

CABINET MEMBER FOR ADULT INDEPENDENCE HEALTH AND WELLBEING

**Venue: Town Hall,
Moorgate Street,
Rotherham
S60 2RB**

Date: Monday, 28th February, 2011

Time: 10.00 a.m.

A G E N D A

1. To determine if the following matters are to be considered under the categories suggested in accordance with the Local Government Act 1972
2. To determine any item which the Chairman is of the opinion should be considered later in the agenda as a matter of urgency
3. Apologies for Absence
4. Minutes of meeting held on 14th February, 2010 (Pages 1 - 6)
5. Keeping Warm in Later Life (KWILLT) (Pages 7 - 23)
- presentation by Jo Abbott, Consultant in Public Health
6. "Do It Rotherham"
- report by Catherine Homer, Health Promotion Specialist
7. Conference - "Tough Times, Good Decisions"
- National Children's and Adults Conference
19th October, 2011
ICC London ExCel
8. Exclusion of the Press and Public
The following item is likely to be considered in the absence of the press and public as being exempt under Paragraph 3 of Part 1 of Schedule 12A to the Local Government Act 1972 (as amended March 2006) (information relating to the financial or business affairs of any particular individual (including the Council)).
9. In-House Residential Accommodation Charges (Pages 24 - 27)

**CABINET MEMBER FOR ADULT INDEPENDENCE HEALTH AND WELLBEING
Monday, 14th February, 2011**

Present:- Councillor Doyle (in the Chair); Councillors Gosling, Jack, P. A. Russell and Walker.

An apology for absence was received from Councillor Steele.

H56. MINUTES OF MEETING HELD ON 31ST JANUARY, 2011

Consideration was given to the minutes of the previous meetings held on 31st January, 2011.

Resolved:- That the minutes of the previous meetings held on 31st January, 2011 be approved as a correct record.

H57. ADULT SERVICES REVENUE BUDGET MONITORING 2010/11

Consideration was given to a report, introduced by the Finance Manager, (Adult Services) which provided a financial forecast for the Adult Services Department within the Neighbourhoods and Adult Services Directorate to the end of March, 2011 based on actual income and expenditure to the end of December, 2010.

The forecast for the financial year 2010/11 was an overall underspend of £390,000 (i.e. approximately 0.5%) against the revised approved net revenue budget of £71.3 million.

Reasons for the forecast underspend included:-

- overachievement in the savings associated with the merger of the Wardens and Care Enablers Service
- higher than anticipated response from staff to voluntary severance
- additional savings through holding vacancies to facilitate redeployment of staff in support of the various structural reviews
- tight financial management within the service

However, during 2010/11, a number of significant budget pressures had emerged across the wider Council, and as part of meeting the in year budget pressures, Adult Services had contributed a total of £868,000 savings from its original approved budget.

The latest year end forecast showed that there were a number of underlying budget pressures which were offset by a number of forecast underspends. These were set out in detail in the report submitted.

Also reported, for the period April to December, 2010, was the total expenditure on Agency staff for Adult Services compared with an actual cost for the same period last year. Non-contractual overtime for Adult Services was also detailed.

The report set out the current position for the Department with a summary of the overall financial projection for each main service area/client group both

against original approved budget and the revised budget approved by the Cabinet.

It was reported that to mitigate any further financial pressures within the service budget meetings with Service Directors and Managers were continuing to be held on a monthly basis to monitor financial performance against the revised approved budget and ensure expenditure was within this revised budget.

Reference was made to additional income from NHS Rotherham in respect of additional funding announced by the Government for the support of social care both in 2010-11 and 2011-12.

Members present raised and discussed the following:-

- certainty of the additional health funding, inclusion into the 2011/2012 budget and package of services to promote better services for patients upon discharge from hospitals
- social worker recruitment
- Direct Payments
- supporting people returning home from out of district hospitals delaying the implementation of community based alternative to residential care within Physical and Sensory Disabilities
- year end opportunity to bid for a proportion of any overall corporate underspend

Resolved:- That the latest financial projection against budget for the year based on actual income and expenditure to the end of December, 2010 for Adult Services be noted.

H58. ADULT SERVICES CAPITAL BUDGET MONITORING 2010/11

Consideration was given to a report, presented by the Finance Manager (Adult Services), in respect of the anticipated outturn against the approved Adult Services Capital Programme for the period April 2010 to January 2011. The projected final outturn for each scheme was detailed.

