Minutes

SOCIAL SERVICES, HOUSING AND PUBLIC HEALTH POLICY OVERVIEW COMMITTEE

6 November 2017

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

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MEMBERS PRESENT:
Councillors: Wayne Bridges (Chairman)
        Jane Palmer (Vice-Chairman)
        Teji Barnes
        Peter Davis
        Becky Haggar
        Shehryar Ahmad-Wallana
        Tony Eginton
        Peter Money
        June Nelson
        Mary O'Connor (Co-opted Member)
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OFFICERS PRESENT:

Dan Kennedy - Deputy Director, Housing, Environment, Education, Health & Wellbeing
Gary Collier - Health and Social Care Integration Manager
Joan Veysey - Deputy Chief Operating Officer - CCG
Sandra Taylor - Assistant Director Provider & Commissioned Care
Manesh Patel - OPHS Operations Manager
Neil Fraser - Democratic Services Officer
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APOLOGIES FOR ABSENCE AND TO REPORT THE PRESENCE OF ANY SUBSTITUTE MEMBERS *(Agenda Item 1)*

None.
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DECLARATIONS OF INTEREST IN MATTERS COMING BEFORE THIS MEETING *(Agenda Item 2)*

Councillor Palmer declared a non-pecuniary interest in respect of item 6, as she had previously worked for TeleCare. Councillor Palmer advised that she would remain in the room when the item was discussed.
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TO RECEIVE THE MINUTES OF THE MEETING HELD ON 2 OCTOBER 2017 *(Agenda Item 3)*

Members sought an update on the completion of the actions resulting from minute 26: Adult Safeguarding Board Annual Report. The clerk confirmed that he was awaiting an update from the officers in question.

The Committee sought clarity on whether the Adult Safeguarding Board Annual Report was required to be presented at a Full Council meeting. It was agreed that the clerk would review the matter, and feed this back to
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Members accordingly.

RESOLVED: That the minutes of the meeting held on 2 October 2017 be agreed as a correct record.

33.	**TO CONFIRM THAT THE ITEMS OF BUSINESS MARKED IN PART I WILL BE CONSIDERED IN PUBLIC AND THAT THE ITEMS MARKED PART II WILL BE CONSIDERED IN PRIVATE** *(Agenda Item 4)* It was confirmed that there were no Part II items, and that all business would therefore be conducted in public.
34.	**2017/19 BCF PLAN** *(Agenda Item 5)* Gary Collier, Health and Social Care Integration Manager, introduced a report updating the Committee on the Better Care Fund Plan 2017-19. Mr Collier was supported by Joan Veysey, Deputy Chief Operating Officer - CCG. The Committee was advised that the Better Care Fund Plan (BCF) for the 2017/19 period was Hillingdon's third plan, and had now been approved by NHS England. The report outlined Hillingdon's performance against National Metrics, set by NHS England. While several targets had been missed, it was important to evaluate performance to target within the context of an aging population with increased complexity of need, and in these terms Hillingdon had done well to contain the level of growth and demand seen in the period. However, there was work still to be done to ensure performance continued to improve. While it had not been possible to deliver some of the key actions set out for the period 2016/17, much of the development work had taken place to help facilitate the delivery major of initiatives to be taken forward during the period 2017/19, such as integrated brokerage and integrated homecare. Members sought clarity on a number of points including: How were the delays in supporting the discharges from hospital for people with mental health needs being addressed? Processes to address the discharge of those with mental health issues were now being instigated much earlier. A new discharge management tool was now being used, which included regular meetings between mental health officers and housing officers. Whilst this was still a work in progress, improvements were starting to be seen. In addition, it was important to recognise that the data in the report set out the number of days that patients were delayed from being discharged, but not the number of individuals affected. People requiring specialist help were a relatively small number, but were often more challenging to find a suitable home setting and therefore could take a significantly longer amount of time to be discharged, thereby skewing the figures somewhat. Why was Hillingdon still considering joining the Accountable Care

Partnership (ACP)?

This was related to the development of a business case, as the Council was required to be certain that there were no undue risks to the Council.

NHS England required that the final BCF Plan was published by 11 September 2017. Why had Hillingdon missed this deadline?

Delays in publication were caused by local governance processes. The submission process guidance had been published by NHS England in July 2017, with templates submitted later. Hillingdon was therefore required to develop the Plan in August 2017, and were not in a position to seek approval of the Plan until the meeting of the Health and Wellbeing Board in September 2017. Hillingdon was not the only authority in such a situation, and had been in regular dialogue with NHS England throughout the process.

What was the reason for the decline in the emergency admittance of people aged 65 and over since 2014/15?

This was in large part due to the increased effectiveness of early identification and the addressing of needs prior to them becoming emergencies, through primary care settings (GPs) and the use of the Care Connection teams.

How was the initiative to electronically share data between Local Authorities progressing?

This was proving to be a challenge, though was still being worked on. Members would be kept informed of the progress to delivery.

Were there any challenges not set out within the report?

