



### Cabinet

Date: THURSDAY, 27 OCTOBER

2011

Time: 7.00 PM

Venue: COMMITTEE ROOM 6 -

CIVIC CENTRE, HIGH STREET, UXBRIDGE, UB8

**1UW** 

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

this meeting

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#### **Councillors in the Cabinet**

Ray Puddifoot (Chairman) Leader of the Council

David Simmonds (Vice-Chairman)

Deputy Leader / Education & Children's Services

Jonathan Bianco

Finance, Property & Business Services

**Keith Burrows** 

Planning, Transportation & Recycling

Philip Corthorne

Social Services, Health & Housing

Henry Higgins

Culture, Sport & Leisure

Douglas Mills

Improvement, Partnerships & Community Safety

Scott Seaman-Digby

Co-ordination & Central Services

Published: Wednesday, 19 October 2011

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#### Agenda

1	Apologies for Absence	
2	Declarations of Interest in matters before this meeting	
3	To approve the minutes of the last Cabinet meeting	1 - 14
4	To confirm that the items of business marked Part 1 will be considered in public and that the items of business marked Part 2 in private	
Cal	oinet Reports - Part 1 (Public)	
5	The Foster Carers' Charter (Cllr Simmonds)	15 - 24
6	Consideration of whether an Article 4 Direction to control Houses in Multiple Occupation around Brunel University should be introduced (Cllr Burrows)	25 - 34
7	Carers' Commissioning Plan (Cllr Corthorne)	35 - 92
8	Review of the Local List of Buildings of Architectural or Historic Importance (Cllr Burrows)	93 - 110
9	Older People's Plan update (Cllrs Corthorne and Puddifoot)	111 - 122
10	Disabled People's Plan update (Cllr Corthorne)	123 - 132
11	West London Accreditation, Purchasing and Contract Management Scheme for adult residential and nursing care (Cllr Corthorne)	133 - 140
12	Council Budget - Month 5 2011/12 Revenue and Capital Monitoring Report (Cllr Bianco)	
	REPORT TO FOLLOW	
13	Primary School Capital Programme Update (Cllrs Simmonds and Bianco)	

REPORT TO FOLLOW

#### **Cabinet Reports - Part 2 (Private and Not for Publication)**

**14** Primary School Capital Programme Update (Cllrs Simmonds and Bianco)

#### REPORT TO FOLLOW

15	Personalisation of accommodation-based mental health services (Cllrs Corthorne and Seaman-Digby)	141 - 152
16	Award of Contract - support to the housing jobbing and void repairs operation (Cllrs Corthorne and Seaman-Digby)	153 - 162
17	Extension of contract - Gas servicing and repairs (Cllrs Corthorne and Seaman-Digby)	163 - 170
18	Extension of contracts - preventative services for people with Disabilities (Cllrs Corthorne and Seaman-Digby)	171 - 178

The reports listed above in Part 2 are not made public because they contains exempt information under Part 1 of Schedule 12A to the Local Government (Access to Information) Act 1985 (as amended) and that the public interest in withholding the information outweighs the public interest in disclosing it.

**19** Any other items the Chairman agrees are relevant or urgent

#### Agenda Item 3

#### **Minutes**

Cabinet
Thursday, 29 September 2011
Meeting held at Committee Room 6 - Civic Centre,
High Street, Uxbridge, UB8 1UW



Published on: 30 September 2011

Decisions come into effect on: Friday 7<sup>th</sup> October 2011

#### **Cabinet Members Present:**

David Simmonds (Vice-Chairman - and Chairman for the meeting)
Jonathan Bianco
Keith Burrows
Philip Corthorne
Henry Higgins
Scott Seaman-Digby

#### **Members also Present:**

John Riley George Cooper Judith Cooper Brian Crowe Mo Khursheed Edward Lavery Brian Stead

#### 386. APOLOGIES FOR ABSENCE

Apologies were received from Councillor Ray Puddifoot and Councillor Douglas Mills.

#### 387. DECLARATIONS OF INTEREST IN MATTERS BEFORE THIS MEETING

No interests were declared.

#### 388. TO APPROVE THE MINUTES OF THE LAST CABINET MEETING

The minutes and decisions of the last meeting were agreed and confirmed as a correct record by the Cabinet.

### 389. TO CONFIRM THAT THE ITEMS OF BUSINESS MARKED PART 1 WILL BE CONSIDERED IN PUBLIC AND THAT THE ITEMS OF BUSINESS MARKED PART 2 IN PRIVATE

This was confirmed.

#### 390. DRAFT NATIONAL PLANNING POLICY FRAMEWORK: RESPONSE TO GOVERNMENT CONSULTATION

#### **RESOLVED:**

#### That the Cabinet:

- 1. Agrees the response to the consultation as set out in the Appendix and the accompanying Annex to this report, for submission to the Department for Communities and Local Government.
- 2. Agrees to delegate authority to the Deputy Chief Executive and Corporate Director of Planning, Environment, Education and Community Services, in consultation with the Cabinet Member for Planning, Transportation and Recycling, to make any minor changes required to the response before submission.

#### Reasons for decision

Cabinet considered the recently published draft National Planning Policy Framework for public consultation. The Cabinet noted that the introduction of the new Framework would set both the strategic context for local planning policies and would also influence the implementation of existing local policies. Cabinet therefore approved the Council's response to the consultation document, which it felt was robust and protected the interest of local residents. The Cabinet also expressed its opposition to the development of the Tavistock Road site as part of the draft West London Waste Plan.

#### Alternative options considered and rejected

The Cabinet could have made amendments to the Council's response or have decided to make no response to the consultation, which would have given no opportunity to influence the Government's proposals.

#### Officer to action:

Jales Tippell
Planning, Environment, Education and Community Services

#### 391. QUEENS WALK LEARNING AND DEVELOPMENT CENTRE

#### **RESOLVED:**

#### **That Cabinet:**

1. Agree to the closure of the Queens Walk Learning and Development Centre with effect from 28 October 2011 and that all Learning and Development activities are transferred to Adult Learning Centres across the Borough;

- 2. Agree to the relocation of the Library service to the temporary buildings on the South Ruislip Site with effect from 28 October 2011 and;
- 3. Authorises officers to develop a proposal to use the Queens Walk site for the reprovision of facilities for people with disabilities with high dependency and complex needs.

#### Reasons for decision

Cabinet noted that the Queens Walk Learning and Development Centre was not currently utilised effectively and therefore agreed that the asset be identified for alternative use as a new resource centre focused on disabled people with high dependency and complex needs.

#### Alternative options considered and rejected

Cabinet could have decided to close and sell the site, but felt that the site presented a good opportunity to re-provide and improve facilities for those with disabilities.

#### Officer to action:

Steve Smith – Planning, Environment, Education and Community Services

#### 392. TRANSFORMATION OF ADULT SOCIAL CARE: PERSONALISATION AND COMMISSIONING PLAN 2011 - 2015

#### **RESOLVED:**

That Cabinet approves the Transforming Adult Social Care: Personalisation and Commissioning Plan 2011-2015 in-principle and the direction of travel for services for adult social care services that it describes, subject to consultation with service users and other stakeholders that will lead to a further report to Cabinet.

#### Reasons for decision

Cabinet welcomed the overarching plan to transform Adult Social Care in Hillingdon. Cabinet noted that it would lead to more effective and efficient support, increased choice and independence for residents, a greater role for social networks, improved support for carers and better value for money. Cabinet agreed the plan for wider public consultation, noting that it would come back to Cabinet for final approval.

#### Alternative options considered and rejected

Cabinet could have amended the plan or decided not to approve it, which would have resulted in no strategic plan for the service.

#### Officer to action:

Paul Feven – Social Care, Health and Housing

#### 393. DISABILITIES COMMISSIONING PLAN 2011-2015

#### **RESOLVED:**

That Cabinet approves the Disabilities Commissioning Plan in principle and the direction of travel for services for disabled people that it describes, subject to consultation with service users and other stakeholders that will lead to a further report to Cabinet.

#### Reason for decision

The Cabinet welcomed the plan to improve support for Disabled People in Hillingdon. Cabinet noted that it would lead to improved access to information, increase the ability to use personal budgets, greater choice in services, extended supported housing opportunities and ensure that there was building-based support for those with the most complex needs. Cabinet agreed the plan for wide public consultation, noting that it would come back to Cabinet for final approval. Cabinet also noted that an Equalities Impact Assessment had been undertaken in formulating the proposals.

#### Alternative options considered and rejected

Cabinet could have amended the plan or decided not to approve it, which would have resulted in no forward looking plan for the service.

#### Officer to action:

Paul Feven – Social Care, Health and Housing

#### 394. GIFT FUNDING FOR PLANNING FUNCTIONS - FORMER NATIONAL AIR TRAFFIC SERVICES SITE

#### **RESOLVED:**

That Cabinet accepts the offer of a gift from Weston Homes in accordance with the provisions of Section 93 of the Local Government Act 2003.

#### Reasons for decision

Cabinet agreed to receive a small amount of monies to assist in the complex processing of planning applications on the former National Air Traffic Services site. Cabinet felt it justifiable for the developer to contribute to the public cost of carrying out these planning functions.

#### Alternative options considered and rejected

Cabinet could have refused the gift from Weston Homes, which would have not been in the best interests of the local communities or the Council.

#### Officer to action:

Matthew Duigan / James Rodger – Planning, Environment, Education and Community Services

#### 395. PLANNING OBLIGATIONS - QUARTERLY FINANCIAL MONITORING REPORT

#### **RESOLVED:**

That the Cabinet notes the updated financial information attached to the report.

#### Reasons for decision

Circular 05/05 and the accompanying best practice guidance requires local planning authorities to consider how they can inform Members and the public of progress in the allocation, provision and implementation of obligations whether they are provided by the developer in kind or through a financial contribution. Cabinet noted the report which detailed the financial planning obligations held by the Council and what progress had, and was, being made.

#### Alternative options considered and rejected

To not report to Cabinet. However, Cabinet believed it was an example of good practice to monitor income and expenditure against specific planning agreements.

#### Officer to action:

Nicola Wyatt, Planning and Community Services

#### 396. COUNCIL BUDGET - MONTH 4 2011/12 REVENUE AND CAPITAL MONITORING REPORT

#### **RESOLVED:**

#### That Cabinet:

- 1. Note the forecast budget position for revenue and capital as at Month 4
- 2. Note the treasury update at Appendix B
- 3. Approves the retaining of agency staff as detailed in Appendix C
- 4. Agrees that the Ward Budget Initiative will come into effect from 1st October 2011 and approves the allocation of £330k from Priority Growth to fund it.

- 5. Agree additional charges connected with requests for street naming and new building naming/numbering to cover matters that are not clearly defined under the existing adopted pricing structure. The proposed charges would be as set out below:
  - To name a hotel: £250+vat
  - To issue letters to confirm an address: £30+vat
- 6. Approves the virement of £75k of Council Resources from Primary School Expansions to Ruislip High School
- 7. Approves the virement of £2,277k of DfE grant funding from Schools Kitchens to Primary School Expansions

#### Reason for decision

Cabinet noted and welcomed the Council's current revenue & capital position and treasury update and made decisions in respect of agency staff, new charges for naming and numbering of new or existing d buildings, approved virements and amendments in capital budgets between services and agreed the implementation and funding of the Ward Budget Initiative.

#### Alternative options considered and rejected

None.

#### Officer to action:

Paul Whaymand, Central Services

#### 397. LONDON LIBRARIES CONSORTIUM BOOK CONTRACT

#### **RESOLVED**

That Cabinet agrees that officers enter into the standard contract agreement that has been drawn up for participating Councils to allow them to purchase adult's and children's fiction and non fiction through the London Libraries Consortium (LLC) Book "Contract A"

#### Reasons for decision

Following a tender exercise by the London Borough of Redbridge on behalf of other London local authorities, Cabinet agreed to enter into "Contract A" to purchase all its library requirements for adult's and children's fiction and non fiction books. Cabinet welcomed the discount and reduced book servicing costs, which would increase the Council's buying power in relation to books.

#### Alternative options considered and rejected

Cabinet could have decided to continue with the existing range of ad-hoc library book suppliers or have decided to negotiate new individual contracts rather than by joining a pan-London consortium. It was felt this option this would not have achieved best value for the taxpayer.

#### Officers to action:

Nigel Dicker & Daniel Waller / Bob Alabaster – Planning, Environment, Education and Community Services / Central Services

#### **Exempt Information**

This report was included in Part II as it contained information relating to the financial or business affairs of any particular person (including the Authority holding that information) and the public interest in withholding the information outweighed the public interest in disclosing it (exempt information under paragraph 3 of Part 1 of Schedule 12A to the Local Government (Access to Information) Act 1985 as amended.

#### 398. RE-ORGANISATION OF THE HIGHWAYS RESPONSIVE MAINTENANCE OPERATION

#### **RESOLVED:**

#### **That Cabinet:**

- 1. Approves the proposal not to extend or re-tender the current Highways Responsive Maintenance Support Contract on its expiration in March 2012.
- 2. Approves the proposal to expand the size of the current Highways Responsive Maintenance Team through the procurement of required plant, vehicles and skilled road worker operatives to ensure the timely and professional completion of all responsive highways maintenance works in-house.

#### Reasons for decision

Cabinet considered a report to improve the robustness and speed of handling the inspection and repair of highway defects. In considering the comparative costs, Cabinet made the necessary decisions to enable the in-house team to carry out both existing responsive and cyclic highway maintenance as well as the workloads currently allocated externally. Cabinet noted that this would provide for a reduced reliance on private contractors to maintain the borough highway network, which would enable the Council to improve and speed up its response on behalf of local residents.

#### Alternative options considered and rejected

Cabinet could have decided to continue with current arrangements and extend the external contract for another year, re-tender the contract or out-source the whole

highways function. However, this was considered both less efficient and less effective than undertaking the works in-house.

#### Officer to action:

James Birch – Planning, Environment, Education and Community Services

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#### 399. TOTAL APPROACH TO TOWN CENTRE REGENERATION - SUPPORT FOR HILLINGDON'S SMALL INDEPENDENT TRADERS

#### **RESOLVED:**

#### **That Cabinet:**

Awards the contract to International Visual Ltd following an open competitive tendering process, on the basis of most economically advantageous tender to deliver the two year visual merchandising programme at a total maximum cost of £95,450.

#### Reason for decision

Cabinet agreed to use Local Area Agreement Reward Grant to enable the delivery of a visual merchandising programme to improve the vitality of shops and small independent traders within Ruislip Manor, Hayes and Northwood Hills town centres using commercial expertise and retail apprenticeships. Following a tender exercise, Cabinet agreed the successful bidder to deliver the programme.

#### Alternative options considered and rejected

Cabinet could have decided not to use external grant funding for this programme, which would have resulted in a missed opportunity to support small independent traders within Hillingdon in particularly crucial economic times.

#### Officers to action:

Jales Tippell and Kevin Byrne – Planning, Environment, Education and Community Services & Central Services

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#### 400. AWARD OF ICT MANAGED SERVICES

#### **RESOLVED:**

That Cabinet award Northgate Information Solutions Ltd a 4 year ICT Managed Service contract effective from 1st May 2012.

#### Reasons for decision

Following a procurement exercise using the Government Procurement Service, Cabinet agreed to award the contract for the hosting and support of the Council's core ICT systems.

#### Alternative options considered and rejected

Cabinet could have decided to delay the award of any such contract, which would have put many critical ICT systems at risk that are used to deliver services and help operate the Council.

#### Officer to action:

Steve Palmer – Planning, Environment, Education and Community Services

#### **Exempt Information**

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#### 401. EXTENSION OF CONTRACT FOR THE SUPPLY OF ELECTRICAL FITTINGS AND MATERIALS

#### **RESOLVED:**

#### **That Cabinet:**

- 1. Agree to vary the contract agreement as set out in this report and;
- 2. Approve the extension of the contract with City Electrical Factors Limited for the supply of electrical fittings and materials for a period of 24 months.

#### Reasons for decision

Following a review by Officers, Cabinet agreed to extend the contract for specialised electrical works to Council housing to City Electrical Factors Limited, who had performed satisfactorily and had also delivered value for money.

#### Alternative options considered and rejected

Cabinet could have decided to let the current specialised contract lapse and conduct a full tender exercise. However, it felt that there was no practical or financial advantage to do so this at this stage and that it could potentially lead to increased prices.

#### Officer to action:

Grant Walker - Social Care, Health and Housing

#### **Exempt Information**

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#### 402. UXBRIDGE LIBRARY - APPOINTMENT OF INTEGRATED PROJECT MANAGEMENT & DESIGN TEAM SERVICES

#### **RESOLVED:**

That Cabinet notes the content of this report and agrees to:

1. The appointment of Pick Everard to Project Management and Full Design Team Services using a 2 stage Design and Build procurement route; and

2. Instructs officers to work with the Deputy Chief Executive and Corporate Director of Planning, Environment, Education & Community Services, Leader of the Council and Cabinet Member for Finance, Property and Business Services to undertake a first stage procurement exercise for the Council's preferred Construction partner and report back to Cabinet for decision.

#### Reasons for decision

Following a tender exercise, Cabinet agreed the successful design team and procurement route for the refurbishment of the Borough's main library in Uxbridge. Cabinet welcomed the Council's overall refurbishment programme which had proved to be very successful and had seen usage increase by 100% of those libraries already refurbished.

#### Alternative options considered and rejected

Cabinet could have decided to not proceed with the modernisation of Uxbridge Library or delay the programme.

#### Officer to action:

Mohamed Bhimani and Philip Ross: Planning, Environment, Education & Community Services

#### **Exempt Information**

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#### 403. PROGRESS REPORT ON NEW YEARS GREEN LANE LANDFILL SITE

#### **RESOLVED**

#### That the Cabinet:

- 1. Notes the contents of the letter received from the Environment Agency in respect of the Council's Grant Application;
- 2. Authorise Officers to liaise with the Environment Agency to agree and implement a contingency programme of works that could be completed by the end of this financial year 2011/12 should unspent grant money from other Authorities become available later this year 2011 and;

3. Endorses the Remediation Assessment Proposals for 2011/13 as agreed with the Environment Agency and authorises Officers to begin to implement the measures as outlined in the report.

#### Reasons for decision

Cabinet received an update report on the New Years Green Lane Landfill site and made the necessary decisions to commence work with the Environment Agency in relation to the site.

#### Alternatives considered and rejected

None.

#### Officer to action:

Peggy Law - Planning, Environment, Education & Community Services

#### **Exempt Information**

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#### 404. VOLUNTARY SECTOR LEASING UPDATE

#### **RESOLVED:**

That Cabinet agreed the rents in the report, which were subject to negotiation with the voluntary sector organisations concerned, and instructed the Deputy Chief Executive and Corporate Director of Planning, Environment, Education and Community Services to commission the Borough Solicitor to complete the appropriate rent review memorandum and lease documentation.

#### Reasons for decision

Cabinet considered two applications from voluntary organisations and agreed to let/rent the properties concerned at less than the full market value in accordance with the Council's Voluntary Sector Leasing Policy.

#### Alternative options considered and rejected

Cabinet could have chosen not to apply the Voluntary Sector Leasing Policy.

#### Officer to action:

Greg Morrison - Planning, Environment, Education and Community Services

#### **Exempt Information**

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#### 405. ANY OTHER ITEMS THE CHAIRMAN AGREES ARE RELEVANT OR URGENT

None.

The meeting closed at 7:32pm

#### **IMPORTANT INFORMATION**

#### **DECISION AUTHORITY**

Meeting after Cabinet, the Executive Scrutiny endorsed all Cabinet's decisions and they therefore come into effect from 5pm, Friday 7<sup>th</sup> October 2011.

#### Changes to proposed decisions:

Officers should note that the Cabinet amended recommendations and thereby agreed revised decisions on the following items:

- Item 11 recommendation 4 amended
- Item 14 recommendation 2 removed

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#### Agenda Item 5

#### FOSTER CARERS' CHARTER

 Cabinet Member
 Councillor David Simmonds

 Cabinet Portfolio
 Deputy Leader of the Council and Cabinet Member for Education and Children's Services

 Officer Contact
 Linda Sanders, Social Care, Health & Housing

 Papers with report
 Appendix 1 - Foster Carers' Charter Appendix 2 - Hillingdon's Foster Carers' Charter

#### **HEADLINE INFORMATION**

#### **Summary**

The Government's Foster Carers' Charter sets guidelines on how local authorities, social workers and foster carers should work together in the future. This Charter is part of the Government's wider programme of reform to improve the entire care system – including reducing barriers and delays to adoption and improving the quality of children's homes. The overall aim is to make sure that all children in care have greater stability, less upheaval and a better chance at a stable family life.

While it is proposed that Cabinet agree with the principles of the Charter, this has also been translated into a local Charter, which the London Borough of Hillingdon will work towards.

#### Contribution to our plans and strategies

- Draft Placements Strategy
- Hillingdon Children & Families Trust Families

#### **Financial Cost**

No direct financial cost to the Council.

Relevant Policy Overview Committee Education & Children's Services

Ward(s) affected

ΑII

#### RECOMMENDATION

#### **That Cabinet:**

- 1. Adopt the prinicples of the Government's Foster Carers' Charter (Appendix 1).
- 2. Approve the local Foster Carers' Charter (Appendix 2), which sets out how the principles of the Government's Charter will be implemented and delivered locally.

#### **INFORMATION**

The London Borough of Hillingdon's Draft Placement Strategy for 2011-2014 is based on the premise that we will do all we can, where appropriate, to prevent children coming into care and where prevention is not possible or appropriate, it sets out the approach taken by the Council to provide the range and quality of placements required to meet the anticipated needs of children and young people who will be looked after over the next three years and beyond. The strategy is based on accepted commissioning principles and adopts the council's agreed commissioning framework.

The Council's objective is 'to increase the number of looked after children who are placed in a family setting within the borough or its immediate surroundings.' It is based on the principle that looked after children will, in appropriate cases, benefit from regular contact with their immediate and extended family. Furthermore, within their community they will have access to those services provided by local Hillingdon partnerships which are specifically designed to support vulnerable children and young people. Re-integration into a long term family setting or transition into young adulthood are likely to be more successful where the child or young person has an established support or service network in place.

Hillingdon's fostering service aims to provide safe and secure foster homes for our looked after children and young people by recruiting foster carers from a wide range of ethnic, cultural, religious and economic backgrounds. Our foster placements value diversity and reflect the needs of children requiring placements with respect to race, religion, gender, age, sexuality, disabilities and keeping siblings groups together. It provides placements for children and young people that maintain and build upon community links, in order that their identity, self-esteem and feelings of belonging are maintained.

The fostering service recruits, assesses and continuously develops foster carers to provide quality care to children through assessment and review processes that thoroughly evaluate carer's on-going competences and ability to care for children and young people. It provides continuous support via supervising social workers who offer advice and assistance to enable carers to provide quality care. It also monitors and supervises these placements in accordance with the National Minimum Standards, and Fostering Regulations 2011. It aims to ensure that all foster carers receive comprehensive training and development to enable them to carry out their role effectively and provide quality care to the children and young people they care for.

The Government's philosophy is that foster parents should be able to play the role of any parent looking after his or her own children and should be authorised to make everyday decisions about their fostered child wherever possible, within the legal framework, and Hillingdon endorses this ethos. Care Planning, Placement and Case Review (England) Regulations 2010, Fostering Services Regulations 2011, and associated statutory guidance, which came into force in April 2011, underline the importance of social workers liaising closely with parents, children and foster carers from the start of a foster care placement, to enable proper planning to take place about who does what.

In order to achieve the most appropriate care arrangements social workers have to work sensitively with carers to ensure that they are well prepared and clear about the responsibilities they are being asked to undertake. This is important for our children and young people as they often say they feel different from other children and sometimes they miss opportunities due to delays in getting the necessary consents from managers within Children's Services. The Hillingdon Foster Carers' Charter sets out our promise to work in partnership with foster carers

to ensure our children come first and that they receive the best possible care and that sensible, timely decision and arrangements are made to meet their every day needs.

#### Reasons for recommendation

The Hillingdon Foster Carers' Charter sets out the overarching principles and framework, which will enable the borough to improve and meet the needs of foster carers and children and work towards reducing bureaucracy, barriers and delays.

#### Alternative options considered / risk management

The Cabinet could agree not to sign-up to the national Charter or approve the local Charter.

#### **Comments of Policy Overview Committee(s)**

None at this stage.

#### **Financial Implications**

There are no direct financial implications arising from this report. For the current year, activity will be funded within existing resources. Any future budgetary implications that arise in relation to the delivery of the plan will be fully considered as part of the Council's medium term financial forecast (MTFF).

#### **EFFECT ON RESIDENTS, SERVICE USERS & COMMUNITIES**

#### What will be the effect of the recommendation?

The new plan is aimed at improving the outcomes for vulnerable children, young people and their families within Hillingdon. The plan aligns the priorities of the Children and Families Trust alongside the Council's priorities and those of Hillingdon Partners and the Sustainable Communities Strategy.

#### **Consultation Carried Out or Required**

The Charter was discussed at the Children in Care Council 'Step up' and was given strong support. If the Charter is adopted, in the first instance we would expect all new Carers to sign Charter and then roll it out to existing Carers.

#### **CORPORATE IMPLICATIONS**

#### **Corporate Finance**

There are no additional financial comments from Corporate Finance.

#### Legal

Under the Council's Constitution the Cabinet has the appropriate powers to agree the recommendations proposed at the outset of this report. There are no other significant legal implications arising out of this report to bring to Cabinet's attention.

