

**ADULT SOCIAL CARE AND HOUSING
OVERVIEW & SCRUTINY PANEL
19 OCTOBER 2016
7.30 - 9.35 PM**



Present:

Councillors Harrison (Chairman), Allen (Vice-Chairman), Mrs McKenzie, Mrs Mattick, Ms Merry, Peacey, Mrs Temperton and Thompson

Also Present:

Councillor Tullett
Andrea Carr, Policy Officer (Overview and Scrutiny)
Neil Haddock, Chief Officer: Commissioning and Resources
Simon Hendey, Chief Officer: Housing
Gill Vickers, Director of Adult Social Care, Health & Housing

Apologies for absence were received from:

Councillors Mrs Angell, Finch, Finnie and D Birch

13. Apologies for Absence/Substitute Members

Councillor Mrs Mattick attended as substitute for Councillor Mrs Angell and Councillor Thompson attended as substitute for Councillor Finnie.

14. Minutes and Matters Arising

RESOLVED that the minutes of the meeting of the Panel held on 25 May 2016 be approved as a correct record and signed by the Chairman.

15. Declarations of Interest and Party Whip

There were no declarations of interest relating to any items on the agenda, nor any indication that members would be participating whilst under the party whip.

16. Urgent Items of Business

There were no items of urgent business.

17. Public Participation

There were no submissions from members of the public in accordance with the Council's Public Participation Scheme for Overview and Scrutiny.

18. Quarterly Service Report (QSR)

The Panel considered the latest trends, priorities and pressures in terms of departmental performance as reported in the QSR for the first quarter of 2016/17 (April to June 2016) relating to Adult Social Care and Housing.

The Director of Adult Social Care, Health and Housing highlighted a number of points from the report, including progress being made in quarter 2 of the year. The contract for the Falls Prevention Advisory Service was proving to be very successful and had been recognised by an award. The final assurance rating for the Bracknell Forest 2016 Better Care Fund (BCF) submission had now been confirmed as “Assured” by NHS England. The ongoing monitoring of the Better Care Fund Schemes had now been subsumed into work on the preparation of the Sustainability and Transformation Plan (STP). The Health Visiting procurement exercise had been completed. The Bracknell Forest Year of Self Care had been a great success, as had the introduction of the Kooth Service providing free online support for young people. Each had been nominated for an award.

Progress was being made against two key indicators showing red in the QSR, namely L178 (number of household nights in non self-contained accommodation) and L179 (percentage of homeless or potentially homeless customers who the Council keep in their home or find another one). This was against a background of a 29% increase in homeless customers presenting to the Council. A new online housing advice wizard was due to be launched in the next month which would help customers to self-serve or at least reduce the amount of officer time on face-to-face interviews. In order to mitigate the risk of provider failure, the Council was working with a number of care homes around support and contingency arrangements, although one care home had closed. This was having an adverse effect on budgets where the Council was currently supporting 20 residents moved as a result of the provider failing to meet CQC standards, at an average cost of £596 per week. New placements were now costing up to £1,200 per week.

Arising from questions and discussion, the Panel noted:

- The £1,200 per week cost of a care home placement was excessive, even compared to rates in London, and was in part due to the shortage of places available in Bracknell Forest.
- A balance needed to be struck between providing sufficient support and care to maintain independence for residents with dementia and the possible harm caused by moving them into a nursing home.
- The excellent smoking quit success rate had been achieved against a smaller targeted number. It would be possible to provide absolute numbers as well as percentage rates.
- There were some errors in the staff sickness totals shown which would be corrected for the next report/minutes.
- Forestcare had successfully registered with the Care Quality Commission (CQC) and would be introducing its emergency personal care service from November 2016.
- Complaints were regularly reviewed in order to learn lessons. The number of compliments received was declining as a result of more services being delivered by other providers.
- An explanation was given of the process for transferring recipients of housing benefit from the Council to the Department of Work and Pensions for payment of universal credit when this was applicable.

