



Social Care, Housing and Public Health Policy Overview Committee

Councillors on the Committee

Jane Palmer (Chairman)
Duncan Flynn (Vice-Chairman)
Judith Cooper
Alan Deville
Ian Edwards
Tony Eginton
Janet Gardner
Becky Haggar
Paula Rodrigues

Date: THURSDAY 11 APRIL 2019

Time: 7.00 PM

Venue: COMMITTEE ROOM 4 -
CIVIC CENTRE, HIGH
STREET, UXBRIDGE

Meeting Details: Members of the Public and
Media are welcome to attend.

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Putting our residents first

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Terms of Reference

The Following Terms of Reference are common to all Policy Overview Committees (referred to as “The overview role”):

1. To 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. To monitor the performance of the Council services within their remit (including the management of finances and risk);
3. To comment on the proposed annual service and budget plans for the Council services within their remit before final approval by Cabinet and Council;
4. To 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. To review or scrutinise decisions made or actions taken by the Cabinet, a Cabinet Member, a Council Committee or an officer.
6. To make reports and recommendations to the Council, the Leader, the Cabinet, a Policy Overview Committee or any other Council Committee arising from the exercise of the preceding terms of reference.
7. In accordance with the Local Government and Public Involvement in Health Act 2007, to consider ‘Councillor Calls For Action’ (CCfA) submissions.

To perform the overview role outlined above in relation to the following matters:

1. Social care services for children, young persons and children with special needs
2. Oversee the Council’s Corporate Parenting responsibilities
3. Adoption and Fostering
4. Family Services
5. Adult Social Care
6. Older People’s Services
7. Care and support for people with physical disabilities, mental health problems and learning difficulties
8. Asylum Seekers
9. Local Authority Public Health services
10. Encouraging a fit and healthy lifestyle
11. Health Control Unit, Heathrow
12. Encouraging home ownership
13. Social and supported housing provision for local residents
14. Homelessness and housing needs
15. Home energy conservation
16. National Welfare and Benefits changes

Agenda

- 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 previous meeting 1 - 4
- 4 To confirm that the items of business marked as Part I will be considered in Public and that the items marked as Part II will be considered in Private
- 5 Carers Strategy - an update on work to support Carers in the Borough 5 - 44
- 6 Committee Review: Universal Credit and Other Welfare Benefit Changes 45 - 46
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Minutes

SOCIAL CARE, HOUSING AND PUBLIC HEALTH POLICY OVERVIEW

18 March 2019

Meeting held at Committee Room 4
Civic Centre, High Street, Uxbridge



HILLINGDON
LONDON

	<p>Committee Members Present: Councillors Jane Palmer (Chairman), Duncan Flynn (Vice-Chairman), Judith Cooper, Ian Edwards, Tony Eginton, Janet Gardner, Becky Hagggar and Paula Rodrigues</p> <p>LBH Officers Present: Debby Weller – Policy and Strategy Manager (Housing), Rod Smith – Service Manager – Tenancy Manager and Anisha Teji – Democratic Services Officer</p>
71.	<p>APOLOGIES FOR ABSENCE AND TO REPORT THE PRESENCE OF ANY SUBSTITUTE MEMBERS (<i>Agenda Item 1</i>)</p> <p>Apologies received from Cllr Alan Deville.</p>
72.	<p>DECLARATIONS OF INTEREST IN MATTERS COMING BEFORE THIS MEETING (<i>Agenda Item 2</i>)</p> <p>Cllr Cooper declared a non – pecuniary interest in agenda item 5 as she had a relative who was applying for Universal Credit. She remained for the discussion of the item.</p>
73.	<p>TO RECEIVE THE MINUTES OF THE PREVIOUS MEETING (<i>Agenda Item 3</i>)</p> <p>RESOLVED – That the minutes from the meeting on 7 February 2019 be confirmed as an accurate record.</p>
74.	<p>TO CONFIRM THAT THE ITEMS OF BUSINESS MARKED AS PART I WILL BE CONSIDERED IN PUBLIC AND THAT THE ITEMS MARKED AS PART II WILL BE CONSIDERED IN PRIVATE (<i>Agenda Item 4</i>)</p> <p>It was confirmed that there were no Part II items and that all business would therefore be conducted in public.</p>
75.	<p>COMMITTEE REVIEW - UNIVERSAL CREDIT AND OTHER WELFARE BENEFIT CHANGES (<i>Agenda Item 5</i>)</p> <p>The Committee discussed the major review and possible recommendations and conclusions for the draft report.</p> <p>In addition to financial risk to residents claiming Universal Credit (UC), it was noted that there was also a risk to the Council's finances in respect of residents being unable to pay rent and council tax.</p> <p>Areas for recommendations and conclusions noted included:</p> <ul style="list-style-type: none"> - The Council had taken steps to ensure that it was in the best position it could be in respect of UC and supporting its residents.

- Collaborative working between different agencies ensuring that people with vulnerabilities and mental health issues were not lost in the system. It was noted that there was already a lot of collaborative work ongoing and it was still early days for Hillingdon going live with UC.
- An update report be provided to the Committee in 6 – 12 months about the position of UC in Hillingdon, particularly detailing the claimant's experience. Real life examples to be provided.
- That there were steps taken for early intervention /identification of vulnerable claimants and relevant signposting in place.
- The Council considered ways to continue to support claimants to develop IT skills and look into identifying other partners who may be able to assist with this. It was noted that there is already support from the DWP and Uxbridge College.
- Members discussed whether possible triggers/alerts triggers could be placed on Council's housing and social care databases. For example, if a claimant only had £20 left in their account and it was the beginning of the month, whether alarms would be raised and whether officers would be able to work with the claimant and ascertain ways to support them to prevent issues from escalating. It was noted that in practice this may be difficult to implement as the Council has a number of different databases used for different reasons.
- Ongoing training for staff across the Council to raise awareness of UC.

RESOLVED:

- 1) That the Committee noted the information.
- 2) That the Chairman and Labour Lead work with Democratic Services to finalise the appropriate wording for the recommendations.
- 3) That Democratic Services commence drafting the final report for the review.

76. **ESTABLISHMENT OF A CORPORATE PARENTING PANEL** (*Agenda Item 6*)

The Committee had regard to the report on the Establishment of the Corporate Parenting Panel (CPP). The Chairman provided a summary of the key points in the report, mainly that the CPP would be embedded in the Council's governance arrangements and there would be a direct line in the Council's decision making process.

Members welcomed the progress report and the establishment of the CPP. Members considered that the process seemed streamlined and would be an effective way to move forward. Members had regard to the presentation it received in January 2019 from the Children in Care Council and how well the arrangement worked. Members were of the view that this would be a fantastic opportunity for children and young people to get involved and would provide a sense of empowerment.

During Member discussions, concerns were raised about the time it had taken to establish the CPP and whether quarterly meetings would be sufficient given that there were over 300 children in care/young people and 300 care leavers. It was noted that the previous Corporate Parenting Board met more often with a number of sub groups. Concerns were raised about not having substitute members listed, however the Chairman confirmed that consistency was necessary. Questions were also raised about whether Members took their role as Corporate Parents seriously. It was noted the CPP minutes would be provided to the Committee.

RESOLVED:

That the Committee:

	<ol style="list-style-type: none"> 1. Agreed the establishment of a Corporate Parenting Panel and its Terms of Reference and Operation. 2. Appointed Councillors Susan O'Brien, Nick Denys & Tony Eginton to be the voting Elected Members on the Panel on the basis of political balance (2 Con: 1 Lab). 3. Agreed that Councillor Susan O'Brien be the Chairman of the Corporate Parenting Panel with Councillor Nick Denys as the Vice-Chairman.
77.	CABINET FORWARD PLAN (<i>Agenda Item 7</i>) RESOLVED: That the Cabinet Forward Plan be noted.
78.	WORK PROGRAMME (<i>Agenda Item 8</i>) RESOLVED: That the Work Programme be noted.
	<p>The meeting, which commenced at 7.00 pm, closed at 7.54 pm.</p>

These are the minutes of the above meeting. For more information on any of the resolutions please contact Anisha Teji on 01895 277655. Circulation of these minutes is to Councillors, Officers, the Press and Members of the Public.

The public part of this meeting was filmed live on the Council's YouTube Channel to increase transparency in decision-making, however these minutes remain the official and definitive record of proceedings.

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Carers Strategy - an update on work to support Carers in the Borough

Committee name	Social Care, Housing and Public Health Policy Overview Committee
Officer reporting	Kate Kelly-Talbot, Adult Social Work
Papers with report	Appendix A - Carers Strategy 2018-21 Appendix B - Carers Strategy Delivery Plan 2019-20 DRAFT Appendix C- Carers Survey Survey Report 2018-2019
Ward	All

HEADLINES

The Carers Strategy 2018-21 (Appendix A) demonstrates what the Council, Hillingdon Clinical Commissioning Group (HCCG) and its partners are doing to support Carers in Hillingdon. It also supports the Health and Wellbeing Strategy priority of developing integrated, high quality social care and health services within the community or at home.

This report provides the Committee with an overview of the achievements and the contribution that the Council has made to the delivery of the strategy.

The key findings from the Carers Survey 2018/19 are also included (Appendix B).

The draft Delivery Plan 2019-20 (Appendix C) outlines the work plan for the coming year.

RECOMMENDATIONS

That the Committee:

- 1. Notes the work that the Council does to support those with caring responsibilities in the Borough.**
- 2. Notes the key findings of the Carers Survey 2018-19.**
- 3. Comments on the Carers Strategy delivery plan activity for 2019-20.**

SUPPORTING INFORMATION

1) Background

According to Census 2011 there are over 25,000 Carers in Hillingdon who provide unpaid support. Their contribution to the health and wellbeing of those they care for is significant.

Carers say that supporting someone to live an independent life at home, in the community they know, can be very rewarding. However the cost to Carers themselves can be considerable in terms of their own health, financial situation, employment position and independence.

We want to enable our residents to recognise and identify their role as a Carer, so they know

where to access the right support.

The Carers Strategy 2015-18 sets out the Council and HCCG's joint vision and strategic aims for Carers of people within the London Borough of Hillingdon. The strategy builds on the Carers Commissioning Plan 2011-15 (published in 2011) and replaces the Young Carers Strategy 2007-12.

The Strategy also outlines a delivery plan for activity that the Council, HCCG and its partners will deliver over the course of the Strategy. This delivery plan is updated and monitored by the Carers Strategy Group, with annual updates presented to the Council's Cabinet and HCCG's Governing Body.

A full consultation programme was completed to establish what unpaid Carers in Hillingdon want and need to be healthy, happy and supported in their caring role, which informed the priorities and activities in the Delivery Plan.

The Strategy 2018-21 was updated to reflect the principles of the national integrated approach to identifying and assessing Carer health and wellbeing. The work programme for the next three years is based upon these principles. The updated Strategy was approved at Council Cabinet in May 2018.

2) Carers Survey 2018-19

The Carers Survey is a national survey commissioned by the Care Quality Commission and the Department of Health. All authorities in England with Social Care responsibility have been asked to complete the survey.

The survey has been developed to learn more about whether services received by Carers are helping in their caring role and their life outside of caring, also to understand Carers' perception of services provided to people they are caring for.

In late 2018, a 30 question survey was sent to 614 carers who had received a carers' assessment or review from Hillingdon's Adult Social Care or Hillingdon Carers.

36% returned a completed survey which means the survey is statistically valid and accurately reflects the views of Carers in Hillingdon.

Key survey facts

- 82% of carers live with the person they care for
- 51% of carers spend over 100 hours a week caring
- 35% of carers have been performing caring duties for over 20 years
- 49% of carers are aged over 65
- 8% of people looked after by carers are aged over 85
- Top 3 caring activities
 - Other practical help
 - Keeping an eye on him/her to see if he/she is all right
 - Helping with dealing with care services and benefits
- Top 3 support and care services used

- Equipment / Adaptations
- Home care / Home help
- Lifeline Alarm

Key survey results

74% of carers are satisfied with the support and care services they receive for themselves and the person they care for. There has been a slight increase in those who said they are extremely satisfied and a large increase in those who said they are quite satisfied, when compared to last year's results.