#### **BACKGROUND PAPERS**

NIL

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## The Foster Carers' Charter

#### The Foster Carers' Charter

#### **Ministerial Foreword**

Too often we fail to appreciate the essential contribution made by the great unsung army of foster carers. With the majority of looked after children in England living with foster carers their role is invaluable and deserves to be recognised and supported. This Charter is an important step to do just that and make their job as straightforward and rewarding as possible.

With the growing pressures on the care system we need to attract new and dedicated prospective foster carers to come forward in tandem with making sure that existing carers are encouraged to carry on their caring responsibilities, and where appropriate, extend them. Yet, too often, I hear from foster carers that they feel isolated, insufficiently supported and even put upon. Whilst there are many examples of good practice amongst local authorities and agencies, the picture remains mixed – yet foster carers and the children they look after need to enjoy the experience of the best. A good quality foster placement helps achieve stability for the child, satisfaction for the carer and most important of all a vital element in helping often damaged children and young people to have a decent second chance at a safe and fulfilling childhood. It is a win win win situation which relies primarily on people and relationships and the Government is determined to do everything to promote it further.

It is essential therefore that foster carers are at the heart of arrangements for looked after children and must be fully engaged, supported and consulted at every stage. Without understanding how important the role of a foster carer is and what they can expect from others, it is so much harder to do the best for these children and young people. At the same time everyone needs to be focused on what is best for the most important people of all – the children in their care.

That is why I hope that all of you can endorse not only the Charter but also the spirit of the Charter. I hope the Charter can be used to unite foster carers, local authorities and fostering services around a shared understanding. I hope that it will give people the confidence to question and make demands when the 'spirit' of the Charter is not being met. I want you to build on the foundations of the Charter and make it work for you locally. This means being confident enough to come forward and talk about where things are working well and not so well, and share experiences and ideas on how to make things better and how ultimately we can achieve a better experience for those children and young people in the care system.

TIM LOUGHTON MP Children's Minister

#### The Foster Carers' Charter

#### **Children come first**

- Children in foster care deserve to experience as full a family life as possible as part of a loving foster family with carers who can make everyday decisions as they would their own child and without the child feeling that they 'stand out' as a looked after child.
- Children must be given every support to develop their own identities and aspirations, fulfil their potential, and take advantage of all opportunities to promote their talents and skills. Above all, they should be listened to.

#### Local authorities and fostering services must

- Recognise in practice the importance of the child's relationship with his or her foster family as one that can make the biggest difference in the child's life and which can endure into adulthood.
- Listen to, involve foster carers and their foster children in decision-making and planning, and provide foster carers and their foster children with full information about each other.
- In making placements be clear about the continuing care or support there will be (including for the child into adulthood), be sensitive to the needs of the foster carer and the child in making and ending placements and have contingency plans should the placement not work.
- Treat foster carers with openness, fairness and respect as a core member of the team around the child and support them in making reasonable and appropriate decisions on behalf of their foster child.
- Ensure that foster carers have the support services and development opportunities they need in order to provide their foster child with the best possible care. That includes liaising with local foster carers groups and seeking to respond to problems and disseminate best practice.
- Make sure foster carers are recompensed on time and are given clear information about any support, allowances, fees, and holidays they will receive including in cases of dispute with the service or during gaps in placements.

#### **Foster carers must**

- Provide positive adult role models, treat the foster child as they would their own child, and be a "pushy parent" in advocating for all aspects of the child's development, including educational attainment and physical and emotional health and wellbeing and co-operate fully as part of a team with other key professionals in the child's life.
- Support their foster child and do all they can to make the placement work. Take part in learning and development, use skills and approaches that make a positive impact and enable the child to reach his or her potential. Support their foster child to help them to counter possible bullying and discrimination as a result of their care status.

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# Our shared commitment

- The Fostering Service recognises the central importance of the child's relationship with their foster carer and acknowledges foster carers as core members of the team working with the child.
- Service provides carers with full information about a child before The Fostering Service, therefore, agrees to take part in a genuine partnership with the foster carers. This will include that the Fostering they are placed and that they are well prepared and clear about the responsibilities they are being asked to undertake – in every case.
- Dand balance of responsibilities between parents, social workers

  Cand foster carers must be considered during the initial placement

  Oplanning process and every looked after child review. The Fostering Service will 'delegate responsibility' (The Fostering unnecessary restrictions. Delegated authority will be covered in he Placement Plan, which is part of the Care Plan. The distribution Services National Minimum Standards 2011) to foster carers to enable them to treat their foster child as a good parent would treat an experience of family life and childhood as possible, without their own children, and provide them with opportunities for as full

Placement Plans will be reviewed regularly and will address a wider range of consents, decisions and tasks using the delegated authority support tool.

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- Before delegating particular tasks, decisions or consents to a foster carer, supervising social worker should be satisfied that foster authorised to do are discussed with them outside planning meetings carers are sufficiently trained and confident to take on these responsibilities. It is also essential that the things which they are and reviews to ensure that they make sense 'in practice'. However, no matter how competent and supported the carer is, the possibility that something may go wrong cannot be entirely eliminated.
- Foster carers will take responsibility for ensuring that they are happy with arrangements that the fostering agency has in place to deal with any potential issues or liabilities.

In signing this charter, Hillingdon's Fostering Service, the fostering agency (if applicable) and the foster carer(s) agree to reflect the spirit and intentions of the charter in their actions.

# Hillingdon's Fostering Service

Charter

**<b>The Foster Carers'** 

Independent fostering agency:	Foster carer/s	

# Hillingdon's Fostering Service

4S/06 Civic Centre, High Street, Uxbridge UB8 1UW Social Care Health and Housing Fostering Service

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October 2011 10947

HILLINGDON

www.hillingdon.gov.uk









## Foreword

The role of a foster carer is an invaluable one and I believe it should be recognised, valued and supported. Foster carers are key to the work we do in Hillingdon in supporting local looked after children and this Charter is, therefore, an

important step in making the job as uncomplicated and worthwhile as possible. The Foster Carers' Charter sets guidelines on how social workers and foster carers should work together in the future, with the overall aim of making sure that all children looked after have greater stability, less upheaval and a better chance of a stable family life.

In order to meet the needs of local children and do the best for them, our foster carers have to be central to all decision-making involving their care and should be clear what is expected of them in undertaking their role. Children are better served in relation to education, health and contact issues when placed locally and this is where we want them to the We, therefore, aspire to provide safe and secure local foster homes the children and young people looked after by the London Borough of Highgdon, by recruiting and retaining foster carers from a wide range of the children and young people shoot and comprehensive training to enable them to carry out their role effectively and provide quality care to the children and young people they care for.

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We want to work with foster carers to bring about a greater sense of shared understanding and a stronger sense of common purpose as well as to provide the opportunity for people to question and challenge when the essence of the Charter is not being met. This means open communication, sharing where things are working well and not so well, and the contribution of ideas on how to improve the life chances of the children and young people we care for I hope that we can all work together to support and implement the Hillingdon Foster Carers' Charter.

Clir David Simmonds, Deputy Leader of the Council and Cabinet Member for Education and Children's Services

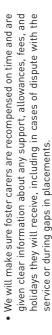
The Fostering Service wants to increase the in-house foster care provision to meet the needs of an increasingly, challenging and broad looked-after population in Hillingdon, and to ensure that existing foster carers are supported, feel appreciated, and are retained.

# Children come first

- Children in foster care will experience as full a family life as possible as part of a loving foster family with carers who can make everyday decisions as they would their own child and without the child feeling that they stand out as a looked after child.
- Children will be given every support to develop their own identities and aspirations, fulfil their potential, and take advantage of all opportunities to promote their talents and skills. Above all, they should be listened to.

## **Jur promise**

- We will recognise, in practice, the importance of the child's relationship with his or her foster family as one that can make the biggest difference in the child's life and which can endure into adulthood.
- We will listen to and involve foster carers and their foster children in decision-making and planning, and provide foster carers and their foster children with full information about each other.
- In making placements, our social workers and supervising social workers will be clear about the continuing care or support there will be (including for the child into adulthood), be sensitive to the needs of the foster carer and the child in making and ending placements, and have contingency plans should the placement not work.
- We will treat foster carers with openness, fairness and respect as a core member of the team around the child, and support them in making reasonable and appropriate decisions on behalf of their foster child.
- We will ensure that our foster carers have the support services and development opportunities they need in order to provide their foster child with the best possible care. That includes receiving support from our clinical psychologist, appropriate training and liaising with local foster carers groups, and seeking to respond to problems and disseminate best practice.



# What we ask of our foster carers

- To provide positive adult role models, treat the foster child as they
  would their own, and be a 'pushy parent' in advocating all aspects
  of the child's development, including educational attainment and
  physical and emotional health and wellbeing, and co-operate fully
  as part of a team with other key professionals in the child's life.
- To support their foster child and do all they can to make the placement work. Take part in learning and development, use skills and approaches that make a positive impact and enable the child to reach his or her potential. Support their foster child to help them to counter possible bullying and discrimination as a result of their care status.
   To promote the child growing up in a loving environment that can meet their developmental needs. This will include the child having
  - To promote the child growing up in a loving environment that can
    meet their developmental needs. This will include the child having
    an enjoyable childhood, benefiting from excellent parenting and
    education, enjoying a wide range of opportunities to develop their
    talents and skills, leading to a successful adult life.

•

- To agree that every child should have his or her wishes and feelings listened to and taken into account.
- To agree that each child should be valued as an individual and given personalised support in line with their individual needs and background, in order to develop their identity, self confidence and self-worth.
- In signing this charter, the fostering service, child's local authority and foster carer(s) agree to reflect the spirit and intentions of the charter in their actions.

### CONSIDERATION OF WHETHER AN ARTICLE 4 DIRECTION TO CONTROL HOUSES IN MULTIPLE OCCUPATION AROUND BRUNEL UNIVERSITY SHOULD BE INTRODUCED

**Cabinet Member** 

Councillor Keith Burrows

**Cabinet Portfolio** 

Planning, Transportation and Recycling

Officer Contact

James Rodger – Planning, Environment, Education and Community Services

Papers with report

Appendix 1 – Plan indicating roads with high concentrations of HMO's as suggested by private sector housing and indication of which wards those roads fall within.

#### **HEADLINE INFORMATION**

#### **Summary**

A number of University cities have taken advantage of recent changes in planning regulations so they can withdraw existing planning permitted development rights for student houses. This brings student housing, 3-6 bed Houses in Multiple Occupation(HMO's) under planning control, therefore enabling the number of HMOs in individual streets to be controlled for the benefit of other residents amenity.

The report explains why many Councils are considering Article 4 Directions. That Cabinet cannot make a decision on whether an Article 4 Direction should be considered; but it is considered that the issue merits a report to Full Council (who would have authority to decide whether an Article 4 Direction should be created around Brunel University.

Contribution to our plans and strategies

This report primarily relates to the impact of HMO's on Hillingdon being a clean and attractive Borough

**Financial Cost** 

To implement an Article 4 Direction would cost approximately £6,000 in publicity and public notices. On introduction there would be an on-going cost to the Council of approximately £20,000 a year to deal with the no fee planning applications and to monitor and enforce planning breaches.

Relevant Policy Overview Committee Residents' and Environmental Services Policy Overview Committee

Ward(s) affected

Brunel & Uxbridge South

#### **RECOMMENDATION**

That Cabinet recommends a report be written to Full Council to determine whether Hillingdon should have an Article 4 Direction to address student HMO issues raised by local residents in Uxbridge South and Brunel Wards.

#### Reasons for recommendation

Article 4 Directions to control Housing in multiple occupation (HMO's) are not yet active anywhere in the UK and it is unclear what the overall effects of creating an Article 4 Direction will be.

#### Alternative options considered / risk management

A possible alternative option would be to refer the matter to an Area Planning Committee. Almost universally other Councils who have created Article 4 Directions for student housing have referred the matter to their Full Councils and it is considered that full Council is the most appropriate decision making body in this case.

#### **Policy Overview Committee comments**

None at this stage.

#### **INFORMATION**

#### **Supporting Information**

- 1. The present situation is that planning permission is not required where there is movement from Class C3 (a dwelling house) to Class C4 (houses in multiple occupation with 3-6 un-related occupants living as a single household also known as HMO's) under the 'Town & Country Planning (General Permitted Development) (Amendment) (No 2) (England) Order 2010'. In plain English if 7 or more people share a building in separate rooms in a situation where the occupants are not related you need planning permission. But if 3-6 people who are not related live together, as a single household (such as a student house), then planning permission will not be required, it is classed as 'permitted development'. In practice the vast majority of student houses around Brunel University have 3-6 un-related students occupying them.
- 2. In October 2010 the Government, in response to demand to control the effects of 'studentification' in many UK cities changed the legislation that applies to Councils seeking to impose Article 4 directions to withdraw permitted development rights. A new Government Circular was launched with the objective of simplifying how Article 4 Directions could be made to control student HMO's. The intention being to give Councils the option of creating an Article 4 Direction if they felt 'studentification' issues were causing problems such that the Council thought it appropriate to withdraw permitted development rights.

- 3. Article 4 Directions are a tool whereby for a specific geographic area the Council can override normal permitted development rights and require a planning application for a specific type of development outlined in the Article 4 Direction. The process to create an Article 4 Direction is far from straightforward and involves extensive consultation and has compensation implications on the Council.
- 4. 'Studentification' is a term used to describe the adverse effects of large concentrations of students living in residential streets. There is various literature on the subject of what studentification is. Studentification is typically described in published literature as a real or perceived increase in; anti-social behaviour, in parking problems from various students in one property owning cars, dereliction and street blight such as rubbish being put out every day of the week, gardens being un-kept; and changes in overall character of an area such as 'student pubs,' off licences and takeaways proliferating. Studentification is' also referred to as affecting the social cohesion of individual streets where an 'us' and 'them', mentality can occur between students and non-students. The degree to which this occurs in individual streets is a subjective matter. Nonetheless there is empirical evidence that some streets such as Bosanguet and Barchester Close to name but two streets (see attached annexe for a map highlighting streets known to have a high concentration of HMO's) now have very large numbers of student HMO's and local residents are organising and attending public meetings to raise their concerns regarding studentification issues in Uxbridge South and Brunel Wards.
- 5. On the 9<sup>th</sup> May 2011 there was a public meeting in Cowley where approximately 40-50 local residents indicated their desire for action to deal with studentification issues which they felt were blighting their lives. At that meeting the implications of an Article 4 Direction were explained. It was clear at the meeting that a number of local residents felt that their wellbeing was seriously being affected by studentification.
- 6. The new procedure for introducing an Article 4 direction provides that where a local authority gives 12 month's advance notice of a Direction taking effect there will be no liability to pay compensation. If the Council provides less than 12 months notice it has to pay out compensation to landowners who wish to create HMO's. The landowners can claim for work already undertaken to make a HMO prior to the Article 4 Direction coming into effect. This could include architect fees, application fees, the costs of a depreciation in the value of the property, as well as the cost of abortive work such as structural works to alter the property. In terms of limiting compensation by way of a change to existing policies or creation of new, the Government has made it clear that it does not matter whether a local authority has an existing policy restricting HMO development for the purpose of compensation liability.
- 7. Local authorities will be liable to pay compensation in all instances where Article 4 directions are made with less than 12 month's notice. The difference in value of a property with or without HMO consent could be thousands/tens of thousands of pounds, as could the cost of compensating for abortive works. A financial risk assessment would therefore identify a risk of hundreds of thousands of pounds (or possibly even millions of pounds if an Article 4 direction covered all of Hillingdon) in compensation claims made against the Council. Other possible claims include anticipated future business profits likely under a specific contract. However, a claim cannot be made for anticipated profits of a business yet to be established. There is no real limitation to what can be claimed under the compensation regime and therefore with such possible financial implications no Council is realistically going to create an Article 4 Direction without giving 12 months

- notice.. A number of well known University cities are progressing Article 4 Directions to address studentification, not one of these is bypassing the 12 month notice period.
- 8. Separate from the planning process there are existing licensing arrangements (Under the Housing Acts., Hillingdon operates both Mandatory and Additional HMO Licensing. Due to the predominantly two-storey housing stock, Mandatory HMO Licensing (which only covers three storey properties) has been of limited use to this Council as an enforcement tool, so in March 2010 the Council received approval from the Government to introduce an 'Additional HMO Licensing Scheme'. This scheme covers two storey HMO's in the south of the Borough.
- 9. Hillingdon has operated an HMO Registration since September 1997, and with the introduction of the Additional HMO Licensing scheme in March 2010, this has proven to be an excellent tool in enabling the Council to deal with HMOs, and has encouraged landlords to come forward and meet the requirements of the new Housing Act 2004.
- 10. Hillingdon's experience of licensing is similar to that of neighbouring boroughs. Its effectiveness is in part due to its regulatory requirements. However, its main benefit in an expanding and volatile market is to discourage and remove marginal and non-compliant owners of the worst properties from the market. Although Licensing does not give the Council the ability to prevent properties becoming HMOs, officer experience has shown that the penalties that Licensing brings (£20,000 maximum fines) forces the less professional and least compliant landlords out of the market, having an indirect impact on controlling numbers of HMOs within specific streets. In summary, the Council has been increasingly effective in dealing with the worst landlords through HMO licensing. HMO licensing will not though prevent their being student HMO's around Brunel University. A number of the streets adjacent to the University now have over 50% student HMOs.
- 11. With Brunel University having undergone massive expansion, with over 17,000 students on campus, despite an increase in onsite halls of residence, the numbers of students living in private rented HMOs around the University has seen a massive increase, in particular in the last 5 years.
- 12. Council officer's have worked closely with Brunel University to produce a leaflet for students titled 'Living off Campus' to try and educate students in their behaviour and to assist them in integrating with local residents. Four years ago the Council set up a 'Brunel University Liaison Group' to act as a forum for Councillor's and officers to discuss studentification issues with the acting Pro-Vice Chancellor and University representatives. This led to the University Housing Department doing various initiatives to address student landlord/HMO issues. It also led to a part time Community liaison post being created by the University. These points must be stressed as it is very much the case that the Council and University have worked in partnership to try to deal with studentification issues over recent years.
- 15. Nonetheless despite all these efforts it is the case that until the recent economic downturn landlords were outbidding potential owner-occupiers when housing in some streets close to the University were sold. With several hundred students concentrated, as in Brunel Ward itself, in a few streets, it cannot be denied that studentification effects are extensively felt in some Hillingdon streets. These streets are in the opinion of officers exclusively located in Brunel and Uxbridge South Wards.

16. The latest statistics provided by the private sector housing team are:

**Borough Wide Data** 

Total Known HMOs
House Condition Survey Estimate (2008)
2310
Total Licensed
424

**Ward Data** 

Uxbridge South 342 Known HMOs - (271 Student) - 83 Licensed Brunel 220 Known HMOs - (174 Student) - 60 Licensed

17. Details of complaints regarding student HMO's are:

HMO Logged Complaint Data	2010-11	Since 2006	
Brunel	35	160	
Uxbridge South	46	224	

Note: This is Private Sector Housing data only and excludes complaints direct to Brunel University (who do deal with their share of resident's complaints) and the ASB Investigations Team who also deal with a large number of student HMO related complaints.

- 18. The starting position is if Hillingdon Council imposed an Article 4 Direction there would be a 12 month period where all landlords would know that planning regulations would be changed. There is no clear evidence that those Councils who are currently underway with 12 month consultation periods for Article 4 Directions have experienced changes in the way landlords operate (as no empirical data is yet available), but there is the real risk of a surge in HMO activity if a consultation commenced.
- 19. There has to be particularly strong justification for the withdrawal of permitted development rights relating to a wide area. It would neither be justifiable with respect to impact on communities or with respect to the financial impact on the Council (where applications have no fee) to cover the whole of Hillingdon with an Article 4 Direction. In some cases HMO's are an appropriate form of housing stock which best suits some sectors of the population. It should also be noted that of the 2000 approximate HMO's in Hillingdon less than 200 are north of the A40.
- 20. An Article 4 Direction will not allow the Council to refuse subsequent planning applications unless it has strong grounds to do so. Strategic policies at a National level and in the Mayor's London Plan support the growth of the education sector, preventing any form of student housing would run against this. Therefore in streets where there are not clusters of existing HMO's or a concentration of HMO's an Article 4 Direction should not be viewed as a tool that would result in planning applications being refused. Where an Article 4 direction can be effective is if accompanied by an adopted policy document that sets out a percentage figure (other Planning Authorities in University Cities are using 15% or 20% of properties in a street) whereby the Council considers that 'studentification' would arise if further HMO's are granted. If Hillingdon Council creates an Article 4 Direction it will need to follow this up with a new policy document that indicates this percentage figure. That percentage figure when combined with an Article 4 direction will give the Council the power to prevent any further HMO's in the streets worst affected by HMO's.

- 21. It is likely that landlords if an article 4 Direction is introduced would quickly realise that certain streets will not be worth purchasing properties on. Over time the effect would be to spread HMO's to other streets not currently adversely affected by HMO's. This needs to be considered when deciding whether to create an Article 4 Direction. There are many streets within Brunel and Uxbridge South Wards that have not yet been subject to studentification, so in the short term it is not anticipated that an Article 4 direction would result in other wards being affected, furthermore the students want to live close to the University.
- 22. The costs of creating an Article 4 Direction would be approximately £6000 (this is based on writing to all properties in Uxbridge South and Brunel Wards, firstly to consult on a proposed scheme and secondly to advise on the decision as well as press notices). As no fee can be requested for determining applications that result from an Article 4 Direction there would be running costs associated with an Article 4 Direction of approximately £20,000 per annum Officers estimate there is unlikely to be more than 50 new HMO's a year. Based on 50 HMO applications, with a number expected to be Committee items, this would equate to 25% of a full time planning officer case-load. The costing's for a planning officer include 'on-costs', the additional cost of enforcement cases (as an Article 4 Direction creates a new planning control to address breaches of), appeals cost and managerial and administrative input. This would all add up to approximately £20,000 per annum. There is no current budget set aside for this expenditure.. A full Council report would clarify as precisely as possible the expenditure implications of an Article 4 Direction.
- 23. The Local Authorities (Functions and Responsibilities) (England) Regulations 2000 states that approval to make an Article 4 Direction is not a Cabinet function and therefore must be carried out by full Council or another appropriate Council Committee. This report is therefore primarily to explain to Cabinet why officers consider the matter warrants a report to full Council.

#### **Financial Implications**

There are no financial implications from the recommendations in this report. Should full Council decide that an Article 4 direction should be created then there would be financial implications on the Council.

#### **EFFECT ON RESIDENTS, SERVICE USERS & COMMUNITIES**

#### What will be the effect of the recommendation?

It will enable Full Council to determine whether an Article 4 Direction should be created.

#### **Consultation Carried Out or Required**

If an Article 4 Direction is implemented then there would need to be extensive consultation. This report has been subject to consultation with the Private Sector Housing Team and the benefits or otherwise of an Article 4 Direction were discussed at a Public meeting on the 9<sup>th</sup> May 2011 set up by the Cowley Residents Association attended by the report writer and is the subject of an increasing amount of correspondence to Council officers.

#### **CORPORATE IMPLICATIONS**

#### **Corporate Finance**

Corporate Finance has reviewed this report and is satisfied that there are no direct financial implications arising from the recommendations in this report. However it should be noted that if full Council decide that an Article 4 direction should be created then there would be financial implications for the Council.

#### Legal

On 1 October 2010 the Town and Country Planning (General Permitted Development) (Amendment) (No.2) (England) Order 2010 came into force. The Order amends the 1995 (General Permitted Development) Order and makes a change of use from a use falling within Class C3 (dwelling houses) to a use falling within Class C4 (houses in multiple occupation) 'permitted development' – i.e. planning permission is no longer needed to do this.

Under Article 4 of the General Development Order (as amended) local planning authorities can make directions withdrawing permitted development rights from development listed in Schedule 2 of the same order. For all article 4 directions the legal requirement set out in paragraph (1) of article 4 of the GDO is that the local planning authority is satisfied that it is expedient that development that would normally benefit from permitted development rights should not be carried out unless permission is granted for it on an application. This report explains why, at present, it is not expedient to withdraw permitted development rights for change of use from C3 to C4.

The Local Authorities (Functions and Responsibilities) (England) Regulations 2000 states that approval to make an Article 4 Direction is not a Cabinet function and therefore must be carried out by Full Council.

