



City and County of Swansea

## Minutes of the **Scrutiny Performance Panel – Adult Services**

Remotely via Microsoft Teams

Wednesday, 12 January 2022 at 4.00 pm

**Present:** Councillor S M Jones (Chair) Presided

**Councillor(s)**

H M Morris  
J W Jones

**Councillor(s)**

P R Hood-Williams  
E T Kirchner

**Councillor(s)**

Y V Jardine

**Co-opted Member(s)**

T Beddow

**Other Attendees**

Mark Child

Cabinet Member - Adult Social Care & Community Health Services

**Officer(s)**

David Howes  
Liz Jordan

Director of Social Services  
Scrutiny Officer

**Apologies for Absence**

Councillor(s): C A Holley

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**1 Disclosure of Personal and Prejudicial Interests**

No disclosures of interest were made.

**2 Prohibition of Whipped Votes and Declaration of Party Whips**

No declarations were made.

**3 Minutes of Previous Meeting(s)**

The Panel agreed the minutes of the meeting on 30 November 2021 as an accurate record of the meeting.

**4 Public Question Time**

No questions were submitted.

**5 Update on Management of Covid-19 Pandemic and Performance Monitoring**

Mark Child, Cabinet Member for Adult Social Care and Community Health Services and David Howes, Director of Social Services attended to brief the Panel on the current position.

Discussion Points:

- Cabinet Member stated how fantastic staff, colleagues and other organisations had been over last two years.
- Effects of omicron have been a real problem.
- A presentation by the Health Board, given to Councillors the previous day, was very encouraging and demonstrated closer working between all partners over the last two years.
- Director hopes to circulate report on performance monitoring this month outside of meeting and to return to more normal structure for future meetings.
- Consequence of catching Covid-19 is currently far less. Main issue for the Directorate has been number of staff having Covid or being a close contact and having to isolate.
- There has not been a significant jump in infection into most vulnerable cohort. Small number of staff in care homes testing positive but have not seen significant jump in infections in residents. Suggests learning around protective measures has worked. More cautious about admissions to care homes. Negative result of this is slowing down transfer from hospitals to care homes which is adding pressure on hospitals. Particularly issues with EMI provision.
- Still pressures on domiciliary care due to reduced staff numbers. Have not seen continued hand-backs from providers which is good. In Swansea backlog of approximately 40 individuals in hospital as unable to sort domiciliary care offer for them. Hopeful of potential increased capacity with in-house domiciliary care services.
- Trying to add further cover to in-house residential offer. If enough health and care staff can be found, may designate one in-house home to provide step-down provision, which may enable EMI individuals awaiting provision to leave hospital.
- Concern about individuals in the community who have highest level of need. Need to plan for extreme situation of not having enough staff. An in-house home may be designated as a place these individuals could move into, but it would require staffing by residential health care staff.
- Across the rest of in-house residential provision, if have catastrophic failure, have physical space to create bed capacity across other homes but would depend on being able to move other staff around. This is currently being worked through.
- In terms of social work, workforce further depleted by Covid infection but most able to carry on working from home as infection does not appear as serious.
- Panel queried if Adult Services has same problems with staff shortages as have in Child and Family Services. Informed there are issues, mainly in domiciliary care resilience, particularly for externally commissioned providers. Have significant shortfall in number of carers needed in the external market. Two-pronged approach going forward, will support external providers to recruit more but also look to increase in-house offer. Difficulties in recruiting and retaining social workers in Adult Services.

- Panel sought clarity on number of people awaiting discharge from hospital, whether it was 40 in total or 40 waiting for a particular package. It was confirmed approximately 280 individuals currently deemed medically fit for discharge. Approximately 140 of these could be supported out of hospital beds now if the Authority's community services were organised. Of these only 80 have been referred and 40 of the 80 are awaiting domiciliary care. Majority of the rest are waiting for EMI beds. These 40 are not the only ones waiting for a domiciliary care package, there are other individuals, probably around 200 altogether.
- Panel queried, in terms of health and social care, what we are going to class as 'good' when we come out of Covid. Hope is it will get significantly better after Covid but do not know whether it will be 'good'. There have been small steps towards this in recent years, but efforts need to be accelerated in next few years.
- Convener emphasised once again how grateful the Panel is to all staff and stated how very fortunate we are in Swansea.

## **6 Work Programme Timetable 2021-22**

Panel discussed items scheduled for the next meeting on 02 March 2022.

The meeting ended at 4.55 pm