CABINET MEMBER FOR HEALTH, WELLBEING & SOCIAL CARE

RECORD OF DECISIONS of the Cabinet Member for Health, Wellbeing & Social Care 's meeting held on Tuesday, 7 July 2020 at 2.00 pm at the Guildhall, Portsmouth

Present

Councillor Matthew Winnington (in the Chair)

Councillors Graham Heaney
Jeanette Smith

8. Apologies for absence

There were no apologies for absence.

9. Declaration of interests

Councillor Smith declared an interest as she is in paid employment for the Hampshire branch of Unison so she will not participate in discussion on agenda item 5 (Update on Residential and Ethical Care Charters).

10. SO58 decision - Allocation of Nitrate Neutrality Credits (Edinburgh House and Longdean Lodge)

The Cabinet Member noted the report. The report is for information only so is not subject to call-in.

11. Wellbeing Service - Annual Performance Report

Alan Knobel, Health Development Manager, and Helen Simmons, Wellbeing Service Manager, introduced the report, which was originally due to be considered at the cancelled March meeting, and explained how services have been adapted during Covid 19. The report covers up to the end of 2019. There are just over 3,000 referrals annually, mainly from primary care and self-referrals. Demographics have also been stable for four years and are mostly male. Progress has been made in getting people to engage with the Service after referrals. Successes include brief interventions with those at increasing risk of alcohol abuse, and bespoke courses, for example, for midwives having difficult conversations around BMI, smoking or substance misuse.

The Long Term Condition Hub Pilot, designed to help people manage long-term health conditions, started in December but has halted due to Covid 19. Since March there have been about 245 active clients, for whom telephone and Zoom support have worked well. A smoking cessation service for homeless people in the Ibis Hotel had 72 people signed up as at 1 July, of whom 14 stopped altogether. Many feel safer in their rooms and feel healthier. More may have signed up as there are now homeless people in the Ibis 2 and Hope House. Wellbeing services are due to be established in New Road and

Foster Road in the next couple of weeks. Alan Knobel thanked Helen Simmons for overseeing a period of transformation where referrals were stable but with about half the original number of staff.

In response to questions officers clarified

During Covid 19 the Wellbeing Service's new ways of working may strengthen its resilience and sustainability in the face of increased demand. Working at home has brought efficiencies such as reduced travel time. Three telephone appointments take the same amount of time as one face-to-face one. The Service hopes to resume face-to-face appointments; weight management clients want to be weighed. However, the long-term impact is uncertain. The situation regarding alcohol is unknown as it is unsure whether increased drinking might decrease when more normality returns.

Members congratulated the Wellbeing Service on their work. The Cabinet Member said the Service was a professional team and a fantastic free resource for Portsmouth residents, some of whose success stories had featured on television. The Service needs financial support as it has a positive impact on the community.

The Cabinet Member noted the report. The report is for information only so is not subject to call-in.

12. Update on Residential and Ethical Care Charters

Andy Biddle, Assistant Director of Adult Social Care (ASC), introduced the report, which was originally due to be considered at the cancelled March meeting. Since March there has been a financial support package for all social care providers to include PPE, increased staffing and a minimum income guarantee to give providers financial stability based on their pre-Covid income. It is unclear how the council will manage future work on the Charters due to Covid 19 but developments will be considered at future meetings.

Mr Biddle outlined progress as at July. Domiciliary care is moving away from "time and task" (an approach widely adopted since around 1993) to a more personalised approach based on need. 15-minute visits only take place with clients' and providers' agreement. ASC followed the UK Home Care Association model for negotiating the increase in rates for local providers in the 2020/21 financial year. If there were no zero hour contracts there would be a significant exit from the employment market as the flexibility suits some workers. During Covid 19 care providers can access information, learning and development on the council's provider portal. A short-term financial agreement allows care homes to access the council's wellbeing provider, for example, to help with traumatic deaths. Support is available up to October. Care agencies can claim one-off payments to employ agency staff to maintain care during Covid 19. Care homes have access to the Airedale system whose main aim is to avoid unnecessary hospital admissions for residents, which can be especially traumatic for those with dementia. The Supreme Court's judgement on the issue of payment for "sleep in" shifts has still not been issued.

In response to questions from Councillor Heaney Mr Biddle clarified

It is hoped to roll out the new model of commissioning domiciliary care next year, possibly around January or February 2021. Technical issues such as rostering and billing across a significantly large cohort of clients need resolving before expanding the pilot across Portsmouth. An initial tranche of funding needs to be identified. It is a very different way of providing support with family members involved 24/7 and ASC having less of an intermediary role in conversations about care. There are some examples of similar initiatives in the UK and Holland but they have to be tailored to meet residents' needs and all cities are different. With Portsmouth it has been difficult resolving the actual mechanics of the pilot. More information on similar initiatives can be provided for members.

Mr Biddle acknowledged two points made by Councillor Heaney. Firstly, the Charters should clarify if they refer to the National Living Wage or the living wage as defined by the Living Wage Foundation. Secondly, only paying statutory sick pay means care workers might struggle financially. The intention is to work with providers to see if there is room for manoeuvre but this will be a challenge financially post-Covid 19. ASC has been asking for sustainable social care funding at government level for some time but there is no progress yet.

The Cabinet Member noted that relationships with residential providers have improved during Covid 19 and there is real potential and optimism to move forward with the Charters. It is a living document and there will be an update before the end of the financial year.

The Cabinet Member noted the report. The report is for information only and is not subject to call-in.

13. Adult Social Care Charging Arrangements

Richard Webb, Finance Manager, introduced the report.

