

**MINUTES OF A MEETING OF THE COMMUNITY & OLDER PEOPLE  
POLICY AND SCRUTINY COMMITTEE HELD AT COUNTY HALL,  
CHELMSFORD AT 10.00 AM ON 12 JANUARY 2012**

**Membership**

* W J C Dick (Chairman)	* S Hillier
* L Barton	* R A Pearson
* R Chambers	* Mrs J Reeves (Vice-Chairman)
* P Channer	* C Riley
J Dornan	* Mrs E Webster
* M Garnett	* Mrs M J Webster
* C Griffiths	* Mrs J H Whitehouse (Vice-Chairman)
* E Hart	* B Wood

\* Present

**The following also were in attendance:**

Councillor T Higgins, a designated substitute for the Committee, was in attendance although not substituting for anyone in this instance. Rochford District Councillor Malcolm Maddocks, Portfolio Holder for Council Tax Collection, Benefits and Strategic Housing Functions, was invited to sit with the Committee for the meeting. Also in attendance were Councillors A Naylor (Cabinet Member) and A Brown (Deputy Cabinet Member), and P Coleing, Co-Chair of the Essex Older People's Planning Group.

**1. Attendance, Apologies and Substitute Notices**

The Committee Officer reported apologies had been received from Ms M Montgomery, Deputy Co-Chair of the Essex Older People's Planning Group. Councillor Hillier declared a personal interest for Item 4 as a Member of Basildon Borough Council.

**2. Declarations of Interest**

Mr P Coleing declared a personal interest as he was a member of the Scrutiny Panel for CHD. No other interests were declared.

**3. Minutes of last meeting**

The Minutes of the Committee held on 8 December 2011 were approved as a correct record and signed by the Chairman of the meeting.

**4. Disabled Facilities Grants**

The Committee received a report (COP/01/12) from Simon Harniess, Head of Supporting People, which provided information on the role of Home

Improvement Agencies (HIA) in the delivery of Disabled Facilities Grants (DFG).

(a) Introduction

Following a tender exercise, two HIA providers had been in place in Essex since June 2011 – Papworth Trust and Swan Housing Group, whilst some borough and district councils undertook some or all DFG work in-house. The re-commissioned HIA service covered the following elements – handyperson; information and advice; and support for DFGs. Historically, ECC had been putting in significant amounts of funding to facilitate the districts delivering lower level DFGs, which were unlikely to be of benefit to Adult Social Care service users. Now, the flexible contracting arrangement meant that districts could avail themselves of the HIAs to deliver DFG or continue with their own in-house arrangements.

References to towns in the remainder of this item should be read as the borough or district council in that area.

(b) Evidence from Home Improvement Agencies

For the first part of the item the following witnesses joined the meeting to make introductory statements, provide supplementary information and to answer questions:

Daniel Mitchell, Acting Care Repair Manager, Swan Housing Group (SWAN)  
Tracy Harris, Operational Manager, Papworth Trust (Papworth)  
Denise Kent, Director of Financial Services, Chelmer Housing Partnership (Chelmer)

(i) Swan Housing Group

Swan currently had service level agreements with five Essex local authorities to assist them with their DFG workload since 1 July 2011 (Braintree, Chelmsford, Colchester, Maldon, and Tendring). Uncertainty at the time of the retendering process had led some local authorities to provide some or all of the service in-house. As a result, both Braintree and Maldon had sought advice from Swan as to how to get best value from their in-house services.

Swan advised that current contractors for Tendring were being invited to re-tender for inclusion on the future contractor list. The intention was to reduce the number of approved contractors.

Swan now had two full time administrators dealing with paperwork so that case workers were released to have more time to provide more support, information and guidance as opposed to focussing solely on the DFG programme.

Swan was working with local authorities to standardise DFG application forms. Colchester and Tendring now used a standard set of application forms and

certificates and Chelmsford were being asked to see if they would also sign-up. If Chelmsford did agree there could be the opportunity to incorporate some of their contractual performance requirements into future standardised paperwork and processes.

