

Minutes of a meeting of the Adults and Communities Overview and Scrutiny Committee held at County Hall, Glenfield on Thursday, 9 October 2014.

PRESENT

Mrs. R. Camamile CC (in the Chair)

Mr. M. H. Charlesworth CC

Ms. Betty Newton CC

Mr. S. J. Hampson CC

Mr. R. Sharp CC

Mr. D. Jennings CC

Mr. R. J. Shepherd CC

Mr. J. Kaufman CC

Mr. E. D. Snartt CC

34. Minutes.

The minutes of the meeting held on 17 September 2014 were taken as read, confirmed and signed.

With regard to paragraph six of minute 30, Mr Kaufman advised that the intention had been to question the integrity and professionalism of the political leadership rather than that of officers.

35. Declarations of interest.

The Chairman invited members who wished to do so to declare any interest in respect of items on the agenda for the meeting.

All members present at the meeting declared a personal interest in the item titled 'Strategic Review of Preventative Services – Support for Homeless People – Call-in of the Cabinet Decision' (minute 37 refers) as members of the district councils.

36. Declarations of the Party Whip in accordance with Overview and Scrutiny Procedure Rule 16.

There were no declarations of the party whip.

37. Strategic Review of Preventative Services - Support for Homeless People - Call-in of the Cabinet Decision.

The Committee considered a report of the Director of Adults and Communities which drew attention to the receipt of a Call-in to part of the decision of the Cabinet on the Strategic Review of Preventative Services, specifically in relation to support for homeless persons. A copy of the report and supplementary report marked 'Agenda Item 4' is filed with these minutes.

The Chairman welcomed the Cabinet Lead Member for Adult Social Care, Mr D W Houseman MBE CC, to the meeting for this item.

The Director and Cabinet Lead Member advised the Committee as follows:-

- The consultation process for preventative services had been extensive. Key stakeholders and providers had been engaged with, concerns had been acknowledged and, as a result, proposals had been revised. The Cabinet had considered carefully all the evidence put before it in taking a decision on preventative services;
- The County Council was seeking to establish a new offer which would ensure a more targeted approach aimed at prevention in the context of reduced resources. Within this offer, homelessness support would include accommodation based support and floating outreach services, the latter aimed at preventing people from becoming homeless and needing more intensive support;
- Following engagement with other authorities, stakeholders and providers, and as a result of representations received, the County Council had increased the proposed level of investment for homelessness services from £300,000 to £500,000. This would allow commissioning of a generic floating outreach service for those at risk of homelessness but also provide funding for the commissioning of 25 to 30 units of accommodation. The split of funding between accommodation based support and floating outreach services would be subject to further engagement and the apportionment between these two elements was negotiable;
- It was expected that the focus of the new model for homelessness services on preventing homelessness would mean that the need for accommodation based support would be reduced. The duty to provide housing rested with the district councils and the County Council only provided accommodation on a short-term basis through hostels. The new proposals were due to be implemented from September 2015 and this would give the Council sufficient time to engage with stakeholders and providers to help ensure that the offer put forward for homelessness best met the needs of service users with the resources available;
- It was acknowledged that in difficult financial times the County Council had to make best use of the resources available to ensure the best outcomes for the people of Leicestershire, which had led to difficult decisions across all services.

Arising from discussion the following concerns were raised and responded to as follows:-

- (i) Members sought assurances that the reduction in funding for homelessness support would not increase pressure and costs on the NHS and other health services. The Committee was advised that officers were not aware of any such direct causal link. It was difficult to assess the impact on NHS services that might be caused by a reduction in the level of funding provided by the County Council for homelessness services as this was relatively small and there was a number of statutory agencies involved in the provision of services for homeless people. However, the County Council was engaging with the NHS and other partners to identify any potential implications for health services. The new service model for homelessness services would focus more on preventing people becoming homeless in the first place, hence it should reduce the need for more resource intensive services;
- (ii) Concern was expressed that there was a risk that existing homelessness accommodation would be lost and whether the market would be able to respond and support the County Council's new commissioning proposals for homelessness services. It was explained that the vast majority of people did not use homelessness

accommodation services for more than three months. Individual circumstances would be taken into account in coming to a view on a person's proposed length of stay but it was generally considered better for a person not to spend any extensive period in a hostel. The County Council was not in a position to meet the housing needs of all people but would help the most vulnerable. Extra funding had now been allocated to homelessness services and further engagement would be undertaken with stakeholders and providers to help ensure the right split between accommodation based support and floating outreach services;

- (iii) It was explained that a large proportion of funding for housing support for homelessness came from other sources, such as housing benefits and district councils. District councils, who had a statutory responsibility to provide housing, could refer people to homelessness hostels, such as Kennedy House, but it was understood that they did not commission services there. Kennedy House being located close to the border with Leicester City had also meant that a number of beds were occupied by city residents who directly accessed the service. Focus on prevention would ensure the shortest possible stay at a hostel before the homeless person was found permanent housing;
- (iv) It was clarified that of the 56 available beds at Kennedy House, half were commissioned by the County Council. However, due to the lack of an alternative provider in the south of the County, the County Council continued to fund all the beds at the Hostel. The County Council's current contract with Shaw Healthcare regarding Kennedy House had not been sufficiently robust and any new contract for homelessness accommodation would be clearer in terms of the level of service commissioned and outcomes expected. The contract with Shaw Healthcare was due to expire in September 2015 and subject to the proposals now under discussion being agreed there would be an open procurement process for homelessness services which would allow any potential provider to tender for the new contract for homeless accommodation. Any procurement process would need to be undertaken in accordance with the County Council contract procedure rules and potential providers would be assessed against the requirements of the tender specification. As such, it would not be appropriate to give any on-going commitments to keeping open an existing facility;
- (v) With regard to the proposed commissioning of 25 to 30 units the Committee was advised that the basis of this was that the previous accommodation based only offer was for 25 places in the north of the County and 25 places in the south. The new offer now included a significant investment in floating support, which given its preventative focus, would mean a significant reduction in the need for accommodation based services, which had now been estimated at 25 to 30 units. In addition, the new offer also envisaged closer working with the district councils and for referrals to be made via district councils. This would ensure that referrals made were to the appropriate service providers and this triage process would further reduce the need for accommodation based services.

It was moved by Mr Charlesworth and seconded by Mr Sharp:

"That the Cabinet decision on the strategic review of preventative services, specifically support for homeless people be referred back to the Cabinet for further consideration on the basis that the Committee is of the view that the Cabinet was not provided with evidence of need and not made fully aware of the impact of the new model on existing service provision."

An amendment was moved by the Chairman and seconded by Mr Jennings:

“That in light of the information in the report and the responses to the questions, demonstrates that the Cabinet did consider the points raised in the Call-in and took the difficult decision fully aware of the implications, accordingly this Committee notes the report and agrees that no further action be taken.”

The amendment was carried, five members voting for the amendment and four against.

The substantive motion was put, five members voting for the motion and four against.
The substantive motion was carried

The following members requested that it to be recorded that they voted against the substantive motion:

Mr Charlesworth CC
Mr Kaufman CC
Ms Newton CC
Mr Sharp CC

RESOLVED:

That in light of the information in the report and the responses to the questions, demonstrates that the Cabinet did consider the points raised in the Call-in and took the difficult decision fully aware of the implications, accordingly this Committee notes the report and agrees that no further action be taken.

38. Date of next meeting.

It was noted that the next meeting of the Committee would be held on Monday, 17 November at 2.00pm.

11.00 am - 12.25 pm
09 October 2014

CHAIRMAN