



Havering

L O N D O N B O R O U G H

INDIVIDUALS OVERVIEW & SCRUTINY COMMITTEE AGENDA

7.00 pm

**Tuesday
5 March 2013**

**Town Hall, Main Road,
Romford**

Members 6: Quorum 3

COUNCILLORS:

**Conservative Group
(4)**

**Residents' Group
(2)**

**Labour Group
(0)**

**Independent
Residents' Group
(0)**

Wendy Brice-
Thompson
(Chairman)
Jeffrey Brace
Pam Light
Keith Wells

June Alexander
(Vice-Chair)
Linda Van den Hende

For information about the meeting please contact:

**Wendy Gough 01708 432441
wendy.gough@havering.gov.uk**

AGENDA ITEMS

1 APOLOGIES FOR ABSENCE AND ANNOUNCEMENT OF SUBSTITUTE MEMBERS

(if any) – receive.

2 DISCLOSURE OF PECUNIARY INTERESTS

Members are invited to disclose any pecuniary interest in any items on the agenda at this point in the meeting.

Members may still disclose any pecuniary interest in an item at any time prior to the consideration of the matter.

3 CHAIRMAN'S ANNOUNCEMENTS

The Chairman will announce details of the arrangements in case of fire or other events that might require the meeting room or building's evacuation.

4 MINUTES (Pages 1 - 14)

To approve as a correct record the Minutes of the meeting of the Committee held on 12 February 2013 and the Special Joint meeting held on 24 January 2013 and authorise the Chairman to sign them.

5 CAREPOINT/ INFORMATION AND ADVICE SHOP UPDATE (Pages 15 - 26)

The Committee will receive an update on the progress of Carepoint/ Information and Advice Shop (report attached).

6 EXTRA CARE REPORT (Pages 27 - 34)

The Committee will receive a report on the Extra Care provided within the borough, including the progress of Dreywood Court (draft report attached).

7 FUTURE AGENDAS

Committee Members are invited to indicate to the Chairman, items within this Committee's terms of reference they would like to see discussed at a future meeting. Note: it is not considered appropriate for issues relating to individuals to be discussed under this provision.

8 URGENT BUSINESS

To consider any other items in respect of which the Chairman is of the opinion, by reason of special circumstances which shall be specified in the minutes, that the item should be considered at the meeting as a matter of urgency.

**Ian Buckmaster
Committee Administration &
Member Support Manager**

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**MINUTES OF A MEETING OF THE
INDIVIDUALS OVERVIEW & SCRUTINY COMMITTEE
Town Hall, Main Road, Romford
12 February 2013 (7.00 - 8.50 pm)**

Present:

Councillors Wendy Brice-Thompson (Chairman), June Alexander (Vice-Chair), Jeffrey Brace, Pam Light, Linda Van den Hende and Keith Wells

Apologies for absence were received from

29 MINUTES

The minutes of the meeting held on 6 November 2012 were agreed as a correct record and signed by the Chairman.

The Committee discussed the visit that had taken place to City Hall to discuss Dial a Ride in Havering with the Deputy Mayor for Transport and agreed that it was a very positive meeting.

30 SAFEGUARDING ISSUES

The Committee received a report providing information about the position of Safeguarding Adults in London Borough of Havering and highlighting some of the main challenges and achievements of 2012.

The London Borough of Havering Safeguarding Adults Board (SAB) was a partnership. It was tasked with the co-ordination of a borough-wide partnership to ensure that adults at risk are protected from abuse and associated harm. The partnership was made up of a broad range of organisations including the Council, Police, Probation Service, National Health Service bodies and the voluntary sector. There was also an input from the Care Quality Commission (CQC). The Board had three sub-groups focussing on performance, training and audit and serious case reviews. The sub-groups met six to eight times a year.

The Safeguarding Adults Team in Havering was a small team consisting of two Senior Practitioners, two Business Support Officers and the Service Manager. The team carried out the following functions:

- Provided a central route for all safeguarding adult alerts in the Borough.
- Screened all referrals and determined whether a Safeguarding intervention was required.
- Led on the Safeguarding Adult investigations within care homes where the adult at risk is not allocated to a community team or had been placed by another Local Authority.
- Led on the coordination of very complex cases.
- Provided operational advice and guidance in relation to safeguarding issues for internal staff, external partners and service providers.
- Developed policy and procedures for the borough
- Co-ordinated Deprivation of Liberty Safeguards authorisations in accordance with the Mental Capacity Act 2005.

The Statement of Government Policy on Adult Safeguarding identified six guiding principles that underpinned local safeguarding arrangements. They were empowerment, protection, prevention, proportionality, partnership and accountability.

The Committee noted that the Safeguarding Adults Self-Assessment Assurance Framework (SAAF) was introduced in 2011 to enable NHS commissioners and providers to review and benchmark their safeguarding adults' systems. The SAAF had several standards that related to measures that supported good safeguarding practices including strategy, systems, workforce and partnerships. A validation event was held in November 2012 where representatives from the four outer London authorities, the CCGs, LINKs, the four Outer London SAB chairs and the Directors of Adult Services attended the meeting and formed a panel acting in the role of "critical friend".

The Committee was informed that the Quality and Suspension meeting took place on a 3-weekly basis and had a broad membership which included safeguarding adults, commissioning, complaints and Adult Social Care operational managers. The meeting focussed on emerging quality issues in relation to all external providers operating in Havering. This included residential and nursing homes, domiciliary care providers, day opportunity providers and providers of supported living schemes.

Officers outlined the Deprivation of Liberty Safeguards legislation which was enacted on 1 April 2009. The legislation was for the safety of others who could not take care of themselves.

The Committee was shown a number of safeguarding alerts and noted that the highest alerts related to clients with a physical disability (39.9%) or those aged 75-84 (33.7%). Officers stated that physical disability service users account for 10.6% of all service users.

The Committee noted 55% of alerts had proceeded to investigation in 2011-12, vs. 33.7% in 2010-11. This was partly attributed to an improved awareness of thresholds amongst staff and colleagues.

A member asked how “Whistle-blowers” were responded to. Officers stated that this issue was dealt with on a regular basis. At the 3-weekly Quality and Suspension meeting the cases were more likely to be whistleblowing cases. e.g. an Occupational Therapist observing different practices in a nursing home and therefore reporting this back. Within 24 hours the Safeguarding Team would have visited the premises and a report would be written within 48 hours.

A member asked how vulnerable people who lived in their own home, with a care plan, but who were essentially independent were monitored as regards problems with other family members. Officers stated that if the person was not a Social Care client then it would be very difficult, however if they had a care plan, this would be reviewed regularly by care workers or social workers who would pick up on any issues.

A member asked if there was any Police involvement and how quickly they responded. Officers stated that they work very closely with the Police. The Police have a dedicated Police Safeguarding Officer who would respond quickly if needed.

A member asked about the partnership working between the Council and BHRUT. If a patient could not make a decision about their care themselves, how was that dealt with? Officers stated that the Safeguarding Team would take the lead on this, especially if it involved a head injury. The hospital would contact the social worker team, who were based at the hospital, who would carry out a mental capacity assessment.

A member raised concern about the level of perpetrators coming from the Social Care staff category, and asked if this was Council staff. Officers explained that this was all social care staff, including council employees, nursing care staff and domiciliary care staff.

The Committee raised concerns about an elderly or vulnerable couple living together, who due to their age could be categorised as neglecting each other. Members asked how this was detected and dealt with. Officers explained that if the couple were known to Social Care then they could deal with the situation. All staff were trained to recognise and deal with these types of situations. If however they were not receiving care then it was very difficult to detect and it would come down to a neighbour or family member to report it. All staff had been trained in mediation and family conflict.

Officers explained that all nursing homes are regulated by the CQC and if there are any concerns raised then unannounced visits are taken of the homes, and visits to A&E or GPs are taken into consideration.

The Committee received a report on the Prevention Strategy which was developed in 2011 by the Adult and Health Transformation Programme. This strategy was developed on behalf of partners participating in the programme. The partners included London Borough of Havering, NHS Outer North East London and now subsequently the Havering Clinical Commissioning Group, North East London NHS Foundation Trust and HAVCO. The strategy's primary focus was to promote independence, increase value for money and better outcomes for people to remain in their own homes.

There were three strands of prevention, these were:

- Promoting wellbeing (primary prevention) – aimed at people with no particular social care need.
- Early intervention (secondary prevention) – aimed at identifying people at risk to stop or slow down any deterioration.
- Enablement and reablement (tertiary prevention) – aimed at minimising disability and deterioration from established health conditions.

The Committee noted the themes of prevention included: strong leadership and a clear vision; a coordinated approach across the Council and other stakeholders; sustainable community capacity that increases engagement and motivation; a focus on safeguarding to help reduce social isolation and encourage participation; accessible and targeted information and advice; an enabling and empowering workforce culture; and stimulating the development of a diverse market.

In order to ensure that the objectives of the strategy were met, the following needed to be undertaken:

- Age proofing existing mainstream service to ensure inclusion.
- Provide information for all, including self funders, so that everyone can make an informed choice about their lives and their care.
- Build capacity into local neighbourhoods and encourage volunteering
- Support all services that promote wellbeing and reduce social isolation.
- Encourage participation in the diverse range of social, cultural and leisure services in the borough.

The strategy stressed the need for a whole system approach to delivering its aims and how important the partnership working was within the organisations.

The Committee noted the number of projects which had already been implemented and the outcomes of some of those projects for vulnerable and older people.

