



London Borough of Hammersmith & Fulham

Housing, Health And Adult Social Care Select Committee Minutes

Thursday 24 June 2010

PRESENT

Committee members: Councillors Andrew Johnson (Chairman), Rory Vaughan (Vice-Chairman), Iain Coleman, Stephen Cowan, Charlie Dewhirst, Gavin Donovan, Marcus Ginn and Steve Hamilton

Co-opted members: Maria Brenton (HAFAD)

Other Councillors: Joe Carlebach Cabinet Member for Community Care, Lucy Ivimy, Cabinet Member for Housing and Peter Tobias, Assistant to Cabinet Member (Health)

Officers: Lyn Garner (Assistant Director, Regeneration and Housing Strategy), Nick Johnson (Chief Executive, H&F Homes), Gary Marson (Principal Committee Co-ordinator), Sue Perrin (Committee Co-ordinator), James Reilly (Director of Community Services) and Sarah Whiting (Managing Director, NHS Hammersmith & Fulham)

1. MINUTES AND ACTIONS

RESOLVED THAT:

The minutes of the meeting of the Health and Adult Social Care Scrutiny Committee held on 25 February 2010 and the meeting of the Housing Scrutiny Committee held on 31 March 2010 be confirmed and signed as accurate records of the proceedings.

2. APOLOGIES FOR ABSENCE

Apologies for absence were received from Councillor Oliver Craig and Mr Geoff Alltimes and apologies for lateness from Councillor Marcus Ginn.

3. DECLARATIONS OF INTEREST

There were no declarations of interest.

4. MEMBERSHIP AND TERMS OF REFERENCE

RESOLVED THAT:

The committee's membership and terms of reference as agreed at the Annual Meeting of the Council on 26 May 2010 be noted.

5. ELECTION OF VICE-CHAIRMAN

RESOLVED THAT:

Councillor Rory Vaughan be appointed as Vice-chairman.

6. APPOINTMENT OF CO-OPTED MEMBERS

RESOLVED THAT:

- (a) Maria Brenton, Chair of HAFAD be appointed as a co-opted member for the 2010/2011 municipal year.
- (b) The appointment of an additional co-opted member be considered at a future meeting.
- (c) Expert witnesses be used as an alternative means of engaging with stakeholders.

7. INTRODUCTION TO SCRUTINY

Mr Marson presented an introduction to scrutiny, which included its role, principles and powers and also external scrutiny, the local arrangements and the work programme.

RESOLVED:

That the presentation be noted.

8. THE NEW GOVERNMENT'S PROPOSALS ON HEALTH AND THE LIKELY IMPACT ON HAMMERSMITH & FULHAM

Sarah Whiting presented the report, which set out the NHS priorities under the coalition government, and highlighted the following key points:

- An independent NHS Commissioning Board would be established to allocate resources and provide commissioning guidance, through regional offices, removing the need for separate strategic health authorities.
- GP consortia would commission services on behalf of their patients.

- Patients would have the right to choose their GP without restriction on location.
- The GP contract would be renegotiated and there would be incentives for the provision of improved access in disadvantaged areas.
- There would be directly elected PCT Board members, with the remainder appointed by local authorities.

Sarah Whiting outlined the three key target changes:

- Removal of primary care targets: 24/48 hour maximum wait and related patient experience.
- The 18 week referral to treatment target would be replaced with an average waiting times target.
- Four hour Accident & Emergency department target threshold down from 98% to 95%.

NHS Hammersmith and Fulham was required to cut its management costs by 16%. An funding deficit of £4-£5 billion in London had been predicted for 2016/2017.

The Healthcare for London programme, a top-down strategy for reforming services had been halted. Future and ongoing reconfiguration proposals would have to meet the following criteria:

- Support from GP commissioners
- Strengthened public and patient engagement
- Clarity on the clinical evidence base
- Consistency with current and prospective patient choice.

The PCTs were working with NHS London to construct the evidence to meet this criteria.

Ms Whiting stated that the payment system would reward excellence and be tough on poor quality, and hospitals would not be paid for treatment of patients re-admitted within 30 days of discharge.

