

Public Document Pack
SOUTHEND-ON-SEA BOROUGH COUNCIL

Cabinet

Date: Tuesday, 18th September, 2018

Time: 2.00 pm

Place: Committee Room 1 - Civic Suite

Contact: Colin Gamble

Email: colingamble@southend.gov.uk

A G E N D A

- 1 Apologies for Absence**
- 2 Declarations of Interest**
- 3 Minutes of the Meeting held on Tuesday 19th June 2018**
- 4 Fire Safety Report**
Report of Deputy Chief Executive (Place) attached
- 5 Connecting Communities Scrutiny Report**
Report of Chief Executive attached
- 6 Maximising the use of Technology - Smart City and Digital Futures Agenda**
Report of Chief Executive attached.
- 7 Mid and South Essex Sustainability & Transformation Partnership - Opposition Motion**
Report of the Deputy Chief Executive (People) attached
- 8 Housing and Homelessness Strategy**
Report of Deputy Chief Executive (People)
- 9 0-19s Framework - Delivering Better Outcomes for Children's Health Services**
Report of Deputy Chief Executive (People) attached
- 10 Access, Parking and Transport Strategy for Southend**
Report of Deputy Chief Executive (Place)
- 11 Annual Public Health Report - Referred Back from People Scrutiny Committee, 10th July 2018**
Report of Deputy Chief Executive (People)
- 12 Notice of Motion from Council, 19th July 2018 - Motor Neurone Disease Charter**
Notice of Motion attached

- 13 Senior Management Arrangements**
Report of Chief Executive
- 14 Monthly Performance Report**
Report circulated separately
- 15 Annual Comments, Compliments and Complaints Report**
Report of Chief Executive attached
- 16 School Admission Arrangements for Community Schools and Coordinated Admission Scheme for Academic Year 2019/20**
Report of Deputy Chief Executive (People) attached
- 17 The Journey of the Child Annual Report**
Report of Deputy Chief Executive (People)
- 18 Outcomes Key Stage 2 & Key Stage 4, Annual Report**
Report of Deputy Chief Executive (People) attached
- 19 Centenary Fields**
Report of Deputy Chief Executive (Place) attached
- 20 Feed and Food Safety Plan**
Report of Deputy Chief Executive (Place) attached
- 21 Fees and Charges Policy**
Report of Chief Executive attached
- 22 Council Debt Position to 31 July 2018**
Report of Chief Executive attached
- 23 Quarter One Treasury Management Report - 2018/19**
Report of Chief Executive attached
- 24 Annual Senior Information Risk Owner (SIRO) Report**
Report of Chief Executive attached
- 25 Regulation of Investigatory Powers Act**
Report of Chief Executive attached
- 26 Minutes of the Meeting of the School Places Working Party held on Tuesday, 12th June, 2018**
- 27 Minutes of the Senior Managers Pay Panel held Tuesday 17th July 2018**
Minutes attached
- 28 Standing Order 46 Report**
Report attached

29 Exclusion of the Public

To agree that, under Section 100(A)(4) of the Local Government Act 1972, the public be excluded from the meeting for the items of business set out below on the grounds that they involve the likely disclosure of exempt information as defined in Part 1 of Schedule 12A to the Act, and that the public interest in maintaining the exemption outweighs the public interest in disclosing the information.

30 SO46 Confidential Report
Report attached

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SOUTHEND-ON-SEA BOROUGH COUNCIL

Meeting of Cabinet

Date: Tuesday, 19th June, 2018

Place: Committee Room 1 - Civic Suite

Present: Councillor J Lamb (Chair)
Councillors H Boyd, M Flewitt, A Moring and L Salter

In Attendance: Councillors B Ayling, D Garne, A Jones and C Mulroney
A Griffin, J K Williams, S Leftley, A Lewis, J Chesterton, J Ruffle,
C Gamble, A Butteriss, E Cooney, Mr G Halksworth, S Houlden,
A Keating, T MacGregor, B Martin, J O'Loughlin, C Robinson and
Mr M Sheppard

Start/End Time: 2.00 - 3.15 pm.

40 Apologies for Absence

Apologies for absence were received from Councillors Courtenay and Cox.

41 Declarations of Interest

The following Members declared an interest as indicated:

(a) Councillor Mulroney – Agenda Item 13 (Wheeled Sports Facility) – Non-pecuniary interest – member of Development Control Committee;

(b) Councillor Jones – Agenda Item 5 (Development Plan Review) in relation to all transport matters – Non-pecuniary interest – son works for C2C;

(c) Councillor Flewitt – Agenda Item 15 (Provision of Syrian Vulnerable Person Resettlement Programme) – Non-pecuniary interest – has been lobbied on this matter by residents;

(d) Councillor Lamb – Agenda Item 6 (Social Value Policy) – Non-pecuniary interest - Trustee of SAVS;

42 Minutes of the Meeting held on Tuesday 13th March 2018

Resolved:

That the Minutes of the meeting held on Tuesday 13th March 2018 be confirmed and signed as a correct record.

43 Community Safety Resources

The Cabinet considered a report of the Deputy Chief Executive (Place) presenting the recommendations of the 2017/18 Scrutiny Review of the Council's

enforcement services and structures and sought approval to fund the proposal for additional resources to support the Community Safety Team.

Resolved:

1. That the findings and conclusions from the Scrutiny review, be noted.
2. That the additional resources and funding of £250,000 p.a. as detailed in sections 4 and 7.2 of the submitted report, be approved.
3. That the new staff be positioned in the Council's Community Safety Unit.

Reasons for Decision:

To enhance the Community Safety Team's capacity through additional funding to enable it to respond to the local partnership tasking requirements and to support delivery of the community safety partnership's strategic priorities particularly around violence and vulnerability.

Other Options:

Not to invest additional resources within the financial year and wait for the proposal to be considered as part of the annual budget cycle. However, doing this would not enable the Council to respond to some immediate and pressing safety concerns.

Note: This is an Executive Function
Eligible for call-in to: Place Scrutiny Committee
Cabinet Member: Cllr Flewitt

44 Southend Development Plan Review: Comprising South Essex Joint Strategic Plan and Southend New Local Plan

The Cabinet considered a report of the Deputy Chief Executive (Place) outlining the proposed changes to national planning policy. The report set out a new approach to reviewing the Development Plan for Southend-on-Sea, including the preparation of a South Essex Joint Strategic Plan (JSP) in partnership with other South Essex local authorities and Essex County Council to provide a statutory framework to guide the preparation of South Essex local plans including a new local plan for Southend (the Southend New Local Plan (SNLP)).

Recommended:

1. That the preparation of a South Essex Joint Strategic Plan and the Southend New Local Plan (SNLP) to provide a positive planning framework to manage and guide regeneration and development in the sub-region and Southend over a twenty year period, be approved.
2. That as part of the preparation of a South Essex Joint Strategic Plan the following documents be approved:
 - A JSP Memorandum of Understanding (set out in Appendix 1 to the submitted report);

- The JSP Preparation timetable (set out in Appendix 3 to the report);
- A Statement of Common Ground (set out in Appendix 2 to the report);
- A Joint Statement of Community Involvement (set out in Appendix 4 to the report) for a six week consultation period, subject to agreement of the Association of South Essex Local Authorities.

3. That as part of the preparation of a Southend New Local Plan the following documents be approved:

- The Local Plan preparation timetable (set out in Appendix 3);
- The Southend Statement of Community Involvement for a six week consultation period, as appropriate (set out in Appendix 5); and
- The production of a number of key evidence base documents to support the preparation of the local plan.

4. That it be noted that the JSP and Southend New Local Plan will replace, once adopted, existing Southend Development Plan documents and other associated documents.

5. That authority be delegated to the Deputy Chief Executive (Place) in consultation with the Cabinet Member for Growth (and any other relevant Cabinet Member) to agree and make amendments to the items described in recommendations 2 and 3 above.

6. That authority be delegated to the Deputy Chief Executive (Place) in consultation with the Cabinet Member for Growth, in conjunction with the Local Development Framework Working Party, to agree and consult on preparatory drafts of the JSP and Southend New Local Plan and associated documentation under Regulation 18 of the Town and Country Planning (Local Planning) (England) 2012.

7. That authority be delegated to the Deputy Chief Executive (Place) in consultation with the Cabinet Member for Growth to amend the Local Development Scheme as set out in Appendix 3, to ensure the described key milestones of the JSP and Southend New Local Plan preparation remain up-to-date.

8. That authority be delegated to the Deputy Chief Executive (Place) in consultation with the Cabinet Member for Growth to agree updates to the South Essex Statement of Common Ground as set out in Appendix 2.

9. That it be noted that the total funding required for this project is £1.466 million, as set out in Appendix 7, and that the funding of £341,000 in 2018/19 be approved, such funding to be met from the Business Transformation Reserve.

10. That it be noted that the remaining funding required of £1.125 million will be considered as part of the 2019/20 budget setting process.

Reasons for Decision:

To ensure the expeditious production of a Joint Strategic Plan for South Essex and a New Local Plan for Southend and associated evidence base to manage and guide future growth and development in the South Essex sub-region and

Southend in a positive and timely manner, where the Council has control of decision making in the public interest as representatives of the local community.

Other Options:

None

Note: This is a Council Function

Called-in to: Place Scrutiny Committee

Cabinet Member: Cllr Courtenay

45 Social Value Policy

The Cabinet considered a report of the Chief Executive setting out the proposed Social Value Policy to be applied across all Council procurement activities from June 2018.

Resolved:

1. That the Council's Social Value Policy from June 2018, as set out in Appendix 1 to the submitted report, be adopted.
2. That the aims, objectives and principles stated in the Policy, be approved.

Reasons for Decision:

To respond to the Public Services (Social Value) Act 2012.

Other Options:

Not to adopt the Policy.

Note: This is an Executive Function

Called-in to: Policy & Resources Scrutiny Committee

Cabinet Member: Cllr Lamb

46 Annual Report and 2017/18 Year End Performance Report

The Cabinet considered a report of the Chief Executive setting out the approach to the Council's Annual Report and the end of year position of the Council's corporate performance for 2017/18 and 2018/19 targets.

Resolved:

1. That the suggested approach to the Council's Annual Report, set out in Appendix 2 to the submitted report and draft design set out in Appendix 3 to the report, be approved.
2. That the 2017/18 end of year performance report and targets for 2018/19, be noted.

Reasons for Decision:

To ensure the Annual Report reflects key achievements of the Council over the last year and signals the direction of travel for the forthcoming year.

Other Options:

There is no requirement to have an Annual Report but it enables the Council to set out its key achievements in one document.

Note: This is an Executive Function

Called-in to: All three Scrutiny Committee

Cabinet Member: as appropriate for the item.

47 Corporate Risk Register 2018/19

The Cabinet considered a report of the Chief Executive presenting the revised 2018/19 Corporate Risk Register.

Resolved:

That the risks identified by the Corporate Management Team (CMT) be included in the 2018/19 Corporate Risk Register (these will be presented to the Audit Committee on 25th July 2018).

Reasons for Decision:

The Corporate Risk Register has been refreshed to reflect the challenges for 2018/19.

Other Options:

None

Note: This is an Executive Function

Called-in to: People and Policy & Resources Scrutiny Committees

Cabinet Member: Cllr Lamb

48 Modern Slavery Statement 2018/19

The Cabinet considered a report of the Chief Executive setting out the proposed Modern Slavery Statement and the further action being undertaken to support work in this area.

Resolved:

That the Council's 2018/19 Modern Slavery Statement (MSS), as set out in Appendix 1 to the submitted report, be approved.

Reasons for Decision:

To respond to the rapidly increasing crime of modern slavery.

Other Options:

Not to publish a MSS. This would result in an unclear and uncoordinated approach to MSHT.

Note: This is an Executive Function

Eligible for call-in to: Policy & Resources Scrutiny Committee

Cabinet Member: Cllr Lamb

49 Air Quality

The Cabinet considered a report of the Deputy Chief Executive (Place) proposing the adoption of the Air Quality Action Plan (AQAP) which details the measures to try to improve air quality within Southend-on-Sea and meet the Council's statutory duty to develop an AQAP.

Resolved:

That the statutory duty of the Borough Council as described in the Environment Act 1995 be discharged by accepting and adopting the Air Quality Action Plan for the Air Quality Management Area (Southend-on-Sea Borough Council) (No 1) Order 2016.

Reasons for Decision:

To comply with the statutory duty to try and improve air quality in the Borough through the development of an AQAP

Other Options:

None.

Note: This is an Executive Function

Called-in to: Place Scrutiny Committee

Cabinet Member: Cllr Flewitt

50 Ambition Southend: Skills and Labour Market Strategy

The Cabinet considered a report of the Deputy Chief Executive (Place) providing an update on the development of a Skills and Labour Market Strategy for Southend-on-Sea 2018-2022.

Resolved:

That the Ambition Southend: Skills and Labour Market Strategy for Southend-on-Sea, be adopted.

Reasons for Decision:

To improve the Southend skills support landscape, raise ambition and skills levels, increase employment opportunities in local jobs and enable economic growth.

Other options:

Not to pursue the development of a Strategy and allow the market to continue as it is.

Note: This is an Executive Function

Called-in to: Place Scrutiny Committee

Cabinet Member: Cllr Courtenay

51 Gambling Policy Review

The Cabinet considered a report of the Deputy Chief Executive (Place) setting out the legal obligations on the Council, acting as the Licensing Authority, and the timetable for the review in respect of the Gambling Licensing Policy.

Recommended:

That the draft revised Gambling Licensing Policy, be approved to enable formal consultation to commence.

Reasons for Decision:

To enable the Council to comply with its statutory duty under Section 349 of The Gambling Act 2005.

Other Options:

None.

Note: This is a Council Function

Eligible for call-in to: Place Scrutiny Committee

Cabinet Member: Cllr Flewitt

52 Wheeled Sports Facility

The Cabinet considered a report of the Deputy Chief Executive (Place) setting out the results of the consultation on the sites for a wheeled sports facility in the central area of the town. The report sought approval to allocate a minimum of 500m² of the former Warrior Square Swim Centre site for the installation of a wheeled sports facility and to progress the project.

Resolved:

1. That the results of the consultation as set out in Appendix 1 to the submitted report be noted and the use of the most popular location, an area of the former Warrior Square Swim Centre site, for a wheeled sports facility, be approved.
2. That a minimum of 500m² of the former Warrior Square Swim Centre site be allocated for the installation of a wheeled sports facility.
3. That it be acknowledged that the creation of a wheeled sports facility in this location will reduce the amount of space available for future development.

4. That the project be progressed by way of the submission of a planning application, the works being put out to tender and the appointment of a contractor to construct a wheeled sports facility.

5. That it be noted that the full £250,000 capital budget may need to be re-profiled in 2018/19 if the delivery programme is ahead of schedule.

Reasons for Decision:

To develop the wheeled sports facility on the former Warrior Square Swim Centre site.

Other Options:

Not to install a wheeled sports facility in a town centre location or install the facility at the second choice location or a location outside of the central area.

Note: This is an Executive Function

Called-in to: Place Scrutiny Committee

Cabinet Member: Cllr Courtenay

53 Joint Targeted Area Inspection

The Cabinet considered a report of the Deputy Chief Executive (People) summarising the Joint Targeted Area Inspection findings and set out the action being taken in relation to the findings.

Resolved:

1. That the report be noted.

2. That the progress against the action plan be reported to Cabinet for assurance in the journey of the Child Annual Report.

Reasons for Decision:

Safeguarding children is a statutory duty of the Council and Members need to be assured that progress is being made against the action plan in order to discharge this duty. The progress against the action plan will be brought back to Cabinet in February 2019.

Other Options:

None.

Note: This is an Executive Function

Called-in to: People Scrutiny Committee

Cabinet Member: Cllr Boyd

54 Research, findings and recommendations on current and future provision of the Syrian Vulnerable Person Resettlement Programme

The Cabinet considered a report of the Deputy Chief Executive (People) proposing the extension of the Syrian Vulnerable Person Resettlement (SVPR) Programme to enable more families to settle in Southend-on-Sea.

Resolved:

1. That the progress on the current SVPR Programme in Southend-on-Sea, as set out in Section 3 of the submitted report, be noted.
2. That the Programme be extended, in order that more families can settle in Southend-on-Sea, comprising an additional 30 individuals by 2020.
3. That the Director of Adult Services and Housing, be authorised to:
 - Reach agreement with the EELGA, Home Office and other relevant bodies in order to bring 30 additional individuals to Southend, reporting on progress at the Corporate Management Team and Cabinet at regular intervals;
 - Reach agreement with local partners in order to identify the local resource to welcome future families;
 - Research and commission effective ways of delivering support services in order to achieve economies of scale.

Reason for Decision:

This is a key national issue that needs to be addressed by the Council

Other Options:

That no commitment is given to settle further families within the Borough.

Note: This is an Executive Function

Called-in to: People Scrutiny Committee

Cabinet Member: Cllr Salter

55 Consultation on St Mary's Prittlewell CofE Primary School Permanent Expansion following a period of Temporary Expansion

The Cabinet considered a report of the Deputy Chief Executive (People) seeking agreement to go out to formal consultation to change the current temporary expansion of pupil admission numbers at St Mary's Prittlewell CofE Primary School to a permanent arrangement.

Resolved:

That a formal consultation process to gauge stakeholder and public opinion on making the current temporary expansion at St Mary's Prittlewell CofE Primary School permanent by setting their admission number at 90 per year group, be approved.

Reasons for Decision:

To consult with stakeholders and obtain public opinion on making the temporary expansion permanent at St Mary's Prittlewell CofE Primary School.

Other Options:

The school could return to an admission number of 60 or increase to a higher admission number of 120. The latter option would require capital investment to increase the school's accommodation.

Note: This is an Executive Function
Eligible for call-in to: People Scrutiny Committee
Cabinet Member: Cllr Boyd

56 Annual Public Health Report

The Cabinet considered a report of the Deputy Chief Executive (People) presenting the 2017 Annual Report of the Director of Public Health.

Resolved:

That the content and recommendations of the 2017 Annual Report of the Director of Public Health, be noted.

Reasons for Decision:

The Health and Social Care Act 2012 requires Directors of Public Health to prepare an annual report on the health of the local population.

Other Options:

None.

Note: This is an Executive Function
Called-in to: People Scrutiny Committee
Cabinet Member: Cllr Salter

57 Annual Treasury Management Report 2017/18

The Cabinet considered a report of the Chief Executive detailing the treasury activity for the period from April 2017 to March 2018 and reviewed performance against the Prudential Indicators for 2017/18.

Recommended:

1. That the Annual Treasury Management Report for 2017/18 and the outturn Prudential Indicators for 2017/18, be approved.
2. That it be noted that the financing of 2017/18 capital expenditure of £60.996m has been funded in accordance with the schedule set out in Table 1 of section 4 of the submitted report.

3. That it be noted that the Capital Financing and Treasury Management were carried out in accordance with statutory requirements, good practice and in compliance with the CIPFA (The Chartered Institute of Public Finance and Accountancy) Prudential Code during 2017/18.

4. That, in respect of the return on investment and borrowing, the following be noted:

- The loan and investment portfolios were actively managed to minimise cost and maximise interest earned, whilst maintaining a low level of risk;
- £2.05m of interest was earned during the whole of 2017/18 at an average rate of 2.49%. This is 2.27% over the benchmark of the average 7 day LIBID (London Interbank Bid Rate) and 2.14% over the average bank base rate;
- The level of borrowing from the Public Works Loan Board (PWLB) (excluding debt relating to services transferred from Essex County Council on 1st April 1998) remained at the same level of £227.8m (Housing Revenue Account (HRA): £77.0m, General Fund (GF): £150.8m) throughout 2017/18.
- The level of financing for 'invest to save' schemes increased from £7.90m to 8.74m by the end of 2017/18.

Reasons for Decision:

To comply with the CIPFA Code of Practice for Treasury Management in the public sector and the CIPFA Prudential Code.

Other options:

None.

Note: This is a Council Function

Eligible for call-in to: Policy & Resources Scrutiny Committee

Cabinet Member: Cllr Lamb

58 Provisional Capital Outturn Report 2017/18

The Cabinet considered a report of the Chief Executive outlining the capital programme outturn for 2017/18 and sought approval for the relevant budget carry forwards and accelerated delivery requests and in-year amendments for the current approved programme.

Recommended:

1. That it be noted that the expenditure on the capital programme for 2017/18 totalled £60.996m against a budget of £64.324m, a delivery of 94.8%.

2. That the relevant budget carry forwards and accelerated delivery requests totalling a net £4.206m moving into 2018/19, as set out in Appendices 1 and 2 to the submitted report, be approved.

3. That the virements, reprofiles and amendments and new external funding for schemes, as detailed in Appendices 3, 4 and 5 of the report, be noted.

4. That the relevant changes to the budget identified since the approved capital programme was set at Council on 22nd February 2018, as detailed in Appendix 6 to the report, be approved.

5. That it be noted that the above changes will result in an amended Capital Programme of £214.971m for the period 2018/19 to 2021/22, as detailed in Appendix 7 to the report.

6. That the content of the Community Infrastructure Levy (CIL) Annual Financial Report 2017/18 (included in Appendix 8 to the report), be noted and that the CIL Main Fund receipts from 2017/18 and previous financial years be carried forward until spending plans are reviewed in early 2019/20.

7. That authority be delegated to the Deputy Chief Executive (People) in consultation with Ward Members and the Cabinet Member for Growth to agree how the Ward Neighbourhood Allocations received up until 31st March 2018 (excluding allocation to Leigh Town Council) are to be spent.

Reasons for Decision:

To inform Members of the activity in 2017/18.

Other options:

None.

Note: This is a Council Function

Eligible for call-in to: Policy & Resources Scrutiny Committee

Cabinet Member: Cllr Lamb

59 Revenue Outturn Report 2017/18

The Cabinet considered a report of the Chief Executive on the revenue outturn for 2017/18.

Recommended:

1. That the revenue outturn for the General Fund and HRA for 2017/18, be noted.

2. That the appropriation of revenue funds to and from earmarked reserves, as set out in paragraph 4.6 (General Fund) and paragraph 5.4 (HRA) of the submitted report, be approved.

Reason for Decision:

To advise Members of the financial position of the Council and to approve the appropriation of funds to and from earmarked reserves.

Other options:

None.

Note: This is a Council Function

Eligible for call-in to: Policy & Resources Scrutiny Committee

Cabinet Member: Cllr Lamb

60 Council Debt Position

The Cabinet considered a report of the Chief Executive informing Members of the current outstanding debt to the Council as of 31st March 2018 and debts that had been or are recommended for write-off in the current financial year.

Resolved:

1. That the current outstanding debt position as at 31st March 2018 and the position of debts written off to 31st March 2018, as set out in Appendices A and B to the submitted report, be noted.
2. That the write-offs greater than £25,000, as detailed in Appendix B to the report, be approved.

Reasons for Decision:

All reasonable steps to recover the debt have been taken and therefore where write off is recommended it is the only course of action available.

Other Options:

None.

Note: This is an Executive Function

Eligible for call-in to: Policy & Resources Scrutiny Committee

Cabinet Member: Cllr Lamb

61 Notice of Motion - Jewish Manifesto for Local Government

At the meeting of Council held on 19th April 2018, Members received a Notice of Motion proposing that the Council supports the launch of the Jewish Manifesto for Local Government published by the Board of Deputies, the Security Council for British Jews.

Resolved:

That the Notice of Motion proposing the launch of the Jewish Manifesto for Local Government, be adopted.

Reasons for Decision:

To respond to the Notice of Motion.

Other options:

None.

Note: This is an Executive Function

Called-in to: Policy & Resources Scrutiny Committee

Cabinet Member: Cllr Salter

62 Council Procedure Rule 46

Resolved:

That the submitted report be noted.

Note: This is an Executive Function

Called-in to: Policy & Resources Scrutiny Committee

Cabinet Member: as appropriate for the item

Chairman: _____

Southend-on-Sea Borough Council

Agenda
Item No.

Report of Deputy Chief Executive (Place)

to
Cabinet

on

18th September 2018

Report prepared by: Mark Murphy, Group Manager –
Property and Estate Management

Fire Safety Report

Place Scrutiny Committee

Cabinet Members: Councillors James Courtenay, Tony Cox & Mark Flewitt
Part 1 (Public Agenda Item)

1. Purpose of Report

This report sets out progress in delivering the Council's Fire Safety Review, which was established following the Grenfell Tower fire on the 14th June 2017.

This is a further interim report as the Grenfell Tower Inquiry will not conclude their findings until later in 2018 (or beyond) and whilst the Independent Review of Building Regulations and Fire Safety has been completed the Government has yet to publish its response.

2. Recommendations

2.1. Note and endorse the work undertaken by the Council and South Essex Homes in respect to Fire Safety.

2.2. Note and endorse the Council's initial response to the Independent Review of Building Regulations and Fire Safety.

2.3. Request that a further update be provided to Cabinet to spring 2019.

3. Background

3.1 The Council immediately commissioned a Fire Safety Review following the tragedy, which occurred as a result of the fire at Grenfell Tower. The Review Group comprises representatives of the Council, South Essex Homes and Essex County Fire and Rescue Service. In addition, the Council established an internal Fire Safety Meeting Group, chaired by the Deputy Chief Executive (Place) to examine any Council-specific actions identified as a result of the Review and to co-ordinate responses sought by Government Departments.

- 3.2 The Council and South Essex Homes have already confirmed their commitment to progressively bring their properties in line with current Building Regulations, where appropriate, particularly in respect to fire safety and accessibility.

Capital Investments

- 3.3 All of the Council's operational buildings, alongside those managed by South Essex Homes, meet the regulatory standards in place when they were constructed, extended or altered and have up to date and reviewed Fire Risk Assessments in place. Where appropriate these risk assessments are undertaken in liaison with Essex Fire and Rescue Service.

- 3.4 South Essex Homes has completed a number of fire safety works in addition to those set out in the Fire Safety Report considered by Cabinet at its meeting on the 13th March 2018 including:

- Installation of new 'Gerda' Fire doors and screens to 'Riverstone' and 'Barringtons'. Works have been tendered and the submissions are currently being evaluated. Given the 'lead in' time for the new specialist doors and screens is it anticipated that works will commence in November 2018 with a completion date of March 2019.
- Upgrading of fire doors and screens to 'sheltered' properties. Works have been tendered and the contract awarded. It is expected that works will commence by October 2018 and the upgrade works will be completed late 2019.
- Installation of Sprinklers to Hostels. Work is programmed to be completed in August 2018.
- Smoke vents to Tower Blocks. Works are currently out to tender and works are expected to be completed by December 2018.
- Mornington House fire stopping. These works are to be undertaken in conjunction with the fire upgrade works in the sheltered properties and works will be undertaken towards the front of the programme, so works are programmed to commence in September 2018

- 3.5 South Essex Homes continues to work with Essex Fire and Rescue in relation to the role of sprinklers in its high rise buildings and reviews this position on a regular basis as part of its programme of Fire Risk Assessments.

- 3.6 The Council is taking forward a range of fire safety works across its operational property estate initially focused on buildings identified as high priority and on improving fire compartmentation, means of escape, fire information and alarm systems. Works currently in progress include:
- Replacement of fire doors and fire related works within Civic One, Civic Two, Southend Pier, Southend Leisure and Tennis Centre; Delaware House and Priory House; Project 49 and the Viking Centre.
 - Installation of Premises Information Boxes at all high priority buildings as well as University Square Car Park and the Civic Centre North Car Park.
 - Installation of additional fire signage at the Beecroft Car Park and Civic Centre Underground North Car Park.
 - Installation of new fire escape doors at Civic Centre Underground North Car Park.
- 3.7 Further works are currently out to tender for Shoebury and Chase Sports Centres; Southend Crematorium; the Cemetery and the Cliffs Pavilion.
- 3.8 The Council has also undertaken a joint review with Essex Fire and Rescue Service to consider the impact of a fire similar to that which occurred earlier this year at Tyler's Avenue Car Park in each of its three underground or basement car parks. Works have been procured for Beecroft Car Park and Civic Centre Underground North Car Park in response to the recommendation from this review and a more detailed assessment is being undertaken in respect to University Square Car Park

Independent Review of Building Regulations and Fire Safety

- 3.9 The Independent Review of Building Regulations and Fire Safety 'Building a Safer Future', undertaken by Dame Judith Hackitt, published its Final Report in May 2018.
- 3.10 The reports sets out 53 recommendations focused on:
- A new regulatory framework
 - Design, construction and refurbishment
 - Occupation and maintenance
 - Residents' voice
 - Competence
 - Guidance and monitoring to support building safety
 - Products
 - Golden thread of building information
 - Procurement and supply
 - International examples
- 3.11 The Government has yet to publish its response to the recommendations set out in the report so it is not yet possible to consider some of the ramifications of the proposed new regulatory framework and the role of the proposed 'Joint Competent Authority'. The recommendation also predominantly relate to only

High Rise Residential Buildings (HRRBs) defined as being of 10 storeys or higher.

- 3.12 Notwithstanding the above, the Council and South Essex Homes could initiate initial responses to three of the main areas of recommendations relating to the role of dutyholders; residents' voice; competence; and golden thread of building information. In addition, it is recommended that the Council adopt these actions in relation to all buildings and not just those defined as HRRBs in the Review.
- 3.13 The Review recommends a new role of 'dutyholder'. A dutyholder would be required to:
- take such safety precautions as may reasonably be required to ensure building safety risk is reduced so far as is reasonably practicable;
 - ensure that information management systems are in place in order to maintain relevant documentation and compile and maintain a safety case file;
 - ensure that there is a resident engagement strategy and that residents receive information on fire safety in an accessible manner; and
 - handover all of the relevant information to a new dutyholder when a building changes hands.
- 3.14 It is considered that this is a sensible approach in relation to all of the buildings operated by the Council and South Essex Homes and that the dutyholder responsibility should be discharged by the Property Teams within each organisation as they possess the technical expertise to undertake the role. As such it is proposed that all works would require a 'building approval' confirming that they will not have an impact on fire safety. This approach will also assist the Council in ensuring no works are undertaken to listed buildings without appropriate approval.
- 3.15 The Council's Property team is currently reviewing software based systems that would support this approach, which would also be adopted by South Essex Homes.
- 3.16 South Essex Homes already operates a successful approach to resident engagement, which enables residents to raise concerns. It is recommended that the Council installs signage across its property stock, recognising that about 80% of operational buildings are not permanently staffed, to enable residents and visitors to electronically report any faults or concerns. This will link into the current work being undertaken on the Council's website to enhance customer reporting.
- 3.17 The Council already ensures that a fire engineer is employed as part of any major design works appointment and this will continue.
- 3.18 One of the roles of the property teams within the Council and South Essex Homes will be to ensure a digital record of all works is maintained from design and construction through any refurbishments to demolition. This is now established good practice within both organisations.

- 3.19 At present building regulations and/or standards have not been amended to require the installation of fire suppressant systems (most commonly sprinkler systems) in the majority of properties. In addition, existing properties are required to meet the building standards in place when they were constructed or went through a significant renovation although they are also subject to annual Fire Risk Assessments.
- 3.20 As stated previously, the Council and South Essex Homes continue to work with Essex Fire and Rescue in relation to the role of sprinklers in its high rise buildings and reviews this position on a regular basis as part of its programme of Fire Risk Assessments. These periodic reviews will continue and will also be informed by any changes to legislation either in the form of changes to Building Regulations or other statutory advice.
- 3.21 South Essex Homes has completed the retrofitting of sprinklers in hostels as these are deemed high priority buildings and has also fitted sprinklers in Mornington House due to the nature of its design and construction. Sprinklers have also been installed in the bin stores at high rise buildings following a risk assessment undertaken in conjunction with Essex Fire and Rescue.
- 3.22 The Council is also actively considering the appropriateness of fire suppressant systems in all of its new build projects and these are included in the design of the new residential care home and day centre as well as the design for the new pavilion on Southend Pier. All new building projects will be fully assessed in respect to the appropriateness of installing fire suppressant in all, or part, of the build taking into account life safety, business continuity and insurance requirements. Where required for life safety fire suppressant systems are always installed.
- 3.23 The Government is currently consulting on banning the use of combustible materials on the external walls of high-rise residential buildings. The Council supports this approach and is fully committed to not using combustible materials in the inner leaf, insulation and cladding that are used in external wall systems on any building of over 18 metres in height.

4. Other Options

- 4.1. The Council could decide to maintain all operational properties in their current condition with fire improvement works and, where practicable, to bring them up to the requirements of the latest Building Regulations when they next undergo major alterations and/or extension. All operational buildings would still meet statutory requirements although it could be argued that the Council would not be meeting the section of the Regulatory Reform (Fire Safety) Order 2005 that requires Employers to 'put in place, and maintain, appropriate fire safety measures'. This option has, therefore been discounted.

- 4.2. The Council could maintain the current arrangements whereby individual building managers are identified as responsible for the buildings within which they operate. However, they will not necessarily have the knowledge and expertise to assess the impact of works on the overall fire strategy for the building whilst the majority of the Council's operational buildings do not have a permanent staff presence on site. This option has, therefore, been discounted.
- 4.3 The Council could commit to the immediate adoption of all recommendations set out within the Independent Review of Building Regulations and Fire Safety. However, as the Government has yet to issue its formal response to the recommendations the Council could take action that is contrary to the Government's formal policy. This option has, therefore, been discounted.

5. Reasons for Recommendations

- 5.1.1 The Council has undertaken a fundamental review of its fire safety policies and procedures; reviewed its property stock; and put in place appropriate resources (financial and other) to ensure that it maintains its buildings in a safe condition whilst upgrading them where this is appropriate and practicable.
- 5.1.2 The Council has also recognised its 'community leadership' role in respect to fire safety and engaged with partners and the private sector to ensure residents, employees and visitors across the Borough are housed in, work in or visit safe premises.
- 5.1.3 The Council has considered the recommendations of the Independent Review of Building Regulations and Fire Safety and determined that it should take immediate steps to assess and enhance its duty holder requirements and to enhance opportunities for members of the public to raise concerns.

6. Corporate Implications

6.1 Contribution to Council's Vision & Corporate Priorities

- 6.1.1 Within the Council's Corporate Priorities is a commitment to 'Create a safe environment across the town for residents, workers and visitors'. Ensuring all of its buildings meet fire safety standards is a key element in delivering against this priority.

6.2 Financial Implications

- 6.2.1 The Council has allocated £750,000 per annum, up to 2019/20 in its current capital programme for property refurbishment works and a further £500,000 in each of 2018/19 and 2019/20 specifically for fire improvement works. Other capital projects such as the Library Review Programme have also enabled the Council to invest in improving its corporate property stock.
- 6.2.2 South Essex Homes has an agreed capital programme for enhancement across its property portfolio.

- 6.2.3 Should the Council determine that sprinklers should be installed in all high rise properties this will have budget implications outside of the above allocations.
- 6.3 Legal Implications
- 6.3.1 Buildings are required to comply with the relevant Building Regulations in place at the time of their construction or when they are extended or altered. These requirements are set out in the Building Regulation 2010 and the accompanying suite of Approved Document that support the technical “Parts” of the building regulations’ requirements.
- 6.3.2 As Building Regulations are not retrospective whilst buildings will comply with the regulations in place when they were built, extended or altered they are unlikely to meet the requirements of the latest Building Regulations. This is best illustrated by the issue of smoke alarms. Current Building Regulations require that new dwelling houses (residential properties) have mains supplied smoke detectors, which are linked to each other. However, the majority of residential properties have battery supplied detectors at best and many have no smoke detection at all.
- 6.3.3 In relation to fire safety employers (and/or building owners or occupiers) are required to comply with the Regulatory Reform (Fire Safety) Order 2005. This principally requires that employers (and/or building owners or occupiers):
- carry out a fire risk assessment of the premises and review it regularly
 - tell staff or their representatives about the risks you’ve identified
 - put in place, and maintain, appropriate fire safety measures
 - plan for an emergency
 - provide staff information, fire safety instruction and training
- 6.4 People Implications
- 6.4.1 The Council has a statutory requirement to ensure that all staff, tenants, residents and visitors/service users are using a safe building that complies with the Regulatory Reform (Fire Safety) Order 2005.
- 6.5 Property Implications
- 6.5.1 All of the Council’s operational buildings, alongside those managed by South Essex Homes, meet the regulatory standards in place when they were constructed, extended or altered and have up to date and reviewed Fire Risk Assessments in place.
- 6.5.2 It is the aim of the Council and South Essex Homes to progressively bring their properties in line with current Building Regulations, where appropriate and practicable, particularly in respect to fire safety and accessibility.
- 6.6 Consultation
- 6.6.1 The Council has established a Tri-Partite Review Group to examine fire safety including representatives from across the Council, South Essex Homes and Essex County Fire and Rescue Service, chaired by the Deputy Chief Executive (Place). As individual building works are taken forward consultation is

undertaken with tenants, employees and service users as well as with statutory bodies such as Historic England where this is appropriate.

6.7 Equalities and Diversity Implications

6.7.1 Fire Risk Assessments take account of the needs of all employees with Personal Emergency Evacuation Plans (PEEPS) in place for any employee who requires one. This is a bespoke 'escape plan' for individuals who may not be able to reach an ultimate place of safety unaided or within a satisfactory period of time in the event of any emergency.

6.8 Risk Assessment

6.8.1 The Council and South Essex Homes undertake a programme of Fire Risk Assessments across their operational property portfolios. All of these assessments are up to date and are reviewed on an annual basis.

6.9 Value for Money

6.9.1 All capital works are procured in accordance with the Council's Corporate Procurement Rules 2015 to ensure best value is obtained.

6.10 Community Safety Implications

6.10.1 The Council has a statutory requirement to ensure that all staff, tenants, residents and visitors/service users are using a safe building that complies with the Regulatory Reform (Fire Safety) Order 2005. The Council currently complies with its obligations under the Order but will be undertaking fire safety enhancements/improvements across a number of its operational buildings to, where practicable, bring them up to the requirements of the latest Building Regulations.

6.11 Environmental Impact

6.11.1 There are no direct environmental implications arising as a result of the works proposed in this report.

7. Background Papers

- Report to Cabinet on 19 September 2017 'Fire Safety Measures following the Grenfell Tower Tragedy' – Minute 307
- Report to Cabinet on 13 March 2018 'Fire Safety Report' – Minute 819
- Independent Review of Building Regulations Final Report - May 2018
- Fire Safety Review 2017 Terms of Reference

8. Appendices

There are no appendices to this report.

Southend-on-Sea Borough Council

Agenda

Item No.

Report of Chief Executive to Cabinet

On 18th September 2018

Report prepared by:
Fiona Abbott

Connecting communities to avoid isolation A Part 1 Agenda Item

1. Purpose of Report

To present the final report of the in depth Scrutiny project entitled 'Connecting communities to avoid isolation'.

2. Recommendations

- 2.1 That Cabinet approves the report and recommendations from the in depth scrutiny project attached at **Appendix 1**.
- 2.2 To note that approval of any recommendations with budget implications will require consideration as part of future years' budget processes prior to implementation.

3. Background

- 3.1 The People Scrutiny Committee selected its topic at the meeting on 11th July 2017 (Minute 170 refers). The project plan was agreed by the Scrutiny Committee on 10th October 2017 (Minute 374 refers).
- 3.2 The specific focus of the review was around exploring issues around connecting communities and isolation focussing on the enabling role of the Council, partners and also the role of elected Members. Some further detail can be found in **Appendix 1**, point 2.
- 3.3 The Member Project Team, which was chaired by Councillor Cheryl Nevin, met on 5 occasions, including a facilitated workshop session on 22nd November and an evidence gathering session on the afternoon of 12th January 2018. The project Team comprised Councillors Helen Boyd, Steve Buckley, Mo Butler, David Garston, Chris Walker, Margaret Borton, Caroline Endersby and Lawrence Davies. Officer support was provided by Sharon Houlden, Sarah Baker, Fiona Abbott and Rob Walters.
- 3.4 The People Scrutiny Committee received a detailed update at the meeting on 30th January 2018 (Minute 696 refers) and in April 2018 agreed that the project would be concluded early in the 18/19 Municipal Year (Minute 899 refers).

- 3.5 The final report from the in depth scrutiny review undertaken in 2017/18 has now been agreed by the People Scrutiny Committee at the meeting held on 19th July 2018 (Minute 151 refers).

4 Recommendations

- 4.1 In accordance with Scrutiny Procedure Rule 10 (Part 4 (e) of the Constitution), the in depth scrutiny report is now attached at **Appendix 1** for approval by Cabinet. It should be noted that approval of any recommendations with budget implications will require consideration as part of future years' budget processes prior to implementation.
- 4.2 The recommendations from the review are as follows:-
1. That following on from the workshop in January 2018, the Service Transformation Team continue to work with members to establish how some of the key messages can be explored further. This will be aligned closely to the Southend 2050 work and, in particular, the Locality Approach.
 2. To promote the offer of skills training to give residents confidence to write bids, to access grants and funding, to build trust between residents and the Council, enabling small groups to become more sustainable. Service Transformation are developing a template/checklist in this respect. An example of a successful small bid will be made available on the website in the near future.
 3. To undertake a review of the Councils event policies with a view to removing unnecessary obstacles for small events to happen led by community groups.
 4. Create an environment where local groups can link up with each other with the assistance of community catalysts/mentors/champions.
 5. Continue to promote a strength based approach via our community hubs through a variety of means, including the website, in support of the Locality Approach.

5. Other Options

Not applicable.

6. Corporate Implications

- 6.1 Contribution to Council's Vision and Critical Priorities – Becoming an excellent and high performing organisation.
- 6.2 Financial Implications – there are financial implications to some recommendations but as yet they are unquantifiable. However, any recommendations progressing with associated financial implications will need to go through the annual budgetary process before implementation, as currently no revenue or capital budgets exist for the proposals.
- 6.3 Legal Implications – none.
- 6.4 People Implications – none.
- 6.5 Property Implications – none.
- 6.6 Consultation – as described in report.
- 6.7 Equalities Analysis – Implementation of the recommendations needs to have regard as to whether loneliness disproportionately affects people of a particular

age, people with a disability or people with English as second language, women and children etc. Whilst all groups can experience loneliness, evidence suggests that key determining factors such as sexual orientation, ethnicity, environment, income and age often have an impact. As the implementation of the recommendations progresses, officers will develop strategies to ensure that the circumstances of each person are considered.

6.8 Risk Assessment – none.

7. Background Papers

Notes from project team meetings, emails to witnesses.

8. Appendix

Appendix 1 – in depth scrutiny project report

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Connecting communities to avoid isolation Scrutiny Review

1. Background

At the meeting on the 11th July 2017, the People Scrutiny Committee agreed that its in depth project for the current municipal year would be on the following topic – ‘Connecting communities to avoid isolation’ (Minute 170 refers). The membership of the project team was Councillor Cheryl Nevin (Chairman), Councillors Helen Boyd, Steve Buckley, Mo Butler, David Garston, Chris Walker, Margaret Borton, Caroline Endersby and Lawrence Davies.

The project plan was agreed by the project team in October 2017 and endorsed at the People Scrutiny Committee on 10th October 2017 (Minute 374 refers). Updates were taken to the Committee meetings on 28th November 2017 (Minute 518 refers) and 30th January 2018 (Minute 696 refers).

The project team held 5 meetings in total, including a facilitated workshop session on 22nd November and an evidence gathering session on the afternoon of 12th January 2018.

2. Background / Context

According to an Age UK study¹, loneliness and isolation, or social isolation, are often discussed together and even used interchangeably. While they are related, they are distinct concepts.

It has been established that loneliness can be understood as an individual’s personal, subjective sense of lacking desired affection, closeness, and social interaction with others. Although loneliness has a social aspect, it is also defined by an individual’s subjective emotional state. Loneliness is more dependent on the quality than the number of relationships.

Age UK explain that social isolation refers to a lack of contact with family or friends, community involvement, or access to services. It is possible to be lonely but not to be socially isolated - research shows that it is also quite possible to be socially isolated but not lonely. Some people who live on their own or in remote places may not feel or report loneliness.

Loneliness causes feelings of disconnectedness from others, and not belonging, but it is not just an unpleasant experience, persistent loneliness can have profound impacts on physical and mental health, and quality of life. For example, loneliness can be as harmful for our health as smoking 15 cigarettes.

¹ https://www.ageuk.org.uk/documents/en-gb/for-professionals/research/age_uk_evidence_review_on_loneliness_june_2015.pdf?dtrk=true
accessed on 11th June 2018

Age UK highlight that studies have also found that loneliness leads to poor lifestyle behaviours; for example, alcohol has been shown to be used by people in order to alleviate a sense of a meaningless life, depression, anxiety and loneliness. Studies have also found a link with drug abuse and bulimia and loneliness. But loneliness does not just directly affect health and well-being; it can also become a vicious circle: research has shown that lonely people are more likely to view social encounters with more cynicism and mistrust, rate others and themselves more negatively, and expect others to reject them. In addition, lonely people tend to adopt behaviours that increase their likelihood of rejection.

3. The review

The scrutiny review explored issues around connecting communities and isolation focussing on the enabling role of the Council, partners and also the role of elected members.

The agreed project plan stated:

The central aim is to reduce social exclusion and avoid isolation to increase individuals, families and carer's wellbeing in promoting physical and mental health. This will promote opportunities to connect and mobilise both individuals and communities, encouraging positive relationships with a range of diverse organisations to encourage integrated working.

The project will be instrumental in building a strong and connected community developing assets within a strengths based approach and learning from communities lived experience. Effective partnerships will be supported by appropriate signposting, professional transparency embracing person centred values to enhance co production and empower people to be actively engaged in 'the life of the town'. Through creating innovative opportunities individuals can take control of their own lives within a safe creative and unique community.

The project team held an evidence session in October 2017 and heard about the community engagement work being done locally (for example the intergenerational work at Earls Hall School) and also about the development of an interactive map, which identifies relational opportunities in the community. The project team also heard about work being done by Leeds City Council, who set up "Neighbourhood Network Schemes" over 20 years ago and the positive outcomes from that.

The project team held a workshop session in November 2017 and explored applying an asset based approach in Southend (looking at for example the west central area and east central area localities) and then spent time preparing for the evidence session in January 2018. The project team had previously indicated they would like to speak to a number of people / organisations as part of the review, as set out in the project plan. In the light of discussions at the workshop, the project team agreed the key organisations / people they would like to invite to the session.

The following attended the session on 12th January 2018:

- Traci Dixon and Stuart Long, South Essex Homes

- Alison Semmence, SAVS
- Matt King, Trust Links
- Reverend Hannah Bucke
- Councillor Lesley Salter, Chair Southend Health & Wellbeing Board
- Maurice Sweeting, Chair Education Board
- Gert Sheepers, University of Essex
- Karen Bayliss and Verbena Barker-Newyear, EPUT

The session was run in a world café style and facilitated by officers from the Service Transformation Team within the Department for People at the Council.

The key messages from the session were reported to Scrutiny Members at the People Scrutiny Committee meeting in January 2018 and are attached as an **Annex**.

At the Scrutiny Committee meeting in April 2018 the Committee agreed that the final report would be considered at the first meeting in the 2018/19 Municipal Year.

4. Our Conclusions and Recommendations

- 4.1 That following on from the workshop in January 2018, the Service Transformation Team continue to work with members to establish how some of the key messages can be explored further. This will be aligned closely to the Southend 2050 work and, in particular, the Locality Approach.
- 4.2 To promote the offer of skills training to give residents confidence to write bids, to access grants and funding, to build trust between residents and the Council, enabling small groups to become more sustainable. Service Transformation are developing a template/checklist in this respect. An example of a successful small bid will be made available on the website in the near future.
- 4.3 To undertake a review of the Councils event policies with a view to removing unnecessary obstacles for small events to happen led by community groups.
- 4.4 Create an environment where local groups can link up with each other with the assistance of community catalyts/mentors/champions.
- 4.5 Continue to promote a strength based approach via our community hubs through a variety of means, including the website, in support of the Locality Approach.

In depth scrutiny project – ‘Connecting communities to avoid isolation’
Witness Session 2 & project team meeting
Friday 12th January 2018 - 14.00 – 16.30
Committee Room 5, Civic Suite, Southend-on-Sea

In attendance:-

Project Team

Cllr Cheryl Nevin (Chairman), Cllr Helen Boyd, Cllr Steve Buckley, Cllr Caroline Endersby Cllr David Garston and Cllr Chris Walker

Officer support

Rob Walters, Fiona Abbott and Tobias Hartley

Facilitators

Sarah Baker, Nick Constantine, Maxine Nutkins, Kamil Pachalko, Mark Carrigher and Catherine Benford

Invited guests

Traci Dixon and Stuart Long (South Essex Homes), Alison Semmence (SAVS), Matt King (Trust Links), Reverend Hannah Bucke, Councillor Lesley Salter (Chair Southend Health & Wellbeing Board), Maurice Sweeting (Chair Education Board), Gert Sheepers (University of Essex), Karen Bayliss (EPUT) and Verbena Barker-Newyear (EPUT)

Apologies were received from Cllr Margaret Borton, Cllr Mo Butler and Cllr Lawrence Davies, Sharon Houlden and Mousumi Basu (EPUT)

Notes from feedback discussion

The questions which were explored at the session were:-

1. *How can we build sustainability (and also flexibility)*
2. *How can we put information out and draw people in and have conversations about their lives ('give and get')*
3. *What might be the obstacles involved and how can they be avoided?*
4. *How can we identify and use those willing to be active, connecting to others (community leaders)?*
5. *How you see as the Council role – within existing assets and personal role (using our networks)*

The following key points were highlighted:-

How can we build sustainability (and also flexibility)

- Communities have changed – our role – adapt to it
- Co-production – different narrative needed
- Move from deficit to asset / strengths approach
- Be bold and honest about prevention

- Physical / subtle barriers too – some people need skills / confidence to go to groups etc.
- community infrastructure needs to be sustainably funded to enable the community to build and sustain capacity making its assets available
- Start early! E.g. Kindness Club
- Ensure that we do things with people, not just for people

How can we put information out and draw people in and have conversations about their lives ('give and get')

- Community Champions – Use people already in the public eye, such as postmen, hairdressers and car mechanics that may be able to help in a less intrusive way
- Reach out – use underutilised spaces / methods
- Hear stories and learn from 3rd sector
- Use a range of mediums to reach everyone that may be suffering. Use the typical mediums such as posters, leaflets and events but also try add things such as radio advertisements
- Use video diaries to show people's stories and their journey to loneliness. This can help show people it is not an isolated incident but is a wide-range issue
- Utilise the student community in Southend

What might be the obstacles involved and how can they be avoided?

- Obstacle of bureaucracy sometimes e.g. DBS checks
- Accessing grants / funding can be complicated process and could be simplified and introduce levels of access such as a more simply application process for smaller amounts of money
- Can't do things to people – need to be co-produced
- Embed community ethos when young (start young!)
- People might not enjoy the typical events such as coffee mornings – Include a diverse range of activities that everyone can be part of – be creative
- Some isolated people might lack confidence or suffer from anxiety. Cater for this accordingly and maybe run events that do not necessarily involve lots of other people – need to meet people 'where they are'
- Stigma of isolation/loneliness an issue
- Gender tailoring needed?
- Some isolated people might not have means of transport – Run a transport system to help people get to certain events or places
- Isolation is usually stereotyped to older people – Include younger adults and even children in all campaigning and show that this stereotype is not true

How can we identify and use those willing to be active, connecting to others (community leaders)?

- Have strong asset base already – issue is how they are mobilised
- Use community champions and utilise the infrastructure that is already in place e.g. GPs, milkman, school teachers etc.
- Listen to needs of each community / locality – ask what they want to focus on
- 'bottom up' approach
- Can technology make us more isolated?

How you see as the Council role – within existing assets and personal role (using our networks)

- Council is facilitator and enabler. – need light touch, partner approach instead
- It's around building trust – both ways - don't come with an agenda
- Can use its wide reaching media team and influence to spread the word
- The council could start a PR campaign to build this trust. This should be approachable, easy and simple. Encourage connectivity

Southend-on-Sea Borough Council

Agenda
Item No.

Report of Chief Executive

to

Cabinet

on

18th September 2018

Report prepared by: Tim Row (Principal Democratic Services Officer), Nick Corrigan (Director of Digital Futures)

Maximising the Use of Technology through the Smart City and Digital Futures Agenda

Place Scrutiny Committee
Cabinet Member: Councillor Moring
Part 1 (Public Agenda Item)

1. Purpose of Report

- 1.1 To present the draft report on the findings of the scrutiny project entitled "Maximising the Use of Technology through the Smart City and Digital Futures Agenda".

2. Recommendations

- 2.1 That the report and conclusions from the in depth scrutiny project, detailed at Section 4 be agreed.
- 2.2 That the SMART City agenda and its associated programme 2017/20 through the 'People Management, Accommodation and Digital Strategy Working Party' to be chaired by the Cabinet Member for Digital Futures.
- 2.3 That the Council takes steps to make more effective use of data it has or generates as a tool for intelligent decision making, policy making and commissioning. Steps to include the development of a corporate data warehouse and the inclusion of Business Intelligence and Analytics as a core component of the functionality of the proposed Intelligence Hub. This recommendation is likely to see the formal involvement of academia, the University of Essex for example.
- 2.4 That the Digital Futures Service continues to progress the proof of concept data driven automation of strategies in response to real time events e.g. traffic congestion or poor air quality or through the CISCO KINETIC platform.

3. Background

- 3.1 The Council's 'Digital Strategy 2017/20' including the foundation for its SMART Cities journey was approved by Cabinet in 2017. The document itself contained both routine business as usual tasks as well as longer term strategic actions but,

crucially, laid down the intention to create the foundations for the development of Southend as a SMART City.

Essentially, a Smart City is a place that uses data and information communications technology strategically to:

- provide more efficient, new or enhanced services
- monitor, manage and optimise infrastructure systems
- enable new level of cross sector or cross department collaboration
- use real time data flows to make responses dynamic

- 3.2 At its meeting on 10th July 2017, the Place Scrutiny Committee agreed that its in-depth study for the year should be “Maximising the use of technology through the Smart Cities and Digital Futures agendas” (Minute 151 refers).
- 3.3 The project plan was approved by the Place Scrutiny Committee at its meeting on 9th October 2017 (Minute 361 refers).
- 3.4 The Member Project Team appointed to undertake the study on behalf of the Committee comprised Councillors Kevin Robinson (Chair), Alex Bright, Tino Callaghan, Jonathan Garston, Nigel Folkard, Derek Kenyon, James Moyies, Helen McDonald and David McGlone.
- 3.5 The project team considered a variety of documents and written submissions, heard evidence from a variety of witnesses, organisations and providers through presentations and undertook a site visit to inform their approach.

These included both the Council’s and Government’s Digital Strategies, UK Smart City Index – An assessment of strategy and execution of the UKs leading Smart Cities (published by Navigant Consulting Inc. commissioned by Huawei), the House of Lords Library Briefing ‘Digital Skills in the United Kingdom’ dated 10th August 2017, Smart Places & Connected Communities (published by Microsoft UK & UKAuthority),.

It was noted that the Council’s Digital Strategy had been discussed and noted by the Scrutiny Committee at its meeting on 10th July 2017 (Minute 146 refers). This included the development of an Intelligence Hub and Smart “proof of concept” pilot projects that were being progressed during 2017/20 namely:

SMART Community Safety
SMART Traffic Flow and Parking Management
SMART Health & Well Being (Assistive Living)
SMART Environment Monitoring and Management
SMART Energy

To progress these proof of concept pilots across the 5 service areas, the Council has had significant dialogue with major international technology companies which wish to assist and work with the Borough on its SMART journey. Representatives of these companies were asked to give evidence through presentations and/or written submissions.

3.6 Witness/Evidence Gathering Sessions

3.6.1 Digital Strategy Working Group

Members of the project team were invited to attend a meeting of the Southend Business Partnership's Digital Southend Working Group (DSWG). This took place on 21st November at The Hive, Southend on Sea. The purpose of the Working Group was to bring together interested stakeholders within the Borough of Southend from Education, Local Government, the Private sector and the Community to develop and implement a co-ordinated and jointly owned Action Plan that will support the development of the digital economy and infrastructure as well as promoting Southend as a digital tech destination.

The project team heard of the progress made by the DSWG in understanding what the opportunities are for Southend in relation to the Digital Tech sectors and how all key players can work together.

They also discussed the concept of Smart Cities, thinking in particular about how Southend could host innovative events sometimes known as 'hackathons', to gain some insight into what these are and how they could be an interesting vehicle for exploring some of Southend's 'civic challenges'. A Hackathon is a design sprint-like event in which computer programmers and others involved in software development, including graphic designers, interface designers, project managers, and others, often including subject-matter-experts, collaborate intensively on software projects.¹

The goal of a hackathon is to create usable software. Hackathons tend to have a specific focus, which can include the programming language used, the operating system, an application, an API, or the subject and the demographic group of the programmers. In other cases, there is no restriction on the type of software being created.

As well as running through the relevant issues in the draft 'Ambition Southend' strategy, the DSWG also briefly looked at the other end of the Smart Cities scale – basic digital skills and digital inclusivity – considering what could be done to improve support for those without the skills to take a full advantage of digital services and employment opportunities. This was particularly important to ensure that Southend had the digital skills across all sectors to support economic growth.

3.6.2 Presentations to the Project Team

At its meeting on 28th November 2017, the project team received two presentations. The first was from some very senior level/high ranking officers at Cisco where the project team took the opportunity to discuss the global Smart City vision, trends and case examples, as well as where Southend-on-Sea is in the digital transformation journey, both in terms of potential gaps and potential the next steps for Southend.

Cisco welcomed this opportunity to meet with the project team and confirmed that it had been a great experience partnering with Southend. They explained that we had established high standards in setting up the goals, planning the city digital

¹ The Hackathon Is On: Pitching and Programming the Next Killer App, Steven Leckart, Wired, March 2012

transformation roadmap, and implementing the first phases. They looked forward to working with us to accelerate building the city digital layer, expanding the intelligent network, implementing the digital platform, and achieving the “city lighthouse” global best practice in Southend delivering tangible outcomes for citizens, business community, and the Council.

The second presentation was provided by City Fibre. They gave an overview of their company, the work they do and services they provide, their involvement with other Council’s and what this has enabled. They explained the work currently being undertaken within the Borough in partnership with the Council, which included the provision of 95km of full fibre network in the Borough, the launch of services to businesses via their partner, Onecom (there now over 70 businesses which have ordered services), 31 UTC cameras contracted for connecting to the network, 16 new CCTV cameras in the Borough committed to be on fibre.

The project team was afforded the opportunity to visit “The Crystal” a sustainable cities initiative by Siemens, the world's most sustainable events venue and the largest exhibition on the future of cities. As part of the visit and tour of the building, the project team met representatives of Siemens to discuss Southend’s Smart City programme and Siemens involvement in delivering Smart Cities.

The project team also met with representatives from Vodafone who also commended the Council on its progress to date and ambitions for the future. They also indicated that they could offer significant support in helping in the delivery of our objectives, particularly in the areas of 4G and 5G Wireless coverage and their SMART Cities platform and (Internet of Things) solution.

The project team heard about Vodafone’s plans for the future in this area, more particularly the mobile coverage Essex including the change from 3G to 4G as well as an overview of the development of 5G. They also heard about the projects Vodafone were working on with other cities worldwide as well as in Europe and the UK through the use of public sector IoT (Internet of Things)² The project team took opportunity to highlight the pockets of the town, especially along the seafront or town centre, where there was poor or no signal for mobile users. However, the project was disappointed that there seemed to be no intention by Vodafone to address the ‘not spots’ which were quite significant and that Vodafone intended to boost signal in locations in which it already have a presence but not to fill in the gaps.

4. Next Steps

- 4.1 The SMART City agenda is constantly developing but Southend is currently in a very good advanced position, progressing the pilot schemes and developing its proposal for the creation of an ‘Intelligence Hub’ to serve the Borough.

Opportunities for the further enhancement of the Borough-wide infrastructure continue to arise and these will be capitalised upon wherever possible.

² The Internet of Things (IoT) is the network of physical devices, vehicles, home appliances and other items embedded with electronics, software, sensors, actuators, and connectivity which enables these things to connect and exchange data, creating opportunities for more direct integration of the physical world into computer-based systems, resulting in efficiency improvements, economic benefits and reduced human exertions - Wikipedia

Consideration is now being given to how the Southend approach could be adapted and extended to serve the South Essex Corridor.

4.2 The Council, in partnership with CISCO, is making steady progress in the establishment of its Borough-wide Smart City platform. This platform gathers and cross references data turning it into insight and actionable automated strategies.

4.3 Progress is being made across each of the 5 SMART pilot areas:

SMART Community Safety
SMART Traffic Flow and Parking Management
SMART Health & Well Being (Assistive Living)
SMART Environment Monitoring and Management
SMART Energy

The business case for and evaluation of the optimal location to locate the proposed Intelligence Hub is currently being made.

4.4 The input and assistance from academics who can draw on, interpret and utilise data produced by the Borough forms a key part of our SMART City Journey. This was particularly evident from the representation from the local academic institutions in attendance at the Digital Southend Working Group meeting attended by the project team.

The creation of a data warehouse for the Borough to enable predictive analytics and the publication of open data is a crucial step and is being progressed in 2018.

Many local authorities already publish a raft of data sets for public consumption and Milton Keynes, Bristol and Leeds are famed for it. There is little evidence to suggest that any Local Authority has derived much income from the selling of its data but much to suggest its publication stimulates interest and sometimes innovation from the local population commonly through the production of Apps to meet local needs.

Examples of how some Councils are using Open Data are provided in the links below.

<http://www.mksmart.org/data/>

<https://opendata.bristol.gov.uk/pages/home/>

[http://www.leeds.gov.uk/opendata/Pages/Further%20information%20open%20dat
a.aspx](http://www.leeds.gov.uk/opendata/Pages/Further%20information%20open%20data.aspx)

The effective use of data will necessitate the establishment of a sound and on-going working relationship with an academic body. This has yet to be established and options are being considered.

- 4.5 Crucially, a SMART agenda for any location must be resident and business led; it needs to be informed from the bottom up and include the aims and aspiration of multiple stakeholders of which statutory bodies are but some.

More needs to be done in this regard and the vision for a SMART Southend must be integral to the wide vision for Southend and South Essex 2050.

5. Reasons for Recommendations

- 5.1 Southend like many other locations across the UK has no option but to progress a SMART agenda for the place. There is no doubt that technology will continue to play an ever increasing role in public service delivery and permeate many aspects of everyday life. Failure to progress this agenda would be remiss on the Council's part and, ultimately, disadvantage the borough in a number of ways.

6. Corporate Implications

6.1 Contribution to Council's Vision & Corporate Priorities

The SMART Programme 2017/20 is geared to meeting the multiple stakeholder needs of the borough and not just the Council. Actions and projects within the programme fundamentally underpin all the Council aims and priorities.

Ambitions are geared to addressing the social, economic and environmental challenges faced by the Council.

6.2 Financial Implications

There are revenue consequences associated with the 'SMART City' agenda as currently envisaged, the most significant of which perhaps relate to the running costs of the proposed Intelligence Hub. These are costs which are already budgeted for within the respective teams and do not present the need for any additional financial resource at this time.

In respect of projects aligned to the SMART CITY programmes

These sums will be considered as one as the SMART agenda progresses to ensure that the overall value derived from procurement is greater than the sum of the parts.

6.3 Legal Implications

As the programme is progressively delivered there is the need to comply with the General Data Protection Regulation 2018.

6.4 People Implications

There will without doubt be people implications associated with this agenda. For example, should the Intelligence Hub go ahead and see the co-location of staff engaged in three 24/7 services then this will impact both roles and responsibilities of staff. Moreover, the increasing application of SMART solutions to services over time could impact the daily routines of some staff.

However, none of this above is with precedent and each and every project irrespective of size will address staffing implications in keeping with Council policy.

6.5 Property Implications

The most significant property related aspect of the program as currently envisaged is the creation of an Intelligence Hub for the borough.

This has been estimated to cost in the region of £5m and, at time of writing, both the business case and an options appraisal for the optimal location are being worked on. It should be noted however, that the Hub is also likely to be a significant income generator.

The Operations Centre has yet to be built and the best location for it to be built determined. £500k has been identified in the capital programme to kick start this process and the specification for the Bristol Operations Centre to inform Southend thinking has been sought.

6.6 Consultation

Plans are now in place to include consultation on the role of Digital and the SMART City agenda within the wider consultation on Southend and South Essex 2050.

Consultation on the potential uses of the proposed Intelligence Hub will be extended to colleagues in the NHS, the Community and Voluntary Sector and neighbouring authorities.

Any staff impacted by and project proposal will be consulted in keeping with Council policy.

6.7 Equalities and Diversity Implications

Each element of the programme will need to be subjected to an equalities analysis where appropriate.

6.8 Risk Assessment

There are two sorts of risks associated with this programme. The first is financial and the second in relation to data protect and information governance. Each pilot or sphere of activity should meet two criteria; that it improves outcomes and deliver savings. Pilots will be need to be subjected to a business case and properly evaluated before they are considered suitable for scale up. All pilot project will need to be subjected to the rigours of a Privacy Impact Assessment in keeping with the Council's approach to GDPR 2018.

6.9 Value for Money

All projects including the creation of an Intelligence Hub will be subject to a cost benefit analysis to justify financially or otherwise its progression

6.10 Community Safety Implications

Several aspects of the programme support the Community Safety agenda.

6.11 Environmental Impact

Several aspects of the programme are geared to monitoring, managing and improving the environment.

7. Background Papers

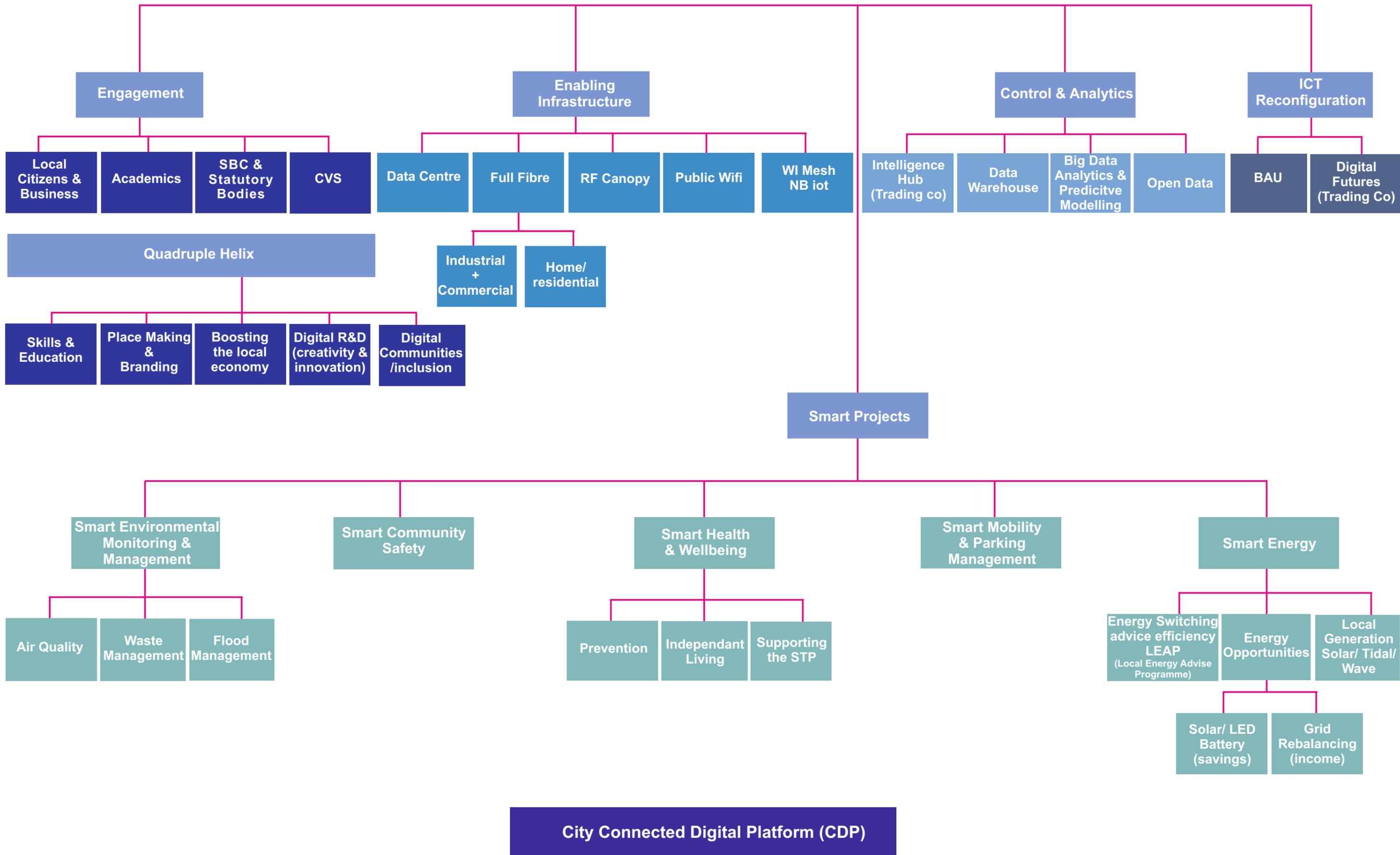
The UK Governments Digital Strategy March 2017

<https://www.gov.uk/government/publications/uk-digital-strategy>

The Council's Digital Strategy 2017/10

8. Appendices

8.1 Southend's SMART Programme 2017/20



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Southend-on-Sea Borough Council

Report of Deputy Chief Executive (People) to Cabinet

On 18th September 2018

Report prepared by:
Nick Faint, Integration Programme Lead &
Fiona Abbott, Principal Democratic Services Officer

Agenda
Item No.

Council Motion re Mid and South Essex Sustainability and Transformation Partnership

People Scrutiny Committee Executive Councillor: Councillor Lesley Salter A Part 1 (Public Agenda Item)

1 Purpose of Report

- 1.1 To update Cabinet about the Motion regarding the Mid and South Essex Sustainability & Transformation Partnership (STP) proposals, considered at the Council meeting on 19 July 2018.

2 Recommendations

- 2.1 That Cabinet notes the resolution made by the Council at its meeting on 19 July 2018 where the Council unanimously agreed that the People Scrutiny Committee should “give due consideration to referral to the Secretary of State, taking these objections and other relevant factors into account” (see paragraph 4.3).
- 2.2 That Cabinet notes that this is a matter for People Scrutiny Committee to make a formal response to or make a referral to the Secretary of State.
- 2.3 That Cabinet notes that there will be a further report to People Scrutiny Committee providing details on the process for making a referral and that People Scrutiny Committee refer the matter to Full Council for a final decision.

3 Background

- 3.1 During the process of public consultation re the proposals for the Mid and South Essex Sustainability and Transformation Partnership (STP) SBC formally

responded. In summary, the report acknowledged the need for transformation within health services across the STP footprint and offered support for the STP proposals once the proposals had been sufficiently developed to address areas of particular concern for SBC.

- 3.2 The areas of concern expressed were; (1) stroke services; (2) investment in Localities; (3) transfers and transport; (4) consolidated discharge and repatriation; (5) capital investment; and (6) workforce.
- 3.3 On 6 July 2018 the CCG Joint Committee made decisions following recommendations made by the STP programme. These recommendations were made following consideration of the public consultation, clinical senate reports and developed proposals for each of the recommendations. The decisions taken by the CCG Joint Committee, in full, are outlined in a formal letter from the CCG Joint Committee Chair to the Chair of the JHOSC, the letter is at **Appendix 1**.

4 Council Motion

- 4.1 Following the CCG Joint Committee decision making process, at the Council meeting on 19 July 2018 a motion for consideration regarding the latest developments in the STP and related healthcare matters. The details of the motion are at **Appendix 2**.
- 4.2 In summary, the motion reiterated the concerns outlined in the Council's response to the STP proposals and further expressed concern at the public consultation process and how it had reached only a small fraction of the population within the STP footprint.
- 4.3 The motion was unanimously supported by all Members present and was carried. Minute 182, Council 19 July 2018 is at **Appendix 2**.
- 4.4 On 30 August 2018 JHOSC considered the decisions made by the CCG Joint Committee. The JHOSC further considered SBC's motion and noted the following;
- 4.4.1 That the JHOSC take full account of SBC's continued objections to the STP; and
- 4.4.2 That SBC's Full Council had requested that SBC's People Scrutiny Committee give due consideration to a referral to the Secretary of State, taking into account SBC's continued objections to the STP, the progress made by the STP regarding SBC's objections and any other relevant factors.

4.5 Given that the council motion requests the People Scrutiny Committee to consider the issue and the fact that JHOSC had noted the motion, it would be appropriate for the matter to be referred direct to the People Scrutiny Committee.

