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SOUTHEND-ON-SEA BOROUGH COUNCIL

People Scrutiny Committee

Date: Tuesday, 10th April, 2018 @ 18.30
Place: Committee Room 1 - Civic Suite

Contact: Fiona Abbott – Principal Democratic Services Officer
Email: committeesection@southend.gov.uk

AGENDA

****** Part 1**

- 1 Apologies for Absence**
- 2 Declarations of Interest**
- 3 Questions from Members of the Public**
- 4 Minutes of the Meeting held on Tuesday, 30th January, 2018 (Pages 1 - 10)**

****** ITEMS CALLED IN / REFERRED DIRECT FROM CABINET**
- Tuesday 13th March, 2018

- 5 Monthly Performance Report**
Members are reminded to bring with them the most recent MPR for period ending January 2018.

Comments / questions should be made at the appropriate Scrutiny Committee relevant to the subject matter.

- 6 Annual Education Report - March 2018 (Pages 11 - 24)**
Minute 827 (Agenda item No. 18 refers)
Called-in by Councillors A Jones and C Nevin
- 7 Secondary School Places (Pages 25 - 28)**
Minute 828 (Agenda Item No. 19 refers)
Called in by Councillors A Jones and I Gilbert

****** PRE-CABINET SCRUTINY ITEMS**
NONE

****** ITEMS CALLED-IN FROM FORWARD PLAN**
NONE

****** OTHER SCRUTINY MATTERS**

- 8 Schools Progress Report (Pages 29 - 32)**
Report of Deputy Chief Executive (People)

9 Scrutiny Committee - updates (Pages 33 - 48)
Report of Chief Executive

TO: The Chairman & Members of the People Scrutiny Committee:

Councillor C Nevin (Chair), Councillor L Davies (Vice-Chair)
Councillors B Arscott, M Borton, H Boyd, A Bright, S Buckley, M Butler,
A Chalk, C Endersby, D Garston, S Habermel, A Jones, C Mulroney,
G Phillips, M Stafford and C Walker

Co-opted Members

Church of England Diocese –

E Lusty (Voting on Education matters only)

Roman Catholic Diocese –

VACANT (Voting on Education matters only)

Parent Governors

(i) M Rickett (Voting on Education matters only)

(ii) VACANT (Voting on Education matters only)

SAVS – A Semmence (Non-Voting)

Healthwatch Southend – J Broadbent (Non-Voting) (*appointment to be confirmed at Council*)

Southend Carers Forum – T Watts (Non-Voting)

Observers

Youth Council -

(i) M Riley (Non-voting)

(ii) I Genius (Non-Voting)

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SOUTHEND-ON-SEA BOROUGH COUNCIL

Meeting of People Scrutiny Committee

Date: Tuesday, 30th January, 2018
Place: Committee Room 1 - Civic Suite

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Present: Councillor C Nevin (Chair)
Councillors L Davies (Vice-Chair), B Arscott, M Borton, H Boyd, A Bright, S Buckley, A Chalk, C Endersby, N Folkard*, A Jones, D McGlone*, C Mulroney, G Phillips and M Stafford
*Substitute in accordance with Council Procedure Rule 31.
E Lusty, A Semmence and T Watts – co-opted members

In Attendance: Councillors J Lamb, J Courtenay and L Salter (Executive Councillors)
Councillor R Woodley
F Abbott, S Leftley, J Chesterton, A Atherton, M Smith, B Martin, S Houlden, J Lansley, D Keens, C Braun, N Faint, L Chidgey and J Astle
Y Bey – Deputy Youth Mayor - observer

Start/End Time: 6.30 - 10.10 pm

681 Apologies for Absence

Apologies for absence were received from Councillor D Garston (substitute Cllr D McGlone), Councillor S Habermel (substitute Cllr N Folkard), Councillor C Walker (no substitute), Councillor M Butler (no substitute), M Riley (Youth Mayor - observer) and J Symmonds (Healthwatch Southend).

The Chairman advised that since the last meeting Leanne Crabb, the Healthwatch Southend representative on the Scrutiny Committee had moved to a new role at Healthwatch England and a new replacement representative will be advised in due course.

682 Declarations of Interest

The following interests were declared at the meeting:-

- (a) Councillors Lamb, Salter and Courtenay (Executive Councillors) - interest in the called in / referred items; attended pursuant to the dispensation agreed at Council on 19th July 2012, under S.33 of the Localism Act 2011;
- (b) Councillor Salter – agenda items relating to Draft General Fund Revenue Budget; STP report – non-pecuniary interest – husband is Consultant Surgeon at Southend Hospital and holds senior posts at the Hospital; son-in-law is GP; daughter is a doctor at Broomfield Hospital;
- (c) Councillor Nevin - agenda item relating to STP report - non-pecuniary – 2 children work at MEHT; step sister works at Basildon Hospital; previous association at Southend and MEHT Hospitals; NHS employee in Trust outside area;

- (d) Councillor Mulroney – agenda item relating to Draft General Fund Revenue Budget - non-pecuniary – member of Leigh Town Council;
- (e) Councillor Borton – agenda item relating to STP – non-pecuniary – daughter is nurse at Rochford Hospital;
- (f) Councillor Folkard - agenda item relating to STP – non-pecuniary – relation works at Broomfield Hospital; Ambassador for fund raising team at Southend Hospital;
- (g) Councillor Nevin – agenda item relating to School Admission Arrangements for Community Schools – disclosable pecuniary interest - withdrew from meeting during consideration of this item (Councillor Davies took Chair for this agenda item).
- (h) Councillor Phillips – agenda item relating to School Admission Arrangements for Community Schools – disclosable pecuniary interest – withdrew from meeting during consideration of this item;
- (i) Councillor Chalk – agenda item relating to School Admission Arrangements for Community Schools – non pecuniary – Governor at Bournes Green School;
- (j) Councillor Boyd – agenda item relating to School Admission Arrangements for Community Schools – non pecuniary – owns a property in Leigh-on-Sea;
- (k) Councillor Salter - agenda item relating to School Admission Arrangements for Community Schools – non pecuniary - Lives in Chalkwell Hall School Catchment area;
- (l) Councillor Lamb - agenda item relating to School Admission Arrangements for Community Schools – non pecuniary - Lives in West Leigh Catchment Area and Governor of West Leigh Junior School;
- (m) Councillor Mulroney - agenda item relating to School Admission Arrangements for Community Schools – non-pecuniary – lives in North Street Junior School catchment area;
- (n) Councillor Arscott - agenda item relating to School Admissions for Community Schools – non-pecuniary – lives within Darlington School catchment area;
- (o) Councillor Arscott - agenda item relating to Schools Progress report – non pecuniary – Governor at Our Lady of Lourdes Catholic Primary School;
- (p) Councillor Boyd - agenda item relating to School Progress report – non-pecuniary – Governor at Westcliff High School for Girls and South East Essex Academy Trust, south east Essex Teaching School Alliance;
- (q) Councillor Borton - agenda item relating to Schools Progress report – non-pecuniary – Governor at Milton Hall School;
- (r) Councillor Jones – agenda item relating to Schools Progress report – non-pecuniary – parent of child attending school and governor;
- (s) Councillor Chalk - agenda item relating to Schools Progress report – non-pecuniary – Governor at Bournes Green Infants School;
- (t) Councillor Jones - agenda item relating to Schools Progress report – non-pecuniary – known to Diocesan Education Director;
- (u) E Lusty – agenda item relating to STP – non-pecuniary – husband is consultant at Southend Hospital;
- (v) E Lusty – agenda item relating to School Admission Arrangements for Community Schools – non-pecuniary – lives in Chalkwell Hall Schools Catchment; children attend West Leigh Schools.

683 Questions from Members of the Public

Councillor Courtenay, the Executive Councillor for Children & Learning responded to 2 written questions from Mr Webb and Councillor Salter, the Executive Councillor for Health and Adult Social Care responded to 2 written questions from Mr Fieldhouse.

684 Minutes of the Meeting held on Tuesday, 28th November, 2017

Resolved:-

That the Minutes of the Meeting held on Tuesday, 28th November, 2017 be confirmed as a correct record and signed.

685 Draft Capital Programme 2018/19 to 2021/22

The Committee considered Minute 647 of Cabinet held on 18th January 2018, which had been referred direct by Cabinet to all three Scrutiny Committees together with a report of the Corporate Management Team setting out the draft programme of capital projects for the period 2018/19 to 2021/22.

Resolved:-

That the following decisions of Cabinet be noted:-

“1. That the current approved Programme for 2018/19 to 2020/21 of £166.5m, as set out in Appendix 1 to the submitted report, be noted.

2. That the changes to the approved Programme, as set out in Appendix 2 to the submitted report, be noted.

3. That the proposed new schemes and additions to the Capital Programme for the period 2018/19 to 2021/22 totalling £20.1m for the General Fund as set out in Appendices 6 and 7 to the submitted report, be endorsed.

4. That the proposed scheme subject to external funding approval for the period 2018/19 to 2021/22 totalling £19m as set out in Appendices 2 and 7 to the submitted report, be endorsed.

5. That it be noted that the proposed new schemes and additions, as set out in Appendices 6 and 7 to the submitted report, and other adjustments as set out in Appendix 2 to the report, will result in a proposed capital programme (excluding schemes subject to external funding approval) of £184.9m for 2018/19 to 2021/22.

6. That it be noted that of the total programme of £184.9m for the period 2018/19 to 2021/22, the level of external funding supporting this programme is £71.7.2m as set out in paragraph 7.1 of the submitted report.

7. That it be noted that a final review is being undertaken on the 2017/18 projected outturn and that the results will be included in the report to Cabinet on 13th February 2018.”

Note:- This is an Executive Function save that approval of the final budget following Cabinet on 13th February 2018 is a Council Function.
Executive Councillor:- Lamb

686 Fees & Charges 2018/19

The Committee considered Minute 648 of Cabinet held on 18th January 2018, which had been referred direct by Cabinet to all three Scrutiny Committees together with a report of the Corporate Management Team detailing the fees and charges for services in 2018/19 included in the budget proposals for 2018/19.

Resolved:-

That the following decision of Cabinet be noted:-

“That, subject to the annual commuters car park charge (East Beach) being amended to £100, the proposed fees and charges for each Department as set out in the submitted report and appendices, be endorsed.”

Note:- This is an Executive Function save that approval of the final budget following Cabinet on 13th February 2018 is a Council Function.
Executive Councillor:- Lamb

687 Draft General Fund Revenue Budget 2018/19

The Committee considered Minute 649 of Cabinet held on 18th January 2018, which had been referred direct by Cabinet to all three Scrutiny Committees, together with a report of the Corporate Management Team presenting the draft revenue budget for 2018/19.

Resolved:-

That the following decisions of Cabinet be noted:

“1. That the 2018/19 draft revenue budget and any required commencement of consultation, statutory or otherwise, be approved.

2. That it be noted that the 2018/19 draft revenue budget has been prepared on the basis of a Council Tax increase of 4.49%, being 2.99% for general use and 1.5% for Adult Social Care.

