Lancashire County Council

Health Scrutiny Committee

Minutes of the Meeting held on Tuesday, 2nd April, 2019 at 10.30 am in Cabinet Room 'C' - The Duke of Lancaster Room, County Hall, Preston

Present:

County Councillor Peter Britcliffe (Chair)

County Councillors

J Burrows E Nash
N Hennessy M Pattison
S Holgate E Pope
H Khan C Towneley

S C Morris

Co-opted members

Councillor Margaret Brindle, (Burnley Borough Council)

Councillor David Borrow, (Preston City Council) Councillor Bridget Hilton, (Ribble Valley Borough Council)

Councillor G Hodson, (West Lancashire Borough

Councillor Alistair Morwood, (Chorley Borough Council)

1. Apologies

Apologies were received from County Councillors Gina Dowding and Charles Edwards and Councillors Barbara Ashworth, Rossendale Council, Glen Harrison, Hyndburn Borough Council, Colin Hartley, Lancaster City Council, Julie Robinson, Wyre Council, Matthew Tomlinson, South Ribble Borough Council and Viv Willder, Fylde Council.

2. Disclosure of Pecuniary and Non-Pecuniary Interests

None were disclosed.

3. Minutes of the Meeting Held on 5 February 2019

In response to a request the Chair agreed to write to NHS colleagues regarding the Lancashire and South Cumbria Transforming Care Partnership Update presented at the Health Scrutiny Committee held on 11 December 2018.

The chair would ask for a response to unanswered questions raised, as the clerk had been unsuccessful in securing a reply.

Resolved: That the minutes from the meeting held on 5 February 2019 be confirmed as an accurate record and signed by the Chair.

4. Housing with Care and Support Strategy 2018 - 2025

The Chair welcomed Lancashire County Council officers: Joanne Reed, Head of Service for Policy, Information & Commissioning (Live Well), Craig Frost, Policy, Information and Commissioning Manager (Age Well) and Julie Dockerty, Policy, Information and Commissioning Senior Manager.

The report presented provided an update on the implementation of the county council's Housing with Care and Support Strategy for 2018 – 2025.

The Committee provided feedback regarding the draft Strategy, as presented and sought further clarification as follows:

- Members commented that the key investigations from the consultation centred on working with developers and service providers, rather than meaningful engagement with families. The consultation responses showed that only 21% of feedback on the draft strategy was from family members, members of the public or unspecified, meaning that the most vulnerable had not been reached for their comments. Officers countered that although the exact number of family members who had responded could not be confirmed, a significant number had been family members. Regular local meetings with stakeholders and family members had taken place to share information and establish common concerns and a number of mechanisms had been put in place such as a Transfer and Challenge group to engage those who would be affected. It was also confirmed that the initial work had been at a strategic level and this would be followed by more detailed work by Social Care officers regarding gathering information about individuals' circumstances for the next stage.
- Concerns were expressed regarding the risk assessment of housing providers' finances which had been raised by the Care Quality Commission (CQC) and the Regulator of Social Housing. It was clarified that the district council partners would need to comment on this and that the county council were awaiting further guidance from central government regarding equitylinked supported housing.
- The vision and strategic aims of the previous strategy had also committed to having at least one extra care scheme per district. Members asked why only a third of districts had implemented this. Officers clarified that many of the issues causing a lack of confidence in the market from developers and registered providers, arising from welfare reforms had now been resolved. Districts were committed to developing extra care schemes and there was an enthusiasm to move forward and make investments.

The schemes relied on funding from Homes England and other partners. However Lancashire County Council may make a financial contribution for high priority areas, where there was a strategic need for a service which could not proceed without such a capital contribution.

- Members stated that the focus of provision of extra care units for older adults should be prioritised according to need rather than aiming for an additional one per district. The report indicated that some districts already had some units in existence or were being developed, when others had none. Officers clarified that the county council was undertaking a needs analysis at both district and neighbourhood level to determine the number of care schemes required, in terms of risk and need according to health and social care data. The county council also needed to consider what land opportunities were available in the districts. The aim of one unit per district was a starting point and the additional needs analysis would highlight where more were needed.
- Members requested that data detailing estimated numbers of units needed compared to the number already in existence or under development, be provided for the supported places for young adults with disabilities.
- Members expressed concern that the data indicated that currently only 16.5% of need for older adult care units had been met and suggested that county council work with planning authorities (district councils) to ensure housing developers were required to provide a percentage of supported housing. In response to a question it was clarified that the flat scheme for younger adults with disabilities largely consisted of renovating existing buildings. Members commented that district councils need to be more involved at the planning stage and suggested including district council members on the Transfer and Challenge group.
- Members asked how supporting services peripheral to the strategy, e.g. public transport, would be considered as part of the strategy. It was confirmed that access to facilities, either on site or close by would be built into the specifications to mitigate the risk of isolation.

In response to further questions it was confirmed that:

- Work was being undertaken to identify the population profile per district. The
 county council had secured consultants from the Local Government
 Association to look at the approach to development and this included taking
 into account an environmentally sound methodology for provision.
- Assistive technology would include a range of devices to assist with falls management and included mobile technology to support interaction in the community. There was an increased focus on introducing assistive technology and it was necessary that this was kept up to date. This gave an opportunity to support respite for family members by giving them peace of mind.