Local authorities would play a key role in public health and addressing the wider determinants of ill-health. A focused Public Health service would be set up with 4% of NHS Budget ring fenced. The detail was not available, but it was likely that Public Health would include the Health Protection Agency, infection control and national programmes.

Ms Whiting concluded her presentation with the immediate challenges for 2010/2011:

- Reduce management costs
- Prepare GPs to lead commissioning
- Deliver key service improvement projects

In response to a question from Ms Brenton, Ms Whiting confirmed that NHS North West London had been established as an acute commissioning vehicle for the eight North West London PCTs.

Councillor Cowan queried the average waiting times target. Ms Whiting responded that it was not yet known how this target would be measured. Whilst the target included most elective surgery, it did not include specific targets such as the two week cancer wait.

Councillor Cowan then queried management costs. Ms Whiting responded that the management costs were detailed and defined in the PCT's accounts. The 16% savings was entirely focused on commissioning management costs.

Councillor Tobias stated that the GP consortia would have to be of sufficient size to challenge the large acute providers.

Councillor Carlebach suggested that, in this time of significant change, the PCT should not lose sight of health issues such as the increase in health inequalities, and added that the Hammersmith & Fulham Council/PCT integrated management was a good model.

Councillor Vaughan suggested that if hospitals were not paid for treatment of patients re-admitted within 30 days of discharge, it could result in enhanced treatment to prevent re-admission. Additionally, there should be a definition of re-admission, as a patient could be re-admitted for an entirely separate condition.

Ms Whiting responded to Councillor Donovan that children remained a key priority and that the PCT had a coherent strategy for targeting schools.

A member of the public queried the allocation of £150 million non-ring fenced money in respect of the national carers strategy. Ms Whiting responded that the allocation to carers had been increased in the current year and that local plans had been agreed in partnership with the Council. Ms Whiting agreed to provide written details.

RESOLVED:

1. That a further report be commissioned for the September meeting.
2. That the report be noted.

9. INTRODUCTION TO HOUSING SERVICES

Mr Johnson presented an introduction to the work of H&F Homes, and outlined progress against key challenges:

- The Decent Homes programme was on target for completion by December 2010.
- Transforming Services and Value for Money: the Invest to Save Programme had been successfully implemented, although there had been a £4.4 million housing subsidy loss from 2009. Investment by the Council had resulted in a full year savings of £3.6 million for 2010/2011, and a reduction of 48 posts.
- Improving Services to Leaseholders – charges have been driven down by an average of 14%.
- Increasing Resident Satisfaction was being targeted in the current year.
- H&F Homes would consult on merging back with the Council in 2012

Ms Garner then presented the following Housing Strategy and Housing Options Challenges in 2010/2011:

- Prevention of Homelessness
- Housing Benefit Changes
- Building more affordable and modern homes
- Involving local people in Estates improvements:
 - Fulham Court: £10 million programme, with a residents steering group
 - Edward Woods: £16 million improvements to high rise blocks
- Training and employment opportunities, including West Kensington, Earls Court/Transport for London land regeneration from which significant benefits could be derived, if supported by residents.

Councillor Tobias queried the extent to which overcrowding impacted on health. Ms Garner responded that the Council recognised the distinct link, and encouraged tenants to move to larger dwellings. Initiatives included: extensions and conversions; and the provision of additional accommodation for grown up children. Councillor Ivimy added that the Council had a programme to acquire large family houses to address the acute shortage within the borough.

Ms Garner responded to Councillor Cowan that 13% of the housing stock was estimated to be overcrowded. There was no statutory definition of overcrowding, but it was deemed to be families needing more than one additional bedroom.

Ms Garner stated that under occupation was also an issue and incentives to downsize included re-decoration and investment in new property. Currently, financial incentives were not offered.

Councillor Cowan queried resident satisfaction. Mr Johnson responded that H&F homes worked with HAFTRA and with residents groups. There were tenant and resident representatives on the H&F Homes Board and Area Housing Forums. Clear priorities had been identified in respect of the Decent Homes standard, the quality of repairs and the caretaking service.

