

# HEALTH AND ADULT SOCIAL CARE SCRUTINY BOARD - 7 January 2021

## MINUTES

- Present:** Councillors: Mrs D Holl-Allen MBE (Chairman), K Blunt (Vice-Chairman), A Adeyemo, J Burn, A Hodgson, D Howell, A Mackenzie, W Qais and R Sexton
- Officers:** Julie Cooper – Head of Financial Operations  
Lizzie Edwards – Assistant Director for Adult Care and Support  
Claire Shannon – Head of Service, Adult Care and Support  
Joe Suffield – Democratic Services Officer  
Ruth Tennant – Director for Public Health  
Jenny Wood – Director for Adult Care and support
- External Representatives:** Helen Kelly – Associate Director of Integration (Urgent Care/Community), Birmingham and Solihull Clinical Commissioning Group  
Andrew McKirgan – Chief Officer (Out of Hospital Services), University Hospitals Birmingham

### 1. APOLOGIES

No apologies were received.

### 2. DECLARATION OF INTERESTS

There were no declarations of interest.

### 3. QUESTIONS AND DEPUTATIONS

There were no questions and deputations.

A statement was read out on behalf of Birmingham and Solihull Clinical Commissioning Group (BSol CCG) which provided information on the local roll out of the COVID-19 vaccine. Councillor Sexton read out a number of questions which she requested was passed to BSol CCG for a response.

The Board requested that the local vaccination campaign would be considered as a future item on the work programme.

### 4. MINUTES

The minutes of the meeting held on 23<sup>rd</sup> November 2020 were presented for approval.

A Member commented on Item 3 that Councillor Tim Hodgson had not been updated by Birmingham and Solihull Mental Health Foundation Trust. It was requested this was followed up.

### RESOLVED

The minutes of the meeting held on 23<sup>rd</sup> November 2020 were approved

### 5. ARRANGEMENTS FOR SAFE AND TIMELY DISCHARGES FROM HOSPITAL

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The Chief Officer, Out of Hospital Services, University Hospitals Birmingham (UHB) provided an overview of the changes to hospital discharges as a result of COVID-19. This included:

- The Trust currently had similar numbers of COVID-19 cases as during the first wave of the pandemic. Solihull Hospital had opened one ward for COVID-19 patients, while elective work continued. This position would be dependent on case numbers over the next 7-10 days.
- Although UHB were in a difficult position, they continued to pursue the positive work that was highlighted in the report. A number of discharges still took place outside of hospitals.

The Assistant Director for Adult Care and Health updated Members on the work that had taken place to enable safe and timely discharges to protect hospital capacity. Steps that had been taken in the COVID-19 pandemic included:

- The implementation of the national discharge guidance.
- Introduction of a home discharge service (care at home service with intensive support).
- Improvements to other discharge pathways.
- Development of an integrated hub which was a single team of health and social care professionals who would make multidisciplinary decisions to ensure individuals received holistic support and remained as independent as possible.

The following comments and questions were raised:

- A Member referenced a residents whose father had been discharged without prior notice and asked whether this type of incident would increase. The Chief Officer explained he would investigate the case.
- Members enquired whether residents who received a six week package would have it reviewed before it stopped, and if there were adequate sites to support these people. The Assistant Director for Adult Care and Support confirmed that they would reassess during the 6 weeks to identify if the care would need to be altered, or if further long term care was required. There were a number of sites which could support people on discharge which included a designated setting for COVID-19 positive residents.
- A Member enquired about what follow up visits which would take place after discharge, and the impact of COVID-19. The Assistant Director explained that they would contact residents who were discharged with a period of care to identify what support was required. During COVID-19, they aimed to do this primarily virtually to prevent an infection risk, however there remained the option of face-to-face appointments.
- A Member asked whether the reintroduction of the Care Act Easements had been considered as a result of staffing pressures. The Director for Adult Care and Support confirmed that staff absence rates were lower than the first wave, and additional services were in place. They would be kept under review.
- A Member commented on the importance of the option to work in the office to enable staff to have support with colleagues. The Director for Adult Care and Support stated that staff would still visit residents but it was very important to work as safely as possible. The Assistant Director added that a number of steps had been taken to engage with staff virtually.
- A Member asked if there was a backlog of Continuing Healthcare cases. The Director for Adult Care and Support confirmed that there was not a backlog in terms of social care input, but they continued to undertake assessments in a timely fashion. The Associate Director of Integration at BSoI CCG commented

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that there was a clear trajectory to monitor the progress of these cases and they continued to oversee in the latest wave of COVID-19.

- A Member queried what steps had been taken to ensure residents who required care home support knew they were safe, and what had been done to protect care homes who were under financial strain. The Director for Adult Care and Support sympathised with these comments but explained that residents did still accept care, and care homes worked tirelessly to provide a safe environment. There had been a number of care homes which had closed in the Borough, and a number of new ones had opened.
- A Member questioned how protected the therapy and community support to home discharge service was. The Chief Officer confirmed that they would try to expand and maintain the current level of community provision, however they may have to make difficult decision about how best to use their staff in consultation with health and social care providers in the future.
- A Member raised about the additional funding and the six week discharge funding and whether this support would continue past 31<sup>st</sup> March. The Associate Director confirmed that they still awaited financial allocations for the NHS and for further national guidance.
- A Member asked what support could be given to carers who were self-funders. The Director for Adult Care and Support explained that additional funding had enabled extra support to be provided to self-funders.

### **RESOLVED**

The Board noted the report.