The caring role

Compared to 2017 there was an increase of:

- 5.3% from 29% to 35.3% of those who have been caring for 20 years or more.
- 12.7% from 38.7% to 51.4% of those who care for 100 or more hours a week.

There has been a decrease in the age of people being cared for with the largest age group being 75-84 year olds at 25.2%.

For cared for persons aged 75+, this has decreased from 66.7% in 2014-15 to 49.5% in 2018-19.

Impact of caring and quality of life

There has been a slight increase in the percentage of Carers who said they have some control over their lives and a decrease in those who said they had no control when compared to last year.

18% of Carers said they are able to spend their time as they would want doing activities they valued and enjoyed, whereas 18.9% said that they do not feel able to do anything they value or enjoy.

49.1% of Carers feel that they are able to look after themselves and 73.9% said that they had no concerns about their personal safety.

2.7% of Carers are extremely concerned about their personal safety (up from 0.7% in 2016-17).

39.2% of Carers feel they are encouraged and supported in their caring role, an increase from 35% in 2017.

3) Achievements

The following achievements provide the Committee with an overview of the contribution that the Council has made to the delivery of the Carers Strategy.

Carer Engagement

A key piece of work over the past four years has been to improve engagement with Carers. The purpose of this engagement is twofold; to gain views from Carers on what is important to them and help shape the direction of the work of the Strategy Group and secondly, to provide Carers

with information and updates on services available for them to access.

Work started with four local carer forums delivered across Hillingdon in Hayes and Harlington, Northwood and Ruislip, Heathrow Villages/West Drayton and Uxbridge. These were attended by 110 carers overall.

The forums focussed on presenting information to Carers about the new Carers Support Service and the integration of Health and Social Care services.

Discussions were also held to gather feedback from Carers about respite; crisis intervention and prevention; care planning; Hospital discharge; and support for those new to the caring role.

Two borough wide forums continue to run bi-annually to ensure that Carers are kept abreast of the work that the Council and its partners are doing to support them. It also provides an opportunity for Carers to ask questions about specific issues they may have.

As a result of this ongoing work, Carer engagement has improved dramatically and Carers say that they feel included and more informed.

Carers Assessments

Over 500 Carers Assessments per year have been completed by the Council over the past three years.

There had been some previous dissatisfaction expressed by Carers in their experience of the assessment process. The Council led a focus group in 2016 to gain feedback on the process and understand what impact having an assessment had on Carers and their role. As a result of this focus group, training was put in place with the aim of improving the 'soft skills' around conducting assessments and assessors' understanding of the process.

The training has improved satisfaction, in part by managing Carer's expectations of the process and by improving their understanding of what the Council can and can't deliver. There has also been a significant reduction in the number of complaints by Carers with regards the assessment process. Work continues to develop the process.

Carers Recognition Events

Run by the Council, these events recognised and showcased the commitment and dedication of Carers of all ages in the Borough.

Nominations were received by the cared for person themselves but also by friends, neighbours and other family members who recognise the hard work that Carers put in to care for their loved ones.

Attended by the Leader of the Council, the Cabinet Members for Social Services, Housing, Health and Wellbeing and Education and Children's Services, the Mayor of Hillingdon and the Carers Champion, those who received a nomination were presented with a certificate and small token to thank them for their hard work.

Work continues to support schools in recognising young people with caring responsibilities and

how they can best be supported in their role.

3) Delivery Plan 2019-20 draft

Appendix C provides the Committee with a draft Delivery Plan for 2019-20.

This plan outlines what we aim to achieve over and above what is contained within the 'Carers in Hillingdon' contract with the Hillingdon Carers' Partnership led by Hillingdon Carers, that started in September 2016. There is a focus on what Carers have told us is important to them.

Council activity includes producing a guide for local businesses on how to support Carers in the workplace and designing and delivering short training sessions for frontline staff to help them recognise residents who have a caring role and know where to signpost them to.

Implications on related Council policies

A role of the Policy Overview Committees is to make recommendations on service changes and improvements to the Cabinet who are responsible for the Council's policy and direction.

The work outlined in this report supports the Carers Strategy 2018-21 as approved by Cabinet in May 2018.

How this report benefits Hillingdon residents

The work outlined in this report supports those with caring responsibilities who live in the borough. The work plan for 2019-20 will continue the good work that has been carried out to date.

Financial Implications

There are no direct financial implications as part of this report as it is for noting only.

Legal Implications

Implementation of the Carers' Strategy helps the Council to meet its duty under section 4 of the Care Act 2014 to provide information and support to Carers and their families.

BACKGROUND PAPERS

Carers Strategy 2018-21

Carers Survey-Survey Report 2018-19

Carers Strategy Delivery Plan 2019-20 draft

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"Supporting Carers in Hillingdon"

Strategy 2018 - 2021



Contents

- 1. Foreword**
- 2. Executive summary**
- 3. Vision & strategic framework**
- 4. Carers - definition and key facts**
- 5. Services for carers in Hillingdon**
- 6. Consultation and engagement**

Appendix A Carers Strategy Delivery Plan 2018-21

1. Foreword

This Carers Strategy 2018-21 takes forward the excellent work that has been delivered for Carers in Hillingdon over the last three years. Key successes have included:

Improved engagement with Carers including introducing local Carer Forums and more regular feedback mechanisms.

A Carers Recognition Scheme where Carers are acknowledged for their commitment and support.

Closer working between Adult Social Care and Hillingdon Carers Partnership by joint training and improved Carer assessment processes.

The ***contract for Carers Support Services*** was also awarded to the Hillingdon Carers Partnership in September 2016 and has delivered excellent work so far, including securing over £400k of additional funding to end March 2018.

The strategy reflects the intentions of the Health and Wellbeing Strategy, which acknowledges the vital role of all Carers and the support they provide.

Many Carers don't see themselves as Carers. It takes Carers an average of two years to acknowledge their role as a Carer¹. It can be difficult for Carers to see their caring role as separate from the relationship they have with the person for whom they care, whether that relationship is as a parent, a son or daughter, or a friend.

It's likely that every one of us will have caring responsibilities at some time in our lives with the challenges faced by Carers taking many forms. Many Carers juggle their caring responsibilities with work, study and other family commitments. Some, in particular younger Carers, are not known to be Carers. They don't tell relatives, friends or health and care professionals about their responsibilities because of fear of separation, guilt, pride or other reasons.

This means that the sort of roles and responsibilities that Carers have to provide varies hugely. They can range from help with everyday tasks such as getting out of bed and personal care such as bathing, to emotional support such as helping someone cope with the symptoms of a mental illness.

We want to enable our residents to recognise and identify their role as a Carer so they know where to access the right support.

This Strategy supports the principles of the national integrated approach to identifying and assessing Carer health and wellbeing and our work programme for the next three years is based upon them:

Principle 1 – We will support the identification, recognition and registration of Carers in primary care.

Principle 2 - Carers will have their support needs assessed and will receive an integrated package of support in order to maintain and/or improve their physical and mental health.

Principle 3 - Carers will be empowered to make choices about their caring role and access appropriate services and support for them and the person they look after.

Principle 4 – The staff of partners to this agreement will be aware of the needs of Carers and of their value to our communities.

Principle 5 - Carers will be supported by information sharing between health, social care, Carer support organisations and other partners to this agreement.

Principle 6 - Carers will be respected and listened to as expert care partners, and will be actively involved in care planning, shared decision- making and reviewing services.

Principle 7 - The support needs of Carers who are more vulnerable or at key transition points will be identified early.

We extend our thanks and admiration to all our Carers, those who are known to us and those that aren't. We are confident that through this Carers Strategy we will continue to bring improvements to the health and wellbeing of all Carers living and caring in the London Borough of Hillingdon.



Cllr Philip Corthorne
Cabinet Member
Social Services, Health
and Housing



Cllr Becky Haggart
Carers Champion 2015-18



Dr Ian Goodman
Chair Hillingdon CCG

2. Executive summary

According to Census 2011 there are over 25,000 Carers in Hillingdon who provide unpaid support. Their contribution to the health and wellbeing of those they care for is significant. Carers say that supporting someone to live an independent life at home, in the community they know, can be very rewarding. However the cost to carers themselves can be considerable in terms of their own health, financial situation, employment position and independence.

This Carers Strategy sets out the Council and HCCG's joint vision for Carers of people within the London Borough of Hillingdon and supports the principles of the national integrated approach to identifying and assessing Carer health and wellbeing as outlined in the Foreword.

A programme of work is in place to deliver against these principles which has been devised by partners across the health and care system and consulted on with Carers.

The delivery of this work will be monitored by the Carers Strategy Group with regular updates to the Health and Wellbeing Board and an annual report to Council Cabinet and the Hillingdon Clinical Commissioning Group (CCG) Governing Body.

The work programme is intentionally high level, focussing on what we can achieve with our partners, making the best use of limited resources.

We will have a particular focus on:

- How we can better support our Young Carers;
- How we can improve our Carers' experience of Primary Care; and
- How we work to raise awareness of the caring role in the workplace

3. Vision and Strategic Framework

Vision

The Carers Strategy 2018-21 supports the work of Hillingdon's Joint Health and Wellbeing Strategy that unifies and aligns local health partners to delivering the national, regional and local health agenda.

Our vision for Carers is that the 7 principles to identifying and assessing Carer health and wellbeing are embedded across Hillingdon's Health and Care System, to deliver a consistent approach to supporting Carers in the borough in order to:

- Maintain the independence and physical and mental health of Carers and their families.
- Empower and support Carers to manage their caring roles and have a life outside of caring.
- Ensure that Carers receive the right support, at the right time, in the right place.
- Respect Carers' decisions about how much care they will provide and respect Carers' decisions about not providing care at all.

Strategic Framework

In 2015, the NHS Five Year Forward View articulated a major shift in policy towards place based systems of care through Sustainability and Transformation Partnerships. The approach envisions health and care organisations taking joint responsibility for the health of an entire population, within a particular geographic area. The new approach requires organisations to be more strategic and to work to local systems of care.

Hillingdon is a member of the North West London (NWL) Sustainability and Transformation Partnership and commits to the shared aims of improving health and wellbeing, the quality of treatment and care and the sustainability of our health and care system. This Carers Strategy supports Delivery Area 2 of Hillingdon's local Sustainability and Transformation Plan.

The Better Care Fund (BCF) was launched in 2015 and aims to transform local health and social care services so that they work together to provide better joined up care and support through CCG's and local authorities agreeing joint plans and

agreeing to pool elements of their budgets. This Carer Strategy supports the BCF Workstream 2, 'An integrated approach to supporting Carers'.

Hillingdon's Health and Wellbeing Board have noted the development of a Carers' Memorandum of Understanding based on the seven principles that form the basis on which this strategy is framed.

4. Carers - definitions and key facts

A Carer is anyone who cares, unpaid, for a friend or family member who due to illness, disability, a mental health issue or an addiction cannot cope without their support.

Young Carers are children and young people between the ages of 5 and 18 who provide or intend to provide care, assistance or support to another family member who is disabled, physically or mentally ill, or has a substance misuse problem. They carry out, often on a regular basis, significant or substantial caring tasks, taking on a level of responsibility that is inappropriate to their age or development (Social Care Institute for Excellence (2005)).

Anyone can become a Carer; Carers come from all walks of life, all cultures and can be of any age. Many feel they are doing what anyone else would in the same situation; looking after their mother, son, or best friend and just getting on with it.

Carers Trust

Hillingdon - Carers are people who provide care and support to vulnerable relatives or friends for no financial payment and should not be confused with care workers, who are paid for the work they do.

Census 2011

The 2011 census shows that there were at least 25,702 Carers in Hillingdon; in fact, this figure was, and is probably much higher when taking into consideration the fact that some people who are providing care to their partner or other relatives do not identify themselves as Carers. These 'hidden Carers' may not be accessing the support and advice that is available to them.

The table below provides a breakdown of the age of Carers as identified by the 2011 census.

Age Breakdown of Carers in Hillingdon	
Carer Age Group	Number
0 - 24	2,450
25 - 64	18,609
65 +	4,643
TOTAL	25,702

The census showed that 11,158 (43%) Carers were male and of these 2,264 (20.3%) were aged 65 and over. This compares to 14,544 (57%) Carers who were female, 2,379 (16.4%) of which were aged 65 and over.