Mr Johnson stated that a satisfaction survey had been undertaken and agreed to circulate the report.

Mr Johnson responded to Councillor Cowan's query in respect of the management structure, that all posts were full time.

Councillor Cowan requested the costs for the management structure and the back office costs, and evidence that improvements and savings had been focused on back office staff, not front line services. Mr Johnson agreed to provide the information which had been reported to the H&F Homes Board.

Councillor Cowan queried how H&F Homes ensured that all complaints were registered. Mr Johnson responded that the system had been computerised over the previous year and agreed to provide the monthly complaints report, which was monitored by the Board.

Ms Garner responded to Councillor Cowan's question in respect of homelessness that there had been an increase in intermediate housing, both rented and shared ownership, split equally between income levels of £20,000, £40,000 and £60,000.

In respect of the 929 families housed in the previous year, 600 had been council lets, and there had been new dwelling from Registered Social Landlord building. Private lettings were not included in these figures.

Councillor Cowan requested information in respect of the definition of homelessness preventions. Ms Garner responded that the definition included people who were not accepted as homeless, for whom alternative accommodation was found by, for example providing a rent deposit guarantee or the provision of designated single person accommodation, rather than bed and breakfast. Additionally, some applicants did not meet the criteria for social housing.

In response to queries from Councillor Tobias and Councillor Vaughan in respect of the 52,000 repairs, Mr Johnson stated that the figure represented 52,000 repair requests. A review of the investment programme was underway, and if as anticipated the housing revenue account continued, the Council would invest this in a more ambitious lift replacement programme. The Decent Homes programme was in respect of specific standards, and individual repairs were not necessarily part of this programme.

Ms Brenton requested assurance that the accessible housing register was to be maintained. Mr Johnson confirmed that this was a formal requirement of the Audit Commission, and it was intended to ensure that this was maintained.

Ms Garner confirmed to Councillor Ginn that, in respect of homelessness the Council worked with charities, for example the YMCA and with supported housing charities.

Mr Johnson confirmed to Councillor Cowan that the provision of supervision and support of the two Assistant Directors had transferred to him to enable James Reilly to focus on the integration of the Council and the PCT.

Councillor Cowan requested information in respect of the West Kensington re-development. Mr Johnson responded that consultation would provide the opportunity for the community to look at the proposals in greater depth. The re-development of the Gibbs Green Estate would provide a new home for every tenant and leaseholder, and the acceptability of the proposals was being discussed with residents. Councillor Ivimy stated that the information given to tenants could be shared but detailed information was not currently available.

A member of the public queried the cost effectiveness of the work currently being carried out in West Kensington. Mr Johnson responded that new kitchens, windows and other work was being undertaken in respect of the Decent Homes Programmes. The cost was in the region of £4 million, and would be cost effective because the re-development of the estate was a 15/20 year programme.

RESOLVED:

That the report be noted.

ACTION:

That the following information be provided:

- (a) Report on satisfaction survey.
- (b) Board reports on management and back office costs and improvements and cost reductions.
- (c) Board report on complaints.
- (d) Analysis of the homelessness preventions.
- (e) Re-development of the Gibbs Green Estate.

ACTION: Chief Executive, H&F Homes/AD Regeneration and Housing Strategy

10. HAMMERSMITH & FULHAM LINK: UPDATE REPORT

RESOLVED THAT:

The Hammersmith and Fulham Local Involvement Network (H&F LINK) update report be noted.

11. SCRUTINY DEVELOPMENT AREA: HEALTH INEQUALITIES

The committee received a report in respect of the successful bid by seven of the North West London Health Scrutiny Committees to become one of nine Scrutiny Development Areas across the country as part of the Centre for Public Scrutiny's Reducing Health Inequalities programme.

RESOLVED THAT:

- (a) The committee recommends to the Overview and Scrutiny Board that a Task Group be established in respect of the Scrutiny Development Area: Health Inequalities project.
- (b) The committee recommends that membership of the committee includes Councillors Tobias, Vaughan and Cowan.

