

HUNTINGDONSHIRE DISTRICT COUNCIL

MINUTES of the meeting of the OVERVIEW AND SCRUTINY PANEL (SOCIAL WELL-BEING) held in Civic Suite 0.1A, Pathfinder House, St Mary's Street, Huntingdon, PE29 3TN on Tuesday, 2 July 2013.

PRESENT: Councillor S J Criswell – Chairman.

Councillors K M Baker, R C Carter, I J Curtis, R Fuller, Mrs P A Jordan, P Kadewere, S M Van De Kerkhove, M C Oliver and J W G Pethard.

R Coxhead and Mrs M Nicholas – Co-opted Members.

APOLOGY: An Apology for absence from the meeting was submitted on behalf of Councillor C R Hyams.

16. COUNCILLOR R J WEST

The Panel placed on record their gratitude for the invaluable contributions made by Councillor R J West to the work of the Panel, in particular the input he had on the health agenda.

17. MINUTES

The Minutes of the meeting of the Panel held on 4th June 2013 were approved as a correct record and signed by the Chairman.

18. MEMBERS' INTERESTS

Councillor Mrs P A Jordan declared a non-disclosable pecuniary interest in Minute No. 13/20 by virtue of being an employee of the NHS.

19. NOTICE OF EXECUTIVE DECISIONS

The Panel considered and noted the current Notice of Executive Decisions (a copy of which is appended in the Minute Book) which had been prepared by the Executive Leader of the Council for the period 1st July to 31st December 2013. Members were reminded that they would have sight of the items entitled Town and Parish Council Charter, Affordable Housing Policy – Update and Consultation and Engagement Strategy prior to their submission to the Cabinet.

20. CAMBRIDGESHIRE AND PETERBOROUGH CLINICAL COMMISSIONING GROUP: FINANCE AND PERFORMANCE REPORTS

(Mrs S Shuttlewood, Acting Director of Performance and Delivery and Mr R Murphy, Acting Local Chief Officer for the Huntingdonshire System, Cambridgeshire and Peterborough Clinical Commissioning

Group, were in attendance for consideration of this item).

(Councillor Mrs M Banerjee was in attendance for this item).

With the aid of report prepared by Cambridgeshire and Peterborough Clinical Commissioning Group (a copy of which is appended in the Minute Book), the Panel was updated on the financial and operational performance of the Clinical Commissioning Group across the Cambridgeshire and Peterborough area, with particular reference to the performance of Hinchingsbrooke Hospital. In introducing the report, Mrs S Shuttlewood, Acting Director of Performance and Delivery, drew Members' attention to the fact that the Commissioning Group had officially come into operation on 1st April 2013 and that this was the first performance report which had been submitted to the Governing Body to date. It was reported that all providers had struggled to meet desired performance levels in the first quarter owing to the adverse weather conditions in April 2013, but that most providers had now recovered and were reaching their performance targets.

Mr R Murphy, Acting Local Chief Officer for the Huntingdonshire System, then delivered an outline of the performance levels achieved at Hinchingsbrooke Hospital. It was noted that the Accident and Emergency Department had been ranked as the top performing facility nationally in January 2013. He reiterated that the poor weather experienced in April had placed additional pressures on the Trauma Orthopaedic Department at the time but, on a more positive note, the Hospital was achieving its cancer waiting times and there had been no outbreaks of MRSA on site. There had been delays with diagnostic waiting times, which were attributed to staff sickness. In addition, Ambulance handover times had been identified as a further area of concern but an audit of the service was currently being undertaken and an action plan would be developed with a view to improving performance.

The Panel received clarification of the differences between the Commissioning Group's running cost budget and its programme budget. An explanation was also delivered of the differences between the previous Primary Care Trust model of provision and the new Commissioning model. In response to Members' concern at the possible fragmentation of services across the area, the Acting Director of Performance and Delivery reported that the Commissioning Group worked within a federated model which utilised existing data sources such as the Joint Strategic Needs Assessments and considered historic areas of spend. It should be a stronger delivery model than the previous one. She added that Local Clinical Commissioning Groups would be able to identify specific health trends and, therefore, would be best placed to take decisions on local matters.

