



## INDIVIDUALS OVERVIEW & SCRUTINY SUB-COMMITTEE AGENDA

<b>7.00 pm</b>	<b>Wednesday 5 January 2022</b>	<b>Virtual Meeting</b>
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Members 9: Quorum 4

### COUNCILLORS:

Nic Dodin  
Denis O'Flynn  
Christine Smith (Chairman)  
Ciaran White  
Linda Van den Hende

Michael White (Vice-Chair)  
David Durant  
Jan Sargent  
Bob Perry

**For information about the meeting please contact:**

**Luke Phimister 01708 434619  
luke.phimister@onesource.co.uk**

## **Protocol for members of the public wishing to report on meetings of the London Borough of Havering**

Members of the public are entitled to report on meetings of Council, Committees and Cabinet, except in circumstances where the public have been excluded as permitted by law.

Reporting means:-

- filming, photographing or making an audio recording of the proceedings of the meeting;
- using any other means for enabling persons not present to see or hear proceedings at a meeting as it takes place or later; or
- reporting or providing commentary on proceedings at a meeting, orally or in writing, so that the report or commentary is available as the meeting takes place or later if the person is not present.

Anyone present at a meeting as it takes place is not permitted to carry out an oral commentary or report. This is to prevent the business of the meeting being disrupted.

Anyone attending a meeting is asked to advise Democratic Services staff on 01708 433076 that they wish to report on the meeting and how they wish to do so. This is to enable employees to guide anyone choosing to report on proceedings to an appropriate place from which to be able to report effectively.

Members of the public are asked to remain seated throughout the meeting as standing up and walking around could distract from the business in hand.

### **What is Overview & Scrutiny?**

Each local authority is required by law to establish an overview and scrutiny function to support and scrutinise the Council's executive arrangements. Each overview and scrutiny sub-committee has its own remit as set out in the terms of reference but they each meet to consider issues of local importance.

The sub-committees have a number of key roles:

1. Providing a critical friend challenge to policy and decision makers.
2. Driving improvement in public services.
3. Holding key local partners to account.
4. Enabling the voice and concerns to the public.

The sub-committees consider issues by receiving information from, and questioning, Cabinet Members, officers and external partners to develop an understanding of proposals, policy and practices. They can then develop recommendations that they believe will improve performance, or as a response to public consultations. These are considered by the Overview

and Scrutiny Board and if approved, submitted for a response to Council, Cabinet and other relevant bodies.

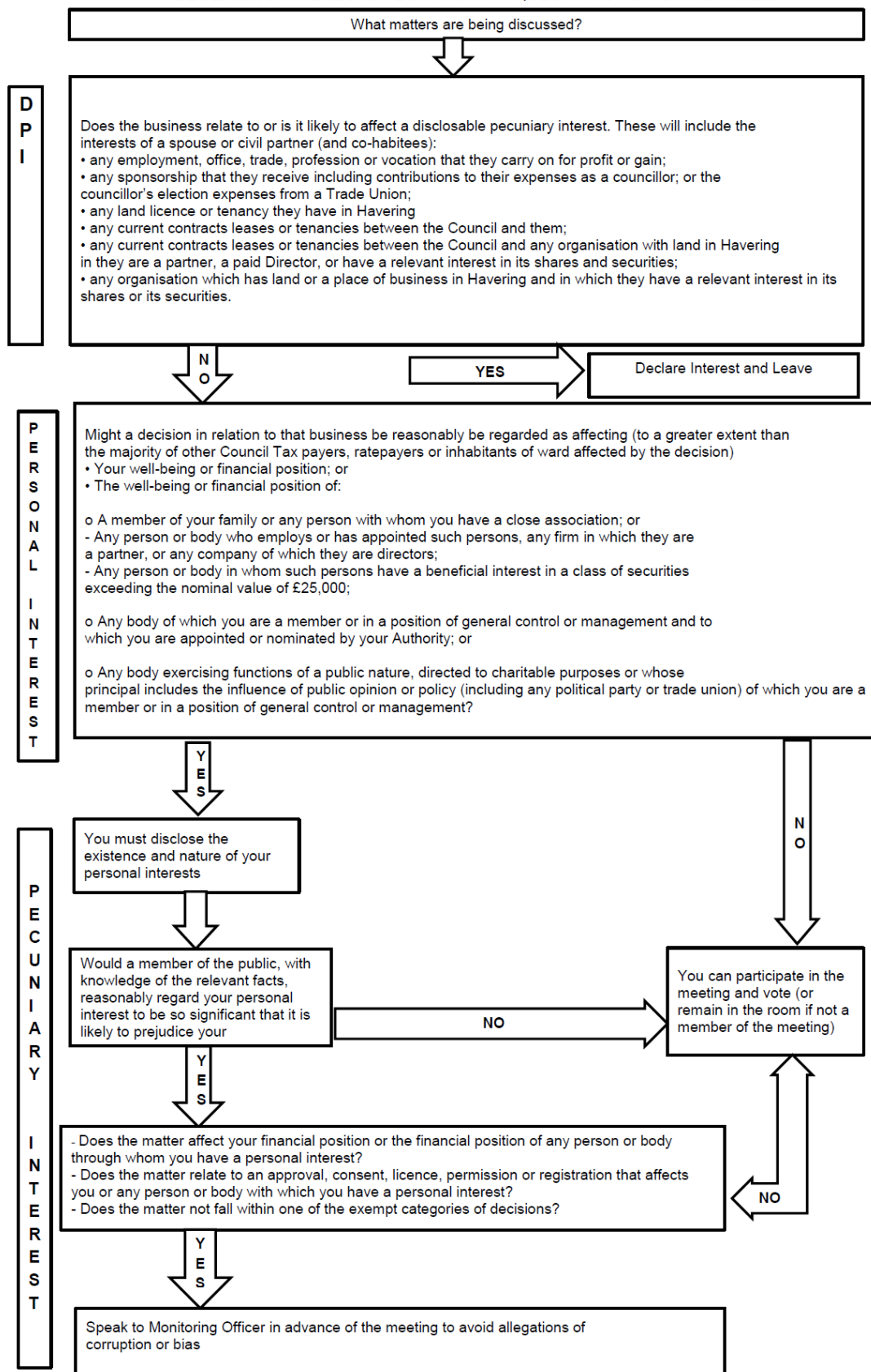
Sub-Committees will often establish Topic Groups to examine specific areas in much greater detail. These groups consist of a number of Members and the review period can last for anything from a few weeks to a year or more to allow the Members to comprehensively examine an issue through interviewing expert witnesses, conducting research or undertaking site visits. Once the topic group has finished its work it will send a report to the Sub-Committee that created it and will often suggest recommendations for the Overview and Scrutiny Board to pass to the Council's Executive.