5 Other options

5.1 There are no other options for consideration.

6 Corporate Implications

6.1 Contribution to the Council's Vision and Critical Priorities – Becoming an excellent and high performing organisation.

6.2 Financial Implications – The financial risks to Southend Council, should the STP proposals be delivered, are yet to be identified.

6.3 Legal Implications – Where an NHS body consults with 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 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

6.4 People Implications – The expectation is that the STP proposals will address the workforce (recruitment and retention) issues highlighted in the case for change. There is a significant risk that this is not the case which could lead to greater challenges for workforce and finance.

6.5 Property Implications – Southend Council has offered to Southend health partners a partnership approach which will support the development and progression of Shoebury and St Luke's Health Centres. Capital investment would be required to develop the existing health estate.

6.6 Consultation – as described in the report.

6.7 Equalities Assessment (EA) – an EA was published by the STP during spring 2018. The Directors for Public Health, across the STP worked in partnership with the STP to develop the EIA.

6.8 Risk Assessment – The risks are outlined in this report. There is a risk to the local health and social care system of not doing anything.

7 Background Papers

8 Appendices

8.1 Appendix 1 – CCG Joint Committee decisions taken re STP proposals 6 July 2018

8.2 Appendix 2 – Minute 182, Council 19 July 2018



Sent via email

Mid and South Essex
Joint Commissioning Team

Cllr Bernard Arscott
Chair, Joint Health Overview & Scrutiny Committee

Tel: 01245 398760

9th July 2018

Dear Cllr Arscott

**Re: Your Care in the Best Place – CCG Joint Committee
Decision-Making**

Thank you for attending on the CCG Joint Committee meeting on Friday 6th July. As such, I recognise that you are aware of the outcome, however I am now pleased to write to you formally to confirm the decisions made by the CCG Joint Committee following the public consultation Your Care in the Best Place.

I have listed below the recommendations made and the decisions reached by the CCG Joint Committee.

I understand that the next formal meeting of the Joint HOSC will be 30 August 2018. It would be very helpful if the Committee could consider the decisions made in advance of that meeting and share with us the areas of focus for the Joint HOSC. This will enable the meeting on 30 August to be a productive one where we can hope to resolve any issues that the Joint HOSC may have and move forward into implementation.

Please could you respond to Jo Cripps at your earliest convenience so that system partners can prepare for the next meeting with you and your colleagues.

If you have any queries, please do not hesitate to contact me.

Yours sincerely

Mike Bewick
Independent Chair of CCG Joint Committee

cc. Caroline Russell, Lead AO for the CCG Joint Committee
Jo Cripps, Interim Programme Director, Mid & South Essex STP



Decisions made by CCG Joint Committee, 6 July 2018

Rec No.	Area	Recommendation	CCG Joint Committee Decision
1	Consultation Process	The CCG Joint Committee is requested to confirm that the Committee and its constituent Clinical Commissioning Groups have met their statutory duties and ensured that an effective and robust public consultation process has been undertaken and will be used to inform the decisions made.	Confirmed
2	Consultation principles	The CCG Joint Committee is requested to note the five principles underpinning the future provision of hospital services for mid and south Essex, upon which the public consultation was based: <ol style="list-style-type: none">1. The majority of hospital care will remain local and each hospital will continue to have a 24-hour A&E department that receives ambulances.2. Certain, more specialist, services which require an inpatient stay should be concentrated in one place, where this would improve care and chances of a good recovery.3. Access to specialist emergency services, such as stroke care, should be via the nearest A&E department, where patients would be assessed, treated, stabilised, and if needed, transferred to a specialist team, which may be in a different hospital.4. Planned operations should, where possible, be separate from patients arriving at hospital in an emergency.5. Some hospital services should be provided closer to home (with specific changes to the services currently provided from Orsett Hospital).	Noted
3	A&E Departments	The CCG Joint Committee is asked to approve that: 3.1 Each of the three A&E departments (at Broomfield Hospital, Southend Hospital and Basildon Hospital) continue to operate 24 hours/day and receive blue light ambulances.	Approved
		3.2 Each of the three hospitals (Broomfield Hospital, Southend Hospital and Basildon Hospital) develops	Approved



Rec No.	Area	Recommendation	CCG Joint Committee Decision
		<p>Emergency Care Hubs with specially trained teams to meet the particular care needs of:</p> <ul style="list-style-type: none"> • Older and frail people • Children • Patients in need of urgent medical treatment • Patients in need of urgent surgical treatment 	
4	Treat & Transfer	<p>The CCG Joint Committee is asked to approve:</p> <p>4.1 The concept that a small number of patients with appropriate conditions who would benefit from the care and treatment of a specialist team are stabilised at their local A&E department, and if appropriate, are transferred, using a specialist Clinical Transport Service, to another acute hospital site to receive specialist care (termed the “treat and transfer” model).</p> <p>4.2 That implementation of service changes outlined in this decision-making business case are not commenced until a suitable clinical transfer service is in place that:</p> <ul style="list-style-type: none"> • Has defined clinical protocols in place to ensure the safe transfer of patients • Has identified clinical leadership, both across the three acute hospitals (at group level) and at each acute hospital site • Has clear clinical governance arrangements in place • Meets the standards prescribed by national bodies in relation to workforce, skills, equipment and resources. • Has the above considered and endorsed by the STP Clinical Cabinet. • Has appropriate assurance from the Intensive Care Society of Great Britain & Ireland 	Approved
5	Gynaecology	<p>The CCG Joint Committee is requested to approve that:</p> <p>5.1 Gynaecological cancer surgery be located at Southend Hospital, close to the existing cancer centre for mid and south Essex.</p>	Approved



Rec No.	Area	Recommendation	CCG Joint Committee Decision
		5.2 Complex gynaecological surgery (including uro-gynaecology) requiring an inpatient stay be located at Southend and Broomfield Hospitals.	Approved
		The CCG Joint Committee is requested to note that all outpatient appointments, tests, scans and day case surgery for non-complex gynaecological conditions will remain available locally.	Noted
6	Respiratory	<p>The CCG Joint Committee is requested to approve that inpatient care for patients with complex respiratory conditions is located at Basildon Hospital, close to the existing Essex Cardiothoracic Centre.</p> <p>The CCG Joint Committee is requested to note that all outpatient appointments, tests, scans, and short hospital stays for non-complex respiratory conditions will continue locally</p>	Approved Noted
7	Kidney	<p>The CCG Joint Committee is requested to approve that inpatient care for patients with complex kidney disease is located at Basildon Hospital, close to the existing Essex Cardiothoracic Centre.</p> <p>The CCG Joint Committee is asked to note that all outpatient appointments, tests, scans and short hospital stays for non-complex kidney conditions, including dialysis, will continue locally.</p> <p>The CCG Joint Committee is further asked to note that very complex care, such as kidney transplants, would continue to be provided in specialised centres in London and elsewhere.</p>	Approved Noted Noted
8	Vascular	<p>The CCG Joint Committee is requested to approve, in line with guidance from the Vascular Society of Great Britain and Ireland:</p> <p>8.1 That a specialised vascular hub is developed at Basildon Hospital, close to the existing Essex Cardiothoracic Centre and aligned to interventional radiology services. This hub would offer a round the</p>	Approved



Rec No.	Area	Recommendation	CCG Joint Committee Decision
		<p>clock, consultant-led service for vascular emergencies including centralisation of complex surgery. In an emergency situation, patients would access the hub via their local A&E department, where they would receive assessment, stabilisation and initial treatment before being transferred, with appropriate support, to the specialised vascular hub.</p>	
		<p>8.2 That inpatient care for patients with complex vascular disease is located at Basildon Hospital, close to the existing Essex Cardiothoracic Centre.</p>	Approved
		<p>8.3 The Abdominal Aortic Aneurysm (AAA) Screening service will remain located at Southend for the Essex population.</p> <p>The CCG Joint Committee is asked to note that all outpatient appointments, tests, scans and short hospital stays for non-complex vascular conditions will continue locally</p>	Approved Noted
9	Cardiology	<p>The CCG Joint Committee is requested to approve that access to the range of treatments offered at the Essex Cardiothoracic Centre for patients with specialised heart disease is accelerated and that the treat and transfer model (see recommendation 4) is used to facilitate this.</p> <p>The CCG Joint Committee is asked to note that all outpatient appointments, tests, scans and short hospital stays for non-complex heart conditions will continue to be available locally.</p>	Approved Noted
10	Gastroenterology	<p>The CCG Joint Committee is asked to note that the original proposal for patients with complex gastroenterology problems to be treated at Broomfield Hospital is not put forward for decision (see section 8 for further detail).</p> <p>Gastroenterology services (inpatient care, day case, outpatient appointments, tests and scans) will continue to be provided on all three sites, as currently.</p>	Noted



Rec No.	Area	Recommendation	CCG Joint Committee Decision
		12.2 Note that, following a stroke and an inpatient stay at Basildon Hospital for a short period of intensive treatment, patients would be transferred home, if their condition had improved sufficiently, or back to their local hospital or community facility for on-going care and treatment. All follow-up outpatient appointments, tests and scans will continue to be offered at all three hospital sites.	Noted
		12.3 Note that, should a patient be confirmed as suffering from a bleed on the brain, they would continue to be transferred to a specialised designated centre, as now. This would either be Queen's Hospital, Romford, or Cambridge University NHS Foundation Trust in Cambridge.	Noted
		12.4 Strongly support the ambition to develop a Mechanical Thrombectomy service in mid and south Essex, such a service may be commissioned by NHS England.	Supported
13	Orthopaedics	<p>The CCG Joint Committee is requested to approve that:</p> <p>13.1 Some planned orthopaedic surgery, such as hip and knee replacements requiring a hospital stay, is provided at Southend Hospital for the south Essex population, and at Braintree Community Hospital for the population in mid-Essex. As such patients who would have used Basildon Hospital for planned orthopaedic inpatient surgery will no longer be able to access this care at Basildon and will be offered surgery at Southend. Patients who would have used Broomfield Hospital for planned orthopaedic surgery, and who meet the criteria for treatment at Braintree Community Hospital will no longer be able to receive their surgery care at Broomfield.</p> <p>The CCG Joint Committee is asked to note that the above arrangement would not preclude patients from choosing to have their planned orthopaedic treatment at another hospital, as per the NHS Constitution requirements on</p>	<p>Approved</p> <p>Noted</p>



Rec No.	Area	Recommendation	CCG Joint Committee Decision
		<p>patient choice.</p> <p>13.2 Some emergency orthopaedic surgery, such as open lower-limb fractures that require a hospital stay is located at Basildon Hospital (for the south Essex population), and at Broomfield Hospital (for the mid-Essex population). This would ensure that emergency surgery is separated from planned surgery, thus ensuring faster access to theatre for patients requiring urgent care, and reduced cancelled operations for patients requiring planned care.</p> <p>13.3 Elective complex wrist surgery will be provided at Southend Hospital, and complex emergency wrist surgery at Basildon and Broomfield Hospitals. The Joint Committee is asked to note that simple wrist surgery will continue to be maintained at all three hospital sites.</p> <p>13.4 The Trusts test the viability of elective inpatient spinal surgery being undertaken at Broomfield and Southend Hospitals. During a 24 month period following implementation, the STP Clinical Cabinet will assess the success and sustainability of this mode.</p> <p>The CCG Joint Committee is asked to note that all outpatient appointments and follow-ups, tests, scans and routine surgery for orthopaedic problems including day case knee, foot, wrist, ankle, shoulder and elbow procedures would continue to be available locally.</p>	<p></p> <p>Approved</p> <p>Approved</p> <p>Approved</p> <p>Noted</p>
14	Urology	<p>The CCG Joint Committee is requested to approve that:</p> <p>14.1 Patients requiring surgery for kidney, bladder and prostate cancer receive this at Southend Hospital, alongside the specialised cancer centre. The</p>	Approved



Rec No.	Area	Recommendation	CCG Joint Committee Decision
		development of robotics to support this service should be an ambition aligned to the specialised cancer service commissioned by NHS England.	
		14.2 Complex (non-cancer) emergency urological conditions that require an inpatient stay be treated at Broomfield Hospital in Chelmsford, building on the specialist urological care already provided there.	Approved
		14.3 Complex uro-gynaecological treatment be located at both Southend and Broomfield Hospitals. The CCG Joint Committee is asked to note that all outpatient appointments, follow-ups, tests, scans and short hospital stays for non-complex, and non-cancer, urological conditions will continue to be available locally.	Approved Noted
15	Orsett Hospital	The CCG Joint Committee is asked to: 15.1 Approve the relocation of services currently provided at Orsett Hospital to a range of locations within Thurrock, Basildon and Brentwood, enabling the closure of Orsett Hospital.	Approved
		15.2 Note that there will be a period of co-production with the local community through the establishment of a “People’s Panel” supported by Healthwatch organisations in Thurrock and Essex to determine the best site(s) to relocate these services to.	Noted
		15.3 Note that, alongside the period of co-production, further detailed assessments will be undertaken on equality and health inequality impacts, and the quality impact of proposed service relocations.	Noted
		15.4 Note that once the period of co-production is complete, and with the detailed work on impact assessment, the CCG Joint Committee will be asked to make a decision on which sites will provide the relocated services.	Noted



Rec No.	Area	Recommendation	CCG Joint Committee Decision
		15.5 Note that, in accordance with the agreement between Thurrock CCG, Thurrock Council and the three mid and south Essex hospitals, the Orsett Hospital site will not be closed until the new services are in place at the agreed new locations.	Noted
16	Family/carer Transport	<p>In recognising that some of the proposed service changes may mean that a small number of patients and their families will need to travel further to receive specialist treatment, the CCG Joint Committee is requested to approve that reasonable steps are taken by the Trusts to ensure that there is support for patients (in addition to that referred to in recommendation 4), their families and carers, to travel to a more distant hospital, if required.</p> <p>The CCG Joint Committee is asked to note that the acute hospitals will consider transport for staff who may be required to work at more than one site as part of service change implementation planning.</p>	Approved Noted
17	Capital Funding	<p>The CCG Joint Committee is asked to note that the Trusts have been earmarked to receive up to £118m in capital funding to support the implementation of the proposals contained within the public consultation. This is in addition to £12m being funded through the disposal of surplus assets.</p> <p>The commissioners will be asked to support, at a later date, and subject to the decisions reached on these recommendations, the business cases that will enable access to these funds</p>	Noted
18	Implementation Oversight	<p>The CCG Joint Committee is requested to approve the formation of an Implementation Oversight Group. The membership of this group will be agreed in discussion with the Trusts and with patient and public representative groups, stakeholders and partners, and will include representation from the Joint Committee and Joint Commissioning Team and NHS England Specialised Commissioning for relevant pathways. It is proposed the Implementation Oversight Group will be independently chaired.</p>	Approved



Rec No.	Area	Recommendation	CCG Joint Committee Decision
		<p>This Group will oversee the implementation of the decisions made by the CCG Joint Committee, ensuring that decisions are implemented in a safe and sustainable way, and specifically in line with the recommendations made by the CCG Joint Committee in relation to Clinical Transport (recommendation 4), Family/Carer Transport (recommendation 16) and plans to close Orsett Hospital (recommendation 15).</p> <p>The Implementation Oversight Group would report in to the CCG Joint Committee, the Trust Joint Working Board and inform the STP Board.</p>	
19	On-going Engagement	The CCG Joint Committee is requested to approve that the mid and south Essex system continues its communication and engagement on these plans within the STP with patients and the public, staff and key stakeholder organisations.	Approved

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Minute 182

Council 19th July 2018

Opposition Business: Latest Developments in the Mid & South Essex STP and related healthcare matters

In accordance with Standing Order 19 the Labour Group requested that the Mid & South Essex STP, be debated this evening.

Councillor Gilbert proposed and Councillor Woodley seconded the following motion:

'The proposed changes in health and care provision in Southend and across the Mid and South Essex footprint are destined to bring lasting change to care provided to patients. That change must carry a guarantee of better patient outcomes for everyone who needs care. The recent consultation on the measures in the Sustainability and Transformation Plan did not set out the impact of proposed changes and evidence of patient outcomes has not been demonstrated despite requests from the People Scrutiny Committee, the Joint Health Overview Committee, Southend Health and Wellbeing Board, and individual councillors, over a period of 18 months. Proposals by the STP Team are still unclear even though the potential for amendment of those proposals has almost concluded.

The council therefore asks for the following to be placed on record.

Earlier this year, the Council's response to the STP consultation expressed dissatisfaction with the STP proposals in a number of very important areas:

- We would not support the STP without better rationale and evidence for moving stroke services to Basildon Hospital*
- We said that the proposals are weak in terms of guaranteeing investment in localities without the impact of which, the acute reconfiguration is not viable.*
- We believed that proposals around transport and transfers were unclear and poorly defined, and would not be able to support the STP until detailed workable proposals were set out*
- We found the proposals on consolidated discharge and repatriation arrangements unclear*
- We noted the challenges in workforce recruitment, retention and long-term sustainability*

This council believes that even at this late stage there is still not sufficient clarity in respect of these serious concerns. We further note that the consultation process reached only a small fraction of the population in the footprint of these proposals.

It has still not been made clear to residents that six out of the seven therapeutic areas consulted upon will be wound down at Southend Hospital, with patients being moved to Basildon and Broomfield hospitals. The consultation document made no mention of closing down services and wording is vague when publicfacing documents refer to treatment being available to patients who seek help at Southend, but don't mention they will be transferred to another hospital for that care.

Southend Borough Council understands the reasons for change - 20,000 GP appointments not provided to patients, which will rise to 60,000 within only a few years, and hospitals in the STP footprint not performing as patients expect. It disagrees with the current process for delivery of change and wants to see a true process of consultation being undertaken, setting out the full impact of proposed changes, including the impact on patients, and clarity about what will happen to current services.

The council notes that the STP proposals are now subject to a formal scrutiny procedure. The council requests that the Joint Scrutiny Committee take full account of the council's continued objections to the STP. The Council further requests that the People Scrutiny Committee gives due consideration to a referral to the Secretary of State, taking these objections and other relevant factors into account.

In accordance with Standing Order 12(a) a named vote was taken on the proposal, as follows:

For the proposal:

Cllrs Arscott, Aylen, Ayling, Borton, Boyd, Bright, Buck, Buckley, Burton, Burzotta, Byford, Chalk, Courtenay, Cox, Davidson, Dear, Dent, Flewitt, Folkard, Garne, D Garston, J Garston, Gilbert, Habermel, Hadley, Harp, Holland, Jones, Lamb, McDonald, McGlone, McMahan, Moring, Mulrone, Nelson, Nevin, Norman, Phillips, Robinson, Salter, Stafford, Walker, Ware- Lane, Wexham and Woodley (45)

Against the proposal:

None

Abstentions:

Cllr Jarvis (The Mayor) (1)

Absent:

Cllrs Evans, Terry, Van Looy, Ward and Willis (5)

Accordingly, the motion was carried.

Southend-on-Sea Borough Council

Agenda
Item No.

Report of Deputy Chief Executive (People)

to
Cabinet

on

18th September 2018

Report prepared by: Glyn Halksworth, Head of Housing &
Social Inclusion

Housing & Homelessness Strategy

Policy & Resources Scrutiny Committee

Cabinet Member: Councillor Tony Cox

Part 1 (Public Agenda Item)

1. Purpose of Report

- 1.1 To inform Cabinet of progress to date in the development of the Housing & Homelessness Strategy and seek guidance regarding next steps.

2. Recommendations

- 2.1 That Cabinet endorses:

- a) Progress to date in the development of the strategy, including its identified aims and emerging actions
- b) Proposals to jointly undertake consultation jointly with the Local Plan programme
- c) Proposals to return to Cabinet in November 2018 following the conclusion of consultation, with a draft final strategy document and accompanying action plan.

3. Background

- 3.1 On 9th January 2018 Cabinet agreed to the development of a Housing Vision and Housing Strategy for the Borough on the understanding that a collective vision for housing is critical to providing context and coherence for strategy and policy decisions. It was agreed that the need for housing to be considered as an integral component of the Council's work on behalf of local citizens and their changing demographics, to ensure that those needs are clearly identified, and therefore housing is central to the Council's ambitions for economic

development, the creation of jobs, enabling of a workforce, and to its aspirations as an emerging city with a broad and compelling offer.

Simultaneously to the Housing Visioning work, work commenced on ‘Southend 2050’; a consultation that will lead to the development of a new, over-arching vision for the town, where policies and strategies sitting beneath this (such as the Housing strategy) will be seen as vehicles for Southend 2050’s delivery and work has been on going in the preparation of a new Local Plan which will set out the Council’s strategic vision for development, policies and site allocations and provide the planning framework for Southend to 2036.

3.2 The suggested timescales for development of the corporate housing strategy are outlined below, which will allow for Southend 2050, the Housing Strategy and the new Local Plan to be fully aligned and for formal consultation regarding the Housing strategy and Local Plan to commence at the same time, and adopt a shared evidence base and consultation approaches. The proposed approach is aimed at ensuring the council is perceived as having ‘One Voice’ when consulting on the future direction for the borough.

Month	Task overview
Sept 2018 – Oct 2018	<ul style="list-style-type: none"> • Evidence base development & homelessness strategy review • Policy & best practice research • Engagement & workshops with key stakeholders (internal & external) to develop proposed strategy aims & actions • Funding bids made to support strategy implementation. • Equality Analysis of emerging strategy
November 2018	<ul style="list-style-type: none"> • Amendments/alterations to Strategy in response to consultation • Strategy and implementation plan taken to Cabinet
Nov 2018 – Mar 2019	<ul style="list-style-type: none"> • Wider public consultation and promotion of Strategy continues alongside initial public consultation on new Local Plan. Shared media release and shared evidence base for overlapping areas. • Implementation of actions continues and is further developed

3.3 Based on the work to date there are five strategic aims emerging, these being:

1. *Prioritise the supply of safe, genuinely affordable homes.*
2. *Regeneration and growth to create inclusive, healthy places to live and thrive.*
3. *Support people to live independently in their own homes and avoid homelessness*
4. *Encourage good quality housing design, management and maintenance*
5. *Where not prevented, make homelessness brief and non-recurrent.*

3.4 Also emerging from development discussion has been the instruction to commence bold activity under the strategy swiftly and to quickly move towards implementation. In this light work is already underway on a number of projects

and key actions against each of the above strategic aims. Work underway or in early development includes the following:

1. *Prioritise the supply of safe, genuinely affordable homes.*

- Bringing forward site investigation for phases 3&4 of the HRA land works in Shoeburyness and St Laurence, which, if approved, could deliver over 50 new council homes by the end of 2020. Procurement of site works has commenced, with an expectation that contractors will be on the ground during October;
- Bidding for additional HRA borrowing headroom available to us as we have been identified by government as an area with high affordability pressures. We are currently developing a bid for submission to Homes England by 7th September. If successful this additional HRA borrowing would contribute to the development of affordable homes.

2. *Regeneration and growth to create inclusive, healthy places to live and thrive.*

- Development of the housing company to drive forward regeneration projects and supply of both affordable housing supply and developments for sale and rental at market rates.
- Development of the new Local Plan which unlocking new sites for house building and regeneration, and promoting well designed, accessible developments that encourage health, wellbeing, and independence.
- Work with partners to create income, employment and skills opportunities for disadvantaged groups, for example, social value requirements within large procurements such as Better Queensway and the creation of apprenticeships as part of new developments.

3. *Support people to live independently in their own homes and avoid homelessness*

- Dedicated project investigating robotics, artificial intelligence and emerging technologies as aids and adaptations for living which enable and support people to live independently. This work is already investing in new approaches and developing exemplar practice to support this requirement;
- Introduction of Homelessness Reduction Act and the co-production of personal housing plans (PHPs) with all people threatened with homelessness presenting to the Council. This work will further extend in October with closer work with statutory partners required to refer people to the local authority, and through the development of more inclusive and multi-agency supported PHPs. A leading example of this is the work underway with Essex Community Rehabilitation Company;

- Supported housing for specialist groups is in place for many discrete client groups, for example, people with learning difficulties; mental health needs; ex-offenders; drug and alcohol recovery; young homeless people; teenage parents and more. All these offers include progressive support to enhance capacity for independence and the ability to manage tenancies successfully.
- Building on the work of the Sheltered Housing Review we are developing detailed models for potential future use and configuration of the schemes. This work will consider potential uses of existing sheltered schemes along with costing of alternative models of provision and re-purposed use of the sites.
- Floating support provision has been re-designed in recent months and is currently out to tender, with a new contract to be in place from April 2019. This work will focus on supporting people to be independent and avoid homelessness, and will be required to work across multiple Council and other partner run services, and in a highly accessible community-based way.

4. Encourage good quality housing design, management and maintenance

- A new Partnership Agreement with our Arm's Length Management Organisation, South Essex Homes, is in development and will focus both on the core business aspects of their management of the Council's social housing stock, such as maintenance, rental and tenant management, as well as on areas for growth and further development with a view to adding value to South Essex Homes' role in Southend and ensuring sustainable best practice locally.
- We are re-designing the Private Sector Housing service in order to ensure both that we deliver effectively new requirements to licence houses of multiple of occupation, as well as having the capacity to pursue to take full advantage of new enforcement powers against rogue landlords. In reviewing our resources and approaches we are focussing on our capacity to respond effectively to disrepair and/or poor management of properties in both the private rental and the owner-occupier sector, responding to empty properties and returning these to use where possible, and growing our integrated response along with other services where vulnerable people are involved.
- We are working with SEAL and seeking to re-instate and re-invigorate the Landlords Forum, where advice, information and opportunities can be shared and relationships between the private sector and public bodies/support agencies can be further built upon and maintained.

5. Where not prevented, make homelessness brief and non-recurrent.

- We have implemented the requirements of the Homelessness Reduction Act, including extending both prevention and relief duties from 28 to 56 days,

designed to enhanced the capacity to keep people in their homes or more effectively house them should they become homeless. We continue to develop our work in this area, particularly with statutory partners as indicated above, and to focus on other key relationships such as landlords in order to increase the supply of suitable, affordable move-on accommodation.

- We were successful in bidding for £425k additional funding under the Rough Sleeper Initiative, which will introduce additional outreach and service-based capacity until March 2019, and bring additional accommodation on line for this group. A further bid has been submitted for 2019-20 and will be announced soon. Recruitment of staff has commenced for this work and enhanced partnership activity is already in place. Additional street counts and much tighter monitoring has been agreed in order to drive this key project forwards at the pace it warrants.
- We are working closely with the Centre for Homelessness Impact, a new national body leading the development of evidence-based approaches to working with homelessness. This work, which includes academic-led research with our partners in Southend and which will seek to understand homelessness locally and apply international knowledge to approaches we may deploy, is the first of its kind internationally and Southend is one of only a handful of UK local authorities currently involved.

These actions will continue to be progressed, alongside many others in planning or early stages, and will form part of the action plan accompanying the final strategy that will be return to Cabinet in November.

4. Other Options

- 4.1 An alternative approach to that proposed above would be to pursue consultation independently of the work being undertaken with the Local Plan. This option has been rejected given the importance of housing to the Local Plan and vice versa it is felt to be of high value that both projects are pursued together and that consultation findings are consist.

5. Reasons for Recommendations

- 5.1 It is felt that progress to date has been very productive and that the joint work with other key programmes of work being pursued by the Council, notably Southend 2050 and the Local Plan, are imperative to the future power of the strategy once adopted. This joint development will support synergy across key streams of council activity and ensure that priorities and expectations over the next few years are consistently framed. It is felt that support for the revised timescale will facilitate this approach and both better enable further initialisation of key projects to be progressed through the strategy, and more robust consultation about the work.

6. Corporate Implications

6.1 Contribution to Council's Vision & Corporate Priorities

Simultaneously to the production of the council's new corporate housing strategy is the production of 'Southend 2050'; a consultation that will lead to the development of a new, over-arching vision for the town, where policies and strategies sitting beneath this (such as the Housing strategy) will be seen as vehicles for Southend 2050's delivery. Consultation from Southend 2050 is/will continue to feed directly in to the development of new corporate housing strategy.

6.2 Financial Implications

As the plans are developed, the appropriate level of financial due diligence, will be undertaken, to both understand the nature and extent of any required financial investment, financial risk and opportunities. Therefore financial due diligence will inform and be part of the draft final strategy currently proposed to be presented back to Cabinet in November 2018.

A key aim of the strategy must also be to take advantage of external funding bids/opportunities that meet the aims of the strategy.

6.3 Legal Implications

The strategy and its actions must respond to the requirements of relevant legislation. The need for a Homelessness Prevention Strategy is specified by s.3(1) of the Homelessness Reduction Act 2002 and is re-stated by the national Rough Sleeper Strategy (August 2018).

6.4 People Implications

Housing and homelessness issues impact people's health, wellbeing and prosperity.

Housing development and regeneration are issues members of the public are likely to feel passionately about, hence the need for the development of the Housing strategy to be aligned with the Local plan.

6.5 Property Implications

These will be assessed and made clear as the strategy emerges.

6.6 Consultation

Please see section 3.1 – 3.2 for proposed timescale project, upon which consultation and engagement planning will be based.

6.7 Equalities and Diversity Implications

An Equality Analysis on emerging aims and actions will inform strategy development and be presented to Cabinet with the proposed strategy.

6.8 Risk Assessment

These will be assessed and made clear as the strategy emerges.

6.9 Value for Money

The corporate housing strategy will support the prevention of homelessness, material poverty and long term care and support needs, all of which incur great expense to the council, public sector partners, businesses and residents.

6.10 Community Safety Implications

The corporate housing strategy will encourage partnership working to encourage good quality housing management and maintenance, keeping people safe in their homes.

The strategy supports the reduction of homelessness & rough sleeping which may impact public perception of community safety and prevent rough sleepers from being at risk of severe weather, physical and verbal abuse.

6.11 Environmental Impact

These will be assessed and made clear as the strategy emerges.

7. Background Papers

PSI visioning paper
CMT/Cabinet away day slides 24.07.2018.

8. Appendices

None

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Southend-on-Sea Borough Council

Report of Deputy Chief Executive (People)

To
Cabinet

On

18th September 2018

Report prepared by:

Jacqui Lansley, Director of Integration and Partnerships

Jon Gilbert, Interim Commissioner

Agenda
**Item
No.**

0-19s Model – Delivering Better Outcomes for Children’s Health Services (including 0-5s Health Visiting service)

People Scrutiny Committee

Executive Councillor: Councillor Lesley Salter

A Part 1 (Public Agenda Item)

1 Purpose of Report

The purpose of this report is:

- 1.1 To provide an update to Cabinet on SBC’s vision for developing an integrated children’s service (0-19s Model) which delivers better outcomes for children and families through more effective services and improved pathways;
- 1.2 To provide an update to Cabinet on the recommissioning of the 0-5 Service (Health Visiting), including feedback from a public consultation; and
- 1.3 To seek Cabinet’s approval to the recommendations set out in section 2.

2 Recommendation

It is recommended that Cabinet approves:

- 2.1 The creation and development of an integrated children’s service (0-19s Model);
- 2.2 That the 0-5 Service (Health Visiting) is brought in-house from 1 April 2019, alongside the in-house 5-19 Service (School Nursing), to form the core of the 0-19s Model; and
- 2.3 Delegated authority to the Deputy Chief Executive (People) in consultation with the Cabinet Member for Health and Wellbeing and the Director for Public Health to finalise the structure and mobilisation of the 0-19s Model (including bringing the 0-5 Service in-house).

3 Background and Context

3.1 Developing a Vision for Integrated Children's Services (0-19s Model)

- 3.1.1 SBC has a vision for children's services which has developed through a process of co-design with a focus on the child and family. The vision has been designed to incorporate both the Locality approach and the emerging Southend 2050 vision. The development of the vision has also engaged key partners within Southend that includes Southend Clinical Commissioning Group (SCCG) and members of the Success for All board.
- 3.1.2 SBC's vision is to commission an integrated children's service which will deliver better outcomes for children, young people and families. This vision will be realised through the delivery of more effective integrated services with improved pathways and seamless transitions. In this model, Health Visitor services and School Nursing services would be integrated with wider SBC services and with services commissioned by SCCG, including the community paediatrics service.
- 3.1.3 Integral to the development of the 0-19s Model is the learning from A Better Start Southend (ABSS). ABSS have been a key partner in developing this vision through engaging with service users and the applying the learning from pilots which currently underway or planned for the future.
- 3.1.4 The vision is completely aligned to the development of Localities within Southend and will ensure the local need within each Locality is understood, Locality-specific outcomes are developed and services are designed to deliver these outcomes. For example, the needs in East Central are very different to West – with higher levels of birth rates, deprivation and poverty requiring a different Locality-specific outcomes.
- 3.1.5 The exact scope of a Locality-specific integrated children's service depends on a number of factors which requires a bespoke model to be developed with related services and other partners. It is proposed that this should ensure:
- SBC's statutory obligations are met to commission a Health Visitor service (i.e. 0-5 Service) and a School Nursing service (i.e. 5-19 Service) from April 2019;
 - better integration between services is delivered from April 2019, in order to maximise the benefits which can be delivered in the short-term; and
 - the groundwork is laid for further integration beyond April 2019, especially as regards integration to SCCG services.

3.2 Statutory Obligations

- 3.2.1 SBC has a statutory duty to commission Health Visiting and School Nursing services, as part of the nationally mandated 'Healthy Child Programme'.
- 3.2.2 The School Nursing service is delivered in-house by SBC and received a positive CQC inspection in 2017.
- 3.2.3 The Health Visiting service is currently delivered by Essex Partnership University NHS Foundation Trust (EPUT) as part of a contract covering 0-5 Services. This contract will expire on 31 March 2019 and there are no options to roll this contract forward. To comply with its statutory duties, SBC must therefore ensure that Health Visiting services are recommissioned and in place by 1 April 2019.

3.2.4 The existing contract with EPUT covers more than the mandated Health Visiting services. This contract for 0-5 Services includes:

- Health Visiting (HV)
 - Universal and targeted support to families and children, covering the requirements of the Healthy Child Programme: 4 levels of service, 5 universal & mandated visits, 6 high impact areas.
- Family Nurse Partnership (FNP)
 - Targeted support for first-time teenage mothers and families (48 families are funded by Public Health funding)
 - It should be noted that, separate to this contract, A Better Start Southend (ABSS) funds a variant of FNP within 6 specified Southend wards. This ABSS FNP covers 80 families.
 - Both FNP services rely on a shared workforce to provide efficiencies of scale and resilience.
- Health support for Multi Agency Safeguarding Hub (MASH+)
 - Health representation and input into a co-located, multi-agency safeguarding hub which provides the front door to safeguarding services for children of all ages (i.e. beyond 0-5 years)
- Health support for Multi Agency Risk Assessment Team (MARAT)
 - Health representation and input into SBC's multi-agency risk assessment team to provide a targeted response to situations facing children of all ages (i.e. beyond 0-5 years) and adults.

3.3 Recommissioning the 0-5 Service

3.3.1 SBC has conducted a public consultation to support the recommissioning of the Health Visiting service. 77% of parents/carers and 84% of practitioners/professionals supported SBC's vision for an integrated 0-19 children's and young people's service. An overview of the consultation process is set out in Appendix 1 and the full draft report is set out in Appendix 2.

3.3.2 The outcomes associated with Health Visiting are well documented within the Healthy Child Programme¹, however it is important that any future service is aligned to the Locality approach and meets the local needs of the population of Southend.

3.3.3 The Health Visiting service includes the provision of 'Universal' services available to all 11,400 children across the borough (e.g. five mandated HV visits for families). Additional levels of service ('Universal Plus' and 'Universal Partnership Plus') are provided on a targeted basis to children requiring additional support (40% of children) (e.g. complex additional needs). The population needs for these additional services differs significantly across each Locality.

3.3.4 The local priorities are set out in the Children and Young People's Plan for Southend² and PHE's Child Health Profile (Southend-on-Sea). Key areas of focus include breastfeeding, obesity, smoking during pregnancy, teenage

¹ See <https://www.gov.uk/government/publications/healthy-child-programme-pregnancy-and-the-first-5-years-of-life>

² (http://www.southend.gov.uk/southendchildrenspartnership/download/downloads/id/367/cypp_2016-17.pdf)

pregnancy and emotional wellbeing & mental health. It is recognised that a multi-agency, Locality-specific model is required to address these priorities.

3.3.5 The existing Health Visiting service operates four separate teams across Southend. Those teams do not currently align to the Locality model for Southend. In moving towards a 0-19s Model, Health Visiting teams will be realigned on a Locality approach which will encourage better integration with other children's services and deliver improved outcomes.

3.4 Proposed Model: 0-19s Model

Outcomes

3.4.1 The outcomes of the 0-19s Model, with Health Visiting and School Nursing at its core, align with those of the Healthy Child Programme.

3.4.2 These outcomes include:

- helping parents develop and sustaining a strong bond with children;
- supporting parents in keeping children healthy and safe and reaching their full potential;
- protecting children from serious disease, through screening and immunisation;
- reducing childhood obesity by promoting healthy eating and physical activity;
- identifying health issues early, so support can be provided in a timely manner;
- focus on health needs of children and young people ensuring they are school ready;
- making sure children are prepared for and supported in all child care, early years and education settings and especially are supported to be 'ready to learn at two and ready for school by five';
- having a co-ordinated response across education, health and social care, with improved integration;
- supporting the Locality-based model in Southend; and
- alignment with the emerging Southend 2050 vision.

3.4.3 These outcomes will be further developed over time, to align with the Southend 2050 vision and a maturing Locality model. As the scope of the 0-19s Model extends to integrate with other children's services, the outcomes will be updated to reflect this.

3.4.4 The 0-19s Model will place children and families at the centre of the service and, through a process of co-design and restorative practice techniques, will work with parents/carers to achieve jointly defined outcomes.

Bringing the 0-5 Service In-House

3.4.5 In order to form the initial core of the 0-19s Model, it is recommended that SBC brings in-house the 0-5 Service (i.e. Health Visiting, currently delivered by EPUT) alongside the 5-19 Service (i.e. School Nursing, already delivered in-house).

3.4.6 This 0-19 service would initially include Health Visiting (plus FNP) and School Nursing. SBC would also take in-house the delivery of the health representation for MARAT and MASH+. This would ensure that benefits already gained from recent Health Visitor integration into these multi-agency teams can be preserved and built upon.

3.4.7 Unless the 0-5 Service is delivered in-house, there would be significant risk associated with developing a 0-19s Model. The 0-19s Model must be explored and developed with other in-house services commissioned by SBC (and SCCG) to find ways of improving integration and pathways. For example, this might involve co-locating staff or sharing responsibilities across different teams. This exploratory / developmental approach would not be compatible with a third party provider delivering a core element of the 0-19s Model (i.e. Health Visiting).

Developing the 0-19s Model

3.4.8 The 0-19s Model will be developed through a process of co-design, incorporating innovation and best practice.

3.4.9 Initially, the 0-19s Model will include Health Visiting, School Nursing, Early Years (including Children's Centres) and Early Help, delivered on a Locality-specific approach – together with input from ABSS, Children's Social Care and Maternity.

3.4.10 It is proposed that SBC would continue to develop the 0-19s Model to further improve integration with other children's services over the following two years, with particular focus on integration with SCCG services.

3.4.11 In line with the themes from the Public Consultation, the development of the 0-19s Model would support the work undertaken by ABSS in developing Locality-specific, community-based assets across Southend which could provide a broader range of services beyond those commissioned directly by SBC. This also presents an opportunity to harness use of technology (apps, websites, social media) as a way to support the delivery of outcomes for family and children.

Benchmarking & Workforce Modelling

3.4.12 SBC engaged Benson Wintere to conduct a benchmarking and workforce modelling exercise of the current Health Visiting service in Southend. The Benson Model is a demand led approach which starts with the needs of the local population ensuring local requirements and Healthy Child Programme objectives are part of the service offer. Demand profiling demonstrates support requirements for the local child population in each team, sensitised in accordance with local complexity and demographics. This identifies a theoretical workload and facilitates development of new workforce structures and assessing effectiveness of the existing workforce across the Localities.

3.4.13 The modelling was completed via a series of sessions and workshops in August 2018. The main findings from the model were:

- The existing workforce has capacity to deliver the vast majority of the current service specification.
- The workforce analysis suggests that it would be possible to meet local demand more efficiently by enhancing the skill mix.
- FNP and health support for MARAT and MASH+ were not included within the modelling.

Clinical Governance

3.4.14 For a local authority taking on health services there is a requirement for decision making and operational policies and procedures to be assured and robust. This is known as clinical governance.

3.4.15 If SBC brought in-house the provision of the 0-5 Service, this would require additional clinical governance processes to be established. SBC has reviewed national guidance on this and liaised with other local authorities (and the in-house 5-19 Service) to determine the scope of this.

3.4.16 SBC would need to appoint a Head Nurse within SBC whose role includes overseeing the service from a clinical perspective. It is unlikely that this role will TUPE across from EPUT. In which case, it would be necessary for an individual to be recruited to this role.

3.4.17 SBC would also need to extend SBC’s existing CQC registration to include Health Visiting and to register SBC with the National Prescribing Authority.

Safeguarding

3.4.18 The safeguarding function to support the current Health Visiting and School Nursing teams is currently commissioned by SCCG and provided by EPUT. The service provides:

- statutory health safeguarding systems and processes
- training to EPUT/SBC staff
- safeguarding supervision and support to EPUT/SBC staff
- undertaking audits & reviews and responding to Local Safeguarding Children’s Board requests

3.4.19 In conjunction with SCCG, a number of options have been identified to ensure continuity of the safeguarding support. This may involve continuing to commission EPUT or may involve bringing the provision of this support in-house.

Timeline

3.4.20 The following timeline is proposed to develop the 0-19s Model and bring in-house the delivery of the 0-5 Service:

Timescale	Area	Activities
September to October	Governance	Cabinet 18 September Scrutiny 9 October (if called in)
September to November	Development of 0-19s Model:	
	• Develop integration opportunities	Task & Finish groups to develop areas of integration; Development of 0-19s delivery model
	• Preparation of integrated staffing model	Updated in light of integration opportunities identified
	• Preparation of updated financial model	Updated in light of integration opportunities identified
	Development of Clinical Governance Structures	Including further engagement with SCCG re safeguarding
September to October	Development of Logistics Plan for taking in-house 0-5 Service	Including: - Estates - IT - HR / Pensions - Legal
October, November, December, January, February, March	Take in-house 0-5 Service, within 0-19s Model, to include:	
	• Service Model	Implementation of initial 0-19s Model
	• Clinical Governance Structures	Extension of registration with CQC Registration with prescribing authority Safeguarding structures
	• Logistics (Estates / IT)	Office space

		SystemOne & N3
	<ul style="list-style-type: none"> HR 	Early engagement with staff [January] TUPE consultation [February – March] Pension transfer [February – March]
February, March, April onwards	Further development of 0-19s Model.	Develop mid-long term 'further integration plan' Implementation of 'further integration plan' [April onwards]
April 2019	Service Delivery	Go-Live [1 April 2019]

3.5 Key Benefits

3.5.1 The creation of a 0-19 Model would deliver enhanced outcomes for children and families in Southend. This would be achieved through:

Maximising Integration

3.5.2 This model provides a significant opportunity for improving integration with other SBC-commissioned children's services.

- Integration with other SBC services delivered in-house (e.g. Early Years & Early Help) would be more easy to lead and implement if the Health Visiting service was also delivered in-house. Staff could be co-located with associated teams more easily and staffing structures could be more flexibly adapted through test and learn approaches. Where similar integration has been carried out already, this has been shown to significantly improve outcomes for children and families. For example, where Health Visiting and Early Help providers deliver an integrated 2-2½ year review, it has allowed parents/carers to benefit from single unified review meeting (covering health and education) and ensures health practitioners benefit from the insights of the nursery providers who will have seen the child more frequently.
- Early Years: standardised parent programmes could be developed across services and the current integrated 2-2½ year review could be built upon. This could help ensure that children are ready to learn at two and ready for school by five, with additional support provided where needed.
- Better use could be made of Children's Centres, using Health Visitor sessions as a catalyst to stimulate additional activities led by community asset. This would provide families with more services locally and would build additional capacity within the community.
- Early Help: identifying areas where the continuum of support can be improved to ensure this is consistency and a 'family' approach at all times. This should help avoids gaps and overlaps in the service offer and ensure families receive the earliest support possible when they need it. This has the potential to deliver better outcomes to some of the more vulnerable families within Southend. There are also opportunities for greater knowledge sharing or joint working (e.g. inviting HVs to jointly attend the first appointment with those families) to unlock access to harder-to-reach families. Standardised plans for families could be introduced.
- ABSS: work with ABSS to help build additional capacity within community based assets, to support the work undertaken by HVs and deliver broader services. Where additional capacity can be generated, this can provide a more complete framework of services across health, social and emotional wellbeing services across Localities.

- School Nursing: stronger working relationships could be developed between Health Visiting and School Nursing (e.g. regular contact / joint working). This might support the child's transition between the two teams, or broaden the health input which is provided for MASH+ / MARAT.

3.5.3 This model also provides an opportunity to work with SCCG to develop improved pathways between the 0-19 Service and the Children's Community Services and Community Paediatrics. This could mean that families requiring these specialist services would have their needs identified as early as possible.

- SCCG has indicated that it initially wishes to implement service improvements with EPUT, rather than fully recommissioning its children's services. However, if service pathways are further developed with those services, then this could provide a better basis for jointly commissioning a fully integrated children's service with SCCG at some point in the near future.

3.5.4 The benefits of sustained integration will have positive outcomes for children, families and young people across Southend in years to come and will result in longer term efficiencies.

Improving Service Provision Through Co-Design To Meet Local Need

3.5.5 This model enables the families and children to be at the centre of the 0-19s Model through the co-production and co-design of Locality-specific outcomes.

- This would allow SBC to focus the service on Locality-specific outcomes, without needing to negotiate these with an arms-length provider.

3.5.6 This model provides SBC with the ability to adapt service delivery.

- Developing a more integrated service model is likely to require significant amounts of activity before the service commences. However, it is likely that further on-going changes will also be required. It has proven difficult to encourage arms-length providers to adopt certain aspects of service delivery, even when this is expressly stated within specifications. It has proven even more difficult to encourage those providers to make subsequent changes to their specifications and service delivery.
- By taking the 0-5 Service in-house, SBC would be able to adapt service delivery for the future to meet the Locality-specific needs of families and children. For example, where an ABSS pilot demonstrates that a tested approach delivers better outcomes within the ABSS wards, the 0-19s Model would be able to make changes across the borough to deliver those outcomes for all families and children in Southend.

Improving Stability

3.5.7 This model removes the requirement to retender services every few years, providing greater stability for staff:

- Staff delivering the service are unsettled prior to each tender process, which can make recruitment / retention more difficult.
- Typically, there is a dip in a service's performance levels prior to and following any transition between providers. This would be avoided if the service is brought in-house.

3.5.8 In addition, SBC could avoid destabilising ABSS services:

- The existing FNP service currently shares a workforce with the ABSS-funded FNP service. The ABSS FNP service might have been destabilised by changing the provider of the 0-5 Service. However, the proposed model allows EPUT staff delivering ABSS FNP to be co-located within SBC, or for both FNP elements to be brought in-house. Either of these options would avoid any destabilisation to FNP.

3.6 Key Risks

3.6.1 However, the creation of a 0-19s Model, including an in-house 0-5 Service would carry a number of risks:

Risk of Unaffordability

3.6.2 There is a risk that 0-5 Service may be unaffordable within reduced budgets:

- As stated below in section 6.2, the 0-5 Service is subject to cost pressures. By taking the service in-house, SBC would need to find those efficiency savings itself.
- To mitigate the risk that the new 0-5 Service may be unaffordable:
 - A financial model is being developed and the development of the 0-19s Model will allow additional efficiencies to be made.
 - Public Health has recommended that an expert is commissioned to 'walk the floor' of the existing 0-5 Service to understand how staff currently operate and to identify any cost saving ideas which could be reflected within a revised model.
 - SBC has the option to consider reallocating funding from its existing People Departmental budgets where it can be demonstrated that funding better integration would alleviate later pressures on the system and reduce the overall cost of services.

Service Interruption

3.6.3 The 0-5 Service is required by statute. There is a risk that the minimum workforce required to deliver this service does not TUPE across to SBC resulting in a destabilisation of service provision. This could arise if EPUT staff choose to leave the 0-5 Service or secure alternative roles within EPUT.

- To mitigate this, SBC will:
 - seek open dialogue with EPUT and Health Visiting staff at an early stage in process; and
 - mitigate any remaining understaffing issues by using bank staff while recruitment take place.

High Level of Commitment Required for Mobilisation & On-Going Management

3.6.4 Developing a 0-19s Model and bringing the existing 0-5 Service in-house requires significant mobilisation and is a significant on-going commitment.

- It would require additional clinical governance processes to be established:
 - appointing a head nurse (or similar) to fulfil the governance requirements

- registering SBC with the National Prescribing Authority (so that Health Visitors can prescribe) and/or putting in place Patient Group Directions (PGDs)³
 - extending SBC's CQC registration to include Health Visiting
 - In addition, SBC must ensure that the 0-19 Service receives appropriate safeguarding support and liaise with SCCG who currently commissions this support from EPUT.
- It would require capital expenditure (e.g. IT hardware & N3 connection).
 - It would require staff to agree to TUPE to SBC.
 - It would require staff to be provided with office space / hot-desks and parking for the time they spend in the office (albeit that this may be better managed by adopting a locality approach to reduce overheads).
 - It would involve SBC accepting on-going direct clinical responsibility for service delivery and ensuring indemnity insurance is in place for this service.
 - It would involve SBC dedicating significant time and energy to realise the benefits of service integration through service change management and the development of the 0-19s Model.
 - It would involve SBC dedicating significant management time to this service on an on-going basis.
- To mitigate these factors, SBC has:
- subject to Cabinet approval, secured operational and high level stakeholder support to the development of the 0-19s Model;
 - liaised with SCCG and other similar services (e.g. other local authorities and SBC's in-house 5-19 Service) in relation to the development of clinical governance and safeguarding model;
 - developed an implementation plan;
 - agreed a plan with HR engage at an early stage with EPUT to reduce the risk that staff do not agreed to TUPE to SBC (and would use bank staff in the short term if necessary to further mitigate this risk); and
 - has set up a number of workstreams to address each of the mobilisation elements.

Risk of Assuming Clinical Responsibility for the 0-19 Service

3.6.5 Clinical governance is already required for SBC to deliver the 5-19 Service (School Nursing) in-house. However, the 0-5 Service (Health Visiting) is far more of a clinical service. By bringing this service in-house, SBC would be assuming a higher level of direct clinical responsibility for that service. SBC would meet those responsibilities by establishing appropriate clinical

³ These provide a legal framework that allows some registered health professionals to supply and/or administer specified medicines to a pre-defined group of patients, without them having to see a prescriber (such as a doctor or nurse prescriber).

governance structures – but the direct clinical responsibility for the service would still rest with SBC.

3.6.6 In addition, it will be very important to ensure that the 0-19 Service receives appropriate safeguarding support from SCCG. Early conversations have already taken place with SCCG's Chief Nurse in relation to this.

4 Other Options

4.1 The alternatives to developing a 0-19s Model (and taking in-house the 0-5 Service alongside the 5-19 Service) are set out below (and further detailed in Appendix 3):

4.1.1 No change – recommission an outsourced 0-5 Service and do not create a 0-19s Model

- This would represent a wasted opportunity to improve outcomes for children and families and improve service integration
- There are concerns that prospective bidders may not have bid for this service given the available budgets

4.1.2 Commission an outsourced 0-19 Service (comprising Health Visiting and School Nursing)

- This would represent a wasted opportunity to improve service integration with in-house services

4.1.3 Jointly commission an outsourced 0-19 Service, which includes SCCG-commissioned services (Children's Community Services and Community Paediatrics)

- This does not align with SCCG priorities at this time
- This would not be deliverable within available timescales

5 Reasons for Recommendation

5.1 The creation of a 0-19 Model (with an in-house Health Visiting service) would improve integration with other children's services commissioned by SBC and SCCG and provide SBC with direct control over the quality and delivery of the service. This would deliver enhanced outcomes for children and families in Southend, including by allowing SBC to:

5.1.1 identify any gaps / overlaps in service across all children's services to ensure families receive a more complete set of universal and targeted services;

5.1.2 identify opportunities for co-locating staff and combining visits where this will support families to receive improved services or for staff to provide better input into multi-disciplinary teams; and

5.1.3 co-design and adapt service provision to incorporate best practice and innovation identified by A Better Start Southend pilots, the Locality-based model and themes emerging from Southend 2050.

5.2 It would also ensure SBC can comply with its statutory duty to commission Health Visiting services by 1 April 2019.

6 Corporate Implications

6.1 Contribution to Council's Vision & Corporate Priorities

6.1.1 Healthy: Improve the life chances of our residents, especially children, by working to reduce inequalities and social deprivation across our communities.

6.2 Financial Implications

6.2.1 The budget and forecast expenditure for the 0-5 Service and 5-19 Service for 2018/19 are shown below.

Service	Budget	Forecast Expenditure ⁴
0-5 Service	£2,315,540	£2,459,856
5-19 Service	£612,000	£612,000

6.2.2 It is recognised that the 0-5 Service is currently subject to cost pressures:

- EPUT has indicated that the existing service is currently operating at a loss. This is caused in part through significant Agenda for Change increases together with staff progression within the bandings.
- Efficiencies have already been made in recent years, with £212,000 of savings being found in 2017/18.
- The cost of health input into MARAT (£49,320) is currently funded by Public Health reserves.
- A budgetary reduction for the 0-5 Service in 2018/19 (£94,996) is currently met through Public Health reserves.

6.2.3 The budget for the 0-5 Service for 2019/20 has not yet been finalised. To support setting this budget, SBC is identifying and quantifying anticipated costs of the 0-5 Service and building a detailed cost model.

6.2.4 EPUT has provided an initial TUPE list which includes outline staffing costs. However, there are unquantified costs associated with the provision of various resources, including:

- clinical governance resource
 - It is unclear at this stage to what extent this resource will TUPE across to SBC.
 - If this is not included within the TUPE list, it will represent a cost pressure.
 - The cost of the extension of the CQC Registration is unquantified.
- safeguarding resource
 - The exact model to deliver a safeguarding function to support the service is still to be defined.
 - However, the resource is not currently included within the TUPE list and so represents an additional cost pressure.
- estates

⁴ The shortfall for the 0-5 Service will be covered by Public Health reserves as detailed in section 6.2.2.

- It is anticipated that the HV staff will deliver services from community settings or in the home. The location of these community settings is still to be defined and so represents a cost pressure.
- IT
 - The IT model is not yet defined, although staff will require access to SystemOne. The IT costs represent a revenue cost pressure.
- indemnity costs
 - The costs of extending the indemnity insurance to cover the 0-5 Service are not yet quantified.
- capital and setup costs
 - The capital costs associated with the project management of the mobilisation and the setup are not yet quantified. This represents a cost pressure.

6.2.5 The financial benefits of integration will be realised during the development and delivery of the 0-19s Model. For further details see section 3.5.2. SBC will seek to realise these efficiencies and target a reduction in expenditure across all children's and young people's services.

6.3 Legal Implications

6.3.1 None at this stage that are not noted in the above paper.

6.4 People Implications

6.4.1 The recommendation to take in-house the 0-5 Service will trigger the application of TUPE to transfer the employment of c.55 WTE (c.74 headcount).

6.4.2 There are no other people implication which are not noted in the above paper.

6.5 Property Implications

6.5.1 It is anticipated that the Health Visiting staff will deliver services from community settings (or in the home). Work is underway to identify the preferred location for these settings, within the existing asset list of SBC (e.g. children's centres).

6.6 Consultation

6.6.1 There are a number of groups who have a stake in the provision of children's and young people's services, including providers, commissioners, third sector organisations, residents, parents/carers and children, all of whom will have views and concerns which require consideration as part of the development of a 0-19s Model.

6.6.2 In developing the 0-19s Model, SBC has consulted widely. The views of the stakeholders outlined above have been sought and incorporated into the development of the 0-19s Model.

6.6.3 A formal consultation period took place over the summer 2018 and the outcome from this consultation is provided in Appendix 1 (Overview) and Appendix 2 (Full Report).

6.6.4 The engagement and co-design process will also continue beyond the end of the formal public consultation, including through an online ideas forum to support co-production and alignment to emerging themes from Southend 2050.

6.7 Equalities and Diversity Implications

- 6.7.1 The development of a 0-19s Model has been drawn up in accordance with the requirements of the Equality Act 2010.
- 6.7.2 The development of the 0-19s Model and the provision of a 0-5 Service in-house is considered to be positive in terms of its impact on equality/diversity.
- 6.7.3 An initial Equality Assessment has been drafted which supports this position. This will be updated as the 0-19s Model is developed.

6.8 Risk Assessment

- 6.8.1 Key risks and associated mitigations, supported by a risk log, are noted in this paper.

6.9 Value for Money

- 6.9.1 The financial benefits of integration will be realised during the development and delivery of the 0-19s Model. For further details see section 3.5.2. SBC will seek to realise these efficiencies and target a reduction in expenditure across all children's and young people's services.

6.10 Community Safety Implications

- 6.10.1 There are no community safety implications.

6.11 Environmental Impact

- 6.11.1 There are no environmental impact implications.

7 Background Papers

None

8 Appendices

Appendix 1 – Public Consultation (Overview)

Appendix 2 – Public Consultation (Report)

Appendix 3 – Options Paper: Alternatives to 0-19s Model

APPENDIX 1A: CONSULTATION SUMMARY

1.1 Recommissioning 0-5 Service: Consultation & Engagement

1.1.1 To support the recommissioning of the Health Visiting service, a public consultation was launched on 29 June 2018 to gather views on people's experiences of the service, what's most important to both parents and practitioners and how the service can be improved through innovation.

1.1.2 The formal consultation process closed on 3 August 2018. It included online surveys (289 responses received: 246 from parents/carers and 43 from practitioners/professionals), a co-production workshop (with six parent champions), five parent and carer focus groups (c.24 attendees) and several one-to-one stakeholder meetings across various children's services. The engagement and co-design process will also continue beyond the end of the formal public consultation, including:

- an online ideas forum is being launched on Stickyworld to support continuing co-production;
- additional feedback is being gathered from first-time teenage parents as part of a wider consultation process regarding housing;
- emerging themes from Southend 2050 are being recorded and highlighted to ensure alignment.

1.1.3 The public consultation was supported and promoted across the borough with the support of A Better Start Southend, Public Health, the Early Years Team, existing stakeholder networks, Children's Centres, social media and with support of the Corporate Communications Team to maximise responses.

1.1.4 A full copy of the Public Consultation report is attached as Appendix 2.

1.1.5 Some of the key themes from the Public Consultation are:

- 77% of parents/carers and 84% of practitioners/professionals supported SBC's vision for an integrated 0-19 children's and young people's service. Where respondents raised issues about integration, their concerns largely related to fears of budget/staffing cuts, a dilution of skills / reduction in service quality if services were combined, and worries that 'integration' meant 'privatisation'.
- 70% of parents/carers rated the existing service as 'excellent or 'good'. However, some were not clear on what areas of support and advice were available from the Health Visiting service, or that they could contact the service in between visits with an impression that they are 'discharged' after the 2-2½ year visit;
- 65% of parents/carers felt there were gaps in the service. Their comments suggest there is a desire for a broader range of services which parents could access depending on their needs. These included requests for additional checks (e.g. during the first 18 months to cover weaning, behaviour management, potty training, social interaction, developing speech and language, and at 3½ and 5 years to discuss immunisation and school

readiness), requests for separate support programmes (e.g. Delta, additional peer-led groups, CPR training and baby massage) and requests for additional information sources (e.g. approved website resources).

- Consistent, up to date advice and local knowledge on signposting to other services, groups and activities was said to be very important to parents as is receiving the same level of input and support from the service for first time mothers as for any subsequent children;
- The use of technology was suggested (apps, websites, social media) as a way to support appointment booking, advice and information and to contact the service to help to link mothers with local parenting groups, courses and events;
- Parents who gave extremely positive feedback on the service identified that this was a result of seeing the same person and being able to build up a relationship as well as support to continue breastfeeding and signposting to other services as required;
- As well as constraints on time / budgets / resources, practitioners also specifically identified a lack of parking, adequate office space, web-enabled devices (to show parents online resources) and communication/integration with other services as barriers to effective service delivery;
- Co-location of staff was suggested by some practitioners as a way to improve integration and that links could be strengthened with Early Help and Social Care, building upon successes achieved through MASH+ and MARAT in improving closer working arrangements;
- Practitioners/professionals highlighted the role health visitors play in safeguarding in supporting vulnerable families and helping reduce the need for referrals to social care, and more multi-agency learning and working were suggested to support this.

Health Visiting and Family Nurse Partnership Consultation Summary Report 2018

Report prepared by: Justine Shipp
Consultation and Engagement Officer
Operational Performance and Intelligence

Background to the Consultation

Southend-on-Sea Borough Council is required to re-commission a Health Visiting Service for Southend as a result of the current contract ending. The existing service includes Health Visiting and Family Nurse Partnership Services. As part of the commissioning process, the Council is also exploring the options for developing a more integrated framework of children's services, including Health Visiting (0-5 years), School Nursing (5-19 years) and other children's services.

The vision for this Framework is to deliver better outcomes for children, young people and families through the commissioning of an integrated children's service, with the provision of more effective core and support services with improved pathways.

As part of the commissioning process, the Council has sought views from those potentially affected by a change to the service and those who may wish to share their view as part of the formal consultation process.

The outcome will help to shape the options for both the Health Visiting and Family Nurse Partnership Service specification and with a long term aim of developing a framework across 0-19 years the Consultation has been developed to be the first stage in a larger consultation and co- production project to ensure the work has been shaped by local parents and professionals.

A consultation was launched to ask Parents, Carers, Practitioners and wider stakeholders for their views on:

- Their experience of the current Health Visiting and/or Family Nurse Partnership service and what could be improved, done differently and how any gaps might be filled
- How the delivery of the 5 universal visits could be different and what the barriers are to improved outcomes for children
- How safeguarding, integration and the use of technology can be improved
- What community assets currently exist to support parents to raise their children in Southend
- Proposals for a 0-19 years integrated vision in the future

The 0-5's Health Visiting and Family Nurse Partnership Consultation ran from 29th June to 3rd August 2018 and was open to Parents, Carers, Practitioners, Professionals and Commissioners within Early Years and across the 0-19 service area and wider stakeholders who had an interest or view they wished to share.

Response to the Consultation

- **5 Parent Focus Groups and drop in sessions** facilitated and supported by staff from the Public Health Team Southend, A Better Start Southend and Southend Borough Council Consultation and Engagement Officers

- **1 Co-production workshop** with Parent Champions facilitated by A Better Start Southend
- **289 Online Surveys** developed in conjunction with Public Health, Early Years and A Better Start Southend staff and finalised and approved by local Parent Champions
- **Subject Matter Expert engagement** with representatives from Southend Children's Social Care, Early Help, Early Years, A Better Start Southend and Integrated Commissioning (SBC and CCG) for Children's Services and Paediatrics
- **Member Briefing** planned for September 2018

Due to the immediate need for input into the decision making process the consultation highlighted the areas in which more engagement is required in order for decision makers to have a representative view of what the new service should look like. This further consultation and engagement will be carried out as the mobilisation of the new service begins and the development of a wider vision begins to take place. Groups that have not yet participated in the consultation but will be engaged with during the next stage of the process include:

- Teenage and Vulnerable Parents consultation which launched in September 2018
- Early Years and Early Help
- School nurses, SEN Teachers, Nursery Nurses and Childminders and those working in transition services

- Speech, language, development, mental health and Paediatric services and Midwives
- Public services including Police, Ambulance and fire services as well as Children's and Adult's social work teams
- Service providers of Health Visiting and Family Nurse Partnership Services who can inform the development of a future service including A Better Start Southend

Areas for further exploration through wider engagement include:

- The practical changes to improving the partnership working in Safeguarding children and young people
- How teenage parents can continue to be supported after being discharged from the Family Nurse Partnership Service
- How the Health Visiting Service can promote the offer to parents and improve the relationship and communication
- What community assets currently exist for parents and how this information can be publicised
- The use of technology to support practitioners and parents in terms of information and advice, communication and continued help
- What are the gaps to help children be 'school ready' and where that support can come from
- What opportunities exist for integration of services

An online ideas forum hosted on Stickyworld will support the continued co-production of the service and vision for Children and Young People's services in future and will be

published after the formal consultation process has closed and analysis has been completed. The decision making process to decide what the service model and delivery will look like will include, but is not limited to, the findings in this report as well as information from the Equality Assessment, service and resource mapping as well as HR consultation with affected staff. Members of the Integrated Commissioning Team, Public Health and the Children, Young People and Families Framework Steering Group will consider all the relevant information and consultation findings to help them make their final proposal and decisions.

Key response themes

Summary of responses from the Parents and Carers Survey

Q Do you support the Council's vision for an integrated 0-19 children's and young peoples' service?

77.54% of Parents and Carers **agreed** with the integrated service vision compared to **22.44%** who **disagreed**.

84.21% of Practitioners and Professionals **gave their support** for the vision and **15.79%** **didn't**. **Both** responses received through the commissioners survey **agreed** with the vision.

Concerns including fears around integration leading to cost cutting and cuts to the existing service, a 'jack of all trades, master of none' situation, that the service could become 'too generic', that input from the service may reduce and many people wanted to know what integration would look like before they felt they could agree with or answer the question.

One concern was raised around safeguarding stated, 'the key to safeguarding is to have some distance from multi-agency colleagues and the safest option is a degree of separation'.

Overall, **69.62%** of Parents and carers who responded said they rated the Health Visiting Service as either 'Excellent' or 'Good' compared to **9.49%** who rated it negatively. **20.89%** said it was 'neither good nor poor' but the following questions prompted a response as to what improvements could be made.

"A good health visitor can make all the difference. Mine recognised a speech issue and my child has now been discharged. Early intervention was the key"

"Without them I would have been lost. Brilliant support"

Q Which of the 5 universal checks have been most valuable to you?

- Antenatal visit – **84.4%** Very or quite valuable
- New Baby visit – **90.2%** Very or quite valuable
- 6 week visit – **84.1%** Very or quite valuable
- 1 year visit – **71.3%** Very or quite valuable
- 2 – 2 ½ year visit – **58.9%** Very or quite valuable

Suggested improvements to the service included:

- Additional regular checks between the Universal visits especially for those whose children are in Neonatal Units or SCBU and those who have had difficult or traumatic births and extended hospital stays
- More access, more visibility of the service and more Health Visitors, more information about what the role of a Health Visitor is and what support they do and can offer
- Increased support on the priority areas especially breastfeeding and bottle feeding, mental health, developmental milestones and school readiness
- Improved communication methods e.g. online, electronic appointment booking processes and information sharing, more flexibility around appointments to involve partners and other children
- Consistency of staff and appointments
- More parenting or baby classes, courses and groups e.g. weaning, potty training and more post-natal peer groups
- Online support and advice to bridge the gap between visits

- Earlier intervention and monitoring for speech and language, additional needs and support for those families
- Additional post-natal mental health visits from the service

Q Which elements of the Health Visiting Service are the more important to support you to care for your children?

- Maternal/ Perinatal Mental Health – **91% Very or quite important**
- Transition to Parenthood/ early weeks – **89% Very or quite important**
- Breastfeeding – **83% Very or quite important**
- Health, wellbeing and development of child aged 2 and support to be ‘ready for school’ – **79% Very or quite important**
- Managing minor illnesses and reducing incidents – **76% Very or quite important**
- Healthy weight – **74% Very or quite important**

70% of parents said they ‘**Get what they need**’ from the service and those that didn’t said this could be improved through:

“...help/ advice on introducing baby in to the world with other children involved”

- More information about other support available to parents locally e.g. services, groups and events
- Additional, consistent visits to build a relationship with both parents, including partners in the discussion and flexible

visits so both parents can attend or to accommodate working parents

- Additional support on first aid, formula feeding, constipation, behavioural development
- Additional support after the 2 ½ year check
- Support for parents of premature babies, those with additional needs and support around speech therapy
- A routine visit before starting school

63% of Parents and Carers found the service 'Very easy' or 'Quite easy' to access and those that didn't identified the following as improvements:

- Practical support for those attending clinics with additional or multiple children
- Publicise service contact details utilising online methods— many parents didn't know how or when they could contact the service and some thought that support ended after the last universal check
- Use of technology both ways e.g. Parents also being able to contact their Health Visitor via text, online booking, online information and advice, links to approved website resources, a greater online presence
- More time for visits, drop in clinics at Children's Centres and topical drop in sessions including advice for older children
- An admin or triage service to direct questions or queries and clearer information in the red book about what support is on offer

"Improved online presence, checklists for parents, online tutorials and the possibility to be connected to a HV"

65% of Parents said they felt there were gaps in the service:

- Additional and more frequent checks during the first 18 months to cover weaning, behaviour management, potty training, social interaction, developing speech and language and an integrated check at 3 ½ and 5 years old to discuss immunisations and adapting to school
- Information about bringing baby home, the cord, checks specifically for baby boys, restoring your pelvic floor and information for partners and fathers
- Support for those who have had an extended hospital stay or who have babies in SCBU or Neonatal Units
- A separate support programme for parents of children with additional needs, parents dealing with mental health issues, adjusting to parenthood, traumatic births and school readiness

"In my experience the Family Nurse Partnership was invaluable as it offered continuity and constant contact with the same professional I think that there is a gap as there should be a service like this for parents who do not necessarily fit the criteria"

- Bring back groups like Delta and peer support groups

- More information about gentle, attachment, responsive and attunement parenting
- New Mum programme delivered antenatally to include CPR, baby massage and baby yoga

Parents said the **benefits to their child/children** included a good, safe, happy start to life where parents had been supported and given confidence to raise them. That continued monitoring, early detection of developmental or behaviour issues and additional needs were all important and allowed children to thrive.

“(The) concerns about vision were picked up and referred quickly; the support I had meant that I was a happier, more confident mother and I think this helped my children thrive”

Parents also said that the **benefits to them** included support to parent confidently, in a calmer and happier household where they could feel more prepared and had increased parenting skills. That there was a reduction in stress and feeling less alone and the service offered emotional support and reassurance about decision making. The service meant parents were less like to go straight to the GP for minor issues but that the benefits stopped or reduced after the last universal visit.

“My Health Visitor was my biggest source of support (and a shoulder to cry on) in the first six months of both of my children's lives. Long term, she helped me to become a happy, confident mother!”

Q Is there any part of the Health Visiting Service that could be changed or made better?

- Additional checks throughout the 5 years
- More resources
- A centralised and multi-skilled service delivered in Children's Centres
- Improved communication e.g. appointments, advice and how to access support out of hours
- Increased mental health support
- Staff trained on the latest information and advice that can be shared with Parents e.g. local groups and health dangers
- More group work e.g. breastfeeding support
- Consistency of an allocated Health Visitor
- Earlier intervention for speech therapy and development issues
- Routine assessments carried out earlier and Parents to support their children to develop the required skills before being assessed
- Information and support for all feeding choices

Identifying local Community assets

“Have personally found the drop in health clinics very valuable and know others who have utilised support with breastfeeding issues at these sessions and this has enabled and encouraged them to continue breastfeeding”

“I feel all children should have a health visitor for support, as my second child needed more input and support; all mothers need support regardless of how many children they have”

Summary of responses from Practitioner and Professionals Survey

Q What challenges might impede your ability to provide the services and information needed by service users?

- Time, budgets, staff, resources and equipment to provide the service staff wish to provide to clients – e.g. sharing up to date local knowledge or accessing systems
- Capacity to be able to offer group work or parenting classes
- Staff identified a lack of parking in the borough when visiting client’s homes
- A need for improved integrated communication between services
- Uncertainty over future changes
- More integration is wanted between the service, early years, education and

school nursing – not just at a senior management level

Q What role do Health Visiting and Family Nurse Practitioners have in influencing/ supporting wider public services?

- Early support and intervention makes a big difference and can prevent specialist referral and as the only under 5’s universal service it can identify early trends and needs in the local community
- Working in an integrated way with partners and the wider community the service can influence and progress a wide range of health promotions
- The service influences, monitors and supports a wide range of families and regularly works with other local organisations e.g. social care, the police, and community organisations
- Liaising and referring to wider public services can support and encourage clients to engage with other services
- The Family Nurse Partnership has links with a number of other services to signpost and recruit clients

“Health Visiting have an important role in families life from before birth, they have a true insight into the families in our area and the challenges they face. They should have the voice to shape services around what families need”

Q Which of the five mandated Health Visiting Checks do you find are most useful and valued by Parents?

