

Adult Social Care and Health Select Committee

A meeting of Adult Social Care and Health Select Committee was held on Tuesday, 11th December, 2018.

Present: Cllr Evaline Cunningham (Vice-Chairman), Cllr Kevin Faulks, Cllr Mohammed Javed, Cllr Lauriane Povey, Cllr Mrs Sylvia Walmsley, Cllr Barry Woodhouse

Officers: Jane Edmonds, Beverly Bearne (HS), Kerry Anderson, Emma Champley (A,PH&CYP), Peter Mennear, Marianne Sleeman (DCE)

Also in attendance: Victoria Head (CQC), Melanie Cant (LGA)

Apologies: Cllr Lisa Grainge, Cllr Lynn Hall, Cllr John Gardner, Ann Workman

ASH 59/18 Evacuation Procedure

The Evacuation Procedure was noted.

ASH 60/18 Declarations of Interest

There were no Interests declared.

ASH 61/18 Minutes of the meeting held on 11th September 2018

Consideration was given to the minutes of the meeting held on 11th September 2018.

AGREED

The Minutes of the meetings held on 11th September 2018 were confirmed and signed as a correct record.

ASH 62/18 Scrutiny Review of Temporary Accommodation for Homeless Households

Members received information regarding the Scrutiny Review of Temporary Accommodation for Homeless Households from Melanie Cant, Local Government Housing Advisor. The Advisor had recently undertaken an assessment of the Council's approach to homelessness which included to look at key measures to assist Stockton in the future. The findings from the initial assessment were:

Part of the assessment was to look into the routes of housing within the Authority.

- The Local Authority's approach homelessness provided for people in three different types of situation:
 1. Homeless and without a roof that night - roofless people would be seen the same day, identify the needs and endeavour to source accommodation.
 2. Homeless within 56 days - people who were at risk of becoming homeless would complete an assessment via Customer Services which would be triaged to access how quickly they needed to be seen; 5 days to triage, 2 days to be seen.
 3. Living in accommodation that did not suit their needs – these people

would be eligible to join the housing register and access housing through the Allocations Policy

The whole nature of the Homeless Reduction Act was to treat everybody as equally as possible. Everybody has the right to advice and assistance to identify what their situation was, what support they needed, what their aspirations were for the future.

The requirement to provide prevention support was 56 days and related to the standard two month notice in the private rented sector.

The separate 56 day provision for the relief duty was instituted as this was thought enough time to identify a solution.

In all cases it was reiterated that clients should be advised to contact the Council as soon as possible to enable support to be provided.

Melanie Cant confirmed the Local Authority have met the requirements of the Act very well, however nationally (and here in Stockton) services are seeing more people which causes more financial and staffing strains on organisations. It was the local authority's view that the increase in referrals was due to the economic and social situation rather than the Homelessness Act.

The quality of the accommodation provided in Stockton was better than in other areas the Advisor had visited. Some areas make more use of Bed and Breakfast and hotel provision, but this was being avoided where possible in Stockton.

It was noted that there were some potential areas for service development. Current commissioned services were providing a good service and were enabling the Council to discharge its duty to provide temporary accommodation where appropriate.

In legislation, 'temporary' accommodation was intended to provide temporary relief and enable an assessment to take place.

The current commissioned services were provided in some instances to clients for up to two years on short hold tenancies and so were effectively a form of supported housing rather than temporary.

There was a need to ensure a flow of clients through commissioned services into longer term accommodation and so alternative delivery of 'temporary' accommodation could discharge this duty, whilst focussing commissioned services on those with more complex needs.

It was noted that Housing Services had moved quickly to redefine its accommodation and had actively sought to close some cases where appropriate.

It was suggested that in light of new Homeless Reduction Act that it may also be appropriate to review the current Allocations Policy. For example the Council

was required to secure an 'offer of suitable' accommodation in the Borough to eligible clients in temporary accommodation but not necessarily facilitate the client's exact choice of location, tenure and property type etc. (Once accommodation had been secured should clients still wish to move then they could seek to transfer to another area of their choosing via the normal route.) The aim of tightening up the 'offer' process would be to ensure the timely move of individuals (especially families who are homeless but do not need supported hostel accommodation services). Committee was assured that this process would be undertaken by the Housing Service in a sensitive manner.

Partners were also involved in the allocations process, which was administered by Thirteen Group on the Council's behalf and need to be involved in this process with a review of the decision making process.

Discussion took place on the options for developing 'temporary housing'.

It was suggested the Local Authority explore the possibility of partnering with Registered Housing Providers to explore the use of a 'rolling' element of their housing stock to provide temporary accommodation. This would in turn free up Commissioned Services for families who have more complex needs.

The Local Authority noted it would explore 'rolling stock' with housing providers, This option also benefited providers i.e. it could result in a reduced numbers of voids and hard to let properties.

As an example, it was noted that in York void social housing stock was used for temporary accommodation where this was appropriate for the client, and attempts were made to ensure the clients could remain in the property for the longer term where possible.