## **Terms of Reference**

The areas scrutinised by the Committee are:

- Personalised services agenda
- Adult Social Care
- Diversity
- Social inclusion
- Councillor Call for Action

**DECLARING INTERESTS FLOWCHART – QUESTIONS TO ASK YOURSELF**



## **AGENDA ITEMS**

### **1 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.

NOTE: Although mobile phones are an essential part of many people's lives, their use during a meeting can be disruptive and a nuisance. Everyone attending is asked therefore to ensure that any device is switched to silent operation or switched off completely.

### **2 APOLOGIES FOR ABSENCE AND ANNOUNCEMENT OF SUBSTITUTE MEMBERS**

(if any) – received.

### **3 DISCLOSURE OF INTERESTS**

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

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

### **4 MINUTES** (Pages 1 - 4)

To approve as a correct record the Minutes of the meeting of the Committee held on 31<sup>st</sup> August 2021 and authorise the Chairman to sign them.

### **5 QUARTER 2 PERFORMANCE REPORT** (Pages 5 - 24)

Report and appedix attached

**Zena Smith**  
**Democratic and Election**  
**Services Manager**

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**MINUTES OF A MEETING OF THE  
INDIVIDUALS OVERVIEW & SCRUTINY SUB-COMMITTEE  
Town Hall, Main Road, Romford  
31 August 2021 (7.00 - 8.55 pm)**

**Present:**

Councillors Nic Dodin, Christine Smith (Chairman), Ciaran White,  
Linda Van den Hende and Jan Sargent

Apologies for absence were received from Councillor Michael White and Councillor David Durant

Councillor Denis O'Flynn was absent from the meeting.

**6 MINUTES**

The minutes of the meeting held on 13<sup>th</sup> Jly 2021 were agreed as a correct record and signed by the Chairman.

**7 NEL HEALTHWATCH INSIGHT TO DISABLED RESIDENTS**

The Sub-Committee were presented with an insight to disabled respondents during COVID-19 by Healthwatch Havering.

Members noted 53% of respondents experienced disruption during COVID-19 with some respondents stating that the use of masks and face coverings made it difficult for those who communicate via lip reading. Respondents also stated that there was not enough information on Test and Trace and changes to social care but there was good information regarding the COVID-19 vaccine. Members also noted that over half of respondents aged over 65 were digitally excluded from receiving information and 32% of all respondents felt they were digitally excluded. CCGs were completing audits on GP websites to ensure information is properly displayed.

Members were pleased to note that Havering had the highest uptake of the COVID-19 vaccine within North East London but were disappointed that children under 18 and those with hearing difficulties had the most negative experiences during the pandemic. Members were advised that a final report would be ready by March 2022.

The Sub-Committee **noted** the report

**8 REABLEMENT UPDATE**

The Sub-Committee were presented with the performance of the Reablement Service provided by Essex Care Limited.

Members noted that the service was recommissioned at the end of April 2019 with Essex Care Limited as the Council wanted the needs to be met by a contractor. There was an increase of referrals compared to 2019/20 however the council had increased capacity funded by the National Hospital Discharge Fund. The average level of need increased from 20 to 42 hours of care since July 2020 and that care will need to be funded by the NHS locally.

The Sub-Committee **noted** the report.

## **9 COVID-19 VACCINATION PROGRAMME UPDATE**

The Sub-Committee were presented with an update on the COVID-19 vaccine rollout.

Members noted that 4 Primary Care Networks within Havering were responsible for providing vaccines to Havering residents. It was noted that on average, 4000-5000 vaccines were being administered per site per week. At the time of the meeting, 79% of residents over 20 had received the first dose and 70.5% had received the second dose and it was explained that ethnic minorities were taking up the vaccine at a lower rate than the white population. Members noted that 91% of staff had been vaccinated with a push for 100% by 11<sup>th</sup> November 2021.

