



HILLINGDON
LONDON



Social Services, Health and Housing Policy Overview Committee

Councillors on the Committee

Judith Cooper (Chairman)

Peter Kemp (Vice-Chairman)

David Benson

Sukhpal Brar

Patricia Jackson

John Major (Labour Lead)

June Nelson

Mary O'Connor

Date: WEDNESDAY,
27 FEBRUARY 2013

Time: 6:00PM
Venue: COMMITTEE ROOM 6
CIVIC CENTRE,
HIGH STREET,
UXBRIDGE,
MIDDLESEX UB8 1UW

**Meeting
Details:** Members of the Public and
Press are welcome to attend
this meeting

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Policy Overview

About this Committee

This Policy Overview Committee (POC) will undertake reviews in the areas of Social Services, Health & Housing and can establish a working party (with another POC if desired) to undertake reviews if, for example, a topic is cross-cutting.

This Policy Overview Committee will consider performance reports and comment on budget and service plan proposals for the Council's Adult Social Care, Health and Housing Department.

The Cabinet Forward Plan is a standing item on the Committee's agenda.

The Committee will not consider call-ins of Executive decisions or investigate individual complaints about the Council's services.

Terms of Reference

To perform the following policy overview role:

1. conduct reviews of policy, services or aspects of service which have either been referred by Cabinet, relate to the Cabinet Forward Plan, or have been chosen by the Committee according to the agreed criteria for selecting such reviews;
2. monitor the performance of the Council services within their remit (including the management of finances and risk);
3. comment on the proposed annual service and budget plans for the Council services within their remit before final approval by Cabinet and Council;
4. consider the Forward Plan and comment as appropriate to the decision-maker on Key Decisions which relate to services within their remit (before they are taken by the Cabinet);
5. review or scrutinise the effects of decisions made or actions taken by the Cabinet, a Cabinet Member, a Council Committee or an officer.
6. make reports and recommendations to the Council, the Leader, the Cabinet or any other Council Committee arising from the exercise of the preceding terms of reference.

In relation to the following services:

1. social care services for elderly people, people with physical disabilities, people with mental health problems and people with learning difficulties;
2. provision of meals to vulnerable and elderly members of the community;
3. Healthy Hillingdon and any other health promotion work undertaken by the Council and partners to improve the health and well-being of Hillingdon residents;
4. asylum seekers;
5. the Council's Housing functions including: landlord services (currently provided by Hillingdon Homes), private sector housing, the 'Supporting People' programme, benefits, housing needs, tenancy allocations and homelessness and to recommend to the Cabinet any conditions to be placed on the exercise of the delegations by Hillingdon Homes.

Policy Overview Committees will not investigate individual complaints.

Agenda

CHAIRMAN'S ANNOUNCEMENTS

- 1 Apologies for Absence and to report the presence of any substitute Members
- 2 Declarations of Interest in matters coming before this meeting
- 3 To receive the minutes of the meeting held on 30 January 2013 1 - 8
- 4 To confirm that the items of business marked in Part I will be considered in Public and that the items marked Part II will be considered in Private
- 5 Cabinet Forward Plan 9 - 30
- 6 Work Programme 31 - 34

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Minutes

SOCIAL SERVICES, HEALTH AND HOUSING POLICY OVERVIEW COMMITTEE

30 JANUARY 2013



Meeting held at Committee Room 5 - Civic Centre,
High Street, Uxbridge UB8 1UW

	<p>MEMBERS PRESENT: Councillors: Cllr Judith Cooper Cllr Peter Kemp Cllr David Benson Cllr Sukphal Brar Cllr Pat Jackson Cllr John Major Cllr Mary O'Connor Cllr Peter Curling</p>
	<p>OFFICERS PRESENT: Linda Sanders (Director Social Care, Health) Moirra Wilson (Deputy Director Social Care and Health) Neil Stubbings (Deputy Director of Housing, Residents Services) Steve Cross (Head of Finance, Social Care and Health) Andrew Thiedeman (Service Manager Mental Health) Ann Otesanya (Neighbourhood Housing Services Manager) Debbie Weller (Housing Strategy and Commissioning Service) Charles Francis (Democratic Services Officer)</p> <p><u>Also present:</u> Sandra Brookes (CNWL)</p>
33.	<p>APOLOGIES FOR ABSENCE AND TO REPORT THE PRESENCE OF ANY SUBSTITUTE MEMBERS (<i>Agenda Item 1</i>)</p> <p>Apologies Cllr June Nelson substitute Cllr Peter Curling</p>
34.	<p>DECLARATIONS OF INTEREST IN MATTERS COMING BEFORE THIS MEETING (<i>Agenda Item 2</i>)</p> <p>Cllr Peter Kemp declared non-pecuniary interests as a member of the Board of CNWL and as a member of the Trustees of Hillingdon MIND</p> <p>Cllr Mary O'Connor declared a non-pecuniary interest as Chairman of Hillingdon MIND.</p>
35.	<p>TO RECEIVE THE MINUTES OF THE MEETING HELD ON 11 MBER 2012 (<i>Agenda Item 3</i>)</p> <p>Were agreed as an accurate record</p>
36.	<p>TO CONFIRM THAT THE ITEMS OF BUSINESS MARKED IN PART I WILL BE CONSIDERED IN PUBLIC AND THAT THE ITEMS MARKED PART II WILL BE CONSIDERED IN PRIVATE (<i>Agenda Item 4</i>)</p> <p>All items were considered in Public</p>

37. FORWARD PLAN (AGENDA ITEM 5)

The Deputy Director of Housing, Residents Services provided an overview of the following reports:

- Hillingdon's Housing Strategy 2012-15
- Tenancy Strategy
- Tenancy Policy
- Review of the Housing Allocation Policy

It was noted that the covering report provided an overview of the four key housing documents which were appended to it.

