



London Borough of Hammersmith & Fulham

Housing, Health And Adult Social Care Select Committee Minutes

Wednesday 14 November 2012

PRESENT

Committee members: Councillors Lucy Ivimy (Chairman), Joe Carlebach, Iain Coleman, Stephen Cowan, Oliver Craig, Steve Hamilton and Rory Vaughan

Co-opted members: Maria Brenton (HAFAD)

Other Councillors: Marcus Ginn (Cabinet Member for Community Care) and Andrew Johnson (Cabinet Member for Housing)

Officers: Mike England (Director of Housing Options, Skills and Economic Development) and Sue Perrin (Committee Co-ordinator)

NHS Inner North West London: Dr Melanie Smith

23. MINUTES AND ACTIONS

RESOLVED THAT:

The minutes of the meeting held on 24 September 2012 be approved and signed as an accurate record of the proceedings.

24. APOLOGIES FOR ABSENCE

Apologies were received from Councillors Peter Graham and Peter Tobias, and from Councillor Stephen Cowan for lateness.

25. DECLARATIONS OF INTEREST

There were no declarations of interest.

26. TRANSFER OF PUBLIC HEALTH FUNCTIONS TO THE LONDON BOROUGH OF HAMMERSMITH & FULHAM; ESTABLISHMENT OF A TRI-BOROUGH PUBLIC HEALTH SERVICE

Dr Melanie Smith presented the report in respect of the statutory transfer of public health functions to local authorities from April 2013. The Cabinets of the three boroughs (Hammersmith & Fulham, Kensington & Chelsea and Westminster) had agreed the establishment of a single tri-borough public health service, with the retention of individual borough sovereignty in relation to public health decision making and priorities, and with Westminster City Council as the lead authority.

Dr Smith stated that, during 2013/14, it was planned to focus on maximising the opportunities of an in-house public health function. Staff and contract liabilities would transfer into the local authorities from the PCTs. The transfer of staff from the PCT to Councils was a TUPE-like PCT owned process. The new organisational structure would be in place prior to transfer.

A register of all contract liabilities had been completed by the PCT. The three councils had procured an external forensic examination of the number and values of contracts to provide assurance as to which contracts and their values would transfer to the councils.

A ring-fenced grant would be received. However, on the basis of prudent financial planning assumptions at this point, it was believed that there would be a funding shortfall of £6.2 million, of which £2.8 million had been identified to Hammersmith & Fulham. There had been an unfavourable movement since the paper was written due to the identification of an additional cost of £300,000 to adult social care, and a decision to plan on the basis of no inflationary uplift.

Councillor Coleman queried the options to meet the funding gap. Dr Smith responded that the planned tri-borough structure achieved 10 – 15% efficiencies and there was scope for savings in the contract portfolio. Displaced staff would be supported through the NHS redeployment pool, but it was possible that there might be compulsory redundancies.

Councillor Craig queried the funding shortfall for a full year. Dr Smith responded that the allocation would be based on historic spend and, for the three boroughs, was above the national average. However, historic spend was over capitation for public health, and there was an issue in respect of whether the borough would continue to receive growth money. There were concerns in respect of sexual health funding as this was an open access services, and demand was increasing each year.

Prior to the forensic audit, contracts worth £53 million had been split approximately equally between NHS and external contracts. Most external contracts would have been negotiated locally and inflationary uplifts would be unusual. The key NHS contracts would be CLCH and genitourinary medicine with the larger trusts, and these would contain inflationary uplifts. The three

councils would be responsible for any shortfall; the worse case scenario was £6.2 million.

Dr Smith stated that the biggest concern was in respect of the increase in activity generally.

Councillor Carlebach noted the indisputable value of the Community Champions.

Councillor Vaughan queried the accountability of the new structure and the portfolios of the Deputy Directors of Public Health. Dr Smith responded that the three boroughs would share responsibility for the service. Employees would work across the three boroughs, but would be based at Westminster City Council, with formal accountability up to the Chief Executive, Westminster City Council. The arrangements would mirror those in place for Adult Social Care and Children's services, where there were regular formal meetings between Cabinet Members and officers before individual borough sign off.