It was reported that the actual expenditure for the period April to 19th January, 2011, was £331,000 against a revised Programme of £800,000. It was explained that capital schemes were funded from a variety of different funding sources including unsupported borrowing, allocations from Capital Receipts, Supported Capital Expenditure and specific Capital grant funding. Appendix 1 showed actual expenditure to date against the approved budget together with the forecast outturn position.

The report gave a brief forecast Outturn position for each project including:-

Older People

- the balance of funding for the two new residential homes which related to landscaping and outstanding fees.
- the Assistive Technology funding from NHS Rotherham being managed jointly

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and being used to purchase Telehealth and Telecare equipment.

- the Department of Health specific grant issued to improve the environment within residential care provision carried forward into 2010/11.

Learning Disabilities

- completion of the refurbishment programme at Addison Day Centre.
- the capital scheme to refurbish the respite centre at Treefields had now been completed from the Council's Strategic Maintenance Investments Fund.

Mental Health

- a small balance remaining on the Cedar House capital budget would be used for the purchase of additional equipment.
- large proportion of the Supported Capital Expenditure allocation rolled forward into future years whilst spending plans were finalised. Committed spend in 2010/11 related to the purchase of equipment of EMI clients within the 2 in-house residential care homes.

Management Information

- balance of the Capital grant allocation for Adult Social Care IT Infrastructure carried forward from 2009/10 to meet the ongoing commitments to fund the Adults Integrated Solution as part of introducing Electronic Social Care management.
- new Transformation in Adult Social Care Capital Grant announced in 2010/11. Spending plans were currently being finalised including the cost of transferring direct payments to the Social Care SWIFT system.

General

- the purchase and implementation of an electronic home care scheduling system by April, 2011, for care enablers.

The Cabinet Member referred to an area of un-maintained land to the front of Lord Hardy Court. It was reported that as far as the Service knew this was unattributed and there were revenue cost implications to keep the area maintained.

Resolved:- (1) That the forecast Capital outturn for 2010/11 be noted.

(2) That the Director of Health and Well Being speak to Green Spaces about the land in the vicinity of Lord Hardy Court and investigate, including with the Wentworth North Area Assembly and the Hooper Ward Councillors, how this area could be improved and brought into use.

H59. ASSISTIVE TECHNOLOGY - UPDATE

The Director of Health and Wellbeing submitted an update on the progress to date with regard to the recommendations of the Scrutiny Review of Assistive Technology carried out by the Adult Social Care and Health Scrutiny panel in October 2010.

It was reported that a number of significant changes had been made to the delivery of Assistive Technology that addressed issues raised within the Review. These included:-

- Appointment of a Dedicated Assistive Technology on a temporary secondment basis to raise the profile of AT and to address some of the issues raised and also to give a focal point to the provision of equipment so that staff found it easier to provide support easily and without blockages.
- A series of visioning events had taken place at which the process for recommending AT had been simplified. This had seen a significant improvement in the numbers of staff who were now considering AT as a viable alternative to reduce expensive care packages.
- Establishment of a system to monitor and demonstrate the savings that AT could bring. It was pointed out that when staff requested AT support they were also asked to detail the provision that they would have made under traditional care packages. The database showed the savings that had been made by the provision.
- Change in emphasis during the assessment process:- staff were being asked to give reasons why they had decided not to recommend AT provision. This had highlighted the importance of AT and engaged staff in greater deliberation about the provision of support.
- Identification of simple and direct access to equipment:- A series of cards had been developed (copies provided at the meeting) - Carer Package, Medication Management Package, Epilepsy Package, Environmental Package, Purposeful Walking Package and Falls Package - and allocated to staff. This was an innovative way of identifying the most frequently allocated packages and had been seen by one of the major providers as an excellent way of raising the profile of AT.
- Highlighting good news stories with an emphasis on outcomes:- A number of case studies had been circulated to emphasise the personal dimension to successful implementation of support. They also proved to be an effective vehicle for demonstrating the benefits to the customer.
- Better use of available information:- A piece of work was to be introduced that would give credible data to demonstrate the benefits of AT provision in one particular area.
- Prevention of avoidable admissions to hospital and the prevention/delay of admission to long term residential care:- The card scheme placed emphasis on a defined package matrix that clearly identified how assessment for AT equipment could be linked to delaying residential care, supporting the provision of domiciliary care and improving the support that

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could be given to carers.