Swan was working with their surveyors to formalise six month follow-up site visits as well as regular visits during an installation to monitor quality of work.

(ii) Papworth Trust

Papworth had a service level agreement and provided services for Brentwood, Castle Point, Harlow, Southend, Thurrock and Uttlesford. Papworth also administered grants for Rochford although a service level agreement had yet to be signed. Papworth also worked with Basildon in providing a Handyman service.

Papworth advised that, from their experience, it had been easier to work with unitary authorities rather than areas administered by two tiered authorities with the latter areas generally requiring a more joined-up approach.

Papworth were currently talking to Southend about streamlining their process and taking the grant approval process in-house, believing that the process could be cut down to 12 weeks from the time of the OT referral. Consideration was being given to a seconded OT from the authority being placed in Papworth.

Southend were looking to divest budgetary responsibility for the DFG process to Papworth

Papworth only worked with private tenants and owner occupiers at present (no housing associations yet).

Customer satisfaction surveys were conducted by Papworth on completion of the work. Defective installations or equipment were remedied by the contractor up to six months after installation. Thereafter Papworth would assist the client in contacting manufacturers if the equipment installed was still in warranty.

(iii) Chelmer Housing Partnership

Chelmer worked predominantly with Chelmsford and did not permit contractors to sub-contract.

The service level agreement for the HIA service contracted by Chelmsford included performance related elements. Completion was required within four weeks of receipt of the instruction for critical and substantial category cases. Contractual payments were received by the HIA if it achieved both installation targets and customer satisfaction.

(iv) General points

There was no noticeable difference in working relationships with employed and self employed OTs.

The national target for completing a DFG installation (after receipt of the application) was 18 weeks. Rochford had been reported as taking 50 weeks. Papworth had suggested some changes to the DFG process at Rochford particularly relating to the preparation of the technical specification, the HIA doing the first site visit rather than the local authority, and finalising fixed price schedules for bathroom adaptations which would significantly reduce the amount of administrative paperwork. The Committee were strongly in favour of supporting fixed price schedules for contractors.

The HIA generally would be the first port of call for a client if there was a complaint about the installation.

Some repairs could be handled by the HIA handyman service without referral to contractors. The handyman service usually could respond within 24-48 hours.

It was usually components that failed rather than poor quality of work.

The costs of additional call-outs would initially be covered under contractual warranties. The HIA would liaise with the local authority to deal with repairs and replacements outside the warranty period.

A HIA would be expected to meet certain performance targets set out in a service level agreement with a local authority although these thresholds would vary between contracts and local authorities. These targets often would specify a maximum timeline for visiting the client after receipt of the instruction, for conducting the tender process and for getting the installation completed. Regular update meetings with local authorities would be held.

(c) Evidence from Basildon Borough Council and Essex County Council

The witnesses from the HIAs were then replaced by the following representatives from Basildon and ECC officers:

Amanda Nunn, Senior Technical Officer, Basildon Borough Council  
Jim Owens, Surveyor, Basildon Borough Council  
John Mackinnon, Commissioning and Delivery Director, ECC  
Simon Harniess, Head of Supporting People, ECC  
Rachel Richardson-Wright, Consultant OT, ECC

Basildon had run an in-house agency to administer DFG, renovation and 'decent home' grants for over 20 years. Generally cases were private sector referrals and the agency was not involved with providing a service to council tenants. The target for completion of straightforward installations was less than six months and, in practice, actual completion times for most cases were running at 12-14 weeks.

There had been a 20% increase in the number of referrals compared to the previous year. It was expected that local population demographics would further increase the number of referrals in future.

Basildon ran an in-house DFG service more efficiently than outsourcing it. Basildon estimated that its service cost accounted for approximately 12% of the overall DGF cost of each grant compared to a typical 15% cost charged by HIAs.

