

COUNCIL
21 MARCH 2024

OVERVIEW OF HEALTH AND HOUSING SCRUTINY COMMITTEE

1. Since the last meeting of the Council, the following are the main areas of work the Health and Housing Scrutiny Committee has undertaken.

Breast Symptomatic Services Update

2. We welcomed the Integrated Care Board – Director of Place (Darlington) who gave members a presentation covering current clinical services strategy including diagnostic and treatment services.
3. We received information on the current numbers of patients in the Darlington catchment area, current screening services offered including fixed and mobile sites, and were provided with differentiations between screening and symptomatic services. Post COVID recovery on both screening and symptomatic services was highlighted with screening services recovery from lockdown's backlog being a point of note along with symptomatic services' referrals increasing as normal service provision recommenced.
4. Challenges to the service were covered with workforce pressure remaining the greatest of these, on this point we were informed that additional staff are being trained in order to free-up consultant capacity in order to maintain quality of treatment.
5. Members wished to express that the numbers of screening uptake in Darlington is very encouraging and suggest that continual promotion of the importance of screening is vital. Officers agreed and highlighted the dichotomy that the high quality of service offered can adversely affect screening uptake due to less of the population being personally affected by breast cancer. A member questioned if residents who do not attend screening are repeatedly invited, and it was confirmed that they are however tackling fear and apprehension of attending screening remains a continual focus.
6. A member noted Darlington's positive performance in service uptake in comparison to surrounding localities and asked the possible reason for this. Officers stated that exact reasons are not clear however population makeup and the presence of a popular and well-used hospital in Darlington Memorial Hospital are suspected contributing factors.
7. Discussion was held with regards to cultural barriers that may prevent attending screening with officers confirming that women's health hubs aim for increased engagement to help target underrepresented individuals. Members questioned if individuals in susceptible families are being tested and that those who require screening are not being missed with officers confirming that every attempt is made to arrange services for those individuals.
8. We noted the content of the presentation and the quality of information provided.

Preventing Homelessness and Rough Sleeping Strategy Update

9. The Assistant Director - Housing and Revenues attended and presented the proposed update to this strategy that was previously approved by Cabinet in July 2019 with an update provided to this Scrutiny Committee in December 2022. We were informed that all actions in the current strategy have been completed and the development of a fresh strategy is now proposed with the considerations now present in the post-COVID period.
10. We were informed that the production of the updated strategy is intended to help manage an increase in demand for services to prevent rough sleeping. A major contributor to this was the lifting of the ban on no-fault evictions following the COVID period.
11. It was reported that a main ongoing challenge is sourcing accommodation for those with complex needs and those who have lost previous accommodation due to their own behaviour. With further challenges including the increase in presentations and demand for emergency accommodation has meant that services have had to be more reactive to ensure that no-one is left homeless or having to rough sleep.
12. It was highlighted that a key project for the strategy is to create a scoping document in order to present key pressures and to develop themes for work moving forward. It is also important to establish who will be involved in the production of the strategy and it is proposed that this is at least comprised of a blend of council departments, voluntary sector and social housing providers.
13. Discussions included members highlighting the importance of working with partners in the production of the strategy with a member highlighting that those involved in hospital and prison discharges would have insight that may be valuable in the production of the strategy. The quality of accommodation provided was also discussed with a consensus that secure and good standards of accommodation play an important role in maintaining the health and wellbeing of those housed and in order to break the cycle of individuals repeatedly presenting as homeless.
14. A further discussion was held with regards to individuals with military service presenting as homeless. Officers confirmed that those who have served are a priority and that efforts are made to identify these individuals, it was also clarified that such people can be directed to the Town Hall to speak to Housing Options who will assist.
15. We raised questions which included the most common circumstances of presentations and officers confirmed that due to the nature of homelessness there are always a number of transient presentations but also that more Darlington residents are presenting as homeless as current accommodation arrangements break down alongside more individuals coming through the asylum service which is showing an increase for all authorities in the North East with a member also adding that those being released from prison are also a common source for presentations.
16. A member queried what the most common accommodation required is and if there is scope for housing families. It was confirmed that most accommodation is 1 or 2 bedroom as this is the most common requirement however larger properties are currently under construction at the Neasham Road development but that turnover for families is generally a lot lower than that of individuals.

17. We considered the content of the report and agreed to the development of a new Preventing Homelessness and Rough Sleeping Strategy for 2025-30.

Darlington Better Care Fund Update

18. We welcomed the Head of Service - Commissioning, Performance and Transformation who provided an update on the Darlington Better Care Fund (BCF) 2023/25 Programme informing members of the next steps across the programme. We were informed the tight timeframes for submission, with guidelines being received in late December 2023 and that final submission was made in early February 2024.
19. We were informed that the underlying vision for the BCF over 2023-25 is to support people to live healthy, independent and dignified lives, through joining up health, social care and housing services seamlessly around the person. This vision is underpinned by the two core BCF objectives: to enable people to stay well, safe and independent at home for longer and to provide the right care in the right place at the right time.
20. A member raised the point that many activities specified in the submission relate to later-in-life individuals with the opinion that the prevention of unnecessary admissions would be more feasible if activities commenced earlier in people's lives. Officers acknowledged this and that there was an element of the funding allocated to prevention of admissions. However they also informed members that funding is required to be assigned to areas under greatest stress which consisted to facilitation of discharge with the post-COVID period showing greater strain than in previous years.
21. A member also expressed that they felt it would be beneficial for the report to clearly highlight that it is a Quarter 3 update and that a summary of changes from its previous presentation at the committee meeting would be beneficial and aid members in navigating the report more effectively. Officers acknowledged this for future presentations.
22. We noted the submission, the reporting requirements of the programme and agreed for a report to be presented at a future meeting to detail the outcome of the ongoing review of BCF Schemes.

Work Programme 2023/24

23. We have given consideration to the Work Programme for this Committee for the Municipal Year 2017/18 and possible review topics. The work programme is a rolling work programme and items can be added as necessary.

Councillor Mary Layton
Chair of the Health and Housing Scrutiny Committee