- Provision of information and signposting:- A campaign to raise the profile of AT in Rotherham had commenced with a dedicated AT week to take place in March
- Direct involvement of staff in developing AT:- The appointment of the AT Officer now gave an extra resource to research and benchmark equipment
- Better use of resources:- Financial savings that could be brought out be intelligent allocation of resources
- Better liaison with Rothercare:- closer working with Rothercare staff to solve issues relating to the fitting of equipment and identifying exactly how Rothercare would respond to any given alert
- Development of benchmarking opportunities:- the Regional Assistive Technology Manager for Yorkshire and Humber had provided excellent support

Members present raised and discussed the following:-

- provision of equipment and how much the client had to contribute and the Council's criteria
- bigger equipment needs considered by the Adaptations Service
- good media coverage
- simplified procedure to obtain Assistive Technology
- liaison with the Fire Service, Rother Care and the Council
- the wide catalogue of equipment now available
- provision of digital TV for people aged over 75

Resolved:- (1) That the Neighbourhoods and Adult Services' response to the scrutiny review, as now reported, be noted.

(2) That the progress that has been made in delivering assistive technology within Rotherham be noted.

H60. EXCLUSION OF THE PRESS AND PUBLIC

Resolved:- That, under Section 100A(4) of the Local Government Act 1972 the press and public be excluded from the meeting for the following item of business on the grounds that it involves the likely disclosure of exempt information as defined in Paragraph 3 of Part 1 of Schedule 12A to the Local Government Act 1972 (business/financial affairs.)

H61. SUPPORTING PEOPLE PROGRAMME

Further to Minute No. 46 of 22nd December, 2010, the Strategic Commissioning Manager submitted a report detailing the procurement process and subsequent evaluation undertaken for EU Classified Annex 2b services to provide housing-related and preventative support.

It was pointed out that 14 floating support contracts were taken to tender of which. 12 contracts were awarded by the Cabinet Member on 22nd December which left two remaining contracts not awarded.

Resolved:- [1] That the extension of the current contract for the Floating Support Service Providing Housing Related Support for BME Women Experiencing Domestic Abuse for a period of four months to 31st July, 2011 be noted..

[2] That the award of the tender for FS615 Home Improvement Service be approved.



