

FAREHAM

BOROUGH COUNCIL

Minutes of the Health and Housing Policy Development and Review Panel

(to be confirmed at the next meeting)

Date: Thursday, 11 September 2014

Venue: Collingwood Room - Civic Offices

PRESENT:

Councillor Mrs M E Ellerton (Chairman)

Councillor D L Steadman (Vice-Chairman)

Councillors: T G Knight, Miss S M Bell, N R Gregory and Mrs K K Trott

Also Present: Councillor B Bayford, Executive Member for Health and Housing (items 6, 7 & 8)



1. APOLOGIES FOR ABSENCE

An apology for absence was received from Councillor D M Whittingham.

2. MINUTES

It was AGREED that the minutes of the Health and Housing Policy Development and Review Panel held on 17 July 2014 be confirmed and signed as a correct record.

3. CHAIRMAN'S ANNOUNCEMENTS

The Chairman welcomed Richard Samuels and Dr David Chilvers from the Fareham and Gosport Clinical Commissioning Group.

The Chairman also announced that the first meeting of the Member/Officer working group on a Review of Street Homelessness in Fareham will take place on 30 September 2014.

4. DECLARATIONS OF INTEREST AND DISCLOSURES OF ADVICE OR DIRECTIONS

There were no declarations of interest or disclosures of advice or direction made at this meeting.

5. DEPUTATIONS

There were no deputations made at this meeting.

6. HEALTH UPDATE

At the agreement of the Chairman this item was taken early.

The Panel received a verbal report by the Executive Member for Health and Housing on local strategic health issues. He informed the Panel that he had recently attended two meetings with Health. He attended the CCG AGM which provided members with a performance review of the year and their five year action plan.

The second meeting attended was a seminar held at Fareham Community Hospital which focused on areas where the facility could be developed and to address issues and concerns that members have regarding the facility. The main cause for concern highlighted was the management of the hospital which is currently managed by 5 different organisations. The Panel were informed that the hospital is currently only being used for 45 hours per week between 8.30am-5.30pm and that at any time up to 25% of the rooms within the hospital are not being used, so further work will need to be undertaken to identify opportunities to make better use of the facility.

The Executive Member for Health and Housing was thanked for his verbal update.

7. PRESENTATION ON THE CLINICAL COMMISSIONING GROUP'S 5 YEAR PLAN

The Panel received a verbal report by Richard Samuels, Chief Officer of the Clinical Commissioning Group and Dr David Chilvers, Chairman of the CCG on the CCG's 5 year plan.

Councillor Trott addressed the Panel on this item and referred to item 6 of the minutes of the previous meeting in which it stated, *Councillor Trott proposed that the Panel write a letter to the Health Minister and send a copy to all other interested parties including the local MP and the Chairman of the Clinical Commissioning Group, expressing the Council's concerns over the management and use of the hospital*, and requested an update from Councillor Bayford, Executive Member for Housing on this item. Councillor Bayford informed the Panel that the letter had not been sent as he had taken the decision not to send the letter as progress is now being made to address the issues raised by the Panel.

Richard Samuels circulated papers to the Panel which provided an outline of the CCG's 5 year plan, and took questions from members.

Members expressed concern over the recent incident which led to the Queen Alexander hospital closing the A&E service for a couple of hours. Members asked about the reasons behind the decision and what the financial impact was on the hospital as a result of it. Richard Samuels addressed the Panel to explain that the decision was taken to close the A&E department to new admissions for the safety of the patients that had already been admitted and for all new patients as the department was overloaded with cases and there were not enough staff or facilities to safely accept anymore. He also explained that the department was closed for an hour and the situation was reviewed after 40 minutes. In total 6 patients were diverted to Southampton General Hospital. He also explained to the Panel that there are no sur charges applied for those patients diverted to Southampton each hospital charges for every patient that is admitted to them.

Councillor Knight expressed concern over the treatment of elderly patients in hospitals and asked how the CCG are planning to improve this. Dr David Chilvers addressed the Panel to inform them that they are developing a single care plan which GP's would set up with patients which would outline the care and treatment that the patient would require should they become ill, this will ensure that the patient's wishes are met and empowers them to take control of their future.