The Committee was informed that within the Prevention Strategy was the Fall Prevention and Bone Health Strategy. This strategy had four objectives, these were:

- To improve patient outcomes and improve efficiency of care after hip fractures through compliance with core standards.
- To respond to the first fracture and prevent the second through fracture liaison services in acute and primary care.
- To ensure early intervention to restore independence through falls care pathways, linking acute and urgent care services to secondary prevention of further falls and injuries.
- To prevent frailty, preserve bone health and reduce accidents through encouraging physical activity and health lifestyles and reducing unnecessary environmental hazards.

The Committee was informed of the implementation progress and the services that had been put in place to assist with prevention. These included the falls care pathway in collaboration with GPs, clinicians from the Acute Trust, London Borough of Havering, voluntary groups and service users; Hip fracture care of guideline standards; Osteoporosis prevention and management, together with community services.

The Committee noted that there had been a 30% drop in falls, which coincided with the awareness and promotion of the programmes. This in turn led to cost avoidance for Social Care and a better quality of life for the residents.

A member asked that when someone falls and has undertaken reablement, if their own property is assessed, for dim lights, trip hazards etc. Officers stated that all Occupational Therapists are specialist and therefore the property is visited before discharge home, to check all of these things.

The Committee agreed that there had been an improvement in the service made available however there was still cases of isolation. Officers stated that they were mindful that the borough was asset rich but capital poor and therefore there were a number of self-funders, however some were just over the threshold for Adult Social Care funding, this was monitored on a regular basis. If the services were extended to self funders this could include Meals on Wheels, Telecare and Telehealth. A member stated that local GPs would need to take a better interest in their patients to drive these projects forward.

There was a lengthy discussion about how services could be promoted and publicised to residents over 65 years old, together with finding out who would benefit from the service, who were not known to Social Care, in order to reduce isolation.

Members raised a question about if an elderly person is flagged up as being discharged from hospital and there are number of services which would help

them, however the elderly person declines any service and how was this dealt with. Officers stated that before the discharge the Social Care team would carry out an assessment of the persons needs. If they decline the services there is nothing that Social Care can do, they are kept on the system byt there was nothing in place to check on their progress.

32 BUDGETARY AND PERFORMANCE INFORMATION

Following a request by members of the Committee, details of the budget and performance information that were presented to Cabinet was brought to the Committee for members to raise any matters of concern within the Committee's remit.

A member raised the issue of the performance in take up of direct payments as a proportion of self-directed support. Officers stated that whilst the service was below the target, the population of Havering was very challenging. There were a lot of older people who did not want to deal with their own finances.

The government target of 60% was very ambitious for those people using social care who receive self-directed support and those receiving direct payments. Members raised issues of getting the message out to people who were in their early 60's so that they were more informed about what was available to them as they got older.

Chairman

Public Document Pack

**MINUTES OF A MEETING OF THE
JOINT (ALL) OVERVIEW & SCRUTINY COMMITTEE
Town Hall
24 January 2013 (7.30 pm – 9.10 pm)**

Present:

COUNCILLORS

Conservative Group Sandra Binion, Jeffrey Brace, Wendy Brice-Thompson, Dennis Bull, Osman Dervish, Roger Evans, Georgina Galpin, Pam Light, Robby Misir, Eric Munday+, Frederick Osborne, Garry Pain, Frederick Thompson, Linda Trew, Keith Wells and Damian White

+ Substituting for Rebecca Bennett

Residents' Group June Alexander, Clarence Barrett+, Nic Dodin, Gillian Ford, Linda Hawthorn, Barbara Matthews, Ray Morgon, Ron Ower and Linda Van den Hende

+ Substituting for John Mylod

Labour Group Keith Darvill+

+ substituting for Paul McGeary

Independent Residents Group Michael Deon Burton and David Durant

All decisions were taken with no votes against.

The Chairman reminded Members of the action to be taken in an emergency.

1 CHAIRMAN OF MEETING

With the agreement of all Overview & Scrutiny Committee Members, the Chair was taken at this special joint meeting by Councillor Sandra Binion.

2 CHAIRMAN'S ANNOUNCEMENTS

The Chairman advised all present of action to be taken in the event of emergency evacuation of the Town Hall becoming necessary.

3 APOLOGIES FOR ABSENCE AND ANNOUNCEMENT OF SUBSTITUTE MEMBERS (IF ANY) - RECEIVE

Apologies were received from the following Members:

Children & Learning Overview and Scrutiny Committee

Margaret Cameron (Co-opted Member – non-voting)

Crime & Disorder Committee:

Councillor Rebecca Bennett (substituted by Councillor Eric Munday)

Environment Overview and Scrutiny Committee

Councillor John Mylod (substituted by Councillor Clarence Barrett)

Towns & Communities Overview & Scrutiny Committee

Councillor Paul McGeary (substituted by Councillor Keith Darvill)

Value Overview and Scrutiny Committee

Councillor Ted Eden

4 DISCLOSURE OF PECUNIARY INTERESTS

There were no disclosures of interests.

5 THE COUNCIL'S FINANCIAL STRATEGY

The Leader of the Council, Councillor Michael White explained that the budget proposals had been made in the context of continuing austerity measures by central Government. The priority for Havering had been to protect front line services and reviews had therefore been undertaken of the Council's back office functions. A joint agreement with Newham had saved £5-6 million and further savings had been achieved by the introduction of ISS software and a total of 78 restructures across the Council.

The level of Council Tax which was formerly residents' top priority was now only the fourth priority and this showed that Council Tax levels in Havering were under control. The Council's savings plans were currently on track and budgets were being managed sensibly. A further £1.5 million of savings would be needed but it was anticipated that these could be found without any denigration of services, providing budgets were kept under review.

It was expected that the austerity situation would now last until at least 2017 and a further Comprehensive Spending review would have an impact on

Havering from 2015/16. A 1% cut was required in 2013/14 and a 2% saving would have to be achieved in 2014/15. Public sector pay would increase by an average 1%.

Changes impacting on the budgetary position included the localisation of business rates (although the Government would keep 30% of this revenue) a 10% cut in funding as a result of Council Tax localisation and funding of £1.8 million from the New Homes Bonus although the Rate Support Grant had fallen. NHS funding for social care had risen to £3.6 million although the borough's large elderly population had to be taken into account. There was also a ring fenced amount of £8.6 million for the new public health duties transferring to the Council.

In conclusion, the Leader felt it was essential to protect front line services but this could only be done with less money by finding efficiencies. The Administration's strong financial planning had been praised in the recent Peer Review report. It was important to continue to deliver value for money through initiatives such as Shared Services and East London Solutions. A future funding group had been established to help the Council prepare for further budgetary challenges in the future.

The Leader agreed with a Member's suggestion that energy management was a good area for investment and favoured using the Council's pension fund for this if it offered a better return.

Answers to questions raised by Members on specific items of the budget are shown in the appendix to the minutes.

Having received the presentation from the Leader of the Council, the Overview and Scrutiny Committees noted:

1. The financial position of the Council.
2. That the report was formally consulting them on the proposed Corporate budget adjustments and that this was the opportunity to scrutinise the budget proposals.

Chairman

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APPENDIX: JOINT MEETING OF OVERVIEW AND SCRUTINY COMMITTEES, 24
JANUARY 2013, ANSWERS TO MEMBER QUESTIONS ON THE COUNCIL'S
FINANCIAL STRATEGY

Questions were asked by Members on the areas shown below and answers were given by officers or Cabinet Members as follows:

1. Details on Corporate Contingency Fund and service revenue underspends – It was not possible to give any figures on these at this stage.
2. Why Havering remained continued to be in the highest floor damping band – There had been no clarity received on this from central government and it could not be established how these figures had been arrived at.
3. Details of funding received via the Early Years Support Grant – While it had been confirmed what the level of the top slice would be, it was not known what level of funding would come back to the Council. Some information had recently been received re how much adoption funding would come back to the Council but there remained a lack of specific details.
4. How many primary schools were planning to convert to academy status – No other primary schools were planning to convert at this stage.
5. Public health supplementary paper – This would be included in the February Cabinet report.
6. Savings from review of adult social care – The savings proposed took account of any underspend in other areas of adult social care.
7. Main savings areas proposed for adult social care – These were still being worked through and would cover a variety of areas. Savings would however be in back office functions, not front line services.
8. Impact on children's placements – Provision would be made for the rising numbers of cases. Costs could also be reduced by undertaking more work with families in order to reduce the need for placements.
9. Amount of section 106 receipts – This was not known at this stage and details would be supplied to Councillor Hawthorn outside of the meeting.
10. Predicted underspends – The contingency did not include the forecast overall underspend of £1.2 million. Contingency totals would not be declared until closer to the year end. Officers were very pleased with the catering

underspend which would be used to offset against overspends elsewhere. This was a regular surplus but could not be written permanently into the underlying budget as there was a possibility that the service could lose catering contracts in the future. It was felt it may not be productive for the service to take on many further contracts in addition to those it currently held.

