

CENTRAL BEDFORDSHIRE COUNCIL

At a meeting of the **SOCIAL CARE, HEALTH & HOUSING OVERVIEW & SCRUTINY COMMITTEE** held in Council Chamber, Priory House, Monks Walk, Shefford on Monday, 29 April 2013.

PRESENT

Cllr Mrs R J Drinkwater (Chairman)

Cllr N J Sheppard (Vice-Chairman)

Cllrs R D Berry
D Bowater

P A Duckett (from Item 11)

Cllrs Mrs S A Goodchild
M A Smith

Apologies for Absence: Cllrs Mrs G Clarke
Mrs D B Gurney

Substitutes: Cllrs Miss A Sparrow (In place of Mrs G Clarke) (from
Item 11)

Members in Attendance: Cllrs P N Aldis
C Hegley
A M Turner
Executive Member for
Social Care, Health &
Housing
Deputy Executive
Member for Social Care,
Health & Housing

Officers in Attendance: Mrs P Everitt – Research and Business Support
Officer
Mr P Groom – Head of Commissioning (Adult
Social Care)
Mr J Holman – Head of Housing Asset
Management
Mr C Lister – Head of Preventative
Commissioning
Mr N Murley – Assistant Director Business &
Performance
Mrs J Ogley – Director of Social Care, Health and
Housing
Mr J Partridge – Scrutiny Policy Adviser
Mr S Rees – Assistant Director Adult Social
Care
Mr P Rix – Associate Locality Director for
Mental Health Central
Bedfordshire

Others in Attendance Ms R Featherstone Chair - Healthwatch
Central Bedfordshire
Ms J Meggitt Director of
Communications &
Engagement

SCHH/13/1 **Minutes**

RESOLVED

That the minutes of the meeting of the Social Care, Health and Housing Overview and Scrutiny Committee held on 04 March 2013 be confirmed and signed by the Chairman as a correct record.

SCHH/13/2 **Members' Interests**

- Cllr Mrs Goodchild declared an interest as a member of her family was a service user.
- Cllr Bowater declared an interest as he was a governor of SEPT

SCHH/13/3 **Chairman's Announcements and Communications**

The Chairman welcomed Members and the Chairman of Healthwatch Central Bedfordshire to the meeting and informed the Committee of a new Centre for Public Scrutiny publication titled "Spanning the System" to which the Council had provided input.

SCHH/13/4 **Petitions**

No petitions were received from members of the public in accordance with the Public Participation Procedure as set out in Part D2 of the Constitution.

SCHH/13/5 **Questions, Statements or Deputations**

No questions, statements or deputations were received from members of the public in accordance with the Public Participation Procedure as set out in Annex 1 of Part A4 of the Constitution.

SCHH/13/6 **Call-In**

The Panel was advised that no decisions of the Executive had been referred to the Panel under the Call-in Procedures set out in Appendix "A" to Rule No. S18 of the Overview and Scrutiny Procedure Rules.

SCHH/13/7 **Requested Items**

Cllr Sheppard suggested that a presentation be provided to Members prior to a meeting of Council to explain recent changes in the NHS. In response the Executive Member informed the Committee that a Member seminar had been arranged for 17 May 2013 in this regard. All Members were encouraged to attend.

SCHH/13/8 **Executive Member Update**

The Executive Member updated the Committee on issues pertaining to their portfolio that were not included on the agenda, these included:-

- An update on the “Mindings” pilot scheme that aimed to minimise social isolation. A briefing had been arranged for the Portfolio Holder on 14 May 2013 and feedback would be provided to the Committee in due course.
- In response to a Member query at a previous meeting it was confirmed that Bedfordshire Clinical Commissioning Group (BCCG) allocated £220k to fund lymphoedema services. A representative for lymphoedema services will be invited provide more information on this service and Healthwatch Central Bedfordshire have been asked to consider this as part of their work plan.
- A member seminar that had been arranged for 14 June 2013 relating to housing.
- Several bodies and strategies that had been established on 01 April 2013, including the Tenancy Strategy, Public Health’s transition to the Council, BCCG and the welfare reforms. The implications of the Welfare reforms were presently being monitored on a monthly basis to assess their impact.
- Visits that the Executive Member planned to take to two Gypsy and Traveller sites in Central Bedfordshire.
- Meetings with General Practice Locality Managers were taking place.
- The submission of a planning application for the Dukeminster site.
- A meeting the Executive Member had attended regarding the pressures on Council’s to find additional placements for persons moving out of London.

In response to a question the Executive Member commented that time-banking was still considered to be a positive scheme. Further information would be provided on the implementation of such schemes at a future meeting.