In Stockton the number of homeless people with no immediate accommodation and whose situation needed verifying, often with complex needs, was around 8-10 per day. The majority of cases dealt with by the service had accommodation at the time of the referral and could be provided with preventative advice and support.

Discussions were held regarding the Home Office not being part of the 'duty to refer' potential homeless households. This means leaving Home Office commissioned housing as part of the national asylum seeker scheme, can cause problems for asylum seekers who are given leave to remain as they are required to quickly seek alternative housing. The Housing Advisor noted that some authorities had negotiated local agreements with the accommodation provider G4S and the best was 28 days' notice. Details would be forwarded to SBC Housing Services.

Melanie Cant confirmed the Local Authority were working well within the parameters of the Homeless Reduction Act and definitely have the customer at the forefront.

A visit to commissioned services at Bridge House and Parkfield Care Home would take place as part of the review.

AGREED that:

The information be noted.

**ASH
63/18** **Care Quality Commission Update**

Members received a presentation regarding the Care Quality Commission Update from Victoria Head, Care Quality Commission (CQC) Inspection Manager, Acute Hospitals which included:

- Victoria Head detailed the model of regulation explaining the CQC use the same rating system as Ofsted.
- There was positive engagement with the CQC and the Authority.
- Good Leadership and Governance within services was a main priority when carrying out an inspection. The CQC produced an annual overview of their inspection work and was able to identify themes in providers that were rated Good and above. This included having a proactive approach to partnership working and good engagement with CCGs and Local Authorities. Providers were also reviewed to see whether they continually challenge themselves even when rated Good over several years.
- An Action Plan would be requested for any areas that 'requires improvement' following an inspection. The CQC regularly engage with providers to make sure they are undertaking the actions required.
- A number of national challenges for the health and care sector were outlined. For example, the number of required beds in Care Homes fluctuate constantly; there was a 44% increase in one Authority whilst a 58% reduction in another Authority.
- A review would be undertaken to Mental Health Provision.
- The results of the latest inspection of North Tees and Hartlepool NHS Foundation Trust were outlined. Overall the Trust had been rated Good with some examples of outstanding practice. Where improvements were identified, the Trust were given 1 month to ensure all actions were complete when told they 'must' make improvements in specific areas.

Regionally there were workforce concerns including with consultants, however the Trust had a robust nurse recruitment policy.

Issues discussed were:

- Inspections around adult provision when discharged from hospital looking at family in place and mental capacity.
- Was enforcement in place to ensure actions were completed when Providers were given repeated 'requires improvement' ratings? It was noted that

some issues identified that led to such a rating were more serious than others, and different issues may be identified on different inspections. Alongside the overall ratings there was a sliding scale of potential enforcement action available to the CQC.

- Teams would work closely with Care Homes to rectify any issues identified with CQC as soon as possible. However, until further inspection the 'requires improvement' rating would remain.
- Assurance was given around effective challenge.

AGREED that:

The information be noted.

**ASH
64/18**

Quality Assurance and Improvement

Members were presented with an overview of Quality Assurance & Improvement Update. The key issues for the service were highlighted together with emerging issues as follows:

- The Quality Assurance and Improvement Standards Framework was reviewed in July 2018 to ensure quality was delivered around Services.
- The team have been restructured with a dedicated team of 4 Officers responsible for quality assurance and compliance to support the service with a hands on approach with providers needing support.
- The issue would determine contract management support of the service, the offer time could be increased if required. Weekly visits would be escalated to work through any issues apparent and Action plans would be in place and support would be given to the provider to action.
- A Quality Assessment Framework Tool (PAMMS) was now used which made the annual assessment process with regulated services leaner, it provides results in real time.

In addition to contract compliance, steps had been taken to work with providers to improve the quality of local services.

- This included the development of Provider Forums split into: Care Home Owners, Care Home Registered Managers, Home Care. The intention was for these to enable the service to be more interactive with more engagement with providers, and problem solving and solution focussed. Providers were asked to share good practice through these groups.
- Transformation Managers had been appointed to lead on service developments and improvements. These would work closely with the Quality Assurance Team and focus on good practice, and using the client voice.
- The CQC had pledged to check whether local providers were taking part in these initiatives when they inspect.

AGREED that:

The information be noted.

**ASH
65/18**

Quarterly CQC Inspection Update

Members received information regarding the Quarter 2 CQC Inspection Update from Kerry Anderson, Procurement Manager, Adults, Public Health, Children and Young People which included:

- Inspection of Care Homes were carried out between July and September 2018 inclusive.
- Sixteen Adult Care services were inspected; 7 were rated 'good', 9 were rated 'requires improvement'.

Issues discussed were:

- Families and residents were notified of the result of an inspection; providers must display the rating and outcome.
- The Local Authority Officer would review the progress of the provider in a supportive manner.

AGREED that:

The information be noted.

**ASH
66/18**

Regional Health Scrutiny Update

The Scrutiny Officer informed members the latest meeting of the Tees Valley Joint Health Committee had taken place earlier that day and included an update on suicide prevention and ambulance services.

The STP Committee's next steps would be to review new proposals for service change in the new year.

AGREED that:

The information be noted.