

At a meeting of the SUNDERLAND ADULTS PARTNERSHIP BOARD held in the CIVIC CENTRE (COMMITTEE ROOM NO. 1), SUNDERLAND on TUESDAY 8 NOVEMBER 2011 at 2.30 pm.

Present:-

Councillor Dave Allan (Chairman)	- Sunderland City Council
Councillor Pat Smith	- Sunderland City Council
Karen Graham	- Office of the Chief Executive
Sharon Lowes	- Health, Housing and Adult Services
Graham King	- Health, Housing and Adult Services
Ailsa Martin	- Voice for Carers
Gill Charman	- Disabilities Alliance, Sunderland
Don Stronach	- Northumberland Tyne and Wear NHS Foundation Trust
Gill Lawson	- Health, Housing and Adult Services
Alan Patchett	- Age UK, Sunderland
Tricia Doyle	- Headlight
Jane Hibberd	- Office of the Chief Executive
Dianne Boardman	- Corporate and Commercial Services
Pippa Corner	- Health, Housing and Adult Services
Graham Burt	- City Services
Victoria French	- City Services

Apologies for Absence

Apologies for absence were received from Councillor Morrissey, Trueman and P. Watson and Tricia Doyle and Martin Barry.

Minutes

16. RESOLVED that the minutes of the meeting held on 13 September 2011 be confirmed and signed as a correct record.

Health and Social Care Funding Consultation

The Board considered a report by the Head of Strategy and Policy, People and Neighbourhoods to inform the board about the Government engagement exercise on

the future of health and social care and to seek the board's view on how to respond to the engagement exercise.

Karen Graham, Assistant Policy Lead for Health introduced the report and advised that the Department of Health had produced an engagement paper asking for views on the future of health and social care.

The Board was asked to consider the below options for responding to the engagement exercise;

- a) Board members to consider the questions outlined in the engagement exercise and respond on an individual basis;
- b) A workshop session to discuss the engagement exercise and formulate a response

The board was also asked to consider which themes it considered relevant and any other groups it felt needed to be included in providing a response.

Neil Revely, Director of Health, Housing and Adult Services clarified that the engagement exercise the Board were being asked to respond to at this stage did not relate to funding, although the two did run alongside each other.

Following discussion, Board members felt that a workshop would be the most beneficial approach with which to provide a collective response. An important theme to consider would be how organisations in the NHS and local government deliver integrated services for the benefit of local users of services.

17. RESOLVED that a workshop be arranged for the Board to discuss the health and social care consultation.

Carers Strategy Refresh

The Board considered a report by the Head of Strategy and Policy, People and neighbourhoods to seek the Board's approval of the proposed methodology and timescales for refreshing the Sunderland Carers' Strategy; and to receive the draft refreshed strategy for consideration following developmental process.

Jane Hibberd, Head of Strategy & Policy People & Neighbourhoods presented the report and detailed the proposed timescale:

Early November: Task and Finish group convened to establish headline priorities

Mid November to mid January; engagement process (front loaded to take account of Christmas holidays)

Mid to end January: production of draft strategy

February to mid March: 6 weeks formal written consultation

End March: amendments to draft documentation

April and May: Reports going through approval process

Week commencing 18 June: officially launch the strategy during Carers' week 2012

In response to a question from Ailsa Martin regarding concerns that the 8 week period would not be long enough given the Christmas holidays, Jane Hibberd gave assurances that active engagement would commence as soon as possible. Graham King advised that information be received from the JSNA would also be drawn upon.

It was therefore:-

18. RESOLVED that the contents of the report be received and noted and:
- i) the proposed methodology and timescales as laid out in the report be agreed, and;
 - ii) the Board receive the draft refreshed strategy for consideration following the developmental process

JSNA Update

The Board considered a report from the Project Manager, Office of the Chief Executive to provide an update on the Joint Strategic Needs Assessment.

Dianne Boardman, Project Manager advised that an event was held on 18th October at the Quayside Exchange, Sunderland, specifically for the Voluntary & Community Sector (VCS) with the main message to raise awareness of the JSNA, whilst the JSNA process has been around for a number of years this was the first time an event had been arranged with the VCS.

All information collated was in the process of being passed to profile leads for inclusion in the profile and summarised in a report for attendees. Neil Revely suggested that the Board consider a couple of profiles at a future meeting to ensure joint ownership of the profiles and use the process as a tool to build relationships across the adult field.