Officers explained that as soon as the drafts had been agreed by Cabinet, a full consultation exercise would be undertaken which would include online questionnaires and consultation meetings (as well as comments from the Committee) over a period of 8 weeks. At the end of this period, the outcome of the consultation would be reported back to Cabinet, along with the four documents (listed above) for formal approval.

During the course of discussions, the Committee raised a number of points.

The Committee enquired how flexible tenancies would operate and how these would free housing stock. Officers explained that this policy would enable registered providers to use housing stock to its best advantage and enable the tenancy to take account of changes in people's lives within a reasonable timeframe. Flexible tenancies would also enable tenants to be matched to suitable properties more effectively. It was noted that no Local Authority had come to the end of a 5 year assessment period as it was a relatively new policy.

The Labour Group Members of the Committee explained that they disagreed with a number of policies contained within the four key housing documents. These included, the Council discharging its housing duty to the Private Rented Sector, the procurement of housing outside Hillingdon and the suggestion that 80% of market rents were affordable. Further comments received from Labour Members included their discomfort at the removal of lifetime tenancies, they suggested the fixed term tenancy, if adopted, should be extended from 5 years to 10 years and the suggestion that carers could be mentioned as an exemption from this policy.

In relation to discharging its duty to the Private Rented Sector (PRS), officers explained that the Council had a duty to ensure all properties were used to their best advantage. Officers acknowledged that the PRS had grown significantly in the last 5 years and discharging into the PRS would be attractive to a significant number of people as this would enable residents to live closer to their preferred location.

Officers confirmed that the Councils' policy had always been local housing for local people but that in certain cases, some out of borough properties were sourced from Slough, Harrow and Ealing. In considering out of borough placements, officers confirmed that the vulnerability of the tenant and the affordability of the placement were key considerations before any decision was made.

The Committee were informed that Government had introduced the affordable rent model. Officers confirmed that 65% of market rent were generally affordable in Hillingdon and the Committee asked for this point to be highlighted in the final version of the report to Cabinet.

With respect to the removal of lifetime tenancies, the Committee heard that this policy was not a mechanism to address tenant behaviour issues such as anti-social behaviour or non-payment of rent but rather about maximising the use of properties throughout the borough. Members agreed that carers and users should be recognised on an equal footing and it was suggested that a closely monitored list of private landlords should be created to provide assurance to tenants in the PRS.

In relation to what the Council was doing to address overcrowding and the increased demand for larger properties, officers confirmed that evidence was taken from a combination of sources including the Housing Market Assessment and market surveys. After this information had been collated, it was then used to inform planning policies. Officers also explained that there was ongoing work looking at the under occupation of properties by older people to see how those properties could be better used.

The Committee asked officers what steps were being taken to tackle and prevent homelessness. Members heard that the most cost effective way to combat this was through the preventative agenda and encouraging tenants not to move unnecessarily.

Members explained that they were aware about 20 people had been through the Council's Winter Night Shelter Programme and asked officers to comment on how successful the scheme had been. In response, officers explained that at least 50% of those involved in the scheme had chosen to become rough sleepers again and in many cases it was a question of the homeless person finding it difficult to adapt to a new living environment. Officers confirmed that they were actively looking at how this success rate could be improved in the future.

The Tenancy Succession Policy was also raised in discussion and concern was expressed about instances where children had been caring for elderly parents as part of the household and then been asked to vacate the property when the parent/s had died. Officers confirmed that tenants were entitled to one succession in law and sometimes issues occurred when a succession had already occurred between parents and an incorrect assumption was made that the property would automatically be transferred to the son or daughter. The Committee were encouraged to learn that officers were aware of this specific issue and officers were investigating ways of improving joint working between Housing and Housing Options teams to ensure processes were improved in the future.

The Committee also enquired about hostel accommodation in the borough for single people. Officers reported that the Council had conducted a hostel redevelopment programme about three years ago when approximately 5 new hostels were provided for the most vulnerable clients. At present, officers were looking at a variety of options to provide temporary

accommodation for homeless people, one of which was hostel provisions as this was acknowledged to be more cost effective in the long term than relying on bed and breakfast options.

In discussing affordable homes, the Committee noted that Hillingdon's most recent Housing Market Assessment had identified a need for a net additional 2,624 homes over the next 5 years. However, elsewhere in the report, this need was expressed as being a minimum provision of 5,475 until 2026. To improve the clarity of the report, the Committee suggested that a consistent statistic was used in the final version of the report.

In relation to the Housing Allocation Policy, Members asked for further clarification as to whether this would be decided by local criteria or local need. Officers explained that in all cases, the most vulnerable would be housed first but that the Localism Act would cater for some allocations to be made according to local needs. Officers confirmed the term Housing Need would need to be clarified in the final version of the report to Cabinet.

