

MINUTES of the meeting of the Health and Well-being Overview and Scrutiny Committee held on 6th September 2011 at 7.00pm

Present: Councillors Wendy Herd (Chair), Sue Gray, Amanda Prevost, Angie Gaywood and Martin Healy

Mr Mike Riley – Chair Of the Local Involvement Network

Apologies: Councillor Victoria Holloway (substituted by Angie Gaywood)

In attendance: Councillor Tony Fish – Portfolio holder for Adult Social Care
Jo Olsson – Corporate Director: Children, Education and Families
Roger Harris – Head of Strategic Commissioning and Resources
Ceri Armstrong – Strategy Officer
Janice White – Manager, housing strategy and Renewal
Ibrahim Bakarr – Manager, Adult Social Care
Matthew Boulter – Principal Democratic Services Officer

7. DECLARATIONS OF INTEREST

Councillor Gaywood declared a personal interest in relation to Item 4 by virtue that her sister in law received Disability Living Allowance.

8. HEALTH SERVICE REFORM – UPDATE REPORT

The report served to inform the committee of health reform changes that had occurred since the Committee's last meeting in June 2011. Much activity had occurred including pilots for GP Consortia being confirmed, which were now called Clinical Commissioning Groups (CCGs). Thurrock had two such groups, one representing generally smaller GP practices and one representing generally larger ones. Both CCGs included practices operating in Basildon and the portfolio holder had contacted the groups to request that one group only operate, and that that Group operated within the Council's geographical boundaries. In October or November as part of the CCG authorisation process, a risk assessment would be undertaken. Part of the risk assessment would be to ensure the CCGs were of viable size and that their geographical boundaries were best for delivering the needs of the population. All CCGs would need to be authorised in order to become

operational and the Council and Health and Well-Being Board would play an important role in this process.

The role of the Health and Well-being Board had been strengthened to ensure that it could commission services more effectively and play a key part in the authorisation of CCGs, although its remit in contrast to that of Overview and Scrutiny Committee had yet to be finalised.

Thurrock Council was set to become a pathfinder for the new 'HealthWatch', which would replace Local Involvement Networks (LINKs) and a stakeholder meeting was due on 29th September with delivery of the new organisation expected in October 2012.

The Committee was also informed that the Council would receive a ring fenced grant as a result of the recent Public Health White paper (Healthy Lives, Healthy People), although the size of the grant was not yet known.

The Committee welcomed the report and some of the changes although they expressed concerns that the CCGs would not be ready in time for the 2013 deadline. Likewise, the Committee was concerned that service quality was not highlighted within the changes. Officers explained that quality was also present and it would be the role of this committee and the health and well-being board to ensure that quality was maintained in health services.

It was confirmed that the Care Quality Commission (CQC) would remain albeit with a larger remit.

RESOLVED:

The report be noted.

9. WELFARE REFORM PROPOSALS (INCLUDING HOUSING BENEFIT CHANGES) AND THE DILNOT REPORT ON THE LONG TERM FUNDING OF ADULT SOCIAL CARE

Officers explained that welfare and housing benefits, as well as the funding of adult social care would change significantly in the coming years due to work carried out by central government. The Welfare Reform Bill was set to introduce 'universal credit' which would replace a range of other benefits including Housing, income support and Jobseeker's Allowance among others. With the introduction of this universal credit, changes to eligibility criteria would also be introduced, although it was expected that such criteria would be made more stringent as in the case of the disability living allowance.

Specific changes to housing benefit was explained to the committee and it was highlighted that proposals meant residents in social housing

would only receive benefit for the size of property they required rather than what they actually had. For example, if a person only needed one bedroom but lived in a two bedroom property, they would receive benefit only for one bedroom. There would also be changes to the amount adult ~~children~~ dependents were expected to contribute to households and possible increases in houses in ~~plans for~~ multi-occupancy (HMO).

In terms of adult social care, officers outlined some of the inequalities that were inherent in the system. The recent Dilnot review had made suggestions on how adults should contribute to their own care and it was proposed that adults contribute a fixed sum before they no longer needed to contribute. It was expected that this suggestion would cost the government £2 billion to make the transition. In tandem with any changes would be changes to eligibility criteria and integrating housing with social care.

Following a question from the Committee, Members were made aware that Thurrock would be affected by such changes to adult social care and that the Council had already been petitioned by disability associations relating to the ceasing of disability living allowance for adults in residential care homes.

It was asked whether other councils were responding to the housing changes and officers replied that they were and Thurrock was part of a national body that was investigating the implications of changes. There was a chance that people moved out of London where rent prices were higher into places like Thurrock.

Officers stated that a task and finish group would be welcome to investigate the implications for residents of these changes but also identifying a co-ordinated response to them by the Council. The task and finish group would be instrumental in leading the thinking behind this work.

RESOLVED that:

- i) The changes outlined in the report be noted.**
- ii) A task and finish group of four members be established to investigate the impact of the changes on residents and to form a co-ordinated response for Cabinet's approval.**
- iii) To receive a report on the task and finish group at February's meeting.**

10. DRAFT ESSEX, SOUTHEND AND THURROCK DEMENTIA STRATEGY

The report represented three months consultation on a dementia strategy for the three Essex areas and was aimed at a range of people from those living with dementia to carers and health organisations. National investigations had shown that dementia was not a priority but dementia costs were considerably higher than cancer or stroke services. By 2014, the strategy was aiming to achieve a number of outcomes whereby people with dementia would feel more included, valued and received better treatment.

The aim of the strategy was to raise the profile of dementia and improve the advice and access to advice for carers and health professionals. Thurrock had a number of services to offer residents including the community mental health team to assess dementia sufferers at an early stage, an intermediate care team to help and support dementia sufferers in Basildon Hospital and residential home placements to support people in their own environments. Officers confirmed that the hospital placements had been created directly from the work on the strategy. It was also hoped that the services could work closely with all GPs.

In order to support people in their own homes the Council was looking to open up sheltered accommodation to dementia sufferers and also use assistive technology to help them stay in their own homes for longer.

RESOLVED that:

- i) The Committee note the Strategy including the priorities identified for action across the region.**
- ii) The Committee note that following the public consultation being held until 19th September a local action plan for Thurrock will be produced.**
- iii) A letter be sent to the Chief Executive of the PCT and all GPs outlining the dementia support services available to them from the Council.**

11. WORK PROGRAMME

The Committee noted the possibility of establishing a violence against women and girls cross committee task and finish group.

The Budget scrutiny process was clarified with members and a discussion on the moving of March's meeting to 26th March took place.

The meeting finished at 8.27pm.

Approved as a true and correct record

CHAIRMAN

DATE

**Any queries regarding these Minutes, please contact
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or alternatively e-mail mboulter@yahoo.co.uk**

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