

CITY AND COUNTY OF SWANSEA

MINUTES OF THE SAFEGUARDING POLICY DEVELOPMENT AND DELIVERY COMMITTEE

**HELD AT COMMITTEE ROOM 5, GUILDHALL, SWANSEA ON
WEDNESDAY, 16 AUGUST 2017 AT 4.00 PM**

PRESENT: Councillor C R Doyle (Chair) Presided

Councillor(s)

S J Gallagher

Y V Jardine

Councillor(s)

P R Hood-Williams

E J King

Councillor(s)

L James

K M Roberts

Officer(s)

D Howes

S Jones

C Sivers

S Woon

Chief Social Services Officer

Social Services & Wellbeing Act Strategic Lead, Social Services

Director of People

Democratic Services Officer

Apologies for Absence

Councillor(s): J P Curtice, E T Kirchner and M Sykes

11 **DISCLOSURES OF PERSONAL AND PREJUDICIAL INTERESTS.**

In accordance with the Code of Conduct adopted by the City and County of Swansea, no interests were declared.

12 **MINUTES.**

RESOLVED that the Minutes of the Safeguarding Policy Development & Delivery Committee held on 19 July, 2017, be approved as a correct record.

13 **ETHICAL CARE CHARTER.**

The Chief Social Services Officer presented a report which detailed Officer advice regarding the timescale and means by which the commitment to implement Unison's Ethical Care Charter could be delivered.

He stated that there were a number of factors to take into account when constructing the route map for implementation and Unison had accepted that the implementation of the Ethical care charter should be staged.

He reported that Cabinet had already agreed to implement the recommendations of the commissioning review into how domiciliary care should be commissioned and delivered in the future. Whilst the process for implementing those recommendations has begun particularly in relation to remodelling the Council's in house service, full implementation of those recommendations would take approximately 12 to 18 months. There was an opportunity, wherever possible, to include the standards set

out in the ethical care charter within the new service specification for externally commissioned domiciliary care.

It was noted that the Welsh Government had charged Social Care Wales with developing a 5 year strategy for how care at home should be provided in the future. Therefore, there may be recommendations that impact on the terms and conditions of domiciliary care staff going forward.

The local domiciliary care market was currently extremely fragile. Capacity to meet current demand is the most stretched it has ever been. The Council is both directly providing and externally commissioning more domiciliary care than it has ever done previously. We have had a number of provider failures in the past couple of years which has increased fragility of the market even further. In establishing the timescale for implementing the ethical care charter the Council must avoid inadvertently increasing the fragility of current arrangements.

The safest and most appropriate way to avoid any risk of inadvertently increasing fragility of the market is to coproduce the new service specification by involving citizens, staff and providers through the process. This coproduction principle will need to be extended to include how the standards within the ethical care charter can be incorporated into that service specification. The coproduction approach can be further enhanced by involving all the Unions, not just Unison, and nominated members of the PDDC.

The Council also need to ensure that social services remain financially sustainable going forward. Inflationary pressures in adult services are such that like for like care continues to cost significantly more year on year. Increased demand linked to changing expectations and demographic pressures adds even further to that inflationary pressure and as a result the cost of adult services continues to rise. In a context of a likely reduced revenue support grant, year on year increases in spend will not be sustainable. The costs of domiciliary care have already increased significantly as a result of increases to the national living wage. Some additional grant funding has been provided by Welsh Government but this grant funding will be subsumed into the revenue support grant next year. If the overall revenue support grant is reduced, the financial pressures on the Council will remain a significant challenge. Further increases to the living wage are expected in 2020. At this stage the Council's priority will need to be to work with providers to ensure financial sustainability of their services whilst meeting their legal responsibility to pay the national living wage. By 2020 this is expected to exceed that which is set currently by the Living Wage Foundation but clearly the Living Wage Foundation may stipulate an ever increasing rate in excess of that stipulated by national government.

The Council had previously considered and rejected implementing the Living Wage Foundations living wage. Any intention to revisit that decision for one sector of the workforce would have implications for the rest of the workforce both Council and externally commissioned.

Taking all of the above factors into account, it should be possible through a carefully managed process of coproduction to establish a service specification for the new commissioning framework for domiciliary care that includes all of the standards

contained within part 1 and part 2 of the ethical care charter without increasing fragility of the domiciliary care market. In addition to this, it should also be possible to include an additional question for providers as part of the subsequent procurement exercise that requires them to provide an explanation as to how they intend to ensure that staff are supported to be fit and well whilst in work. A provider will clearly score higher against this question if they have an occupational sick pay scheme and therefore this starts to begin the process by which the Council moves towards compliance with stage 3 of the charter.

Following the logic of the above and working backwards from when we will be ready to undertake the procurement exercise, the route map for implementing the ethical care charter becomes:

- April 2019: Completed the transition of all externally commissioned domiciliary care onto the new framework.
- September 2018: Complete procurement exercise to select preferred providers assessed as able to meet the new service specification including scoring against elements of stage 3 of the ethical care charter.
- May 2018: Service specification agreed incorporating the standards set out in stage 1 and 2 of the ethical care charter.
- September 2017: Begin the co-production process for creating a fit for purpose service specification with citizens, staff, providers, unions and members of the PDDC for safeguarding.

Whilst every effort will be made to shorten the above timescales, the overriding consideration must be a safe transition to a new framework that doesn't jeopardise the safe care of individuals or further increase instability of the domiciliary care market. There have been examples including in Wales where the transition to a new framework has gone disastrously wrong and subsequent reviews highlighted lack of planning and rushed implementation as the key lessons learned.

In response to Member questions, the Chief Social Services Officer stated that:

- 1) A Consultation process would take place with the PDDC, Unions, Staff and Citizens.
- 2) Advice had been sought from other Local Authorities who had undertaken the process which had resulted in different proposals being submitted.
- 3) Detailed planning would commence in September regarding the process for engaging citizens.

Councillor E J King presented findings in respect of research regarding the implementation of the ethical care charter in four local authorities, two of which were at a similar stage to Swansea.

RESOLVED that:

- 1) Councillor E J King forward details of his research to the Democratic Services Officer for distribution to Committee members; and
- 2) The actions and timescales proposed in the route map are accepted as the means by which the City and County of Swansea fulfil its commitment to implement the Ethical Care Charter through a staged approach.

14 **WORK PLAN 2017-2018.**

The Chair presented the work plan for 2017 – 2018. He referred to future meetings lasting two hours and highlighted items for consideration at the meeting on 20 September, 2017.

He reminded colleagues of their commitment in relation to the meeting on 18 October, 2017, where Members had been tasked with researching their localities, other authorities and present their findings at the following meeting in relation to the term 'Super Joined Up Around Children'.

In response to Member questions regarding the term and what was required of them, the Director of People stated that the work plan had been developed with the Chair and Cabinet Member and focussed around a limited number of key priorities which attempted to move away from Officer presentations and sought to encourage collaborative working between Members and Officers.

The Director of People cited an example in England where the term 'Super Joined up around Children' would apply when social services, education and health worked jointly towards an integrated plan. Members were encouraged to consider their own experiences where organisations had worked well together to achieve this aim or provide their views on how this may be achieved.

RESOLVED that the work plan be **NOTED**.

The meeting ended at 4.48 pm

CHAIR