• The county council had worked with L'Arche (a charity that offered support for adults with learning disabilities) on a flat scheme in Preston. It was acknowledged that housing schemes away from communities could be isolated, but conversely a scheme within a community had the potential for residents to be taken advantage of. Some would be integrated depending on the needs of the residents. The county council would act on the advice of providers and developers with the necessary expertise when planning sites and facilities.

The establishment of a task and finish group to review the strategy in more detail was suggested. In considering the suggestion it was felt that the Committee's Steering Group be asked to consider the request in the first instance.

Resolved: That the Health Scrutiny Committee;

- The intention to promote the development of more extra care schemes for older adults and flat schemes for younger adults with disabilities be supported.
- 2. The request for a task and finish group to the Health Scrutiny Steering group to review the Housing with Care and Support Strategy in more detail be considered by the Health Scrutiny Steering Group at its earliest convenience.
- 3. Noted with concern the discrepancies between planned development compared with the estimated units needed.

5. Whyndyke Garden Village Healthy New Town

The Chair welcomed Allan Oldfield, Chair of Healthy New Town Board and Chief Executive of Fylde Council and Lancashire County Council Officer Andrea Smith, Public Health Specialist.

The report presented provided an update on the NHS Healthy New Towns Programme, its inception and up to date position, as well as an overview on the proposed Whyndyke Garden Village Healthy New Town in the Fylde district and the development of Homes for Life Long Living.

In response to questions it was confirmed that:

Currently there were no elected members or health representatives from NHS
Foundation Trusts on the Board, however this could be considered at the
annual review of membership. The board did link in with NHS providers and
Clinical Commissioning Groups and representatives were involved and
attended meetings depending on the relevance of the discussion to their
expertise.

- Five expressions of interest had been received from developers and all were aware of the inclusion of the ten healthy living principles in the Section 106 agreement and the additional implications of the project as outlined in the report.
- Members stated that initiatives such as community park runs and working to
 increase physical activity in schools were already in place across the county
 and questioned whether this would be encouraged within the project. This
 was an NHS initiative and the Board would work with developers to design the
 area and use the environment to support healthy and sustainable methods of
 travel. Health initiatives would be piloted to engage the community.
- With regards to timings, the design and infrastructure would be finalised with the developer once this was announced. Additional grants for an early community facility would also be discussed at this stage to promote community cohesion from the beginning.
- The current plan was for 1450 properties to home in the region of 3,500-3,700 people. However this could increase as there was some adjacent commercial land that may not be required for its original intended purpose.
- During initial planning, the Board had looked at best practice and learning points from other similar successful and unsuccessful preceding projects. The key learning point was influencing behaviour change in terms of self-care of physical, mental and spiritual wellbeing. The programme aimed to improve attitudes, behaviours and lifestyle in terms of health, including the use of digital resources.
- Environmentally sound innovations were also included in the principals of the Section 106 agreement for both the properties and the public infrastructure. Homes for Life Long Living included adaptations such as digital 'plumbing' to ensure homes were enabled for digital assistance as and when needed. National funding would be accessed for change management, for example ensuring families and practitioners were upskilled to use assistive technology.
- The position of the site meant that it would easily integrate into the wider network of other local cycle routes. It was requested that the paths were made multi-use to incorporate the needs of all non-motorised users, not just walkers and cyclists. Currently the Board was debating how the site could be linked to neighbouring communities as it was currently isolated by a motorway and dual carriageway.

It was noted that the Home for Life Long Living standard had not been embedded into all Lancashire district councils' Local Plans. Additionally, it was reported that not all district councils across Lancashire had been asked to embed the ten Healthy Living Principles into future Section 106 Agreements.

Resolved: That

1. The achievements made by collaborative working with partners be acknowledged.

2. In order to support Health in All Policies, the Cabinet Member for Health and Wellbeing give consideration to writing to all Lancashire's district councils, except Fylde requesting them to consider:

a) Embedding the principles of Home for Life Long Living (adaptable homes standards) into their Local Plans.

b) Embedding the ten Healthy Living Principles into future Section 106 Agreements.

c) Ensuring that multi-user paths proposed in future developments cover all non-motorised users and also extend to the wider network.

6. Report of the Health Scrutiny Steering Group

The report presented provided an overview of matters presented and considered by the Health Scrutiny Steering Group at its meetings held on 20 February 2019 and 13 March 2019.

Resolved: That the report of the Steering Group be received.

7. Health Scrutiny Committee Work Programme 2018/19

The Work Programmes for both the Health Scrutiny Committee and its Steering Group were presented to the Committee.

Resolved: that the report be noted.

8. Urgent Business

There were no items of Urgent Business.

9. Date of Next Meeting

The next meeting of the Health Scrutiny Committee will be held on Tuesday 14 May 2019 at 10.30am in Cabinet Room C – The Duke of Lancaster Room, County Hall, Preston.

L Sales Director of Corporate Services

County Hall Preston