Challenges included the complexity of the landscape, and the need to change organisation and patient culture while having a finite care workforce. The number of people requiring care was increasing, and it was challenging to ensure that the requisite number of people were in place to effectively manage that care.

Were there any other areas identified that could host a local dementia resource centre, similar to Grassy Meadows?

The Wren Centre was Hillingdon's current resource centre, and it was intended to move to Grassy Meadows in June 2018. Grassy Meadows would include 88 self-contained flats and included 24/7 on-site care and support provision. Grassy Meadows was located centrally within the Borough, and would be used by local voluntary organisations for their own activity sessions.

Park View in West Drayton was a second site, comprising 60 flats, to open in September 2018. Park View, similar to Grassy Meadows, would include on-site care and provision.

Work was being undertaken to connect with local GPs, the Care Connection team, and third sector voluntary groups, to publicise the facilities at the sites and build a full programme of services and activities for the whole year.

Members provided feedback on behalf of residents, who were very pleased with both the Wren Centre and Yiewsley & West Drayton Community Centre, praising the timetable of activities and the caring and attentive staff. However, it was requested that further efforts be made to contact residents awaiting transport to the sites, in the event of a delay. Officers confirmed that there were mechanisms in place to contact waiting residents, and requested that further detail on specific cases be provided outside of the meeting.

Members requested that future reports include details of Hillingdon's performance to targets versus statistical neighbours. Officers agreed that this would be looked into.

RESOLVED: That:

1. **The report be noted; and**
2. **That the feasibility of including performance data against statistical neighbours be provided in future reports.**

35.	**UPDATE REPORT ON THE TELECARELINE** *(Agenda Item 6)*

UPDATE REPORT ON THE TELECARELINE *(Agenda Item 6)*

Sandra Taylor, Assistant Director Provider & Commissioned Care, provided the Committee with an update on the TeleCareLine Services. Ms Taylor was supported by Manesh Patel, OPHS Operations Manager.

The Committee was informed that the previous review into Assistive Technology was conducted in 2011, just after the inception of TeleCare within the Borough. Since then, the service had been offered for free to over 85's, and extended in 2015 to a free service for all residents aged over 80. Service users continued to grow, with 4,949 users as at September 2017. Within this figure, the total number of TeleCareLine (TCL) users aged 80+ was 3,768.

Service levels available to residents included:

Standard - Level 1 - included standard unit, pendant, bogus caller button and monitored smoke detector with the resident having their own nominated responders in the event of an emergency. Level 2 included the same equipment but with LBH mobile response service.

Enhanced - Level 3 - included the equipment in level 1 plus additional sensors to meet the needs of the client following an assessment e.g. falls detector, movement sensors, door sensors, again with the resident's own nominated responders, or Level 4 with LBH mobile response service.

The TCL system was monitored 24/7 by the Council's TCL team who provided the first line response to all alerts raised. For residents who had their own nominated responder, the TCL monitoring team would make contact with them in an emergency. Where emergency services were required, these would be instructed by the monitoring team. Residents who did not have family or friends living close enough to act as an emergency responder could still benefit from TCL via the Council's mobile response service. This support was provided by the Senior Reablement Carers

between 8am and 10pm, and the dedicated night response officer, who would respond to call outs as required.

An increase in enquiries had been seen relating to the smoke detector. The bogus caller button was rarely used, whereas the emergency call button, included within the home kit, was used frequently. Use of the Vega Watch was low, though the watch included functionality to provide GPS tracking, emergency calls, and zoning alerts, all of which were useful in locating the user and responding to them when required. The watch was often used in conjunction with door sensors, to provide an alert if the user left the property unexpectedly.

Devices were tested regularly, with a daily report compiled that showed device usage. If a device had been seen to have been out of use for 36 hours, the Council would receive an alert. Devices could be 'pinged' to ensure functionality, and calls would be made to users if devices remained inoperable. The TeleCare Line itself was subject to power cuts on occasion, though internal batteries in devices would ensure that these continued to work in the interim. Intermittent service issues often lasted for approximately 1 hour, and in the event of longer outages, courtesy calls would be made to users.

Technology within the marketplace was continuing to develop, including additional watch functions such as heart monitoring, useful in alerting of stroke or heart attack. Hillingdon was still assessing this technology, and likely would not adopt this for some time. Approximately 200 users were still on old systems, and the Council was looking to migrate those users to upgraded technology by the end of the year.

Moving forward, the Out of Hours call handling service would in future be handled by an external company, AnchorCall, with a go-live date of 27 November 2017. The Council would retain in-house front facing functions of the TeleCare service, including the processing of referrals, product support for staff and users, scheduling of new installations, booking maintenance/repair calls for the TeleCare equipment, and would continue to be first responders for alarm alerts, where applicable.

AnchorCall had been fully vetted as part of due diligence to ensure their service was fit for purpose and would provide the requisite quality of care for residents. As part of this due diligence, the OPHS Operations Manager had visited the AnchorCall Contact Centre, and had confirmed that their technology was much more advanced than that of Hillingdon. A comprehensive disaster recovery programme was in place, staff were professional and competent, and this was borne out in their number of users, which was over 36k.