Members noted that the homeless and rough sleeper population had been supported within the vaccination rollout and the Council has provisions in place for those who were unvaccinated.

The Sub-Committee **noted** the report.

## **10 INDIVIDUALS QUARTER 1 PERFORMANCE**

The Sub-Committee were presented with the performance report for Quarter 1.

Members noted that 1 target was on target and the others were within the tolerance. Members noted that 72 adults aged over 65 were admitted to council-supported permanent care homes with a fall in deaths in care homes.

The Sub-Committee **noted** the report.

## **11 INDIVIDUALS OSSC ANNUAL COMPLAINTS REPORT**

The Sub-Committee were presented with the annual complaint statistics for 2020-2021.

Members noted that there had been a decrease in complaints but there was a slight increase in quarter 3 but it was explained that it could have been due to the lifting of COVID-19 restrictions. Members noted that LGO



complaints had decreased in 20220/21; 3 were for maladministration with penalty. Members also noted that the majority of statutory complaints that were upheld resulted in an apology being given with some requiring financial compensation. It was noted that complaint response times increased in 2020/21 with 47% of the complaints being responded to within 20 working days compared to 64% in 2019/20 and member enquiries was 111, a 14% increase compared to 2019/20.

The Sub-Committee **noted** the report.

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**Chairman**

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## INDIVIDUALS OVERVIEW AND SCRUTINY SUB-COMMITTEE, 5<sup>th</sup> January 2022

**Subject Heading:**

Quarter 2 performance report

**SLT Lead:**

Jane West, Chief Operating Officer

**Report Author and contact details:**

Graham Oakley, Senior Performance and Business Intelligence Analyst - 01708 433705, [graham.oakley@haverling.gov.uk](mailto:graham.oakley@haverling.gov.uk)

**Policy context:**

The report sets out Quarter 2 performance relevant to the remit of the Individuals Overview and Scrutiny Sub-Committee

**Financial summary:**

The overall number of admissions in Quarter 2 is worse than target and shows a significant increase against the same quarter in 2020/21. This represents a significant financial pressure in Quarter 2, with an increased risk if that pattern continues.

All service directorates are required to achieve their performance targets within approved budgets. The Senior Leadership Team (SLT) is actively monitoring and managing resources to remain within budgets, although several service areas continue to experience financial pressure from demand led services.

### The subject matter of this report deals with the following Council Objectives

Communities making Havering  
Places making Havering  
Opportunities making Havering  
Connections making Havering

[X]  
[]  
[]  
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## **SUMMARY**

This report supplements the presentation attached as **Appendix 1**, which sets out the Council's performance against indicators within the remit of the Individuals Overview and Scrutiny Sub-Committee for Quarter 2 (July 2021 – September 2021).

## **RECOMMENDATION**

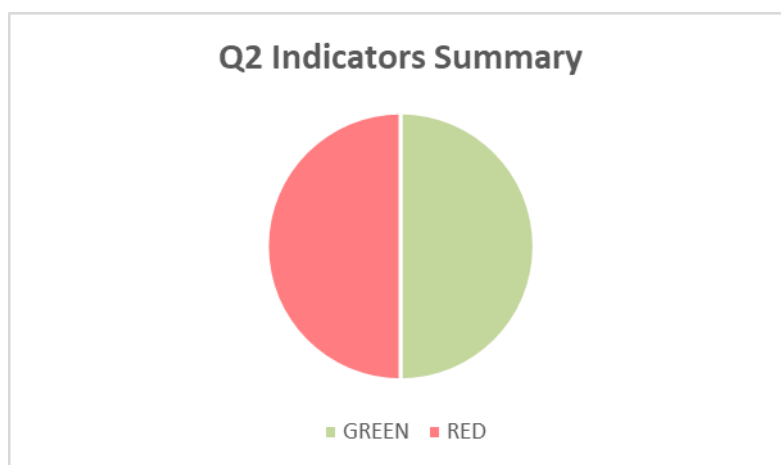
That the Individuals Overview and Scrutiny Sub-Committee:

- Notes the contents of the report and presentation and makes any recommendations as appropriate;
- Agrees a third indicator for monitoring in the remainder of the financial year.

## **REPORT DETAIL**

1. The same two indicators reported in 2020/21 were carried forward for reporting in 2021/22. Members also asked for a third indicator to be included in reporting, to monitor the proportion of people completing reablement without a further package of care being required. Officers advised that the existing reablement measure would no longer be relevant due to the new hospital discharge pathways and that an alternative local indicator would be explored and brought back to the sub-committee for agreement.
2. This report and the attached presentation provide an overview of the Council's performance against the current two indicators selected. The presentation highlights areas of strong performance and potential areas for improvement.
3. Tolerances around targets were agreed for 2021/22 performance reporting by the Director of Adult Social Care. Performance against each performance indicator has therefore been classified as follows:
  - **Red** = outside of the quarterly target and outside of the agreed target tolerance, or 'off track'
  - **Amber** = outside of the quarterly target, but within the agreed target tolerance
  - **Green** = on or better than the quarterly target, or 'on track'

4. Where performance is rated as '**Red**', '**Corrective Action**' is included in the report. This highlights what action the Council will take to improve performance.
5. Also included in the report are Direction of Travel (DoT) columns, which compare:
  - Short-term performance – with the previous quarter (Quarter 1, 2021/22)
  - Long-term performance – with the same time the previous year (Quarter 2, 2020/21)
6. A green arrow (↑) means performance is better and a red arrow (↓) means performance is worse. An amber arrow (→) means that performance has remained the same. It should be noted that reporting for the rate of permanent admissions to residential and nursing care homes is cumulative and therefore the Direction of Travel is based on the distance from target for the relevant quarters.
7. Both performance indicators selected by the sub-committee have been included in the Quarter 2, 2021/22 report and assigned a RAG status.

