

HEALTH, SOCIAL CARE & INCLUSION SCRUTINY AND PERFORMANCE PANEL

Thursday 12 February 2009 at 6.00 p.m.

Panel Members present Councillor T. Oliver (Chair)
Councillor Ault
Councillor M. Bird
Councillor J. Barton
Councillor A. Paul

Portfolio Holder present: Councillor McCracken – Social Care, Health and Housing

Officers present Dave Martin- Executive Director, Social Care and Inclusion
Sue Byard – Assistant Director Strategic Housing
Margaret Willcox – Assistant Director – Adult Services
Lawrence Brazier – Head of Procurement
Julie Jones – Acting Head of Supported Housing
Mandy Winwood – Strategic Partnerships Manager
Andrew Flood – Interim procurement specialist
Angela Walker - Scrutiny Officer
Matthew Underhill – Scrutiny Officer

Other Invitees Monzur Miah - Chair, Physical and Sensory Impairment
(PSI) Board
Reverend Samuel Leach – St Paul's Church
Margaret Smith – Glebe Centre

74/08 APOLOGIES

Apologies for non-attendance were submitted on behalf of Councillor Robertson, Councillor Woodruff and Mark Kinder of St. Paul's Church.

75/08 SUBSTITUTIONS

There were no substitutions for the duration of this meeting.

76/08 DECLARATIONS OF INTEREST AND PARTY WHIP

There were no declarations of interest or party whip identified at this meeting.

77/08 MINUTES OF PREVIOUS MEETING

Monzur Miah requested that his attendance at the previous meeting be recorded.

Resolved:

That the minutes of the meeting held on 19 January, as amended, copies having previously been circulated, be approved as a true and accurate record.

78/08 FORWARD PLAN

A Panel Member referenced Links to Work (72/08) and requested that there be site visits to each of the three local facilities. Arrangements for the site visits were to be made by the Scrutiny Team.

Resolved:

That:

- 1. the forward plan as at 9 February 2009 be noted;**
and;
- 2. the Panel's visit to Links to Work should incorporate each of the organisation's three sites.**

79/08 HOMELESSNESS IN WALSALL

The Panel reviewed progress that had taken place to address homelessness in Walsall since they last considered the issue in August 2008. Members heard from Reverend Samuel Leach who provided feedback on the work that had been taking place between the voluntary and community sector and the Council.

Reverend Samuel Leach and Julie Jones gave a presentation (annexed) updating the Panel on progress made by the short life multi-agency homelessness group since their attendance at the 10 July 2008 Panel meeting. A report detailing the results of the presenters survey carried out by the group was tabled for Members reference (annexed).

Reverend Leach stated that the multi-agency homelessness group had set out to respond to concerns around the government "hot spot" count of rough sleepers. The main concern with the hotspot count being that it was possibly lower than what multi-agency day-to-day contact with homeless people suggested. The group also aimed to provide an accurate local picture of homelessness, that went beyond the "statutory" groups defined by the Department for Communities and Local Government (DCLG) criteria and better understand the level of "hidden homelessness" in the borough. The group were particularly keen to identify those who were not able to, or were not successful in accessing services.

In November 2008, the group undertook the West Midlands's first ever "presenters survey". Over forty organisations and services agreed to participate in a two week "snapshot" survey. Reverend Leach provided guidance on the results as outlined in the report. Two hundred and ninety-nine forms were completed, with thirty-eight instances of duplication (which indicated that individuals went to a number of different services for different reasons). Significant findings included the high number of white British males who were presenting at the respective organisations and services; the high proportion of

those who classified themselves as homeless suffered from drug and / or alcohol problems and that mental health issues are more prominent amongst males surveyed than females. Julie Jones expressed concern about whether a further hidden problem of homelessness amongst the local Black and Minority Ethnic (BME) population existed.

In terms of next steps, Reverend Leach informed Panel Members that a further Presenters survey would be carried out in April 2009, together with further research commissioned by the Drugs and Alcohol Action Team (DAAT).

The Chair stated that the position was clearly more constructive than it was six months ago and that the work undertaken had helped deliver a better local working definition of homelessness. He sought guidance on what the practical challenges were now that this work had been completed. Julie Jones responded that in her view the problem was not a significant gap in service provision rather it was how existing service provision was accessed. In her view, the challenge lay in the need to raise awareness, build confidence and help ensure service users better engage with services. Reverend Leach expressed concerns regarding the criteria for accessing services and stated that for many service users, their chaotic lifestyles and low levels of trust and confidence made it difficult to continue using services for any length of time.