12. INTRODUCTION TO AND CHALLENGES IN ADULT SOCIAL CARE

Mr Reilly informed of the change in his role, whereby, in addition to responsibility for adult social care, he was a PCT director with responsibility for a portfolio of services.

Mr Reilly then presented the key issues in community services, which included the following key national policy issues and community service local priorities:

National Policy Issues

- Sustainable funding, balancing state and individual contribution – National Commission
- Integration – joined up access, assessment and service provision with health and supported housing
- Personalisation – extending choice and control through individual budgets
- Prevention – recovery and rehabilitation.

Community Services Local Priorities

- Strengthen Safeguarding of Vulnerable People

- Extend Personalised Budgets to 36% of users by April 2010
- Extend re-ablement services to all assessments for home care
- Complete contract renewals in Adult Social Care, Supported Housing and voluntary sector
- Progress integration with local health services – prevention and service re-design
- Identify and deliver efficiency savings
- Quality Assurance and improved support services

Councillor Dewhurst queried the prevalence of people with mental health needs. Mr Reilly responded that this could be attributed to Hammersmith and Fulham being an inner London borough, with areas of high deprivation, a high percentage of older and single people and alcohol and drugs abuse.

In response to queries from Councillor Vaughan, Mr Reilly stated that the PCT in conjunction with the West London Mental Health Trust, would consult on services based around St. Vincent's Day Hospital. Other initiatives included: the provision of memory clinics; updating of GP registers to capture all dementia sufferers, deemed to be around 1,000 people and the provision of specialist nurse support services.

Mr Reilly stated that personalised budgets was a three year programme ending in March 2012. There was no formal target beyond 36% of all users by April 2011. However, the Council was aiming to achieve 50% in 2011. Personalised budgets were being offered to all new entrants.

Mr Reilly responded in respect of conflict in his integrated role between the Council and PCT in respect of delayed discharges from hospital into social care that it was unlikely but possible, and that there was a particular issue in respect of mental health services where discharges were dependent on people being offered continuing care.

In accordance with paragraph 27 of the Overview and Scrutiny Procedure Rules, the committee extended the meeting by 15 minutes.

Councillor Coleman queried the letter to all carers in respect of the Carers' Centre. Mr Reilly responded that the Carers' Centre did not meet required standards and the contract would not be renewed at the end of July 2010. Interim arrangements would be put in place to ensure that support was safeguarded.

Mr Reilly stated that there would be no reduction in the carers' budget in the current financial year, but he was unable to comment on future years.

Mr Reilly then responded to Councillor Cowan that every element would be resourced to the level in the contract. The Carers' Centre would not be re-provided in Hammersmith Road, and carers would be able to access support groups and activities in various locations across the borough rather than just one building.

Mr Reilly stated that the lease on The Carers' Centre would end in August, and the building would be subject to normal Council procedures in respect of alternate use or disposal.

Councillor Cowan queried whether the PCT budget of £85 million had previously been two separate budgets. Mr Reilly responded that the money represented health budgets for community health, mental health, offender health and other community health service funds for a range of services including community services and mental health services. Council budgets for Adult Social Care and Supported Housing were £104 million, including a small number of joint funds. The PCT budget in Mr Reilly's area was £75 million.

Mr Reilly stated that NHS efficiency targets were excluded from Council efficiency targets, which were subject to the medium term financial strategy process. The Council would not be cutting vital services, but prioritising and re-designing services to provide services at a lower cost, for example people being treated at home. However, there were serious risks, such as raising the eligibility criteria.

Mr Reilly stated that where mental health patients were treated out of area, the costs transferred with them when they returned to their home borough.

13. WORK PROGRAMME AND FORWARD PLAN 2010-2011

RESOLVED THAT:

- (a) The work programme be agreed.
- (b) The following items be added to the work programme:
 - Health White Paper
 - Overcrowding
 - Regeneration projects
 - Voluntary sector – working in partnership
 - Housing benefits

14. DATE OF NEXT MEETINGS

14 September 2010
16 November 2010
18 January 2011
15 February 2011
12 April 2011

Meeting started: 7.02 pm
Meeting ended: 10.15 pm

Chairman

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