

## HEALTH AND HOUSING SCRUTINY COMMITTEE

Wednesday, 15 January 2025

**PRESENT** – Councillors Layton (Chair), Baker, Beckett, Holroyd, Johnson, Mahmud, Pease and Mrs Scott

**APOLOGIES** – Councillor Crudass

**ALSO IN ATTENDANCE** – Councillors Roche and Michelle Thompson (Healthwatch Darlington)

**OFFICERS IN ATTENDANCE** – Lorraine Hughes (Director of Public Health), Anthony Sandys (Assistant Director - Housing and Revenues), Claire Gardner-Queen (Head of Housing), Janette McMain (Housing Manager - Options and Lifeline), Lisa Soderman (Head of Leisure), Leanne McCrindle (Head of Quality Governance and Compliance) and Hannah Miller (Democratic Officer)

### HH31 DECLARATIONS OF INTEREST

There were no declarations of interest reported at the meeting.

### HH32 TO APPROVE THE MINUTES OF THE MEETING OF THIS SCRUTINY HELD ON 23 OCTOBER 2024

Submitted – The Minutes (previously circulated) of the meeting of this Scrutiny Committee held on 23 October 2024.

**RESOLVED** – That the Minutes of the meeting of this Scrutiny Committee held on 23 October 2024 be approved as a correct record.

### HH33 HOUSING REVENUE ACCOUNT - MEDIUM TERM FINANCIAL PLAN 2025/26 TO 2028/29

The Assistant Director – Housing and Revenues submitted a report (previously circulated) requesting that consideration be given to the Housing Revenue Account (HRA) – Medium Term Financial Plan (MTFP) for 2025-26 to 2028-29 (also previously circulated) prior to recommendation by Cabinet on 4 February 2025 and Council on 20 February 2025.

The Assistant Director Housing and Revenues provided an update on the key decisions within the HRA for 2025-26 which included a proposed revenue expenditure of £30.186M, a proposed Capital Programme of £30.092M and a proposed weekly rent increase of 2.7 per cent.

It was reported that Councils had the discretion to inflate rents by CPI plus 1 per cent, which would mean a rent increase of 2.7 per cent for 2025-26. Members were reminded that a 6.7 per cent increase was agreed in February 2024 for the current financial year, although rents could have been increased to 7.7 per cent.

Considering the current economic pressures faced by tenants and balancing this with increased costs of maintaining and improving Council housing and the need to deliver the Councils ambitious capital and energy efficiency programmes, an increase of 2.7 per cent was

recommended which equated to an average £2.81 increase in weekly rents. Members were also informed that Cabinet also recommended that service charges be increased by an appropriate inflationary amount.

A presentation accompanied the report, outlining the consultation exercise undertaken with Darlington Borough Council tenants in relation to the proposed rent charges for 2025/2026.

Discussion ensued regarding the use of text messages as means of communicating with tenants, which has seen an increase in responses from tenants; following concerns regarding those struggling to pay rent, Members were informed that there was a range of mechanisms in place to support those tenants, including the tenancy sustainment team; and there was acknowledgment for the need for improved community engagement.

Discussion also ensued regarding the budget for responsive repairs and maintenance and roofing repairs and clarity was sought in relation to lifeline services.

**RESOLVED** – That this Scrutiny Committee supports the average weekly rent increase of 2.7 per cent for 2025/26, increases to the garage rents and services charges, the revenue budget, Housing Business Plan and capital programme, as appended to the submitted report.

#### **HH34 PREVENTING HOMELESSNESS AND ROUGH SLEEPING STRATEGY 2025-2030**

The Assistant Director – Housing and Revenues submitted a report (previously circulated) requesting that consideration be given to the draft Preventing Homelessness and Rough Sleeping Strategy 2025-2030 (also previously circulated) prior to approval by Cabinet on 4 March 2025.

The submitted report stated that Section 1(1) of the Homelessness Act 2002 requires housing authorities to carry out a homelessness review for their area and formulate and publish a homelessness strategy based on the results of the review every five years; and the Council's previous Preventing Homelessness and Rough Sleeping Strategy for 2019-2024 successfully delivered a number of aims and objectives to reduce homelessness and deliver the requirements of the Homelessness Reduction Act 2017.