Julie Jones was keen to point out that the problems of homelessness were not unique to Walsall and informed Members that the Government had just launched a new strategy – “No one left out”, aimed at resolving the homelessness problem by the 2012 Olympics. The Chair queried whether this might signal a change in emphasis in national and local policy and result in a more realistic definition of homelessness with a consequential move away from unrealistic zero counts. Julie Jones responded that this was probably not the case as the guidelines for defining homelessness remained very strict. However, she expressed confidence that work planned, particularly that undertaken in partnership with other local organisations, will go towards meeting the objectives of the Government’s new strategy. Reverend Leach agreed and observed that the key to success would be the effective sharing of good practice.

Julie Jones provided guidance to Members that approximately eighty percent of budgets allocated to tackling homelessness was spent on salaries. In response to this a Panel Member suggested that, given its success in tackling the problems of homelessness, it would be sensible to consider committing greater funds to the Glebe Centre. This would mean that funding was focused and would enable a core strategy to be developed with the Glebe Centre acting as focal point for local homelessness services from which other services are signposted to. Reverend Leach observed that critical to the success of this suggestion or any other scheme to better coordinate local services, would be training for staff in signposting to other services.

Reverend Leach further observed that while the Church had some capacity to provide basic physical support, including food and clothing, it was not able to offer emergency accommodation. A Member suggested that the Council have redundant buildings throughout the borough that could be used to address this need, for example, the former Mary Elliott School building. Dave Martin felt that there would be a danger of the Council being responsible for up to one hundred percent of the funding for such a facility, which was not deliverable. He encouraged the exploration of shared responsibility for service provision with the NHS and DAAT in this instance and the use of innovative thinking. Sue Byard added that often local communities are reluctant to have this type of facility close to

their homes. Members were informed that an investigation into the provision of temporary accommodation was to be undertaken during the next municipal year.

Julie Jones stated that there were only five or six overnight accommodation spaces required in the borough, as rough sleeping was not a big problem, however further work was now being undertaken by the Glebe Centre in conjunction with a consultant as to how best to develop services.

Margaret Smith stated that, in her experience, demand for overnight accommodation was greater than the six spaces suggested. She also expressed concerns regarding the potential reduction of service provision at the Glebe Centre as a consequence of the possible loss of Big Lottery Funding. This might have a negative impact for service users who are reluctant to access other service provision including housing services. Margaret Smith advised Panel Members that outreach workers would be vital in supporting service users in accessing all services. A Member suggested that The Glebe Centre's finances be shared with the Panel, as Members may then be able to signpost them to alternate funding streams. Julie Jones stated that this was part of the work being undertaken by the consultant in conjunction with the Glebe Centre.

Resolved:

That a progress update report on homelessness in Walsall, be presented to the Panel in six months time

80/08 RESIDENTIAL AND NURSING CARE SERVICES

A report was presented to Panel Members progress to date of the tendering process being undertaken in relation to Residential and Nursing Care Services.

Lawrence Brazier explained that the EU procurement rules had been followed and a closing date for the return of tenders was originally towards the end of February. However, given that this was a single stage open tendering process; this date was likely to be extended due to there having been eighty-four expressions of interest, requiring the provision of considerable advice and guidance. A report was due to be presented to Cabinet in March which will provide an update on the tendering process. Lawrence Brazier emphasised that a balance had been struck in the tendering evaluation-scoring process between price (50%) and quality (50%) and the successful tender would not necessarily be the lowest priced.

In referring to the detail of the report a Member expressed concern that it suggested that two-hundred and forty-eight bed spaces would be lost as a result of the process being undertaken. In response, Andrew Flood explained that these beds in fact would be re-provided through two-hundred and eighty-five one and two bedroom units and a forty-bed dementia care unit. He also informed Members that £40 million was to be invested in new build facilities over the next 3 years, with the first to be completed in six months time. As a consequence, the Council was increasing its overall capacity and giving more choice to local service users.