Keeping warm in later life project

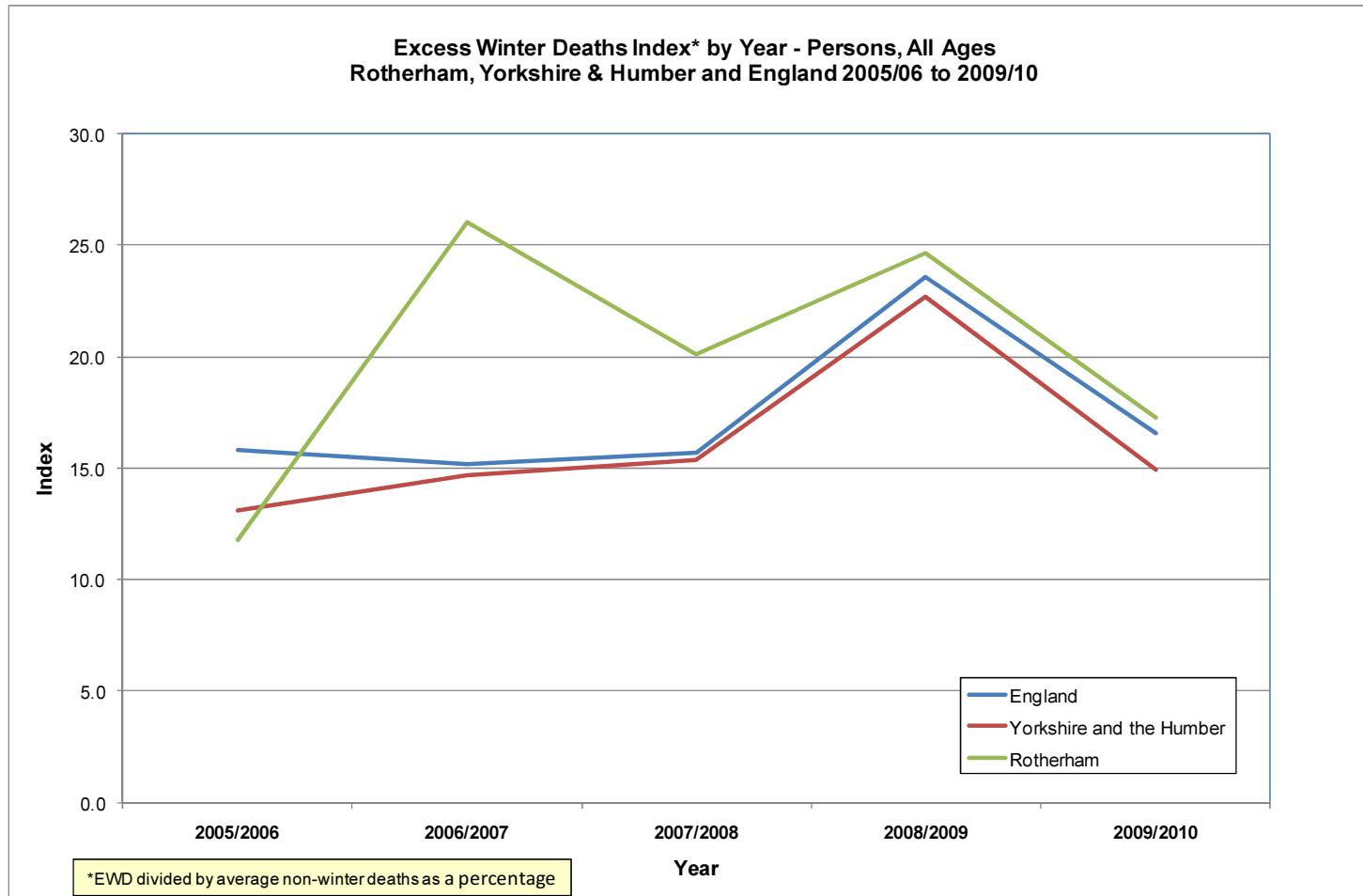


**Jo Abbott, Consultant in Public Health
Catherine Homer, Health Promotion Specialist**

Why bother in Rotherham?

Seasonal Excess Winter Deaths -
Is there a problem?

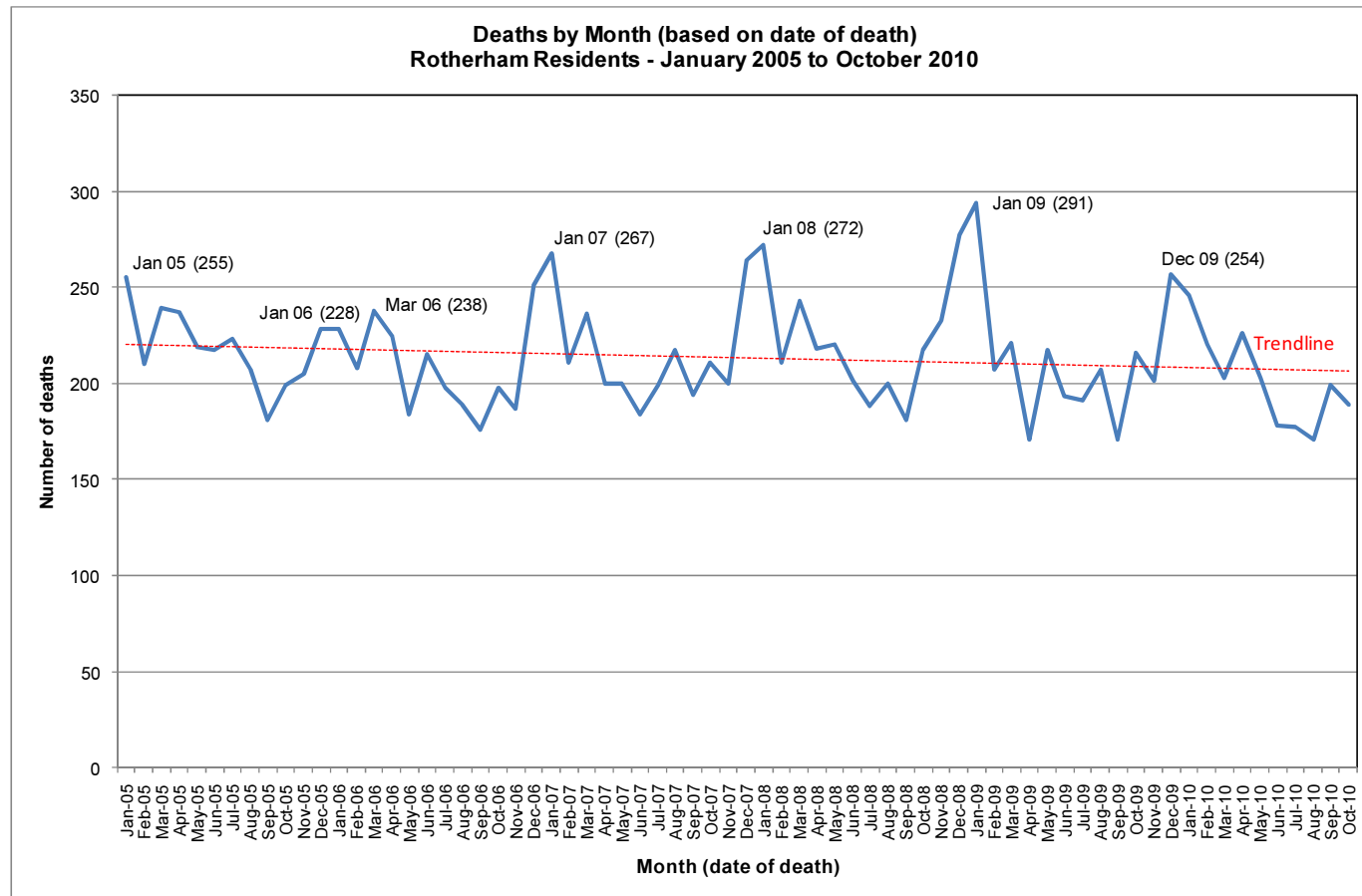
Excess Winter Deaths Index: 2005/06 to 2009/10 Rotherham, Yorkshire & Humber, and England



