

LONDON BOROUGH OF LEWISHAM

Minutes of the meeting of the SOCIAL SERVICES COMMITTEE, which was open to the press and public, held at LEWISHAM TOWN HALL, CATFORD, SE6 on TUESDAY 23RD JULY 1985 at 7.30 p.m.

Present

Councillor Jordan (Chair); Councillors Atkinson, Atlay, Bartlett, Day, Elvin, Eytel, Moran, Rowing, Stockbridge and Ubsdell.

Co-opted Members Mr Holder, Mrs Gorick and Mr McKenzie

Observer Mr Levett

Apologies were received from Councillors Barrett, Goudge and Taylor.

Minute No.

Action

(A) ITEMS DEFERRED FROM MEETING HELD ON 2ND JULY 1985

- 1 CAUTIONING BY POLICE (page 64 and Appendix attached at page 66 and revised report circulated for meeting on 23rd July 1985 attached at page 130) (Item 9 of the Agenda 2.7.85)

RESOLVED that the report be noted.

- 2 POLICY STATEMENT (page 82) (Item 10 of the Agenda for 2.7.85)

RESOLVED that

(i) the policy statement be adopted as an interim policy statement, and

(ii) in future reports, officers be asked to include a paragraph "implications for policy statement!" DSS

all
to note

- 3 DEVELOPMENT OF CHILD CARE POLICY (page 84) (Item 11 of the Agenda for 2.7.85)

RESOLVED that

(i) the setting up of a Development Group for Child Care be noted;

(ii) the Chair (Councillor Jordan), Councillors Elvin and Long and Mr Holder, be nominated to join the Development Group for Child Care in order to define a philosophy statement;

DSS

(iii) a further report be submitted to this Committee in the January cycle of meetings.

DSS/Cttt
Clerk

Minute No.

Action

- 4 BOARDING OUT ALLOWANCE 1985-86 (page 85 and revised report attached at page 132)
(Item 12 of the Agenda 2.7.85)

Councillor Atlay wished to record her objection to the report being circulated at the meeting which she considered did not allow members time to consider the report.

RESOLVED that

- (i) the report be deferred for further discussion; and DSS/Cler
- (ii) a note, written by the Chair, be circulated to all members of the Committee by the beginning of August 1985, outlining any progress that has been made. DSS/Cllr Jordan

- 5 THE EMERGENCY DUTY SOCIAL WORK TEAM (page 86)
(Item 13 of the Agenda 2.7.85)

RESOLVED that

- (i) it be agreed in principle to:- DSS
 - (a) review the job description and grading of the emergency duty social workers in view of the range and scope of the work they are now undertaking;
 - (b) review the manner in which the Emergency Duty Team are recompensed for the unsocial hours they work; and
 - (c) recruit one additional team member.
- (ii) officers be asked to identify valid compensatory savings to facilitate a transfer of estimates for recommendations 2(a), 2(b) and 2(c) and that the Chair and Vice-Chair be authorised to take action accordingly; and DSS/BT
- (iii) a report be referred to the Policy and Resources (Personnel) Sub-Committee, when appropriate. DSS

- 6 CHILDREN'S RESIDENTIAL REVIEW - PUMP PRIMING PROPOSALS (page 89)
(Item 14 of the Agenda 2.7.85)

RESOLVED that

- (i) the change in use of the 'pump-priming' funds generated from the Children's Residential Review as detailed in the report be approved; DSS
- (ii) the Chief Personnel Officer be requested, under his delegated authority, (or alternatively the Personnel Sub-Committee) to agree to the revision of the fixed establishment of the Social Services Department in respect of the six senior social worker posts approved on 21st February 1985 to:- DSS

Minute No.