Projections and Older Carers

Projections from the Projecting Older People Population Information System (POPPI) suggest that the number of Carers over 65 is likely to increase by 19% to 5,703 by 2020 from the 2011 position. The census also showed that approximately 10% of Carers were aged under 25, which emphasises the continuing importance of supporting Carers of all ages.

The census also showed that 36% of the Carers aged 65 and above were providing 50 hours a week or more unpaid care and of those 17% identified themselves as having bad or very bad health.

Carers known to us

At the end of 2016/17 there were 5,769 active Adult Carers registered with the Hillingdon Carers' Partnership, which represents nearly 23% of total Carer population in Hillingdon based on 2011 Census data. During 2016-17 there were 750 new adult referrals. At the end of 2016/17 there were also 690 Young Carers, e.g. Carers aged under 18, registered with the Partnership and of these 254 were new referrals during 2016-17.

Carers for those with a learning disability

According to estimates within the Institute of Public Care's 2009 *Estimating the prevalence of severe learning disability in adults - working paper 1*, there should currently be approximately 400 people living with parents and this should rise to approximately 440 in 2020. Of the 220 people with learning disabilities currently being supported by the Council who live with parents or other relatives who are identified as their main Carers, 77 of these Carers are aged 65 and over and of these 11 are aged 75 and over. This illustrates both the importance of supporting older Carers and the need to plan for a time when they will be unable to continue their caring role because of the effects of old age.

Carers Assessments

During 2016/17 517 Carers' assessments were undertaken and 309 Carers were offered respite or another Carers' service by the Council. This figure does not include those who received a service from the voluntary sector.

Carers Survey 2016-17

The *Carer reported quality of life measure* from the Adult Social Care Outcomes Framework was 7.4 out of 12 for Hillingdon compared to 7.4 for London.

41.7% Carers stated that they were extremely or very satisfied with social services compared to 34.4% for the rest of London.

Carers said:

- I have some control over my daily life but not enough
 - 58.4% in Hillingdon compared to 59.3% in London
- I have as much control over my daily life as I want
 - 21.0% in Hillingdon compared to 23.6% in London
- I always felt involved or consulted in discussions about the support or services provided to the person I care for
 - 28.9% in Hillingdon compared to 24.6% in London
- I usually felt involved or consulted in discussions about the support or services provided to the person I care for
 - 25.6% in Hillingdon compared to 20.5% in London

43.0% found it very easy or fairly easy to find information and advice about support, services or benefits compared to 39.5% for the rest of London

National (from Carers UK)

1 in 8 adults (around 6.5 million people) are carers

- By 2037, it's anticipated that the number of carers will increase to 9 million.
- Every day another 6,000 people take on a caring responsibility – that equals over 2 million people each year.
- 58% of carers are women and 42% are men.
- Over 1 million people care for more than one person.

Carers save the economy £132 billion per year, an average of £19,336 per carer

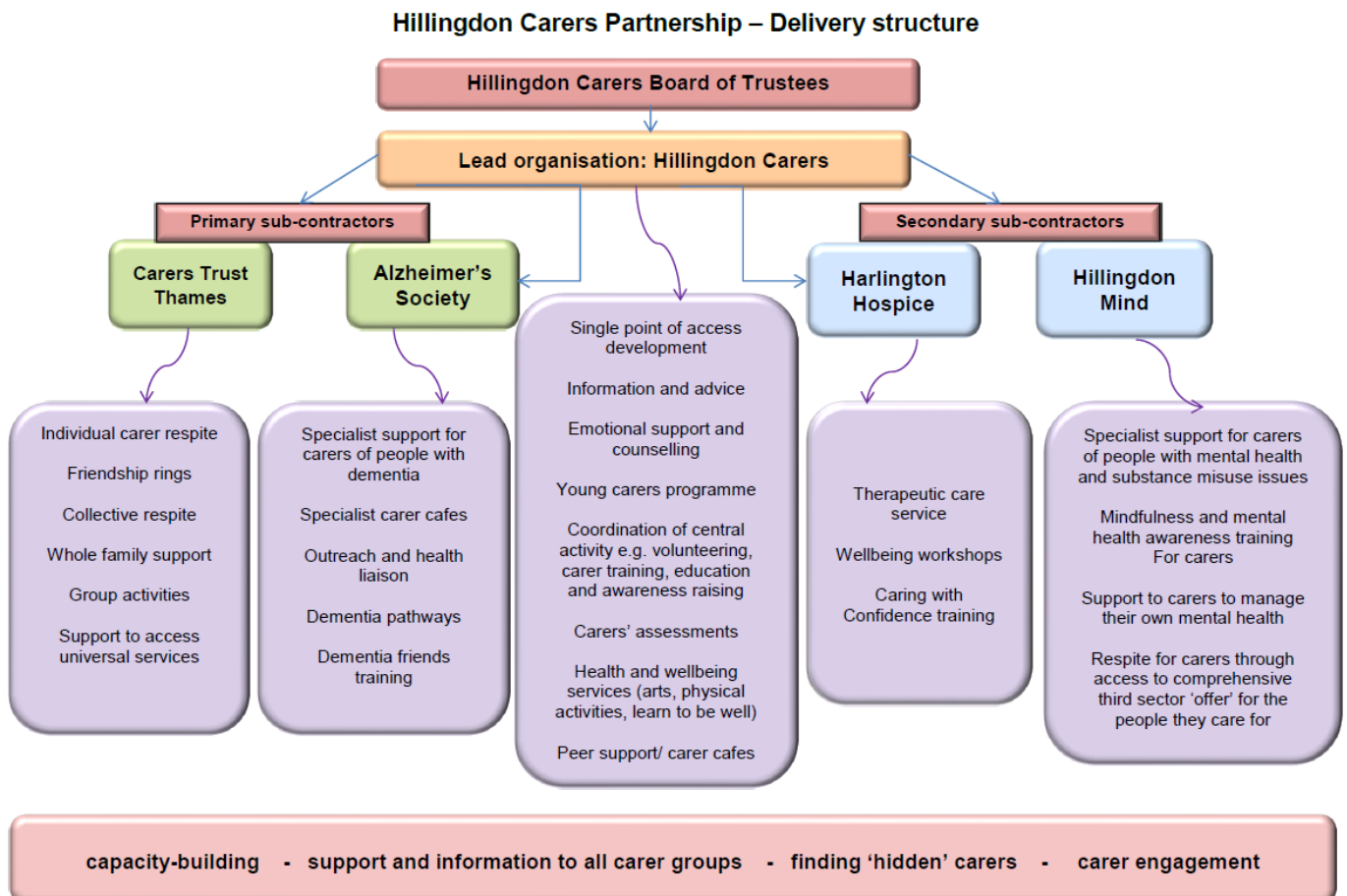
- Over 3 million people juggle care with work, however the significant demands of caring mean that 1 in 5 carers are forced to give up work altogether.
- Carer's Allowance is the main carer's benefit and is £62.10 for a minimum of 35 hours, equivalent to £1.77 per hour – far short of the national minimum wage of £6.70 per hour.

People providing high levels of care are twice as likely to be permanently sick or disabled

- 625,000 people suffer mental and physical ill health as a direct consequence of the stress and physical demands of caring.
- Over 1.3 million people provide over 50 hours of care per week.

5. Services for Carers in Hillingdon

The diagram below shows the variety and breadth of services provided for Carers in Hillingdon by the Hillingdon Carers Partnership.



6. Consultation and Engagement

Consultation and engagement with service users is a key driver in Hillingdon Council for continuous improvement; ensuring services meet service users' needs, wishes and aspirations. To achieve this we will maintain a Carer Engagement Framework that seeks to encourage and empower carers to participate and be involved in the development and improvement of the services that support them in their caring role.

Given the nature of the caring role, we understand that many carers will find it challenging to commit time to participate in meetings and forums. To ensure a wide and diverse range of carers are able to be involved, the Carer Engagement Framework will provide a menu of engagement opportunities that include but are not limited to:

- **The Carers' Forum:**

The purpose of the Carers' Forum is to seek understanding and raise awareness of the needs of unpaid carers across Hillingdon. The forum will be open to all unpaid carers in Hillingdon to provide a regular opportunity for consultation and discussion about emerging issues relevant to all carers. Feedback from the forum will inform the carers strategy and emergent service-delivery, at the same time providing carers with up to date information to assist them in their caring role.

There is commitment from the council to deliver the forum twice a year in partnership with carers, the Hillingdon Carers Partnership and other relevant agencies.

- **The Carer Advisory Group (previously the Carers' Forum Steering Group):**

The advisory group will consist of carers who will work with Hillingdon council, Clinical Commissioning Group, Hillingdon Carers Partnership and other appropriate agencies. The group will support the delivery of the Carers' Forum and the Carers' Strategy by ensuring the voice of carers is integral to service planning and delivery.

Representation will be sought from unpaid carers in Hillingdon who cover a diverse range of caring situations. This will include representation from the following caring groups:

- Parkinson's
- Stroke/brain injuries
- Learning Disabilities
- Physical Disabilities
- Mental health
- Dementia
- Parent Carers - children and adults

(This is not an exhaustive list)

- **Surveys**

There is a statutory duty on local authorities to capture the views of adult carers via the National Carers Survey which is conducted every two years. The Personal Social Services Survey of Adult Carers in England (SACE) asks questions about quality of life and the impact that the services they receive have on their quality of life. It also collects information about self-reported general health and well-being.

We may conduct additional non-statutory surveys to capture views about services as appropriate.

- **Focus groups**

It may be appropriate at times to invite small groups of carers to meet with us to help us review a specific service or issue. For example, satisfaction with carers assessments.

- **Online platforms:**

Not everyone will have the capacity or the desire to take part in meetings and events. For this reason making best use of online platforms will enable a wider range of carers views to be captured in a way that is convenient to them. Using the website and social media platforms is an effective way of conducting surveys and capturing general views particularly from young carers and young families.

Engagement activities will be continuously reviewed to ensure they are effective and meet the needs of carers.

ⁱ NHS Choices. (2014) *Understanding Carers (online)*

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Appendix B

Carers Strategy Delivery Plan 2019-20

Principle 1: We will support the identification, recognition and registration of Carers in primary care

Activity:	Lead organisation:	Progress update:
1.1 Support schools and colleges in identifying and recognising the caring role of Young Carers.	LB Hillingdon	
1.2 For all GP practice's to identify a 'Carers Lead' and implement jointly agreed GP Primary Care initiatives with regard to Carers.	Hillingdon CCG	

Principle 2: Carers will have their support needs assessed and will receive an integrated package of support in order to maintain and/or improve their physical and mental health

Activity:	Lead organisation:	Progress update:
2.1 Further develop Carers Assessment Tools including online training, to make the process simple and easy for both Carers and the assessors.	LB Hillingdon	
2.2 Develop a mechanism for reflecting the needs of Young Carers within existing assessment processes in Primary Care, Social Care and across all partners so that Young Carers are better supported in their role.	LB Hillingdon	

Principle 3: Carers will be empowered to make choices about their caring role and access appropriate services and support for them and the person they look after

Activity:	Lead organisation:	Progress update:
3.1 Design and deliver a Young Carer's Buddy Scheme	P3	
3.2 Review and develop 'first point of contact' arrangements for Carers in an emergency situation, outside of normal working hours including for urgent Mental Health issues.	LB Hillingdon	

Principle 4: Staff will be aware of the needs of Carers and of their value to our communities

Activity:	Lead organisation:	Progress update:
4.1 Produce a 'Good practice guide for supporting Carers in the workplace' and share with local businesses.	LB Hillingdon	
4.2 Design short training sessions for frontline Council staff so they have the language and signposting skills to provide support to Carers.	LB Hillingdon	

Principle 5: Carers will be supported by information sharing between Health, Social Care, Carer support organisations and other partners

Activity:	Lead organisation:	Progress update:
5.1 Ensure Carer identification markers are included in the development of information sharing platforms and other means of information sharing in line with the General Data Protection Regulations 2018.	Hillingdon GP Confederation	
5.2 Actively seek resources for the development of a Young Carers App	Hillingdon Carers Partnership	

Principle 6: Carers will be respected and listened to as expert care partners and will be actively involved in care planning, shared decision-making and reviewing services

Activity:	Lead organisation:	Progress update:
6.1 Coordinate Carer engagement activity via regular Carer Forums.	LB Hillingdon	
6.2 Continue to develop Carer involvement and support in collaboration with relevant partners.	CNWL	

Principle 7: The support needs of Carers who are more vulnerable or at key transition points will be identified early

<i>Activity:</i>	<i>Lead organisation:</i>	<i>Progress update:</i>
7.2 Review information and services for 'double Carers' of all ages.	LB Hillingdon	

Carers Survey

Survey Report 2018/19

Why did we complete this survey?

