

---

## SERVICES SCRUTINY COMMITTEE

### 10.01.13

---

**Present:**

**Councillor Dyfrig Siencyn – Chairman**  
**Councillor Peter Read - Vice-chairman**

Councillors: Huw Edwards, Christopher Hughes, Elin Walker Jones, Linda Ann Wyn Jones, Llywarch Bowen Jones, Siôn Wyn Jones, Eryl Jones-Williams, Beth Lawton, Dewi Owen, Liz Saville Roberts, Ann Williams, Eirwyn Williams, Elfed Wyn Williams and R. Hefin Williams.

**Co-opted Members (with a vote on education issues only):** Mr Dylan Davies, Parent Governors' Representative, Meirionnydd

**Officers:** Ann Lloyd Jones (Senior Manager Adult Services), Dafydd Bulman (Gwynedd Telecare Development Manager), Stephen Barnard (Human Resources and Organisational Development Manager), Vera Jones (Democratic Services Manager), Gareth James (Members Support and Scrutiny Manager) and Glynda O'Brien (Members Scrutiny Support Officer).

**Apologies:** Councillors Alwyn Gruffydd, Alan Jones Evans and Selwyn Griffiths (ex-officio Member), R H Wyn Williams (Cabinet Member - Care), Paul Thomas (Cabinet Member - Gwynedd Iach), Rev Robert Townsend (Church in Wales), Mrs Rita Price (Catholic Church), Mrs Rhian Roberts (Parent Governors Representative - Dwyfor), Morwena Edwards (Head of Social Services, Housing and Leisure).

#### 1. WELCOME

The Chairman noted that it was pleasing to welcome Councillors Huw Edwards and Peter Read to the meeting following a recent period of absence due to illness.

#### 2. ATTENDANCE OF CABINET MEMBERS

(a) Before dealing with the scrutiny items, disappointment and discontent were expressed by Members of the Scrutiny Committee that Cabinet Members were not in attendance at the meeting to respond to the Committee's queries stemming from the scrutiny items. Members felt very disgruntled and this proved how worthless the Scrutiny Committees were in their view.

(b) In response, the Chairman explained that he was aware beforehand of the absence of relevant Cabinet Members and they had apologised personally to him as they could not attend due to other important commitments. Consequently, the Chairman had decided to proceed with the Scrutiny Committee despite the fact that Cabinet Members were not available.

(c) Committee Members stressed that in future it should be ensured that Cabinet Members did attend and that no other meetings / training were organised to conflict with the Scrutiny Committees.

**Resolved:** To request that the Democratic Services Manager informs the Managers/Heads to ensure that they do not organise meetings/training on Scrutiny Committees dates in future.

### 3. DECLARATION OF PERSONAL INTEREST

Councillor Eryl Jones Williams declared a personal interest in care issues as his wife received care and he would withdraw from the Chamber if matters regarding this interest were discussed.

### 4. MINUTES

The Chairman signed the minutes of the previous meeting of this committee held on 15 November 2012, as a true record.

### 5. FLEXIBLE WORKING

(a) A progress report was submitted on the next steps to be taken following the completion of the pilot project in Meirionnydd in October 2011.

(b) The Senior Adult Services Manager reported that the intention of the above scheme was to proceed with better joint working between Health Board staff and Council social workers and identify savings by reducing travel costs. Centres were established as part of the scheme within health buildings in Meirionnydd, namely the hospitals of Alltwen, Blaenau Ffestiniog and Tywyn and Surgeries at Bala and Barmouth. This meant more staff in the communities and as a result not as much space was required at the offices in Cae Penarlâg. This also meant that nurses could gain access to Council systems and receive accurate and swift information.

(c) Support was received from the Human Resources Department and the Human Resources Manager explained that the pilot scheme had been successful from the viewpoint of staff. There was no evidence in terms of financial savings in travelling costs, however, notional savings were anticipated in the maintenance costs of two offices in Meirionnydd, approximately £10,000 per annum. It was noted that the cost of establishing the service did not fall on the service but was funded centrally. However, there was evidence that a similar scheme had worked in other authorities with significant savings in terms of travelling costs. In corporate terms, the next step was to submit a report to the Cabinet for consideration to extend the scheme across the Council. The scheme would be funded from a central fund and approximately 200 posts that could be part of the scheme were identified and in turn this would create savings for the Council.

(ch) It was noted that the pilot scheme had expired in Meirionnydd and the practice had been accepted as a permanent arrangement. It was proposed in due course, to extend the scheme across Adult Services in the areas of Arfon and Dwyfor.