Action

3 Senior Social Worker posts
3 Part-time (24 hours each) Clerical posts
1 Court Officer
1 Clerical post (for Court Section)

(iii) consultations be held between unions and officers and any other interested bodies. DSS

7 COURT WORK : CHILD CARE (page 91)
(Item 15 of the Agenda 2.7.85)

RESOLVED that

(i) the contents of the report be noted and its contents endorsed; DSS

(ii) the change in use of 'pump priming' funds, generated from the Children's Residential Review to fund an additional Court Officer and clerk be approved; DSS

(iii) the Policy and Resources (Personnel) Sub-Committee be recommended that funding be found for the employment of an additional solicitor to do Social Services work, from the savings already made and will be made in the future from the residential review; and DSS/
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(iv) full consultation be held between officers and unions. DSS

8 JOINT FINANCE 1986/87 (page 96 and revised report circulated for meeting on 23rd July 1985 attached at page 134)
(Item 9 of the Agenda 2.7.85)

RESOLVED that

(i) the objectives be approved and prioritised as set out in the report; DSS

(ii) objective 8 "improving the quality of health care in homes for the elderly" be given high priority for slippage use; and DSS/BT

(iii) 'health' as referred to in objective 8 be considered in the broadest sense to include maintenance of buildings, i.e. hygiene in kitchens.

9 REFORM OF SOCIAL SECURITY (GREEN PAPER) (page 103)
(Item 18 of the Agenda 2.7.85)

Due to the inclusion of this report on the Council Agenda of 24th July 1985, it was

RESOLVED that

(i) the report be noted; and

(ii) officers be requested to review the implications of this Green Paper for the Social Services Department, and the situation be monitored during the consultation WRO

Minute No.

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10 DELEGATION (page 108 and Appendix attached at page III)
(Item 19 of the Agenda 2.7.85)

RESOLVED that

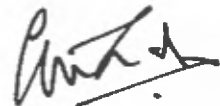
- (i) those matters already delegated to the Chair and Vice-Chair of the Social Services Committee and the various officers, as set out in the Appendix to the report, be noted; and
- (ii) the Director of Social Services be authorised to:- DS
 - (a) approve the registration of child-minders;
 - (b) approve the building plans for projects for which Committee approval has already been given;
 - (c) let day centre premises to local religious or similar organisations for regular meetings and to impose charges as determined by the Social Services (Finance) Sub-Committee;
 - (d) request the Borough Treasurer to approve transfers of estimates for newly approved Urban Programme projects; and
 - (e) approve late changes incurring no additional cost to approved lists of Capital Programme and Renewals Fund items for submission to "Other Services" Capital Programme Monitoring Panel.

(B) NEW ITEM

11 JOINT PLANNING OFFICER - MENTAL HEALTH (page 139)

RESOLVED that the use of slippage on 1985/86 joint finance projects to fund the post of Joint Planning Officer (Mental Health) for a period of three years be approved, the post to be on the District Health Authority's establishment. D: B'

The meeting ended at 9.00 p.m.



Chair
1st October 1985

Item
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LEEWAYS CHILDREN'S HOME
(Contributor: Sol. to Council)

1. Purpose of the Report

To update members on the current position concerning the report submitted to this Committee on 22nd May in respect of Mr Cooper, the Officer-in-Charge of Leeways being charged with serious criminal offences.

2. Conviction of Mr Cooper

2.1 At the Old Bailey on 3rd June, Mr Cooper the former Officer-in-Charge at Leeways, pleaded guilty to eight offences. Five charges related to the taking and distribution of indecent photographs of children in 1979 and 1982, one charge related to indecent assault in 1978/79, two charges were for incitement for gross indecency between two children in 1978. None of the children involved in these charges were in the care of Lewisham apart from the two children referred to in the gross indecency charges.

2.2 For these offences Mr Cooper was sentenced to a total of four years' imprisonment.

2.3 In sentencing Mr Cooper, the Recorder of London gave him credit as being of previous good character for having worked hard for the community, co-operating with the Police and pleading guilty to avoid further distress. The Judge commented that each of the offences fell short of the "beastliness" often associated with such charges but that Mr Cooper had abused his position and breached the trust usually expected from a person in his position.

2.4 The Judge said that it did Lewisham credit that it was represented in Court. He welcomed the setting up of an inquiry and urged anyone who might have information of assistance to the Inquiry to contact the Council.

3. The Inquiry

3.1 Various nominees to sit on the Inquiry Panel have been considered and the Chair and nominated member have approved the following members in accordance with recommendation 2.3 of the meeting on 22nd May.

Miss Elizabeth Lawson (Chair) A Barrister for 16 years having specialised for the last 10 years in Child Care and Family Law.

Richard Clough MBE General Secretary of the Social Care Association. Former member of the Central Council for Education and Training in Social Work, former President of the Residential Care Association and ex-Officer-in-Charge of a boys' home.

