

BIRMINGHAM CITY COUNCIL

HEALTH AND SOCIAL CARE O&S COMMITTEE

1000 hours on 11th February 2020, Committee Room 6 – Actions

Present:

Councillor Rob Pocock (Chair), Mick Brown, Peter Fowler, Mohammed Idrees, Ziaul Islam, Zaheer Khan and Paul Tilsley.

Also Present:

Mark Astbury, Interim Adults Business Partner, Finance.

Mandy Buckley, UNISON.

Ian James, Independent Adviser to HOSC.

Tim Normanton, HR Business Partner, Adult Social Care.

Afsaneh Sabouri, Head of Enablement Service.

Gail Sadler, Scrutiny Officer.

Leslie Smith-Woodman, Team Manager, Enablement Service.

1. NOTICE OF RECORDING

The Chairman advised that this meeting would be webcast for live or subsequent broadcast via the Council's Internet site (which could be accessed at "www.civico.net/birmingham") and members of the press/public may record and take photographs.

The whole of the meeting would be filmed except where there were confidential or exempt items.

2. DECLARATIONS OF INTEREST

None.

3. APOLOGIES

Councillor Diane Donaldson and Caroline Johnson, Branch Secretary, UNISON.

4. ACTION NOTES/ISSUES ARISING

The action notes of the meeting held on 21st January 2020 were agreed.

The following matters have arisen since the committee last met:

- NHS Long Term Local Plan – Healthwatch Birmingham

A response to the query regarding the how the number of respondents to the survey compared to other core cities was circulated to members on 31st January 2020.

- Budget Consultation 2020+

Further information on the home adaptations budget was circulated on 11th February 2020.

- Birmingham Safeguarding Adults Board Annual Report 2018/19

Cherry Dale provided a response to queries regarding the Forward Carers Hub and a copy of the Non-Regulated Accommodation report.

It was also noted that next year the committee might look at the health implications for people living in non-regulated accommodation as highlighted in the Safeguarding Report.

Day Opportunities Strategy

Councillor Fowler expressed his disappointment that the informal briefing on the Day Opportunities Strategy for committee members held on 21st January 2020 had been a verbal briefing rather than having the opportunity to view and comment on the written Strategy Report before it was presented to Cabinet. He was also frustrated that today's meeting had been arranged on the same day as the Strategy was being presented to Cabinet.

The Chairman explained that a Scrutiny Committee is not entitled to see documents earlier than the Cabinet. Therefore, the information contained in the Cabinet report was received verbally. The Chairman also assured members that he, along with Scrutiny Officers, had been identifying provisional meeting dates for next year which would potentially avoid clashes with programmed Cabinet meetings.

5. IN-HOUSE ENABLEMENT SERVICE REVIEW – EVIDENCE GATHERING

The Chairman set out the purpose of the evidence gathering session and clarified the status of the Scrutiny Committee in that it does not make decisions and is not an Executive body of the Council and has no authority to commit to any decision on behalf of the Council. As the In-House Enablement Service has been the subject of some contention across the City, the Chair reminded members that nothing that is said in the meeting can be deemed to be consent, amend or agreement in respect of any of the provisions or conditions or working practices within the Enablement Service. The committee will look at options for the In-House Enablement Service but these are not binding to the City Council.

The Chairman also stated that his role confines him to not make any agreement on behalf of Birmingham City Council or the Service or guarantee any outcome which is presented to the committee today.

Advice Note from the Local Government Association and Health Improvement Adviser

Ian James highlighted some of the key themes from his report and linked those with reference to the In-House Enablement Service. He referred to published examples of best practice from the following local authorities: -

- Leeds
- Coventry

- Southwark

Common themes linking best practice included: -

- Focus on Contact Centres providing advice and support to avoid people falling into crisis and requiring formal adult social care support services.
- Building on strong community/voluntary networks.
- A “therapist-led” approach to social care i.e. therapists work with front line workers and providers of care.
- Focus on short-term support with “strengths -based” assessments based on user agreed outcomes to regain or find the right level of independence.
- Formed a provider coalition to create an integrated service under shared management arrangements.

Ian highlighted the challenge of how the skilled and experienced group of staff in the In-House Enablement Service can be integrated into the new way of working in the health and care system. The In-House Enablement Service has in his view continued to work in isolation from some other service developments that are happening in the system and an issue would be to make sure that the In-House Service does not get left behind.

Ian concluded that the work that is being done in Birmingham to improve adult social care as a whole is innovative, pioneering and is in line with best practice elsewhere which others could learn from.

