# <u>Coventry City Council</u> <u>Minutes of the Meeting of Health and Social Care Scrutiny Board (5) held at</u> 11.00 am on Wednesday, 17 July 2024

Present:

Members: Councillor C Miks (Chair)

Councillor S Agboola

Councillor B Christopher (substitute)

Councillor S Gray
Councillor A Hopkins
Councillor M Lapsa
Councillor G Lewis
Councillor K Maton
Councillor B Mosterman

Other Members: Councillor L Bigham, (Cabinet Member for Adult Services)

Councillor K Caan, (Cabinet Member for Public Health, Sport

and Wellbeing)

Councillor G Hayre, (Deputy Cabinet Member for Public Health,

Sport and Wellbeing)

Councillor S Nazir (Deputy Cabinet Member for Adult Services)

Employees (by Directorate)

Adult Services S Caren, P Fahy, N Byrne, J Reading

Law and Governance G Holmes, C Taylor

Others Present: E Cappell, C Hollingsworth, A Penman, C Potts

(Coventry and Warwickshire Partnership Trust)

Apologies: Councillor L Harvard

#### **Public Business**

## 1. Declarations of Interest

There were no disclosable pecuniary interests.

#### 2. Minutes

The minutes of the meeting held on 10<sup>th</sup> April 2024 were agreed and signed as a true record.

There were no Matters Arising.

## 4. Community Mental Health Transformation

The Board considered a briefing note and presentation of representatives of Coventry and Warwickshire Partnership Trust, which provided an update on the Adult Community Mental Health Transformation.

The NHS Long Term Plan (LTP) made a commitment to expanding services for people experiencing mental health illness. Following the investment into Community Mental Health Services, the impact meant:

- Individuals would have access to mental health support from a wider network of organisations all working together, in a truly integrated and collaborative culture.
- New care models had been co-produced.
- Increasing access to psychological therapies.
- Improving physical healthcare
- Addressing the holistic needs of the whole person.

The new approach enabled people to take an active role in their care planning and delivery, promoting greater choice and control over their own health and wellbeing.

The commitment of the Coventry & Warwickshire Partnership Trust, was that people would not repeat or re-tell their story or have multiple assessments and led by a trauma-informed approach.

The impact/benefits would be:

- Better access to more people and a wider section of the population.
- Expert multi-disciplinary led assessment and interventions
- Greater geographical reach, to offer service users and their family's choice prior to admission and better access to service which bring care closer to home.
- Closer links with the community and localities, and working in partnership with local voluntary, community and social enterprise (VCSE) and Partner agencies to meet the holistic needs of the local population.
- More responsive, preventing people reaching a mental health crisis and needing admission to hospital. Patients with the most urgent needs could be provided with face to face support within 4 hours if needed.

The Cabinet Member for Adult Services, Councillor L Bigham, welcomed the transformation and the intent to make things better for people through partnership, centring on the person, not the symptoms.

The Cabinet Member for Public Health, Sport and Wellbeing, Councillor K Caan, welcomed the changes in the service, how it would uplift communities and how, through the power of partnership working, psychological therapies suited to the individual was now increasing.

Members of the Scrutiny Board, having considered the content of the briefing note and presentation, asked questions and received information from officers on the following matters:

- To ensure the service was resilient to demand, the following measures had been implemented:
  - o the community offer had been enhanced with new pathways available.

- Psychological interventions now started at primary care level and there was a new offer around complex need.
- New pathways focused on core community teams with integrated ways of working, a fact model allowing a quick response and embedded group interventions.
- Transformation was continuous, responding to people's needs, but focusing on integration and a seamless flow for patients accessing services.
- Access to intervention was a huge focus, and the move from an 18 week referral to a 4 week wait to referral to treatment target was underway meaning a significant difference to a person accessing services.
- Transformation of the pathways had released capacity. Additional monies had been forthcoming, resulting in additional staff being employed and within the Council's Social Care department, 10 new members of staff had been employed to help to support needs.
- Feedback had been sought from patients throughout their transformation journey. Experts by experience had been used to improve provision of feedback.
- Changes had been made to the way people access services with the introduction of 111 for referrals.
- There was a commitment across the partner organisations to ensure services were culturally competent.
- Working from deprivation indexes, the most deprived wards in the city were targeted to ensure there was more provision available and ensuring translators were available and being culturally sensitive and competent.
- Responding to public safety was everyone's responsibility and a new pathway was available through the forensic services and as part of that protection was in place working closely with the police and probation service. Right Care Right Person was also in place, working in partnership with the West Midlands Police Service.
- Expanded community teams were temporarily occupying the former Fennel Day Hospital building.

