



STIRLING TENANTS ASSEMBLY
SPEAKER MEETING HELD ON
TUESDAY 17TH SEPTEMBER 2013
IN HILLVIEW CENTRE STIRLING
AT 10.30AM

Present: Michael Griffiths, Mary Rainey, Moira Robertson, Hugh McClung, Richard Waddell, Thomas Brown, Alec Lamb, Dolly Gemmell, Peter Pelgrave, Anne Johnston, Meg Amasi, Delia Waddell, Cathy Brown, Maureen Whitelaw [SC] Gregor Whiteman [SC] Gavin Kennedy [SC] Jennifer Kerr, Stirling Voluntary Enterprise [SVE] Linda Melville, [SC Social Services], Lesley Middlemiss, NHS Planner, David Niven, Change Fund Coordinator Reshaping Care for Elderly,

Apologies: Philomena McClung, Cathy Traynor, Emma Meldrum STP

Hugh introduced the meeting

2. Speaker Gavin Kennedy, SC – Right to Buy and Pressured Area Status.
Renewing Stirling's Pressured Area Designation:
Briefing

On 6 June 2013, Stirling Council's Environment & Housing Committee agreed in principle to renewing the existing pressured area designation for a further ten years subject to the necessary evidence being available. The Committee instructed officers to evaluate and assess the requirement on an application to renew the existing pressured area designation with a view to reporting back prior to the expiry of the existing designation in March 2014.

Then, on 3 July 2013, the Deputy First Minister announced that the right to buy is to end for all tenants of social housing in Scotland. This proposal is part of a new Housing Bill to be introduced to the Scottish Parliament later this year and is subject to approval by Parliament. If Parliament accepts the proposal, the right to buy in Scotland will end three years from the date the Housing Bill receives royal assent, which is expected in Autumn 2014. If there were no renewal of the existing pressured area designation, Stirling Council would be at risk of the further loss of stock under the modernised right to buy during the period March 2014 to Autumn 2017.

Changes introduced in the 2010 Housing (Scotland) Act have resulted in Stirling Council being given the power to renew the existing pressured area designation for up to ten years. The power may be exercised if the authority considers that each of two conditions is met. The first is that, in the relevant part of the authority's area, the need for housing provided by Stirling Council and by Registered Social Landlords substantially exceeds the amount of housing which is available. The second condition is that the exercise of the right to buy by tenants in the area is likely to worsen the situation.

In accordance with the Statutory Guidance for Local Authorities on Pressured Areas produced by the Scottish Government, a fresh analysis of the evidence to support the proposed renewal of the

existing pressured area designation commencing in early 2014 has now been completed. The Statutory Guidance highlights that the ratio of the number of applicants on waiting lists to the number of lets (the waiting list to let ratio) is a fundamental consideration in the assessment of whether the need for social housing substantially exceeds the amount of housing which is available. As a general rule, it is expected that ratios in the proposed designation areas will exceed the national average, which has ranged from 5.7:1 to 6.2:1 over the past three years.

The analysis indicates that in 31 of the 43 allocation areas currently designated as pressured, the waiting list to let ratios exceed the national average for each of the last three years. In a further six allocation areas the ratios exceed the national average for two of the last three years.

In the remaining six allocation areas (all of which are located in either the Rural Stirling or National Park sub-markets) the view of local housing officers is that in some of these areas the number of applicants on the waiting list is artificially low and reflects the fact that waiting list demand is stronger in neighbouring settlements where new homes are being developed, while in other areas the small numbers of social rented houses are considered to be a social asset, crucial to the on-going sustainability of the community. Stirling's Housing Need and Demand Assessment found that the Rural Stirling and National Park sub-markets were characterised by higher than average lower quartile house prices and a greater proportion of households that cannot afford to purchase housing at market entry level.

Area 1 - Rural areas to the west and north of the M9/A9 including Cambusbarron

Allocation Area	2012/13	2011/12	2010/11
Cambusbarron	19.3:1	8.3:1	29:1
Kinbuck	100:1	100:1	100:1
Strathblane	8.8:1	35:1	11.7:1
Killearn	10.5:1	10.5:1	100:1
Croftamie	100:1	100:1	100:1
Balfron	16.2:1	10.8:1	16.2:1
Buchlyvie	5.5:1	4.4:1	4.4:1
Kippen	10.8:1	13:1	32.5:1
Gargunnoch	10.5:1	21:1	4.2:1
Thornhill	11:1	100:1	3.7:1
Port of Menteith	1:1	100:1	100:1
Doune	100:1	45:1	180:1
Deanston	1.7:1	1.4:1	3:1
Drymen	14.3:1	28.5:1	19:1
Milton of Buchanan	100:1	11:1	11:1
Fintry	100:1	17:1	17:1
Callander	8:1	23.4:1	13.4:1
Gartmore	6:1	100:1	6:1