Members were given an opportunity to scrutinise the contents of the report and they highlighted the following points:

(i) In response to a query regarding the impact of the scheme's operation on clients, the Senior Adult Services Manager reported that generally people were happy with the scheme and there was no deterioration in service and it was felt that there was better cooperation between the workers.

(ii) Following the above query, it was noted that it would be beneficial for the Scrutiny Committee to receive a further report outlining the measure of the success of the scheme to users.

(iii) Concern was noted following a recent consultation of the service that approximately 76% of customers were unhappy when telephoning Social Services due to the lack of reply, unable to find files etc were noted and it was asked how this would have an impact on the above scheme. The Member was aware of individual examples where an assessment had been undertaken over the phone with a client and the client had not received any feedback. It was stressed that if staff work from home a procedure had to be in place to enable users to telephone them and that equipment was available to divert calls and save messages.

(iv) In response to the above, the Senior Adult Services Manager noted that it was necessary to update the telephone arrangements at Penrallt and also to re-consider the organisation of the Advice and Assessment Team who receive initial telephone calls, located at the Call Centre at Penrhyndeudraeth in order to take advantage of the technology there.

(v) In terms of costs to establish the flexible working scheme in the areas of Arfon and Dwyfor, at the moment it was not possible to be specific regarding the costs, however, the likelihood was that the costs would be similar to the system in Meirionnydd, and the savings would be more.

(vi) The importance that the scheme operated effectively was stressed and that it was not a means of wasting money.

(vii) In response to a query regarding assurance that an user could gain access to appropriate officers who work as part of the scheme. The Senior Adult Services Manager explained that workers who work from home had access to mobile phones. In addition, users could telephone the office in Dolgellau and leave messages with an arrangement that the messages were transferred to officers working from home.

(viii) It was suggested that the Cabinet Member – Care should be requested to submit a progress report regarding the above scheme to the Scrutiny Committee outlining the impact of the policies on service users.

(ix) In response, the Human Resources Manager explained that the intention was to submit a report to the Cabinet for approval to establish a corporate scheme to extend flexible working across all the Council's departments. Following this, the Scheme's operation would be prioritised with the scheme in the Arfon and Dwyfor area being part of those priorities.

(x) In the same manner, information was requested regarding the number of existing Social Services clients since the start of the Council, following the reorganisation of local government with the information to include:

- The open cases

- Permanent cases which receive an annual review
- Cases in residential/nursing homes

**Resolved:** (a) To accept and note the contents of the report together with the above observations.

(b) To request the Cabinet Member- Care submits a progress report to this Scrutiny Committee on the developments of the Flexible Working scheme to include the information outlined in (viii) and (ix) above in order that members are part of the process.

(c) To request that the Cabinet Member – Care provides a report to all the Members of the Scrutiny Committee outlining the information requested in (x) above.

## **6. ENABLEMENT SCHEME AND TELECARE CALLS**

A report was presented as a response to several questions asked regarding the Enablement Scheme and Telecare Calls.

### **(A) Enablement Scheme**

The Telecare Service Development Officer noted that 342 individuals received a period of enablement in Gwynedd during 2011/12 and a target of 425 individuals was set for 2012/13 and by the end of the 2<sup>nd</sup> quarter 232 individuals had been referred via the enablement arrangements. It was added that the service needed to undertake further work to understand the difference in the performance between areas, such as:

- The nature of the referrals
- The response to the cases
- Other factors, e.g. the support available in communities

He noted further that the Service had not asked users about their experiences and it was proposed to undertake this during the year. During 2011/12 a small number of complaints had been received, however, by the end of the 2nd quarter 2012/13 no further complaints had been received.

Members were given an opportunity to scrutinise the contents of the report regarding the above and they highlighted the following points:

(i) A lack of assessment of individuals who arrive home following treatment in Hospitals outside Gwynedd and consequently it appeared that the patients did not receive home care immediately having come home from hospital. The need for Health Boards such as Hywel Dda and Hospitals such as Broadgreen, Manchester to conduct assessments of the patients prior to sending them home in order that they receive the enablement scheme provision immediately having arrived home. The result is that Social Services have to undertake an assessment which means a reduction in the enablement scheme period.

In response, the Senior Adult Services Manager stated that the relationship between the Service and Hospitals outside the County was difficult and the Service would appreciate further discussions with the hospitals regarding how to solve the problem. The officer was of the opinion that a full assessment was not required prior to sending a patient home after treatment, and that some sort of service could be offered to them. She was of the view that the enablement period was an assessment period in itself to see where support can be offered. It was felt that assessments were valuable if they are undertaken in patients' homes. The importance of holding discussions between the Hospitals and Social Services to prevent patients from slipping through the net and consequently not receiving assessments before being sent home.