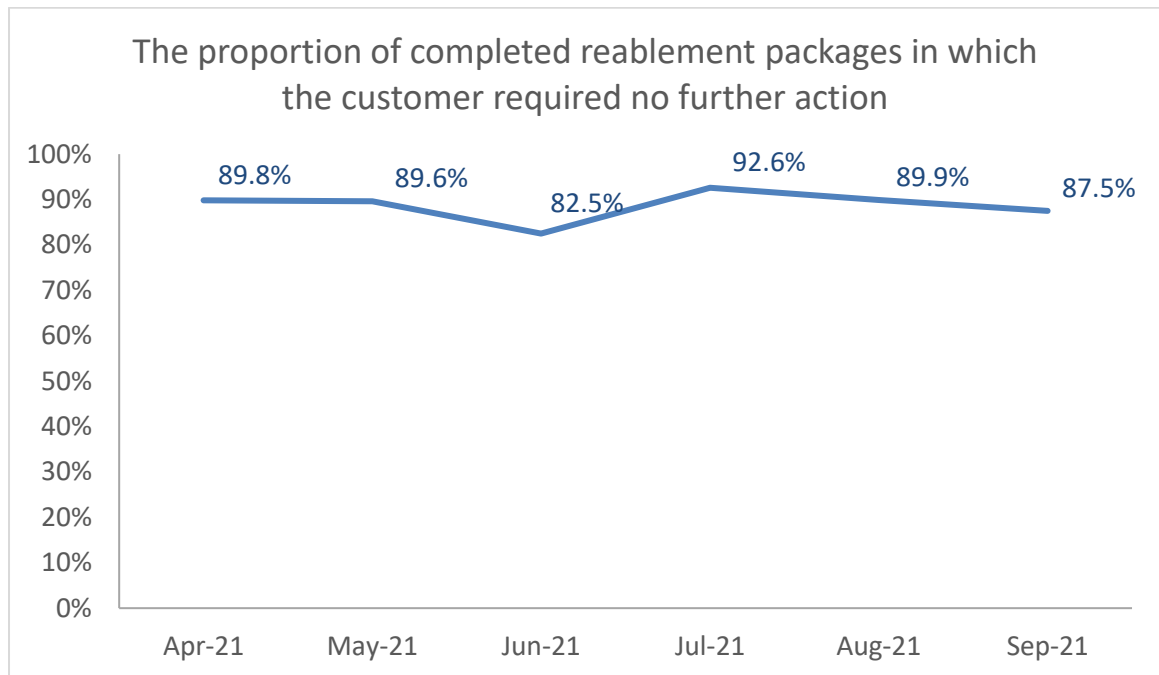


Of the two indicators:

**1 (50%)** has a status of **Green** (on target) and **1 (50%)** has a status of **Red** (off target).

There is decreased performance when compared with Quarter 1 of 2021/22 where one indicator was rated Green and one indicator was rated Amber and also when compared with Q2 of 2020/21 where one indicator was rated Green and one indicator was rated Amber.

8. A third indicator is proposed for reporting from Quarter 3: *The proportion of completed reablement packages in which the customer required no further action.* No target is currently set and performance for the financial year to September 2021 is shown below. The Individuals Overview and Scrutiny Sub-Committee is asked to confirm whether members wish to receive data for this indicator in the remainder of the financial year.



## **IMPLICATIONS AND RISKS**

### **Financial implications and risks:**

This report considers admissions into care home placements. Data available has shown that admissions are being driven significantly via hospital discharge. There are ongoing BHRUT system pressures linked to the Covid-19 pandemic, and Adult Social Care continues to be impacted by these. During the pandemic, demand has increased at a higher rate than previous years and there have been increased discharges due to increased admissions into BHRUT since the pandemic began. There are also community pressures arising as a result of the pandemic, such as carer breakdown and increasing complexity of client needs that were not able to be addressed (through activities and community support systems being unavailable) which will also be impacting upon admissions.

As admissions increase, so does the expenditure pressure on the Adults budget. Additional costs arising in the first 4 weeks after discharge are currently met by the NHS through HDP Funding (recently extended to 31<sup>st</sup> March 2022), however after

the initial 4 weeks, the local authority is responsible for the full cost. The NHS Discharge Guidance - brought in to support the system – has led to discharges at higher costs and these become challenging to move onto LBH rates thereafter. The Service is working closely with BHRUT partners to ensure that the Trusted Assessor and Discharge to Assess pathways, brought in to support the pandemic, are being used appropriately and are challenging discharges where appropriate. The Service are also actively reviewing placements with clients and providers to ensure these are brought down to LBH rates wherever possible and to ensure that individuals need to remain in long term care home placements. However, planned review work to mitigate the financial impact is at risk of being outstripped by both new demand and increasing complexity of existing clients.