3. That it be noted that the 2018/19 draft revenue budget has been prepared using the provisional local government finance settlement and that the outcome from the final settlement will need to be factored into the final budget proposals for Budget Cabinet and Budget Council.

4. That the 2018/19 draft revenue budget, as endorsed, be referred to all three Scrutiny Committees, Business sector and Voluntary sector to inform Cabinet, which will then recommend the Budget and Council Tax to Council.

5. That the schools budget position and the recommendations to the Education Board on 16th January 2018, as set out in Appendix 14 and 14(i) to the

submitted report, be noted and referred to People Scrutiny Committee and then to Cabinet and Council.

6. That the direction of travel for 2019/20 and beyond, as set out in section 15 of the submitted report, be endorsed.”

Note:- This is an Executive Function save that approval of the final budget following Cabinet on 13th February 2018 is a Council Function.

Executive Councillor:- Lamb

688 Monthly Performance Report

The Committee considered Minute 615 of Cabinet held on 9th January 2018 together with the Monthly Performance Report (MPR) covering the period to end November 2017, which had been circulated recently.

Resolved:-

That the report be noted.

Note:- This is an Executive Function.

Executive Councillor:- As appropriate to the item.

689 Annual Report on Safeguarding Children and Adults 2016-17

The LSCB and SAB Independent Chair was in attendance for the item.

The Committee considered Minute 617 of Cabinet held on 9th January 2018, which had been called in to Scrutiny, together with a report of the Deputy Chief Executive (People) setting out the annual assurance assessment for the Chief Executive and elected Members in respect of their responsibilities for safeguarding children and adults in Southend. This contributed to the requirements of statutory guidance in Working Together to Safeguard Children 2015 and the Care Act 2014.

In response to a question from Councillor Jones about the future role of the Southend LSCB / SAB Scrutiny Panel, the Independent Chair confirmed that discussions were on going with regard to this matter.

Resolved:-

That the following decisions of Cabinet be noted:

“That the report be noted and the actions detailed in Section 6 of the Annual Safeguarding Reports set out in Appendices 1 and 3 to the submitted report, be approved.”

Note:- This is an Executive Function

Executive Councillors:- Courtenay and Salter

690 Passenger Transport - Policy Changes

The Committee considered Minute 619 of Cabinet held on 9th January 2018 which had been referred direct to Scrutiny by Cabinet and called in to Scrutiny, together with a revised report of the Deputy Chief Executive (People) setting out proposed changes to policies which were recommended as part of the transport review.

Resolved:-

That the following decisions of Cabinet be noted:

“That the following proposed policies, as per the approach identified in paragraph 3.1 of the submitted report, be adopted:

(a) Home to School Transport for Pre and Post-16 Students with Special Educational Needs and Disabilities (SEND) (effective from 1st September 2018) as follows:

- The Special Educational Needs Travel Assistance Policy (Appendix A) to be implemented as set out in paragraphs 3.1.2 (a) and 3.1.2 (b) of the report. The provision of ‘travel assistance’ is to be focussed on the promotion of independence and personalisation. As pupils adopt more independent alternative modes of transport then routes will be optimised.

(b) Adults with Learning Disabilities and Older Adults attending Day Centres and Activities (effective from 1st April 2018) as follows:

- The Adult Social Care travel assistance policy (Appendix B) to be implemented as proposed in paragraph 3.1.2 (c) of the report. The focus on maximising independence will mean that travel assistance will only be provided by the Council once all alternative transport options have been considered.
- Where transport is provided by the Council, the contribution from the user is increased to the new charge of £4 per day for a return trip and £5 per day where multiple trips are applicable.

(c) Looked After Children (effective from 1st April 2018) as follows:

- The looked after children and young people travel assistance policy (Appendix C) to be implemented as proposed in paragraph 3.1.2 (d) of the report.

(d) Dial-a-Ride (effective from 1st April 2018) as follows:

- The Dial-a-Ride policy (Appendix D) to be implemented as proposed in 3.1.2 e) of the report.”

Note: This is an Executive Function

Executive Councillors: Courtenay, Moring and Salter.

691 Mid and South Essex Sustainability and Transformation Partnership

The Committee considered Minute 662 of the special Cabinet held on 29th January 2018 which had been referred direct to Scrutiny by Cabinet, together with a report of the Deputy Chief Executive (People). This updated Cabinet about the formal consultation on the Mid and South Essex Sustainability and Transformation Partnership (STP). This consultation runs from 20th November 2017 – 9th March 2018.

In response to questions, the Executive Councillor confirmed that the following additional comment would be included in the suggested response set out in Option B – “recognise the challenge for workforce in recruitment, retention and long-term sustainability of the health and social care workforce”.

Resolved:-

1. That the following decisions of Cabinet be noted:

“1. That Option B as set out in section 4 of the submitted report be endorsed as the proposed response to the STP.

2. That the final response be determined by the Deputy Chief Executive (People), in consultation with the Executive Councillor for Health and Adult Social Care.

3. That the response be submitted during the first week of March 2018, prior to the 9th March consultation deadline.

4. That Southend Council reserve its right to withdraw support for the STP following the completion of the formal public consultation process.”

2. That in accordance with Council Procedure Rule 39, the matter be referred to Council for consideration.

Note: That this is an Executive Function.

Executive Councillor: Salter

COUNCILLOR DAVIES IN THE CHAIR

692 School Admission Arrangements

The Committee considered Minute 663 of the special Cabinet held on 29th January 2018 which had been referred direct to Scrutiny by Cabinet, together with a report of the Deputy Chief Executive (People). This presented an evaluation of the response to the Council’s public consultation on Admission Arrangements for Community Schools for the academic year 2019/20.

The report also sought approval of the catchment areas within the Admission Arrangements for Community Schools for the academic year 2019/20; the oversubscription criteria (including explanatory notes) and the PAN (Published Admission Numbers) within the Admission Arrangements for Community Schools for the academic year 2019/20.

The Committee thanked officers for their sterling work in this area.

The Director for Learning advised that some minor changes needed to be made to the report at Appendix 2 (Admission Arrangements for Community Schools September 2019 round of admissions), as follows:-

Oversubscription criteria for community schools

Chalkwell Hall Infant School (page 4)- reword point 5 as:-

5. Pupils who live outside the catchment area who have a sibling attending the school or Chalkwell Hall Junior School

Chalkwell Hall Junior School (page 4) – reword point 6 as:-

6. Pupils who live outside the catchment area who have a sibling attending the school or Chalkwell Hall Infant School

Heycroft Primary School (page 5) reword point 2 as:-

2. Pupils who live in the catchment area ~~and~~ who have a sibling attending the school

Resolved:-

1. That the following decisions of Cabinet be noted:

“1. That no changes be made to the current 2018 catchment areas (with the exception of small changes to the catchment area of Fairways Primary School as set out in paragraphs 3.78-85 of the submitted report) and that the Council determines (i.e. formally agrees) the Catchment Areas within the Admission Arrangements for Community Schools for the Academic Year 2019/20 as set out in Appendix 2 of the submitted report.

2. That changes be made to the oversubscription criteria (including explanatory notes) and PAN (Published Admission Numbers) as set out in paragraphs 3.86 to 3.94 of the submitted report and that the Council determines (i.e. formally agrees) these same matters within the Admission Arrangements for Community Schools for the Academic Year 2019/20 as set out in Appendix 2 of the submitted report.

3. That it be noted that the Determined Coordinated Admission Scheme for the academic year 2019/20 was published on 31st December 2017.”

2. To note the minor changes to Appendix 2 to the report (Admission Arrangements for Community Schools September 2019 round of admissions), as set out in the preamble above.

Note: This is an Executive Function
Executive Councillor: Courtenay

COUNCILLOR NEVIN IN THE CHAIR

693 0 - 5 Service - Contract Extension

The Chairman agreed to the addition of this tem to the agenda. The item had been referred direct to Scrutiny by Cabinet at the special meeting on 29th

January 2018 to enable a decision on the extension of the contract to be determined at the earliest opportunity (Minute 664 refers).

The Committee considered a report of the Deputy Chief Executive (People) that provided an update on the commissioning of children's services for Southend Borough Council (SBC), including the value for money and outcomes delivered by the 0-5 Service. The report also sought approval of an exception to tender for the contract with Essex Partnership University NHS Foundation Trust (EPUT) for the provision of the 0-5 Service by a period of 12 months to 31 March 2019.

Resolved:-

That the following decisions of Cabinet be noted:-

"1. That the current commissioning arrangements for children's services for Southend, including the value for money and outcomes delivered by 0-5 Service be noted.

2. That the exception to tender for the 0-5s service which will facilitate the extension of the contract with EPUT for the 0-5 Service by a period of 12 months to 31 March 2019, be approved."

Note: This is an Executive Function
Executive Councillor Salter

694 Schools Progress Report

The Committee received and considered a report of the Deputy Chief Executive (People) which informed the Committee on the current position with regard to the performance of all schools, including those schools causing concern and updated on known Academy developments. The Director of Learning also provided a verbal update on recent Ofsted Inspections.

Resolved:-

1. That the report be noted.
2. That congratulations be forwarded to Shoeburyness High School and also to Our Lady of Lourdes on the outcomes of their recent Ofsted Inspections.

Note:- This is an Executive Function.
Executive Councillor:- Courtenay

695 Standing Order 44.2

During consideration of the Schools Progress Report (Minute 694) the hour of 10 pm was reached and the Committee agreed to continue with the remaining items of business on the agenda.

696 Connecting communities to avoid isolation - update

The Committee received and considered a report of the Chief Executive which updated the Committee on the in depth Scrutiny project – ‘Connecting communities to avoid isolation’.

Resolved:-

That the report be noted.

Note:- This is a Scrutiny Function

Chairman: _____

Southend-on-Sea Borough Council

Agenda
Item No.

6

Report of Deputy Chief Executive (People)

to
Cabinet

on

13th March 2018

Report prepared by: Brin Martin, Director of Learning

Annual Education Report

People Scrutiny Committee

Executive Councillor: Councillor Courtenay
A Part 1 (Public Agenda Item)

1. Purpose of Report

This report is to inform Cabinet of the publication of the Annual Education Report (AER) on the retrospective performance of Southend Schools for the academic year 2016/17.

2. Recommendations

- a. That Cabinet notes and approves the new format for the AER;
- b. That Cabinet approve the report and recognise the very positive outcomes for learners across all Key Stages.

3. Background

Traditionally the Council has published a very detailed document on the retrospective performance for learners in Southend based upon the previous academic year's outcomes. These outcomes are not validated by the Department for Education nationally until late in the year. In reality, this has meant that the AER is published once a year, some nine months after the summer outcomes are known.

Whilst the report has previously been detailed, its frequency and usefulness to both members and members of the public has been limited. The decision was made to make the AER more accessible through the use of "infographics", whilst still retaining the same key headline information.

As a result of the establishment of the Southend Education Board, and the relevant sub group for School Performance that supports it, far greater scrutiny and analysis has been provided to Cabinet in the 19th September 2017 report, and through far more regular and detailed summaries contained in the School Progress Reports submitted

to each People Scrutiny Committee. In addition, the later paper is now Part One, in the public domain, and therefore more accessible and open to members of the public.