11. Underspend on Special Corporate Budget Provision – Some risk factors had not been applied as yet and so there had only been one-off calls on this provision thus far.
12. Shortfall in income from advertising hoardings – Some income was obtained from sites such as those at the top of North Street and roundabouts. The recession had meant it was not viable to introduce any more sites and there had not been any impact on this from the Olympic Games. Details of income from the existing hoardings would be supplied to Councillor Barrett outside of the meeting.
13. Transfer of outside catering company staff into Havering pension scheme – The legal requirements of an outsourced contract meant that any current staff in the Local Government Pension Scheme had to be admitted to the Havering scheme.
14. Details of the New Homes Bonus – All funds received for this would be spent on the local community on services that residents wished to be improved. This was reflected in the budget. The New Homes Bonus was unringfenced and all residents had been consulted on the proposals being taken forward.
15. Commissioning of specialist advisors – Advisors of this kind were not employed by the Council. The advisor working in connection with the New Homes Bonus was aiming to get empty properties back into use as soon as possible. This was a specialist resource to purely undertake this role and had been carried out effectively in other boroughs.
16. Savings in Members Allowances 2014/15 – The Leader felt that a realignment of Cabinet posts and Overview & Scrutiny Committees was required although the position after the 2014 election would be a matter for the Leader at that time. A Cabinet Member dealing solely with children's issues may not be required once the plans for academies and free schools had concluded.
17. Your Council Your Say survey – The main questions in the survey were the same in order to allow for benchmarking. Some new questions could also be added.

18. Use of recession funding grant – This was used to support payment of additional claims for Council Tax and Housing Benefit.
19. Removal of Learning Disability and Health Reform Grant – There were no specific plans to change spending on this area. The current service plan would continue. Services provided would be assessed by social workers and carers' groups would also be consulted. Services to support people with high level needs were also continuing to be planned for.
20. Social Fund Localisation – Scrutiny of this would fall under the Value Overview and Scrutiny Committee. It was hoped that voluntary or community groups would administer a scheme offering help in kind up to a level of £100. This was a very new area and it was hard to know the exact Social Fund amounts at present. As such, a contingency may be needed. A smaller scheme was in existence in Mawneys ward whereby vouchers for a voluntary food bank could be issued to people.
21. Youth Offending Team – This funding had been removed as some services were now administered by the Youth Justice Board.
22. Social Work Improvement Team – This funding, to cover training for staff, had been now been withdrawn by central Government. Training remained a priority for the directorate however.
23. Troubled Families – While this grant had now been withdrawn, some funding would come to the council as payment by results claims were submitted.
24. Culture & Leisure Savings – The predicted income increase from football pitches was due to the opening of more pitches rather than any plans to increase prices. Officers would confirm to Councillor Darvill the position as regards the pitches at the rear of the Albermarle Youth Centre. Income from Hornchurch Country Park was due to payments for cows being allowed to graze in the park. It was not expected that there would be complaints as a result of cow excrement due to the large size of the park. Officers would check re any current income from cows already grazing in the park. The reduction in cleaning costs would not result in dangerous glass etc being left in parks. There would be no impact of the removal of the car allowance for Parks Protection officers as staff would use Council vehicles.
25. Children's Services – Management & Administration Savings – These would result from restructures of the service following a series of reviews over the last six months.

26. Capital Expenditure – A Member welcomed the presentation of details of capital programme expenditure and requested that this format be followed to allow monitoring of savings throughout the year.

27. Corporate Plan Refresh – A Member requested that this be printed in a bigger typeface or in colour.

London Borough of Havering Commissioning Team Mercury House, Mercury Gardens, Romford

Care Point Performance Report

January 2013



Glossary

Information provided: Information supplied to the clients (Includes talking clients through websites i.e. exploring the eligibility criteria of benefits on screen with clients, printouts of information from websites/resources for the client to take away with them and supplying appropriate leaflets from stock held at Care Point)

Signposting: Direction of a client, where client is able and willing, to an appropriate organisation or agency for client to receive further assistance regarding their issue. (Provision of telephone numbers or direction to the offices of other organisations)

Contact: Interaction with the client and third parties on the client's behalf. Also includes contact made by other organisations to Care Point regarding a client.

1 January Headlines

1.1 Strong Performance: Following a shorter period of operation in December which led to a drop in performance, all service activity has returned to a normal level. There are strong performances with new (best figure since July) and repeat customers (third best ever figure) and the highest number of enquiries. In addition, the number of website visits has reached an all time high with 1,316 visits though visit duration fell in January.

1.2 Information Needs: In January, like others months, the top three areas of enquiry remain the same for Care Point customers. Benefits (35.2%), health/social care (33.8%) and housing (19.4%) accounted for the majority of enquiries. With regards to health/social care enquiries, 51.7% of these enquiries were social care related.

1.3 Where customers live: Postcode data continues to show that significant numbers of Care Point customers reside in Brooklands, Mawney and Romford Town (35.2%), Gooshays and Harold Wood (17.6%). Also, in January, there were 39 contacts from out of the borough of which 20 were enquiries on behalf of a Havering resident.

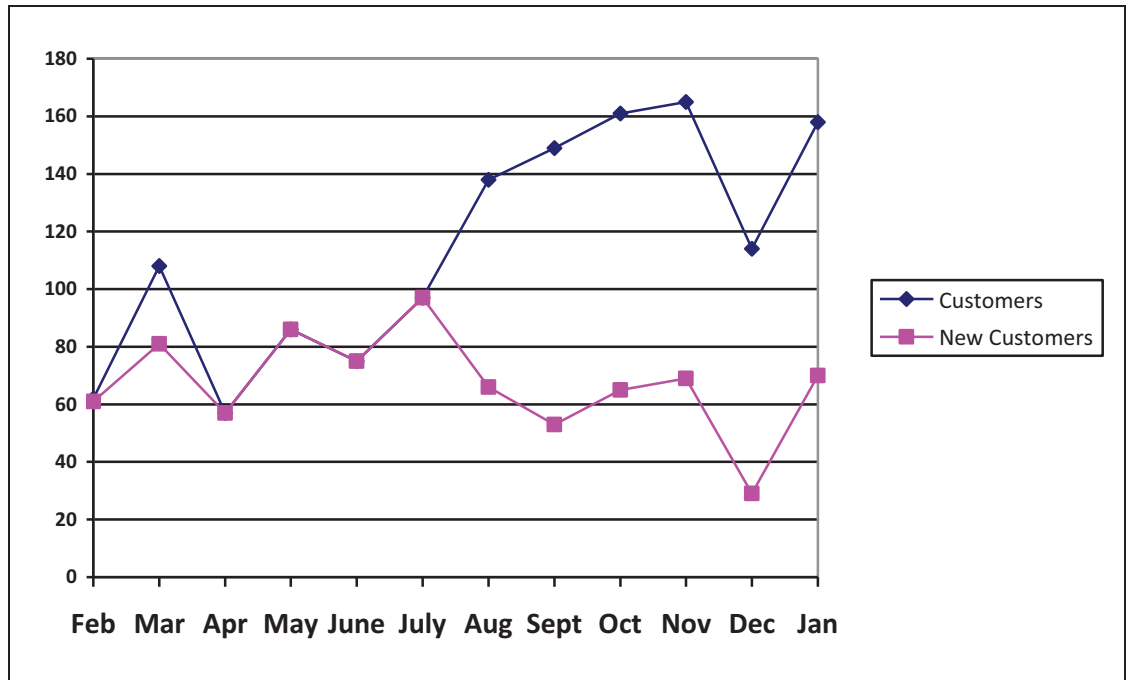
1.4 Customers Age & Disabilities: In January, 38% of customers were aged 50-64 with 22.8% of customers aged 64+ and 14.5% of customers were aged 35-49. With regards to disabilities, 48% of Care Point customers reported having a disability.

1.5 Care Point Response: In January, 66% of customers were provided with information followed by signposting (33%) and referrals (1%).

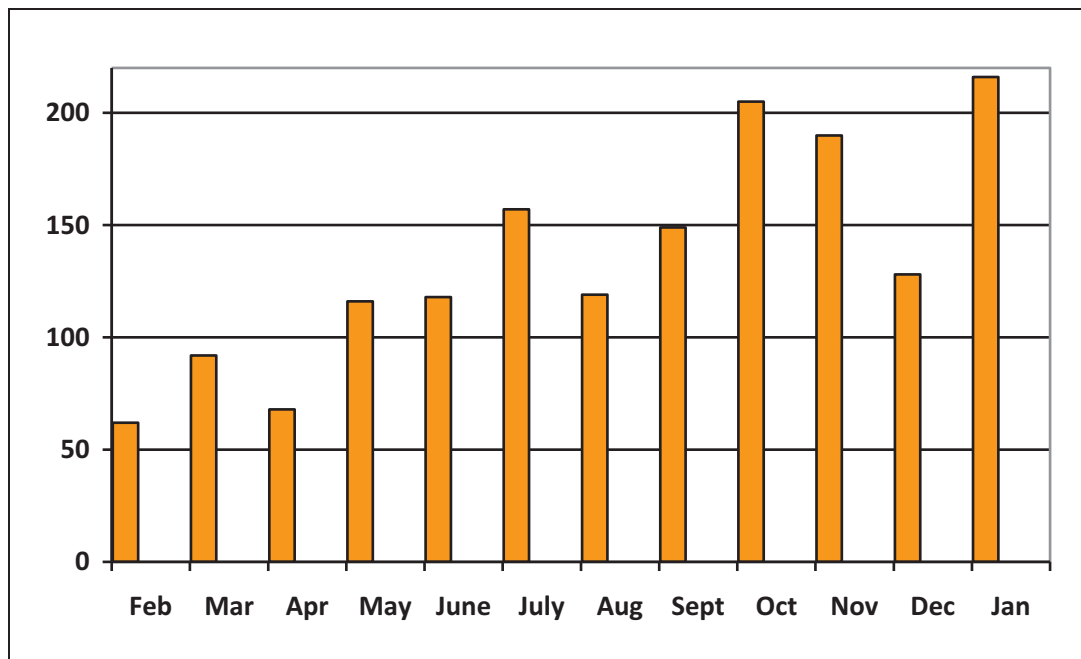
1.6 Customers Destination: In January, Care Point provided information, signposted or referred customers to 70 local and national organisations (in January, the figure was 62) with the CarePoint website (22%), Havering Council (16%), Adviceguide (11%), DirectGov (10%), First Stop (8%) and NHS Carers Direct (7%) accounting for the top 6 agencies.