SCHH/13/9 **Bedfordshire Plan for Patients 2013/14**

The Director of Strategy and System Redesign (Bedfordshire Clinical Commissioning Group [BCCG]) introduced the Bedfordshire Plan for Patients 2013-14. The Plan was a technical document that outlined the BCCG’s commissioning intentions to ensure Central Bedfordshire residents received the best care possible within available resources. A layperson’s version of the plan would be available by the end of May 2013. In particular the Committee’s attention was drawn to the national/local priority measures and targets outlined in the Executive Summary. The Committee discussed the contents of the plan and a number of points were raised as follows:-

- The Executive Summary did not contain enough detail to be read in isolation. The main report contained a helpful matrix of risks outlined in the plan and explained BCCG’s part in the patient journey, the workforce strategies and the yellow card system. Further detail on these should have been included in the Executive Summary.
- Concern that performance fell below the national level for 65s and over, who had been discharge from hospital and remain at home. There were also concerns that BCCG would not be able to meet targets relating to the steep increase from 66% (2011 target) to 80% in 2015 to raise the number of smokers who have quit. The Director of Strategy and System Redesign commented that BCCG aimed to enhance consistency as a means of driving up performance.

- The importance of the voluntary sector and patient groups in the community had not been mentioned in the plan and should be included here and in the list of referral groups used the GPs.
- The need to ensure that future reports provided an appropriate focus on Central Bedfordshire residents.
- Concerns relating to diabetic nursing care. The Director of Strategy and System Redesign agreed to review this issues to determine whether there was a problem.

RECOMMENDED

- 1. That the Committee endorses the general Bedfordshire Plan for Patients (2013/14)**
- 2. That in the future BCCG ensure reports presented to the Committee had a specific focus on Central Bedfordshire's need.**
- 3. That reference be made to the voluntary sector and its role in delivering the Plan.**

SCHH/13/10 Mental Health and Social Isolation

The Assistant Director Adult Social Care, the Head of Contracts and the Associate Director for Mental Health (SEPT) delivered a presentation requested by the Committee in relation to Loneliness and Mental Health. The presentation provided an overview of several areas including the instances in which the Council would undertake assessments, customer contacts, availability of voluntary and community sector support and the manner in which community mental health services were delivered. In addition to the presentation officers provided additional information relating to the following:-

- The development of a information hub that would contain detail on support services available locally.
- Support services that were commissioned from the Richmond Fellowship.
- The benefit of working in partnership with others, such as MIND, Power, the Alzheimers Society and the Citizens Advice Bureau to deliver some support services.
- The benefit of Village Care Schemes and the aspiration for 100% coverage across Central Bedfordshire.
- Primary Care Mental Health Link Workers whose main focus was early intervention and prevention and guided self-help.
- The Community Mental Health Team whose main focus was intervention.
- The Community Forensic Team whose main focus was risk management.
- The Assertive Outreach Team whose main focus was to support those who were socially isolated.
- The Early Intervention In Psychosis Team whose main focus was family relationships.

In light of the presentation Members discussed several issues in detail as follows:-

- The need to address the speed with which anti-depressants were prescribed to patients. The Associate Director for Mental Health (SEPT)

informed the Committee that work was underway with General Practitioners (GPs) to encourage more detailed assessments of a patients needs before prescribing anti-depressants through the work of the Primary Care Mental Health Workers.

- The importance of indentifying cases of social isolation and targeting support in high risk areas, such as for carers.
- The importance of identifying and signposting to the range of available services in the voluntary sector. The Assistant Director Adult Social Care responded that there were some gaps in relation to signposting to services but the development of an information hub would support the identification of services available in the community.
- The importance of maintaining day centres in Central Bedfordshire. The Director of Social Care, Health and Housing commented on the importance of modernising some day centres throughout Central Bedfordshire. The Assistant Director Adult Social Care also commented on the importance of day centres undertaking outreach work in their local communities.
- The importance of the Council coordinating activity between organisations. The Assistant Director Adult Social Care commented that the village care schemes undertook a lot of this work. The Arlesey Village Agent had supported some mapping of services that were available in Central Bedfordshire to identify gaps and consider how the community might fill those gaps.

NOTED the presentation.

SCHH/13/11 Housing Asset Management Strategy

The Executive Member introduced a report, which set out the Council would approach regeneration, new build and maintenance of its social housing stock in the future. In addition the Head of Asset Management drew the attention of the Committee to the opportunities that were open to the Council and the seven priorities on which the Strategy was based. He also highlighted the importance of a local approach and focusing on those homes that don't presently deliver a profit. It was also clarified that each of the three gypsy caravan sites managed by the landlord service were self-funding and that there were no plans to raise System Built Homes to mortgageable standards. Consultation responses had been positive and as a result the Strategy had been amended to reflect the need for flexibility for both the adult and younger population.