The Panel discussed a number of matters including the effective utilisation of resources within the Clinical Commissioning Group and, in particular, how this applied to community medicines. Members then considered the accountability mechanisms in place, the powers of the Commissioning Group to undertake unannounced visits at Hospitals, the sanctions available to the Commissioning Group and the process for imposing fines together with the risks associated with the

imposition of financial penalties on providers. The Commissioning Group's view of providers was partly informed by the new Friends and Family test which was being employed by providers nationally. In addition there was a requirement to report upon defined health standards.

With regard to the Commissioning Group's financial position, Members noted its intention to clarify its funding allocation as it appeared up to £6m had been withheld for specialist treatments which had previously been included within the Primary Care Trust's budget. Further on financial matters comment was made that there should be engagement with the community on areas where funding should be directed.

A question was then raised by a Member on the Commissioning Group's short to medium term priorities. These were reported as being the development of a strategy for end of life care, improving communications across the board and reducing the risk of coronary heart disease amongst the population. Some priority also was accorded to care for older people.

Members were advised that in Huntingdonshire social care services and health services adopted close working practices. It was thought that these services might be integrated in the future provided there was a justifiable case to do so. The view was then expressed that there was a need for a culture change on the part of local GPs in the way they worked alongside local authorities and elected Members.

Having thanked the Acting Director of Performance and Delivery and Acting Local Chief Officer for the Huntingdonshire System for their attendance at the meeting, the Panel welcomed representatives of the Commissioning Group back in six months time to deliver a further update.

21. HOUSING AND COUNCIL TAX BENEFIT CHANGES AND THE POTENTIAL IMPACT UPON HUNTINGDONSHIRE

(Councillor B S Chapman, Executive Councillor for Customer Services, was in attendance for consideration of this item).

Consideration was given to a report by the Head of Customer Services (a copy of which is appended in the Minute Book) outlining the effects of Government changes to the Housing Benefits system, which were contained in the Welfare Reform Act. In introducing the report, the Executive Councillor for Customer Services reported that the Council had yet to see the full impact of the reforms but that, since the last quarter, there had been an increase in the number of households presenting themselves to the Council as homeless. He also indicated that private landlords appeared to be withdrawing their properties from the rental market which was causing difficulties in finding appropriate accommodation for households. Having advised that the Benefit Cap would be introduced on 15th July 2013, he reported that 44 households within Huntingdonshire would be affected by this change.

In response to a question raised by a Member, the Benefits Manager reported that whilst there had been a number of claims for

Discretionary Housing Payments, it had taken five to six weeks for the Benefits Team to process all of these claims. She however confirmed that the backlog had now been cleared and that turnaround times had been brought back to a few days. A question was then raised about the level of non payment from customers affected by the Council Tax Support Scheme. In response the Head of Customer Services reported that it was early days but that the Council had issued a number of summonses to households within the District.

Following a further question by a Member, the Head of Customer Services informed the Panel that, in terms of their occupancy levels the Regulations did not allow the Council to make an allowance for married couples where one of them was disabled but the Discretionary Housing Payment scheme was available where a family had a disabled child. She offered to look into any particular cases Members were aware of. Having discussed the availability of one and two bedroom properties across the District, the Panel went on to consider the responses received from Luminus' survey of tenants' interest in moving home as a means of mitigating the effects of the welfare reforms. Members also were acquainted with the process employed by housing associations in the case of mutual property exchanges, the level of budget available to assist with homelessness together with the range of preventative work undertaken and the recent acquisition of additional temporary accommodation in Huntingdon.

Having conveyed their gratitude to the Head of Customer Services and her Team for their efforts during the implementation of the welfare reforms, it was

RESOLVED

that the content of the report now submitted be noted.

22. PRESS AND PUBLIC

RESOLVED

that the public be not excluded from the meeting as the business to be transacted would not disclose any exempt information and the report on CCTV Operations – Shared Service Proposals be made available to the public in accordance with the Local Authorities Executive Arrangements Meetings and Access to Information England Regulations 2012.