A Panel Member stated that the rising cost of fuel would need to be reflected in the tender evaluation process. Panel Members expressed concern that the rising cost of fuel would probably mean that operating nursing homes was significantly less cost-effective and

asked whether potential risks, including possible contractor failure, had been identified. Members were also keen to ensure that quality providers were not being squeezed out by the Indicative Affordability Price range. Andrew Flood provided guidance and stated that the process for arriving at an indicative maximum rate that the Council would pay involved the detailed analysis of current payments to providers based on the usual rate for residential care and was approximately £346 for each for each service user per week when uplifted to 2009/10 prices. He also set out how the tender specification was devised, including required outcomes based on Department of Health requirements and best practice as well as guidance on palliative care. Andrew Flood emphasised that care had been taken to ensure local market providers were not excluded and to provide support to them and that a significant amount of consultation had been undertaken with stakeholders including the providers forum, care homes and over 50s groups.

In response to further Member queries around cost, officers confirmed that premium care homes, charging between £650 - £1,000 per service user per week would fall outside the indicative maximum price that the Council was willing and able to pay. However, there remained a focus on quality with the tender specification reflecting the key issues required by law, including equipment provision, medicine management, nutrition and dietetics, end of life care and tissue viability. Dave Martin explained that effort had been taken to ensure the tendering process was technically astute and a significant commitment was made to ensuring that the local market was understood during the consultation and in particular the independent sector, which was achieved with engagement with the West Midlands Care Association (WMCA).

A Panel Member noted concerns had been expressed by the WMCA with regard to the tendering period and time allowed to submit a tender, officers confirmed that in recognition of a request in writing the period had been extended by three weeks. Officers confirmed that a report was due to be taken to Cabinet in March which would provide an update on the tender process. The Portfolio Holder was keen to emphasise that a wide and varied consultation had been undertaken and that outcomes for service users was the guiding principle which was reflected in the tender specification. She further pointed out that the delay in the tender process, which would be a number of weeks rather than a more significant period of time, would also ensure that the process of awarding a contract of considerable size was undertaken correctly and would safeguard service user's interests.

81/08 JOINT STRATEGIC NEEDS ASSESSMENT

Members were informed of the statutory duty to have a Joint Strategic Needs Assessment (JSNA) and the progress made with this to date. Members were informed that the interim JSNA was available online on the Walsall Partnership website.

Mandy Winwood informed Members that the JSNA forms the basis of a new Duty to Cooperate as well as supporting the Sustainable Community Strategy (SCS) and the Local Area Agreement (LAA). She provided further explanation regarding the JSNA's contribution to the SCS through which it will impact on the Health and Wellbeing Strategy being undertaken jointly with the PCT and the third sector. Mandy Winwood observed that the production of the JSNA had been a valuable process as it offered the opportunity to review services provided. One element of determining this was the "local voice" consultation, which sought to collate evidence of the effectiveness of interventions. The

JSNA would ensure that going forward, resources are focussed on the right set of priorities which include sexual health and teenage pregnancy.

Mandy Winwood informed Members that the JSNA should support better sharing of information and data collected from different sources which should lead to more effective deployment of resources. To assist in this process a task and finish group, made up of participants from the Council, the PCT and Local Strategic Partnership (LSP), recently investigated how data sets collected in different formats by a variety of partners and not currently compatible could be more easily shared and collated. A further challenge would be how to most effectively continue to harvest the “local voice” with a potential key role for Local Neighbourhood Partnerships (LNPs).

Mandy Winwood informed the Panel that the findings of the JSNA showed that Walsall’s LAA and commissioning strategies were broadly focussed on the right priorities. There were a total of 15 recommendations arising from the JSNA which identified priorities such as sexual health and improving the effectiveness of commissioning services.

A Member voiced concern regarding how useful the JSNA actually was once it had been produced. Mandy Winwood expressed the view that it was a valuable document that allowed many different streams of information to be pulled together. The improved data set would support the development of a cross-partnership approach with significant benefits for the development and delivery of a number of public health strategies and in particular preventative strategies. This should improve outcomes for service users and positively impact health inequalities.

A further observation made by a Member was that the JSNA appeared to be a common sense document but questioned its usefulness and stated that it was a frustration having to complete these exercises on a seemingly recurrent basis. Dave Martin acknowledged that it would be possible that once produced, such a document could be ignored. However, he reported that the JSNA was being built into a process of establishing a more effective relationship with the PCT, this included the development of common leads for key areas of work and a common systems architecture.