Killin	8.8:1	26.5:1	8.8:1
Balquhidder	100:1	100:1	100:1
Crianlarich	100:1	0.3:1	0.7:1
Tyndrum	2.8:1	2.4:1	8.5:1
Arnprior	100:1	100:1	100:1
Blairdrummond	100:1	100:1	100:1
Aberfoyle	7.4:1	10.4:1	10.4:1
Ardeonaig	100:1	100:1	100:1
Strathyre	6:1	100:1	100:1
Lochearnhead	6:1	3:1	4.5:1
Stronachlachar	100:1	4:1	4:1
Kinlochard	100:1	100:1	100:1

Area 2 - Dunblane, Bridge of Allan and Causewayhead/Logie

Allocation Area	2012/13	2011/12	2010/11
Dunblane Town	18.6:1	10.3:1	18.6:1
Dunblane Rylands	17:1	8.5:1	8.5:1
Dunblane Whitecross	100:1	100:1	100:1
Bridge of Allan	26:1	20.8:1	17.3:1
Causewayhead/Logie	37:1	100:1	100:1

Area 3 - Stirling Town, Riverside, Broomridge, Braehead and the Newhouse/Lower St Ninians area

Allocation Area	2012/13	2011/12	2010/11
Stirling Town	5.1:1	5.8:1	7.3:1
Riverside	100:1	83:1	100:1
Broomridge	16.3:1	49:1	100:1
Braehead	16.3:1	21:1	14.7:1
St Ninians Newhouse	100:1	100:1	100:1
St Ninians Lower	16.5:1	7.3:1	66:1

Area 4 - Bannockburn, Whins and Hillpark/Firs

Allocation Area	2012/13	2011/12	2010/11

Bannockburn	15.6:1	10:1	13.2:1
Whins of Milton	20.5:1	13.7:1	5.9:1
Hillpark/Firs	8:1	6:1	8:1

The analysis clearly demonstrates that if the existing pressured area designation is not renewed, the exercise of the right to buy by tenants in these areas is likely to worsen the situation. In all four areas currently designated as pressured, over 60% of the Council stock has been sold and in more than a third of the 43 allocation areas, over 70% of the stock has been sold.

The existing pressured area designation has played a major part in reducing the number of right to buy sales. In the areas currently designated as pressured, there have been just 35 sales under the preserved right to buy over the past three years. In contrast, there were 193 right to buy sales in these areas during the three-year period prior to designation.

The analysis provides a basis for further consultation with Registered Social Landlords and bodies representing the interests of tenants and other residents in the area. A three-month consultation on the proposal begins today and all feedback received during the consultation process will be included in the case to be presented to Stirling Council in early 2014.

Following a discussion, the majority of STA committee members wanted time to digest the information, so a committee decision will be made at the next meeting and sent to Gavin. **Action members.**

3 Jennifer Kerr, SVE, Linda Melville, SC, Lesley Middlemiss, NHS, David Niven, SC Reshaping Day Care for the Elderly

3.1 There was a discussion on the present situation regarding Day Care for the elderly, which is a concern of the STA which produced a report on the cost to the client of day care. Day Care centres have been rationalised, and many elderly who had previously attended are now left isolated in their own homes. The STA has been in contact with Val de Sousa, Head of Social Services, and this meeting is the result.

3.2 The STA wanted to know what the Third Sector [Voluntary Sector] is proposing to replace the traditional Day Care service; Jennifer is looking at what is and what isn't available and what needs to be done and proposes that we all work together on this.

3.3 Lesley and Linda work with the others on RCFOP and were keen to hear what we had to say.

3.4 David gave an overview of the agenda for Reshaping Care for Older People [RCFOP] This topic has to be implemented by all LA throughout Scotland. There are a growing number of elderly people because of the 'baby boom' in the 60s. The partnership has been consulting with the elderly on how they would like to receive care and the majority would like less time in hospital and more care in their own homes, with a Care Home as a last resort.

There is also a financial element as the cost over the next 20 years of providing the same care as previously would be unsustainable, so the focus is on prevention and helping people to stay fit and healthy. To do this it was decided that care must be tailored to the individual, with increased focus on community or home care.

3.5 In the FV area, all sectors are working together, including the Health Service and the Third Sector. Previously a person could find themselves on the hospital, home, hospital roundabout, but now with intermediate care, they may be able to avoid hospital, but if not, then can be discharged earlier and receive care in their home.