4. Other Options

The other option of pursuing the previous format has been dismissed for the reasons stated above.

5. Reasons for Recommendations

Irrespective of the format of the report, recognition of the very strong performance of Southend Schools should be celebrated. It is hoped that the new AER will allow more people to access their achievements.

6. Corporate Implications

6.1 Contribution to Council's Vision & Corporate Priorities

Ensure residents have access to high quality education to enable them to be lifelong learners and have fulfilling employment

6.2 Financial Implications

Traditionally the compilation of the 80 page AER has taken a significant number of days from the Data and Performance Team, and indeed in previous iterations consultant time to draw the report together. The new format, whilst still complied by the team is considerably shorter and more cost effective.

6.3 Legal Implications

None

6.4 People Implications

The same degree of scrutiny will be made available through People Scrutiny Committee.

6.5 Property Implications

None

6.6 Consultation

None required

6.7 Equalities and Diversity Implications

Not applicable, although the report and the data sets that underpin it intrinsically considers in detail the performance of groups by gender, SEND, deprivation and ethnicity.

6.8 Risk Assessment

None required

6.9 Value for Money

See 6.2 above

6.10 Community Safety Implications

Not applicable

6.11 Environmental Impact

Not applicable

7. Background Papers

None

8. Appendices

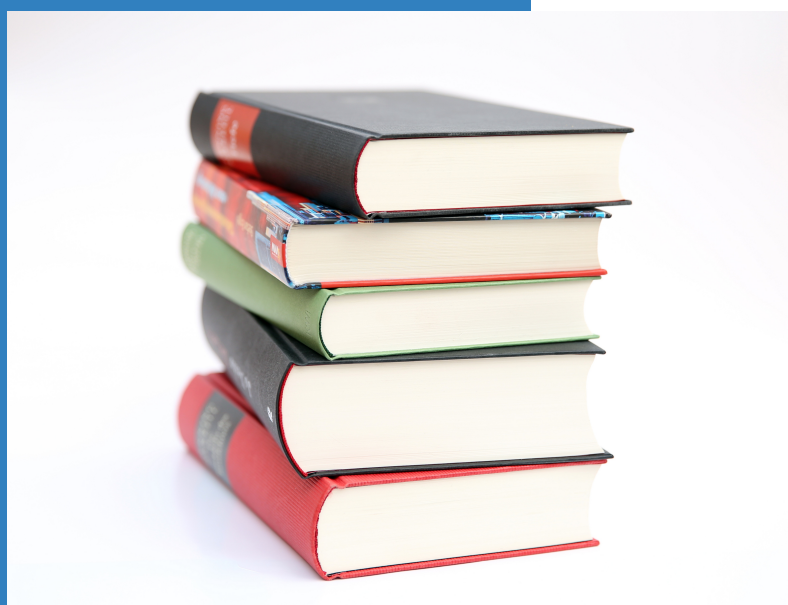
Appendix 1 - Annual Education Report 2016/17

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Annual Education Report - 2017

Operational Performance & Intelligence Team

Southend-on-Sea Borough Council



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Foreword

James Courtenay, Executive Portfolio Holder, Children and Learning

I am pleased to be able to report a very strong set of school performance indicators across the board in all key stages, as contained in this newly formatted Annual Education Report (AER). From the early years to post sixteen, results across the Borough are both strong and consistent compared to the national picture and to our regional and statistical neighbours.

Of particular note in this report (retrospective based upon the summer 2017 results) are the very strong rankings in the headline attainment measures at Key Stage Two and Key Stage Four (28th and 16th respectively out of 152 Local Authorities). However our success is not just limited to attainment at the end of the key stages; we have performed well against the national benchmarks within the Early Years Foundation Stage and also in the progress measures between key stages. It is fair to say that for a small unitary authority, Southend on Sea is punching above its weight.

We have taken the opportunity to try and make the AER more accessible and readable from the previous lengthy text versions, and would welcome your views. The AER is supplemented throughout the year with additional and new information for councillors, Corporate Parenting Group and members of the public through committee reports and updated to the Southend Education Board; all new initiatives to ensure that the work in all of our schools is both recognised and valued.

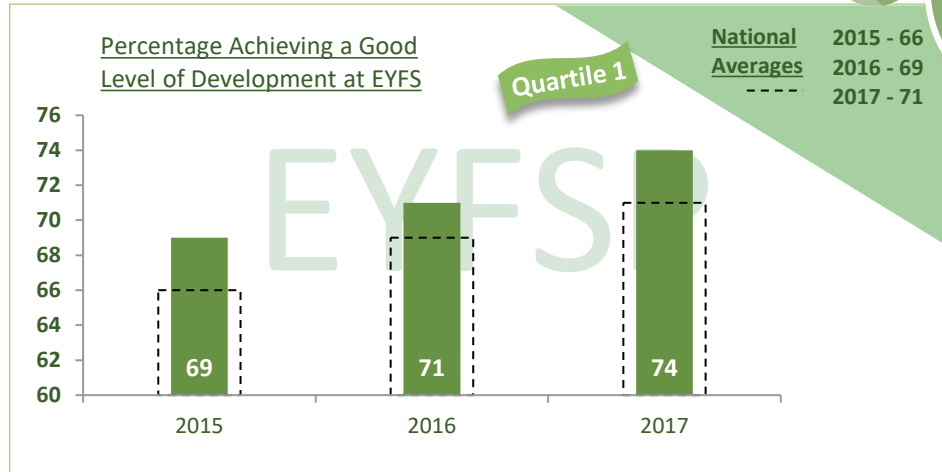
Dashboard Guide

The information below is a guide to the 'Key Stage' dashboards.

- **National Averages:** National averages are presented with a dotted line, and these figures are shown in the top right hand corners of the charts.
- **Trend Tables:** Where a green arrow is shown, this indicates a statistically significant improvement. Grey arrows indicate the direction of travel.
- **Quartile 1 Flags:** Green 'Quartile 1' flags indicate that the Southend figure is in the top 25% nationally.
- **Rank Info:** Rank information is shown in the top right hand corner for every dashboard for various measures. The rank figure is Southend's position of 152 Local Authorities.

Annual Education Report - 2017

Achievement



Rank Info

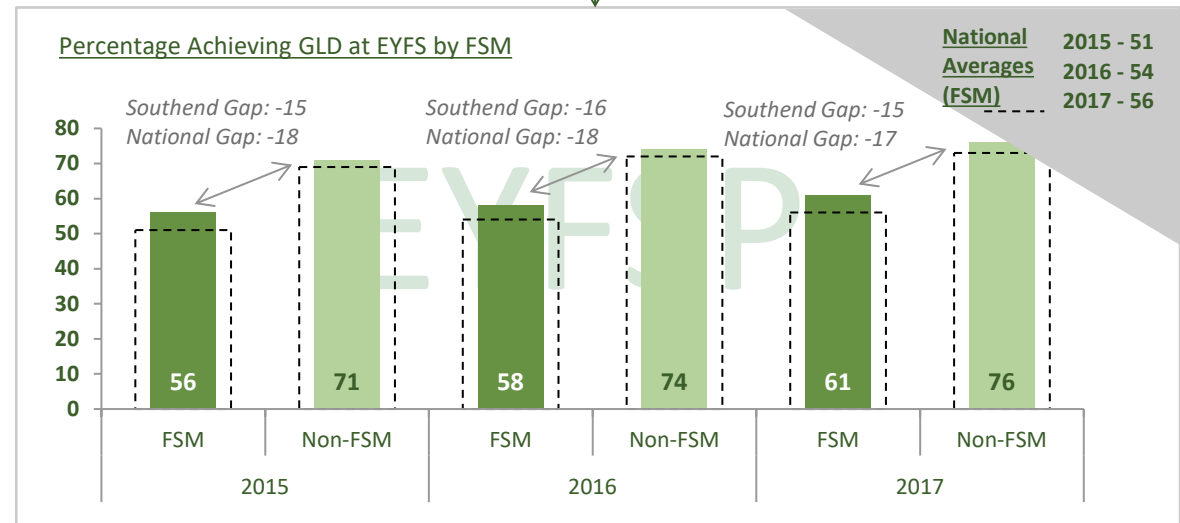
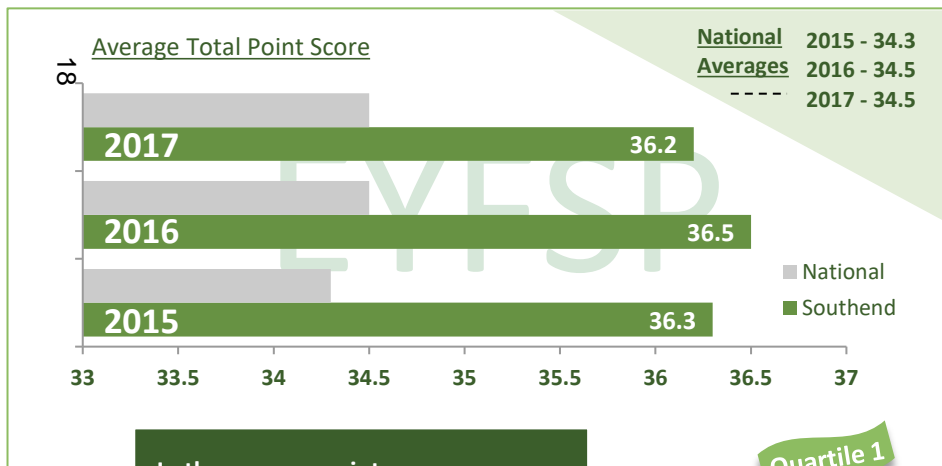
Of 152 LAs

% achieving a Good Level of Development

28th

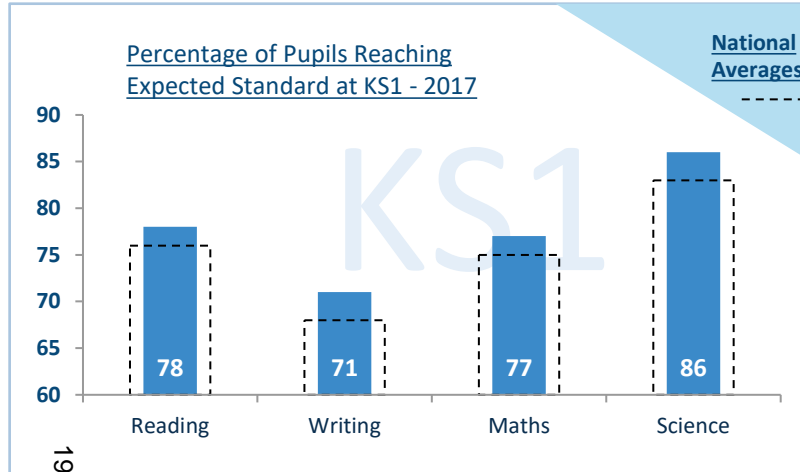
Average Total Point Score

10th



Annual Education Report - 2017

Expected Standard - By Subject



Key Stage 1

Performance was above the national average in all subjects in the expected standard measure