With regards to the current requirement that 10 years living continuously in the same location amounted to local residency, Members asked how this might be applied to asylum seekers. In response, officers confirmed that the Localism Act included a residency clause and that after all the feedback on all four core documents had been received, there would be a requirement for the Council to conduct an equalities impact assessment to ensure the policies had been developed in an equitable way.

The final area highlighted by Committee was in relation to vulnerable groups and their housing and support needs. The Committee noted that Hillingdon has a significantly larger proportion of people in younger age groups (5-19) compared to England and London, and Office of National Statistics data had estimated that this might amount to as much as 25% of the population of the borough. With these figures in mind, the Committee agreed that it was essential that for those 16 to 17 years olds who had become homeless, which the Council had a duty to home, that effective advice and support was in place to assist with this transition.

The Committee also reviewed the Forward Plan from February to May 2013 and requested officers to provide briefing notes on the following items:

- 836 – Outcome of further consultation on learning disabilities day services
- 897 – Joint Adult Mental Health Commissioning Plan 2013-15
- 894 –Hillingdon's Health and Wellbeing Strategy 2012-15.

Resolved –

- 1. That the 4 core reports be noted**
- 2. That officers be asked to note the feedback received from the Committee and to integrate this into the ongoing consultation process.**
- 3. That officers be requested to provide briefing notes on the following Forward Plan items: 836, 897 and 894 as detailed above.**

BUDGET PROPOSALS FOR: SOCIAL SERVICES, HEALTH AND HOUSING SERVICES 2013/14 (AGENDA ITEM 6)

The Head of Finance, Social Care and Health introduced the report.

The report set out the draft revenue budget and capital programme of Social Services, Health and Housing (SS,H&H) for 2013/14, along with indicative projections for the medium term. Members were informed that the Council was looking to make significant savings of around £12.8m, on top of the £17.7m delivered in 2012/13. It was noted that the final funding settlement for 2013/14 had only just been announced, but not yet fully analysed and so the budget was drafted on the latest estimated position.

It was noted that since the last budget report, the Housing Service with the exception of Housing Benefits had been transferred to the Finance Directorate and the remaining housing services, except for housing support services, had been moved into Residents Services.

Members heard that officers were working with Primary Care Trust colleagues to establish and confirm the value of the contracts that would be novated and the staffing establishment that will be transferred from the PCT to the Authority.

In terms of future challenges, the following areas were noted:

- The transfer of children from education to adult services was an ongoing service pressure.
- The impact of Housing Benefits changes on Temporary Accommodation
- The significant demographic pressure of an ageing population
- The transition of Public Health services to local government

The report recommended that discretionary charges for Social Care and Housing Services were not increased and remained at current levels. The exception being tenant rent which is proposed to increase by 3.1% in line with Government formula.

Points raised by Members were:

- Care and Support Bill – The Committee were pleased to learn that for the first time, this brought carers into the heart of the law and put them on a par with those for whom they cared.
- The ability of the budget to deliver front line services – Officers explained that current strategies had enabled officers to meet residents' needs. Compared to other Local Authorities, officers in Hillingdon had greater scope to redesign services to address service pressures.
- Increase in Transitional Children due to Demographic Changes – The Committee noted that since 2011/12 the additional costs had averaged approximately £1.2 per annum.
- Out of Borough Packages will be reviewed and part of that review will consider whether or not to relocate them back to Hillingdon – Officers explained that cases were reviewed on a cases by case basis.

- The Public Health Transfer from the PCT to the Authority – Officers reported that there had been a considerable number of representations made by the Council and that the final allocations represented a good settlement for the Borough.
- Financial Modeling – Officers confirmed that the review of financial models by LG Futures had confirmed that although current models were reliable and robust but being 6 years old were increasingly difficult to respond quickly in a changing environment. The Committee heard that new, more interactive models were being developed for both Adult’s and Children’s Services and when these were completed a complete refresh of the social care demographic pressures would be undertaken.

The Chairman thanked officers for a clear, well laid out report and for answering Member’s questions. The following comments were made to Cabinet:

The Committee’s comments on the Budget were agreed as follows:

“...“We note the various budget proposals and welcome the work of the Council in this demanding and complex area. We acknowledge the range of charges, costs and other emolument features. We congratulate officers on their market development work, in keeping costs down while monitoring quality and in particular, efforts with regard to residential placements particularly those out of borough. Additionally, we note the successful redesign of services to help people live more independently in the community.

We also note and welcome the work being conducted by the Council to support people to live independently in their own homes”.

Resolved:

- 1. That the budget projections contained in the report be noted and the comments made by the Committee be submitted to Cabinet.**

REVIEWS IN 2012/13 – DRAFT REPORT – REVIEW OF ADULT COMMUNITY MENTAL HEALTH SERVICES - (AGENDA ITEM 7)

The Deputy Director Social Care and Health introduced the draft report which had been prepared in consultation with CNWL.

The draft report was agreed subject to several minor typographical amendments and the inclusion of 2 new recommendations in relation to outreach work and staff education. The final wording of report to be agreed by the Chairman in consultation with the Labour Lead outside the meeting prior to submission to Cabinet.