Basildon used long-standing small local contractors for DFG installations. The quality of work was closely controlled with contractors removed from the approved contractor list if they had three quality complaints upheld against them. However, there had been no need to remove any contractor in the past five years.

An OT had been seconded on a trial basis from ECC to Basildon since September 2011 and Basildon viewed that it had improved its client relationships although it was difficult to quantify this benefit, and had reduced the number of different faces the client now had to see to two. A paper on the trial would be distributed to members of the committee.

Social Care Direct acted as a gatekeeper advising on universal services. ECC were trying to ensure that cases were only being referred to Basildon where no other service could meet user needs.

Members questioned the cost benefit to ECC of the seconded OT to Basildon as it was a resource funded by ECC. It was stressed that, whilst only four cases requiring DFG had been referred to the OT from Social Care Direct in the past four months, there were other work streams direct to the seconded OT, particularly from clients who already were receiving a social care service, and from operational teams where it was not possible to resolve a clients needs solely by the provision of equipment. It was possible for the seconded OT to pick up all adaptation referrals from Social Care Direct, although this would include non-DFG applicants who were just requiring equipment, which could delay the progress of DFG cases. An interim cost benefit analysis was being undertaken by Basildon and this would be distributed to members of the Committee.

Epping Forest had also experienced delays in referrals coming through from Social Care Direct. Some recommendations had been drafted by them to improve the overall process and these would be shared with the Committee.

Local authorities tried to anticipate a client's needs for up to five years as part of the original OT assessment. In Basildon re-assessments needed at a later date would now be referred back to the in-house seconded OT for quicker analysis (previously it would have been referred to the particular OT who had dealt with the case). In other local authorities it would be referred back to the operational team that had made the original assessment.

It was noted that Tendring had brought in their own in-house OT. A letter would be sent to district and borough councils in Essex encouraging them to adopt a similar approach.

Members highlighted the need to improve the timing of OT home visits for clients discharged from hospital. If the need for adaptations was identified during reablement then the DFG process would start immediately. However, with the maximum period of reablement set at six weeks, it was acknowledged that it would be unlikely that any adaptations identified as needed during that time would be installed by the end of the reablement period. It was acknowledged that the longest delay in the DFG process was the financial assessment.

All the witnesses for the item were thanked for their attendance and they then left the meeting.

## **5. Essex Guardians**

The Committee received a report (COP/02/12) from Ciaran O'Hart, Finance Manager, Essex Guardians outlining the work of Essex Guardians. Ron Hiller, Acting Head of Essex Guardians, was in attendance to introduce and supplement the report and to answer questions.

Essex Guardians was a recently rebranded service (previously called the Receivership Team) which handled the financial affairs of service users when they no longer had the mental capacity to do so on their own. The service had been reviewed to ensure that its services complied with the implementation of the Mental Capacity Act in 2007 (MCA). Further improvements were being reviewed to enable the team to deliver a higher standard of service through the development of new products to provide greater protection of vulnerable service users, to whom Essex Guardians were currently unable to offer a service, and provide the opportunity to promote the service beyond the existing county boundaries. It was confirmed that the service had sufficient resources to fund such an expansion.

The service also could support the contracted support providers in Essex, by offering to accept the transfer of responsibility to administer a service users finances, thereby removing professional conflicts of interest.

Significant investment had been made in cash management systems, which adhered to industry best practice and which were managed by Lloyds Bank, to provide the necessary safeguarding protections.

The service was cost-negative as the fees received from the Court of Protection covered all operational costs. It was anticipated that, with current projected demographic trends, the demand for the service would increase further in future.

The enhanced service had improved ECCs debt recovery as it enabled more timely payment of all creditors (which included ECC).

In the absence of appropriate family members to make decisions on behalf of a client, ECC would refer the matter for an independent GP assessment prior to an application to the Court of Protection. The process could be reversed by the Court of Protection but ECC were always mindful of safeguarding issues and would contest it if they had safeguarding concerns.

