

SUBJECT OVERVIEW AND SCRUTINY COMMITTEE 2 - MONDAY, 16 MARCH 2020

**MINUTES OF A MEETING OF THE SUBJECT OVERVIEW AND SCRUTINY COMMITTEE 2
HELD IN COUNCIL CHAMBER, CIVIC OFFICES ANGEL STREET BRIDGEND CF31 4WB ON
MONDAY, 16 MARCH 2020 AT 09:30**

Present

Councillor J Gebbie – Chairperson

A Hussain
CA Webster

AA Pucella

G Thomas

T Thomas

Apologies for Absence

MC Clarke, PA Davies, SK Dendy, CA Green, M Jones, MJ Kearns, JE Lewis and SG Smith

Officers:

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112. ELECTION OF CHAIRPERSON

It was moved; duly seconded and carried unanimously, that Councillor Gebbie be nominated as Chairperson for the meeting.

RESOLVED: That Councillor J Gebbie be elected Chairperson for the meeting of the Subject Overview and Scrutiny Committee 2.

113. APOLOGIES FOR ABSENCE

Cllr Mike Clarke, Cllr Pam Davies, Cllr Sorrel Dendy, Cllr Cheryl Green

Cllr Martyn Jones, Cllr Mike Kearns, Cllr Janice Lewis, Cllr Stephen Smith, Cllr David White, Michelle King

114. DECLARATIONS OF INTEREST

None.

115. APPROVAL OF MINUTES

RESOLVED: That the Minutes of the meeting of Subject Overview and Scrutiny Committee 2 dated 22 January 2020 and 5 February 2020 be approved as a true and accurate record.

116. TRANSFORMATION PROGRAMME - ACCELERATING THE PACE OF CHANGE FOR INTEGRATED SERVICES (APCIS)

The Corporate Director, Social Services and Wellbeing explained to Members that there would be a short presentation. She drew Members attention to page 13 of the report, and in particular 3.1, A Healthier Wales – Our Plan for Health and Social Care. The plan is shaped around the 'Quadruple Aim' – four interlocking themes.

The Head of Adult Social Care, Group Manager – Integrated Community Services – Community Networks, and the Group Manager – Sports and Physical Activity presented an overview of the Transformation Programme.

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Following the presentation, the Corporate Director, Social Services and Wellbeing explained to Members that having just heard a presentation about expanding services, I know that there will be concerns in terms of how we manage at the moment and priorities to deliver the service with the existing Coronavirus issue. You will be aware that Cabinet and CMB are meeting daily as the issue is changing daily and flows back into the different Directorates. In terms of Social Services & Wellbeing, all the teams have business continuity plans and those have been updated and managers have scoped out their staff and their client group they work with to look at critical priorities, understanding their family situations, or for those that have few networks around them, with individuals.

We have done a profile on the mobility of staff and where they live. Fast track training programme, making sure we have workforce to continue to deliver – building our workforce and redeploy our own staff across the council and we will be looking at redeploying third sector or recently retired staff. We will look separate staff, where possible so they can work from home. Also teams of staff but split into smaller groups, following Welsh Government and Public Health Wales guidance. Naturally, day and respite services are in touch with people and looking at who is coming into respite with a planned approach. We are working through this methodically, and in a planned way, not rushed. Council have their priorities. Reassurance we have close contact and good relationships with health colleagues and there will be a meeting at 2pm today in terms of communication.

A Member raised concern in respect of ensuring those that come into contact with vulnerable or older people would be appropriately DBS checked, or similar, and asked if there was a co-ordinated approach to this?

The Corporate Director, Social Services and Wellbeing noted that this was where Communities were coming into their own as we cannot police everything, but understood the Members concern. The Chief Executive – BAVO, acknowledged that safeguarding was an issue. She explained that as an organisation, BAVO was looking for people to register formally through the site. They were also signposting and issuing guidance and linking people to groups with good governance structures in place.

A Member noted the volunteer registry that BAVO provided and felt that the Council needed a hot line. The Corporate Director, Social Services and Wellbeing explained that this was part of Ambition 1, a Common Access Point, and was the first point of contact for social services.

A Member asked how the £22.7m Transformation Fund investment was distributed amongst Bridgend, RCT and Merthyr. The Corporate Director, Social Services and Wellbeing explained that Bridgend had been in the middle of changes to the regional footprint at the time of the original proposal, having previously been part of Western Bay. She explained Bridgend had put in their own proposal in addition to the proposal by RCT and Merthyr as part of the new Cym Taf Morgannwg University Health Board. Bridgend had worked with health to ensure that we would not be disadvantaged, but closely aligned to the old Cwm Taf. The Head of Adult Social Care referred the Member to page 23, 8.1 of the document. She noted the original figure of £6.673m and a revised figure of just over £6m coming into Bridgend.

The Member further noted the two different programmes delivered through Bridgend and RCT/Merthyr and sought clarification of the difference between the 2 areas to ensure that integration between the delivery of the service was uniform. The Head of the Regional Partnership Board explained that a Programme Management Office (PMO) had been established to coordinate delivery of the Programme across the region. He noted the 5 projects/3 projects split between RCT/Merthyr and Bridgend and the need to

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standardise across the region. He noted the similarities between the projects and whole system approach. There was a need to share good practice.