It was reported that over the past few years and particularly since the Covid-19 pandemic, the Council has had to deal with a significant increase in demand for homeless services; and that whilst these services would normally work in a proactive way with clients to prevent homelessness, the increase in presentations and demand for temporary accommodation has meant that services have had to be more reactive to ensure that no-one is left homeless or having to rough sleep.

Members noted that the strategy had been developed with the support of local partners and organisations including Commissioning, Adult and Children's Services, Health, Probation, the Police, social and private landlords and the voluntary sector; that it aimed to be a document that was owned by partners and the people of Darlington; and reference was made to the long term vision and the six co-produced key priority areas to achieve this vision. Members also noted the action plan contained within the strategy, setting out key actions to deliver the

six priority areas.

Details were also provided of the Council's statutory homeless duties and figures for increases in homelessness and costs.

Discussion ensued regarding the increase in homeless presentation, in particular for those leaving hospital/prison. Members were informed that the housing team worked closely with Darlington Memorial Hospital, attended discharge meetings and had a presence at West Park, to ensure that support was provided to those being discharged; and Members requested that the figures for hospital/prison be separated. Members queried those required to leave asylum seeker accommodation and noted that overall the number of asylum seekers housed in Darlington was low.

Discussion also ensued regarding 'sofa surfers'; and those presenting homeless due to their property no longer being suitable due to ill health, noting the actions taken for these presentations.

**RESOLVED** – (a) That this Scrutiny Committee agrees to the onward submission of the draft Preventing Homelessness and Rough Sleeping Strategy 2025-2030 to Cabinet.

(b) That the Preventing Homelessness and Rough Sleeping Strategy 2025-2030 be reviewed by this Scrutiny Committee on an annual basis.

### **HH35 PERFORMANCE INDICATORS QUARTER 2 - 2024/25**

The Assistant Director – Housing and Revenues, Assistant Director – Community Services and Director of Public Health submitted a report (previously circulated) providing Members with performance data against key performance indicators for Quarter 2 2024/25.

It was reported that 36 indicators were reported to this Scrutiny Committee, nine are updated on a six-monthly basis and twenty seven annually, with annual indicators updated throughout the year. Members were informed that there were six Housing and Culture indicators and twenty four Public Health indicators.

At Quarter 2, data was available for nine of the twelve Housing and Culture indicators. It was noted that seven of the nine indicators were showing performance better than from when last reported and two were showing performance not as good as when last reported.

In relation to Public Health indicators it was reported that twelve annual indicators had been updated since Quarter 4 2023/24 and that nine of the twelve indicators were showing performance better than from when last reported, two were showing performance not as good as when last reported and one was showing performance that remained the same.

Particular discussion ensued regarding PBH 046 - percentage of eligible population aged 40-74 offered an NHS Health Check who received an NHS Health Check in the five-year period, which had seen a decline. Members were informed that whilst there had been a decline, Darlington was statistically better than the North East and England. However there would be a focus on targeted action to increase uptake in areas of the Borough where health outcomes were poorest. Whilst this might reduce overall uptake it was important to take such action to reduce health inequalities.

Members raised concern and requested more details regarding PBH 024 - Hospital admissions caused by unintentional and deliberate injuries in children aged under 5 years and PBH 026 - Hospital admissions caused by unintentional and deliberate injuries in children aged under 15 years. Members were informed that an audit and mapping exercise was underway and the outcome and recommendations from the work could be shared with Members once available.

Members requested further details of the school toothbrushing scheme and noted that a Children and Young People Health and Wellbeing conference was scheduled for 11 February and included an agenda item on oral health; it was suggested that Members receive an update on the conference once this had been held.

The Director of Public Health requested that Members give consideration to the removal of the performance indicator 'PBH052 - (PHOF D10) Adjusted antibiotic prescribing in primary care by the NHS' from the set of indicators as this data was not available to the public health team and as such could not easily be updated.

**RESOLVED** – (a) That the submitted report be noted.

(b) That Members receive an update on the audit and mapping exercise being undertaken in relation to hospital admissions caused by unintentional and deliberate injuries in children.

(c) That Members be provided with figures for the school toothbrushing scheme.

