

SOCIAL SERVICES, HEALTH & HOUSING POLICY OVERVIEW COMMITTEE REVIEW:

HILLINGDON CENTRE FOR INDEPENDENT LIVING

Cabinet Member	Councillor Philip Corthorne
Cabinet Portfolio	Social Services, Health & Housing
Officer Contact	Nav Johal, Democratic Services
Papers with report	Final Report

HEADLINE INFORMATION

Purpose of report	To receive the Social Services, Health & Housing Policy Overview Committee's report providing recommendations which seek to examine the Hillingdon Centre for Independent Living (HCIL) as a case study of the modernisation process and to make recommendations that will strengthen the delivery of services to people with physical and sensory disabilities.
Contribution to our plans and strategies	This report contributes to the Joint work undertaken by Social Services & Housing and Hillingdon Primary Care Trust (PCT) as part of the 2002 Best Value Review of Aids and Adaptations identified the need for an enhanced Independent Living Centre for Hillingdon residents with a disability.
Financial Cost	As set out in the financial implications.
Relevant Policy Overview Committee	Social Services, Health & Housing
Ward(s) affected	All

RECOMMENDATIONS

That Cabinet:

1. Welcome that the Committee has noted the progress made since the last review of Hillingdon Centre of Independent Living in 2007;
2. Welcome the report from the Social Services, Health & Housing Policy Overview Committee and note that the committee found in favour of improving the existing arrangements and future for Hillingdon Centre for Independent Living; and
3. Endorses, subject to financial consideration by the Cabinet Member, the following recommendations of the Policy Overview Committee report as ways to enhance

current arrangements and future plans for Hillingdon Centre for Independent Living, as set out below:

POC Recommendations:

The Committee recommend that:

1. That Local Authority and PCT Officers develop a procedure to ensure that the service is widely recognised and easy to access. This procedure should encompass two key elements:
 - That the HCIL service be more widely advertised so that more people have access to the benefits offered; in particular to improve web access and technology to make it more visible and more user-friendly to the wider community.
 - To engage with other organisations to promote partnership working, one outcome of which would be greater knowledge and visibility of the service in hospitals and doctors surgeries.
2. That working practices are developed which ensure closer co-operation between local authority, PCT and HCIL Officers regarding advice given to potential service users. As part of this function Officers will ensure that people who are not eligible for funding receive the information, support and advice they are entitled to.
3. That relevant user groups, including Carers and the Customer Engagement team be involved in the development of HCIL and that their input is central to the development and improvement of the service. That the development and progression of HCIL should be user and carer led, and user group to include a user led management board.
4. That employees at HCIL be given training relevant to the specific needs of service users, and which is regularly updated. This is particularly important where use of equipment is concerned.
5. That volunteers be encouraged to work and assist in HCIL: the model of “experts by experience” is of particular relevance and value. It was recognised that volunteers would have support needs that needed to be identified and met.
6. That Officers use the Service User from the witness session as a case study on how to improve the services offered to carers and to co-ordinate this with the development of working practices outlined above.
7. That local authority and PCT Officers undertake a gap analysis as part of the development of the service. The Committee noted the constraints of space and the challenges of the location of the service, but believe that if the recommendations are implemented these concerns can be satisfactorily addressed. The Committee recommended that a more centralised, easier to access location should be looked into for at least the medium term.
8. That HCIL ensure carers needs are referred to Adult Social Care where appropriate for carers assessments.

INFORMATION

Reasons for recommendation

The recommendations are aimed at building upon Hillingdon's existing arrangements and future plans for Hillingdon Centre for Independent Living.

Alternative options considered / risk management

The Cabinet could decide to reject or amend the Committee's recommendations.

Supporting Information

1. The Committee chose to review HCIL as this was first carried out in 2007 (formerly known as HILC). Officers were requested to explore the options further and return to the Committee with their findings. A re-evaluation of the role and work of H-CIL was agreed as a topic as a result of the Committee's last review.
2. The aim of this review was to complement the review in 2007 by exploring the practicalities in one area of modernisation. Since then numerous changes have occurred – most significantly the modernisation agenda and self-directed support. Opportunities to enhance the services were investigated and were considered when producing the recommendations
3. The review took place between January 2010 and April 2010.
4. The Committee's report (attached) gives full details of the review.

Officer Comments:

Service officers were fully involved in this review and support the work of the Committee. Officers provided the Committee with the following comments regarding the progression of each recommendation:

Recommendation 1 - Information was passed to the E-Communications Manager regarding the development of a website for H-CIL. There needs to be further consultation with disabled people on the content of the website and involvement with the design of the site to ensure that it is accessible.

Recommendation 2 – The development of the Universal Offer will require close partnership working between agencies. An information handbook for people who are 'self-funders' has been developed by Adult Social care Health and Housing and copies of this will be made available to H-CIL so that people are given information and advice.

Recommendation 3 - This is the purpose of developing the management board of H-CIL as a user led group. The aim is to demonstrate that H-CIL is a User Led Organisation although officers understand that there needs to be more information on the H-CIL user group (i.e. constitution and what it is setting out to achieve).

Recommendation 4 - There is a qualified occupational therapist working at H-CIL. The manager of the service is also an occupational therapist. The trusted assessors who are employed at H-CIL have both had trusted assessor training. This was completed at the Disabled Living Foundation at Harrow Road, London and the course is accredited by the Open College Network. The course provided training in the assessment, use and fitting of basic daily living

equipment and covered a number of areas including assessment and intervention, risk, issuing responsibilities and sessions on chairs, beds, rails, toilets, household items and bathing.

Recommendation 5 – Through discussion with the user led group it will be possible to identify volunteering opportunities. However, there is a resource implication in meeting individual support needs that are identified.

Recommendation 6 – Case studies are being developed to enable officers and the User Led group an opportunity to consider what services HCIL should be developing and how best to give advice and information to service users and carers.

Recommendation 7 – Officers will work along side the user led group to identify the gaps in service including an analysis of whether the current building could be utilised more effectively. With regards to the request for a more centralised location, officers will liaise with all relevant stakeholders in consultation with the Cabinet Member and, if necessary, present a preliminary report to the Cabinet at a later date.

Recommendation 8 – Adult Social Care Health and Housing officers will liaise with PCT and H-CIL staff to determine a process that means that carers can easily be referred for an assessment where appropriate.

Financial Implications

The financial implications of the recommendations will need further assessment and consideration by officers and the Cabinet Member. There is likely to be additional costs relating to recommendation 5 which are not included in the current budget and further work will need to be carried out to quantify these costs. There could also be additional costs relating to the Web development under recommendation 1 which will need to be evaluated.

EFFECT ON RESIDENTS, SERVICE USERS & COMMUNITIES

What will be the effect of the recommendation?

The Committee's recommendations will provide a springboard for the Council to take those steps necessary to improve the service we are providing to service users and increase the number people that use this service.

Consultation Carried Out or Required

The Committee took evidence from residents, officers and experts as described in the attached report.

CORPORATE IMPLICATIONS

Corporate Finance

Corporate Finance has reviewed this report and there are financial implications arising from some of the recommendations in the report. The precise value of these financial implications are yet to be determined and would need to be investigated and reported to the Cabinet Member / Cabinet as appropriate.

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