Stemming from the above, the Chairman noted the importance via the Scrutiny Committee to contact the Health Boards outside the county to express concern regarding the above and request how arrangements could be improved to alleviate problems outlined regarding the assessments of patients sent home from hospital.

(ii) In response to a query regarding who decides what is the period of enablement provision, the Senior Adult Services Manager explained that the Enablement Officer noted during the visit the tasks the patient required with the final decision being the responsibility of the Provider Unit regarding the hours provided.

(iii) In response to an enquiry regarding qualifications/training to carers, the Senior Developmental Manager (Provider Unit) stated that over 50% of the staff had been trained up to Level 2 NVQ and higher and additional training would be organised regarding the enablement scheme. In terms of bilingualism and the use of Welsh, it was noted that there was an expectation for staff to be bilingual, however, difficulties had been encountered in Meirionnydd to attract bilingual staff.

(iv) Stemming from the above response, several Members noted concern regarding the fact that patients did not receive visits from individuals who spoke Welsh considering the pressure there was on the service to try and keep individuals in their own communities and the sensitive and fragile nature of some patients. In addition, concern was expressed that the Council had no arrangements to shadow staff and up to 6 individuals could visit a patient and therefore there was no progression in the service they receive.

In response, the Senior Developmental Manager explained that the service did not have a shadowing procedure and it was noted that they had nearly 10,000 calls a week to undertake and unfortunately the resources did not stretch to offer shadowing arrangements. It was acknowledged that the arrangements meant that staff visited patients that had not been initially introduced to the family.

The Senior Adult Service Manager added that there was an agreement between the Service and external providers by Private Companies and it was expected that they trained staff in accordance with the expected standards.

(v) As a result of the lack of provision in the Welsh Language to service users in Meirionnydd, a Member expressed concern that the Council was failing in its principles as a County to provide a service through the medium of Welsh. Clarification was requested regarding what the Council did to promote the use of Welsh and attract bilingual staff into this field. The Member felt strongly that the use of Welsh should be reflected within the NVQ qualification and that the value of Welsh in the workplace should be discussed with Colleges providing training.

In response, the Senior Adult Service Manager noted that a strategy existed to develop the workforce which included the social care workforce. She was also aware that work was proceeding to look at how providers could be supported especially in the residential sector in order to attract more Welsh speakers.

A Member added that there were situations where patients, especially those suffering from dementia, could not speak English and it was asked what the arrangements were in such circumstances. It was stressed that some of the patients were vulnerable and were not willing to complain.

In response, the Senior Adult Services Manager explained that they had a brokerage arrangement to work out the patients' needs and generally they tried to provide a service for individuals in the language of their preference. However, there were cases where it was not possible to provide a Welsh Language service and a service from English speaking persons had to be depended upon and the only other option was to offer provision for the patient in a residential home whilst accepting that this would not be acceptable every time.

(vii) Stemming from the concerns highlighted by Members, it was suggested that a report should be received from the Cabinet Member to air the linguistic problem further in order to try and resolve this problem.

**Resolved: (a) To accept and note the contents of the report.**

**(b) To request the Senior Adult Services Manager contacts the Health boards outside Gwynedd to express the concern of this Scrutiny Committee regarding the relationship between Hospitals and Social Services and how arrangements to receive patients' assessments for those sent home from hospital can be improved and the need for provision of the enablement scheme.**

**(c) To request the Cabinet Member submits a comprehensive report regarding training and use of the Welsh Language by the social care workforce.**

**(B) Telecare Scheme**

In the context of the Telecare scheme, the Members highlighted the following points:

(i) Officers were questioned regarding the cost of the above scheme for users and the fact that many pensioners could not afford this service and shouldn't they therefore receive the service free of charge. In response, regarding the cost of the scheme to users, the Telecare Service Development Manager explained that it cost £3.20 per week and in light of the fact that the appliances were fairly expensive it was felt that it was fair to ask users to contribute to the cost. The charging policy for this service was part of the service business plan and the view was that it would be reasonable to charge for use. However, as a matter of order any individual was free to submit an appeal to the service regarding payment if they so wished.

(ii) Concern that the Betsi Cadwaladr University Health Board took advantage of schemes such as the above to send clients home from hospital earlier in order to

make savings. An application should be made to the Health Board for a contribution towards the costs of the scheme.