2 Contacts

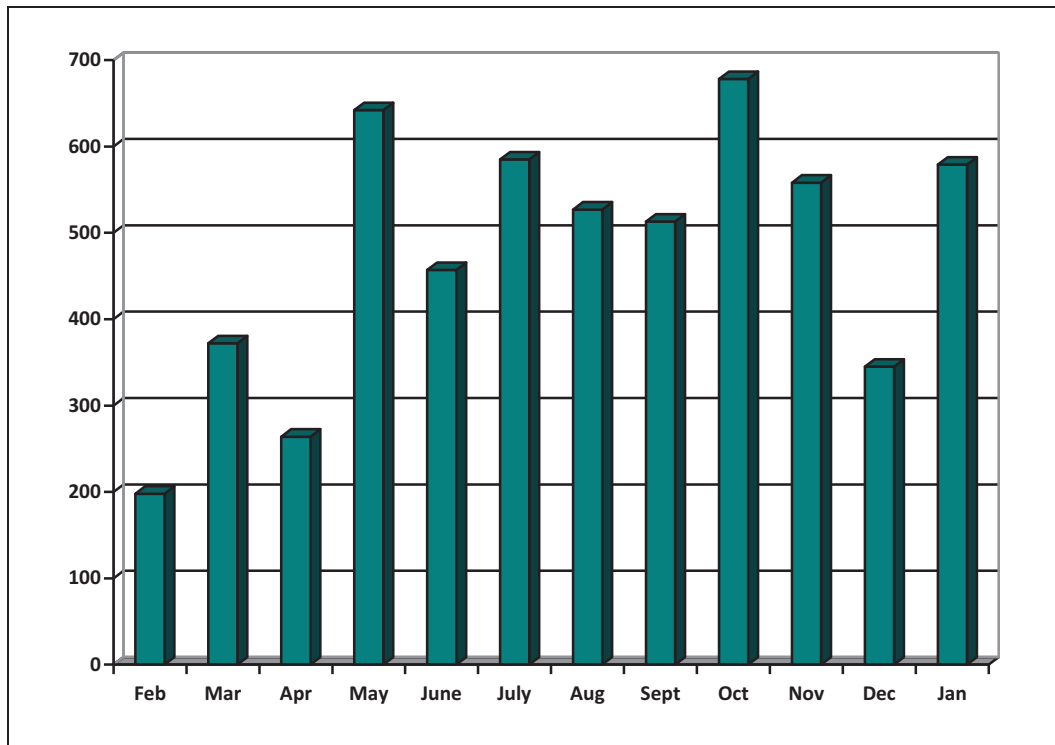
2.1 Total No of Customers & New Customers