Ailsa Martin thanked Dianne Boardman for the opportunity to engage with the Voluntary Community sector, she noted in the list of bodies that some were regional and queried how this would be Sunderland focused.

Jane Hibberd advised that quality analysis on each template should help to alleviate concerns by looking at individual groups and the impacts of actions.

Victoria French queried who would be carrying out the cross checking process and was advised that the intelligence hub would undertake that piece of work.

Alan Patchett enquired whether reference had been made to strategies already in existence such as the 50+ Strategy and the Dementia Strategy. There needed to be

reassurances that there was an understanding of what underpinned the profiles and how cross cutting issues were being dealt with.

Karen Graham advised that all comments would be passed on to the profile leads. Comments would have to be included in the JSNA, and if not then the relevant person would be contacted and given an explanation why.

Pippa Corner advised that the JSNA would inform the Health and Well Being Strategy and comments will be seen to have been incorporated by examining the impact of the assessment and the strategic changes that are made as a result.

Ailsa Martin commented that it appeared that year on year people were being told "we will get it right next year". Accordingly the JSNA felt very much like a strategic document that was consistently playing "catch up".

Neil Revely advised that it was up to the group, as part of the key advisory board to guide and influence development and change. It was important to engage at the right level to make sure that the final product was something that could be owned.

19. RESOLVED that the contents of the update be received and noted.

Health and Wellbeing Board Agenda

The Board considered a report by the Executive Director, Health, Housing and Adult Services to consider the draft Sunderland Early Implementer Health and Well Being Board for 25 November 2011.

Neil Revely advised that the report had been included on the agenda to facilitate discussion on how the interface would work between the Health and Wellbeing Board and the Adult Partnership Board.

Discussion ensued in relation to the role of the Board. Neil Revely suggested that a workshop is convened to discuss how to operate in the future.

20. RESOLVED that a workshop be arranged to discuss and review the current roles and responsibilities of the group and establish how the Board will develop into its new role as an advisory group to the Health and Wellbeing Board.

Annual Complaints Report

The Board considered a report by the Executive Director, Health, Housing and Adult Services to advise the Board of the Statutory Complaints and Representations Annual Report for 2010-2011.

Graham King highlighted the key messages and advised that During April 10 - March 11 Adult Services received 8780 new client referrals. This number did not include

those already in receipt of a service from the directorate and so did not truly reflect the number of contacts undertaken on a daily basis with service users. For example those receiving home support, meals at home or attending day services.

From these contacts a total of 125 complaints were received in respect of Adult Services.

Complaints were down in number this year by 26%.

Complaints directed against staff had always been one of the top reasons for complaints, but this year there had been a significant decline in the numbers made, even when taking into account the overall drop in complaints for this period.

In last years report it was noted that a growing area of dissatisfaction was the disagreement with the outcome of assessments. It was felt this was linked to customer's expectations and staff had been reminded of the need to manage such expectations effectively if this level of satisfaction was not to rise further. Complaints in this area had almost halved in number for this period.

Issues in respect of finance and in particular arrears remained a feature and was one of the few areas of complaint that had seen an increase this year. Generally these complaints did not raise issues about the quality of the service provision.

Areas such as the quality of service provision; not being kept informed; and lack of choice or support had all seen a rise in the number of complaints made.

Complaints about care practice issues had seen an increase to the point where this was now the main issue of complaint. These complaints were often about external services commissioned by the council.

Ailsa Martin informed the Board that Voice for Carers had picked up on a number of issues with regard to complaints. Sunderland did not have a culture of complaining and Voice was keen to see a culture of constructive criticism as opposed to formal complaining. Furthermore it was apparent that people were never sure how to complain about a commissioned service. There were concerns about advocacy with people with learning difficulties and what would happen to Patient Advice and Liaison Services (PALS) who provide information, advice and support to help patients, families and their carers.

Graham King agreed to feed the comments back to the team and advised that the commissioning issues were being looked into.

Carol Harries advised that there were no plans to remove the PALS service.

Neil Revely advised that a reduction in complaints was not necessarily a good thing as the Directorate would want to hear complaints in order to improve. It would be difficult for health and social care to address an individual's inherent reluctance to complain.

21. RESOLVED that the contents of the report be received and noted.

Signed D. Allan,
Chairman.