

**CABINET MEMBER FOR ADULT INDEPENDENCE HEALTH AND WELLBEING  
Monday, 28th February, 2011**

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

**H62. MINUTES OF MEETING HELD ON 14TH FEBRUARY, 2010**

Consideration was given to the minutes of the previous meetings held on 14<sup>th</sup> February, 2011.

Resolved:- That the minutes of the previous meeting held on 14<sup>th</sup> February, 2011, be approved as a correct record.

**H63. KEEPING WARM IN LATER LIFE (KWILLT)**

Jo Abbott, Consultant in Public Health, and Catherine Homer, Health Promotion Specialist, gave a powerpoint presentation on the above research project as follows:-

Why bother in Rotherham?

- Seasonal excess winter deaths – is there a problem?

Research Project

- Semi-structured, face to face indepth 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 and the NHS
- 5 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.)
- Poor understanding of technology: heating
  - People do not 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
- Poor understanding of technology: banking
  - Older people do not understand modern banking or billing:
    - Direct debits (usually associated with a cheaper tariff)
    - Internet banking (virtual/"can't see")

- Billing information from suppliers unclear – tariff
- Family and community support
  - People may be socially integrated into their community but they do not 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)
- Trust
  - Trust in who is providing the information
    - Local Council
    - NHS
    - Family and friends
    - Trust in technology
    - Lack of trust in private landlords
- Staff interviews
  - The mindset of older people:
    - “They get to the stage where they will switch it off (their heating), they will wrap up but they do not understand the importance of the house being warm because they have lived in conditions like that for many years when they were younger, damp cold houses and they do not realise the effect it can have on their health”
    - “Older people see it as a luxury. I do not think they see it has any bearing on their health”

What next for the project?

- Focus groups continue including 1 for Elected Members on 25<sup>th</sup> March, 2011
- A stakeholder event to look at solutions to be held in the summer
- 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
  - Implications of introducing “Green Deal”
  - Technology and “smart meters”
  - The mindset of staff and older people in Rotherham
  - Visibility and vulnerability
- Against a backdrop of a new Health and Social Care Bill and the introduction of Health and Wellbeing Boards within local authorities

Discussion ensued on the presentation with the following points raised:-

- The statistics had taken into account the past heavy industry in the area and the resultant respiratory diseases
- It was more than installing a new boiler but ensuring that the customer knew how to use it and that the control was situated in a position that could be reached
- Energy providers did not immediately refund any overpayment on Direct Debits
- Winter Fuel Allowance not used for its intended purpose

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- Work was needed with the banks and energy companies
- The stakeholder event would look at what the barriers were for the people of Rotherham

The Strategic Director of Housing and Neighbourhood Services stated that the statistics would be fed into the refresh of the Joint Strategic Needs Assessment so that actions would be commissioned to address the trends.

Resolved:- That the presentation be noted.

#### **H64. "DO IT ROTHERHAM"**

Catherine Homer, Health Promotion Specialist, reported that an event was to be held on 9<sup>th</sup> March, 2011, to celebrate the success of Rotherham's Healthy Weight Initiatives.

Rotherham's 2011 Public Health Annual Report and Joint Health and Wellbeing Strategy was based on the recommendations and 6 policy objectives from the Marmot Review. Whilst there was a lot of progress being made against all of the objectives, areas had been identified where, working smarter in a collaborative way, would create vital opportunities to address the wider determinants affecting healthy weight locally.

#### **H65. CONFERENCE - "TOUGH TIMES, GOOD DECISIONS"**

Resolved:- That the Cabinet Member (or substitute) be authorised to attend the "ToughTimes, Good Decisions" conference to be held at the ICC London ExCel on 19<sup>th</sup>-21<sup>st</sup> October, 2011.

#### **H66. 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.)

#### **H67. IN-HOUSE RESIDENTIAL ACCOMMODATION CHARGES**

The Director of Health and Wellbeing submitted proposals for increasing the charge to service users for the provision of in-house residential care for 2011/12.

In accordance with its statutory duty, the Council was required to set a maximum charge for residential accommodation it provided in local authority homes for:-

- Those residents who refused to provide details of their financial circumstances
- Those service users who had been financially assessed according to their liability to pay and as a result did not qualify for financial assistance towards their charges
- Those service users who were placed and financially supported by another

local authority

It was proposed that the maximum charge for all local authority residential care homes be increased by 1% (£5.00 per week). It was noted that this increase was below the current rate of inflation but in line with the Council's recommendations on levels of fee setting.

Resolved:- (1) That the charges set out in Appendix 1 of the report submitted be approved.

(2) That the charges be effective from April, 2011.

(3) That a further report be submitted on a possible further increase in line with the rate of inflation and the financial implications of such.