It is likely that admissions will continue to rise during the winter months due to the pressures on the BHRUT system. The Service will work closely with the Trust to monitor and mitigate winter pressures as far as possible and avoid any unnecessary discharges into care home settings.

The Service are taking action where possible to manage the impact of this additional pressure on the residential and nursing budget and to mitigate this as part of the overall Adults Budget, in particular through the application of Better Living principles and the ongoing targeted review of high cost care packages.

**Legal implications and risks:**

Whilst reporting on performance is not a statutory requirement, it is considered best practice to regularly review the Council's progress.

**Human Resources implications and risks:**

There are no HR implications or risks involving the Council or its workforce that can be identified from the recommendations made in this report.

**Equalities implications and risks:**

The Public Sector Equality Duty (PSED) under section 149 of the Equality Act 2010 requires the Council, when exercising its functions, to have due regard to:

- (i) the need to eliminate discrimination, harassment, victimisation and any other conduct that is prohibited by or under the Equality Act 2010;
- (ii) the need to advance equality of opportunity between persons who share protected characteristics and those who do not, and;
- (iii) foster good relations between those who have protected characteristics and those who do not.

Note: 'Protected characteristics' are: age, sex, race, disability, sexual orientation, marriage and civil partnerships, religion or belief, pregnancy and maternity and gender reassignment.

The Council is committed to all of the above in the provision, procurement and

commissioning of its services, and the employment of its workforce. In addition, the Council is also committed to improving the quality of life and wellbeing for all Havering residents in respect of socio-economics and health determinants.

The presentation attached at Appendix 1 contains a breakdown of the data behind the two performance indicators by age, gender, ethnicity and support reason.

<b>BACKGROUND PAPERS</b>
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Appendix 1: Quarter 2 Individuals Performance Presentation 2021/22





# Havering

LONDON BOROUGH

# **Quarter 2 Performance Report 2021/22**

## **Individuals Overview and Scrutiny Sub-Committee**

**5<sup>th</sup> January 2022**

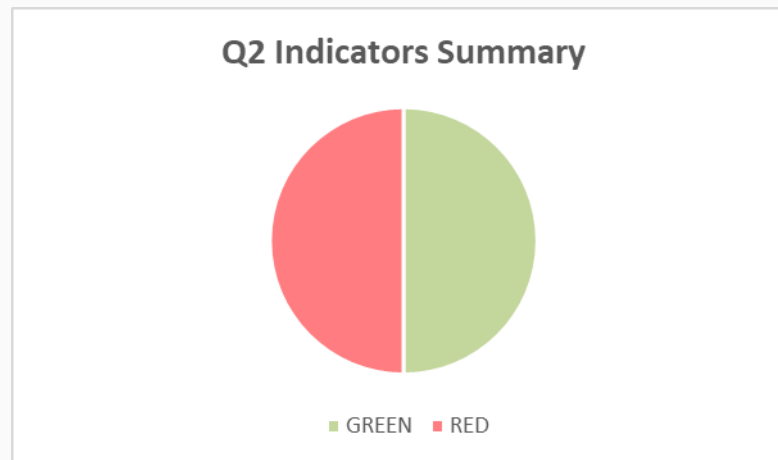
# About the Individuals Overview & Scrutiny Sub-Committee Performance Report

- Overview of the Council's performance against the indicators selected by the Individuals Overview and Scrutiny Sub-Committee
- The report identifies where the Council is performing well (**Green**), within target tolerance (**Amber**) and not so well (**Red**).
- Where the RAG rating is '**Red**', '**Corrective Action**' is included in the presentation. This highlights what action the Council will take to improve performance.

## OVERVIEW OF INDIVIDUALS INDICATORS

- 2 Performance Indicators are currently reported to the Individuals Overview & Scrutiny Sub-Committee, with a third in development for reporting from Q3.
- Q2 performance figures are available for both indicators.

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Of the two indicators:

**1 (50%)** has a status of **Green** (on target) and **1 (50%)** has a status of **Red** (off target)

## Quarter 2 Performance

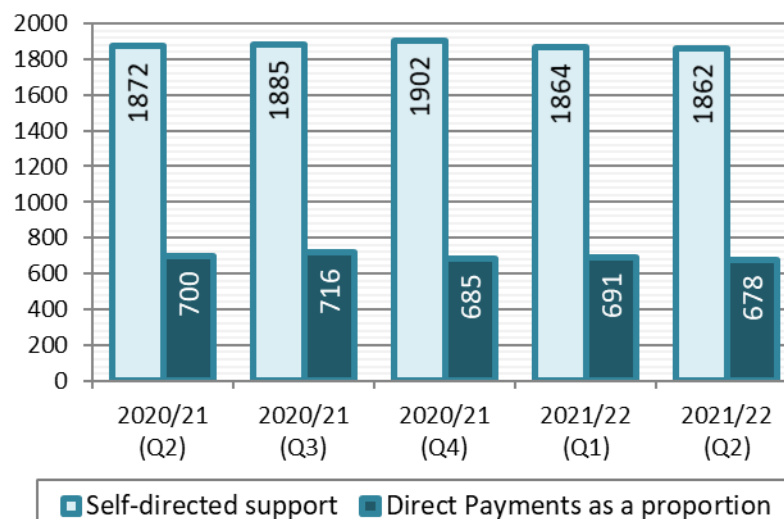
Indicator and Description	Value	Tolerance	2020/21 Outturn	2021/22 Annual Target	2021/22 Q2 Performance	Short Term DOT against Q1 2021/22		Long Term DOT against Q2 2020/21	
% of service users receiving direct payments	Bigger is better	10%	34.7%	35.0%	GREEN 35.1%	↓	35.5%	↑	34.8%
Rate of permanent admissions to residential and nursing care homes per 100,000 population (aged 65+)	Smaller is better	10%	587.3	600	RED 352.6	↓	154.8	↓	154.1

