

**At a meeting of the ADULT SOCIAL CARE PARTNERSHIP BOARD held in the CIVIC CENTRE (COMMITTEE ROOM NO. 1), SUNDERLAND on TUESDAY 13 SEPTEMBER 2011 at 2.30 pm.**

**Present:-**

Councillor Mel Speding (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

**Apologies for Absence**

Apologies for absence were received from Councillor Allen, Morrissey, Trueman and P. Watson and Victoria French, Julie Gray, Andy Stewart, Carol Harries, Gillian Gibson, Beverley Scanlon and Martin Barry.

**Minutes**

10. RESOLVED that the minutes of the meeting held on 12 July 2011 be confirmed and signed as a correct record.

**An Information Revolution: Consultation Response**

The Board considered a report by the Head of Strategic Commissioning to present to the Board the findings from the Information Revolution Consultation and present the next steps in delivering the Information strategy. The Board had agreed in November 2010 to submit a response to the consultation.

Graham King introduced the report and advised that over 700 responses were received to the consultation. The main responses were outlined in the report.

The Information Strategy, to be published following on from the consultation, would form the Government's formal response to this consultation and will draw on views expressed through the consultation process and through the subsequent listening exercise.

The NHS Future Forum was now considering how it could best inform development of the forthcoming Information Strategy, taking the responses to the Information Revolution consultation as the starting point for this further work.

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

### **Carers Strategy: Recognised, Valued and Supported**

The Board considered a report by the Senior Manager, Sunderland Carers Centre to provide an update to the Board regarding the Carers Strategy in relation to the national refresh and to request discussion regarding the implementation of the strategy at a local level.

Ailsa Martin introduced the report and advised that the refreshed national Carers' Strategy – "Recognised, valued and supported" – gives Sunderland an opportunity to revise the local strategy rather than just refresh it. This was particularly important because of Council and NHS re-structuring and the new ways of working, including Sunderland's commitment to implementing personalization. In the light of the above any such revision should be overseen by a new Multi Agency Carers Strategy Partnership operating at a strategic level which could then decide on the appropriateness or otherwise of an implementation group and its remit.

The Adult Social Care Partnership Board had responsibility for the Carers' Strategy but there was no longer a strategic group, only an implementation group, to report to the Board. Similarly, with restructuring there was not a multi-agency group which included carers at a strategic level focusing only on carer issues. The revision would allow this to be addressed.

The report set out some priorities and tasks which Sunderland Carers' Centre would like to see included but only if any new plan is owned by a strategic partnership which includes carers.

A study by The Princess Royal Trust for Carers found that many carers had admitted that looking after loved ones had damaged their health.

Mr Revely commented that there was commitment from Sunderland to get back on

board as a strategic partnership with the reformation of an appropriate strategy group and he enquired whether there was an existing forum that could be used for this purpose.

Ailsa Martin advised that there had been some anxiety that Sunderland had gone for a small Health and Well Being Board and it was important that the Carer's voices were heard and were not marginalised into the broader 'Voice'.

Ailsa Martin also advised that there was some confusion over how information would be shared and who would lead with overall responsibility.

Neil Revely advised that from a Council perspective, Health Housing and Adult Services and Children's Services hold strategic responsibility. Strategic leads would call upon the central Policy Team to carry out work for individual directorates.

Pippa Corner, Head of Personalisation stated that there were 3 ways to communicate: multi-agency (at a high level), operational and engaging and involving carers, the latter being more difficult to achieve within official groups.

Neil Revely advised that the Adult Social Care Partnership Board would still be the Strategic Partnership Group for the Carers Strategy and could therefore agree to commission a multi agency group to carry out a refresh. This would be taken to the Health and Wellbeing Board as a recommendation.

It was therefore:-

12. RESOLVED that Ailsa Martin, Neil Revely, Graham King and Pippa Corner meet to discuss setting up a Multi Agency Carers Strategy Group.

## **Benefits Update**

The Advice Services Manager within Health, Housing and Adult Services and the Strategic Change Manager presented a verbal update to the Board on the latest benefit changes. At the Board in July a report was presented detailing the Strategic Plan for Welfare Rights. The Board asked for an update regarding the latest benefit changes.

Joan Reed and Richard Elliott informed the Board that the Welfare Reform Programme was calculated as saving £18 billion per year by 2014-15 and details were provided in relation to the impact on working age adults, people with a disability and carers, children and young people and pensioners.