The Board requested the following information:

• A map of where the mental health support services in Coventry were based.

#### **RESOLVED that the Health and Social Care Scrutiny Board (5):**

- 1) Note the content of the report and the steps being taken to continually strengthen access to community mental health support for Adults and Older Adults, across Coventry.
- 2) Support the recommendations that the pre-existing day service units are permanently closed as they represent a duplication of services now delivered in alternative ways.
- 3) Re-word the mood difficulty terminology on the 'National Ask' slide of the presentation.

#### 5. Adult Social Care Market Position Statement Refresh

The Board considered a briefing note and presentation of the Director of Adults and Housing, which provided an update on the Market Position Statement Refresh 2024.

The Council, NHS Coventry and the Warwickshire Integrated Health Board (CWICB) was striving to develop a diverse, vibrant and high quality health and social care market to meet the needs and aspirations of the people of Coventry who required support now or who may do so in the future.

Effective communication with the market was a key part of market development and sustainability, so that providers were aware of both the challenges facing Adult Social Care and some of the principal areas where needs and demands analyses indicated the requirement for services to be developed.

Market Position Statements were a tool for providing this communication and the production of a Market Position Statement (MPS) for Adult Social Care fulfilled requirements of the Care Act (2014) in relation to market shaping duties.

The MPS focused on current activity and future opportunities across the whole Adult Social Care market and sought to provide a balance between description and analysis.

The document aimed to give clarity about the difference we were looking to make in people's lives. Our role is to support individuals to live as independently as possible, using strengths-based practice, and to ensure that anyone with care and support needs had access to good quality, tailored and reliable support.

Since the publication of the previous MPS, key achievements included:

- Development of an increased supported living offer for adults with learning disabilities and/or autism or those with significant needs associated with their mental ill health which facilitates more independent living.
- Establishment of the Improving Lives Programme, a multi-agency initiative that aimed to improve the way the health and care system responds to emergency needs.
- Increasing visibility of Adult Social Care including through Open Days held in various part of the city.
- A successful bid for Accelerating Reform Grant monies which would be used to fund several projects centred on delivering alternative methods of support with a particular emphasis on supporting informal carers.
- Award of funding to identify and scope the number of international recruits employed in Coventry and Warwickshire, assess the risk to both individual recruits and the wider care market should sponsorship become unstable, and identify a cohort of ethical employers, willing to train, mentor or reemploy displaced International Recruits, migrants, and/or refugees.

The Cabinet Member for Adult Services, Councillor L Bigham, shared that this was an exciting piece of work, demonstrating an interest in the best outcomes for the community whether delivered by internal or external providers.

Members of the Scrutiny Board, having considered the content of the briefing note and presentation, asked questions and received information from officers on the following matters:

- Local provision was encouraged and there was a good number of local providers within the market. A framework of smaller providers was being established which would include ethnic minority groups.
- There were 204 registered care providers in Coventry, with local providers being at the base of the home support provision.
- Fee rates were average within the West Midlands and the majority of providers were happy with the Council level of support.
- A carers plan was in place and more options were being developed to help respite carers. The Reform Fund would support shared lives and a digital solution to ensure carers were aware of all available support was being developed.
- Ensuring excess profits were not being made by the private sector was governed by a fee rate panel and a system was in place to monitor return on profit.
- Whilst the report referred to learning disability and autism and not necessarily a wider definition of neurodiversity, assessments were based on the needs of individuals rather than a named diagnoses.

# The Board requested:

- 1. Clarification on the distribution and number of residential homes by ward.
- 2. A list and description of each type of care provision in Coventry to be circulated.

RESOLVED that the Health and Social Care Scrutiny Board (5) agrees the Market Position Statement for use with the Adult Social Care Market with consideration made for encouraging local and not-for profit suppliers, where appropriate.

# 6. Work Programme and Outstanding Issues

The Health and Social Care Scrutiny Board (5) noted the work programme. Any Other Items of Public Business

RESOLVED that the Health and Social Care Scrutiny Board (5) notes the Work Programme 2024-2025.

# 7. Any other items of Public Business

There were no other items of public business.

(Meeting closed at 1.10 pm)