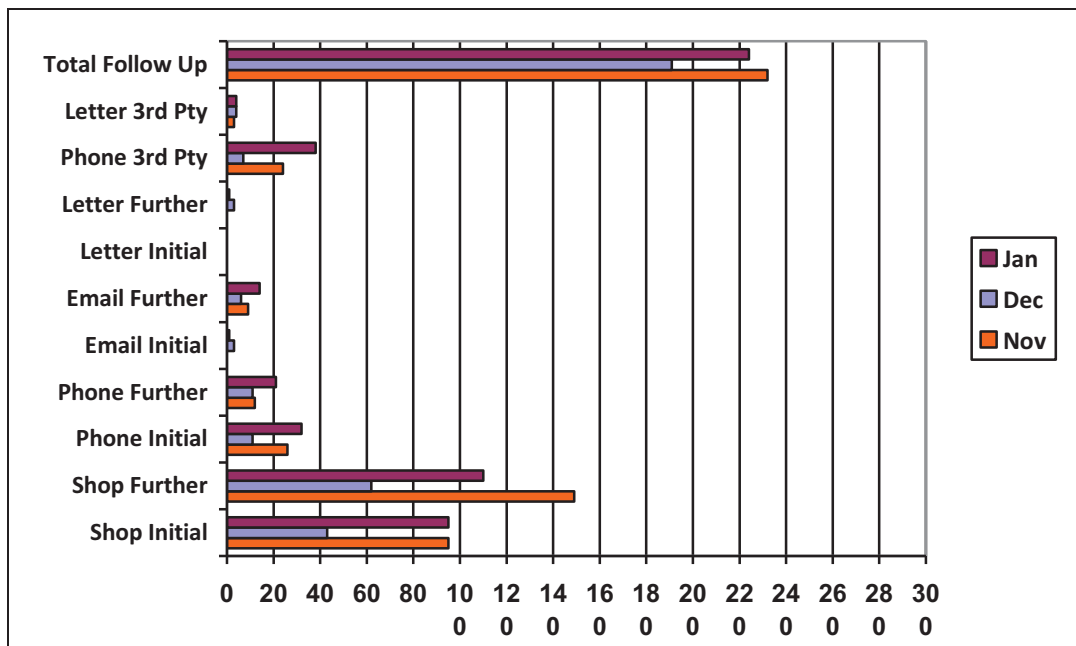
2.2 Total No of Enquiries



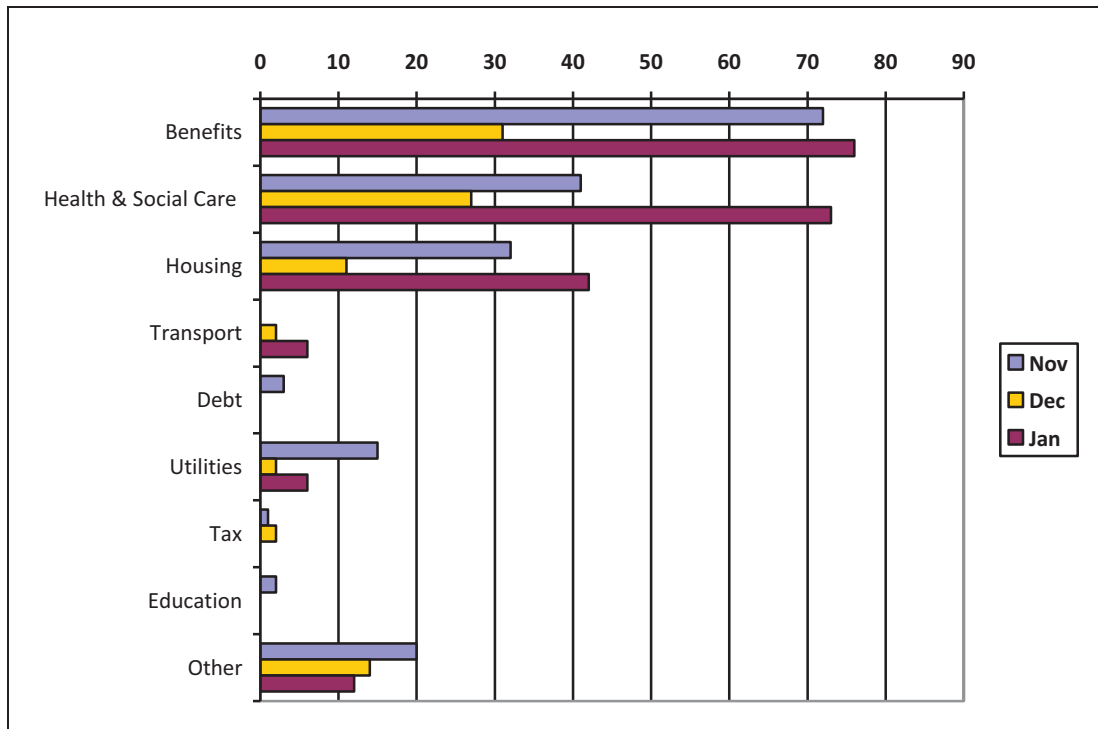
2.3 Total No of Contacts



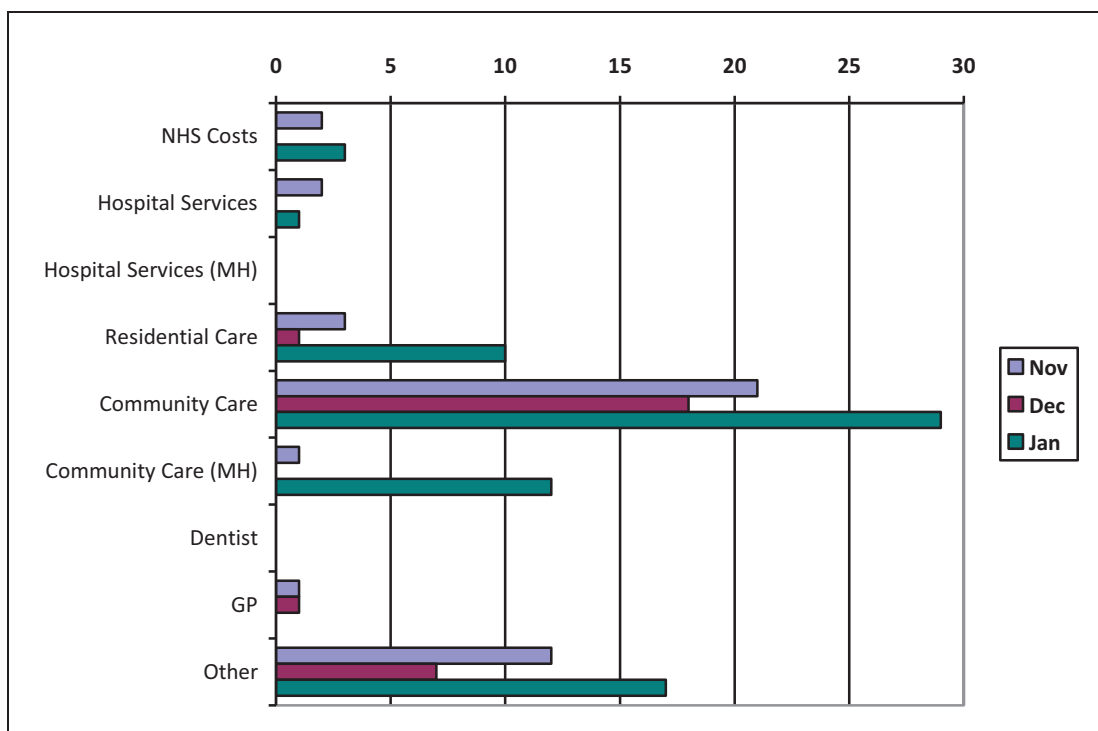
2.4 Types of Contact



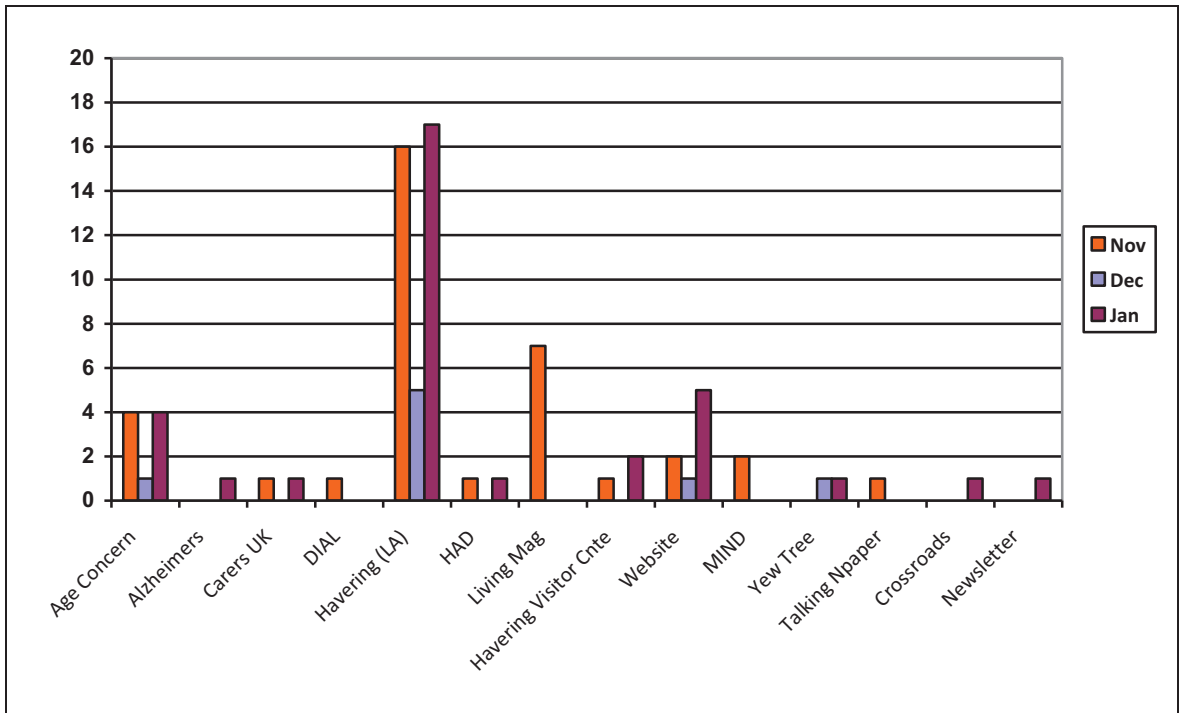
2.5 Types of Enquiries



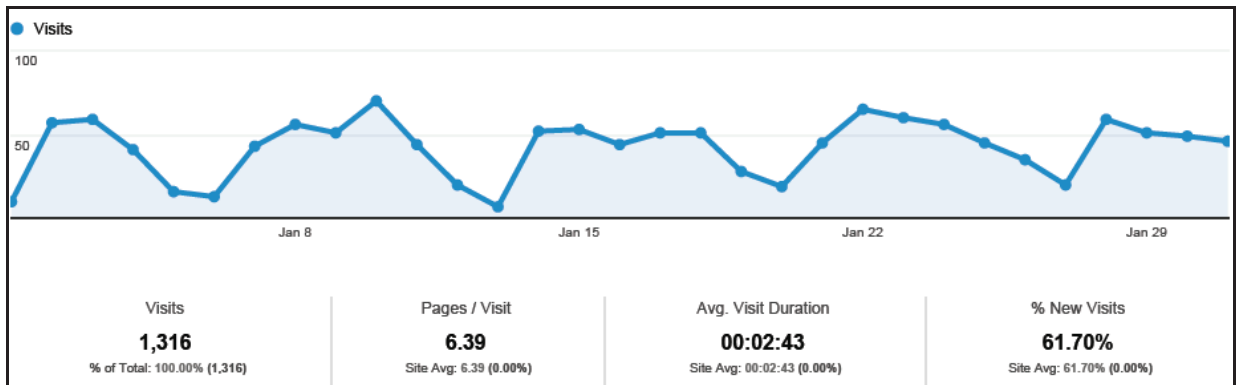
2.6 Health & Social Care Enquiries



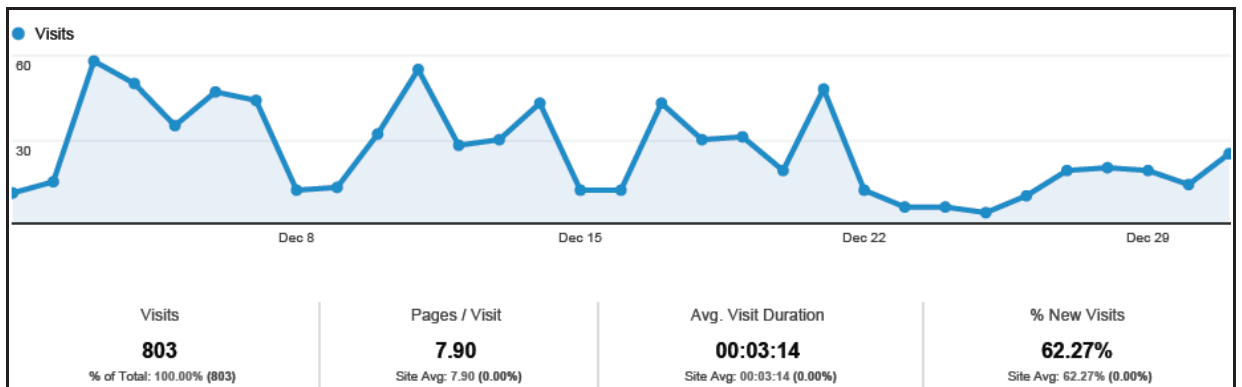
2.7 Signposting & Referral - from other agencies



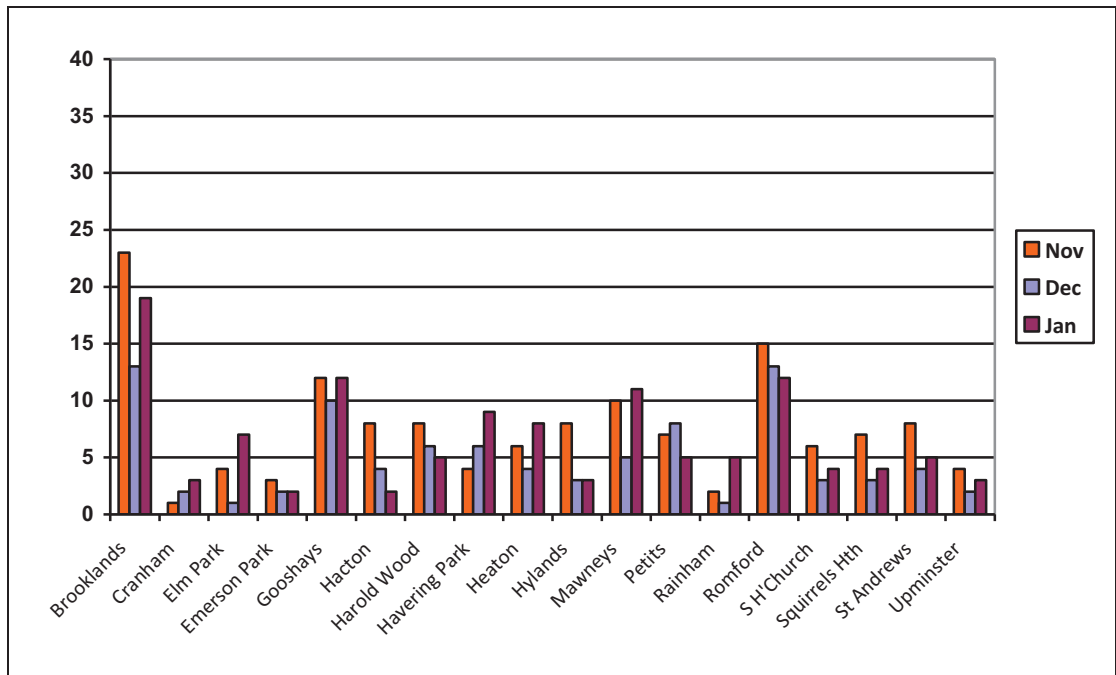
2.8 Website Visits (Jan)