The Carers Survey is a national survey commissioned by the Care Quality Commission and the Department of Health. All authorities in England with Social Care responsibility have been asked to complete the survey.

The survey has been developed to learn more about whether services received by carers are helping in their caring role and their life outside of caring, also to understand carers' perception of services provided to people they are caring for.

Who was involved in the survey?

The survey involved informal / family carers providing substantial caring roles.

In late 2018 we sent a 30 question survey to 614 carers who had received a carers' assessment or review from Hillingdon's Adult Social Care or Hillingdon Carers.

Answers from the questionnaire were treated in strict confidence. No-one was identified unless it was indicated on the form that an individual was being hurt or harmed or their safety or health were at risk (this was in accordance with action we told people we would take). Anyone who did has been contacted by council staff to investigate the response further where appropriate.

What will we do with the results of the survey?

Nationally the survey aims to collect information about carers' experiences of adult social care services and will help monitor the effectiveness of the Department of Health's National Carers Strategy.

Locally the results help us to identify areas where the care and support services we provide can be improved. It also allows us to identify the areas where we are performing well. We will also use this information to understand how we target our resources so that we can continue to provide support that is of value to carers.

As well as letting the council know how people accessing our services feel about the support they receive, surveys of this kind help us to understand what is important. Many of the questions we asked were not simply about services but about the situation in which services are provided. For example the physical and mental impact of caring. These questions help us to identify the things that are important to people when we are looking at developing services.

Another Carers' Survey will be conducted in 2020/21 and we will use those results to track our progress in delivering services that really make a difference.

Key survey facts?

- 82% of carers live with the person they care for
- 51% of carers spend over 100 hours a week caring
- 35% of carers have been performing caring duties for over 20 years
- 49% of carers are aged over 65
- 24% of people are aged over 85 who are looked after by carers *
- * Please note that this has been amended as was incorrectly reported as 8%, apologies for this
- Top 3 caring activities
 1. Other practical help
 2. Keeping an eye on him/her to see if he/she is all right
 3. Helping with dealing with care services and benefits
- Top 3 support and care services used
 1. Equipment / Adaptations
 2. Home care / Home help
 3. Lifeline Alarm

Carers told us?

- 74% of carers are satisfied with the support and care services they receive for themselves and the person they care for
- 20% of carers feel that they have control over their daily life, 62% feel they have some control but not enough and 15% feel they have no control over their daily life
- 18% of carers are able to spend as much time as they want doing things they value and enjoy, 60% are only able to manage some and 19% do not spend any time doing activities they value and enjoy
- 49% of carers feel they have enough time to spend on their own personal care, 28% said they do not always have enough time to look after themselves and 20% feel they are neglecting themselves
- 74% of carers have no concerns about their own personal safety, 23% have some worries and 3% are extremely worried about their safety.
- Anyone who told us on the form that they were being hurt or harmed or their safety of health was at risk has been conducted by council staff to investigate the response further.
- 27% of carers feel they have as much social contact as they want; whilst 50% feel they do not have enough and 20% do not have enough and feel socially isolated.
- 39% of carers feel they have good levels of encouragement and support, 42% feel they do not have enough and a further 16% do not receive any support.

Main comparisons to previous surveys

	<u>9/10</u>	<u>12/13</u>	<u>14/15</u>	<u>16/17</u>	<u>18/19</u>
Survey sent to	1108	629	652	1024	614
Received and NOT blank	441	252	270	305	222
Received and NOT blank	40%	40%	41%	30%	36%
Percentage of carers who live with the person they care for	83%	80%	72%	74%	82%
Percentage of carers who spend over 100 hours a week caring	4%	48%	37%	39%	51%
Percentage of carers who have been performing caring duties for over 20 years	23%	14%	12%	30%	35%
Percentage of carers who are aged over 65	47%	48%	60%	51%	49%
Percentage of people who are aged over 85 who are looked after by carers *	18%	32%	31%	30%	24%
Percentage of carers '.... extremely worried about my personal safety'	1.8%	2.8%	1.9%	0.7%	2.7%

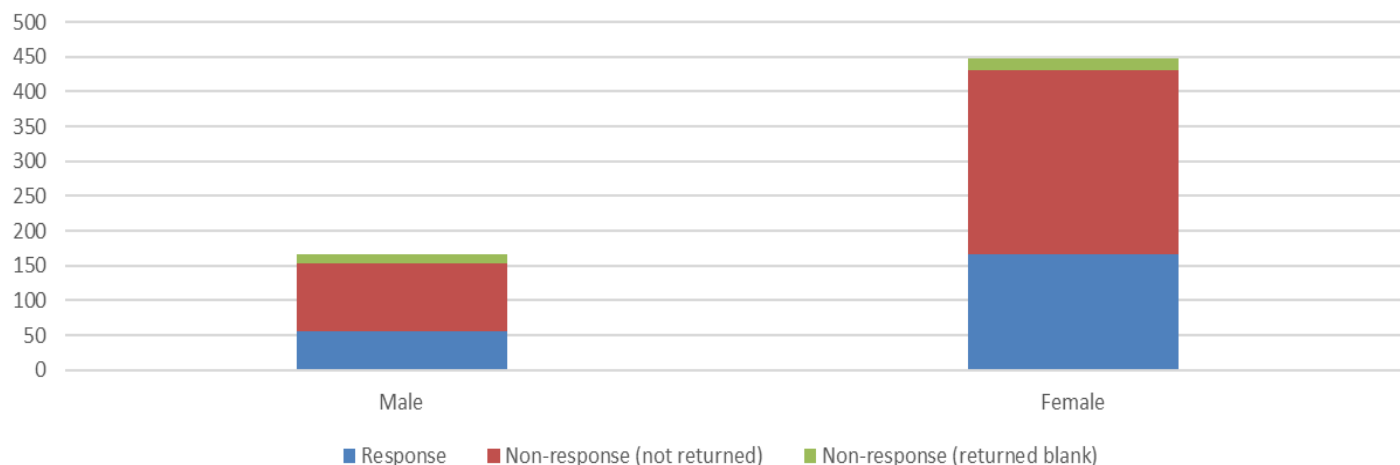
* Please note that this measure's description and data has been amended as was incorrectly reported

Breakdown of questionnaire responses

Hillingdon sent 614 questionnaires in the post to informal/family carers who have received a carers' assessment or review. 222 (36%) were completed by respondents. The response means the survey is statistically valid and accurately reflects the views of carers.

The graph and table below show the breakdown of questionnaires and responses by gender and age group.

Breakdown of response by gender (18/19)



Breakdown of responses by age band (18/19)

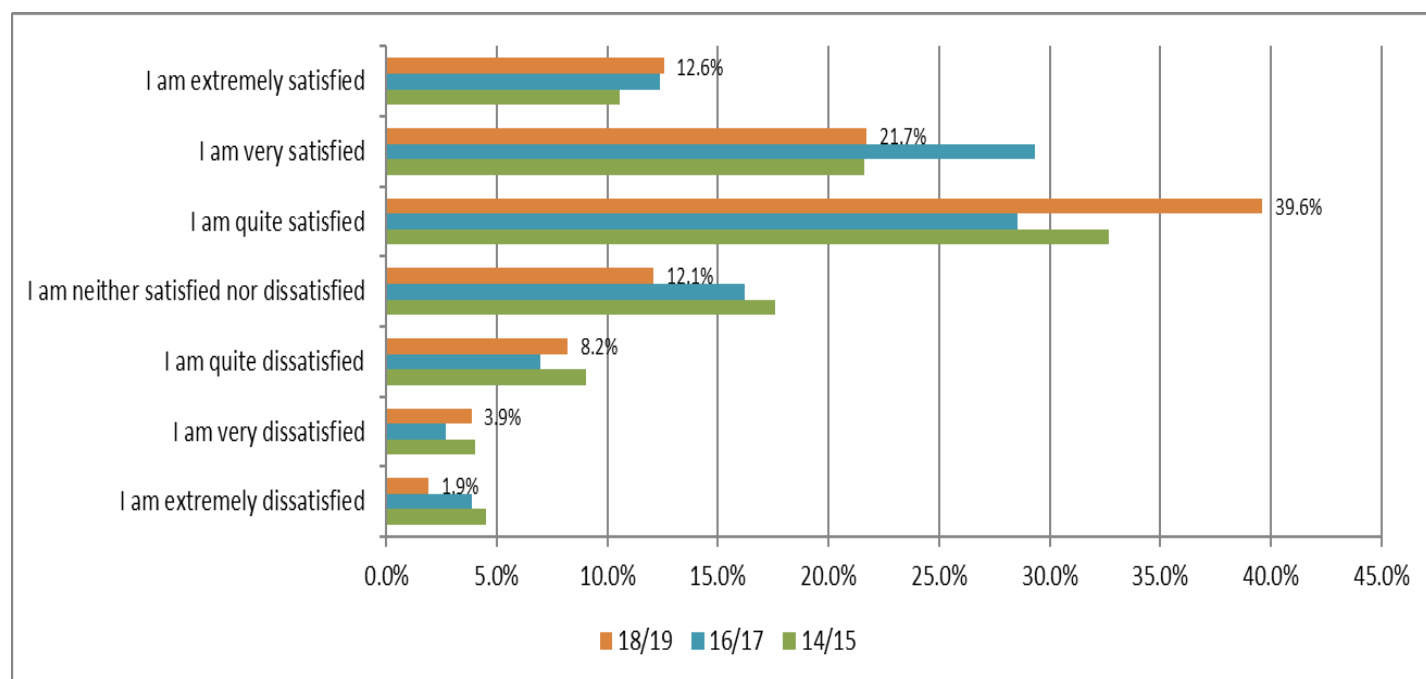
Age Group	Response	Non-response (not returned)	Non-response (returned blank)	Total
18-24	0	4	0	4
25-34	3	11	0	14
35-44	10	34	0	44
45-54	37	99	3	139
55-64	64	97	8	169
65-74	50	44	5	99
75-84	41	49	9	99
85 and over	17	24	5	46
Unknown	0	0	0	0
Total	222	362	30	614

What did people tell us?

The following pages help to breakdown the key questions from all 222 respondents (where the question has been answered). The responses form a picture of how informal and family carers in Hillingdon think and feel about the services they and the person they care for receive.