In discussion, and in response to Members’ questions, the following were among the main points raised:

- Ian wasn’t aware of any local authority comparator across the country where an In-House Enablement Service has successfully been incorporated into a new system around prevention and early intervention. Where In-House Services have been changed their roles have tended to be around reablement for people leaving hospital.
- Addressing comments made in his report regarding “staff may wish to be more involved in prevention and early intervention” and “a risk of the in-house service being ‘left behind’”, Ian said he could see excellent new service developments and a group of staff who were happy and getting job satisfaction from a different way of working which would present an opportunity for some in-house staff. Furthermore, whilst the rest of the service development is moving at pace and good things are happening the in-house service has not yet effectively moved on.
- How other local authorities support culturally diverse communities to care for family members in their own homes may be an element to be included in the final report.
- The City Council could benefit from learning how to manage change effectively across the authority. Examples of how a collaborative approach to

service development through co-production has been used elsewhere would also be helpful in the final report.

Joint Presentation from UNISON/Head of Enablement

Mandy Buckley (Steward, UNISON and Home Care Assistant); Afsaneh Sabouri (Head of Enablement) and Leslie Woodman-Smith (Team Manager, Enablement Service) put forward a collaborative presentation setting out activities which had been undertaken through joint working since the last evidence gathering session in August 2019.

- In 2011 the In-House Enablement Service had circa 800 Enablement Assistants and currently have 225 staff in post.
- The service had recently undergone a CQC inspection and achieved a good rating in all areas.
- In 2018, due to strike action, referrals were only accepted if there was an urgent need or breakdown of care because of an inability to deliver the service. We are now encouraging social workers to send referrals to us for prevention, enablement and long-term service packages and this has been happening better.
- Improving service capacity: -
 - Joint working with UNISON on a self-rostering project in Sutton constituency. Staff working as a team looking at business need, their own work life balance and how they could change their work pattern to even out cover for gaps in shifts.
 - Voluntary redundancy has led to an unbalanced number of staff in the North and South of the city to provide the service. Therefore, following one to one meetings with staff to consider their commitments, we are moving people to their nearest constituency with the aim to create a knock-on effect and get an even number of staff within the constituencies which will be beneficial for the service, staff and provide continuity of care for service users.
- In order to minimise the risk of the In-House Enablement Service being left behind with the evolving health and care system, new initiatives are being explored: -
 - Prevention – Out of Hours
The Out of Hours Duty Team for adults contact the In-House Enablement Service when service users telephone them for assistance e.g. breakdown of care, domestic issue, and a member or members of staff will go out and support that person. Previously, there was no system in place to deal with this situation and, invariably, a service user would telephone the paramedics.
 - Escorting service to support DTOC
A patient may be medically fit to leave hospital but need a period of residential care before returning home, but the residential setting

may be in a different part of the city. Enablement staff are providing an escorting service to enable a husband/wife/partner to visit that person. This is a new service and a pathway for referrals is in place. At the moment, it is only available for discharges from the QE Hospital, but it is hoped the service can be offered city-wide.

- Wrap Around

Sometimes a patient is medically fit for discharge but cannot go home because they may need one or two calls during the night. An OT and social worker would visit the patient's home to assess what equipment/adaptation was needed to have support 24/7 like it would be in a residential home.

- Night Care

Joint working with colleagues in UNISON. Some staff are moving voluntarily from day shifts to night shifts. The night shift starts at 9.30pm – 7.00am.

- Link to Early Intervention Community Team (EICT)

EICT is fast pace and if a service user has had a period of enablement or rehabilitation but outcomes have not been achieved upon discharge, the Enablement Service could receive a referral from the Early Intervention Community Team, to continue working with the service user in the community and, if need be, keep that person as a long-term package.

- Future Plans

- Looking to widen the self-roster across all teams city-wide working 7am-12pm and from 4pm-10pm.
- Exploring how the service can support the role of the customer journey and the prevention approach providing staff with appropriate training to enable them to take up opportunities in other areas should they wish.
- Exploring the opportunity of creating a bank of staff to cover shortfalls to meet service need across the city.

In discussion, and in response to Members' questions, the following were among the main points raised:

- The In-House Enablement Service is a short-term service which is delivered free of charge regardless of a person's financial position.
- The bank staff would be drawn from existing staff who have indicated they would be available to work on a certain day where they are free and it's their day off. They would get paid for the day as an extra and would be expected to work where needed i.e. anywhere in the city.
- The Commissioning Service within Adults Social Care works very closely with a large network of providers. Sevacare is one of the largest providers to deliver

home care services in the city and there's been a lot of intensive work with them to feedback on performance. There is a recognition that there are times when service standard is not what is expected but the Commissioning Service is working directly with Sevacare to address this.