Almost all the comments received confirmed that **all the universal checks and the visits from the FNP programme were important** for varied reasons including:

- The new birth visit and 6 week visit are at a crucial time within a changing family. New parents are receptive to public health and healthy choices information and they're able to make informed choices about their own and their family's health and early difficulties can be identified
- Vulnerable, disadvantaged, homeless families as well as parents dealing with addiction, mental health issues, domestic violence or financial difficulties benefit greatly and all visits allow practitioners to meet the family and understand the individual challenges that they face
- Staff highlighted that the service is one of the only consistent contacts families have to raise concerns or get support and mothers may be more likely to talk about their mental health face to face with someone in their home environment
- Poverty and lack of social resources adds to the risk for children in areas like central Southend
- The FNP service assesses a wide range of areas for support including emotional attachment, child development and play strategies as well as relationship challenges with becoming parents also assessing emotional wellbeing of parents. They are key opportunities to assess for any safeguarding concerns if

there is not regular contact with the family

“We ensure they receive an excellent service from highly trained and experienced staff. The service we give is of a very high quality”

Q How could we deliver any of the 5 mandatory checks differently to deliver better outcomes?

- Home visits are a successful way of implementing them and 'Face to face' was seen as the most successful method
- More could be done to suit the needs of working parents who may need these checks completed in more varied locations / evenings and weekends etc.
- The same person to complete the early checks (antenatal, New birth, 6 week and under 1 if possible), for continuity and relationship building as well as a clearer idea of the child's progression
- Having a wider range of skills/activities to assess development as the ASQ ones are very specific and don't suit all children
- For families where there are no concerns the 1 year and 2 year interventions can be and currently are undertaken by the wider skill mixed health visiting team
- Financial cuts to the service could risk the quality and Professionals indicated that they support better outcomes without a reduction in the service already being provided

Q What do you feel are the most important parts of the Health Visiting and Family Nurse Partnership Service and why?

“Providing an advisory service to families and the community to improve health, promote wellbeing and through early intervention provide timely support. To ensure that the voice of the child is heard and that their needs are met”

- The relationship set up during face to face contacts means that clients contact the service when they need support but also know where else to go if another service is needed; it's a holistic approach
- Adjustment to parenthood, perinatal mental health, minor medical queries (preventing GP and other service impact), supporting healthy eating from an early age, picking-up infant-early childhood emotional and development issues quickly and support these and referring them for support
- Ability to see families at key stages and gain their trust - Health visitors are often the link between a number of services in the community
- For FNP, the actual delivered programme that is intensive, evidenced based and looks at the 6 identified domains which influence healthy outcomes for the child and family is the

most important. To have a universal service that is not stigmatising but is able to identify vulnerabilities and children at risk. To have a flexible service that meets the different needs of families. A robust safeguarding element is essential

- The safeguarding role 'cannot be over-emphasised' - The unique access the service has into families homes and as such their lives is so important, to ensuring children's safety

Q What opportunities are there to further integrate the 0-5's and 5-19's services and/or pathways?

- Currently the HV/FNP services are integrated with other paediatric services. The 5-19 services are delivered within a different organisation but processes have been put in place to ensure continuity of care.
- MASH+ and MARAT have succeeded in closer working with Early Help and Social Care
- Training days or away days together and co-location to improve communication
- Improving the liaison with the School Nurses and emotional wellbeing services
- Within the homeless caseload there would be a great opportunity for a practitioner to work with the 0-19 to support older children who are experiencing challenges
- In terms of child protection and safeguarding work, at times these roles

have provided 'cover' for each other at child protection meetings; this is something which needs to be carefully handled

- Ongoing care with one practitioner or team across both pathways, where complex concerns, or safeguarding concerns have been identified could be beneficial to the family, in regard to continuity of care

Q What do you feel are the gaps or blockages in the current Health Visiting/ Family Nurse Partnership service provision?

- For FNP, continuous relationship building with other services and maintaining these contacts are crucial and the most challenging and for FNP to be rolled out over a larger area
- Being based in different parts of the borough
- More timely communication and information sharing with other services
- Lack of capacity to offer more topical group work sessions e.g. Delta
- Families would benefit from a more comprehensive service provision in the first year, it would also give the Health Visitor a better opportunity to form a more comprehensive assessment on the family and ensure that opportunities to refer to other services are not missed

Q How could they be solved?

- 6-8 week contact until the child is one year old
- A more rounded service that looks at the whole picture not just a child's development, offering focused group or 1-1 sessions/workshops for a variety of issues (weaning, breastfeeding, behaviour, potty training)
- Multiagency training, meetings, forums. More co-location and regular meetings with staff across 0-19 services and integrated health and social care teams.
- Increased communication with midwifery services
- Increased resources within the service and staff to play a more active role in planning and development
- Offering Health Visiting mixed skilled group work, one to one behaviour/ child health clinics / drop in sessions especially in hubs in busy areas such as the town centre. Having clinics located in the place where they are needed so that they are accessible to all families

“A more rounded service that looks at the whole picture not just a child's development, offering focused group or 1-1 sessions/workshops for a variety of issues (weaning, breastfeeding, behaviour, potty training)”

Q What do you see as the outcomes that Health Visiting and Family Nursing have on other public services? How could changes be made to maximise the benefits of these outcomes?

- A Family Nurse is usually the main professional with the greatest access to families where other services possibly struggle to engage. Joint visits are often successful and aid other engagement and Social Care has less involvement with clients who have a Family Nurse
- FNP has an impact on reducing referrals into mental health services and is proven to provide positive outcomes on things like school readiness, prevention of accidents and much more
- The safeguarding work must impact on these services favourably as issues are picked up early. FNP's whole ethos is to improve parenting outcomes and avoid the need to involve Social Care involvement where possible, due to intensive input
- Reduction in referrals to social care as often HVs will work with a family at a threshold that prevent referral for safeguarding issues. by providing lots of support in the home for our most vulnerable families we do lots of work around behaviour and sleep management reducing referrals to other
- Providing support services to ensure future health benefits for both mum and baby

“The early detection and intervention on parenting issues and social and developmental problems impacts on education hugely, as children are assessed and work has begun on any additional needs before they

Q What works well in the current referral pathways? Please provide relevant examples

Many good practice examples were given including but not limited to the following:

- Liaison and updates from HLOs
Notification of DIRs, birth notifications, maternity notification for FNP clients, Health Visitor transfer of UP and UPP, Perinatal complex referral to perinatal mental health team, faster perinatal referrals to Perinatal and postnatal emotional support services, development referrals to the Lighthouse Centre, early eye problems to eye clinic
- Some referrals are easy and quick to complete, some can be quite time consuming
- Good relationship with Children's Centres, sexual health services etc. Referrals and signposting to these services is well established

Q How could improvements be made?

- Educating professionals about different roles and systems as there needs to be more opportunities to learn together –to learn about each other’s roles
- More contact \ joint working with social services longer term teams
- Timeliness of responses and feedback by other agencies
- Unified forms/processes for all services

Q How do you see the role of Health Visitor/ Family Nurse contributing to the safeguarding of children and what is the impact of safeguarding on the overall workload?

- A Family Nurse consistently visits a child and Parent often and gets to know the client and family which enables them to pick up safeguarding concerns earlier and address them and/or refer to services where needed
- Safeguarding greatly increases the workload due to report writing, time spent contacting other agencies & attending conferences, however FNP has a huge contribution to safeguarding due to the nature of visiting people in their homes & being allowed access to the child's life
- Health Visiting have a pivotal role in safeguarding, and it is a large part of the caseload, which would be aided by increased resources

“There is no possibility to over-emphasise this role. Health Visitors are often the professionals that identify and refer in concerns”

- The opinions and expertise of the staff within the service have a great impact.
- Staff are often relied upon to carry the risk on their caseload if there are no other professionals or services working with the family at that time
- If there is not a health need Health Visitors cannot keep visiting in the long term for concerns which are not seen by other services
- The vulnerability of the unborn, neonate and infant is key, and the input of the midwife has in recent years lessened, making the FN or HV even more vital
- The impact of safeguarding is considerable on the workload, as it is fundamental to the role(s) and is always treated as a priority

Q Are there any opportunities or improvements you could see within the safeguarding process?

- All cases under care of Social Care to have an allocated Social Worker improved information shared to and from Social Care

- Increased feedback from MASH+/FCT about the decisions and outcomes from referrals
- Social Workers sitting within Health Visiting teams to make it a more seamless service
- More multi-agency learning, more education of health in terms of decision making in Social Care
- Improved system Safeguarding templates
- To have allocated support for over 5's within the homeless caseload

Q Is there any technology or innovations that you feel could be incorporated into the service that would help you to be more effective and efficient? If so, what is it?

- Mobile phones with internet access for information sharing and iPads or tablets with internet access for inputting information directly onto the system and receiving emails
- Parking permits to allow parking near to clients homes and to support lone working
- Access to efficient lone working devices
- Information sharing, especially between Health Visiting Teams to support Child protection, out of area clients moving to the Borough and enabling access to records sooner after they arrive

- System improvements to allow all services to access the same systems and records when required

Summary of the Responses from the Commissioners Survey

Q Does the availability and configuration of Health Visiting and Family Nurse Partnership Services have an impact on access to other related services?

- The universal services contribute to the statutory requirement of Looked After Children which includes health assessments and the Family Nurse Partnership can support young parents who may also be looked after children and families as needs increase for vulnerable families living in poor conditions
- The services interface with a range of services including school nursing, A Better Start Southend, Children's Social Care, Early Help, Early Years and Children's Centres, Children's Specialist Community Services and Community Paediatrics
- The services have an important role and a significant favourable impact on screening and identifying medical problems, identifying vulnerable children and key workers doing health promotion

Q What Role do Health Visitors and Family Nurse Practitioners have in influencing/supporting wider public services?

- Looked After Children and the Public Health Agenda
- Children's Social Care, Early Help, Early Years and Children's Centres, Children's Specialist Community Services and Community Paediatrics, Safeguarding through a range of health based knowledge providing important insights for other teams (MASH+ and MARAT) and can also support other services by bringing Children's Centres and Community Hubs to life
- Promotes the health and welfare of Children to have a fulfilling childhood and improve their long term life chances.
- Safeguarding is a key element

Q How could we deliver the five mandated Health Checks differently?

- The current checks need to happen during the crucial time periods with increased staff to deliver this
- Integrating checks and using innovative technology with staff working alongside Early Help to improve the level of health input and improve holistic outcomes for families

Q What do you feel are the most important parts of the Health

Visiting/ Family Nurse Partnership service and why?

- All aspects are important across the 5 mandatory checks and the 6 high priority areas with safeguarding running throughout
- Safeguarding and screening for growth and development problems as well as identifying concerns with vision and hearing. Health promotion is also important.

Q Have opportunities between 0-5's and 0-19's services been identified and captured in strategic planning and policy decisions?

- Conversations are ongoing for developing interfaces of the 0-5/0-19 service with other services

Q Has the performance and quality of the Health Visiting/ Family Nurse Partnership Service provision indicated any gaps or blockages? If so, is there a plan to resolve these? Are there any other influencing factors on the measurement of definition of service outcomes?

- Locally the services have good practice in some areas but needs to be improved in other areas
- 'HV/FNP Provision is generally at a high standard'

Q Have outcomes and impacts within Health Visiting and Family nursing been aligned with other public sector services? And are these reflected in the strategies and policies?

- In part, however more could be done to align and integrate outcomes with other public sector services

Q Has a review of the current referral pathways been considered or conducted? What learning came from this, and has the learning been embedded? If changes to current pathways are made what do you think the impact on the wider system might be?

- A service mapping exercise was recently conducted and mapped the current 0-5 pathway
- There is regular and close involvement with the Health Visiting service and educational and learning events are also regularly undertaken

Q How do you see the role of the Health Visitor/ Family Nurse contributing to the safeguarding of children and what is the impact of safeguarding on the overall workload?

- Child protection (especially in identifying physical abuse and neglect and the most difficult of all - fabricated and induced

illness). They help in identifying vulnerable children because they work closely with families. Health promotion and ensuring welfare of children

- HVs have an important role in safeguarding across the 4 levels of service. Including: - working in partnership with other key stakeholders (e.g. CCG's safeguarding services & referrals to SBC's MASH+) to help promote the welfare and safety of children and young people. - being aware of children with an early help assessment, child in need, child protection or Looked After Child plan.

Q Are there any opportunities or improvements you could see within the safeguarding process?

- Increased resource and capacity in the service to help in protecting and promoting welfare of children and especially identifying vulnerable children

Q Has increased use of technological opportunities been considered for the Health Visiting and Family Nurse Partnership Services? Has this been incorporated into organisational technology/digital strategies?

- Not all HVs have their own laptops and it's been identified that the use of tablets may support HVs on their visits to deliver better outcomes

Pop-up Parent Co-production and Group session findings

The main points taken from the Parent pop-up groups held are summarised below:

- Many Parents didn't know how to contact the service, what support was available or that they could access the service outside of the universal visits up to the age of 5
- The focus of responses was around wanting more support from the service in addition to the current mandatory visits, consistency of an allocated Health Visitor as well as improved communication about arrival times and the ability to respond or be flexible around visits and for visits to take place at home in a comfortable environment where other children and partners were present
- Partners had not been as involved in visits as much as parents would like and felt that partners had been excluded from the post-natal experience when they felt they would like to actively participate
- Many of the Mothers spoken to said they had wanted more information about the Edinburgh questionnaire and the reason it was being done, what the score meant or who the results would be shared with and that they felt Mothers would answer more honestly if they had been able to build a relationship with their allocated Health Visitor
- Parents said that they felt that information and support was targeted at first time parents but things move so fast that experienced parents also wanted basic information and advice repeated so they had the most current guidelines and support to deal with their older children and new arrival
- Many parents spoke positively about the potential for online support, information, advice and communication with the service. Many Parents said they looked to social media and websites to find out about local support and events and to link with other parents for immediate advice
- Parents of children with additional needs, speech and language or developmental delays or allergies had mixed experiences of referrals or getting early help and signposting and some felt that they would have benefitted from more targeted group sessions
- Many parents didn't feel that they had been able to build a relationship because they had seen a different person at the next visit and that had impacted on getting what they needed or wanted from the service
- Parents who had built good relationships with the service had a very positive experience and found they had been able to contact for support when they felt they needed it outside of the 5 visits. They said that seeing the same Visitor had contributed to this and feeling confident that changes in them or their child would be noticed and explored

Next steps

Results of the consultation

This report will be shared on the Southend Borough Council website showing the feedback received from the Consultation.

Co-production to further develop the service

Following the analysis of the Consultation an online ideas forum will be launched on Stickyworld to gather ideas from Parents, Carers and Professionals on the additional areas identified in section 2.1. The online forum will be an ongoing co-production tool which will help to shape the vision and ensure Parents, Staff and stakeholders are participating in the development of a 0-19 integrated service and offer opportunities for more focussed offline discussion.

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OPTIONS PAPER: ALTERNATIVES TO 0-19s MODEL

1.1 Overview

1.1.1 The recommended option is the creation and development of 0-19s Model, with Health Visiting and School Nursing (delivered in-house) at the core.

1.1.2 This Appendix sets out the various alternative options which were also considered:

- No change – Recommission an outsourced 0-5 Service and do not create a 0-19s Model
- Commission an outsourced 0-19 Service
- Jointly commission an outsourced 0-19 Service which includes SCCG-commissioned services (Community Children's Services and the Community Paediatric Service)

1.2 No change - Recommission an outsourced 0-5 Service and do not create a 0-19s Model

1.2.1 This would have involved a like-for-like replacement of the current arrangements. SBC would have retendered the 0-5 Service and the 5-19 Service would have remained in-house.

1.2.2 This option would have proved the least disruptive and most straightforward option to implement.

1.2.3 However, it was decided that it would present a missed opportunity for improving service integration.

1.2.4 Integration with other SBC services delivered in-house (e.g. Early Years & Early Help) is easier to control and implement successfully if the 0-5 Service is also delivered in-house. In-house staff can more easily be co-located with associated teams and staffing structures can be more flexibly adapted through test and learn approaches. This would have been more difficult to achieve if the service was tendered externally, because SBC would have an arms-length relationship with the provider.

1.2.5 There were concerns regarding the affordability of the service following recent budget reductions and whether prospective bidders may not have submitted bids.

1.2.6 There was also a concern that ABSS services might have been destabilised by the appointment of a new provider. This risk can be more easily managed if SBC takes on the delivery of the Public Health-funded FNP.

1.3 Commission an outsourced 0-19 Service

1.3.1 This would have involved the creation of a 0-19 Service by combining the 0-5 Service (currently delivered by EPUT) with the 5-19 Service (currently delivered in-house). However, unlike the preferred option, this 0-19 Service would have been tendered externally to commence on 1 April 2019.

1.3.2 This option would have provided some of the benefits associated with the preferred option. The combined 0-19 Service would have provided a more substantial proposition than simply retendering the 0-5 Service and so may

have produced a more competitive tender process potentially providing better value for money as bidders found economies of scale.

1.3.3 However, tendering out the School Nursing service could have had a detrimental effect and/or be perceived negatively. The School Nursing service was brought in-house 2015 after changes in the commissioning landscape cause a destabilisation of the workforce. A considerable amount of time and effort was exerted to bring the in-house service to the required level. The service underwent a recent CQC inspection in 2017 which was positive. Colleagues in Public Health were reluctant to risk the recent improvements in the School Nursing service by retendering this service. In addition, there may have been a negative public perception in outsourcing the school nursing service, especially as it was only brought in-house relatively recently.

1.3.4 Furthermore, there was a concern that outsourcing the 0-19 Service would make service integration with other in-house services (e.g. Early Years & Social Care) more difficult to control and implement. It would not have been possible to create the 0-19s Model as envisaged: there would have been more obstacles preventing staff from being co-located with associated teams and achieving operational flexibility would have been more difficult, as SBC would have had an arms-length relationship with the provider.

1.4 Jointly commission an outsourced 0-19 Service which includes SCCG-commissioned services (Community Children's Services and the Community Paediatric Service)

1.4.1 This would have involved SBC and SCCG jointly commissioning a combined service. This service would have included the 0-5 Service and (optionally) the 5-19 Service (commissioned by SBC) and the Community Children's Services and (optionally) Community Paediatric Service (both commissioned by SCCG).

1.4.2 This option may have provided some of the benefits associated with the preferred option and, if successful, would have provided the highest levels of integration across children's services.

1.4.3 However, SCCG indicated that it currently wishes to seek to implement service improvements with EPUT in relation to Children's Community Services in the short term, rather than fully recommissioning its children's services at this time. Seeking integration at this time would have cut across the work of the community paediatrics options appraisal.

1.4.4 In addition, there would be significant risks to the service in SBC and SCCG attempting to jointly design, procure and mobilise this extended service within the available timeframe. This issue would be compounded by the different footprints of the services, as SCCG services cover Castle Point and Rochford, as well as Southend.

1.4.5 That said, the preferred option certainly does not preclude SBC and SCCG from undertaking this joint work over a longer timeframe, with a view to further integrating and potentially outsourcing those services together in the future.

1.5 Other Factors

1.5.1 It should be noted that colleagues from legal and procurement have advised that it would not be a viable option to roll-forward the 0-5 Service contract with EPUT beyond 31 March 2019. Consequently this option was not considered further.

1.5.2 With each of the three alternative options set out above, there was also a concern that timescales would have been very tight for procuring and then mobilising a outsourced service. Procurement has advised that it would have taken several months to run a full procurement exercise. Following selection of a provider, it would have been advisable to allow at least 2-3 months for that incoming provider to mobilise the new service. There is also the risk that any contract award could be subject to a challenge, leading to delays in mobilisation.

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Southend-on-Sea Borough Council

Agenda
Item No.

10

Report of Deputy Chief Executive (Place)

To
Cabinet
on
18th September 2018

Report prepared by:
Peter Geraghty, Director of Planning and Transport

Access, Parking & Transport Strategy for Southend

Place Scrutiny Committee
Cabinet Member: Councillor Moring
A Part 1 (Public Agenda Item)

1. Purpose of Report

- 1.1 To update Members on progress and to seek Members' views on the recently produced Borough-wide parking and access strategy and subsequent strategy.
- 1.2 Included in **Appendix 1** is an Executive Summary of the Strategy.

2. Recommendation

- 2.1 That Members note the content of this report, the Borough-wide Parking and Access Strategy and agree the following recommendations:
 - 2.1.1 **The strategy be broadened to include range of transportation related issues and be known as the Access, Parking and Transport Strategy for Southend (APT).**
 - 2.1.2 **Establish a new Access, Parking and Transport Working Party chaired by the cabinet member for Infrastructure to replace the Public Transport and Buses Working Party (including new terms of reference).**
 - 2.1.3 **A complementary adjustment to the terms of reference of the Traffic and Parking Working Party which will be known as the Traffic Regulations Working Party**
 - 2.1.4 **The implementation plan identified in the strategy be progressed as a package of pilot projects. The new Access, Parking and Transport Working Party to receive reports, previews and updates on these pilots.**
 - 2.1.5 **To undertake consultation on the Borough-wide Parking and Access Strategy as discussed in paragraph 6.6.**

2.1.6 To implement the strategy and to maintain the impetus a dedicated resource is required. This would consist of a project manager and a transport or suitably qualified highways engineer. The funding estimated to be £125,000 which is to be funded from the Business Transformation Reserve.

3. Background

- 3.1 The Borough-wide Parking and Access Strategy was commissioned following on from a Car Parking Study for the Central Area of Southend produced in November 2016. This work was undertaken to support the preparation of the Southend Central Area Action Plan (SCAAP) adopted by the Council on 22 February 2018.
- 3.2 The Borough-wide Parking and Access Strategy for Southend builds on the actions and recommendations identified in the earlier Car Parking Study. It provides more detail and an implementation plan for the outline recommendations contained in that report. Importantly, the strategy looks at the needs of the whole Borough in terms of parking demand and supply, accessibility to parking, technology and tariffs, especially at peak visitor times and events.
- 3.3 As recommended above it is proposed to wrap both the car parking study and the Borough-wide Parking and Access Strategy into an Access, Parking and Transport Strategy for Southend (APT) and to harness the outputs from Southend 2050 and the emerging Local Plan to take an overall strategic approach to the future growth of the borough.
- 3.4 The transport and planning context for this strategy is set out in the following documents:

Southend Core Strategy (adopted December 2007) provides the vision, objectives and broad strategy for the spatial development of Southend to 2021. The Southend Core Strategy has as one of its key strategic objectives the need to focus on securing a 'step change' in the provision of transport infrastructure as an essential accompaniment to new development (SO9) and to maximise the effectiveness and integration of key transport corridors and interchanges as a principal focus for development in the urban area (SO10). Policy CP3 (Transport and Accessibility) seeks to secure a step change in transport provision and improvements necessary to achieve a modern integrated transport system and unlock the development and economic potential of the town.

Development Management Development Plan Document (DPD) adopted in July 2015 sets out the Council's policies for positively managing development in Southend and is used to assess and determine planning applications. It reflects the spatial vision and objectives of the Core Strategy and includes more detailed local policies for the management of development. Policy DM15: Sustainable Transport Management recognises the key role sustainable transport plays in Southend in supporting economic growth, reducing carbon emissions, promoting equality of opportunity and improving quality of life and health.

The **Southend Central Area Action Plan (SCAAP)** adopted in 2018, contains Policy DS5 (Transport, Access and Public Realm). This policy advises that the level of regeneration and growth proposed for Southend Central Area will have an effect on the strategic transport network. The Policy seeks to improve transport, access and connectivity, building on the approach set out within the Core Strategy and the Local Transport Plan (LTP). It advises that infrastructure will be required to support and, in some cases, enable the scale and location of growth set out in the Core Strategy. This includes the delivery of a significant number of new dwellings and jobs in the Central Area, which is expected to result in a notable increase in population.

The **Southend Local Transport Plan (LTP3)** 2015, seeks to promote a thriving sustainable local economy, minimise environmental impact, create a safer borough and reduce inequalities in health and well-being in the borough.

3.5 The Borough-wide Parking and Access Strategy aims to support growth sectors such as tourism, retail and leisure as well as supporting business needs. Sustainability and better mobility, carbon reduction and improving air quality also informed the strategy development. It takes into account four key principles broadly established in the Local Transport Plan and the recent SCAAP Parking Report:

1. A smart, modern parking management system is essential for a sustainable urban mobility system, which should manage supply and demand without detrimental effects, supporting air quality improvements and reducing carbon emissions. An agile, iterative approach to delivery of smart solutions across the Borough, and that flexibility and interoperability are adopted as fundamental principles.

2. Pricing of parking should be competitive, flexible and dynamic to achieve best value, better usage and contribute to a prosperous Borough.

3. Traffic “cruising” in search of parking spaces is detrimental to business in the Borough, especially in the Town Centre and Seafront and must be reduced; it also creates congestion, pollution and road safety problems.

4. New initiatives, smart technology and new thinking should be encouraged to deliver better access to and maximum utilisation of parking spaces (both private and public) with the greatest benefit at the most economical and advantageous price.

3.6 The Borough-wide Parking and Access Strategy has an overall vision to provide the best experience for residents and visitors to Southend-on-Sea, by providing comprehensive information on travel and parking options enabling visitors to choose the most convenient travel option, location, choice and competitive price when visiting Southend.

3.7 The strategy will complement and support the work being undertaken on the Council’s Housing Strategy, Skills and Labour Market Strategy and the recently published Tourism Strategy. It should also support and assist the delivery of Council’s Local Air Quality Action Plan.

3.8 It will help give effect to and be informed by the work being undertaken by the Council on Southend 2050 and South Essex 2050. It will form the basis for improving the borough's competitiveness and enhancing its role as a sub-regional urban centre. Although the work on Southend 2050 is on-going some of the feedback and views already received provides some insight into residents' perception of living in Southend and their aspirations for the future. For example, parking and parking costs have been raised as has transport and making Southend a place that's easy to get around and to get in and out of. Also, wider 'liveability' issues such as safer and cleaner, more cultural amenities, attractive public space. Whilst it is still early in the Southend 2050 process any APT Strategy should achieve the following outcomes:

- Better range of transport options
- A transport network that supports economic growth and activity
- Better use of road space
- Efficient and effective information and guidance systems
- Improved environmental conditions
- Improved health and well-being
- Assets and systems that are generating income for the Council
- Quality places (development) supported by necessary infrastructure
- A safer Borough

3.9 The Borough-wide Parking and Access Strategy identifies technological and management approaches to the specific parking issues in Southend-on-Sea Borough, including difficulties in accommodating peak season demand for parking, co-ordination of peak season traffic and provision of information to visitors. The Strategy sets out a series of deliverables as follows:

Smart City Technology Plan

- Identifies current pain points of queuing to access Southend, finding car parks and finding a space to park.
- Considers how the current car park infrastructure, technology and management could be better integrated.
- Considers how the operational aspects could be centralised together with the Council's traffic control systems, public safety and other aspects to be developed as part of the Data Platform – to be developed further as part of Intelligence Hub.

Visitor Access and Parking Management Plan

This plan is for times of peak demand and congestion on the highway network in Southend-on-Sea Borough, for example Public Holidays and during the school summer holidays. The plan includes a range of communications with visitors arriving in Southend to help them better plan journeys and find parking, improvements to existing travel information resources, signage and wayfinding and provision of a designated traffic management response crew on busy visitor days to manage the circulation of vehicles, divert traffic away from full car parks and prevent the obstruction of key junctions within Southend Central Area.

Signage Strategy

To improve signage to the principal car parks across the Borough, using a combination of static and dynamic, permanent and temporary signage to respond to the changing needs of the visitors, commuters and shoppers who visit Southend-on-Sea. The plan considers how improved signage could encourage use of car parks away from the central area where traffic flows are

lighter and there is more opportunity to park. It also identifies the key decision points for drivers arriving in the Borough and appropriate signage to fully inform them of appropriate routes to key attractions, including a strategy for signing alternative routes to the seafront at periods of peak visitor demand. It also includes proposals for how the Council can maximise potential benefits of improvements in signage technology.

Tariffs and Season Tickets

This includes tariffs and season tickets to take a more responsive approach to charging for car parking, taking into account the varying levels of demand on different days and at different times of the year. Encourage wider use of the Moben app and at periods of high demand and encourage residents to visit the seafront and town centre before the visitor peak period.

Stakeholder Engagement and Management Plan

This engagement plan identifies key sectors, stakeholders and suppliers and sets out a plan for ensuring that there is the opportunity to contribute and engage with the emerging proposals and wherever possible achieve buy-in from the various sectors.

Implementation plan

This plan sets out each of the strategy actions, funding type (revenue or capital), estimated funding required, timescale for delivery and key partners involved. The Implementation Plan has a series of themes with short term, medium term and long term actions.

- 3.10 Some of the measures identified in the Borough-wide strategy have already been implemented or are the process of being implemented and it is intended to continue with these. This includes changes to road layouts to provide easier, direct and more intuitive access to car parks as part of the Town-centre Redevelopment Improvement Project (TRIP). The improvements will enable car park users to access parking from Queensway, reducing access traffic on roads within the core of the town centre which will in turn improve the pedestrian experience within Southend Central Area.
- 3.11 The Borough-wide Parking and Access Strategy be broadened out to include a range of transport related issues to be known as the Access, Parking & Transportation Strategy for Southend (APT).
- 3.12 It is proposed that a series of pilot projects be undertaken to trial different options. There are a number of matters such as branding of car parking, improving data and information on car parking and travel options, and possible physical interventions that can be undertaken as part of a wider APT strategy and these should be commenced forthwith. It is recommended that an Access, Parking and Transport Working Party be established to supersede the Public Transport and Buses Working Party and this group is chaired by the cabinet member. This will require new terms of reference and complementary adjustments to Traffic and Parking Working Party which will be known as the Traffic Regulations Working Party (see appendices).
- 3.13 A package of pilot projects can be put together under the terms of the APT Strategy, including a resourcing plan and timetable. The progress on the implementation of the Strategy would be report through the new Working Party.

- 3.14 It is proposed to implement a wider APT Strategy and pilot projects and to maintain the impetus a dedicated resource is required. This would consist of a project manager and a transport engineer or a professional with transport expertise. The funding for which is likely to be in the order of £125,000 which will come from the contingency budget.
- 3.15 Stakeholder engagement and consultation commenced in the summer and is intended to continue over the autumn using the borough wide strategy as a basis for dialogue. The relevant feedback from residents and groups involved with Southend 2050 is also being used for this purpose.
- 3.16 It will be necessary to evaluate on an on-going basis the resources necessary to implement the APT Strategy effectively and ensure that it aligns with the work being carried for Southend 2050 and other strategies and plans such as the work being undertaken for the South Essex Active Travel (SEAT) project and Local Air Quality Action Plan. This is discussed at 6.4 below.
- 3.17 Some of the measures identified in the Borough-wide strategy have already been implemented or are the process of being implemented and it is intended to continue with these. This includes changes to road layouts to provide easier, direct and more intuitive access to car parks as part of the Town-centre Redevelopment Improvement Project (TRIP). The improvements will enable car park users to access parking from Queensway, reducing access traffic on roads within the core of the town centre which will in turn improve the pedestrian experience within Southend Central Area.

4. Options

- 4.1 One option would be to do nothing at all. This clearly would lead to a reduction in the effectiveness and operation of the transport within the borough affecting its economic viability and quality of life for residents.
- 4.2 Another alternative would be to proceed with ad-hoc solutions as and when issues arise. This would lead to similar consequences as the do nothing option.

5. Reasons for Recommendation

- 5.1 To address a key issue for the borough which is transport and travel and to improve resilience. The recommendations also complement the work being undertaken on Southend 2050 and South Essex 2050 and a number of other Council strategies either recently published or currently being prepared.

6. Corporate Implications

- 6.1 Contribution to Council's Vision & Corporate Priorities

The implementation of the strategy relates to a number of key issues such as safety, air quality, economic competitiveness and quality of life. Its implementation is therefore, directly relevant to the Council's priorities of safe, clean, safe, healthy, prosperous and excellent.

6.2 Financial Implications

Some of the work identified in this report will be met from existing capital and revenue resources other aspects will require specific funding for example the use of consultants or specialist to undertake bespoke pieces of work i.e. branding of car parks and signage. There will also need to be a time limited resource for a project manager and engineer to take forward the implementation plan and oversee the pilot projects. This time limited resource over 2018/19 and 2019/20 is estimated to cost £125,000 and is proposed to be funded by the Business Transformation Reserve. The funding required for 2018/19 is £30,000 and £95,000 for 2019/20.

Although a separate but parallel and related work-stream, the approach to parking charges, will be informed by this work (APT) which will explore how residents of the borough might benefit from either tariffs, season tickets (see paragraph 6.4) or other forms of incentives.

6.3 Legal Implications

Any permissions or authorisations for pilots or projects will be obtained as and when required.

6.4 People Implications

To implement the strategy and to maintain the impetus a dedicated resource is required. This would consist of a project manager and a transport engineer or suitably qualified engineer.

There may be opportunities for synergy between the work of the 2050 Group and the APT Project including re-purposing or co-creation.

6.5 Property Implications

Some of the proposals will relate to works to the highway or car parks in the Council's ownership.

6.6 Consultation

One of the aspects of the implementation of the strategy is stakeholder consultation. The strategy includes a stakeholder engagement plan. There may be opportunities for synergy between the work of the Southend 2050 Group and the emerging Local Plan consultation.

6.7 Equalities and Diversity Implications

Improving access and transport in and around the borough will help support residents in improving their life chances. In addition the signage and branding will take account of equalities and diversity issues and in doing so improve the Council's approach in this area. Better accessibility and mobility will help improve inclusivity and equality.

6.8 Risk Assessment

6.8.1 Any appropriate risk assessments will be carried either as part of the pilot projects or the implantation of the strategy generally.

6.9 Value for Money

Improving the efficacy and efficient of movement in and around the borough and for those visiting and working in the borough will provide better value for money. It will also assist in budget setting and financial planning by supporting decision on price setting (i.e. car park charges).

6.10 Community Safety Implications

Improving information on travel options and providing more choice and making improvements to the highway network will enhance community safety within the borough.

6.11 Environmental Impact

Reducing dependency on the car, improving travel options and reducing congestion will all contribute to reducing the environmental impact and improving air quality.

7. Background Papers/Reference Documents

Referred to in the report

8. Appendices

Appendix 1: Parking and Access of Strategy Executive Summary

Appendix 2: Terms of Reference of Access Parking & Transport Working Party

Appendix 3: Traffic Regulations Working Party

Southend
Boroughwide Parking
and Access Strategy

Report
April 2018

Southend-on-Sea Borough
Council

Our ref: 23121701
Client ref: PM





Southend Boroughwide
Parking and Access
Strategy

Report
April 2018

Southend-on-Sea Borough
Council

Our ref: 23121701
Client ref: PM

Prepared by:

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Executive Summary

This Boroughwide Parking and Access Strategy has an overall vision to provide the best experience for residents and visitors to Southend-on-Sea, by providing comprehensive information on travel and parking options enabling visitors to choose the most convenient travel option, location, choice and competitive price when visiting Southend.

The strategy proposes technological and management solutions to the specific parking issues in Southend-on-Sea Borough, including difficulties in accommodating peak season demand for parking, co-ordination of peak season traffic and provision of information to visitors.

Improvements are already underway including:

- A new method of recording car park occupancy using camera technology is being trialled (Cleverciti trial in Civic North Car Park);
- A new contactless payment app (Mobon);
- New ticket machines offering easy payment and live communication of data;
- A user-friendly map showing live car park occupancy data on the Visit Southend website;
- A Connected Digital Platform to host a range of information feeds and free wi-fi in the town centre which enables systems to communicate with users;
- Provision of new temporary car parking at the gas works site on the seafront;
- Brief trial of the Park and Ride concept at the Civic Centre; and
- Revisions to car parking tariffs based on analysis of the survey data collected from the car park guidance system.

There is scope for much greater collection and integration of data through investing in new technologies to monitor car park occupancy and using this data to better plan traffic management and parking arrangements. The strategy will inform the specification of a new Boroughwide parking guidance system and vehicle messaging system covering the main car parks across the Borough, giving reliable up-to-date and easily accessible information to users about parking availability. A more detailed project plan, developed with input from all relevant teams within the Council, will set out in more detail the timescales and dependencies and split the required work into workstreams with allocated responsibilities.

Improvements to management systems and information provision will be delivered through an agile, iterative approach with flexibility and interoperability adopted as fundamental principles. A more flexible parking system based on an open data platform is envisaged to upgrade the existing systems which lack co-ordination and data sharing and which limits the potential to fully inform system users of parking availability across the key car parks in the Borough.

The strategy will be supported by improvements to access options for visitors to Southend Central Area, including changes to road layouts to provide easier, direct and more intuitive access to car parks as part of the Town-centre Redevelopment Improvement Project (TRIP). The improvements will enable car park users to access parking from Queensway, reducing access traffic on roads within the core of the town centre which will in turn improve the pedestrian experience within Southend Central Area-on-Sea.

This strategy aims to:

1. Achieve a step-change in travel information provision, adopting an approach centred on meeting the needs of travellers and addressing their pain points of queuing to access Southend-on-Sea, finding car parks and finding a space to park.
2. Provide a framework for moving from a fragmented network of traffic control, car parking occupancy, payment and information providers to an integrated smart city data platform into which a network of specialist providers provide reliable, access-controlled feeds.
3. Effectively manage peak periods of visitor demand through a range of measures including:
 - Encouraging travel behaviour change by Southend residents and visitors on peak days through dedicated peak-day communications.
 - Improving existing information resources and extensive use of websites and social media.
 - Providing visitors to the Borough with comprehensive, up to date **pre-trip** and **pre-arrival** information about all travel and payment options available through a range of media.
 - Provide visitors to the Borough with improved travel information **during** their trip to Southend through a range of media and systems.
 - Improving wayfinding from car parks to key visitor destinations.
 - Actively manage traffic on days of high visitor demand through a range of on the ground interventions.
 - Continually improve the visitor experience through engagement with visitors to understand their experiences and behaviours.
4. Improve signage to principal car parks across the Borough through:
 - Directing drivers to the most appropriate car park.
 - Raising awareness of other seafront locations in the Borough from Leigh and Chalkwell to Shoeburyness to spread the demand.
 - Encouraging use of less well used car parks, particularly on days of high demand.
 - Providing guidance on the most appropriate route to the car parks, particularly on days of high demand.
 - Adopting state of the art dynamic signage infrastructure to allow for variable signage which responds to the different patterns of demand in Southend.
5. Support the visitor economy through dynamic changes to parking tariffs for periods of high demand for example Summer weekends and bank holidays to better balance the demand for parking between the seafront and town centre car parks.
6. **Engage stakeholders** early and frequently during implementation of the strategy.

To realise these aims a series of deliverables has been produced:

- An outline Smart City Technology Plan:
 - Identifies current pain points of queuing to access Southend, finding car parks and finding a space to park.
 - Considers how the current car park infrastructure, technology and management could be better integrated.
 - Considers how the operational aspects could be centralised together with the Council's traffic control systems, public safety and other aspects to be developed as part of the Data Platform – to be developed further as part of Intelligence Hub.
- A **Visitor Access and Parking Management Plan** for times of peak demand and congestion on the highway network in Southend-on-Sea Borough, for example Public Holidays and during the school summer holidays. The plan includes a range of communications with

visitors arriving in Southend to help them better plan journeys and find parking, improvements to existing travel information resources, signage and wayfinding and provision of a designated traffic management response crew on busy visitor days to manage the circulation of vehicles, divert traffic away from full car parks and prevent the obstruction of key junctions within Southend Central Area. It also considers the potential for park and ride using existing car parks and public transport routes as well as new shuttle bus services.

- A **Signage plan** to improve signage to the principal car parks across the Borough, using a combination of static and dynamic, permanent and temporary signage to respond to the changing needs of the visitors, commuters and shoppers who visit Southend-on-Sea. The plan considers how improved signage could encourage use of car parks away from the central area where traffic flows are lighter and there is more opportunity to park. It also identifies the key decision points for drivers arriving in the Borough and appropriate signage to fully inform them of appropriate routes to key attractions, including a strategy for signing alternative routes to the seafront at periods of peak visitor demand. It also includes proposals for how the Council can maximise potential benefits of improvements in signage technology.
- Proposals to modify **parking tariffs and season tickets** to take a more responsive approach to charging for car parking, taking into account the varying levels of demand on different days and at different times of the year.
- An **Implementation plan** which sets out each of the strategy actions, funding type (revenue or capital), estimated funding required, timescale for delivery and key partners involved.
- A **Stakeholder Engagement and Management Plan** which identifies key sectors, stakeholders and suppliers and sets out a plan for ensuring that there is the opportunity to contribute and engage with the emerging proposals and wherever possible achieve buy-in from the various sectors.

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3.9 Public Transport and Buses Access, Parking & Transport Working Party

3.9.1 Membership

8 Members of the Council

The Chairman shall be the Leader or his / her nominee.

Substitutes: Permitted in accordance with Standing Order 31
 Proportionality: By convention political proportionality shall apply

Interested Parties (to be invited in a non-voting capacity on an ad-hoc basis):

- 1 representative from First
- 1 representative from Arriva
- 1 representative from Stephensons
- 1 representative of the rail operators (dependent upon franchise)
- 1 representative of Southend Area Bus Users Group
- 1 representative of the Southend Rail Users Group

Advisory Capacity:

- 1 representative of Essex County Council

3.9.2 Quorum

3

3.9.3 Terms of Reference

- (a) ~~To investigate further the specific matters in the action plan which Cabinet considered on 4th November 2008 and resolved needed further investigation.~~
- (b) ~~To undertake the on-going role of considering how bus services in the Borough might be improved and make appropriate recommendations to Cabinet.~~
- (c) ~~To ensure synergy of public transport services for Southend.~~

To make recommendations to Cabinet on strategy and policy relating to the following matters:

(a) Access to the Town: This will include considering improvements to access options for visitors to Southend including changes to road layouts and reducing access traffic on roads within the core of the town centre to provide easier, direct and more intuitive access to car parks and key visitor destinations.

(b) Parking: This will include:

- (i) the development of a parking guidance system and vehicle messaging system covering the main car parks across the Borough; and
- (ii) appropriate changes to parking tariffs for periods of high demand for example Summer weekends and bank holidays to better balance the demand for parking between the seafront and town centre car parks.

(c) Transport: This will include:

- (i) how public transport, including bus services, in the Borough might be improved;
- (ii) ensuring synergy of public transport services for Southend; and

- (iii) the provision of improved travel information pre-travel and pre- arrival to Southend through a range of media and systems and to encourage travel behaviour change by Southend residents and visitors including:

3.9.4 Status of Meetings

Private

3.9.5 Reports to

The Cabinet

3.6 Traffic and Parking Regulation Working Party

3.6.1 Membership

8 Members of the Council¹, comprising the Cabinet Members who sit on the Cabinet Committee (one of whom shall be appointed Chairman) and 5 non-Cabinet Members

Substitutes: Permitted in accordance with Standing Order 31
 Proportionality: By convention political proportionality shall apply to the 5 non-Cabinet Members

3.6.2 Quorum

3 (including at least 2 of the Cabinet Members)

3.6.3 Terms of Reference

- (a) To consider written objections and also to hear oral representations by objectors and supporters (if any) to proposed Traffic Regulation Orders and to make a recommendation to the Cabinet Committee on such proposed Orders. (See Section 6D of **Part 4(a)** of the Council's Constitution regarding public speaking on Traffic Regulation Orders.)
- (b) To consider ~~and comment on the details of traffic, transportation and highway issues, schemes, projects and requests for Traffic Regulation Orders referred to the Working Party by the Council, Cabinet or the Deputy Chief Executive (Place) and make appropriate recommendations to the Cabinet Committee on those schemes and requests.~~
- (c) To consider exceptional circumstances PVX applications and hear oral representations by the applicant or their appointed representative and make appropriate recommendations to the Cabinet Committee.

3.6.4 Status of Meetings

Open to the public

3.6.5 Reports to

The Cabinet

¹ **Note:** No Member shall sit on the Traffic & Parking Working Party (whether for the first time or returning to the Working Party after a period of absence), including as a substitute Member, without having first attended a training session on the principles of Traffic Regulation Orders.

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Southend-on-Sea Borough Council

Agenda
Item No.

Report of Deputy Chief Executive (People)

To
Cabinet

On

18th September 2018

Report prepared by: Krishna Ramkelawon, Interim Director of
Public Health

The 2017 Annual Report of the Director of Public Health – Reference back from People Scrutiny Committee 10th July 2018

People Scrutiny Committee
Cabinet Member: Councillor Salter
Part 1 (Public Agenda Item)

1. Purpose of Report

To consider the reference back of Cabinet Minute 56 by the People Scrutiny Committee on 10th July 2018 for further consideration “to look at the impact of unemployment on mental health.”

2. Recommendations

That Cabinet is asked to consider the reference back from People Scrutiny Committee and notes the content and recommendations of the 2017 Annual Report of the Director of Public Health, with the addition of the proposals set out in paragraph 3.4, which reinforce the recommendations contained in the Annual Report.

3. Background

- 3.1 On 19th June 2018, the Cabinet received a report presenting the 2017 Annual Report of the Director of Public Health.
- 3.2 The Cabinet resolved that the content and recommendations of the 2017 Annual Report be noted. This matter was called-in to People Scrutiny Committee on 10th July 2018 and was referred back to Cabinet, in accordance with Scrutiny Procedure Rule 15(g). The reason given was to look at the impact of unemployment on mental health.
- 3.3 The theme for the Annual Public Health Report was focused on ‘Work and Health’, and also addressed the link between worklessness and health and wellbeing. Although the report did not set out explicitly to explore the link between unemployment of mental health, it highlighted the challenges posed and how they could potentially be addressed.

3.4 In line with the discussions at the People Scrutiny Committee the following recommendations are proposed:

- That it be noted that the Annual Public Health Report has covered the link between ‘unemployment and Mental Health’ in the section headed ‘Who is working in Southend?’ on pages 7-8 of the report. Additionally, this topic is again covered under section ‘Health issues in the working age population’ on pages 15-17 of the report, clearly highlighting this as a key area of focus for people with long-term conditions. Recommendation 5 in the report articulates the approach to address this challenge in Southend-on-Sea.
- That a new piece of information is added to the report which supports the local approach. This is in light of the recent announcement that a new Challenge Fund will be made available following the publication of the “*improving lives: the future of work, health and disability*” (November 2017) setting out the Government’s plans to transform employment prospects for disabled people and those with long term health conditions over the next 10 years. The challenge fund will be launched in the coming months that will look to fund innovative approaches to addressing issues around employment for those with disabilities and long term conditions, including mental health.
- That a specific reference be made to Public Health England’s IPS programme, in line with “*improving lives: the future of work, health and disability*” and the Five Year Forward View for Mental Health. Individual Placement and Support (IPS) supports people with serious mental health difficulties to find suitable employment and it provides inclusive individualised support to individuals as part of their clinical care.

3.5 Therefore the Cabinet now needs to review the matter and make a decision, in light of the above.

3.6 In accordance with Council Procedure Rule 15e(ii), the call-in procedure does not apply to matters which have previously been the subject of call-in.

4. Other Options

As set out in the report of the Deputy Chief Executive (People) to the meeting of Cabinet, 19th June 2018.

5. Reasons for Recommendations

To respond to the reference back from People Scrutiny Committee to look at the impact of unemployment on mental health.

6. Corporate Implications

6.1 Contribution to Council’s Vision & Corporate Priorities

As set out in the report of the Deputy Chief Executive (People) to the meeting of Cabinet, 19th June 2018.

6.2 Financial Implications

As set out in the report of the Deputy Chief Executive (People) to the meeting of Cabinet, 19th June 2018.

6.3 Legal Implications

There are no legal implications arising directly from this report.

6.4 People Implications

As set out in the report of the Deputy Chief Executive (People) to the meeting of Cabinet, 19th June 2018.

6.5 Property Implications

None.

6.6 Consultation

As set out in the report of the Deputy Chief Executive (People) to the meeting of Cabinet, 19th June 2018.

6.7 Equalities and Diversity Implications

As set out in the report of the Deputy Chief Executive (People) to the meeting of Cabinet, 19th June 2018.

6.8 Risk Assessment

As set out in the report of the Deputy Chief Executive (People) to the meeting of Cabinet, 19th June 2018.

6.9 Value for Money

No implications

6.10 Community Safety Implications

No implications

6.11 Environmental Impact

None

7. **Background Papers**

Background documents are listed in the Annual Public Health Report

8. **Appendices**

Appendix 1 – Minute of the People Scrutiny Committee held 10th July 2018

Appendix 2 – The 2017 Annual Report of the Director of Public Health for Southend.

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People Scrutiny Committee – 10th July 2018

Minute Extract

Minute 128: Annual Public Health Report

The Committee considered Minute 56 of the meeting of Cabinet held on 19th June 2018, which had been called in to Scrutiny, together with a report of the Deputy Chief Executive (People) presenting the 2017 Annual Report of the Director of Public Health.

Resolved:-

That the Annual Report be referred back to Cabinet for reconsideration, for the following reason – to look at the impact of unemployment on mental health.

Note: This is an Executive Function
Cabinet Member: Cllr Salter

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**ANNUAL REPORT
OF THE
DIRECTOR OF PUBLIC HEALTH
2017**

Health and Work

Contents

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Acknowledgements

I am indebted to many people who have supported and contributed to my report. These include: Margaret Gray, Ian Diley, Mellanie Vance, Zoe Amner, Tom Dowler, Marion Gibbon, Angela Squires, Simon D Ford and Lee Watson.

Foreword

The Director of Public Health has a statutory duty to produce an independent report on the health of the local population. The aim is to highlight the key issues facing local people, looking at patterns of poor health and wellbeing, and providing recommendations on how opportunities to improve health should be achieved.

The link between work and good health is reciprocal. Good health is an important enabler for us to engage in work successfully and there is good evidence that fulfilling working lives can be an important factor in good health, be it remunerated or voluntary work. The council has an important role to play in supporting organisations and individuals to build healthy working environments and to strengthen health and resilience in our communities to maximise fulfilling engagement in work.

This year, my annual public health report examines work and health in our borough. It focuses upon how we can work with our communities to build healthy work environments and maximise the benefits to health that work can bring.

As with my previous annual reports for 2015 and 2016, this review presents headline data and examines their importance for the population of Southend-on-Sea. More detailed information about the health and wellbeing of our population can be found in the borough's Joint Strategic Needs Assessment sections on the Council website (available at <http://southend.gov.uk>).

I hope you find my report of interest. As always, I would welcome your feedback and comments, and any suggestions you may have.

Dr Andrea Atherton, Director of Public Health

Overview – Work and Health

This year my independent annual report focuses on the topic of work and health. There is increasing scientific evidence that good quality work is beneficial for physical and mental health and well-being (1, 2, 3). For most people their work is a key determinant of their identity, self-esteem and standing within the community. In addition to the provision of income, work provides a means of social interaction and fulfilment (4).

With its positive impact on the health and wellbeing of employees, ultimately good work affects the productivity and profitability of businesses and contributes to economic growth.

There is extensive evidence that there are strong links between unemployment and poorer physical and mental health and mortality, with re-employment generally leading to improved health (2).

Currently 61.5% of the local population is of working age (defined as 16-64 years). Nationally there has been an overall increase in the proportion of men and women between 50 and state pension age who participate in the labour market, and by 2020 it is estimated that a third of British workers will be over the age of 50 years (5). This will also be reflected in local workforce statistics.

The employment culture of today has shifted from people remaining in a lifelong job in a variety of sectors and industries, to one with workers frequently switching positions and increasingly employed in desk based roles. There has also been a growth in flexible or part-time working, from 4% to 25% of total employment (6). Both the number of self-employed workers and the share of all employment accounted for by self-employment have also risen steadily over the past 15 years (7).

Alongside this shift in working patterns, there has also been a significant increase in the number of people commuting longer distances to get to work. For people living in East of England the average commute time to and from work is 60 minutes (8). Work and commuting can therefore occupy a substantial proportion of waking hours in the day and limit the opportunity to undertake health promoting behaviours, including the healthy food preparation and physical activity.

Despite the benefits of work, some work itself can be damaging to health. It is important to support employers to ensure the work environment is safe in relation to prevention of accidents and takes account of the health risks posed by workplace stress.

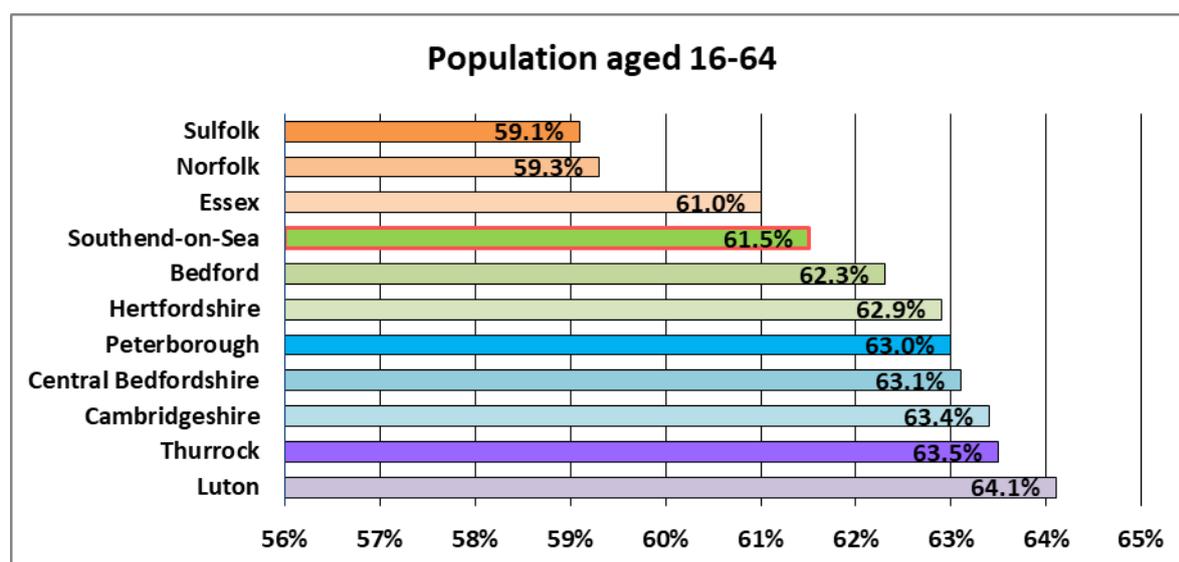
I previously described in my 2015 annual public health report how the workplace can be used as a setting to promote and deliver health and wellbeing initiatives to employees. The Southend Public Health Responsibility Deal was designed to support local small and medium sized businesses to improve the health of their customers and employees. There is a range of support available to Southend businesses to enable them to commit to at least one of our workplace health pledges.

The Working Age Population

Who are the working age population?

This report includes men and women aged 16 – 64 years to define the working age population (1). In 2016, the total population in Southend was an estimated 179,800 of which 110,700 people (61.6%) were of working age (2).

Figure 1 The Working Age Population (Age 16-64 years) by Upper Tier Authority in East of England (% of total population in 2016)



Source: Nomis (2)

Figure 1 highlights that Southend has the fourth lowest proportion of their local population within the 16-64 working age group in the East of England region. This reflects the older age profile of Southend.

Future changes in the workforce

In order to plan for the future we need to understand how the workforce in Southend is expected to change over time.

The local population is set to grow by 15.9% between 2018 and 2038, to over 212,600 (3). Within this increase, the demographic composition of Southend is changing, with a growing number of older people. Currently 1 in 5 residents are aged 65+ (34,487 people), and this will increase so that by 2038, 1 in 4 Southend residents will be aged 65+ (3, 4).

Between 2018 and 2038, the proportion of the population who are of working age is expected to fall from 61% to 57%, whilst the proportion of people who are aged 65+ is expected to increase from 19% to 25% (3).

These demographic changes will lead to a change in the ratio of working to non-working people. In 2018, there are expected to be 158 people of working age for

every 100 children and older people and this is set to change to 131 people of working age for every 100 children and older people by 2038 (3)

This makes it more important than ever to help more people in Southend to stay healthy, stay in good jobs and work productively for longer.

People are living longer, and in 2017, a 65-year-old can now expect to live for another 22.8 years, or 33.6% of their adult life. This is 9 years longer than a 65 year old was expected to live in 1948 when the state pension was first introduced (5).

As we live longer, we will need to work longer to fund our retirement. Over the course of 2019 and 2020 both the women's and men's state pension age will rise from 65 to 66, with an intention of rising to 68 between 2038-39 (6).

There are now more people aged over 50 in employment than ever before (7) Nationally labour market participation is currently over 75% among those between 50 and state pension age, and over 12% for those beyond (8). However, whilst people are working for longer than they used to, one in five men and one in twelve women still leave work in the five years before they reach state pension age. A chronic health condition is a contributory factor in nearly half of men between the ages of 55 and state pension age who are no longer working (7). In addition to health issues, caring responsibilities and workplace factors also contribute to an earlier than planned exit from the labour market.

Unplanned early labour market exit can be harmful to overall well-being, particularly where there is less social interaction in retirement and difficulties in maintain living standards.

In addition to the personal financial impacts, early labour market exit also has an impact on the public purse, since £7 billion is paid each year in out-of-work benefits to people between the age of 50 years and state pension age (7).

Evidence suggests that employers who fail to retain their older workers are losing important skills from their workforce, and the premature loss of older workers can lead to loss of output and higher recruitment costs for employers. There is no systematic evidence that older workers are less productive than younger workers

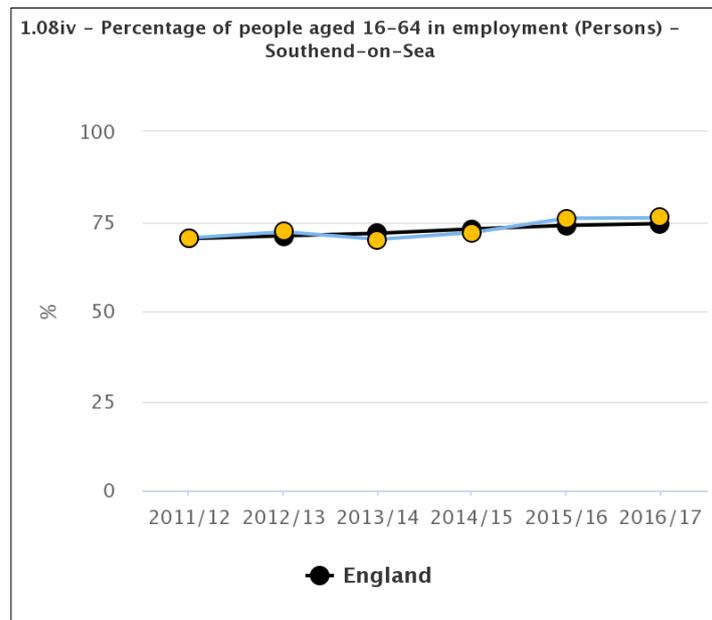
Focus for Action

People will be required to work for longer in the future. Action to improve health earlier in the working life will help to maintain health into later life and maintain overall productivity.

Who is working in Southend?

A high proportion of the Southend working age population are in employment. Since 2011/12, employment levels in Southend have generally been on an upward trajectory, with 76% of 16-64 year olds in employment in 2016/17. This compares to 74.4% across England (1).

Figure 1 Percentage of Southend residents aged 16-64 years in employment (2011/12 – 2016/17) compared to England



Source: Public Health Outcomes Framework (1)

In 2016/17, 82.4% of men of working age were in employment compared to 69.6% of women of working age, with women accounting for 46% of the overall working age population in employment.

Unemployment

Unemployment rates in Southend have been steadily reducing from 7.7% in 2011 down to 5% of the working age population in 2016. However, not everyone in Southend who would like a job in Southend can find one.

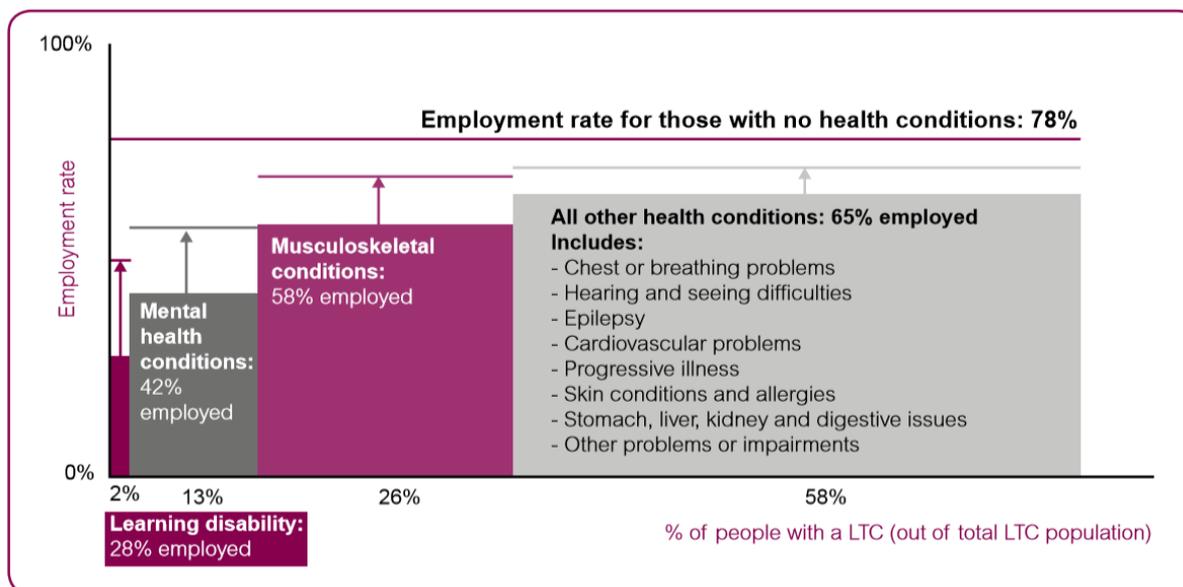
Unemployment is associated with an increased risk of mortality and morbidity, including cardiovascular disease, poor mental health, suicide and health-damaging behaviours (2). The length of time a person is unemployed also impacts on health, for example individuals unemployed for more than six months have lower wellbeing than those unemployed for less time (3).

An inclusive workforce

It is recognised that gaining meaningful employment can pose a challenge for people of working age with health conditions, and those with learning disabilities. In particular, people affected by mental ill health often face barriers in securing employment (4).

Figure 2 shows the employment rate and gap for people with key conditions and the potential for halving that gap.

Figure 2 Employment rate and gap for people of working age in England with health conditions and those with learning disabilities compared to those with no health conditions (2014)



Source: DWP Health and Work Core Statistics July 2014, Labour Force Survey Q2 2014

There are a number of Government operated schemes that help support employment among people with health problems, these include:

Fit for Work is a Government-funded initiative to support people in work with health conditions and help with sickness absence. It is designed to prevent people losing their job as a result of sickness.

Access to Work is a specialist employment support programme that aims to help people with a disability or long term physical or mental health condition to start or stay in work. It provides both practical advice and financial support.

New Enterprise Allowance is a scheme that provides a grant and support to individuals to set up their own business if they are receiving certain benefits.

In recognition of the fact that one in ten disabled people in work fall out of work each year, compared to one in twenty non-disabled people, a national strategy has recently been published to deliver the pledge “to see one million more disabled people in work over the next ten years” (6). This outlines key actions in three settings:

- **Welfare** – employment and financial support
- **Workplace** – supporting employers to create healthy, inclusive workplaces
- **Healthcare** - supporting employment through health and high quality for all

In addition the recently published review. *Thriving at Work*, details how investing in supporting mental health at work is good for business and productivity. The most important recommendation is that all employers, regardless of size or industry, should adopt 6 'mental health core standards' that lay basic foundations for an approach to workplace mental health (7).

The core standards are:

- Produce, implement, and communicate a 'mental health at work' plan
- Develop mental health awareness among employees
- Encourage open conversations about mental health and the support available when employees are struggling, and offer suitable workplace adjustments to those that require them
- Provide employees with good working conditions and ensure they have a healthy work life balance and opportunities for development.
- Promote effective people management through line managers and supervisors, ensuring appropriate training for managers
- Routinely monitor employee mental health and wellbeing

It also details how large employers and the public sector can 'lead the way' and develop these standards further through a set of 'mental health enhanced standards'.

Focus for Action

Developing inclusive workplaces to ensure people living with disability, those with learning difficulties and those with mental health problems are encouraged and supported to thrive at work.

Where are people employed in Southend?

Self-employed

Self-employment in the UK is currently higher than at any point over the past 40 years, and the rise in total employment since 2008 has predominantly been among the self-employed (1).

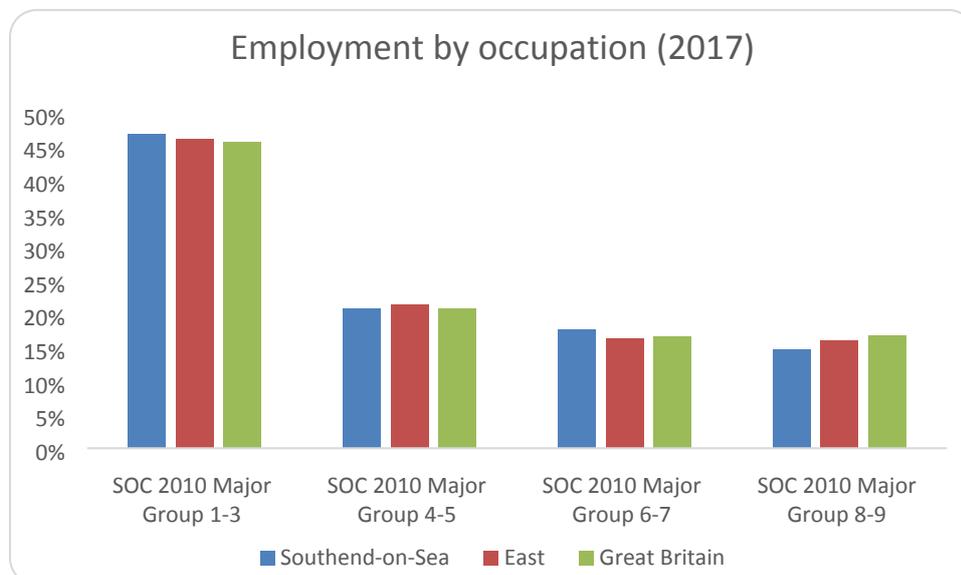
Older workers aged 50 to 64 are more likely to be in self-employment than other age groups, particularly those who continue to work beyond the age of 65 years (2).

In Southend 10.3% of people aged 16 to 64 are self-employed, which is similar to the national average (3). Men make up 69% of the self-employed in Southend.

Employment by Occupation Type

Figure 1 shows employment by occupation in Southend, as defined by the Standard Occupational Classification (4). This classification uses broad occupational categories which are similar in terms of the qualifications, training, skills and experience commonly associated with the competent performance of work tasks¹.

Figure 1 Employment by Occupation in Southend (July 2016- June 2017)



Compared with East of England and nationally, the current working population in Southend has a slightly higher proportion of people working in senior managerial and professional roles, and a lower proportion of people in skilled trade occupations and administrative and secretarial roles.

¹ Major Group 1-3: Managers, directors, and senior officials; professional occupations; associate professional and technical,

Major Group 4-5: Administrative and secretarial; skilled trades occupations,

Major Group 6-7: Caring, leisure, and other service occupations; sales and customer service occupations,

Major Group 8-9: Process plant and machine operatives; elementary occupations

The public sector is the largest employer in Southend, accounting for 18.2% of employee jobs. The next largest category is wholesale and retail trade at 15.2%, followed by education at 10.6%. Accommodation and food services at 9.1%, are a major part of the visitor economy, along with the retail sector.

There are a number of implications of the current occupational landscape in Southend that can impact on health and wellbeing. It is well recognised that people in routine and manual work have a higher prevalence of poor lifestyle behaviours, such as smoking, which can contribute to poor health outcomes. Employment sectors also vary in the degree of opportunity they present for employees to move from unskilled low pay jobs to an occupation commanding a bigger salary.

Business types

Southend's enterprise base is heavily based on micro businesses (0 to 9 employees). Table 1 shows that of the 6355 enterprises in Southend in 2015, 91.3% had 0-9 employees. There are only 5 enterprises in Southend with more than 1,000 employees.

Table 1 Size of enterprises in Southend (2017)

Size of business by employees	Numbers	Percentage
Micro (0-9)	6355	91.3
Small (10-49)	510	7.3
Medium (50-249)	75	1.1
Large 250+	25	0.4
Total	6960	-

Source: Inter Departmental Business Register (ONS)

Southend's industrial structure is fairly uneven and distinct compared to the industrial structure of the country as a whole.

Key points to note are:

- There is a higher concentration of employees in the public administration; education and health sector as well as arts, entertainment and other services
- There is a very low concentration of employees in the transport and storage and information & communication sectors compared to the national industrial structure

It is also noteworthy that nearly 39.4% of employee jobs in Southend are part-time, above England, and that the last census data indicated that about 1 in 3 employees commute to a workplace outside of Southend.

Focus for Action

As the proportion of micro businesses in Southend-on-Sea is very high, this brings challenges for delivering workplace-based health interventions for large numbers of our working population. We will continue to offer support to businesses through the public health responsibility deal alongside our community-based initiatives and our wider health promotion communication.

Skills and education

Appropriate training and qualifications are significant factors in gaining well-enumerated employment and increasing income across the life-course. People who have a high level of education are less likely to be unemployed than people without that experience, are more likely to work full-time, are more likely to describe their jobs as fulfilling, and are less likely to experience economic hardship (1). There is robust evidence that sustained economic hardship leads to poorer health and well-being (2).

Opportunities should be provided for career development to be a lifelong endeavour, where people can access pathways and possibilities throughout their working lives (3). Access to such education can improve an individual's ability to maximise their personal and professional potential in their current work situation and open up possibilities for new employment positions.

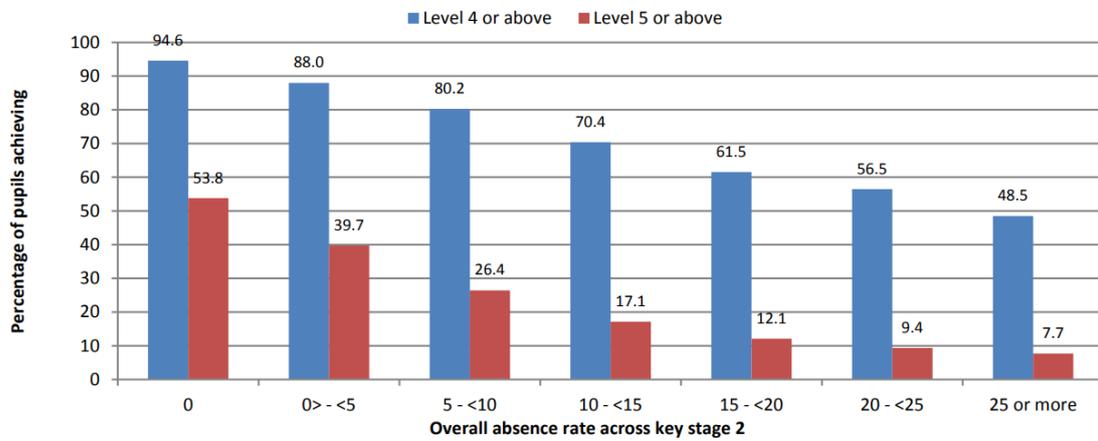
Education and qualifications in Southend-on-Sea

In Southend-on-Sea, 92.1% of the population have at least one recognised educational qualification. This figure is slightly lower than the regional (92.8%) and national average (92.3%). There is, however, a significant difference between the proportion of people in Southend-on-Sea with a qualification of NVQ2 and above (5 GCSEs grade C or above, or equivalent). While in Southend 70.4% of the eligible population achieve this qualification level, the figure is 73.3% regionally, and 74.7% nationally. This trend continues at NVQ4 or above (HND, Degree, or Higher Degree) with 30.7% of Southend's population being educated to this level, compared to 34.7% regionally and 38.6% nationally (4).

The proportion of 16 to 17 year olds not in education, employment, or training (NEET) is a challenge for Southend-on-Sea. The most recent available data (2016) suggests that 9% of our relevant population are classified as NEET. This is the highest figure across the East of England region and is a statistically significant difference to the national average (6%) (5).

