

ADULT SOCIAL SERVICES REVIEW PANEL

Meeting held on Wednesday 5 October 2011 at 5.00 pm

MINUTES – PART A

Present: Councillors Margaret Mead (Chair), Donald Speakman, Jane Avis, Lynne Hale, Pat Clouder

Officers: Hannah Miller, David Vowles (Interim Head of Adult Safeguarding).

Apologies: None

A62/11 MINUTES (Agenda item 1)

RESOLVED: that the minutes of the Adult Social Services Review Panel's meeting held on 19th July 2011 be signed as a correct record.

A63/11 DECLARATIONS OF INTEREST (Agenda item 3)
Councillor Clouder declared a personal interest in agenda item B1 as she assisted a resident affected by the civil unrest in the same road.

A64/11 URGENT BUSINESS (Agenda item 4)
None

A65/11 EXEMPT ITEMS (Agenda item 5)
The allocation of items between Part A and Part B of the Agenda was confirmed and the Serious Case Review Report was to be taken as Part B.

A66/11 SAFEGUARDING VULNERABLE ADULTS-DRAFT ANNUAL REPORT 2010-11 (Agenda item 6)
Officers introduced the report; and informed the panel of a couple of corrections needed to be made. 3.5 refers to Winterborne View was a "Care home"; correction being it is a "private hospital". The officer made special reference to paragraph 3.3 pointing out that the Council now had over 100 dignity champions.

This was the Annual report of the multi-agency Safeguarding Adults Board. It summaries the work and achievements of the

multi-agency board and its sub-groups in 2010-11 and outlines key targets and plans for 2011-12. The report had been to the Safeguarding board and had been agreed last week.

The panel discussed the mental capacity Act (MCA) and Deprivation of Liberty safeguarding (DLS). The Deprivation of Liberty Safeguards, 2009, is now in place for the Council to legally authorise the deprivation of liberty of any individual living in a care home or hospital who lacks capacity where specific conditions are met. The number of requests for authorisation in Croydon has doubled in the last 2 years. This is thought to be due to success in raising awareness for the DLS. Croydon has dealt with this increase well as more staff have been trained. The rate of increase in requests has now settled down. The Executive Director of Adult Services, Health and Housing advised the panel that she is responsible for making these decisions and that she turns down more requests for DLS than she ~~authorises~~authorises.

By reference to paragraph 5.2 the officer was asked for an explanation of the difference between a “complaint” and a “referral” and how this relates to a CQC complaint. Panel was informed that Safeguarding investigations take precedence over complaints. The panel asked a number of other questions including; whether the council has a duty to investigate Care homes where it has no clients? What happens when the Council receives a referral relating to out borough residents? The role of the Council where the CQC is carrying out an investigation ~~and whether~~and whether the Council’s leverage with the homes is regulatory or contractual?

The Panel discussed the importance of the Council and the Care Quality Commission working closely with each other and communicating well. A CQC investigation may sometimes lead to a referral for training. Eighteen (18) multi-agency safeguarding adult awareness courses were provided to staff in Care Homes where there is likely to be in contact with vulnerable adults. 310 ~~staff~~instaff in Care Homes attended the course.

Councillor Speakman made reference to the Winterbourne report. The report he said was disappointing and demoralizing. The report exposes a bureaucratic process with lots of people involved. No spot checks are carried out and no one just drops in. He did not see how the regulatory structure helped at all.

The Executive Director Adult Services, Health and Housing replied by saying that the current position should be seen in its historical context. In the past no one talked about elder abuse and no one was interested. This has now changed and the

process has sharpened people minds. It may be seen as bureaucratic but a referral leads to investigation and to a protection plan which is then monitored. Usually it is because people have not followed procedure that things go wrong. She stressed the importance of raising awareness. Making people aware can help improve the service in care homes. It noted that women in the age group of 85+ had reported allegations of abuse which was 4 times as many allegations as men reported.

Councillor Clouder asked the officers about table 1 (number of referrals of alleged abuse over the last 3 years) on page 5 of the report. There was no equality impact assessment and the table was not broken down properly by gender and ethnicity. She asked if the table could be brought back to the panel with more of a breakdown. Officers agreed to this. The Executive Director replied that the ethnicity figures came out of a study by a BME officer who had done work about Elder abuse in the BME community and found many reasons for underreporting including fear and honour of the family. This makes it difficult to provide accurate reports.

Councillor Avis was concerned that the figures were not complete in that they showed the numbers of staff who had been trained but not the number **not** trained. It would be good to know how many had been contacted but not taken up the training. She shared with the Panel anecdotal evidence from a Care Home in another part of the country dealing with dementia where not one member of staff was trained in dementia. Should there not be a requirement that at least one person should be trained in a Care home? The Executive Director of Adult services, Health and Housing explained that Croydon had 170 Homes. There was a high turnover of staff and therefore it is very difficult to quantify how many ~~staff are~~ **staff are not** trained in those homes. However, where there is a referral the CST would normally offer training as part of the package of support. They have to focus on where things have gone wrong and improve on the matter. There used to be a special training grant in the budget but this no longer exists. The Care Forum had discussed a suggestion that at least one person in each Home should be trained in dementia but this is difficult to enforce.