Dr Smith stated that, whilst the contracts within individual portfolios were of different values, there were significant areas for transition with different amounts of discretion, for example there was little flexibility in NHS contracts, whereas there was scope for innovation in external contracts. The three Deputy Directors of Public Health would lead teams with portfolios of:

- Health intelligence and advice across the range of local authority functions;
- Children and young people, healthy weight, mental health protection and promotion; and
- Adults, sexual health, behaviour change and health protection.

The teams would provide support and advice to Clinical Commissioning Groups (CCG). In addition, there would be a business support function, which would consider opportunities for savings in back office costs.

Councillor Vaughan queried the interaction with the Health & Wellbeing Board. Dr Smith responded that this would be included in the work with the CCG. There would be a two way relationship between the local authorities and CCGs, which could hold each other to account for delivery of services.

Dr Smith responded to a query from the Chairman that staff would mostly be existing employees, and that an induction programme would address the range of training needs for both PCT and local authority employees, for example PCT staff were not experienced in working in a political environment.

The Chairman queried the legal expertise in contracts. Dr Smith responded that Public Health would look to Adult Social Care and Family and Children's services for support in negotiation and management of contracts, and invoice verification, rather than attempt to replicate these services.

In conclusion, Dr Smith stated that the intention was to 'lift and shift; services and then add value. The transition was scheduled for completion by February, and thereafter or slightly before, the focus of Public Health would move to adding value.

RECOMMENDED THAT:

1. The report be noted.
2. An update report be provided to the April meeting.

27. HOUSING BENEFITS/LOCAL HOUSING ALLOWANCE - SYNOPSIS

Mr Mike England presented the update report, which covered two distinct cohorts. The first cohort was those households which the Council had placed in temporary accommodation. HB Assist had been set up in December 2010 to deal with the impact of the introduction of Local Housing Allowance (LHA) on those properties already being used as temporary accommodation. There had been an initial 546 tenancies where existing rents exceeded LHA rates, of which eight were currently still to be resolved.

The second cohort was households in the private rented sector who had no relationship with the Council and were affected by the HB Caps.

Mr England stated that there had been no significant change in the quantum of households and numbers of dependent children. However, the information gathered between 30 January 2012 and 30 September 2012 indicated that:

- The total number of households in the private rented sector affected by the Caps had decreased from 540 to 307.
- The potential impact of an additional £20 per week contributed by either the household or other party had decreased from 338 to 163 households.
- The impact of the HB Caps on Child dependents in the private sector had decreased from 949 to 386 children.

Members queried the impact on large households. Mr England responded that, of the 98 households of 4 bedrooms and over, 66 households remained in the same home. The other 32 households had not been moved out, but might have moved to a different part of the borough.

Mr England stated that, whilst there was no clear pattern, there were a number of likely reasons: a combination of people moving out of the borough and those moving in not being affected by HB Caps; and housing issues being resolved by other means, such as the landlord agreeing to reduce the rent, the household moving to another part of the borough, the household being able to meet the increased rent and the receipt of a discretionary housing payment or contribution from the Council. In addition, some tenants might seek assistance from the Council by declaring themselves homeless.

Mr England responded to a member's query that he was unable to quantify the number of households with children who had moved out of the borough, and that some of these would have had no contact with the Council.

Mr England informed that the number of tenancies still to be resolved by the HB Assist Team were currently eight, and there were a variety of circumstances to explain why accommodation had not been found, for example some households were waiting to move from temporary to permanent accommodation. When tenants moved from one private landlord to another, the Council aimed to take account of schools or other connections with the borough. However, there was likely to be relationship with landlords of temporary accommodation who had agreed to reduce their rents, which might not be typical of other private landlords.

Mr England responded to a member's query that he believed there were in the region of 20,000 people in the borough in receipt of housing benefit.