However, for the Early Years Key Stage of education, the picture is bright for Southend. 74.1% of children achieve a good level of development at the end of reception year in school readiness assessments, which is the second highest figure in the region and significantly above the national average (5). Further, school absence is also significantly better than the national average and is the joint lowest in the region (4.3% of half days missed). There is strong evidence that low attendance at school is associated with poorer levels of educational attainment for children. Department of Education research has demonstrated that each extra day of school missed was associated with a lower attainment outcome (Fig 1) (6).

Fig 1 Percentage of pupils in state-funded mainstream schools achieving states levels at the end of KS2 in 2013/14 academic year by overall absence rate across KS2.



Overall absence rate across KS2	0	0> - <5	5 - <10	10 - <15	15 - <20	20 - <25	25 or more
Number of pupils	2,150	342,330	110,620	20,735	4,470	1,215	730

Source: Department of Education. 2016. The link between absence and attainment at KS2 and KS4: 2013/14 academic year.

Focus for Action

There is then a key task to ensure that the good start our children are getting in school translates into a high level of educational attainment and an ambition to partake in lifelong learning and career development.

Health issues in the working age population

It is estimated that between 130 and 140 million working days are lost to sickness or injury in the UK each year (1). This equates to just over 4 days of absence per worker. While this has a significant impact on productivity and employee wellbeing, the trend has been for a general decrease in this figure since 2003.

For the most recent available data (2016), minor illnesses such as coughs and colds were the most frequently cited cause of sickness absence and were the reason for around a quarter (24.8%) of all such absence. The second most frequent cause were musculo-skeletal complaints (22.4%) with 11.5% of total days lost caused by mental ill health (1).

The population groups most affected by work sickness absence in 2016 were women, older workers, people with long-term health conditions, smokers, public sector workers, and those working in organisations of 500 or more employees (1). In addition, ill health in the working age population is concentrated among manual workers and the least wealthy.

Annual Population Survey data from the Office for National Statistics suggest that 1.6% of working hours are lost to sickness absence in the East of England region each year. This is below the national UK rate of 1.9% (1).

The other side of the coin to absenteeism is sickness presence (or presenteeism). This is the practice of working while sick and can be the result of good intentions by staff or by direct or indirect pressure on staff from organisations or businesses to avoid absence. It is difficult to quantify the extent of presenteeism in the Southend or UK workforce but a Europe-wide survey of working conditions in 2010 found that on average UK respondents had worked while sick on five days in the preceding year (2). When workers are present in the workplace but unable to perform their duties properly, it impacts upon an organisation's productivity and potentially lengthens the employee's period of illness.

For many people within our population, long-term sickness is a barrier to employment. Where people are economically inactive (not employed or active seeking employment), long-term sickness is the second most frequent cause for men aged 16-64 and the third most frequent for women (3).

For Southend-on-Sea, in 2017 there were 5,700 people who were economically inactive due to long-term sickness. This equates to over a quarter of the economically inactive population of the borough (26%) and 5.1% of the overall borough population (4). The proportion of the population economically inactive due to long term sickness is markedly higher than for the East of England (3.6%) and higher than for Great Britain as a whole (4.8%).

The Public Health Outcomes Framework for England provides us with a tool to monitor the gap in the employment rate between people with long-term conditions and the general population (5). In 2016/17, there was a 28.8 percentage point gap in the employment rate between the two groups. The current employment rate in Southend-on-Sea is 80% so this means that the chances of being in employment are around one and a half times greater if a person does not have a long-term health condition. However for Southend's population, this gap is smaller than it is both regionally and nationally.

We also routinely monitor the gap in employment rate between people with a learning disability or in contact with secondary mental health services, and the overall employment rate. In 2016/17, the gap for people with a learning disability in Southend was 66 percentage points and for people in contact with mental health services it was 70 percentage points. This suggests that the general Southend working age population are nearly six times more likely to be in employment than people with a learning disability, and ten times more likely than people in contact with mental health services (5).

For people in employment, poor mental health is a major issue for the employee and their employers. Thriving at Work, a recent independent review commissioned by the Government, found that 300,000 people with a long-term mental health problem lose their jobs each year, and around 15% of people at work have symptoms of an existing mental illness (6).

In addition, it is recognised that poor quality, insecure, and low-paid work can be as harmful to health as unemployment, and both can lead to health inequalities. The Marmot Review of Health Inequalities focused on the need to "create fair employment and good work for all" (7). Further, some ill-health is directly work related. This can include sudden injuries, such as a trip or fall or from lifting and handling, 'slow' injuries, such as the development of repetitive strain injury (RSI) or the ill health effects of stress at work.

Promoting good health and wellbeing at work

The workplace is a setting where many people spend the largest proportion of their time and therefore it can play a key role in contributing to employee health and in turn the health and productivity of their organisation, families, local community and society.

74% of adults are in employment, on average spending a third of their waking hours in the workplace. During the working day there is scope for employers to influence employee health behaviours and promote a culture of good health and wellbeing, and to provide a supportive environment to enable those with health problems to continue working.

The World Health Organisation suggests that the benefits of the workplace as a setting for improving health are widespread for both the organisation and the employee:

To the organisation	To the employee
a well- managed health and safety programme	a safe and healthy work environment
a positive and caring image	enhanced self-esteem
improved staff morale	reduced stress
reduced staff turnover	improved morale
reduced absenteeism	increased job satisfaction
increased productivity	increased skills for health protection
reduced health care/insurance costs	improved health
reduced risk of fines and litigation	Improved sense of wellbeing

Source: WHO

Southend health and care organisations are developing integrated locality working which will help improve understanding of the health and care needs of particular groups of adults of working age within the population, and the interventions needed to support them.

Prevention in the workplace – local programmes

There are a multitude of evidence-based programmes of activity that can be offered from the workplace to help improve employee health:

- NHS Health Checks
- Mindful Employer
- Mental Health First Aid
- Investors in People
- Public Health Responsibility Deal
- Active Working
- Active Travel
- Stop Smoking Support
- NHS Health Trainers
- Health and Safety Policy and programmes

Focus for Action

For the area of work and health, the key challenges for public health services in Southend and across England, are to work with employers to develop workplaces that encourage health-positive behaviours, and to work with partners within our local authority and in organisations and businesses across the borough to tackle the employment gap for people with long-term health issues. Employment is a key determinant of population health and barriers to employment are a significant source of health inequalities.

Recommendations

- 1: Continue to promote positive lifestyle behaviours such as not smoking, regular physical activity, being a healthy weight, sensible drinking, and good mental wellbeing through community and workplace activities and resources.
- 2: Continue to promote Making Every Contact Count (MECC) training in brief interventions to increase awareness and access to appropriate support services
- 3: Promote the importance of workplace health in the ill-health prevention strand of locality service design modelling.
- 4: Encourage local workplaces to sign up to the National and /or Southend Public Health Responsibility Deal and put into place effective actions to support employees and customers to make healthier choices
- 5: Support workplaces in producing and implementing inclusive policies on recruitment and retention of people living with a disability, mental health problem or long-term condition
- 6: Encourage local employers to use Business in the Community / Public Health England workplace toolkits to improve prevention and management of MSK and mental health issues in the workplace

Summary health profile



Health Profile
2017.pdf

Summary of the 2017 Report in Infographics



APHR 2017
Infographics summary

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Notice of Motion for Full Council – 19th July 2018

Motor Neurone Disease (MND) Charter

That this Council adopts the Motor Neurone Disease (MND) charter and thereby supports achieving quality of life, dignity and respect for people with MND and their carers.

Council notes that over 60 councils across the country have signed up to the Motor Neurone Disease (MND) Charter

The Charter is made up of 5 points:

1. People with MND have the right to an early diagnosis and information
2. People with MND have the right to access quality care and treatments
3. People with MND have the right to be treated as individuals and with dignity and respect
4. People with MND have the right to maximise their quality of life
5. Carers of people with MND have the right to be valued, respected, listened to and well supported

Motion to be moved by Councillor Julian Ware-Lane
Seconded by Councillor Tony Cox

Background:

The Motor Neurone Disease (MND) Association, five-point MND Charter sets out the rights of people with MND and their carers and the pillars of good care and support. Five people a day die in the UK from MND. It is a rapidly progressive, fatal disease that can affect any adult at any time. The disease leaves people unable to walk, talk or feed themselves. The cause of MND is unknown and there is no cure.

** MND is a fatal, neurological disease for which there is no effective treatment and no cure.*

** MND kills five people in the UK every day.*

** Today there are 5,000 people living with MND in the UK. Life expectancy from diagnosis is two to five years*

** It can affect any adult at any age. Imagine being trapped inside a body that can't move.*

** MND attacks the nerves that control movement; people with MND can still think and feel, but their muscles refuse to work. As these nerves die, the muscles weaken and waste, leaving people locked in a failing body, unable to move, walk or talk.*

Why should councils adopt the charter?

Many decisions about services used by people with MND, such as social care, housing adaptations and support for carers, are made at the local level by councillors. Currently, there are significant differences in the quality of services available to people with MND locally, depending on where they happen to live. As

such, it is important that councillors, and all those working for and with the council, understand the needs of people with MND and their carers. While councils aren't responsible for everything outlined in the MND Charter, they are a significant part of the jigsaw. When services such as social care and housing are provided in a timely person-centred way, this has a huge impact on the person with MND and their family. MND is a devastating, complex disease and particularly difficult to manage. If a council can get it right for MND, it can get it right for residents with other neurological conditions and disabilities too.

** The MND Association is the only national charity in England, Wales and Northern Ireland that funds and promotes global research into the disease and provides care and support for people affected by MND.*

Southend-on-Sea Borough Council

Agenda
Item No.

Report of the Chief Executive

to

Cabinet

on

18th September 2018

Report prepared by:
Alison Griffin, Chief Executive

**Senior Management Arrangements
Cabinet Member: Councillor J. Lamb
Policy & Resources Scrutiny Committee
A Part 1 Public Agenda Item**

1. Purpose of Report

To consider changes to the senior management arrangements of the Council.

2. Recommendations

2.1 To agree the revised structure at Senior Management level (Appendix 1) including the deletion of the Department of the Chief Executive.

2.2 To note that the appropriate changes to the Senior Management Appraisal System will also be made to reflect this new structure.

2.3 To note that the Senior Managers Pay Panel will be considering senior management salaries in the context of these changes and current market conditions and will be making recommendations to Cabinet in this respect at the November meeting.

3. Background

The senior management structure of the Council was last reviewed in 2016 following the retirement of the Corporate Director – Corporate Services. The roles of Deputy Chief Executives (previously Corporate Directors) were established and the Department of the Chief Executive replaced the Corporate Services Department.

This structure has served the Council well, particularly during the transitional period between the retirement of the former Chief Executive and the arrival of his successor. However, the Council now needs to prepare for the next stages of its development into a modern agile organisation, equipped to deal with the

challenges of financial self-sustainability, increasingly complex partnership arrangements and more sophisticated demands from its residents, businesses, visitors and students. Leadership will be key to future success and it is critical that the senior management of the Council has the capacity and capability to respond flexibly and creatively in a volatile and ambiguous environment.

Working as 'One Council' will be an imperative as the challenges become increasingly complex and resources diminish. It is critical therefore that the Corporate Management Team (CMT) is able to focus on its key strategic responsibilities, working alongside Cabinet to deliver the Southend 2050 ambitions.

As Head of Paid Service, the Chief Executive provides strategic leadership and direction to the whole Council. In the context of Southend 2050 and 'One Council' it is no longer appropriate for this role to carry a responsibility for a particular department. The functions within this area are led by current members of CMT who also sit alongside Cabinet. The departmental aspect of this role therefore has become superfluous both in the context of leadership and the decision making hierarchy.

Under the revised arrangements (Appendix 1) the roles of Deputy Chief Executive will continue to lead the two key outward facing services of the Council: People and Place, and the structures below these roles will remain unchanged.

The three Directors currently sitting on CMT will be retitled Strategic Directors. These roles together with the CEO and Deputy CEO's will provide strategic leadership to the organisation and work proactively with the administration and other political groups. These roles will continue to have responsibility for their operational areas namely; Finance & Resources, Legal & Democratic and Transformation. They will continue to operate in collaboration to provide enabling corporate services for frontline teams.

The Senior Managers Pay Panel will be considering senior management salaries during the autumn, as part of their periodic market review of salaries, and will take these revised arrangements into account.

Any recommendation that they may consider necessary will be presented to Cabinet at the November meeting.

In addition the appropriate revision to the appraisal process for senior managers will be agreed by this panel.

4. Other Options

Maintaining the current senior management arrangements will impede the Council's transition to a modern agile organisation equipped to face future challenges.

5. Reasons for Recommendations

To refocus the senior leadership of the organisation in order to deliver the Southend 2050 ambitions.

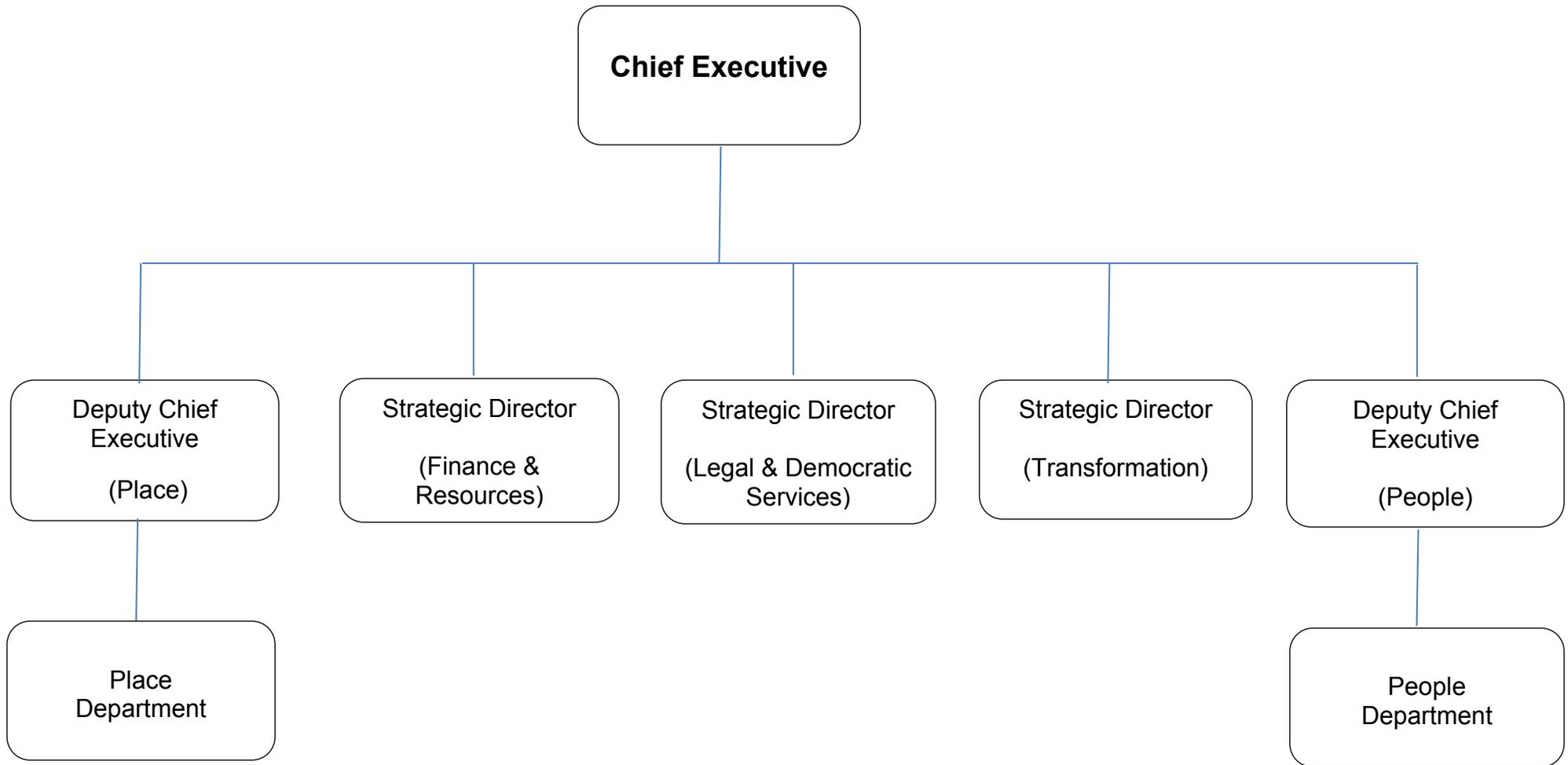
6. Background Papers

Job profiles for CMT Members will be made available on the Council's website.

7. Appendices

Appendix 1 – Proposed Senior Management structure

CORPORATE MANAGEMENT TEAM



MONTHLY PERFORMANCE REPORT

July 2018

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Current Month’s performance information for indicators rated Red or Amber and highlighted Green indicators with commentary.

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2018-19 Corporate Performance Indicators

Performance Information for all Corporate Priority Indicators

Section 3

Pages 13-25

Detail of Indicators Rated Red or Amber

Performance detail for indicators rated Red or Amber

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Partnership Indicators

Health Wellbeing Indicators

Local Economy Indicators

Community Safety Indicators

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Revenue Budget Monitoring – Period 3

Budget monitor and forecast by Portfolio

Section 6

Pages 52 - 65

Capital Programme Budget Monitoring – Period 3

Summary of Capital Expenditure

Version: **V1.0**

Published by the Policy, Engagement & Communication Team

Further information: timmacgregor@southend.gov.uk (01702) 534025 or LouisaThomas@southend.gov.uk (01702) 212039

Key to Columns and symbols used in report

Column Heading	Description
Minimise or Maximise	Indicates whether higher or lower number is better: Minimise = lower is better, maximise = higher is better
Latest Month	The latest month for which performance information is available
Month's Value	Performance to date for the latest month
Month's Target	Target to date for the latest month
Annual Target 2018/19	Annual target for 2018/19
<u>Outcome</u>	<p>Symbol based on a traffic light system; Red, Amber, Green indicating whether an indicator's performance is on track to achieve the annual target. Symbols used and their meaning are:</p> <p> = at risk of missing target</p> <p> = some slippage against target, but still expected to meet year-end target (31/03/2019)</p> <p> = on course to achieve target</p>
Comment	Commentary for indicators not on track providing reasons for low performance and identifying initiatives planned to bring performance back on track
Better or worse than last year	<p>Symbol indicating whether performance for the Latest Month is better or worse than the same month in the previous year. Symbols and their meanings are:</p> <p> = Latest Month's performance is better than the same month last year</p> <p> = Latest Month's performance is worse than the same month last year</p> <p> = Data not available for current or previous year</p>

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Section 1: 2018-2019 Exceptions - Current Month Performance



Comments on Indicators rated Red or Amber

Generated on: 07 September 2018 15:26

Expected Outcome At risk of missing target
Responsible OUs Department for People

MPR Code	Short Name	Minimise or Maximise	Latest Month	Month's Value	Month's Target	Annual Target 2018/19	Expected Outcome	Better or worse than last year	Comment - explanation of current performance, actions to improve performance and anticipated future performance	Scrutiny Committee
CP 1.4	Percentage of children who have been LAC for at least 5 working days, who have had a visit in the 6 weeks (30 working days), prior to the last day of the month. [Monthly Snapshot]	Aim to Maximise	July 2018	79.6%	95%	95%			There is a concern that this number has dropped as children are on holiday. This is a continued area of focus and there is ongoing work with managers and staff to address the concerns. This is reported on a weekly basis and assurance is given that children are being appropriately safeguarded.	People Scrutiny
CP 3.10	Percentage of Initial Child Protection Conferences that took place with 15 working days of the initial strategy discussion. [Cumulative YTD]	Aim to Maximise	July 2018	62.3%	90%	90%			July was a busy month for ICPC's with 26 children being taken to conference. Of these 20 were within timeframes. 100% (18) in A&I were within timescales. The remaining were two families which took 24 and 27 days respectively to come to conference. We continue to see good performance and are working hard to achieve near to 100% compliance in this area.	People Scrutiny

Expected Outcome At risk of missing target
Responsible OUs Department for People; Public Health

MPR Code	Short Name	Minimise or Maximise	Latest Month	Month's Value	Month's Target	Annual Target 2018/19	Expected Outcome	Better or worse than last year	Comment - explanation of current performance, actions to improve performance and anticipated future performance	Scrutiny Committee
CP 3.9	Take up of the NHS Health Check programme - by those eligible [Cumulative YTD]	Aim to Maximise	July 2018	1,585	1,832	5,740			Targets for invites through GPs are being exceeded, and while health check delivery target has not been met, performance has improved. Delivery by ACE has also improved although not yet meeting trajectory target.	People Scrutiny

Expected Outcome At risk of missing target
Responsible OUs Department for Place

MPR Code	Short Name	Minimise or Maximise	Latest Month	Month's Value	Month's Target	Annual Target 2018/19	Expected Outcome	Better or worse than last year	Comment - explanation of current performance, actions to improve performance and anticipated future performance	Scrutiny Committee
CP 2.3	Percentage of household waste sent for reuse, recycling and composting [Cumulative YTD]	Aim to Maximise	March 2018	47.21%	-	46.38%		-	2017/18 annual validated figure was reported in June 2018. First Quarter figures for April - June 2018/19 will be available at end of September. Activities that Veolia have been undertaking include: - Awareness raising activities – roadshows; events; coffee mornings; community meetings. Delivery and co-ordination of Customer Liaison Group; Street Champion and Recycling Champion act Anti-littering educational activities and supporting local community groups.	Place Scrutiny
CP 2.4	Number of reported missed collections - per year value [Cumulative YTD]	Aim to Minimise	July 2018	3,031	2,664	8,000			The missed collection target has marginally exceeded the target for July and this has been referred to Veolia Management to look into. This target will be tracked closely to ensure that the end of year target will be met.	Place Scrutiny

Expected Outcome At risk of missing target
Responsible OUs Department of the Chief Executive

MPR Code	Short Name	Minimise or Maximise	Latest Month	Month's Value	Month's Target	Annual Target 2018/19	Expected Outcome	Better or worse than last year	Comment - explanation of current performance, actions to improve performance and anticipated future performance	Scrutiny Committee
CP 5.4	Working days lost per FTE due to sickness - excluding school staff [Cumulative YTD]	Aim to Minimise	July 2018	2.32	2.21	7.20			Year to date is currently running 0.10 days above the sickness absence target. HR are working with procurement to tender a new Occupational Health Service and Employee Assistance Programme. HR are also continuing to provide departments with targeted absence information to support managers in proactively managing their staffs absence.	Policy & Resources Scrutiny

Expected Outcome Some slippage against target
Responsible OUs Department for People

MPR Code	Short Name	Minimise or Maximise	Latest Month	Month's Value	Month's Target	Annual Target 2018/19	Expected Outcome	Better or worse than last year	Comment - explanation of current performance, actions to improve performance and anticipated future performance	Scrutiny Committee
CP 1.1	Rate of children subject to a Child Protection Plan per 10,000 population under the age of 18. [Monthly Snapshot]	Goldilocks	July 2018	33.24	38 - 48	38 - 48			There has been a small increase in the number of children subject to child protection plans although still historically low. This is partly explained by increasing resources in Early Help and the use of other preventative interventions such as Family Group Conferences. We also regularly review decision making in the Multi-Agency Safeguarding Hub (MASH) plus and the outcome of Section 47 investigations. We have audited CIN cases and these were seen as being appropriately held at this level. We have commissioned a piece of work to provide further analysis - there has been a slight delay in this due to other work demands and will be available in September.	People Scrutiny
CP 1.2	Rate of Looked After Children per 10,000 population under the age of 18. [Monthly Snapshot]	Goldilocks	July 2018	71.84	57 - 67	57 - 67			The rate of children looked after remains above target. The rate did appear to stabilise in the mid-70s but has reduced over previous months. Other than children who need to become looked after in an emergency, the decision for a child to become looked after is made by the Placement Panel to ensure that all other options are considered before care is agreed. The Panel process has prevented the numbers escalating and, where safely, put other measures in place to support the family. Planned work around reunification should ensure that children do not remain in care for longer than necessary. We have commissioned a piece of work to review LAC numbers but this has been delayed in reporting due to other work demands but will report in September.	People Scrutiny
CP 3.2	Proportion of older people (65 and over) who were still at home 91 days after discharge from hospital into reablement/rehabilitation services. [ASCOF 2B(1) [Rolling Quarter]	Aim to Maximise	April 2018	86.2%	88.7%	88.7%			There is currently no reporting available on this indicator due to the implementation of the Liquid Logic adults system. Officers are working to ensure robust reporting will be available for the August performance, reported in September. Aprils comment: This performance indicator remains under the local target but above national target of 82.5%, 12 people were not at home after their reablement period, 11 of whom had died before the 91 day review.	People Scrutiny

MPR Code	Short Name	Minimise or Maximise	Latest Month	Month's Value	Month's Target	Annual Target 2018/19	Expected Outcome	Better or worse than last year	Comment - explanation of current performance, actions to improve performance and anticipated future performance	Scrutiny Committee
									Analysis is being undertaken to ensure the appropriate cohort is being reflected in the figures reported. We are committed to ensuring all people are given the opportunity of reablement where appropriate. We are working with partners and staff to ensure they identify the appropriate people for reablement and we are working closely with providers to ensure they identify reablement potential early on and encourage a strength based approach that will maximise the person's independence.	
CP 3.4	The proportion of people who use services who receive direct payments (ASCOF 1C (2A)) [YTD Snapshot]	Aim to Maximise	April 2018	29.2%	33%	33%			There is currently no reporting available on this indicator due to the implementation of the Liquid Logic adults system. Officers are working to ensure robust reporting will be available for the August performance, reported in September. April comment: Performance remains above the national benchmark of 28.3% and above the regional benchmark of 28.2%. As the domiciliary care is commissioned with the expectation of an enablement approach being adopted, aligned to localities, we are not surprised to see that people have trust in this offer and are choosing to access a direct service from us as opposed to a direct payment. The Service Contract to support people with Direct Payments is currently going through a tendering process, with adjustments to the specification to enhance the support for people using Direct Payments. It is anticipated that once the new contract is in place, we may see an increase in numbers of people choosing to have a direct payment option.	People Scrutiny

Expected Outcome Some slippage against target
Responsible OUs Department for People; Public Health

MPR Code	Short Name	Minimise or Maximise	Latest Month	Month's Value	Month's Target	Annual Target 2018/19	Expected Outcome	Better or worse than last year	Comment - explanation of current performance, actions to improve performance and anticipated future performance	Scrutiny Committee
CP 3.11	Smoking Cessation (quits) - Number of people successfully completing 4-week stop smoking course [Cumulative YTD]	Aim to Maximise	July 2018	227	233	771			Continuing to support Primary Care to invite patients who are recorded as smokers into treatment, with a focus on long term conditions in practices with large numbers of smokers and practices in areas of high deprivation.	People Scrutiny

MPR Code	Short Name	Minimise or Maximise	Latest Month	Month's Value	Month's Target	Annual Target 2018/19	Expected Outcome	Better or worse than last year	Comment - explanation of current performance, actions to improve performance and anticipated future performance	Scrutiny Committee
									Delivering refreshed action plan with particular focus on smoking in pregnancy/smokers with long term conditions including mental health. Ongoing discussions with Essex Partnership University Foundation Trust (EPUT) to embed smoking cessation within mental health treatment pathways.	

Expected Outcome Some slippage against target
Responsible OUs Department for Place

MPR Code	Short Name	Minimise or Maximise	Latest Month	Month's Value	Month's Target	Annual Target 2018/19	Expected Outcome	Better or worse than last year	Comment - explanation of current performance, actions to improve performance and anticipated future performance	Scrutiny Committee
CP 2.2	% acceptable standard of cleanliness: litter [Cumulative YTD]	Aim to Maximise	July 2018	93%	94%	94%	🟡	👆	There has been a very slight performance dip to the litter cleansing target, which is usually the case in the summer season with high numbers of tourists visiting the town, especially with the exceptional summer that we are experiencing. It needs to be recognised that this is an exceptionally high standard of cleansing target and achieving over 93% is still a very high level of overall cleansing performance, which Veolia will be commended for. The end of year target will be met	Place Scrutiny
CP 5.1	Number of hours delivered through volunteering within Culture, Tourism and Property, including Pier and Foreshore and Events. [Cumulative YTD]	Aim to Maximise	July 2018	6,521	6,500	19,500	🟡	👇	<p>Music events; Lunchtime Recital: 2, Local Concert: 30, London Concert: 75, BBC Proms: 360 Total =467 Sparkle; 121 Bookstart; 85.5 Library Volunteers: 707 Home Library Service Volunteers: 75 Museum Volunteers: 401 Code club: 10 Summer Reading Challenge: 425 Leisure; Awaiting Figures Focal Point; Awaiting Figures Total - 2,291.5</p> <p>Volunteering for 18/19 started lower than expected, due to fewer larger scale events but with the Summer Reading Challenge in the Summer months, numbers have increased to reach target in July 2018.</p>	Place Scrutiny

Expected Outcome: Indicators on course to achieve target (Greens)

Expected Outcome On course to achieve target
Responsible OUs Department for People

MPR Code	Short Name	Minimise or Maximise	Latest Month	Month's Value	Month's Target	Annual Target 2018/19	Expected Outcome	Better or worse than last year	Comment - explanation of current performance, actions to improve performance and anticipated future performance	Scrutiny Committee
CP 1.5	Percentage of children who have had their Child Protection Plan for at least 20 working days and who have had a visit in the 20 working days prior to the last day of the month [Monthly Snapshot]	Aim to Maximise	July 2018	96%	95%	95%			This is above target. Four children (three families) were out of timescales - in relation to three children (two families) the children were seen and in the other case there was an unsuccessful home visit and another is being arranged. This is monitored on a weekly basis and Team Managers provide reassurance that children are safe.	People Scrutiny
CP 3.13	Delayed transfers of care from hospital (DToC Beds), and those which are attributable to adult social care per 100,000 population [ASCOF(2C2) SOCIAL CARE ONLY][Cumulative YTD]	Aim to Minimise	July 2018	0.29	1.81	1.81			Delayed transfers of care from the acute and non-acute settings for health and social care maintains a positive and stable trajectory, with no anticipated decline in the short term. Performance continues to be supported by the strategic work being undertaken by the Service Transformation Team and the launch of a system wide Integrated Discharge Management Post, designed to support improvements across the Health and Social Care System. Work is commencing on strategies to support DTOC, including the co-location of the Integrated Discharge Service, and planning of the Discharge to Assess Model. Nationally released DTOC data for Jun-18 by LG Inform ranks Southend-on-Sea Borough Council as 11th within All English single-tier and county councils.	People Scrutiny
CP 4.10	Rate of households in temporary accommodation per 1,000 households [Cumulative YTD]	Aim to Minimise	July 2018	1.97	3.19	3.19			Only quarterly data is available, in line with national statistics and monthly updates continue to be provided for TA. Continued pressure in this area with 156 households in TA, up from 141 in Jun-18. Jul-18 performance is better than target and it should be noted that Dec-17 local performance stood at 1.54, compared to the England rate of 3.36 with local and national rates increasing. Southend ranks 99/294 reporting LAs, an improvement from 109/292 at the end of Sep-17 and the best position since Jun-16 (106th). This strong position is based on the proactive approach of the team, yet considerable pressures remain. Work is underway to improve the availability of	Policy and Resources Scrutiny

MPR Code	Short Name	Minimise or Maximise	Latest Month	Month's Value	Month's Target	Annual Target 2018/19	Expected Outcome	Better or worse than last year	Comment - explanation of current performance, actions to improve performance and anticipated future performance	Scrutiny Committee
									private sector properties to discharge our homelessness duty into, relieving pressure on the limited social housing stocks and reducing TA occupation levels. Introduction of the Homelessness Reduction Act has seen a substantial increase in approaches, which is likely to lead to a further increase in demand for TA. Length of time applicants spend in TA is also likely to increase as a reflection of the 56 day relief duty.	

Expected Outcome On course to achieve target
Responsible OUs Department for People; Public Health

MPR Code	Short Name	Minimise or Maximise	Latest Month	Month's Value	Month's Target	Annual Target 2018/19	Expected Outcome	Better or worse than last year	Comment - explanation of current performance, actions to improve performance and anticipated future performance	Scrutiny Committee
CP 3.7	PHRD Public Health Responsibility Deal [Cumulative YTD]	Aim to Maximise	July 2018	19	13	40			Move Out programme being delivered. Continuing to work collaboratively with economic development to engage businesses. Developing a bid to support employee retention for those with mental health & MSK problems.	People Scrutiny

Expected Outcome On course to achieve target
Responsible OUs Department of the Chief Executive

MPR Code	Short Name	Minimise or Maximise	Latest Month	Month's Value	Month's Target	Annual Target 2018/19	Expected Outcome	Better or worse than last year	Comment - explanation of current performance, actions to improve performance and anticipated future performance	Scrutiny Committee
CP 4.3	% of Council Tax for 2018/19 collected in year [Cumulative YTD]	Aim to Maximise	July 2018	35.60%	35.60%	97.50%			The current collection for Council Tax as at the 31st July is 35.6%, this is equal to the target profile for the year. In monetary terms a total of £2.1 million additional tax has been collected to date compared to last year. Both enforcement agents are equal on collection of council tax with acceptable levels of collection rates. We continue to have large numbers of cases presented at the magistrate's court for non-payment; we will use all collection methods to recovery these arrears including attachment of earnings and attachments of benefits. For those residents that are struggling with arrears, we will	Policy & Resources Scrutiny

MPR Code	Short Name	Minimise or Maximise	Latest Month	Month's Value	Month's Target	Annual Target 2018/19	Expected Outcome	Better or worse than last year	Comment - explanation of current performance, actions to improve performance and anticipated future performance	Scrutiny Committee
									continue to signpost to Step Change, CAB and other supporting agencies. Additional resource will be available shortly to support a review of our single person discounts, as well as students and a comprehensive review of empty properties.	
CP 4.4	% of Non-Domestic Rates for 2018/19 collected in year [Cumulative YTD]	Aim to Maximise	July 2018	39.20%	39.20%	98.30%			The current collection for Business Rates as at 31st July 2018 is 39.2%. The collection equals the monthly target for this year. In monetary terms as at 31st July 2018 £16,000 more tax has been collected than at this stage last year in respect of the current year debt. The new position of revenues retention officer has now been filled, and will be starting work immediately on several reviews of reliefs and exemptions, including small business rates relief and charity reviews. We continue to work with our external partners to ensure we maximise collection where rates evasion tactics are being attempted. Our good working relationship with the Valuation Office is essential when looking to ensure a quick response to uploading new properties to our tax base, to maximise income for the authority.	Policy & Resources Scrutiny
CP 5.5	Increase the number of people signed up to MySouthend to 45,000 [Cumulative YTD]	Aim to Maximise	July 2018	39,456	38,333	45,000			Customers currently signed up to MySouthend are 39,456 which is a 1.66% increase from June 2018. We are continuing to encourage contact via the MySouthend Portal and the ambition remains to have a single MySouthend solution.	Policy & Resources Scrutiny

Section 2: 2018- 2019 Corporate Performance Indicators

Information for all 2013-2014 Corporate Priority Indicators

Generated on: 07 September 2018 15:26



Performance Data Expected Outcome: At risk of missing target 6 On course to achieve target 16 Some slippage against target 7

Priority Aim: SAFE: Priorities • Create a safe environment across the town for residents, workers and visitors. • Work in partnership with Essex Police and other agencies to tackle crime. • Look after and safeguard our children and vulnerable adults.

MPR Code	Short Name	Minimise or Maximise	Latest Month	Month's Value	Month's Target	Annual Target 2018/19	Expected Outcome	Better or worse than last year	Managed By	Scrutiny Committee
CP 1.1	Rate of children subject to a Child Protection Plan per 10,000 population under the age of 18. [Monthly Snapshot]	Goldilocks	July 2018	33.24	38 - 48	38 - 48			John O'Loughlin	People Scrutiny
CP 1.2	Rate of Looked After Children per 10,000 population under the age of 18. [Monthly Snapshot]	Goldilocks	July 2018	71.84	57 - 67	57 - 67			John O'Loughlin	People Scrutiny
CP 1.4	Percentage of children who have been LAC for at least 5 working days, who have had a visit in the 6 weeks (30 working days), prior to the last day of the month.[Monthly Snapshot]	Aim to Maximise	July 2018	79.6%	95%	95%			John O'Loughlin	People Scrutiny
CP 1.5	Percentage of children who have had their Child Protection Plan for at least 20 working days and who have had a visit in the 20 working days prior to the last day of the month [Monthly Snapshot]	Aim to Maximise	July 2018	96%	95%	95%			John O'Loughlin	People Scrutiny

Aim: CLEAN: Priorities • Continue to promote the use of green technology and initiatives to benefit the local economy and environment. • Encourage and enforce high standards of environmental stewardship.

MPR Code	Short Name	Minimise or Maximise	Latest Month	Month's Value	Month's Target	Annual Target 2018/19	Expected Outcome	Better or worse than last year	Managed By	Scrutiny Committee
CP 2.2	% acceptable standard of cleanliness: litter [Cumulative YTD]	Aim to Maximise	July 2018	93%	94%	94%			Carl Robinson	Place Scrutiny
CP 2.3	Percentage of household waste sent for reuse, recycling and composting [Cumulative YTD]	Aim to Maximise	March 2018	47.21%	- 9	46.38%		-	Carl Robinson	Place Scrutiny

MPR Code	Short Name	Minimise or Maximise	Latest Month	Month's Value	Month's Target	Annual Target 2018/19	Expected Outcome	Better or worse than last year	Managed By	Scrutiny Committee
CP 2.4	Number of reported missed collections - per year value [Cumulative YTD]	Aim to Minimise	July 2018	3,031	2,664	8,000			Carl Robinson	Place Scrutiny

Aim: HEALTHY: Priorities • Actively promote healthy and active lifestyles for all. • Work with the public and private rented sectors to provide good quality housing • Improve the life chances of our residents, especially our vulnerable children & adults, by working to reduce inequalities and social deprivation across our communities.

MPR Code	Short Name	Minimise or Maximise	Latest Month	Month's Value	Month's Target	Annual Target 2018/19	Expected Outcome	Better or worse than last year	Managed By	Scrutiny Committee
CP 3.1	Proportion of adults in contact with secondary mental health services who live independently with or without support. (ASCOF 1H) [Monthly Snapshot]	Aim to Maximise	July 2018	84.1%	74%	74%			Sharon Houlden	People Scrutiny
CP 3.2	Proportion of older people (65 and over) who were still at home 91 days after discharge from hospital into reablement/rehabilitation services. [ASCOF 2B(1) [Rolling Quarter]	Aim to Maximise	April 2018	86.2%	88.7%	88.7%			Sharon Houlden	People Scrutiny
CP 3.4	The proportion of people who use services who receive direct payments (ASCOF 1C (2A)) [YTD Snapshot]	Aim to Maximise	April 2018	29.2%	33%	33%			Sharon Houlden	People Scrutiny
CP 3.5	Proportion of adults with a learning disability in paid employment. (ASCOF 1E) [Monthly Snapshot]	Aim to Maximise	April 2018	10.4%	10%	10%			Sharon Houlden	People Scrutiny
CP 3.6	Participation and attendance at council owned / affiliated cultural and sporting activities and events and visits to the Pier [Cumulative YTD]	Aim to Maximise	July 2018	1,531,171	1,466,667	4,400,000			Scott Dolling	Place Scrutiny
CP 3.7	PHRD Public Health Responsibility Deal [Cumulative YTD]	Aim to Maximise	July 2018	19	13	40			Krishna Ramkhelawon	People Scrutiny
CP 3.9	Take up of the NHS Health Check programme - by those eligible [Cumulative YTD]	Aim to Maximise	July 2018	1,585	1,832	5,740			Krishna Ramkhelawon	People Scrutiny
CP 3.10	Percentage of Initial Child Protection Conferences that took place with 15 working days of the initial strategy discussion. [Cumulative YTD]	Aim to Maximise	July 2018	62.3%	90%	90%			John O'Loughlin	People Scrutiny

MPR Code	Short Name	Minimise or Maximise	Latest Month	Month's Value	Month's Target	Annual Target 2018/19	Expected Outcome	Better or worse than last year	Managed By	Scrutiny Committee
CP 3.11	Smoking Cessation (quits) - Number of people successfully completing 4-week stop smoking course [Cumulative YTD]	Aim to Maximise	July 2018	227	233	771			Ian Diley	People Scrutiny
CP 3.13	Delayed transfers of care from hospital (DToC Beds), and those which are attributable to adult social care per 100,000 population [ASCOF(2C2) SOCIAL CARE ONLY][Cumulative YTD]	Aim to Minimise	July 2018	0.29	1.81	1.81			Sharon Houlden	People Scrutiny

Aim: PROSPEROUS: Priorities • Maximise opportunities to enable the planning and development of quality, affordable housing. • Ensure residents have access to high quality education to enable them to be lifelong learners & have fulfilling employment. • Ensure the town is 'open for businesses' and that new, developing and existing enterprise is nurtured and supported • Ensured continued regeneration of the town through a culture led agenda.

MPR Code	Short Name	Minimise or Maximise	Latest Month	Month's Value	Month's Target	Annual Target 2018/19	Expected Outcome	Better or worse than last year	Managed By	Scrutiny Committee
CP 4.3	% of Council Tax for 2018/19 collected in year [Cumulative YTD]	Aim to Maximise	July 2018	35.60%	35.60%	97.50%			Joe Chesterton	Policy & Resources Scrutiny
CP 4.4	% of Non-Domestic Rates for 2018/19 collected in year [Cumulative YTD]	Aim to Maximise	July 2018	39.20%	39.20%	98.30%			Joe Chesterton	Policy & Resources Scrutiny
CP 4.5	Major planning applications determined in 13 weeks [Cumulative YTD]	Aim to Maximise	July 2018	100.00%	79.00%	79.00%			Peter Geraghty	Place Scrutiny
CP 4.6	Minor planning applications determined in 8 weeks [Cumulative YTD]	Aim to Maximise	July 2018	99.33%	84.00%	84.00%			Peter Geraghty	Place Scrutiny
CP 4.7	Other planning applications determined in 8 weeks [Cumulative YTD]	Aim to Maximise	July 2018	98.52%	90.00%	90.00%			Peter Geraghty	Place Scrutiny
CP 4.8	Current Rent Arrears as % of rent due [Monthly Snapshot]	Aim to Minimise	July 2018	1.5%	1.77%	1.77%			Sharon Houlden	Policy and Resources Scrutiny
CP 4.9	Percentage of children in good or outstanding schools. [Monthly Snapshot]	Aim to Maximise	July 2018	83.9%	82.5%	82.5%			Brin Martin	People Scrutiny
CP 4.10	Rate of households in temporary accommodation per 1,000 households [Cumulative YTD]	Aim to Minimise	July 2018	1.97	3.19	3.19			Sharon Houlden	Policy and Resources Scrutiny

Aim: EXCELLENT: Priorities • Work with & listen to our communities & partners to achieve better outcomes for all • Enable communities to be self-sufficient & foster pride in the town • Promote & lead an entrepreneurial, creative & innovative approach to the development of our town.

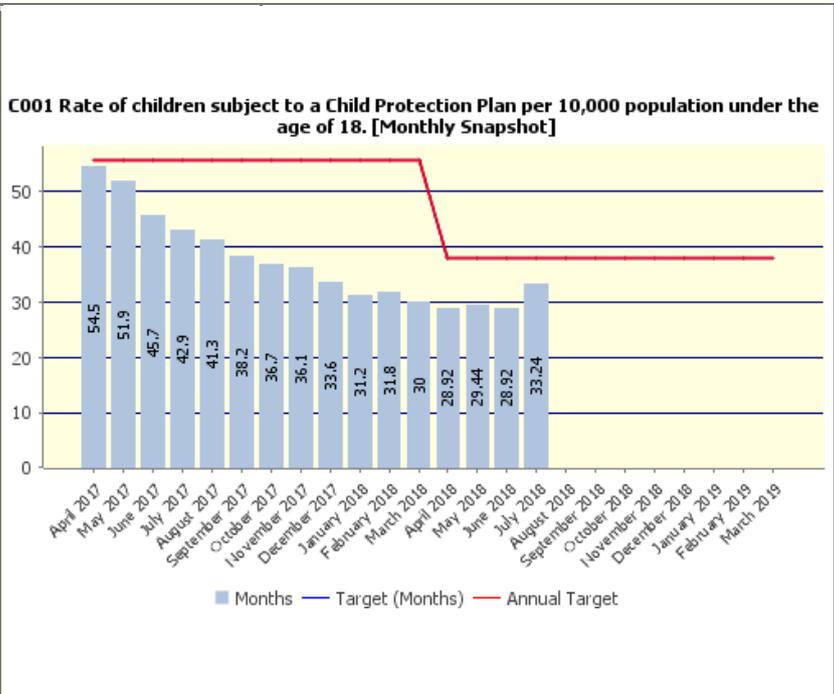
MPR Code	Short Name	Minimise or Maximise	Latest Month	Month's Value	Month's Target	Annual Target 2018/19	Expected Outcome	Better or worse than last year	Managed By	Scrutiny Committee
CP 5.1	Number of hours delivered through volunteering within Culture, Tourism and Property, including Pier and Foreshore and Events. [Cumulative YTD]	Aim to Maximise	July 2018	6,521	6,500	19,500			Scott Dolling	Place Scrutiny
CP 5.4	Working days lost per FTE due to sickness - excluding school staff [Cumulative YTD]	Aim to Minimise	July 2018	2.32	2.21	7.20			Joanna Ruffle	Policy & Resources Scrutiny
CP 5.5	Increase the number of people signed up to MySouthend to 45,000 [Cumulative YTD]	Aim to Maximise	July 2018	39,456	38,333	45,000			Joanna Ruffle	Policy & Resources Scrutiny
CP 5.6	Percentage of new Education Health and Care (EHC) plans issued within 20 weeks including exception cases. [Cumulative YTD]	Aim to Maximise	July 2018	100%	95%	95%			Brin Martin	People Scrutiny

Section 3: Detail of indicators rated Red or Amber

Aim: SAFE: Priorities • Create a safe environment across the town for residents, workers and visitors. • Work in partnership with Essex Police and other agencies to tackle crime. • Look after and safeguard our children and vulnerable adults.
 Expected Outcome: At risk of missing target 1 Some slippage against target 2

CP 1.1	Rate of children subject to a Child Protection Plan per 10,000 population under the age of 18. [Monthly Snapshot]		<p>July 2018 result</p> <p>34.3 28 0 33.24 41.7 48 80</p>
Expected Outcome		Format Goldilocks	
Managed By	John O'Loughlin		
Year Introduced	2014		

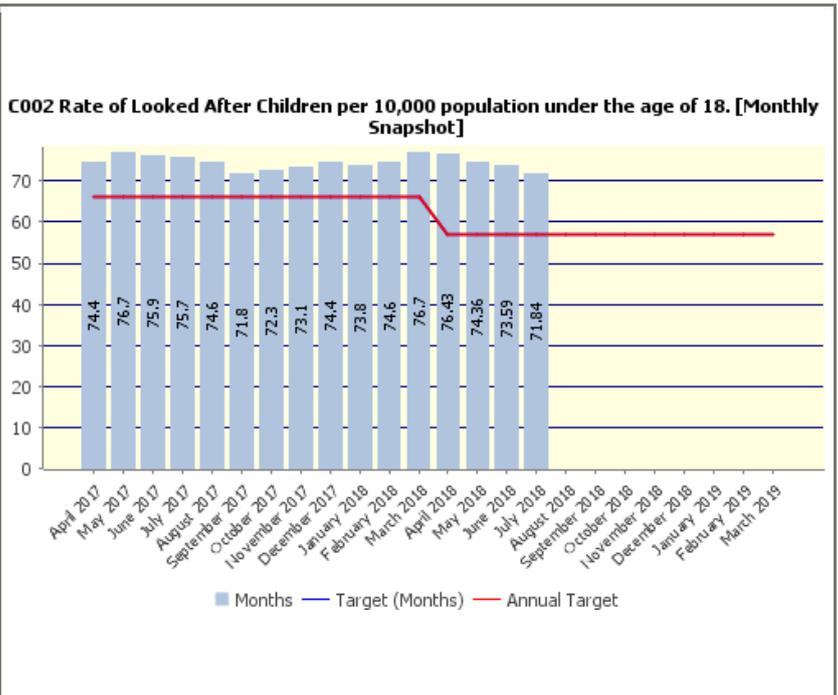
Date Range 1		
	Value	Target
April 2017	54.5	50.4 - 55.7
May 2017	51.9	50.4 - 55.7
June 2017	45.7	50.4 - 55.7
July 2017	42.9	50.4 - 55.7
August 2017	41.3	50.4 - 55.7
September 2017	38.2	50.4 - 55.7
October 2017	36.7	50.4 - 55.7
November 2017	36.1	50.4 - 55.7
December 2017	33.6	50.4 - 55.7
January 2018	31.2	50.4 - 55.7
February 2018	31.8	50.4 - 55.7
March 2018	30	50.4 - 55.7
April 2018	28.92	38 - 48
May 2018	29.44	38 - 48
June 2018	28.92	38 - 48
July 2018	33.24	38 - 48



There has been a small increase in the number of children subject to child protection plans although still historically low. This is partly explained by increasing resources in Early Help and the use of other preventative interventions such as Family Group Conferences. We also regularly review decision making in the Multi-Agency Safeguarding Hub (MASH) plus and the outcome of Section 47 investigations. We have audited CIN cases and these were seen as being appropriately held at this level. We have commissioned a piece of work to provide further analysis - there has been a slight delay in this due to other work demands and will be available in September.

CP 1.2	Rate of Looked After Children per 10,000 population under the age of 18. [Monthly Snapshot]			<p style="text-align: center;">July 2018 result</p>
Expected Outcome		Format	Goldilocks	
Managed By	John O'Loughlin			
Year Introduced	2014			

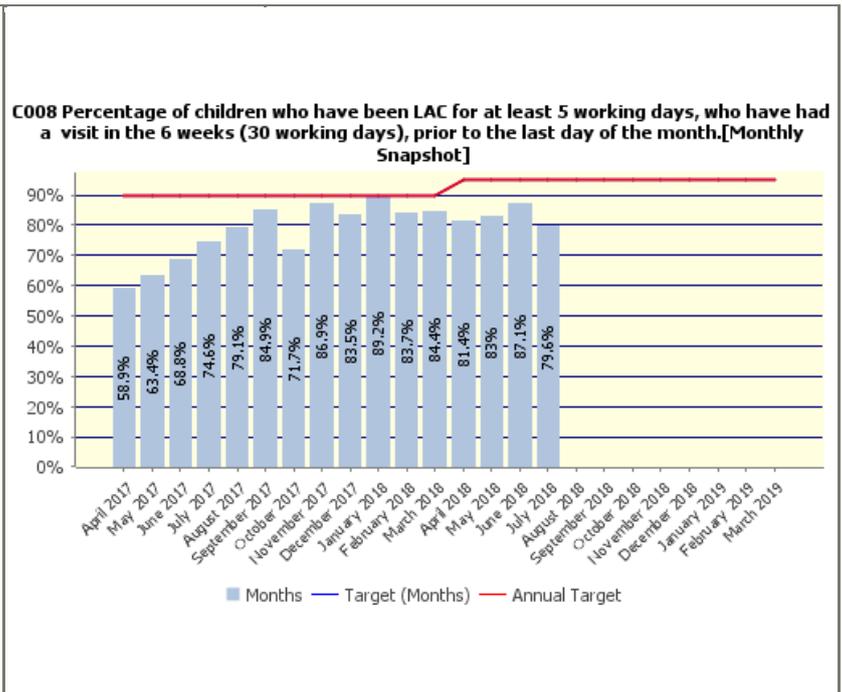
Date Range 1		
	Value	Target
April 2017	74.4	66
May 2017	76.7	66
June 2017	75.9	66
July 2017	75.7	66
August 2017	74.6	66
September 2017	71.8	66
October 2017	72.3	66
November 2017	73.1	66
December 2017	74.4	66
January 2018	73.8	66
February 2018	74.6	66
March 2018	76.7	66
April 2018	76.43	57 - 67
May 2018	74.36	57 - 67
June 2018	73.59	57 - 67
July 2018	71.84	57 - 67



The rate of children looked after remains above target. The rate did appear to stabilise in the mid-70s but has reduced over previous months. Other than children who need to become looked after in an emergency, the decision for a child to become looked after is made by the Placement Panel to ensure that all other options are considered before care is agreed. The Panel process has prevented the numbers escalating and, where safely, put other measures in place to support the family. Planned work around reunification should ensure that children do not remain in care for longer than necessary. We have commissioned a piece of work to review LAC numbers but this has been delayed in reporting due to other work demands but will report in September.

CP 1.4	Percentage of children who have been LAC for at least 5 working days, who have had a visit in the 6 weeks (30 working days), prior to the last day of the month.[Monthly Snapshot]			
Expected Outcome		Format	Aim to Maximise	
Managed By	John O'Loughlin			
Year Introduced	2017			

Date Range 1		
	Value	Target
April 2017	58.9%	90%
May 2017	63.4%	90%
June 2017	68.8%	90%
July 2017	74.6%	90%
August 2017	79.1%	90%
September 2017	84.9%	90%
October 2017	71.7%	90%
November 2017	86.9%	90%
December 2017	83.5%	90%
January 2018	89.2%	90%
February 2018	83.7%	90%
March 2018	84.4%	90%
April 2018	81.4%	95%
May 2018	83%	95%
June 2018	87.1%	95%
July 2018	79.6%	95%



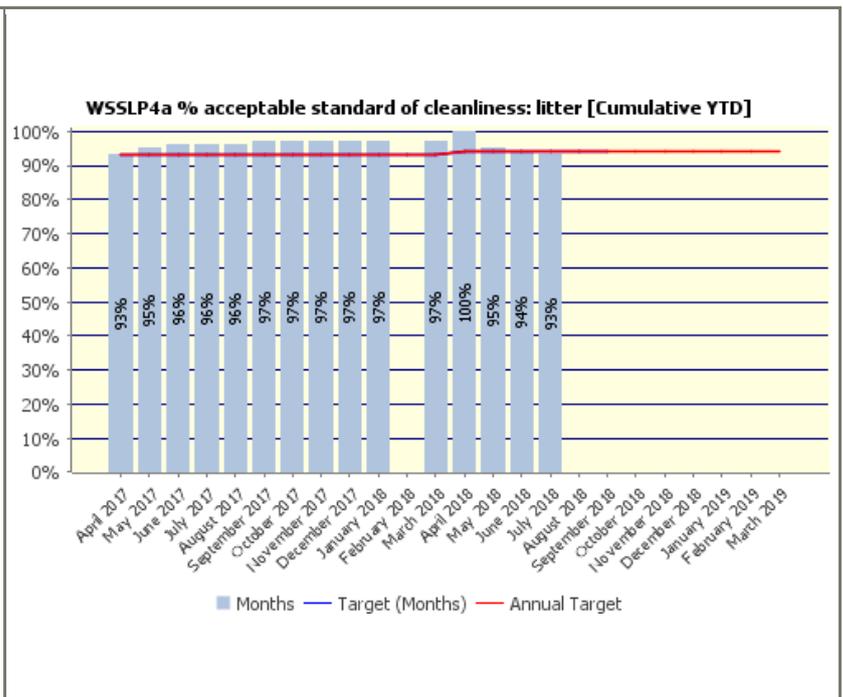
There is a concern that this number has dropped as children are on holiday. This is a continued area of focus and there is ongoing work with managers and staff to address the concerns. This is reported on a weekly basis and assurance is given that children are being appropriately safeguarded.

Aim: CLEAN: Priorities • Continue to promote the use of green technology and initiatives to benefit the local economy and environment. • Encourage and enforce high standards of environmental stewardship.

Expected Outcome: At risk of missing target 2 Some slippage against target 1

CP 2.2	% acceptable standard of cleanliness: litter [Cumulative YTD]			<p>July 2018 result</p>
Expected Outcome		Format	Aim to Maximise	
Managed By	Carl Robinson			
Year Introduced	2010			

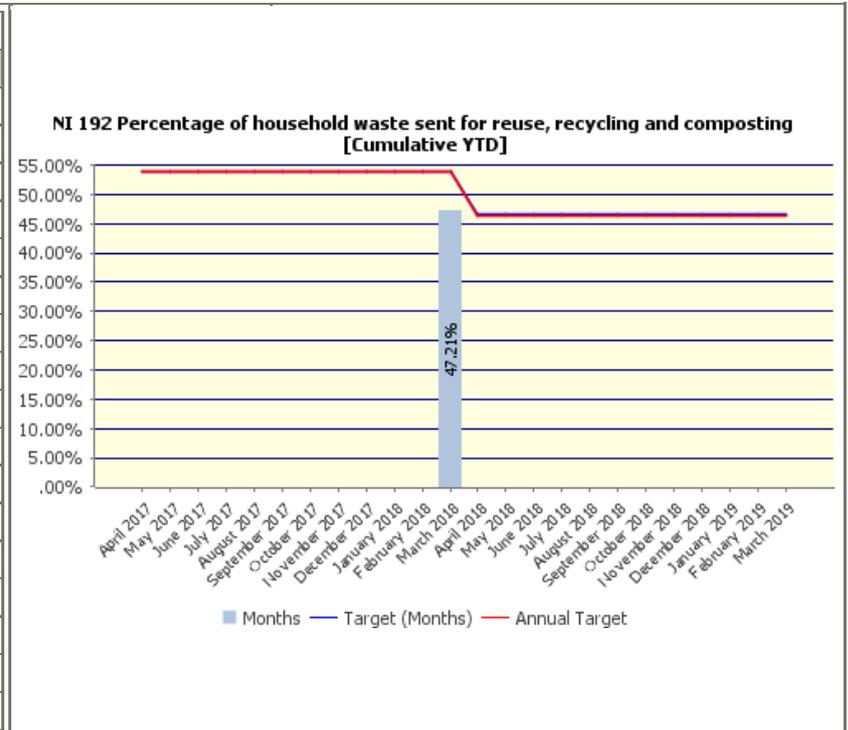
Date Range 1		
	Value	Target
April 2017	93%	93%
May 2017	95%	93%
June 2017	96%	93%
July 2017	96%	93%
August 2017	96%	93%
September 2017	97%	93%
October 2017	97%	93%
November 2017	97%	93%
December 2017	97%	93%
January 2018	97%	93%
February 2018	N/A	93%
March 2018	97%	93%
April 2018	100%	94%
May 2018	95%	94%
June 2018	94%	94%
July 2018	93%	94%



There has been a very slight performance dip to the litter cleansing target, which is usually the case in the summer season with high numbers of tourists visiting the town, especially with the exceptional summer that we are experiencing. It needs to be recognised that this is an exceptionally high standard of cleansing target and achieving over 93% is still a very high level of overall cleansing performance, which Veolia will be commended for. The end of year target will be met

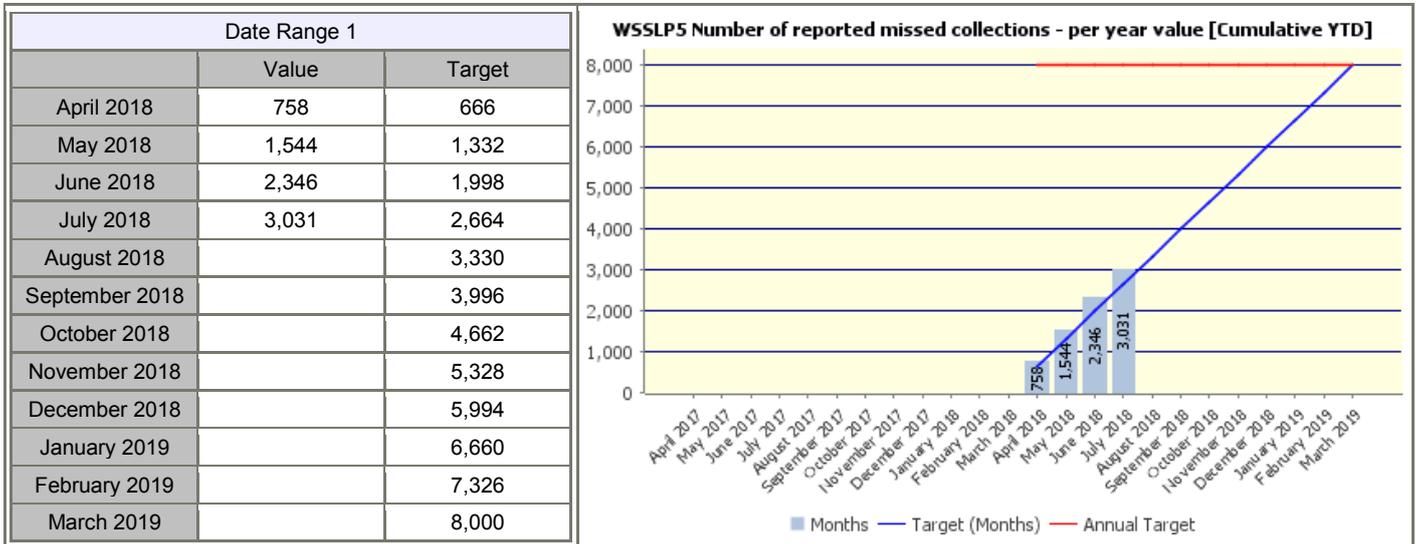
CP 2.3	Percentage of household waste sent for reuse, recycling and composting [Cumulative YTD]			<p>March 2018 result</p> <p>51.30%</p> <p>54.00%</p> <p>100.00%</p> <p>47.21%</p> <p>.00%</p>
Expected Outcome		Format	Aim to Maximise	
Managed By	Carl Robinson			
Year Introduced	2008			

Date Range 1		
	Value	Target
April 2017	N/A	54.00%
May 2017	N/A	54.00%
June 2017	N/A	54.00%
Q1 2017/18		
July 2017	N/A	54.00%
August 2017	N/A	54.00%
September 2017	N/A	54.00%
Q2 2017/18		
October 2017	N/A	54.00%
November 2017	N/A	54.00%
December 2017	N/A	54.00%
Q3 2017/18		
January 2018	N/A	54.00%
February 2018	N/A	54.00%
March 2018	47.21%	54.00%
Q4 2017/18	47.21%	
April 2018		46.48%



2017/18 annual validated figure was reported in June 2018.
 First Quarter figures for April - June 2018/19 will be available at end of September.
 Activities that Veolia have been undertaking include: - Awareness raising activities – roadshows; events; coffee mornings; community meetings.
 Delivery and co-ordination of Customer Liaison Group; Street Champion and Recycling Champion act
 Anti-littering educational activities and supporting local community groups.

CP 2.4	Number of reported missed collections - per year value [Cumulative YTD]			<p style="text-align: center;">July 2018 result</p>
Expected Outcome		Format	Aim to Minimise	
Managed By	Carl Robinson			
Year Introduced	2018			



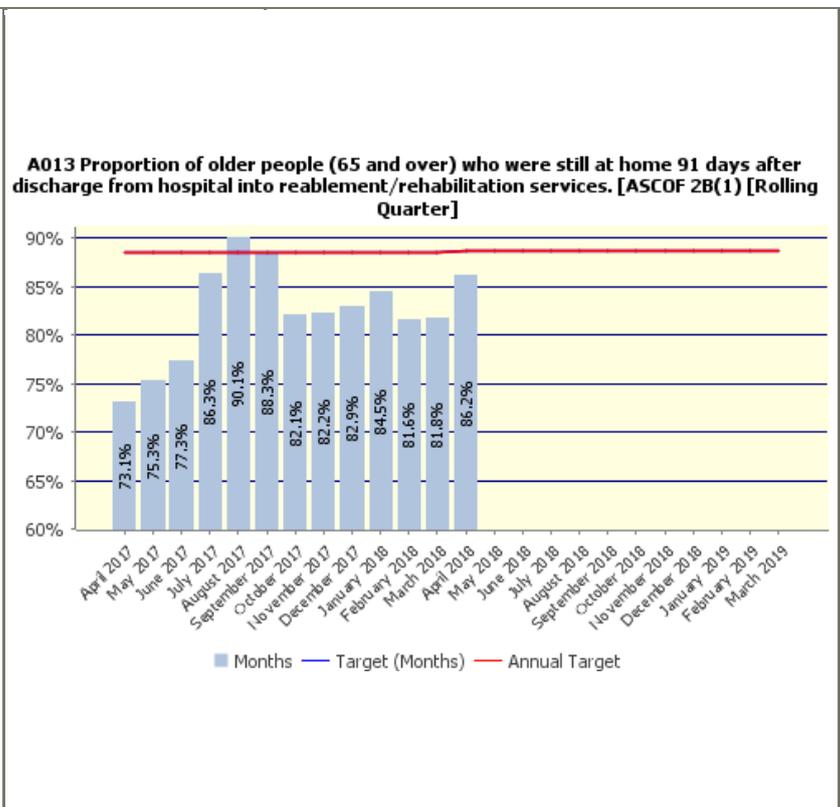
The missed collection target has marginally exceeded the target for July and this has been referred to Veolia Management to look into. This target will be tracked closely to ensure that the end of year target will be met.

Aim: HEALTHY: Priorities • Actively promote healthy and active lifestyles for all. • Work with the public and private rented sectors to provide good quality housing • Improve the life chances of our residents, especially our vulnerable children & adults, by working to reduce inequalities and social deprivation across our communities.

Expected Outcome: At risk of missing target 2 Some slippage against target 3

CP 3.2	Proportion of older people (65 and over) who were still at home 91 days after discharge from hospital into reablement/rehabilitation services. [ASCOF 2B(1) [Rolling Quarter]			<p>April 2018 result</p>
Expected Outcome		Format	Aim to Maximise	
Managed By	Sharon Houlden			
Year Introduced	2012			

Date Range 1		
	Value	Target
April 2017	73.1%	88.6%
May 2017	75.3%	88.6%
June 2017	77.3%	88.6%
Q1 2017/18		
July 2017	86.3%	88.6%
August 2017	90.1%	88.6%
September 2017	88.3%	88.6%
Q2 2017/18		
October 2017	82.1%	88.6%
November 2017	82.2%	88.6%
December 2017	82.9%	88.6%
Q3 2017/18		
January 2018	84.5%	88.6%
February 2018	81.6%	88.6%
March 2018	81.8%	88.6%
Q4 2017/18		
April 2018	86.2%	88.7%
May 2018	-	88.7%
June 2018	-	88.7%

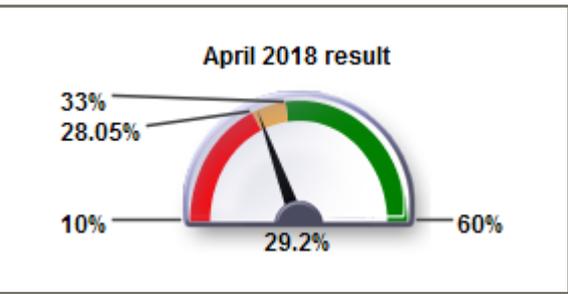


There is currently no reporting available on this indicator due to the implementation of the Liquid Logic adults system. Officers are working to ensure robust reporting will be available for the August performance, reported in September.

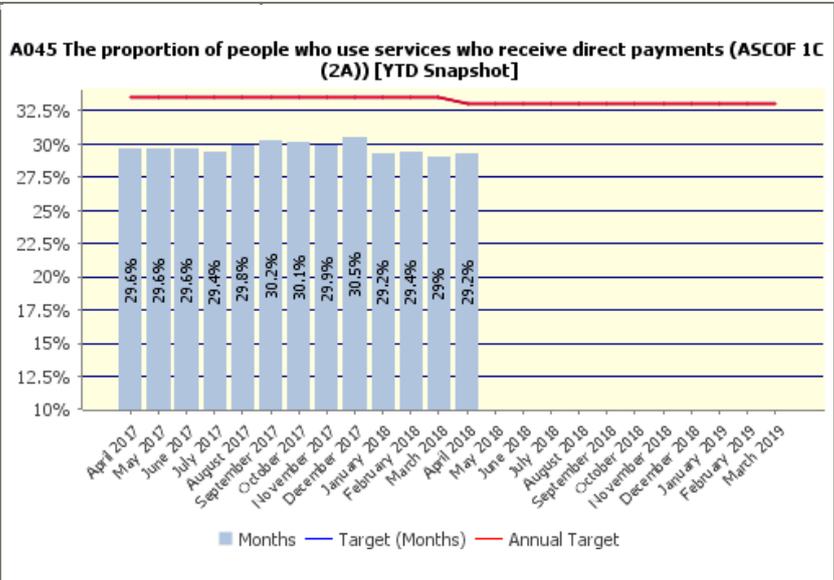
April's comment: This performance indicator remains under the local target but above national target of 82.5%, 12 people were not at home after their reablement period, 11 of whom had died before the 91 day review. Analysis is being undertaken to ensure the appropriate cohort is being reflected in the figures reported. We are committed to ensuring all people are given the opportunity of reablement where appropriate. We are working with partners and staff to ensure they identify the appropriate people for reablement and we are working closely with providers to ensure they identify reablement potential early on and encourage a strength based approach that will maximise the person's independence.

CP 3.4	The proportion of people who use services who receive direct payments (ASCOF 1C (2A)) [YTD Snapshot]		
Expected Outcome		Format	Aim to Maximise

Managed By	Sharon Houlden
Year Introduced	2015



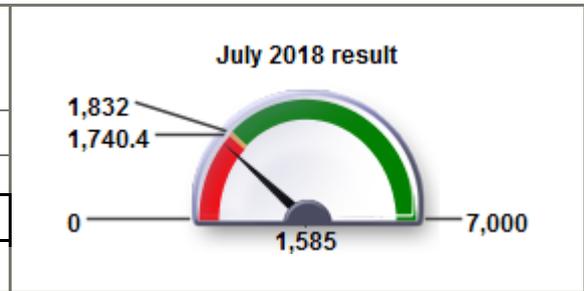
Date Range 1		
	Value	Target
April 2017	29.6%	33.5%
May 2017	29.6%	33.5%
June 2017	29.6%	33.5%
July 2017	29.4%	33.5%
August 2017	29.8%	33.5%
September 2017	30.2%	33.5%
October 2017	30.1%	33.5%
November 2017	29.9%	33.5%
December 2017	30.5%	33.5%
January 2018	29.2%	33.5%
February 2018	29.4%	33.5%
March 2018	29%	33.5%
April 2018	29.2%	33%



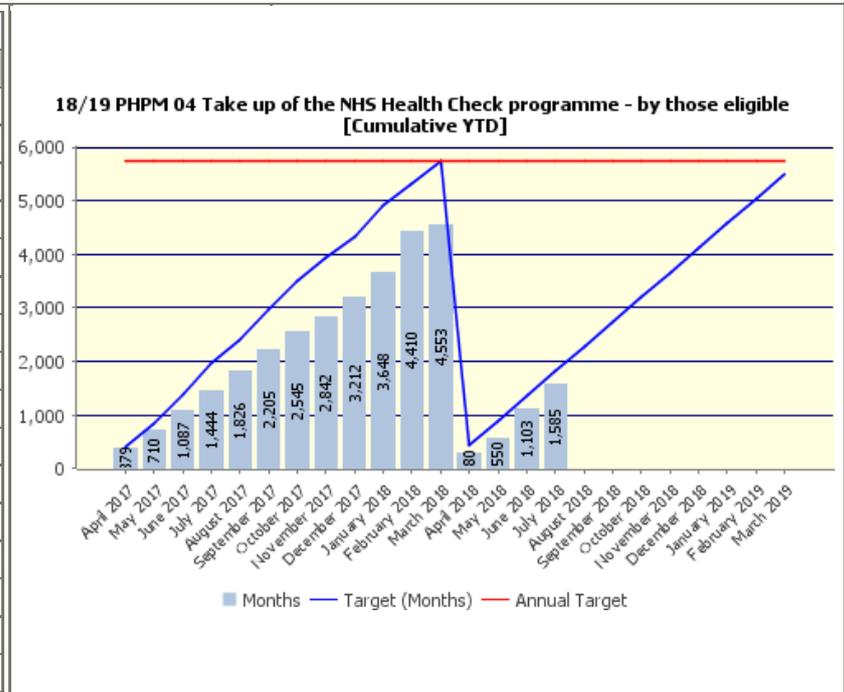
There is currently no reporting available on this indicator due to the implementation of the Liquid Logic adults system. Officers are working to ensure robust reporting will be available for the August performance, reported in September.

April comment: Performance remains above the national benchmark of 28.3% and above the regional benchmark of 28.2%. As the domiciliary care is commissioned with the expectation of an enablement approach being adopted, aligned to localities, we are not surprised to see that people have trust in this offer and are choosing to access a direct service from us as opposed to a direct payment. The Service Contract to support people with Direct Payments is currently going through a tendering process, with adjustments to the specification to enhance the support for people using Direct Payments. It is anticipated that once the new contract is in place, we may see an increase in numbers of people choosing to have a direct payment option.