19. **Draft Housing Strategy 2016-36**

The Panel considered a report putting forward the draft Housing Strategy for Bracknell Forest 2016 – 2036, which had been approved by the Executive as a basis for consultation over the next six months. Consultation would be via the Council’s consultation portal, focus groups and meetings in the community as well as

consultation with key stakeholders such as developers, investors and registered providers.

The Chief Officer: Housing made a presentation to the Panel outlining the content of the draft Housing Strategy. The four strategic priorities outlined in the Council's previous 2009-2014 Housing Strategy were:

- supporting a vibrant housing market;
- providing affordable housing;
- providing the right homes for vulnerable people; and
- contributing to sustainable communities.

These remained central to the Council's thinking, despite the major national policy changes which have since occurred, and they would be aligned with the Council's emerging planning policies and the six strategic themes which underpin the Council Plan 2015-2019. The presentation detailed the performance record under the previous strategy and the issues and questions facing the Council arising from each strategic priority.

The Panel noted the following points which arose from questions and discussion:

- The total of 3178 homes completed during the last strategy (against a target of 5148) reflected the rate at which developers implemented the permissions granted and brought completed dwellings to the market.
- Despite the investment in affordable housing, affordability remained a challenge for many. Low cost home ownership was a more accessible and affordable tenure than private rented for many households.
- The Strategic Housing Market Assessment (SHMA) contained projections for the type and tenure of housing needed (for instance, it predicted a need for 1320 specialist homes for older people by 2036 – broadly equivalent to one scheme per year).
- The 'Freespace scheme', whereby older people's homes were leased to create an income which would allow them to be re-housed in more suitable accommodation, was recognised by the Panel to have great potential.
- The rise in homelessness in Bracknell Forest was above the national average but not out of line with that experienced in say Reading. Some 52% of homelessness cases arose from tenants given notice by their private sector landlord seeking either to sell the property or re-let it at a higher rent.
- The Landlord/tenant accreditation scheme was a useful mechanism enabling a tenant to obtain a certificate stating that he/she had been a good tenant for use in future applications for accommodation.

Members were reminded that the Housing Strategy had been earmarked as a topic for study by a Working Group and an invitation for the Group to meet would be issued shortly. This would provide an opportunity for further in depth study of and comment upon the draft Strategy.

20. **Changes to the Local Council Tax Discount Scheme**

The Panel considered a report presenting the proposed Local Council Tax Discount Scheme approved by the Executive as a basis for consultation.

The Council established its Local Council Tax Benefit / Reduction Scheme from 2013/14 and although revised in 2015/16, it still reflected the previous national Council Tax Benefit Scheme. The proposed new Local Council Tax Discount Scheme had been drawn up to target financial support to those who most need it

whilst encouraging and rewarding employment and households increasing their earnings as well as simplifying administration. This accorded with the aims of the Council's Annual Plan 2015-2019.

The proposed scheme placed household income into a pre-determined band which would generate a discount on the household Council Tax liability. The scheme would incentivise households to increase their income and would not reduce their discount while income remained within the same band. The report set out a table showing the structure of the new scheme which predicted that 340 households within the Borough would receive a higher discount compared to the current scheme while 1,429 households would receive a lower discount. The Panel noted that those households that had a disabled person which meant they were unable to work and increase their income would receive protection and be provided with the highest discount of 80% on their Council Tax.

The Council was currently consulting with the precepting authorities, Town and Parish Councils and existing scheme customers as well as the wider community and interested groups. 164 responses had been received to date.

The Panel noted the report, including the Appendix which contained an exemplification of households within in each income band comparing their benefit under the existing scheme with the discount they would receive under the proposed scheme. If following consultation the Council was minded to adopt the new scheme, it was estimated that expenditure on Council Tax discounts would reduce by £106,321 per year.

21. **Domiciliary Support Options**

The Panel considered a report detailing the progress made on developing a new model for the provision of Domiciliary Care.

