

BRIGHTON & HOVE CITY COUNCIL
SCRUTINY PANEL - BUDGET 2013/2014
1.00pm 14 DECEMBER 2012
COMMITTEE ROOM 1, HOVE TOWN HALL
MINUTES

Present: Councillor K Norman (Chair)

Also in attendance: Councillor Deane, Fitch, Robins, Sykes and Wealls

Other Members present: Cooptee Joanna Martindale (Community Voluntary Sector)

PART ONE

6. CHAIR'S COMMUNICATION

Cllr Norman welcomed everyone to the meeting.

Declarations of substitutes – Cllr Robins for Cllr Pissaridou

Declarations of party whip – none

Declarations for interest – none

Exclusion of press & public – as per agenda

7. ADULT CARE & HEALTH

Opening remarks

Cllr Jarrett introduced the Adult Social Care & (Public) Health (ASCH) budget proposals, setting out the main themes that had underpinned them:

- Responding to current fiscal constraints and the need to reduce the overall council budget
- Maintaining frontline services & ensuring access to services by keeping existing eligibility criteria
- Budget was largely frozen during 2012/13, however there will have to be reductions in 2013/14
- This is a reflection of the wider budgetary position, ASC though has been prioritised and afforded some protection
- The focus has been on looking at those parts of the budget that are most costly, such as nursing homes, and looking at how these services can be offered in a more cost effective manner
- In many cases it is possible to deliver better outcomes for residents by better addressing needs whilst also reducing the overall cost

- Examples of this principle can be seen in reablement, extracare housing, etc before the use of carehomes
- There is a need to ensure that there are sufficient providers in the market to meet the differing types of homes required. The council therefore can't seek to drive costs too low or the quality of care will suffer
- A review of transport provision is to be undertaken as it can be expensive and has grown up in a rather ad-hoc manner. It is being reviews alongside transport provided by children's services
- Whilst some savings are being sought within the commissioning structure this is already a streamlined area and there is a danger that if too large a saving is required commissioning and contract management may suffer. The proposed saving strikes the right balance.
- Demand for services will continue to increase as people live longer, there are more demands on learning disability services and instances of dementia increase.

Tom Scanlon, Director of Public Health introduced the Public Health budget. The Public Health function will be moving over to the council with a budget of approximately £18million. An announcement on the exact amount will be made by Government shortly. The public health team is a commissioning team with 24 members of staff.

Current priorities include sexual health, smoking cessation, alcohol, children's health and reducing health inequalities.

Whilst the funding is ring-fenced the function is not. This allows the council to be creative in how services are delivered and priorities aligned. The council will be judged on an 'Outcome Framework' for public health, this measures outcomes such as life expectancy etc.

Some public health responsibilities such as immunisation will not be transferring to the council.

The Director of Adult Social Care made some introductory comments regarding the Adult Social Care budget. Again the focus is on prevention and indentifying the most appropriate type of care for the individual.

Most people want to retain dignity whilst also remaining in their own home. Figures show that B&H is still an outlier in terms of residential care, so there is capacity to increase different models of support.

Whilst internal services are more expensive than those provided in the third sector the council has duty to provide care and as such some capacity is needed. Often the council is care provider of last resort and provides support to those with very complex and expensive needs.

Members asked questions across the full remit of Adult Social Care and Health.

- Are there any truly revolutionary changes within the approach being taken given the 'graph of doom' predictions? – *It's more about personalisation, reablement and using technology, such as telecare. It will be important to develop new markets and ensure choice and flexibility within the market to meet people's different needs.*
- Increases in rates to independent care homes have been related to the need to keep them in business. How do we work with this sector? – *As a major buyer of services its in the council's interest to have a vibrant and high-quality sector. If we look to drive costs*

down too far quality will suffer. The Council tries to work with providers to ensure there is the correct mix of care available but some areas are harder to deliver than others, the obvious example being dementia care. Homes are businesses though so it's a case of influencing rather than seeking to dictate. The Council works to avoid situations of unexpected failure.

