



## INDIVIDUALS OVERVIEW AND SCRUTINY COMMITTEE

ANNUAL REPORT 2010/11

### SUMMARY

This report is the annual report of the Committee, summarising the Committee's activities during the past Council year.

It is planned for this report to stand as a public record of achievement for the year and enable members and others to note the Committee's performance.

There are no direct equalities or environmental implications attached to this covering report. Any financial implications from reviews and work undertaken will be advised as part of the specific reviews.

### RECOMMENDATIONS

That Council note the report of the Individuals Overview and Scrutiny Committee.

### REPORT DETAILS

During the year under review, the Committee met on six occasions and dealt with the following issues:

#### 1. THE ROLE OF ADULT SOCIAL CARE

- 1.1 At its first meeting in June 2010, the Committee sought to understand the overall role of Adult Social Care. The Committee noted information on the demographic pressures of the borough, and that Havering was very different in demographics to the rest of London. Havering was more like the coastal unitaries, in that there were a large number of older people residing in it.

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- 1.2 The Committee noted that while some residents were living with physical and sensory disabilities there was evidence that they were now also living longer, which impacted on the services provided.
- 1.3 The Committee were informed about the transformation programmes that were being carried out on Personalisation and by the adult Transformation Board. This was linked with Housing, Leisure and Recreational needs for vulnerable people.

## **2. NATIONAL DEMENTIA STRATEGY**

- 2.1 At its June meeting, the Committee received a report on the National Dementia Strategy and its implementation from the Head of Mental Health Commissioning and the Operational Director from NELFT. The report described where Havering are with the objectives in the Strategy and where additional work needed to be done.
- 2.2 The aim of the Strategy was to ensure that significant improvements were made to dementia services across three key areas: improved awareness, early diagnosis and intervention and a high quality of care.
- 2.3 Following this presentation the Committee agreed that a joint topic group with Health Overview and Scrutiny to scrutinise this area in more detail would be beneficial.
- 2.4 At its meeting in April 2011, the Committee received the final report of the Dementia Strategy Joint Topic Group. The Committee agreed the recommendations should be referred to Cabinet, the North East London NHS Foundation Trust (NELFT) and other bodies as appropriate. The Committee requested that a review of progress be carried out by this committee in 12 months time.

## **3. PROMOTING INDEPENDENCE – CULTURE & HEALTHY LIVING**

- 3.1 At its September meeting, the Committee received a report and presentation for the Head of Adult Social Care and the Head of Culture and Leisure Services, on the key strategies and initiatives that the Council and NHS Havering (the local Primary Care Trust) were jointly undertaking to empower individuals and communities in Havering to maintain their health and well-being, and create a culture of prevention.
- 3.2 The Committee were informed of the wider strategic context; highlighting that improving health and well-being was a key strategic objective of both the Council and NHS Havering, this would be achieved through objectives in the Council's Havering Sustainable Community Strategy 2008-13 and NHS Havering's Commissioning Strategy Plan 2010-2014.

- 3.3 The Committee noted key information relating to the demographics of Havering, and acknowledged that the borough had a significantly larger proportion of older people than the London average. The Committee also noted that Havering had a significantly less diverse ethnic mix than London as a whole and that the borough did not appear in the top 50 most deprived areas, as judged by the Indices of Multiple Deprivation.

#### **4. BROKERAGE SERVICE**

- 4.1 At its September meeting the Committee received a report from the Head of Adult Social Care and the Service Manager for Transformation, Adult Social Care on support brokerage and how it fitted with personalisation.
- 4.2 The Committee noted the definition of “brokerage” in the context of support brokerage. They acknowledged that its working definition was a way in which people could be helped to navigate the social care system to access the care and support they need, and how these needs might best be met at an affordable cost.
- 4.3 The Committee noted some of the activities and task carried out by the Support Brokers and the current provisions that Havering has in terms of brokerage. These included the direct payments team providing an element of support brokerage to citizens, the commissioning team undertaking residential, nursing and respite placements and the third sector organisations providing elements of informal brokerage.
- 4.4 The Committee discussed the brokerage service and agreed to meet with the Direct Payments User Group to assess that the systems were working efficiently. They also requested that any financial implications for the development of external Brokerage should be included within the Council’s Medium Term Financial Strategy.

#### **5. ANNUAL COMPLAINTS**

- 5.1 At its meeting in September 2010, the Committee received a report from the Head of Adult Social Care and the Adult Customer Care and Complaints Manager on Adult Social Care Complaints and Compliments for the 2009-10 Council year.
- 5.2 The Committee noted that it was a requirement for the Annual Report to be considered by the Committee and to then be published under the Local Authority Social Services and National Health Service Complaints (England) Regulations 2009.
- 5.3 The Committee noted this was the first year operating under the new regulations, and this was no longer a three-stage process. There were

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now two stages – local resolutions and Ombudsman referral. The aim was to resolve complaints locally in a flexible and customer focussed way.