The Committee requested that its recommendations be fed into the Mental Health Strategy currently being developed by officers and that officers provide an update report on the implementation of the Committee's recommendations (subject to Cabinet approval) in one year's time

Resolved –

- 1. That the report be agreed subject to the amendments listed above with the final wording to be agreed between the Chairman and Labour Lead outside the meeting**
- 2. That subject to Cabinet's approval, that the Committee's recommendations be fed into the Mental Health Strategy**
- 3. That subject to Cabinet approval, that Officers be requested to provided an update report in one year's time on the implementation of the Committee's recommendations**

38. WORK PROGRAMME (Agenda Item 8)

Reference was made to the work programme and timetable of meetings.

Resolved –

That the report be noted.

The meeting, which commenced at 6pm, closed at 8:10pm.

These are the minutes of the above meeting. For more information on any of the resolutions please contact Charles Francis on 01895 556454. Circulation of these minutes is to Councillors, Officers, the Press and Members of the Public.

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FORWARD PLAN – MARCH 2013 TO JUNE 2013

Contact officer: **Charles Francis**

Telephone: **x 6454**

REASON FOR ITEM

To review the Cabinet Forward Plan of forthcoming executive decisions to be made and any items on a published Cabinet agenda (if applicable).

OPTIONS OPEN TO THE COMMITTEE

- To comment on items going to the Cabinet or Cabinet Members for decision.
- Or to note the items and decide not to comment.

INFORMATION

The Forward Plan

The Committee's terms of reference enable it to monitor the Cabinet's Forward Plan and comment, if required, to the relevant decision-maker (Cabinet or Cabinet Member) on future decisions within the Committee's remit before they are made. Comments made by the Committee, depending upon publication timings, can be included within forthcoming reports to the Cabinet or Cabinet Member.

The current edition of the published Forward Plan is attached showing those items that are within this Committee's remit. The Forward Plan is published around the middle of each month (at least 28 clear days before the next Cabinet meeting) to comply with regulations around giving advance notice of future executive decisions.

Committee Members can ask questions they have about a particular Forward Plan item in advance and if necessary, through the agreement of the Chairman, request an officer to be present at the Committee meeting to give advice.

At the last meeting, the Committee requested briefing notes on the following reports:

- 836 – Outcome of further consultation on learning disabilities day services (to follow)
- 897 – Joint Adult Mental Health Commissioning Plan 2013-15
- 894 – Hillingdon's Health and Wellbeing Strategy 2012-15

These items are attached to this covering report.

The Cabinet agenda

If the Cabinet agenda has been published and the Committee meets before the date of the Cabinet meeting, the Committee is entitled to provide comments on a report under their remit to Cabinet. This is normally added to an addendum sheet tabled on the night

of the Cabinet meeting.

SUGGESTED COMMITTEE ACTIVITY

- To consider the briefing notes.
- To consider whether there are comments or suggestions that the Committee wishes to make that will aid Cabinet's decision-making.

SOCIAL CARE, HEALTH & HOUSING POLICY OVERVIEW COMMITTEE - 27.2.13

Cabinet Member: Cllr Corthorne

Lead Officers: Linda Sanders & Paul Feven

Cabinet Report: Health and Wellbeing Strategy - draft approved subject to consultation 20.12.12 approval following consultation planned for 25.4.13

This Cabinet report will present a revised Health and Wellbeing Strategy for approval.

National Guidance on Health and Wellbeing Strategies

The following is a summary including specific excerpts from the DH draft guidance (Nov 11) *JSNAs and joint health and wellbeing strategies*:

Summary of duties and powers relating to HWB Strategies – Health and Social Care Bill

- Duty to prepare strategies
- Duty to involve third parties in preparation of the strategy
- Duty to have regard to statutory guidance in developing the strategy
- Duty to consider health act flexibilities when developing the strategy
- Duty to publish the strategy

Key principles of health and wellbeing strategies:

- Should be strategic
- Should look at local assets as well as needs
- Should understand inequalities in the local area
- Should focus on the things that can be done together e.g. added value of pooling budgets and other resources, joint commissioning
- Should prioritise the issues requiring the greatest attention, avoiding the pitfalls of trying to take action on everything all at once.

Overall aim of health and wellbeing strategies:

to jointly agree what the greatest issues are for the local community based on evidence in JSNAs, what can be done to address them and what outcomes are intended to be achieved. “

Values that underpin good health and wellbeing strategies:

- Setting shared priorities based on evidence of greatest need
- Setting out a clear rationale for the locally agreed priorities
- Not trying to solve everything but taking a strategic overview on how to address the key issues
- Concentrate on an achievable amount
- Addressing issues through joint working across the local system

- Supporting increased choice and control by people who use services

Purpose of Hillingdon's Strategy

The draft strategy has been written for members of the public and presents a clear and straight-forward picture of the key priorities that the key health and wellbeing partners will be focused on for the next few years.