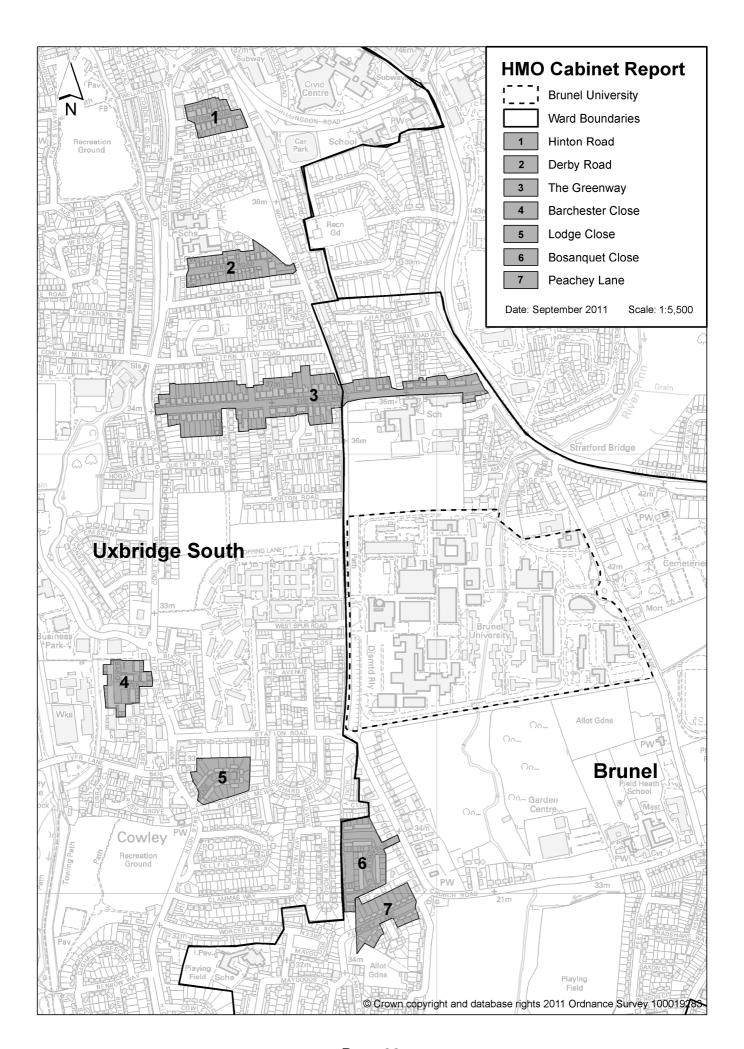
#### **Corporate Landlord**

The Corporate Landlord is in support of the recommendations of this report.

#### **BACKGROUND PAPERS**

Town and Country Planning (General Permitted Development) (Amendment) (No.2) (England) Order 2010

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#### CARERS COMMISSIONING PLAN 2011 -2015

Cabinet Member	Councillor Philip Corthorne
Cabinet Portfolio	Social Services, Health and Housing
Officer Contact	Paul Feven - Social Care, Health and Housing

The Carers Commissioning Plan 2011-2015

#### **HEADLINE INFORMATION**

Papers with report

#### Summary

The Carers Commissioning Plan 2011-15 has been developed by Social Care, Health and Housing with NHS Hillingdon in response to both the refresh of the National Carers Strategy in November 2010 and the modernised approaches in the provision of social care and the consequent impact on the support needs of carers.

The Council strongly recognises that the support and benefits provided by carers, helping local residents to live at home and in their local communities, is significant.

The Plan sets out how carers, as our partners in care, will be supported, using services which deliver valued outcomes - regardless of which organisation provides it – thereby making best use of partnerships and local community resources.

# Contribution to our plans and strategies

The Carers Commissioning Plan supports the objectives of the Council's Sustainable Community Strategy and the Transforming Adult Social Care: Personalisation and Commissioning Plan 2011-2015.

#### **Financial Cost**

All costs directly linked to proposals in the strategy will be met within existing budgets in Social Care, Health and Housing. Projects managed by Health partners will be covered from within health budgets

Relevant Policy
<b>Overview Committee</b>
\Marala\a\affaatad

Social Services, Health and Housing

Ward(s) affected

ΑII

#### **RECOMMENDATION**

That Cabinet approve the Carers Commissioning Plan and the direction of travel for services for carers in Hillingdon including a number of detailed actions included within the report

#### **INFORMATION**

#### Reasons for recommendation

- 1. The delivery of the Carers Commissioning Plan will:
  - Improve access to information, advice and guidance services
  - Increase the number of carers using personal budgets to purchase community based services of their choice
  - Increase the choice of services to support carers available from the council and its partners
  - Raise awareness of carers and young carers
  - Improve understanding in all agencies that carers have support needs in their own right
  - Encourage agencies to develop and/or promote carer support within their own services that will help carers maintain their own health and well-being
  - Work with organisations providing access to training and employment so that they are aware of the needs of carers
  - Support the process of enabling carers to access training and/or return to work, should they wish to do so.

#### Alternative options considered / risk management

2. The alternative is not to approve the Carers Commissioning Plan or require amendments prior to approval.

#### **Comments of Policy Overview Committee(s)**

3. None at this stage.

#### **Supporting Information**

- 4. The Carers Commissioning Plan 2011-15 has been developed in response to:
  - the refresh of the National Carers Strategy in November 2010
  - the move to personalised approaches in the provision of social care and the consequent impact on the support needs of carers
  - the need for ongoing development of support for young carers
- 5. Carers supporting vulnerable residents in Hillingdon save the council an estimated £442.6million each year in community care costs (Carers UK with the University of Leeds Valuing Carers 2011). By providing this support, carers allow vulnerable residents to carry on living in their own homes and communities, often at a personal cost in terms of their own health and financial position.
- 6. The number of carers is increasing, given an ageing population and an increase in the number of people with disabilities and serious illnesses living at home. It is estimated that there will be a need for the number of carers in the UK to increase by around 60% to 3.4 million carers by 2030 (*Carers UK It Could be You 2001*).
- 7. There is also constant change in the carer population. As some residents cease their caring role, others will find themselves with new caring responsibilities. Research undertaken by Carers UK estimates that every year at least 37% of the total number of carers in the

- population will be people that have started caring in that year. In Hillingdon that means around 8,500 people will be new to caring every year, some of whom will be young carers.
- 8. Young carers (children and young people aged under 18) are a particularly vulnerable group. Research indicates that extensive or inappropriate caring can result in negative outcomes for school attendance, educational achievement, and emotional and physical wellbeing.
- 9. SCHH and its partners recognise that carers play a key role in the successful delivery of the agenda outlined in the Transforming Adult Social Care: Personalisation and Commissioning Plan 2011–2015 and the Wellbeing Strategy 2010-2015. The direction of travel for more people being supported in their own homes is only achievable if carers are supported in their caring role.
- 10. The Carers Commissioning Plan sets out a framework for developing support that will allow those providing care to continue to do so for as long as they are able, whilst maintaining their own health and well-being.

#### The national context

- 11. The National Carers Strategy provides a framework for a 10 year programme where carers are :
  - respected as expert care partners with access to the integrated and personalised services they need to support them in their caring role;
  - able to have a life of their own alongside their caring role;
  - supported so that they are not forced into financial hardship by their caring role;
  - supported to stay mentally and physically well and treated with dignity; and that
  - children and young people are protected from inappropriate caring and have the support they need to learn, develop and thrive, to enjoy positive childhoods and to achieve against all the Every Child Matters outcomes.
- 12. The National Carers Strategy identified further priorities as part of a recent refresh:
  - Supporting those with caring responsibilities to identify themselves as carers at an early stage, recognising the value of their contribution and involving them from the outset in designing local care provision and in planning individual care packages
  - Enabling those with caring responsibilities to fulfil their educational and employment potential
  - Personalised support for carers and for those they support, enabling them to have a family and community life
- 13. In November, 2010, the Government announced that £400m over four years (2011-15) will be identified in allocations to Primary Care Trusts to spend on supporting carers.
- 14. The NHS Operating Framework for 2011/12 states that PCTs should pool budgets with local authorities and work with them and carers' organisations to publish policies, plans and budgets to support carers and make them available to people locally

- 15. The NHS Outcomes Framework 2011/12 has "enhancing the quality of life for carers" as an improvement area for the NHS, so PCTs will be monitored on their performance in this area. Carers will be asked as part of the GP survey to feedback on their quality of life.
- 16. Government has not given an annual breakdown of the £400m that provides details of allocations within each PCT. It should be noted that £100m has not been inserted into NHS budgets each year between 2011-15. Rather, PCTs are expected to identify this funding within existing allocations. There is no ring-fence applied to the allocation and PCTs with significant pressures on their budgets have had difficulty using this funding specifically for carer support
- 17. Organisations, such as The Princess Royal Trust for Carers and Crossroads Care continue to lobby at a national level with Ministers to ensure PCTs identify and invest funding in carer support.

#### **Developments in Hillingdon**

- 18. Hillingdon Council's Carers Strategy Group is the focus of partnership working between the Council, carers voluntary organisations representing carers and statutory agencies. Taking a lead from the Strategy Group, the council has been responsible for a number of positive developments for carers, including:
  - ✓ Contracting a centrally located carer support project from Hillingdon Carers to provide information, advice and guidance for all carers; regardless of age or the needs of the person supported; as part of this support, Hillingdon Carers helped families in Hillingdon claim £834,778 in benefit entitlements during 2010/11
  - ✓ Developing a Young Carers project which has provided support to over 600 young people since its inception and currently has 145 young carers registered
  - ✓ Providing training for carers to make sure they are safe in their caring role, such as use of attendant wheelchairs and lifting and handling, or to help with a better understanding of the diagnosis of the person they support
  - ✓ Appointing an elected member as Carer's Champion
  - ✓ Ensuring that residents receiving Carers Allowance are eligible to apply for a LeisureLink card
  - ✓ Developing a publicity campaign to help residents with caring responsibilities to recognise themselves as carers – posters and information cards in GP surgeries, pharmacies, libraries etc
  - ✓ Working with GP practices to raise carer awareness and signpost carers to support;

#### Views from carers

- 19. Making sure that the Council is aware of and responding to the views of carers is an ongoing process.
- 20. In March 2011, a focus group of carers was asked to identify key issues where improvement or development would make a real difference to them in their caring role.

- 21. The seven major areas for development identified are:
  - 1. Carers Assessments
  - 2. Respite (including well-being projects)
  - 3. Hidden Carers
  - 4. Information
  - 5. Benefits Advice
  - 6. Carer Involvement
  - 7. Young Carers
- 22. The Carers Strategy Group also carried out a self-assessment of carer support across Hillingdon to identify which services were working effectively and where there were gaps in carer support.
- 23. This self-assessment confirmed the priorities outlined by the carers focus group and additionally identified the need for:
  - a greater understanding of carer support needs in health provider services;
  - better information about debt management advice and support services;
  - improved awareness of the interdependency of care, where two frail or vulnerable people
    may be caring for each other (e.g. where a person with learning disabilities is caring for
    an ageing parent);
  - specific support for young adult carers (aged 18-24), particularly where educational, training or career aspirations are being affected by caring responsibilities
  - flexible approaches to support carers in employment

#### **Proposals within the Carers Commissioning Plan**

24. The Plan builds on Hillingdon's previous achievements and responds to the needs identified by carers.

#### Carers Assessments

**Carers Commissioning Plan desired outcome:** Carers have their needs assessed in a timely way and receive help to plan and implement the support they need

#### 25. The Council will:

- Consult with carers about their experience of the assessment process in order to inform future plans relating to assessments and outcomes for carers.
- Use information from carers assessments to inform the development of personalised approaches for carers to give them choice and control over the support received, including respite.
- Work with partners to ensure that staff are informed about key services and are able to signpost carers to relevant support where carers do not want an assessment
- Encourage carers to explore opportunities that will support them in their caring role and which utilises social networks and activities available in their local communities with the help of partners such as voluntary sector organisations and libraries
- Re-commission the Carers Assessor project which works with carers of people with significant and enduring mental health need to identify appropriate support.

#### Respite

**Carers Commissioning Plan desired outcome:** Carers are able to take a short break from their caring role, in a planned way, which supports them to stay well.

26. The Council and/or NHS Hillingdon (as appropriate) will:

- Develop fact sheets for carers which will explain respite services and provide information about how to access them. It will also include information about how to purchase services privately.
- Produce information for carers about personalisation and the support available.
- Ensure close working between commissioning and care management so that carers' need for a break is accurately reflected in support planning for service users
- Continue to use the TeleCareLine monitoring, alarm and response service to enable carers to leave the person they care for while they take a short break from their caring role
- 27. It is noted that the funding identified by Government for PCTs relating to short breaks (referred to in paragraphs 13-17 above) would make a significant difference for carers in Hillingdon. Partnership working, including the passporting of funds to SCHH, would enable an increased number of personalised budgets to be made to carers to arrange their own services. It is likely that NHS Hillingdon would wish to see any such funds used to assist those carers supporting a person with a significant health condition, such as dementia, stroke or Chronic Obstructive Pulmonary Disease

#### Identifying Hidden Carers

Carers Commissioning Plan desired outcome: Those people supporting a vulnerable person who is a Hillingdon resident are encouraged to identify themselves as carers and find relevant support

28. The Council and/or NHS Hillingdon will:

- Continue with the publicity campaign which helps people to identify themselves as carers and signposts to appropriate support
- Roll out Age UK Hillingdon's 'Just Ask' project which positively encourages those
  accessing their services to think about whether they have a caring role and, if so,
  signposts to the carer support project.
- Encourage and support health partners in developing their carer support processes, such as The Hillingdon Hospital Foundation Trust Carers Strategy
- Organise events such as the Carer Fair, so that carers and their support needs are better understood in the wider community
- Continue to work with GP practices to raise awareness of carers and their support needs
- Provide regular 'Carer Aware' training to statutory sector teams
- Develop an online training course which will provide information about who is a carer, carers' rights, local support and where to find further information.

#### Information

Carers Commissioning Plan desired outcome: Information is easy to find, relevant and available to carers in a timely manner, utilising all appropriate media

29. The Council and/or NHS Hillingdon will:

- Work with the Library Service to improve carer awareness and ability of staff to signpost to support and ensure information about carer support is available in all libraries in the borough
- Ensure the Carers Handbook is available on-line in a fact sheet format so that carers can easily access relevant information
- Ensure that information for carers, such as "A guide to a carer's assessment", is updated in fact sheet format and available online
- Review the Mental Health Carers Information Pack and make it available online
- Review the Hillingdon Mental Health Service Directory and publish it online
- Work with partners to ensure that information produced by other agencies includes links to information for carers.

#### Financial Support

**Carers Commissioning Plan desired outcome:** Carers have the support they need to maximise household income and reduce financial hardship

#### 30. The Council will:

- Monitor the financial support outcomes of the Carers Support Service, which assists carers and their families to maximise income and reduce financial hardship
- Develop a fact sheet for carers providing details of where they can obtain debt management advice.
- Work with partners to better publicise that financial advice is available from a number of organisations in Hillingdon, including Hillingdon Carers, Age UK and the Citizens Advice Bureau.

#### Carers Voice – Influencing Strategy

**Carers Commissioning Plan desired outcome:** Carers are involved in developing and monitoring services as well as influencing commissioning priorities

#### 31. The Council and/or NHS Hillingdon will:

- Continue to organise 'Carers' Speakeasy' sessions, focus groups and Listening Exercises to provide opportunities for carers to monitor and influence the development of services.
- Monitor the role of carers on a range of strategic delivery groups to ensure that carers are fully involved, consulted and supported at such meetings.
- Include carers on evaluation and interview panels for potential providers of services for carers, or posts relevant to the interests of carers, eg Carers Commisioner, so that the carers' view is integral to service development
- Continue to support the organisation of an Annual Carers Conference which is an accessible, enjoyable and highly regarded event for carers and professionals.
- Ensure that carers' information in the Joint Strategic Needs Assessment is robust, so that the needs of carers are routinely considered in strategic planning
- Promote the availability of support to encourage carers to become involved in strategic processes

#### Young Carers

**Carers Commissioning Plan desired outcome:** Young people with caring responsibilities are supported so that their life opportunities are not restricted and they do not carry inappropriate levels of caring.

- 32. The Council and/or NHS Hillingdon will:
- Undertake awareness raising presentations to staff across all agencies to encourage proactive approaches in recognising and supporting young carers and their families
- Review current processes and procedures in assessment and data collection to improve awareness of young carers in both adult and children's services
- submit a Memorandum of Understanding to a future meeting of Cabinet to provide a commitment to joint working practices which support young carers
- Ensure that those young people registered with SPACE, (a project supporting young people caring for a family member with a substance misuse problem), continue to receive support after the LAA Reward funding ends in March 2013. This continuing support will be provided through the Young Carers Project, funded by SCHH and provided by Hillingdon Carers.
- Ensure that young carers approaching the age of 18 are informed in a timely manner about the transfer of their carer support to adult services and provided with contact information relevant to their individual caring role.

#### **Financial Implications**

- 33. All costs directly linked to proposals in the strategy will be met from existing budgets within Social Care, Health and Housing. Projects managed by Health partners will be will be subject to the budget setting process of NHS Hillingdon. The tables below set out the spend on LBH projects for 2010/11 and budgets for 2011/12.
- 34. The Department of Health Gateway (ref 15434) published on 13<sup>th</sup> January confirmed that £400m nationally has been made available to PCT's for carers breaks over the period 2011/12 to 2014/15; for Hillingdon this should equate to approx £470k for this 4 year period. The Gateway states "PCT's should pool budgets with local authorities to provide carers' breaks, as far as possible, via direct payments or personal health budgets. For 2011/12, PCT's should agree policies, plans and budgets to support carers with local authorities and local carers organisations, and make them available to local people."

Table 1 - 2010/11- Residential Respite Spend by User Group and Service Area

Type of Service		2010/11 actual
Older People – Respite support purchased from the P&V sector	£	318,097
Specialist (People with a Disability) - Respite support purchased	£	170,492
from the P&V sector		
SCHH - Merrimans House	£	394,984
Total Respite spend	£	883,573

35. Respite is funded by the Residential and Nursing placements budgets held by Care Management Teams. There is no separate budget for purchased respite provision. Respite support for carers may be provided through a residential placement, replacement care in the home or day care or may be organised by the family directly through a Personal Budget or Direct Payment

Table 2 - 2010/11 - Carer Support Budget

Project		2010/11 total	2	2011/12 budget
Alzheimer's Society – Templeton Day Centre –	£	24,160	£	22,950
daytime service				
Crossroads - Respite at Home service	£	96,400	£	76,400
Enara – Respite at Home service	£	144,600	£	119,600
Hillingdon Carers – generic support service for	£	210,870	£	210,870
carers				
British Red Cross – Relaxation sessions for carers	£	13,050	£	13,050
Mental Health Carers Assessor	£	20,000	£	20,000
Rethink – all projects (specific support for carers of	£	73,010	£	69,360
people with Mental Health need				
LBH – Arts for Carers – respite break for carers	£	17,600	£	17,600
LBH Assessment and Care Management (for				
carers services)	£	112,270	£	112,270
Commissioning (Publicity/Carer Engagement)	£	6,830	£	6,830
TOTAL	£	718,790	£	668,930

Table 3 - 2010/11 - Young Carers Support Budget

Project			2010/11 total		2011/12
Hillingdon Carers Young Carers Project		£	68,780	£	68,600
SPACE Project		£	32,550	£	32,650
	TOTAL	£	101,330	£	101,250

<sup>36.</sup> There is no validated data published that allows a comparison between carer support spend in Hillingdon and other similar councils.

#### **EFFECT ON RESIDENTS, CARERS & COMMUNITIES**

#### What will be the effect of the recommendation?

37. In order to maximise the amount of time that carers are able to continue in their caring role, they will be identified and supported by local services across the borough and, where they meet the relevant criteria, will be given control on how money is spent on their support services through the use of personalised approaches.

#### **Consultation Carried Out or Required**

- 38. A mixture of approaches is used to engage with carers and organisations supporting carers:
  - The Carers Strategy Group meets every other month and focuses on developing services at a strategic level. This is the main body the Council consults on carers' issues.
  - listening exercises, where carers talk about their experience of council and health services in relation to a specific diagnosis, such as stroke
  - 'Carers Speakeasy 's essions to give carers the opportunity to talk about services and carer support with council staff;
  - Face-to-face and telephone surveys arranged by the Customer Engagement Team

 Focus groups, for example to identify the key requirements for carers in particular training sessions

#### **CORPORATE IMPLICATIONS**

#### **Corporate Finance**

39. Corporate Finance has reviewed this report and is satisfied that all costs directly linked to the Council's proposals in the strategy can be met within existing Social Care, Health and Housing base budgets. Projects managed by Health partners will be subject to the budget setting process of NHS Hillingdon.

#### Legal

- 40. The Council's duties to carers are largely set out in the Carers (Recognition and Services) Act 1995, as amended. This requires the Council to assess the individual needs of carers and provide support or services to enable them to act as carers.
- 41. This report sets out the Council's strategy for providing this support. Further legal advice will be provided on the Council's duties to individual carers as necessary.

#### **BACKGROUND PAPERS**

NIL





Social Care, Health & Housing

# Supporting carers – everyone's business

Hillingdon Council's and NHS Hillingdon's Commissioning Plan for Carers

2011 - 2015

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#### Introduction

The support carers give to Social Care and Health services 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 commissioning plan for carers shows how the council will deliver support for those who help Hillingdon's residents to live independently in the community.

Whilst this Plan was developed by the Social Care, Health & Housing Directorate (SCHH) in partnership with NHS Hillingdon, raising awareness of, and providing support to, carers is everyone's business.

There are challenges in delivering better outcomes in difficult economic times, but supporting carers with services that are of good quality and make a difference to their lives is important. Small changes in organisational approaches can make big differences for carers.

The Carers Commissioning Plan also covers the needs of young carers – children and young people aged under 18 who have caring responsibilities. Their caring role must be acknowledged and appropriate action taken to ensure they are not providing significant and inappropriate levels of care. Young carers must be firstly treated as children and young people who are able to fulfil their own aspirations.

This Commissioning Plan will offer a framework for delivering support for carers, not only in SCHH, but also in other council Directorates and partner agencies who may deliver services that will help carers,

This Plan includes priorities and targets for Health commissioners relating to carers. It is acknowledged that these are not yet fully developed and over the lifetime of this plan, the joint strategic planning process will better integrate and joint strategic targets will be reflected in the annually reviewed Commissioning Intentions. Further details of support commissioned locally by the NHS for carers at the time of producing this Plan can be seen in Appendix 1 – Carers Plan - Health Input Status Summary.

A number of other strategies and plans will support the contents of this document and the development of targets that will support carers in their own right. Amongst these are:

- Transforming Adult Social Care: Personalisation and Commissioning Plan 2011-2015
- Disabilities Commissioning Plan 2011 2015
- Older People's Commissioning Plan 2011 2015

- Adult Mental Health Commissioning Plan 2011 2015
- Transition Strategy 2011 2015
- Autism Strategy 2011 2015
- Disabled Children's Action Plan 2011 2013
- Children and Families Trust Plan 2011-2014

All of these documents can be obtained by contacting the Social Care, Health and Housing Commissioning Team on 01895 277051.

#### **Executive Summary**

A carer is someone who looks after a relative, friend or neighbour with a disability, a long-term illness, mental health difficulties, substance misuse issues or who is older and frail.

Carers supporting residents in Hillingdon save the council an estimated £442,600,000 each year in community care costs. By providing this support, carers allow vulnerable residents to carry on living in their own homes and communities.

SCHH and its partners recognise that carers will play a key role in the successful delivery of the agenda outlined in the Commissioning Plan for Adult Social Care. The Carers Commissioning Plan sets out a framework for developing carer support that will allow those providing care to continue to do so for as long as they are able, whilst maintaining their own health and well-being.

As part of the development of this Plan, a focus group of carers was asked to identify priorities for improvement. Seven key areas were identified where further development would be beneficial to carers:

- 1. Carers Assessments
- 2. Respite
- 3. Hidden Carers
- 4. Information
- 5. Benefits Advice
- 6. Carer Involvement
- 7. Young Carers

Table 1 summarises the commissioning priorities and the changes that are expected by 2015. Changes in legislation are expected during the lifetime of this Plan and this is likely to result in commissioning priorities being revised. The changes summarise in Table 1 below are based on what is currently known.

# Table 1 Changes Expected from the Carers Commissioning Plan by 2014/15

Commissioning Priority	Expected Change 2014/15
Carers Assessments:	<ul> <li>The Government may make changes</li> </ul>
Carers have their needs assessed in a	to the legislation relating to carers
timely way and receive help to plan and	assessments and SCHH will
implement the support they need	implement this as required.
	<ul> <li>Information relating to carers</li> </ul>
	assessments will be updated and
	available online.