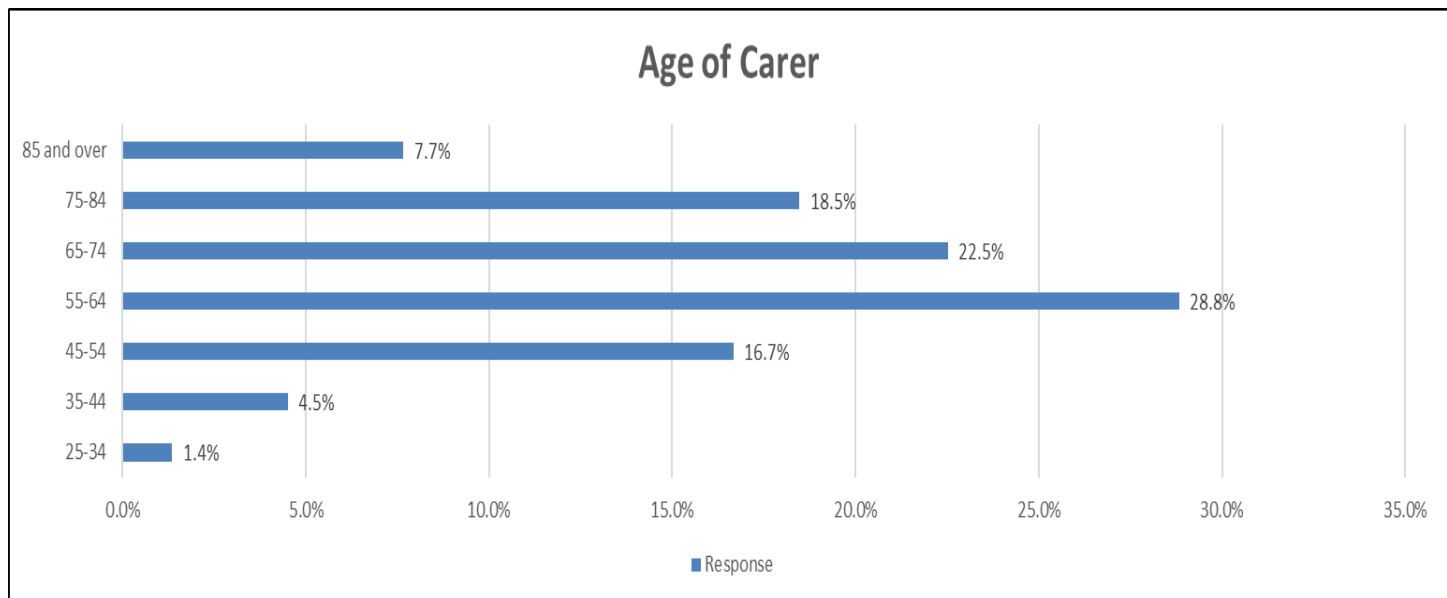
Satisfaction

It is important that Hillingdon provides a high standard of service to the people we support. We asked respondents of this survey, informal and family carers to tell us how satisfied they were with the care and support services they received in the past 12 months.



In 18/19, the survey found in general, carers in Hillingdon are satisfied with the services they receive (73.9%). 34.3% told us they were extremely satisfied or very satisfied, 39.6% said they were quite satisfied, 12.1% said they were neither satisfied or dissatisfied, 8.2% felt quite dissatisfied and the remaining 5.8% said they were either very or extremely dissatisfied.

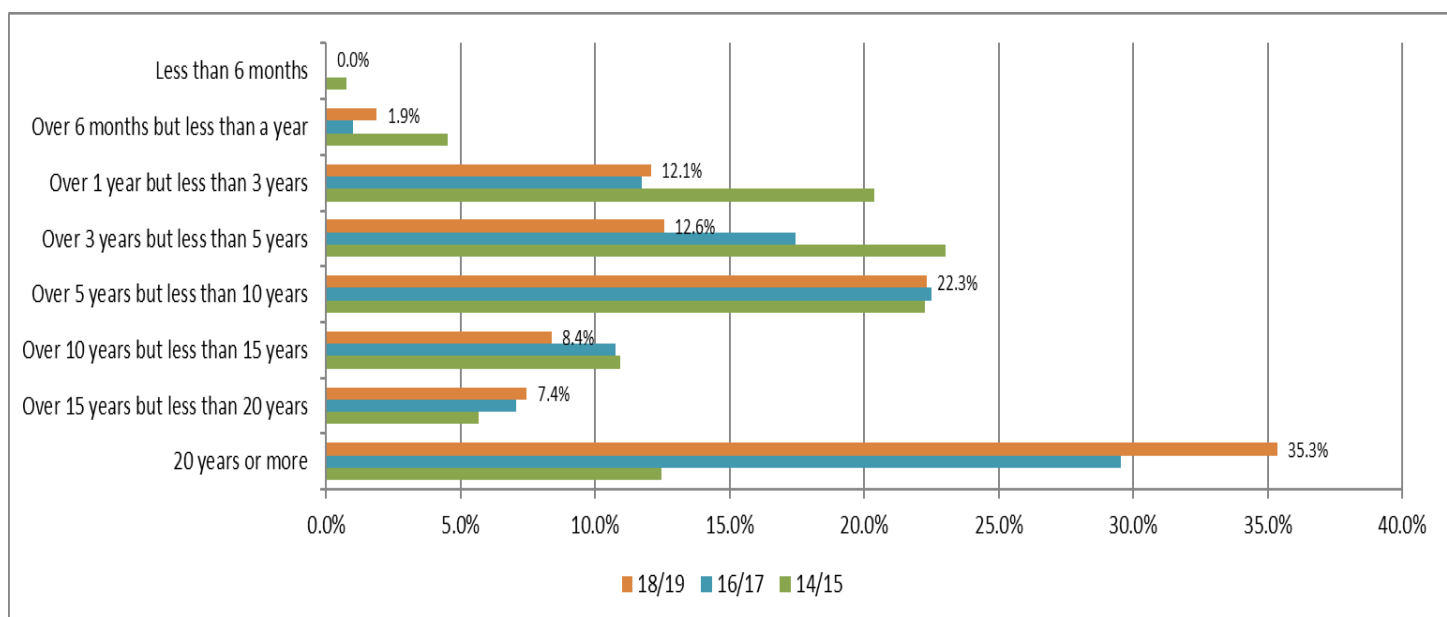
The Caring role



Of those responding in 18/19, the majority of carers in Hillingdon are aged between 55 and 64 (28.8%). 51.4% of carers are aged between 18 and 64 and 48.6% are aged 65 and over.

Length of time caring

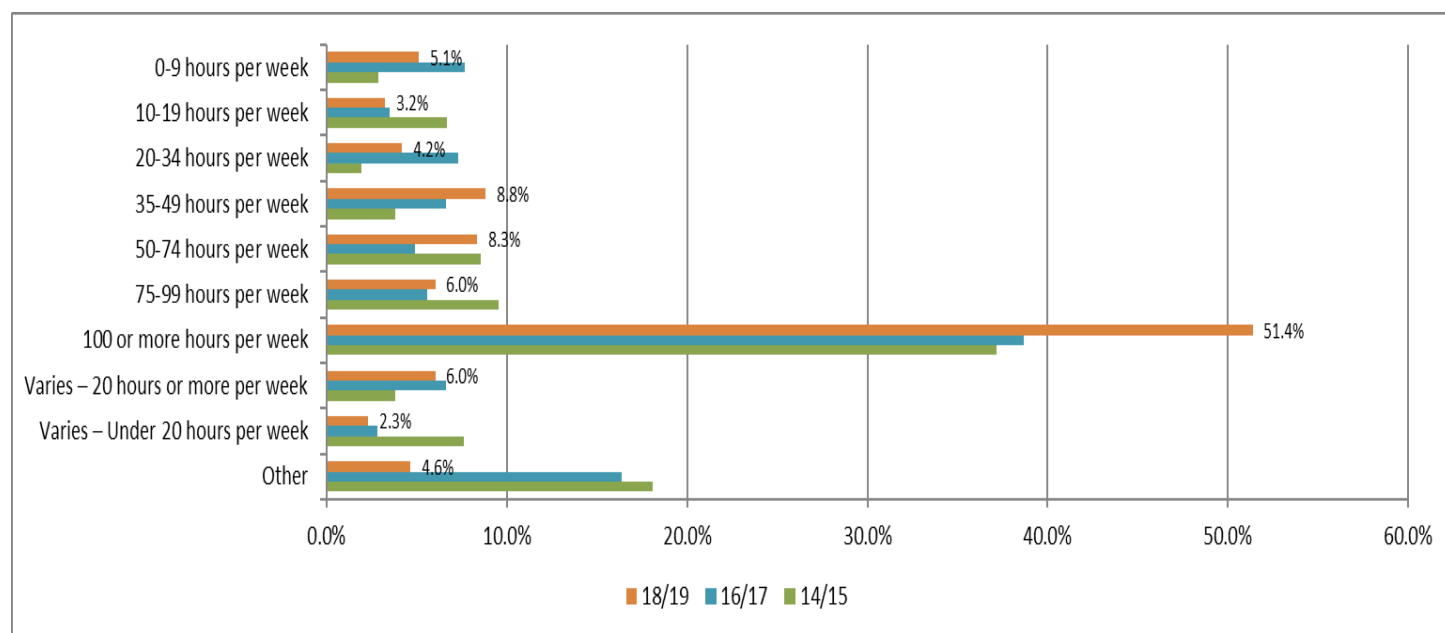
We asked carers how long they had been providing a caring role.



In 18/19, 73.4% of carers have been providing a caring role for over 5 years, 35.3% of those carers told us they have been caring for over 20 years and 7.4% between 15 and 20 years, 8.4% of carers told us they have been caring between 10 and 15 years and 22.3% between 5 and 10 years.

Hours spent caring

We asked carers to tell us many hours per week they spent caring.



In 18/19, 51.4% of carers told us they regularly spend over a 100 hours a week caring, 14.3% spend between 50 and 99 hours and 8.3% of carers told us their hours caring varies week on week.

Please note that there has been an increase of 12.7% from 38.7% to 51.4% for the '100 or more hours a week' category.

Caring duties

We asked carers to tell us the types of duties they perform for the person they care for. The question allowed carers to select more than one caring duty.

Duty	14-15	16-17	18-19
Personal Care?	63.8%	71.6%	78.0%
Physical Help?	55.1%	58.1%	59.6%
Helping with dealing with care services and benefits?	90.6%	86.8%	91.3%
Helping with paperwork or financial matters?	89.4%	86.5%	88.1%
Other practical help?	90.9%	92.9%	95.9%
Keeping him/her company?	82.6%	84.8%	85.3%
Taking him/her out?	70.6%	74.7%	75.7%
Giving medicines?	81.1%	78.4%	84.9%
Keeping an eye on him/her to see he/she is all right?	92.8%	95.3%	95.0%
Giving emotional support?	85.3%	81.1%	87.6%
Other help?	21.9%	23.6%	15.1%

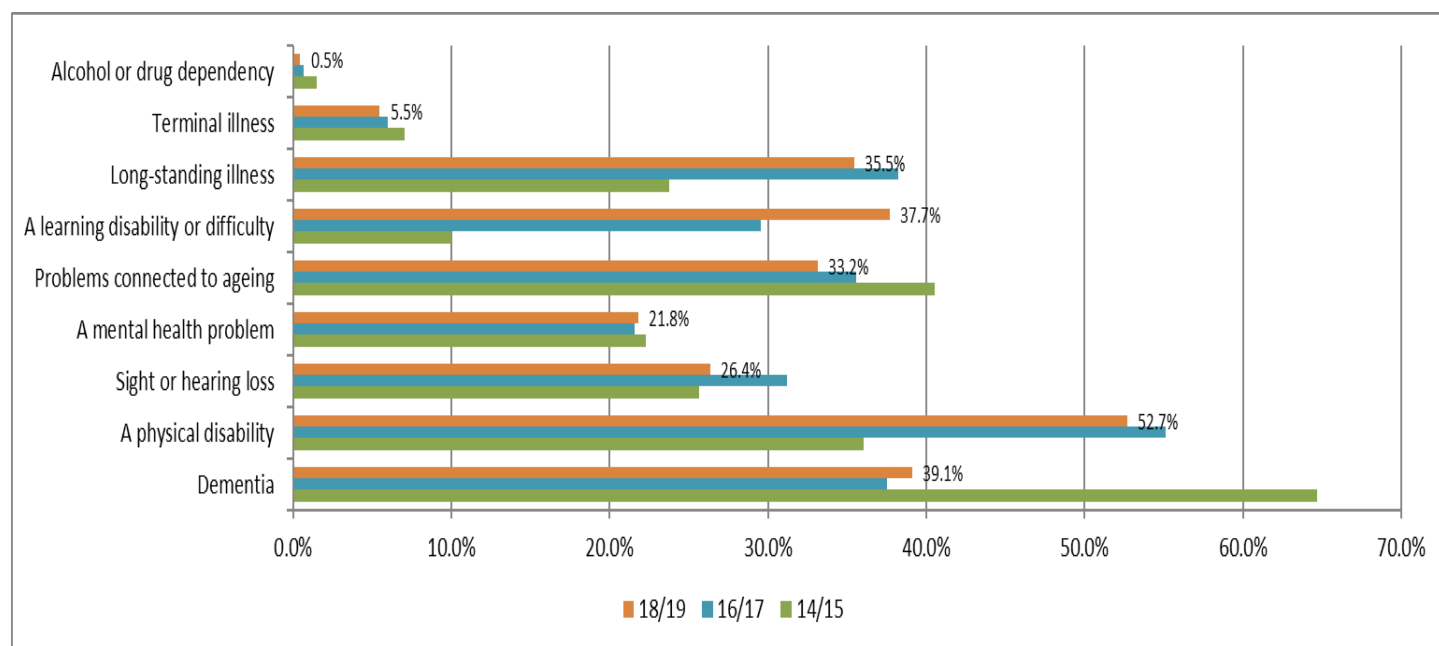
1st ranked duty ; 2nd ranked duty ; 3rd ranked duty

In 18/19, the top 3 duties were :

1. Other practical help
2. Keeping an eye on him/her to see if he/she is all right
3. Helping with dealing with care services and benefits

Medical conditions

We asked carers to tell a little about the types of medical problems the person they are caring for have. The question allowed carers to select more than one condition.