- (iii) That the system should be checked regarding the list of those individuals who had stated that they were willing to act as responders to any calls from users of telecare appliances, as more often than not they tended to be elderly themselves and were not able to respond to any emergency.

In response, the Senior Adult Services Manager explained that whilst accepting the need to look into the suitability of responders, it was the individuals that chose the responders and their tendency was to choose members of the family, who may be elderly themselves.

- (iv) In response to a query regarding expanding the Lleu Unit operated in Penygroes, the Senior Adult Services Manager explained that she had not received full feedback yet, however, she was confident that there would be more specific information available in approximately six months and it would be necessary to consider where similar units could be located in other areas. It was noted that approximately 50% of the individuals who had already attended the Unit had gone back home with a care package or were independent. She added that the users merited up to 6 weeks service free of charge.
- (v) A Member was concerned that if the provision of Units such as that operated at Penygroes was expanded then there would be an opportunity for the Betsi Cadwaladr University Health Board to refer to the service as a social service and was concerned that if it was expanded to the Blaenau Ffestiniog area that it would be an opportunity for the Health Board to close the Hospital.

**Resolved: To accept and note the above.**

## 7. PDA DEVICES

A report was presented by the Cabinet Member – Gwynedd Iach in response to a question on how effective the Community Care Workers PDA devices were across the county.

(a) The Senior Developmental Manager reported that approximately 46% of Community Care Service staff used mobile devices and they were effective and very valuable. The devices are used in order to receive information in relation to service users' care plans and also to monitor the start and finish time of visits..

(b) It was explained that the devices were connected to the Vodafone network provider and in general there were no problems with signal strength, however, it was understood that they did not work everywhere across the County. The Department worked continuously with the company that provides the software in order to seek ways to overcome the shortcomings, however, the solutions were limited without gaining access to a better mobile signal across Gwynedd.

During the ensuing discussion, the following points were highlighted by individual members:

- (i) The Senior Development Manager was asked for figures of the cost of ordering these devices as well as how much savings had been achieved as a result of their use.
- (ii) Disappointment was expressed especially as it was not possible to resolve the problem of receiving a signal to the PDAs across the whole of Gwynedd, and as a result areas in Meirionnydd were losing out.
- (iii) When will these equipment be updated for some more modern ones.

**Resolved: (a) To accept and note the contents of the written response by the Cabinet Member.**

**(b) To request that the Senior Development Manager provides a formal answer to Memers in the context of (i) to (iii) above.**

## **8. ANNUAL WORK PROGRAMME**

(a) The latest version of this Scrutiny Committee's work programme was submitted.

(b) The Chairman reported that an application had been received to convene the Scrutiny Investigation Working Group on Education Quality on 22 January 2013 to discuss a summary of the Authority's Self-Assessment of the Education Authority for an ESTYN survey that will take place during the week 11 March 2013, and to offer opening observations to the Education Service. The Scrutiny Committee was asked if they were happy for the working group to act in this way adding that there was an opportunity for all the Members of the Scrutiny Committee to receive a copy of the Self-Assessment if they wished and to offer comments and refer directly to the Education Service.

(c) The Chairman reported that he had recently attended a useful and informative meeting of the Education Scrutiny Chairs Network in Wales. One of the items raised at that meeting was Safeguarding Children /Adults and linked to this the need was discussed and stressed for Councils, as Scrutineers, to discuss and respond to the review of the Joint Inspections of interagency practices and arrangements to safeguard and protect children stemming from the case in Pembrokeshire. The Chairman was of the view that it would be appropriate for this Scrutiny Committee to receive details of the above investigation and to discuss it further at the next Committee preparatory meeting to be held on 17 January 2013.

(ch) A request was made for the Cabinet Member - Care for information regarding the developments of the Betsi Cadwaladr University Health Board consultation plans.

(d) In response to a query by a Member regarding a report on safety when dealing with asbestos in Council buildings, the Members' Support and Scrutiny Manager noted that the Corporate Scrutiny Committee dealt with such matters as part of their scrutiny investigation.

**Resolved: (a) Approve:**

- (i) For the Scrutiny Investigation Working Group into the Quality of Education to consider and discuss a summary of the Education Authority's Self-Evaluation on 22 January 2013.**



- (ii) That all the members of this Scrutiny Committee receive a copy of the Self-Evaluation giving them an opportunity to refer any individual observations if they wish directly to the Education Service.**

**(b) To request that the Cabinet Member – Care submits background information regarding developments of the Betsi Cadwaladr University Health Board consultation plans to the next preparatory meeting of this Scrutiny Committee to be held on 17 January 2013.**

The meeting commenced at 10.00am and concluded at 12.20pm.