Kenneth Ambrose Principal Lecturer in Management Studies, Polytechnic of Central London. Previously in store management and Head Office merchandising with Marks & Spencer for 11 years.

- 2 -

- 3.2 The procedures to be followed by the Inquiry have been established and agreed in principle by Miss Lawson.
- 3.3 The Inquiry Panel are likely to start preliminary discussions as to the areas of the Council's operation they wish to investigate in mid-July but owing to pre-existing commitments the Inquiry's main work will start on 12th August with a view to publishing a report by 30th September.
- 3.4 The Leader of the Minority Party on the Social Services Committee has been consulted at all stages.

Item
No.9

CAUTIONING BY POLICE
(Contributor DSS)

The Director of Social Services has produced the following further information which relates to item 9 on the Agenda of 2nd July 1985.

5. Adults

The guidelines provide for a formal caution for adults instead of a prosecution, although cautioning will not be automatic.

Four specific categories of offender are identified when a caution may be considered, although it is stressed that there is no absolute protection against prosecution.

5.1 The Elderly or infirm - the older or more infirm offender

5.2 Young Adults - a criminal conviction early in adult life is thought may have a significant effect on the prospects of the person concerned, particularly if there is no previous criminal record.

5.3 Persons 'at risk' i.e.

(a) offenders suffering from a form of mental illness or impairment, prosecution could lead to an adverse effect on his/her condition.

(b) shock of prosecution could prove fatal or there is severe physical illness.

(c) person concerned showing severe emotional distress.

5.4 Others - if above do not apply but factors do not preclude a caution. A decision will be made in terms of whether prosecution is in the public interest if it is considered to be a serious offence and related to the offender's previous record and character.

6. Guidelines

The Attorney General's guidelines suggest that cautioning may be appropriate if the offence is not serious, or the penalty is likely to be a conditional or absolute discharge. In some sexual offences depending on ages of those involved when girl or youth has been a willing party, a caution may be advised or for minor victimless offences or where only a small amount of property is involved. A previous offence or a record does not preclude a caution, particularly if there has been a long gap.

7. Criteria for Caution

Before a decision to caution all the following criteria must be met:-

7.1 Sufficient evidence for a prosecution - (it is not to be used if the evidence is insufficient).

7.2 The offender must admit the offence

7.3 The offender must agree to being cautioned.

Any caution will affect any decision regarding future prosecutions or will be cited in court following any subsequent conviction.

8. Effect on the Social Services Department

Unlike the cautioning of juveniles, there will be no automatic notification of adults cautioned. However, two specific instances could involve this Department.

8.1 Consultation prior to decision, but this should be confined to particular categories e.g. the mentally ill, people with learning difficulties.

8.2 Subsequent to caution e.g. elderly or person under stress. Apart from the Social Services Department, a referral could be made to the Probation Office.

Item
No.12

BOARDING-OUT ALLOWANCES 1985/86
(Contributor: DSS)

1. Purpose of the Report

To consider the requests of the Policy and Resources (Finance) Sub-Committee (Chair) outlined in paragraphs 3.3 and 3.4 below.

2. Recommendations

2.1 To request the Policy and Resources (Finance) Sub-Committee to approve a supplementary estimate of £100,800.

2.2 To authorise the Chair/Vice-Chair to respond to the request to seek compensatory savings to affect these costs.

3. Background

3.1 At their meeting on 2 July 1985 the Social Services Committee received a report on boarding out allowances for children and approved the payment of the allowances recommended by the A.L.A. (item 12) subject to the Interim Expenditure Monitoring Panel.

3.2 In the report it was pointed out that the cost of these recommendations would amount to £130,080 in 1985/86 if backdated to 1 April 1985. Normally any additional costs arising from awards or revision of rates which are recommended by national or regional bodies of which this Authority is a constituent member are met from the central contingency for pay/price increases if there is no specific provision in the estimates. In previous years, the recommendations on fostering rates have been received from the LBA/ALA in good time in the budget cycle to make specific provision in the estimates and the question of meeting additional costs from the pay/price contingency did not arise for this particular service. The A.L.A. recommendations were not received until June this year. The Borough Treasurer has stated that the recommended scales represent an average increase of about 11%, whereas the 1985/86 price contingency provides for inflationary increases of 2½% (equating to some £30,000 in this case). Therefore, following the Committee's approval of the A.L.A. rates, the matter was referred to the nominated members.