CP 3.9	Take up of the NHS Health Check programme - by those eligible [Cumulative YTD]		
Expected Outcome		Format	Aim to Maximise
Managed By	Krishna Ramkhelawon		
Year Introduced	2013		



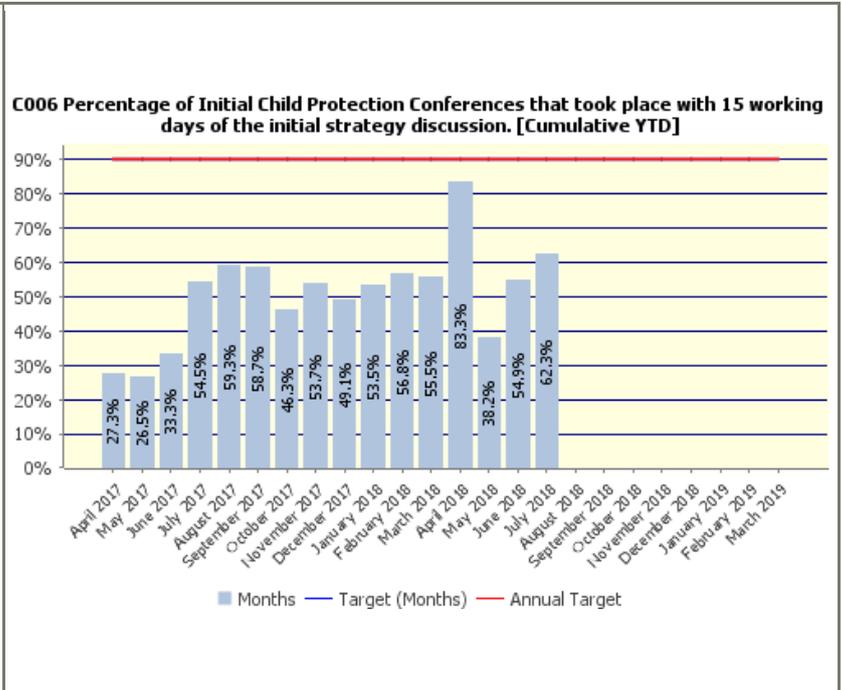
Date Range 1		
	Value	Target
April 2017	379	414
May 2017	710	828
June 2017	1,087	1,406
July 2017	1,444	1,984
August 2017	1,826	2,398
September 2017	2,205	2,976
October 2017	2,545	3,506
November 2017	2,842	3,920
December 2017	3,212	4,334
January 2018	3,648	4,912
February 2018	4,410	5,326
March 2018	4,553	5,740
April 2018	280	458
May 2018	550	916
June 2018	1,103	1,374
July 2018	1,585	1,832



Targets for invites through GPs are being exceeded, and while health check delivery target has not been met, performance has improved. Delivery by ACE has also improved although not yet meeting trajectory target.

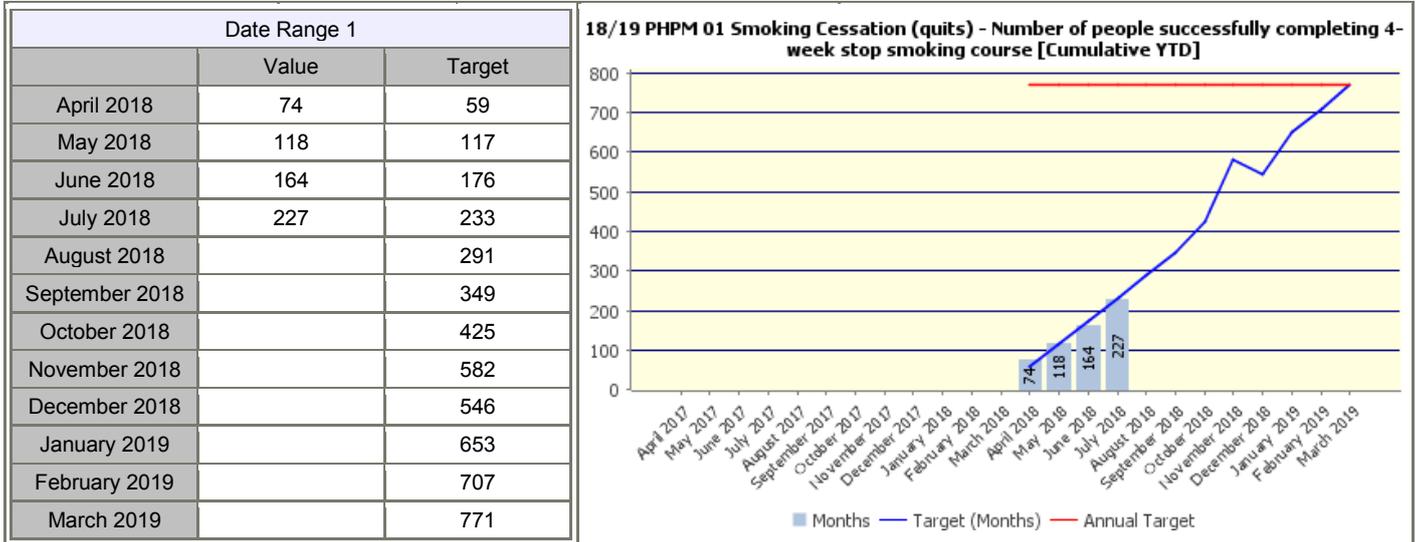
CP 3.10	Percentage of Initial Child Protection Conferences that took place with 15 working days of the initial strategy discussion. [Cumulative YTD]		<p style="text-align: center;">July 2018 result</p> <p>0% ————— 62.3% ————— 85.5% ————— 90% ————— 100%</p>
Expected Outcome		Format Aim to Maximise	
Managed By	John O'Loughlin		
Year Introduced	2017		

Date Range 1		
	Value	Target
April 2017	27.3%	90%
May 2017	26.5%	90%
June 2017	33.3%	90%
July 2017	54.5%	90%
August 2017	59.3%	90%
September 2017	58.7%	90%
October 2017	46.3%	90%
November 2017	53.7%	90%
December 2017	49.1%	90%
January 2018	53.5%	90%
February 2018	56.8%	90%
March 2018	55.5%	90%
April 2018	83.3%	90%
May 2018	38.2%	90%
June 2018	54.9%	90%
July 2018	62.3%	90%



July was a busy month for ICPC's with 26 children being taken to conference. Of these 20 were within timeframes. 100% (18) in A&I were within timescales. The remaining were two families which took 24 and 27 days respectively to come to conference. We continue to see good performance and are working hard to achieve near to 100% compliance in this area.

CP 3.11	Smoking Cessation (quits) - Number of people successfully completing 4-week stop smoking course [Cumulative YTD]			<p>July 2018 result</p>
Expected Outcome		Format	Aim to Maximise	
Managed By	Ian Diley			
Year Introduced				

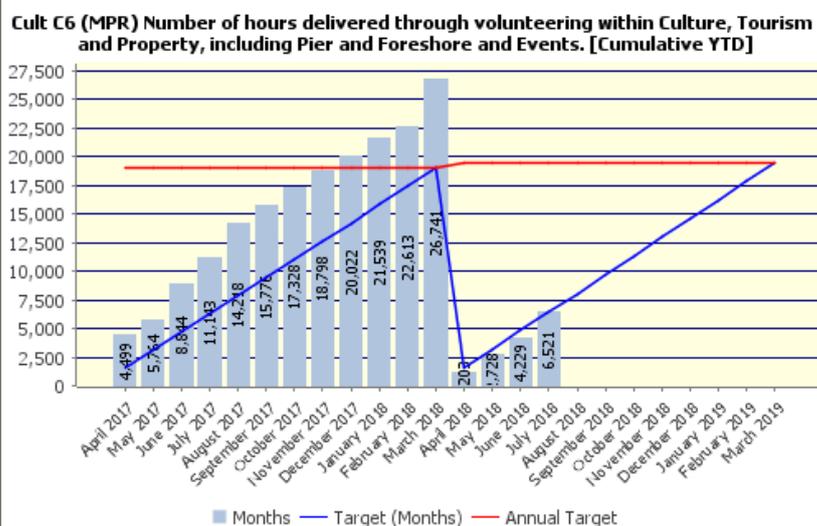


Continuing to support Primary Care to invite patients who are recorded as smokers into treatment, with a focus on long term conditions in practices with large numbers of smokers and practices in areas of high deprivation. Delivering refreshed action plan with particular focus on smoking in pregnancy/smokers with long term conditions including mental health. Ongoing discussions with Essex Partnership University Foundation Trust (EPUT) to embed smoking cessation within mental health treatment pathways.

Aim: EXCELLENT: Priorities • Work with & listen to our communities & partners to achieve better outcomes for all • Enable communities to be self-sufficient & foster pride in the town • Promote & lead an entrepreneurial, creative & innovative approach to the development of our town.
 Expected Outcome: At risk of missing target 1 Some slippage against target 1

CP 5.1	Number of hours delivered through volunteering within Culture, Tourism and Property, including Pier and Foreshore and Events. [Cumulative YTD]			<p>July 2018 result</p> <p>6,500 6,175 0 6,521 20,000</p>
Expected Outcome		Format	Aim to Maximise	
Managed By	Scott Dolling			
Year Introduced	2012			

Date Range 1		
	Value	Target
April 2017	4,499	1,583
May 2017	5,764	3,167
June 2017	8,844	4,750
July 2017	11,143	6,333
August 2017	14,218	7,917
September 2017	15,776	9,500
October 2017	17,328	11,083
November 2017	18,798	12,667
December 2017	20,022	14,250
January 2018	21,539	15,833
February 2018	22,613	17,417
March 2018	26,741	19,000
April 2018	1,203	1,625
May 2018	2,728	3,250
June 2018	4,229	4,875
July 2018	6,521	6,500

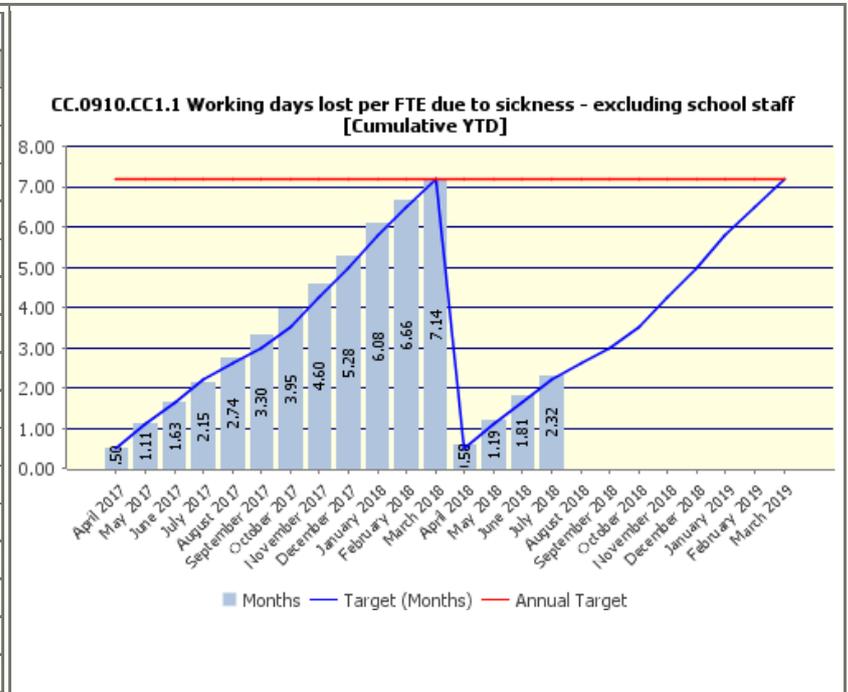


Music events; Lunchtime Recital: **2**, Local Concert: **30**, London Concert: **75**, BBC Proms: **360**
 Total =**467**
 Sparkle; **121**
 Bookstart; **85.5**
 Library Volunteers: **707**
 Home Library Service Volunteers: **75**
 Museum Volunteers: **401**
 Code club: **10**
 Summer Reading Challenge: **425**
 Leisure; **Awaiting Figures**
 Focal Point; **Awaiting Figures**
 Total – **2,291.5**

Volunteering for 18/19 started lower than expected, due to fewer larger scale events but with the Summer Reading Challenge in the Summer months, numbers have increased to reach target in July 2018.

CP 5.4	Working days lost per FTE due to sickness - excluding school staff [Cumulative YTD]		<p style="text-align: center;">July 2018 result</p>
Expected Outcome		Format Aim to Minimise	
Managed By	Joanna Ruffle		
Year Introduced	2009		

Date Range 1		
	Value	Target
April 2017	0.50	0.51
May 2017	1.11	1.10
June 2017	1.63	1.65
July 2017	2.15	2.21
August 2017	2.74	2.61
September 2017	3.30	3.01
October 2017	3.95	3.51
November 2017	4.60	4.27
December 2017	5.28	4.99
January 2018	6.08	5.82
February 2018	6.66	6.49
March 2018	7.14	7.20
April 2018	0.58	0.51
May 2018	1.19	1.10
June 2018	1.81	1.65
July 2018	2.32	2.21



Year to date is currently running 0.10 days above the sickness absence target. HR are working with procurement to tender a new Occupational Health Service and Employee Assistance Programme. HR are also continuing to provide departments with targeted absence information to support managers in proactively managing their staffs absence.

SECTION 4 – Partnership Indicators

Health and Wellbeing Indicators

	Performance Measures	Rationale for inclusion	Latest Performance
1.	<p>Referral for treatment - % of patients referred from GP to hospital treatment within 18 weeks (monthly snapshot)</p> <p>https://southendccg.nhs.uk/news-events/governing-body-papers/july-2018/2324-item-16-performance-report-sccg-25th-july-2018/file</p>	<p>National standard, providing a measurement of key area of performance and a key area of public concern. Can be produced monthly and is easy to benchmark.</p>	<p style="text-align: center;">87.15% (April - 2018)</p> <p style="text-align: center;">Against national target of 92%</p>
2.	<p>Cancer treatment - % patients treated within 62 days of GP urgent suspected cancer referral (Southend University Hospital Foundation Trust)</p> <p>https://southendccg.nhs.uk/news-events/governing-body-papers/july-2018/2324-item-16-performance-report-sccg-25th-july-2018/file</p>	<p>National standard, providing a measurement of key area of performance and a key area of public concern. Can be produced monthly and is easy to benchmark.</p>	<p style="text-align: center;">62 Day Operational Standard 74.1% (May 2018)</p> <p style="text-align: center;">Against 85% target</p> <p>74.5 out of 100 patients were treated within 62 days.</p>
3.	<p>A&E - % of patients attending Southend University Hospital A&E, seen and discharged in under 4 hours (monthly snapshot)</p> <p>https://southendccg.nhs.uk/news-events/governing-body-papers/july-2018/2324-item-16-performance-report-sccg-25th-july-2018/file</p>	<p>National standard. Provides information relating to the effectiveness of the urgent care system. Can be produced monthly and is easy to benchmark.</p>	<p style="text-align: center;">95% (May 2018)</p> <p style="text-align: center;">Against national target of 95%</p>
4.	<p>Mental health - Improving Access to Psychological Therapy (IAPT) - % of people with common mental health problems accessing the service and entering treatment in the current year (monthly snapshot)</p> <p>https://southendccg.nhs.uk/news-events/governing-body-papers/july-2018/2325-item-16-appendix-1-integrated-performance-report-se-gb-july-2018/file</p>	<p>Provides an indicator for a priority area for councillors and one of the HWB Strategy ambitions. Can be produced monthly and is easily benchmarked.</p>	<p style="text-align: center;">1.50% (June 2018)</p> <p style="text-align: center;">Against target of 1.40%</p> <p>(A meeting to take place with CCGs and EPUT and on 28th August 2018 to discuss concerns of waiting times)</p>
5.	<p>Dementia - % of people diagnosed with dementia against the estimated prevalence. (66.7% national ambition).</p> <p>https://southendccg.nhs.uk/news-events/governing-body-papers/july-2018/2324-item-16-performance-report-sccg-25th-july-2018/file</p>	<p>Issue of increasing prevalence and concern among the public. Can be produced monthly and is easy to benchmark.</p>	<p>Southend achieved 75.3% in May 2018 against the 66.7% diagnosis ambition target.</p>

	sccg-25th-july-2018/file		
6.	<p>Primary Care – GP Patient Survey: - Overall experience of the GP surgery (very/fairly good; fairly/very poor; neither good nor poor)</p> <p>https://gp-patient.co.uk/Slidepacks2018</p>	Provides residents views on the quality of GP service in the borough. Survey is now produced annually.	<p>Overall experience of GP surgery – July 2018</p> <p>Very good – 41% Fairly good – 39% Neither good nor poor – 12% Fairly poor – 5% Very poor – 3%</p> <p>National Average of patients rating ‘Good’ is 84%</p>
7.	<p>End of life care - Preferred Place of Death (PPoD) – Percentage of patients referred to the Palliative Care Support Register (PCSE) who have expressed a preference for place of death and who achieve this preference. *</p>	<p>Nationally accepted as a key performance indicator for end of life care; integral to Ambitions for Palliative and End of Life Care: a national framework for local action 2015-2020.</p> <p>Can be produced monthly.</p>	<p>Southend: 82%</p> <p>The PPoD achievement for Southend in May 2018 is 50 out of 61.</p> <p>(no national target at present)</p>

*although patients make a preference for a place of death, often home, the reality of the last days/hours of life often prompts patients and/or relatives/carers to change their mind and seek what they consider to be a place of safety and support, which is invariably the acute trust. Patients are documented for PPoD as: Home; Hospital; Hospice; Care/Nursing Home; Community Hospital.

Local Economy Indicators

Performance Measures		Latest Performance Economic Scorecard Reported Quarterly										
1.	Average House Prices	<table border="1" style="margin: auto; border-collapse: collapse;"> <thead> <tr style="background-color: #d3d3d3;"> <th style="width: 30%;"></th> <th style="width: 35%; text-align: center;">May 2017</th> <th style="width: 35%; text-align: center;">May 2018</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;">Average Price</td> <td style="text-align: center;">£264,965.00</td> <td style="text-align: center;">£272,967.00</td> </tr> <tr> <td style="text-align: center;">% Change</td> <td style="text-align: center;">7.6% - (May 17-18)</td> <td style="text-align: center;">3.0% (May 18-19)</td> </tr> </tbody> </table>			May 2017	May 2018	Average Price	£264,965.00	£272,967.00	% Change	7.6% - (May 17-18)	3.0% (May 18-19)
	May 2017	May 2018										
Average Price	£264,965.00	£272,967.00										
% Change	7.6% - (May 17-18)	3.0% (May 18-19)										
2.	Planning Applications	<table border="1" style="margin: auto; border-collapse: collapse;"> <tbody> <tr> <td style="width: 60%; text-align: center;">June 2018</td> <td style="width: 40%; text-align: center;">214</td> </tr> <tr> <td style="text-align: center;">June 2017</td> <td style="text-align: center;">209</td> </tr> </tbody> </table>		June 2018	214	June 2017	209					
June 2018	214											
June 2017	209											
3.	Job Seekers Allowance Claimants	<table border="1" style="margin: auto; border-collapse: collapse;"> <thead> <tr style="background-color: #d3d3d3;"> <th style="width: 30%;"></th> <th style="width: 35%; text-align: center;">July 2017</th> <th style="width: 35%; text-align: center;">July 2018</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;">JSA Claimants (Number)</td> <td style="text-align: center;">2,325</td> <td style="text-align: center;">3,470</td> </tr> <tr> <td style="text-align: center;">JSA Claimants %</td> <td style="text-align: center;">2.1%</td> <td style="text-align: center;">3.1%</td> </tr> </tbody> </table> <p style="margin-top: 10px;">Source: Office of National Statistics & Southend-on-Sea Borough Council</p>			July 2017	July 2018	JSA Claimants (Number)	2,325	3,470	JSA Claimants %	2.1%	3.1%
	July 2017	July 2018										
JSA Claimants (Number)	2,325	3,470										
JSA Claimants %	2.1%	3.1%										

Community Safety Indicators

Short name	Month's value (June 2018)	Comment – explanation of current performance, actions to improve performance and anticipated future performance																																				
Score against 10 BCS crimes; Theft of Vehicle, theft from vehicle, vehicle interference, domestic burglary, theft of cycle, theft from person, criminal damage, common assault, wounding's, robbery. [Cumulative]	3043	<p>Reports of ASB in the Eastwood and Leigh areas were proactively discouraged. Coffee with a copper across the Borough continues. A dispersal order was issued in the Chalkwell area to address intelligence of increased young person's using the area following GCSE exams. Theatre group N-ACT invited to work with schools to promote awareness of gang and knife crime. The Council proposed to invest £250k to create a larger community safety team.</p> <p>June 2018 BCS Breakdown: Theft of a vehicle – 3%; Theft from a vehicle - 8% ; Vehicle interference – 1%; Burglary in a dwelling – 8%; Bicycle Theft – 4%; Theft from the person -2%; Criminal damage (exc 59) - 17%; HMIC Violence without injury – 40%; Wounding (Serious or Other) – 16%; Personal Robbery – 2%.</p>																																				
Performance Measures	Rationale for inclusion	Latest Performance Available																																				
10 BCS crimes	Provides a broad indication of the level of crime in the borough, is a familiar performance measure and is easy to benchmark.	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: center;">Individual Components of 10 BCS Comparator Crime</th> <th style="text-align: center;">BCS Crimes (June 2018)</th> <th style="text-align: center;">Essex Police Performance Summary Offences (Rolling 12 months to June 2018)</th> </tr> </thead> <tbody> <tr> <td>10 BCS Crimes - total</td> <td style="text-align: center;">1065</td> <td style="text-align: center;">*</td> </tr> <tr> <td>Theft of a vehicle</td> <td style="text-align: center;">39</td> <td style="text-align: center;">400</td> </tr> <tr> <td>Theft from Vehicle</td> <td style="text-align: center;">85</td> <td style="text-align: center;">757</td> </tr> <tr> <td>Vehicle Interference</td> <td style="text-align: center;">12</td> <td style="text-align: center;">181</td> </tr> <tr> <td>Burglary in a dwelling (Pre-April 17 definition)</td> <td style="text-align: center;">50</td> <td style="text-align: center;">661</td> </tr> <tr> <td>Bicycle theft</td> <td style="text-align: center;">54</td> <td style="text-align: center;">451</td> </tr> <tr> <td>Theft from the person</td> <td style="text-align: center;">20</td> <td style="text-align: center;">253</td> </tr> <tr> <td>Criminal Damage (exc 59)</td> <td style="text-align: center;">182</td> <td style="text-align: center;">1873</td> </tr> <tr> <td>HMIC Violence Without Injury</td> <td style="text-align: center;">427</td> <td style="text-align: center;">1805</td> </tr> <tr> <td>Wounding (Serious or Other)</td> <td style="text-align: center;">173</td> <td style="text-align: center;">*</td> </tr> <tr> <td>Robbery (Personal Property)</td> <td style="text-align: center;">23</td> <td style="text-align: center;">242</td> </tr> </tbody> </table> <p>*Not recorded.</p>	Individual Components of 10 BCS Comparator Crime	BCS Crimes (June 2018)	Essex Police Performance Summary Offences (Rolling 12 months to June 2018)	10 BCS Crimes - total	1065	*	Theft of a vehicle	39	400	Theft from Vehicle	85	757	Vehicle Interference	12	181	Burglary in a dwelling (Pre-April 17 definition)	50	661	Bicycle theft	54	451	Theft from the person	20	253	Criminal Damage (exc 59)	182	1873	HMIC Violence Without Injury	427	1805	Wounding (Serious or Other)	173	*	Robbery (Personal Property)	23	242
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		**Solved rates show the ratio between the number of police-recorded crimes where the offender has received a formal sanction (includes; charges, cautions, penalty notices and cannabis warnings), and the total number of crimes recorded in the time period covered. (Solved rates do not include restorative justice or a community resolution.			
Potential Performance Measures		Rationale for inclusion	Latest Performance		
			Rolling 12 months to June 2018		Rolling 12 month Increase/ Decrease %
2	Total number of crimes +/- incidents	Provides a broad indication of the level of crime in the borough, covering all crimes	Total number of Incidents	Total number of Crimes	Crimes – ↑TBC
			4311 (June 18)	TBC (June 18)	Incidents - ↑1.34%
3	Anti-social Behaviour reported	A key concern of members and public that is not reflected in the 10 BCS crimes performance measure.	6789		↓3.4%
4	Number of arrests (cumulative)	Provides key performance information relating to Police activity to tackle crime. However, the measure may be misleading as the number of arrests has been declining as a result of greater use of alternatives to formal charges (penalty notices, community resolution, cautions etc..) – a trend which is likely to continue.	340		↑2.1%
5	‘Positive disposals’ (outcomes of crimes ‘cleared up’ other than a formal conviction –..)	Recognises the full range of possible outcomes taken following arrest, such as community resolution, cautions etc...	TBC		TBC
6	Number of domestic abuse incidents	High profile area of work and a demand pressure on resources.	2224		↓40.67%
7	Number of incidents of missing people reported	High profile area of work and a demand pressure on resources.	86		↓3.37%



Revenue Budget Monitoring 2018/19

Period 4

as at 31st July 2018

Portfolio Summary

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1. Commentary

This report outlines the budget monitoring position for the General Fund and Housing Revenue Account for 2018/19, based on the views of the Directors and their Management Teams, in light of expenditure and income to 31st July 2018.

The starting point for the budget monitoring is the original budget as agreed by Council in February 2018.

2. Overall Budget Performance

As at the end of July, the forecast outturn is suggesting a net portfolio overspend of £2,028,000 (1.5% of net portfolio expenditure). The cause of the overspend lies entirely within Service Areas, with the most significant budget issues being within Children's Services and Traffic and Highways. In line with previous custom and practice, it is assumed that the residual overspend of £1,834,000 will be drawn down from earmarked reserves rather than impacting on the General Reserve as that would reduce General Reserves below the optimal level set by the Council's Section 151 Officer in his adequacy of balances statement to the Council in setting the 2018/2019 budget.

Portfolio	Latest Budget 2018/19 £000	Projected Outturn 2018/19 £000	July Forecast Variance £000	June Forecast Variance £000	Trend
Leader	11,110	11,086	(24)	(24)	↔
Growth	3,314	3,253	(61)	(18)	↓
Adult and Housing	41,484	41,554	70	70	↔
Children and Learning	36,615	37,240	625	625	↔
Healthy Communities and Wellbeing	13,679	13,945	266	250	↑
Infrastructure	14,095	15,749	1,654	1,585	↑
Public Protection	13,782	13,280	(502)	(890)	↑
Total Portfolio	134,079	136,107	2,028	1,598	↑
Non-Service Areas	(17,841)	(18,035)	(194)	(145)	↓
Earmarked Reserves	6,798	4,964	(1,834)	(1,453)	↓
Net Expenditure / (Income)	123,036	123,036	0	0	↔

Where Service Areas are forecasting an overspend by the end of the year, the relevant Director has been advised that appropriate action plans must be in place to address any projected overspend position so that a balanced budget for the Council is produced by the year end.

3. Non Service Variances - £194,000 forecast underspend

Financing Costs

The (£194k) favourable variance is due to additional property fund units which were purchased after the budget was set.

4. Appropriations to / from Earmarked Reserves

Net appropriations to Earmarked Reserves totalling £5,436,000 were agreed by Council when setting the 2018/19 budget in February 2018. The current outturn position allows for further in-year net appropriations to reserves totalling £1,362,000. Total net appropriations to reserves for 2018/19 are therefore forecast to be £6,798,000.

The net change of £1,362,000 comprises the following planned appropriations:-

To Reserves

- £2,547,000 to the Capital Reserve due to programme re-profiling

From Reserves

- (£1,095,000) from the Children’s Social Care Reserve
- (£68,000) from the Business Transformation Reserve as agreed by CMT
- (£22,000) from the Troubled Families Reserve

Unless further management action and savings are identified, there will also be the need for an appropriation from the Business Transformation Reserve of £1,834,000 to rebalance the budget.

5. Revenue Contributions to Capital Outlay (RCCO)

The original budget for 2018/19 included planned revenue contributions for capital investments, via the use of Earmarked Reserves, of £5,058,000. Due to slippage from 2018/19 into 2019/20 agreed at Cabinet in June 2018, this budget has now decreased to £2,583,000. The Capital Reserve will fund £2,129,000 of this, £238,000 is funded from the Agresso Reserve and the remaining £216,000 is funded from the People Workforce Strategy Team and energy savings generated from energy efficiency projects.

6. Performance against Budget savings targets for 2018/19

As part of setting the Council budget for 2018/19, a schedule of Departmental and Corporate savings was approved totalling £7.594 million. These are required to achieve a balanced budget.

A monthly exercise is in place to monitor the progress of the delivery of these savings. A breakdown, by RAG status, of the Departmental Savings is shown below:

	a	b	c	b+c	d	e	a-(b+c+e)
	Target Saving £000	Green £000	Amber £000	Expected Delivery of Savings £000	Red - Estimated not Deliverable £000	Saving mitigated in year £000	Residual Under / (Over) Delivery £000
Leader	80	0	0	0	80	80	0
Growth	509	509	0	509	0	0	0
Adults and Housing	2,325	550	1,775	2,325	0	0	0
Children and Learning	840	99	741	840	0	0	0
Healthy Communities and Wellbeing	504	355	149	504	0	0	0
Infrastructure	1,006	206	464	670	336	0	336
Public Protection	30	12	0	12	18	0	18
	5,294	1,731	3,129	4,860	434	80	354
Non-Portfolio	2,300	2,300	0	2,300	0	0	0
	7,594	4,031	3,129	7,160	434	80	354

The current forecast is showing a shortfall of £354,000 against the required savings total of £7.594 million. Directors have been advised of the need to continue to seek mitigations where planned

savings cannot be achieved so that a balanced budget for the Council can be achieved by financial year-end.

7. Overall Budget Performance – Housing Revenue Account (HRA)

The HRA budget was approved by Council in February 2018 and anticipated an operating surplus of £4,547,000.

The closing HRA balance as at March 2018 was £3,502,000.

The latest forecast as at July 2018 indicates that the HRA will have an income surplus of £360,000 in 2018/19. This is because early predictions are showing higher rental income than budgeted for. The estimate assumes a 4% void allowance across all properties and the actual up to the end of July has been less.

8. Budget Virements

In line with the approved financial procedure rules all virements over £50,000 between portfolio services or between pay and non-pay budgets are to be approved by Cabinet. Below is a table showing the virements which fall within these parameters:-

	DR	CR
	£000	£000
Virements over £50,000 in reported period	7,624	(7,624)
Virements over £50,000 previously reported	2,006	(2,006)
Virements approved under delegated authority	27	(27)
Total Virements	9,657	(9,657)

The virements for Cabinet approval this period are:

	£000
Re-allocation of Ofsted Funding	300
Re-allocation of the Waste Management Reserve in line with MTFS assumption	320
Allocation of iBCF funding	2,139
Allocation of iBCF funding	3,350
Refinancing of HRA capital programme	1,515
Total	7,624

General Fund

Portfolio Summary

Portfolio	Original Budget			Virement £'000	Latest Budget			Expected Outturn £'000	Forecast Variance £'000	Movement from Period 3
	Gross Expend £'000	Gross Income £'000	Net £'000		Gross Expend £'000	Gross Income £'000	Net £'000			
Leader	13,384	(2,448)	10,936	174	13,489	(2,379)	11,110	11,086	(24)	↔
Growth	8,880	(5,799)	3,081	233	8,805	(5,491)	3,314	3,253	(61)	↓
Adult and Housing	69,994	(27,117)	42,877	(1,393)	68,887	(27,403)	41,484	41,554	70	↔
Children and Learning	108,037	(74,481)	33,556	3,059	111,097	(74,482)	36,615	37,240	625	↔
Healthy Communities and Wellbeing	119,551	(105,915)	13,636	43	119,594	(105,915)	13,679	13,945	266	↑
Infrastructure	28,408	(14,235)	14,173	(78)	28,330	(14,235)	14,095	15,749	1,654	↑
Public Protection	17,515	(3,733)	13,782	0	17,515	(3,733)	13,782	13,280	(502)	↑
Portfolio Net Expenditure	365,769	(233,728)	132,041	2,038	367,717	(233,638)	134,079	136,107	2,028	↑
Reversal of Depreciation	(39,074)	10,793	(28,281)	0	(39,074)	10,793	(28,281)	(28,281)	0	↔
Levies	638	0	638	0	638	0	638	638	0	↔
Financing Costs	8,542	0	8,542	(308)	8,234	0	8,234	8,040	(194)	↓
Contingency	5,716	0	5,716	(617)	5,099	0	5,099	5,099	0	↔
Pensions Upfront Funding	(3,734)	0	(3,734)	0	(3,734)	0	(3,734)	(3,734)	0	↔
Non Portfolio Net Expenditure	(27,912)	10,793	(17,119)	(925)	(28,837)	10,793	(18,044)	(18,238)	(194)	↓
Net Operating Expenditure	337,857	(222,935)	114,922	1,113	338,880	(222,845)	116,035	117,869	1,834	↑
General grants	0	(2,380)	(2,380)	0	0	(2,380)	(2,380)	(2,380)	0	↔
Revenue Contribution to Capital	5,058	0	5,058	(2,475)	2,583	0	2,583	2,583	0	↔
Contribution to / (from) Earmarked Reserves	5,436	0	5,436	1,362	6,798	0	6,798	4,964	(1,834)	↓
Contribution to / (from) General Reserves	0	0	0	0	0	0	0	0	0	↔
Net Expenditure / (Income)	348,351	(225,315)	123,036	0	348,261	(225,225)	123,036	123,036	0	↔

Use of General Reserves	
Balance as at 1 April 2018	11,000
(Use) / contribution to in Year	0
Balance as at 31 March 2018	11,000

11,000	11,000	0	↔
0	0	0	
11,000	11,000	0	↔

Leader Portfolio

Leader : Cllr John Lamb

Service Department	Original Budget			Virement £'000	Latest Budget			Expected Outturn £'000	Forecast Variance £'000	Movement from Period 3
	Gross Expend £'000	Gross Income £'000	Net £'000		Gross Expend £'000	Gross Income £'000	Net £'000			
Corporate Planning and Policy										
a. Corporate and Non-Distributable Costs	1,919	(184)	1,735	73	1,992	(184)	1,808	1,808	0	↔
Corporate Services										
b. Department of the Chief Executive	634	0	634	0	634	0	634	610	(24)	↔
Financial Services										
c. Accountancy	2,131	(295)	1,836	0	2,131	(295)	1,836	1,836	0	↔
d. Accounts Payable	119	(4)	115	0	119	(4)	115	115	0	↔
e. Accounts Receivable	190	(77)	113	0	190	(77)	113	113	0	↔
f. Insurance	162	(247)	(85)	0	162	(247)	(85)	(85)	0	↔
g. Internal Audit	774	(271)	503	0	705	(202)	503	503	0	↔
h. Corporate Fraud	225	(52)	173	0	225	(52)	173	173	0	↔
i. Corporate Procurement	621	0	621	60	681	0	681	681	0	↔
Human Resources & Organisational Development										
j. Human Resources	1,815	(505)	1,310	29	1,844	(505)	1,339	1,339	0	↔
k. People and Organisational Development	414	(115)	299	0	414	(115)	299	299	0	↔
l. Tickfield Training Centre	370	(156)	214	0	370	(156)	214	214	0	↔
Legal and Democratic Services										
m. Democratic Services Support	371	0	371	0	371	0	371	371	0	↔
n. Mayoralty	191	0	191	0	191	0	191	191	0	↔
o. Member Support	730	0	730	0	730	0	730	730	0	↔
p. Elections and Electoral Registration	354	0	354	0	354	0	354	354	0	↔
q. Local Land Charges	197	(297)	(100)	0	197	(297)	(100)	(100)	0	↔
r. Legal Services	1,308	(245)	1,063	0	1,308	(245)	1,063	1,063	0	↔
Other Services										
s. Emergency Planning	82	0	82	0	82	0	82	82	0	↔
t. Corporate Subscriptions	85	0	85	0	85	0	85	85	0	↔
u. Strategy and Performance	692	0	692	12	704	0	704	704	0	↔
Total Net Budget for Department	13,384	(2,448)	10,936	174	13,489	(2,379)	11,110	11,086	(24)	↔

Forecast Outturn Variance	
a.	
b.	Full staffing budget will not be required
c.	
d.	
e.	
f.	
g.	
h.	
i.	
j.	
k.	
l.	
m.	
n.	
o.	
p.	
q.	
r.	
s.	
t.	
u.	

Growth Portfolio

Growth : Cllr James Courtenay

Service Department	Original Budget			Virement £'000	Latest Budget			Expected Outturn £'000	Forecast Variance £'000	Movement from Period 3
	Gross Expend £'000	Gross Income £'000	Net £'000		Gross Expend £'000	Gross Income £'000	Net £'000			
Asset and Facilities Management										
a. Asset Management	416	(16)	400	0	416	(16)	400	400	0	↔
b. Corporate and Industrial Estates	177	(3,319)	(3,142)	308	177	(3,011)	(2,834)	(2,834)	0	↔
c. Property Management and Maintenance	469	(111)	358	0	469	(111)	358	378	20	↔
d. Buildings Management	2,543	(110)	2,433	0	2,543	(110)	2,433	2,433	0	↔
Economic Development and Regeneration										
e. Economic Development	1,004	(578)	426	(75)	929	(578)	351	351	0	↔
f. Town Centre	206	(59)	147	0	206	(59)	147	133	(14)	↓
g. Better Queensway	0	0	0	0	0	0	0	0	0	↔
Planning										
h. Development Control	895	(631)	264	0	895	(631)	264	197	(67)	↓
i. Regional and Local Town Plan	284	0	284	0	284	0	284	284	0	↔
Tourism										
j. Resorts Services Pier and Foreshore	2,828	(957)	1,871	0	2,828	(957)	1,871	1,871	0	↔
k. Tourism	58	(18)	40	0	58	(18)	40	40	0	↔
Total Net Budget for Department	8,880	(5,799)	3,081	233	8,805	(5,491)	3,314	3,253	(61)	↓

Forecast	Outturn	Variance
a.		
b.		
c.	Lower capitalisation of salaries than anticipated.	
d.		
e.		
f.	Income generated from Town Centre charges for promotions and events.	
g.		
h.	Higher income within the Development Control team is being partially offset by the costs of Agency Staff in the Borough Wide team.	
i.		
j.		
k.		

Adults and Housing Portfolio

Adults and Housing : Cllr Tony Cox

Service Department	Original Budget			Virement £'000	Latest Budget			Expected Outturn £'000	Forecast Variance £'000	Movement from Period 3
	Gross Expend £'000	Gross Income £'000	Net £'000		Gross Expend £'000	Gross Income £'000	Net £'000			
Adult Social Care										
a. Adult Support Services and Management	298	0	298	213	511	0	511	511	0	↔
b. Business Support Team	1,776	(184)	1,592	0	1,776	(184)	1,592	1,592	0	↔
c. Strategy, Development and Commissioning	2,228	(590)	1,638	30	2,258	(590)	1,668	1,668	0	↔
d. People with a Learning Disability	14,427	(1,922)	12,505	0	14,427	(1,922)	12,505	12,505	0	↔
e. People with Mental Health Needs	3,653	(198)	3,455	(25)	3,628	(198)	3,430	3,430	0	↔
f. Older People	29,566	(16,464)	13,102	(1,923)	29,792	(18,613)	11,179	11,179	0	↔
g. Other Community Services	5,877	(4,574)	1,303	500	4,193	(2,390)	1,803	1,873	70	↔
h. People with a Physical or Sensory Impairment	4,614	(1,222)	3,392	0	4,649	(1,257)	3,392	3,392	0	↔
i. Service Strategy and Regulation	124	(69)	55	0	124	(69)	55	55	0	↔
Council and Private Sector Housing Investment										
j. Private Sector Housing	3,780	(1,119)	2,661	0	3,780	(1,119)	2,661	2,661	0	↔
k. Supporting People	2,433	0	2,433	(188)	2,245	0	2,245	2,245	0	↔
Homelessness										
l. Housing Needs and Homelessness	994	(658)	336	0	1,280	(944)	336	336	0	↔
Strategy and Advice										
m. Strategy and Planning for Housing	224	(117)	107	0	224	(117)	107	107	0	↔
Total Net Budget for Department	69,994	(27,117)	42,877	(1,393)	68,887	(27,403)	41,484	41,554	70	↔

Forecast Outturn Variance	
a.	
b.	
c.	
d.	
e.	
f.	
g.	Forecast overspend on Social Work teams because the teams are currently not meeting the budgeted vacancy factor which assume as certain level of staffing turnover.
h.	
i.	
j.	
k.	
l.	
m.	

Children and Learning Portfolio

Children and Learning : Cllr Helen Boyd

Service Department	Original Budget			Virement £'000	Latest Budget			Expected Outturn £'000	Forecast Variance £'000	Movement from Period 3
	Gross Expend £'000	Gross Income £'000	Net £'000		Gross Expend £'000	Gross Income £'000	Net £'000			
Childrens Social Care										
a. Children Fieldwork Services	4,379	(5)	4,374	933	5,312	(5)	5,307	5,442	135	↓
b. Children with Disabilities	1,175	(183)	992	0	1,175	(183)	992	992	0	↔
c. Childrens Specialist Support and Commissioning	2,624	(164)	2,460	110	2,734	(164)	2,570	2,580	10	↑
d. Inhouse Fostering and Adoption	4,911	(236)	4,675	65	4,976	(236)	4,740	4,740	0	↔
e. Leaving Care Placements and Resources	1,104	(232)	872	500	1,604	(232)	1,372	1,562	190	↔
f. Private Voluntary Independent Provider Placements	3,825	(120)	3,705	1,190	5,015	(120)	4,895	5,185	290	↔
Youth and Family Support										
g. Early Help and Family Support	1,723	(1,201)	522	258	1,981	(1,201)	780	780	0	↔
h. Youth Offending Service	1,894	(632)	1,262	3	1,897	(632)	1,265	1,265	0	↔
i. Youth Service	1,067	(437)	630	0	1,067	(437)	630	630	0	↔
Educational and Schools										
j. School Support and Education Transport	22,646	(10,872)	11,774	0	22,646	(10,872)	11,774	11,774	0	↔
k. Early Years Development and Child Care Partnership	12,023	(10,825)	1,198	0	12,023	(10,825)	1,198	1,198	0	↔
l. High Needs Educational Funding	11,906	(11,028)	878	0	11,907	(11,029)	878	878	0	↔
m. Southend Adult Community College	3,400	(3,186)	214	0	3,400	(3,186)	214	214	0	↔
Maintained Schools Delegated										
n. Maintained Schools Delegated Budgets	32,454	(32,454)	0	0	32,454	(32,454)	0	0	0	↔
o. Pupil Premium	2,906	(2,906)	0	0	2,906	(2,906)	0	0	0	↔
Total Net Budget for Department	108,037	(74,481)	33,556	3,059	111,097	(74,482)	36,615	37,240	625	↔

Forecast Outturn Variance

- a. Staffing pressures because of the required use of agency staff to support children social worker caseloads.

- b.

- c.

- d.

- e. Cost pressures on children who are leaving care and their associated support costs.

- f. The forecast variance pressure relates to the cost of provision for external care provided to looked after children. As previously reported, the pressures are both a local and national issue, and since the middle of 2016/17 Southend has experienced an increase in the number of local authority looked after children.

- g.

- h.

- i.

- j.

- k.

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- m.

Healthy Communities and Wellbeing Portfolio

Healthy Communities and Wellbeing : Cllr Lesley Salter

Service Department	Original Budget			Virement £'000	Latest Budget			Expected Outturn £'000	Forecast Variance £'000	Movement from Period 3
	Gross Expend £'000	Gross Income £'000	Net £'000		Gross Expend £'000	Gross Income £'000	Net £'000			
Community Resilience and Cohesion										
a. Partnership Team	231	0	231	0	231	0	231	231	0	↔
b. Community Centres and Club 60	93	(1)	92	0	93	(1)	92	92	0	↔
Culture										
c. Arts Development	499	(233)	266	0	499	(233)	266	322	56	↑
d. Amenity Services Organisation	3,673	(683)	2,990	0	3,673	(683)	2,990	2,990	0	↔
e. Culture Management	146	(6)	140	0	146	(6)	140	140	0	↔
f. Library Service	3,378	(397)	2,981	0	3,378	(397)	2,981	2,981	0	↔
g. Museums and Art Gallery	1,995	(80)	1,915	0	1,995	(80)	1,915	1,915	0	↔
h. Parks and Amenities Management	1,812	(786)	1,026	0	1,812	(786)	1,026	1,236	210	↔
i. Sports Development	54	0	54	0	54	0	54	54	0	↔
j. Sport and Leisure Facilities	589	(304)	285	0	589	(304)	285	285	0	↔
k. Southend Theatres	647	(27)	620	0	647	(27)	620	620	0	↔
Customer Services										
l. Registration of Births Deaths and Marriages	330	(378)	(48)	0	330	(378)	(48)	(48)	0	↔
m. Customer Services Centre	1,976	(295)	1,681	35	2,011	(295)	1,716	1,716	0	↔
Revenues and Benefits										
n. Council Tax Collection	869	(607)	262	0	869	(607)	262	262	0	↔
o. Non Domestic Rates Collection	199	(306)	(107)	0	199	(306)	(107)	(107)	0	↔
p. Housing Benefit Administration	1,801	(1,195)	606	8	1,809	(1,195)	614	614	0	↔
q. Rent Benefit Payments	91,582	(91,685)	(103)	0	91,582	(91,685)	(103)	(103)	0	↔
Health										
r. Public Health	6,323	(6,480)	(157)	0	6,323	(6,480)	(157)	(157)	0	↔
s. Drug and Alcohol Action Team	2,270	(2,187)	83	0	2,270	(2,187)	83	83	0	↔
t. Young Persons Drug and Alcohol Team	273	(265)	8	0	273	(265)	8	8	0	↔
Voluntary and Community Services										
u. Support to Voluntary Sector	811	0	811	0	811	0	811	811	0	↔
Total Net Budget for Department	119,551	(105,915)	13,636	43	119,594	(105,915)	13,679	13,945	266	↑

Forecast Outturn Variance

- a.
 - b.
 - c. The delivery partner of Twenty One have terminated their agreement with us and as a result, the venue is now only open for any events which were arranged prior to its closure. These events continue sporadically up until the end of August and many of them do not pay a hire charge for the venue. At this moment there is no agreed course of action for the future of the venue and therefore we remain liable for the Business Rates and running costs of the site.
 - d.
 - e.
 - f.
 - g.
 - h. The income received from outdoor sports teams has been reducing over the last 5 years. There is currently a review underway to understand in which locations this has taken place and the sports mostly affected by this. It is believed that the increase in budget gyms and the uptake of cycling has had an impact on organised team sports nationally which subsequently has reduced the income this generates within our parks.
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Infrastructure Portfolio

Infrastructure : Cllr Andrew Moring

Service Department	Original Budget			Virement £'000	Latest Budget			Expected Outturn £'000	Forecast Variance £'000	Movement from Period 3
	Gross Expend £'000	Gross Income £'000	Net £'000		Gross Expend £'000	Gross Income £'000	Net £'000			
Transport										
a. Highways Maintenance	10,956	(1,708)	9,248	0	10,956	(1,708)	9,248	9,641	393	↑
b. Bridges and Structural Engineering	414	0	414	0	414	0	414	414	0	↔
c. Decriminalised Parking	1,171	(1,699)	(528)	0	1,171	(1,699)	(528)	(93)	435	↑
d. Car Parking Management	1,170	(7,222)	(6,052)	0	1,170	(7,222)	(6,052)	(5,441)	611	↓
e. Concessionary Fares	3,307	0	3,307	0	3,307	0	3,307	3,307	0	↔
f. Passenger Transport	417	(65)	352	0	417	(65)	352	423	71	↔
g. Road Safety and School Crossing	229	0	229	0	229	0	229	229	0	↔
h. Transport Planning	1,672	(1,990)	(318)	0	1,672	(1,990)	(318)	(318)	0	↔
i. Traffic and Parking Management	600	(5)	595	0	600	(5)	595	709	114	↑
j. Dial A Ride Service	105	(19)	86	0	105	(19)	86	86	0	↔
k. Transport Management	173	0	173	0	173	0	173	173	0	↔
l. Vehicle Fleet	550	(344)	206	0	550	(344)	206	206	0	↔
m. Digital Futures	6,193	(1,183)	5,010	(78)	6,115	(1,183)	4,932	4,932	0	↓
Other Services										
n. Enterprise Tourism and Environment Central Pool	1,451	0	1,451	0	1,451	0	1,451	1,481	30	↑
Total Net Budget for Department	28,408	(14,235)	14,173	(78)	28,330	(14,235)	14,095	15,749	1,654	↑

Forecast Outturn Variance

- a. As a result of the poor weather conditions in late February / early March labelled as the “Beast from the East”, the condition of the road network deteriorated and as a result there was a large increase in the number of defects on the highways and footways. The launch of MySouthend is giving residents the opportunity to report defects and these are focussing the Inspectors on verifying MySouthend calls which will ultimately result in more works to the Highway. All of these factors are resulting in a pressure of approximately £400k although over a period of time we will be able to understand better if this is a current spike in identification of defects, or the new norm under an enhanced inspection regime.
-
- b.
-
- c. There has been a 33% increase in the amount of PCN income received to the end of July 2018 in comparison to the same time period for 2017/18, however a shortfall in income at the end of the year is still forecast. Although the value of old debt is reducing year on year, the anticipated bad debt provision is still £100k more than the budget provision. There has also been an increase in the number of PCN’s registered with the Traffic Enforcement Centre which allows further opportunities for outstanding debts to be collected.
-
- d. As at the end of July, car parking income has increased significant, especially in June and July when we enjoyed a very dry spell and a heatwave. Within that, there has been an 11% shift in usage from on street car parks to off street surface car parks. From an analysis of 7 town centre car parks which have retained the same machines over this period, projections suggest that the off street car parks will perform even better than independent advice had suggested. However, due to the shift from on street to off street (where VAT is payable) the additional income from the removal of 1, 3 and 5 hour parking charges is currently being negated by the loss in on street parking income (where no VAT is payable).
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- e.
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- f. Unfortunately the Travel Centre has been vandalised on a number of occasions and incidents of anti-social behaviour have resulted in the necessity to provide regular security patrols at the site in order to provide a safe environment for bus users.
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- g.
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- h.
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- i. A number of staff who are budgeted on the basis of delivering the capital programme have not charged as much time to capital as anticipated due to the type of projects in the capital programme this year.
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- j.
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- k.
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- l.
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- m.
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- n. There have been delays in the implementation of a staffing restructure within the team after the feedback received from the necessary consultation.
-

Public Protection Portfolio

Public Protection : Cllr Mark Flewitt

Service Department	Original Budget			Virement £'000	Latest Budget			Expected Outturn £'000	Forecast Variance £'000	Movement from Period 3
	Gross Expend £'000	Gross Income £'000	Net £'000		Gross Expend £'000	Gross Income £'000	Net £'000			
Community Safety										
a. Closed Circuit Television	549	(33)	516	0	549	(33)	516	451	(65)	↔
b. Community Safety	216	(32)	184	0	216	(32)	184	184	0	↔
Energy										
c. Climate Change	111	(144)	(33)	0	111	(144)	(33)	(33)	0	↔
Cemeteries and Crematorium										
d. Cemeteries and Crematorium	1,161	(2,566)	(1,405)	0	1,161	(2,566)	(1,405)	(1,405)	0	↔
Flooding										
e. Flood and Sea Defences	811	(11)	800	0	811	(11)	800	800	0	↔
Regulatory Services										
f. Regulatory Business	35	(14)	21	0	35	(14)	21	21	0	↔
g. Regulatory Licensing	100	(469)	(369)	0	100	(469)	(369)	(369)	0	↔
h. Regulatory Management	1,134	0	1,134	0	1,134	0	1,134	1,134	0	↔
i. Regulatory Protection	71	(13)	58	0	71	(13)	58	58	0	↔
j. Building Control	443	(440)	3	0	443	(440)	3	124	121	↑
Waste and Street Scene										
k. Public Conveniences	550	0	550	0	550	0	550	550	0	↔
l. Waste Collection	4,695	0	4,695	220	4,915	0	4,915	4,915	0	↔
m. Waste Disposal	5,264	0	5,264	(220)	5,044	0	5,044	4,621	(423)	↑
n. Street Cleansing	1,360	0	1,360	0	1,360	0	1,360	1,360	0	↔
o. Household Recycling	477	(7)	470	0	477	(7)	470	470	0	↔
p. Environmental Care	242	(4)	238	0	242	(4)	238	238	0	↔
q. Waste Management	296	0	296	0	296	0	296	161	(135)	↔
Total Net Budget for Department	17,515	(3,733)	13,782	0	17,515	(3,733)	13,782	13,280	(502)	↑

Forecast Outturn Variance

- a. Additional maintenance costs for digitisation will not be incurred as the cameras have not yet been procured

- b.

- c.

- d.

- e.

- f.

- g.

- h.

- i.

- j. Income has reduced this year for services which are also provided by the private sector. There is also an unfunded apprentice post and a pressure due to annual market supplements to retain staff.

- k.

- l.

- m. Due to the Mechanical Biological Treatment plant (MBT) in Basildon continuing to fail to meet the performance requirements of the original specification, the reduced gate fee during the commissioning phase is still in place. This is allowing SBC to dispose of residual waste at a much lower rate than the original business case. This, along with a change in the disposal of food waste which now provides us with an income, is resulting in a forecast underspend.

- n.

- o.

- p.

- q. As part of the revised agreement with Essex County Council relating to the Joint Working Agreement, SBC will still receive our share of the Waste Infrastructure Grant up until December 2019 which wasn't included in the original budget.

Housing Revenue Account

	Original Budget			Virement £'000	Latest Budget			Expected Outturn £'000	Forecast Variance £'000	Movement from Period 3
	Gross Expend £'000	Gross Income £'000	Net £'000		Gross Expend £'000	Gross Income £'000	Net £'000			
Employees	210	0	210	0	210	0	210	210	0	↔
Premises (excluding repairs)	790	0	790	0	790	0	790	790	0	↔
Repairs	4,930	0	4,930	0	4,930	0	4,930	4,930	0	↔
Supplies and Services	69	0	69	0	69	0	69	69	0	↔
Management Fee	5,579	0	5,579	0	5,579	0	5,579	5,579	0	↔
MATS	1,146	0	1,146	0	1,146	0	1,146	1,146	0	↔
Provision for Bad Debts	394	0	394	0	394	0	394	394	0	↔
Depreciation	6,284	0	6,284	0	6,284	0	6,284	6,284	0	↔
Capital Financing Charges	3,515	0	3,515	0	3,515	0	3,515	3,515	0	↔
Gross Expenditure	22,917	0	22,917	0	22,917	0	22,917	22,917	0	↔
Fees and Charges	0	(349)	(349)	0	0	(349)	(349)	(349)	0	↔
Dwelling Rents	0	(24,900)	(24,900)	0	0	(24,900)	(24,900)	(25,260)	(360)	↔
Other Rents	0	(1,372)	(1,372)	0	0	(1,372)	(1,372)	(1,372)	0	↔
Other Income	0	(27)	(27)	0	0	(27)	(27)	(27)	0	↔
Interest	0	(250)	(250)	0	0	(250)	(250)	(250)	0	↔
Recharges	0	(566)	(566)	0	0	(566)	(566)	(566)	0	↔
Non Department Net Expenditure	0	(27,464)	(27,464)	0	0	(27,464)	(27,464)	(27,824)	(360)	↔
Net Operating Expenditure	22,917	(27,464)	(4,547)	0	22,917	(27,464)	(4,547)	(4,907)	(360)	↔
Revenue Contribution to Capital	1,925	0	1,925	(1,515)	410	0	410	410	0	↓
Contribution to/ (from) Earmarked Reserves	2,622	0	2,622	1,515	4,137	0	4,137	4,497	360	↑
Contribution to/ (from) General Reserves	0	0	0	0	0	0	0	0	0	↔
Net Expenditure/ (Income)	27,464	(27,464)	0	0	27,464	(27,464)	0	0	0	↔

Use of General Reserves	
Balances as at 1 April 2018	3,502
(Use)/ contribution to in Year	0
Balance as at 31 March 2019	3,502

3,502	3,502	0	↔
0	0	0	↔
3,502	3,502	0	↔



**Capital Programme Budget
Monitoring 2018/19**

Period 4

**as at 31st July 2018
Departmental Summary**

Capital Programme Monitoring Report – July 2018

1. Overall Budget Performance by Investment Area

The revised Capital budget for the 2018/19 financial year is £77.689million which includes all changes agreed at June Cabinet. Actual capital spend at 31st July is £14.197million representing approximately 18% of the revised budget. This is shown in Appendix 1.

(Outstanding creditors totalling £0.549million have been removed from this figure).

The expenditure to date has been projected to year end and the outturn position is forecast to reflect the Project Manager's realistic expectation. This is broken down by type of investment area as follows:

Service Area	Revised Budget 2018/19 £'000	Outturn to 31 st July 2018/19 £'000	Expected outturn 2018/19 £'000	Latest Expected Variance to Revised Budget 2018/19 £'000	Previous Expected Variance to Revised Budget 2018/19 £'000
Works to Property	1,646	88	1,646	-	-
Adult Social Care	3,347	185	3,347	-	-
General Fund Housing	2,842	279	2,842	-	-
Schools	13,737	5,220	13,735	(2)	-
Culture & Tourism	8,405	1,667	7,738	(667)	-
Enterprise & Regeneration	12,521	1,216	12,521	-	-
ICT	3,910	1,126	3,910	-	-
Southend Pier	3,158	256	3,158	-	-
Highways & Infrastructure	13,608	2,299	13,608	-	-
S106/S38/CIL	1,322	17	1,322	-	-
Energy Saving	1,068	64	1,068	-	-
Community Safety	900	-	900	-	-
Council Housing & New Build Programme	11,225	1,780	11,225	-	-
Total	77,689	14,197	77,020	(669)	-

The above investment is proposed to be funded as follows:

Department	Council Budget £'000	Grant Budget £'000	Developer & Other Contributions £'000	Total Budget £'000
Total Budget	38,632	37,182	1,875	77,689
As a percentage of total budget	49.7%	47.9%	2.4%	
External Funding Received to date		9,049	1,714	10,763
External Funding Outstanding		28,133	161	28,294

Progress of Schemes for 2018/19

Works to Property

The demolition of 62 Avenue Road is currently awaiting the heritage experts report to inform a way forward for this scheme.

A new planning application is pending on the East Beach Café scheme and is to be submitted imminently. Contractual completion will follow and will be paid at that point.

One block has been demolished as part of the Darlows Green former WCs demolition scheme. The second block is on hold due to nesting pigeons but is expected to be completed during September.

New media equipment for the crematorium chapel was installed and completed at the end of June. Quotes for further equipment including new online booking system software and media compatibility software are currently being obtained.

Research for suitable options for dedicated floral display stands for the Pergola Walk Memorial scheme is currently underway to enhance the area further.

The Priority works provision budget currently has £416k remaining unallocated.

Adult Social Care

The Community Capacity grant is used to enable vulnerable individuals to remain in their own homes and to assist in avoiding delayed discharges from hospital. Plans for 2018/19 include the enhancement of an independent living centre and innovation site to demonstrate technological and robotic opportunities.

Funding from the Dementia Friendly scheme will contribute towards the Dementia Peer Network Development project. This will include set up costs to work across Southend and build on the current programme of asset based community development. This will help to promote people's health, happiness and wellbeing through assessing, identifying and utilising skills and resources within the community.

General Fund Housing

The Private Sector Renewal scheme is in place to ensure that the private sector stock is kept in a good condition to enable the authority to assist its most vulnerable residents. A full service review is currently taking place exploring team objectives and options for delivering against these.

The adaptations framework for the Disabled Facilities scheme is currently on target to instruct the successful framework contractors in August and commence work in early September.

Schools

Condition schemes for 2018/19 total £803k allocated to address larger condition items in schools where the cost is over the schools capabilities to fund. Most of these works will be undertaken over the school summer holidays to minimise disruption to the schools. Retentions of £7k are being held for works completed last year at four primary schools.

The Devolved Formula Capital scheme is an annual devolution of dedicated capital grant to all maintained schools. The grant for 2018/19 has now been confirmed as £125k. The grant amount has reduced significantly in recent years and will continue to do so as further

maintained schools convert to academy status. The remaining £2k budget will be removed from the capital programme in the report to November Cabinet.

A purpose built nursery at the Renown Centre which faces Friars Primary School is under construction funded from a central government grant of £332k. This is part of a larger project to demolish the older community centre and decommissioned pupil referral unit building and replace them with nine affordable family homes.

The primary expansion programme is now complete however a watching brief of demand against availability will be kept. If a need is identified, a further expansion of primary places will be explored to ensure that the Council's statutory duty to provide a good school place for all those that request it can be met.

The secondary expansion programme is progressing to ensure that the extra places supplied in primary are matched in secondary as they are needed.

Shoeburyness High School, St Thomas More High School, Belfairs Academy and The Eastwood Academy have building contractors on site and their building works are at various stages. St Bernards High School are in the process of appointing their contractor and one other secondary school is preparing to tender for internal remodelling works during the summer period. Two further schools are starting feasibility studies. These plans are to ensure that the Local Authority can meet its statutory duty of supplying a good place to any local resident that requests one. Works at Wentworth Road site are now completed and Southchurch High School site works are progressing.

Culture and Tourism

Tender assessments have been completed for the main design team on the Forum II scheme and the cost consultant appointment has been approved by the project board. Design work is due to commence at the beginning of September and the planning application is to be submitted in April 2019.

Works on the inner town path at Southchurch Park are now complete and quotes are now being obtained for the exterior tow path works.

Surveys have now been completed at the leisure centres and theatres to plan replacement fire door works. These works will be rolled out across each of the locations commencing in the autumn months.

Design works are still underway for the Leigh Library refurbishment. Works are anticipated to commence on site during the autumn.

Design works for the new lift at the Central Museum will commence once the final location has been decided. The tender is scheduled to commence in the autumn.

The package of works is being prepared for the building management system at Shoeburyness Leisure Centre with a view to commence on site in the Autumn.

New sun shelters have been ordered as part of the Resorts Assets scheme which will utilise the remainder of the budget carried forward from 2017/18.

The scheme to replace play equipment in Sidmouth Park is currently being delayed by the badger setts which have caused disruption to two parks in the borough. Budget of £64k will

be included as a carry forward request in the report to November Cabinet as it is likely that this scheme will not take place until 2019/20.

The remaining £42k budget on the Belfairs Swim Centre scheme is being used to carry out essential works to the roof. This will not take place until 2019/10 therefore a carry forward request will be included in the report to November Cabinet.

Key works on the Shoebury Common Regeneration scheme are unlikely to go to tender during 2018/19 therefore budget of £250k will be included as a carry forward request in the report to November Cabinet.

The Pump Priming budget is intended to be used as match funding for an external funding bid for some works on Southchurch Hall Gardens. This is unlikely to take place until 2019/20 therefore budget of £311k will be included as a carry forward request in the report to November Cabinet.

Enterprise and Regeneration

The full business case for the Airport Business Park is due to be submitted in August to secure approval to spend the remainder of the LGF awarded at the SELEP Accountability Board in September 2018. Work is progressing on the Rugby clubhouse with forecast completion during October 2018. Remaining Phase one utility works are due to be procured in September. Work is currently underway to prepare procurement packages for Phase two utility works and construction of the Innovation Centre.

The revised business case for the Incubation Centre scheme to convert the Atrium into eight smaller units has now been submitted and approved.

Competitive dialogue is underway with interested parties on the Better Queensway scheme. This process will continue with developers who are expected to submit detailed proposals by August 2018.

The work to complete the feasibility study on the Housing Infrastructure Feasibility scheme will shortly go out to procurement. The highways team are in the process of developing options for the road works.

ICT

The phase one data centre work is still in the final stage of testing to ensure that it is fit to host corporate applications. Estimated handover and final settlement completion is now expected during September. Phase two migration will then begin to the new infrastructure.

The options appraisal has been agreed for the mobile device end point protection replacement scheme. The draft specification has been completed and tender documents are to be finalised before publication.

Tender documents for the phones migration are being prepared and the current support contract has been extended to September.

The phase one close out of the Channel Shift scheme is continuing and implementation costs have been received for the delivery of phase two. Phase two relates to a number of services in the Place Department and progression including timelines and resourcing requirements is currently being considered.

Southend Pier

The works for the Bearing Refurbishment scheme have now been tendered and works will be carried out this financial year.

The consultant has been appointed and orders raised for the tender documents and drawings on both the Prince George Extension scheme and Timber Outer Pier Head scheme.

Highways and Infrastructure

Infrastructure

The contract for a geotechnical consultant is currently with procurement for tender for the Cliff Slip Investigation works scheme.

Materials are being produced for the consultation on the Coastal Defence scheme. Consultation is expected to last 12 weeks but has now been delayed until September.

Scheme designs are still being prepared for Marine Parade for the Resilience of the borough to flooding from extreme weather events project.

Highways

Implementation is on-going on the carriageway and footway improvements programme with a full audit of completed schemes expected late August which will determine the final schemes for 2018/19.

The Highways Maintenance Potholes scheme is a demand led service and actions are taken on a daily basis to repair potholes that have met the necessary threshold.

The new entrance for the Coach Parking scheme is currently being designed which provide appropriate provision utilising the full 2018/19 budget.

Transport

Work is underway to install the 12 real time bus screens on London Road to replace the old screens which are no longer working. Other works are taking place with regards to the cycle hub and electric charging points.

The A127 Growth Corridor projects will support the predicted growth associated with London Southend Airport and the Joint Area Action Plan (JAAP) proposals developed by Southend, Rochford and Essex County Councils to release land and create 7,380 high value jobs. The improvement will also support background growth of Southend and Rochford.

The final business case for A127 Kent Elms junction improvements has been approved by the SELEP and all funding has been received.

Phase two was completed at the end of June 2017 with three inbound lanes and two new pedestrian crossings in place. Footbridge foundations are underway on site and due for completion in January 2019 due to utility works. Works are on-going to complete the new westbound lane in summer 2018.

Options are being prepared to put forward the business case for the Bell junction to the September Accountability Board. Air quality modelling work has commenced.

The road safety audit stage three has now been reviewed on the A127 Tesco junction improvements with minor adjustments now complete.

Southend Transport Model is an on-going scheme to support various multi modal transport projects. A review of the model is complete with options on updating the model to be considered.

S106/S38/S278 and Community Infrastructure Levy (CIL)

Various highway S106 schemes are scheduled to take place during 2018/19. There are a number of S38, S278 and S78 schemes all at various stages. Some of the larger schemes include works on pedestrian crossings and footpath improvements at the airport and works at Fossetts Farm.

Energy Saving Projects

Several projects have been identified from the energy efficiency budget including lighting and draught-proofing at Beecroft and LED lighting in the Civic Centre.

The desk study has been received on the old Beecroft ground source heat pump feasibility scheme and results from the physical testing are currently being prepared.

Community Safety

Whilst the CCTV Equipment Renewal scheme is moving forward with consultation, the implementation has been delayed. This scheme ties in with the development of the Southend Intel Hub and the process for testing any camera solutions to ensure they are fit for purpose in the future

Council Housing & New Build Programme

The contract works for the 2018/19 capital programme are progressing in line with the programme and is being managed by the allocated project surveyor to ensure the schemes stay on track.

The tender for the kitchen, bathroom and electrical works has been awarded and awaiting the signed contract to be returned.

The Disabled Adaptations budget relates to minor and major adaptations in council dwellings. Spend depends on the demand for these adaptations and works are currently in progress for 2018/19.

The Sheltered Housing DDA works budget has been allocated for improvements to sheltered housing. No schemes have currently been identified however this budget is being held should it be required to contribute towards the fire safety works which are being carried out on sheltered housing this financial year.

The foundations are now in on both sites for the housing construction scheme and block works is progressing. The variation of planning conditions is still on-going and works are on track for completion in summer 2019.

Summary

Carry forward requests to be included in the report to November Cabinet include Sidmouth Park Replacement of play Equipment for £64k, Belfairs Swim Centre for £42k, Pump Priming for £311k and Shoebury Common Regeneration for £250k. Removal of £2k of the Devolved Formula Capital budget is also to be included.

2. Budget Performance and Financing by Department

Department	Revised Budget 2018/19 £'000	Outturn to 31 st July 2018/19 £'000	Expected outturn 2018/19 £'000	Latest Expected Variance to Revised Budget 2018/19 £'000	Previous Expected Variance to Revised Budget 2018/19 £'000
Chief Executive	1,789	173	1,789	-	-
People	20,425	5,685	20,423	(2)	-
Place	44,250	6,559	43,583	(667)	-
Housing Revenue Account (HRA)	11,225	1,780	11,225	-	-
Total	77,689	14,197	77,020	(669)	-

The capital programme is expected to be financed as follows:

Department	Council Budget £'000	Grant Budget £'000	Developer & Other Contributions £'000	Total Budget £'000
Chief Executive	1,785	-	4	1,789
People	5,418	14,508	499	20,425
Place	20,515	22,674	1,001	44,250
Housing Revenue Account (HRA)	10,854	-	371	11,225
Total	38,632	37,182	1,875	77,689
As a percentage of total budget	49.7%	47.9%	2.4%	

The funding mix for the total programme could change depending on how much grant and external contributions are received by the Council by the end of the year.

The grants and external contributions position to 31st July is as follows:

Department	Grant Budget £'000	Developer & Other Contributions Budget £'000	Total external funding budget £'000	External funding received £'000	External funding outstanding £'000
Chief Executive	-	4	4	-	4
People	14,508	499	15,007	5,069	9,938
Place	22,674	1,001	23,675	5,323	18,352
Housing Revenue Account (HRA)	-	371	371	371	-
Total	37,182	1,875	39,057	10,763	28,294

3. Departmental Budget Performance

Department of Chief Executive

The revised capital budget for the Department of the Chief Executive is £1.789million. The budget is distributed across various scheme areas as follows:

Department of the Chief Executive	Revised Budget 2018/19 £'000	Outturn to 31 st July 2018/19 £'000	Expected outturn 2018/19 £'000	Latest Forecast Variance to Year End 2018/19 £'000	Previous Forecast Variance to Year End 2018/19 £'000
Asset Management (Property)	1,073	78	1,073	-	-
Transformation	143	85	143	-	-
Cemeteries & Crematorium	157	10	157	-	-
Subtotal	1,373	173	1,373	-	-
Priority Works (see table)	416	-	416	-	-
Total	1,789	173	1,789	-	-

Priority Works	£'000
Budget available	600
Less budget allocated to agreed schemes	(184)
Remaining budget	416

Actual spend at 31st July stands at £0.173million. This represents 10% of the total available budget.

Department for People

The revised Department for People budget totals £20.425million.

Department for People	Revised Budget 2018/19 £'000	Outturn to 31 st July 2018/19 £'000	Expected outturn 2018/19 £'000	Latest Expected Variance to Year End 2018/19 £'000	Previous Expected Variance to Year End 2018/19 £'000
Adult Social Care	3,347	185	3,347	-	-
General Fund Housing	2,842	279	2,842	-	-
Housing S106 Agreements	497	-	497	-	-
Children & Learning Other Schemes	536	-	536	-	-
Education S106 Agreements	2	-	2	-	-
Condition Schemes	803	143	803	-	-
Devolved Formula Capital	127	125	125	(2)	-
Early Years	332	10	332	-	-
Secondary School Places	11,939	4,943	11,939	-	-
Total	20,425	5,685	20,423	(2)	-

Actual spend at 31st July stands at £5,685million. This represents 28% of the total available budget.

