaken with SBC on making care attractive but there is a long way to go, and some staff report that the cost and accessibility (opening times) of childcare is a barrier to them. From an administrative perspective, Five Lamps has a small office team, and if someone is off sick, this presents challenges.

Thanking the Five Lamps representative for their useful input, the Committee asked if they had a designated point of contact within the Council to keep up-to-speed with developments around COVID guidance. Members were subsequently reassured to hear that a named SBC Contracts Officer had been available throughout to provide support.

The Committee asked if the recruitment and retention fund referenced within the report was likely to be extended, but was informed that there had been no indication of future funding since this initiative had ended in March 2022. On a related note, Members asked what more could be done to help retain staff following the considerable efforts in recruiting them. The Care Friends app (rewarding users to find new and helping retain high quality staff) was highlighted, but the ultimate deciding factor is their pay which is often around the minimum wage level. The Committee queried if initiatives like the blue light card / other NHS discounts are promoted – in response, it was confirmed that most staff have the former, though the benefits of these have seemingly gone quiet in recent times.

PRIORITISING PEOPLE'S LIVES LTD (PPL)

The Managing Director of PPL presented a report which detailed the following:

- **Service Overview:** PPL is a small domiciliary care provider with its HQ in Stockton, covering Middlesbrough, County Durham and Stockton-on-Tees. (two other branches are based in Northumberland and North Yorkshire). Dedicated to delivering the best care possible (1,000 hours per week) since its inception in 2013, person-centred care, dignity towards service-users and progression for staff has always been at the heart of PPL's values.
- **Promotion of / Access to Service:** PPL is promoted through leaflets and social media to service-users and staffing, and regular campaigns for jobs are used to recruit staff (PPL finds that 'word of mouth' has worked best). The service has regular referrals for packages through Local Authority channels and the NHS.
- **Support from SBC:** Stockton has offered grants / assistance through the pandemic. Support in other areas has been lacking – the Local Authority should be using advertising to boost the image of carers to show that care is not an unskilled role (the lack of recruitment is partly due to the low status of care work). Strong cross-sector communication around safeguarding issues will help prevent vulnerable people from being potentially exploited.
- **Staff Training / Development / Support:** PPL prides itself in training staff to a high standard and continued personal development, but this has its costs. Travel time cannot be paid currently due to the small margins that care providers are working with. Mileage is paid, however, due to the increasing prices in fuel and living costs, there is low morale and reluctance to travel to calls as current mileage payments are not covering the actual costs of fuel. Employees have benefits from the company employee assistance programme which includes legal advice, counselling for them or family members, financial advice and more. Retention rates are usually good, though the impact of the latest COVID-variant (Omicron) outbreak led to some staff leaving due to tiredness / demotivation.

- Service Improvement Mechanisms: Quality assurance is carried out regularly and the company welcomes feedback from other agencies as well as employees and service-users. Carers feel they are the forgotten service at times, and service-users feel that the pressures of care have always been neglected and never addressed fully when it is such an important sector – this has become more apparent during the pandemic.
- Impact of COVID-19: The pandemic has resulted in increased costs of service, low staff morale, low recruitment rates, and increased living costs impacting current carers. There is also concern about the volume of agencies and homes that are being acquired by profit-focused equity groups which do not concern themselves with the wellbeing of service-users and staff, and do not have quality care at the heart of their values / visions.
- Key Current & Future Issues: Carers ought to be required to register with a board or a governing body to hold them as accountable (as nurses are). In doing so, not only would there be more robust regulation, but this would also raise the profile of carers. Some employers do not request references from previous employers, meaning that unscrupulous individuals are free to repeatedly behave in this way – this boils down to a lack of integration in care services, which leads to breakdowns in communication that enable these discrepancies to happen.

Other issues include the need for better connections between the NHS, care homes and community care providers (e.g. for individuals funded through continuing health pathways), recruitment challenges, and a lack of transparency with care providers about rates. On a wider scale, the Government needs to provide Local Authorities with larger budgets for health and social care that enables carers to be paid a salary and not a basic pay rate per hour.

The Committee welcomed the contribution from PPL to its ongoing review, though was alarmed about some of the issues raised, not least the reported concerns around poor care staff conduct. SBC officers present noted that DBS checks for carers employed as an individual's Personal Assistant are not a requirement (though are encouraged as part of good practice), and that any specific issues would be followed-up with PPL after this meeting. Members were also disappointed to hear of the reported lack of support that PPL had received from SBC in comparison to other Local Authority areas in which the organisation were operating in. In response, SBC officers commented that although PPL (a spot provider) did not have a primary or secondary provider contract within the Borough, they were treated the same as other services and received newsletters and daily calls from their nominated Quality Assurance and Compliance (QuAC) officer. Officers would again follow this up with PPL after the meeting.