A Member noted on page 20, the Go Live Date of the April 2020 for Ambition 2 – Single Point of Access and asked if this was a realistic start date given the current ongoing events. The Head of Adult Social Care explained that in terms of continuity plans she couldn't give any definite dates, but this was seen as a priority.

A Member asked how the gap in primary care professionals would be met and whether re-deployment would meet this gap. The Group Manager - Integrated Community Services explained that appointments were not being sought through re-deployment but instead through external appointments.

A Member noted that the Institute of Public Care (IPC) has been appointed to carry out an independent evaluation of the impact of the grant funded programmes across the region and asked if they will be looking at uniformly. The Head of the Regional Partnership Board explained that the IPC would not be evaluating the 8 projects specifically, but rather the thematic approach and will be doing a rapid progress review. The outcomes should be the same for the population. The Corporate Director, Social Services and Wellbeing explained that they were aiming for the same outcome but we wouldn't want Bridgend to go at the pace of the slowest. We are getting to a point of consistency across the region, a regional response and principles but local delivery.

The member further asked in terms of integrated service, we have been having this for the last 6 years and asked what BAVO will be giving us as additional services. The Chief Executive – BAVO explained that there was a community resilient response, with communities taking a supporting role. She explained that there were two pieces of work they were delivering on; a holistic approach and community navigators working with individuals connecting them to GP's and mapping services.

A member asked how resilient is the funding stream for community navigators. The Chief Executive – BAVO explained that this was a task and finish approach. We will provide them with the information they need, and hoping the resilience will be, we do not need navigators. e.g. Frome Model.

A member asked for clarification on the role of community coordinators. The Group Manager – Sports and Physical Activity advised that there was a layered approach, requiring three distinctive roles. Firstly, the local community coordinator resource, support people with higher levels of need and complexity, whilst the Community Navigator roles addresses lower level needs, connecting people to communities and helps develop and enhance community support opportunities. The third role is Network Builders.

A member noted that the Transformation Fund investment was available until the end of March 2021 and asked what happens beyond this point.

The Head of Adult Social Care noted the need to achieve ongoing financial sustainability across social care with the reinvestment of money in what is working well. By evaluating what works well we divert money around the system from a combination of recurrent WG ring-fenced investment and costs anticipated to be released from the wider health and social care system.

A member noted that older people were often reluctant to ask for services.

The Group Manager – Integrated Community Service explained that everything comes through a single access point but if they have care services they would be reviewed at least annually. They can contact us at any time to be reviewed. The Cabinet Member – Social Services and Wellbeing highlighted the Social Services and Well-being (Wales)

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Act 2015 on page 21 and acknowledged it was important to recognise that the 3 ambitions within Transformation will be working collaboratively across the programme to support and enable the best outcomes for individuals.

A member sought clarification on the increase in mobile response. The Group Manager – Integrated Community Services – Community Networks explained that when we set up the response Bridgend was a leader in registering domiciliary care with 2600 people in Bridgend using telecare and mobile response services. With the older population expected to increase in order to help people once you increase demand, how then do we meet that demand to give people that resilience at home so that they can be confident that someone will come. Part of this work creates confidence at home; part of the ambition was to increase that response.

A member asked if there was evidence of best practice in bringing the two models together. The Head of Adult Social Care noted that the transformation programme across Wales was similar in other regions with some tweaks and the flexibility to respond to local community needs. Bridgend was seen as delivering good practice in terms of our models whilst also learning from others. The Corporate Director, Social Services explained that there was one health and social care system across Wales; what works well in one area, could be rolled out in Bridgend. The plan is we will learn from those other areas. We feel we have learnt from the Torbay service model and have got to the point where will have gone a bit further. The Cabinet Member – Social Services and Wellbeing informed members that he had attended a number of Partnership Services – 7 were at different intervals. He was attending another one again and Bridgend was still in the same situation. We are trying to get there on a collective basis. Bridgend was leading a lot in this area.

RESOLVED: That the Committee noted the progress made in relation to the Regional Transformation Programme - Accelerating the Pace of Change for Integrated Services.

The Committee would welcome an information report for monitoring progress on the actions on the timeline delivery in 6 months' time.

117. OVERVIEW AND SCRUTINY - FEEDBACK FROM MEETINGS

The Scrutiny Officer presented a report to Members, which provided feedback from the previous meeting of SOSC2 in relation to the items on Home to School Transport and the MTFs 2020-21 to 23-24 (Social Services and Wellbeing) for discussion, approval and actioning.

Members to review the feedback for approval and actioning of above items, at the next meeting of SOSC2.

118. FORWARD WORK PROGRAMME UPDATE

The Scrutiny Officer presented a report to Members, which outlined the next items to be considered by the Committee. These were Learner Travel/ Post 16 Education on the 19 March and Remodelling Children's Residential Services on 20 April.

119. URGENT ITEMS

None