Currently the Council commissioned approximately 5,000 hours of domiciliary support each week to deliver home based care to an average of 400 people. The current contracts were spot contracts, with 17 different providers, all paid at one agreed rate of £16.71 per hour. The total cost of this care had doubled to £4m over the last 5 years and was unsustainable.

It was proposed to move to a system entailing a framework agreement with selected providers which would:

- Allow individuals with Direct Payments to commission their own support with confidence
- Ensure a level of quality by providers on the framework
- Help ensure sustainability of providers as they will know the approximate level of business they will have and will be better able to recruit and retain staff
- Have the potential to enable care staff to earn a higher wage; and
- Reduce the total cost to the Council.

The Council was looking to produce an 'Outcomes Based' service specification for future delivery in conjunction with both the Domiciliary Care market and the voluntary sector and the initial reaction to these plans had been very positive. The framework agreement would provide for a smaller number of providers (say 6) who would receive financial incentives to reduce the needs of individuals over time and meet defined outcomes. The voluntary sector would be engaged in assisting with that part of the care package where a CQC registered provider was not required.

Arising from questions and comments the Panel noted:

- The Care Agencies payment to the voluntary sector would cover such matters as travelling costs and training of volunteers.
- The procurement exercise would include quality measures to ensure the agencies selected would have high standards as 'good employers' in terms of rates of pay, sick pay, training and development for staff etc.
- If Frimley Health wished to be a provider of care packages for people discharged from hospital, they could take part in bidding to be in the Domiciliary Care framework, in the same way as any other provider.

The Panel welcomed the approach being taken to re-model Domiciliary Care provision in Bracknell Forest but sounded a note of caution as regards the resources of the voluntary sector to contribute.

22. **Update on Care Homes**

As discussed under the Quarterly Service Report item above, the Panel was informed that a number of Care Homes in the Borough were experiencing financial pressure, with one home having ceased trading and closed. The Council was offering support to a number of care home operators to assist them to continue in business.

The Panel confirmed its support for this approach and expressed the view that it was important that families and relatives of residents in care homes should continue to play an ongoing support role. Also, the more support the Council could give to families to care for elderly relatives, the less pressure there would be on care home places.

23. **Vision for the Future of Health and Adult Social Care**

The Director of Adult Social Care, Health and Housing presented to the Panel a vision for the future of Adult Social Care, Health and Housing Services. The landscape for the delivery of these services had changed dramatically over the last few years and a radical approach to system transformation was required in order to achieve the scale of Adult Social Care savings and the sustainability of Health and Care services. While integration with health was key, the future sustainability of the system of care was dependent on people and their carers, families, networks, being properly equipped and supported to arrange and manage more of their care with less reliance on direct support from the Council.

The presentation outlined a range of ways in which the Council should set out to achieve wellbeing, good health and independence for people in the Borough. This could be delivered not only through operational changes within the Council and its partners but also through developing the local market.

Arising from questions and discussion, the Panel noted:

- The vision was entirely consistent with the Frimley Health Sustainability and Transformation Plan (STP). NHS England had stated the Frimley STP was one of the best that had been produced, due in part to the excellent co-operation and joint work between health and social care.
- The average time spent in residential care at the end of a person's life was discussed. There was still much scope to improve further the support for elderly people to remain independent and living in their own homes for longer. The importance of sufficient resources for disabled facilities grants was emphasised, which enabled, for instance, installations of wet rooms, and were a great enhancement to independent living.

The Panel thanked the Director for the informative presentation.

24. **Executive Key and Non-Key Decisions**

The Panel received and noted the scheduled Key and Non-Key Executive Decisions relating to Adult Social Care and Housing.

With reference to the procurement of drug and alcohol recovery services, this would need to be re-assessed since of the two bidders for the contract, one had withdrawn and the other had not met the required quality threshold.

With reference to Charging Options for Care and Support at Home, this was to be re-considered following investigation of further alternatives.

CHAIRMAN