3.3 The Chair of the Policy and Resources (Finance) Sub-Committee has now advised that it will be necessary for this Committee to request the Policy and Resources (Finance) Sub-Committee to approve a supplementary estimate of £100,800.

3.4 The Chair of the Policy and Resources (Finance) Sub-Committee has also asked the Social Services Committee to seek some compensatory savings to offset this cost. In the time available, it has not been possible for the officers to produce proposals for this purpose but the Committee may wish the Chair and Vice-Chair to discuss this question with the officers and respond accordingly to the Policy and Resources (Finance) Sub-Committee.

- 3.5 It must be noted that no additional payments in accordance with the recommended revised scale are being made to foster parents pending the decision by the Policy and Resources (Finance) Sub-Committee. Bearing in mind the current shortage of foster homes (Item 17 on this Agenda), it is to be hoped that the appropriate decisions can be made as soon as possible without waiting upon proposals for compensatory savings.

Item
No.16

JOINT FINANCE 86/87

1. Purpose of the Report

To report:

1.1. The up-to-date information on the amount of joint finance available for new schemes in 1986/87.

1.2 The Council's objectives for the use of joint finance in 1986/87.

2. Recommendation

Committee are asked to agree the proposed Council objectives for Joint Finance in 1986/87 as properly reflecting the Social Services Committee's objectives.

3. Amount of Joint Finance available 1986/87

3.1 Further to the information given to the Committee on 2 July 1985, the District Health Authority have informed the Council that the amount of joint finance available in 1986/87 will be as follows:-

a) £203,000 uncommitted

b) £100,000 (approx) slippage on previously agreed schemes. This is committed for future years as schemes come on stream. Therefore this sum may be used only for capital, non-recurring items or short term schemes of not more than one years duration.

3.2 It is expected that most of the £100,000 slippage may be used for Lewisham schemes. The £203,000 uncommitted sum will be divided between Lewisham and Southwark schemes on the agreed formula.

3.3 The definition of a Lewisham scheme is any scheme proposed by the Council, or by voluntary organisations, the ILEA or the District Health Authority in so far as their proposals are for schemes within the Borough or for residents of the Borough.

4. Service Objectives for the use of Joint Finance

4.1 The DHSS criteria for the use of joint finance were reported to Committee on 2 July 1985. Within these parameters it is proposed to bid for joint finance to fund projects which would further the Council's objectives as outlined below. These objectives take on board the Council's policies towards elderly, disabled and disadvantaged people, the need to plan jointly by the Health Service and Departments of the Council, particularly Housing and Social Services, and the Council's financial position.

4.2 The Council's objectives can be classified in three categories:-

- a) Facilitating the transfer of disabled and disadvantaged people from long term hospital/institutional care to ordinary housing. This involves developing a range of schemes with varying levels of support to meet individual needs and requires collaborative work with Health, Housing and the voluntary organisations.
- b) Improving the quality of housing and care in the community, in part to prevent disabled, disadvantaged or vulnerable people becoming a call on Health Service resources.
- c) Improving the quality of care for people who will inevitably have to remain in the Council's residential homes.

5. Facilitating the transfer of disabled and disadvantaged people from long term hospital/institutional care to ordinary housing.

5.1 Objective 1 Promoting independence, choice and self-determination and normality for disabled and disadvantaged people.

The major implications of this objective are that disabled and frail people should be enabled to stay in their own homes if they wish to do so; that people at present in long term hospital or residential care, including those in institutions such as Carrington House, should be able to have homes of their own and be supported in them and that disabled, disadvantaged or vulnerable people who are either homeless or inadequately housed can be provided with adequate housing and support.

5.2 Alternatives to residential care

It is proposed therefore that the main use of joint finance in 1986/87 should be to develop a range of alternatives to hospital/residential care for the elderly, mentally ill and physically disabled people, those with learning difficulties and other vulnerable and disadvantaged groups. Alternatives to residential care encompass a range of options including boarding out with landladies, boarding in (ie providing a carer to live in), group homes - staffed and unstaffed, independent living schemes with individually planned intensive support as required, shared care schemes to give relief to carers and families etc. A number of examples of the above schemes already exist, some through collaboration with voluntary organisations and Housing Associations, and some where a mixture of Council resources (e.g. through the HIP and DHA resources) are being used.

