

Minutes of Health and Adult Social Care Scrutiny Board

**Monday 7 February 2022 at 6.00pm
Council Chamber, Sandwell Council House**

Present: Councillor E M Giles (Chair);
Councillors Bhullar (Vice-Chair), Fenton, Fisher and L Giles.

Officers: Rashpal Bishop (Director of Adult Social Care);
Alexia Farmer (Manager - Healthwatch Sandwell);
Christine Anne Guest (Service Manager – Commissioning
and Integration);
Vivek Khashu (West Midlands Ambulance Service);
Colin Marsh (Service Manager, Adult Social Care);
Chris Masikane (Chief Operating Officer - Black Country
Healthcare NHS Foundation Trust);

01/22 **Apologies for Absence**

Apologies were received from Councillors Akpoteni, Costigan, Davies, R Jones and Khatun.

02/22 **Declarations of Interest**

Councillor L Giles declared a general interest in the matter referred to at Minute No. 6/22, in that he works with another ambulance service.

03/22 **Minutes**

Resolved that the minutes of the meeting held on 22 November 2021 are approved as a correct record.

04/22 **Urgent Items of Business**



There were no urgent items of business to consider.

05/22

Day Services Transformation Plan

The Board noted the progress on the changes in the delivery of Learning Disability Day Services.

The Council had worked with Changing Our Lives to ensure that the direction of travel was right and reflected service user feedback. The feedback had informed the vision for day services, which was:-

- To provide building-based day care only to those who need it.
- Day Opportunities in the community for those who are more independent.
- New and diverse day opportunities on a pick and mix basis that supports “An Ordinary Life”.
- The right day opportunities identified and brokered for the individual.
- Strength based and Independence Focussed.

Building-based services had reopened in autumn 2021 to people with most-complex needs, which had facilitated respite for carers and families. However, the Omicron variant had delayed further progression until March 2022, when reopening of more building-based services would begin, but primarily with efforts to expand the community offer.

About 80% of service users receiving externally commissioned support were now receiving some level of support. More people were choosing to be supported in their own homes or through engaging in community-based activities (e.g. meeting over a coffee) as an alternative to the traditional day service model. Where it was possible, service users were offered a mixed model of support, including engagement in volunteering opportunities in the community. Feedback indicated that service users, families and carers supported this model.



About 280 people in Sandwell were enrolled on day services with providers in Sandwell, of whom 171 had a learning disability (LD). The largest provider in Sandwell, who in total supported 89 people with LD, now offered outreach and community support to 58 of those and the rest were accessing formal building-based service. There were additional 6 providers of services for people with LD. 100-120 people were currently supported in in-house day services on a weekly basis.

The Council continued to work with providers to facilitate the shift into more community and strength-based approach of delivering day services. The main challenge for providers involved staffing, building-based service.

The pandemic had allowed for the introduction of a 12-week assessment pathway for people transitioning from children's services into adult services. Traditionally people going through transition were allocated a package of care and went directly into the service. The 12-week period would include a thorough assessment of need but would also allow the individual to have a say in the activities and opportunities they wished to access. A Community Navigation Service was also being developed alongside this, which would identify opportunities such as employment, training, volunteering and other activities that promoted independence.

A postural care workstream was also being developed, alongside health professionals and Portway Leisure Centre, to deliver postural care training to service users with physical ailments to further support them in being to engage in the activities they wanted to.

Further work was needed to embed the 12-week assessment pathway and the changes started internally with external providers. The promotion of direct payments would continue, which would support the developed of individualised packages.

The following was noted in response to questions and comments:-

- The 12-week assessment pathway would focus initially on those coming through transitions through schools from 14/15



years old. On average this equated to 25-30 people a year. Referrals would be made through a dedicated social work team dealing with young adults.

