

COUNCIL
28 NOVEMBER 2024

OVERVIEW OF ADULTS SCRUTINY COMMITTEE

1. Since the last meeting of the Council, the following are the main areas of work the Adults Scrutiny Committee has undertaken.

CQC Assurance Framework – Update

2. At the time of the meeting, we were advised that there had been no further progress in relation to a date for this authority's inspection under the Care Quality Commission (CQC) Assurance Framework, despite Officers attempts to confirm a date for the inspection.
3. Members were reassured to learn that casework had been prepared in readiness for inspection, and that this was being continually kept under review to ensure that it remained up to date for any proposed inspection date.

Domestic Abuse

4. The Committee received a report from the Assistant Director – Performance, Transformation and Commissioning, which provided an overview of the requirements of this local authority under the Domestic Abuse Act 2021, and to advise on how this authority is supporting victims of domestic abuse and adhering to the Act.
5. Members learned that Domestic Abuse Act came into force in 2021 and introduced new requirements which local authorities must fulfil. We were advised that the Act created the first statutory definition of domestic abuse to ensure that "domestic abuse is properly understood, considered unacceptable and actively challenged across statutory agencies and in public attitudes". The submitted report identified examples of behaviour which constituted domestic abuse, highlighted the statutory requirements placed on the local authority by the Act, outlined the priorities contained within the 'Domestic Abuse Safe Accommodation Strategy 2021-2024', and informed Members of the actions being undertaken by this local authority to meet its obligations.
6. Concerns were raised in relation to the future funding of support services, and whilst it was noted that funding had previously been made available to the local authority via the Burdens Fund, Members sought assurances that contingency arrangements were in place should future funding not be forthcoming. Members also sought clarification in relation to the role of the Domestic Abuse Housing Options Officer, the level of actual housing stock available, the level of emergency accommodation available and provision under the sanctuary scheme.
7. We were eager to learn more in relation to the actions undertaken in terms of early identification and intervention, as outlined in Priority Two of the 'Domestic Abuse Safe Accommodation Strategy 2021-2024', the work undertaken to encourage the reporting of domestic abuse and to understand the potential barriers to reporting domestic abuse.

Members were keen to understand what more could be done to ensure that the voices of the victims of unreported domestic abuse could be heard. Members were also keen to ensure that all reporting and disclosure of domestic abuse was correctly recorded to support any future action.

8. The Committee entered into discussion on the role that Adult Social Care staff play in identifying domestic abuse, the training provided to allow staff to identify the signs of domestic abuse, and how this identification was integrated into social work practice. We also expressed an interest in scrutinising the performance data in relation to our commissioned partners, specifically in terms of waiting times for dedicated one-2-one therapy, the sanctuary scheme and accommodation.
9. At the close of discussion, focus returned to the uncertainty around the future funding of services, with reference made to the funding of the refuge by Public Health. It was acknowledged that, whilst work was being undertaken to maximise charitable trusts and manage the existing resources, there were potential risks to these services should funding not be forthcoming.

Darlington Care Network for Providers

10. The Assistant Director – Performance, Transformation and Commissioning submitted a report to provide Members with the opportunity to review and consider the provider engagement arrangements in place for Adult Social Care Providers. The report advised of the authority's duties and responsibilities for Adult Social Care, as set out in key legislation such as the Care Act (2014), the Mental Health Act (1983) and the Mental Capacity Act (2005), and that commissioned services support and meet a wide range of adults needs such as frailty, learning disabilities or autism, mental illness and substance misuse.
11. We learned that the Care Act (2014) placed a legal duty on the Council to shape the care market and ensure that there was sufficient care provision to meet the care needs of the people in Darlington. In addition, the authority was obliged to "promote diversity and quality of provision of services", and that these objectives could only be met through active engagement with care providers which promoted effective communication, consultation and co-production. It was noted that the authority had a successful track record of effectively engaging, consulting and communicating with its independent and voluntary sectors, and utilised a number of key forums, programme areas and information sharing approaches to ensure that effective communication and engagement continued.
12. Members welcomed the report and noted the high level of work undertaken to develop and maintain the relationships with our care providers, and reflected on the value that these relationships particularly had during the Coronavirus pandemic.
13. Questions were raised in relation to the support provided for grant applications and we discussed the level of influence the authority had in relation to our providers, and whilst it was acknowledged that the authority could not impose, it was heartening to discover that shared social values were encouraged.