- 3.6 An increasing number of Third Sector organisations are supporting the public sector in helping people to be able to return home and receive care in their home by providing transport etc. this is care from the community to the community.
- 3.7 It is well-known that isolation causes ill-health, but the experts on what is required in your community are the community and the voluntary organisations.
- 3.8 Lesley said that 95% of people go through life without needing care, so the focus is finding and contacting those who do need it and then providing the right care.
- 3.9 Jennifer said that the systems in place do not encourage people to be independent; if you go into hospital, the staff take on the responsibility of issuing medicines, even those that the patients has been self-administering for a while, and this has to be relearnt when the patient returns home.
- 3.10 Whilst it was agreed that it is about demographics, we must stop concentrating on that and, very importantly, we must stop treating the elderly as a burden to be managed.
- 3.11 Co-production is professionals working with people, a partnership on a level playing field for all parties.
- 3.12 The answers you get are dependent on what questions you asked.
- 3.13 No decision has been made on how future Day Care will look; different locality need different solutions. Now that baseline services are in place we can concentrate on how to solve it.
- 3.14 Richard said that he and Delia had attended 2 seminars, but despite them being part of the consultation, the Day Care service was just stopped without anything to replace it and people are left isolated.
- 3.15 Recently there was an article in the media about a woman who was discharged from hospital and died from starvation. There are systems in place that should ensure that a care package is arranged before discharge.
- 3.16 People used to be able to attend Well-Being Clinics for arthritis where nurses advised on exercise, diet etc., but they are no longer available.
- 3.17 Michael asked if in Scotland people have to sell their house to pay for Care Home fees. Jennifer did not know but would find out. **Action Jennifer.**
- 3.18 The STA has repeatedly suggested that, as a practicality, arrangement for a care package for people being admitted to hospital should start as soon as they are admitted.
- 3.19 A lot of care in the home is provided in 15 minute slots, which is not long enough.
- 3.20 It seems to have been overlooked by all that it was not what was offered that was no longer supported by the elderly, but the massive increase in the cost to the client meant that the elderly no longer attended Day Care and this brought about its demise. Day Care should be offered at a reasonable cost. This is a valid point.
- 3.21 A discussion ensued about whether we should be looking at reinstating the Day Care that was provided previously or should we looking for a different and more individual approach. Should it be public sector led, or just supported by the public sector?
- 3.22 The consensus was:-
- there is not a one size fits all solution;
 - care packages must include family views and commitments;
 - extra care is needed for people with dementia;
 - meals on wheels which includes a visit and time spent with the elderly person is much better than frozen meals;
 - take a holistic view and give opportunities;
 - paid professionals must be given the time and money to give decent care that caters against loneliness, which is backed up by volunteers, but not led by them as a means of cheap labour to cut costs.
 - services must be provided in rural areas.
- 3.23 The voluntary sector is presently marketing care for the elderly, but all we need is money; we are well under way to alleviate loneliness e.g. we have people come to do bloods and podiatry, we have lunch clubs and breakfast clubs.

3.24 It is not spreading out to the rural areas; elderly people bus into Stirling and sit around in public places for company. There is a place for them at the Cowie Centre and the nearby church would like to have something for older people.

3.25 Most people find it hard to try something new and it is even harder for the elderly. This could be overcome with befrienders who are people who have time to listen to them.

3.26 Involving volunteers is not always about cutting costs, but about giving professionals more time to do the jobs that only they can do and letting others help – volunteers get a lot out of helping. .

3.27 In Strathblane people were invited to attend a lunch club but chose to receive frozen meals at home. Other areas may choose differently.

3.28 The Welfare Benefit assessment is a Catch 22 because if the person receives more money they have to pay more towards their care costs. Now that the person only has to pay for the service they receive it means that people sometimes don't take up all of the services offered because of the cost e.g. refuse a breakfast visit.

3.30 The same level of service should be available in each community.

3.31 There are now only 2 Day Care services available; 1 in Balfron and 1 in Stirling

3.32. Jennifer took notes on all the ideas and comments.

3.33 There is a proposal from the Scottish Government that people can receive a grant to pay for and arrange their own care. This is fraught with impracticalities such as where to find a reliable home help.

3.34 We need to think about how we can make the challenges of meeting the complex needs of the elderly work.

3.35 The next step is to have a debate on what we would like to see happening and then get back to Jennifer and David with ideas.

Hugh thanked Jennifer, David, Lesley and Linda for coming along and we will be back in touch later.

4 Any other Business.

4.1 The Tenant Satisfaction and Aspiration Survey report will be given on 1st November in Municipal Buildings at 1pm.

4.2 Community Planning – Taking Engagement Forward in Council Chambers, Old Viewforth on 5th October. Can you check this please Hugh.

4.3 Posters for the ASB Strategy Conference on 9th November will be distributed to members to display in their areas.

4.4 Margaret Campbell has tendered her resignation from the STA, due to personal circumstances.

Abbreviations

AGM	Annual General Meeting
ASB	Anti-Social Behaviour
CC	Community Council
CRN	Central Regional Network
FV	Forth Valley
HAG	Housing Advisory Group
HRA	Housing Revenue Account
LA	Local authority
LAs	Local authorities
LG	Local Government
RN	Regional Networks

RTO Registered Tenants Organisation
SC Stirling Council
SHG Strathfillan Housing Group
SHQS Scottish Housing Quality Standard
SG Scottish Government
STA Stirling Tenants Assembly
TLI Tenant Led Inspection
TP Tenant Participation
TPAS Tenant Participation Advisory Service