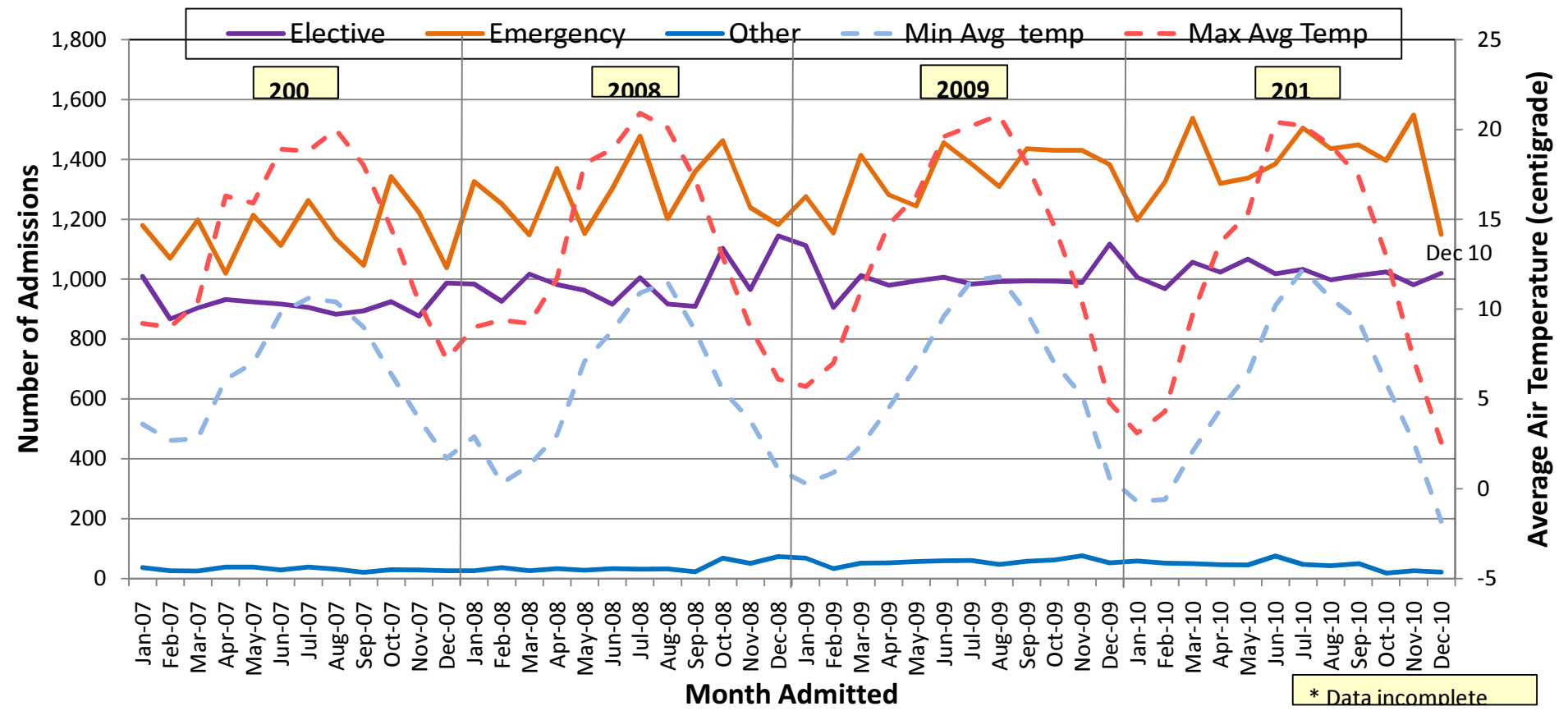
Excess Winter Deaths and Excess Winter Death Index Rotherham Residents: 2005/06 to 2009/10