The strategy outlines the key priorities for the Board and within this:

- An outline of the current situation
- Areas for improvement
- Specific actions and success measures that can be monitored

Outline of the Strategy

- Strategic context section outlining key issues for (a) Council and social care (b) CCG and (c) public health. This includes information on common principles and the financial context we are working in.
- **Key objectives** for the strategy are:
 - Improved health and wellbeing and reducing inequalities
 - Prevention and early intervention
 - Developing integrated, high quality social care and health services within the community or at home
 - Creating a positive experience of care
- These objectives frame a series of more specific priorities which the Strategy provides details on.
- **Key priorities within each objective** are as follows:

1	IMPROVE HEALTH & WELLBEING AND REDUCE INEQUALITIES
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- Physical activity and obesity

2	INVEST IN PREVENTION AND EARLY INTERVENTION
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- Reducing reliance on acute and statutory services;
- Children's mental health and risky behaviours;
- Dementia and adult mental health.

3	DEVELOP INTEGRATED, HIGH QUALITY SOCIAL CARE AND HEALTH SERVICES WITHIN THE COMMUNITY OR AT HOME
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- Integrated approaches for health and well-being, including telehealth;
- Integrated Care Pilot for frail older people and diabetes.

4 CREATING A POSITIVE EXPERIENCE OF CARE

- Tailored, personalised services;
- An ongoing commitment to stakeholder engagement.

Governance

Attachment 1, Health & Wellbeing Board report 19.2.13.

Health & Wellbeing Board on 19.2.13 considered the findings from the consultation process and endorsed the priorities set out in the strategy with a view to utilising the consultation feedback to shape implementation planning. This is with a view to formal approval at April's Cabinet as well as formal consideration by Hillingdon's Clinical Commissioning Group.

Once the priorities have been agreed, it will be possible to develop task and finish groups to take day to day responsibility for the completion of agreed actions, subject to the determination of the Board.

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HILLINGDON HEALTH AND WELLBEING BOARD

Developing the Hillingdon Joint Health and
Wellbeing Strategy – Consultation Results
19 February 2013

Contact: Councillor Puddifoot / Linda Sanders

Tel: 01895 250 316 / 01895 250 506

SUMMARY

1. This paper presents to the shadow Health and Well-being Board the findings from the consultation about the priorities for health improvement set out in Hillingdon's draft Joint Health and Wellbeing Strategy. Overall the findings from the consultation demonstrate broad support for the proposed health improvement priorities. The Board is asked to endorse the four priorities set out in the draft health and wellbeing strategy and use the consultation feedback to shape the implementation plans and inform future 'task-and-finish' project work.

RECOMMENDATIONS

2. The Board is asked to:
 - Consider the feedback received from the consultation undertaken about the strategic priorities for improving health and wellbeing in Hillingdon
 - Endorse the priorities set out in the draft strategy and agree the strategy document is updated to include the consultation findings before being finalised
 - Use the comments received to shape future implementation plans

REASONS FOR RECOMMENDATIONS

3. The consultation findings inform the development of Hillingdon's Joint Health and Wellbeing Strategy.

FINANCIAL IMPLICATIONS

4. None directly from this report.

LEGAL IMPLICATIONS

5. None directly from this report.

BACKGROUND

6. Draft guidance from the Department of Health (JSNAs and joint health and wellbeing strategies) sets out a duty for the Board to prepare a strategy to address health inequalities and promote health improvement, and to involve stakeholders in preparing the strategy. The strategy should be based on evidence, seek to address the greatest health and wellbeing concerns for local residents and set out the key outcomes to be achieved.
7. At the previous meeting of the shadow Health and Well-Being Board, the Board agreed to undertake a consultation to gather views about the proposed priorities set out in the draft Joint Health and Wellbeing Strategy. The consultation period closed on 11th February 2013.

About the Consultation

8. A consultation plan was prepared to ensure a wide cross-section of opinion was gathered using a mixture of approaches to inform the development of the strategy. This included an online survey and presentations / discussions at existing Groups. The plan covered the following:
- Standard and easy read versions of the consultation survey were created. These were made available online and in paper.
 - The consultation had its own page on the Council's website, with details of the strategy and links to both versions of the survey.
 - An email promoting the consultation was sent to the Customer Engagement team's list of over 1,700 residents.
 - Messages were sent to partner organisations in the borough
 - A list of local groups and forums was created which were then approached by the consultation team. Staff attended several meetings to promote and discuss the consultation, which included the following groups:
 - Age UK Conference – 5th December
 - Age UK BAME Elders Forum, Hayes – 8th January
 - People in Partnership event, Hayes – 11th January
 - Hillingdon Youth Council – 14th January
 - Women in the Community Network Steering Group, Yeading – 15th January
 - Hillingdon Parent Carers Support Group, Uxbridge – 23rd January
 - Carers' Café arranged by Hillingdon Carers in Hayes – 31st January
 - Older People's Assembly Steering Group, Civic Centre – 8th February
 - Assembly for Disabled People, Civic Centre – 11th February
9. Overall, there were 127 responses to the consultation survey between 30th November 2012 and 11th February 2013, of which 65 were paper responses and 62 were online.

The Consultation – Key Findings

10. The following section of the report sets out the headline findings from the consultation. In general, the consultation findings demonstrate support for the four key priorities set out in Hillingdon's draft Joint Health and Wellbeing strategy as set out below. Only two responses directly disagreed with any of the proposed priorities. Some people / organisations responding to the consultation suggested other priorities which represent suggestions for how the priorities could be delivered across partners.

