

## **Minutes of the Adult Social Care and Health Overview and Scrutiny Sub-Board**

**18 January 2024**

**-: Present :-**

Councillor Joyce (Chairman)

Councillors Johns (Vice-Chair), Tolchard, Twelves and Fellows

Non-voting Co-opted Member  
Kevin Dixon, Healthwatch

(Also in attendance: Councillor David Thomas)

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### **24. Apologies**

An apology for absence was received from Pat Harris who was represented by Kevin Dixon, Chair of Healthwatch.

It was reported that, in accordance with the wishes of the Conservative Group, the membership of the Sub-Board had been amended to include Councillors Tolchard and Fellows in place of Councillor Bryant and the Conservative vacancy.

### **25. Minutes**

The minutes of the meeting of the Sub-Board held on 21 December 2023 were confirmed as a correct record and signed by the Chairman.

### **26. Adult Social Care Self Assessment**

The Strategic Lead for Adult Social Care Quality and Assurance presented the submitted report which provided Members with an update and information in relation to self-assessment and the new Care Quality Commission's inspection of Adult Social Care.

Members were informed that as part of the Health and Care Act 2022 the Care Quality Commission ("CQC") had been given additional responsibilities and powers to review, assess and report on Council regulated adult social care functions.

The self-assessment was an open document and would be reviewed quarterly. It had been subject to external scrutiny by partners in health and care, who had given a positive response. The Council was currently working with the South West Association of Directors of Adult Social Services and the CQC to check and challenge

each other on aspects of self-assessment, for example, the position with carers. As a result of learning from the self-assessment process, work had been undertaken to produce the Adult Social Care Strategy and webpages for Adult Social Care had been refreshed on the Council's website.

It was explained that the self-assessment document set out, in broad terms, some information about Torbay to help inspectors understand the complexities which were unique to Torbay. The document was modelled on the CQC framework around four main themes:

- working with people;
- providing support;
- ensuring safety; and
- leadership and workforce.

Members were informed that strengths against the themes were outlined in the submitted report and generally included:

- integrated working;
- excellent community and voluntary sector partnerships;
- very strong carer services which had been co-produced for many years;
- quick access for domiciliary care those individuals discharged for hospital who required extra support at home;
- learning and opportunities presented by being part of a Joint Safeguarding Board with Devon County Council;
- quality checking process which provided feedback about the safeguarding process;
- good leadership and governance of complex arrangements;
- commitment to investing in services that supported wellbeing and prevention under the Health and Care Act 2022; and
- having a clear co-produced Carers' Strategy and improvement plan.

Areas for improvement had been identified as:

- services for people with learning disabilities;
- direct payments;
- the reablement offer;
- equality and diversity;
- the contracts and contract management process;
- the deprivation of liberty waiting list;
- developing a local work force strategy;
- exploring further ways in which to provide support and early intervention;
- strengthening the complaints system, ensuring that feedback was fed through into practice; and
- working with health colleagues to improve cost, quality and productivity.

The Chairman wished to expressly acknowledge the progress made over the last year and in particular the hard work which ensured that the Council was in a good position in terms of readiness ahead of CQC inspection.

Members received responses to the following questions:

- How much notice would the Council be given that an inspection was due to take place and when?
- How was the inspection conducted? Would it be computer based and what was the grading system?
- Would the inspectorate receive service user feedback?
- In terms of domiciliary care how many individuals were quickly re-admitted to hospital?
- How did Torbay Council's self-assessment compare with other Local Authorities' self-assessments?
- How long had the extra agency support for DOLS been in place to reduce the backlog and how long was it envisaged that it would remain in place?
- If the Council was assessed tomorrow and on the basis of the current self-assessment what would be the probable rating?
- Had Torbay Council learnt anything from similar unitary authorities that had already gone through an inspection?
- What had Torbay Council learnt through networking with other Local Authorities?
- What were the top three vulnerable areas for the Council?

Councillor David Thomas spoke under Standing Order B4 and asked whether Members felt reasonably confident that they could answer questions that may be asked of them by the Inspector and that it was the responsibility of Members to ensure they were ready for that.

Resolved (unanimously):

1. that Members of the Sub-Board noted the contents of the Adult Social Care Self-Assessment Report;
2. that the Director of Adult and Community Services be requested to provide regular progress updates on self-assessment to the Sub-Board; and
3. that the Director of Adult and Community Services be requested to encourage the CQC inspector to engage with the Voluntary, Community and Social Enterprise Sector.

## **27. Residential Nursing and Care Homes**

The Divisional Director of Adult Social Care presented the submitted report which provided Members with an update in relation to Residential and Nursing Care Homes and an overview of how the care home market currently supported the Local Authority in meeting individual needs together with achievements and challenges.

Members were informed that it was important to recognise that the Local Authority retained accountability for the market but the regulator for Adult Social Care was the Care Quality Commission (CQC).

It was explained that there were 76 care home providers within the Torbay area commissioned by the Integrated Care Organisation (“ICO”). There was very good performance around discharge from hospital to assessment which was really focused on working with partners to assess people’s needs. A current piece of work being undertaken was to engage with people and families who had been transferred into care homes in Torbay to better understand how co-designed processes could be improved enabling a better experience.

Members were informed that from a market overview perspective there had been an increase in demand, some of which was due to hospital discharges. It was also important to keep costs under review since they had escalated probably due to the Covid response originally together with the way the market had changed and the increased pressures on the NHS to discharge people quickly. Challenges included workforce as rates of pay were not competitive when compared with other parts of the sector. The need for residential nursing care was also higher and a large number of individuals were entering residential care with complex long term needs. This required highly skilled staff, so it was important for the Council and the ICO to find ways of making systemic change that prioritised upskilling staff alongside structural development within the sector.

It was explained that moving forward it was important to have a clear plan as a Local Authority, in terms of how to develop the market and explore other options, for example, how the domiciliary care market linked in with the Housing Strategy; how to align the Joint Strategic Needs Assessment plan with the Strategy; ensuring a clear pricing strategy; how to develop the specialist high end area of the market with emphasis on more rehabilitation, focussed on returning people home as soon as possible; reducing waiting list times for the wider sector and working with providers to ensure that quality was at the heart of delivery. It was also important to have the opportunity to create space so that the market was competitive on price and quality and remained strength based around contracts with NHS partners and others.

Members received responses to the following questions:

- Did all care home residents have access to digital support and interactions such as Skype and Facetime?
- Was any work being carried out engaging with care homes about information and advice available for family members as the voluntary sector could assist people?
- Was it possible to increase staff with a higher range of skills?
- What was the difference between the enabling housing based model and increasing the number of people maintaining their own independence to stay at home?
- How often were care homes assessed by CQC? What happened when they required improvement – did they have to produce an improvement plan and were they then re-assessed at a later date?

- When would re-inspection take place?

Resolved (unanimously):

1. that Members of the Sub-Board noted the contents of the Residential Nursing and Care Homes Report;
2. that the Director of Adult and Community Services be requested to review the joint approach with the Integrated Crae Organisation (ICO) to provide care homes with information and advice; and
3. that the Director of Adult and Community Services be requested to ensure that the ICO reviews the approach to Finance and Benefits assessments, ensuring that people and their relatives have access to information and support.

**28. Adult Social Care and Health Overview and Scrutiny Sub-Board Action Tracker**

The Sub-Board noted the submitted action tracker.

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Chairman