- *What work is done to try and improve the energy efficiency of care homes? – The council does meet with the care home association but care homes as private businesses. The Council could look at offering more help and support in this regard and look at including this within future contracts, perhaps through help with capital spend. There are examples where the design of care homes has been undertaken looking for energy savings e.g. Patching Lodge. It would be possible to encourage the joint procurement of energy across the sector to get better rates.*
- *Is the £50k saving to the commissioning element of the service a false economy, as 90% of the service is commissioned? - The saving is a one off that has come about through vacancy management and improved joint working with health partners.*
- *How is the transport saving being arrived at? – This is part of a corporate VFM project that is looking at transport costs across a range of services.*
- *Descriptions of the in-house service seem to suggest it acts as a sponge for emergencies, high-need cases? How can then this run at capacity? – There is a need for emergency provision incase of unexpected demand, or where care homes unexpectedly close. It is necessary to keep a dialogue with home providers to predict supply and demand.*
- *What is the longer-term plans for the service, through to 2020 with ever tighter financial settlements? – ASC regularly look to redefine their core business as the understanding of need changes, for example the eligibility criteria haven't been changed as it is likely national guidance is about to be published and therefore it makes sense to wait. Changes to benefits may also have an impact on this.*
- *How do you work with CYP re transitions, joint planning for complex cases etc? Where are the gaps and what are we good at? – Transition can be a very difficult time, especially for more complex cases. There are a number of jointly funded posts between ASC & CYP with the aim being to avoid a cliff between the two services. ASC try to work with families from the age of 13, rather than wait until 15/16.*
- *How are demographic changes and projections impacting on the budget proposals? – Has previously been a larger number of over 75s but latest census actually shows a decline in the over 90s which will impact on which services are required. This does challenge existing ideas re the B&H population. Ideally the aim should be for a healthy ageing process, with less need for intensive interventions until really needed.*
- *How is technology used? – Telecare is an assistive technology that allows people to remain in their own homes. This benefits the user as well as being cheaper than residential care. Other examples include the use of epilepsy sensors, again supporting independence. GPS can be used to support dementia sufferers.*
- *A lot of the issues being described regarding ageing are going to be picked up within the 'Age Friendly Cities' initiative. It is about building resilience in communities, keeping people active and ensuring services are joined up.*
- *Future funding arrangements – Personalisation has led to increased efficiencies and resulted in lower costs for some elements of carer support. Outcomes have also improved. A reduction in residential placements will mean more people can be supported for less.*

- An autism strategy is being developed, which will help develop the support pathways and will address thresholds.
- Would staff mutuals be supported? – *They offer a different model of services provision and if appropriate would be supported. The ‘Able & Willing’ initiative is an example of where this has been successful. The council is also looking at possibilities of shared service provision, working with other local authorities and support across sectors.*
- A number of third sector organisations receive various pots of money from the council, these can be short term, for small amounts and difficult to manage. How can this make this work better? – *Hopefully situation like this are improving as health and council partners get better at working together and through commissioning as there is a more holistic approach within the council.*
- The Prospectus for the third sector has been a useful develop. The relationship with the sector is a key one which the council is looking to actively support.
- How is the council supporting prevention within the older population, especially in keeping older people fit? – *GPs to try and offer appropriate fitness/exercise options and can prescribe gym sessions. Across all ages there are a range of options such as green gyms, weightloss classes, etc.*
- Within the public health spend there are mandatory services such as sexual health and alcohol reduction. However the service as a whole is looking to be more innovative in how it talks to the city. For example with regard to healthy eating rather than getting everyone to eat salads, make sure takeaways take account of portion size, don't use transfats etc. This even includes helping to teach people how to cook.
- The Community Meals service had recommendations regarding locally sourced food from the scrutiny committee. How is this progressing? *Different residents have different needs and the review will look to provide a range of options suitable for all, this will take into account all of the scrutiny recommendations.*
- How does ASC balance quality and price? *A lot of benchmarking work is undertaken on costs, quality, thresholds etc across local authorities. The Director of ASC also chairs the SE Commissioning and Contracts Group which looks at value for money and benchmarking data. Without good quality services issues with safeguarding quickly arise which become more expensive to resolve.*

8. HOUSING

Cllr Liz Wakefield introduced the housing element of the budget and outlined some of the issues and priorities within the housing budget including:

- Current economic situation is creating a strain on services whilst also limiting funding
- It is a priority to ensure the efficient management of housing stock, delivering an excellent service to tenants
- Looking to continue Improving homes so that more meet the Decent Homes Standard
- Supporting adaptations to homes to ensure people can stay in them for longer
- Working closely with ASC, for example on extra care housing
- Building new council housing to meet the huge demand
- There is an increase in levels of homelessness – individuals often have extremely challenging needs such as dual diagnosis

The Strategic Director of Place clarified the different funding streams within the housing budget. Members were advised there are two distinct parts to the housing budget, the Housing

Revenue Account (HRA), which is the money received from tenants and the spend from which is ring-fenced for certain activities. The second part of the budget sits within the general fund and can be spent on a wider variety of activities.