Richard Samuels explained to the Panel that the CCG will be making emergency care a priority and offered to return to the Panel to give a more detailed presentation on this item. He also explained that they are looking at developing a single workforce across the Health and Social Care sector. This will consist of a whole range of professionals including, nurses, GP's and carers. He explained that it will take some time to fully develop an integrated community team, but that it will not be economically driven but driven by demand from community needs.

It was AGREED that Richard Samuels and Dr Chilvers be thanked for their verbal presentation.

8. DISABLED FACILITIES GRANTS 2014-16

The Panel considered a report by the Director of Community on Disabled Facilities Grants 2014-16.

At the invitation of the Chairman, Councillor Bayford, Executive Member for Health and Housing addressed the Panel on this item.

The Panel noted that last year was the best year so far for the Council as it dealt with the highest number of cases, within the shortest length of time and for the lowest average cost per case.

The Panel noted that funding for the next financial year is going to change as the funding will be directed through Hampshire County Council as part of the Better Care Fund and not direct from the Government. The main concern over receiving funding this way is that the money is not 'ring fenced' by Hampshire County Council and therefore there is the potential that the money may be used for other services.

Members expressed great concern over the change as to how the Council receives funding for this service, with their main concern pertaining to the fact that the service is a mandatory service for the Council to provide and if the funding does not get passed on to the Council for this scheme the Council will need to find this money from other sources. The Director of Community addressed the Panel to confirm that he shared the same concerns as the Panel and that he felt that District Councils would need to work closely with Hampshire County Council to secure the long term funding for Disabled Facilities Grants.

Members expressed their praise for the hard work and excellent results achieved by the disabled facilities team to date and hope that the potential funding issues for the next financial year do not impact upon the achievements made by the team.

It was AGREED that:

- a) the Panel notes the position with the Disabled Facilities Grants programme in 2013/14 and the challenges for the current financial year and beyond; and
- b) the Executive is asked to note the Panel's concerns regarding the future funding of disabled facilities grants which will leave the Council with the mandatory duty of these grants but no guarantee of securing the necessary funding from Hampshire County Council.

9. SUPPORTING PEOPLE - CHANGES TO BUDGET AND COMMISSIONED SERVICES

The Panel considered a report by the Director of Community on Supporting People, which highlighted the changes to the budget and commissioned services.

The Director of Community addressed the Panel on this item to explain that due to the recent changes to the Supporting People programme announced by Hampshire County Council, the County have decided they will no longer contribute to the funding of the warden service for sheltered accommodation. The Council recognises the continuing need for this important service and as a result has been proactive in addressing this issue and is conducting a review of the Sheltered Housing service to see where it can be streamlined and savings could be made. The Director of Community explained that the County are proposing using their savings from the warden service to provide a 12 week intensive support service for elderly residents and has invited the Council to tender to provide this new service. The Director of Community outlined the difference between the sheltered housing warden service and the proposed 12 week intensive support service. The Panel discussed the merit of the Sheltered Housing Service and an Intensive Support Service being delivered by a single agency (i.e. Fareham Borough Council). The Panel noted that the funding for the Intensive Support Service would be in the control of Hampshire County Council (HCC) and therefore could be subject to future changes in eligibility criteria and levels of funding. The Panel expressed concern that as Fareham Borough Council would not have complete control over the future of the intensive Support Service, it would place the Council and its Sheltered housing staff in a difficult position and cause confusion for the residents and their relatives (who may not necessarily understand, or be interested in the complexities of the funding) should the level of HCC funding and eligibility criteria be changed. The Panel concluded that Fareham Borough Council should focus its efforts on providing a good quality sheltered housing service which would not be reliant on funding from other agencies and therefore FBC should not bid to deliver the Intensive Support Service.

The Panel AGREED that Fareham Borough Council should not tender to provide the intensive support service commissioned by Hampshire County Council.

10. REVIEW OF THE WORK PROGRAMME 2014/15

The Panel considered a report by the Director Community which reviewed the current Work Programme 2014/15.

Members were asked to note the revisions to the work programme as set out in paragraph 2 of the report.

Members discussed the offer from Richard Samuels the Chief Officer of the Clinical Commissioning Group to return to the Committee to give a presentation on 'How the Emergency Care System is Planned and Works', and agreed that this should be open to all members and therefore should be arranged as a members training session.

It was AGREED that the Work Programme for 2014/15, as set in Appendix A to the report, be approved.

(The meeting started at 6.00 pm
and ended at 8.04 pm).