## Positive Performance

- Improvement in the percentage of people receiving a Direct Payment when compared to 2020/21
- Better than the latest available London average (2020/21) of 24.4%

## ADULT SOCIAL CARE

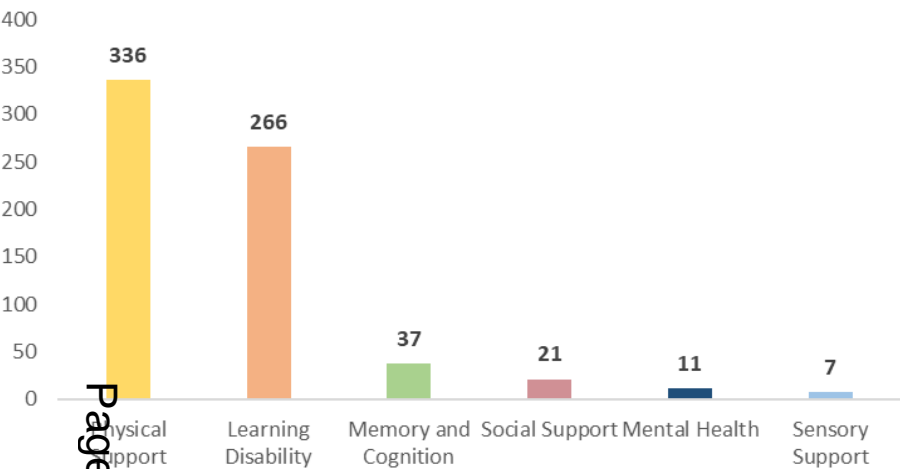
### DP 10: Self Directed Support and Direct Payments as a Proportion



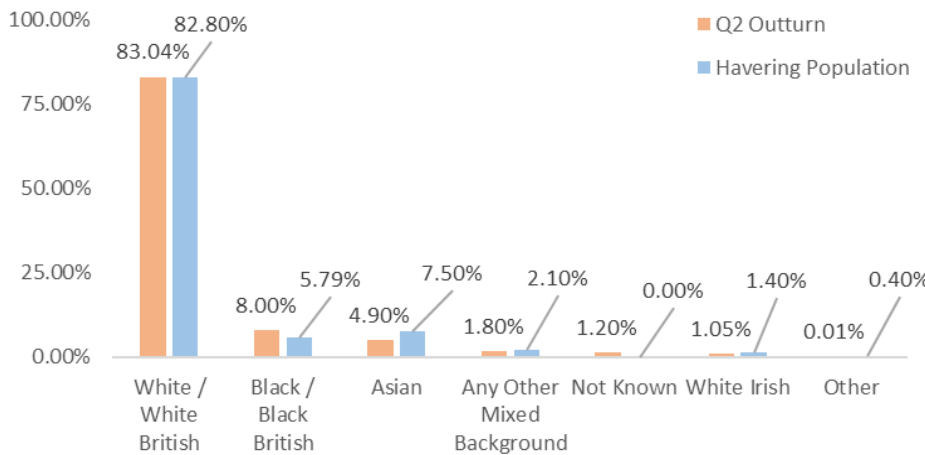
At the end of Q2, there were 1,862 service users receiving self directed support, compared to 1,872 at the same stage last year. There was a slight decrease in the service users in receipt of direct payments from September 2020 compared to September 2021 (700 in September 2020) compared to 678 in September 2021.