- Portway Leisure Centre was designed in mind for people with disabilities, including the adult social care space. A significant number of service users also used their passes to access leisure centres at locations close to where they lived.
- There was currently no capacity within the adult social care team to provide tailored support to service users at all Sandwell leisure centres, but this would be looked at including as part of the mix of weekly activities for service users.
- The Service Manager – Commissioning and Integration undertook to provide members with data on direct payments.
- There was no defined timescale for the completion of service changes and teams were guided by service users, as well as timescales on the lifting of coronavirus restrictions.
- Service users receiving care at home were prioritised for engagement as this cohort had been impacted on the most during the pandemic. Those people in supported living facilities would be focussed on next for engagement, followed by residential care users.
- Changing Our Lives was also engaging with service users and provided continual feedback to the Council on what was working well and what could be improved.
- There was still work to do with local businesses to develop appropriate opportunities for people with learning disabilities. Community navigators were also working with local businesses to match people to opportunities.
- Service users would continue to receive support when engaging in employment or volunteering opportunities and their situation would be monitored to ensure they were safe. Conversations were ongoing for the Council's Employment Team to offer additional mentoring support.

Resolved that a further update on the transformation of day care services be presented to a future meeting and that service users and representatives from Changing Our Lives be invited to present their experiences to the Board.



The Board received a presentation from West Midlands Ambulance Service on its Winter Plan 2021/22 and the process of developing the Plan each year.

The planning process began in April of each year with a lessons-learned exercise looking back on the previous winter. The first draft of the Plan was normally presented to the Trust's Board in July. The Plan was a living document and was managed through the command team, which included the Chief Executive of the Trust.

The Plan was based around three key objectives:-

- 1) Protect the critical infrastructure of the 999 service.
- 2) Maximise frontline resources.
- 3) Save as many lives as possible.

All services had been maintained during the pandemic and effective strategies had been implemented for infection control, including 24 hour staff testing and track and trace. 93% of staff had been vaccinated against Covid-19.

Some of the strategies for maximising the efficient use of resources were outlined, including managing the 100% increase in 111 calls. Community First Responders were deployed to respond to some 999 calls. They were able to provide life-saving treatment to patients until an ambulance arrived. Call handlers were able to determine whether an ambulance was required by discussion with the caller. This allowed the service to reduce the number of ambulances being dispatched at any one time and redirect the staff so that the most experienced paramedics were deployed to the most critical cases. Call handlers were also able to refer patients to other services electronically during calls, which minimised handover waiting times and allowed patients to be directed to the most appropriate service. All WM Ambulance Service staff were trained physicians, and this included clinical directors, which meant they could be deployed operationally when required.



Despite these challenges the service's performance on 999 calls was the best in the country.

A director was on duty 12 hours a day, 7 days a week to direct operations. The ambulance fleet was composed of approximately 1,000 vehicles, around half of which were designed for 999 response and other half were patient transport service (PTS) vehicles.

There were around 7,500 staff working for WM Ambulance Service. During the worst period of the pandemic almost 1000 members of staff were off work due to sickness, which created a considerable operational challenge. This currently stood at 480 people.

Handover of patients to hospital remained a key challenge for the service, however, Sandwell and West Birmingham Hospitals Trust was one of the best performing trusts in the region for this.

The following was noted in response to comments and questions:

- Achieving the net zero emissions target by 2030 was going to be a great challenge for the ambulance fleet. The changes required a big capital investment and it depended on whether the market could respond in time to produce suitable vehicles for an ambulance service that could also be affordable for the public sector.
- Some GPs were referring patients to 111 services which created additional demand on services however this was difficult to resolve as it was well known that GP practices were operating beyond capacity and demand was growing. Nationally 19% more appointments were now being offered than before the pandemic, but the primary care workforce had reduced by 15,000 over the same period.
- The provision of nebulisers in primary care was linked to the type of General Medical Services (GMS) contract in place at the practice, as most CCGs commissioned only the basic services due to cost.
- Operating 999 and 111 services as part of the same organisation brought tangible benefits. All staff at West Midlands Ambulance Service were trained to deal with both



999 and 11 calls, which contributed to the service being fastest in the country to respond to 999 calls.

07/22 Update on Mental Health Services Review

The Board noted that the members on the working group had now been sent document pack, with information on the Board's work on mental health. The first meeting of the working group would look at how members wished to approach the review, and how they would prioritise their key strands.

08/22 Scrutiny Action Tracker

The Board noted an update on progress on previous actions and recommendations.

09/22 Cabinet Forward Plan

The Board noted the contents of the Cabinet Forward Plan.

10/22 Work Programme

The Board noted the committee work programme.

Meeting ended at 7.40 pm

Contact: democratic_services@sandwell.gov.uk