Department for Place

The revised capital budget for the Department for Place is £44.250million. This includes all changes approved at June Cabinet. The budget is distributed across various scheme areas as follows:

Department for Place	Revised Budget 2018/19 £'000	Outturn to 31 st July 2018/19 £'000	Expected outturn 2018/19 £'000	Latest Expected Variance to Year End 2018/19 £'000	Previous Expected Variance to Year End 2018/19 £'000
Culture – Leisure	304	74	262	(42)	-
Culture - Parks	1,068	136	754	(314)	-
Culture - Libraries	686	7	686	-	-
Culture - Theatres	787	7	787	-	-
Culture - Museums	1,503	543	1,503	-	-
Other Culture & Tourism	4,057	899	3,746	(311)	-
Culture S106 Agreements	356	9	356	-	-
ICT Programme	3,767	1,040	3,767	-	-
Airport Business Park	11,230	992	11,230	-	-
Better Queensway Regeneration	1,010	224	1,010	-	-
Incubation Centre	31	-	31	-	-
Enterprise & Regeneration	250	-	250	-	-
Southend Pier	3,158	256	3,158	-	-
Coastal Defence & Foreshore	760	18	760	-	-
Highways and Infrastructure	2,899	679	2,899	-	-
Highways S106 Agreements	210	6	210	-	-
Parking Management	450	81	450	-	-
Section 38, 278 & 78 / CIL	246	3	246	-	-
Local Transport Plan	3,650	537	3,650	-	-
Local Growth Fund	5,348	947	5,348	-	-
Community Safety	900	-	900	-	-
Community Safety S106	11	-	11	-	-
Transport	501	37	501	-	-
Energy Saving Projects	1,068	64	1,068	-	-
Total	44,250	6,559	43,583	(667)	-

Actual spend at 31st July stands at £6.559million. This represents 15% of the total available budget.

Housing Revenue Account

The revised budget for the Housing Revenue Account capital programme for 2018/19 is £11.225million. The latest budget and spend position is as follows:

Housing Revenue Account	Revised Budget 2018/19 £'000	Outturn to 31 st July 2018/19 £'000	Expected outturn 2018/19 £'000	Latest Expected Variance to Year End 2018/19 £'000	Previous Expected Variance to Year End 2018/19 £'000
Decent Homes Programme	6,784	1,093	6,784	-	-
Council House Adaptations	884	122	884	-	-
Sheltered Housing	345	-	345	-	-
Other HRA	3,212	565	3,212	-	-
Total	11,225	1,780	11,225	-	-

The actual spend at 31st July of £1.780million represents 16% of the HRA capital budget.

Summary of Capital Expenditure at 31st July 2018

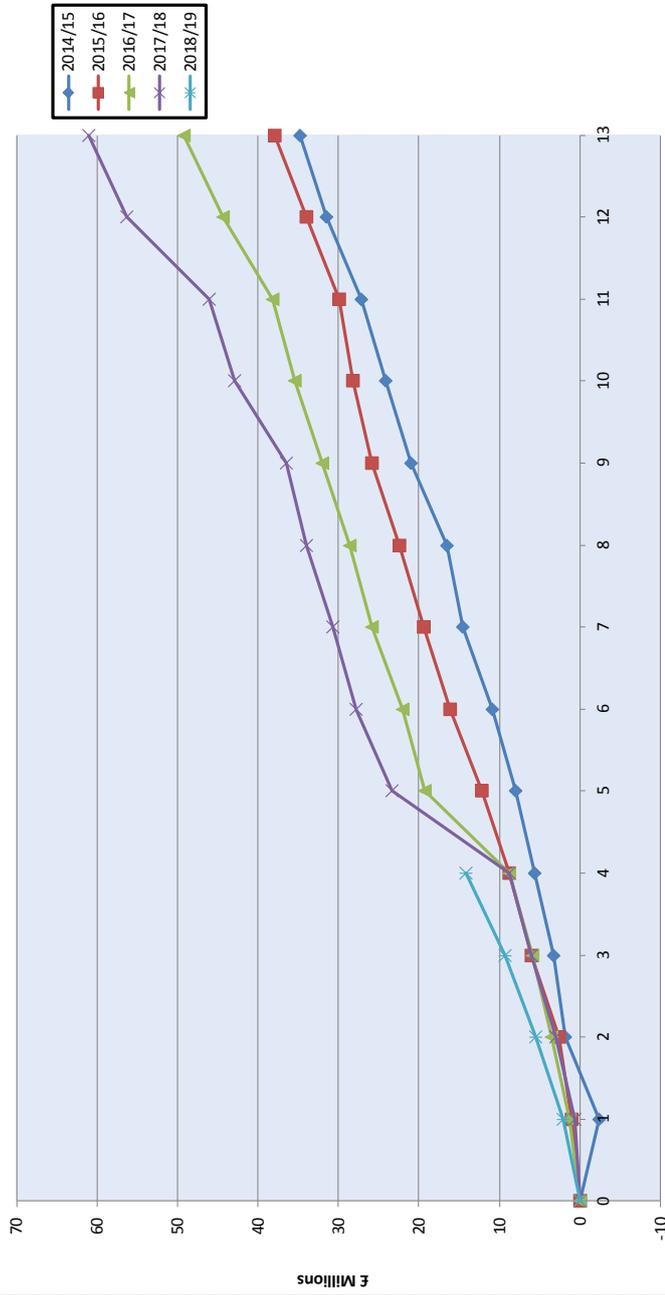
Appendix 1

	Original Budget 2018/19 £000	Revisions £000	Revised Budget 2018/19 £000	Actual 2018/19 £000	Forecast outturn 2018/19 £000	Forecast Variance to Year End 2018/19 £000	% Variance
Chief Executive	5,950	(4,161)	1,789	173	1,789	-	10%
People	25,591	(5,166)	20,425	5,685	20,423	(2)	28%
Place	52,031	(7,781)	44,250	6,559	43,683	(667)	15%
Housing Revenue Account	9,412	1,813	11,225	1,780	11,225	-	16%
	92,984	(15,295)	77,689	14,197	77,020	(669)	18%
Council Approved Original Budget - February 2018							
	92,984						
Chief Executive amendments	75						
People amendments	(696)						
Place amendments	295						
HRA amendments	-						
Carry Forward requests from 2017/18	6,795						
Accelerated Delivery requests to 2017/18	(2,584)						
Budget re-profiles (June Cabinet)	(19,467)						
New external funding	287						
Council Approved Revised Budget - June 2018	77,689						

**Actual compared to Revised Budget spent is £14.197M
or 18%**

Appendix 2

Capital programme Delivery
Cumulative Capital Expenditure 2014/15 to 2018/19



Year	Outturn £m	Outturn %
2014/15	34.8	83.8
2015/16	37.9	97.0
2016/17	48.8	89.0
2017/18	61.0	95.0

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Southend-on-Sea Borough Council

Agenda
Item No.

Report of the Chief Executive
to
Cabinet

On
18th September 2018

Report prepared by: Val Smith – Knowledge and Information
Manager
Charlotte McCulloch – Customer Service & Complaints
Manager
Michael Barrett – Complaints Officer

Annual Report – Comments, Complaints and Compliments – 2017/18
All Scrutiny Committees
Cabinet Members: Councillors Lamb, Cox and Boyd
A Part 1 Public Agenda Item.

1. Purpose of Report

1.1 This report is to:

- Provide performance information about comments, complaints and compliments received across the Council for 2017-18
- Fulfil the duty of the Monitoring Officer to report to members on the findings of certain Local Government Ombudsman investigations
- Fulfil the Council's statutory duty to produce an annual report concerning compliments and complaints received about its Children and Adult social care functions.
- Support the Council's values in being open, honest and transparent.

2. Recommendation

2.1. To note the Council's performance in respect of comments, complaints and compliments for 2017-18.

2.2. To refer the report to each Scrutiny Committee, for the Place and P & R Scrutiny Committees to consider Appendix A and for the People Scrutiny Committee to consider Appendices B and C.

3. Background

- 3.1. It is good practice for the Cabinet to receive an annual report on Corporate Comments, Complaints and Compliments. This report is attached at Appendix A and includes a summary of the findings of the Local Government and Social Care Ombudsman which the Monitoring Officer is obliged to report under section 5(2) of the Local Government and Housing Act and the Local Government Act 1974.

- 3.2. Legislation requires that statutory processes are in place to deal with complaints relating to children and adults social care, to advertise that process and produce annual reports. These reports also need to be shared with the Care Quality Commission and the Department of Health. The two reports are attached as Appendices B and C to this report.
- 3.3. Details of performance are contained in the respective reports under:
Appendix A - Corporate Comments, Complaints and Compliments and Monitoring Officer report
Appendix B - Compliments, Concerns and Complaints – Adult Social Care Services
Appendix C - Compliments and Complaints – Children’s Social Care Services.
- 3.4. The table below sets out a comparison of the total number of complaints, Corporate and Statutory, received in 2017/18 and in the previous three years, in total and by Department.

Department	2014/2015	2015/16	2016/17	2017/18
Department of the Chief Executive	43	66	54	65
Department for People (including statutory)	246	304	326	252
Department for Place	376	352	486	364
Grand Total	665	722	866	681

As can be seen, the upward trend in the total number of complaints being received by the Council has reversed. This supports the assertion in last year’s annual report that the spike in complaints in 2016/17 was attributable to major alterations to refuse collection days.

- 3.5. The table below sets out a comparison of the total number of comments and compliments received in 2017/18 and in the previous three years.

Department	2014/2015	2015/16	2016/17	2017/18
Department of the Chief Executive	1326	1673	1301	1291
Department for People (including statutory)	474	416	302	119
Place	222	337	838	820
Grand Total	2022	2426	2441	2230

The majority of comments and compliments come either through the GovMetric customer satisfaction reporting platform (1283 - reported in figures for the Department of the Chief Executive) or through the Department for Place, where

the majority relate to Waste and Environmental Care (448) and Traffic and Highways (169).

In previous years the Department for People has received a large number of compliments in relation to the services provided by Southend Care. As this service is no longer provided directly by the Council, these are no longer recorded in this report and this is believed to account for the drop in comments and compliments for the Department.

4. Lessons Learnt and Service Improvements

- 4.1 Whilst responding to feedback in a timely manner is a priority, it is also important for Council services to reflect on lessons learnt and improving outcomes. This is recognised by the Local Government Ombudsman's principles of good complaints handling by being customer focused, putting things right and seeking continuous improvement.

Examples of service improvements are contained within the individual reports at Appendix A, B and C.

5. Future developments

- 5.1 To support the Corporate Complaints process, it is intended during 2018/19 to make available:

- A programme of awareness for staff about what to do when a complaint is received
- Training and support regarding handling and responding to complaints
- Publicity and advice concerning how to use the procedures for dealing with unreasonable complainant behaviour.

- 5.2 It is recognised that more effective use could be made of insight from complaints. Data collected will be reviewed and analysed to a greater extent and more frequently to better learn lessons, identify areas of concern and improve service delivery.

6. Corporate Implications

- 6.1 Contribution to Council's Vision & Corporate Priorities

Customer feedback and complaints management is directly relevant to the Council's corporate priorities to deliver strong, relevant and targeted services that meet the needs of our community. This remains important in the coming years as budget constraints continue to impact on service delivery.

- 6.2 Financial Implications

The commissioning of external 'independent people' to undertake children's stage two statutory complaints and an 'independent panel' to undertake Stage 3 complaints incurs additional costs, which are met from within the People Business Support Budget.

6.3 Legal Implications

These reports ensure compliance with statutory complaints processes and reporting obligations.

6.4 People and Property Implications

People and property implications are considered through the Council's normal business management processes.

6.5 Consultation

The Advocacy Services and Representations Procedure (Children) (Amendment) Regulations 2004 confer a duty on local authorities to provide information about advocacy services and offer help to obtain an advocate to a child or young person wishing to make a complaint. All children and young people wishing to make a complaint are offered the services of an advocate.

6.6 Equalities and Diversity Implications

All three processes are receiving feedback from customers from Southend communities including minority groups. Similarly, alternative approaches to facilitate complaint resolution are offered including advocacy and meetings.

Corporate equalities considerations continue to be part of the process.

6.7 Risk Assessment

Processes are reviewed periodically and reduce any risk which could adversely affect the Council's reputation in the community and reduce public trust/satisfaction. The number recorded is still significantly less than the 1100 reported for 2009 at the beginning of the revised process.

6.8 Value for Money

Early resolution of complaints, together with learning lessons from the process, contribute to service improvements and getting things right first time.

6.9 Community Safety and Environmental Impact Implications

Individual complaints may concern community safety or environmental matters.

7. **Background Papers - None**

8. **Appendices**

Appendix A - Corporate Comments, Complaints and Compliments and Monitoring Officer report

Appendix B - Compliments, Concerns and Complaints – Adult Social Care Services

Appendix C - Compliments and Complaints – Children's Social Care Services.

Corporate Comments, Complaints and Compliments and Local Government and Social Care Ombudsman Annual Report 2017-18

1. Purpose of Report

- 1.1 To report on the performance relating to the Corporate Comments, Complaints and Compliments procedure and to provide comparisons with previously reported results.

(Complaints and compliments in respect of adult and children's social care functions are subject to their own statutory processes and are not monitored by the Corporate procedure. Their annual reports are provided separately.)

- 1.2 To fulfil the Monitoring Officer's duty under section 5(2) of the Local Government and Housing Act 1989 and the Local Government Act 1974, the Monitoring Officer must provide Members with a summary of the findings on all complaints relating to the Council where in 2017/18 the Local Government and Social Care Ombudsman (LGO) has conducted an investigation and upheld a complaint.

2. Recommendations

- 2.1 **To note the Council's performance in respect of Corporate Comments, Complaints and Compliments for 2017-18.**
- 2.2 **To note the summary of LGO findings (Appendices 1, 2 & 3).**
- 2.3 **To refer the report to the Place and P & R Scrutiny Committees.**

3. Background

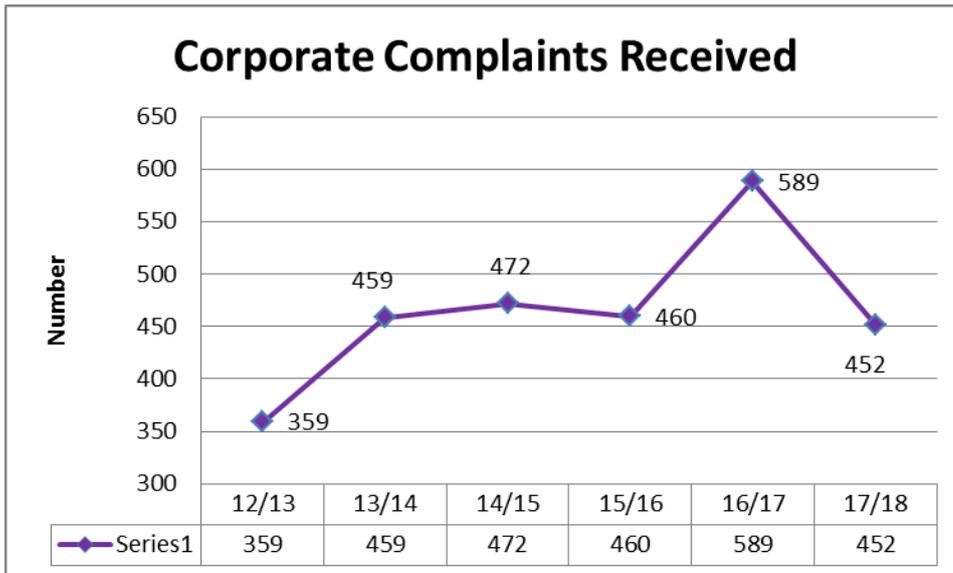
- 3.1 The Council's Corporate Comments, Complaints and Compliments procedure deals with all general feedback about the Council. It has been in place since 2009 and is well established throughout the organisation. Along with the children and adult social care statutory complaints there are certain other functions which are outside of the Corporate procedure and which have their own processes. Examples include appeals against parking tickets and concerns about schools.
- 3.2 The benefits in operating a feedback process include:
- To learn lessons from the types of feedback made
 - To help improve service delivery
 - To improve the consistency and timeliness of responses
 - To reflect sector wide and LGO best practice.

- 3.3 This report provides:
- An update on how the process is working
 - An analysis of customer feedback data
 - A summary of LGO findings

4. PERFORMANCE TO DATE

4.1 Performance in respect of complaints

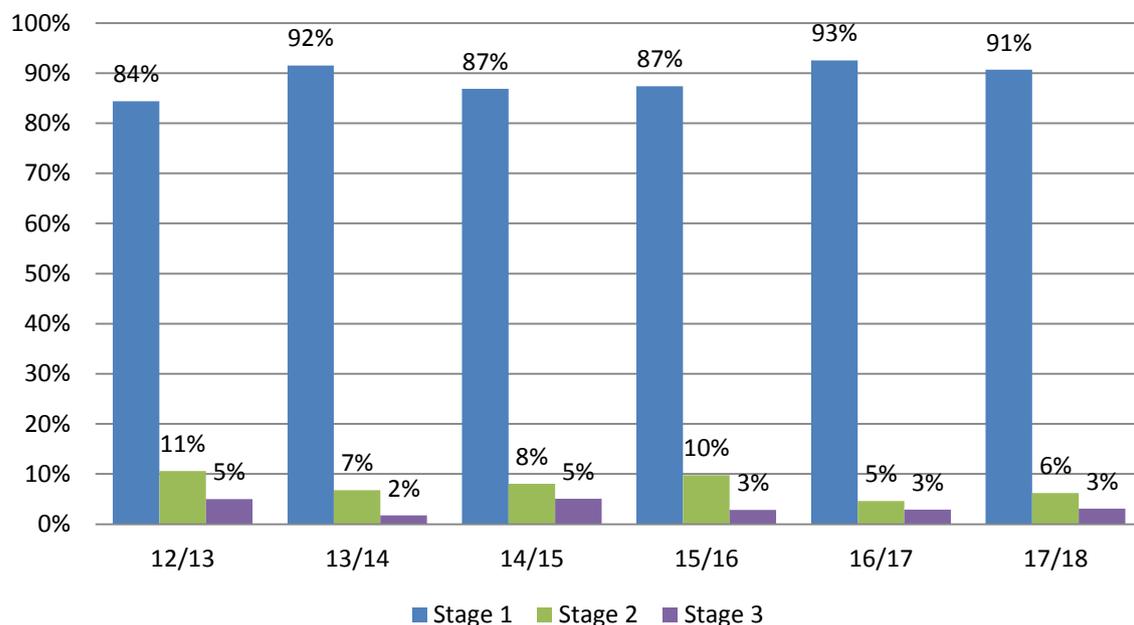
In 2017/18 the number of complaints received returned to its more usual level, following the spike in complaints in 2016/17.



91% of complaints were resolved at the first Stage of the Complaints process. For those that progressed further through the process, 6% were resolved at the second Stage and 3% went to the third and final Stage. The proportion of complainants making use of the entire process has remained constant at 3% for the past 3 years.

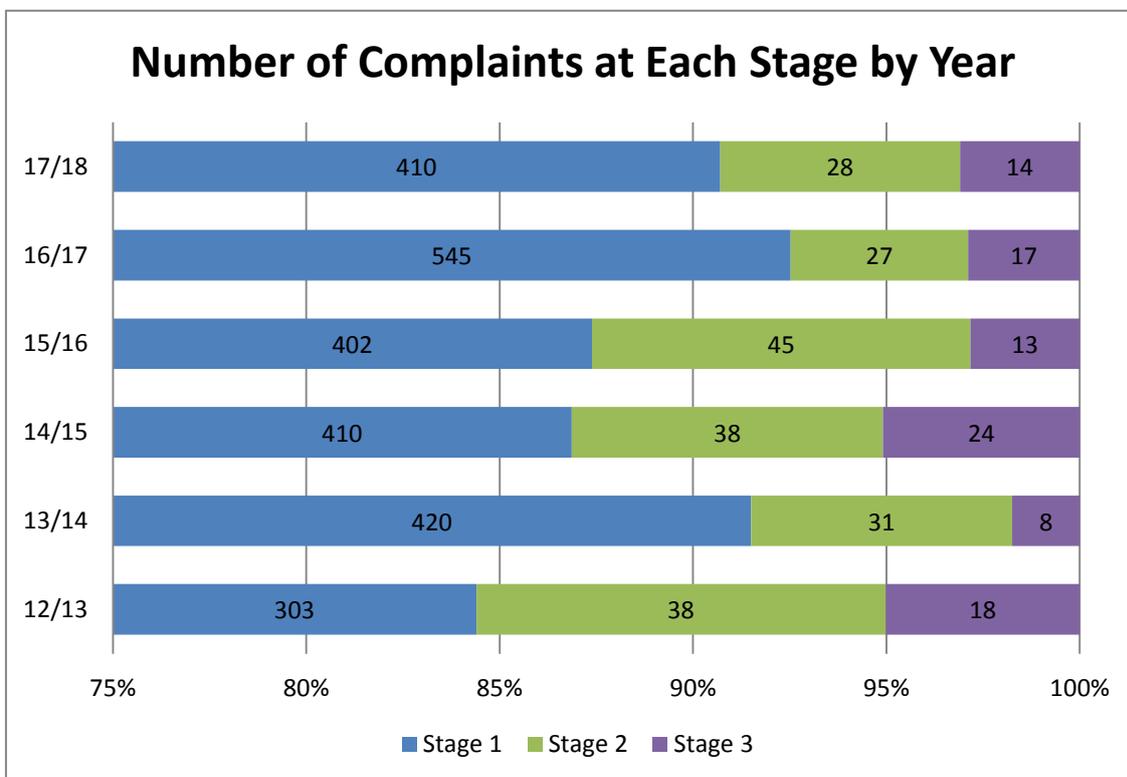
complainants making use of the entire process has remained constant at 3% for the past 3 years.

Percentage of Complaints Resolved at Each Stage



The number of complaints resolved at each Stage of the process is as follows:

Number of Complaints at Each Stage by Year

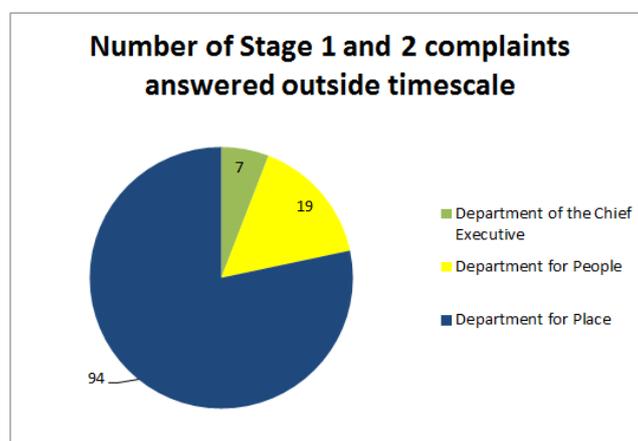
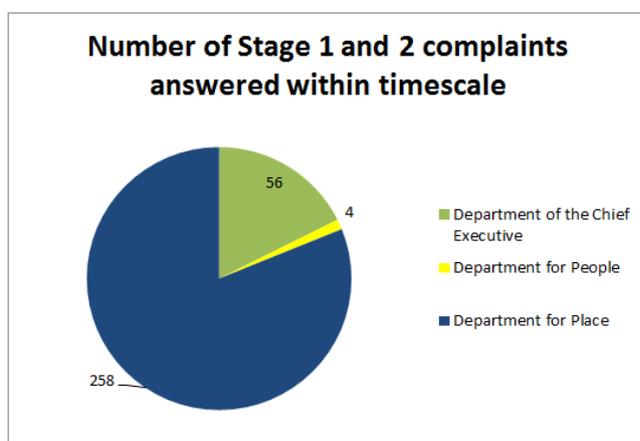


4.2 Complaints by Department with Response Times

The aim is to respond to Stage 1 and 2 complaints within 10 working days of their receipt. This has been achieved in 73% of cases which is a lower percentage than in the previous two years.

	Apr 2015-Mar 2016		Apr 2016-Mar 2017		Apr 2017-Mar 2018	
Department	Stage 1 & 2 Complaints	Responded to in 10 working days	Stage 1 & 2 Complaints	Responded to in 10 working days	Stage 1 & 2 Complaints	Responded to in 10 working days
Dept. of the Chief Executive	62	81%	52	94%	63	89%
Department for People	41	68%	41	49%	23	17%
Department for Place	344	83%	479	85%	352	73%
Grand Total	448	80%	572	84%	438	73%

The biggest influence on overall performance is exercised by the Department for Place:



4.3 Stage 3 Complaints

Of the 14 complaints which reached Stage 3 of the complaints procedure, 6 were responded to within the 35 day timescale. During 2017/18 the new staffing structure in the complaints advisory service has been being established and experience gained.

The change in process where Stage 3 responses may come from the Deputy Chief Executives rather than the Chief Executive has been implemented and

has generated no negative feedback from complainants. It is expected that the timeliness of Stage 3 responses will improve substantially in 2017/18.

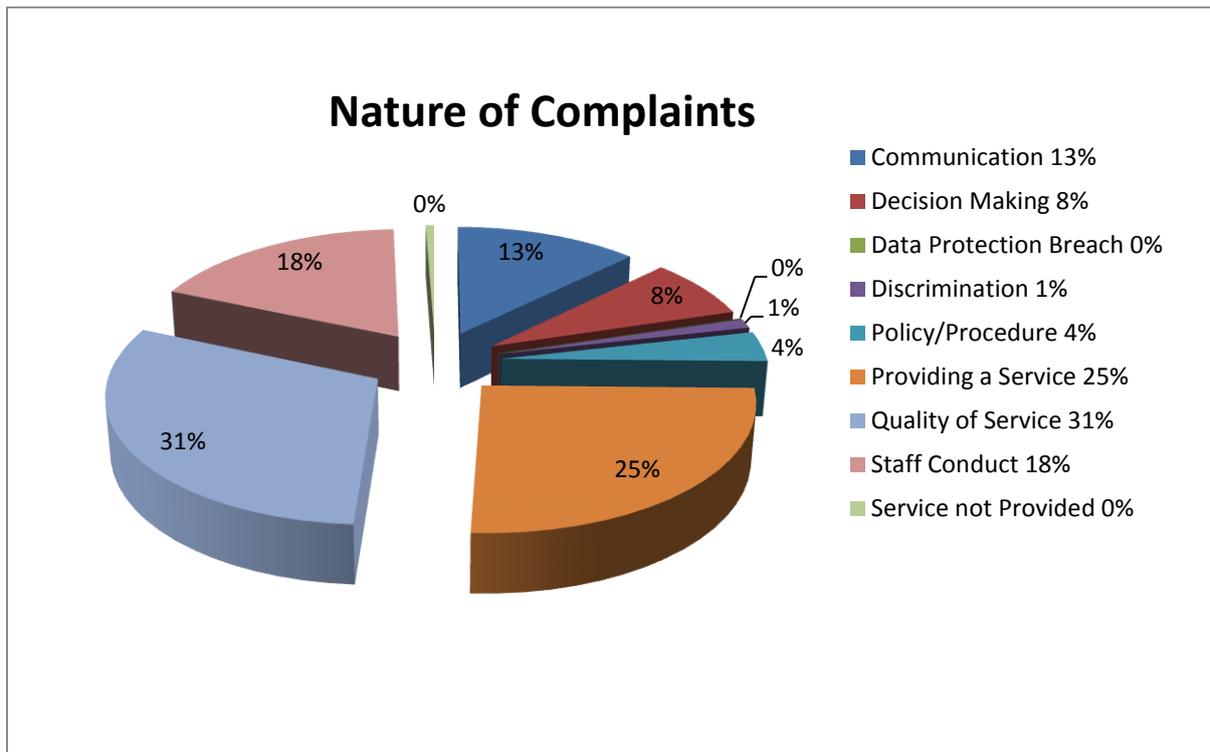
Of the 14 Stage 3 complaints, on receipt of their response, 6 complainants applied to the Local Government Ombudsman. In one case additional remedial action was advised, in the remaining 5 the Ombudsman was satisfied with the action already taken by the Council in the complaints process.

4.4 Nature of Complaints

The monitoring system that is in place highlights trends and issues that are subject to complaints. Areas that have been of note, at all stages, for 2017/18 include:

- Quality of service – 23%
- Providing a service – 19%
- Staff conduct/employee behaviour – 13%

The full distribution is as follows:



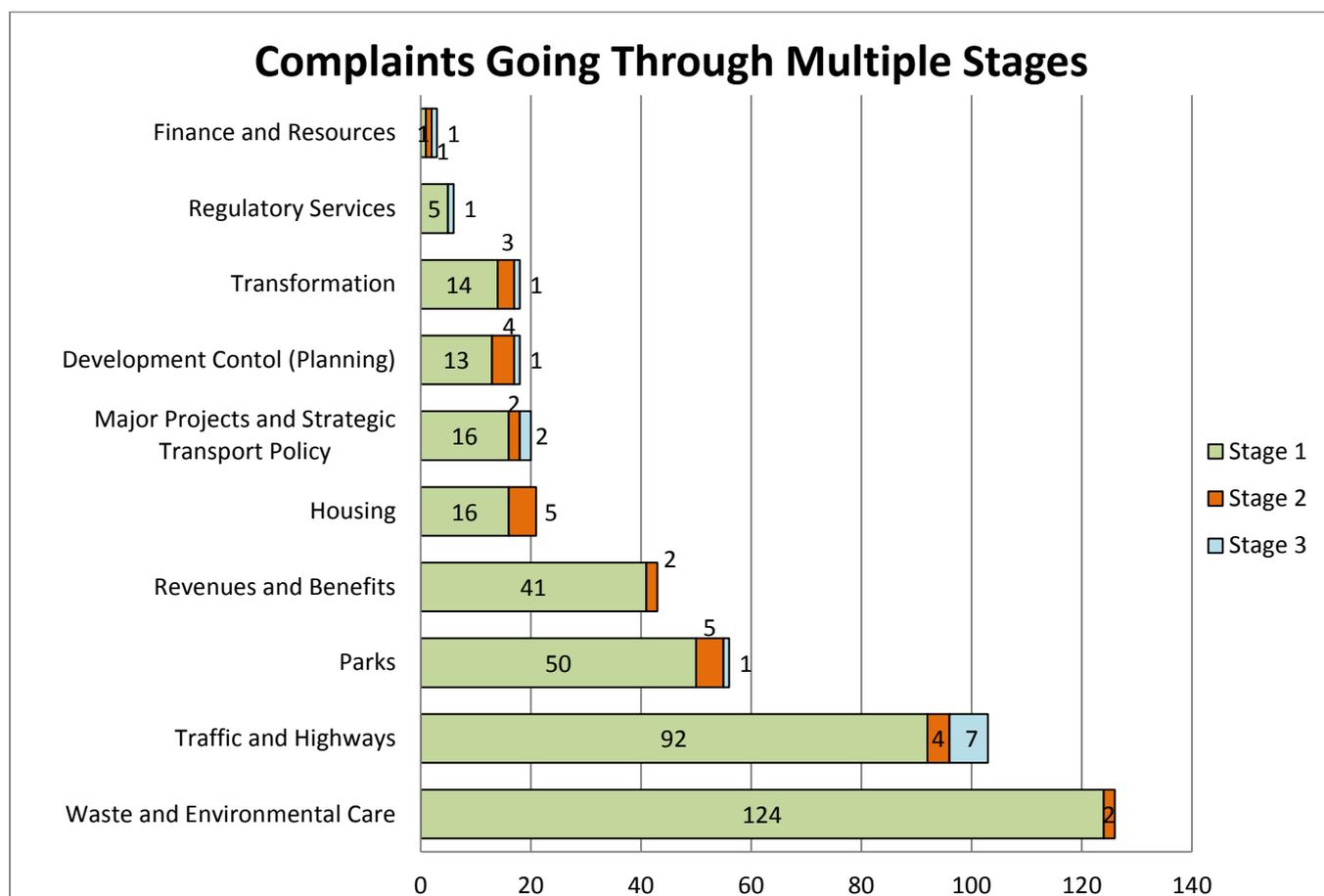
4.5 How the Complaints Are Received

The most common way for complainants to contact the Council remains by e-mail or on-line form, and reflects the general shift to use of electronic means when interacting with the Council. In some instances customer service officers will have completed an on-line form on behalf of a telephone caller.

The Council remains committed to keeping all complaint channels available in order to meet its equalities obligations and to comply with LGO best practice. A formal complaint may be received over social media but would be moved to more conventional channels for resolution.

4.6 Progression of complaints

The complaints which have been taken to multiple stages are as follows:



It is intended to examine those topics prone to multiple stages to identify whether there are factors which might reduce the need for escalation past Stage 1.

4.7 Complaint Resolution

The emphasis on learning from customer feedback continues. This is evidenced by how complaints have been resolved.

Specific action was taken in 82% of cases - by doing something that had not been done, carrying out work or putting something right.

4.8 Learning Points

While many complaints involve issues being experienced solely by the individual complainant, feedback through the complaints procedure from customers is also continuously reviewed to establish where more general improvements to services are required.

In particular, Stage 3 of the process includes an organisation-wide view of the complaint to identify lessons learned and to inform broader service reviews where appropriate. In this way an individual complaint can have an impact on organisational change.

Examples of service improvements as a result of complaints and customer feedback include:

- Enhanced processes for obtaining information concerning absent parents in adoption cases
- Improved information to be given to customers purchasing Memorials
- Introduction of a formal review stage for customers dissatisfied with the information provided in accordance with their data protection subject access rights
- Insight from complaints feeding into the development of revised services relating to anti-social behaviour
- Enhancements to the Council's website

4.9 Comments and Compliments

GovMetric, the customer satisfaction measurement tool used by the Council, specifically captures feedback concerning the provision of face to face and telephone service by the Customer Service Centre and over the Council's primary website and its interface with MySouthend. These figures are reflected in the Department of the Chief Executive analysis.

Compliments are most frequently received in relation to face to face or telephone contact, with the helpful or pleasant nature of the member of staff often being cited as the reason for the compliment.

It is anticipated that as we move more towards increased use of on-line channels with less personal interaction between the Council and its customers, so the opportunities to receive compliments will decrease.

Of the 1283 comments and compliments recorded by the Department of the Chief Executive, 212 were categorised as compliments.

When comments are received they are responded to by the service concerned and the person making the comment is acknowledged and where appropriate advised if their suggestion is to be taken up. Compliments are acknowledged and shared with the appropriate line management to inform the

service or member of staff. This may then inform the staff member's performance review discussion.

The table below shows a 3 year comparison of the total number of comments and compliments received by each Department.

Department	Total 2015/2016	Total 2016/2017	Total 2017/2018
Department of the Chief Executive	1673	1301	1291
Department for People (excluding statutory complaints)	2	40	1
Department for Place	337	838	820
Grand Total	2012	2179	2112

5. Local Government and Social Care Ombudsman (LGO)

The Local Government and Social Care Ombudsman (LGO) has provided an annual summary of statistics for the year ended 31 March 2018. This relates to cases upon which they have made a decision in that year.

The LGO's annual review letter, including the breakdown of the results is attached at [Appendix 1](#).

51 decisions relating to the Council were made by the Ombudsman. This compared to 58 for the previous year.

Of these, 26 cases were referred back for local resolution. This is most commonly because the complainant has approached the LGO without first going through the Council's complaints procedure.

15 cases were closed after the LGO had made initial enquiries, involving the Council where required.

1 case was incomplete or invalid, and in 1 instance, advice to the complainant from the LGO was considered sufficient action.

In 8 cases the LGO conducted a detailed investigation. This is a reduction from 15 last year, a considerable improvement.

In 6 of these cases the LGO upheld the complaint, in 2 cases they did not, an uphold rate for detailed investigations of 75% (the average LGO uphold rate being 57%).

While in percentage terms this means that the 'upheld' rate has increased from 53%, and this appears a negative trend, in real terms the number of complaints upheld has reduced from 8 last year to 6, and of those, 2 had already been satisfactorily remedied by the Council prior to the LGO becoming involved.

This means that only 4 complainants had a different outcome from the LGO than they had already had from the Council. This demonstrates that the complaints processes are effective and provide well considered outcomes for complainants. In all but one of the cases, the Council had already admitted fault during the relevant complaints process. In three cases the LGO recommended a monetary remedy whereas the Council had not.

A breakdown of approaches to the LGO is attached at [Appendix 2](#) and a summary of findings for those cases where the LGO found fault is included at [Appendix 3](#).

Alongside statistical information, the LGO also publishes a yearly report on local government complaint handling. The report includes a summary of complaint statistics for every local authority in England which provides an opportunity for the Council to compare its performance against other Councils. The table below shows comparisons with a small number of similar authorities.

Complaints/ enquiries made to LGO			
Local authority	15/16	16/17	17/18
Southend on Sea	54	54	50
Blackpool	47	45	36
Medway	97	87	89
Plymouth	102	98	127
Thurrock	82	65	64
Isle of Wight	60	43	49
Central Bedfordshire	65	54	54

Complaints investigated by the LGO and upheld				
Local authority	14/15	16/17	17/18	Uphold rate
Southend on Sea	7	8	6	75%
Blackpool	7	8	6	86%
Medway	19	13	11	58%
Plymouth	19	15	13	58%
Thurrock	9	10	9	63%
Isle of Wight	14	13	8	64%
Central Bedfordshire	10	8	5	67%

6 MONITORING AND REPORTING

Regular reporting continues within Departmental Management Teams to coincide with their monthly report on performance.

7 CONCLUSIONS

The process continues to deliver a professional response to individual complaints, a robust system of complaint monitoring and real service improvements.

8 Corporate Implications

8.1 Contribution to Council's Vision & Corporate Priorities

Customer feedback and complaints management is directly relevant to the Council's Corporate priorities.

8.2 Financial Implications

Service improvements continue to result in meaningful outcomes for customers. A robust complaint process with thorough investigation and a positive approach reduces the likelihood of financial penalties from the LGO.

8.3 Legal Implications

This process is overseen by the Local Government and Social Care Ombudsman

8.4 People Implications

Effective complaint handling is resource intensive but benefits the organisation by identifying service improvements and managing the process for customers who are dissatisfied.

8.5 Property Implications

None

8.6 Consultation

None

8.7 Equalities and Diversity Implications

The complaints process is open to all and has multiple methods of access for customers. Equality and diversity implications are a routine part of the process in recording customer details and are considered as part of any response.

Although most commonly the process is accessed through e-mail and on-line forms, traditional methods such as post are available and where necessary a complaint can be transcribed over the telephone or be made in person.

This supports persons who might otherwise be inhibited from using the process, perhaps through vulnerability.

8.8 Risk Assessment

Personal data regarding complaints are recorded in an approved centralised system which can only be accessed by nominated officers.

8.9 Value for Money

Resolving a complaint as early as possible in the process reduces officer time spent dealing with concerns as well as providing the opportunity to improve service delivery.

8.10 Community Safety Implications - None

8.11 Environmental Impact - None

9 Background Papers – None

10 Appendices

- Appendix 1 Local Government Ombudsman Annual Review Letter 2018
- Appendix 2 Breakdown of approaches to the LGO by Service
- Appendix 3 Summary of complaints upheld by the LGO

Appendix 1 - Local Government Ombudsman Annual Review Letter 2018

Local Government & Social Care OMBUDSMAN

18 July 2018

By email

Alison Griffin
Chief Executive
Southend-on-Sea Borough Council

Dear Alison Griffin,

Annual Review letter 2018

I write to you with our annual summary of statistics on the complaints made to the Local Government and Social Care Ombudsman (LGSCO) about your authority for the year ended 31 March 2018. The enclosed tables present the number of complaints and enquiries received about your authority and the decisions we made during the period. I hope this information will prove helpful in assessing your authority's performance in handling complaints.

Complaint statistics

In providing these statistics, I would stress that the volume of complaints does not, in itself, indicate the quality of the council's performance. High volumes of complaints can be a sign of an open, learning organisation, as well as sometimes being an early warning of wider problems. Low complaint volumes can be a worrying sign that an organisation is not alive to user feedback, rather than always being an indicator that all is well. So, I would encourage you to use these figures as the start of a conversation, rather than an absolute measure of corporate health. One of the most significant statistics attached is the number of upheld complaints. This shows how frequently we find fault with the council when we investigate. Equally importantly, we also give a figure for the number of cases where we decided your authority had offered a satisfactory remedy during the local complaints process. Both figures provide important insights.

I want to emphasise the statistics in this letter reflect the data we hold, and may not necessarily align with the data your authority holds. For example, our numbers include enquiries from people we signpost back to the authority, some of whom may never contact you.

In line with usual practice, we are publishing our annual data for all authorities on our website, alongside an annual review of local government complaints. The aim of this is to be transparent and provide information that aids the scrutiny of local services.

Future development of annual review letters

Last year, we highlighted our plans to move away from a simplistic focus on complaint volumes and instead turn focus onto the lessons that can be learned and the wider improvements we can achieve through our recommendations to improve services for the many. We have produced a new corporate strategy for 2018-21 which commits us to more comprehensively publish information about the outcomes of our investigations and the occasions our recommendations result in improvements to local services.

We will be providing this broader range of data for the first time in next year's letters, as well as creating an interactive map of local authority performance on our website. We believe this will lead to improved transparency of our work, as well as providing increased recognition to the improvements councils have agreed to make following our interventions. We will therefore be seeking views from councils on the future format of our annual letters early next year.

Supporting local scrutiny

One of the purposes of our annual letters to councils is to help ensure learning from complaints informs scrutiny at the local level. Sharing the learning from our investigations and supporting the democratic scrutiny of public services continues to be one of our key priorities. We have created a dedicated section of our website which contains a host of information to help scrutiny committees and councillors to hold their authority to account – complaints data, decision statements, public interest reports, focus reports and scrutiny questions. This can be found at www.lgo.org.uk/scrutiny. I would be grateful if you could encourage your elected members and scrutiny committees to make use of these resources.

Learning from complaints to improve services

We share the issues we see in our investigations to help councils learn from the issues others have experienced and avoid making the same mistakes. We do this through the reports and other resources we publish. Over the last year, we have seen examples of councils adopting a positive attitude towards complaints and working constructively with us to remedy injustices and take on board the learning from our cases. In one great example, a county council has seized the opportunity to entirely redesign how its occupational therapists work with all of its districts, to improve partnership working and increase transparency for the public. This originated from a single complaint. This is the sort of culture we all benefit from – one that takes the learning from complaints and uses it to improve services.

Complaint handling training

We have a well-established and successful training programme supporting local authorities and independent care providers to help improve local complaint handling. In 2017-18 we delivered 58 courses, training more than 800 people. We also set up a network of council link officers to promote and share best practice in complaint handling, and hosted a series of seminars for that group. To find out more visit www.lgo.org.uk/training.

Yours sincerely,



Michael King
Local Government and Social Care Ombudsman
Chair, Commission for Local Administration in England

Local Authority Report: Southend-on-Sea Borough Council
 For the Period Ending: 31/03/2018

For further information on how to interpret our statistics, please visit our website:
<http://www.lgo.org.uk/information-centre/reports/annual-review-reports/interpreting-local-authority-statistics>

Complaints and enquiries received

Adult Care Services	Benefits and Tax	Corporate and Other Services	Education and Children's Services	Environment Services	Highways and Transport	Housing	Planning and Development	Other	Total
7	6	1	11	3	14	4	4	0	50

Decisions made

Decisions made				Detailed Investigations			Total
Incomplete or Invalid	Advice Given	Referred back for Local Resolution	Closed After Initial Enquiries	Not Upheld	Upheld	Uphold Rate	
1	1	26	15	2	6	75%	51

Notes

Our uphold rate is calculated in relation to the total number of detailed investigations.
 The number of remedied complaints may not equal the number of upheld complaints. This is because, while we may uphold a complaint because we find fault, we may not always find grounds to say that fault caused injustice that ought to be remedied.

Complaints Remedied

by LGO	Satisfactorily by Authority before LGO Involvement
4	2

Appendix 2

Breakdown of approaches to the LGO by Service

Adult Care Services	
7	Decisions of the LGO
4	Referred for local resolution
1	Closed after initial enquiries
1	Incomplete/Invalid
1	Detailed investigation – not upheld

Benefits and Council Tax	
6	Decisions of the LGO
5	Referred for local resolution
1	Closed after initial enquiries

Education and Children’s Services	
12	Decisions of the LGO
6	Referred for local resolution
3	Closed after initial enquiries
1	Detailed investigation – not upheld
2	Detailed investigation - upheld

Environmental Services and Public Protection and Regulation	
3	Decisions of the LGO
1	Referred for local resolution
1	Closed after initial enquiries
1	Detailed investigation - upheld

Highways and Transport	
14	Decisions of the LGO
7	Referred for local resolution
6	Closed after initial enquiries
1	Detailed investigation – upheld

Housing	
4	Decisions of the LGO
1	Advice given by LGO
1	Referred for local resolution
1	Closed after initial enquiries
1	Detailed investigation - upheld

Planning and Development	
4	Decisions of the LGO
2	Referred for local resolution
1	Closed after initial enquiries
1	Detailed investigation - upheld

Corporate and Other Services (not specified by LGO)	
1	Decisions of the LGO
1	Closed after initial enquiries

Appendix 3

Summary of complaints upheld by the LGO

Service	Maladministration/Fault	Agreed Remedy
Education and Childrens Services	Could have made more comprehensive attempt in 2006 to locate absent birth parent regarding adoption proceedings	Letter of apology to customer. £300 remedial payment in recognition of the lost opportunity to attend the adoption hearing and the distress caused as a consequence. Enhanced processes for obtaining contact data of absent parent from third parties.
Education and Childrens Services	Inaccurate information provided to a child protection conference. The Council had acted since to ensure the records clearly reflected that the information was inaccurate.	As the Council had already remedied the injustice, although fault was found, no further corrective action was required.
Environmental Services & Public Protection & Regulation	Faults in how the Council dealt with the complainant about the expiry of a lease for a memorial at the crematorium	Letter of apology to customer £300 remedial payment in recognition of injustice Improved information to be given to customers purchasing memorials
Highways & Transport	Faults in the way an application for a parking permit was processed resulting in two Penalty Charge Notices (PCN) being issued	As the Council had already agreed to cancel the PCNs and pay £50 in recognition of time and trouble, no further action was required by the LGO
Housing	Delays and failures in dealing with a housing application and in making a referral to the direct let process for an adapted property	£250 remedial payment in recognition of time and trouble Provision of agreed information to complainant OT assessments and works to be completed to an agreed timetable
Planning & Development	No fault was found in the way in which a planning application complained of had been considered, but there was fault in the delay in replying to the related complaint.	The Council's previous apology and explanation for the delay was considered sufficient remedy and no further action was required by the LGO

Compliments Concerns & Complaints received throughout 2017-18 for Adult Social Care Services

1. Purpose of Report

- 1.1 To discharge the local authority's statutory duty to produce an annual report on compliments concerns and complaints received about its adults' social care function throughout the year.
- 1.2 To provide statistical and performance information about compliments concerns and complaints received throughout 2017 / 2018.

2. Recommendation

- 2.1 To note the Council's performance in relation to Compliments, Concerns and Complaints in 2017/18 for Adult Social Care Services.
- 2.2 That the report be referred to the People Scrutiny Committee for further consideration.

3. Background

- 3.1 The Local Authority Social Services and National Health Service Complaints (England) Regulations 2009 came into force on 1 April 2009 and created a single process for health and social care services. With the increase in integrated services, the single process makes it easier for patients and service users to make complaints and allows them to make their complaint to any of the organisations involved in their care. One of the organisations will take the lead and co-ordinate a single response.
- 3.2 The new process is based on the principles of the Department of Health's *Making Experiences Count* and on the Ombudsman's principles of good complaints handling:
 - Getting it right
 - Being customer focused
 - Being open and accountable
 - Acting fairly and proportionately
 - Putting things right
 - Seeking continuous improvement.
- 3.4 There is a single local resolution stage that allows a more flexible, customer focused approach to suit each individual complainant. At the outset, a plan of action is agreed with the complainant to address their complaint. Amendments to the plan can be agreed at any stage of the process.

- 3.5 The regulations do not specify timescales for resolution and a date for response is agreed and included in each plan. Response times are measured against the agreed dates in the plans.
- 3.6 When the local authority believes that it has exhausted all efforts to achieve a local resolution, and the customer remains dissatisfied, the next step is referral to the Local Government Ombudsman.

4 Overview of Compliments; Concerns and Complaints received in 2017/2018

a. Compliments

Compliments are a very important feedback and motivational tool and members of staff are encouraged to report all compliments they receive to the Customer Services Manager for recording. All compliments are reported to the Group Manager of the Service to pass on their thanks to the staff member and the team. This practice has been well received by staff.

Adult and Community Services received 94 compliments about its social care services in 2017/2018.

Table to show the number of compliments received in 2017/2018 and a comparison with previous three years

Apr 14 – Mar 15	Apr 15 – Mar 16	Apr 16 – Mar 17	Apr 17 – Mar 18
Number	Number	Number	Number
407	341	269	94

The reduction compliments in 2017-18 is due to the transfer of some front line services to Southend Care.

The use of Compliments is very tenuous benchmark for Customer Satisfaction as unlike complaints that require specific action by the recipient, compliments can easily be forgotten and not formally logged due to focusing on more urgent day to day activities.

Compliments and complaints are the extreme indicators of Customer Satisfaction, however there is still a large number service users who have not recorded a complaint or compliment, which suggests they are satisfied with the service.

4.3 Concerns

The current regulations require the local authority to record concerns and comments as well as complaints. Some people wish to provide feedback to help improve services but they do not wish to make a complaint, and this process facilitates that.

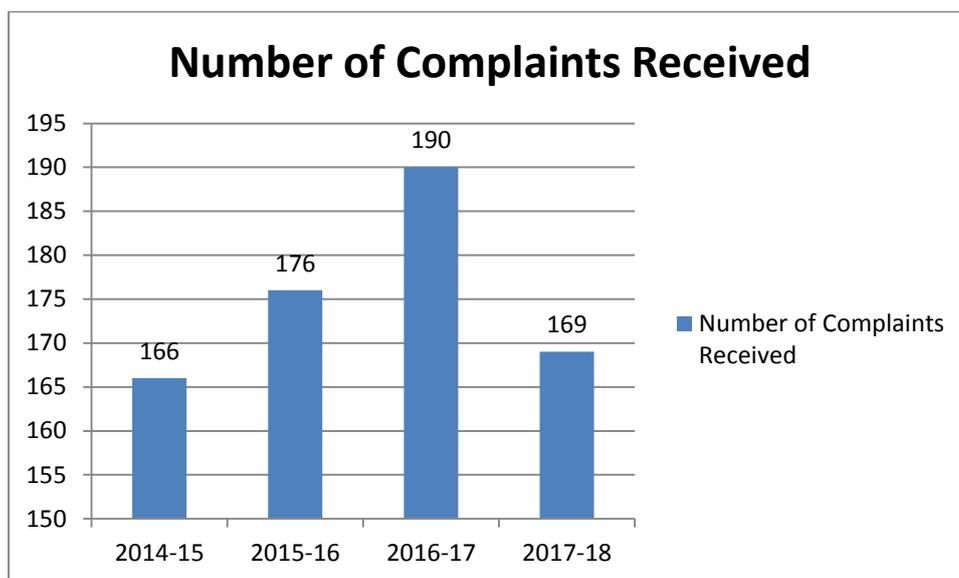
Adult and Community Services didn't received any feedback to be logged as a 'concern' about its social care services in 2017/2018.

All concerns and comments are considered to identify areas for improvement and responses are made where appropriate or requested.

4.4 Complaints

Adult Services received and processed a total 169 statutory complaints about its statutory social care services in 2017/2018.

The Graph to show the total number of complaints received and processed by Southend-on-Sea Borough Council during 2017/2018 and comparison with previous three years.



This represents a decrease of 11% in the number of complaints received and processed during the previous year. The reduction has been seen in complaints received by our commissioned providers. Contributory factors to this reduction would be an additional Contracts Officer with a focus on Care & Reablement. Also post implementation of the Care and Reablement contract, has provided increased stability in the care market.

The number of complaints is low, representing 3.6% of the adults that we provided a service to in 2017/18.

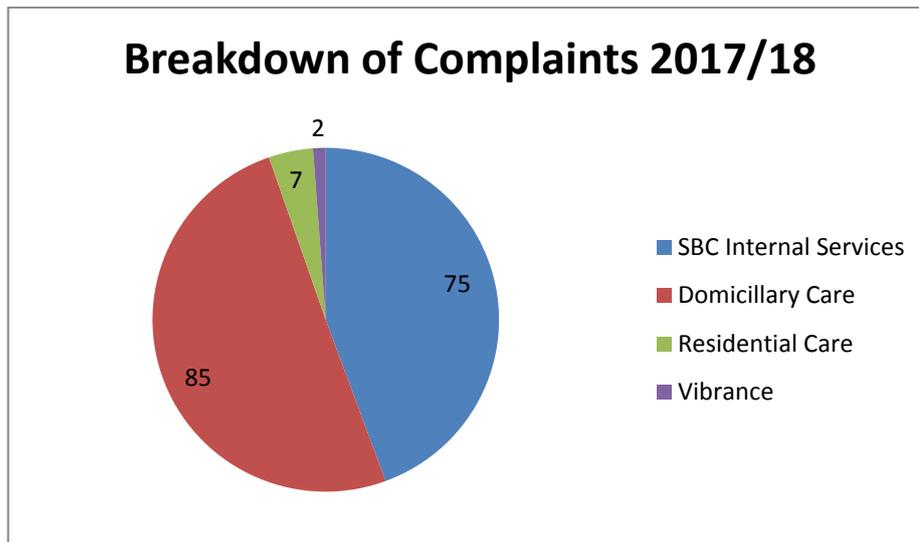
Overall Response Times

Adherence to response times is measured by compliance with the agreed dates set out in the individual complaints plans. There is no statutory requirement with regards to response timescales, however we recognise the importance of trying to achieve a speedy resolution to complaints and generally aim to resolve complaints within 10 working days in line with the Corporate Complaints Procedure. However depending on the complexity of the complaint raised, agreement is made with complainants on an acceptable timescale for a response.

Out of the 163 complaints who received a full response, 92 complaints were responded to within the initial timescales agreed locally between the complaints service and the complainant. This represents 56.4% of responses made and is an increase of 1.7% on the previous year. Whilst every effort is made to meet the timescales agreed, if it transpires through the course of the investigation this will not be possible, the complainant is kept informed and updated accordingly.

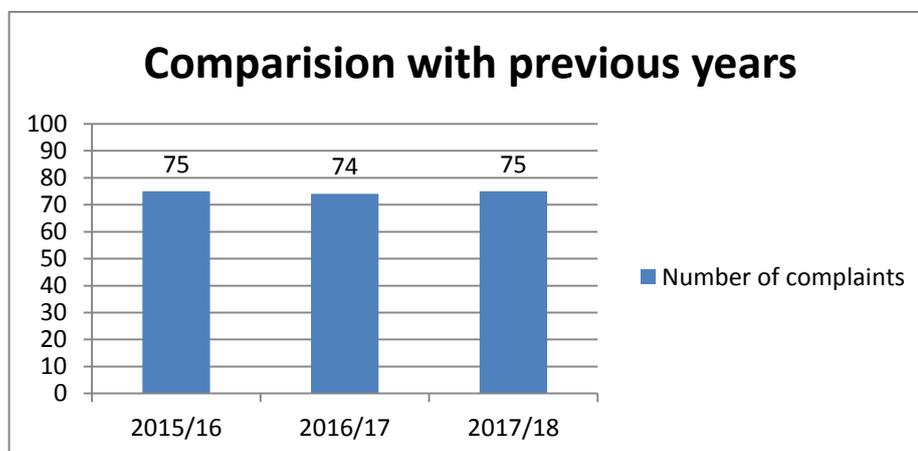
Under the current regulations, any complaints received verbally and resolved to the complainant's satisfaction within 24 hours do not have to be recorded as complaints. We received 5 of these within 2017/18.

Breakdown of Complaints by Service Area



5 Complaints about Internal Southend Council Services

Out of the total 169 complaints received 75 Complaints were received regarding Internal Southend Council Services. This has remained consistent year on year



Of the 75 complaints responded to, 38 complaints (54.3%) were given a full response within the timescales agreed.

Some Complainants raise more than one issue therefore the 75 complaints raised related to 79 Issues.

Of these 79 Issues –

- 31 were upheld
- 10 were partially upheld
- 32 were not upheld
- 2 were unable to reach a finding
- 4 were withdrawn / not progressed

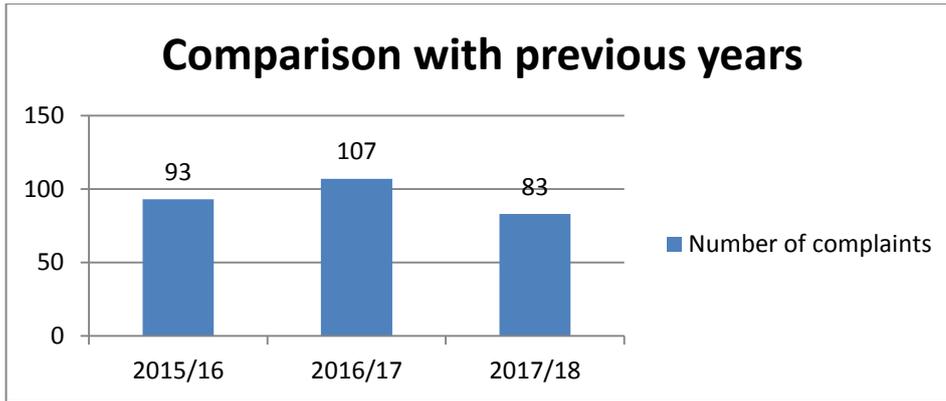
The top four issues were :-

	<i>Total</i>	<i>Outcome</i>
Communication/consultation	22	8 Not upheld
Conduct/behaviour of staff	11	6 Not upheld
Invoice Query	11	4 Not upheld
Outcome of decision / assessment	10	5 Not upheld

6 Complaints about services from Commissioned Providers

6.1 Domiciliary Care

Of the 169 complaints received by Southend Council, 85 were about Domiciliary Care Providers. This is a reduction 22.4% on 2016/17.



Of the 85 complaints that received a full response, 49 (59%) were responded to within the timescales agreed.

85 complaints related to 110 issues that were raised.

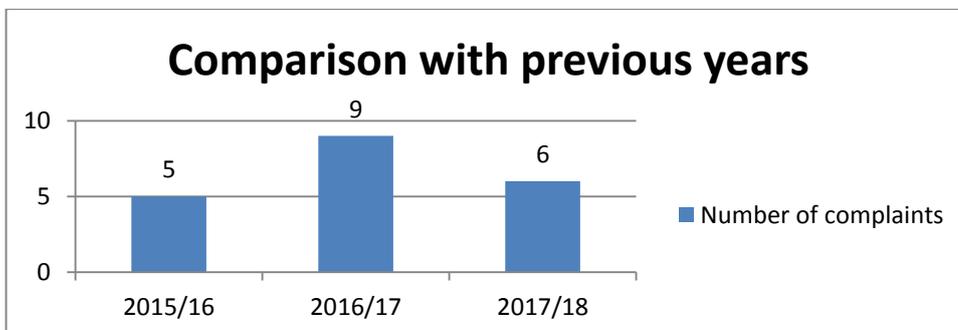
Of the 110 Issues raised – 63 were upheld
 17 were Partially upheld
 15 were not upheld
 4 were not progressed or withdrawn
 11 were unable to reach a finding

The top four issues were :-

	<i>Total</i>	<i>Outcome</i>
Missed calls	31	10 Not upheld
Late calls	21	All were upheld
Quality of Care	20	6 Not upheld
Timing of homecare calls	11	1 Not upheld

6.2 Residential Care

6 complaints were received about Residential Care homes. This represents 0.5% of the number of adults currently in a Residential home.



4 were responded to with the timescale agreed

The main issues were around the quality of care

Our Contracts Team and Complaints Team continue to work with the residential and domiciliary care providers to address issues and effect improvements around complaints handling.

7.0 EPUT

- 7.1 Southend Borough Council commissions Essex Partnership University Trust (EPUT, formally known as SEPT) to provide its mental health and substance misuse services and EPUT received 6 complaints from Southend clients. 1 was not upheld and 5 were partially upheld. These were dealt with by EPUT and are not included in the figures above.

8. Complaints referred to the Local Government Ombudsman

- 8.1 There was one adult social care complaint referred to the Local Government Ombudsman in 2017/2018. However the LGO decided not to investigate as the final decision had not yet been made by the Council regarding his complaint.

9. Monitoring & Reporting

- 9.1 Statistical data regarding complaints about our commissioned home care providers are provided quarterly to inform the Contract Monitoring Meetings.
- 9.2 Complaints are monitored by the Complaints Manager for any trends/emerging themes and alerts the relevant service accordingly.
- 9.3 Complaints information is fed into the monthly operational meetings where issues regarding providers are shared. This is to ensure that a full picture is gathered regarding the providers service delivery and identify any concerns or trends that may be emerging.

10. Learning from Complaints

- 10.1 The Council continues to use complaints as a learning tool to improve services and to plan for the future. Local authorities are being asked to show what has changed as a result of complaints and other feedback that it receives.
- 10.2 Improvements made in 2017/18, as a result of complaints:-
- Revised and updated the Financial Information booklet, to provide more comprehensive information about the different services and their charges so they are all available in one place.
 - The contracts team have worked with spot providers to move them over to the use of CM2000 to enhance the accuracy of charging for domiciliary care.
 - The contracts team have also continued to promote the facility on CM2000 to provide real time alerts for late visits, with a view to reduce the number of calls resulting in missed visits.

- Increase in resource to the Contracts Team to focus on Care & Reablement and the use of CM2000.

11. Corporate Implications

11.1 Resource Implications (Finance, People, Property).

If resolutions are not found at an early stage and there are undue delays, compensation may have to be paid to acknowledge the time and trouble that the complainant has expended.

In some cases, the initial input in terms of staff time to find a resolution through a meeting/conciliation may be quite intensive but where the complainant has an ongoing relationship with the service, it can save resources in the long term.

11.2 Contribution to Council's Vision & Critical Priorities

A robust and responsive complaint handling process adds to the public's confidence and satisfaction with the way they are dealt with by the local authority when they have concerns to raise.

Effective complaints handling and a well-advertised procedure contributes to the corporate priorities:

- EXCELLENT - Work with and listen to our communities and partners to achieve better outcomes for all
- SAFE - Look after and safeguard our children and vulnerable adults

11.3 Equalities and Diversity Implications

All those involved in dealing with complaints are mindful of ensuring a consistent approach with all complainants in line with Equalities principles.

Appendix C

Compliments and Complaints relating to Children's Social Care Services

1. Purpose of Report

- 1.1 To fulfil the local authority's statutory duty to produce an annual report on compliments and complaints received about its children's social care function throughout the year.
- 1.2 To provide statistical and performance information about compliments and complaints received from April 2017 to March 2018 at all three stages of the statutory process.

2. Recommendation

- 2.1 To note the Council's performance in relation to Compliments and Complaints in 2017/18 for children's Social Care Services.
- 2.2 That the report be referred to the People Scrutiny Committee for further consideration.

3. Background

- 3.1 Complaints in the children's services are of 2 types, statutory and Corporate. The law also says that children and young people (or their representative) have the right to have their complaint dealt with in a structured way. The statutory procedure will look at complaints, about, for example, the following:
 - An unwelcome or disputed decision
 - Concern about the quality or appropriateness of a service;
 - Delay in decision making or provision of services;
 - Attitude or behaviour of staff
 - Application of eligibility and assessment criteria;
 - The impact on a child or young person of the application of a Council policy
 - Assessment, care management and review.
- 3.2 The Corporate Complaint Procedure would be used when issues giving rise to the complaint fall outside the scope of the statutory procedure.

- 3.3 Most of the complaints are statutory. The process for complaints regarding children's statutory services has three stages. Stage 1 affords an opportunity to try to find a local resolution usually at team manager level. If the complainant is not satisfied with the outcome, they may request to proceed to stage 2. At stage 2, the Department appoints an Investigating Officer, and an Independent Person to investigate the complaint. The Investigating Officer is a senior children's service worker who has not been associated with the case, and the Independent Person is someone who is not employed by the council, but has experience of children's issues, social care or investigations. The stage 2 response is reviewed and approved by the Director of Children's Services. If the complainant is still not satisfied, they may proceed to stage 3. At this stage, the complaint is referred to an Independent Review Panel of three independent panel members with one member acting as Chair. They will review the stage 2 investigation and outcome, and will make recommendations. These recommendations are reviewed by the Deputy Chief Executive, who formally responds to the complainant. The process is based on the premise that at each stage, a more senior officer responds on behalf of the Department. If complainants remain dissatisfied at the end of the three stages, they may refer their complaint to the Local Government Ombudsman.
- 3.4 The Complaints team encourages and supports Team Managers to resolve complaints at the earliest stage, including before they become formal complaints. We also advise a face to face meeting regarding the issues before the formal stage 2 process is started. This is thought to resolve the outstanding issues as early in the process as possible and in a way which many find less formal and adversarial.
- 3.5 There are also 3 stages in the process for corporate complaints. Stage 1 is the same as in the statutory process. If this does not resolve the complaint then the Corporate Director or Head of the Service you are complaining about will investigate the issue. If you are still dissatisfied, you have the right of appeal to the Council's Chief Executive and Leader of the Council, who will consider your appeal.
- 3.6 The numbers of compliments and complaints indicated in this report may not reflect the quality of the support generally provided by the social work teams, rather they are the opposite ends of our client satisfaction range, meaning that the majority of service users and their families are satisfied with the professional support provided.

4. Compliments received in 2017/18

- 4.1 We received 24 compliments during this year, a slight increase on 2016/17 when we received 20.
- 4.2 The numbers of compliments is a relatively small proportion of our child client base. An issue with compliments is that unlike complaints they do not need a specific response, and so there is a possibility that some compliments may not be passed on to the complaints team to be formally logged.

5. Complaints received in 2017/2018

5.1 Stage 1

NUMBER OF COMPLAINTS.

This year we have had a total of 81 complaints, to put this in context in 2016/17 we had 129 complaints. The reduction is significant in both statutory and corporate complaints, with an overall reduction of 37% since 2016/17.

LEGAL STATUS OF COMPLAINT	2016/17	2017/18	change	% change
TOTAL COMPLAINTS	129	81	-48	-37%
STATUTORY COMPLAINT	91	60	-31	-34%
CORPORATE COMPLAINT	38	21	-17	-45%

The reduction is also spread across both of the main social work functions. The largest reduction is in the First Contact area, with a reduction of 53% from 2016/17. The Care Management teams also show a significant reduction in complaints.

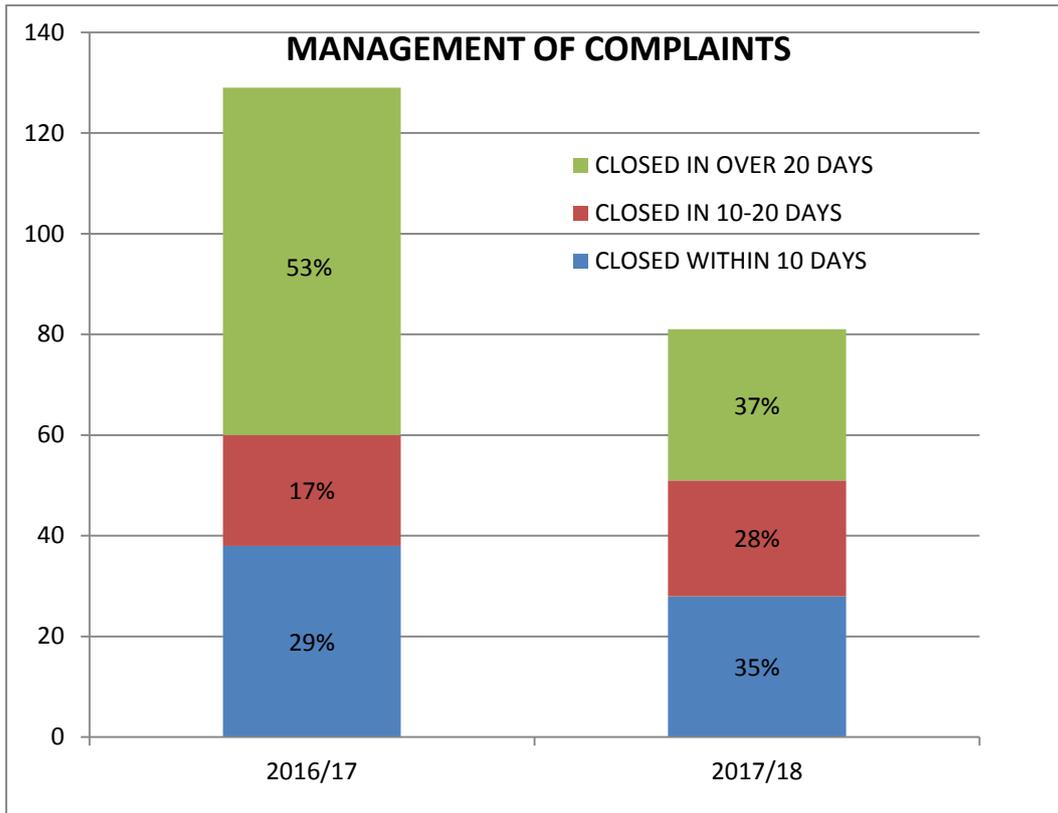
TEAM	2016/17	2017/18	change	% change
TOTAL COMPLAINTS RECEIVED	129	81	-48	-37%
FIRST CONTACT	59	28	-31	-53%
CARE MANAGEMENT	47	30	-17	-36%
OTHER	23	23	0	0%

MANAGEMENT OF COMPLAINTS

The performance in the timeliness of response to the complaints has improved in 2017/18 from 2016/17. The information below demonstrates the greater efficiency in responding to complaints.

RESPONSE TIMESCALES	2016/17		2017/18	
	WITHIN 10 DAYS	38	29%	28
10-20 DAYS	22	17%	23	28%
OVER 20 DAYS	69	53%	30	37%
TOTAL COMPLAINTS	129		81	
CLOSED IN 20 W/DAYS	60	47%	51	63%

The proportion closed within 20 working days has improved from 47% to 63%. The improvement is greatest for the closure period 10-20 days, but the highest closure proportion, 35%, is for the period up to 10 days. This improvement means that the responses taking more than 20 days has fallen from 53% to 37%.



5.2 Stages 2 and 3

So far of the complaints made in 2017/18, 6 have gone to stage 2, and of these, 2 opted to proceed to stage 3. However, as we are relatively close to the year end, it needs to be noted that some complainants may still decide to proceed to stage 2 of the process.

Of the 4 complaints which have been concluded at stage 2, we are aware that 2 of them are in the process of escalating their complaint to stage 3 of the process. In 2016/17, 11 complaints went to beyond stage 1 of the complaints process to stages 2 and possibly 3.

In order to reduce the numbers of complaints being escalated beyond stage 1 of the complaints process, we advise the complainant and suggest that they meet with the social work manager/staff involved to discuss the issue and hopefully resolve it in a constructive way rather than the more formal and time consuming stage 2 process.

5.3 Complaints by children

Children are defined as those who are under 18 years old. In 2016/17 3 children made complaints, in 2017/18 the number is 4. In addition, there were 2 complaints made by people aged 18 to 19.

All children and young people who have made a complaint in 2017/18 did so using an advocate. Any young person wishing to make a complaint and who does not have an advocate is offered the services of one.

6. Outcomes

In 2017/17 after investigation of each complaint at stage 1, 53 or 65% were found to be correct actions on the part of the staff involved. The remaining 28 complaints were either resolved with an apology or with specific action, such as a reassessment or a meeting with senior social workers to discuss future plans and learning from the current situation.

DECISION	2016/17		2017/18	
	Count	Percentage	Count	Percentage
Apology	14	11%	13	16%
Specific action	19	15%	15	19%
Process Review	1	1%	0	0%
compensation	1	1%	0	0%
Action was correct. No remedy required	94	73%	53	65%
TOTAL	129		81	

6.1 Local Government Ombudsman

We are aware that the LGO was involved in and decided on 3 complaints during 2017/18, although they all started in 2016/17. So far we are not aware of any complaints from 2017/18 going to the LGO.

6.2 Developments in the complaints process

- The regular production of information around complaints for the Team Managers and Group Managers has helped to focus on the consistent responses to the complaints received.

6.3 Learning from Complaints

The Council continues to welcome complaints as a means of improving services and to plan for the future. Local authorities are being asked to show what has changed as a result of complaints and other feedback it receives.

Improvements made in 2017/18 as a result of complaints;

- Revised the information provided and the process on Special Guardianship Orders. This has made the process clearer and easier for those families using it. These changes have been publicly acknowledged by the Local Government Association.
- Earlier intervention by team managers has helped reduce the numbers of issues which develop into formal complaints.
- Following a Stage 1 response if the complainant remains dissatisfied, a meeting can be offered with a manager to try to resolve the issues and avoid going to stage 2 of the complaints process.

7. Areas for improvement

- 7.1 In order to confirm the independence of panel members, we will explore the possibility of using more lay or voluntary people to sit on the panels at stage 3 of the statutory process.

8. Corporate Implications

8.1 Resource Implications (Finance, People, Property).

If resolutions are not found at an early stage and there are undue delays, compensation may have to be paid to acknowledge the time and trouble that the complainant has expended.