- The biggest concern raised in the last evidence gathering session was utilisation of time i.e. the time staff are in contact with service users as opposed to downtime. It is anticipated that if self-rostering is implemented across the city contact hours will be improved by 25%, i.e. to reach a total of about 50%.
- Also being factored into the forecast to be realist for staff is staff training, sick leave, annual leave and team meetings.

HR Update

Tim Normanton (HR Business Partner, Adult Social Care) updated the committee on the current workforce position.

- The Early Intervention Community Team (EICT) is a very complex and important undertaking in partnership in a very large-scale system which has taken longer than anticipated and the actual implementation will now be March/April this year.
- There is a joint partnership commissioning programme where BSol CCG and the City Commissioning Service are looking at the whole system market for domiciliary care, enablement and rehabilitation. This work will be carried out over the summer/autumn to understand what the Community Team will do as part of early intervention, where that fits with the intermediate market, where the workforce is and what it is contributing to the system.
- Previous challenges in terms of maximising staffing resource and utilising capacity are now being addressed in partnership with UNISON.
- The next steps are about refining the self-rostering process to get a consistent approach which can be rolled-out city-wide which will enable reallocation of staff across the city – the wave approach. Once this is in place, we will be able to inform the commissioning work about supply and demand across the city/system. This will help to agree the approach moving forwards and will, potentially, have implications for where the workforce is across the partnership.

Finance Update

Mark Astbury (Interim Finance Business Partner, Adult Social Care) updated the committee on two key issues regarding the financial position of the In-House Enablement Service: -

Budget

- The budget for the service this year is £5.3m with an underspend of approximately £900k due to staff vacancies earlier in the year.
- In terms of the base budget for next year, there is a budget for the full establishment as it stands.

- There are no savings targets against the service for next year.

Efficiency of the Service

- The unit cost of the service ranges between £65to£70 per house with a face-to-face contact time of between 26-28%.
- There is no requirement to report on unit costs for reablement and a number of authorities have been unwilling to share that information.
- Where information is available, on average the cost of reablement is between £40-£50 per face-to-face hour based on contact time of 50%. So, the majority of authorities are paying circa £25 per hour for the cost for the service but in terms of actual contact time that is somewhere between £45-£50. If the In-House Enablement Service can increase contact time from the current position to close to 50% that would put it within the bounds of where most authorities have shared their information.
- Afsaneh Sabouri said that at the moment contact time is 25% but by implementing self-rostering city-wide then it is anticipated this would improve by 25% to reach closer to 50%.

Other Issues

- There are some internal operational issues with a small number of staff but are working with another trade union to get this resolved.
- All future planning and new initiatives depend very much on increasing contact time by 25% i.e. to reach the 50% level, but if anything, unforeseen happens then any difficulties/challenges will be shared in an open and transparent manner with stakeholders and politicians

Closing Statement

The Chairman stated that the committee will produce a report to the Cabinet Member for Health and Social Care which will lay out various options for further development and enhancement of the In-House Enablement Service within the broader context of the whole service. A draft report will be presented to the next committee meeting in March. The final report will be sent to the Cabinet Member and any decision lie with the Executive not this committee.

In summary, the Chairman said the day had been helpful and enlightening. Staff had talked through the progress being made to improve the service and a willingness from all parties to achieve a positive result. It had been a fantastic display of collaborative working and he commended all involved on their achievement.

The Chairman also put on record thanks to Ian James for the advice he had provided to the committee.

RESOLVED:

- Tim Normanton to provide diversity data for the In-House Enablement Service workforce.
- A further briefing note is provided to the committee later in the year looking at the service/system as a whole.

- To note 'Adult Social Care – Self Funders' as a possible topic for next year's work programme.

6. WORK PROGRAMME – FEBRUARY 2020

The work programme was noted.

7. REQUEST(S) FOR CALL IN/COUNCILLOR CALL FOR ACTION/PETITIONS RECEIVED (IF ANY)

None.

8. OTHER URGENT BUSINESS

None.

9. AUTHORITY TO CHAIRMAN AND OFFICERS

RESOLVED: -

That in an urgent situation between meetings the Chair, jointly with the relevant Chief Officer, has authority to act on behalf of the Committee.

The meeting ended at 1144 hours.