Attention was drawn to the case studies set out in the appendices, which showed the value of technology in helping residents and carers to live more independent, happy lives.

Members raised the possibility of using the TeleCare technology to help residents alert the authorities in cases of domestic abuse. Officers confirmed that, in addition to the technology outlined previously, silent alarm buttons were available. All service users were informed that they were to use the alarms/alerts should they feel anxious, scared, or threatened in any way.

Officers advised that they would be happy to discuss the matter with Members in more detail outside of the meeting.

The Committee requested that officers elaborate on the use of TCL to help address the issue of loneliness and isolation in older residents of the Borough. Officers confirmed that the promotion of services and events such as dining centres, or use of community hubs such as Bell Farm Christian Centre, were historically more successful in addressing loneliness and social isolation than use of the TCL in general. However, these services and events were promoted though the TCL, and staff at the Contact Centre referred users of TeleCare to the relevant Council services, such as Social Care, or to other service providers such as Age Concern. Referrals could also be to Hospitals outside of the Borough.

However, The TCL received comparatively fewer calls at night, which allowed staff more time to talk with users. This helped staff to get to know the users in more detail, and forge relationships with regular callers that could help address loneliness. In addition, the time also provided the opportunity to gather information to pass to social workers as part of the referral process.

Members sought clarity on the number of residents using TeleCare aged under 80 years. Officers advised that this information could be provided outside of the meeting, but confirmed that there was a large focus on growing users aged 70-80, in an effort to have services in place before an individual's personal circumstances were in 'crisis'.

Members suggested that more volunteers at the Contact Centre, and that further promotion of the services via social media platforms or Hillingdon People, would further improve quality of care and uptake of services. It was requested that this be considered as a potential recommendation to Cabinet as part of the current review into loneliness and social isolation in older residents.

Members requested that a visit to the Contact Centre be arranged.

RESOLVED:

1. **That the report be noted;**
2. **That information on users of the TeleCare services aged under 80 years be forwarded to members of the Committee;**
3. **That the potential for increasing volunteers within the Contact Centre and further promotion of the service within relevant media platforms be considered as a potential recommendation to Cabinet as part of the review into loneliness and social isolation in older residents; and**
4. **That a Member visit to the Contact Centre be arranged.**

36.	**OLDER PERSONS SERVICE AT BELL FARM CHRISTIAN COMMUNITY CENTRE** *(Agenda Item 7)*

The Committee noted the report submitted by Jane Cook, Director of Projects at Bell Farm Christian Centre, following the Member visit held on Tuesday 17 October 2017. The Centre had been visited by Councillors

Palmer, Nelson and Ahmad-Wallana.

Councillor Palmer commended Ms Cook on the report, and the work of Bell Farm Christian Centre. Councillor Palmer confirmed that her visit to the Centre had been very positive, and that it was heartening to see residents having such a wonderful time. The staff at the Centre were commended for being friendly and welcoming, and in particular their willingness to go 'above and beyond' for their attendees. This included providing house visits for those who could not attend in person, shopping visits, and excursions. The Centre was frequented be a variety of people from several different cultures and backgrounds, and included attendees from wards other than West Drayton.

Councillor Nelson echoed Councillor Palmer's feelings, and advised that the Centre was in need of a new urn in their kitchen. It was suggested that the potential for funding of this urn be looked into through the Cabinet Member budget, though Mrs O'Connor, co-opted member, advised that there was potential for her to fund the urn through her own budget, and requested that Councillor Nelson put the request in writing to her.

Members advised that many of the good things being done at the Centre were mirrored at other sites within the Borough, such as the Yiewsley and West Drayton Community Centre, Abbots Football Club, and the Dovetail Community Baptist Church. It was felt that people often travelled long distances to these sites, because they were not aware of available sites within their local area. To allay this, it was suggested that increased promotion of the sites be considered as a potential recommendation to Cabinet as part of the current review into loneliness and social isolation in older residents.

RESOLVED:

1. **That the report be noted;**
2. **That the funding of the urn at the Centre through available budgets be looked into; and**
3. **That further promotion of sites such as Bell Farm Christian Centre be considered as a potential recommendation to Cabinet as part of the review into loneliness and social isolation in older residents.**

37.	**CABINET FORWARD PLAN** *(Agenda Item 8)* **RESOLVED: That the Cabinet Forward Plan be noted.**
38.	**WORK PROGRAMME 2017/18** *(Agenda Item 9)* **RESOLVED: That the Work Programme 2017-18 be noted.**
	The meeting, which commenced at 7.00 pm, closed at 8.27 pm.

These are the minutes of the above meeting. For more information on any of the resolutions please contact Neil Fraser - Democratic Services Officer on 01895 250692. Circulation of these minutes is to Councillors, Officers,

the Press and Members of the Public.