5.3 The proposed extension of this programme would progress in close liaison with the Committee's Adult Residential Review which is about to commence.

5.4 Financial Implications

A programme of alternatives to residential care could in the long term have cost benefits to the Council in a) savings on agency placements b) reduction of demand for places in the Council's own residential homes. The development of

proposals could also release other sources of funding eg direct funding from the Health Service (in addition to joint finance) for schemes which provide for people currently in long term hospital care. Some projects would be self-supporting eg tenants of group homes, independent living schemes etc would be entitled to Social Security and Housing benefits.

6. Improving the quality of community care

6.1 Objective 2

Equal opportunities for black people

6.1.1 In furthering equal opportunities and equal access to services for black people the Council and District Health Authority should have regard to special health needs. For example, there is no counselling service for people with sickle cell anaemia, except for that provided by the Organisation for Sickle Cell Anaemia Research. Discussions have already taken place with OSCAR, and the Health Service on ways in which this need could be met if finance were available.

6.1.2 Insufficient attention has been paid to the housing and care needs of black people who are deaf without speech or have severe learning difficulties. The Department would wish to develop supported living schemes geared to their needs and life style and mount a recruitment campaign for black landladies to join the boarding out scheme.

6.2 Objective 3.

Equal opportunities for women

6.2.1 The needs of women as carers require particular attention. Schemes to support carers and provide relief care on a flexible basis are needed. An example of the type of scheme which might be considered on a Borough wide basis is the Social Services pilot project in Southern District on shared care for elderly people.

6.2.2 Members of the Joint Consultative Committee have expressed their desire to see improvements in the termination of pregnancy service including the addition of a counselling service. The Council would wish to support the Health Service in making these improvements.

6.2.3 The Womens Committee have drawn attention to the need to improve cytology services. The Council may wish to support Health Service bids in this area of work.

6.3 Objective 4

Equal opportunities for disabled people

The Council needs to ensure that its services are equally accessible to disabled people. Some Council establishments exclude disabled people from parts of the building because of

physical access problems. One example of this is the lack of a lift at the Mulberry Centre for people with learning difficulties. This effectively prevents disabled people from participating in any activities beyond the ground floor.

6.4 Objective 5

Preventive service for Children at Risk

6.4.1 There is close inter-agency collaboration on all aspects of child abuse. Recently attention has focused on the need to provide expert guidance and support for field workers in all agencies who may be required to deal with child sexual abuse. The Council would wish to act jointly with the Health Service in setting up an appropriate service.

6.4.2 The Council would wish to see improvements in the services for mentally, physically and multiple-handicapped children. This would include improving the Social Services Department's Day Care services and supporting appropriate bids from the Health Service.

6.5 Objective 6

Prevention of Drug and Alcohol abuse

6.5.1 The Joint Consultative Committee have advised that greater attention should be given to the problems of Drug abuse. The Council has only one worker based in the Social Services Department specialising in Drug and Alcohol abuse. There is a need to review this situation and make plans for improving the service. The Council recognises the valuable work done by voluntary agencies in this field and would like to develop better ways of working with them.

6.5.2 It is noted that the Leader of the Council has drawn attention to the increase in drug abuse in Lewisham, particularly among young people and the need to provide appropriate services.

6.6 Objective 7

Improving Joint Planning and Joint Workings with the Health Service

Improvements have been made in collaborative working with the Health Service and in joint planning arrangements. However, there are still serious deficiencies in joint planning between the Council and the DHA at all levels and in the management of social service support to the Health Service which the Department feels it is essential to rectify. The proposal for a Joint Planning Officer (Mental Health) which appears elsewhere on the agenda is an example of this.

7. Improving the quality of Residential Care

7.1 Objective 8

Improving the quality of health care in homes for the elderly

The Council would wish to support the District Health Authority in making proposals to provide a better health care service to residents of homes for the elderly.

7.2 The Department would not wish to pre-empt the recommendations likely to come from the Social Services Committee's Adult Residential Review in which members will be participating. It is likely that once the review has been completed there will be proposals for consideration in the 1987/88 programme.