This was a new measure for 2016
Outcomes have improved in all subjects since last year

Outcomes for FSM pupils have not significantly changed since 2016. The trend table shows data for FSM only

Rank Info

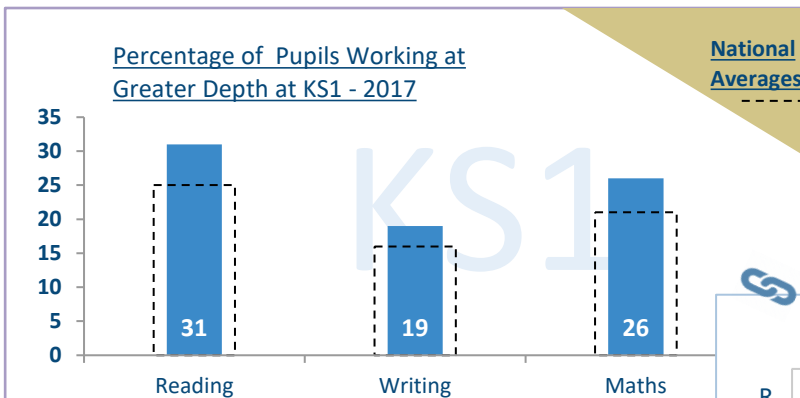
Of 152 LAs

Pupils reaching the expected standard:

Reading	34th
Writing	36th
Maths	44th
Science	16th

Pupils working at greater depth:

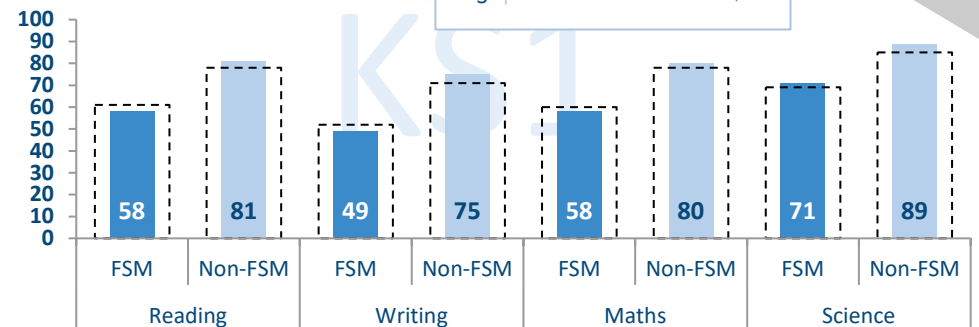
Reading	12th
Writing	19th
Maths	8th



Quartile 1

In the more demanding measure of pupils working at greater depth, Southend was ranked in the top 25% of all local authorities in each subject

Percentage Pupils Reaching Expected Standard FSM and Non-FSM at KS1 - 2017



Trend Info

2016 2017

R	77	78	↑
W	69	71	↑
M	74	77	↑
S	82	86	↑

Trend Info

2016 2017

R	31	31	→
W	18	19	↑
M	23	26	↑
S	-	-	-

Trend (FSM)

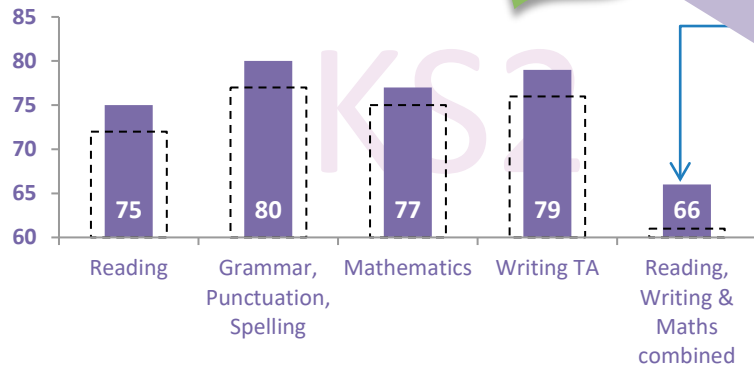
2016 2017

R	60	58	↓
W	54	49	↓
M	59	58	↓
S	71	71	→

Annual Education Report - 2017

Expected Standard - By Subject

Percentage of Pupils Reaching Expected Standard at KS2 - 2017



Key Stage 2

Performance was above the national average in all subjects in the expected standard measure

Southend was ranked in the top 25% of all local authorities in the combined reading, writing and maths measure

Rank Info

Of 152 LAs

Reading, writing & maths combined

Pupils achieving the expected standard

28th

Pupils achieving the higher

24th

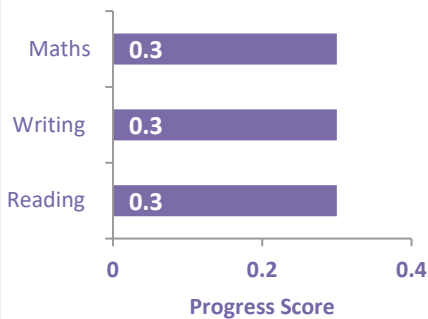
Trend Info

2016 2017

R	67	75	↑
GPS	73	80	↑
M	71	77	↑
W	79	79	→
Com.	56	66	↑

Outcomes for FSM pupils have improved but the gap between these pupils and their peers has widened since 2016 due to the improved performance of non-FSM pupils. In 2017 only the combined RWM figure was published

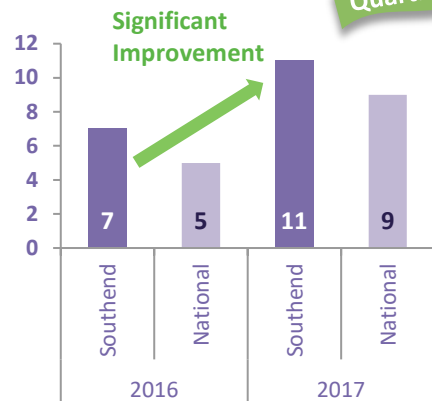
Key Stage 1 to 2 Progress against National Average (2017)



The progress scores of pupils were higher than the national average (0.0)

Percentage of Pupils Reaching Higher Standard at KS2 - 2017

Reading, Writing & Maths



Percentage of Pupils Reaching Expected Standard FSM and Non-FSM at KS2 - 2017



Trend (FSM)

2016 2017

R	52	53	↑
W	68	58	↓
M	55	57	↑
Com.	38	44	↑

National Averages

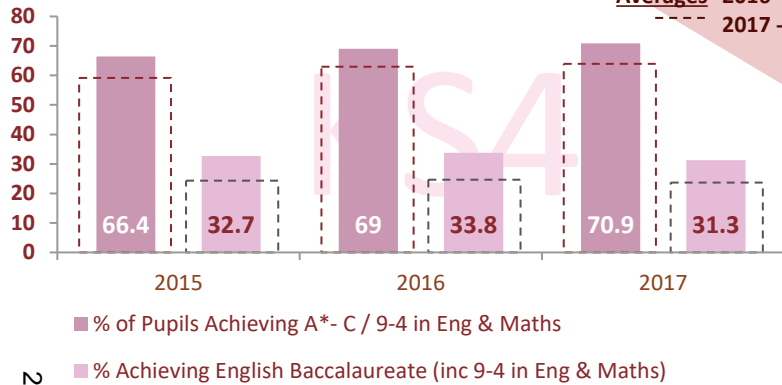
Combined FSM - 43
Combined Non-FSM - 65

Annual Education Report - 2017

Attainment

Attainment at KS4 - 2017

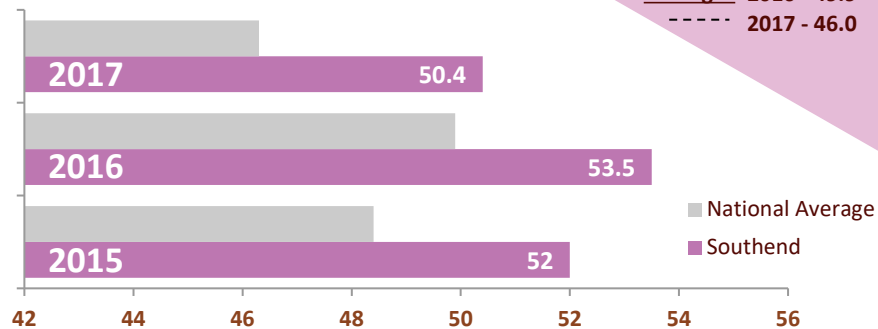
National 2015 - 59.2 | 24.3
Averages 2016 - 63.0 | 24.7
 2017 - 63.9 | 23.7



Quartile 1

Average Attainment 8 score at KS4

National 2015 - 48.4
Averages 2016 - 49.9
 2017 - 46.0



Outcomes have decreased in the Attainment 8 measure but this change is as expected following changes to the 2017 point scores assigned to grades

Quartile 1

Key Stage 4

Performance was above the national average in the headline attainment measures

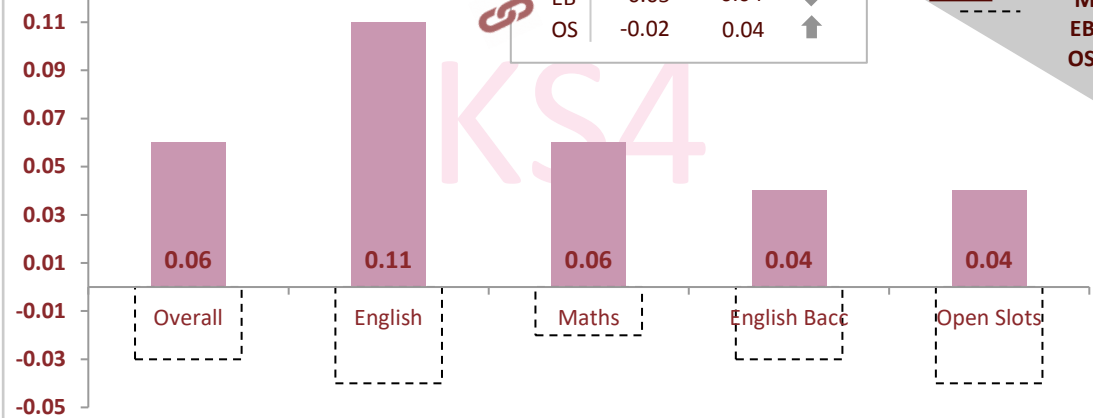
Southend was ranked in the top 25% of all local authorities in the English and maths 'basics' measure and the English Baccalaureate. Outcomes have decreased in the EBacc measure compared to 2016, which reflects the national trend

Southend's pupils made significantly more progress from KS2 than the national average, particularly in English

