

## **CABINET MEMBER FOR HEALTH, WELLBEING & SOCIAL CARE**

RECORD OF DECISIONS of the Cabinet Member for Health, Wellbeing & Social Care 's meeting held on Monday, 5 December 2022 at 10.00 am at the Guildhall, Portsmouth

### **Present**

Councillor Matthew Winnington (in the Chair)

Councillors Yinka Adeniran  
Brian Madgwick

#### **29. Apologies for absence**

Apologies for absence were received from Councillor Gosling.

#### **30. Declarations of interest**

There were no declarations of interest.

#### **31. Meals Delivery Service**

Andy Biddle, Director of Adult Care, introduced the report which was an update since the July 2022 portfolio meeting when Age UK had taken on the meals delivery service.

Rory Massey, Chief Operating Officer, Age UK, said the service was going really well from an operational point of view and had been met positively by residents. Some residents were not keen on the menu choices but the quality was good. Firstly, Age UK had built relationships with the Independence & Wellbeing Team (IWT) off the back of the contract. IWT were an incredible team and had worked hard to make the service viable and sought after. Secondly, Age UK was looking to improve interaction between service users and drivers so that the main focus of the delivery was a welfare check. Age UK was looking to train all drivers in Making Every Contact Count so they can highlight any concerns with the office.

However, there were some challenges, mainly financial. Age UK had absorbed £29,000 losses since inception although the trend was moving in the right direction with light at the end of the tunnel. Age UK's café subsidises the meals delivery service and they now know how many meals they need to deliver to be viable. The city council had allowed Age UK to purchase equipment to increase capacity; payment was still awaited but the relationship with the council was generally positive. About 70 meals per day were delivered and the aim was 93 per day, the "golden goose."

Councillor Madgwick noted a church in Paulsgrove provided fresh fruit and salads, some of which it grows, for people to help themselves. This was an example of other food being available and could be raised at Full Council. Councillor Adeniran congratulated the improved service.

Councillor Winnington said the Age UK service was different to other services or food donation schemes as people paid for regular deliveries; it comprised hot meals with welfare checks so it was value added. It also provided entry to statutory and voluntary services. He requested another update in six months' time as Age UK would have been running the service for a year. He thanked all involved in the council and Age UK.

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

### **32. Co-production**

Clare Rachwal, Deputy Head of Service, introduced the report, explaining it showed how Adult Social Care would change its culture so that co-production was at the core of services. For example, the Portsmouth Autism Community Forum showed services were better received by service users when they had been involved from the start. Other priorities included workforce development, for example, how involved people were in service design and delivery, especially where there were gaps. The Integrated Care Board had devised a payment for involvement process which would be used in Adult Social Care. The aim was to achieve culture change across the health and care system.

Councillor Winnington noted co-production was at the heart of the recent Carers Count event and also in the transformation of mental health services, who had been engaging with service users via the Hive for some time. Co-production was absolutely critical going forward and he looked forward to it being embedded in the council.

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

### **33. Working with Autism and Neurodivergence including Transition**

Andy Biddle, Director of Adult Care, and Clare Rachwal, Deputy Head of Service, introduced the report and outlined work so far. Highlights included the appointment of a Transition Lead, Liza Grainger, and Room One in the Charles Dickens Centre, which was staffed by two knowledgeable and capable people who are both autistic and neurodiverse (AND). Room One was looking for a bigger venue due to its success. Adult Social Care was capturing what AND people were asking for; themes were becoming apparent, such as support in the workplace and advocacy. A newly commissioned service had started the previous week to provide employment support via the You Trust.

The transition to adult services is a crucial phase and the Transition Lead works very closely with children's services to identify AND people as early as possible. A recently appointed small specialist team will see what support AND people need when they move towards adulthood. The Integrated Care Board has provided funding to develop training videos using co-production. National mandatory training will be rolled out across Hampshire and the Isle of

Wight for staff likely to come into contact with AND people and those with learning disabilities. The new AND strategic plan would work closely with children's services plan to align services as much as possible.

In response to questions from members, Ms Rachwal said Room One had started at the beginning of September. It currently operated part-time as the premises was very small and groups and drop-in sessions were limited. It hoped to grow and funding might be available from NHS England. Some of the drop-in sessions might consolidate, for example, the Monday group might merge with the Tuesday one. Room One also offered one-to-one slots and training for professionals. It was best to organise a visit in advance in case any confidential meetings were taking place.

Councillor Winnington thanked Mr Biddle and Ms Rachwal for the considerable work done as there was need for it. Room One was an exciting initiative. Transition was a massive issue in social care and having a Transition Lead specifically for AND people was good as they had many challenges and additional support needs, which others may not have. If transition was right across the board it would be beneficial for the system so people could be supported all the way through. Involvement from members was good so perhaps an event could be organised more widely amongst them, perhaps remotely via Teams, so they could talk directly with AND people. The AND community was not always as well supported as it could be but now there is more diagnosis and understanding.

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

#### **34. Use of the Victory Unit**

Andy Biddle, Director of Adult Care, introduced the report.

Councillor Winnington noted that a recent article in The News was slightly misleading as the Victory Unit had never been a care home; it was used for reablement. During Covid a Discharge to Assess (D2A) unit had opened at Harry Sotnick House, co-funded by the NHS, with staff transferred from the Victory Unit. Using the Victory Unit for Extra Care was much better than leaving the building empty or using it as a traditional care home. Extra Care accommodation was critical for the city and would provide positive support for residents as well as making the best use of the site and facilities. He thanked Mr Biddle for working to progress Extra Care and Housing 21 for taking on the lease.

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

#### **35. Portsmouth Health & Care Discharge to Assess model**

Andy Biddle, Director of Adult Care, introduced the report, explaining that Adult Social Care had only been notified of conditions of the Adult Social Care Discharge Fund (announced in September) the week before last. Officers had

submitted a plan to the Department of Health & Social Care on 16 November. Since the report had been written the second floor of Shearwater had been put into use as temporary accommodation for residents who had to be moved from a care home so it was currently not available for discharge. However, it would not be forgotten and the position would be evaluated over the winter.

Councillor Winnington thanked Mr Biddle for the update. The discharge to assess model, rather than assess to discharge, was an integral part of the health and social care network in Portsmouth, which makes a real difference in getting people out of hospital so they hopefully return home or move to appropriate accommodation. Partnership working with NHS Solent was important as it spread the cost and enabled access to NHS services which was not possible when the Discharge to Assess Unit was run by the council.

The top floor of Shearwater was useful in case of provider failure. Councillor Winnington thanked the team for their incredibly hard work in transferring the care home residents to Shearwater and other care homes in Portsmouth to keep them safe, particularly when there was often little notice in such situations.

The new name for the jointly funded Discharge to Assess unit would be chosen in discussion with staff. He thanked Simon Nightingale, Assistant Director, Health & Care Partnerships, and his team for getting residents in the right place to get the care and support they need.

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

The meeting concluded at 11.02 am.

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Councillor Matthew Winnington  
Chair