- 5.4 The Committee noted that numbers of compliments received by the services had achieved an increase of 15% since 2008-09.

**6. LINK ANNUAL REPORT & OVERVIEW**

- 6.1 At its meeting in September 2010, the Committee receive the Annual Report and a presentation from the Chair of Havering LINK (Local Involvement Network). The Committee were informed that the LINK was a group of local health and social care service users who provided user-led scrutiny and feedback to providers.

- 6.2 The Committee noted that the following organisations were represented on the LINK Steering Group: Havering MEND, Age Concern Havering, NHS Havering and NELFT.

- 6.3 The Committee were informed of the key achievements of the LINK, including organising a public meeting to try to resolve car parking at Queen's Hospital, and campaigning an additional receptionist at Queen's Hospital Accident and Emergency Department. The Committee also noted the planned future activity of the LINK which included a transport meeting for patients to raise concerns about travel to and from the hospital. The LINK was also negotiating with BHRUT to provide computer access to inpatient children on long term sickness in local hospitals.

**7. OMBUDSMAN'S ANNUAL REVIEW**

- 7.1 At its meeting in September, the Committee received the Ombudsman's Annual Review regarding complaints received about the Council in 2009-10. The Annual Review provided a summary of the complaints dealt with about the Council and included comments on the Council's performance and complaint handling arrangements.

- 7.2 The Committee noted that the Ombudsman received 114 complaints against the Council; advice was given in 28 cases and 32 were considered to be premature because the Council had not been given a reasonable opportunity to deal with them.

- 7.3 The Committee further noted that the Ombudsman made decisions on 59 complaints against the Council. Ten were outside the jurisdiction of the Ombudsman to investigate and another ten were closed for lack of grounds.

## **8. DIAL-A-RIDE UPDATE**

- 8.1 At its meeting in November, the Committee receive a presentation from the Project Manager, Finance and Commerce on Havering and Supported Transport. This included the Independent Mobility Assessment, Taxi Card, Passenger Travel Services, Dial-a-Ride and the role of the Hospitals Trust.
- 8.2 The Committee were informed that Taxi card was a Havering scheme with a budget of £383,000 per annum and this was topped up by TfL by approximately £600,000 per annum, however TfL had decided to cap this budget, and as a result London Councils had prepared a number of proposals to put forward for consideration. These included:
- Increase minimum user fare from £1.50 to £2.50
  - Reduce maximum trip by £1
  - No stage coaching (adding trips together to get one long trip)
  - Waiting list introduction
  - London Councils to provide consultation with users
- 8.3 The Committee noted that if the London Councils proposals were not agreed by the London Boroughs at Transport for London's Transport and Environment Committee, Havering would then have to put measures in place to ensure the borough remained within the budget.

## **9. EQUALITY AND DIVERSITY**

At its meeting in November, the Committee receive a briefing from the Equality and Diversity Manager on the work of the Diversity Standards Team. The Committee noted that the role of the team was to recognise the change in the borough in regard to its distinctiveness. i.e. the proportion of people age 65+ and the low percentage of ethnic minorities in the borough (10%).

The Committee acknowledged that it was an important aspect of the work to ensure that the Council is compliant with the law and furthermore that all colleagues complied with the law and the service provision reflected the needs of the community.

The Committee were informed that there were eight strands of the Equality Act 2010 and that Age and Disability were high priorities for Havering. The eight strands were: Age, Disability, Gender reassignment, Marriage and civil partnership, Pregnancy and maternity, Race/ethnicity, Religion & belief, Sex and Sexual orientation.

## **10 ADULTS SAFEGUARDING**

- 10.1 At its meeting in November 2010, the Committee received a report from the Quality & Safeguarding Service Manager on how current local arrangements work to safeguard adults in Havering.
- 10.2 The Committee noted the definition of “Safeguarding” as set out by the Care Quality Commission (CQC) as “the responsibility of relevant bodies to protect people whose circumstance make them particularly vulnerable to abuse, neglect or harm”. The Committee noted that whilst this was the key responsibility of the Local Authority, and had been developing rapidly over the last 10 years, the responsibility lay with everybody through the following:
- Prevention and Awareness Raising
  - Inclusion
  - Personalised Management of Independence and Risk
  - Specialist Safeguarding Services
- 10.3 The Committee were informed that the multi-agency Safeguarding Adults Board included partners from Health, Police, Fire Service as well as Children’s representatives, Community Safety, Legal Services, Providers and User Groups.