In some cases, the initial input in terms of staff time to find a resolution through a meeting/conciliation may be quite intensive but where the complainant has an ongoing relationship with the service, it can save resources in the long term.

8.2 Contribution to Council's Vision & Critical Priorities

A robust and responsive complaint handling process adds to the public's confidence and satisfaction with the way they are dealt with by the local authority when they have concerns to raise.

Effective complaints handling and a well-advertised procedure contributes to the corporate priorities:

EXCELLENT - Work with and listen to our communities and partners to achieve better outcomes for all

SAFE - Look after and safeguard our children and vulnerable adults

8.3 Equalities and Diversity Implications

All those involved in dealing with complaints are mindful of ensuring a consistent approach with all complainants in line with Equalities principles.

Southend-on-Sea Borough Council

Agenda
Item No.

Report of Deputy Chief Executive (People)

To
Cabinet

On

18 September 2018

Report prepared by:

Catherine Braun, Head of Access and Inclusion

Chrissy Papas, Pupil Access Manager

**School Admissions Arrangements for Community Schools 2020/21,
the Coordinated Admission Scheme for Academic year 2020/21 and
review of the relevant area**

**Executive Councillor: Councillor Helen Boyd
Part 1 (Public Agenda Item)**

1. Purpose of Report

- 1.1. To confirm the admission arrangements for community schools for the academic year 2020/21.
- 1.2. To confirm the Coordinated Admissions Scheme for 2020.
- 1.3. To review and agree to the relevant area

2. Recommendations

- 2.1. **To approve the proposed Admissions Arrangements for Community Schools for the academic year 2020/21 as set out in Appendix 1 and agree no requirement for public consultation as no further changes are proposed.**
- 2.2. **That consultation with governing bodies of community schools takes place on the published admission number (PAN) for community infant, junior and primary schools for September 2020 as set out in the Admission Arrangements in Appendix 1**
- 2.3. **To approve the proposed Coordinated Admissions Scheme for 2020 onwards, as set out in Appendix 2.**
- 2.4. **That the relevant area for schools is reviewed and agreed as follows: Southend, Castle Point and Rochford for the years 2020 and 2021 (item 6 below).**

3. Background Statutory Framework

- 3.1. The Council has the responsibility to determine the following in relation to school admissions:
- a) the Admission Arrangements for Community Schools (admission numbers, admission criteria and catchment areas); and
 - b) the Coordinated Admissions Scheme, which sets out the way in which admissions for all schools (including academies and other own admission authority schools) will operate.
- 3.2. A reminder of the School Admissions Code 2014, item 15 states:
*“Admission authorities **must** set (‘determine’) admission arrangements annually. Where changes are proposed to admission arrangements, the admission authority **must** first publicly consult on those arrangements. If no changes are made to admission arrangements, they must be consulted on at least once every 7 years..., consultation must be for a minimum of 6 weeks and must take place between 1 October and 31 January of the school year before those arrangements are to apply”.*
- 3.3. For community schools, if there are no changes, the local authority (as the admission authority) must consult on the admission arrangements every 7 years. The Council last consulted on the 2019 arrangements. **There are no changes proposed for 2020.** The next time we have a duty to consult will be for the 2026 arrangements (unless changes are proposed before this time).
- 3.4. The local authority (as the admission authority for community schools) must consult the governing body of each community school where it proposes either to increase or keep the same published admission number (PAN). **The proposal is to keep the same PAN for all schools.**
- 3.5. Schemes for coordinating all admission applications to schools must be formulated and submitted to the Department for Education (DfE) by 1 January in the determination year. For the school year commencing September 2020, submission to the DfE must be submitted by 1 January 2019. Consultation on the scheme is mandatory every seven years or where substantial changes are being made. Southend-on-Sea Borough Council consulted admission authorities for the 2019 scheme. Due to no substantial changes being made for the 2020 scheme (only minor clarifications), consultation for 2020 is not required.
- 3.6. The School Admissions guidance requires Local Authorities to determine every two years a “relevant area” for the purposes of admissions. This defines the area in which admission authorities consult on admission arrangements. The area of Southend, Castle Point and Rochford has been in place for many years and is most appropriate for consultation given that a significant number of pupils access provision in schools in those areas.

Admission Arrangement for 2020/21 Admission Criteria

- 3.7. There are no proposed changes from the previously consulted 2019/20 admission arrangements. There is therefore no requirement to consult for 2020/21. The admission criteria for community primary schools for September 2020/21 are shown in **Appendix 1**.

Published Admission Numbers

- 3.8. There are currently no proposed changes to the Admission Limits from 2019/20. However, Governing Bodies of community schools will have the opportunity to inform the local authority if they wish to comment on the proposal of no change. The proposed admission limits for all community primary schools for September 2020/21 are shown on **Page 2** of the Admission Arrangements for Community Schools at **Appendix 1**.

Catchment Areas

- 3.9. The proposed catchment areas for primary schools for September 2020 are identified within the Admission Arrangements in **Appendix 1**. **There are no proposed changes from 2019/20.**

Primary and Secondary Co-ordinated Admissions Scheme for the September 2020 round of admissions

- 3.10. Consultation rules for coordinated arrangements require the local authority to consult with other admission authorities in the area and other local authorities if there are changes from the previous year's scheme. Minor changes are proposed for the coordinated scheme for 2020. **Appendix 2**, recommends some minor changes as set out below in paragraphs 3.11 to 3.17 of this report.

3.11. Minor changes for correction or to provide further clarity only relates to items 1.2, 3.1, 3.2, 4.2.8, 4.3 and 4.4.1

3.12. Add for clarity - Late and new preferences/applications will be slotted into the waiting lists by Southend-on-Sea Borough Council in line with school admission arrangements. This will include using new address details where relevant and re-ranking applications to appropriate positions, (item 4.4.2 on scheme).

3.13. Add as required. The admission into school for children previously in care but outside of an England school be ranked in the same category as LAC/PLAC for all schools, (ref to letter dated 4th Dec 2017, Rt Hon Nick Gibb MP). Letter on SBC website http://www.southend.gov.uk/downloads/file/5484/rt_hon_nick_gibb_mp_-_letter_re_admission_of_children_adopted_from_care_outside_of_england (item 4.6.3 on scheme).

3.14. Add for clarity. Where appropriate, the withdrawal letter will be signed by both Southend-on-Sea Borough Council and the admission authority, (item 4.7.5 on scheme).

3.15. Add for clarity. In all situations, Southend-on-Sea Borough Council must be satisfied that it is the children's normal/habitual place of residence, (Item 4.7.6 on scheme).

3.16. Add as required. Southend-on-Sea Borough Council will rank/re-rank pupils with address changes, late and new applications, according to school admission arrangements and after all on time offers are made or on the waiting list as appropriate, (item 4.9.7 on scheme).

3.17. Add as required. Own admission authorities will record all appeals and provide the data to Southend-on-Sea Borough Council after all appeals are heard, no later than the 17th July or nearest working day, (item 4.10.9 on scheme).

3.18. As the coordinated admission scheme has not changed significantly from the version adopted for 2019 schools in the borough will be informed of the minor changes and no consultation will be run.

Background information on the relevant area

3.19. The “relevant area” for Southend, must include all of the Borough of Southend but may include parts of Essex. An area could be included in more than one “relevant area”, which would be the case if any part of Essex was included.

3.20. In view of the considerable cross border movement it is recommended that the “relevant area” for Southend includes the areas of Castle Point and Rochford in addition to the Borough of Southend-on-Sea.

3.21. The relevant area will be extended to primary schools in Southend to consult the same area as the Secondary sector given the level of cross border admissions. Currently Primary schools do not consult Castle Point and Rochford schools, therefore this is the only change for the years 2020 and 2021 from previous years.

4. Other Options

4.1. The Council could decide to publically consult on 2020/21 Admission Arrangements for Community Schools and Coordinated Admissions Scheme. Due to proposing no changes to arrangements and only changes to tighten clarifications within the scheme, public consultation is unnecessary.

4.2. Not undertaking a public consultation does not change the requirement that Southend-on-Sea Borough Council must consult Governors of community schools on their PAN and inform schools of the minor changes to the coordinated scheme.

5. Reasons for Recommendations

5.1. The Council is not proposing any changes for admission criteria or catchment areas for community schools. Due to no change, there is no requirement for a public consultation.

5.2. The Council will consult individually the Governing Bodies of community schools as required for increased or unchanged PAN's. No changes have been proposed.

5.3. The Council is required to publish the Co-ordinated Admissions Scheme 2020/21, by 1 January 2019. Cabinet is asked to approve the proposed scheme.

5.4. The relevant area will be adopted as proposed, no consultation required.

5.5. A report will be presented to the January Cabinet to formally approve the PAN's and to formally determine the admission arrangements.

6. Corporate Implications

6.1 Contribution to Council's Vision & Corporate Priorities

These arrangements will assist pupils within the Borough to access quality learning opportunities to achieve the best possible outcomes for all children.

6.2 Financial Implications

There are no direct financial implications for the Council. The administration of school admission, and core revenue funding for the running of a School is funded through the Dedicated Schools Grant.

6.3 Legal Implications

The determination of admission arrangements for community schools and the provision of a coordinated admissions scheme is a statutory requirement.

6.4 People Implications

None

6.5 Property Implications

None

6.6 Consultation

A full public consultation for community schools which reviewed the catchment areas and admission limits was undertaken for the admission arrangements 2019/20. As there are no changes for community school admission arrangements proposed for 2020 there is no requirement to consult.

A consultation on the coordinated scheme was undertaken, with all schools in the area, for the 2019/20 round and as there are minor changes to the 2020 scheme no consultation is proposed.

6.7 Equalities and Diversity Implications

A coordinated admissions scheme and clear oversubscription criteria are necessary to ensure fair access to school places. Admission Arrangements for Community Schools and the Coordinated Admission Scheme for Southend Schools have been written in line with mandatory requirements set by the Admissions Code 2014. The code determines that authorities must ensure that the practices and criteria used to decide the allocation of school places are fair, clear and objective and that parents should be able to easily understand how places are allocated.

In line with the Equality Act 2010, the arrangements and scheme are reviewed annually against an expanded list of protected characteristics as identified within the Admission Code: disability; gender reassignment; pregnancy and maternity; race; religion or belief; sex; and sexual orientation.

The proposed Scheme, arrangements and decisions made through their administration are clear that there is no discrimination on the grounds of disability; gender reassignment; pregnancy and maternity; race; religion or belief; sex; or sexual orientation, against a parent who is applying for a school place or offered admission as a pupil.

There are limited exceptions to the prohibition of discrimination on grounds of religion or belief and sex. Schools designated by the Secretary of State as having a religious character are exempt from some aspects of the prohibition of discrimination on the grounds of religion or belief and this means they can make a decision about whether or not to admit a child as a pupil on the basis of religion or belief. Single-sex schools are lawfully permitted to discriminate on the grounds of sex in their admission arrangements.

6.8 Risk Assessment

If the Council does not agreed a scheme, one will be imposed by the DfE, and the Council's reputation will suffer.

6.9 Value for Money

No direct implications.

6.10 Community Safety Implications

None envisaged.

6.11 Environmental Impact

None envisaged

7. Background Papers

7.1. School Admissions Code 2014 —

<https://www.gov.uk/government/publications/school-admissions-code--2>
and School Admission Appeals Code 2012 -

<https://www.gov.uk/government/publications/school-admissions-appeals-code>

8. Appendices

8.1. Appendix 1 — Proposed Admissions Arrangements for Community Schools for September 2020 including Published Admission Numbers on Page 2.

8.2. Appendix 2 - Proposed Co-ordinated Admissions Scheme for September 2020 onwards.

**Determined Admissions Arrangements
for Community Schools
for September 2020/21**

For office use – statutory process: The School Admissions Code 2014

	Last full consultation 2019/20, same as 2019/20 no change for 2020/21. Only addition of clarity of overseas PLAC.
13 September 2018	Arrangements for Admission forum
18 September 2018	Cabinet
19 Sept – 31 October 2018	PAN consultation with Governing Bodies of community schools
TBC January 2018	Admission arrangements to Cabinet/council for Determination
28 February 2019	Final Determined Admission Arrangements
15 March 2019	Publication of Composite Prospectus of Determined Arrangements
16 March – 15 May 2019	Window for Objections to the School Adjudicator.
12 September 2019	Final arrangements for 2020 are published in the Primary booklet

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1. Introduction

Southend-on-Sea Borough Council is the admission authority for all community schools in the borough. This document sets out the formal policies for all borough community. The arrangements below, including the explanatory notes, are in line with government legislation and guidance (School Admissions Code 2014) and designed to ensure there is a fair, clear and reasonable admissions procedure for all applicants, and to help guide parents through the application process.

These arrangements apply to all admissions, including in-year admissions for the admission year 2020.

2. Community Schools Published Admissions Number 2020/21

Community Primary Schools	Proposed admission limit for 2020/21, for each year group
Barons Court Primary School & Nursery	35
Chalkwell Hall Infant School	120
Chalkwell Hall Junior School	120
Earls Hall Primary School	90
Edwards Hall Primary School	60
Fairways Primary School	60
Heycroft Primary School	60
Leigh North Street Primary School	90
Temple Sutton Primary School	120
West Leigh Infant School	120

3 Oversubscription criteria for community schools

Criteria are set for each individual school below and apply to all year groups for the year 2020. Explanatory notes, below, apply to all community school arrangements. The published admission limit for community schools is provided above.

If at the closing date for applications, there are not enough places for all those who have expressed a wish to have their child admitted to a community school; places will be allocated using the admission criteria as below. This will not apply to children with a statement of special educational needs (SEN) or Education, Health and Care (EHC) plans as the plan/statement names the school and therefore the child must be admitted to the named school. The admission criteria are listed below by school with explanatory notes following:

Barons Court Primary School & Nursery

1. Looked after children and previously looked after children;
2. Children who appear to Southend-on-Sea Borough Council to have been in state care outside of England and ceased to be in state care as a result of being adopted;
3. Pupils who live in the catchment area who have a sibling attending the school;
4. Pupils who live in the catchment area;
5. Pupils who live outside the catchment area who have a sibling attending the school;
6. Pupils of staff at the school;
7. Pupils who live outside the catchment area.

(for all criteria, catchment area map and additional information please see explanatory notes and maps below)

Chalkwell Hall Infant School

1. Looked after children and previously looked after children;
2. Children who appear to Southend-on-Sea Borough Council to have been in state care outside of England and ceased to be in state care as a result of being adopted;
3. Pupils who live in the catchment area who have a sibling attending the school or Chalkwell Hall Junior School;
4. Pupils of staff at the school;
5. Pupils who live in the catchment area;
6. Pupils who live outside the catchment area who have a sibling attending the school or Chalkwell Hall Junior School;
7. Pupils who live outside the catchment area.
(for all criteria, catchment area map and additional information please see explanatory notes and maps below)

Chalkwell Hall Junior School

1. Looked after children and previously looked after children;
2. Children who appear to Southend-on-Sea Borough Council to have been in state care outside of England and ceased to be in state care as a result of being adopted;
3. Pupils attending year 2 at Chalkwell Hall Infant School;
4. Pupils who live in the catchment area who have a sibling attending the school or Chalkwell Hall Infant School;
5. Pupils of staff at the school;
6. Pupils who live in the catchment area;
7. Pupils who live outside the catchment area who have a sibling attending the school or Chalkwell Hall Junior School;
8. Pupils who live outside the catchment area .
(for all criteria, catchment area map and additional information please see explanatory notes and maps below)

Earls Hall Primary School

1. Looked after children and previously looked after children;
2. Children who appear to Southend-on-Sea Borough Council to have been in state care outside of England and ceased to be in state care as a result of being adopted;
3. Pupils who live in the catchment area who have a sibling attending the school;
4. Pupils of staff at the school;
5. Pupils who live in the catchment area;
6. Pupils who live outside the catchment area who have a sibling attending the school;
7. Pupils who live outside the catchment area .
(for all criteria, catchment area map and additional information please see explanatory notes and maps below)

Edwards Hall Primary School

1. Looked after children and previously looked after children;
2. Children who appear to Southend-on-Sea Borough Council to have been in state care outside of England and ceased to be in state care as a result of being adopted;
3. Pupils who live in the catchment area who have a sibling attending the school;
4. Pupils who live in the catchment area;
5. Pupils of staff at the school;
6. Pupils who live outside the catchment area who have a sibling attending the school
7. Pupils who live outside the catchment area
(for all criteria, catchment area map and additional information please see explanatory notes and maps below)

Fairways Primary School

1. Looked after children and previously looked after children;
2. Children who appear to Southend-on-Sea Borough Council to have been in state care outside of England and ceased to be in state care as a result of being adopted;
3. Pupils who have a sibling attending the school;
4. Pupils who live in the catchment area;
5. Pupils of staff at the school;
6. Pupils who live outside the catchment area .
(for all criteria, catchment area map and additional information please see explanatory notes and maps below)

Heycroft Primary School

1. Looked after children and previously looked after children ;
2. Children who appear to Southend-on-Sea Borough Council to have been in state care outside of England and ceased to be in state care as a result of being adopted;
3. Pupils who live in the catchment area and have a sibling attending the school;
4. Pupils who live in the catchment area;
5. Pupils of staff at the school;
6. Pupils who live outside the catchment area who have a sibling attending the school;
7. Pupils who live outside the catchment area.
(for all criteria, catchment area map and additional information please see explanatory notes and maps below)

Leigh North Street Primary School

1. Looked after children and previously looked after children;
2. Children who appear to Southend-on-Sea Borough Council to have been in state care outside of England and ceased to be in state care as a result of being adopted;
3. Pupils who live in the catchment area who have a sibling attending the school;
4. Pupils of staff at the school;
5. Pupils who live in the catchment area;
6. Pupils who live outside the catchment area who have a sibling attending the school;
7. Pupils who live outside the catchment area.
(for all criteria, catchment area map and additional information please see explanatory notes and maps below)

Temple Sutton Primary School

1. Looked after children and previously looked after children;
2. Children who appear to Southend-on-Sea Borough Council to have been in state care outside of England and ceased to be in state care as a result of being adopted;
3. Pupils who live in the catchment area who have a sibling attending the school;
4. Pupils who live in the catchment area ;
5. Pupils who live outside the catchment area who have a sibling attending the school;
6. Pupils of staff at the school;
7. Pupils of the school attending Temple Sutton Nursery;
8. Pupils who live outside the catchment area
(for all criteria, catchment area map and additional information please see explanatory notes and maps below)

West Leigh Infant School

1. Looked after children and previously looked after children;
2. Children who appear to Southend-on-Sea Borough Council to have been in state care outside of England and ceased to be in state care as a result of being adopted;
3. Pupils who live in the catchment area who have a sibling attending the school or West Leigh Junior School;
4. Pupils of staff at the school;
5. Pupils eligible for pupil premium who live in the catchment area;
6. Pupils who live in the catchment area ;
7. Pupils who live outside that catchment area who have a sibling attending the school or attending West Leigh Junior School;
8. Pupils who live outside the catchment area.
(for all criteria, catchment area map and additional information please see explanatory notes and maps below)

4. Explanatory notes, including maps, apply to all community schools in Southend-on-Sea

Parents must make a separate application for transfer from nursery to primary school and from infant to junior school. Parents must complete a Southend-on-sea Common Application Form (CAF) for applications to year reception and year 3 between 14th September and 15th January.

4.1 Pupils in public care and children that were previously in public care

Any reference to looked after children refers to children who are in the care of local authorities as defined by Section 22 of the Children Act 1989. In relation to school admissions legislation a 'looked after child' is a child in public care at the time of application to the school'. Any reference to previously looked after children means children who were adopted (or subject to residence or special guardianship orders) immediately following having been looked after. Looked after and previously looked after children are given the highest priority for each relevant age group and in all ranking.

The admission into school for children previously in care but outside of England will be ranked in the same category as LAC/PLAC for all schools. (ref to letter dated 4th Dec 2017, Rt Hon Nick Gibb MP). Letter on SBC website http://www.southend.gov.uk/downloads/file/5484/rt_hon_nick_gibb_mp_-_letter_re_admission_of_children_adopted_from_care_outside_of_england

- 4.2 Children who appear to have been in state care outside of England and ceased to be in state care as a result of being adopted** A child is regarded as having been in state care in a place outside of England if they were accommodated by a public authority, a religious organisation or any other provider of care whose sole purpose is to benefit society.
- Also refers to
Section 23ZZA of the Children Act 1989 (inserted by Section 4 of the Children and Social Work Act 2017) places a duty on local authorities to promote the educational achievement of children previously in care outside of England and Wales, which include those who were in the care of, or were accommodated by, a public authority, a religious organisation or other provider of care whose sole purpose is to benefit society
- 4.3 Pupils with Education, Health and Care Plans** All children whose statement of special educational needs (SEN) or Education, Health and Care (EHC) plan names the school must be admitted. Children with a statement or a plan will follow a different process for admission. Further information can be found on
http://www.southend.gov.uk/info/200225/children_with_disabilities/290/special_educational_needs
<http://www.southendinfopoint.org/kb5/southendonsea/fsd/localoffer.page>
- 4.4 Pupils eligible for pupil premium (West Leigh Infant and West Leigh Junior Schools)** Schools are given a pupil premium for children who have qualified for free school meals at any point in the past six years. Parents will need to tick on the application form and/or supplementary information form or notify the Local Authority in writing if they are eligible or registered for pupil premium. Any disclosure for pupil premium will be used only to rank applications against the admission criteria and will not be held for any other purpose.
- Parents can check their eligibility by filling out the LA online form on:
<https://southend.firmstep.com/default.aspx/RenderForm/?F.Name=ofyiMHFi7J8&<span%20id=> or www.southend.gov.uk/fsm
- Parents that are in receipt of one of the following may be eligible for pupil premium:
- Income Support
 - Income-based Job Seekers Allowance
 - Income-related Employment and Support Allowance
 - Support under Part VI of the Immigration and Asylum Act 1999
 - The Guaranteed Element of State Pension Credit
 - Child Tax Credit (if they not entitled to Working Tax Credit and have an annual income under £16,190)
 - Working Tax Credit 'run-on' - the payment someone may get for another 4 weeks after they stop qualifying for Working Tax Credit and Universal Credit
- 4.5 Pupils of staff of the school** Children will be ranked in this admission criteria if they are children of staff at the school in either or both of the following circumstances:-
- (a) where the member of teaching staff (including, staff that are at the school in positions, such as: Senior Leadership Team/level, Head of Year Group, Head of Department, Office Manager or Senco) that has been employed at the school for two or more years at the time at which the application for admission to the school is made,
- and/or
- (b) the member of staff is recruited to fill a vacant post for which there is a demonstrable specialist skill shortage.

- 4.6 Distance:** In the case of over subscription in any one category “straight line” distance will be used to measure the distance between the pupil’s home and the nearest pupil entrance to the school. Distances will be measured using the Local Authority’s computerised measuring system. The pupils living closest will be given priority. If the pupil’s home is a flat the distance will be measured to the main external entrance to the building.
- 4.6.1 Tie-Break** To be used to decide between two applications that cannot otherwise be separated: If the same distance is shared by more than one pupil, and only one place is available, the place will be awarded on the basis of a computerised random allocation process (supervised by someone independent of the Council / governing body). In the case where the last child offered is a twin or sibling of a multiple birth sibling both/all children will be offered and the sibling will be an ‘excepted pupil’.
- 4.7 Distance where parents have separated** The distance is measured the same for all applications. Only one application can be received. The LA should not have the details of both parents or know of the marital status of the parents. If more than one application is received from parents, applications will be placed on hold until such time that:
- an application is made that both parents agree to; or
 - written agreement is provided from both parents; or
 - a court order is obtained confirming which parent’s application takes precedence’.
- Details on address checks and which address is relevant are also provided in the admission booklet. In all cases the child’s normal place of residence is applicable for the purposes of the application.
- 4.8 Infant to partner Junior admissions** Parents must apply in the main round to transfer from an infant school to the junior school. Parents must use the Council common application form (CAF) and submit the application between 14th September to 15th January. The Council offers a full coordinated process for admission to year 3.
- 4.9 Siblings** Siblings are considered to be a brother or sister, half-brother or half-sister, step-brother or step-sister, adopted brother or sister, living at the same address, who attends the school at the time of application with a reasonable expectation that he or she will still be attending at the time of the proposed admission. In the exceptional situation where one twin or one or two triplets are refused a place, in order to keep family members together and in line with the School Admissions Code 2014, the additional pupil(s) will be admitted even if this results in the admission limit for the year group being exceeded.
- 4.10 Waiting lists** Children’s names will automatically be on the waiting list for schools that are higher on the rank list and for which they do not receive an offer (for years Reception and year 3). Parents will also have the opportunity to appeal against the refusal for schools for which they did not receive an offer. Appeals must be lodged within 20 school days of the date of the letter. Parents can access the information on appeals and also submit an appeal online on the council’s web site www.southend.gov.uk/admissions or email admissions@southend.gov.uk to request an appeal application form. All appeals are considered by an Independent Appeals Panel.
- Waiting lists for all year groups for community schools are closed at the end of each school year.

4.11 Over and Under age applications

Parents may seek a place for their child outside of their normal age group, for example, if the child is gifted and talented or has experienced problems such as ill health. In addition, the parents of a summer born child may choose not to send that child to school until the September following their fifth birthday and may request that they are admitted out of their normal age group—to reception rather than year 1.

Applications for over or under age applications in-year are handled in line with the School Admissions Code 2014, 2.17 (a & b).

Such requests for Schools in Southend-on-sea are directly to the school and the school advises the LA of their decision. Requests for year 6 must have been submitted by the parent and considered by the admission authority before the closing date for applications to year 7, i.e. 31st October of any given year. Admission authorities must make decisions on the basis of the circumstances of each case and in the best interests of the child concerned.

This will include documenting the following:-

- the parent's views;
- information about the child's academic, social and emotional development;
- where relevant, their medical history and the views of a medical professional;
- whether they have previously been educated out of their normal age group;
- and whether they may naturally have fallen into a lower age group if it were not for being born prematurely.
- They must also take into account the views of the head teacher of the school concerned.
-

When informing a parent of their decision on the year group the child should be admitted to, the admission authority must set out clearly the reasons for their decision. (2.17a School Admissions Code 2014)

In circumstances where a child transfers from another school already 'outside of normal age group', community schools and the LA will support any over or under age application where the above has been met and the LA is satisfied that the child should continue to be educated out of normal age group.

4.12 Admission of children below compulsory school age and deferred entry to school.

Most children start school on a full time basis, however parents can request that their child attends part time until reaching compulsory school age (the term after their 5th birthday). Once parents receive an offer and accept a place for their child during the normal admission round they can ask to defer the admission until later in the same academic year. Schools must accommodate these requests where it appears to be in the best interest of the child. Parents wishing their child to attend part time must discuss this with the headteacher of their allocated school. The approved deferment means that the place is held open and is not offered to another child and the parents must take up the place full time by the start of the Summer Term in April. Part-time agreements should include core teaching.

In the case of children born prematurely or the late summer months parents may request admission outside the normal age group. There is no statutory barrier to children being admitted outside their normal year group (DfE Guidance, Dec 2014). Due to the impact on future years for a child's schooling, requests to delay admission are very carefully considered by both the admitting authority and the parents. The decision to admit outside of a child's normal age group is made on the basis of the circumstances of each case. Any decision will seek a decision in the best interest for the child and be considered by a Panel of relevant persons. Parents applying for schools outside the Borough of Southend will need to consult the respective LA's policy in this regard. Parents submitting a request for admission outside the normal age group must also complete the Single application Form during the main admission round, 14th September – 15th January for the 'usual age group for their child'.

Requests for deferment of admission to community schools should be sent to the Council and for Academy and Voluntary aided schools directly to the school. Parents will need to provide the detailed reasons for their request including any supporting evidence from relevant professionals to enable their request to be given proper consideration. For community schools, parental requests to be addressed and sent to the Pupil Access Manager, School Admissions Team, Southend Borough Council.

The Pupil Access Manager will constitute a panel to consider the submission and the panel will only consider 'admission outside the normal age group', that is, whether or not a child can start school in the Reception year the year after they turn 5 years of age and not in year 1.

The panel will not consider requests for deferment within the reception year as requests can be made by parents directly to the Headteacher of the allocated school (School Admissions code 2012 section 2.16).

The panel will meet by the last week in February to consider applications from parents of children born prematurely or in the last summer months for admission outside the normal age group.

Admission authorities must make decisions on the basis of the circumstances of each case and in the best interests of the child concerned.

This will include documenting the following:-

- the parent's views;
- information about the child's academic, social and emotional development;
- where relevant, their medical history and the views of a medical professional;
- whether they have previously been educated out of their normal age group;
- and whether they may naturally have fallen into a lower age group if it were not for being born prematurely.
- They must also take into account the views of the head teacher of the school concerned.

When informing a parent of their decision on the year group the child should be admitted to, the admission authority must set out clearly the reasons for their decision. (2.17a School Admissions Code 2014)

In circumstances where a child transfers from another school already 'outside of normal age group', community schools and the LA will support any over or under age application where the above has been met and the LA is satisfied that the child should continue to be educated out of normal age group.

.13 Pupils of the Nursery (Temple Sutton Primary only)

Children will be ranked in this admission category for Temple Sutton Primary School if they are on roll in Temple Sutton Nursery which is part of the school during the year before admission for reception. In regard to the main round children must be part of Temple Sutton Nursery before the application closing date of 15th January of any given year. This is to enable the admission authority to rank applications accordingly. Children admitted to the nursery after 15th January will be ranked under these criteria after the national offer day (16th April). This criteria will not be relevant for in year admissions years 2-6.

- 4.14 In-year admissions** As permitted by law parents can make an application at any time to any school outside the normal admissions. Parents can submit applications for community schools to the Admissions Team at the Council. Where places are available at preferred schools places will be offered. Where there are no places applicants will be refused and have the opportunity to join the waiting list for the schools. Waiting lists are ranked according to the admission criteria for schools. In some cases where a child is already on a school roll locally the place may be offered for the start of the next term.
- 4.15 Home Address** For all applications the address used will be the child's habitual normal place of residence as at the closing date for applications, i.e., 15 January (reception and year 3). Changes to address will be updated after all on time applications have been processed.

The relevant Coordinated Admissions Scheme and Primary Admission booklets should be read in conjunction to the Determined Admission Arrangements for all schools in the Borough of Southend-on-Sea. The Primary Admission booklet contains further details, provides more information and is written to support parents through the rounds.

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The Determined Co-ordinated Admissions Scheme for 2020/21

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1. Introduction

- 1.1 The School Admissions Code places a duty on local authorities to formulate a single scheme for co-ordinating all applications to all publically funded schools from parents in their area. In the Borough of Southend-on-Sea, the scheme applies to admissions into reception, year 3 and year 7. Schemes for admission to schools must be formulated by 1st January in the determination year.
- 1.2 Determined admission arrangements to be provided to SBC, for the inclusion in the composite prospectus, between 28th February and no later than 7th March..

2. Aims and scope of the scheme

- 2.1 Aims of the scheme
 - 2.1.1 To facilitate the offer of one school place to each pupil.
 - 2.1.2 To simplify for parents the admission process into schools through the use of a Common Application form (CAF).
 - 2.1.3 To co-ordinate with neighbouring local authorities to avoid more than one school place being allocated to the same pupil.
- 2.2 Scope of the Scheme
 - 2.2.1 The scheme applies to families who are resident in Southend who are seeking admission into: reception year in primary and infant schools; year 3 in primary and junior schools and year 7 in secondary schools. The scheme excludes post 16 pupils.

3. Key Aspects of the Scheme.

- 3.1 As required by the School Admissions Code (SAC), Southend Borough Council (SBC) co-ordinates with other local authorities to ensure that a pupil only receives one offer.
- 3.2 SBC will co-ordinate admissions, for all schools including academy, community, foundation, free school and voluntary aided schools. Co-ordination is for all pupils into reception year, year 3 and year 7.
- 3.3 SBC will send offers of places to Southend residents even if the school is in another local authority. This includes offers on behalf of academy, community, foundation, free school and voluntary aided schools.
- 3.4 The CAF will enable parents to express:
 - up to 3 preferences for admission to a primary school; or
 - up to 5 preferences for admission to a secondary school.
- 3.5 Only SBC will know the ranking of the parental preferences. Preferences will be shared with other local authorities in so far as they relate to their schools. Parental

preferences may be shared with own admission authorities for the purposes of admission appeals.

- 3.6 SBC will provide each school with a breakdown of preferences for their own school as on offer day.
- 3.7 In all cases academies, foundation, free school and voluntary aided schools will continue to be their own admission authorities, will apply their own criteria and will continue to be responsible for the organising of admission appeals.

4. General details of the scheme

4.1 Primary and secondary admissions up to the offer date

4.1.1 Parents will complete a Common Application Form (CAF) on which they will be able to express a preference for up to:

- 3 primary schools in order of priority; or
- 5 secondary schools in order of priority.

4.1.2 Parents will be advised to apply on-line for a school place at www.southend.gov.uk/admissions but will be able to complete a paper common application form if they wish.

4.1.3 All CAFs must be sent to SBC which is the only body that can make offers to Southend parents on behalf of primary and secondary schools.

4.1.4 Alerts of pupils that have not applied will be made available to current settings, on request from Nursery Schools, but completed by default with schools to identify any barriers preventing on-time applications being submitted.

4.1.5 Parents can express a preference for a school in another local authority as Southend co-ordinates admissions with other authorities. The offer of a place at a school in another local authority will be made by SBC on behalf of that local authority. Similarly other local authorities will offer places to their residents on behalf of Southend schools. The scheme requires councils to liaise before any offers are made on behalf of schools in the other council area.

4.1.6 The Southend coordinated scheme considers all preferences against the admissions criteria for the individual schools.

4.1.7 The CAF will detail which schools also require Supplementary Information Forms (SIFs). These may be obtained from either the school or the website. SIFs must be sent back to the individual school. SIFs for the Consortium of Selective Schools in Essex (CSSE) need to be downloaded from the CSSE website or by contacting the CSSE and completed forms need to be returned to the CSSE. These forms are not application forms and parents must complete the CAF. (See section 4.7 on SIFs and section 4.1.6 for the SIF for the Consortium of Selective Schools in Essex).

4.1.8 For each admission round there is a national closing date for receipt of the CAF. The deadline for receipt of any SIFs is set by individual schools and the Consortium of Selective Schools in Essex (CSSE). The date may be later than the national closing date. For registration for the selective test the closing date will be much earlier.

Parents are encouraged to send in the CAF to SBC and any SIFs (if required) to the school as early as possible prior to the closing date.

- 4.1.9 If SBC receives any SIFs these will be forwarded onto the school or, where appropriate CSSE. Similarly if any school receives by mistake any CAFs these must be sent onto SBC.
- 4.1.10 Preliminary lists will be shared with voluntary aided schools to check CAFs against SIF's submitted.
- 4.1.11 On-line applications will be downloaded into the admissions database. SBC will input into the admissions database all information shown on any paper CAF's, including any reasons for the application, and will provide details to all academy, foundation, free school and voluntary aided schools.
- 4.1.12 SBC will send to other local authorities details of pupils who have applied to schools in their area and will receive from other local authorities details of their pupils who have applied to Southend schools. The respective councils will send to their own schools a list of pupils who have applied to the school which will include both Southend and their own residents. It has been agreed by schools that are part of the CSSE that both SBC and Essex will send information on those pupils who have applied to take the selective test direct to the consortium.
- 4.1.13 Pupils taking the selective test, or aptitude tests or auditions will need to register with CSSE or schools to make the necessary arrangements.
- 4.1.14 Academy, foundation, free school and voluntary aided schools and, where appropriate CSSE, are required to rank in order of the schools' criteria **all** pupils who have applied to their school and to return these lists to SBC by the agreed date. Applications that are not matched to a SIF (or where there is no SIF), must still be ranked.
- 4.1.15 SBC will exchange information with other Local Authorities who will provide details of the ranking of Southend pupils who have applied to their schools.
- 4.1.16 SEN pupils will be accommodated if the named school is identified in the finalised EHCP by 15th February for Secondary and 27th March for Primary (or next working day) of any given year.
- 4.1.17 SEN and LAC pupils may need to be admitted over number on initial allocation (for offer day) and the School Admissions Team will manage the school back to the PAN until The last week of August at which time the Academy takes over.
- 4.1.16 SBC will match the parental preferences against the rank order lists provided by Southend schools.
- 4.1.17 The scheme operates according to the order in which parents select preferences. The order of preferences should reflect the order parents wish to be offered a place, but if for example parents are unsuccessful in gaining a place for the first preference school they are not disadvantaged in obtaining their second preference or their third preference etc. Schools do not receive details of the preference and have to put pupils in order of their admission criteria without knowing the preference. The process will continue until all preferences are exhausted.

- 4.1.18 SBC will provide any other local authority with details of any pupils resident in their area who can be offered places at schools in the Borough (and vice versa).
- 4.1.19 Where possible SBC will share allocation lists to schools and the CSSE as appropriate, before offer day. This will be dependent on the process being complete before offer day. Schools will be notified if it is not possible to send the lists to them. When lists can be sent, schools will be reminded of section 2.10 of The School Admissions Code 2014, in that school must not contact parents about the outcome of the applications until after these offers have been received. Schools must be mindful that parents that made a paper application may not receive the offer of a place for one or two days after the offer date.
- 4.1.20 SBC will send an offer of a single place to pupils applying for a school places on the offer day.
- 4.1.21 Parents who completed an online application will be advised of the outcome of their application by email on offer day. Unless they indicate on the CAF that they would prefer a response by letter.
- 4.1.22 Parents who completed a paper CAF will be advised of the outcome of their application by 1st class post on offer day. Parents should expect to receive the letter within 1 to 2 days of the offer day.
- 4.1.23 Offers are automatically recorded as 'accepted' and parents will be given 10 school days to notify SBC if they wish to reject an offer of a school place. Parents who applied online will be able to do this by using the online facility.
- 4.1.24 For any pupil who has not been allocated a place at one of their expressed preferences SBC will offer them a place at the school in the Borough nearest to the home address with vacancies at that time. Such offers will not be made to selective or faith schools.
- 4.1.25 Any places (that are in demand) will be reallocated if parents advise SBC that they no longer require a place.

4.2 Summer Born Children

- 4.2.1 In the case of children born prematurely or late summer months* parents may request admission outside the normal age group.

*Summer born age: DfE 'Advice on the admission of summer born children' July 2013: 'Children born from the beginning of April to the end of August reach compulsory school age on 31 August. It is likely that most requests for children to be admitted out of their normal year group will come from parents of children born in the late summer months or those born prematurely'.

- 4.2.2 There is no statutory barrier to children being admitted outside their normal year group. Due to the impact on future years for a child's schooling, requests to delay admission are very carefully considered by both the admitting authority and the parents. The decision to admit outside of a child's normal age group is made on the basis of the circumstances of each case.

Parents may submit requests to SBC for any community schools and directly to own admission authorities for Academy schools.

Any decision will seek an outcome in the best interest for the child and for community schools will be considered by a Panel of relevant persons. Parents applying for schools outside the Borough of Southend will need to consult the respective LA's policy in this regard.

The following items apply to SBC, for community schools only:-

- 4.2.3 Parents submitting a request for admission outside the normal age group must also complete the Common Application Form during the main admission round, 14th September – 15th January. Parents will need to provide the detailed reasons for their request including any supporting evidence from relevant professionals to enable their request to be given proper consideration.
- 4.2.4 The panel will only consider 'admission outside the normal age group', that is, whether or not a child can start school the year after they turn 5 years of age in the Reception year and not in year 1. The panel will not consider requests for deferment within the reception year as requests can be made by parents directly to the Headteacher of the allocated school (School Admissions Code 2014 section 2.16).
- 4.2.5 The panel will normally consider applications from parents of children born prematurely or in the last summer months for admission outside the normal age group.

The following items apply for all applications, LA or OAA decision:-

- 4.2.6 If the parents case for delayed admission into reception is upheld by the panel, or the Own Admission Authority a new application for a place in the next cohort **must** be made in the following round (between September and mid-January) and would be considered along with all the other applicants for admission in that year. There would be no guarantee that a place would be offered in the preferred school.
- 4.2.7 If the parents request for delayed admission into reception is refused, the submitted application would follow due process in the round for the child's normal age group. After the offer of a place has been made the parent could then still request the allocated school to delay entry, attend part-time within the reception year group or the parent can delay admission to the following year for admission to year 1. The Head Teacher would need to consider each case and make a decision that is in the best interest of the child.
- 4.2.8 The full policy on applications to admit outside the normal age group for summer born children will be available in the primary admission booklet on the SBC website.
- 4.2.9 All admission authorities must keep a record of the decision to admit out of normal age group/delay starting school and the record should contain the following and must be provided to SBC for main rounds or on request:
- the parent's views;
 - information about the child's academic, social and emotional development;
 - where relevant, their medical history and the views of a medical professional;
 - whether they have previously been educated out of their normal age group;
 - and whether they may naturally have fallen into a lower age group if it were not for being born prematurely.

- They must also take into account the views of the head teacher of the school concerned.

4.3 Co-ordination of pupil admissions to Year 3 of Southend junior schools 2020/2021

The following paragraphs relate to pupil admissions to Year 3 in primary and junior schools and should be read in conjunction with the full scheme for the co-ordination of pupil admissions to infant/primary schools.

4.3.1 Applications will not be necessary for children moving from Year 2 to Year 3 in their existing primary school as this is a single legal establishment and Year 3 in that case is not a 'relevant age group'. However, parents of children in Year 2 of an infant school must complete and submit a form of application for their child to be admitted into Year 3 of another school, even if that is the 'partner' junior school.

4.3.2 The closing date for completing a common application form for a Year 3 place is 15 January 2019.

4.3.3 SBC will liaise with infant schools in the area with lists of children that have applied to the 'partner' junior school. Schools will encourage parents that have not applied for year 3 to apply.

4.3.4 SBC will provide a list of all applications received via common application forms to all junior schools by 9 February 2019.

4.3.5 Schools must rank applications according to their admission criteria and return the ranked list to SBC on the agreed dates (see timetable).

4.3.6 For all applications received by the closing date, from parents of Year 2 children (including children attending year 2 in an infant school), SBC will inform parents of the outcome of that application on 16 April 2019.

4.3.7 There is full co-ordination for admission to year 3 as a normal admission round. This is because we have infant and junior schools in the borough and additional places at Bournes Green Junior School and West Leigh Junior School.

4.3.8 Applications submitted for children that are in the primary school that wish to remain in the same school will be withdrawn and parents will be advised that no application is required.

4.4 Co-ordinated arrangements between the offer date and start of autumn term.

4.4.1 From the offer day until the last week of August SBC will continue to co-ordinate admission arrangements and make all offers on behalf of primary and secondary schools in Southend.

4.4.2. Late and new preferences/applications will be slotted into the waiting lists by SBC in line with school admission arrangements. This will include using new address details where relevant and re-ranking applications to appropriate positions.

4.4.2 Where parents have refused the offer of the place then the vacant place will be offered in strict order of the waiting list until the place is accepted.

- 4.4.3 The offer of school places as they become available will continue to be made by SBC.
- 4.4.4 Once the final list is sent to schools on 22nd August the coordination procedures for reception year, year 3 and year 7 will cease. SBC will continue to administer waiting lists and in-year admissions for all Community and identified Own Admission Authority schools as agreed. Own Admission Authorities wishing to manage their own waiting lists will do so from 22nd August onwards.

4.5 Year 7 - Under and over age applicants

- 4.5.1 For admissions into year 7, an applicant is under age if he or she will be under 11 years of age on 31st August immediately prior to admission in September. SBC will only accept applications from under age applicants who have been registered in year 6 of their primary schools from the first day of the school year in which they apply for a secondary school place. This effectively requires that the decision to promote the child to the year group above his/her chronological age group must be taken by the primary school prior to the end of the summer term in the calendar year in which the child applies for a secondary school place. Confirmation of this is likely to be sought from the headteacher of the primary school concerned by SBC.
- 4.5.2 An applicant is over age if he or she is 12 years of age or over on 31st August immediately prior to admission in September. SBC will not accept over age applicants for year 7 admissions unless there are verified exceptional circumstances for a child to repeat one of the primary school years, for example, extended illness. SBC will seek verification from the headteacher of the primary school concerned that an over-aged applicant has medically certifiable reasons or some other exceptional reason for being an over-aged applicant. SBC will wish to investigate especially thoroughly the circumstances through which any child is found to be studying in Year 6 for the second time, especially if this should involve an application to sit the CSSE selection tests for a second time. Medical evidence will be required for such applicants.
- 4.5.3 Ideally children should not miss a main round and be admitted to year R, 2 or year 7 outside their usual age group (in-year). Any exceptional decisions made must be well documented and meet the requirements of the School Admission Code in that they are in the 'best interest of the child'. Once a child, of statutory school age, has started the year and completed at least one term as an out of normal age group, they cannot apply via the coordinated round/main round for a second opportunity to year 6. Admission mid-year to move from year 7 back to year 6 would not be deemed in the best interest of a child due to the disruption and impact on emotional, social and mental health wellbeing.
- 4.5.4 All admission authorities must keep a record of the decision to admit out of normal age group and the record should contain the following and must be provided to SBC for main rounds:
- the parent's views;
 - information about the child's academic, social and emotional development;
 - where relevant, their medical history and the views of a medical professional;
 - whether they have previously been educated out of their normal age group;
 - and whether they may naturally have fallen into a lower age group if it were not for being born prematurely.

- They must also take into account the views of the head teacher of the school concerned.

4.6 Overseas applicants – applications from children whose parents are living abroad and do not have a “home authority”

4.6.1 Parents who are living abroad and who wish their child to apply for a Southend school have no “home authority” (through which the regulations stipulate that all applications should be made). They can nonetheless apply through what is a proxy home authority (i.e. the Council area in which they intend to buy a house or settle the child with relatives). However, although they may apply in this way, no place will be offered until they can provide clear evidence of residency in this Borough and this may include the relevant immigration documents. In addition, proof of the home address/normal place of residence through either a house purchase, through exchange of contracts, or a long term letting agreement. The School Admissions Team would have to be satisfied that the child’s normal place of residence would be at the address provided.

4.6.2 The CSSE will arrange for overseas applicants for year 7 to sit the selection tests overseas under invigilated conditions at an agreed test centre.

4.6.3 The admission into school for children previously in care but outside of England school be ranked in the same category as LAC/PLAC for all schools (ref to letter dated 4th Dec 2017, Rt Hon Nick Gibb MP). Letter on SBC website http://www.southend.gov.uk/downloads/file/5484/rt_hon_nick_gibb_mp_-_letter_re_admission_of_children_adopted_from_care_outside_of_england

4.7 New applications, late applications, changes of preferences and additional applications – for coordination of reception, year 3 and year 7

4.7.1 New applications:

Applications from parents moving into the area, who in the view of SBC could not have made an application by the closing date, will be slotted into the system when received and might be processed after all on time offers are made. These will be regarded as new applications and will only apply for parents that could not have applied on time such as moving into the country.

Exceptional circumstances will be considered at the discretion of SBC. Moving from one borough to another would not normally be considered as an exceptional circumstance without additional circumstantial information.

If parents, that could not have made an application by the closing date but move and are living within the borough before 31 October for secondary applications and 15 January for primary applications, they will be slotted into the system and processed with on-time applications were possible. Any further new applications received after these dates will be considered after the initial allocation of places on offer day.

4.7.2 Change of address/New applications/preferences for secondary, infant, junior and primary schools

Due to the high variations of address policies across the various LAs and own admission authorities, regardless of home LA, addresses for schools in Southend-on-Sea are as per the child’s normal place of residence (address) as at the closing date for Secondary Admissions (31st October), for Infant, Junior and Primary Admissions (15th January). Any addresses after the closing date are updated after offer day for the

transfer group (ie. 1st March or 16th April) and the applications ranked accordingly. Parents that could not have applied by the deadlines for the main rounds will be considered under 4.6.1.

4.7.2 Late applications

Applications received after the closing date from those who could have made an application on time, will be regarded as late and will therefore not be considered until all “on time” applications have been considered and the initial allocation of places are notified to parents. SBC will be the final arbiter, under the coordinated scheme, as to whether an application is late or not. Schools should apply their admission criteria to such late pupils but identification as “Late” by SBC will prevent schools from putting a ranking against these pupils when the full list is sent back to SBC.

4.7.3 Changes in preference

Changes in the order of preferences already expressed will not be accepted after the closing dates unless, the circumstances are deemed to be exceptional and the changes can be accommodated. Changes received after the closing date will be considered after the appropriate national offer date.

4.7.4 Additional preferences

Any additional preferences received after the closing dates will be considered after the offer date.

4.7.5 Southend-on-Sea Borough Council takes very seriously any attempt to gain unfair advantage in the admissions process by giving false information (for example providing a false address). Checks will be made with other departments in the Council and, where it is suspected that the family actually live outside Southend, contact will be made with the relevant Council. Where there is reasonable doubt as to the validity of a home address, the Council reserves the right to take additional checking measures including, in some cases, unannounced home visits. If, after offers of school places have been made, it is established that fraudulent or intentionally misleading information has been provided in order to gain a place at a primary or secondary school, the Council/own admission authority will withdraw any school place offered. If an offer of a school place is withdrawn under these circumstances the application would be considered afresh, (with proof of address or other relevant information) unless a new application form is deemed necessary and the parent advised of their right of appeal to an Independent Appeal Panel (2.12 of the Code) . If appropriate the withdrawal letter will be signed by both SBC and the admission authority.

4.7.6 Changes of address between offer day and the last week of August will be checked by SBC. Parents will need to provide proof of the home address in the form of; a house purchase; exchange of contracts, or a long term letting agreement. In all situations, SBC must be satisfied that it is the child’s normal/habitual place of residence.

4.7.7 Places can be withdrawn up to the end of December in the situation where an offer is made in error or the application has been found to be fraudulent. Own Admission authorities must inform SBC of any places withdrawn for the coordinated round up to December of each year and vice versa.

4.7.7 Schools must inform SBC of address, sibling or any other discrepancies in ranking lists or in information provided by parents on the enrolment forms post offer day.

4.8 Supplementary Information Forms

4.8.1 In order that they may seek further information to apply their admission criteria, the following schools require parents to complete a Supplementary Information Form (SIF) in addition to the appropriate application form.

School	Details
Primary:	
Our Lady of Lourdes Catholic Primary	For all applications
Sacred Heart Catholic Primary	For all applications
St George's Catholic Primary	For all applications
St Helen's Catholic Primary	For all applications
St Mary's, Prittlewell, C of E Primary	For all applications
Secondary:	
St Bernard's High School	For all applications
St Thomas More High School	For all applications
Shoeburyness High School	For year 7 applications for selective places
Southend High School for Boys	For all applications for selective places
Southend High School for Girls	For all applications for selective places
The Eastwood School	For year 7 applications for Sport / Performing Arts places
Westcliff High School for Boys	For all applications for selective places
Westcliff High School for Girls	For all applications for selective places

4.8.2 The SIFs for year 7 applications for selective places must be returned to the Consortium of Selective Schools in Essex (CSSE), for all rounds of admissions SIFs must be returned direct to the school.

4.8.3 Parents are encouraged to send in the CAF and any SIF as early as possible prior to the closing date. The SIF for selective and aptitude testing will be before the CAF closing date (also refer to sections 4.1.5 and 4.1.6).

4.8.4 All SIFs must clearly indicate that they are not application forms and that the appropriate application form must be completed. SIFs cannot request:

- any personal details about parents and families, such as maiden names, criminal convictions, marital, or financial status (including marriage certificates);
- the first language of parents or the child;
- details about a parent's, parent's or a child's disabilities, special educational needs or medical conditions;
- parents to agree to support the ethos of the school in a practical way;
- both parents to sign the form, or for the child to complete the form (School Admission Code 2014 section 2.4).

4.8.5 Schools must consult the School Admissions Code 2014 sections 1.9 and 2.4 when developing their supplementary information forms.

- 4.8.6 Schools must be mindful of siblings from multiple births in oversubscription criteria and where possible admit them (e.g. selective, specialist and faith criteria exempt).
- 4.8.7 Applicants must 'submit' online forms. Unsubmitted forms will not be processed. Applicants must have evidence of submitted forms therefore if application forms were posted they must have proof of postage and if applied online they must produce the automatic online receipt.

4.9 Waiting lists

- 4.9.1 For the reception, year 3 and year 7 rounds of admissions, on offer day SBC will have a waiting list for each Southend oversubscribed school which will exclude any late applicant and late changes in preference. In most cases SBC will be able to rank the pupil from existing information, for example distance. Depending on the admission criteria a new application would then be slotted into the waiting list as appropriate.
- 4.9.2 SBC will maintain the waiting list as ranked by schools. Where any new pupil, such as a late application, is added to the waiting list SBC should be advised within 10 working days of where such pupils fit in relation to other pupils on the waiting list.
- 4.9.3 Where a vacancy does arise the place will be offered by SBC to the pupil on top of the waiting list.
- 4.9.4 A parent of a child at the top of the waiting list offered a place as a result of a vacancy having arisen will be expected to confirm, within 10 working days, whether or not they wish to accept the place.
- 4.9.5 SBC will maintain waiting lists for all community schools in the Borough for the full school year. Waiting lists for academy, foundation, free school and voluntary aided schools will be maintained by them for at least the autumn term. Waiting lists will be maintained strictly in accordance with the admission criteria of the school concerned.
- 4.9.6 SBC will delete pupils from the waiting list who are offered and accept a place at a higher ranking school.
- 4.9.7 SBC will rank/re-rank pupils with address changes, late and new applications according to school admission arrangements after all on time offers are made or on the waiting list as appropriate.
- 4.9.7 Where, as part of the school admissions process, a parent is required to complete a SIF, SBC should be advised by the school within 10 working days of where such pupils fit in relation to other pupils on the waiting list. New pupils will not be added to the waiting list but will be at the bottom of the school list until this information has been provided by the school and the application can be slotted into the waiting accordingly.
- 4.9.8 All admission authorities must specify, in their arrangements, the period a child remains on a waiting list for each school year. For main round Reception, year 3 and year 7 it must be at least to Dec of the admission year.

Community school waiting lists are held for the full school year that the application was made. Waiting lists, for all year groups close on the last day of the school year. Parents must reapply for the new school year from the start of the Summer Term if they wish to be added to the waiting list for the next school year.

4.10 Appeals

- 4.10.1 Parents have the right of appeal against a decision to refuse admission to a school which they had put as a preference.
- 4.10.2 Parents will be given 20 school days to appeal against the decision to refuse their application for a place at a particular school.
- 4.10.3 Parents wishing to appeal for a place at any school in the Borough will be advised by SBC to read the on-line appeals information and complete the online appeal form which will be submitted to SBC. Paper copies of the appeals information and form will also be available if required. If the appeal relates to an academy, foundation, free school or voluntary aided school the form will immediately be sent to the school concerned for them to arrange the appeal. Appeals for places at community schools will be organised by SBC.
- 4.10.4 SBC will advise parents wishing to submit an appeal in respect of a school outside the Borough to contact the Local Authority where the school is located to enquire about the appeal arrangements.
- 4.10.5 Schools will send lists of submitted appeals to SBC. SBC will record the appeal against the admission record and provide the school with all relevant documentation to enable the School to prepare for the appeal.
- 4.10.6 In accordance with the School Admission Appeals Code, Independent Appeal Panels for community, academy, foundation, free school and voluntary aided schools must consist of:
- a) at least one lay member. Lay members are people without personal experience in the management or provision of education in any school (though it is permissible to use people who have experience as governors of other schools, or who have been involved in education in any other voluntary capacity) and
 - b) at least one person with experience in education, who is acquainted with educational conditions in the area, or who is a parent of a registered pupil at a school.
- 4.10.7 Academy, foundation, free school and voluntary aided schools must inform SBC within 5 school days of the outcome of any appeal. The outcome of any appeal does not mean that the parent will necessarily take up a place as they may have other appeals or may prefer the original place offered.
- 4.10.8 Having received notification from the school, SBC will contact parents and ask them to confirm in writing to SBC which place they wish to accept following the outcome of any appeals. They will be asked to confirm this within 5 school days of their last appeal. Once a place is released that place will be reallocated.
- 4.10.9 Own admission authorities will record all appeals and provide the data to SBC after all appeals are heard, no later than the 17th July or nearest working day.

5. Annual Review of the Scheme

- 5.1 Each year all local authorities must formulate and publish on their website a scheme by 1 January in the relevant determination year to co-ordinate admission arrangements for all publicly funded schools within their area.
- 5.2 The School Admissions Code confirms that if the Local Authority decides to continue to use the scheme from the previous year, this will fulfill the legal requirement to formulate a scheme. Local Authorities must consult admission authorities for schools affected by the scheme and other Local Authorities every 7 years as a minimum. If the scheme has changed substantially since the previous year, the Local Authority must consult school governing bodies and other admission authorities in the area even if that is less than 7 years since the last consultation.
- 5.3 A local authority must inform the Secretary of State whether they have secured the adoption of a qualifying scheme by 15 April. If this is not achieved the Secretary of State may impose a scheme.

6. Council and school duties under the scheme

- 6.1 These are set out in the School Admissions (Admission Arrangements and Co-ordination of Admission Arrangements) (England) Regulations 2014 and schools should refer to these if they have any queries.
- 6.2 In summary the main duties are:
- Southend Borough Council
- To forward details submitted on the Common Application Form, together with any supporting information provided by the parent to the school or to any other local authority as appropriate;
 - To sort the lists received from schools, or other local authorities, and according to the preference expressed by the parent determine which school place should be offered;
 - To forward onto schools information received from other local authorities pupils who have applied to Southend schools;
 - To notify schools and other local authorities of the offers to be made;
 - To make an offer to parents on national offer day on behalf of schools, including for schools in other local authorities.

Governing Body

- To notify Southend Borough Council of any application made direct to the school;
- To determine all applications in line with the school's admission criteria and to notify the Council of this.

7. List of schools to which the scheme applies

- 7.1 Southend Borough Council is the admission authority for community schools. The governing body is the admission authority for academy, foundation, free school or voluntary aided schools.

SECONDARY		
School Name	DfE Number*	Status**

Belfairs Academy	5434	Academy
Cecil Jones Academy	4001	Academy
Chase High School	4000	Academy
Southchurch High School	4736	Academy
St Bernard's High School	5465	Academy
St Thomas More High School	5447	Academy
Shoeburyness High School	4034	Academy
Southend High School for Boys	5446	Academy
Southend High School for Girls	5428	Academy
The Eastwood Academy	5414	Academy
Westcliff High School for Boys	5401	Academy
Westcliff High School for Girls	5423	Academy

PRIMARY		
School Name	DfE Number*	Status**
Barons Court Primary School & Nursery	2124	Community
Blenheim Primary School	2387	Academy
Bournemouth Park Academy	3822	Academy
Bournes Green Infant School	2128	Academy
Bournes Green Junior School	2123	Academy
Chalkwell Hall Infant School	2022	Community
Chalkwell Hall Junior School	2019	Community
Darlinghurst Academy	2127	Academy
Earls Hall Primary School	2023	Community
Eastwood Primary School	3825	Foundation
Edwards Hall Primary School	3826	Community
Fairways Primary School	2407	Community
Friars Primary School & Nursery	3824	Academy
Hamstel Infant School	2093	Academy
Hamstel Junior School (partner school)	2092	Academy
Heycroft Primary School	2126	Community
Hinguar Community Primary School	2094	Academy
Leigh North Street Primary School	2096	Community
Milton Hall Primary School	5273	Foundation
Our Lady Of Lourdes Catholic Primary School	3328	Voluntary Aided
Porters Grange Primary School & Nursery	2001	Academy
Prince Avenue Academy	2000	Academy
Richmond Avenue Primary School	3823	Academy
Sacred Heart Catholic Primary School & Nursery	3326	Voluntary Aided
St George's Catholic Primary School	3329	Voluntary Aided
St Helen's Catholic Primary School	3327	Voluntary Aided
St Mary's Prittlewell Church of England Primary School	3325	Voluntary Aided
Temple Sutton Primary School	2132	Community (proposed to convert)
The Westborough Primary School & Nursery	5206	Academy
Federation of Greenways Schools - Thorpe Greenways Infant School	2105	Academy
Federation of Greenways Schools - Thorpe Greenways Junior School	2104	Academy
Thorpedene Primary School	5225	Academy
West Leigh Infant School	2109	Community
West Leigh Junior School (partner school)	2108	Academy

*DfE codes and status for schools may be subject to change if status of school changes (e.g. Community to Academy).

8. Definitions

Academies – Schools funded directly by Central Government where the academy trust employs the staff and is the admission authority.

Additional applications - An application from a parent who has already submitted an application and is requesting an additional school(s). This will normally be after the initial offer of places in March.

Admissions Forum – A body comprising of representatives from various groups which advises admissions authorities on admission arrangements in the area

Catchment area – A defined geographical area served by a particular school

Changes in preference - Changes in the order of preferences already expressed (that is not an additional application).

Community schools – Schools wholly funded by SBC, where the Council employs the staff and is the admissions authority.

CSSE – The Consortium of Selective Schools in Essex – a group of schools that are responsible for the selection test (11+) arrangements. The 10 schools below operate a consortium whereby only one test needs to be taken even though an application is being made to several schools. The schools are:

Shoeburyness High School

Southend High School for Boys

Southend High School for Girls

St Bernard's High School

St Thomas More High School

Westcliff High School for Boys

Westcliff High School for Girls

King Edward VI Chelmsford (Boys) – school in Essex

Colchester County High School (Girls) – school in Essex

Royal Grammar School, Colchester (Boys) – school in Essex

DFE - Department for Education – Central government department responsible for education matters.

Foundation schools – Schools funded by the Council, where the Governing body employs the staff and is the admissions authority.

Free School - are state-funded schools normally set up in response to parental demand. They have the same legal requirements as academy schools.

Late applications - Applications received after the closing date from those who could have made an application on time.

Looked After children and Previously looked after children – (LAC/PLAC) - Any reference to looked after children refers to children who are in the care of local authorities as defined by Section 22 of the Children Act 1989. In relation to school admissions legislation a 'looked after child' is a child in public care at the time of application to the school'. Any reference to previously looked after children means children who were adopted (or subject to residence or special guardianship orders) immediately following having been looked after.

Looked after and previously looked after children are given the highest priority for each relevant age group and in all ranking.

The admission into school for children previously in care but outside of England will be ranked in the same category as LAC/PLAC for all schools. (ref to letter dated 4th Dec 2017, Rt Hon Nick Gibb MP). Letter on SBC website

http://www.southend.gov.uk/downloads/file/5484/rt_hon_nick_gibb_mp_-_letter_re_admission_of_children_adopted_from_care_outside_of_england

National Offer Day – the day on which all offers of places are made. For year 7 this is on or about 1 March and reception year and year 3 this will be on or about 16 April. In each case if the day falls on a weekend or bank holiday it will be next working day. The offer day will therefore be 1 March 2019 for secondary applications and 16 April 2019 for primary applications.

New applications - Parents who in the view of SBC could not have made an application by the appropriate closing date, for example, when moving into the area from abroad. Refer to item 4.7.1.

Non-selective places – school places offered without reference to the selective (11+) procedure.

Normal round of admissions – Under the Southend Coordinated Admissions Scheme, the normal round of admissions refers to admissions to reception, year 3 and year 7 up to 22 August.

Potential year 7 admissions – All pupils in year 6 in primary schools (whether or not that is their age appropriate cohort) who will transfer to secondary schools in the following September.

Common Application Form (CAF) – the common application form on which parents indicate their preferences

Selective places – places offered at certain schools as a result of the pupils' performance in the selection (11+) procedure.

SIFs – Supplementary Information Forms – forms on which parents are asked to provide additional information in support of their applications in order to provide more information to enable the school to apply their admission criteria. These are not application forms.

Southend Borough Council (SBC) – In the areas pertaining to this scheme the function of the Council will be undertaken by the School Admissions Team within the Department of People.

Specialist places – School places offered to a small number of pupils at certain schools as a result of an aptitude in certain areas of the curriculum

Voluntary Aided schools – Schools set up and owned by a voluntary body, usually a church body, largely financed by the Council. The governing body employs the staff and is the admission authority.

9. Key dates – Infant, Primary and Junior admissions September 2020

1st January 2019	Date for formulation of scheme
1 September to 11 September 2019	Publish Admissions Information Advertisements, fliers and letters to registered parents of early years children
14 September 2019	Opening of on-line admissions facility
Early October 2019	Distribution of year 3 “letter/fliers” to year 2 pupils
Mid December 2019	Preliminary lists to faith schools for SIF follow up
15 January 2020	Closing date for admission applications
22 January 2020	Follow up list to faith schools for SIF follow up
31 January 2020	Final list of preferences to be sent to schools and other authorities
26 February 2020	Closing date for schools to return ranked preferences
16 April 2020	National Offer Day (16 th April or next working day)
30 April 2020	Closing date for responses to offers (refusals)
15 May 2020	Closing date for appeal forms
17 July 2020	All on-time appeals completed
22 August 2020	The administration of waiting lists for years R and 3 and all in-year admissions handed over to academy, voluntary aided, and foundation schools.

10. Key dates – Secondary admissions September 2020

1st January 2019	Date for formulation of scheme
1 week in July 2019	Publication of Secondary Admissions Information (booklet) Admissions information distribution to year 5 pupils. Open evenings at schools that admit pupils as a result of testing / auditions
1 July – 7 September 2019	Registration for testing / audition
1 September 2019	Opening of on-line admissions facility for transfer to secondary school
Week beginning 1 September 2019	Distribution of reminder flier to year 6 pupils
XX September 2019*	11+ test (to be confirmed by the CSSE – dates will be available in the Admissions booklets)
XX September 2019*	Alternative test date (for religious, illness or exceptional circumstances) 11+ test (to be confirmed by the CSSE – dates will be available in the Admissions booklets)
mid October 2019*	Testing results to be sent to parents by CSSE / schools
23 October 2019	Preliminary list to be sent to faith schools and Eastwood for SIF follow up
31 October 2019	Closing date for admission applications
7 November 2019	Follow up list to be sent to faith schools and Eastwood for SIF follow up.
30 November 2019	Final list of preferences to be sent to schools and other authorities.
⁷ January 2020	Closing date for schools to return ranked preferences
1 March 2020	National Offer day
15 March 2020	Closing date for responses to offers (refusals)
May 2020	All on-time appeals completed - refer to School Admissions Appeals Code 2012.
22 August 2020	The administration of waiting lists for years R and 3 and all in-year admissions handed over to academy, voluntary aided, and foundation, free schools.



Southend on Sea Borough Council, Department of People, Civic Centre, Victoria Avenue,
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Southend-on-Sea Borough Council

Agenda
Item No.

Report of the Deputy Chief Executive (People)

to
Cabinet

on

18th September 2018

Report prepared by: Diane Keens, Head of Service & John
O'Loughlin, Director of Children's services

The Journey of the Child July 2018

People Scrutiny Committee
Cabinet Member: Councillor Helen Boyd
A Part 1 (Public Agenda Item)

1. Purpose of Report

Presentation of "The Journey of the Child" end of year report covering 2017/18 financial year.

2. Recommendations

That Cabinet agrees the end of year report following previous agreement to a consolidated approach to Children's Services reporting.

3. Background

The number of reports presented through the cabinet cycle has increased over recent years. These are presented in isolation and do not show the overall activity and impact outcomes for the whole service.

In 2017 this new format of reporting was agreed. This report consolidates fully several reports and summarises others, where a full report will still be completed and be available to members should these be requested.

4. Other Options

To continue reporting with individual reports through the cabinet cycle.

5. Reasons for Recommendations

This overarching report allows for a more holistic oversight of service delivery and gives senior managers and members an ability to see the overall impact for the Council of the work of the children's service.

6. Corporate Implications

6.1 Contribution to Council's Vision & Corporate Priorities

This report allows better oversight by members of activity, impact and outcomes

6.2 Financial Implications

Within Appendix 1 "The Journey of the Child" end of year report covering 2017/18 financial year.

6.3 Legal Implications

None

6.4 People Implications

Within Appendix 1 "The Journey of the Child" end of year report covering 2017/18 financial year.

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

“The Journey of the child annual report 2017/18” July 2018

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Appendix 1

Children's Social Care

The Journey of the Child Annual Report

Report to Members

July 2018

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Introduction

This report highlights activity in Southend Children's Social Care in 2017/18, what difference we have made for children and young people and outlines our priorities moving forward. This is the second Bi-Annual report which covers the full year 2017/18. This report incorporates updates on all service areas and includes our six monthly adoption report, annual looked after children report, quarterly fostering report and annual private fostering report.

Elected councillors have a crucial role to play in setting the strategic direction of Council services and in determining policy and priorities for the local community. All elected councillors share a responsibility to safeguard children and young people within the borough. This includes a corporate parenting responsibility towards the children the Council looks after. Councillors champion the cause of looked after children and care leavers when carrying out their duties, keeping themselves apprised of important national issues and developments in policy and practice.

Recent reports, including "No good options: Report of the inquiry into children's social care in England" (March 2017) and Improving Social Care Services (2016) highlight the need to develop frameworks to drive practice improvement and for this to be effective, challenge to Children's Services by elected councillors is vital.

This report is produced to support councillors in discharging their responsibilities towards children and families in Southend. The report will be tabled for discussion at the Corporate Parenting group, Cabinet, Full Council, People Scrutiny Committee and the Southend Local Safeguarding Children Board.

Whilst we have mechanisms in place to know how we are doing, we also seek support and challenge externally to help us. We have participated in the Eastern Region sector led improvement and peer challenge and been subject of an Ofsted Joint Area Targeted Inspection (JTAI) in March 2018 focusing on CSE and Gangs, which will be discussed further later in this report.

Southend Corporate Parenting Group

There are a number of strategic groups as well such as Success for All Children, the Local Safeguarding Children Board and The Corporate Parenting Group. The role of these boards requires ownership and leadership at the most senior levels. In Southend the Corporate Parenting group is chaired by the Lead Member for Children's Services, (2017/18 Councillor James Courtenay), supported by the Director of Children's Services, John O'Loughlin. The group plays a key strategic role in ensuring that the Council and its partners meet their corporate parenting responsibilities for children who are looked after.

Throughout 2017/18 the Corporate Parenting group has focused on a number of important topics: safeguarding of looked after children, including from child sexual exploitation; foster carer recruitment; educational attainment of looked after children with reports from the virtual school; work of the Improvement Board, Work experience for LAC, work of NYAS and the annual IRO report.

The Corporate Parenting Group has had a particular focus this year on young people and their families understanding better their experiences of working with Southend Children's Social Care and how the changes made to service delivery have impacted on their lives. This year has begun to focus more on outcomes for children and this focus will continue into 2018/19.

For more information see Corporate Parenting annual report 2017/18

National Context

Southend continues to contribute to shaping national policy and debate related to Children's Social Care. Senior Leaders are Members of the Association of Directors of Children's Services (ADCS). The ADCS is the national leadership association in England for statutory directors of children's services and other children's services professionals in leadership roles.

Key topics that continue to receive attention nationally include the cumulative impact of welfare reform on children and families; child sexual exploitation and gangs, children who are electively home educated or not in school, children leaving care and the Regional Adoption programme. Many of these issues are covered in more detail in this report in the relevant sections.

Revised 2018 Working Together to Safeguard Children Guidance

Working Together to Safeguard Children is the key statutory guidance for professionals working with children in England. It sets out how organisations and individuals should work together and how practitioners should conduct the assessment of children and is the basis of the majority of work children's social care do. The revised guidance was published in July 2018, updating the previous versions published in 2013 and 2015 and taking into account the findings of the Wood review¹ of local safeguarding children boards to have a different type of safeguarding strategic partnership.

Extremism and Radicalisation

In the working together to Safeguard children 2015 guidance local authorities were required to establish channel panels from April 2015 to assess the extent to which identified individuals are vulnerable to being drawn into terrorism and to arrange support to those individuals identified as high risk. Panels must include the local authority and the chief

¹ <https://www.gov.uk/government/publications/wood-review-of-local-safeguarding-children-board>

officer of the local police. Southend's Channel Panel has been in place since autumn 2015, in line with the Council's Prevent strategy.

OFSTED Joint Targeted Area Inspection Framework

In September 2013, Ofsted launched the single inspection framework (SIF) for the inspection of services for children in need and protection, children looked after and care leavers. A number of thematic inspections were run alongside the SIF inspection programme.

In January 2016 updated inspection framework and guidance was published for Joint Targeted Area Inspections (JTAI). This framework was further updated in August 2016 & April 2017.