Information gathered through carers assessments will inform the development of modernised approaches giving carers greater choice and control over the support they receive. Carers are supported in utilising social networks and finding and using activities available locally. There is greater awareness of available carer support services, enabling better signposting to support. A Carers Assessor in the voluntary sector will work with carers of people with significant and enduring mental health need to identify relevant support Fact sheets will be developed to Respite: provide information about respite Carers are able to take a short break from their caring role, in a planned way, services and personalisation. which supports them to stay well Carers needs are identified and accurately reflected in planning support for service users. Carers are better informed about the TeleCareLine service which can support them in taking a break from their caring role Hidden Carers: Ensure that there is regular publicity to help people identify themselves as Those people supporting a vulnerable person who is a Hillingdon resident are carers. encouraged to identify themselves as Work with partners (such as Age UK, carers and find relevant support The Hillingdon Hospital Foundation Trust) to encourage the development of processes which identify carers. Organise events that raise awareness of carers, such as the annual Carer Fair. • Provide on-going presentations or workshops for staff which raises awareness of carers. The Council's website will provide up to date information for carers. Develop an on-line learning module, available on the Council's website, which will help to raise awareness of There will be on-line information for Information: Information is easy to find, relevant and carers on the council's website. available to carers in a timely manner, including the Carers Handbook and the utilising all appropriate media Mental Health Carers Information Pack. Libraries will have access to all relevant information for carers and

Financial Support:	<ul> <li>skills will be developed to better signpost carers to support.</li> <li>SCHH will work with partners to ensure that information provided by other agencies includes links for carers.</li> <li>The Carers Support Project</li> </ul>
Carers have the support they need to maximise household income and reduce financial hardship	commissioned by SCHH will assist carers in maximising income.  • A fact sheet will be available providing details about access to debt management advice.
Carers Voice – Influencing Strategy: Carers are involved in developing and monitoring services and have opportunities to raise issues that affect commissioning proposals	<ul> <li>Carers 'Speakeasy' sessions provide an opportunity for carers to speak with commissioners.</li> <li>Carers are encouraged to engage with the commissioning process and represented on strategic planning boards.</li> <li>Carers assist with tendering and appointment processes.</li> <li>The JSNA includes robust information about carers to assist with strategic planning.</li> </ul>
Young Carers: Young people with caring responsibilities are supported so that their life opportunities are not restricted and they do not carry inappropriate levels of caring. Staff in all agencies to be pro active in recognising and supporting Young Carers and their families	<ul> <li>Awareness of young carers is improved and this is measured through referral recording.</li> <li>A Memorandum of Understanding will be developed to provide a commitment to joint working practices across the Council and partners which is supportive of young carers.</li> <li>The SPACE project will be become part of the generic Young Carers Project, and continue to support young people caring for a family member with a substance misuse problem.</li> <li>Young carers approaching 18 years of age will be informed about the transfer of support to adult social care services.</li> </ul>

3

#### Social Care, Health and Housing Mission

#### The Social Care, Health and Housing Future Mission

#### The Mission for Social Care, Health and Housing

Guiding the development of this plan is the Social Care, Health and Housing (SCH&H) mission and supporting principles. The mission is:

"Enabling residents in need to live safe, healthy and independent lives"

To deliver this mission SCH&H will:

- Improve outcomes for children, young people and families in need or at risk through coordinated, evidence-based services.
- Provide support tailored to our residents' needs through integrated working across social care, health and housing services
- Make best use of public and community resources

#### **Supporting Principles**

SCHH will embrace the enabling role of local councils through applying the following five supporting principles:

#### 1. Choice and control

We will ensure that users of services are in the driving seat in deciding how their desired outcomes will be achieved within available resources.

#### 2. Safe, healthy and independent lives

We will shift from providing long-term institutional services to providing timelimited support which helps people regain independence in the community.

#### 3. Supportive local communities

We will achieve sustainable change by supporting individuals and communities to help themselves and each other.

#### 4. Different for less

We will use up to date, evidence based approaches to services which are more efficient and effective.

#### 5. Working together

The whole community has a role to play in keeping people safe, healthy and independent. Through integrated working with health and other partners, we will commission services that draw on existing networks and community capacity.

#### Adult Social Care: Personalisation and Commissioning Plan - what we will do

A number targets have been included in the Adult Social Care: Personalisation and Commissioning Plan which will have useful outcomes for carers, including:

- **Information, advice and guidance** provided directly, or by external providers such as the voluntary sector;
- **Preventative services** to help residents lead active lives, reduce poverty and support independence;
- Personal Budgets to allow creative support planning and increased choice and control for residents;
- TeleCareLine to provide sophisticated monitoring for Hillingdon residents to maximise independence;
- Safeguarding which supports people at risk to live free from harm and exploitation
- Modernise daytime services by moving away from buildings-based services and supporting individuals to access services of their choice;
- Develop dementia care services and complex care support;
- Homes that are suitable and hazard-free for the people living in them, such as helping with energy efficiency and delivering housing adaptations

Also included in the Adult Social Care Personalisation and Commissioning Plan is a specific target relating to carers:

 Specialist services for carers to support them in their caring role and in their everyday lives.

This will mean, for example:

- that day respite care and residential respite care will continue to be provided when identified as a result of a carer's assessment.
- the council will promote choice in the provision of short break opportunities for carers, including respite at home options
- tenders will be parcelled into smaller lots to encourage a broader range of providers to enter the local market.
- Individual budgets will be offered directly to carers in their own right, including in the form of Direct Payments.

#### **Section**

4

#### Who is a carer?

A carer is someone who looks after a relative, friend or neighbour with a disability, a long-term illness, mental health difficulties, substance misuse issues or who is older and frail.

The type of support given varies – it could be providing physical help such as personal care, emotional support or helping with day-to-day issues such as medicines, money and shopping. The person supported may be an adult member of the family, a child with special needs, a neighbour or friend.

Caring can vary from a few hours a week to a full time commitment and carers are not paid for their role. Some carers may receive carer's allowance – this is a benefit, not a wage.

It is also important to remember that some people providing care are themselves vulnerable and receiving social care services, for example an adult with a learning disability may be supporting an elderly parent.

Although they may also use the term, and play a valuable role, the following people are not classed as carers for the purposes of this strategy, as they are not those referred to in legislation:

- those who are paid to provide care this includes home care workers and personal assistants;
- people who provide care in a voluntary capacity through an organisation;
- people who offer respite care and are paid for this;
- Foster carers and carers in the Adult Care Scheme

#### Who is a young carer?

A young carer is a young person (under the age of 18 years) who is affected by chronic illness or disability of a family member and who provides them with care and support. Physical disability, learning disability, mental illness and substance misuse are the primary categories of illness/disability likely to affect young carers. Young carers will often be responsible for their own care (and sometimes the care of siblings) as well as carrying out significant caring tasks usually undertaken by an adult.

Most young carers care for parents or siblings, but they may also care for grandparents, other family members or friends. Young carers include children who are very young. It is important to note that whilst most young carers are secondary carers there are some who are the primary carer and have serious caring responsibilities.

#### Why is the word 'carer' important?

Anyone can be a carer and in the 2001 Census, around 1 in 10 Hillingdon residents identified themselves as such. However, many people do not see themselves as carers at all – rather husband, wife, family member or friend, supporting someone who needs some extra help.

Research undertaken by Carers UK indicates that every year at least 37% of the total number of carers in the population will be people that have started caring in that year. In Hillingdon that means around 8,500 people will be new to caring every year.

'Carer' is a keyword – not a label. It is a word that can help people find relevant help and advice. It is also a useful description for residents who have certain statutory rights and whose opinions and needs should be taken into account when planning services to support them.

#### Section

**-**

#### **National and Local Policy Context**

#### **National context**

In 2008 the National Carers Strategy was published, entitled "Carers at the heart of 21st-century families and communities". This Strategy provided a framework for a ten-year programme where:

- Carers will be respected as expert care partners and will have access to the integrated and personalised services they need to support them in their caring role;
- Carers will be able to have a life of their own alongside their caring role;
- Carers will be supported so that they are not forced into financial hardship by their caring role;
- Carers will be supported to stay mentally and physically well and treated with dignity;
- Children and young people will be protected from inappropriate caring and have the support they need to learn, develop and thrive, to enjoy positive childhoods and to achieve against all the Every Child Matters outcomes.

During 2010 the government consulted on, and refreshed, the national strategy and published "Recognised, valued and supported: Next steps for the Carers Strategy 2010". This document restated the government's recognition of carers and the vital role they play. It further identified four priority areas:

- Supporting those with caring responsibilities to identify themselves as carers at an early stage, recognising the value of their contribution and involving them from the outset in designing local care provision and in planning individual care packages
- Enabling those with caring responsibilities to fulfil their educational and employment potential

- Personalised support both for carers and those they support, enabling them to have a family and community life
- Supporting carers to remain mentally and physically well

The 2001 Census showed a total of 175,000 young carers in the UK. Research relating to young carers indicates that an extensive or inappropriate caring role can result in negative outcomes for school attendance, educational achievement, and emotional and physical wellbeing. It is estimated that 27% of Young Carers aged 11-18 are experiencing educational difficulties and one in five miss school because of caring responsibilities.

Young Carers are not a homogeneous group. Their reasons for taking on such a role are often complex, and their needs vary widely. National consultation found that young carers said consistently that their top priority was better support for their family and the person they care for. They expressed particular concerns about the lack of high quality and reliable support, feeling they had little choice other than to fill the gap.

The consultation also found that many young carers didn't want to stop caring altogether. However they do want real choices about how much care they provide, and for how long, so as to have a life of their own.

#### Local context

#### Vision for carers:

Carers provide the greater part of community based care. The vision for the carers' services is that

Carers in Hillingdon are recognised as expert partners in care and have access to timely support that will assist them in their caring role and allow a balance between caring and having a life outside caring.

#### Why do we need a Carers' Commissioning Plan?

Hillingdon Council and its partner organisations, including Health and the voluntary sector, understand and value greatly the contribution carers make to the well-being of vulnerable people.

The scale of support provided by carers which helps Hillingdon residents to live at home, in their local communities is significant. Whilst only indicative, the Carers UK report *Valuing carers – calculating the value of carers' support (2011)* produced with the University of Leeds, estimates that the economic value of the contribution carers make nationally to be in the order of £119 billion. In Hillingdon, that figure is estimated at £442m based upon over 25,000 local carers.

This Carers' Commissioning Plan will help the council, local health services, voluntary and private sector providers and the wider community in Hillingdon understand the extent of care provided and how both adult and young carers can be supported.

#### How have we arrived at this Commissioning Plan?

Priorities for the development of support for carers are influenced by:

• Statutory obligations for carers – the services that *must* be provided

- The provisions of the 1995, 2000 and 2004 Carers Acts and the 2010 Equality Act
- The provisions of the 1989 and 2004 Children Acts and the National Service
   Framework for Children, Young People and Maternity Services Children Act 2004 –
   Young Carers are an "at risk" group and need support
- The provisions of the 2008 National Carers Strategy and 2010 refresh.
- The proposals of the Law Commission in relation to carer support
- The priorities of the Hillingdon Health & Well-Being Board
- Resources for carer support
- What we have already achieved what is working well and what needs to be reviewed

During 2010/11 carers and the Carers Strategy Group were asked to identify those areas needing improvement and have helped to shape the commissioning priorities of this Plan. More information is given in Section 7 – Consultation.

Of great significance in determining how services might look in the future is the personalisation agenda. The way forward for meeting social care needs encompasses a process which may be referred to as 'personalisation', 'individual budgets' or 'self-directed support'. SCHH is becoming an enabler, rather than a provider or purchaser of services.

'Traditional' buildings-based services are lessening and other options are developing to meet people's changing expectations. There is an increasing emphasis on thinking more about activities or support available in the community to meet peoples' needs - not just 'social care' services.

This new direction offers many opportunities, as personal budgets will allow people to have control over the services they choose to meet their needs. This Commissioning Plan recognises the concerns raised by some carers about managing a personal budget, finding relevant services and knowing whether they are of good quality. The council will develop information about personalised approaches specifically for carers and, in developing Commissioning Intentions, will identify opportunities to develop support mechanisms which will assist carers in using personal budgets effectively.

#### **Young Carers**

The precise number of young carers in Hillingdon is not known with any degree of accuracy, but at the 2001 Census, 687 young people identified themselves as carers providing a range of support.

Table 2
Age range of young carers in Hillingdon and the number of hours support being provided each week

(Source: Census 2001):

Hours of care per week	Aged 5 to 7	Aged 8 to 9	Aged 10 to 11	Aged 12 to 14	Aged 15	Aged 16	Aged 17	Aged 18	Total Young Carers
1 to 19 hours	17	29	72	177	85	76	69	58	583
20 to 49 hours	3	4	7	17	11	9	5	4	60
50 or more hours	5	6	4	10	4	5	6	4	44
	25	39	83	204	100	90	80	66	687

This Plan also recognises that many young carers remain hidden and therefore unsupported, as they may be reluctant to share information with teachers or social workers, or because professionals from various agencies fail to recognise the young person's caring responsibilities. Both this lack of skill in recognising young carers, and little awareness of the services available to help them, means that support needs are unrecognised and not recorded. Young carers will not be routinely directed to services that can help.

Some young carers may be 'in hiding', for fear of what might happen to them or their families if they were 'discovered'. Many young carers are only identified, and referrals to services made, when a crisis occurs and the child is thought to be at risk. This Plan acknowledges the need to support young carers before reaching crisis, to ensure their life opportunities are not compromised by their caring responsibilities.

Young carers are not a homogenous group and identifying them can be difficult if they are reluctant to disclose their situation to their friends, school, or other professionals because they:

- are worried they will become stigmatised or bullied
- fear they won't be taken seriously
- feel resentful, angry or guilty towards their parent or sibling
- feel protective and loyal to their parent
- worry that they might be taken into care, or their parent might be taken into hospital, or arrested
- are embarrassed or ashamed
- are suspicious of outside help

Factors attributing to the under-identification are:

- a. Lack of awareness by a professional in contact with that child and/or family
- b. Poor information systems for collating data about the number of young carers
- c. Young carers and their families reluctant to be identified
- d. Children/young people not seeing themselves as a young carer

All of these influencers will be taken into account when the Carers Commissioning Intentions are being developed each year.

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#### **Hillingdon Profile**

#### **Joint Strategic Needs Assessment: Key Data**

The Office of National Statistics (ONS) estimated Hillingdon's population at 253,200 in 2008. The population of Hillingdon is expected to grow by 5% in 5 years and 9.7% in ten years. The increase in recent years has been mainly due to natural growth; and to a smaller extent due to net migration into Hillingdon.

The Greater London Authority (GLA) 2007 low projections estimates that in 2009, ethnic minorities in Hillingdon accounts for 30% of the population, a 10% increase from 20% reported in the 2001 census. Of the 30%; Asians account for 19%, Black British 7% and Chinese and other, 4%. Hillingdon is expected to become more diverse, with greater diversity in the younger age groups where the ethnic minorities in this age group expected to increase to 50% by 2016 (GLA 2007 Ethnic population projections). Population of ethnic elderly is expected to grow especially in the south of the borough.

Over the lifetime of this plan and beyond Hillingdon is going to experience an ageing population and an increase in the number of people with conditions associated with older age, such as dementias and stroke.

#### Carers and the JSNA

In the 2001 Census approximately 23,000 people identified themselves as carers – around 10% of the whole population. Unfortunately, we have very little other empirical information about carers and their support needs.

The data in the JSNA will be central to local strategic planning and commissioning decisions. It is important, therefore, that the content relating to carers is robust enough to inform such decisions. During the lifetime of this plan the Commissioning Team, in partnership with Health colleagues, will expand and improve the data by:

- monitoring statistical information relating to carers that will improve the content of the JSNA;
- researching projections available from reliable national sources, including, for example, population projections and the need for care. An example of this would be:
  - the number of people over 85 will rise by 50 per cent in a decade (Office for National Statistics, 2007);
  - there will be a 30% increase in adults in England with a care need by 2026. (PSSRU 2008);
  - There will be an increase of more than 2.9m people with disabilities by 2040.
     (Department of Health, 2009);
  - Demographic projections point to the need for the number of carers to increase by around 60% (or 3.4 million carers) by 2030. Three in five people will become a carer at some point in their life. (Carers UK 2001)

- bringing together the views and experiences of carers and identify areas where change will have a positive impact on their caring role. These 'community voice' exercises will include carers of people with dementia and carers of people with stroke.
- views from young carers

### Section

7

#### **Use of Resources**

#### Table 1 - 2010/11- Respite Spend by User Group and Service Area

Type of Service		2010/11 total
Older People - Purchased services	£	318,097
Specialist (People with a Disability) - Purchased services	£	170,492
SCHH - Merrimans House	£	394,984
PCT - 3 Colham Road	£	197,662
Total – In-house services	£	1,081,235

#### Table 2 - 2010/11 - Carer Support Budget

Project		2010/11 total
Alzheimers Society – Templeton Day Centre	£	24,160
Crossroads - Respite at Home service	£	96,400
Enara – Respite at Home service	£	144,600
Hillingdon Carers – all projects	£	210,870
British Red Cross – Relaxation for Carers	£	13,050
Making Space – Mental Health Carers Assessor	£	20,000
Rethink – all projects	£	47,760
LBH – Arts for Carers	£	17,600
LBH Assessment and Care Management		
(for carers services)	£	112,270
Commissioning (Publicity/Carer Engagement)	£	6,830
TOTAL	£	693,540

#### Table 3 - 2010/11 - Young Carers Support Budget

Project			2010/11
Hillingdon Carers Young Carers Project		£	68,783
SPACE Project		£	32,550
	TOTAL	£	101,333

There is no validated data published that allows a comparison between carer support spend in Hillingdon and other similar councils. During the lifetime of this Plan the

council will propose to the West London Alliance that a benchmarking exercise be undertaken to determine spend by other councils on supporting carers.

The proposals within the Carers Commissioning Plan will be delivered within available resources, both by the council and NHS Hillingdon.

#### Performance Against Key Indicators

The Council collects data relating to its performance in specific areas and this includes assessment of carers and the support provided after assessment. Details of these can be found in Appendix 2.

There are no statistics available for the number of young carers identified by schools or through adult social care services.

#### What the performance information tells us

The performance information shows us that the number of carers assessments completed is increasing – the 2010/11 figure is over 75% higher than 2009/10.

It is noted that total number of assessment /reviews undertaken jointly (that is with the cared-for person) is much higher in 2010/11 than 2009/10. There is a concern that this may mean that detailed information about carer support need is not being recorded, as this information is central to strategic commissioning decisions.

Recording of services provided after assessment seems problematic within existing systems and the Commissioning Team are working with colleagues to improve this.

It should be noted that these Performance Indicators relate to services arranged/provided directly by SCHH and does not include those services commissioned with voluntary sector providers. At the time of writing, Hillingdon Carers had 3,864 carers registered, Rethink had 250 carers on their mailing list and the Alzheimers Society were providing information and advice to 127 carers in Hillingdon. Over 130 carers were being supported through Respite at Home services.

Further information on the activity within the Young Carers Projects can be found in Appendix 3.

#### Section

#### Consultation

As part of the development of this Commissioning Plan, a focus group of carers was asked to identify their priorities – what developments or improvements would make a difference for them in their caring role.

It is noted that, whilst improvements could be made, carers in this focus group said that the range of services currently available to them in Hillingdon is of good quality and greatly appreciated.

The Carers Strategy Group - a multi-agency group comprising carers, voluntary sector organisations, health providers, the council's Carers Champion (an elected Councillor) and officers from the council - carried out an assessment of carer support across Hillingdon, to identify which services were working effectively and where there were gaps in carer support.

This self-assessment exercise confirmed the priorities outlined by the carers focus group. Additionally, it identified the need for:

- a greater understanding of carer support needs in health provider services;
- better information on debt management advice and support services;
- improved awareness of the interdependency of care, where two frail or vulnerable people may be caring for each other. An example of this would be a person with learning disabilities caring for an ageing parent;
- specific support for young adult carers (aged 18-24), particularly where educational or career aspirations are being affected by caring responsibilities
- flexible approaches to support carers in employment

The Commissioning Team also consulted with Assessment and Care Management Teams, to identify their issues regarding carer support.

The seven areas identified for development are:

- 1. Carers Assessments
- 2. Respite (including well-being projects)
- 3. Hidden Carers
- 4. Information
- 5. Benefits Advice
- 6. Carer Involvement
- 7. Young Carers

The Carers Commissioning Plan will look at specific areas of opportunity within these priorities and will provide detail of how developments within these specific targets will be delivered in the Carers Commissioning Intentions.

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#### Direction of Travel - carer support

#### What has been achieved so far?

When developing strategic plans, it is easy to overlook what has been achieved so far. Some of the services that have been developed to assist carers include:

- ✓ Contracting of a centrally located carer support project with Hillingdon Carers, to provide information, advice and guidance for all carers;
- ✓ 59% of the Carer Support Budget is spent on short breaks, such as Respite at Home and well-being services;
- ✓ The Carers Handbook is available in hard copy and online;
- ✓ The Hillingdon Hospital Foundation Trust has improved carer awareness with staff and developed a Carers Strategy;
- ✓ The Leader of Hillingdon Council appointed an elected member as Carers Champion;
- ✓ TeleCareLine offers an integrated monitoring, alarm and response service which can provide support that helps a carer in having a life of their own;
- ✓ Training for carers to make sure they are safe in their caring role, such as use of attendant wheelchairs and lifting and handling;
- ✓ An annual Carers Conference which allows carers and professionals to work together;
- ✓ The Carers Emergency Plan has been developed with the help of carers, which allows carers to record information about the person care for in one place, should they suddenly be unable to provide care, due to an accident, for example:
- ✓ Wellness Response Action Plan (WRAP) workshops developed for carers of people
  with mental health need, to help them with their own health and well-being;
- ✓ Publicity campaign to help residents with caring responsibilities to recognise themselves as carers – posters and information cards in GP surgeries, pharmacies, libraries. etc;
- ✓ Working with Hillingdon LINk to involve carers in the development and monitoring of services;
- √ 'Carers Speakeasy 's essions to give carers the opportunity to talk about services and carer support with council staff;
- ✓ Working with GP practices to raise carer awareness and signpost carers to support;
- ✓ Hillingdon Carers helped families in Hillingdon claim £834,778 in benefit entitlements during 2010/11;
- ✓ The Hillingdon Young Carers project has supported over 600 young people since its inception and currently has 145 young carers registered.

#### What the Carers Commissioning Plan will achieve

The purpose of this plan is to set out what SCHH wants to achieve with its partners to support carers and will:

 provide a framework for promoting the health and well being of carers across all sectors and organisations

- help agencies in Hillingdon work towards common goals for carer identification and support when developing/delivering services
- seek opportunities to develop a greater role for social networks and local communities
- maximise the benefit of the finite resources available in health and social care
  to support carers, so that commissioned services meet carer priorities and have
  a positive impact which improves the life of carers
- seek opportunities to build on projects that are already delivering good outcomes for residents
- raise awareness of young carers, their support needs and the potential impact
  of their caring role, to minimise the adverse effects of their caring role on their
  health and development

Over the lifetime of this Plan, Services supporting carers will be kept under review as both the role of SCHH and the needs of carers change.

#### **Measuring success**

The council will measure success in delivering this commissioning plan by:

- looking at a number of specific targets:
- Increasing the number of people supported by Social Care to live at home to 3,350 by 2015
- Improving the level of satisfaction of service users and their carers with the level of choice and control they have over the services they receive
- Increasing the % of residents receiving an individual carers assessment
- Maximising the number of carers using personal budgets
- Maintain high levels of satisfaction with Respite at Home services and the generic Carers Support Service

#### For young carers:

- percentage of schools identifying young carers
- Young carers attendance at school, has attendance improved / increased
- Young carers attainment at school, has attainment improved / increased
- percentage of young carers satisfied with the services they receive
- number of young carers identified through CAF
- number of young carers accessing youth groups (specific young carers support groups and non specific)
- percentage young carers satisfied with the support they receive
- percentage young carers' who say they could access the right support when/ if they need it.
- Young carers get good quality information when they need it
- the SCHH Contracts Team will monitor and evaluate projects to ensure services are of good quality and provide value for money
- the Commissioning Team, in partnership with the Customer Engagement Team, will also meet with carers on a regular basis at informal 'Carer Speakeasy' sessions and occasional Listening Exercises, to provide an opportunity for carers to discuss services.

NHS Hillingdon will use a multi-faceted approach to measure successful outcomes for carers: –

- maximising the Commissioning for Quality and Innovation (CQUIN) Framework
- regular contract and review cycle to monitor progress against service specification requirements for user/carer involvement
- user/carer representation and involvement when conducting Needs Assessments
- specifically commissioned services, such as Hillingdon Carers, in collaboration with the Local Authority.

#### **Adult Social Care - Commissioning Priorities for Carers**

Details of the 2011/12 Commissioning Intentions can be found at Appendix 4.

Based on national and local priorities and feedback received from carers and the Carers Strategy Group, the priorities for developing carers support are during the lifetime of this plan are:

#### **Commissioning Priority 1 – Carers Assessments**

#### **Desired outcome:**

Carers have their needs assessed in a timely way and receive help to plan and implement the support they need

#### Carers told us:

"I don't know if my needs were thought about when my wife was being assessed.....it wasn't very clear"

"The Carers Assessment was a difficult thing to do, but I now understand that I need and support and that there are ways I can help myself to manage better"

#### How we will achieve the desired outcome:

#### The Law Commission Review

The Law Commission was asked by government to consider consolidating the legal framework concerning adult social care in England and Wales into a new adult social care statute. At the time of writing this Commissioning Plan, the Law Commission has made proposals some of which relate to carers assessments. Further detail can be found at Appendix 5.

It is expected that a White Paper detailing revisions will be published in Spring 2012 and going forward the council will implement any change in legislation

#### Effectiveness of Carers Assessments

The council will consult with carers about their experience of the assessment process which will inform future plans relating to assessments and outcomes for carers.

#### Information

The council will update the 'A guide to your carer's assessment' leaflet into a fact sheet format

#### Personalisation

Information from carers assessments will inform the development of personalised approaches for carers which will give them choice and control over the support they receive, including respite.

#### Innovative approaches to finding and providing support

With partners such as voluntary sector organisations and libraries, the council and NHS Hillingdon will encourage carers to explore opportunities that will support them in their caring role and which utilises social networks and activities available in their local communities.

#### Choice and signposting

Where carers do not want an assessment, the council will work with partners to ensure that staff are informed about key services and are able to signpost carers to relevant support.

#### Mental Health Carers Assessor Project

The council will recommission the Carers Assessor project which will work with carers of people with significant and enduring mental health need to identify appropriate support.

#### **Commissioning Priority 2 – Respite**

#### **Desired Outcome:**

Carers are able to take a short break from their caring role, in a planned way, which supports them to stay well.

#### Carers told us:

"I don't know if I am eligible for respite organised by the council – how can I find out?"

"If I can get a short break, what is my entitlement and will I be charged?"

"What respite services are there? How do I find out?"

"How can I get a break if the person I care for isn't eligible for council services?"

"I'm so tired and need a break, but my husband refuses respite.

What can I do?"

#### How we will achieve the desired outcome:

#### Information:

Carers felt there was a lack of information about respite services. The council and NHS Hillingdon will develop fact sheets for carers which will explain respite services and provide information about how to access them. It will also include information about how to purchase services privately.

#### Personalisation:

The council will produce information for carers about personalisation and the support available. Commissioning Intentions will include targets for supporting carers with personalisation approaches, which will be developed in discussion with carers and organisations supporting carers.

The Commissioning Team will work with colleagues in assessment and care management to ensure that carers' need for a break is accurately reflected in planning support for service users

#### **TeleCareLine**

Continue to promote the use of the TeleCareLine monitoring, alarm and response service which can enable many carers to leave the person they care for while they take a short break from their caring role.

#### Commissioning Priority 3 – Identifying 'hidden carers'

#### **Desired outcome:**

Those people supporting a vulnerable person who is a Hillingdon resident are encouraged to identify themselves as carers and find relevant support

#### Carers told us:

"The people in this focus group are lucky – we know we are carers and where to go for support. What do you do to find those people who don't know they are carers and might be struggling?"

The Carers Strategy Group noted that there was an ongoing need to offer carer awareness training to all, as carer support comes from all sectors – not just Social Care.

# How we will achieve the desired outcome: *Publicity:*

The council and NHS Hillingdon will ensure that publicity which helps people define the caring role, identify themselves as carers and signposts to support, continues

#### Working with partners:

- roll out the format of the Age UK Hillingdon's 'Just Ask' project, which positively encourages those accessing their services to think about whether they have a caring role and, if so, signposts to the carer support project.
- encourage and support health partners in developing their carer support processes, such as The Hillingdon Hospital Foundation Trust Carers Strategy

#### Awareness raising:

- organise events such as the Carer Fair, so that carers and their support needs are better understood in the wider community
- continue to work with GP practices to raise awareness of carers and their support needs
- provide regular 'Carer Aware' training to statutory sector teams

#### Information:

The council website will contain up to date and relevant information for carers

#### On-line training:

Develop an online training course, based on the Dudley 'Carer Aware' model, which will provide information about who is a carer, carers' rights, local support and where to find further information. This to be online the end of 2012/13.

#### **Commissioning Priority 4 – Information**

#### **Desired outcome:**

Information is easy to find, relevant and available to carers in a timely manner, utilising all appropriate media

#### Carers told us:

"One of the most important things for a carer is to have information that is easy to find and easy to understand"

"Why didn't I know about that earlier? It would have made such a difference to me."

## How we will achieve the desired outcome: Libraries

The Commissioning Team will work with the Library Service to:

- improve carer awareness and ability of staff to signpost to support
- ensure information about carer support is available in all libraries in the borough

#### Fact sheets

- The Carers Handbook will be available on-line and will take a fact sheet format, so that carers can easily access relevant information. Voluntary sector partners will assist carers in accessing these datasheets.
- Information for carers, such as a guide to a carer's assessment, will be updated in fact sheet format and will be available online

#### Mental Health Carers Information Pack

The Mental Health Carers Information Pack to be reviewed and made available online

#### Mental Health Service Directory

To refresh and reprint Hillingdon Mental Health Service Directory and publish online

#### Signposting

Work with partners to ensure that information produced by other agencies includes links to information for carers.

#### **Commissioning Priority 5 – Financial Support**

#### **Desired outcome:**

Carers have the support they need to maximise household income and reduce financial hardship

#### Carers told us:

"Caring is hard enough without worrying about how to pay the bills."

"The system is so complicated – I don't think I would have got this benefit without help to fill in the forms"

#### How we will achieve the desired outcome:

#### Carers Support Project

Monitor the financial support outcomes of the Carers Support Service, which assist carers and their families to maximise income and reduce financial hardship

#### **Debt Management**

Carers have told us that as well as needing advice about benefits, they also need support in managing debt. The Commissioning Team will develop a factsheet for carers providing details of where they can obtain debt management advice.

#### **Publicity**

To better publicise that financial advice is available from a number of organisations, including Hillingdon Carers, Age UK and the Citizens Advice Bureau.

#### **Commissioning Priority 6 – Carers Voice – Influencing Strategy**

#### **Desired outcome:**

Carers are involved in developing and monitoring services and have opportunities to raise issues that affect Commissioning proposals

#### Carers told us:

"Thank you for organising this event.

It gave me a chance to talk about my experiences as a carer and what might make things better for me"

## How we will achieve the desired outcome:

Listening to carers
Continue to organise 'Carers' Speakeasy' se

Continue to organise 'Carers' Speakeasy' sessions, focus groups and Listening Exercises to provide opportunities for carers to monitor, and influence the development of, services.

#### Carers influencing service development

With Hillingdon LINk. monitor the role of carers on a range of strategic delivery groups (including health Boards), to be sure that carers are fully involved, consulted and supported at such meetings.

#### Carers supporting the tendering and appointment process

Carers are asked to sit on evaluation and interview panels, where appropriate, to ensure carers play a part in service development.

#### Carers Conference

Support the organisation of an Annual Carers Conference which is an accessible, enjoyable and highly regarded event for carers and professionals.

#### Joint Strategic Needs Assessment (JSNA)

Ensure that carers' information in the JSNA is robust, so that the needs of carers are routinely considered in strategic planning

#### **Publicity**

Promote the availability of support to encourage carers to become involved in strategic processes

#### **Commissioning Priority 7 – Young Carers**

#### **Desired outcome:**

Young people with caring responsibilities are supported so that their life opportunities are not restricted and they do not carry inappropriate levels of caring.

## How we will achieve the desired outcome:

#### Raising awareness of young carers

- Awareness raising presentations are made to staff across all agencies to encourage proactive approaches in recognising and supporting young carers and their families
- Review current processes and procedures, especially assessment and data collection, to demonstrate an improve awareness of young carers in both adult and children's services

#### Collaborative working

A Memorandum of Understanding will be submitted to Cabinet to provide a commitment to joint working practices which support young carers.

#### SPACE project

The SPACE project supports young people supporting a family member with a substance misuse problem and receives specific, time-limited, funding which ends in March 2013. Childrens' Commissioning will ensure that those young people registered with SPACE will continue to be supported through the Young Carers Project, funded by SCHH and provided by Hillingdon Carers.

#### Transition to adult carer

Some young carers will not stop providing care when they reach the age of 18, when responsibility for their carer support transfers to Adult Social Care services. This Plan recognises this and Commissioning will work with partners to ensure that young carers approaching the age of 18 are informed about this transition.

# Carers Plan Health Input Status summary

#### Introduction

"Recognised, Valued and Supported – Next Steps for the Carers Strategy" identifies the actions that the Government will take over the next four years to support its priorities to ensure the best possible outcomes for carers and those they support, including:

- supporting those with caring responsibilities to identify themselves as carers at an early stage, recognising the value of their contribution and involving them from the outset both in designing local care provision and in planning individual care packages
- enabling those with caring responsibilities to fulfil their educational and employment potential
- · personalised support both for carers and those they support, enabling them to have a family and community life
- supporting carers to remain mentally and physically well

The key emerging themes locally are -

- Education, Information Sharing and Awareness Raising to maximize the knowledge base of carers to ensure informed choices are made for and on behalf of those they are caring for. Signposting carers to relevant support services, both voluntary and statutory sector is a key element of this.
- Support to carers in the development of technical skills to maintain patients in their home setting such as use of medical equipment.
- Respite for Carers to ensure their health and wellbeing so that they can provide continuity of care.
- Shaping future service provision

Carers and users are integral part of shaping how future services are designed and delivered with Local and National HealthWatch organizations playing a vital role within all service areas.

Priorities for 2012-13 and beyond are specifically related to:

COPD

With the recent national publication of COPD Outcomes Strategy and Hillingdon's local focus on behalf of the Sub-Cluster PCTs on the re-design of COPD pathways, there is an identified gap in the development of a holistic approach to the redesign of COPD services

• Dementia priorities to be agreed by October 2011.

In order to achieve the desired outcomes and aim to provide a "Gold Standard" service for our carers, a whole systems, whole economy approach needs to underpin all areas of health, social care and education including use of contractual levers with our

providers.

The following details healthcare initiatives for 2011-12 and any associated financial investment in line with the key emerging themes highlighted above.

A. Education and Training, Awareness Rais	A. Education and Training, Awareness Raising and Information Sharing				
Voluntary Sector	2011-12 Funding	Named Lead	Comments		
Child Accident Prevention Group (CAPG)	PCT: £13,257 LBH: £8,000 Joint 2011-12 SLA between LBH and PCT.	Jill Downey Commissioner NHS Hillingdon	A joint 2011-12 SLA and specification has been drafted.  Funded to educate parents and carers on accident prevention, provide safety equipment to low income families, run the Junior Citizen Scheme and improve the safety of Hillingdon's playgrounds.  Interface with Health Promotion re their accident prevention and		
			wellbeing champions workstreams has been built into specification		
Hillingdon Carers – Support Group	PCT: £18,291	Jill Downey Commissioner NHS Hillingdon	Funded to enable access to welfare benefits and support carers.		
			N.B. "Rethink" provides support for carers of patients with mental health needs whereas Hillingdon Carers provides generic support for carers.		
Homestart	PCT: £9,281	Jill Downey Commissioner	Funded to provide support and advice to families, including home		

		NHS Hillingdon	visits, on child welfare, benefits and
			other issues.
Mental Health			
Independent Mental Health Advocacy Service	£2,000	Seema Kathuria	
(IMHA)			
NHS Hillingdon newly appointed IMHA Provider,			
PoHWER, is working collaboratively with the local			
acute mental health trust, CNWL and the PCT to			
facilitate awareness raising workshops for carers		N K	
on the statutory requirements for IMHA		Yvonne Kearney	
supplemented by relevant publicity material			
Carers WRAP (wellness, recovery, action planning)			
training starting on 13/09/2011 ( 6wks)			
Regular attendance at Carers support groups in			
Hayes and Ruislip			
The production of the state of			
Annual attendance at carers conference as			
facilitator			
B.Shaping Future Service Provision			
The substance misuse needs assessment		Jill Downey	
identifies a number of areas that can help promote		Commissioner	
recovery outcomes, including:		NHS Hillingdon	
Self-help and peer support through mutual aid			
groups for both users and carers			
Training and support for user and carer			
representatives and peer mentors			
Support, advice and information for carers and the families of substance misusers			
the families of substance misusers			
In addition, the needs assessment takes account of			
existing resources for carers and service users, as			
	1		

#### follows:

"The borough's user forum (CADS), the Carers' Committee and other mutual aid groups have continued to add value to clients' journeys towards recovery. Both CADS and the Carers' Committee have developed annual workplans, which include aims to support and inform other users and carers and to encourage them to take up services. There is the potential for CADS and the Carers' Committee to work together more formally on involving carers and family members in careplanning in order to boost the recovery chances of clients.

"Existing pathways between treatment providers and mutual aid groups have been strengthened and providers are increasingly making use of the range of peer support and mutual aid resources available. In addition to mutual aid, it will be important to make the most of existing community and faith resources that can help support clients sustain and strengthen their recovery achievements in the community."

It concludes that: "A range of support, including social care, family support, employment and housing support, volunteering opportunities and wrap-around services, will be central to enabling clients to sustain their recovery outcomes. Mutual aid groups will play an important role in involving carers and family members in care-planning" and recommends: "Maximise the use of wrap-around support services, including greater involvement of

families, carers and mutual aid groups, to achieve the best possible recovery outcomes."

iii) The substance misuse Treatment Plan sets out commissioning intentions and targets for 2011-12 and priorities the involvement of carers and family members as follows:

"A range of support, including social care, family support, employment and housing support, volunteering opportunities and wrap-around services, will be central to enabling clients to sustain their recovery outcomes. Mutual aid groups have always played an important role in involving user and carer representatives in commissioning decisions. This role is likely to expand to include supporting stabilised users to move on from specialist treatment, and engaging carers and family members in care-planning."

In addition, the Treatment Plan includes a number of relevant actions, including:

- Make best use of service users, families and carers, including peer mentors and mutual aid groups, in order to support clients who have completed their formal treatment journeys to sustain their recovery outcomes as they move on from specialist treatment.
- Maintain high quality safeguarding practices, family-friendly policies, referral pathways with the SPACE project, and information-sharing and skills exchange with the Children and Families

Department in order to support the families,		
children and carers of service users working		
towards recovery.		
Young People Substance Misuse Services	Lois Elliott	
A high level priority of the YP Substance misuse	Commissioner	
partnership is:	NHS Hillingdon	
To improve the health and well-being of young		
people, focusing on those groups undertaking in		
risky behaviours including substance misuse and		
alcohol is a key priority for the partnership.		
The partnership recognises that some risky		
behaviour can be harmful and can reduce		
aspirations, increase vulnerability, cause physical		
and social problems, reduce opportunities and may		
promote criminal and anti social behaviour. In order		
to improve outcomes and service provider's		
efficiency in 2011/12-13 the partnership will focus		
on developing a whole system approach that		
delivers early intervention and preventive work to		
help support children and their families including		
carers of parents who substance alcohol misuse.		
C. Technical and Practical Skills Development		
Training for carers by health care staff to carry	Jane Walsh	
out a task which would otherwise need to be	Commissioner	
carried out by the managed service eg. ostomy	NHS Hillingdon	
care, administration of insulin or other regular		
injections. This is supplemented by training,		
information and ongoing support for the carer		
undertaking the task.		
Support mechanisms and information available		
for carers to prevent carer crisis, including		

	1	1	1
access to appropriate respite care for carers.			
D. Respite Care			
Continuing Care	£10,000	Ros Howard	
Clients assessed as meeting the continuing care		Continuing Care Lead	
criteria are eligible for a maximum of 370 hours of			
respite care per year. This initiative allows the			
carers of the clients an opportunity to address their			
social, emotional and physical needs by providing			
a break in their caring duties to ensure continuity			
for the client.			
Priorities for 2012-13			
Chronic Obstructive Pulmonary Disease		Seema Kathuria	NHS Hillingdon is leading the
(COPD)		01895 250058	Network on behalf of the Sub-
The national COPD Outcomes Strategy defines			Cluster PCTs of Ealing and
specific areas for development namely –			Hounslow with the ultimate aim of
People with advanced COPD and their carers are			re-designing the COPD pathway.
identified and offered palliative care that addresses			
social, emotional and physical needs. This should			
cover all the holistic pathways of the patient's and			
carer's journey.			
Dementia Provision		Jason Parker	
The National Dementia Strategy sets out a challenging		Commissioner	
agenda for PCTs and Local Authorities with four key			
aims:- 1. Early diagnosis and interventions;			
2. Better care at home or care home:			
3. Better care in hospital;			
4. Appropriate use of antipsychotic medication.			
- all underpinned by improved support for carers.			

#### PERFORMANCE INDICATORS RELATING TO CARERS

Referrals, Assessments and Packages of Care (RAP) figures provide national statistics relating to social care for adults. RAP C1 and RAP C2 provide data on carers and figures are shown below:

#### Table 1

Number of carers for whom assessments or reviews were completed or declined during the period (RAP C1)

assessed (	of carers or reviewed rately	assessed	of carers or reviewed ntly		of carers a assessment
10/11	09/10	10/11	09/10	10/11	09/10
263	469	973	499	280	n/a*

<sup>\*</sup> RAP return = zero. Data not available to new business processes (migration to Protocol)

The total number of carers assessed has increased (1,236 in 10/11 against 968 in 09/10), it is noted that the percentage of total assessment /reviews undertaken jointly or separately is significantly different in 2010/11 than 2009/10.

#### Table 2

Number of carers receiving different types of services provided or commissioned by the CASSR as an outcome of an assessment or review (RAP C2)

Services including respite for the carer and/or other specific carer services		Information a	nd advice only
10/11	09/10	10/11	09/10
929	728	307	240

#### Figures for NI135

The RAP figures are also used to provides a national indicator of engagement with, and support to, carers. These are shown in Table 3 below.

#### Table 3

Carers assessed/reviewed and receiving a specific carers service, or advice and information, as a percentage of 18+ clients receiving community based services.

LBH Target	LBH Actual	London	LBH Target	LBH Actual	London
09/10	09/10	09/10	10/11	10/11	10/11
18%	20%	24%	24%	25.1%	n/a

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NB: At the time of publication, these figures are not validated by the NHS Information Centre and are subject to change.

#### Hillingdon Carers Young Carers Project:

In 2001, funded by Carers Grant, the council commissioned a Young Carers project to be provided by Hillingdon Carers.

A Steering Group comprising the Joint Commissioning Team (Carer Development), Children and Families services, Education Welfare Services and Hillingdon Carers as provider meet regularly to monitor the Service Level Agreement and discuss developments within the project

The project has supported over 600 young people since its inception and currently has 145 young carers registered.

Development of activities has been led by those young people it supports. The project offers emotional and practical support to young carers and provides breaks in the form of outings and a regular weekly club. There are also some opportunities for residential weekends away.

Hillingdon Carers actively seek additional financial support for this project to increase the range of services and breaks offered. The Children Fund has made regular ongoing allocations to the project. Many local charitable organisations have donated funds.

#### **SPACE Project:**

In 2005, the Joint Commissioning Team managers for both Carers and Substance Misuse Services, in partnership with Hillingdon Carers, identified that those young people providing support to a person with a substance misuse problem required more complex support than those young carers currently registered with the Young Carers project.

Building on the successful model of the original Young Carers project, funds were identified by the Joint Commissioning Team to instigate a 12 month pilot project specifically aimed at this group of young people.

A multi agency steering group comprising Hillingdon Carers (as provider), HAGAM (Hillingdon Action Group for Addiction Management), the Drugs & Alcohol Care Management Team, and Joint Commissioning Team managers for Carers and Drugs and Alcohol Services, oversaw the development of the project, which now supports 38 young carers.

Hillingdon Carers successfully sought funding from BBC Children in Need for the second 12 month of the project. The Chief Executive of Hillingdon Carers is seeking further funding to retain the project.

#### **Statistical Information for Hillingdon's Young Carers Project:**

#### Referrals:

In 2010/11, Hillingdon Carers had 273 young people registered with their Young Carers Project, an increase from 147 in 2007/08.

#### The composition of young carers care for registered is:

Both Parents = 5
Father = 27
Mother = 143
Grandparent = 3
Parent & Sibling = 1
Sibling = 87
Other Family Member = 7

#### The age composition of young carers registered is:

5 – 7 Year old = 26 8 – 11 Year old = 98 12 – 15 Year old = 99 16 – 18 Year old = 50

#### The ethnicity composition of young carers registered is:

Bangladeshi = 6
Black African = 13
Black British = 6
Black Caribbean = 5
Black Other = 3
British Asian = 3
Indian = 13
Mixed ethnic = 28
Other = 3
Other Asian = 12
Pakistani = 17
White British = 157
White Irish = 3
White Other = 4

#### Nature of disability cared for is:

Older People (65+) = 7 Adults with Mental Health Problems (18-64) = 62 Adults with a Learning Disability (18+) = 3 Adults with a Physical or Sensory Disability (18-64) = 112 Children with Additional Needs (under 18) = 89



# Joint Commissioning Intentions for Carers 2011/12

Ref	Task	Sub-tasks	Target	Comments
No			Dates	
1.	SCHH & NHS Hillingdon - Deliver 100% of the Carers Commissioning Intentions		By March 2012	
2.	SCHH & NHS Hillingdon - Develop a Carers commissioning strategy that highlights key areas of concern raised by carers, increases awareness of carers, defines appropriate responses to carer support need and delivers MTFF savings		August 11	
3.	SCHH - n partnership with Contracts Team, review the SCH&H Contracts Register and ensure specifications and SLAs are in place for Third sector provided services		October 11	

4.	NHS Hillingdon - Maximise the use of CQUINN Framework with	a) Carers Plan states carers details or that there are no known carers. Baselines to be	September 11	Quarterly audit data reports to assess
	local acute mental health provider, CNWL, to support carers in their role	established by end of Q2.  b) Performance targets to be agreed by beginning of Q3 for reporting in Q4. c) Number of Carers Assessments offered/completed. Baseline to be established by end of Q2 with performance targets agreed by beginning of Q3 for reporting in Q4 d) Carers state they feel supported by CNWL in crisis planning for the cared for person. Baselines by end of Q2 with performance targets agreed by beginning of Q3 for reporting in Q4. e) Young carers identified and offered information about where they can get support. Baselines by end of Q3 with performance targets agreed by beginning of Q3 for reporting in Q4.	December 11	Outcome of Survey  Quarterly audit data reports
5.	SCHH - Produce quarterly reports identifying the number of people receiving carers assessments (either jointly or individually) and the number receiving services after assessment, including details of services provided. Report to include information about carers receiving personal budgets.	a) In partnership with Performance and Intelligence Team, identify what improvements need to be made in Protocol to deliver information on carers assessments and services provided after assessment b) Submit a report to CDMT providing full details of improvements required, to inform a report to SMT	September 11 October 11	Protocol now has facility to record Joint Assessments, Carers Assessments, and reviews and is informing Pls (RAP C1). Outcomes information after assessment (RAP C2) is not currently being recorded in a way that informs reports. Carers Commissioners working with Support Services Project Manager to progress

6.	SCHH & NHS Hillingdon - Improve carer information in the JSNA, to raise awareness of carers and inform the strategic priorities of the Health and Well Being Board in relation to carers:	<ul> <li>a) Update statistical information, including additional material other than from the Census</li> <li>b) In partnership with Customer Engagement gather 'community voice' information (including listening exercises), detailing carers views on a specific topic of concern, using the DoH Good Practice example of Cheshire East in the 'Carers and personalisation: improving outcomes' paper)</li> <li>c) Report recurring issues gathered from Speakeasy sessions and Listening exercises</li> <li>d) Submit these updates for approval to CDMT and the Health and Wellbeing Board</li> </ul>	November 11  November 11  December 11
7.         8.	SCHH - In partnership with Care Management, develop a personalisation pilot to meet carer support need, including a time-limited support scheme within the generic carers support service contract.  SCHH - Work with voluntary sector partners to develop a range of low-moderate value, 'off the shelf' time-limited projects, facilitating bids to ad-hoc	Executive.  a) Submit report for approval by Transforming Social Care Board b) Deliver personalisation pilot c) Review and evaluated effectiveness of personalisation pilot	July 11  August 11  March 12  July 11

9.	NHS Hillingdon - Ensure Health commissioners of voluntary sector contracts embed the carers agenda as part of the contract commissioning and monitoring cycle	a) Inclusion of clauses within service specification relating to carers	October/ November 11	Utilise mid-year contract review meetings to report outcomes
10.	SCHH - Produce quarterly reports for Commissioning Service Manager on the delivery of the Commissioning Plan in relation to carers to inform reports for the Long Term Conditions Delivery Group, Health and Well-being Board and SMT.		Quarterly	
11.	SCHH - Develop commissioning plans for HoS approval at least 12 months in advance of the expiry of service contracts, reviewing the need for carer support services recommending whether these should remain without change, be decommissioned or recommissioned.		Quarterly	

12.	SCHH - Facilitate Hillingdon LINk and Hillingdon Carers working intensively with 3 practices (Heathrow Villages) to raise awareness of carers amongst Practice staff, improve understanding of the support needs of carers and increase the number of carers recorded on the Practice Carers' Register:	<ul> <li>a) Identify GP surgeries to involve in this project</li> <li>b) Support these surgeries via the Health Liaison Project to improve practice in relation to carers.</li> <li>c) Outcome measured by increase in carers joining the Practices' Carers Register.</li> <li>d) Agree timescale with Health partners for wider roll out to general practice</li> </ul>	September 11 To March 12 March 12 March 12	Practices involved are Hesa/Orchard (Hayes), Heathrow Medical Centre (Harlington) and the Glendale Practice (Harlington). Baseline data on patients registered as carers being gathered.
13.	SCHH - Develop a datasheet for carers that explains respite services and provides clear information for carers on how to access such services		October 11	
14.	SCHH - Hold 3 x Speakeasy sessions to provide opportunities for carers to provide direct feedback to Commissioning about services.		By March 2012	One speakeasy to be held jointly with Carers Involvement lead at The Hillingdon Hospital Foundation Trust
15.	SCHH - Complete with the Carers Strategy Group the Department of Health 'Carers Support Pathway Self-Assessment Tool' to assess how well organisations in Hillingdon are addressing the expected outcomes of the national carers strategy.		June 11	Completed. Information will be used to inform the development of the Carers Commissioning Plan and will provide robust support for bids to any future funding opportunities from the DoH

16.	SCHH - Work with partners to identify opportunities to develop condition specific training for carers to enable them to maintain or improve independence of the person they support e.g. speech therapy, exercise regimes, etc. These to be delivered within existing resources.		Sept 11	Working with Wheelchair Service and Hillingdon Carers to deliver training on safe use of attendant- type wheelchairs. This training was requested by carers and a focus group of carers helped configure the training.
17.	NHS Hillingdon - Health to prioritise carers' role within dementia and stroke provision in line with national guidance	a) Completion of baseline audit in stroke and dementia services	March 12	
18.	SCHH - Work with Deputy Director – Children and Families to prepare with appropriate partners a Memorandum of Understanding covering 'Working together to support young carers' and secure Cabinet approval.	<ul> <li>a) Cabinet Member briefing completed and gain approval for admission to Cabinet Forward Plan (for October 2011)</li> <li>b) Notfify Democratic Services for inclusion in the Cabinet Forward Plan</li> <li>c) Briefing on MoU submitted to PEECS SMT</li> <li>d) Draft MoU completed and approved by SMT in both Directorates</li> <li>e) Briefings to relevant Cabinet Members</li> <li>f) MoU submitted to Cabinet</li> </ul>	June 11  June 11  August 11  Sept 11  Oct 11  Oct 11	Target dates slipped due to transfer of Childrens' Services to SCHH – new schedule to be agreed with Deputy Director C&F Services

#### **LAW COMMISSION REVIEW 2011 - CARERS**

The Law Commission was asked to consider consolidating the legal framework concerning adult social care in England and Wales into a new adult social care statute.

Part of those overall recommendations relate to carers assessments and are summarised below:

#### i) Duty to assess

The duty to assess a carer should apply to any carer who is providing care to another person and not be restricted to those carers who are providing a substantial amount of care on a regular basis.

The current situation requires an evaluation of 'substantial' and 'regular' by the assessor/care manager, which should be based on the *impact* of providing care, rather than the number of hours of care provided. Any assessment undertaken should be proportionate to the needs presented by the carer.

#### ii) Triggering a Carers Assessment

The duty to assess should no longer require a carer to request the assessment in order to be triggered. Instead, the duty should be triggered where it appears to the local authority that the carer may have, or will have upon commencing the caring role, needs that could be met by the provision of carers' services or services to the cared-for person.

This second recommendation would remove the right of a local authority to inform carers of their right to request an assessment; however the Law Commission also proposes a general duty to provide information, advice and assistance which should in practice provide the same effect. A carer will still be able to request an assessment, either directly or through another source, and it is likely that this should trigger the duty to assess.

#### iii) Eligibility for Carers Assessment

A local authority should have discretion to assess a carer who receives payment for the care they provide or is a volunteer worker, where the authority believes the relationship is not principally a commercial or ordinary volunteering one. This means that if a carer is receiving payment from the person they care for through a personal budget, they can still be assessed as a carer and is likely to be used concerning carers who provide care in addition to what they receive payment for.

Currently, a carer is only eligible for assessment providing the care they provide is not provided under contract.

#### iv) Carer Assessment Outcomes

The statute should provide that a carer's assessment must:

- Take account of the carer's ability to provide and to continue to provide care for the person cared for
- take into consideration whether the carer works or wishes to work, or is undertaking, or wishes to undertake, education, training or any leisure activity.

This bring together items from other legislation including (The Carers (Recognition and Services) Act and the Carers Equal Opportunities Act)

#### v) Integrated Support with Cared-for Person

The carers' assessment regulations must make provision to require local authorities to take into account the results of the cared-for person's community care assessment in determining whether to provide services to a carer.

This recommendation parallels the Department of Health view that 'whole-family approaches and the recognition of interdependence is the start point of addressing needs.

#### vi) Young Carers

It is proposed The Carers (Recognition and Services) Act and the Carers and Disabled Children Act should be retained and amended so that they would apply only to carers aged under 18. This would form a single young carers statute with adult carers being covered by the new statute. Another proposal suggest that this legislation is repealed and incorporated into the Children Act.

The duties to assess a young carer in these Acts should be amended to make them consistent with the threshold for a carer's assessment under the proposed adult social care statute.

Local authorities should have a general power to assess and provide services to 16 and 17 year old young carers under the adult social care statute. The statute would require the local authority to give written reasons if a young carer aged 16 and 17 (and their parents on their behalf) requests to be assessed under the adult social care statute, and the authority decides not to carry out the assessment.

The assessment regulations made under the adult social care statute should contain a requirement that any community care assessment must have regard to the results of any assessment of a young carer.

Currently, only young people aged 16 and 17 years might be assessed for support needs. A young carers assessment will need to be developed should legislation change, as the adult assessment form would not be appropriate.

#### vii) Parent Carers

Parent carers should continue to have a right to a carer's assessment under existing legislation. The duties to assess a parent carer in relevant Acts should be amended to make them consistent with the threshold for a carer's assessment under the adult social care statute.

The proposals urge the Government to consider either integrating the duty to provide a parent carers' assessment in with the single young carers' statute (as described above) or incorporate them into the Children Act 1989. If a parent carer who is looking after a young person aged 16 and 17 requests that the young person is assessed under the adult social care statute and the local authority agrees to this request, then the parent carer should also be given a carer's assessment under the same statute.

Currently, the holistic needs of the whole family of a child with disabilities is assessed using CAF, so there are relatively few requests for separate Carers Assessments.

It is expected that a White Paper detailing revisions will be published before December 2011.

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# REVIEW OF THE LOCAL LIST OF BUILDINGS OF ARCHITECTURAL OR HISTORIC IMPORTANCE

Cabinet Member Councillor Keith Burrows

Cabinet Portfolio Planning, Transportation and Recycling

Officer Contact

Nairita Chakraborty - Planning, Environment, Education and Community Services

Papers with report Appendix 1 – Proposed new entries to the Local List

#### **HEADLINE INFORMATION**

**Purpose of report** 

Following the successful adoption and publication of the 'Local List of Buildings of Architectural and Historic Importance', revisions and new entries were requested. These have been assessed and appropriate consultation has been undertaken as approved by Cabinet in June 2011. This report contains the results of the consultation exercise and seeks approval of the new entries to the Local List for adoption (Appendix 1).

Contribution to our plans and strategies

Hillingdon's Emerging Local Development Framework Hillingdon Design & Access Statements Hillingdon Unitary Development Plan (Saved Polices 2007) Sustainable Community Strategy Statement of Community Involvement

**Financial Cost** 

The cost of notification and updating GIS would be under £50 which will be met from the budget for Planning, Environment, Education and Community Services 2011/12.

Relevant Policy
Overview Committee

Residents and Environmental Services

Ward(s) affected

All wards in the Borough

#### **RECOMMENDATION**

#### That Cabinet:

- 1. Agrees the new entries to the Local List of Buildings of Architectural or Historic Importance as attached in Appendix 1;
- 2. Instructs officers to notify all the owners/occupiers of the new and revised entries included in the list, and;
- 3. Instruct officers to update the GIS database and the Council website to include the new entries.

#### **INFORMATION**

#### Reasons for recommendation

The Local List of Buildings of Architectural or Historic Importance was adopted in May 2010 following extensive public consultation. Some owners have since requested alterations to the entries for their respective properties and there have also been requests for new additions to the list. The proposed changes were considered and following approval from Cabinet in June 2011, owners and interested groups were consulted on the proposed new entries.

The report lists comments received and seeks approval for these entries to be added to the adopted List.

#### Alternative options considered

Cabinet could decide not to revise the existing Local List. This would leave buildings worthy of local designation, unrecognised and vulnerable to insensitive development. It would also not address the concerns of Members and residents.

#### **Comments of Policy Overview Committee**

None at this stage

#### **Supporting information**

- 1. The Local List of Buildings of Architectural or Historic Importance recognises buildings that are considered to be of local significance and that contribute to the unique character and sense of local distinctiveness of the Borough. On 19<sup>th</sup> February, 2009, Cabinet approved a programme for the review of the existing Local List. A preconsultation exercise with local Councillors, Residents' Associations, Conservation Panels, Local History Societies and other interested parties was then carried out. The resulting proposals were assessed along with entries already included in the Local List and public consultation on the updated document was undertaken.
- 2. Following assessment and consultation with owners, the final list was adopted by Cabinet on the 26<sup>th</sup> of May 2010. Since its adoption, a number of new entries were proposed; one requested by a local resident, another by a local history society and the others identified by Council officers. These were assessed and 10 new entries, including a Council owned building were proposed to be added to the Local List. Cabinet, on 16<sup>th</sup> June 2011, approved a period of consultation with their respective owners.
- 3. The consultation was undertaken from 21<sup>st</sup> June to 29<sup>th</sup> July 2011. Owners were consulted by way of letters, sent through the post, addressed to the individual properties to ensure that there would be minimal errors in delivery. Two replies were received, and these are as set out below.

Address	Comments received	Response
Apollo Building, Blyth Road, Hayes	"No objections to the proposed inclusion. Clarified that the main positive feature of the building are the northern elevation and part of southern elevation, along with the remaining parts of the building being of low architectural or historic interest"	Points raised have been noted, and statement of significance revised accordingly. (Please see highlighted text for this entry in appendix 1)
Corporate Property (Cranford Park Primary School)	There would be no objection to the inclusion of Cranford School in the Local List. Planning permission has recently been given for extensions, alterations and upgrading of the school buildings and it is not envisaged that local listing would be an issue in their future management.	-

4. Following consultation and assessment, the list has been updated and the revised sections form Appendix 1 of this report. The information will also be updated in the online GIS database available to council staff, members and public.

#### **Future revisions**

5. The Local List updates are part of a rolling programme and new entries will be assessed and reported to Cabinet for approval accordingly.

#### Conclusion

6. In order to protect the borough's heritage, it is important that the Council continues to update the Local List. The recognition and publicity will be of benefit to local residents as a whole and enhance the attractiveness of the Borough in the longer term. Given the emerging Local Development Framework and the requirement under PPS5 for Heritage Environment Records to be established, it is important that a database of designated historic assets in the borough is maintained and updated regularly, in accordance with current planning policies and guidance.

#### **Financial Implications**

7. The cost of notification and consultation of letters, including envelopes and post would be under £50. This will be met from the current budgets for Planning, Environment and Community Services.

#### **EFFECT ON RESIDENTS, SERVICE USERS AND COMMUNITIES**

#### What will be the effect of the recommendation?

8. The aims of the recommendations are to update the Local List. Inclusion on the Local List would have no statutory implications for residents, property owners or

other stakeholders. Local Listing is, however, a material consideration when decisions are made on planning and other related applications. Relevant policies are contained within the London Borough of Hillingdon Unitary Development Plan (Saved Policies 27<sup>th</sup> September 2007).

9. The Planning Policy Statement on Planning for the Historic Environment (PPS 5) and recent draft guidance from English Heritage provides for greater recognition of non designated heritage assets such as Locally Listed Buildings. Policy HE8 of PPS5 states that 'The effect of an application on the significance of such a heritage asset or its setting is a material consideration in determining the application'.

#### **CORPORATE IMPLICATIONS**

#### **Corporate Finance**

10. A Corporate Finance Officer has reviewed the report and the financial implications within it, and is satisfied that the financial implications properly reflect the direct resource implications on the planning service and any wider implications for the Council's resources as a whole.

#### Legal

- 11. As mentioned in the report above, the Planning Policy Statement on Planning for the Historic Environment (PPS 5) aims to provide greater protection to non designated heritage assets such as locally listed buildings. Policy HE8 of the document states that 'The effect of an application on the significance of such a heritage asset or its setting is a material consideration in determining a planning application'.
- 12. As such it is imperative that the consultation with affected owners and occupiers recently concluded, was undertaken at a stage when proposals were still at a formative stage, provided sufficient reasons to permit the consultee to make a meaningful response, and allowed adequate time for consideration and response. It appears from the information in the Officer's report that the consultation has been conducted in this manner.
- 13. In considering the consultation responses detailed in the report, Cabinet must ensure there is full consideration of all representations arising including those which do not accord with the officer recommendation. Cabinet must be satisfied that responses from the public are conscientiously taken into account.

#### **Corporate Landlord**

14. There would be no objection to the inclusion of Cranford School in the Local List. Planning permission has recently been given for extensions, alterations and upgrading of the school buildings, and it is not envisaged that local listing would be an issue in their future management.

#### **Relevant Service Groups**

15. Relevant service groups were consulted as part of the consultation process, and any comments have been taken into consideration.

#### **BACKGROUND PAPERS**

- Cabinet Member report dated 19<sup>th</sup> February, 2009.
- Cabinet report dated 19<sup>th</sup> November, 2009.
- Cabinet report dated 26<sup>th</sup> May 2010.
- Cabinet report dated 16<sup>th</sup> June 2011.
- Planning Policy Statement 5 (PPS 5): Planning for the Historic Environment, 23<sup>rd</sup> March 2010
- PPS 5 Planning for the Historic Environment: Historic Environment Planning Practice Guide- 23<sup>rd</sup> March 2010
- London Borough of Hillingdon Unitary Development Plan (Saved Policies 27<sup>th</sup> September 2007)
- Statement of Community Involvement, November 2006

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Appendix 1: Proposed new entries to Local List- 2011

Building Name/No	Road name	Post code	Ward	Date Propos ed	Con Area/ ASLC	Serial No
Lantern House	Tile Kiln Lane, Uxbridge	UB9 6LU	Harefield	2011	NA	293
Cranford Park Junior School*	Phelps Way, Harlington	UB3 4LQ	Pinkwell	2011	NA	294
23-25	Wieland Road	HA6 3QZ	Northwoo d Hills	2010	Gatehill Farm Estate CA	295
223	High Street, Uxbridge	UB8 1LB	Uxbridge North	2011	NA	296
Apollo Building**	Blyth Road, Hayes	UB7 7LD	Botwell	2011	NA	297
Hillingdon Station	Long Lane, Uxbridge	UB10 9NR	Uxbridge North	2011	NA	298
Church of the Most Sacred Heart	73a Pembroke Road, Ruislip	HA4 8NN	Manor	2011	NA	299
The Stables	Goulds Green, Uxbridge	UB8 3DG	Botwell	2011	NA	300
Mayling Transport Yard	Broadwater Lane, Harefield	UB9 6AH	Harefield	2011	NA	301
Dews Farm	Harvill Road, Harefield	UB9 6JN	Harefield	2011	NA	302

<sup>\*</sup> Council owned

<sup>\*\*</sup> Amended description following consultation with owners (amendment highlighted in yellow)

Building Name/No:	Lantern House	Serial No:	293
Address:	Tile Kiln Lane, Uxbridge, UB9 6LU		
Ward:	Harefield	Use:	Residential



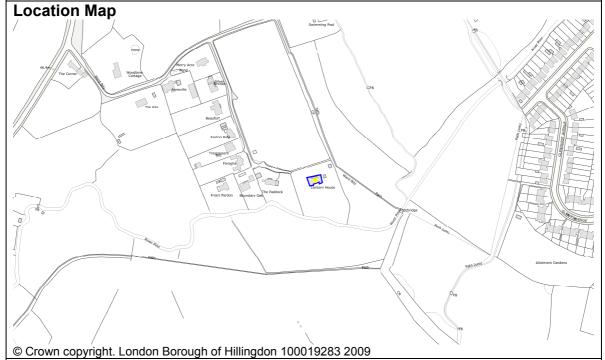
# Statement of significance/Reasons for designation

Architectural: Circa 1930, by Mr Crowther, said to be incorporating much material from Erith Castle, Kent. Appears to be one of the original hamlet houses. Two storeys, ground floor in brick and first floor in render and mock timber framing. Picturesque front elevation with two high level jettied gables and a balcony.

<u>Townscape</u>: Contributes to local character.

<u>Historical</u>: Originally built as a group of 8 houses called Tile Kiln Hamlet, renamed Old Priory.

**Information provided by**: Eileen C Bowlt, Ruislip, Northwood and Eastcote Local History Society **Photograph**: August 2009



Authenticity (I b): 2; Architectural (II d): 2; Townscape (III f): 2; Historic (IV i): 1 Total = 7

**RECOMMENDATION:** To be included in the Local List

Building Name/No:	Cranford Park Primary School	Serial No:	294
Address:	Phelps Way, Harlington, UB3 4LQ		
Ward:	Pinkwell	Use:	School (Council owned)





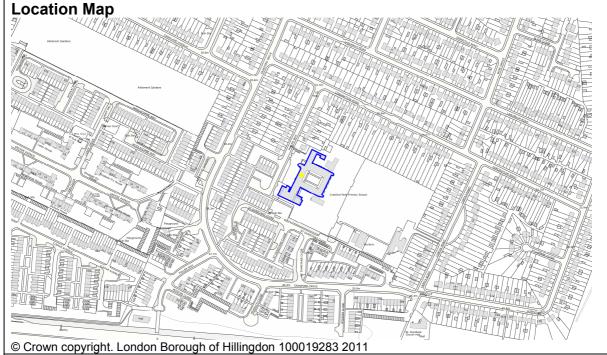
Rear View

#### Statement of significance/Reasons for designation

<u>Architectural</u>: Opened in 1939, modernist style building, possibly by W T Curtis and H W Burchett. Similar in design to Lady Banks School, Dawlish Drive (Listed at grade II). Two storey, in red and brown bricks with flat roof and parapet. Rectangular plan with central courtyard. Steel frame with continuous concrete lintels and cill bands to crittel type windows. Rear elevation flanked by 2 storey stair towers on both corners, three storey tower to the front.

<u>Townscape</u>: Key landmark <u>Historic</u>: Community associations.

Photograph date: Nov 2010



Authenticity (I b): 2; Architecture (II d): 2; Townscape (III f,g): 2+1; Historic (IV h): 2

Total = 9

**RECOMMENDATION:** To be included in the Local List

Building Name/No:	No 23-25	Serial No:	295
Address:	Wieland Road, Northwood, HA6 3QZ		3 3QZ
Ward:	Northwood Hills	Use:	Residential

#### Photograph

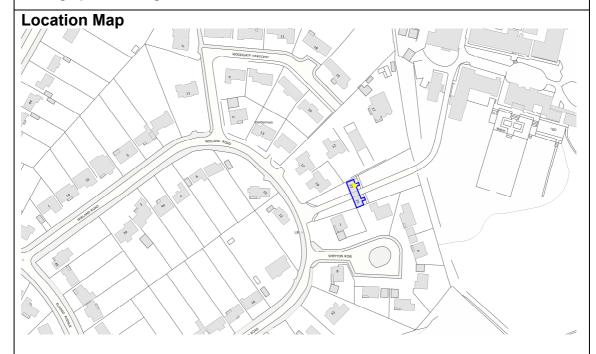


## Statement of significance/Reasons for designation

Architectural: 1920s. Two storey lodge house in white render and hipped tile roof. Attractive central archway, original entrance to the Potter Hill House. Now converted to two houses 23 and 25. <a href="Townscape: Contributes to local character">Townscape: Contributes to local character</a>.

<u>Historic</u>: The gatehouse to the original Potter Hill House, now St John's School.

Photograph date: August 2010



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Authenticity (I c): 1; Architectural (II d): 2; Townscape (III f): 2

Total = 5

**RECOMMENDATION:** To be included in Local List

Building Name/No:	223 Serial No:		296
Address:	High Street, Uxbridge, UB8 1LB		
Ward:	Uxbridge North	Use:	Retail

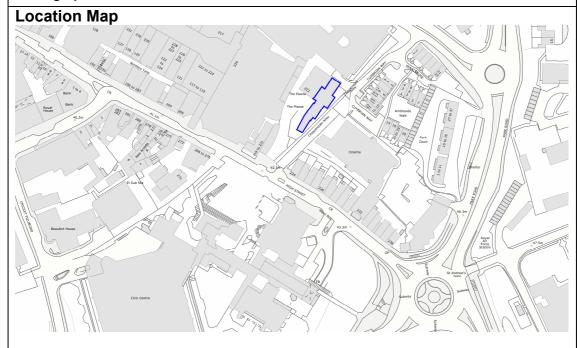




#### Statement of significance/Reasons for designation

<u>Architectural</u>: Rebuilt from elements of a 16<sup>th</sup> C timber framed building that originally stood on the site of Uxbridge Library (High Street). Carefully reconstructed, using traditional materials and techniques. Adjacent to 222 High Street, grade II listed. <u>Townscape</u>: Group value within the Old Uxbridge Windsor Street Conservation Area. Key landmark and contribution to local street scene.

Photograph date: December 2010



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Authenticity (I b): 2; Architectural (II d): 2; Townscape (III f, g): 2+1

Total = 7

RECOMMENDATION: To be included in the Local List.

Building Name/No:	Apollo House	Serial No:	297
Address:	120 Blyth Road, Hayes, UB3 1SY		
Ward:	Botwell	Use:	Warehouse (Proposed mixed use)

# Photograph

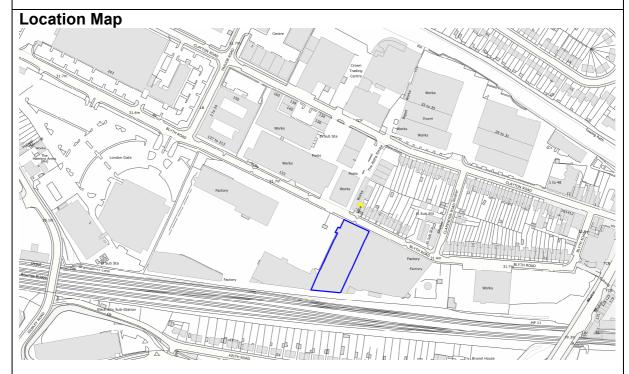
# Statement of significance/Reasons for designation

Architectural: Mainly constructed in 1928, three stories in yellow buff brick, with brick piers and extensive glazing. The main façade is a prominent feature on Blyth Road. Northern elevation and part southern elevation are of particular interest, whereas remaining parts are of relatively low significance.

<u>Townscape</u>: Key landmark and contributes to the street scene.

<u>Historic</u>: Associated with the industrial history of the Borough.

Photograph date: December 2010



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Authenticity (I c): 1; Architectural (II d): 2; Townscape (III g): 1; Historic (IV h): 2

Total = 6

**RECOMMENDATION:** To be included in the Local List

Building Name/No:	Hillingdon Underground Station	Serial No:	298	
Address:	Long Lane, Uxbridge, UB10 9NR			
Ward:	Uxbridge North	Use:	Transport	



#### Statement of significance/Reasons for designation

Architectural: Designed by Cassidy Taggart Partner, steel framed structure, completed in 1994. The station has walkways and stairs which connect with a central ticket hall. Low pitched roof with fritted glass stepped down to a lower level over the platforms - reminiscent of the Victorian train-sheds.

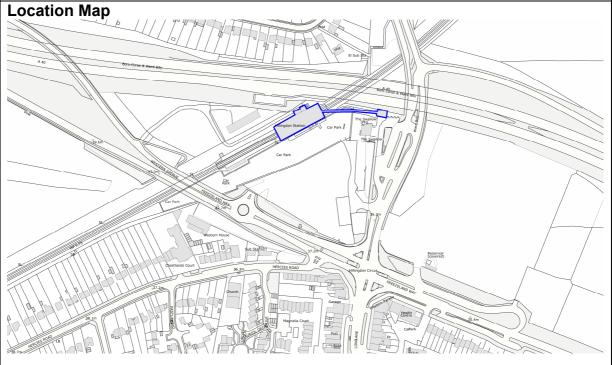
Townscape: Key landmark.

Historic: Built south of the original Hillingdon (Swakeleys Station) during the rerouting of A40

in the 1990s. Awarded the underground station of the year 1992.

Photograph date: December 2010

Sources: Pevsner



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Authenticity (I a): 3; Architectural (II e): 1; Townscape (III g): 1; Historic (IV i): 1

Total = 6

Building Name/No:	Church of the Most Sacred Heart	Serial No:	299	
Address:	73a Pembroke Road, Ruislip, HA4 8NN			
Ward:	Manor	Use:	Religious	



### Statement of significance/Reasons for designation

Architectural: Designed by George Drysdale, plain in appearance, in golden-brown brick, with red quoins, relieved only by a centrally-placed cross in relief and symbols of the four evangelists carved in stone. The copper roof is the most striking feature. Arcade linking church and hall.

<u>Townscape</u>: Contributes to local street scene. Key landmark.

Historic: Community associations

Photograph date: December 2010

Sources: Pevsner; <a href="http://www.mostsacredheartruislip.co.uk/">http://www.mostsacredheartruislip.co.uk/</a>; <a href="http://www.pastscape.org.uk/">http://www.pastscape.org.uk/</a>



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Authenticity (I b): 2; Architectural (II d): 2; Townscape (III f): 2; Historic (IV h): 2

Total = 8

Building Name/No:	The Stables	Serial N	No:	300
Address:	Goulds Green, Uxbridge, UB8 3DG			
Ward:	Botwell	Use:	Agrid	cultural



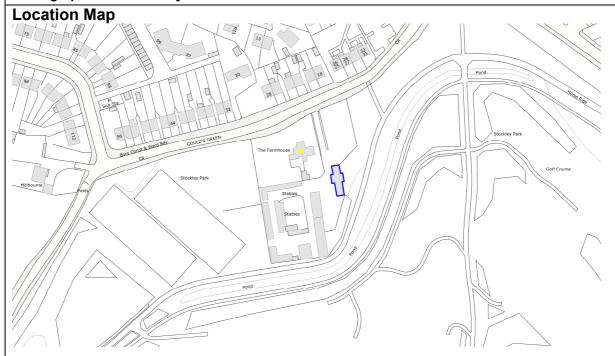
#### Statement of significance/Reasons for designation

<u>Architectural</u>: Late 19<sup>th</sup> C stable block to Goulds Green Farm. Two storey hayloft and dovecot, with single storey stable wings to each side; in stock bricks, slate roof with terracotta ridge tiles. Brick dogtooth eaves detail and string course, decorative arches to doors and windows. Original timber doors. In poor condition.

Townscape: Contributes to the street scene and local character.

Historic: Associated with the farming history of the area.

Photograph date: February 2011



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Authenticity (I c): 1; Architectural (II d): 2; Townscape (III f): 2; Historic (IV h): 2

Total = 7

Building Name/No:	Mayling Transport Yard	Serial No:	301		
Address:	Broadwater Lane, Harefield, UB9 6AH				
Ward:	Harefield	Use:	Vacant Site within a transport yard		





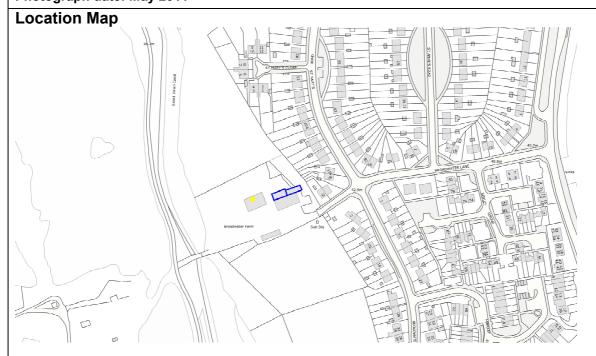
#### Statement of significance/Reasons for designation

<u>Architectural</u>: Two timber framed barns. East: early to mid 18<sup>th</sup> C timber frame barn with weather boarding and tile roof. In poor condition. Interior: some frames intact, some replaced and reused in present position. Some carpenters marks visible. West: adjacent smaller barn, also timber framed with weather boarding, although much altered.

<u>Townscape</u>: Surviving feature of the earlier barns, providing attractive local character.

Historic: Associated with the earlier agricultural use of the site.

Photograph date: May 2011



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Authenticity (I c): 1; Architectural (II d): 2; Townscape (III f): 2; Historic (IV h): 2

Total = 7

Building Name/No:	Dews Farm	Serial No:	302	
Address:	Harvill Road, Harefield, UB9 6JN			
Ward:	Harefield	Use:	Residential	





Photograph date: May 2011

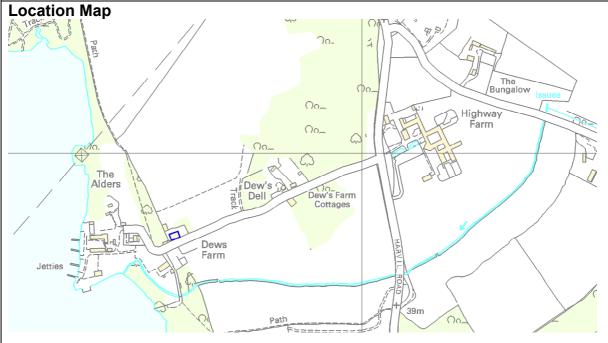
**Source: Harefield Local History Society** 

#### Statement of significance/Reasons for designation

<u>Architectural</u>: Two storey farmhouse with a possibly 15<sup>th</sup> C core, substantially rebuilt in the 19<sup>th</sup> C. Façade in brick with steep tiled roof, built on an half-H plan with two wings projecting on the street frontage. Attractive chimney stacks to the side.

<u>Townscape</u>: Picturesque setting within Green Belt.

<u>Historic</u>: Originally a farm house associated with the Brackenbury Estate, visited by Queen Elizabeth in 1602. A blue plaque was placed on 17<sup>th</sup> February 2011 for Cecil John Kinross, a WWI soldier who was born here.



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Authenticity (I c): 1; Architectural (II d): 2; Townscape (III g): 1; Historic (IV h, i): 2+1

**Total** = 7

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#### **OLDER PEOPLE'S PLAN - PROGRESS UPDATE 2011-12**

Cabinet Members	Councillor Ray Puddifoot Councillor Philip Corthorne
Cabinet Portfolios	Leader of the Council Social Services, Health & Housing
Officer Contact	Dan Kennedy – Central Services / Social Care, Health & Housing
Papers with report	Older People's Action Plan 2011-12

Officer Contact	Dan Kennedy – Central Services / Social Care, Health & Housing			
Papers with report	Older People's Action Plan 2011-12			
<b>HEADLINE INFORMAT</b>	<u>'ION</u>			
Purpose of report	To provide an update on improvements delivered for older people, contained within the Older People's Plan.			
Contribution to our	The older people's plan assists the Council to deliver its plans to			
plans and strategies	put residents first and to work with partners in delivering the			
	Sustainable Community Strategy for Hillingdon.			
Financial Cost	The majority of proposals will be financed from within existing			
	resources. However, some proposals may be financed via			
	funding set aside under the "Leader's Initiative".			
Relevant Policy	Social Services, Health & Housing			
Overview Committee				

Ward(s) affected

ΑII

#### **RECOMMENDATION**

That Cabinet notes the significant achievements to deliver the older peoples action plan during 2011/12 to date to improve the quality of life of older people.

#### **INFORMATION**

#### Reasons for recommendation

1. The Older People's Plan endorses the commitment from the Council and its partners to the continued development and improvement of services designed to create a better quality of life for older people in Hillingdon. The plan supports the council to put residents first and supports Hillingdon in delivering the Sustainable Community Strategy.

#### Alternative options considered / risk management

2. None considered

#### **Comments of Policy Overview Committee(s)**

3. None at this stage

#### **Supporting Information**

- 4. The implementation of the Older People's Plan is achieved through annual action plan targets.
- 5. The Plan has been developed in consultation with older people and a wide range of partners including the Hillingdon Primary Care Trust, Hillingdon Hospital, Voluntary Sector Partners, Police, Ambulance Service and Fire Brigade. This collaborative approach has proved successful and will continue to further improve services for older people in the borough and promote health and well-being in Hillingdon.
- 6. The Older People's Action Plan is made up of key themes which older people have said are important to them. They include: safety and security; preventative care; keeping independent and healthy; supporting older people in the community; and housing.
- 7. The action plan is regularly monitored and updated. Projects identified by the Leader's Initiative are considered against these stated themes.
- 8. The resident's survey 2010/11 confirmed that older residents show high levels of satisfaction with the council and specific initiatives under the Older People's Plan and Leader's Initiative. Free burglar alarms and council tax freeze initiatives are rated as 'very important' by residents (93% and 88% respectively).

How important are the following initiatives?	2010
Council tax freeze for over 65s	88%
Support for victims of burglary	93%
Older people's budget	84%
Brown badge scheme	76%
Free swimming	74%

9. There have been a number of achievements during 2011/12 so far. Highlights include:

#### Safety and Security

Free burglar alarms - Provision of free burglar alarms for older people. All the planned 500 alarms have now been installed into the homes of older people in the period 1 April 2011 to 31 August 2011 and all older people receiving an alarm also receive an information pack on home security. This project has been funded by the Leader's Initiative. The next phase of the initiative started on 12 September 2011. In total, we

are on track to install 3,500 burglar alarms to older people by March 2012 since the scheme started.

- Rogue traders Up to the end of July 2011, Trading Standards received 13 reported incidents of rogue builders. All complainants were visited by the Trading Standards Team.
- Raising Awareness of Home Safety Since April 2011, 32 staff members have completed the e-learning 'be-safe-at-home' course which increases awareness and understanding of home safety risks and what to look for when visiting the home of a resident. 90% of staff completing the course has said it is 'good' or 'excellent'.

#### **Preventative Care**

 <u>Telecareline</u> – In April 2011 the London Borough of Hillingdon launched the new TeleCareLine offer. The service supports residents to live safely and independently in their own homes and as such is central to transforming our social care offer. It makes greater use of a range of equipment, such as sensors and detectors all connected back to our staffed local control centre.

Building on our track record of support for vulnerable older people we are offering the service free to any resident in the borough over the age of 85. We are also offering it free to residents who qualify for adult social care services and who meet financial eligibility criteria. And for 6 weeks to anyone receiving reablement.

By offering the service free we are taking a preventative approach so that more older and disabled residents can remain independent for longer.

Since 1 April 2011 to the end of August we have installed 506 units and are on track to help an additional 750 resident's during the first full year of the service.

The development of services like Telecareline is part of a broader strategy working across social care, health and housing to help reduce the need and frequency for admission to hospital for people with needs arising from a stroke, incontinence, dementia and injuries arising from a fall.

#### **Keeping Independent and Healthy**

<u>Extending the Brown Badge Parking Scheme</u> – The Brown Badge Parking Scheme
 offers older people a designated place to park their car / vehicle which means older
 people are closer to amenities. This helps to maintain their independence.

To date, since the scheme started, a total of 6,595 Brown badges have been issued, with 496 being issued being issued since April 2011 to date. To extend the scheme further, we are currently considering 3 potential 'on-street' locations covering Ruislip, Uxbridge and Hayes. Approval will be required from the Department for Transport for 'on-street' parking bays.

<u>Free Swimming</u> – Free swimming sessions for older people continues to be successful.
 During the first 5 months of this year a total of approximately 7,796 free admissions were recorded across the entire borough's swimming facilities.

- Allotments A number of short gardening courses have been held at Hayes End Allotments since April 2011 with Adult Education. More are planned and will concentrate in the south of the borough as this is where there are vacant plots (110 in total).
  - Resurfacing works have been completed at Stafford Road site to improve access for all users. DASH continue with their project to build a disabled friendly garden (with paths and raised beds etc) at Belmore Allotment Site and the council continues to support this project.
- Active ageing We currently have 6 Age UK Extend Exercise classes in Hillingdon that
  are taking place at community centres and sheltered housing sites and the Boots
  Wellbeing Centre. The classes provide gentle exercise to music for the over sixties to
  promote health, increase mobility and independence, improve strength, co-ordination
  and balance and to counteract loneliness and isolation.
- In addition 6 week Yoga courses at 3 sites have started and being delivered by an AGE UK volunteer.

#### **Supporting Older People in the Community**

- <u>Support for Older People During the Economic Down-turn</u> Financial health check sessions continue to be delivered in local libraries, sheltered housing, lunch clubs and community centres across the borough.
- Between April & June 2011 a total of 38 local financial heath check surgeries were delivered along with 68 home visits. From this outreach work a total of 49 benefits checks were undertaken. 22 Attendance Allowance claims were awarded totalling annual payments of £74,089.60. A further 2 Carers Allowance were awarded totalling annual payments of £3,926 plus backdated limp sums; and 1 award of Pension Credit totalling an annual payment of £1,249.
- Heater Loan Scheme Article scheduled for November/December 2011 edition of Hillingdon People with feedback comments from scheme users. In 2011 a total number of 17 older people received heaters on loan to support them when dealing with heating systems breakdown/repairs.

#### Housing

- Improving Housing Conditions for Older People Hillingdon have continued to improve the homes of older people. The total to end of August 2011, 126 properties have been improved for older vulnerable persons. On track to achieve the target of 310 properties improved by March 2012.
- <u>Extra Care Housing</u> new extra care housing provided to help older people live independently in the community
- 10. A full progress update of the action plan during 2011/12 is attached under appendix one.
- 11. <u>Leaders Initiative Supporting Older People</u> The Leaders Initiative has continued to support a broad range of projects and events, developed both within the community, with

partners and across council services, to enable older people to remain independent, active and healthy.

#### 12. Key projects include:

- Burglar alarms for older people to help them keep safe
- Barnhill Community Association range of social events and day trips for older people attending the weekly senior citizens club.
- Age UK Hillingdon 60 Plus Fair The Age UK Hillingdon 60 plus Fair took place on Tuesday 11th October 2011 in the Pavilions Shopping Centre, Uxbridge. The event is unique in providing both information and entertainment specifically targeted at the over 60s. The information provided aims at keeping older people healthy, safe and active in their life but especially in their retirement. The event has been running for the past 8 years.
- A defibrillator trial in libraries.
- Heater loan scheme to assist older people during colder weather when their heating and hot water systems fail.

#### **Financial Implications**

13. The majority of proposals will be financed from within existing resources. However, some proposals may be financed via funding set aside under the "Leader's Initiative".

#### **EFFECT ON RESIDENTS, SERVICE USERS & COMMUNITIES**

#### What will be the effect of the recommendation?

14. The Older People's Plan is welcomed by older people as positively continuing to raise their value and profile and is an opportunity to improve the lives of older people in the community.

#### **Consultation Carried Out or Required**

15. Regular feedback from the Hillingdon Older People's Steering Group and Older People's Assembly is used to help shape future priorities. The Older Peoples Assembly in Hillingdon receives progress updates on delivering the promises set out within the Older Peoples Plan.

#### **CORPORATE IMPLICATIONS**

#### **Corporate Finance**

16. Corporate finance has reviewed this report and is satisfied that the financial implications reflect the resource implications for the Council for the implementation of the Older People's Plan. Corporate Finance is satisfied that the majority of the proposals will be contained within existing budgets but that some proposals may be financed by funding set aside under the "Leader's Initiative".

#### Legal

17. Under the Council's Constitution the Cabinet has the appropriate powers to agree the recommendation proposed at the outset of this report. There are no other significant legal implications arising out of this report to bring to Cabinet's attention.

#### **BACKGROUND PAPERS**

NIL

### Older Peoples Action Plan 2011/12 – (Quarter 2 – Progress Update)

Ref No	Task	Actions	Lead	Target Dates	Quarter 2 progress update			
Safe	Safety and Security							
1.1	Promote initiatives for older people to manage their own safety	1.1.1 Maintain programme of keeping safe initiatives targeting relevant community groups throughout 2011/12	Sarah Morris / Nick Ellender	31.03.12	On track (green) - Following a review of the successful 2010/11 programme, which covered seven community forums and nearly three hundred people, a further programme of presentations will be targeted this year to reach a wide audience. This includes key groups such as the Older People's Assembly, the Assembly for People with Disabilities and Carers Groups. This will complement additional information about keeping safe published on the Council's website.			
1.2	Increase home security among older people.	1.2.1 Ensure burglar alarms commissioned by the Leader are installed	Liz Jones	31.03.12	On track (green) – At the end of August, Phase 3 of the burglar alarm scheme has been delivered with 500 alarms installed (a total of 3,000 alarms to date). Phase 4 on the programme started on 12 September 2011.  Upon completion of phase 4 we will have delivered a total of 3,500 alarms since the scheme started.			
		1.2.2 Promote increased home security - distribute information packs about security to all future recipients of alarms	Liz Jones	31.03.12	On track (green) - Information packs about security are distributed to all recipients of alarms			
1.3	Take action to tackle rogue traders.	1.3.1 Address reports of Rogue Traders in cooperation with Police and other partners.	Peggy Law	31.03.12	On track (green) – Up to the end of September 2011 a total of 13 instances of rogue builders have been responded to. All complainants were visited by Trading Standards.			

Ref No	Task	Actions	Lead	Target Dates	Quarter 2 progress update
		1.3.2 Ensure Be-Safe at Home e- learning is accessed by Council staff 12 times per year	Liz Jones	31.03.12	On track (green) – Since April 2011, the 'Be Safe at Home' e-learning training module has been accessed by 32 staff  The feedback from staff has been very positive and is helping staff to be alert to home safety issues when they visit the homes of our resident's in their day to day work.  90% of users rate the e-learning as 'good or excellent'.
	entative Care				
2.1	Further develop dedicated reablement and support services to help older people and people with disabilities maintain independent living	2.1.1 Further develop the reablement service to promote independent living.	Sarah Morris/ Brian Barry	31.03.12	On track (green) – The re-ablement service is making a positive difference to the lives of older people in Hillingdon. On average one in three people needing the service (for example when they leave hospital) is able to live independently without social care support after 6 weeks of intensive re-ablement service. In addition one in five people need a reduced support package following re-ablement.
		2.1.2 Deliver the Telecareline offer to older people	Ann Ottesanya	31.03.12	On track (green) – Since 1 April to the end of August, 506 residents have benefited from Telecare line equipment to help them live independently in the community. We are on track to help the planned 750 older people with this service by March 2012.

Ref No	Task	Actions	Lead	Target Dates	Quarter 2 progress update
<b>Keep</b> 3.1	oing independent and heal Ensure all new and	3.1.1 Promote take up of personalised	Sarah	31.03.12	On track (green) – Self-Directed Support is on
	existing service users / carers are offered a personal budget	budgets – implement a communications and training plan to support changes in care management practice to deliver on self-directed support	Morris/Sharon Townsend/Beli nda Norris		track to be extended across adult social care from October 2011. Training is being organised for all staff. Phased implementation of the pre-paid card is to commence in October 2011.
		Зиррогі			Development of a Resource Allocation System is underway; implementation is set to go live with IT system improvements planned for October 2011.
		3.1.2 Promote take-up of SDS to achieve a target of 30% by 31 <sup>st</sup> March 2012.	Sarah Morris/Belinda Norris/Sharon Townsend	31.03.12	On track (green) – The take up of Self Directed support continues to increase. We are on track to achieve the 30% target by March 2012.
		3.1.3 Ensure personal budgets are accompanied by changes in service provision towards diverse community services – moving away from buildings-based support to integrated day opportunities and PA's	Sarah Morris/Belinda Norris/Sharon Townsend	31.03.12	On track (green) – Community and voluntary based services are being agreed as the services within personal support plans. Building – based day care provision is considered for dementia care and in terms of critical risk.
3.2	Extend opportunities for older people to participate in Sport and physical activity	3.2.1 In partnership with Age UK, deliver activities for older people	Howard Griffin	31.03.12	On track (green) - We currently have 6 Age UK Extend Exercise classes in Hillingdon that are taking place at community centres and sheltered housing sites and the Boots Wellbeing Centre. The classes provide gentle exercise to music for the over sixties to promote health, increase mobility and independence, improve strength, coordination and balance and to counteract loneliness and isolation.
					In addition 6 week Yoga courses at 3 sites have started and being delivered by an AGE UK

Ref	Task	Actions	Lead	Target Dates	Quarter 2 progress update
No					volunteer.  Funding for a new Age UK Hillingdon Bowls Club has been secured that started at the Clarets Catholic Hall, Botwell Lane in September. Two volunteers have been recently trained to become walk leaders as part of the Healthy Walks Programme.
		3.2.2 Continue to deliver free swimming for residents over 65.	Howard Griffin	31.03.12	On Track (green) - A revised local scheme for free swimming was launched in April for residents only. The free swimming offer applies to people aged 65 and over and is available at all indoor public pools in Hillingdon.  The scheme continues to be successful. During the first 5 months of this year a total of approximately 7,796 free admissions were recorded across the entire borough's swimming facilities.
3.3	Investigate extension of brown badge scheme to private car parks	3.3.1 Continue to identify additional car parks as possible locations for new Brown Badge scheme during 2011/12	Roy Clark	31.03.12	On track (green) – We are currently looking at 3 possible on street locations in Ruislip, Uxbridge and Hayes. The exact locations are to be decided but it is planned to introduce 2 bays in each site.  The installation will require permission from the Department for Transport for the use of non-standard signs and road markings on the public highway.
		3.3.2 Process and issue <b>100</b> % of all new Brown Badge applications within 4 working days of receipt.	Roy Clark	31.03.12	On track (green) – 496 Brown Badges have been issued this financial year. To date a total of 6,595 Brown Badges have been issued.

Ref No	Task	Actions	Lead	Target Dates	Quarter 2 progress update
3.4	Promote take-up of allotments in Hillingdon amongst older people	3.4.1 Adult education on allotments run at 2 locations to promote take-up of allotments - 2011	Paul Richards	31.03.12	On track (green) - A number of short gardening courses have been held at Hayes End Allotments since April 2011 with Adult Education. More are planned and will concentrate in the south of the borough as this is where there are vacant plots (110 in total).  Resurfacing works have been completed at Stafford Road site to improve access for all users. DASH continue with their project to build a disabled friendly garden (with paths and raised beds etc) at Belmore Allotment Site and the council continues to support this project.  In August, compost was delivered to DASH for sites with raised beds from West London
					Composting (WLC) as part of National Allotment Week.
	porting Older People in the			04.00.40	
4.1	Improve financial inclusion for older people in the borough	4.1.1 Deliver benefits and financial advice and support sessions for older people across the borough through the Age UK Hillingdon financial health checks	Chris Commerford (Age UK) / Rob Mackenzie- Wilson	31.03.12	On track (green) - Financial health check sessions continue to be delivered in local libraries, sheltered housing, lunch clubs and community centres across the borough.
					Between April & June 2011 (quarter 1) a total of 38 local financial heath check surgeries were delivered along with 68 home visits. From this outreach work a total of 49 benefits checks were undertaken. 22 Attendance Allowance claims were awarded totalling annual payments of £74,089.60. A further 2 Carers Allowance were awarded totalling annual payments of £3,926 plus backdated limp sums; and 1 award of Pension Credit totalling an annual payment of £1,249. (Quarter 2 data being collated).

Ref No	Task	Actions	Lead	Target Dates	Quarter 2 progress update
	Support older people in their own homes to stay warm and healthy during winter months	4.1.2 Deliver the Heater Loan Scheme to provide free temporary heaters and small grants to cover electricity costs to older people that have no heating because of recent breakdown.	Belinda Norris	31.03.12	On track (green) - Article scheduled for November/December 2011 edition of Hillingdon People with feedback comments from scheme users. In 2010/11 a total number of 17 older people received heaters on loan to support them when dealing with heating systems breakdown/repairs.
Hous	sing				
5.1	Help older people to live independently in safe, warm homes	5.1.1 Improve 310 private sector homes for older vulnerable people. (Includes energy efficiency measures and essential repairs).	Beatrice Cingtho/ Nick Millard	31.03.12	On track (green) - The total to end of August 2011, 126 properties have been improved for older vulnerable persons. On track to achieve the target of 310 properties improved by March 2012.
5.2	Deliver the Disabled Facilities Grants programme within budget and maximise economies of scale	5.1.2 Complete 200 major adaptations increasing independence and safety for people with disabilities	Beatrice Cingtho/ Nick Millard	31.03.12	On track (green) - On target to reach 100 by end of September 2011 (86 to date as of the 24 August 2011). A total of 200 improvements to properties are targeted by 31 March 2012.
5.3	Deliver Extra Care Housing to help people live independently in their own home.	5.1.3 Deliver 95 units of Extra Care Sheltered Housing	Beatrice Cingtho/ Paul Feven	31.03.12	On track (green) – 83 people have been identified for new Extra Care Schemes with individual care packages being put in place to support independent living.

#### DISABLED PEOPLE'S PLAN UPDATE

Cabinet Member	Councillor Philip Corthorne
Cabinet Portfolio	Social Services, Health & Housing
Officer Contact	Dan Kennedy – Central Services / Social Care, Health & Housing
Papers with report	Detailed progress report against actions within the plan attached as Appendix 1.

#### **HEADLINE INFORMATION**

<b>Purpose</b>	of re	port
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To provide Cabinet with a performance update on the Disabled People's Plan action plan for 2011-12 up to the end of Quarter 2.

### Contribution to our plans and strategies

The Plan contributes to the delivery of the aims of:

- The Council's Single Equality Scheme
- Disabled Children Strategy
- Joint Carers' Strategy (2008 2018)
- The plan also supports the objectives of the joint strategies for people of working age with physical and/or sensory disabilities, older people and adults with mental health needs.

#### Financial Cost

Costs attributed to this plan are accounted for in individual service budgets

#### Relevant Policy Overview Committee

Social Services, Health & Housing

Ward(s) affected

ΑII

#### RECOMMENDATION

That Cabinet notes the progress made on the delivery of the 2011/12 Disabled People's Plan to date.

#### **INFORMATION**

#### Reasons for recommendation

1. The Disabled People's Plan was developed to identify and address some of the challenges facing disabled people of all ages in Hillingdon by identifying what the council can do directly, or through its influence with others, to improve the lives of disabled people and to maximise their health and wellbeing.

#### Alternative options considered / risk management

2. None considered.

#### **Comments of Policy Overview Committee(s)**

3. None at this stage.

#### **Supporting Information**

4. The position at the end of quarter 2 is set out in Appendix 1. Some highlights of the plan so far this year include:

#### Improving Health, Housing and Social Care

- Promote the take up of personalised budgets Self-Directed Support is on track to be extended across adult social care from October 2011 which will offer greater choice and control over the support arrangements for adults with a disability and older people. Training is being organised for all staff. Phased implementation of the prepaid card is to commence in October 2011.
- Increase the independence and safety for people with disabilities 86 properties (to 24 August 2011) have been provided with adaptations to enable users with disabilities to have greater independence within their home.
- Provide less restrictive models of housing and support Six service users from Charles Curran House have accepted flats at Cottesmore Extra Care Service and will be moving in November 2011. A further 6 people currently living in residential inhouse services are viewing supported housing options.

#### Keeping Children and Young People, Healthy, Safe and Supported

- Improving services on offer to younger people in sports facilities A number of
  programmes have been developed and delivered to provide people with disabilities
  an opportunity to be involved in sporting activities, including Boccia (a form of bowls
  for people with a physical disability), table tennis, badminton, new age kurling and
  basketball. The Council is now also providing allocated supervision time in a section
  of the pool, for people with physical disability, and Yoga for Mental Health disability.
- Extend community based sports development programmes offering new activities – Gymnastics, swimming lessons and football for disabled children is being delivered at Botwell Green Sports and Leisure Centre to engage children.

At Queensmead sports centre a multi-sport club has been developed for disabled children, ensuring children with a disability have the chance to participate in activities like trampolining, table tennis, badminton and basket ball amongst other sports.

The Panathalon challenge is due to commence on the 12<sup>th</sup> December 2011 and will run through to March 2012 for disabled children.

We are working with Queens Park Rangers to start tiger cubs football at Hillingdon Sport and Leisure complex which is aimed at children and young adults with downs syndrome.

#### **Making Hillingdon Safer**

 Enforcement of legislation to ensure Equalities Act compliance to prevent traders from creating obstructions in public areas - All reports of advertising boards causing an obstruction on the pavement have been followed up by Anti-Social Behaviour Investigation Officers. In all cases the shop keepers are required to move the advertising boards to a position where they do not cause an obstruction. There have been no prosecutions as there has been full compliance.