Trend Info

	2016	2017	
O	-0.01	0.06	↑
E	-0.01	0.11	↑
M	-0.07	0.06	↑
EB	0.05	0.04	↓
OS	-0.02	0.04	↑

Average Progress 8 score at KS4



Rank Info

Of 152 LAs

Attainment 8 16th

% achieving a strong pass in English and maths 13th

% achieving EBacc inc 9-5 in English and maths 17th

Progress 8 40th

Total State O -0.03
Funded E -0.04
Sector M -0.02
 EB -0.03
 OS -0.04

Annual Education Report - 2017

Achievement



Key Stage 5

Southend was ranked in the top 10 local authorities for each of these measures

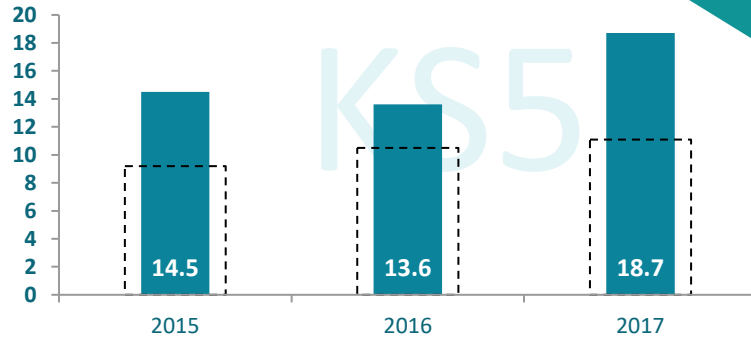
Rank Info

Of 152 LAs

3+ A* - A	7th
AAB or Better	6th
AAB inc. 2 facilitating subjects	7th
APS Per entry	8th
APS per entry (best 3) A-Levels	5th

Percentage Achieving 3+ A*/A Grades at KS5 (A-levels)

National Averages
2015 - 9.2
2016 - 10.5
2017 - 11.1



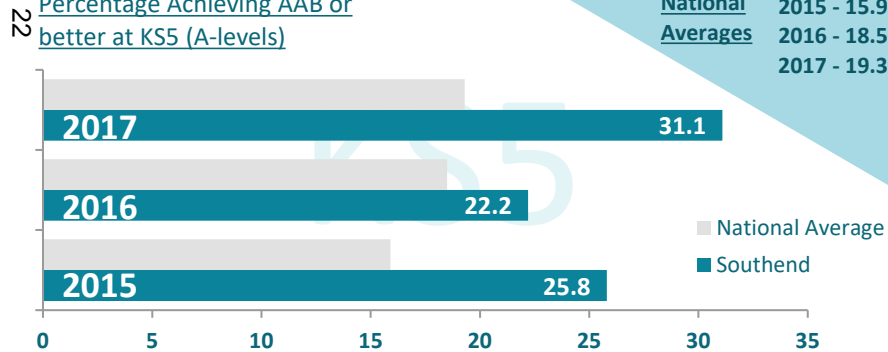
Quartile 1

The percentage of students achieving 3 or more A*-A grades has increased since last year and remains above the national average

The average point score per entry has increased since 2016 and remains above the national, equivalent to a C+

Percentage Achieving AAB or better at KS5 (A-levels)

National Averages
2015 - 15.9
2016 - 18.5
2017 - 19.3

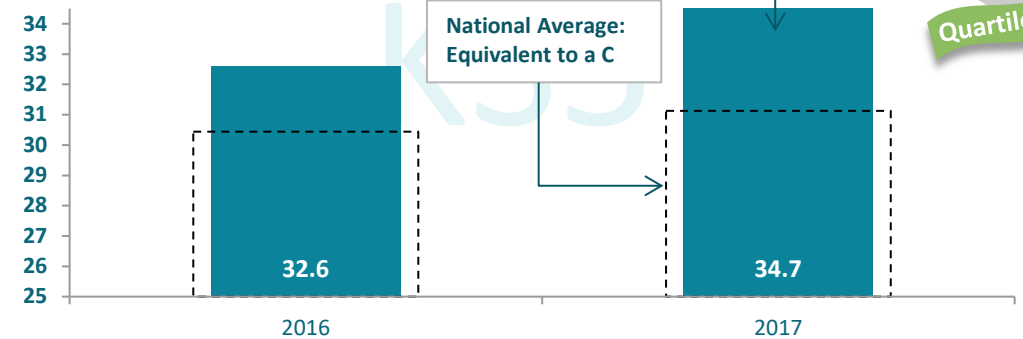


Southend remains above average in the proportion of pupils achieving AAB or better and this has improved since last year

Quartile 1

Average Point Score per Entry (A-Levels)

National Averages
2016 - 30.4
2017 - 31.1



Southend:
Equivalent to a C+

National Average:
Equivalent to a C

Quartile 1

Conclusion

Through the work of the Education Board, outcomes in all schools, academies and maintained alike, will remain a key focus. Whilst we are proud of our outcomes, some areas remain stubborn, such as the achievement of disadvantaged learners. In addition, we will continue to closely monitor progress in all schools, and where we are required to do so we will directly support them in conjunction with the Regional Schools Commissioner (RSC), who is accountable for improvements in academies.

In addition, the priorities for the coming year will be to:

- Support leaders in schools and trusts where performance is less than good;
- Work directly through primary school leaders to narrow the gap in the achievement of disadvantaged youngsters and their peers;
- Robustly champion and support the achievement of children in care;
- Undertake year two of the successful initiative to allow parents the choice of the most appropriate education at aged eleven;
- Continue the drive to improve the number of pupils who attend a good or outstanding school.

We will do this by:

- Maintaining our (the Education Board's) information and intelligence of all schools;
- Working very closely with the RSC and school leaders to support their own drive for self-improvement;
- Offering bespoke support through the Teaching School by building the network of excellent school based practitioners who increasingly support each other;
- Looking outwardly for innovative and best practice to improve even faster and further.

Data Sources

All data sourced from Department for Education Statistical First Releases:

<https://www.gov.uk/government/organisations/department-for-education/about/statistics>

Figures are based on revised datasets for all key stages with the exception of Key Stage 1 which used the provisional dataset.

Southend figures and national averages are for state funded schools only (excluding pupil referral units) with the exception of Early Years Foundation Stage (which includes private, voluntary and independent sectors) and Key Stage 5 (which includes state funded colleges).

Key Stage 4 dashboard note: Total State - funded Sector indicates National Average

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Southend-on-Sea Borough Council

Agenda
Item No.

7

Report of Deputy Chief Executive (People)

to
Cabinet

on

13th March 2018

Report prepared by: Brin Martin, Director of Learning

Secondary School Places

People Scrutiny Committee

**Executive Councillor: Councillor Courtenay
A Part 1 (Public Agenda Item)**

1. Purpose of Report

This report is to update Cabinet on the current position regarding the future provision for Secondary School places across the Borough 2018-2020 and beyond.

2. Recommendations

- a. That Cabinet notes the position regarding the provision of sufficient secondary school places.
- b. That Cabinet approve the decision to reverse its decision to pursue a Free School option in favour of expansion in existing secondary schools.

3. Background

Cabinet has for some years been informed of the impending requirement for additional school places from 2018 onwards in secondary schools. This followed on from the primary school growth in previous years, combined with other demographic changes in Southend.

In essence, this will require an additional 3 forms of entry (90 pupils) in 2018; 6 forms of entry (180) in 2019 and a further 2 in 2020 (60). In all, this will require 330 addition places each year for the next 5 years.

We have been working very closely with Essex County Council (ECC) to consider mobility across the South Essex boarder, both for learners attending a Grammar School from out of Southend, but also for whatever reason, a Southend resident choosing an Essex school. This information from Essex has fluctuated, but is currently estimated to be 250 pupils a year being educated in South Essex from Southend. ECC originally gave a very clear message that in 2018 these places would increasingly no longer be available.

As a result of the known numbers increasing, for some years officers had worked through the School Places Working Party to ask schools to expand, with very limited success.

Therefore, the decision was taken by Cabinet in Sept 2017 to pursue an additional school, which would have to be a free school. This was due to be funded by the Wave 13 Free School Capital route, but this has yet to be announced. The only other alternative would be for the Council to fund the capital build through a presumption route, in addition to relinquishing the identified land in St Laurence.

As a result of this Free School direction, the collective of non-selective secondary schools made a late proposal to expand to the required number, on the condition that the Free School option was discontinued. Meetings with the Leader and Executive Portfolio holder followed, where a commitment to reverse the Free School decision was given, the purpose of this report.

Currently, given Cabinet's approval of this report, officers are pursuing the expansion route. Bearing in mind that the first set of places are required for September 2018, the timeline is very tight, and will almost certainly have to result in temporary mobile solutions in a number of projects. This will escalate costs. In addition, constraints and conditions placed upon the projects by planning control make for additional complications and delays.

Currently, for 2018, the additional places of one form of entry each are progressing at Shoeburyness; Belfairs, St Thomas More leaving no surplus places, however through the successful project to attract more Southend residents to our Grammar Schools, an additional form of entry has also accessed local places within the Grammar schools enabling Southend to meet late and in-year secondary applications.

Officers are continuing to confirm the expansion plans with schools for 2019 and 2020. Whilst this paper seeks Cabinet approval to reverse the previous decision to pursue a Free School option for this period, the demographic situation beyond 2020 with the projected need for 10,000 houses for Southend within the next ten years may require an additional school into the future as it is unlikely these numbers could be met by further expansion of existing schools.

4. Other Options

The decision previously taken by Cabinet was in effect the alternative option.

5. Reasons for Recommendations

The decision to revert to an expansion as opposed to a free school option has been taken for a number of reasons:

- a. The Government's Wave 13 Capital Free School programme, due in March 2017, has yet to materialise;
- b. Schools collective desire to pursue an expansion route over and above a new free school has the backing of the school community;
- c. This will no longer result in the loss of a capital asset to the Council as additional land is no longer required.

6. Corporate Implications

6.1 Contribution to Council's Vision & Corporate Priorities

Ensure residents have access to high quality education to enable them to be lifelong learners and have fulfilling employment

6.2 Financial Implications

The original decision was predicated upon the loss of a capital land asset in the St Lawrence ward. This land now will remain under Council control for future use.

6.3 Legal Implications

None

6.4 People Implications

None, other than the requirement to provide sufficient Secondary School Places for Southend residents.

6.5 Property Implications

See 6.4 above

6.6 Consultation

Consultation has already taken place with all secondary schools in the Borough, with Essex County Council Capital Team and with the office of the Regional Schools Commissioner.

6.7 Equalities and Diversity Implications

Not applicable

6.8 Risk Assessment

The situation regarding the possible funding through a free school route has in effect in part led to the current proposal. A full risk assessment is logged on the Corporate Risk Register, and each separate project for expansion will also feature a detailed specific risk assessment.

6.9 Value for Money

With no announcement of a Free School Capital Programme, this option provides good value for money based upon the allocated and approved budget.

6.10 Community Safety Implications

Not applicable

6.11 Environmental Impact

Not applicable, other than at each specific Capital Project.

7. **Background Papers**

None

8. **Appendices**

None

Southend-on-Sea Borough Council

**Report of the Deputy Chief Executive
(People)**

to

People Scrutiny Committee

on

10th April 2018

Report prepared by: Brin Martin, Director of Learning

Schools Progress Report

People Scrutiny Committee

Executive Councillor: Councillor James Courtenay

A Part 1 Public Agenda Item

1. Purpose of Report

To inform members of the People Scrutiny Committee of the current position with regard to the performance of all schools, including those schools causing concern, and to update on known Academy developments.

2. Recommendation

That members note the information in the report.