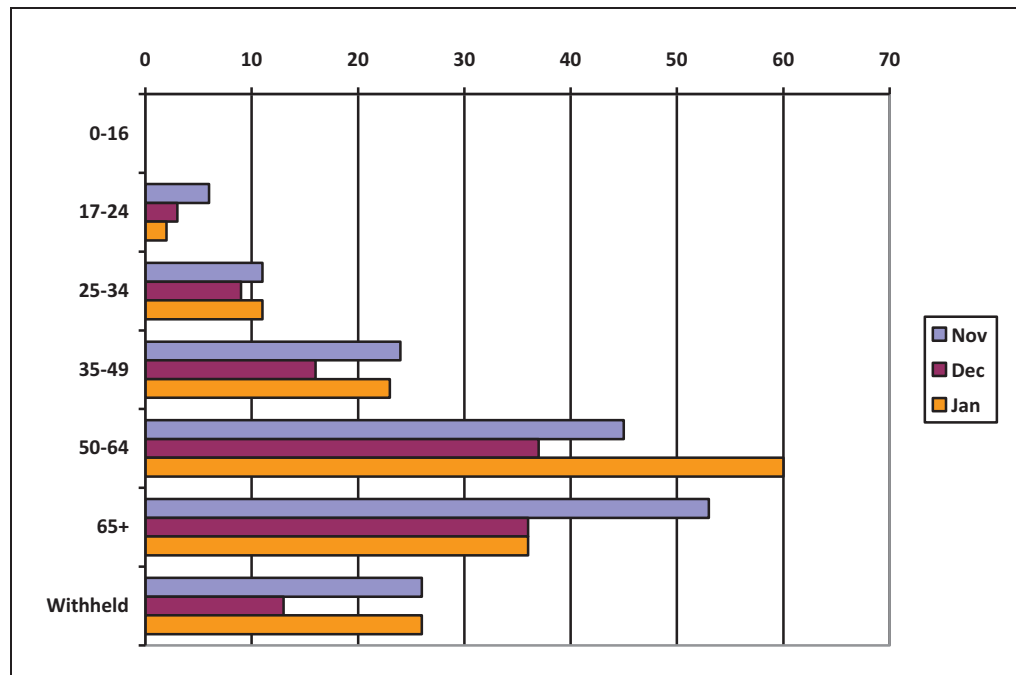
Website Visits (Dec)