# Demographic breakdown of direct payments

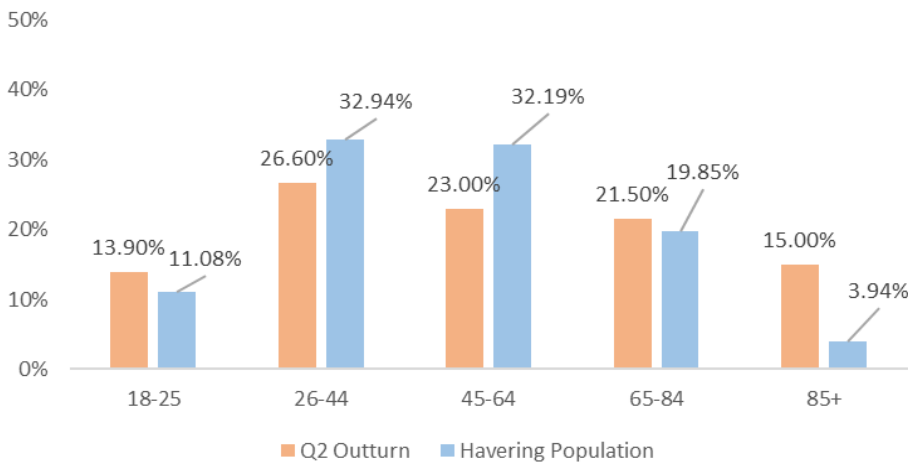
Direct Payment by Support Reason



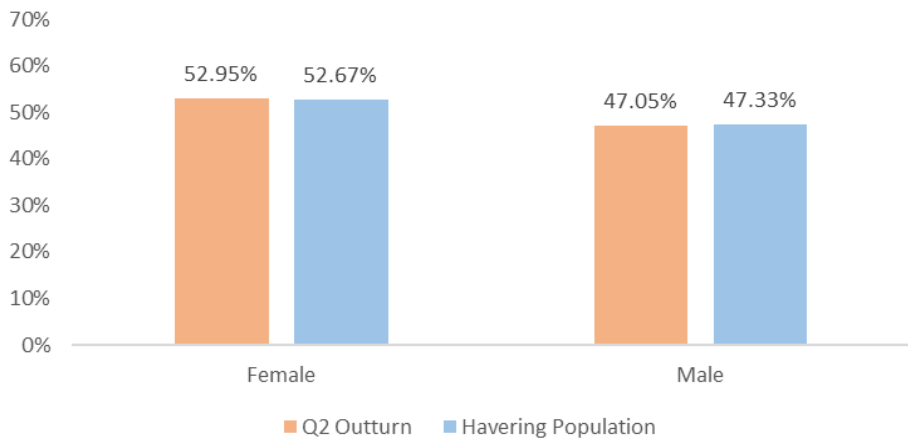
Direct Payment by Ethnicity



Direct Payment by age breakdown



Direct Payment by Gender





## Areas for Improvement

- Off target for Adults aged 65+ permanently admitted to residential or nursing care. This is due to:
  - Admissions are being driven significantly via **hospital discharge** (62.8% of those admitted were via hospital teams this quarter, compared with 35.8% pre-pandemic) as a result of increased hospital admissions in BHRUT.
  - **Community pressures** are also arising as a result of the pandemic, e.g. carer breakdown and increasing complexity of client needs not addressed due to activities and community support systems being unavailable.

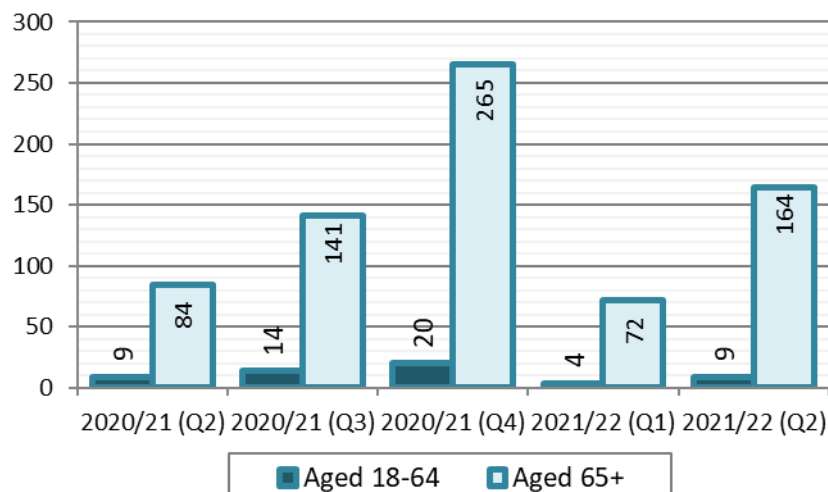
## Areas for Improvement (contd.)

Action being taken to mitigate the financial risk associated with increasing numbers of permanent admissions includes:

- Close working with BHRUT to ensure that the Trusted Assessor and Discharge to Assess pathways (brought in to support the pandemic), are being used appropriately, and challenging discharges where appropriate;
- Actively reviewing placements with clients and providers to ensure that only individuals who *need* to remain in long term care home placements do, and that these are brought down to the LA's rates wherever possible (on-going application of Better Living principles generally, and targeted review of high cost care packages);
- Working closely with the Trust to monitor and mitigate winter pressures as far as possible and avoid any unnecessary discharges into care home settings.

## ADULT SOCIAL CARE

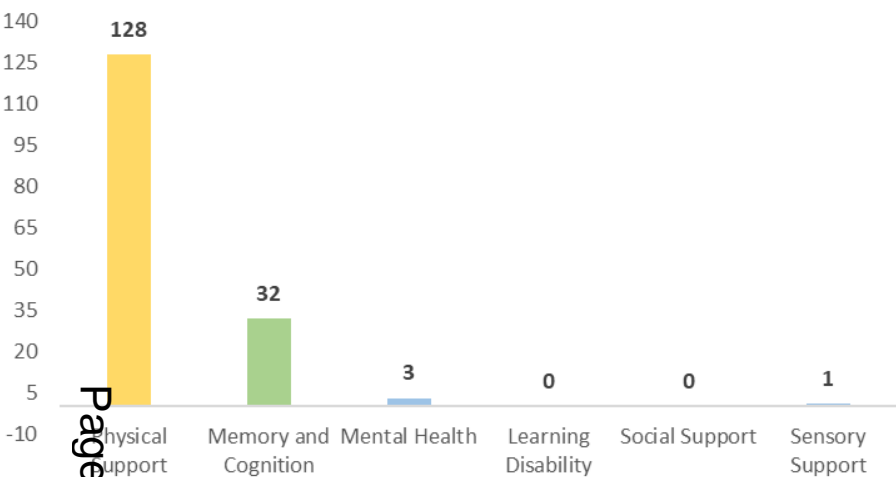
### DP 09: Permanent admissions to residential and nursing care homes