3. Background

Ofsted Inspections

In the period since the previous Schools Progress Report, a number of Southend-on-Sea school has been inspected by Ofsted.

Cecil Jones Academy was inspected 5th December 2017, and the report is now in the public domain, with the Academy be judged to require special measures. Ultimately it is a decision for the RSC regarding the current context of the Academy, although it is absolutely in our best interests to ensure that the school provides a good or better education as soon as possible. The Council has been in regular contact with both the Trust and the Regional Schools Commissioner (RSC) to offer what support it can.

Additional inspections have been undertaken at Milton Hall School* (retained good); Chalkwell Hall Infants (retained good); Chalkwell Hall Juniors (retained good); Fairways (retained good); Eastwood Primary School (retained good) and Eastwood Academy*(retained good).

One further school has been inspected, Chase High School, but the outcome was not in the public domain at the time of drafting.

OFSTED has changed the means of inspecting schools as of 1st January 2018. In future, a school previously judged as good will normally receive a short section 8

inspection for one day. At the end of the day, the inspectors can judge the school to be good still, or they can indicate that the school is on the way to becoming outstanding. If this is the case the report will recommend that the next inspection will be a section 5, two day full inspection which will allow access to the outstanding judgement. (These schools are indicated thus above *).

Equally, if a school on a section 8 is judged to have declined in performance, the inspectors can either indicate that a re-inspection be required with 12-18 months, or convert the inspection immediately to a section 5 full inspection on the next day.

Overall, pupils attending a good or outstanding school in Southend remains at 85.6%. However, it should be remembered that a Good judgement now is made against a more robust inspection framework than when a school was previously inspected. Equally recent inspections will not affect this % unless a school crosses the grade 2/3 boundary either way.

Lastly, OFSTED are currently consultation on a different and more robust means of calculating this %. Southend already adopts this means of calculation.

Other Southend-on-Sea Primary Schools due an Ofsted inspection are being visited and supported by officers.

Academies

The conversion of Futures College has been delayed once again and is now due to convert on 1st May 2018. This date remains subject to change.

Temple Sutton Primary school is now due to convert 1st May 2018.

The Dioceses of Brentwood have also moved on academisation, and are establishing a “hub” model of Catholic Academies. Sacred Heart Catholic Primary School and Our Lady of Lourdes are aiming to convert 1st May 2018 with an arrangement with St Thomas More, with St George’s Catholic Primary School and St Helen’s Catholic Primary School following on 1st June 2018

Overall performance of schools

There has been no additional data released since the last Scrutiny report and the information previously provided in the following table remains the most up to date data information.

Key Stage	Measure	Southend Performance	Rank	England (State-Funded)
EYFS	% Achieving a Good Level of Development	74%	28	71%
KS1	% of pupils achieving the expected standard in the following subjects			
	Reading	78%	38	76%
	Writing	71%	38	68%
	Maths	77%	45	75%
KS2	% of pupils achieving the expected standard in the following subjects			
	Rea,wri,Mat combined	65%	26	61%
KS4	Attainment 8	50.3	15	46.1
	Progress 8	0.07	38	-0.03
	% Achieving English and Maths (9-4) (old A*-C equivalent)	70.6%	18	63.5%

Note: All data taken from SFR releases. Rank based on 151 local authorities.

4. Other Options

N/A

5. Reasons for Recommendations

N/A

6. Corporate Implications

6.1 Contribution to Council's Vision & Corporate Priorities

This report contributes to the Council's ambition that all schools will be good or outstanding.

6.2 Financial Implications

The work currently undertaken with school improvement is covered by the core staffing budget and the SLA with the teaching school alliance.

6.3 Legal Implications

None

6.4 People Implications

None

6.5 Property Implications

None

6.6 Consultation

None

6.7 Equalities and Diversity Implications

None

6.8 Risk Assessment

None

6.9 Value for Money

None

6.10 Community Safety Implications

None

6.11 Environmental Impact

None

7. Background Papers

None

8. Appendices

None

Southend-on-Sea Borough Council

Agenda
Item No.

9

Report of Chief Executive to People Scrutiny Committee

10th April 2018

Report prepared by:
Fiona Abbott

Scrutiny Committee - updates *A Part 1 Agenda Item*

1. Purpose of Report

To update the Committee on a number of health scrutiny matters and other matters relating to the work of the Committee.

2. Recommendations

- 2.1 That the report and any actions taken be noted.
- 2.2 To endorse the terms of reference for the Joint Scrutiny Committee looking at the STP, as set out at **Appendix 1**.
- 2.3 To note the response made by the Joint Scrutiny Committee looking at the STP, as set out at **Appendix 2**.

3 Quality Report / Account – 1st April 2017 – 31st March 2018

- 3.1 The Scrutiny Committee, as a statutory consultee is invited to comment on the draft Quality Accounts received from health bodies. Unfortunately there is no discretion in the statutory timescales. In 2017, the draft Quality Accounts from Essex Partnership University NHS Foundation Trust (EPUT) and Southend Hospital were circulated to Committee members for any comments and a submission was sent to the Trusts in the time frame (Minute 966 refers).
- 3.2 EPUT have recently advised that the draft Quality Account for 2017/18 will be sent on the 20th April 2018. Southend Hospital are likely to send the document through in the third week of April. These documents will be circulated to the Committee as soon as they are received. There is a requirement that any comments must be received by the Trusts within 30 days, in accordance with the Regulations.

4. GP practice changes

- 4.1 West Road Surgery – In February 2018, the Scrutiny Committee was notified by NHS England that the West Road and Westborough practices were planning to merge to form one single GP practice under the name of West Road Surgery, with effect from 3rd April 2018. A letter was sent to all patients registered in

February 2018 which provided further inform about the proposal and included some 'frequently asked questions' which provided more detail on the merger.

In terms of practice size, the Committee was advised that at the start of the process the list size was approximately 1800, though this is now diminishing and there will be around 1400 by the time of the transfer.

- 4.2 Closure of Lydia House Surgery and securing permanent registration with local GP – in February 2018 the Scrutiny Committee was notified about the closure of Family Health care, Lydia House Surgery in Leigh on 3rd April 2018 (the surgery is part of the Queensway Group) and arrangements for securing permanent registration with a local GP. Highlands Surgery was identified as the local practice and the change would take effect from 4th April 2018.

5. Joint Health Overview and Scrutiny Committee – Mid and South Essex Sustainability & Transformation Partnership (STP)

- 5.1 The Committee will be aware that in accordance with relevant regulations a Joint Scrutiny Committee has been established comprising Members from Essex County Council, Thurrock Council and Southend Council. At the first formal meeting held on 20th February 2018¹, Councillor Bernard Arscott was appointed as Chair of the Joint Scrutiny Committee and County Councillor Jo Beavis (Essex County Council) and Councillor Graham Snell (Thurrock Council) were appointed as the two Vice-Chairs.
- 5.2 The terms of reference for the Joint Scrutiny Committee were agreed at the meeting held on 20th February 2018 and are attached at **Appendix 1**. The Committee will be aware that the draft terms of reference were considered and discussed by the People Scrutiny Committee on 18th October 2017 (Minute 388 refers).
- 5.3 The Joint Committee of the CCGs in mid and south Essex launched its public consultation on 30 November 2017. The consultation focused on proposals to make changes to some hospital services in Southend, Chelmsford, Braintree and Basildon, as well as proposals to the transfer of services from Orsett Hospital in Thurrock to new centres closer to where people live. The original closing date for the consultation was 9 March 2018. Following feedback, the deadline for consultation responses was extended to 23 March 2018.
- 5.4 The Joint Scrutiny Committee has held 2 formal meetings and 2 informal meeting during the consultation. At its meeting on 13th March 2018, the Joint Scrutiny Committee agreed to delegate approval to the Chairman and two Vice Chairmen to approve the response to the current consultation. All Members of the Joint Committee had the opportunity to consider the proposed response prior to its submission.
- 5.5 This Council's response to the consultation was discussed in detail at the last Scrutiny Committee meeting (Minute 691 refers) and at the full Council meeting on 22nd February 2018.

¹ The papers for the formal meetings of the Joint Scrutiny Committee are available on each of the participating local authority websites

- 5.6 The Committee is asked to note the formal response of the Joint Scrutiny Committee attached at **Appendix 2**.
- 5.7 It is helpful for the Scrutiny Committee to be aware of the next steps, as set out below:-
- Some Members of the Joint Scrutiny Committee plan to attend CCG Joint Committee meeting in early April;
 - STP to publish the independent analysis of the consultation feedback - 8th May;
 - The Joint Scrutiny Committee will meet in the first week June and in mid June;
 - CCG Joint Committee papers published - 29th June;
 - The Joint Scrutiny Committee will meet in the first week July;
 - CCG Joint Committee meeting to reach final decisions – 6th July;
 - Post decision scrutiny by Joint Scrutiny Committee and response to decisions.

6. Independent Reconfiguration Panel

- 6.1 The Independent Reconfiguration Panel (IRP) is the independent expert on NHS service change. The IRP is an advisory non-departmental public body, sponsored by the Department of Health and Social Care.
- 6.2 The Panel has issued some reports recently which will be of interest to the Scrutiny Committee. A recent example is the initial assessment on Horton General Hospital, Banbury referral concerning the permanent closure of consultant-led maternity services. This report can be found on the following link - [IRP: Horton General Hospital, Banbury initial assessment](#) and is an example of how referrals to the Secretary of State are clearly taken seriously and investigated with care by the Independent Reconfiguration Panel.

7. Children's Services Improvement Plan Scrutiny Panel

- 7.1 The Committee will be aware that following the inspection of Children's Services in 2016, the decision was taken to create an Improvement Board, chaired by the Chief Executive and members include the independent chair of the safeguarding boards, the Leader of the Council, Executive Councillor for Children and Learning, shadow Member, Deputy Chief Executive and Director of Children's Services. Since November 2016 it has met on a bi-monthly basis to review and interrogate the improvement journey against the Ofsted recommendations and against the revised Children's Services Improvement Plan from December 2017.
- 7.2 Alongside this, a Scrutiny Panel was established to help provide additional challenge and the panel meets on a bi-monthly basis and receives the reports which are taken to the Improvement Board.
- 7.3 The following Scrutiny Councillors are Members on the Panel - Councillors Nevin (Chair), Arscott, Boyd, Davies and Walker. Since January 2017, the Panel has met on 6 occasions, with the most recent meeting taking place on 12th March 2018.
- 7.4 Panel members have taken the opportunity to visit front line services, such as the multi-agency 'front door', which has been useful and appreciated by the staff

concerned. Members of the Panel also plan to meet with the Young Experts Group (for Looked After Children).