The Cabinet Member explained the report stemmed from the motion at Full Council on 14 January 2020. A government plan on charging for adult social care is now three years overdue and is unlikely to be in place until the end of this Parliament so the uncertainty could be in place for another three to four years. According to Full Council on 11 February 2020 there will only be a cap on services which previously had one. A cap of £250 on all services would cost the council more than £1.5 million which is unsustainable but shows why properly funded adult social care is needed. He had written to the Secretary of State for Health as a result of February's Full Council and received a letter a month ago. He would love a cap of £60 funded by government for all ASC clients but this is not possible. He acknowledged the situation is frustrating for families in Portsmouth.

DECISIONS:

Adult Social Care Charging Arrangements

- a. Agreed to reinstate a financial cap for Day Care, Community Support and Health & Independence Services, (Subject to recommendations (b) and (c) below).
- b. Agreed that a financial cap of £250.00 be applied from Monday 06 April 2020.
- c. Agreed that the implementation of a financial cap will on a temporary basis, until the publication and implementation of the anticipated government reforms of the financial arrangements for the Adult Social Care sector and how people fund their care and their eligibility for financial support from Local Authorities in the future.
- d. Agreed that the Chief of Health & Care Portsmouth be asked to identify and implement alternative income or savings strategies in order to offset any lost income in 2020-21 and future years, and enable Adult Social Care to maintain a balanced budget.

14. Update on Covid 19 - Adult Social Care

Andy Biddle, Assistant Director of Adult Social Care (ASC), introduced the report. Most of ASC's response to the Covid 19 has been in response to government guidance as it is governed by three pieces of legislation. ASC already had a business continuity plan for pandemics, not necessarily Covid 19. ASC has worked with the Local Resilience Forum to maintain supplies of PPE with support from an officer and team and can now supply past 48 hours. Patients are discharged in three hours from being declared medically fit. ASC is pleased not to have applied any of the easements to the Care Act permitted under the Coronavirus Act 2020 as they want to supply a basic level of care for all. The post-discharge isolation unit at Harry Sotnick House opened on 1 June. Support for providers includes a minimum income guarantee which will taper down from July to October. ASC is now considering the logistics of testing care home staff weekly and residents monthly. Support and feedback from partners and providers during Covid 19 has been very good.

The Cabinet Member felt the Prime Minister's recent criticism of care homes not following guidance was disgraceful and that the government response had been very poor in general. ASC acted early and worked for weeks before lockdown and the local response was outstanding. Portsmouth was 140/150 for local authority infection rates and its low death rate is a tribute to the council, the NHS, care homes and domiciliary providers. There had been very little guidance on how local authorities should interact. Care homes have had a difficult time and they need support, not criticism.

Mr Biddle said guidance, especially for PPE, was frequently updated. It was partly driven by the phase of response to transmission generally and perceived threats. Portsmouth was already working with the organisations in the wider health system across South East Hampshire and shared the latest guidance with providers to make sense of a rapidly changing situation. Helen Atkinson, Interim Director of Public Health, said Covid 19 was a completely

new virus and evidence developed very quickly, especially at the beginning, and some changes of advice were due to greater understanding. Public Health worked closely with the council, the CCG and NHS Solent to ensure they all adapted and there is good evidence of their speed in adapting to changes. Hard data shows how outbreaks at the start were managed very effectively and there have been no cases for several weeks.

The Cabinet Member agreed with members that the Prime Minister's comments should be rebutted. The Cabinet said he would write to the Prime Minister and Secretary of State to issue a rebuttal and to suggest that they should apologise for their comments.

The Cabinet Member thanked Mr Biddle for his report and the huge amount of hard work undertaken across all areas of ASC. Working from home has not always been easy but services for the support and wellbeing of Portsmouth vulnerable residents have been maintained in partnership with organisations like The Hive.

The Cabinet Member noted the report. The report is for information only and is not subject to call-in.

15. Update on Covid 19 - Public Health

Helen Atkinson, Interim Director of Public Health, introduced the report and explained how the three Directors of Public Health for Portsmouth, Southampton, Hampshire and the Isle of Wight worked together as part of the Local Resilience Forum to ensure a consistent, co-ordinated response to Covid 19. Cheryl Scott in Communications has worked tirelessly as the Public Health Communications lead to ensure internal and external communications are up-to-date. Public Health intelligence has been leading the way in Portsmouth and across Hampshire and the Isle of Wight and has modelled scenarios based on R values to prepare for a second wave, which may occur around late October / early November.

In response to questions from members, Ms Atkinson clarified

Public Health has been waiting for Pillar 2 national granular data as they did not have postcodes which are needed for outbreak management. A local data sharing agreement was signed about two weeks ago, subject to the usual data protection and information governance controls, and Public Health now receive daily figures. They also now have access to NHS digital data. As at 5 July there have been three new cases in the last seven days (one from Pillar 1, two from Pillar 2). Pillar 1 figures are from testing hospital staff and patients and Pillar 2 testing covers community testing including the Tipner site, whole care home testing and postal home testing. Public Heath can now see how many people have been tested and how many confirmed case contacts have been identified and followed up. National figures for pillar 2 data have been added to the daily dashboard. Confirmed cases increased from 325 to 493 cases (151 to 229.2 per 100,000) which was a result of all the pillar 2 cases being added cumulatively.

The Local Outbreak Plan is not static and will be continuously refreshed depending on how policy and guidance changes, based around the seven themes. Outbreak plans will be in place until an effective vaccine is in place. Spikes in infection need to be managed while moving out of lockdown and the economy recovers.

The Local Member Led Engagement Board reports into the Health & Wellbeing Board and its membership includes six councillors from across the political parties as well as representatives from the CCG, Public Health, Healthwatch, Portsmouth Education Partnership, Shaping Portsmouth and the Hive.

Members thanked the Public Health team for their outstanding work, especially around intelligence data.

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The meeting concluded at 4.00 p	m.
Councillor Matthew Winnington Chair	