Darlington's Commitment to Carers 2023-28

14. A report was submitted to provide Members with information in relation to Darlington's Carers' Strategy ('Darlington's Commitment to Carers 2023-28') and to provide an update on progress in terms of implementing the Strategy, which had been launched on 17 April 2024.
15. The Committee also received a presentation from the Commissioning Officer, the Chief Executive, Durham County Carers Support, and the Operations Manager, Durham County Carers Support, which provided Members with an overview of the key objectives of the Darlington's Carers' Strategy, the progress made under the Strategy to date, the focus of social media campaigns, and the support available for unpaid carers.
16. Members entered into discussion on the reasons why someone may become an unpaid carer, with it noted that many might feel a 'loving obligation' to take on the caring responsibilities for a loved one or relative, with reference also made to those carers in full-time employment, child carers and elderly carers. We were also keen to learn how Darlington Carers Support promoted the organisation, and whether there was scope for Councillors themselves to promote the organisation. We also scrutinised the number of people who accessed the service, and the factors that qualified carers to receive Carers Allowance.
17. We were keen to learn more in relation to the Hospital Discharge Project, whether any work was undertaken with other hospitals in Darlington and whether the work undertaken with the Darlington Memorial Hospital facilitated a quicker discharge process. Focus was also given to individual needs, the sustainability of discharge and the safety of discharge, especially in light of potential winter pressures.

Performance Indicators Quarter 1 2024-25

18. The Committee received a report which provided Members with performance data in line with an indicator set and Scrutiny Committee distribution agreed by the Monitoring and Coordination Group on 4 June 2018, and subsequently agreed by Scrutiny Committee Chairs. It was reported that the indicators were aligned with key priorities, and that twelve indicators were reported to this Committee, of which eight indicators were reported on at the end of Quarter 1 2024/25.
19. Of the eight indicators reported at this point, one of the indicators showed performance better than at this time last year (ASC002 – Older people aged 65+ admitted on a permanent basis in the year to residential or nursing care per 100,000 of the 65+ population). It was noted that during Quarter 1 of 2024/25 the total number of individuals who moved into permanent residential or nursing care was 38 individuals. This marked a decrease from 47 in 2023/24 and 41 in 2022/23.
20. We were also informed that the average age of individuals moving to permanent residential or nursing care is 86 years-old, which was an increase from the previous two years where the figure was 84 years-old. This reflected well on the work being undertaken to maximise independence and delay dependency.

21. Four indicators were comparable with the same time last year - ASC003 (Adults aged 18-64 admitted on a permanent basis in the year to residential or nursing care homes, per 100,000 population), ASC019 (Percentage of people who have no ongoing care needs following completion of provision of a reablement package), ASC049 (Proportion of people using social care who receive self-directed support) and ASC050 (Proportion of carers using social care who receive self-directed support).
22. Three of the indicators were not comparable and were reviewed at a point in time - ASC208 (Number of Safeguarding concerns (initial enquiries) started – year to date), ASC209 (Number of Safeguarding concerns (initial enquiries) started – per month) and ASC211 (Number of strategy meetings undertaken i.e. concerns progressed to strategy per month).
23. Discussion ensued on the number of adults aged 18-64 years-old who were admitted on a permanent basis to residential or nursing care homes and the challenging complex needs and comorbidities within this cohort. Members were informed that whilst long term residential care is utilised it is not necessarily a placement for life, with regular reviews undertaken and alternative options explored where appropriate. Members were keen to understand the complex needs of these adults, and whether these were primarily physical or mental needs, with Members advised that it was a combination of both.

Climate Change

24. The Committee gave consideration to the recent request from the Cabinet Member with Portfolio for Economy to consider the revised briefing note for scrutiny committees drafted by the Sustainability and Climate Change Lead Officer, in relation to this Council's commitment to tackling climate change. The briefing note reminded Members that tackling climate change was a shared responsibility, and that scrutiny had a critical role to play in these cross-cutting issues.
25. Whilst climate change, as a stand-alone issue sits within the remit of the Economy and Resources Scrutiny Committee, we recognised that everything that the Council does either has an impact on, or is impacted by, climate change, and it is therefore important that all Scrutiny Committees ensure that everything that comes before us has considered this.
26. We recognised that whilst there is probably very little within this Committee's remit that can be done to directly reduce carbon emissions, we can seek to ensure that resilience is built into everything we do.
27. The Committee have therefore resolved to ensure that the questions outlined in the revised briefing note appear as an appendix to our Agenda at all meetings and form part of any submitted Quad of Aims, to ensure that these questions remain at the forefront of Members' mind when scrutinising reports, and that all internal reports coming to this Committee have a section at the end of each report entitled 'Climate Considerations', with a brief note to outline any considerations which have been given to climate change by Officers.

Councillor Andrew Anderson
Chair of Adults Scrutiny Committee