The SD, Place outlined some of the wider contextual issues relating to the housing budget:

- The city is characterised by a large private rented sector due to the universities, expensive housing and limited supply. Waiting lists for housing are high
- Joint working with ASC is vital for the council to be able to deliver services within an ever decreasing resource envelope
- Ultimately the economy underpins the budget and housing can be seen as a vital piece of the jigsaw.
- The Council is working closely with the Homes & Community Agency to deliver a substantial regeneration programme to increase the number of available homes within the city
- There is considerably less grant money currently available with which to create a supply of new homes
- The HRA, as a self-financing ring-fenced pot, can be seen as quite healthy; the general fund is far more challenging, and will be until at least 2020

Members had a number of questions and comments regarding the proposed housing budget:

- What is the link between extracare and sheltered housing? How does housing support ASC? – *Both offer support to residents without the need for full care. Housing are helping to meet the need for extracare housing however there is limited access to council accommodation. Where possible housing and ASC work together to plan where housing is located to ensure that care can be provided as efficiently as possible.*

The Council is looking to create extra supply by converting existing housing stock and through new-build. Longer term leasing arrangements with the private and third sectors allow for them to put in the necessary investment into properties to turn them into different types of supported accommodation. For example current plans require leases of 25 years.

Extracare/sheltered housing deliver considerable savings over the cost of carehome costs, and ensuring there is sufficient supply is vital for ASC to deliver future savings.

- Sheltered housing usually becomes available on an ad hoc basis in small numbers. It is therefore hard to use as extracare housing in a lot of cases.

There are 750 units within 23 schemes in the city. However it is possible to create extra supply by adapting existing properties – this can be done in specific units without having to convert entire blocks. It is also possible to develop a care package around someone in sheltered housing, this can however be more expensive than other options.

- How extensive is the use of B&B accommodation? – *The council tries to limit the use of B&B accommodation and no-one stays in it for more than six weeks. The number of people entering B&B is increasing.*

It costs around £50-60 to spot purchase B&B accommodation but only £18 if a longer term agreed for a whole building can be negotiated. The Council receives £25 from government for each person in B&B accommodation.

People are moved into 'self-contained' units from B&B. The council leases these on anywhere from 3 to 10 year leases. Increasingly these units are being sourced outside of Brighton due to availability and cost. (Peacehaven/Newhaven etc). It is possible to cross-subsidise housing services from the difference between rates claimed for and paid for these units. The council is looking to enter longer term leases for a number of units outside of its boundaries.

The council is seeking to be creative in how it meets the housing challenges it has, and how it can cross-subsidise between different housing and ASC budgets. There is recognition that the quality of accommodation has a direct bearing on health, educational attainment, crime etc and that a saving to the housing budget may merely transfer costs to other areas of the council.

- Supporting People – will the protection to this budget remain? - *The council has protected this area of spend as cutting it would transfer costs to other budgets. Much of it (98%) goes to the third sector. The ratio of spend for SP means is £1 to £3 so there is huge benefit to retaining it.*

Locally the Supporting People programme is recognised as excellent and the council is urged not to look to reorganise into a single provider. It is clear that preventative services such as this save significant sums later on. There is a significant local multiplier for such a spend.

- How are we seeking to address studentification/what affect does this have? – *Providing more specialist student accommodation might reduce the number of students in HMOs, however the demographic and cost of living in B&H will mean that there continues to be a large number of HMOs occupied by young professionals.*

Loft conversions do increase the number of rooms available and can help turn smaller properties into larger family homes. The council does consider these on the properties it owns.

Students can also have a positive impact on areas, as with most things it is necessary to get balance right between competing priorities.

- Does the council offer incentives to leave homes that are under-occupied? – *yes however there is no legal requirement for people to do so. Benefit changes due to go live in 2013 may make this a more attractive proposition for tenants in the future.*
- Could crates be used to house homeless people? – *A number of cities use crates as a way of creating quick cheap housing and this is being considered in B&H. However homeless people often have extremely complex needs and a long-term solution is often not to be found in just offering accommodation is there is not also a support package of some description attached.*

- The £250k reduction in private sector renewal – what will the impact of this be? – *This relates to the increase in the requirement for HMO licences in certain areas of the city. The council will be looking to work with partners such as energy companies to continue to improve the quality of the stock available. This will not impact on adaptation work.*

There is an increased requirement re HMO licenses meaning that an extra 500 properties will now need them.

- It is welcomed that the funding to prevent rough sleeping has not been cut. It is likely that as the benefit changes come into affect during 2013 this service will come under considerably more pressure.

9. NEXT MEETING

The next meeting will be on 17 December, looking at the Children and Young People budget

The meeting concluded at 4.00pm

Signed

Chair

Dated this

day of