(d) That the Performance Indicator PBH052 - (PHOF D10) Adjusted antibiotic prescribing in primary care by the NHS be removed from the set of indicators for this Scrutiny Committee and that any future updates be provided by the Integrated Care Board.

### **HH36 TEES, ESK AND WEAR VALLEY NHS FOUNDATION TRUST - QUALITY ACCOUNT UPDATE**

The Associate Director of Quality Governance, Compliance and Quality Data, Tees, Esk and Wear Valley NHS Foundation Trust submitted a report (previously circulated) outlining progress on the Trust's Quality Account Quality Priorities for 2024/25, including key updates on delivery of the established measures. A presentation (also previously circulated) accompanied the report.

It was reported that in April 2024, the Trust's Quality Assurance Committee endorsed a new approach to development of the Quality Priorities whereby the priorities were co-created and led by people with lived experience; and that this approach enabled the voice of service users, relatives and carers to be at the heart of quality improvement across the organisation.

The three key priorities for 2024/25, Promoting education using lived experience, Relapse prevention and Improving personalisation in urgent care were outlined; Members were informed of the measures developed to deliver the priorities; and welcomed key updates for the priorities.

The Director of Public Health reminded Members that self-harm and suicide was a health and wellbeing key priority, highlighting that Darlington had the highest suicide rate in England. National data available indicated that 27 per cent of people who lost their lives to suicide were known to mental health services, and it was important to understand the local picture.

Discussion ensued regarding relapse prevention and support for those on the waiting list for services. Members were assured that the Trust had seen an improvement in wait times; that all patients received an initial assessment, ongoing assessments of their risks and a keeping in touch service was in place; and that work was continuing to reduce waiting lists. Following a request, it was agreed that training provided by the Lived Experience Directors and Involvement Team as a percentage of all staff could be provided.

Following a question in relation to quality priority 2 and service users with limited support, Members were informed that the Trust had a multidisciplinary approach, working closely with a range of other agencies; that families of patients have had direct input into policies developed by the Trust; and that for those patients without family, with a patients consent, the Trust would engage with friends. Members noted in addition, an advocacy service was available to patients.

**RESOLVED** – That the Trust’s progress with the Quality Priorities measures for 2024/25 be noted.

### **HH37 WORK PROGRAMME**

The Assistant Director Law and Governance submitted a report (previously circulated) requesting that consideration be given to this Scrutiny Committee’s work programme and to consider any additional areas which Members would like to suggest be included in the previously approved work programme.

Discussion ensued on the current work programme and it was suggested that Members receive an update on hospital admissions for non-accidental injury as part of the item ‘Chronic illness and preventative measures’, following the completion of the audit and mapping exercise that was being undertaken.

**RESOLVED** – That the work programme be updated to reflect discussions.

### **HH38 HEALTH AND WELLBEING BOARD**

It was reported that the Board last met on 5 December 2024 and that the next meeting of the Board was scheduled for 13 March 2025. The Cabinet Member for Health and Housing informed Members that the Health and Wellbeing Strategy had been approved and the focus of the next meeting would be the implementation of the strategy.

**RESOLVED** – That Members of this Scrutiny Committee continue to receive the Minutes of the Health and Wellbeing Board.

### **HH39 REGIONAL HEALTH SCRUTINY**

The Tees Valley Joint Health Scrutiny Committee last met on 9 January 2025 and the next meeting of the Tees Valley Joint Health Scrutiny Committee was scheduled for 13 March 2025. The Vice Chair informed Members that the last meeting included updates on respite care for adults with a learning disability and North East Ambulance Service performance update.

**RESOLVED** – That Members look forward to receiving an update of the work of the Tees Valley Joint Health Scrutiny Committee at a future meeting of Scrutiny Committee.

#### **HH40 QUESTIONS**

A Member raised concerns regarding the uptake for the flu and covid vaccinations and requested figures for Darlington, including Local Authority staff. The Director of Public Health advised that whilst the uptake for the flu vaccination had been satisfactory, the uptake for the covid vaccination was low on a local, regional and national level; and Members noted that specific work was being undertaken to improve vaccination rates for Care Homes staff.

**RESOLVED** – That Members be provided with figures for flu and covid vaccination uptake in Darlington, including Local Authority staff.