The concept of a national register for carers was commended, with the Committee suggesting that a local record would, at the very least, be useful to providers and service-users alike. On the issue of staffing / recruitment, Members also proposed that services look to liaise with local colleges regarding those undertaking relevant NVQs in health and care.

Further probing the perceived disconnect between the health and care sector,

the Committee noted that North Tees and Hartlepool NHS Foundation Trust had previously given assurance that its discharge processes were working well – it was thus suggested that data on readmissions may help unpick the efficiency of hospital discharges further. In terms of support for Care at Home services, the provision of additional COVID-related funds was highlighted, and Members queried if personal protective equipment (PPE) was received as part of this package. PPL stated that although there was no supply of PPE in the initial stages of the pandemic, it did have stocks of this in place already. PPE pressures were subsequently alleviated by the establishment of the Local Resilience Forum and the national PPE portal. In other COVID matters, frustrations around the work undertaken to prepare the workforce for compulsory vaccinations which were then not required were also aired.

CREATIVE SUPPORT

Led by the Registered Area Manager and supported by their Service Director and Project Manager, Creative Support gave a presentation which highlighted the following:

- **Introduction:** Creative Support offer care at home support to individuals in Stockton who reside in their own home and have a diagnosis of a learning disability, autism, a mental health condition, or a combination of these. Tailored support is given to individuals to assist them to remain living in their own homes – this could be a 15-minute medication call once a day, a two-hour call to assist the individual with their domestic skills / meal preparation / personal care, a six-hour call to support an individual to access the community, or could be a 24-hour a day / seven-day a week package of care to assist with all of the above. The service works with individuals to empower their personal development, promote social inclusion, and to look for pathways into work which they may attend unsupported or with a support worker.
- **Service Promotion:** As part of the SBC Care at Home framework, Creative Support have built good relationships and have a good reputation with care managers and social workers – this is where the bulk of its referrals come from. Some self-funders have found the service via website information / social media and then made contact directly following their own research or ‘word of mouth’ recommendations via social workers and previous / existing service-users. The service issues newsletters / leaflets, runs a local disco for people with a learning disability, and attends local Provider Forums as well as recruitment and marketing events (e.g. Care Academy).
- **Support from SBC:** Managers have, for the last two years, been able to access the Well-Led course that has been fully funded through SBC – three managers have completed this course with excellent reviews. The service accesses regular (bi-monthly) Provider Forums, and has worked in Stockton for many years and built good relationships with commissioners and social workers which has grown further throughout the pandemic. Training can also be accessed through the Teeswide Safeguarding Adults Board (TSAB) website – this includes medication training which has been undertaken.
- **Service Improvement Mechanisms:** Annual feedback via staff, client and stakeholder surveys, with monthly insight provided through management, staff and service-user meetings. Person-centred reviews (separate from social

worker reviews) empower individuals to achieve their goals, and the service links-in with Provider Forums, offers excellent training packages, and is corporately accredited with Investors in People (silver rating – gold for training and HR). The Registered Area Manager is the Chair of the regional Skills for Care Registered Manager Network.

- Impact of COVID-19: The impact on the sector's staffing has been profound (stress / funding testing themselves), and the service has struggled to recruit back up to full capacity. On a more positive note, the pandemic has provided an opportunity to spend time with people without their busy schedules and help them to identify what they really want to do with their lives (this was then fed into their person-centred review goals).
- Key Current & Future Issues: Three main areas identified: recruitment (reduction in applications and a lot of staff want to work 10.00am to 2.00pm which cannot be facilitated; also, tax credits top-up for 16-hour working equates to almost the same as full-time wage – more part-time staff means more staff to manage and less consistency for clients who then see lots of different staff), retention (use of own car / cost of public transport – in care at home, staff tend to work at a base rather than travel round), and the impact on financial sustainability due to increasing cost of living, minimum wage, and cost of fuel / office rent. Further issues are likely to present in terms of the ageing population and people with challenging conditions living longer, resulting in an increase in referrals (noted that, pre-COVID, around 20% of referrals were turned-down; this was now around 80%).

Reflecting on another insightful submission, the Committee focused on the latter part of the presentation which touched upon concerns within the sector (both COVID-related and from a wider national perspective). It was felt that the narrative around tax credit top-ups needed to be challenged, particularly since some individuals require this backstop, whereas others do not – Creative Support confirmed that it had discussed this issue with job centres, and also, in response to a Member query, stated that it did not use zero-hours contracts (this was the same for PPL – the vast majority of Five Lamps' staff were under zero-hours terms).