8. Corporate Implications

- 8.1 Contribution to Council's Vision and Critical Priorities – Becoming an excellent and high performing organisation.
- 8.2 Financial Implications – There are no financial implications arising from the contents of this report. The cost of any Joint Committee work can be met from existing resources.
- 8.3 Legal Implications – the Scrutiny Committee exercises the health scrutiny function as set out in relevant legislation. Where an NHS body consults more than one local authority on a proposal for substantial development of the health service or a substantial variation in the provision of such a service, those authorities are required to appoint a Joint Scrutiny Committee for the purposes of the consultation. Only that joint committee may - make comments on the proposal to the NHS body; require the provision of information about the proposal; require an officer of the NHS body to attend before it to answer questions in connection with the STP proposals.
- 8.4 People Implications – none.
- 8.5 Property Implications – none.
- 8.6 Consultation – as described in report.
- 8.7 Equalities Impact Assessment – none.
- 8.8 Risk Assessment – none.

9. Background Papers

- Emails regarding Quality Accounts; letter from EPUT regarding Quality Account / Report process
- Emails regarding the GP practice changes

10. Appendices

Appendix 1 – Terms of Reference of Joint Scrutiny Committee

Appendix 2 – Formal response of Joint Scrutiny Committee

ESSEX, SOUTHEND AND THURROCK JOINT HEALTH SCRUTINY COMMITTEE ON THE SUSTAINABILITY AND TRANSFORMATION PARTNERSHIP / SUCCESS REGIME FOR MID AND SOUTH ESSEX

TERMS OF REFERENCE

1.	Legislative basis
1.1	The National Health Service Act 2006, as amended by the Health and Social Care Act 2012 and the Localism Act 2011 sets out the regulation-making powers of the Secretary of State in relation to health scrutiny. The relevant regulations are the Local Authority (Public Health, Health and Wellbeing Boards and Health Scrutiny) Regulations 2013 which came into force on 1st April 2013.
1.2	Regulation 30 (1) states two or more local authorities may appoint a joint scrutiny committee and arrange for relevant health scrutiny functions in relation to any or all of those authorities to be exercisable by the joint committee, subject to such terms and conditions as the authorities may consider appropriate.
1.3	Where an NHS body consults more than one local authority on a proposal for a substantial development of the health service or a substantial variation in the provision of such a service, those authorities are required to appoint a joint committee for the purposes of the consultation. Only that Joint Committee may: <ul style="list-style-type: none"> • make comments on the proposal to the NHS body; • require the provision of information about the proposal; • require an officer of the NHS body to attend before it to answer questions in connection with the proposal.
1.4	This Joint Committee has been established on a task and finish basis, by Essex Health Overview Policy and Scrutiny Committee (County Council), Southend-on-Sea People Scrutiny Committee (Unitary Council) and Thurrock Health & Wellbeing Overview and Scrutiny Committee (Unitary Council).
2.	Purpose
2.1	The purpose of the Joint Committee is to scrutinise the implementation of the Mid and South Essex Sustainability and Transformation Partnership (STP) and Success Regime (SR) and how any service changes and proposals arising from them meet the needs of the local populations in Essex, Southend and Thurrock, focussing on those matters which may impact upon services provided to patients in those areas.
2.2	The Joint Committee will also act as the mandatory Joint Committee in the event that an NHS body is required to consult on a substantial variation or development in service affecting patients in the 3 local authority areas as a result of the implementation of the STP and SR.
2.3	In receiving formal consultation on a substantial variation or development in

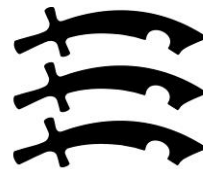
	<p>service, the Joint Committee will consider:-</p> <ul style="list-style-type: none"> • the extent to which the proposals are in the interests of the health service in Essex, Southend and Thurrock; • the impact of the proposals on patient and carer experience and outcomes and on their health and well-being; • the quality of the clinical evidence underlying the proposals; • the extent to which the proposals are financially sustainable. <p>and will make a response to relevant NHS body and other appropriate agencies on the proposals, taking into account the date by which the proposal is to be ratified.</p>
2.4	The Joint Committee will consider and comment on the extent to which patients, the public and other key stakeholders have been involved in the development of the proposals and the extent to which their views have been taken into account as well as the adequacy of public and stakeholder engagement in any formal consultation process.
2.5	Notwithstanding any of the above, the relevant parent bodies may still exercise an overview role in relation to STP's, engaging in governance issues / strategic oversight and coordination across the STP footprints.
2.6	It is anticipated that the Joint Committee will continue its deliberations and hold meetings during the consultation and implementation of STP plans. The Joint Committee will review its remit after three years and also at any time at the request of any of the participating authorities.
3.	Membership/chairing
3.1	The Joint Committee will consist of four members representing Essex, four members representing Southend and four members representing Thurrock, as nominated by the respective health scrutiny committees.
3.2	Each authority may nominate up to two substitute members.
3.3	The proportionality requirement will not apply to the Joint Committee, provided that each authority participating in the Joint Committee agrees to waive that requirement, in accordance with legal requirements and their own constitutional arrangements.
3.4	Individual authorities will decide whether or not to apply political proportionality to their own member nominations.
3.5	The Joint Committee members will elect a Chairman and two Vice-Chairmen at its first meeting, one from each authority, so that each authority is represented in this role.
3.6	The Joint Committee will be asked to agree its Terms of Reference at its first meeting.
3.7	Each member of the Joint Committee will have one vote.

4.	Co-option
4.1	By a simple majority vote, the Joint Committee may at any time agree to co-opt representatives of organisations with an interest or expertise in the issue being scrutinised as non-voting members, but with all other member rights. This may be for a specific subject area or specified duration.
4.2	Any organisation with a co-opted member will be entitled to nominate a substitute member.
5.	Supporting the Joint Committee
5.1	The lead authority will be decided by negotiation with the participating authorities. The lead authority may be changed at any time with the consent of Essex, Southend and Thurrock.
5.2	<p>The lead authority will act as secretary to the Joint Committee. This will include:</p> <ul style="list-style-type: none"> • appointing a lead officer to advise and liaise with the Chairman and Joint Committee members, arrange meeting venues, ensure attendance of witnesses, liaise with the consulting NHS body and other agencies, and produce correspondence and scrutiny reports for submission to the health bodies concerned; • providing administrative support; • organising and minuting meetings.
5.3	The lead authority's Constitution will apply in any relevant matter not covered in these terms of reference.
5.4	The lead authority will bear the staffing costs of arranging, supporting and hosting the meetings of the Joint Committee. Other costs will be apportioned between the authorities. If the Joint Committee agrees any action which involves significant additional costs, such as obtaining expert advice or legal action, the expenditure will be apportioned between participating authorities. Such expenditure, and the apportionment thereof, would be agreed with the participating authorities before it was incurred.
5.5	The non-lead authorities will appoint a link officer to liaise with the lead officer, support liaison back to their respective HOSC and provide support to the members of the Joint Committee.
5.6	Meetings shall be held at venues, dates and times agreed between the participating authorities.
6.	Powers
6.1	<p>In carrying out its function the Joint Committee may:</p> <ul style="list-style-type: none"> • require officers of appropriate local NHS bodies to attend and answer questions; • require appropriate local NHS bodies to provide information about the proposals and to facilitate any site visits requested by the Joint Committee;

	<ul style="list-style-type: none"> • obtain and consider information and evidence from other sources, such as local Healthwatch organisations, patient groups, members of the public, expert advisers, local authority employees and other agencies. This could include, for example, inviting witnesses to attend a Joint Committee meeting; inviting written evidence; site visits; delegating committee members to attend meetings, or meet with interested parties and report back. • make a report and recommendations to the appropriate NHS bodies and other bodies that it determines, including the local authorities which have appointed the joint committee. • consider the NHS bodies' response to its recommendations;
6.2	<p>In the event the Joint Committee is formally consulted upon a substantial variation or development in service as a result of the implementation of the STP, and considers:-</p> <ul style="list-style-type: none"> ➤ it is not satisfied that consultation with the Joint Committee has been adequate in relation to content, method or time allowed; ➤ it is not satisfied that consultation with public, patients and stakeholders has been adequate in relation to content, method or time allowed; ➤ that the proposal would not be in the interests of the health service in its area <p>the Joint Committee will consider the need for further negotiation and discussions with the NHS bodies and any appropriate arbitration.</p>
6.3	<p>If the Joint Committee then remains dissatisfied on the above three points it may make comments to Essex, Southend and Thurrock Councils. Each Council will then consider individually whether or not they wish to refer this matter to the Secretary of State or take any further action.</p>
6.4	<p>The power of referral to the Secretary of State is a matter which will not be delegated to the Joint Committee.</p>
6.5	<p>Each participating local authority will advise the other participating authorities if it is their intention to refer and the date by which it is proposed to do so.</p>
7.	Public involvement
7.1	<p>The Joint Committee will usually meet in public, and the agenda will be available at least five working days in advance of meetings</p>
7.2	<p>The participating authorities will arrange for papers relating to the work of the Joint Committee to be published on their websites, or make links to the agenda and reports published on the lead authority's website as appropriate.</p>
7.3	<p>A press release may be circulated to local media at the start of the process and at other times during the scrutiny process at the discretion and direction of the Chairman and the two Vice Chairmen.</p>
7.4	<p>Patient and voluntary organisations and individuals will be positively encouraged to submit evidence and to attend.</p>
7.5	<p>Members of the public attending meetings and who wish to make a statement at the meeting must notify the clerk by close of business on the working day prior to</p>

	the meeting. Each person will be limited to speaking for a maximum of three minutes. If the person speaking is speaking on behalf of a group / body, a spokesperson must be appointed. The period for statements from members of the public at the meeting will be at the Chairman's discretion and normally will not exceed 15 minutes in total. No response will be provided at the meeting.
8.	Press strategy
8.1	The lead authority will be responsible for issuing press releases on behalf of the Joint Committee and dealing with press enquiries, unless agree otherwise by the Committee.
8.2	Press releases made on behalf of the Joint Committee will be agreed by the Chairman and Vice-Chairmen of the Joint Committee.
8.3	Press releases will be circulated to the link officers.
8.4	These arrangements do not preclude participating local authorities from issuing individual statements to the media provided that it is made clear that these are not made on behalf of the Joint Committee.
9.	Report and recommendations
9.1	The lead authority will prepare a draft report on the deliberations of the Joint Committee, including comments and recommendations agreed by the Committee. Such report(s) will include whether recommendations are based on a majority decision of the Committee or are unanimous. Draft report(s) will be submitted to the representatives of participating authorities for comment.
9.2	Final versions of report(s) will be agreed by the Joint Committee Chairman and two Vice Chairmen.
9.3.	In reaching its conclusions and recommendations, the Joint Committee should aim to achieve consensus. If consensus cannot be achieved, minority reports may be attached as an appendix to the main report. The minority report/s shall be drafted by the appropriate member(s) or authority (ies) concerned.
9.4	Report(s) will include an explanation of the matter reviewed or scrutinised, a summary of the evidence considered, a list of the participants involved in the review or scrutiny; and an explanation of any recommendations on the matter reviewed or scrutinised.
9.5	In addition, in the event the Joint Committee is formally consulted on a substantial variation or development in service, if the Joint Committee makes recommendations to the NHS body and the NHS body disagrees with these recommendations, such steps will be taken as are "reasonably practicable" to try to reach agreement in relation to the subject of the recommendation.
9.6	The Joint Committee itself does not have the power to refer the matter to the Secretary of State.