A. The majority of responses agree with one or more of the four proposed priorities:

- Three quarters (78% - 99) agree with all four priorities.
- Priority 1 – Improved health and wellbeing and reducing inequalities (90% agree - 114)
- Priority 2 – Prevention and early intervention (89% agree - 113)
- Priority 3 – Developing integrated, high quality social care and health services within the community or at home (90% agree - 114)
- Priority 4 – A positive experience of care (92% agree - 117)

B. Only two of the responses disagree with any of the priorities. Some only agree 'in part' with the priorities. Reasons given for this include:

- Seeking assurance that the quality of care services will not be adversely affected.
- Wanting more detail about the priorities/implementation plans.
- Comments raising questions about the challenge to influence health improvement by changing behaviours (e.g. healthy eating, increasing physical activity).
- The need to focus on early years, early intervention and prevention.

C. Just under half (47% - 60) suggested other priorities, including:

- A comprehensive communications strategy to ensure all social groups are engaged and aware of relevant health messages e.g. using a range of targeted messages delivered via different media.
- Ensuring that the strategy is the product of meaningful engagement with the public.
- Financial support / sign-posting for vulnerable carers and patients to help them cope when they are unwell or struggling with their circumstances.
- Ensuring that care standards are maintained or improved.
- Continuing to improve care pathways for those leaving hospital.
- Recognising the challenge that the local authority, health partners and other partners face in delivering the changes needed.

D. One third (33% - 42) of the respondents made further comments about the proposals. They were broadly supportive but some requested:

- More detail on proposed activities and on the funding available for the strategy and possible impacts on existing services.
- Assurances about care standards and waiting times.
- Assurances that the wider determinants of public health are recognised and addressed.

Next Steps

11. Given the broad support for the four key joint health and wellbeing priorities, this paper recommends that the Board endorse the priorities set out in the draft Joint Health and Wellbeing Strategy and use the feedback to inform the implementation of plans delivered by partners of the Board. The strategy document will be updated to include the consultation findings to inform the implementation of the strategy before being presented to the Cabinet meeting of the Council in April 2013.

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SOCIAL CARE, HEALTH & HOUSING POLICY OVERVIEW COMMITTEE - 27.2.13

Cabinet Date: 23rd May 2013

Cabinet Member: Cllr Corthorne

Leader Officers: Linda Sanders, Moira Wilson, Andrew Thiedeman

Joint Adult Mental Health Commissioning Plan 2013 - 2015

Introduction

The Council, NHS Hillingdon and Hillingdon Clinical Commissioning Group (HCCG) have worked together with a range of professionals, third sector partners, service providers and service users and their carers to develop a joint, integrated adult mental health commissioning plan that sets the strategic direction for addressing the needs of all adults with functional mental health needs as well as people with dementia. This integrated approach to adult mental health that includes both the functional mental health needs of older people and dementia reflects national policy as seen in the national mental health strategy published in March 2011, 'No health without mental health: a cross-government mental health outcomes strategy for people of all ages'.

Purpose of the Plan

The Mental Health Commissioning Plan sets out the strategic direction for adult mental health services in Hillingdon. The key objectives of the Plan are that residents with mental health needs should to:

- Live a normal life as far as possible
- Be included in local communities and activities
- Not be stigmatised or discriminated against on any grounds
- Have easy access to up to date and accurate information
- Have options in the choices of care available locally
- Have personalised care plans that are built around the wishes of each individual and their carers
- Be supported with services that promote and enable recovery and well-being

Development of the Plan

The plan is based on a review of the current Hillingdon Mental Health Strategy (2008 -2012), a review of national policy for adult mental health and dementia, a local mental health needs assessment and JSNA priorities. It also reflects the recommendations of the External Services Scrutiny Committee's Dementia Working Group that were approved by Cabinet in May 2012. The HCCG Board's review of both Dementia Services and the North West London (NWL) Mental Health Strategy of May 2012 are also reflected. The joint Adult Mental Health Commissioning Plan draft was agreed subject to consultation at Cabinet on 20th December. It is currently subject to wide spread consultation prior to returning to Cabinet in May 2013 for final approval.

Priorities for Adult Mental Health Care and Support

Stakeholders have agreed that priorities for adult mental health care and support should focus on delivering recovery focused, personalised, outcome-based assessment treatment and



support. This improvement will be achieved through service redesign and reconfiguration, moving from institutional and bed based to community based services, ensuring a whole systems and integrated approach to providing support and intervention. Pathways will therefore be developed for adults with functional mental health problems of all ages, with a separate pathway for older adults with functional mental health problems who are physically frail and/or have dementia.