In light of the report and the clarification provided by the Health of Asset Management the Committee discussed the following issues in detail:-

- The need to consider the appropriateness of spend on non-traditional Precast Reinforced Concrete (PRC) homes. The Head of Asset Management confirmed that the Council did not intend to improve homes to mortgageable standards and would conduct more detailed appraisals linked to development opportunities prior to committing spend to improve on these properties.
- The need to ensure that housing estates did not become unmanageable but that homes provided an appropriate amount of space for children and young people, particularly in relation to garden size. The Head of Asset

Management commented that homes needed to strike a balance between affordability and size.

- Improvement programmes beyond decent homes.
- The need to be mindful of how changes in population could impact on the numbers of self-funders. The Director of Social Care, Health and Housing commented that the Council's Housing Market Statement and other documents such as the Joint Strategic Needs Assessment were used to determine the extent of future need. This included assessments sufficient types of property older people.
- The level of cooperation between the Council and Aragon Housing. The Head of Asset Management confirmed that meetings occurred on a routine basis.
- The importance of 'housing for life' being included as a priority. The Head of Asset Management confirmed that life-time homes were a key principle of the strategy as a means of limiting the number of adaptations that were required.
- The extent to which homes in Central Bedfordshire were constructed with solar panels. The Head of Asset Management commented that there was scope within the strategy for extending the number of properties constructed or retro fitted with solar and similar panels.
- The importance of the strategy providing opportunities for apprenticeships. The Head of Asset Management confirmed that the Strategy would provide opportunities for several apprentices.
- The need to ensure the Strategy complimented the Central Bedfordshire Design Guide.
- An engagement strategy as part of implementing HAMS.

RECOMMENDED

That the Committee support the Housing Asset Management Strategy and recommend that it be adopted by the Executive in light of the above comments.

SCHH/13/12 Quarter 3 Performance Monitoring

The Assistant Director for Business and Performance presented the quarter 3 performance monitoring report for the Social Care, Health and Housing directorate. In addition the Head of Preventative Health Commissioning advised the Committee of performance in relation to C7MTP (Percentage of 40 to 74 year olds offered a health check). The Committee were informed that currently the percentage of people offered a health check was 107%, the percentage of health checks delivered were 87%. Health checks were being delivered across Central Bedfordshire and ties had been drawn with other relevant Council strategies where possible (such as the Leisure Strategy).

In light of the report the Committee discussed the following issues in detail:-

- How the Council could encourage residents to take up the offer of a health check. The Head of Preventative Health Commissioning commented that a range of communication opportunities would be provided by public health teams as part of an area-wide campaign.

- The range of preventative strategies that could be developed relating to dementia. The Head of Preventative Health Commissioning commented that social interaction and sport were promoted as means of helping keep dementia away. Work was undertaken in collaboration with SEPT and GPs to raise awareness of programmes.

The Committee thanked the Head of Preventative Health Commissioning for the update in relation to performance and requested that he attend future meetings of the Committee to discuss issues in relation to performance on NHS health checks.

NOTED the report.

SCHH/13/13 Quarter 3 Capital Budget Monitoring Report

The Committee received the quarter 3 capital budget monitoring report for the Social Care, Health and Housing directorate. Members were informed of the drop in the rate of referrals relating to Disabled Facility Grants and the underspend in relation to empty homes.

NOTED the report.

SCHH/13/14 Quarter 3 Revenue Budget Monitoring

The Committee received the quarter 3 revenue budget monitoring report for the Social Care, Health and Housing directorate. Members were informed of the underspend position due to reductions in care packages and the proposed creation of the Outcome Based Commissioning reserve.

In response to questions from Members the Assistant Director for Business and Performance confirmed that the Council tried to encourage the use of block contracts before the use of spot purchasing beds but recognised the need to provide choice for customers. It was also confirmed that charges on a property were retrieved by the Council once a person was deceased, not whilst they were receiving care.

NOTED the report.

SCHH/13/15 Quarter 3 Housing Revenue Account Monitoring

The Committee received the quarter 3 revenue and capital budget monitoring report for the Housing Revenue Account. The Assistant Director Business and Performance highlighted the overall position and the key variances detailed in the report.

NOTED the report.

SCHH/13/16 Work Programme 2013/14 and Executive Forward Plan

The Committee received their work programme and the Executive Forward Plan and were informed that the Framework Agreement for Care Homes in

Central Bedfordshire had been delayed. It was proposed that this item be considered on 29 July 2013 prior to the Executive.

RESOLVED that the work programme be approved subject to the amendments as detailed in the Minute above.

(Note: The meeting commenced at 10.00 a.m. and concluded at 1.10 p.m.)