In response to an enquiry from Mr Alan Patchett, Age Concern regarding whether the Universal Credit was means tested on household income, Mr Elliott advised that it was.

Mr Alan Patchett advised that a move to benefit claims and ongoing maintenance to online delivery for the majority of claimants would cause a problem with older people.

Richard Elliott advised that there was still a lot of detail to be worked up. The online delivery would be tested as a pilot and additional support would be provided if necessary.

Joan Reed advised that the biggest challenges centred on disseminating factual information to people and mitigating potential negative outcomes for those affected.

A Welfare reform Task Group would be established to develop intelligence and coordinated local responses to help lessen impacts. The Group was being set up by the Commercial and Corporate Services Directorate and as yet the membership had not been agreed. The Group would prioritise where to focus its efforts based on any changes that were currently happening or about to be implemented.

Work would be done to improve financial inclusion to help residents make best use of the money they do have and prepare them for changes.

Alan Patchett stated that the Health and Well Being Board would need to keep a very close eye on the impact of the changes particularly around mental health and start planning as soon as possible and make some recommendations.

Discussion ensued in relation to paid employment and the difficulties it caused for people with long term disabilities and carers. If disabled people were to move onto to employment allowance from other benefits, it does not take into consideration that many claimants in the long-term job seekers group will have significant barriers to work. Furthermore there were few jobs available.

Neil Revely suggested that the health impacts of the changes be considered in greater detail and a number of recommendations and draft terms of reference be brought back to a future meeting of the Board.

13. RESOLVED that

- i) the contents of the report be received and noted, and
- ii) that the health impacts of the benefit changes be considered in greater detail and a number of recommendations and draft terms of reference be brought back to a future meeting of the Board

## **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.

Diane Boardman reminded the Board that in 2007 the Government introduced the statutory requirement for a Joint Strategic Needs Assessment (JSNA) to be produced by each Local Authority and Primary Care Trust (PCT). The JSNA was expected to describe the future health, care and well-being needs of local populations and the strategic direction of service delivery to help meet those needs.

Directors of Public Health, Adult Social Services and Children & Young People's Services were jointly responsible for the development of the JSNA.

The process of refreshing the assessment for 2011 was underway and a greater engagement process was due to commence with the wider community.

Neil Revely advised that there was an expectation the JSNA would come via this Board prior to going to the Health and Wellbeing Board and gave assurances all stakeholders would be involved.

Ailsa Martin commented that there was a general message that if issues were not highlighted in the JSNA then they would not be funded.

Neil Revely advised that the JSNA was a live document and as such was continually assessed. The assessment sets out the intelligence behind the commissioning intentions. He agreed to feedback comments to the Health and Well Being Board.

14. RESOLVED that the update be received and noted.

### **Feedback from Health and Wellbeing Board and Future Reporting Requirements**

The Board agreed to consider agenda items 7 and 8 together.

The Board considered a verbal report regarding discussion that had taken place at the most recent Health and Wellbeing Board.

Neil Revely advised the Board of the agenda items discussed at the Sunderland Early Implementer Health and Wellbeing Board which included setting out the proposals for the development of the Board in Sunderland.

Discussion ensued in relation to the role of the Adult Social Care Partnership Board in relation to the Health and Wellbeing Board.

Alan Patchett felt that the new proposals for the development of the Health and Well Being Board provided an opportunity to enhance decision making, however it was important to reconsider the role of the Board to ensure it was a true driver in influencing the role of the Health and Well Being Board. He commented that the Adult Social Care Partnership Board needed to be less formal.

Referring to the User Group headings detailed in the additional report for circulation, Ailsa Martin advised that there were some issues around who providers were and how valid their voice was. Headlight were the user group for mental health, but Mind were also a leading mental health organisation. Such lack of collective working meant validity was being lost.

Pippa Corner suggested that the Terms of Reference are revisited by the Board to ensure organisation/sector/user groups were still effective in achieving the purpose of the Board.

Ailsa Martin requested reaffirmation that the Group was not simply an endorsement of reports but was able to make credible recommendations. She also requested that consideration of the new Carer's Strategy take into account a Carer's perspective and their views were taken equally seriously. Working groups needed to be inclusive and effective with all partners given a chance to sit around the table.

Neil Revely suggested that a small number of Board members review the membership and identify any gaps in service user representatives.

15. RESOLVED that:

- i) the report be noted, and
- ii) a small number of Board members review the membership and identify any gaps in service user representatives.

Signed M. Speding,  
Chairman.