Key Actions

Key actions are set out that need to be delivered during the lifetime of the plan and these include:

a) Services for Adults with Functional Mental Health Problems

- Exploring and implementing cost effective methods for ensuring early intervention and promoting mental health and wellbeing in all communities; including addressing health inequalities with faith and other community groups.
- Building on the current strengths of primary care in managing significant numbers of adults with mental health problems effectively by establishing a joint approach to assessment, treatment and support for mental health and physical health care needs between primary and secondary care.
- Developing and implement integrated care pathways.
- Improving support to carers, including in crises.
- Promoting independence and empower adults with mental health problems by increasing the supply of supported housing and providing personalised packages of support.
- Working with the National Commissioning Board to explore the potential to redesign services to provide the specialist interventions needed by people with an eating disorder, forensic needs and develop effective pathways from Heathrow and detention centres.
- Maximising the contribution of voluntary and community services.
- Ensure effective involvement of service users and carers in service delivery and improvement processes.
- Refresh the mental health joint strategic needs assessment.
- Agree a suicide prevention plan jointly with other NW London commissioners.
- Explore models to promote improved joint commissioning and service delivery.

b) Services for physically frail older adults with functional mental health problems and/or dementia

- Supporting people in their own homes for as long as possible by providing specialist expertise within services for older adults where appropriate, in particular as part of the out of hospital strategy.
- Increasing the rate of diagnosis of dementia; including training GPs and establishing a memory assessment service
- Improving the co-ordination of care through improved assessment and multi-disciplinary working in primary care (Elderly Integrated Care Pilot (ICP)) and integration of the work of all relevant agencies into an effective model of care
- Promoting awareness of dementia amongst the general public and staff working with older adults.
- Reducing reliance on acute mental health beds.



- Developing the infrastructure for community based assessment, treatment and support through the implementation of agreed integrated care pathways.
- Maximising the contribution of the voluntary sector.
- Commissioning a dementia resource centre to provide an accessible community resource for the delivery of health and social care services.
- Agreeing a cost-effective way of providing specialist advice to residential and nursing home services in order to prevent escalation of need and avoid admission to inpatient or more intensively nursed care
- Evaluating the psychiatric liaison service at The Hillingdon Hospital (MH ICP) as an effective way to ensure appropriate response to physical and mental health care crises
- Improving support to carers to enable them to continue in their caring role; includes improving carers' assessment and improving respite care.
- Reviewing services and developing and implement improved care pathways to identify need and initiate improvement to people with early onset dementia.
- Reviewing services and developing and implementing improved care pathways to identify need and initiate improvement to people with a learning disability with dementia.

Implementing the Plan

A series of work streams have been identified covering the following areas:

- Shifting settings of care
- Carers of adults with mental health needs
- Dementia
- Integrated pathways across agencies and professionals

Where improving outcomes for adults with mental health needs and their carers necessitates a change in the way resources are used to achieve major service change, then detailed business plans will be developed. Cabinet approval supported by business plans will be sought where this involves Council funding. HCCG approval will be sought where NHS funding is concerned.



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Ref	Decision	Further information	Ward(s)	Report to Full Council	Cabinet Member(s) Responsible	Officer Contact for further information	Consultation on the decision	NEW ITEM	Private decision?
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Council Departments: RS = Residents Services SC&H =Social Care & Health AD = Administration Directorate FD= Finance Directorate

Cabinet meeting - 21 March 2013

SI	Supported Housing Programme	This report will update Cabinet and request any necessary decisions in order to progress the Council's Supported Housing Programme and HRA Pipeline projects, in order to upgrade and build new homes for residents and vulnerable adults in the Borough.	Various		Cllr Jonathan Bianco	RS - Norman Benn	Corporate consultees		Private (3)
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Ref **Decision** Further information

Ward(s)

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Cabinet Member Decisions - March 2013

Ref **Decision** Further information

Ward(s)

Report to Full Council

Cabinet Member(s) Responsible

Officer Contact for further information

Consultation on the decision

NEW ITEM

Private decision?

Council Departments: RS = Residents Services SC&H =Social Care & Health AD = Administration Directorate FD= Finance Directorate

Cabinet meeting - 25 April 2013

833b	Accessible Hillingdon - Supplementary Planning Document - POLICY FRAMEWORK	Cabinet will be asked to approve the planning document following consultation and recommend to Council for adoption. The document will update supplementary planning guidance to developers and planning applicants on accessible housing, access to public buildings and inclusive environments in light of the Hillingdon Local Plan (i.e. both Part 1 and the saved policies which now constitute Part 2) and the 2011 London Plan.	All	09-May-13	Cllr Keith Burrows	RS - Ali Kashmiri / Charmian Baker	Various stakeholders	New	
894 Page 25	Hillingdon's Health and Wellbeing Strategy 2012-2015	Following consultation approved by Cabinet in December 2012, this report will seek approval of a Health and Wellbeing Strategy, developed in partnership between the Council, Hillingdon's Clinical Commissioning Group and Voluntary Sector partners. The Health and Wellbeing Board has a duty to prepare such a strategy, which will also need to be approved by key partners.	Various		Cllr Ray Puddifoot and Cllr Philip Corthorne	CS / SC&H - Paul Feven / Linda Sanders	Partner organisations		
741b	Hillingdon Housing Strategy 2012 - 2015, Tenancy Strategy, Tenancy Policy and Allocation Policy - POLICY FRAMEWORK	Following a period of public and tenant consultation, Cabinet will consider a comprehensive set of draft policies in relation to Housing. The draft Housing Strategy will set out the direction of Hillingdon's approach to housing. The Tenancy Strategy will reflect local housing needs along with a Tenancy Policy which will set out how the Council intends to provide social housing. An Allocations Policy will set out the Council's own priorities for how social housing will be used to determine entitlement and eligibility.	All	09-May-13	Cllr Philip Corthorne	RS / FD - Paul Feven & Neil Stubbings	Public, tenants, a range of partner organisations, SCHH staff and other stakeholders. Social Services, Health and Housing POC		