4 Month Period	Deaths (winter in red)	Average non-winter deaths	Excess Winter Deaths	EWD Index (%)
Autumn 05-06	792			
Winter 05-06	902	807	95	11.8%
Summer 06-07	822			
Autumn 06-07	750			
Winter 06-07	966	766.5	199.5	26.0%
Summer 07-08	783			
Autumn 07-08	822			
Winter 07-08	990	825	166	20.1%
Summer 08-09	827			
Autumn 08-09	831			
Winter 08-09	999	801.5	197.5	24.6%
Summer 09-10	772			
Autumn 09-10	795			
Winter 09-10	926	789.5	136.5	17.3%
Summer 10-11	784			
*Based on death registrations to 22 November 2010.				

Deaths by Month of Death – Rotherham Residents: January 2005 to October 2010



Hospital Admissions Aged 65+ by Month - January 2007 to December 2010*
Inpatients and Daycases by Admission Method - Rotherham Residents (Any Provider)



How have we done it?

- Semi structured, face to face in depth interviews.
- Recruited 30 older people (aged 55-95) through social groups, mapping and snowball sampling e.g. VAR,.
- Tiny tag data logger used prior to interviews
- 25 Health and social care staff recruited from RMBC, NHS.
- 6 Focus groups with service heads and front line staff and older people from Anchor Staying Put, Tassibee and the Salvation Army.



What have we learnt so far?

- Staff and older people identified similar barriers to keeping warm including:
- Use of technology
- Money
- Visibility
- Disjointed systems (organisations, care staff, engineers etc)

What we have learnt so far 1.

Poor understanding of technology: heating

People don't understand how to use their boilers:

- Set the timers
- Temperatures
- Buttons are too small
- Digital screens are too small
- “Can't see” gas/ electric
- Choose to use other more expensive forms of heating



What we have learnt so far 2.

Poor understanding of technology: banking

Older people don't understand modern banking or billing :

- Direct debits (usually associated with a cheaper tariff)
- Internet banking (virtual/ “cant see”)
- Billing information from suppliers unclear - tariff

What we have learnt so far 3. Family and community support

- People may be socially integrated into their community but they don't necessarily know the relationship between keeping warm and good health.
- People are unaware of the correct temperature their house should be (21°C for main living area 18°C bedroom)



What we have learnt so far 4. Trust

Trust in who is providing the information

- Local Council
- NHS
- Family and friends
- Trust in technology
- Lack of trust in Private landlords

What we have learnt so far 5. Staff interviews

The mindset of older people:

“ They get to the stage where they will switch it off (their heating), they’ll wrap up but they don’t understand the importance of the house been warm because they’ve lived in conditions like that for many years when they were younger, damp ,cold houses, and they don’t realise the effect it can have on their health”

“older people see it as a luxury. I don’t think they see it has any bearing on their health”

What next for the project?

- Focus groups continue, including one for elected members on 25 March 2011.
- A stakeholder event to look at solutions to be held in the summer – you are welcome to attend.
- Social Marketing: getting the message across to older people and staff.

What does it mean for us in health and local authorities?

- It raises a few challenges for the months ahead for our services including:
- The implications of introducing “Green Deal”
- Technology and “smart meters”
- The mindset of staff and older people in Rotherham
- Visibility and vulnerability
- This is amongst a back drop of a new Health and Social Care Bill and the introduction of Health and Wellbeing Boards within Local Authorities.

Joint working

- How can NHS and RMBC staff (including contractors) work closer together?
- E.g. Social care, 2010, Warmfront

Any Questions?

Document is Restricted