2.9 Area of Residence

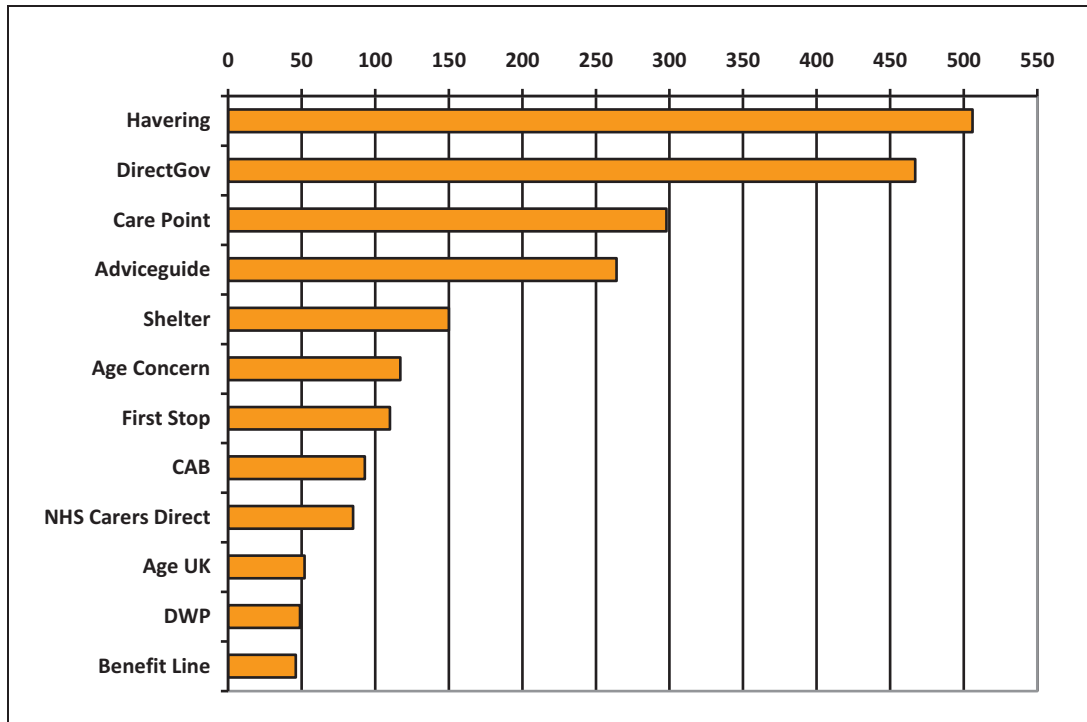


2.10 Age of Customers

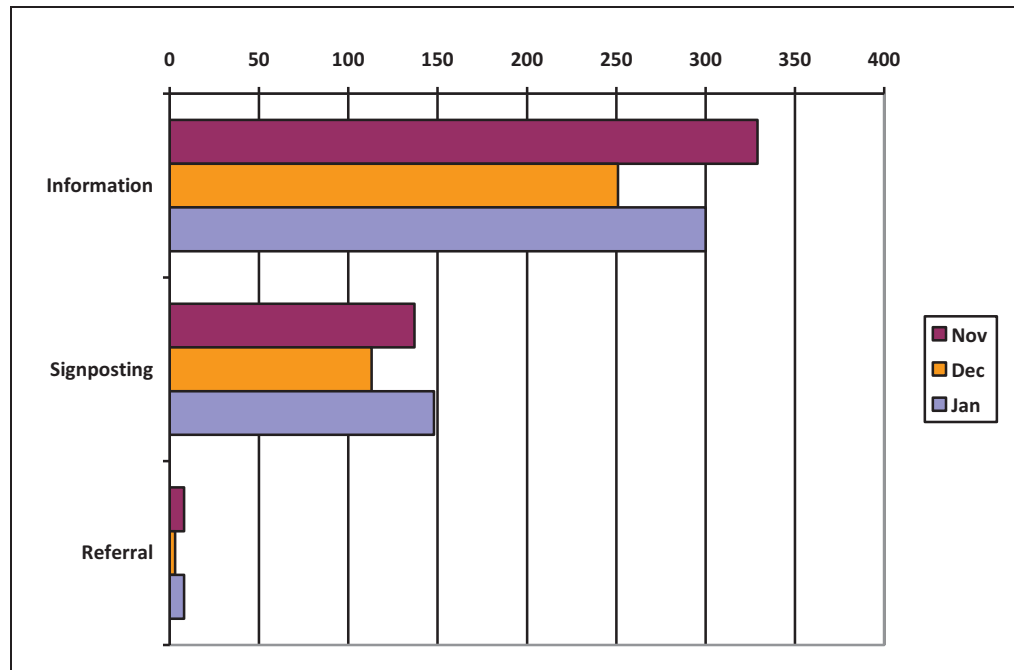


3 Outcomes

3.1 Top 12 Organisations signposted, information provided or referred to (June 2012-January 2013)

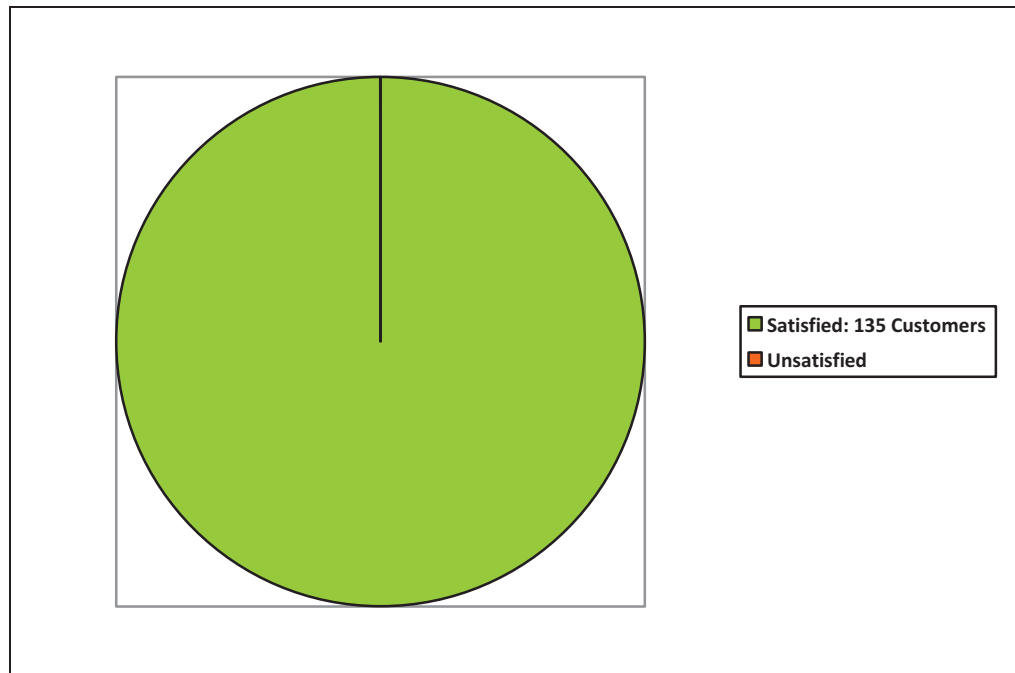


3.2 Types of Activity

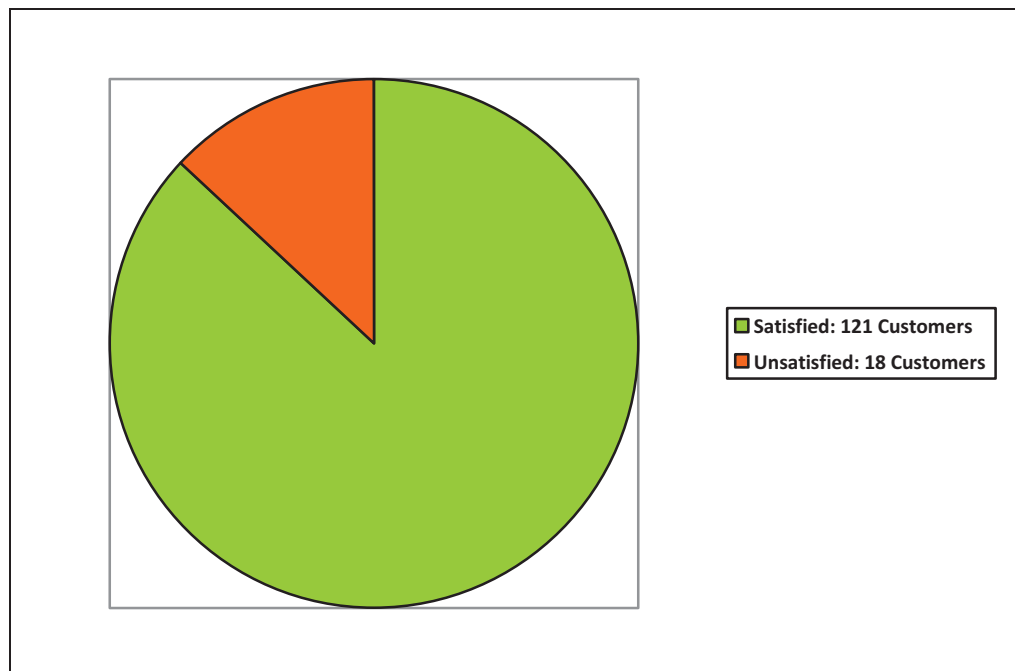


3.3 Customer Satisfaction (collected from September 2012)

3.3.1 Care Point



3.3.2 Organisation Follow Up Satisfaction



4 Workforce Training

4.1	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr style="background-color: #ccc;"> <th style="width: 30%;">Courses attended {incl date, times & venue}</th> <th style="width: 10%;">Dave</th> <th style="width: 10%;">Ugne</th> <th style="width: 10%;">Jodi</th> <th style="width: 10%;">Chris</th> <th style="width: 10%;">Hannah</th> </tr> </thead> <tbody> <tr> <td>FACS – Fair Access to Care Services – CEME Centre (FULL DAY)</td> <td style="text-align: center;">Yes</td> <td style="text-align: center;">Yes</td> <td style="text-align: center;">Yes</td> <td style="text-align: center;">Yes</td> <td></td> </tr> <tr> <td>Personalisation Training – Havering College Quarles Campus – 16/3/12 (HALF DAY)</td> <td style="text-align: center;">Yes</td> <td style="text-align: center;">Yes</td> <td style="text-align: center;">Yes</td> <td style="text-align: center;">Yes</td> <td></td> </tr> <tr> <td>Fuel Poverty Training – Care Point – (HALF DAY)</td> <td style="text-align: center;">Yes</td> <td style="text-align: center;">Yes</td> <td style="text-align: center;">Yes</td> <td style="text-align: center;">Yes</td> <td style="text-align: center;">Yes</td> </tr> <tr> <td>Disability Law Service Workshop, 28th March 2012 10-12am at HAD</td> <td></td> <td style="text-align: center;">Yes</td> <td></td> <td style="text-align: center;">Yes</td> <td></td> </tr> <tr> <td>RAD Deaf Awareness Training, 27th June AM and PM sessions at Care Point</td> <td style="text-align: center;">Yes</td> <td style="text-align: center;">Yes</td> <td style="text-align: center;">Yes</td> <td style="text-align: center;">Yes - PM</td> <td></td> </tr> <tr> <td>Conflict Resolution and Personal Safety Training, 16th July at HAVCO (Full Day)</td> <td></td> <td></td> <td style="text-align: center;">Yes</td> <td></td> <td></td> </tr> </tbody> </table>	Courses attended {incl date, times & venue}	Dave	Ugne	Jodi	Chris	Hannah	FACS – Fair Access to Care Services – CEME Centre (FULL DAY)	Yes	Yes	Yes	Yes		Personalisation Training – Havering College Quarles Campus – 16/3/12 (HALF DAY)	Yes	Yes	Yes	Yes		Fuel Poverty Training – Care Point – (HALF DAY)	Yes	Yes	Yes	Yes	Yes	Disability Law Service Workshop, 28th March 2012 10-12am at HAD		Yes		Yes		RAD Deaf Awareness Training, 27th June AM and PM sessions at Care Point	Yes	Yes	Yes	Yes - PM		Conflict Resolution and Personal Safety Training, 16th July at HAVCO (Full Day)			Yes		
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5 Case Studies

5.1	<p>Attendance Allowance and Pension credit entitlement</p> <p>Client’s partner suffered a stroke and the Client has become the main carer in the home. Client had been given an Attendance Allowance form, but was having difficulty in completing it. Care Point was able to arrange a referral to another organisation {Age UK} to assist client completing said form. Client also enquired about their Pension Credit entitlement; due to partner spending time in a care home, would it change as the partner was returning home? Care Point contacted the Pension Service with the Client present, and arranged for a change of circumstance form to be sent to the Clients address. The Client was able to receive help in completing the form at the same time as the Attendance Allowance form. After a follow-up call to client, the Pension Credit is remaining at the same level of entitlement, and the Clients partner has been awarded the higher rate of Attendance Allowance £77.45 per week.</p>
5.2	<p>Personal care needs and Telecare services</p> <p>Client visited Care Point looking to find out whether there was any support that could be offered to client around the home? Client has mobility problems which restrict ability to live independently and safely within their own home. Client was informed about possible Needs Assessment by Havering Adult Social Care Team and Telecare Services that are available, using Care Point website as information source. A follow up call was later made to find out how the client progressed with the information provided and whether client has been successful in getting any support.</p>

	<p>Client stated that they were very pleased and happy with all information provided by Care Point, as it has been useful and informative. Client stated that since a visit to Care Point, client has been in touch with Havering Adult Social Care Team and assessed for Telecare equipment which now has been provided to the client free of charge. Client thanked for all the help provided, as it has been a great help in getting the Telecare equipment.</p>
<p>5.3</p>	<p>Help with Care Home Fees</p> <p>The Client contacted Care Point in regards to a relative who was self-funding their stay in a care home. The relative was currently funding the cost of the care home, from the rent generated by the relative's house. The Client was concerned about a potential increase in the care home fees that may not be covered by the generated rent, and they may have to consider selling the home. The Client was interested to know what help might be available to pay the fees.</p> <p>Care Point was able to supply the Client with information on Attendance Allowance, NHS Registered Nursing Care Contributions and NHS Continuing Care. Care Point also provided some information to the Client regarding the treatment of property and the deferred payment scheme. Client was able to take away this information, to find out what their relative was already in receipt of, and what they may be able to claim.</p> <p>During the follow up conversation with the Client, it was stated that the information had been helpful and as a result they had discovered that their relative was not receiving Attendance Allowance. The Client helped the relative apply for it, and was successful with the claim. The relative was able to offset the increased care costs with Attendance Allowance, meaning that at present they did not need to sell the home and would be able to fully fund the relatives stay in the care home for a further year.</p>

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INDIVIDUALS OVERVIEW AND SCRUTINY COMMITTEE

Subject Heading:	Extra Care Strategy (draft report)
CMT Lead:	Joy Hollister
Report Author and contact details:	Joe Coogan Assistant Director Commissioning Joe.Coogan@havering.gov.uk Telephone 01708431950
Policy context:	The Dreywood Court development aims to strengthen the housing options for Havering residents in older age, as well as tackling social exclusion experienced by many older people.

SUMMARY

1. As part of the Extra Care Strategy, the Council has worked in partnership with East Thames Housing Group to develop a new high quality extra care housing scheme on the site of a former sheltered housing scheme, Snowdon Court. The new development, called Dreywood Court, comprises ninety eight flats, twenty of which will be shared ownership and seventy eight of which will be for rent. These flats are an excellent opportunity for local residents to live independently in a safe and supported environment.

2. The scheme is scheduled to be let from 1 May 2013 and efforts are underway to identify potential residents. The nomination agreement gives Havering Council 100% of all first lets and 100% of all relets for all the accommodation at Dreywood Court. It is important to ensure that those residents nominated fulfil the nominations criteria but also there is a balanced community of people who will benefit most from the facilities offered at the scheme. Given the scale of the development it is important that the success of the scheme should not be judged on the initial letting but rather by the medium term savings it will make for the residents and the Council. It is important that the scheme is fully allocated by August 2013 or the Council will have to pay void property penalties.

RECOMMENDATIONS

Members of the Overview and Scrutiny Committee are asked to consider the development of high quality housing for people in older age at Dreywood Court and to note its progress.