## **6. BUDGET STRATEGY REPORT 2021/22 – 2023/24**

The Director for Adult Care and Support presented the report and outlined that the focus of the budget strategy as a result of the COVID-19 pandemic had been on reset and recovery, which meant that portfolios had not been asked to propose savings. They highlighted the following points in relation to the Adult Care and Support Directorate:

- The current net budget for adult social care and support was £57.143 million, which included a significant amount of one-off funding.
- The Directorate had been required to make £8 million of recurrent savings as part of the MTFS plans over recent years. The last reported financial year position for Period 6 was a £2.143m adverse variance as a result of COVID-19, which highlighted they would otherwise be in a balanced position.
- The two key areas of pressure that had been identified were the increase in wage inflation and younger adults demographic pressures. The mitigation proposals against these relate to grants, inflation assumptions and reserves to cover these pressures.
- There were some potential pressures which had not been incorporated into the MTFS proposals, as new information continued to become available on the longer term impact of COVID-19. This included the increased social care demand as a result of the increased support needed by older people and the rise of unpaid carers.

The Director for Public Health presented the Public Health Directorate MTFS update and highlighted the following points:

- Public Health was mainly grant funded through a ring fenced grant from the Department for Health and Social Care. They were unsure if the 2021-22 grant would have inflation applied to this.

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- A substantial proportion of the grant would fund NHS services, and there were pressures in relation to salary uplifts within this organisation. This covered services such as drug and alcohol services, sexual health services, health visiting and school nurses.
- The significant issue for the Directorate was to understand the impact of COVID-19 on future demand for services, as this was not currently clear. There may be increased demand as some people have not accessed the service during the crisis.
- The Directorate was responsible for domestic violence services, and awaited confirmation on the continued funding allocation to support the requirements of the new domestic abuse bill.
- The Directorate also had to establish a longer term financial footing for the employment and skills service to support people back to work.
- There had been significant amounts of funding for the COVID-19 testing, contact tracing and wider measures, but there was uncertainty about whether there would be funding to enable the long term continuation of these measures. Conversations would continue to take place with central government and other partners.

The Head of Financial Operations provided a verbal update on the provisional settlement that had been received just before Christmas. This included that a further Social Care Grant had been announced for 2021/22 which provided £600,000 of additional funding and announced that the Council had the opportunity to raise a further 1% in terms of the Adult Social Care precept for Council Tax. This would form part of the Full Cabinet report which would be presented in February 2021.

Members raised the following questions and comments:

- A Member asked whether additional funding would be provided to support the local COVID-19 campaign. The Director for Public Health confirmed that there had been additional funding provided as more requirements were introduced, and they would continue to discuss this with central government. The Head of Financial Operations confirmed that there had been around £80 million of COVID-19 related funding, which covered the additional pressures and loss of income. There was a schedule of all of the grants which would be used to update the forecasts. The COVID-19 pressures that were reported at Period 6 were covered within the COVID-19 emergency grant allocation. The MTFs dealt with future pressures when additional tranches of the emergency funds were made available.
- A Member commented on the Implications and Considerations section of the report. They suggested it would be helpful if there could be a stronger summary of how the plans in the Adult Social Care and Health Portfolio contributed to the 5 'building blocks' of the council plan, for example, how the portfolio would promote and deliver social value and help achieve the building blocks of inclusive growth.
- A Member queried about the domestic abuse legislation, what the £50,000 of funding would cover, how much money would be required for this new responsibility and would this cover increased overall amount of accommodation available. The Director for Public Health confirmed the £50,000 of funding was provided from central government to identify how the new duties may be delivered. They awaited further clarification on what they would be expected to deliver before they estimated how much this would cost. In terms of accommodation it was confirmed that there needed to be a flexible approach to individuals as required, but there was an expectation of additional accommodation.

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- A Member asked whether there was suitable and safe accommodation for those people and their children who were escaping domestic violence. The Director for Public Health confirmed there was accommodation and during COVID-19, extra accommodation had been sought.
- A Member highlighted their concern about the future implications of COVID-19 and enquired about what extra pressures there were likely to be on the budget as they moved forward, as a result of COVID-19. The Director for Adult Care and Support referred back to the points in the report and also acknowledged that it was possible that further COVID-19 related grants and funding may become available, as had happened already, and if so that these would mitigate the financial impact. The MTFs had taken account of COVID-19 pressures across the whole of the MTFs period and would continue to reflect the changes when the MTFs would be presented to Cabinet in February 2021.
- A Member asked what the weaknesses in the non-accommodation provision for domestic abuse victims. The Director for Public Health explained more detail could be provided at a future meeting.
- Members acknowledged the work that had been undertaken by unpaid carers during the pandemic. A Member also asked whether the increased number of carers had led to decreased reliance on Council support, and whether there was a large increase expected after COVID-19. The Director for Adult Care and Support confirmed that in the early stages of the pandemic there was reduced demand but it was now higher than pre-COVID-19. It was not certain if this was indicative of a long term trend. The MTFs had reserves to mitigate for the short term increases and decreases in requirements for services. The Member enquired if Healthwatch could be involved, with respect to impact on carers. The Director for Adult Care and Support confirmed that through the Carers Board they would update the Carers Strategy which would involve Healthwatch.

### **RESOLVED**

The Scrutiny Board noted the report and agreed to have their comments fed back to the Resources and Delivering Value Scrutiny Board and Full Cabinet in February 2021.

The meeting finished at 7.30 pm