## **11. SOCIAL INCLUSION – EMPLOYMENT OPPORTUNITIES/ SUPPORT**

- 11.1 At its meeting in November, the Committee received a report from the Group Director, Social Care and Learning and the Mental Health Social Inclusion Commissioning Manager on employment opportunities and challenges for adults with Mental Health problems and Learning Disabilities.
- 11.2 The Committee noted that given the current employment market, there would be a major challenge in the short/ medium term to prioritise getting more people with learning disabilities into paid employment. The Committee acknowledged that there were excellent links and relationships between Schools, Colleges and Employers for people with learning disabilities, to ensure that support was in place throughout their education and employment, and that Day Centres also had a role to play in assisting users to encourage their children to take the next steps into employment.

## **12. REABLEMENT REVIEW**

- 12.1 At its November meeting, the Committee received a report from the Preventative Care Services Manager on the Reablement Review. This formed a key part of the Adult Social Care transformation programme (personalisation). The Committee noted that the overall objective of

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reablement was to assist people to remain living in their own homes, to achieve maximum independence, to prevent hospital admissions/re-admissions and where appropriate, to reduce the level of care needed in the longer term.

- 12.2 The Committee noted that the Reablement service was a short term service, of up to 6 weeks of intensive support for people with poor physical or mental health. This service was to assist patients, who due to illness need to learn/ re-learn the skills necessary for daily living. It also achieved the patient's potential in terms of a stable level of independence with the lowest appropriate level of ongoing support.
- 12.3 The Committee acknowledged that there was a lower turnover of people returning to reablement, however the cost was the same as the previous year, but the service was able to deal with cases on a much quicker turnaround.

### **13. BUDGET SCRUTINY**

- 13.1 In both August 2010 and January 2011, the Committee met jointly with the other Overview and Scrutiny Committees in order to scrutinise aspects of the Council's proposed budget for the coming year. The meetings, chaired by the Chairman of the Partnerships Overview and Scrutiny Committee, scrutinised several issues of relevance to this Committee. These included the Social Care IT Upgrade, the Review of Adult Social Care Services, Supporting People and the Fairer Charging Policy.

### **14. SOCIAL WORK TASK FORCE (ADULTS/ CHILDREN)**

- 14.1 At its meeting in April 2011, the Committee received a report on the National Social Work Taskforce (NSWT) Social Work Reform Board (SWRB). The Committee noted that the NSWT was formed following further and wide spread criticism of the profession during and after the public enquiry into the death in Haringey of Baby P.
- 14.2 The Committee were informed that the NSWT had made fifteen recommendations which had been endorsed by the Government. Of these fifteen recommendations, the SWRB had identified five areas of reform directly linked to the NSWT recommendations. These areas were around the competencies and capability of the core social work roles.

### **15. SECTION 75 PARTNERSHIP REVIEWS – LEARNING DISABILITIES/ MENTAL HEALTH**

- 15.1 At its meeting in April 2011, the Committee received an update on the current Section 75 Partnership Arrangements operating in Adult Social Care. This covered the Section 75 agreements between the London

- Borough of Havering and North East London NHS Foundation Trust (NELFT) to provide services for adults with mental health problems and the Section 75 agreement between NHS Havering and the London Borough of Havering to provide support to Adults with Learning Disabilities.
- 15.2 The Committee noted that the progress of the partnerships was going well and they were both within budget. The Committee were informed that there was active engagement with service users of the mental health services and that the Head of Service was actively involved and integrated with the services users. The Committee noted that service users had reported that they are able to deal with the services easily and any criticism is taken on board. The Committee also noted that NELFT were a three-star performing organisation.
- 15.3 The Committee were informed that the Learning Disabilities Service works closely with clients with Autistic Spectrum Disorder, who also have learning disabilities. Officers informed the committee that where possible, clients with learning disabilities were encouraged and supported through employment. The Committee found that there was evidence that people with learning disabilities stayed with the employer for a long period of time.
- 15.4 The Committee noted that the Learning Disabilities Partnership Board worked with hospitals to ensure that staff were able to deal with patients who had learning disabilities, and that all clients were provided with an information pack which they could keep with them, which explained their situation should they be admitted to hospital. Officers informed the Committee the people with learning disabilities were entitled to have a yearly health check up with their GP and whilst there was progress in this area, more improvements were needed and engagement with GPs and the Consortium were being planned.
- 16. REALLOCATION OF WORKLOAD OF PARTNERSHIPS OVERVIEW AND SCRUTINY COMMITTEE**
- 16.1 At its meeting in April 2011, the Committee received a report on the reallocation of workload of the Partnerships Overview and Scrutiny Committee. Following the announcement by the Leader of the Council that Partnerships Overview and Scrutiny Committee would be abolished at the end of the financial year the report invited the relevant overview and scrutiny Committees to consider adding to their work programmes items that were due to be considered in the future by the Partnerships Overview and Scrutiny Committee.
- 16.2 The Committee were asked to scrutinise the Impact of Personalisation of Social Care on the Voluntary Sector. The Committee agreed to add this to their work programme for the next municipal year.