REPORT DETAIL

1 Background

- 1.1 Dreywood Court is a new, purpose built extra care housing scheme in Gidea Park, built on the site of the former sheltered housing scheme Snowdon Court. It is due to open in May 2013.
- 1.2 The scheme comprises ninety eight self-contained flats, forty nine each of 1 and 2 bedrooms. Seventy eight flats are for social rent with the remaining twenty being shared ownership. The site is configured across two separate blocks, with the main block containing a range of communal facilities including a restaurant, activity spaces and lobby area with comfortable seating.
- 1.3 East Thames Housing Group (ETHG) is the Registered Social Landlord responsible for developing the scheme in partnership with the Council. ETHG will retain landlord responsibilities, issue Assured Tenancy agreements and retain the on-going housing management responsibility. It will work closely with the care and support provider, to ensure the scheme remains a vibrant and inclusive community.

2 Extra care housing

- 2.1 Extra care housing is one housing option for people aged 55 and over who require some care and support but wish to retain the independence of living in their own home rather than having to move into a residential care home.
- 2.2 Extra care housing provides a more intensive level of support than standard sheltered housing, normally with a 24 hour care team on site. Extra care housing may suit people who need a significant level of personal care or support, as well as those with relatively low support needs, but who are otherwise able, and wish, to live independently.
- 2.3 Most of the extra care housing provided in Havering is rented accommodation with limited opportunities for shared ownership. The development at Dreywood Court increases the number of flats available for shared ownership as ten one bedroom and ten two bedroom units are to be offered on a shared ownership basis.
- 2.4 There are a number of key features that distinguish extra care housing from more traditional residential care settings:

- extra care housing is housing first-people who live there have their own self-contained homes and have legal rights to occupy that space which are underpinned by housing law.
- it is self-contained accommodation
- couples are able to stay together
- residents come and go as they choose, in the same way as they would if living in the wider community
- the provision of care and support is separated from the provision of accommodation
- care and support is based on an individual assessment of needs and can be more easily tailored to the individual and the on-site staff are empowered to be flexible in their delivery of care and support.

3 Extra care housing schemes in Havering

3.1 Havering already has two extra care housing schemes where care and support is commissioned by Adult Social Care; Paines Brook Court in Harold Hill and St Ethelburga Court in Harold Wood.

3.2 Facilities within the three different extra care housing schemes vary slightly as do the eligibility criteria; There is a current extra care allocations procedure and it is expected that, once the scheme is fully up and running, the procedure will be mainstreamed into this process.

4. Care and support on site in extra care housing

4.1 The overall aim of the on-site care and support team is to work with residents and the landlord to create and maintain a safe, supportive and inclusive environment that promotes independence, health and well-being.

4.2 The care and support service within an extra care housing scheme places the individual at the heart of the support it provides; involves that person in choices about their care and support; promotes positive risk taking, independence, dignity and choice at all times; and has a strong focus on enabling and re-abling.

4.3 Many residents who live in extra care housing enjoy the activities and sense of community which living in a shared building can give. Dreywood Court has a range of communal areas where activities can be arranged, and a restaurant that residents can use. These facilities mean that residents have an opportunity to meet with other people each day if that is what they choose, but they do have their own front door and can therefore protect their privacy. These opportunities, which we expect the landlord to support, will tackle the sense of isolation which many Havering residents tell us they feel in older age.

4.4 Individuals are able to come and go from the building when they choose, and the underlying ethos is a home in which a resident can stay for the rest of their life. Staff will not closely monitor residents' whereabouts and are therefore unable to provide the intensive support for people who are experiencing more severe forms of dementia. Where residents develop dementia or other serious conditions the extra care housing landlord and the care and support provider will endeavour to provide a service which enables them to stay there as long as it is practicable. However, where the identified

risks are unable to be effectively managed, the landlord, care and support provider and relevant Care Manager will work to identify more suitable accommodation.

5 Care and Support Provider

5.1 The Council tendered to find a high quality provider for Dreywood Court which has a good track record of providing personalised care and support services within an extra care housing setting. The contract has been offered to Sanctuary Homecare subject to detailed negotiations. They will start working with the ETHG, Social Services and people who have expressed an interest in moving into the scheme from early March 2013. All Dreywood Court residents will need to agree to have their assessed care needs met through Sanctuary Homecare and will be able to work with the provider to develop a personalised service. This will ensure a consistent level of service and remove the confusion which would be caused by having many carers on site.

6 Eligibility criteria and process for applying to be a resident at Dreywood Court

6.1 Dreywood Court is open to people 55 years and over who have a personal or social care need. If a couple applies, then at least one person must be 55 years and over and have a personal or social care need.

6.2 Eligibility to move in to Dreywood Court is based on three main things;

- being aged 55 years or over
- eligibility for social housing in Havering
- assessed as needing care and support services through Social Services.

6.3 All applicants will need to complete a housing application form and medical form. All applicants will need to have a current assessment by Social Services to determine the level of care and support services required.

7 Rents and Service Charges

7.1 Residents will be liable to pay rent and service charges for their accommodation. Rents will be set each year in the same way that any social landlord applies rent charges. Service charges will be variable based on the amount spent each year to cover costs such as electricity, gas and water for communal areas, cleaning services, garden and grounds maintenance, entry phone systems, CCTV and alarm systems, lift maintenance and communal repairs to items such as lights.

8 Allocations Programme

8.1 The Housing and the Adult Social Care departments are working closely to ensure that the scheme is let as efficiently as possible. There will be a joint allocations panel to agree the nominations and that panel will be mindful of the ability of the care provider to meet the needs of the nominees. Since January 2013 a Project Board has been established to consider and direct the allocation of the scheme. Set out below is a

selection of the actions taken to ensure that all residents who meet the eligibility criteria are given every opportunity to apply to become a resident. The actions have included:

- Writing to 2500 Havering residents who are registered on the social care computer data base AIS
- Open days
- Road shows
- Presentations to Social care teams
- Promotion at Care Point
- Presentation to the Over 50 Forum
- Age Concern (Havering) and voluntary sector partners awareness raising
- Culture Forum presentation
- Carers 'Forum presentation
- Activate Havering Faith Sector event presentation
- Housing team meeting presentations
- Adverts in Living
- Targeted contact with those people who are under occupying Council accommodation
- Opening of a Show flat at Dreywood Court
- Social groups

8.2 As a result 280 people have registered an interest in Dreywood Court. A pilot viewing day was held on Monday 11th February 2013 for the people who have expressed an interest in renting a flat at Dreywood Court. The show flat is open on Thursdays and Saturdays for people interested in shared ownership housing units. Continued efforts are being made to identify potential residents as it is difficult to predict how many people will meet the extra care criteria or how many people decide extra care housing is the option they choose to pursue.

8.3 There is a need to maintain a pool of potential applicants and to market the scheme up to the point that the scheme is fully subscribed. Under the draft nomination agreement, if the Council does not provide nominations within three months of being opened then ETHG will have the freedom to advertise vacancies and make offers to applicants from anywhere, although they must give priority to Havering residents. ETHG will also have the ability to raise a 96% rental loss charge for each unit that remains vacant after the initial three month letting period. This charge does not apply to the shared ownership units.

9 Conclusion

9.1 Dreywood Court is a high quality scheme which is designed to meet the needs of people in older age. The scheme is designed to promote community activity and address the issue of isolation that residents in Havering have told us they suffer. It is anticipated that the scheme in the medium term will be a valuable asset which will enable the council to meet its social care obligations to an ageing population in an efficient way, will contribute to the preventative agenda and will offer more choice to the people of Havering.



IMPLICATIONS AND RISKS

Financial implications and risks:

The Councils ten year Extra Care Housing Strategy 2011-2021 was approved by Cabinet in March 2011. Dreywood Court was developed as part of this overarching strategy.

The cost of the care and support provider is to be met from within existing Adult Social Care (ASC) resources. The rationale is that budget will be allocated from existing homecare or other ASC budgets as people move into the scheme, and there will also be an element of self funders. The exact implications are difficult to quantify until people actually move into the scheme, so careful records will need to be kept to enable realignment of budgets in order to fund the contractual commitment. There is the risk in the first year that there will be some time lag as people are allocated a flat and then move in, this could lead to some void costs being incurred. Again the impact of this will need to be carefully monitored and a funding source assured. This is in hand and will be managed as part of the Councils ongoing budgetary control process.

There are related MTFs savings of £100k from April 2013 rising to £250k from April 2014. The savings are preventative in nature so are difficult to quantify, however the strategy demonstrated that an increase in extra care units would result in cost savings for the Local Authority. The plan to achieve these savings is that supported accommodation will prove less costly than residential placements; the effect on residential care budgets will be monitored over time.

Legal implications and risks:

There are no apparent legal implications from noting the content of the Report

Human Resources implications and risks:

There are no HR implications arising directly as a result of the report Eve Anderson (Strategic HR Business Partner, Social Care & Learning)

Equalities implications and risks:

Extra care housing is one housing option for people aged 55 and over who require some care and support but wish to retain the independence of living in their own home, rather than having to move into a residential care home.

The overall aim of the on-site care and support team is to work with residents and the landlord to create and maintain a safe, supportive and inclusive environment that promotes independence, health and well-being.

The development of Dreywood Court detailed in the report addresses issues aims to overcome barriers faced by a number of people categorised as protected groups with protected characteristics, notably older people, women and people with disabilities. Each of the flats has been designed to the a high accessibility standard. The marketing of the scheme is designed to reach as many eligible groups as possible and the allocation of the scheme will be in accordance of the Council policies and practices.

Claire Thompson, Corporate Policy and Community Manager

BACKGROUND PAPERS

None

DRAFT

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