82/08 DOMICILIARY CARE

Members were updated on the contractual arrangements for the provision of domiciliary care in the Borough and progress made in securing further providers.

Margaret Willcox provided background information on problems that were suffered with the service in Autumn 2008 following the issue of new contracts. Margaret Willcox guided Members that in the case of one of the suspended providers it was unlikely that they would reach the required standards and closure was probable.

Margaret Willcox outlined to Panel Members that significant concerns remain regarding the sustainability of the provider market in domiciliary care compounded by reduced capacity particularly in end-of-life care, while also observing that the Council had been informed by the Commission for Social Care Inspectorate (CSCI) that similar difficulties have been experienced both within the West Midlands region and elsewhere in the UK. As part of a drive to deliver a sustainable local market an meeting was scheduled for 25 February 2009 where Council officers, together with CSCI inspectors, will attempt to determine the most effective methods for assisting local providers in offering high quality and sustainable domiciliary care services. Margaret Willcox informed the Panel that

issues already identified include offering a wider range of training for staff, for example assisting them in being able to cope with the emotional demands of supporting carers who look after relatives at home.

The Panel heard that a new approach to commissioning domiciliary care had been piloted, where once the social worker had made an assessment, a specialist team with knowledge of applicable rates and the agencies balance of work, would liaise with the agencies. This offered a more efficient approach which would be augmented by effort taken to ensure that there was a balanced distribution of resources between different service providers to avoid unnecessary strain. This pilot had been successful and would be rolled out across the borough by the end of March 2009.

A Member commented on the amount of press coverage that the issues surrounding domiciliary care in the borough had attracted in the local media, which appears to have exaggerated the current position. Dave Martin agreed and expressed the view that the Council's domiciliary care function was returning to a position of strength. Margaret Willcox added that the provider who was shutdown chose not to appeal against the decision indicating that the Council had acted correctly. A Member queried whether the Council was sufficiently proactive in the delivery of care contracts and whether this was contributing to the difficulties being experienced. Margaret Willcox responded that there was now more direct communication between middle management and agencies, which would remove a significant burden from social workers.

Resolved:

That the Panel receives a further briefing on domiciliary care, once the outcome of the monitoring report is available.

83/08 DISABILITY FACILITIES GRANT (DFG) ASSISTANCE

Members were updated on progress with the Disability Facilities Grant for 2008/09.

Sue Byard confirmed that £3.04 million had been committed to carrying out adaptations with a projected underspend for this financial year of £300,000. Within the current financial year, domestic adaptations have enabled around one thousand local residents to continue living independently in their own homes.

In updating Panel Members on some of the reasons for the projected underspend, Sue Byard explained that a raft of new statutory requirements and planning law changes in 2008 had contributed to delays in adaptation work being undertaken. This included a change to how means test are done as part of the assessment prior to work being carried out. This applied even in those instances where the process was underway and an assessment had already been carried out. This often lead to grant re-calculation and re-specification of works with inevitable delays in the scheme gaining approval. A further difficulty was experienced with Planning Law changes which meant schemes had to be submitted for planning or re-designed again causing delays to approvals. These challenges were compounded by two hundred and forty-nine schemes being cancelled for various reasons including a change in an applicant's personal circumstances or an applicant wishing to amend a scheme in a way that the Council was not able to support. Sue Byard pointed out that in all these circumstances there was significant abortive work by officers.

A Member observed that it was encouraging that the significant issues faced for adaptation activity related to slippage rather than underspend and therefore funding was not likely to be lost as it was still committed. The Member expressed the hope that the remaining £300,000 in the adaptations budget would be committed prior to the end of the current financial year at a time when the list of local residents who want domestic adaptations is increasing.

Another Member sought guidance on the degree of confidence the Service had that the outstanding £300,000 would be committed before the end of the financial year. Sue Byard confirmed that based on current projections and schemes currently underway £300,000 would be uncommitted at the close of the financial year. Councillor McCracken expressed the view that £300,000 was not a large proportion of a total budget of nearly £5.5 million.

Resolved:

That a further report be brought to the Panel meeting on 26 March 2009 to provide an update on the Disability Facilities Grant position for the 2008/09 financial year.

DATE OF NEXT MEETING

The date of the next meeting was confirmed as 26 March 2009.

The meeting terminated at 7.36 p.m.

Chair:

Date: