

**Social Services, Health and Housing Policy  
Overview Committee**

**16 February 2010**



**HILLINGDON**  
LONDON

**Minutes -**

1.	<p><b>Members Present:</b> Councillors Judith Cooper (Chairman), Kenneth Bartram, Pat Jackson, Michael Markham, John Major and Anthony Way</p> <p><b>Apologies:</b> Councillor Peter Kemp (Councillor Kenneth Bartram substituting)</p> <p><b>Officers Present:</b> Neil Stubbings (Deputy Director ASCHH), Brian Doughty (Interim Deputy Director ASCHH), Paul Fevan (Head of Commissioning) and Beverley Grayley (Joint Commissioning Manager) and Nav Johal (Democratic Services)</p>		
2.	<p><b>Declarations of Interest</b></p> <p>Councillor Anthony Way declared an interest for item 8, The Future of Hillingdon Homes as he is a Board member.</p>		
3.	<p><b>Minutes of the meeting held on 28 January 2010</b></p> <p>Agreed as an accurate record.</p> <p>The information on ex hostel sites requested by Members at the meeting had been provided separately by the Deputy Director of Adult Social Care, Healthy and Housing.</p>		
4.	<p><b>Exclusion of the press and public</b></p> <p>It was agreed that all items of business were considered in public.</p>		
5.	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 75%; padding: 5px;"> <p><b>Background Report on the Hillingdon Centre for Independent Living</b></p> <p>The Joint Commissioning Manager presented the background report on the Hillingdon Centre for Independent Living (HCIL).</p> <p>The centre had been in existence since 1990, and was re-launched in September 2009 following funding that was made available. The centre operates 4 days a week, with one late evening opening also available to users. The Centre was used for people to go to for advice and to try out equipment that may be available to them.</p> <p>Since the re-launch staff had updated some of the equipment and were looking to expand this service. Simple daily aids, such as bath seats and kettle aids could be provided on prescription to service</p> </td> <td style="width: 25%; padding: 5px; vertical-align: top;"> <p><b>Action By:</b></p> </td> </tr> </table>	<p><b>Background Report on the Hillingdon Centre for Independent Living</b></p> <p>The Joint Commissioning Manager presented the background report on the Hillingdon Centre for Independent Living (HCIL).</p> <p>The centre had been in existence since 1990, and was re-launched in September 2009 following funding that was made available. The centre operates 4 days a week, with one late evening opening also available to users. The Centre was used for people to go to for advice and to try out equipment that may be available to them.</p> <p>Since the re-launch staff had updated some of the equipment and were looking to expand this service. Simple daily aids, such as bath seats and kettle aids could be provided on prescription to service</p>	<p><b>Action By:</b></p>
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	<p>users. This prescription exchange would not come into place until 2012.</p> <p>Members commented that the number of 'not known' comments on the monitoring information provided was high. The information was 'not known' because those users that called up requesting information were not asked the monitoring questions, just those that visited the centre.</p> <p>The first user-led group meeting was held yesterday. The aim of this meeting was to develop HCIL as a user led organisation.</p> <p>Members requested further information on what the cost was per service user, the time spent with each service user on average, and the range of cost and time.</p> <p><b>Resolved –</b></p> <ol style="list-style-type: none"> <li>1. That the Committee noted the contents of the report.</li> <li>2. That the Committee questioned officers on the report.</li> </ol>	<p><b>Joint Commissioning Manager</b></p>
<p>6.</p>	<p><b>Witness Session</b></p> <p>The Chairman thanked the witnesses, and particularly the service users, for attending the meeting. The witnesses that were in attendance were:</p> <ul style="list-style-type: none"> <li>• Grace Adjekum, Service User</li> <li>• Maureen Eames, Services User</li> <li>• Angela Wegener, Chief Officer DASH</li> <li>• Heather Russell, HCIL Manager</li> <li>• Gill Dickinson, Head of Adult Services NHS Hillingdon</li> <li>• Beverley Grayley, Joint Commissioning Manager</li> </ul> <p>The officers spoke of how HCIL was operating and future developments and answered Members questions.</p> <p>Services users spoke of their experience of HCIL and answered Members questions.</p> <p>A longer term goal was to provide users with more choice in the range and type of equipment available. This related to the prescription model that was discussed, and the timescale for implementing this was around 12-18 months. Other Boroughs would be monitored beforehand so that Hillingdon could do this in the best possible way. It was at the early stages of discussion.</p> <p>Members and Officers spoke about advertising the service. The service was used more by older people; DASH and Age Concern were closed worked with, and LINKs too. Officers were looking at developing web presence for HCIL. There was close working with Community Services and Social Services.</p>	<p><b>Action By:</b></p>

There were links with staff at Adult Social Care, and HCIL were working with people in different teams to ensure they had new and current equipment. There was also a trust of assessors from DASH. The information on equipment was provided in a database and this information could be explained to service users in detail. Other services and information available was also provided to service users.

It was stressed by Members and Officers that partnership was crucial and key to the working, and that it had always been present. It also brought about funding. HCIL had information about other organisations and private businesses that may be of use to service users.

HCIL did not provide transport to and from the centre. It was on a bus route and there was on-site parking available. Transport was something that could be looked at in the future. The centre did provide assistance to users by giving access to taxis and dial-a-ride services.

An outreach service was discussed. Staff from HCIL would go out to a service users home if it was required, but they were not replacing the services of Social Services. Although there would be some overlap.

It was hoped that in the future HCIL would be recruiting volunteers, particularly disabled people. This would give them good work experience and with a view to paid employment in the future.

An area for improvement highlighted was links with hospitals and how information was passed to patients post-discharge.

The centre had PC and internet access to show the service users information and pictures of equipment that they do not have on site.

HCIL had the capacity to do more. It was not stretched or over-used. Especially during the winter months were not very busy. Staff had taken the winter months as an opportunity to signpost the centre. More people were wanted through the doors to use the service. HCIL would consider expanding opening hours and days to suit.

A West London wide service was discussed by Members and officers. This had pro's and con's. There were already a number of centres across West London, and the Borough needed to ensure we had this service available at a local level too.

Temporary users were also assisted at in the centre, there was a need to look at those with high needs as a priority. Officers needed to go into day centres, doctor surgeries to promote HCIL, also advertise in different places such as Hillingdon People. It was very much a leaflet based campaign originally but officers were looking at

**Interim Deputy  
Director  
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expanding this using the web and other ways.

Maureen Eames, Service User, cares for her husband who is disabled. She saw HCIL advertised at an open day. She had not had much success previously when she requested it through Social Services. HCIL helped a lot in providing equipment, information, advice and general assistance. The service that HCIL provided her and her husband had made life a lot easier for them, from simple things to frames for the bed and toilet to a recliner chair for sleeping downstairs. HCIL gave advice on eating, showed different equipment available and gave suggestions on changing things to make life easier, e.g. heightening the table. Maureen was asked to bring her husband to the centre where they showed them the range of things that may help them.

Maureen had been touch with Social Service prior to contacting HCIL but she felt they washed their hands with her as she was not available for any funding after being means-tested. No further advice or support was given to her from Social Services. Officers apologised for this bad experience and hoped that the advice and support she would get now from Social Services would be much improved. Regardless of the financial support available for the service user, Social Services should still be providing the same level of support to all. Officers will look into this and use this as a case study to ensure that Social Services provide a service to all, not just those eligible for grants.

A year later she found out about HCIL after seeing an advertisement. She felt very at ease when she entered the centre.

Grace Adjekum, Service User, had found out about HCIL from DASH. She originally thought it was part of DASH. She wanted to be more independent, and wanted the equipment to be able to do this. She called HCIL and they asked her to visit the centre. A DASH representative was also present at the centre and welcomed her at the gate.

Grace said the service she was provided with was very, very good. That she felt she could not have got that kind of service from Social Services. 95% of the time her social worker cannot answer her questions and that Social Services give do not give her the time she would like.

At HCIL they gave Grace time and talked her through the different equipment she could use. She found out a lot of information from HCIL, they showed her things through the internet and where to get equipment from. They also sent her a catalogue and were very helpful.

The service user believed that HCIL should be more known so that others were aware of the services it provided. She commented that it felt like the HCIL staff were like friends who knew what they were

**Interim Deputy  
Director  
ASCHH**

	<p>talking about. There was a human touch and they were very understanding.</p> <p>She also commented that when she was in rehabilitation in hospital they expected her to find out a lot of things herself without providing much support. Grace believed that HCIL should be broadcasted in hospitals so patients would know about the service provided to them. She also believed there should be closer working with Social Services so that social workers can see what HCIL could provide for them.</p> <p>Both service users were extremely happy with the service that was provided by HCIL. They commented that simple things from information provided by HCIL made things so much easier. The staff at the centre explained things very well and this service should be advertised more widely so that others could benefit from the service.</p> <p>The Council wished to improve the service provided by HCIL, whereas the PCT were happy with the service as it is. There is a good partnership with the PCT on this. It is very much a user-led organisation.</p> <p><b>Resolved –</b></p> <ol style="list-style-type: none"> <li>1. That the chairman and the committee thanked the service users and officers for attending and providing useful information on HCIL.</li> <li>2. The Committee recommended that the HCIL service be more widely advertised so that more people could get the benefits they offered.</li> <li>3. The Committee recommended that more awareness of the service was needed in other organisations such as hospitals and doctors surgeries.</li> <li>4. The Committee recommended that there be closer working with Social Services.</li> <li>5. The Committee recommended that web access be explored and advertising the service be improved using the internet.</li> <li>6. The Committee recommended there be strong links with the customer engagement team on improvements for HCIL.</li> <li>7. The Committee asked officers to come back to the committee on how the 3 organisations will work together to provide for the user.</li> <li>8. The Committee recommended that HCIL follow up Carers Assessment and any other input from Social Services that service users should be having.</li> </ol>	
7.	<p><b>Carers Assessment</b></p> <p>The Interim Director for Adult Social Care, Health and Housing provide the committee with a verbal update on Carers Assessment.</p> <p>The Council was on track to achieve its target, but they wished to exceed the target set. Therefore additional assessors were</p>	<p><b>Action By:</b></p>

	<p>appointed from funds received.</p> <p>Respite had been provided to an 100 additional families. There was still a long way to go for carers and for some groups in particular (such as mental illness).</p> <p>It was commented that all services users are entitled to prevented support and carers will need support in supporting others.</p> <p><b>Resolved –</b></p> <ol style="list-style-type: none"> <li>1. That a factual report be provided to members by the end of the year on the progress of Carers Assessment.</li> <li>2. The Committee recommended that Officers ensured that people who are not eligible for funding still received the information, support and advice they are entitled to from Social Services.</li> <li>3. Officers to use the Service User from the witness session as a case study on how to improve the service offered to carers and the results of this to come back to the committee.</li> </ol>	<p><b>Democratic Services</b></p> <p><b>Department Officers</b></p> <p><b>Department Officers</b></p>
8.	<p><b>The Future of Hillingdon Homes</b></p> <p>The Deputy Director of Adult Social Care, Health &amp; Housing introduced the report on the future of Hillingdon Homes that was going to Cabinet on the 18<sup>th</sup> February 2010. A previous report went to Cabinet in September which set out the background and rationale for returning the Housing Management Services to the Council.</p> <p>Officers explained that the strategic need for Almo's was disappearing. There were also savings included in the business case for this. Officers felt that 6 months to complete this process should be adequate.</p> <p>The contract with the council deals with the termination clause on a return date, and the legal and financial process must be completed. Staff would be returning to the council under the terms of TUPE legislation. Members stressed the importance of services not being affected by the change.</p> <p>There was an annual savings expectation of around £300,000 per year, which would be re-invested into the service. Officers anticipated that the tenants will have input to the way these savings are used.</p> <p>Risks assessment was discussed and how this would be measured. There would be a direct relationship between the service and the provider. The Council could also bid for social housing grants and have been successful in doing so. Hillingdon had the 2<sup>nd</sup> biggest grant in the country.</p> <p><b>Resolved –</b></p>	<p><b>Action By:</b></p>

	<p>That the Committee supported Cabinet's proposals and made the following comments to Cabinet:</p> <ol style="list-style-type: none"> <li>1. The Committee noted the value of effective tenant and leaseholder engagement and recommended that measures to facilitate robust tenant/leaseholder engagement were incorporated into the plan.</li> <li>2. Committee requested that Cabinet recognise the potential offered by the proposals to enable a strategic, joined up approach to services across ASCH&amp;H, the Council and its Partners.</li> <li>3. The committee suggested that one advantage of an early return date would be to reduce the negative impacts on staff, service users and residents who may feel uncertain about their futures.</li> </ol>	
9.	<p><b>Work programme 2009/10</b></p> <p>This is a standard item.</p> <p><b>Resolved –</b></p> <ol style="list-style-type: none"> <li>1. That the timetable of meetings and proposed work programme for 2009/10 be noted.</li> </ol>	<b>Action By:</b>
10.	<p><b>Forward Plan</b></p> <p>Members considered a condensed copy of the latest Forward Plan covering December 2009 to March 2010. This is a standard item.</p> <p><b>Resolved -</b></p> <ol style="list-style-type: none"> <li>1. That the report be noted.</li> <li>2. That the Interim Deputy Director of Adult Social Care, Health &amp; Housing report at the next committee on 'Support, Choice and Independence – The Future of Adult Social Care' report going to Cabinet in March.</li> </ol>	<p><b>Action By:</b></p> <p><b>Interim Deputy Director ASCHH</b></p>
	<p><b>Meeting closed at Meeting closed at: 9.07pm</b>  <b>Next meeting: 25<sup>th</sup> March 2010</b></p>	

These are the minutes of the above meeting. For more information on any of the resolutions please contact Nav Johal on 01895 250692. Circulation of these minutes are to Councillors, Officers, the Press and Members of the Public.