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Scrutiny & Overview Committee

Social Inclusion Sub-Committee

Monday, 20th June, 2016 at 5.30 pm
Hastings & Knepp, Parkside, Chart Way, Horsham

Councillors:

Alan Britten
Roger Clarke
Matthew French
Liz Kitchen

David Skipp
Ben Staines
Tricia Youtan

You are summoned to the meeting to transact the following business

Agenda

	Page No.
1. Election of Chairman	
2. Apologies for absence	
3. To approve the time of the meetings for the ensuing year	
4. Minutes	1 - 4
To approve as correct the minutes of the meeting held on 7 th March 2016	
5. Declarations of Members' Interests	
To receive any declarations of interest from Members of the Working Group	
6. Announcements	
To receive any announcements from the Chairman or the Chief Executive	
7. To approve the Sub-Committee's Terms of Reference	5 - 6
8. Items outstanding for completion	
a) CenSus Revenues and Benefits Performance Data	
b) Digital Inclusion	
9. Outstanding items from the Health Provision Working Group	7 - 10
Notes of the meeting held 30 th March 2016	

10. **Items for the work programme**

Notes of the Scrutiny and Overview Committee
Social Inclusion Working Group
7th March 2016

- Present:** Councillors: David Skipp (Chairman), Alan Britten, Matthew French
- Apologies:** Councillor: Tim Lloyd, Roger Clarke, David Coldwell, Ben Staines, Tricia Youtan
- Also present:** Councillor: Leonard Crosbie (Chairman of Scrutiny & Overview Committee), Godfrey Newman

1. **TO APPROVE AS CORRECT THE RECORD OF THE MEETING HELD ON 30TH NOVEMBER 2016**

The minutes of 30th November 2015 were approved as a correct record of the meeting.

2. **TO RECEIVE ANY DECLARATIONS OF INTEREST**

There were no declarations of interest.

3. **ANNOUNCEMENTS FROM CHAIRMAN OR THE CHIEF EXECUTIVE**

There were no announcements.

4. **FINANCIAL INCLUSION & ENGAGEMENT OFFICER AT WEST SUSSEX COUNTY COUNCIL**

The Chairman welcomed West Sussex County Council's Financial Inclusion & Engagement Officer, Dominic Maxwell, who was employed as part of the countywide Think Family Partnership.

His role would help to develop a three-year plan, which would be a Financial Capability Strategy for the County. The strategy would focus on: issues covered by Think Family; people in financial difficulty; older and retired people; and children and young people in education.

Dominic gave a presentation on the causes of indebtedness and financial hardship, which focussed on a recent study based on 50 households that were in debt from across the WSCC area.

4. Financial Inclusion & Engagement Officer at WSCC (Cont.)

The study had shown that the most significant causes of indebtedness were: difficulties with managing money rather than a lack of it (25%); and mental health problems (25%). The debts covered a range of areas, in particular rent, council tax and utility bills.

Within this demographic there was a lack of knowledge of available benefits. For example 60% of those eligible to claim the Warmer Home Discount for poorer families did not claim it. One in three pensioners entitled to pension credit did not know that they could claim it.

Dominic highlighted the importance of communicating directly with those in debt in order to engage with them and support them in tackling the problem. In 75% of cases those in debt had had contact with a service or agency (eg regarding council tax) because of their difficulty to pay. This indicated that there were lost opportunities when the Council or other bodies could have intervened to give support in solving underlying problems.

Brighton & Hove City Council had introduced a system whereby those unable to pay their council tax were put in touch with the Brighton based charity Money Advice Plus, which supported people in managing their money successfully. It was noted that there was no equivalent organisation within the area of WSCC.

The overall aim of the Financial Capability Strategy would be to minimise debt. One way of doing this could be by tackling debt through the council tax collection process where those in difficulty would be identified. It was noted that the District Council (through Census) collected council tax on behalf of WSCC.

With regards to council tax collection, almost all councils used set dates for Direct Debits. This lack of flexibility within the system meant that payees could not change the date that money left their accounts to fit in with their own pay-days. Dominic cited the case of Wyre Council, Lancashire, which had pioneered a more flexible system where residents could select their own Direct Debit dates through an automated system that optimised the efficiency of the collection process.

The Working Group noted that engaging with those in debt at an early stage rather than simply pursuing them for payment would have a positive outcome for councils by reducing costs (eg bailiff costs) and potentially reducing cases of homelessness.

4. Financial Inclusion & Engagement Officer at WSCC (Cont.)

Dominic confirmed that the detailed results of this study, his conclusions and recommendations had only just been completed and would be presented to WSCC shortly.

5. **TO DISCUSS THE PLANS FOR A DIGITAL INCLUSION STRATEGY TO BE INCORPORATED IN THE NEXT CORPORATE PLAN WITH THE LEADER AND THE BUSINESS TRANSFORMATION MANAGER**

Item deferred.

The meeting finished at 7.00pm having commenced at 5.35pm.