10.	Quorum for meetings
10.1	The quorum will be a minimum of three members, with at least one from each of the participating authorities. This will should include either the Chairman or one of the Vice Chairmen. Best endeavours will be made in arranging meeting dates to maximise the numbers able to attend from the participating authorities.



Dr Anita Donley OBE
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Date 22nd March 2018

Dear Dr Donley,

Joint Health Overview & Scrutiny Committee
Formal Response to proposed hospital changes in mid and south Essex

Authority

In accordance with the relevant regulations a Joint Health Scrutiny Committee has been established, comprising Councillors from Essex County Council, Thurrock Council and Southend-on-Sea Borough Council (JHOSC) to review proposals, development and implementation of service changes arising from the Mid and South Essex Sustainability and Transformation Partnership (STP).

The JHOSC has agreed to delegate approval to the Chairman and two Vice Chairmen to approve the response to the current consultation, as set out below. Accordingly, we are writing to you in our respective capacities as Chairman and Vice Chairmen of the JHOSC outlining our views as below.

Notwithstanding the above, the relevant Scrutiny Committees at each constituent authority may continue to scrutinise aspects of the STP separately to the JHOSC where they have a particular localised impact (rather than wider footprint implications) and/or strategic significance, or implications on stakeholder relationships within or across adjoining STP areas. The JHOSC will continue to be the consultative body for significant service variations.

Background

The Joint Committee of the CCGs in mid and south Essex launched a public consultation on 30th November 2017. The consultation primarily focuses on proposals to make changes to some specialist hospital services within the acute hospital sector, as well as proposals for the transfer of services from Orsett Hospital in Thurrock to new centres in

the community. The original closing date for the consultation was 9th March 2018. Following our request for an extension, we agreed to your suggestion to extend the deadline for consultation responses to 23rd March 2018.

During the formal consultation period the JHOSC has held two formal meetings, on 20th February 2018 and 13th March 2018 and also held two informal meetings. The papers for the formal meetings are available on each of the participating local authority websites.

Formal response

We would like to thank your STP colleagues for their assistance in helping the JHOSC review the current proposals by attending meetings of the JHOSC and providing information as requested. We would particularly like to thank the clinicians who also attended who gave invaluable insights to the clinical considerations behind many of the proposals.

As STPs are developing 5 year plans, the JHOSC will want to have an on-going role in monitoring the STP including any implementation of the current or any subsequent proposals. In submitting this initial response, the JHOSC reserves its right to continue to scrutinise other issues at a later date as it deems fit. This is particularly pertinent for issues the STP continues to develop such as the primary care strategy and transportation strategy (see below).

In formulating this initial response the JHOSC has grouped its comments as follows:-

- Communications and engagement
- Primary Care Strategy
- Community health care
- Workforce plans and impact
- Transport
- Finance
- Stroke services

Communications and engagement

Overall, the JHOSC is content that significant consultation work has been undertaken, and that different methods have been used. However, there seemed to be variations in methods and reach across the footprint and in some cases engagement only gained pace towards the end of the process. The distribution of materials seems to have varied by CCG areas as well.

The Members were concerned that the consultation document itself was lengthy and covered a number of issues which should ideally have been explored separately or in a number of different staggered consultations for example, Orsett Hospital.

Recommendation: That the STP should consider in the future whether having so many topics, however linked, in one consultation, is wise.

With regard to the management of the consultation events, some Members expressed concerns about some of the events which had been held, such as the event held in Southend-on-Sea on 8th February 2018 and the subsequent event on 7th March 2018 were both oversubscribed. Another concern was that in some areas consultation events were scheduled for during office hours, meaning it was difficult for residents to attend. The JHOSC suggests that in future, the STP should consider 'filtering' attendances to help prevent this and the STP should have had contingencies in place and also have

some flexibility and slack within the timetable to allow for extra events to be scheduled to meet demand.

The JHOSC has been pleased to see the increasing use of social media as a core component of your engagement and makes the following **recommendation**: That the STP continues use of social media in future consultations.

The JHOSC heard about the invaluable work of the local Healthwatch organisations and accordingly makes the following **recommendation**: **That the CCG Joint Cttee continue to involve the local Healthwatch organisations in its work as they provide a vital independent voice of patients.**

Primary Care Strategy

The JHOSC sees primary care / locality based work as key to the success of the proposals to create a sustainable health and care system in Mid and South Essex. We note that creating sustainable primary care fit for the 21st Century is referenced within the 'Case for Change' document, but that plans remain significantly underdeveloped.

Demand on hospital services both in terms of A&E attendances and unplanned hospital admissions is directly related to the capacity and capability of primary care to offer sufficient appointments to patients, and to diagnose and effectively manage long term health conditions.

The JHOSC recognises that there are systemic problems within primary care in Mid and South Essex including a significant workforce gap leading to unacceptably long waits for appointments, fragmentation of services and an estate that is not fit for purpose. We believe that unless these issues are addressed with a new model of care and significant additional capital and revenue investment in primary and community health care, that avoidable demand on hospital services will continue to increase.

We have concerns that the primary care strategy for the entire footprint has not been prioritised and developed earlier and in conjunction with plans for hospital reconfiguration.

We note that the situation in Thurrock where integrated community medical centres/hubs are more advanced is different to that elsewhere in the footprint and would like to see the learning from Thurrock extended quickly to other parts. We also note that nature of primary care providers and relatively small independent contractors requires that future Primary Care strategy is developed at a locality level, in order to ensure full engagement and clinical leadership of the primary care workforce.

You have advised that a draft Primary Care Strategy will be presented to the Joint Committee of the five CCGs next month before being devolved to the individual CCG Boards for implementation.

Due to the importance of the contribution of primary care to the success of the overall proposals the JHOSC requests early review of the Strategy and will seek assurance that the plans are robust, sustainable and able to achieve the objectives being sought, and most importantly that they are adequately funded in both revenue and capital terms.

Recommendations:

- 1. The locality based STP Primary Care Strategy is developed, that addresses the systemic issues of lack of capacity, variation in clinical quality and fragmentation of services, and that NHS England provides additional adequate capital and revenue funding for its implementation**
- 2. That the JHOSC is able to scrutinise future Primary Care Strategy at the earliest opportunity after the local elections.**

Community health care

The Joint Scrutiny Committee also notes that details relating to community health provision and its integration within the wider STP footprint is currently inadequate. Specifically we would also like to see more details around the proposals relating to the full utilisation of community hospitals in the footprint (with the exception of Orsett – see below).

With regard to the consultation on the closure of Orsett Hospital, we note the assurances given by the current NHS providers and commissioners within a local Memorandum of Understanding, specifically:-

1. That all clinical services provided from Orsett Hospital will continue to be provided within Thurrock, and be migrated to one or more of the four planned Integrated Medical Centres (IMCs).
2. That Orsett Hospital will not close until the IMCs are built and all services have been successfully migrated.

Recommendation: That the JHOSC is provided with, and able to scrutinise, further detail on community health care provision to assure it that it is being fully integrated into the STP plans, including a detailed implementation plan for the transfer of services from Orsett.

Workforce plans and impact

We feel that the document needed much clearer statements about how all parties were going to recruit, develop and re-design the workforce of the future. With a rapidly changing workforce, an ageing population and advancing new technologies we do not feel there are anywhere near clear enough plans for the how the aspirations of the STP are going to be developed. In particular:-

- How will it address those key shortages in primary care that will restrict that sector in supporting acute pressures;
- How will shortages in key specialties be addressed;
- How will a new integrated workforce, working across existing traditional boundaries – e.g. primary and acute be developed;
- How will it work with partners in Adult Social Care to support the workforce shortages and challenges they are facing.

We feel that the development of a Joint Workforce Strategy across all sectors of the health and social care economy is an urgent priority. This must include consideration as to how the NHS and LA's can work together to address some of the critical workforce shortages across the whole social care sector – including independent sector providers.

Recruitment issues and delivering the plan depend on resolving these workforce issues. The JHOSC will want to look at this going forward.

Patient transport and workforce transport

The JHOSC recognise that transportation has been a significant issue of concern during the consultation process and notes that a Green paper has recently been published by the STP discussing future principles of providing transport between the hospitals. The JHOSC appreciates that the final solution for such provision cannot be finalised until the outcomes from the formal consultation exercise are decided and commissioning decisions made.

However at this point the JHOSC remains concerned at the logistics of clinical transfers and the issue around clinical supervision of patients. This is an area which the JHOSC will look at going forward. The JHOSC looks forward to discussing the issues further with key staff such as the lead for this work, Dr Ronan Fenton, the Medical Director for the hospital programme of the STP.

The JHOSC is unsure how 'patient choice' will feature in the proposals going forward.

Recommendation: That the JHOSC is provided with, and able to scrutinise, further detail on patient transport and workforce transport to assure it that it is mitigating the impact of the proposed relocation of certain services.

Finance

The JHOSC is concerned that the STP consultation document did not give a clear financial overview of the challenges facing the health and social care economy. Nor was there a clear direction of travel for how the mid and south Essex health and care economy would achieve financial balance over the next 5 years.

It is clear from the STP proposals that much of the acute reconfiguration is subject to investment in localities. The JHOSC felt that the proposals are lacking in this regard and was disappointed by lack of financial information and reserves the right to make further comments on this area.

The JHOSC welcomes the proposed capital investment for the acute hospitals but needs to understand further the 'conditions' that are attached to the release of the capital from the Treasury, whether the capital is net and so dependent on any land sales for example.

The JHOSC did not think that it was helpful announcing the Trusts merger proposals during the consultation, as this could give the appearance of hiding a very important issue. The JHOSC would want to understand the implications for any future service reconfiguration and has concerns about the impact and timing of the merger.

Recommendation: That the JHOSC is provided with detail on finances to facilitate further scrutiny to assure it that plans are financially credible and sustainable.

Stroke services

The JHOSC received some further clarity around the proposals for stroke services however there is still a lack of detail and an understanding of how it will work and therefore reserves its right to scrutinise further the proposals for stroke services

Recommendation.

The JHOSC also requested some further information / data and looks forward to receiving this shortly.

Conclusion

At this stage, whilst still having concerns about a number of issues, as indicated above (for example the need for the IMCs being open), the JHOSC supports the STP in further progressing its proposals to make changes to some specialist hospital services within the acute sector, as well as proposals for the transfer of services from Orsett Hospital in Thurrock to new centres in the community.

The JHOSC views that the engagement undertaken has been adequate and in some respects very encouraging (e.g. in the use of social media). It still trusts that proposals will be finalised which will be considered to be in the interests of the local health system.

The JHOSC reserves the right to continue its scrutiny of certain aspects of the proposals (as detailed above) to reassure it that the plans being finalised are robust and sustainable, and that sufficient mitigation has been put in place to minimise the impact of some specialist services being relocated (e.g. transportation between hospitals).

Yours sincerely,

Councillor Bernard Arscott
Chairman (JHOSC)
Southend-on-Sea Borough
Council

County Councillor Jo Beavis
Vice Chairman (JHOSC)
Essex County Council

Councillor Graham Snell
Vice Chairman (JHOSC)
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