Councillor Cowan referred to the potential changes in legislation, and queried the measures to be put in place to manage the wider impact and how these compared with other London boroughs. Mr England gave examples of two key areas where measures had already been introduced:

- the changes to the way in which the Government subsidises temporary accommodation could again affect the first cohort of households; the Cabinet, at its November meeting, had approved the establishment of an expanded HB Assist project team; and
- social housing under occupancy proposals in respect of reduced housing benefits; the Council had written to households which it believed would be affected and offered assistance if they wanted to downsize.

Mr England confirmed that the Council had started to plan for the wider totality of the changes, and would be benchmarking against actions taken by other London Boroughs, including their interpretation of the rules.

In respect of 'resettled in a neighbouring borough', Mr England clarified that this referred to a contiguous boundary with Hammersmith & Fulham. A written answer would be provided in respect of the difference of 30 in the breakdown of those households which had been 'resolved by HB Assist'.

Action: Director, Housing Options, Skills and Economic Development

Mr England responded to queries in respect of the procurement of housing that accommodation had been provided outside the borough, but only on limited occasions outside the Greater London boundary. Slough/Staines was the most likely area. It was forecast that over 300 additional units of private sector accommodation would be required in the next 12/15 months. It was believed that some 400/500 families were housed outside the borough, and this would be confirmed in writing.

Action: Director, Housing Options, Skills and Economic Development

The Chairman queried whether people in difficulties because of the forthcoming legislation would be known to the Council. Mr England responded that many of the households affected by the changes were already known to the Council. In respect of households with some level of disability, the Council would pro-actively approach these households and prioritise work to gain an understanding of their needs.

RESOLVED THAT:

1. The strategy for the forthcoming legislative changes be brought to the February meeting.
2. The Committee noted the report.

28. HOUSING AND REGENERATION DEPARTMENT KEY PERFORMANCE INDICATORS

Mr England responded to queries in respect of the 49 families in bed and breakfast accommodation for over six weeks, as shown in the Housing and Regeneration Department Key Performance Indicators report. The number had peaked at 58 at the beginning of October and had then been brought back to 46. Whilst there was generally a fast turnover of families, there were a small number who had been in bed and breakfast accommodation for a considerable period because of circumstances which made it difficult to move then, for example a large family or technical queries in respect of immigration status. The typical length of stay was 10/12 weeks because of problems with the supply of other temporary accommodation.

The Cabinet had recently approved two measures: an expanded role for HB Assist to help a wider group of residents affected by the Local Allowance cap and forthcoming changes to universal credit; and a £750k incentive package to private landlords to accommodate households on a temporary basis. Mr England referred to the Council's good record in resolving potential issues before a homelessness application and the rigorous way in which it interpreted the law. In response to a member's query, Mr England clarified that the Council applied the letter and spirit of the law, investigated thoroughly and, where proven, accepted a duty to assist. Where a duty was not proven, the Council would still assist, whilst not accepting a duty.

Councillor Cowan considered that this approach was subjective and the Council would have to make judgements in complicated cases. Homelessness was not necessarily prevented by the best measures and there was a disparity between the increase in homelessness across London and in Hammersmith & Fulham. Mr England responded that homelessness

numbers were rising and that the process was a statutory one with a right of review.

Councillor Cowan stated that the Council had not built affordable housing and should re-appraise its housing policy. Councillor Johnson responded that the Council had 12,000 tenanted properties of which 33% were social housing and a range of policies to assist tenants were being pursued.

RESOLVED THAT:

1. The Committee recommended that the Council's figures and projections be compared with those from the GLA.
2. The report be noted.

29. WORK PROGRAMME AND FORWARD PLAN 2012-2013

RESOLVED THAT:

The work programme be approved subject to the inclusion of Self Directed Support Procurement on the January agenda.

30. DATES OF NEXT MEETINGS

22 January 2013
19 February 2013
9 April 2013.

Meeting started: 7.00 pm
Meeting ended: 9.05 pm

Chairman

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