CHAIRMAN

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Terms of Reference for the Social Inclusion and Health Sub-Committee

To review:

1. The Chairman of this Sub-Committee will be a Member of the Overview and Scrutiny Committee having been elected by the Overview and Scrutiny Committee
2. Initiatives to develop the Council's approach to social inclusion, equality and diversity
3. Access to services and supporting vulnerable people
4. Anti-poverty initiatives
5. Reports received from Cabinet Members / service heads on specific issues relating to social inclusion, equality and diversity
6. Health matters affecting the Horsham District
7. To make recommendations to Overview and Scrutiny Committee and discharge functions externally, where appropriate.

June 2016

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Notes of the Scrutiny and Overview Committee **Health Provision Working Group** **30th March 2016 2016**

Present: Councillors: Liz Kitchen, Tim Lloyd, Tricia Youtan

Apologies: Councillors: David Skipp (Chairman)

Also present: Councillors: Toni Bradnum, Leonard Crosbie, Kate Rowbottom

1. TO APPROVE AS CORRECT THE RECORD OF THE MEETING HELD ON 25TH JANUARY 2016

The notes of the meeting held 25th January 2016 were approved as a correct record.

2. TO RECEIVE ANY DECLARATIONS OF INTEREST

There were no declarations of interest.

3. ANNOUNCEMENTS FROM THE CHAIRMAN OR CHIEF EXECUTIVE

In the absence of the Chairman, the Councillor Crosbie agreed to chair the meeting, as Chairman of the Scrutiny and Overview Committee. .

4. TO HEAR FROM SOUTH EAST COAST AMBULANCE SERVICE ON AMBULANCE RESPONSE TIMES IN THE DISTRICT

Ben Banfield, Account Manager for Sussex, Peter Radoux, Operating Manager for the North of Sussex and Rory Collinge, Contracts Manager, all from South East Coast Ambulance Service NHS Foundation Trust (SECAMB), attended the meeting of the Working Group to respond to concerns raised by the Members surrounding ambulance response times in the Horsham District, especially in the rural areas.

A PowerPoint presentation was given to Members which provided the Group with information about the 999 service in general and response times.

Members were concerned about Horsham's response time; only 53% of calls were responded to within the target of 8 minutes. However, the Group was informed that the average response time for Red 1 calls: immediately life threatening and Red 2 calls: very urgent – potentially life threatening was in fact 8 minutes and 17 seconds. The reasons for this

were the rurality of the District and also that it was the only despatch desk which didn't have its own Accident and Emergency for the area.

Ambulances were placed in areas that historically and statistically the emergency calls were expected to come from. In Horsham 50% of calls were from urban areas and 50% from the rural areas, compared to Brighton where the population was dense and mainly urban, 85% of calls were responded to within the target time. Therefore the main variance in response times was attributed to the location.

Members noted that it was rare to have ambulances located at their base between calls, normally they would be out on the road and SECAMB examined historical data to predict where the next call might come from and then would place the ambulance in that area. However, ambulances would normally go from one call to another, as a result of the high volume of calls.

The Group questioned where patients would be taken once collected by the ambulance. Members noted that the ambulance crew or critical care paramedic would make a decision on which hospital to take the patient to based on the nature of the injury. Accidents which were high priority or major trauma would be taken to a major trauma centre. The ambulance crew could notify the hospitals in advance that they would be arriving with a patient. There were many levels of communication between the ambulance crews and the hospitals to ensure that the patient was taken to the nearest and most suitable hospital best equipped to deal with the problem.

The Working Group also noted that there were also community first responders who were volunteers and could be despatched to respond to the call whilst the patient was waiting for the ambulance if they had access to the defibrillator and a first aid kit. First responders were included in the response targets.

There was not considered to be any clinical impact or harm associated with slightly longer response times in terms of patient care, what was important was to get reasonable care in a good time. As long as the patient received the care in the crucial time, this was considered the main factor.

The targets often did not reflect the outcome of the treatment which was a far more important factor, for example getting to a patient in 7 minutes and 59 seconds was considered a success, even if the patient could not be saved, under the current targets, whereas getting to a patient in 10 minutes would be considered a failure, despite the fact that the patient was treated and had survived. Later in 2016 the targets would be

changing nationally to measure and monitor ambulance response times more accurately.

The Working Group questioned the impact of the closure of the ambulance station in Hurst Road on the ambulance service. Members were informed that ambulances would continue to respond from the Hurst Road site however, under the new proposals there would be less ambulance stations, instead there would be one central reporting hub located near Gatwick, from which all shifts would commence from, all vehicles would be fully prepared for the shift, i.e. cleaned, maintained and equipped, then sent to different deployment sites. Previously the paramedics would do this role at the beginning of their shift.

A community response post would remain at the Hurst Road site in Horsham so that SECAMB could still respond from that location, but the garage and full ambulance station would no longer be required. This would allow for the potential to have more community response posts in Horsham in the future.

The Working Group also questioned the impact of non-emergency transport for Sussex no longer being provided by SECAMB, it was suggested that once the changes had taken place the Working Group could invite the CCG leading the process, to come and talk to Members about the changes to the service.

The Members thanked SECAMB for the presentation and the presentation slides would be circulated to the Group.

The meeting finished at 4.33 p.m. having commenced at 3.00 p.m.

CHAIRMAN

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