#### **A Thriving Economy**

 Provide briefings and information to support disabled people with the transition to the new benefits system - To raise awareness and understanding about the changes in the benefits system and how this may affect people, it is proposed to hold a briefing and discussion with the Assembly for People with Disabilities before the end of March 2012.

#### Opportunities Open to All & A Prosperous Borough

- Improve the educational standards of Children with disabilities. An effective
  process for commissioning is now in place and has been formed with input from
  relevant services. Processes for planning the education and training for young
  people with a Learning Difficulty and Disability is now well established. Effective links
  have been formed with Connexions and Adult Social Care.
- There have been a number of key achievements from the 2-year Inclusion Strategy. These include:
  - the implementation of the Inclusion Development Plan in schools 'year of Autism' including the production of a training DVD
  - a parent participation forum and website which is now in place.

A disabled children's participation project was completed with 4 disabled young people trained as champions for their peers and are now on the Youth Council.

A Speech and Language screening tool has been introduced for all 5 year olds to identify needs earlier and consistently across the Borough.

#### **Financial Implications**

5. The tasks contained in this action plan will be carried out within existing resources.

#### **EFFECT ON RESIDENTS, SERVICE USERS & COMMUNITIES**

#### What will be the effect of the recommendation?

6. The Plan seeks to ensure responsive services and better outcomes for disabled people.

#### **Consultation Carried Out or Required**

7. Updates of the plan are discussed with the Steering Group for the Assembly for People with Disabilities and members of the Assembly, including the Equalities and Disabled People's Member Champion. Consultation will be carried out with service users and user groups to identify the difference that services are making.

#### **CORPORATE IMPLICATIONS**

#### **Corporate Finance**

8. Corporate Finance has reviewed this report and its recommendations and is satisfied, that the cost of implementing the plan will be contained within existing budgets.

#### Legal

9. The Disabled People's Plan is underpinned by the Equality Act 2010, which harmonises and extends the law on disability discrimination and which replaces the Disability Discrimination Acts of 1995 and 2005. Therefore, the Plan will need to be kept under review and may need to be adjusted in future to take account of these changes so that the Council is at all times fully compliant with its legal obligations.

#### **BACKGROUND PAPERS**

Hillingdon Partners Sustainable Community Strategy Hillingdon Disability Equality Scheme Hillingdon Single Equality Scheme Disabled Children's Strategy Disabled People's Plan 2009-2012

### Disabled Peoples Plan Action Plan 2011/12 – (Quarter 2 Progress Update) Appendix 1

Ref No:	Task	Actions	Lead	Target Dates	Quarter 2 progress update		
A boro	A borough with Improving Health, Housing and Social Care						
1.1	Ensure all new and existing service users / carers are offered a personal budget	1.1.1 Promote take up of personalised budgets — implement a communications and training plan to support changes in care management practice to deliver an increase in the take-up of self-directed support (SDS)	Sarah Morris/Sharon Townsend/ Belinda Norris	31.03.12	On track (green) – Self-Directed Support is on track to be extended across adult social care from October 2011.  Training is being organised for all staff. Phased implementation of the pre-paid card is to commence in October 2011.  Development of a Resource Allocation System is underway; implementation is set to go live with IT system improvements planned for October 2011.		
		1.1.2 Increase take-up of Self Directed Support to achieve a target of 30% by 31 <sup>st</sup> March 2012.	Sarah Morris/Belinda Norris/Sharon Townsend	31.03.12	On track (green) – The take up of Self Directed support continues to increase. We are on track to achieve the 30% target by March 2012.		
		1.1.3 Ensure personal budgets are accompanied by changes in service provision towards diverse community services – moving away from buildings-based support where appropriate to integrated day opportunities and personal assistant's	Sarah Morris/Belinda Norris/Sharon Townsend	31.03.12	On track (green) – Community and voluntary based services are being agreed as the services within personal support plans. Building – based day care provision is considered for dementia care and in terms of critical risk.		
1.2	Deliver the Disabled Facilities Grants programme within budget and maximise economies of scale	1.2.1 Complete 200 major adaptations increasing independence and safety for people with disabilities	Beatrice Cingtho/Nick Millard	31.03.12	On track (green) - On target to complete 200 major adaptations by the end of March 2012. (86 to date as of the 24 August 2011).		

Ref	Task	Actions	Lead	Target Dates	Quarter 2 progress update
No:		1.2.2 Work in partnership with other boroughs and preferred contractors to deliver a 10% reduction in the average cost of Disabled Facilities Grants	Beatrice Cingtho/Nick Millard	31.03.12	On track (green) - The West London stair lift contract led by Hounslow Council is being expanded to include as many London Boroughs as possible. The adaptations and repairs contract is expected to be delivered from July 2012.
1.3	Re-shape housing support for people with learning disabilities and physical disabilities to increase alternatives to residential care which delivers	1.3.1 Identify individuals from in-house services to benefit from less restrictive models of housing and support.	Sharon Townsend/San dra Taylor	31.03.12	On track (green) - Six service users from Charles Curran House have accepted flats at Cottesmore Extra Care service & will be moving in November 2011. A further 6 people currently living in residential in-house services are viewing supported housing options.
	greater independence and choice	1.3.2 Identify and review service users with learning disabilities and physical disabilities who would benefit moving to supported housing from residential care	Sharon Townsend/ Colin Sowerby	31.03.12	On track (green) – Ongoing case reviews underway to identify potential service users who would benefit from a move to supported housing from residential care.
		1.3.3 Develop individual transition plans for planned moves from in-house services.	Sharon Townsend/ Sandra Taylor	31.03.12	On track (green) - Transition plans for those with planned moves are in place and further development work is being undertaken to provide users with an ongoing discharge/ transition pack of information for when they leave residential services.
1.4	Maximise affordable housing to enable residents to move from residential into supported and/or general need accommodation (with support).	1.4.1 Prioritise allocation of affordable housing for those with most need including people with learning difficulties, physical disabilities, mental health and older people.	Beatrice Cingtho/Emma Humphrey	31.03.12	On track (green) – To date, 3 people have moved from supported accommodation and a further 4 people have been nominated for independent accommodation. Suitable properties are being sought for 3 clients.

Ref No:	Task	Actions	Lead	Target Dates	Quarter 2 progress update
1.5	Ensure accessibility is at the heart of planning policy	1.5.1 Deliver accessibility projects as part of the local implementation plan (LIP)	Jales Tippell	31.03.12	On track (green) - Workshop event held in June 2011 for local residents. 131 accessibility improvements elicited of which 78 met criteria for LIP funding. Work is in progress to implement the various schemes and accessibility improvements across the borough. An example of an improvement project which met the LIP funding is the need for a Zebra crossing at the beginning of Joel Street as it begins at High road Eastcote. Work will commence on this after a site visit has been completed.
		1.5.2 To ensure all new and existing developments are inline with the accessibility guidance in the Equality Act.	Jales Tippell	31.03.12	On track (green) - The Council's Principal Accessibility Officer has provided advice and written comments on all relevant planning applications: 18 Major Developments; 85 Minor schemes; 27 Discharge of Conditions; 9 pre- applications/meetings. This ensures that all new and existing developments are in-line with the accessibility guidance.
					nere opportunities are open to all
2.1	Promote a range of activities to increase participation in sports for disabled residents.	2.1.1 Working with DASH and MIND to offer people with disabilities opportunities to participate in sporting activities	Howard Griffin	31.12.11	On track (green) - A number of programmes have been developed and delivered to provide people with disabilities an opportunity to be involved in sporting activities, including Boccia (form of bowls for disabled people with a physical disability), table tennis, badminton, new age kurling and basketball. The Council is now also providing allocated supervision time in a section of the pool, for people with physical disability, and Yoga for Mental Health disability.

Ref No:	Task	Actions	Lead	Target Dates	Quarter 2 progress update
		2.1.2 Work to extend community based sports development programmes offering new activities and opportunities to residents	Howard Griffin	31.03.12	On track (green) - Gymnastics, swimming lessons and football for disabled children is being delivered at Botwell Green Sports and Leisure Centre.  At Queensmead sports centre a multi-sport club has been developed for disabled children, ensuring children with a disability have the chance to participate in activities like trampolining, table tennis, badminton and basket ball amongst other sports.  The Panathalon challenge is due to commence on the 12 <sup>th</sup> December 2011 and will run through to March 2012 for disabled children.  We are leasing with Queens Park Rangers to start tiger cubs football at Hillingdon Sport and Leisure complex which is aimed at children and young adults with downs syndrome.
		2.1.3 Promote parks activities to encourage take up and healthy activities for, disabled people	Paul Richards	31.03.12	On track (green) – Lombardy retail park is now more accessible for people in wheelchairs to ensure that disabled people are able to access the facilities.

Ref	Task	Actions	Lead	Target Dates	Quarter 2 progress update
No:	111111111111111111111111111111111111111				
3.1	g Hillingdon safer - A s Prevent obstruction	3.1.1 Enforcement of	Ed Shaylor	31.03.12	On track (green) – All reports of advertising boards
	of public spaces and shopping areas that disadvantage vulnerable people.	legislation to ensure Equalities Act compliance to prevent traders from creating obstructions in public areas disadvantaging vulnerable people e.g. enforcement of advertising ('A') boards legislation			causing an obstruction on the pavement have been followed up by Anti-Social Behaviour Investigation Officers. In all cases the shop keepers are required to move the advertising boards to a position where they do not cause an obstruction. There have been no prosecutions as there has been full compliance.
A thriv	│ /ing economy - A prosp	erous borough			
4.1	Explore how to support disabled people with the transition to the new benefits system, specifically in access to work	4.1.1 Arrange for briefings and information to be available to people with disabilities.	Jody Hawley	31.03.12	On track (green) – to raise awareness and understanding about the changes in the benefits system and how this may affect people, it is proposed to hold a briefing and discussion with the Assembly for People with Disabilities before the end of March 2012.
		4.1.2 Hold a carers event by March 2012 to promote access to employment and raise awareness about financial assistance that may be available.	Gary Collier	31.03.12	On track (green) – a carers event by March 2012 is being planned by the Employment Strategy Group for people with Complex Needs.

Ref No:	Task	Actions	Lead	Target Dates	Quarter 2 progress update
A bor	ough where opportuniti	ies are open to all; A prospero	us borough		
5.1	Improve the educational standards of Children with disabilities and additional needs	5.1.1 Learner Entitlement Vision includes all Learners with Learning Difficulties and/or Disabilities (LLDD) up to 25	Alison Moore	31.03.12	Completed (green) - An effective process for commissioning is now in place and has been formed with input from relevant services.  Processes for planning the education and training for young people with a Learning Difficulty and Disability is now well established. Effective links have been formed with Connexions and Adult Social Care.  Arrangements for additional learning support for learners with more severe needs in college are effective.
		5.1.2 Implement Inclusion Strategy Year 1	Pauline Nixon	31.03.12	<ul> <li>On track (green) – A refreshed action plan for year 2 of the Inclusion Strategy was signed off at the vulnerable children's strategic action group in November 2010.</li> <li>There have been a number of key achievements that include:         <ul> <li>the implementation of the Inclusion Development Plan in schools 'year of Autism' including the production of a training DVD</li> <li>a parent participation forum and website which is now in place.</li> </ul> </li> <li>A disabled children's participation project was completed with 4 disabled young people trained as champions for their peers and are now on the Youth Council.</li> <li>A Speech and Language screening tool has been introduced for all 5 year olds to identify needs earlier and consistently across the Borough.</li> </ul>

# WEST LONDON ACCREDITATION, PURCHASING AND CONTRACT MANAGEMENT SCHEME (APC) FOR ADULT RESIDENTIAL & NURSING CARE

Cabinet Member Cllr Philip Corthorne

Cabinet Portfolio Social Services, Health & Housing

Officer Contact | Paul Feven – Social Care, Health & Housing

Papers with report None

#### **HEADLINE INFORMATION**

#### Summary

Cabinet is asked to approve the Council's use of an approved list for adult residential and nursing care that has been developed by officers working as part of the West London Alliance (WLA).

The Accreditation, Purchasing and Contract Management scheme (APC) is designed to improve the market management of adult social care accommodation based services and improve the way the six WLA Councils commission care (in partnership with Brent, Ealing, Hammersmith and Fulham, Harrow and Hounslow). From November 2011 the WLA will implement an Approved List of providers of care homes for older people and begin the APC scheme. This will be followed in early 2012 with an approved list of more specialist care home providers.

### Contribution to our plans and strategies

This project will help to deliver a number of core priorities within the Sustainable Community Strategy including the delivery of high quality and cost efficient social care accommodation based services, supporting people with long-term needs and promoting outcomes and choice within the personalisation agenda. It also significantly advances the development of joint commissioning and procurement of core adult social care services across the sub-region.

#### **Financial Cost**

There are no costs to this proposal which is expected to contribute to the departments MTFF saving target.

Relevant Policy Overview Committee Social Services & Housing

Ward(s) affected

ΑII

Cabinet - 27 October 2011

#### RECOMMENDATION

#### That Cabinet:

- 1. Approve the proposal for the Council to use an approved list of adult social care home providers as part of the West London Alliance.
- 2. Approve the proposal for the Council to use the APC Scheme for adult social care home providers within the West London Alliance in tandem with the other 5 west London authorities.

#### Reasons for recommendation

1. This is one of the West London Alliance (WLA) projects designed to deliver efficiencies and improvements for care home placements. In addition, the project will enable better co-ordination between the west London authorities, simplifying and standardising business processes for the care home contracting process.

#### Alternative options considered / risk management

- 2. A review of alternative procurement routes has been considered as part of the West London Alliance. Block contracts are no longer appropriate due to the need for personalised and choice based approaches to care while spot purchases can be too fragmented and expensive.
- 3. The Council does not have to use the Approved List and the APC Scheme for purchasing care home services. However, the scheme offers the potential for reduced costs as well as more effective management of the care home market.

#### **Comments of Policy Overview Committee**

4. None at this stage.

#### **INFORMATION**

#### The West London Alliance

- 5. The West London Alliance (WLA) is a collaborative body made up of the six boroughs in North West London: Hillingdon, Hammersmith and Fulham, Harrow, Hounslow, Ealing and Brent. Adult social care is one of the areas of greatest interest for the WLA due to the high level of spend. Collaboration has been explored in order to achieve greater efficiencies from the care market, most notably cost savings and improving the quality of care for service users.
- 6. The creation of a WLA Efficiencies Unit working in tandem with each of the six boroughs has provided a framework for a collaborative programme of joint action within

Cabinet - 27 October 2011

adult social care services. In July 2008 Leaders, Chief Executives and Adult Social Care Directors of the six WLA boroughs agreed to develop a joint programme for high cost adult social care services with the objective of achieving large scale budget savings and cost avoidance. 70% of the adult social care budget is spent on service provision, with 70% of this being spent on the external provider market.

- 7. Overall strategic direction is provided by the WLA Leaders and Chief Executives. Chief Executives meet monthly and collectively monitor the performance and progress of the programme. A Programme Board comprising each borough's Social Care Director is accountable for the performance and development of the overall programme. Each project within the efficiency programme is sponsored by an ASC Director from the Programme Board who works closely with the project lead/s and provides advice, guidance and support to the delivery of the project.
- 8. Hillingdon Council has a key role in the day to day development of WLA projects. The Programme Board is chaired by Hillingdon's SCH&H Director. Day to day management of procurement projects is the responsibility of the Procurement Board which is chaired by Hillingdon's Head of Commissioning.

#### The Approved List and the APC scheme

- 9. In September 2011 the WLA formally launched the Approved List by inviting expressions of interest from care home providers. This is the first part of a longer term project to improve the way west London boroughs commission care in the residential and nursing care home market. This longer term project is referred to as the Accreditation, Purchasing and Contract management (APC) scheme.
- 10. The rationale for the scheme is that currently the six west London Boroughs separately purchase from 950 providers of care beds. 90% of spend however is with just 30% of these providers. Even the largest provider by spend has only 15% of the WLA market share and most have just one or two placements. With around 5000 residents being placed in care homes across the sub-region and an associated spend of around £200m per year, particular efforts are required in order to manage such a diverse market.
- 11. Borough budgets are also being reduced by an average of 26% over the four year life of the current grant from central Government. This means a reduction of funds to meet the increasing demand for care as the population ages and severity of those accessing care rises.
- 12. An Approved List was chosen as the most flexible tool to procure care home services with flexibility being the key requirement for a market subject to policy changes and changing commissioning intentions without committing authorities to a defined number of beds such as a block contract. Ultimately, the List will help to reduce the overall number of providers used by west London authorities and help build a stronger relationship with a smaller number of partners. The intended outcome is greater control of pricing, quality and investment in the sub-region. The Approved List is also designed to standardise the prices across west London. There will be one set of west London fee ceilings for the

provision of care for older people (as established by West London Directors of Social Care):

Residential care for frail elderly people	£466 per week
Residential care for elderly people with dementia	£540 per week
Nursing care for frail elderly people (including funded nursing contribution from NHS)	£616 per week
Nursing care for people with dementia (including funded nursing contribution from NHS)	£642 per week

- 13. Actual prices paid per bed will be expected to remain at or below these ceiling levels. By setting realistic fee ceilings and ensuring there is competition between providers for the placement of every resident west London authorities are more likely to be able to minimise unnecessary costs of care and make the budgets they have meet a higher number of residents needs.
- 14. The scheme is also designed to be attractive to providers. While there is new investment in the care sector of the economy, much of this is targeted at the more lucrative private payer or for Health commissioned placements which can generate more profit for the provider. Typically, local authorities pay between £400-500 per week for residential care as opposed to £700-800 per week in the same home for a Health "continuing care" placement. This price partly reflects the increased needs of the resident. Being selected to be on the Approved List will enable providers to have the opportunity for increased referrals and occupancy for their good quality local homes. Those providers on the Approved List will be given preference for care placements from west London in return for agreement to charge within the fee ceilings referred to above. Being on the list will give providers a competitive advantage in the market increased business referrals and placements as well as the opportunity to market themselves as a trusted provider.
- 15. Providers on the Approved List will work with Borough commissioners within the APC scheme on areas of mutual interest. They will have greater insight and certainly over likely future business opportunities than other providers in the market who are not engaged through the Scheme. A standard approach to commissioning and performance management will enable selected providers to meet the current and future needs of west London authorities with greater certainty.
- 16. There is a shortage of available local beds for some types of care and the APC Scheme will help to identify and address these. There is limited affordable capacity in Hillingdon and across the West London region within the residential dementia care market. There is also a limited supply of care for residents suffering from Korsokov syndrome (early onset of dementia). Working as part of the APC scheme, providers will be given greater confidence of the pattern of care provision required by west London authorities and the need for investment in these areas. Boroughs remain the main purchaser of bed spaces in the market, with some providers having 70% of their beds taken up by Local Authority residents.
- 17. In summary, the Approved List and APC scheme are designed to reduce the amount of providers used within west London, to enable the selected providers to flourish within

the market as a result and to ensure that authorities are provided with good quality and value for money care home services.

#### Phase 1 - The Approved list

- 18. The Approved List will be undertaken in two stages. The first stage will be focused on providers of care homes for older people. The second stage will be focused on specialist care home providers (including people with a learning and/or a physical disability). For both stages of the project, a list of residential and nursing home providers will be asked to express an interest in providing adult care services to the WLA. Providers will be assessed to ensure they meet the minimum requirements of the WLA to be financially sound, to be registered with the Care Quality Commission, to have suitable references and to be willing to charge for services at or below a defined fee level. The Approved List will be opened up to new providers an at least an annual basis.
- 19. The process for creating an approved list from the many providers in the market is as follows:
  - Care providers respond to an advert from the WLA and express an interest to become an approved provider.
  - They are set-up on CarePlace, a new WLA IT web-enabled database, and given
    access to their information to ensure it is accurate and complete. Council residents
    and staff will be able to search the database online in order to identify and contact
    local care providers.
  - Providers will be given an application pack to complete and return within a set timescale. The Application pack will be evaluated by a team of borough representatives. Ealing Council are leading this project and will provide the financial assessments of providers.
  - Applications will be evaluated to ensure those applying are financially fit to trade, are registered as professional care organisation able to provide the care needed, are willing to work within the price fee ceilings and to offer referees who will vouch for their quality of care.
- 20. The Approved List will go live in the autumn of 2011 and last for a period of four years.

#### Phase 2 - The APC Scheme

- 21. This phase of the project will enable the WLA to collaboratively manage the care home market more effectively by working with providers in the following project work streams:
  - Setting clear quality standards for the sub-region; monitoring and enforcing those standards
  - Agreeing current and future capacity required to ensure adequate choice of care for an increasing number of residents
  - Managing risk in the market

- Building a productive relationship with Health, particularly the new GP Consortia to ensure health and social care commissioners are working together and not competing with each other
- Working with providers to reduce their costs so they can remain viable businesses whilst lowering the cost of bed spaces to authorities
- 22. Project outcomes sought (both short term and longer term) are as follows:
  - A single set of fee ceilings for placements in care homes
  - An Approved List of suitable providers willing and able to provide services to residents in west London
  - A series of work streams to tackle some of the main issues in the adult care market including improving quality and choice
  - A forward plan of services needed in west London over the next 10 years,
  - A single commissioning strategy for west London created by Borough commissioners, key stakeholders and residents and providers,
  - Standard outcome based specifications for care services applicable across the sub region,
  - A plan to tackle blockages in the care market for example, standard training of care staff, an initiative with housing and employment to stimulate more workers into care.
  - A strategy around risk providing the structure, understanding and tools to better manage risk in the market, especially to promote new business and ideas in this traditionally risk adverse market
  - A pilot with Health to manage the market in partnership with GP Consortia
  - A single performance management regime across West London that allows carers and residents to be the main part of the feedback process, working with interest groups to provide feedback on quality
  - One set of specification that set out standards for care in West London. A subregional quality standard and kite mark recognised and supported by the Regulator.

#### **Performance Management**

23. The WLA Efficiencies Unit and the six authorities will jointly monitor expenditure and use the data to manage the performance of the providers. It is also intended to standardise and simplify the contracting and inspection systems and to use that data alongside user feedback to raise the quality of the care homes supplying the West London boroughs. If corrective action is not successful, under performing and comparatively high cost care homes will be removed from the Approved List and APC scheme.

#### **Timetable**

24. This project has been developed over the past 12 months. The following table indicates the main tasks and timescales including those that have already been completed.

Project element	Timescale
Project PID and presentation material produced and	Sept to Dec 10
Borough sign up	
Authority gained from lead Borough (Ealing) Cabinet	December 10
Scheme design	November to April 11
Consultation with providers	April - July 11
Contract preparation	April - August 11
Scheme advertised	August 11
Applicants join the IT system	August and Sept 11
	(older persons only,
	specialist care in new
	year)
Application packs sent to providers	October 11
Packs returned and evaluated	Nov 11
Scheme goes live for older people	Dec 11
Work streams launch	Dec 11
Advert for Specialist provision	Nov 11
Application process carried out	Jan - Feb 12
Scheme starts for specialist provision	March 12
Scheme reopened for new providers	Autumn – annually

#### **Financial Implications**

25. It is currently proposed that for the 2012/13 to 2015/16 MTFF, savings of £325k are included for 2012/13 only. This is based on a maximum potential (should all suppliers engage) of £1m although this is considered to be highly unlikely; to date one significant supplier has done so saving £200k/annum for Hillingdon. The proposed savings for 2012/13 are therefore cautious pending the launch following which the savings analysis will be refreshed based on actual take up and any necessary amendments included in future MTFF programme.

#### **EFFECT ON RESIDENTS, SERVICE USERS & COMMUNITIES**

#### What will be the effect of the recommendation?

26. Service-users will be able to have greater choice and better access to services for care home services that have been approved by West London Councils in terms of improved quality and more competitive prices. This arrangement will be appropriate to the development of self-directed support and the brokerage function.

#### **Consultation Carried Out or Required**

27. Consultation has taken place with the other WLA boroughs and communications with key care home providers. This has been followed by four provider events which all WLA providers were invited to attend. There have been six individual provider surgery days held at each of the boroughs for local providers to attend.

#### **CORPORATE IMPLICATIONS**

#### **Corporate Finance**

28. Corporate Finance has reviewed this report and is satisfied that £325k has been included as savings for 2012/13 as part of the 2012/13 to 2015/15 MTFF process. The savings at this stage are based on a cautious estimate and a further analysis and update will be made after the launch where figures will be based on actual take up. Any changes will be reflected in the MTFF programme.

#### Legal

29. This report seeks authority for the Council to participate in a call-off contract procured by the London Borough of Ealing in compliance with the Public Contracts Regulations 2006.

30. The Council's Procurement and Contract Standing Orders enable Cabinet to authorise the use of Proprietary External Lists "in order to meet the Council's procurement objectives". Provided that Cabinet is satisfied that participating in this procurement exercise will secure best value for the Council, there are no legal impediments to Cabinet agreeing the recommendation set out in the report.

#### **Corporate Landlord:**

31. Not applicable

#### **Relevant Service Groups:**

32. None

#### **BACKGROUND PAPERS**

33. None

# Agenda Item 15

By virtue of paragraph(s) 3 of Part 1 of Schedule 12A of the Local Government (Access to Information) Act 1985 as amended.

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# Agenda Item 16

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# Agenda Item 17

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# Agenda Item 18

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