In 18/19, the top 3 medical conditions include looking after people with:

Physical Disability, Dementia, a learning disability or difficulty.

Age of cared for person

We asked carers to tell us the age of the person they are caring for.

Age of Cared For Person	14-15	16-17	18-19
18-24	3.7%	9.5%	11.3%
25-34	4.1%	7.2%	9.5%
35-44	4.1%	4.3%	5.9%
45-54	5.2%	5.9%	7.7%
55-64	4.8%	5.9%	7.2%
65-74	10.7%	10.5%	7.2%
75-84	35.9%	23.6%	25.2%
85 and over	30.7%	29.8%	24.3%
Unknown	0.7%	3.3%	1.8%

The age of people being cared for is reducing.

For cared for persons aged clients aged 75+,

14/15 66.7%

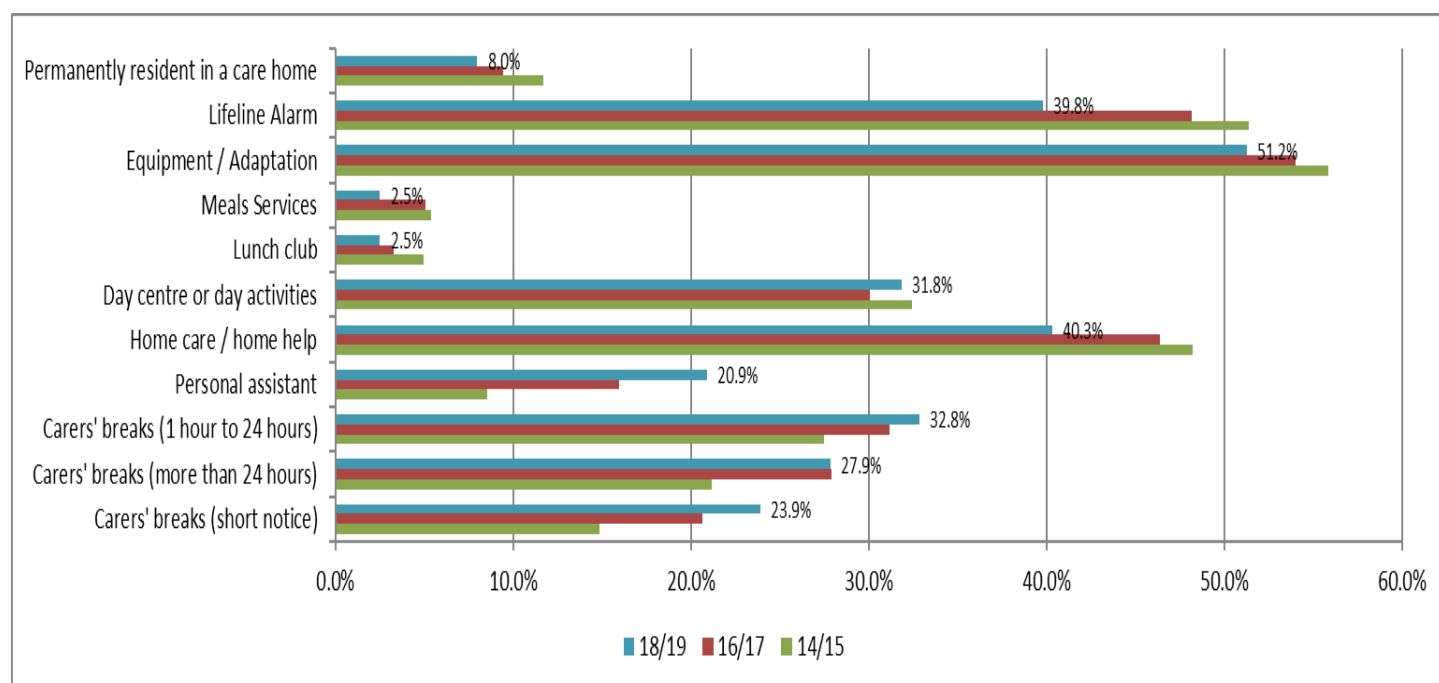
16/17 53.4%

18/19 49.5%

The largest age group in 18/19 is the 75-84 year olds, with 25.2%.

Care and support services accessed by the cared for person

We asked carers about the type of care and support services the person they are caring for accessed in the last 12 months.



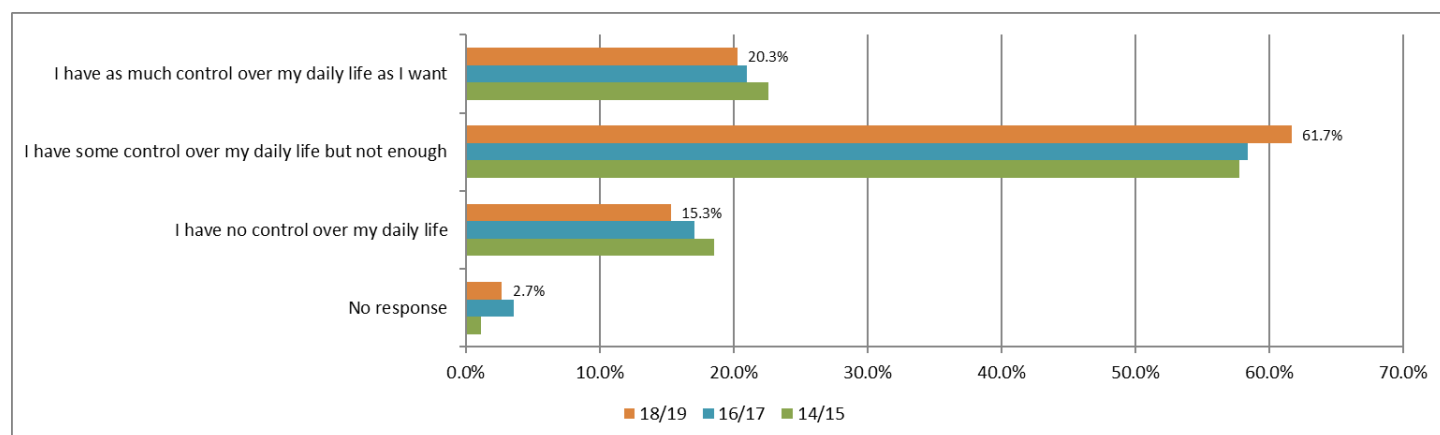
In 18/19, 84.6% of carers told us that carers' breaks are the most commonly used services, this includes services which allow the carer to either take a break from caring at short notice or in an emergency, take a break for more than 24 hours or facilitate a rest from caring between 1 and 24 hours e.g. a sitting service.

Carers also told us that equipment and adaptations (51.2%), Home care / Home help (40.3%) and Lifeline Alarm (39.8%) were also the most used care and support services.

The impact of Caring and quality of life

Control

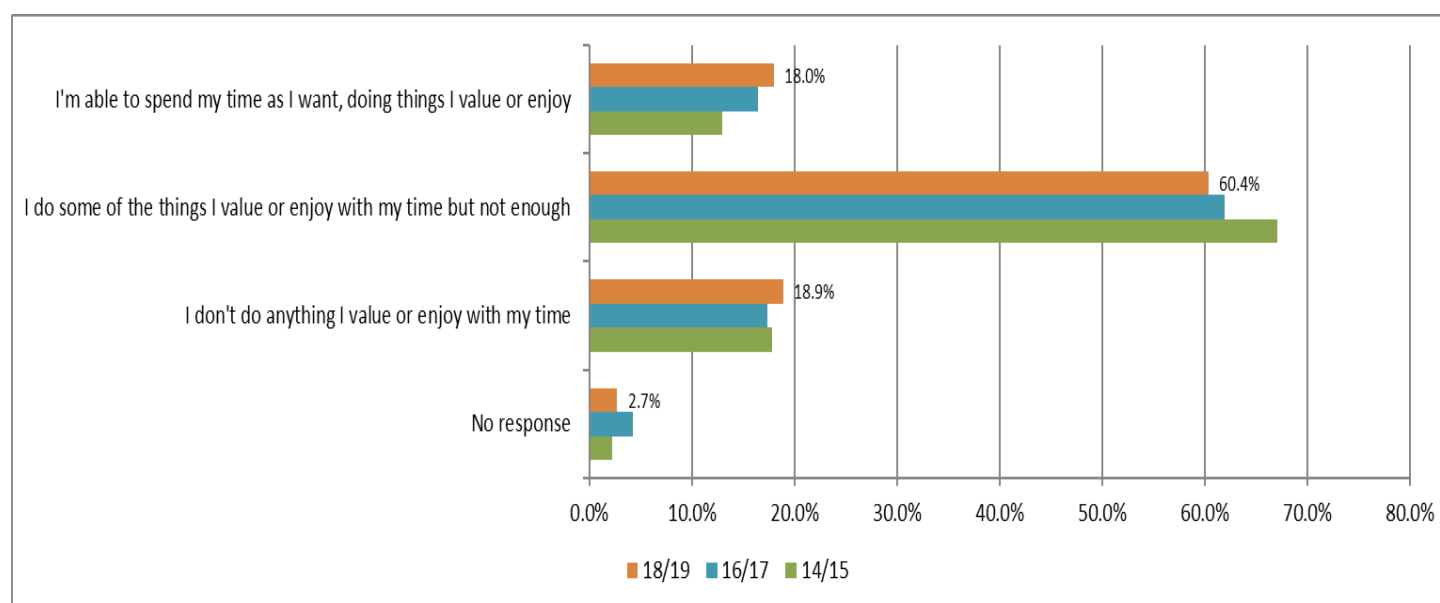
We asked how much control carers have over their daily life.



The survey found that 20.3% of carers have as much control over their daily life as they want, 61.7% told Hillingdon that have some but not enough and 15.3% felt no control over their daily life.