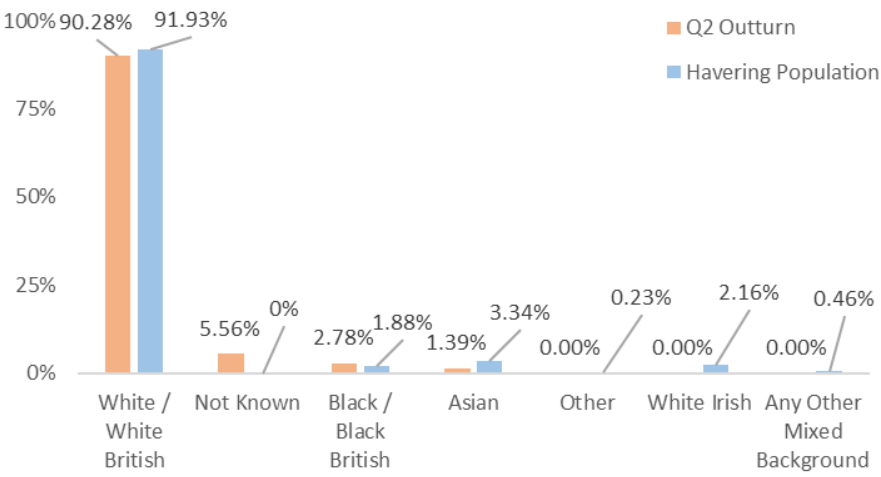
By the end of Q2, there had been 9 adults aged 18-64 in council-supported permanent admissions to residential and nursing care and this is the same as Q2 in 2020/21. There have been 164 adults aged over 65 in council-supported permanent admissions, whereas for the same period in 2020/21 there had been 84.

# Demographic breakdown of 65+ admissions

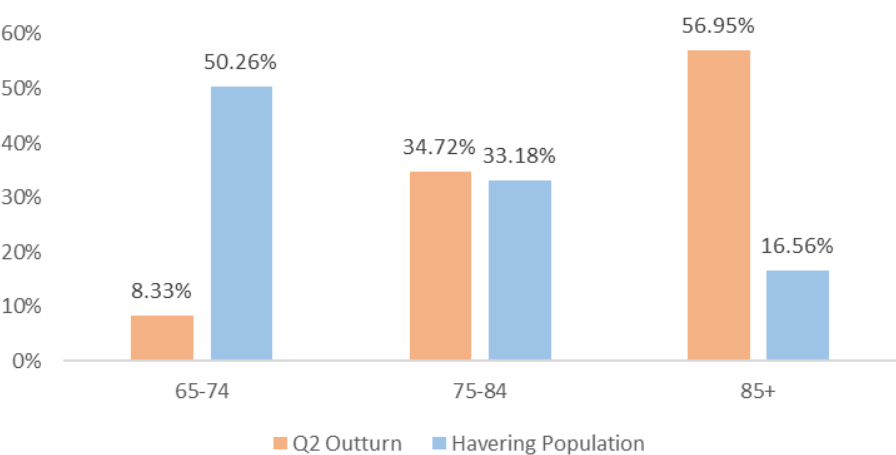
65+ Admissions by Support Reason



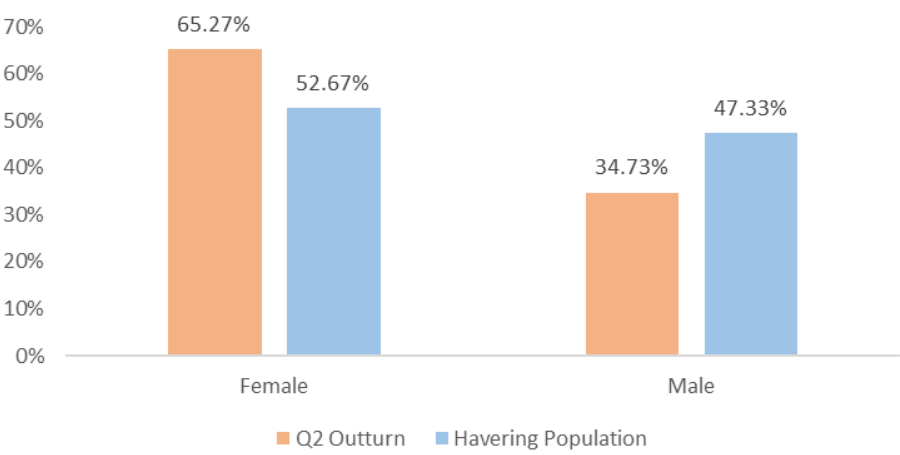
65+ Admissions by Ethnicity



65+ Admissions by age breakdown



65+ Admissions by Gender



# Any questions?



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