The difficulties in getting financial aid to providers during COVID were discussed, with SBC officers noting the sporadic availability of funds which had differing conditions attached and needed to be defined, communicated to services and then disseminated as timely as possible. The requirement for both the Council and local providers to account for any spend was another onerous task on top of delivering the actual care, and it was SBCs view that the balance in funding allocations between care homes and home care providers was broadly fair.

Weighing-up the three separate submissions at this meeting, Members queried whether providers could better collaborate together since the whole sector was experiencing similar issues. The Committee heard that some joint-working had been previously undertaken and that, as noted earlier under a previous agenda item, the NHS North of England Commissioning Support (NECS) Medicines Optimisation Team may be able to relieve some pressures on providers regarding medication. The proportional increase in job applications from non-drivers was also highlighted as a shared cause of concern.

PREVIOUS PROVIDER CONSULTATION (2021)

The SBC Assistant Director – Procurement and Governance presented feedback on a previous consultation exercise undertaken by the Council with Care at Home providers in July 2021. Co-ordinated by the SBC Transformation Managers for Residential Care, each local service was contacted, and meetings were arranged with 16 providers to obtain their views about the delivery of the Care at Home service. Responses were obtained as part of a conversation with the providers rather than asking them to complete a survey, and key findings were as follows:

- The three most important factors in offering good home care were identified as friendly / respectful / capable care workers, pay / conditions of care workers, and sufficient time to provide care (the latter is frequently raised by providers and can be linked to staffing levels).
- The most-stated key challenges to delivering home care services were recruitment (shortage of care workers) and skills shortages (too few fully-trained care workers). Low hourly rates of pay, insufficient time (i.e. 15-minute calls) to undertake tasks required within an individual service order (ISO), managing expectations about what the provider will do, and customers wanting the same workers and times (which are not always available) were also highlighted, as was a lack of information-sharing with the NHS, the low status of care staff, and the impact of COVID-19 which compounded existing issues.
- Several suggestions were made to help providers overcome these challenges, including support around recruitment and retention of staff, promotion of care as a valued career, social workers managing the expectations of the person and their families, and stopping the use of 15-minute welfare calls which are unrealistic in terms of what can be done and are difficult to rota. Guaranteed hours from the Council would help with staff retention, as would higher hourly rates, and there should be less focus on tasks and more on outcomes.
- Of the 16 providers who responded (not including carers used via direct payments), 13 were 'very satisfied' and three were 'satisfied' with the relationship and communications with SBC. The Provider Forum, Well-Led Programme and Registered Managers meetings were welcomed as a way of sharing good practice and discussing topics of interest, and good working relationships with the Quality Assurance and Compliance Team, social workers and Safeguarding Team were recorded. Support from SBC during the pandemic was also praised.

'FAIR COST OF CARE' UPDATE

In September 2021, a number of reforms were announced in relation to Adult Social Care, including a reduction in the care cap and self-funders accessing Council rates for care homes / Care at Home. Ahead of these new measures coming into force in 2023, the Government asked Local Authorities to conduct an exercise to establish a fair and sustainable cost of care.

SBC has since initiated this exercise and, using a prescribed tool, is collecting a

variety of information from providers (e.g. costs, length of visits). A drop-in session with providers has been arranged for next week to allow them to ask questions and seek further detail.

Following the data collection, SBC will seek to develop a 'market sustainability plan' which needs to be submitted to national authorities in autumn 2022. All intelligence from across the country will then be used to set future costs. Some central funding is available (approximately £430,000) to help with the gradual change in the level of fees being given to all local care providers, though a decision will be required on how to balance support to both care homes and the Care at Home domains.

The Committee thanked the SBC Assistant Director – Procurement and Governance for this update, and drew attention to care staff remuneration which seemed to be closer to the minimum wage rather than at least the accepted living wage. Members then asked if the Council's exercise included considerations around staff travel – this was indeed included as part of the very comprehensive assessment tool, as was training and uniform requirements. It was vital to capture the overall costs in delivering care, and feedback from the forthcoming provider drop-in session would be relayed to the Committee as part of future evidence-gathering for the ongoing Care at Home review.

AGREED that the information be noted.

**ASH
7/22**

Work Programme 2022-2023

Consideration was given to the Committee's current Work Programme.

The next meeting was scheduled for the 12th July 2022 and would include another evidence-gathering session in relation to the ongoing Scrutiny Review of Care at Home, along with the latest Regional Health Scrutiny Update which would reflect on the recent Tees Valley Joint Health Scrutiny Committee meeting which took place last week (8th June 2022).

AGREED that the Adult Social Care and Health Select Committee Work Programme 2022-2023 be noted.

**ASH
8/22**

Chair's Update

AGREED that the Adult Social Care and Health Select Committee Work Programme 2022-2023 be noted.