Occupation and Personal time

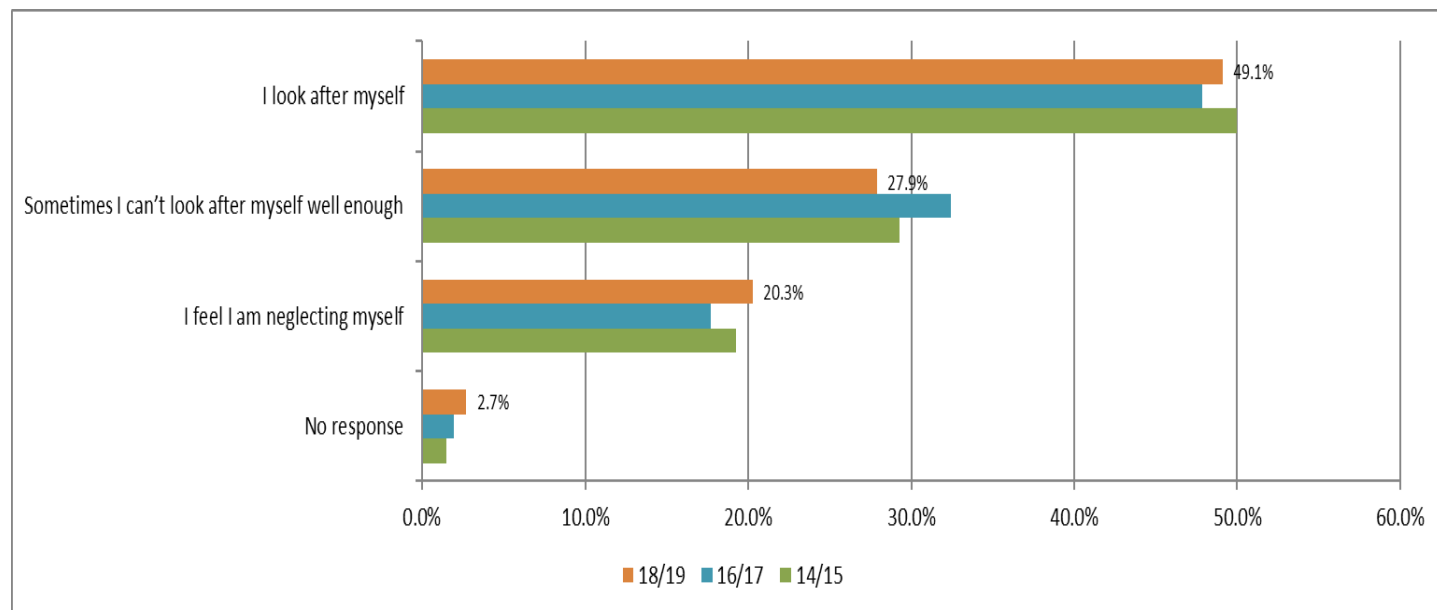
We asked carers to think about how they spend their time doing activities they value and enjoy, this includes formal employment, voluntary, caring for others and leisure activities.



In 18/19, 18.0% of carers in Hillingdon told us that they are to spend their time as they would want doing activities they valued and enjoyed, 60.4% told us they are able to do some but not enough and 18.9% do not feel that they are able to anything they value or enjoy.

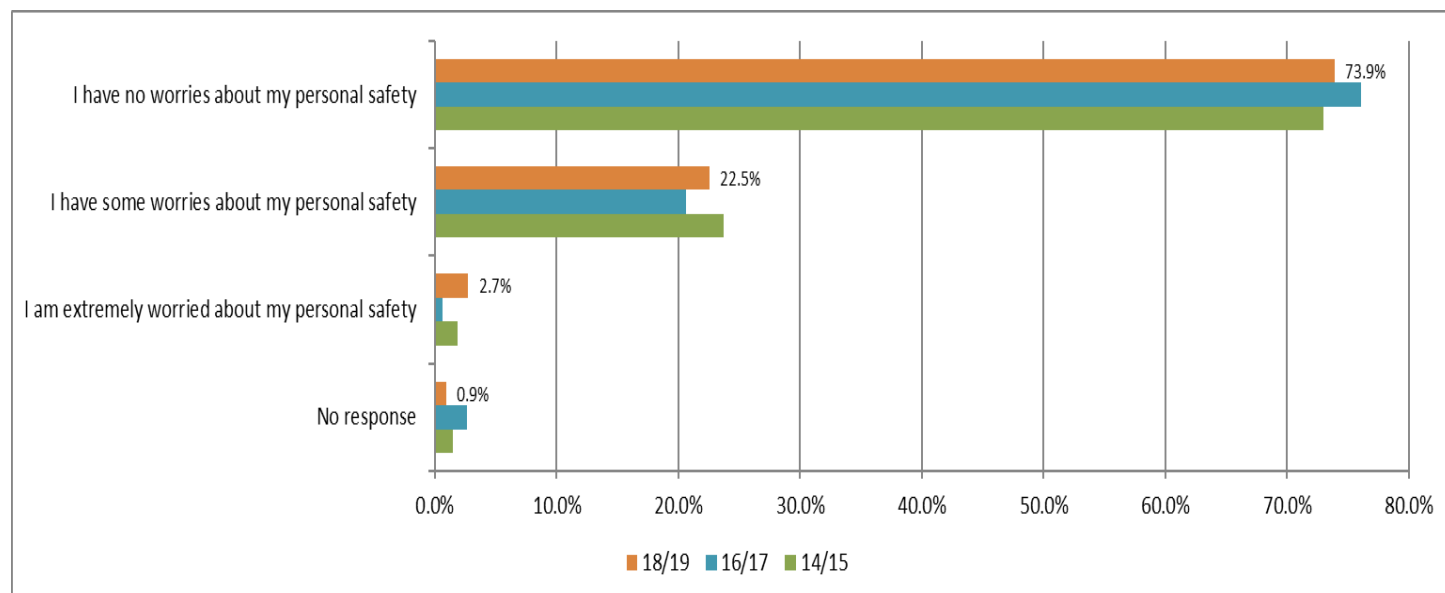
Personal Care

We asked carers to think about their personal care in respect to how much time they had to look after themselves, for example getting enough sleep or eating well.



In 18/19, the survey found that 49.1% of carers in Hillingdon feel that they are able to look after themselves, 27.9% do not feel that they are always able and 20.3% feel they are neglecting themselves.

Personal Safety



In 18/19, the surveys found that 2.7% of carers are extremely concerned about their personal safety (up from 0.7% in 16/17), whilst 73.9% told us they had no concerns and 22.5% had expressed some concern.

Social Contact

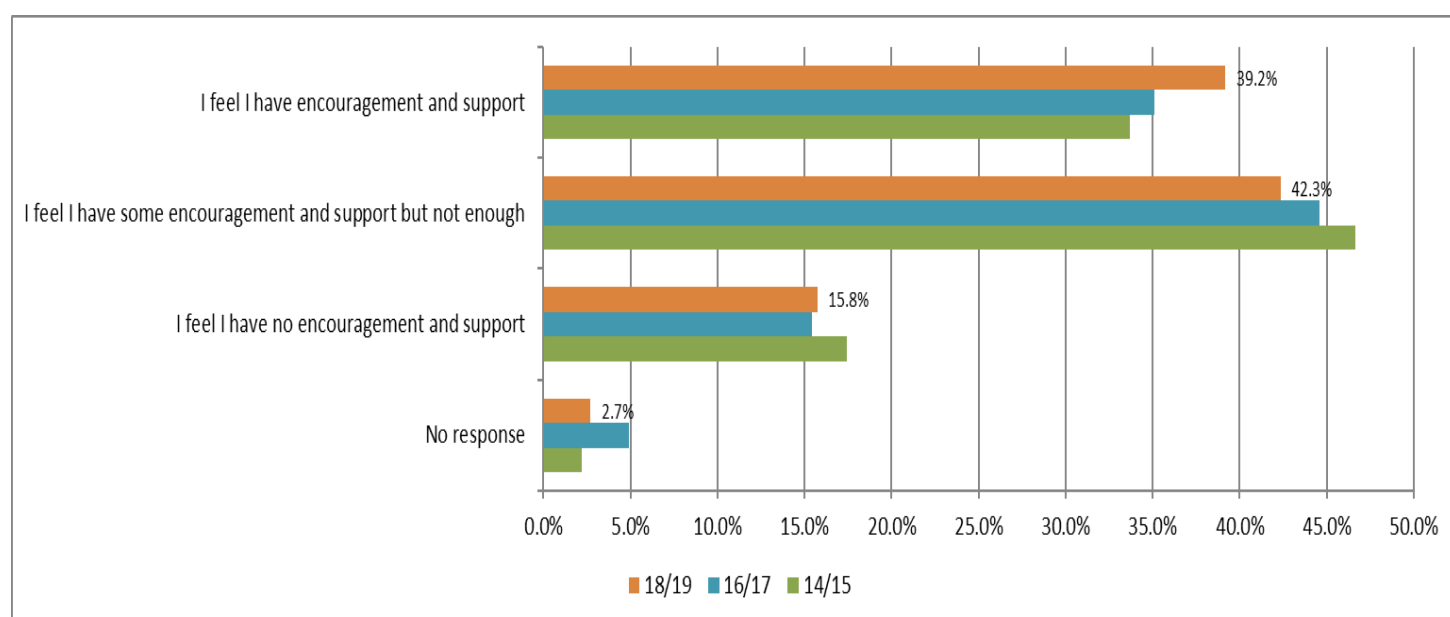
We asked carers to tell us about their social situation. Social contact is taken to mean the importance of meaningful relationships with family and friends, and feeling involved in the community.

Social Contact	14-15	16-17	18-19
No response	2.2%	3.0%	1.8%
I have little social contact with people and feel socially isolated	17.4%	18.0%	20.3%
I have some social contact with people but not enough	54.8%	47.9%	50.5%
I have as much social contact as I want with people I like	25.6%	31.1%	27.5%

In 18/19, 27.5% of carers in Hillingdon told us they have as much social contact as they want while 50.5% felt they had some but not enough and 20.3% told us they had little social contact and felt socially isolated.

Encourage and Support

We asked carers to tell us if they felt encouraged and supported in their caring role.

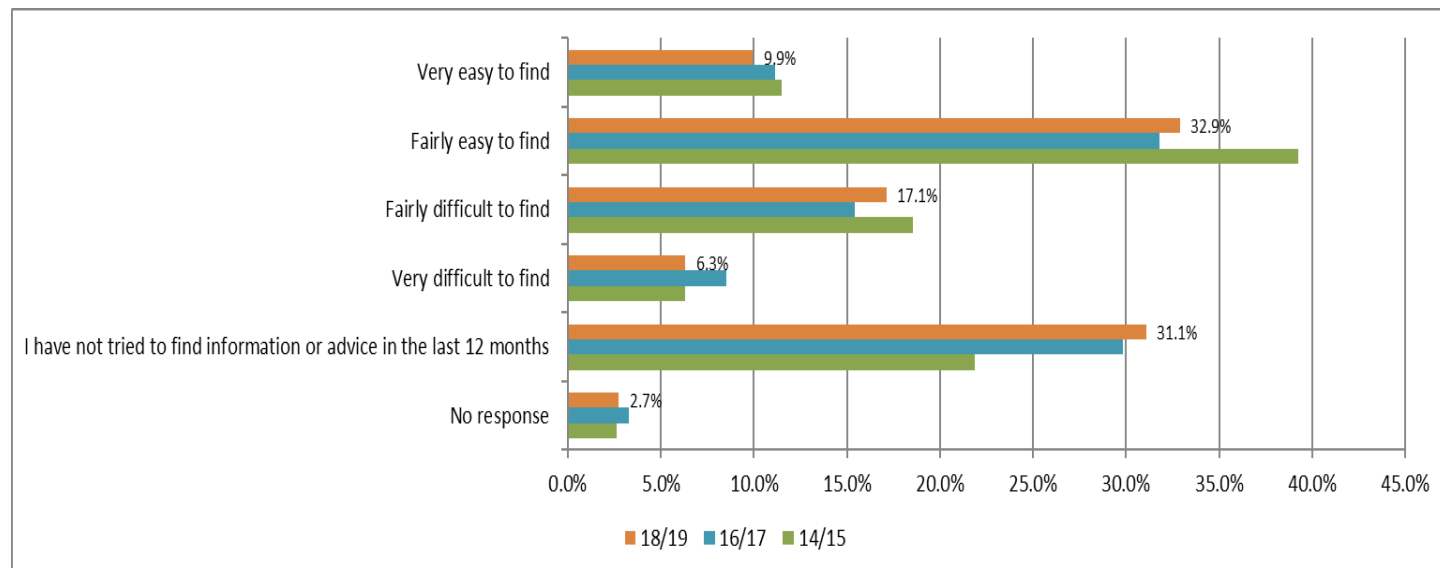


In 18/19, 39.2% of carers in Hillingdon feel they are encouraged and supported in their caring role, 42.3% feel they have some but not enough and 15.8% have no support.