Following further questions (where does the report get published? Is there a hard copy available to all? Would the report go to the Health & Wellbeing Board (HWBB?) The Panel thanked officers for the report ~~and~~.

RESOLVED that the report be noted. (2) that the Panel be invited to the CST open Day on 28 November 2011 .

A67/11 DATES OF FUTURE SCHEDULED MEETINGS & WORK PROGRAMME (agenda item 7)

The Head of Democratic Services and Scrutiny discussed with the panel the need to have an agreed work programme. This allows the panel to receive reports on all matters within their terms of reference and gives officers early warning of what reports are expected.

RESOLVED: that the report be agreed. And that the following reports will be coming to the panel for the next 3 meetings:

31st January 2012

Progress in implementing Carers' Strategy
Dignity in care Campaign
Homes Causing Serious Concerns Part B
Work Programme

18th April 2012

Personalisation-Progress report
Progress on 'Six lives'
Homes Causing Serious Concerns Part B
Work Programme

July (date to be agreed)

Complaints Report
Homes Causing Serious Concerns Part B
Work Programme

A68/11 PROPOSED DATE OF NEXT MEETINGS (Agenda item 9)

- Tuesday 31 January 2012 at 5pm
- Wednesday 18 April 2012 at 5pm
- July

A69/11 ANY OTHER BUSINESS

None

SUMMARY of proceedings of exempt part B proceedings

(Section 100C(2) LGA 1972 requires a summary to be provided without disclosing the exempt information where in consequence of exclusion of parts of the minutes which display exempt information the minutes of the meeting would not be intelligible as a record

Report B1/11

The report contained details of four Care Homes causing serious concerns. Each home was discussed in turn identifying

why it was causing serious concern and after each discussion the Councils actions on each Home was noted.

A70/11 CAMERA RESOLUTION (Agenda item 10)

RESOLVED: that the Press and public be excluded from the remainder of the meeting on the grounds that it is likely, in view of the nature of the business to be transacted or proceedings to be conducted, that there will be disclosure of confidential or exempt information falling within paragraph 3 of Part 1 of Schedule 12A of the Local Government Act 1972, as amended.

~~ADULT SOCIAL SERVICES REVIEW PANEL~~

~~Meeting held on Wednesday 5 October 2011 at 5.00 pm~~

~~DRAFT MINUTES — PART B~~

~~Present: ————— Councillors Margaret Mead (Chair), Donald Speakman,
————— Jane Avis, Lynne Hale, Pat Clouder~~

~~Officers: ————— Hannah Miller, David Vowles (Interim Head of Adult
Safeguarding).~~

~~B1/11 SAFEGUARDING ADULTS SERVICES (Agenda item B1)~~

~~From 1 April 2011 all London Boroughs adopted the new pan-London safeguarding policy, “*Protecting adults at risk: London multi-agency policy and procedures to safeguard adults from abuse*” This report gives information and updates regarding those care homes currently being monitored through the serious concern protocol, and supported by the Care Support Team~~

~~The report contained details of four homes causing serious concern.~~

~~The panel discussed each home in turn, and the actions taken by the authority. It was reported that the Community Support Team (CST) is now working with over 20 Homes only a small number has serious concerns. Some of them are self referrals. Croydon is unique in having a CST. In other areas, the CQC can recommend training but only in Croydon is there a team able to provide that support on request. This practical support stops things from getting worse. When CST first started there were 35 homes in the system. Now they are much reduced. Officers felt the CST is not praised enough for their work. We also need to highlight the work that they do. Three quarters of GP's were not aware of the service when surveyed. There is to be an open Day on 28 November to show case the work of CST. Panel Members asked for invitations to be sent to them. The four homes were as follows:~~

~~Home A was a Care Home for older people (Registered for 54 beds. This Home had gone into receivership and the Council was working with the receivers who were hoping to sell the home as a going concern with new owners.~~

~~Home B was a house which had been registered with the Care Quality Commission as a care home but had allowed the registration to lapse. The house was therefore operating as an unregistered care provider~~

~~Home C was Home — a registered care home for people with mental health needs. The CQC conducted a compliance inspection at the home on 30 March 2011. The outcome of this inspection is now in the public domain. The Care Support team has identified a planned intervention action plan with the manager and training is on going~~

~~Home D was care home for people with learning disability w from where a resident was admitted to hospital and subsequently died. A CQC report is in the public domain.~~

~~The Care Support Team has now agreed a Planned Intervention Programme with the home and has commenced work with the organisation~~

~~———RESOLVED: that the panel note the account of those care homes with serious concerns, and the actions being taken by the Council.~~

~~The meeting ended at 6.14 pm~~