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Council Departments: RS = Residents Services SC&H =Social Care & Health AD = Administration Directorate FD= Finance Directorate									
SI	Supported Housing Programme	This report will update Cabinet and request any necessary decisions in order to progress the Council's Supported Housing Programme and HRA Pipeline projects, in order to upgrade and build new homes for residents and vulnerable adults in the Borough.	Various		Cllr Jonathan Bianco	RS - Norman Benn	Corporate consultees		Private (3)

Ref **Decision** Further information

Ward(s)

Report to Full Council	Cabinet Member(s) Responsible	Officer Contact for further information	Consultation on the decision	NEW ITEM	Private decision?
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Cabinet meeting - 23 May 2013

897	Joint Adult Mental Health Commissioning Plan 2013 - 15	Following consultation approved by Cabinet in December 2012, this report will seek approval of the joint commissioning plan for all adults with mental health needs, including dementia.	All		Cllr Philip Corthorne & Cllr Scott Seaman-Digby	FD / SC&H - Paul Feven / Andrew Thiedeman	key stakeholders		
SI	Supported Housing Programme	This report will update Cabinet and request any necessary decisions in order to progress the Council's Supported Housing Programme and HRA Pipeline projects, in order to upgrade and build new homes for residents and vulnerable adults in the Borough.	Various		Cllr Jonathan Bianco	RS - Norman Benn	Corporate consultees		Private (3)

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Council Departments: RS = Residents Services SC&H =Social Care & Health AD = Administration Directorate FD= Finance Directorate

Cabinet meeting - 20 June 2013

SI	Supported Housing Programme	This report will update Cabinet and request any necessary decisions in order to progress the Council's Supported Housing Programme and HRA Pipeline projects, in order to upgrade and build new homes for residents and vulnerable adults in the Borough.	Various		Cllr Jonathan Bianco	RS - Norman Benn	Corporate consultees		Private (3)
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Ref **Decision** Further information

Ward(s)

Report to Full Council	Cabinet Member(s) Responsible	Officer Contact for further information	Consultation on the decision	NEW ITEM	Private decision?
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Cabinet Member Decisions - June 2013

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WORK PROGRAMME AND MEETING DATES IN 2012/13

Contact Officer: Charles Francis
Telephone: 01895 556454

REASON FOR ITEM

This report is to enable the Committee to review meeting dates and forward plans. This is a standard item at the end of the agenda.

OPTIONS AVAILABLE TO THE COMMITTEE

1. To confirm dates for meetings
2. To make suggestions for future working practices and/or reviews.

INFORMATION

All meetings to start at 7.00pm unless otherwise indicated.

Meetings	Room
19 June 2012	CR 5
31 July 2012	CR 5
11 September 2012	CR 5
9 October 2012	CR 5
7 November 2012	CR 6
11 December 2012	CR 5
30 January 2013 * - 6pm	CR 5
27 February 2013 *- 6pm	CR 5
27 March 2013	CR 5
24 April 2013	CR 6

PART 1 – MEMBERS, PUBLIC AND PRESS

Social Services, Health and Housing POC – 27 February 2013

Social Services, Health & Housing Policy Overview Committee

2012/13 DRAFT Work Programme

Meeting Date	Item
19 June 2012	Review Topics 2012/13
	Population Flows and the Impact on Housing Services in Hillingdon – Progress Report
	Cabinet Forward Plan
	Work Programme
31 July 2012	Major Reviews in 2012/13 - Scoping Report and Discussions
	Budget Planning Report for SSH&Hsg
	Cabinet Forward Plan
	Work Programme
11 September 2012	Major Reviews in 2012/13 – First Review Witness Session 1 / Background report
	Annual Complaints Report - SSCH&H – (moved to 7 November)
	Cabinet Forward Plan
	Work Programme
9 October 2012	Major Reviews in 2012/13 – First Review Witness Session 2
	Safeguarding Vulnerable Adults – Annual Report
	Cabinet Forward Plan
	Work Programme

PART 1 – MEMBERS, PUBLIC AND PRESS

Social Services, Health and Housing POC – 27 February 2013

7 November 2012	Major Reviews in 2012/13 – First Review Information report & Witness Session 3
	Major Reviews in 2012/13 – Second Review Scoping report (provisional) – deferred to December
	Update on previous review recommendations
	Annual Complaints Report - SSCH&H
	Cabinet Forward Plan
	Work Programme

11 December 2012	Major Reviews in 2012/13 – First Review Draft Framework Report / Draft Recommendations
	Major Reviews in 2012/13 – Second Review Scoping report
	Cabinet Forward Plan
	Work Programme

30 January 2013	Budget
	Major Reviews in 2012/13 – First Review Draft Report
	Cabinet Forward Plan
	Work Programme

27 February 2013	Cabinet Forward Plan
	Work Programme

27 March 2013	Review of consultation feedback on: <ul style="list-style-type: none"> • Tenancy Strategy
	Cabinet Forward Plan
	Work Programme

PART 1 – MEMBERS, PUBLIC AND PRESS

Social Services, Health and Housing POC – 27 February 2013

24 April 2013	Review of consultation feedback on: <ul style="list-style-type: none">• Tenancy Strategy
	Cabinet Forward Plan
	Work Programme