Information and advice

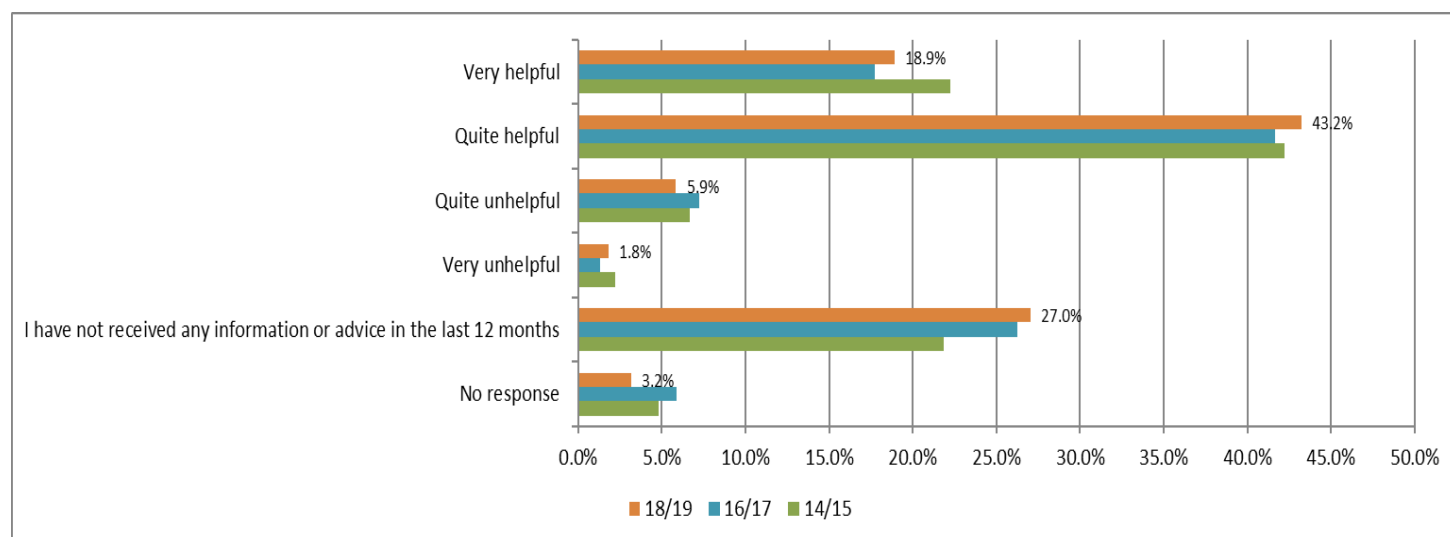
We asked carers for their views about their quality of information and advice provided by sources such as voluntary organisations and private agencies as well as Adult Social Care.

Accessing Information and advice



9.9% of carers told us they found information and advice very easy to find, 32.9% found it fairly easy, 17.1% found it fairly difficult and 6.3% found it very difficult.

Appropriateness of Information and advice



18.9% of carers found information and advice very helpful and 43.2% found it quite helpful, 5.9% told us they found it quite unhelpful and 1.8% found it very unhelpful.

COMMITTEE REVIEW - UNIVERSAL CREDIT AND OTHER WELFARE BENEFIT CHANGES

Committee name	Social Care, Housing and Public Health Policy Overview Committee
Officer reporting	Anisha Teji, Democratic Services Officer
Papers with report	None
Ward	All

HEADLINES

The Committee is undertaking a review into Universal Credit and other welfare benefit changes and how the Council can support residents through the transition to, and future successful management of, their Universal Credit (UC) claims.

RECOMMENDATIONS

That the Social Care, Housing and Public Health Policy Overview Committee:

- 1) Considers the draft report for the review and delegates any amendments to Democratic Services, to be approved by the Chairman and Labour Lead.**
- 2) Subject to the agreed amendments, endorses the report for submission to Cabinet.**

SUPPORTING INFORMATION

The agreed Terms of Reference for the review are set out below:

Terms of Reference

1. To understand the impact that the introduction of the full UC service has had in areas where it has been rolled out. To include the cumulative impact of the introduction of UC and other welfare benefit changes.
2. To understand the impact that UC, alongside other welfare benefit changes, is having and is expected to have on local residents in Hillingdon and on the income and costs of the Council, housing associations and other local organisations.
3. To examine how the Council services, housing associations and voluntary groups are supporting residents to transition to UC and manage their claims.
4. To make practical, prudent recommendations to Cabinet (and other bodies if applicable) from the Committee's findings to support residents transitioning to UC and to manage their claims.

Review update

At the meeting on 30 July 2018, Members agreed that the Committee's first review topic would be 'Universal Credit and Other Welfare Benefit Changes'. Following this agreement, Members heard from a variety of witnesses.

This information has now been set out within a draft final report, alongside the recommendations that were discussed at the meeting on 18 March 2019. This draft final report will be circulated to the Committee prior to the meeting on 11 April 2019, and it is requested that the Committee consider the draft final report for endorsement to Cabinet.

Implications on related Council policies

While much of this topic is set nationally, for any changes locally, the role of the Policy Overview Committees is to make recommendations on service changes and improvements to the Cabinet who are responsible for the Council's policy and direction.

How this report benefits Hillingdon residents

Policy Overview Committees directly engage residents and external partners in the work they do.

Financial Implications

These are primarily for residents claiming UC, as set out in the background papers. There may also be an impact on the Council's finances in respect of residents being unable to pay rent and Council tax.

Legal Implications

The primary legislation relating to Universal Credit is the Welfare Reform Act 2012, with further regulations following thereafter.

BACKGROUND PAPERS

Scoping Report

Previous Committee papers on the review published on the Council's website

SOCIAL CARE, HOUSING AND PUBLIC HEALTH POLICY OVERVIEW COMMITTEE - FORWARD PLAN

Committee name	Social Care, Housing and Public Health Policy Overview Committee
Officer reporting	Anisha Teji, Chief Executive's Office
Papers with report	Appendix A – Forward Plan
Ward	All

HEADLINES

The Committee is required by its Terms of Reference to consider the Forward Plan and comment as appropriate to the decision-maker on key decisions which relate to services within its remit (before they are taken by the Cabinet or by the Cabinet Member).

RECOMMENDATION

That the Social Care, Housing and Public Health Policy Overview Committee notes and comments on items going to Cabinet.

SUPPORTING INFORMATION

The latest published Forward Plan is attached.

Implications on related Council policies

A role of the Policy Overview Committees is to make recommendations on service changes and improvements to the Cabinet who are responsible for the Council's policy and direction.

How this report benefits Hillingdon residents

Policy Overview Committees directly engage residents and external partners in the work they do.

Financial Implications

None at this stage.

Legal Implications

None at this stage.

BACKGROUND PAPERS

NIL.

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Final decision by Full Council	Cabinet Member(s) Responsible	Officer Contact for further information	Consultation on the decision	NEW ITEM	Public or Private (with reason)
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SI = Standard Item each month

Council Departments: RS = Residents Services SC = Social Care CEO = Chief Executive's Office FD= Finance

Cabinet Member Decisions expected - April 2019

320	Changes to the Council's Social Housing Allocation Policy	To consider amending the Policy following statutory changes issued by HM Government, including that relating to The Homelessness Reduction Act 2017, Domestic Violence Victims and Calais Leave.	All		Cllr Ray Puddifoot MBE / Cllr Philip Corthorne	RS - Raj Alagh / Debbie Weller		NEW	Public
304	Home to School Transport Policy	The Leader and Cabinet Member will consider approval of an updated Home to School Transport Policy.	All		Cllr Ray Puddifoot MBE / Cllr David Simmonds CBE	SC- Nina Durnford	TBC		Public

Cabinet meeting - 23 May 2019

313	Carers Strategy 2018-21: Update	Cabinet will receive a progress report on the Carers Strategy and Delivery Plan for 2018-21.	All		Cllr Philip Corthorne	SC - Nina Durnford			Public
314	Older People's Plan update	Cabinet will receive its twice yearly progress update on the Older People's Plan.	All		Cllr Ray Puddifoot MBE / Cllr Philip Corthorne	RS - Kevin Byrne	Older People, Leader's Initiative		Public

Cabinet meeting - 20 June 2019

316	Budget 2018/19 Outturn	Cabinet will review the Council's budget outturn position for the previous financial year.	All		Cllr Ray Puddifoot MBE / Cllr Jonathan Bianco	FD - Paul Whaymand			Public
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SOCIAL CARE, HOUSING AND PUBLIC HEALTH POLICY OVERVIEW COMMITTEE - WORK PROGRAMME

Committee name	Social Care, Housing and Public Health Policy Overview Committee
Officer reporting	Anisha Teji, Chief Executive's Office
Papers with report	Appendix A – Work Programme
Ward	All

HEADLINES

To enable the Committee to track the progress of its work in 2018/2019 and forward plan its work for the current municipal year.

RECOMMENDATION

That the Social Care, Housing and Public Health Policy Overview Committee considers the report and agrees any amendments.

SUPPORTING INFORMATION

- The Committee's meetings tend to start at 7pm and the witnesses attending each of the meetings are generally representatives from external organisations, some of whom travel from outside of the Borough. The meeting dates for this municipal year are as follows:

Meetings	Room
13 June 2018, 7pm	CR 5
30 July 2018, 7pm	CR 4
26 September 2018, 7pm	CR 4
17 October 2018, 7pm	CR 4
28 November 2018, 7pm	CR 4
16 January 2019, 7.45pm	CR 4
7 February 2019, 7pm	CR 4
18 March 2019, 7pm	CR 4
11 April 2019, 7pm	CR 4
12 June 2019, 7pm	CR 5
31 July 2019, 7pm	CR 6
25 September 2019, 7pm	CR 6
23 October 2019, 7pm	CR 6
27 November 2019, 7pm	CR 6
15 January 2020, 7pm	CR 6

Implications on related Council policies

A role of the Policy Overview Committees is to make recommendations on service changes and improvements to the Cabinet who are responsible for the Council's policy and direction.

How this report benefits Hillingdon residents

Policy Overview Committees directly engage residents and external partners in the work they do.

Financial Implications

None at this stage.

Legal Implications

None at this stage.

BACKGROUND PAPERS

NIL.

Multi year work programme

Social Care, Housing & Public Health	2018					2019								
Meeting Month	June	July	September	October	November	January	February	March	April	June	July	September	October	
Date	13	30	26	17	28	16	7	18	11	12	31	25	23	
REVIEW A: Universal Credit and other welfare benefit changes														
Topic selection / scoping stage	Agree topic	Scoping report												
Witness / evidence / consultation stage			Witness Session 1	Witness Session 2	Witness Session 3	Witness Session 4								
Findings, conclusions and recommendations							Review update							
Final review report agreement								Findings						
Target Cabinet reporting											Final Report	CABINET		
Post review monitoring													TBC	
Title of Review B														
Topic selection / scoping stage														
Witness / evidence / consultation stage														
Findings, conclusions and recommendations														
Final review report agreement														
Target Cabinet reporting														
Post review monitoring														
Regular business items														
Mid year Budget Update	X													
Annual complaints & service update report				X										
Looked After Children Performance Data	X													
Annual LCSB (Children's Safeguarding Board report)				X										
Annual SAPB (Adults Safeguarding Board report)				X										
Quality and Capacity of the Community Mental Health Services in Hillingdon					X									
Child & Adolescent Mental Health Services update					X									
Report / minutes from the Corporate Parenting Panel														
Cabinet's budget proposals for next financial year						X								
Cabinet Forward Plan monitoring	X	X	X	X	X	X	X	X	X	X	X	X	X	
Work Programme	X	X	X	X	X	X	X	X	X	X	X	X	X	
One-off business items														
Introductory report on overview and scrutiny	X													
Presentation on the Council's corporate parenting role	X													
Information report on current housing policy	X													
Child Sexual Exploitation - update report			X											
Housing assessments					X									
Better Care Fund Plan					X									
Update on Telecare Line					X									
Update on the Carers Strategy Update									X					
A presentation from the Children in Care Council						X								
Past review monitoring														
Early Intervention Service							X							
Hospital Discharges							X							
Stroke Prevention							X							
Loneliness and Social Isolation											X			
Internal use only														
Report deadline	4 June 2018	19 July 2018	14 September 2018	8 October 2018	19 November 2018	7 January 2019	29 January 2019	7 March 2019	2 April 2019	30 May 2019	18 July 2019	12 Sept 2019	10 Oct 19	
Agenda published	5 June 2018	20 July 2018	17 September 2018	9 October 2018	20 November 2018	8 January 2019	30 January 2019	8 March 2019	3 April 2019	4 June 2019	23 July 2019	17 Sept 2019	15 Oct 19	

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