SOCIAL CARE, HEALTH AND HOUSING SCRUTINY COMMITTEE

(Committee Rooms 1/2 - Port Talbot Civic Centre)

Members Present: 1 November 2016

Vice Chairperson: Councillor Mrs.A.Wingrave

Councillors: A.Carter, H.N.James, R.James, C.Morgan,

L.M.Purcell, A.Taylor and D.Whitelock

Officers In N. Ja

Attendance

N. Jarman, A.Jarrett and N.Evans

Cabinet Invitees: Councillors P.D.Richards and J.Rogers

1. CONSULTATION ON SOCIAL CARE HEALTH AND HOUSING BUDGET AND DRAFT SAVINGS 2017/18

Members considered the Joint Report on the Consultation on Social Care Health Housing Budget and Draft Savings 2017/2018.

The Director opened by advising Members that the saving of £250k included within the Appendix One in relation to Complex Needs will not be taken forward at this moment in time.

Members asked whether there the reliance on Direct Payments made the Council have all "their eggs in one basket" and was there a Plan B. Officers stated that there were no direct savings in relation to Direct Payments. The Director stated that in the English speaking world such as New Zealand, Australia Canada and the United States of America Direct Payments were the norm it was only the Republic of Ireland and Wales that were the exceptions to the rule. Members were further advised that the Social Services and Wellbeing Act seeks Councils to promote Direct Payments.

Officers advised that across the Council a new ER/VR scheme had opened for negotiation but the Directorate will not accept any applications unless it was from residential housing areas. This is due to a previous glut of applications which has reduced the staffing structure.

Members asked what the running costs were currently for the consultants employed by the Directorate. The Director stated he did not have the figures with him but would advise Members outside of the meeting.

In relation to Direct Payments it was asked whether a company named ILBP Ltd was involved. The Director stated that he would find out and advise Members.

Members noted that there was a Principal Officer position advertised recently with a £10k Market Supplement and it was asked had any displeasure been voiced by those who had left. It was confirmed that none had been received and that in some cases the individuals had left as they could meet the new ways of working that were required to generate sufficient savings.

Members asked if there was a reducing demand for residential care why were the hours of domiciliary care also reducing. It was confirmed that there was no magic answer but looking at early intervention and prevention as in Children's Services. This is working with Local Area Co-ordination.

Members queried sickness absence within the unit and it was confirmed that the Director has set out how they are looking at this. The Director confirmed that the Directorate was in a better position now and are continuing to assist staff back to work. This has been aided by a more aggressive approach with the assistance of HR Officers now placed within the Directorate.

Members questioned the types of sickness absence and whether any of it was linked to stress. It was confirmed that there are cases of stress but it is not attributed to the workplace but in fact events at home or in individuals personal lives. Officers continued that were there is Stress Anxiety mentioned and there is medical evidence/information to highlight it then it is taken through the proper channels via occupational health.

Members asked for final clarity on why the saving in relation to Complex Needs was not being taken forward and the Director confirmed that it is the wrong time to contemplate this currently and that more work would be required before any additional options can be presented.

Following Scrutiny the report was noted.

CHAIRPERSON