23. CCTV OPERATIONS - SHARED SERVICE PROPOSAL

By way of a report by the Head of Operations (a copy of which is appended in the Minute Book) the Panel gave consideration to a proposal to establish a joint CCTV shared service with Cambridge City Council. In introducing the report, the Head of Operations reported that the proposals would establish a single management structure from the CCTV Control Room at Eastfield House which was expected to generate around £200,000 of savings per year for each authority. Members noted that existing assets would remain the responsibility of the relevant authority but that the new body would be

responsible for the monitoring of images.

In noting that there would be an opportunity to enable the service to generate income for the Council through commercial contracts and the use of wireless technology, a Member queried how resistant to jamming such a system would be. The Head of Operations confirmed that other authorities were effectively utilising similar technologies and that he was not aware of any cases of this happening. He then indicated that commercial contracts had not yet been pursued, but further work was being undertaken to determine how this might be done in the future.

Members expressed their concern over the financial implications for the Council of the transfer of staff from the City Council. In response, it was reported that detailed work had not yet been undertaken on this element of the proposals but that a number of safeguards had been built into discussions with the City Council in order to protect the District Council's interests. Members nevertheless sought assurances that its true impact should be incorporated fully into the proposed business plan.

Following a question by a Member, the Panel discussed the structure of the service. Consultations with Trade Unions and other relevant bodies would be undertaken.

In noting that the CCTV Control Room at Eastfield House would need to be reconfigured as part of the proposals, the Head of Operations confirmed that there was sufficient capacity on site to undertake the necessary adaptive works. Future expansion of the service could also be accommodated.

Having expressed their support for the proposals, it was

RESOLVED

that the Cabinet be recommended to approve in principle agreement for establishing a joint CCTV service with Cambridge City Council and to delegate authority to the Head of Operations, after consultation with the Executive Member for Healthy and Active Communities, to establish a shared service based in Huntingdon on the basis of a detailed business case.

24. CAMBRIDGESHIRE ADULTS, WELL-BEING AND HEALTH OVERVIEW AND SCRUTINY COMMITTEE

RESOLVED

that Councillor J W G Pethard be appointed to the Cambridgeshire Adults, Well-Being and Health Overview and Scrutiny Committee and Councillor R C Carter appointed as the substitute Member.

25. WORK PLAN STUDIES

The Panel received and noted a report by the Head of Legal and Democratic Services (a copy of which is appended in the Minute

Book) which contained details of studies being undertaken by the Overview and Scrutiny Panels for Economic Well-Being and Environmental Well-Being.

26. OVERVIEW AND SCRUTINY PANEL (SOCIAL WELL-BEING) - PROGRESS

The Panel received and noted a report by the Head of Legal and Democratic Services (a copy of which is appended in the Minute Book) which contained details of actions taken in response to recent discussions and decisions. The Chairman reported that the Cambridgeshire Adults, Wellbeing and Health Overview and Scrutiny Committee had confirmed their wish for the Hinchingsbrooke Hospital Joint Working Group to continue to operate over the ensuing Municipal Year. It was also noted that meetings of the Corporate Plan, Social Value and Consultation Processes Working Groups would be held on 17th July, 18th July and 28th August 2013 respectively. In doing this, Councillor R C Carter expressed his interest in becoming a Member of the latter Working Group.

The Chairman reported on the outcome of his liaisons with Mr C Davison, Franchise Manager at Hinchingsbrooke Health Care NHS Trust, on the Panel's intentions to undertake a review of elderly patient care at Hinchingsbrooke Hospital. It had been agreed that the Working Group would meet with representatives of the Trust and Circle with a view to determining the way forward for the study on a date to be determined.

Having regard to Ambulance service provision, it was noted that this was a matter that had been identified by the Cambridgeshire Adults, Wellbeing and Health Overview and Scrutiny Committee as an area for review. The Panel accepted that this work should be undertaken at a countywide level.

RESOLVED

that Councillor R C Carter be appointed to the Consultation Processes Working Group.

27. SCRUTINY

The 135th Edition of the Decision Digest was received and noted.

Chairman