8. List of Outline Bids

The objectives outlined in paragraph 4 of this report have been jointly discussed by the Chairs of the Social Services, Housing Management and Housing Development Committees. All three Chairs are in broad agreement with them. If the Social Services Committee approves the recommendation in paragraph 2 of this report, officers will prioritise all the bids for joint finance in accordance with objectives in this report. The result of this exercise will be reported to Members for decision.

This process must be completed by 1 October 1985 to meet the DHA timetable for the processing of joint finance bids for 1986/87.

Item
No.17 JOINT PLANNING OFFICER - MENTAL HEALTH
(Contributor: DSS)

1. Purpose of the Report

To seek the Committee's agreement to the use of slippage on 1985/86 joint finance projects to fund the post of Joint Planning Officer (Mental Health) for a period of three years. The post to be on the District Health Authority's establishment.

2. Recommendations

To recommend that the Committee agree this proposal.

3. Reason for bringing this proposal forward at this time.

The Joint Chief Officers Group (Health and Local Authorities) agreed on 11 July that the Council and the District Health Authority should be asked to consider this proposal in advance of the 1986/87 programme, so that the post could be established and work commence in the Autumn of 1985. The urgency is due to the fact that 'Care in the Community' finance is being made available to the District Health Authority and it is necessary to progress joint plans and proposals without delay in order to make the best use of the money. Neither Authority is in a position to undertake this work from existing staff resources.

4. Why the Committee's agreement is needed

4.1 Under the terms of the DHSS circulars on Joint Finance, it is necessary for there to be joint agreement by the District Health Authority and the Local Authority to any proposal for joint finance, irrespective of which Authority accepts ultimate responsibility for the project/post.

4.2 As will be seen from the details below, it is proposed that the post holder will work across both Authorities, undertaking planning work on behalf of the Council as well as the District Health Authority. The post would be in the nature of a joint appointment although entirely funded by the District Health Authority.

5. Care in the Community Funding

The Regional Health Authority's mental illness funding policy will provide the District Health Authority with an additional ?5 million (approximately) with which to fund services for the mentally ill. In the short-term a major part of this will have to be used to pay for in-patient services which Lewisham residents receive at Bexley and Cane Hill Hospitals. As locally based services develop, the numbers of people being admitted to Bexley and Cane Hill will reduce and a larger proportion of the funding will become available for local services. Under the terms of the DHSS circular funds from this source may be transferred to the Local Authority to enable it to play its part in developing appropriate community care for the mentally ill.

6. The Post of Joint Planning Officer (Mental Health)

6.1 It is proposed that in order to facilitate joint planning and to enable both Authorities to make effective use of the available funding, a post of joint Planning Officer (Mental Health) should be established by the District Health Authority. The primary task of the post holder would be to work with all agencies (Health, Social Services, Housing, Voluntary Organisations etc) to produce a strategy for local services for mentally ill people. The strategy would encompass:-

- a) The range of services needed, including facilities for treatment, care, rehabilitation community support and special housing.
- b) How responsibility between Health and Local Authority should be shared.

6.2 The post holder would be the focal point for identifying issues and advising the respective Authorities on ways in which these could be resolved.

6.3 Once a joint strategy has been agreed the postholder would assist Officers in each Authority in formulating detailed proposals.

7. Accountability

The post holder would be on the District Health Authority's establishment, and responsible to the Priority Care Manager but his/her accountability would be to both Authorities. This would be achieved through a steering group comprising Senior Officers from the Social Services and Housing Departments and the Health Authority.

8. Advantages for Black People

The existing services are perceived by many black people as being largely ineffective and inappropriate. The Joint Planning Officer (Mental Health) would be able to give attention to this area, negotiate with appropriate agencies and make proposals.

9. Effect on Women

9.1 It is known that more women than men suffer from mental illness. In addition there are a significant number of women suffering from long-term depressive symptoms who are not dealt with by the formal psychiatric services, nevertheless their needs should be considered when planning a comprehensive mental health service.

9.2 The effects of mental illness on the family and particularly the burden of caring which is likely to fall on men and women equally, would be important factors to consider.

10. Financial Implications

The post would be joint financed at 100% for three years. There would be no financial implications for the Council.