The criteria for referral to the service had been significantly broadened. However, at the moment, the service could only be offered to those who had been medically assessed to have the inability to manage their own finances and no suitable other alternatives were available and could not include, for example, sight impaired clients or those with other disabilities.

Promotion of the service had been undertaken through various media channels and promotional literature was distributed to and via care providers. The service was advertised in national trade magazines and service representatives had ended national care road shows. Referrals were likely to come from care professionals rather than the general public. A Member Training session on the service would be arranged.

Mr Hiller was thanked for his attendance and then left the meeting.

## **6. Update report on Adult Social Care Local Account**

The Committee received a report (COP/03/12) from Phil Brown, Performance Business Partner, comprising the Adult Social Care Local Account 2010-11 (Local Account) who was also in attendance at the meeting to introduce and supplement the report and answer questions. The Essex local account summarised the key challenges faced by adult social care and how the council was working with key partners to ensure the continuation of quality services for its most vulnerable residents.

The Association of Directors of Social Services had requested that local authorities produce their first local account describing their performance in delivering adult social care services for the year 2010/11. It was likely that such local accounts would become a statutory requirement in future years. Very little guidance as to content for the documents had yet been issued although the publication of more structure guidance could be expected as part of the transition to being a statutory requirement. It was apparent that the document had been approached in different ways by different councils. Officers offered to return to Committee once further guidance was available.

The Local Account replaced the self assessment that contributed to the previous performance assessment process undertaken by the Care Quality Commission (CQC). However, CQC reports had contained action plans and the Local Plan did not have similar actions highlighted. It was suggested that such actions would be in other ECC documents addressing future commissioning strategy. Members suggested that any future reference to the CQC rating on the safeguarding of vulnerable adults should be qualified due to

the inspection being in March 2010 and that appropriate reference be made to the regular scrutiny of safeguarding undertaken by Members.

Members considered that the Local Account was not particularly easy to understand and that, in future, it should be changed to an easy-read format which highlighted certain key issues and plans and included any citizen feedback. Members requested the greater use of numbers rather than percentages in future, to indicate clearly whether they were local or national metrics and that officers should consider providing internet/intranet links for readers to obtain more information on an issue or subject.

Members were also disappointed that the Committee had not been consulted on an early draft prior to publication. Both the Cabinet Member and officers apologised for this exclusion but advised that they had had very limited time to produce this first report. However, it was highlighted that the Participation Network Forum, a group of seventy organisations in Essex that represent the views of disabled people and their carers, had been consulted as part of the preparation process. It was **agreed** that the appropriate scrutiny committee(s) would be consulted during the preparation of future reports.

It was noted that the Department of Health restricted the amount of personal data that could be collected from respondents to social care surveys which meant that geographical data, which would help with identification of localised issues, generally was not available.

Mr Brown was thanked for his attendance and then left the meeting.

## **7. Forward Look**

The Committee received and **noted** a report (COP/04/12) from the Governance Officer outlining the Forward Look for the Committee and the items currently scheduled for meetings through to July 2012 and other issues that had arisen which might require scrutiny in the future. The Blue Badge item would be rescheduled from February to March. As Adult Community Learning had been relocated within the Schools Children and Families Directorate the Committee would not be revisiting its Target Operating Model which had been scheduled for April.

A Families Safeguarding Panel would be established drawing membership from both the Community and Older People and Children's and Young People Policy and Scrutiny Committees. It was agreed that councillors Hillier, Reeves, Riley and Brown (Deputy Cabinet Member) represent the Committee on this Panel. Cllr Dick would be an ex-officio member of the Panel.

## **8. Date of next meeting.**

It was noted that the next meeting would be held at 10am on Thursday 9 February 2012 in Committee Room 1.

The meeting closed at 12.09 pm



**Chairman**  
**9 February 2012**