JTAIs are carried out under section 20 of the Children Act 2004. They are an inspection of multi-agency arrangements for:

- the response to all forms of child abuse, neglect and exploitation at the point of identification
- the quality and impact of assessment, planning and decision making in response to notifications and referrals
- protecting children and young people at risk of a specific type (or types) of harm, or the support and care of children looked after and/or care leavers (evaluated through a deep dive investigation into the experiences of these children)
- the leadership and management of this work
- The effectiveness of the LSCB in relation to this work.

Inspectors evaluate children's experiences against the full range of the criteria, looking for strengths, areas for development and examples of innovative and effective practice. Inspections have continued under the existing Single Inspection Framework whilst the new framework is evaluated through several pilot inspections.

In March 2018, Southend were involved in a targeted JTAI focusing on Child exploitation including sexual exploitation and gangs.

Following this inspection we received a very positive outcome letter which stated that:-

"Partner agencies in Southend have a shared commitment to tackling risk to children and young people from sexual and criminal exploitation, gangs and going missing from home, care or school. Inspectors met with staff across the agencies, who are tenacious in their efforts to engage with, and make positive difference for, vulnerable children and young people".

Key strengths included:-

“Work in Southend to tackle child sexual and criminal exploitation, gangs and the risks arising from going missing from home, care or school is underpinned by strong working relationships and a shared commitment and drive for continuous improvement”.

“Leaders and managers have created a culture across the partnership in which staff feel supported in working flexibly, collaboratively and ‘going the extra mile’ by continuing to work with young people even when they may not at first want to engage with the services they are offered. This tenacity is making a real difference for some highly vulnerable children”.

This was seen as a very positive move forward in the improvement journey.

For full report see OFSTED letter dated May 2018²

Children’s statutory Social Care in Southend

Children’s statutory Social Care works with families to support safe and effective parenting where, without the support, the welfare and safety of a child would be compromised. The aim of Southend is to help families to help themselves and to always work with families at the right level at the right time, promoting early help services. The core focus of the service is child protection, supporting families where children are on the edge of care, securing positive long term life chances for children permanently looked after by the Council and supporting care leavers.

Southend continue to develop a clear model of practice for Southend based on a restorative approach, to ensure that we can improve the lives of children and families cost effectively and intervene with families at the right time and at the right level. Southend’s leadership team are working pro-actively with the on-going implementation and embedding the new approach across social care and partners. The leadership team are specifically focused on driving forward improvement; balance risk and have an ability to manage the complex issues that this brings.

Whilst we continue to develop our ways of working, there are some key principles and beliefs that continue to underpin our approach. These include:

- That children are best cared for within their families wherever this can be safely achieved
- We work with families at the earliest opportunity to prevent needs from escalating
- We have an honest, open and transparent approach to supporting children and their families
- That in investing in providing services that are able to promote change within families is more effective and efficient in general than removing children and placing them in alternative care

² https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/704962/Southend-on-Sea-jointtargetedareainspectionreport.pdf

- The restorative approach of working with families ('doing with' rather than 'doing to') is more likely to be effective in sustaining long term change than more directive interventions
- That in most cases decisions about interventions should be made by those who understand the child and families/carers best, which will normally be the practitioners who are working with them. However, responsibility for decisions that have life-long implications for the child (for example the decision to remove a child from the care of their family) should always be held by senior managers
- That social work is a skilled and highly responsible task and that to perform well, practitioners need to feel well supported within their work setting and to have opportunities for regular supervision and reflection on their interventions with others
- That having a multi-agency perspective on a situation enhances assessments and helps to mitigate risk by ensuring that alternative viewpoints are explored

The significant changes made in 2016/17 to the structure of Children's statutory Social Care to ensure a more seamless journey for children and their families has now been in place for over a year. Whilst there have been some positive impact seen within the service, there remain some challenges that the new structure has been unable to resolve. The transformation work being undertaken at present aims to work across the senior management team to ensure that challenges are addressed and further developments lead to improved outcomes for children and families alongside our partners.

Financial Performance

Children Social Care is funded through the Council's general fund and the financial spend to budget position in 2017/18 for Children services and learning was reported on a monthly basis throughout 2017/18 and included in the published monthly performance report.

Any please note, any costs, relating to the direct educational support of a child is funded through the Dedicated Schools Grant.

As indicated within the monthly performance reports, the 2017/18 closing budget to spend position for Children Social Care, closed the financial year 2017/18 with a financial funding pressure of £1.2m, despite stringent efforts to plan for, and ensure statutory duties were delivered in the most cost effective way possible. The children Social Care Final Net controllable Budget for 2017/18 was £21 mil, with a closing net spend position of £22.2mil.

Children Social Care pressures are being experienced locally and nationally, and are related to an increase in both complexity of cases, as well as increase required in the number of children looked, including the associated cost of looked after care services provided in the external care provision. The Council had responded to this pressure throughout 2017/18, and provided additional in year 2017/18 funding to increase front line social work staffing, additional support to children on the cusp of care and early intervention measures where safe to do so.

The £1.2mil pressure, remained mainly due to cost pressures on external looked after placements costs and increased children numbers requiring externally sourced provision, which was not helped by our current local provision of employed foster carers running at over 115% capacity for most of the year. In line with many local authorities, Children Social Care has also required the assistance of frontline agency social work staff which has increased the cost of funded provision. Further detail about these pressures is provided below, however please note 2018/19 is expected to continue to be a challenging year financially for Children Social Care, but the Council had responded by agreeing increased funding to support looked after children providing in 2018/19 by a further £1.2mil, whilst also facing the requirement to find savings council wide.

The increases in Private, Voluntary and Independent (PVI) commissioning costs has been driven by an increase in care numbers and a consequent rise in the number of relatively more expensive independent fostering and residential placements required in the past 18 months. Alongside this, due to reduced capacity nationally within the private sector and a national increase in demand, we have seen an unprecedented rise in external costs for many of these placements.

Southend has supported a fee paid fostering team in-house for a number of years. This was fully reviewed and updated in 2015 to allow more carers to become fee paid in line with private agencies and to assist with recruiting new foster carers. Whilst this has increased the unit cost of an in-house carer, it remains significantly less expensive than private provision.

Expenditure on residential and secure placements has increased due to an increase in average cost from £3,183 per week in February 2016 to £3,809 per week in July 2017, and £4,437 by the end of March 2018. Whilst the number of children supported in this type of placement has remained fairly stable, rising slightly from around 18-23 children.

Expenditure on 18+ semi-independent placements has significantly increased as the level of complexity has increased and the provision of appropriate placements to meet need has become scarcer nationally.

The children in need service has also experienced a pressure on its Section 17 budget for the past few years, mainly resulting from increased accommodation costs and providing support to families with No Recourse to Public Funds.

Our Structure – how we deliver our services

Over the past year, there has also been significant changes to the structure of children's services teams and their responsibilities within the overall structure. These changes have been made in line with our vision of being able to provide the right service, to the right child, at the right time. This joined up approach enables proportionate and timely decisions about the type and level of services children need and facilitates timely access to resources.

Accessing services (the Front door)

In April 2016 the two front doors (Early Help and Family Support and the statutory First Contact Team) co-located to help to drive forward the above vision. In late 2017 Southend moved to a formal MASH + model, involving a more co-ordinated single front door.

The Southend MASH+ team model is a collaborative arrangement between Southend Borough Council Children's services, Essex Police and Health (EPUT are the health organisation providing the staff). The key principle is to develop a multi-agency approach to responding to contacts and referrals to Southend Children's Social Care through co-locating representatives from Children's Social Care, police and Health alongside the existing Early Help Front Door. Governance arrangements are via an Operations Board with membership from key partner agencies and chaired by the Director of Children's Services. It's overall aim is to see an improvement and understanding of threat of harm and risk through timelier information sharing at the section 17 and 47 thresholds. This will lead to improved decision making, as the children's social care manager will have a fuller picture of what is known about that child and their family and consequently enable professionals to provide timely interventions which are proportionate and necessary to mitigate identified risks.

Early Help Family Support and Youth Offending Service

The Early Help Family Support, YOS Service, Integrated Locality and Streets Ahead Services came together under the single line management in October 2015 and was fully integrated in April 2016. Since then the service has grown from strength to strength. All professionals are fully aware of the single front door process and there is very positive feedback as to how it has improved services and with the addition of the MASH+, decisions are made timely ensuring that the family gets the best possible service at the right time. 3100 referrals were received through the single front door during 2017/18, all directed to the right team with 98.6% achieving a desired outcome.

The Early Help service aims to enable all Southend-on-Sea's contributors to early intervention to:

- act before the needs of children and families escalate;
- focus on achieving priority outcomes for those children, young people and families who need it the most;
- give every child the opportunity to reach their full potential; and to have flexible services that provide the right support, at the right time and at the right level.

Building on existing best practice and processes, it provides:

- a single, integrated system and 'front door' for the identification, referral, assessment, and monitoring of Early Help.
- a core offer to schools, early year's settings and GPs to support them to fulfil their statutory duties with regard to Early Help.

The Early Help Family Support & YOS Service in addition to the core principles for children services, have specific principles which underpin the EHFS & YOS service service:-

- Early Help spans a wide spectrum of services, provided by a wide range of agencies to meet a wide range of needs.
- All children, young people and families' needs are met by universal services wherever possible.
- We build resilience and the capacity to achieve by having a joined up approach to families' needs.
- We operate a multi-agency/disciplinary approach to both assessment and intervention.
- A traded service to provide additional Early Help support to individual schools, particularly with regard to improving school attendance.
- A specialist whole family support service to meet complex needs.
- An offer of support and guidance to all providers of Early Help services to children and young people.

Troubled Families Programme

On the 1st April 2015 the Expanded Troubled Families Programme was launched nationally; the Expanded Programme increases reach to children living in families across the age range who are in need of help through a broad range of criteria including domestic violence, parents or children with health needs, including mental health. The Troubled Families Programme was initially named "Streets Ahead", however as part of the service transformation when services were integrated in April 2016, this programme was incorporated into the Early Help offer.

The Troubled Families programme initially intended to change the repeating generational patterns of poor parenting, abuse, violence, drug use, anti-social behaviour and crime in the most troubled families in the UK. Troubled families are defined as those that have problems and cause problems to the community around them, putting high costs on the public sector. The aim is to provide partnership support via a dedicated key worker to enable families to turn around and in particular to:

- get children back into school
- reduce youth crime and anti-social behaviour
- put adults on a path back to work
- reduce the high costs these families place on the public sector each year

The Troubled Families Programme is now incorporated into Early Help Family Support Complex Team and supports families with multiple and complex problems. DCLG (now known as the Ministry of Housing, Communities & Local Government (MHCLG) last annual report to Parliament set out the scale of these problems – worklessness, uncontrolled debt, abuse and conflict in the home, mental and physical health problems. The Troubled Families programme now also aims to incentivise a re-configuration of services around families and to encourage innovative, multi-agency practice that best fits the local context.

Services are encouraged to come together across organisational boundaries, overcoming operational and cultural barriers to achieve sustainable change for the most disadvantaged families in their communities.

The Troubled Families Grant conditions are to engage with 1480 families (2015-2020), and by working to the Southend Outcome Plan, address all needs of the family providing evidence for Payment by result income generation. In addition to these targets, Southend was required to complete an Early Help Service Transformation Model and Toolkit. The model captures the principles that underpin meaningful system and cultural change. The toolkit supports SBC and partners to assess how we are performing in transforming our services and driving further action. This toolkit and plan were completed in November 2017. Southend are currently Developing/Maturing, with an action plan to drive to Mature by 2019.

Since the start of programme to March 2018 Early Help Family Support have achieved:

- Completed the Service Transformation Maturity Model Self-Assessment Toolkit which aligns to the Children's Improvement Plan and Children's Services Service Transformation.
- **373** families achieved significant and sustainable progress outcomes to date in Phase 2 (Jan 15 – Mar 2018) and submitted for Payment by Results
- **43** additional families achieved Continuous employment (26 weeks); MHCLG stated this is "above" national average Therefore the **total families attracting a Payment by results claim = 416**
- **1552** Families have been attached to Troubled Families Programme against a target of 1480 by 2020. This target has now been met. **631** of these families have been "stepped-down" from Social Care.
- **631** of families worked with during Phase 2 have been "stepped-down" from Social Care. Without the intensive family support many of these will have remained in, or returned to, statutory services.
- **Only 10% (154 families)** have returned to the service for further intervention. However, in recognition of the needs of 'revolving door families' the service employed 2 Sustainability officers and the families that have been supported by these officers have not returned.
- There is a new enhanced community offer which included Cluny Square hub being open for families to easily access practical advice and guidance to prevent escalation and reduce demand on services. Between Jan 2017 – February 18 there were **726** attendances at English classes, this is both an accredited course leading to qualification and one for beginners, **302** adults who attended the Help and Support drop in which provides housing and financial advice to local people and is supported by Family Mosaic.
- We have successfully undergone a Ministry of Housing, Communities and Local Government (MHCLG) spot-check to validate the claims.
- We have recently had a visit from MHCLG who have highlighted Southend as good practice, acknowledging our solid partnership working, practitioner commitment and the community element.

The above figures confirm our focussed work with the families to achieve a better quality of life, and support the need to reduce demand on statutory services.

Children living with Domestic Abuse

The Southend Multi Agency Risk Assessment Team (MARAT) is a multi-agency team, established in June 2016, which seeks to transform how high risk domestic abuse (DA) is responded to within Southend through partnership working. The team includes representatives from social care, health, police and Independent Domestic Violence Advisor (IDVA) services and works alongside representatives from National Probation service (NPS), CRS, housing, substance misuse and domestic abuse support projects.

Prior to the team being set up, all high risk incidents of DA in Southend were managed via the Essex Community MARACs. However, due to volume of cases, there were significant delays which resulted in many of the action plans produced by a MARAC being ineffective, as life had moved on for the victim and the family by the time a plan to reduce risk levels had been agreed.

The Southend MARAT process does not change the expectations of all agencies in Southend in relation to their roles in safeguarding children and adults. Each agency continues to follow their safeguarding procedures and take necessary action on high risk DA cases to ensure there is no delay in offering interventions to protect and support the children and adults involved.

Partner agencies make a referral to MARAT when there has been a high risk incident of DA. This is often via a Police referral but other partners can also refer when a disclosure of a high risk incident is made to them directly – this should be assessed using the DASH risk assessment tool. The Southend MARAT will

- Research the information known about the family within their agency
- Share information together that is proportionate and relevant to the incident,
- Support the formation of a safety and action plan to reduce risk and seek to protect the victim, children, vulnerable adults and family members and also members of the community.

The aim is for all victims to have an action plan agreed at a multi-agency risk assessment conference (MARAC) within 14 working days of the referral to the MARAT. By working collaboratively and sharing appropriate information, the Southend MARAT can improve timely risk identification and safety planning for victims and their families, which is co-ordinated via the multi-agency risk assessment conferences (MARAC). These are held weekly.

The Southend MARAT representatives and key partners (listed above) attend the weekly multi-agency conference (the MARAC). In addition, where other key agencies or individuals

are working with a victim and family they may be invited to attend a MARAC when the safety and action plan for that victim is being discussed and agreed. The co-location in the Southend Police Station continues to work well and has enabled us to work with the Domestic Abuse Team in Southend Police Station more closely which contributes overall to the effectiveness of safety planning and positive outcomes for children living in those households.

In the year April 2017 to March 2018, MARAC considered 370 cases. Due to a changeover of recording from Care First to Liquid Logic it is not currently possible to pull off data about when cases were heard within the 14 day target however the MARAT manager is confident from manual record keeping that cases are all being heard within 14 working days of the referral. MARAT has become more integrated with social work teams, including the new MASH+ team, and providing specialist resource to discuss cases and a referral route for those that are at high risk. There is a new Perpetrator Group work programme provided via Southend Domestic Abuse Project and facilitated by the Change Project.

The MARAT has undertaken training in PREVENT and in Honour Based Abuse and having developed the relevant processes, is now taking referrals for both of these areas of concern.

Evaluation of the impact of the service evidences that social work staff have become more able to effectively and confidently engage perpetrators and support victims. The skill and knowledge base of social workers undertaking statutory assessments in families where domestic violence is a serious issue has been strengthened and this has helped to reduce the number of repeat domestic violence incidents in families.

Child Sexual exploitation

Child sexual exploitation (CSE) remains a key priority for Children's Services. In the past 2 years there has been significant work undertaken to increase the understanding of the profile of CSE in Southend and to prevent, identify and tackle the problem. 2016/17 saw a move to new classifications in accordance with the revised CSE risk assessment tool, making the identification of risk easier to achieve and taking into account the presence of a perpetrator.

100 young people had CSE concerns raised during 2017/18 (104 in 2016/17). At the end of March 2018 there were 66 young people in Southend identified as being at risk of CSE, 20 of these were looked after at the point of identification. At the end of March 2018 77% of children identified at risk of CSE had completed CSE risk assessments and the remainder were in the process of completion.

Children missing from home and care

Ensuring that Children's Services and partner agencies provide the most appropriate safeguarding response for children who go missing from home and care remains a priority in Southend.

In 2015 The Southend, Essex & Thurrock (SET) Procedures were updated and a protocol for children missing from school, home and care was developed and fully adopted by the Southend LSCB. The protocol focuses upon raising awareness and increasing accountability amongst partner agencies, prevention of missing episodes and reducing repeat missing episodes through collaborative multi-agency working.

Southend have a small team of workers who undertake Independent Return Home interviews with children who have recently returned after being missing from home or care. This is in line with statutory guidance published by the DfE in 2014. These visits help to identify associated risks such as child sexual exploitation and themes within the Southend area such as gang activity and patterns of missing episodes for those who regularly go missing.

Those at highest risk are referred for Risk Management Meetings, where a multi-agency approach to managing the risk is taken and where clear action plans are developed to identify potential interventions to reduce risk.

Children who go missing from home or care continue to be a considerable concern as missing episodes could be indicators of serious issues at home or placement. This could be an indicator of CSE, and high risk behaviours that could expose them to predatory, exploitative individuals. The missing team is a part of the Integrated Early Help Family Support and Youth Offending Service. The practitioners who carry out the direct work sit within the wider context of the Adolescent Intervention Prevention Team, whose ethos is cemented in building resilience in young people providing a positive relationship with a trusted adult.

The return to home interviews are completed by 2 practitioners. The practice that Southend has developed is to aim to complete these interviews within 3 working days of the young person being found. This involves either initial telephone contact or face to face contact. If a young person is not seen within the first 3 days, the practitioner allocated will aim to see the young person within the next 7 working days. There has been a total of 378 missing episodes over a 6 month period and the majority were contacted successfully within 72 hours.

Edge of Care

A major development over the past 18 months has been that of the Edge of Care Team. The role of Edge of Care (EoC) is to prevent children and young people entering care if it is safe and appropriate to do so. Referrals are made via the Placement Panel, where careful consideration is given to risk and whether the family will engage and make the changes necessary. Edge of Care also support current looked after children foster placements at risk of breaking down. Referrals for these cases are received via the Early Help Front Door. EoC received 22 crisis calls in quarter 1 of 2017/18; 17 in quarter 2 of which 7 were from the fostering service directly. By quarter 3 this had risen to 55 in all, although the rise was

expected due to the Christmas period when the office was shut. In quarter 4 referrals began to be recorded in a new way to give more detail to the work being requested and to include an increasing number of requests out of hours for welfare visits.

Between its introduction in November 2016 to April 2018, **97** cases have been referred to EoC and this number is increasing each week as the benefit is seen across the service.

Between January and March 2018:-

- **147** Requests for emergency visits prior to attendance at placement panel and allocations
- Requests for welfare visits without allocation – **17** emergency welfare visits to support statutory services where case was not an open case to EoC, predominately weekend/late evening work
- **63** duty calls received - Crisis calls from allocated cases

The breakdown of the types of cases referred are as follows:

- 9 child protection and those in pre-proceedings (PLO)
- 23 child protection only
- 8 supervision order and child protection or child in need
- 32 Interim Care Order or Full care Order
- 6 section 20's (voluntary care)
- 19 on Child in Need plans only

The team also have 2 workers in place to undertake reunification assessments to ensure that where possible children/young people return to the care of their birth families in a timely manner. The team follow the NSPCC guidelines and framework for reunification assessment as well as Southend's own policies. There are currently in July 2018, 8 reunifications cases open to the EoC with 2 others pending.

One foster carer wrote:- "I just wanted to thank edge of care as a team and as individuals. The support that you guys have given me is massive and I can't thank you enough, words can't explain how appreciative I am, when times were at the hardest for me, you as a team and individuals stepped in with no questions asked, whether it be by phone, email and/or even face to face. If it wasn't for the support of edge of care at all hours of the day, I can honestly say I would have walked away from fostering all together".

A school wrote:- "It is such a pleasure working with you and the edge of care team and I value the tireless work that you put in behind the scenes with the children and families. L, you have provided above and beyond support to this family and with your continued nurturing attitude the children will get through what is undoubtedly going to be a traumatic time".

A practice manager in social care wrote:- “In the process of writing a report for Oct-Dec audits I became aware of a number of cases the EoC are involved with and was delighted to see the quality of their recording of sessions with children and families. These recordings show a clear picture of work undertaken and the impact of it. The descriptive nature of the recordings provide a picture of the child and challenges that they and their family are facing at that time and what work is being undertaken to support them. This helps in the auditing process but more importantly will enable anyone in the future looking at the file to have a clear picture about what has taken place and what effect it had. Well done”.

*Most importantly a **young person** wrote:- “you have listened to me. You helped me learn how to be safe – watched a video and spoke about it. 5 smiley faces”.*

A short case study of work shows:-

3 children previously accommodated under and interim care order were referred to EoC for a reunification plan and support. The children returned home and remained under a supervision order for 6 months before de-escalating to child in need.

The team managed to support the parents to meet social care expectations and supported the family through the reunification process. The children had support from the EoC workers to help them to express their experiences and ensure that their voices were heard in the process; including their wish to return home and how this continues to work for them.

Looked after children from other local authorities placed in Southend

In 2015 the Association of Directors of Children’s Services (ADCS) led on the development of a national resource with information about services for looked after children in every local authority in the country. Southend complied by circulating every local authority in England with Southend’s offer to looked after children from other areas placed in our Borough. As well as this information that is provided to social workers when children from other areas are placed in Southend, the Virtual School and health services work closely together to ensure that all young people in Southend have their needs met in the best way possible.

Family Group Conferencing (FGC)

FGC is a core component of restorative approaches. It is a decision making approach based on a well-developed model which involves the extended family in making plans for children. Despite national variations most FGC adhere to themes such as taking and sharing responsibility for solutions, culturally competent practice, empowerment and private family time.

During 2016/17 FGC was delivered within Fieldwork Services. There was limited capacity and the approach was only being used with families where care proceedings were issued or likely to be issued. Within the model the use of FGC has now been expanded to include children in need and children in need of protection. The service was formally implemented from September 2017 with a focus on cases where there are significant child in need concerns or at ICPC stage. This work is in addition to the previous work undertaken. 2 new practitioners have been recruited and trained with the Family Rights Group to deliver family group conferences and to offer restorative services to make the meetings more successful. The practitioners both have therapeutic backgrounds and offer mediation; work with domestic violence and sexual abuse.

Between September and November 2017 the team received 25 referrals with 20 of these progressing to conference. 85% of the issues initially identified have been achieved during this period and the remainder will be evaluated once the conferences have been fully completed.

Family feedback has included:-

"I felt respected and listened to and was surprised how well and easy us adults can actually communicate".

"at first I was very nervous to go into the meeting as I was on my own, but the co-ordinator and her manager were very supportive and her manager stayed with me".

Feedback from the young people in the family include:-

"We all need to communicate and people need to control anger"

"I want to see my mummy more. I want to see mummy more than once a week".

At a recent Front door team meeting the staff were talking about the reasons why they have less child protection cases and all staff agreed that the work of the Family Engagement Team and Family Group Conferences are allowing the social workers to work more effectively with cases at Child in Need.

Young Carers

Young Carers are children and young people under 18 who provide regular or ongoing care and emotional support to a family member who is physically or mentally ill, disabled or misuses substances.

A young carer may do some or all of the following:

- Practical tasks, such as cooking, housework and shopping
- Physical care, such as lifting, helping a parent on stairs or with physiotherapy
- Personal care, such as dressing, washing, helping with toileting needs

- Managing the family budget, collecting benefits and prescriptions
- Administering medication
- Looking after or 'parenting' younger siblings
- Emotional support and/or
- Interpreting, due to a hearing or speech impediment or because English is not the family's first language.

A young carer becomes vulnerable when the level of care giving and responsibility to the person in need of care becomes excessive or inappropriate for that child, impacting on his or her emotional or physical well-being or educational achievement and life chances.

Our priority for young carers in Southend-on Sea is to ensure that they are safeguarded from inappropriate caring and that they are able to enjoy and achieve in line with their peers and to have time away from their caring role. .

All young carers referrals now come through the EHFS &YOS Single front door, ensuring the family and the young carers have the appropriate support, The young carers worker continues to work with various other organisations, schools, health professionals, and teams within the EHFS&YOS, we have supported the development of Young Carers groups in Milton Hall School and Prince Avenue School.

At the end of March 2018, we had 366 young carers; 18 Primary Young Carers (4.7%) and 368 secondary young carers (95.3%). 189 are male and 197 female. The young carers worker left the department in July 2017 which meant that there was no capacity to engage young carers on specific trips and events in the past year however despite this we continued to offer them access to SYC&MORE/COOL/CHIL which stayed open all year even through school holidays, giving young carers time out from their caring roles.

The team are currently working with 4 schools, who are providing activities for young carers in their schools, these are:- Milton Hall, Prince Avenue, Darlington and Chalkwell Juniors. This work will be further developed over the coming year now that a new young carers worker has been appointed and should soon be in post. Young carers programmes continue to deliver access to Children's University and the last presentation took place in February 2018 with 6 young carers gaining their Bronze certificates.

Children’s Statutory Social Care

First Contact Front Door

The statutory social care front door is co-located with the Early Help Front Door, which means that referrals to either front door can be discussed quickly to ensure that the needs of the child and family are met in the most appropriate way, ensuring safeguarding of all children. This ensures children are quickly allocated resources to meet their needs or safeguard their welfare, working to a principle of right service, first time.

Average weekly contacts to the First Contact (social Care) front door between 2014/15 and 2017/18 have increased significantly (see table below)

	2014/15	2015/16	2016/17	2017/18
Average weekly contacts	55	70	89	154
Annual total contacts		3860	5050	
Ratio of contacts to referrals		38.8%	43.7%	

The First contact Front Door aims to ensure that only those children meeting thresholds for statutory assessments are progressed as referrals to Children’s Social Care.

16 and 17 year olds presenting as homeless

In 2017/18 the First Contact service undertook 7 homeless assessments of 16/17 year olds, following which 2 young people were provided with accommodation by the Council, one of them becoming formally a looked after child. The remaining young people either returned home or were supported to live with wider family members or friends. This has been achieved with the support of the Edge of Care Team through a strong focus on restorative practice to help in the reparation of family relationships when teenagers are facing exclusion from the family home and family life and by facilitating access to parenting support at the point of referral as well as close working with the Southend Housing Team to ensure joint assessments.

We expect to be better able to formally report on the impact for families in the coming year.

Out of hours Social Work Service

The Out Of Hours Social Work Service, or Emergency Duty Team (EDT), forms part of a 24 hour and seamless front line child protection service delivered to Southend children and their families. The service is commissioned through Essex County Council and meets the local authorities out of hours statutory social care responsibilities in safeguarding the welfare of children.

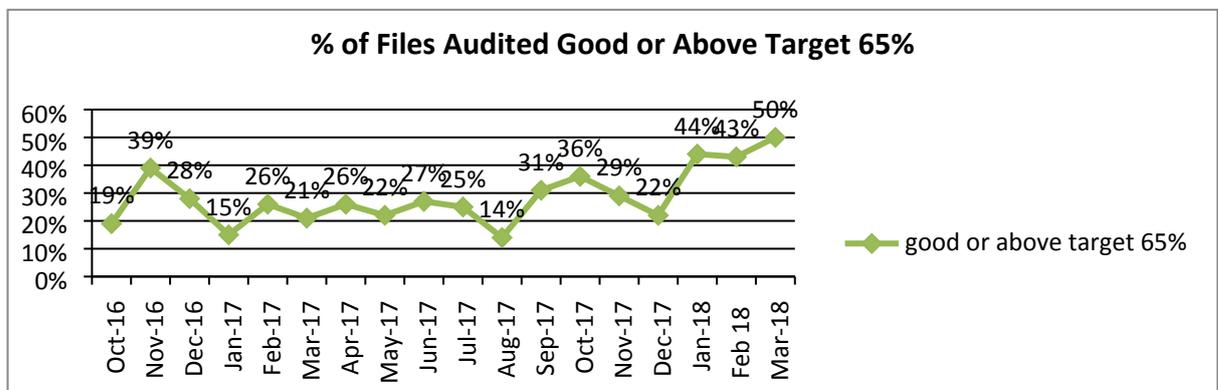
Demand for the service can vary considerably from day to day. On average between 140 calls from Southend are logged each month. Referrals usually require extensive liaison with children and their relatives in addition to a range of other individuals and organisations including friends and neighbours, foster carers, residential establishments, police, hospitals, other local authorities, housing providers, solicitors, courts and voluntary sector providers. The service provides advice in both simple and complex situations and also initiates child protection investigations and/or proactive services including admission into care.

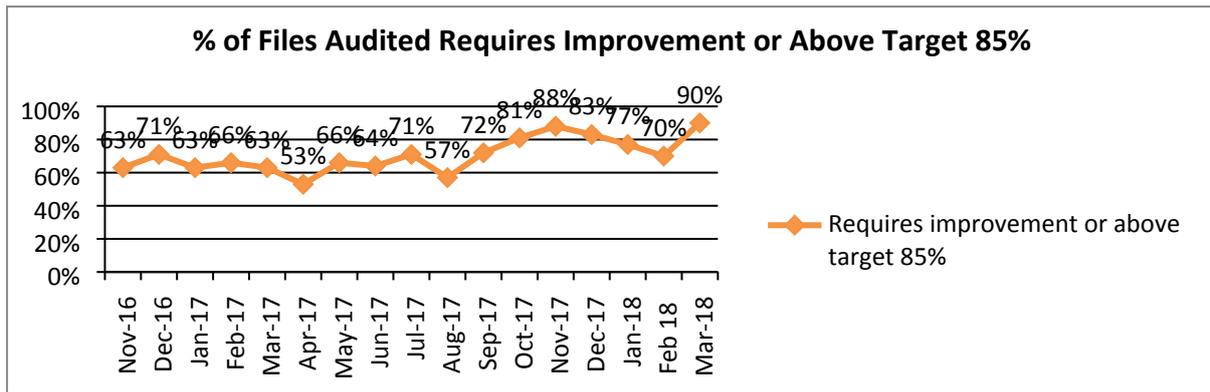
The introduction of the EoC team has helped to support EDT and has reduced some of the crisis calls previously reported to them directly and provided a more local and responsive service availability.

Assessment & Intervention

The assessment & Intervention team alongside the MASH+ team undertake all statutory Children Act child protection investigations and child in need assessments for new referrals to Children’s Social Care. The workforce has been quite transient over the past year, but in the past six months, the managers in place have enabled a strong base for improvement and it is hoped that with strong management now in place, we will be able to evidence a more stable workforce during 2018/19.

Audit and inspection of the work undertaken through MASH+ and A&I team have consistently evidenced those cases deemed Requires Improvement as quite stable however those rated Good and Above have proven more volatile on a month by month basis.





There has been good feedback from partner agencies regarding the co-located front door and the formation of MASH+. Partners have felt that they have been able to begin to develop stronger relationships with the duty team and feel able to discuss referrals and more easily access the service best able to respond to the identified need.

The higher volume of children requiring statutory assessments can be partly attributed to improved information sharing at the front door achieved with the development of the co-located front door. The increase in assessment numbers will remain subject to monitoring and analysis.

Percentage of re-referrals within 12 months of a previous referral

	2015/16	2016/17	2017/18
Southend	19.9%	16.4%	24.3% provisional
Stat Neighbours	23.4%	23%	Not yet published
England	22.3%	22%	Not yet published

2430 statutory social work assessments were completed in 2017/18 which is higher than the number completed in the previous year: 2122 in 2016/17. However, as noted in the table below, the percentage of re-referrals has increased and is slightly higher than the national average.

In 2017/18, 59.9% of assessments were completed within timescale which was an increase from 55.1% recorded for 2016/17. However, we are beginning to see further improved performance and in the first quarter of 2018/19 this percentage increased to 70.4%.

There has also been improvement in the average length of assessment from 45.4 days in 2017/18 (a slight increase on the 41.7 average recorded in 2016/17). Of the 705 assessments completed in the first quarter of 2018/19, 79.8% were completed within 45 working days, also showing significant improvement.

Percentage of assessments completed within 45 working days

	2014/15	2015/16	2016/17	2017/18
Southend	96.3%	96.4%	63.8%	65.4%
Stat Neighbours	73.8%	76.9%	80%	Not yet published
National	81.5%	83.4%	83%	Not yet published

The Children in Need Service

For a number of years, Southend has worked with a staged model of intervention across early help and child in need, with children and families deemed to be at the highest risk being supported through child in need procedures.

We have reviewed how we deliver services to children assessed to be in need under Section 17 Children Act 1989 so that we can meet need at the earliest possible opportunity, reduce escalation of need and reduce the amount of time families need to access direct service provision from SBC children's services.

Over the next 6 months a decision will be made as to exactly how services will be delivered. It is likely that we will undertake a pilot of the preferred model in the first instance before introducing a new structure more widely across children's social care.

Child Protection and Support Teams (CPS 1 and CPS 2)

These are frontline social work teams that work with vulnerable children and their families that require longer term intervention including children subject of child protection plans and child in need plans. The team will also hold cases that are subject to Public Law Outline (PLO). These are cases that meet the threshold for legal proceedings but the decision is to manage them outside a court arena whilst a plan is being implemented.

Cases are transferred to the team at the point of the first Review Child Protection Conference or at the point where the professional judgement is decided that they need a longer term intervention under a child in need plan. In the latter case this is agreed by service manager. All cases are transferred to the teams at the 'transfer meeting' unless agreed by Service Managers.

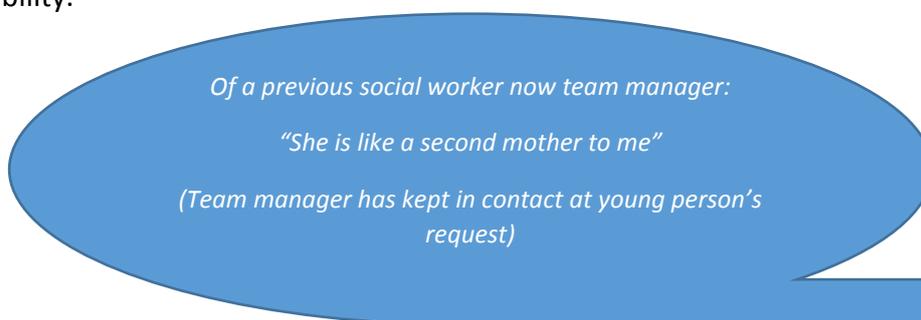
The team will work with families with the aim of reducing risk to the point where a case can be deescalated to Early Help or universal services.

Court and Permanence Team (CAP)

This social work team manages cases in public law proceedings or children who are long term looked after, until they reach the end of school year 10. The team can also receive referrals for under 16 unaccompanied asylum seekers through the MASH+ team.

Cases are transferred to the team in public law proceedings at the Case Management Hearing (this is a hearing in the early stages of court proceedings that aims to agree the timetable for proceedings). This will be managed through the 'transfer meetings' unless agreed by a Service Manager.

The team will work with children in legal proceedings until they become adopted or if at the end of legal proceedings the courts determine that the Local Authority does not require parental responsibility.



Child Protection Plans

Children deemed at risk of significant harm are presented to a multi-agency initial Child Protection Conference after section 47 child protection enquiries have been completed to determine the need for a Child Protection Plan.

A Child Protection Plan is made if it is agreed that a child is at continuing risk of significant harm or impairment of health and development.

Number of Child Protection Plans (at 31st March)

2016	2017	2018
189	220	116

Rate of Child Protection Plans per 10,000 (at 31st March)

	2015/16	2016/17	2017/18
Southend	49.2	56.8	30
Stat Neighbour average	53	50	Not available
National	43.1	43	Not available

As at March 2018, there were 116 children subject of a Child Protection Plan, a decrease of 104 from 220 in March 2017 and a rate of 30 children per 10,000. This was much lower than in 2017 and work is currently being completed by the Principle Independent Reviewing Officer to look at the dramatic reduction in this rate and to ensure that the right children are subject of a plan for the right amount of time.

Duration of Child Protection Plans

Monitoring of Child Protection Plans lasting two years or more is used to indicate the effectiveness of the Child Protection Plan in eliminating or significantly reducing the risk of significant harm. The percentage of children subject to Plans for more than 2 years was 2.6% at 31 March 2018, from 2.7% at 31 March 2017. This equates to three children and would suggest that the robust monitoring process developed to quality assure planning in all cases is beginning to ensure quality practice.

Duration of Child Protection Plans, as at 31 March

Duration of Child Protection Plans	2016/17	2017/18 provisional
Under 3 months	23.6%	11.2%
3-6 months	25.9%	9.8%
6-12 months	27.3%	37.4%
1-2 years	20.5%	34.6%
Over 2 years	2.7%	7%

It is evident that in 2017/18 many children and families whilst moving through child protection interventions in a timely manner did remain longer on plans than in the previous year with 21% of cases remaining on Child Protection Plans for less than six months, a decrease from 49.5% at the end of 2016/17. This is not necessarily a poor outcome as it takes time to ensure that actions on the plan to reduce risk and keep the child safer are implemented. Indeed there is evidence that for some children, especially those suffering from Neglect, a plan of under 3 months may not provide sustainable outcomes. The decrease in the percentage of children on Child Protection Plans for less than 6 months is

likely to be as a result of a number of larger families within a small cohort. 58.4% of children however remained on plans for less than 12 months.

Children becoming subject of a Child Protection Plan for a second or subsequent time:

This measure indicates whether a Child Protection Plan was successful in effectively reducing risks over time in comparison to the necessity for a further Child Protection Plan. In practice, this is determined by work undertaken with parents and children through the plan, the quality of the assessment of risks of significant harm, and the provision and accessibility of any support services subsequent to the child protection plan. For this performance indicator, a low score is generally seen as indicative of good performance.

The number of children subject of a Child Protection Plan for the second or subsequent time reduced from 29.3% in 2016/17 to 15.5% in 2017/18. This is much more in line with national figures for previous years and if anything is now lower than would be expected which is why work is being undertaken to review the Southend figures.

Percentage of children who became the subject of a child protection plan during the year ending 31 March who became the subject of a plan for a second or subsequent time

	2015/16	2016/17	2017/18
Southend	19%	29.3%	15.5%
Statistical neighbours	19%	22%	Not yet published
National	18%	19%	Not yet published

Private Fostering

A child under the age of 16 (under 18 if disabled) who is cared for, or proposed to be cared for, and provided with accommodation by someone other than a parent, person with parental responsibility or close relative for 28 days or more is described as being privately fostered. A private foster carer may be a friend of the family, the parent of a friend of the child or someone previously unknown to the child's family who is willing to privately foster a child. They may also be from extended family such as a cousin or great-aunt.

Local authorities do not approve private foster carers in the same way as general foster carers, but are required to assess and say whether or not they agree and accept a private fostering arrangement to ensure that the welfare of privately fostered children is being safeguarded and promoted. To fulfil this duty local authorities must take a pro-active approach in partnership with other agencies and other key professionals in raising public awareness of requirements regarding notifications of private fostering arrangements.

Southend has a formal Private Fostering Panel which considers all initial and final assessments in addition to annual reviews where required. Statutory checks are completed in line with the checks which are undertaken for any local authority foster carer. This panel ensure quality assurance and safeguarding issues are followed. All privately fostered children in Southend are deemed to be “Children in need” and as such have an allocated children’s social worker and a formal child in need plan.

- Since 2013, 4 households have been formally prohibited from privately fostering following presentation at the Private Fostering Panel.
- At the end of March 2018 there were three children known to be in private fostering arrangements in Southend all of whom were over the age of 10. This is a decrease from eight in March 2017. There are positive reasons for the reduction and we monitor these arrangements closely.

Due to intelligence gathering amongst agencies, prohibitions offer a layer of protection for other young people not just the privately fostered child. Should an individual who has been prohibited allow another young person to reside in their care, this will remain a criminal offence and allow the police to act swiftly and accordingly.

Private Fostering was again included in September 2017’s “The weekly newsletter” which is posted on the Southend Learning Network and is a high profile document for schools. This is also distributed internally to those who work with schools and therefore hits a higher target audience.

Following the recent discovery of French exchange students frequently staying with host families in Southend, an initial meeting has been held with Border Control from London Southend Airport to ensure that any young person who would be considered under the private fostering regulations are treated accordingly in line with the regulations. The next stage will be to contact the Language School involved to discuss ways to ensure clarity around length of stay and essential paperwork at the earliest stage including signed paperwork from the parents in relation to private fostering arrangements.

Regular briefing sessions are held for Student Social Workers placed in Adults and Children’s services and for the NQSW group. Further sessions were held in the autumn of 2017 to ensure that new entrants to Southend are fully aware of the issues and processes involved in respect of Private Fostering and will take place again during 2018/19.

Bi-Annual reports are presented to the Southend local safeguarding board to monitor both compliance and the multi-agency approach to safeguarding these vulnerable children and young people.

The Family courts

The Family Justice Review Report (FJR) in 2015 attempts to significantly reduce delay within the family courts and in care proceedings from a national average length for the completion of care proceedings in 2013 of 46 weeks. The expectation following the review is that all care proceedings should be completed within 26 weeks. In exceptional circumstances, cases can be extended for a further 8 weeks.

The duration of court proceedings in Southend had improved year on year since the changes were implemented in 2015 to an average of 23 weeks in 2016/17. However there was a rise from 23 weeks in quarter 1 of 2017/18 to 30 weeks by the last quarter. This is in line with the national rise to 32 weeks in the same period.

The rise in timescales is due to a number of reasons including being adjourned by the courts due to late applications made by family members and some unusual decision making within the courts. In one case the placement order was delayed for 12 months to give the family a chance, leaving a young child in public care for an extended period. These issues have been fully raised with the courts and it is expected that improvements will be seen in the coming year with a number of new circuit and district judges being allocated to the Chelmsford courts.

Timescales will continue to be monitored closely.

The public law outline (PLO) is a process that all local authorities have to follow in their conduct of care proceedings. The current PLO accommodates the changes brought in following the Family Justice Review and puts a much greater emphasis on pre-proceedings work.

For care proceedings to run smoothly and efficiently, it is essential that as much work as possible is done in the preliminary stages before care proceedings are issued. The family courts expect that a Family PLO meeting must have been held prior to issuing care proceedings. The role of this meeting is becoming increasingly important in care proceedings. Prospective family members who may be considered as an alternative long-term carer for a child must be identified at the earliest possible stage to ensure assessments commence in a timely manner.

- During 2017/18, pre-proceedings agreements were initiated for **106** children and ended for **96**. 3 children remain subject to an active pre-proceedings process as at the end of March 2018, an improvement from 37 at the end of March 2017.
- Recent data received from CAFCASS (the Children and Family Court Advisory and Support Service) shows that the number of court applications in Southend has decreased from 79 in 2016/17 to 56 in 2017/18.

Overview of care population

One of our key principles is that children are best cared for within their families wherever this can be safely achieved. We are always striving to improve practice in respect of care planning to ensure that we can say confidently which children need to come into care and identify which children's outcomes will be improved by entering the care system. We continue to have higher numbers of children in care per 10,000 population under 18 years of age than our statistical neighbours (other local authorities with similar profiles). This rate remained consistent between 2014/5 and 2015/16, but increased significantly during 2016/17 and has continued to rise in 2017/18.

Number of looked after children at 31st March 2018

	2015/16	2016/17	2017/18
Southend	262	282	295

Children looked after per 10,000 population aged under 18

	2015/16	2016/17	2017/18
Southend	68	73	76
Stat neighbours	66	68	Not yet published
National	60	62	

There has been a significant rise in the number of looked after children over the past 3 years. At the 31st March 2018 Southend was responsible for looking after (i.e. were corporate parents for) 295 children and young people, an increase of 12% compared to the same time in 2015/16 and a 5% increase on 2016/17. Key to understanding this rise is consideration of the profile, especially the age of looked after children entering care and ages and reasons for leaving care.

Age breakdown of children entering care during the year ending 31st March,

Age	2016	2017	2018
Under 1	34(25.9%)	22(14.4%)	31 (25.2%)
1-4	30(22.9%)	41(26.8%)	18 (14.6%)
5-9	24(18.3%)	32(20.9%)	13 (10.6%)
10-15	33(25.2%)	40(26.1%)	27 (22%)
16 and over	10(7.6%)	18(11.8%)	34 (27.6%)
Total	131	153	123

The number of over 16's and the percentage of this age group within the total number of children entering care has increased considerably in 2017/18 and the percentage of children aged 5-15 years has decreased from 47.1% to 32.6%. There has been a recent trend in unaccompanied asylum seeking males aged over 17 years presenting for services, which has led to an increase in those over the age of 16 years rising from 7.6% in 2016 to 27.6% in 2018. In addition we have identified a number of females in this category at high risk of sexual exploitation through a specific police operation

The largest increase this past year has been in under 1's which has increased from 14.4% to 25.2%. Many of these placements have been mother and baby placements which has been a total change in trend over the past year and has placed considerable pressure on services in this area.

The table below includes an age breakdown of the total number of looked after children at year end which also illustrates the impact on the total number of looked after children between 2016 and 2018.

Age breakdown of total number of looked after children, at year ending 31 March

Age	2016	2017	2018
Under 1	22	17	25
1-4	38	41	29
5-9	41	49	55
10-15	94	113	115
16 and over	67	62	71
Total	262	282	295

Ethnicity breakdown of looked after children at 31 March 2018

Ethnicity	Southend LAC 2018	Total Southend under 18 population
White British & Other	84%	91.6%
Mixed	4%	2.1%
Asian or Asian British	3%	3.7%
Black or Black British	6%	2.1%
Other ethnic group	3%	0.5%

(Total under 18 population ethnicity breakdown from Southend 2011 census return)

When compared to the percentage ethnicity breakdown of the Southend population taken from the 2011 census, there continues to be a disproportionality in the ethnic representation of the looked after children population compared to the general population. Much research has been undertaken about disproportionality in the ethnicity of looked after children in the care system in England compared to the general population. Owen & Stathams's report on Disproportionality in Child Welfare (2009) is widely referenced in relation to this issue and shows that children from black and mixed ethnic backgrounds are usually over-represented in the care system and in the children in needs statistics in England, with children from Asian backgrounds usually under-represented. Southend's population follows this national pattern, but also has under representation of children from white backgrounds.

109 children left care during 2017/18. Of these:

- 33 (30%) were adopted;
- 9 (8.2%) were made the subject of a special guardianship order;
- 22 (20.1%) returned home and
- 21 ceased to be looked after for any other reason (19.2%) the majority of these turned 18yrs.

During 2017/18, 31 children either returned home to parents or left care permanently to live with a relative under a Special Guardianship/Child Arrangement Order, compared to 52 in the previous year. This is a significant decrease but can be accounted for by an increase in the number of young people turning 18, several of whom returned home but do not show in the figures as they ceased to be looked after on their 18th birthday. In addition of the 21

who ceased to be looked after for any other reason, a number of these returned home either because they turned 18 or were miscoded on the electronic system.

A child will usually return home as a result of changes that the family have made, either as a result of intervention by Children's Social Care or by the family making alternative arrangements for example by the making of a Special Guardianship Order/Child Arrangement Order. Positive changes may not always be sustained by families despite the support put in place, so if children are referred back again to Children's Social Care, any previous looked after child episodes are considered as a part of the assessment (as are prior Child Protection Plans) and any management decisions made would need to ensure children are not left in neglectful or abusive environments.

Reunification

As stated earlier in this report, one of our key principles is that children are best cared for within their families wherever this can be safely achieved. As a part of the work undertaken through the Edge of Care team and Marigold Assessment Plus, alongside Fieldwork Services, during 2016/17 work was undertaken to bring together a clear reunification framework. The reunification framework identifies the key stages in the process of assessing, deciding, and supporting (with interventions) a child or young person to return to the care of their parents or family members where there have previously been risks or concerns about the care that they are able to offer.

This process begins with the identification of a potential for reunification. The framework identifies the likely triggers that will initiate a conversation about whether there is a possibility of reunification, or taking steps towards reunification for a child. We are always aware that risks change as a young person gets older and positive changes are often made in families over time.

However, it is proposed that reunification is only one part of a much broader approach that will facilitate improved outcomes for children, providing a commitment to strengthening family relationships for all looked after children whether there is a prospect of reunification or not. There is a continuum of parental/family involvement ranging from improving the quality of a very small amount of contact, to increasing opportunities for increased/unsupervised/staying contact, to returning home part time basis and then reunification. It is believed that the above approach will facilitate both improved outcomes for children as well as proactively working with families to create opportunities for reunification, rather than awaiting for 'triggers' to be evident. It is important that services that support this are accessible in a timely way.

The process is based around the NSPCC model for reunification (Wilkins M. and Farmer E. (2015) Reunification: an evidence-informed framework for return home practice. London: NSPCC & Wilkins M. (2015) How to implement the reunification practice framework: a checklist for local authorities. London: NSPCC) and also using the Return Home from Care Report (DfE 2015).

Where it is decided that now is not the right time to initiate an assessment for reunification, there will always be consideration of what work can be undertaken to strengthen the relationships for a LAC child with their family, with a view to considering the appropriateness of reunification to birth family at a later stage in their life.

During 2017/18, a small number of staff were recruited to drive forward reunification plans alongside Edge of Care and the Marigold Assessment Plus Service.

For more detail see section on Edge of Care.

Marigold Assessment Plus

Marigold Assessment Plus is the overarching term for a range of services that includes Contact Services, Parenting Assessment and Support Services; The Rise Project, Targeted Family Support Services such as Theraplay and MIM's assessments, alongside a range of other family support services. The service offers a high quality assessment and support service, complementing the core social work and early help offer and additionally providing targeted support for families where their children are looked after or within Child Protection (CP) and Public Law Outline (PLO) processes.

Families may first be referred to the service for assessed contact, which then may move to a parenting assessment, with or without a support programme (reducing the tendency for these programmes to be requested as a recommendation of the assessment and causing further delay for the child) and then, depending on the outcome of the assessment, move onto a Back Together Programme, supported contact or life story work.

Parenting Assessment & PAMS assessments

The service integrates for families the assessment, intervention and supervision elements of parenting assessments. Staff in the different areas of the service work together to ensure that information is collated, and that parenting assessments give a holistic view of a family's abilities and potential for development and change.

Within the service there are three senior practitioners, who lead on parenting assessments, assisted by the Children & Family Workers who have expertise in various areas such as Theraplay.

Between April 2017 and April 2018, **54** parenting assessments and **7** siblings assessments were completed within time scales of between **2** (addendum assessments) and 12 weeks, including PAMS compliant assessments, specially designed to support parents with any level of learning disability.

The majority of assessments were completed between 8 and 10 weeks and where issues arose during the process, interventions were added to support parents to start to make the

changes necessary for them to parent their children into the future. All assessments were completed within Court directed time scales.

The standard of parenting assessments is such that a considerable amount of compliments have been received from the courts this year with one judge stating that the evidence given by a representative from the Marigold Service changed his original thinking and made him change his mind about the case (10/01/18) and another rating the evidence given by a Marigold Senior Practitioner as *"impressive"* (27/01/18).

Contact services

The Marigold Assessment Plus Service provides contact for looked after children and their birth families. The integration of contact and assessment services reduce delay, ensuring that court deadlines are met, with services streamlined and making sense to service users and stakeholders. The centre is open six days a week from 8.30 until 18.30 with contact being provided for 10 plus families on Saturdays, and on occasions provides contact supervision on Sundays as required.

Between April 2017 and April 2018, 206 (152 in 2016/17) children between the ages of 0 and 16 living in foster care or with extended family under a Special Guardianship Order were provided with contact sessions ranging from two hours twice a week, once a month or school holidays only, either at the Centre or out in the community, and supported by highly trained and qualified contact facilitators. Life story work and positive parenting is incorporated in contact where appropriate. Assessed Contact may move to Supported Contact where reunification is the plan or where children in foster care have on going contact with their birth families.

The Allan Cole Contact Centre received its enhanced accreditation in December 2013 as the first local authority to be accredited by the National Association for Child Contact Centres. This allows the centre to offer a contact service for families within private court proceedings with referrals being made via Solicitors, CAFCAS and other local authorities.

In addition, 16 children referred by CAFCASS/private solicitors received a contact service where Courts ordered that children residing with one parent should have supervised contact with their non- resident parent, a service paid for by parents and offered on Saturdays only.

Feedback from one of our private service users described the centre and staff as *"fabulous"* and said he had recommended our service to others.

"Thank you for making our contacts with J and M memorable and fun. A special thank you for Jayne for being a massive comfort to us and taking us through our final few contacts and for being there for our wish you well contact. We appreciate everything the staff and centre have done over these past few months" (parents' feedback on contact, May 2017).

"I can't thank you enough for the time you have given to me and thanks to all the staff involved, that made myself and my son so welcome" (parent 29/3/18)

Back Together Programmes including positive parenting (based on the Triple P enhanced Positive Parenting Programme), including Parent-Child Game interventions

Where a decision has been made that a child can safely return home after a period of time in foster care, research indicates that a programme of robust support is helpful with this transition, through rebuilding attachment and support parents in resuming their parenting roles. Theraplay and the Triple P based positive parenting programme forms part of the support offered to families. The service works closely with other support teams in preventing further family breakdown and this will be extended during 2017/18 to inform and support the formal reunification service.

David and Ward (2012) found that parents participating in the Triple P based positive parenting programmes made significant improvements in the management of problematic situations.

This programme can also be implemented as part of contact sessions to enhance the quality of contact between looked after children and their parents. The Parent-Child game intervention is particularly effective in helping parents to manage their children's behaviour and develop a more nurturing relationship.

Between April 2017 and April 2018, 6 Back Together and Positive Parenting Programmes were completed successfully, with no further separations for the families who benefited from these programmes.

Marschack Intervention Method and Theraplay

Davies and Ward (2012) reporting on the outcomes of Interaction Guiding (an intervention based on the same principles as Theraplay) state that "A significant decrease in disrupted communication was found between mothers and infants in the interaction guidance group".

The intervention can be offered to birth parents, as well as foster carers/adoptive parents, Special Guardians to build up attachment between parents/carers and the children in their care.

In 2017/18 the service delivered the Principles of Theraplay programmes to **10** families with many of the parents/carers reporting a real improvement in their bond with the children.

Theraplay assessment of attachment sessions (MIM) are also used to inform parenting assessments and between 2017 and 2018, **47** MIM sessions were completed. Over the past year the service has continued to act as a core support for Special Guardians, who often struggle in the early stages of placement.

""Very friendly place, the staff are lovely and very easy to talk to and they don't judge. Every parent should do it because it teaches you so much". (feedback from parent 24/10/17

Thames Valley Partners Programme

This is a programme which runs for female partners of men attending the Sex Offender Treatment Programme, who may in some capacity have children in their care who are potentially at risk. Within this programme, 'partner' is defined as being in a current or recent relationship. The group is also appropriate for women who have been in a relationship with men where there has been an allegation of sexual abuse against a child that could make their children vulnerable to sexual harm. The term partner can also apply to women who have relationships with the men, such as mother or sister, who would benefit from information and support to keep children safe and to reduce the risk of men re-offending against children in the future.

The group aims to:

- Assist in making and maintaining informed decisions about their relationship with the offender and their children's safety.
- Assist partners who remain in a relationship with an offender
- In protecting children from sexual abuse by him or another offender
- In contributing to the offenders' new life plan, including monitoring the relapse prevention plan and supporting him in a positive future lifestyle
- Assisting partners who choose not to remain in a relationship with the offender in protecting themselves and their children against any other sex offender
- Help the partners to understand and deal with the effects of their partners' abuse on themselves; the child and the family as a whole.

In the past year there was 1 programme completed within the centre, spanning 12 weeks and supporting 5 women.

Sexual Risk Reduction Programme/ Sexual Risk Consultations

In addition to the above programme, this programme and associated consultations, work with young offenders to both assess future risk and to support in a change in lifestyle and behaviour.

Between April 2017 and April 2018, 5 males and 1 female have worked with specialist staff allowing for better informed decision making about the safety of an offender living with their families as well as supporting reunification of families where sexual risk was a factor in separation of juvenile offenders.

A specialist part time worker has also supported 9 parents/carers to manage challenging or sexualised behaviours of children in their care and provided mediation within Special Guardianship proceedings.

Two safe sibling interventions took place to re-integrate children who sexually abused one of their siblings safely within their families.

Domestic Violence Risk reduction Programme

The therapist based part time within the team, works with (step) fathers who are deemed at risk of domestic violence or struggling to communicate positively with children/young people in their care. Between April 2017 and April 2018, 7 males benefitted from individual sessions.

Life story work/books

Every child who is placed for adoption and many who are in long foster care are provided with a life story book to help them to make sense of their past as they grow up. For younger children this is a book completed which gives clear information about the child's birth family and their journey through care. For older children, the book will be completed jointly with the child to help them to understand why they are in care and unable to return to the care of their birth family.

Between April 2017 and April 2018, **31** books were completed and direct work took place with 13 children.

"You have done an amazing job; very age appropriate" (adoptive parent about child life story book April 2017)

"So I just wanted to say thank you and give you some wonderful feedback. T (child) loves his life story book, it was the right time for him and he is doing very well". (October 2017)

Look At Me Programme/wishes and feelings.

This programme (LAMP) is designed to help children who are showing behavioural difficulties with their carers/parents. The children referred often have unresolved feelings of grief and anger about their past and/or current situation.

The programme aims to support the child to express his/her feelings and to provide the child with strategies to cope with overwhelming feelings without having to resort to behaviours which create difficulties.

In 2017/18 a service was provided for **5** children.

Just Right State

To build on the above some of the staff has been trained to run the "Just Right State". This is a programme designed to support children to self-regulate their behaviour and has in the past year been implemented with 2 children and their carers.

The Rise Project (based on the Pause Project)

The Rise Project started in April 2017. Its aim is to reduce recurrent care proceedings by providing a service to parents who have had one or more children permanently removed from their care. The service provides a space for parents to focus on aspects of life other than having and looking after their children, such as obtaining qualifications, employment, housing, voluntary work, good health care and positive links with their local community.

The project allocates a dedicated worker to each parent who assists them with achieving their goals, providing some of the structure, nurture, challenge and engagement that the parents may have missed out on in their own childhoods. The project has been successful in other areas of the country where parents have been assisted to achieve their own potential before embarking on parenthood again. Each parent receives the support for 18 months.

In 2017/18, 5 women have been recruited onto the programme. The programme is monitored and evaluated by Essex University.

Educational attainment of looked after children and young people

The Virtual School for looked after children works with children and young people from early years to the age of 18. It prioritises the individual learning or training needs of a child or young people in care, identifies the skills necessary for participation in an education, training or work environment and supports young people to acquire and adapt these skills for learning and for life. The Virtual School have developed and closely monitored the Personal Education Plans for all looked after children to ensure that the actions identified drive forward these priorities.

The educational outcomes for looked after children in Southend rely on established integrated partnership working between the Virtual School, social workers, schools and carers. This is supported by the provision of additional targeted support together with the understanding of how the day to day realities of being in care can affect a young person's capacity to learn and participate.

A breakdown of the educational data for summer 2017 for Southend looked after children at Key Stage 4 was presented in the Autumn of 2017 as part of the Virtual School annual report.

2016/17	4-9 English and Maths	5-9 English and Maths	Cohort
Southend	20.0%	6.7%	15
East of England	17%	7.2%	480
National	17%	7.4%	5010

Southend has improved in 2016/17 in those achieving level 4-9 in English and Maths and is above the performance of East of England and National average. Caution however is required however due to small number in the cohort.

The following tables summarise the percentage achievement for KS2 results for LAC who have achieved the expected standard or better in Reading, Writing and Mathematics for the past 2 years.

KS2 Reading	2015/16	2016/17	Change	cohort
Southend	30%	33.3%	↑ 3	9
East of England	38%	46%	↑ 8	260
National	41%	45%	↑ 4	3010

KS2 Writing	2015/16	2016/17	Change	cohort
Southend	30%	44.4%	↑ 14	9
East of England	43%	43%	→ 0	260
National	46%	47%	↑ 1	3000

KS2 Maths	2015/16	2016/17	Change	cohort
Southend	30%	44.4%	↑ 14	9
East of England	36%	44%	↑ 8	260
National	41%	46%	↑ 5	3000

Attainment in 2016/17 took a noticeable step forwards and although this needs to be viewed with some caution due to the cohort size the improvement is very positive. In 2016/17, Southend was ranked in the top 25% of all local authorities for Attainment 8 and Progress 8.

For more detail see virtual school annual report

Early years

Children in reception class are assessed in the Early Stage Foundation stage. Schools report this data to the Department for education but they are not a part of the national indicator set for looked after children. In order to track the educational progress and attainment of our youngest children, the Early Years Team collects data in a number of areas. The children are judged against the criteria of emerging expectations, meeting expectations and exceeding expectations. The area in which data will be collected in 2017/18 academic year will be:

- Personal social and emotional development
- Physical development
- Communication and language
- Maths
- Literacy

The Early Years Team ensure that the children’s identified needs are being appropriately supported using the early years pupil premium and raise any issues directly with the Virtual School.

During 2017/18 there has been continued increased focus on supporting carers to provide quality educational activities in the home. Carers have continued to be supported with resources and home visits with a particular focus on early reading skills.

The fostering service and social workers for the children have been actively ensuring that when appropriate, children are accessing the 15 hours of free nursery that they are entitled to. This is a valuable additional resource that supports the holistic education of the child.

Attendance and exclusions

The results published for the last academic year shows a slight increase on the previous year in the percentage of looked after children classed as persistent absentees to 19%. This figure is higher than the average for our statistical neighbours and the national average published for the previous year.

Percentage of looked after children classed as persistent absentees at 31st March

	2016	2017	2018
Southend	15.1%	20%	18.4%

*A low percentage represents better performance

The Virtual School have implemented the monitoring of attendance through Welfare Call. The focus is to engage foster carers and schools to identify issues before they become a problem and implement a plan to support future improved attendance.

The percentage of young people who have had fixed term exclusions has decreased by 1.8% in the 2016/17 academic year, to 13.8%. In March 2018 this stood at 13.2%.

Pupils who received more than one exclusion have all been supported by the Virtual School. Alternative education provision has been provided through agencies such as Figure of Eight to minimise the disruption to their education and Edge of Care have offered significant support to foster care placements which often struggle when a young person is at home during term time on a full time basis for any length of time.

There were no permanent exclusions during the 2017/18 academic year.

Pupil Premium

Young people are eligible to receive full Pupil Premium of £1,900 per year from their first day in care and the Virtual Headteacher is responsible for ensuring that this is distributed and used in line with a robust educational support plan. Use of this includes a range of interventions including maths and literacy additional support programmes, tutoring, additional equipment and books and counselling.

The Virtual School was also able in both 2016/17 and again in 2017/18 to provide GCSE revision guides for all young people taking their exams to support their final year academic success.

Looked After children awards

The looked after children awards continue to be celebrated on an annual basis.

Add in a statement for lac awards

In 2017/18 the awards took place to celebrate the achievements of Southend's looked after children and care leavers. Children and young people were nominated for a range of reasons including improved performance at school, achievements in specific areas of the curriculum and having a positive attitude in spite of difficulties like changing school or placement.

Care leavers were recognised for outstanding performance and effort including academic success at University.

A total of 55 young people were nominated for an award in recognition of their hard work and commitment to their education.

Examples of some of the nominations:

"I would like to nominate Amy. She has made huge improvements both in her attendance and her attitude towards learning over the past 10 months. She has managed to go from near permanent exclusion to receiving the student of the year award last term! Her attendance is now 100% and her entire outlook and attitude towards school and learning has turned completely around."

"I would like to nominate Abbey for being a superb student achieving A 3 As and the rest Bs in her GCSEs and securing a place at Southend High School for boys Sixth form! We're all super proud of her."*

"Faith was recently placed into care, after a horrendous time at her family home from the age of 10 years old to the current. Faith felt pushed out by her Mum and step dad and new baby brother and received some shocking treatment at home. Causing her to seek attention elsewhere and after a tragic incident her attendance gradually fell to below 30% causing her to sofa surf for over a year mixing with extremely unsuitable characters for her age and getting herself into worrying situations. Faith's self-esteem and self-confidence was at an all-time low and there were concerns we would lose her to drink and drugs. Faith has always been a lovely bright young woman with a promising future in Law. However, her academics suffered dramatically and her catching up became an impossible target.

However, there was a dramatic and instant improvement when Faith was placed into care. Faith has attended school every day since and also catch up and revision sessions to enable her to catch up with her coursework and raise her grades from D/E's back up to A's/B's. Faith is back on track to attend SHS 6th form with a view to follow her original dream of attending university to pursue a career in Law or stockbroking.

I have never seen such a dramatic and positive change in anybody like this before and her IRO officer and I are massively impressed with Faith and where she has come from and is going. So proud of her achievements and resilience she is an extremely worthy winner of every award going!!!!”

Education, employment and training

The virtual school supports young people, alongside the 16+ service, who have left statutory care at the age of 18, into education, employment and training opportunities.

The consistent support offered has again resulted in a low number of young people who are NEET (not in education, employment or training).

- The number of young people without any qualifications has decreased. At September 2017: 121 (61.4%) of care leavers were in education;
- 18 (9.1%) were in training;
- 23 (11.7%) were in employment and
- 8 (4.1%) were on apprenticeships.

Percentage of 19, 20 and 21 yr olds that are in Education, employment and training at March 2018

	2015/16	2016/17	2017/18
Southend	60%	52.3%	40.5%

The numbers of young people successfully engaged in education, employment and training as at March 2018 was 40.5%. There are however 16% of the cohort where data is currently unavailable. The figure for young people not in education, employment or training at March 2018 was 44.1%, an increase on the same point last year and a reduction from figures in September 2017. This is a fairly consistent trend as some young people that signed up for courses in September but who drop out by the end of the summer term and by late autumn were deemed NEET.

Higher education

Southend’s performance has been consistently strong for a number of years with 5.6% of care leavers enrolled on degree courses.

Southend continues to successfully support young people to attend university and at March 18 there were 11 young people attending University.

Health of looked after children

The Southend looked after children health service is provided by North East London Foundation Trust (NELFT) and Southend University Foundation Trust Hospital. They are commissioned to provide: all statutory health entitlements in a timely manner; an up to date health care plan for all looked after children, designed in partnership with the child where appropriate; and a range of health based interventions, health promotion, advice and information are offered to looked after children and their carers.

Southend Hospital is commissioned to provide initial health assessments for children and young people coming into care.

Looked after children and young people have the same health risks and concerns as their peers. However, they are known to have a higher vulnerability as they often enter into care with unidentified health issues as a result of receiving poorer parenting, histories of abuse or neglect, having an unknown health history and higher levels of social mobility. Therefore they have poorer long term health outcomes than their peers. The National Institute of Clinical Excellence (NICE) reported in 2013 that about 60% of children and young people who are looked after in England are reported to have emotional and mental health problems and a higher proportion experience poor health, educational and social outcomes after leaving care.

It is a requirement for children and young people coming into care to have an initial health assessment within 20 days of becoming looked after and subsequent review health assessments every 6 months up to the age of 5yrs then annually thereafter.

% of children whose initial health assessment was within 20 working days of them becoming looked after at the end of March

	2015/16	2016/17	2017/18
Southend	41.7%	27.4%	26.5%

Whilst only 26.5% of young people met this target in 2017/18, when we look at those where the medical was undertaken within 25 working days, the percentage increased dramatically to 43.2%

We continue to work closely with our health colleagues to identify barriers to achieving this target and continue to have a clear action plan in place for 2018/19.

% looked after children whose health checks were in time at 31st March

	2016	2017	2018
Southend	92.1%	84.0%	84.5%
Statistical neighbours		86%	Not available
National		84%	Not available

84.5% of children and young people had their review health assessments completed at the end of March 2018, a very slight increase from the previous year. This is closely monitored and it is clear that there are currently a high number of older young people who are refusing to attend for formal medicals and where the health team continue to work at better ways to engage these young people. Southend also has a high number of young people placed for adoption outside of the Borough and due to reliance on external health authorities to undertake this work and provide details once complete, these medical often take additional time to be undertaken and received.

Concerted efforts have been made by the health team and social care to work collaboratively to improve performance on this indicator. There will as stated above also be a small number of young people who do not attend or refuse a health assessment. The looked after nurse follows up all non-attendance and attempts to arrange further appointments at venues convenient for the young person.

% of young people whose immunisations are up to date at end March

	2015/16	2016/17	2017/18
Southend	76.4%	63%	67.9%
Stat Neighbours	88%	87%	Not available
National	87%	89%	Not available

67.9% of children and young people had received the appropriate immunisations for their age in 2018, again reflecting the challenge for looked after children. This however was a slight improvement on the previous year.

% of young people who have attended the dentist at end of March

	2015/16	2016/17	2017/18
Southend	94%	90%	74.1%
Stat Neighbours		82%	Not available
National		83%	Not available

The looked after children health team co-ordinates the health needs of looked after children, providing a clear framework through universal and targeted services for children and young people to promote optimal health and wellbeing. Comprehensive initial health assessments and developmental reviews provide opportunities to identify and address any developmental delays.

Where particular health needs are identified the child or young person may be supported by the looked after children health team or where necessary referred on to specialist services. An SDQ (Strength and difficulties questionnaire) is completed on all looked after children over the age of 7 years to assess their emotional wellbeing status. Where at any stage emotional needs are identified, these are referred to the Emotional Wellbeing and Mental Health service (EWMHS previously CAMHS) for more specialist clinical assessment and intervention.

The figures reported for 2017/18 are greatly impacted by the migration to LCS where fostering forms are only just now coming on line and it is from these forms where much of this data is gathered. It is expected that these figures will be more accurately reported by the end of the second quarter 2018/19.

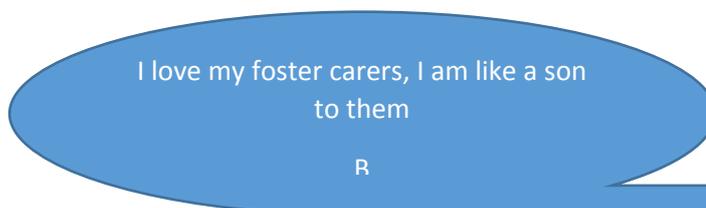
Placement activity

The indicators in this section are important measures of the stability of care that a child has experienced. On the whole, stability of placement and care is associated with better outcomes for children. Proper assessment of the child’s needs and a sufficient choice of placements to meet the varied and specific needs of different children are essential if appropriate stable placements are to be achieved. Inappropriate placements tend to break down and lead to more frequent moves for a young person.

% of looked after children with three or more placements in one year at end of March

	2016	2017	2018
Southend	11.5%	9.5%	9.3%

For this indicator a lower score is indicative of good performance. Performance in Southend is in line when compared to statistical neighbours and the national average. The criteria for this indicator has changed over the past few years. Previously when a child returned from a missing episode this was classified as a new placement, even if a child returned to the same placement. These are no longer included in this indicator. The percentage of looked after children with three or more placements in one year has remained fairly stable over the past few years. It was expected that the % would increase slightly during 2017/18 due to the high numbers of children being placed for adoption and where the making of an adoption order is being delayed through changes in the level of court challenge, however the service worked hard with Edge of Care to support placements which enabled the % to continue to reduce slightly year on year.



Percentage of looked after children aged under 16 looked after continuously for at least 2 ½ years who have been living in the same placement for at least 2 years (or placed for adoption and their adoptive placement together with their previous placement lasting for at least 2 years) as at 31st March.

	2016	2017	2018
Southend	64.7%	65.6%	Data currently unavailable from LCS
Stat neighbours	69.7%	Not available	
National	68%		

For this performance indicator a higher score is indicative of good performance. Instability for children is associated with poor outcomes, often disrupting children’s education, their access to services and threatening friendships established in a previous placement or prior to entering care. It is important that placements are sufficiently matched to children’s needs, are of sufficient quality, and are well supported, if placement breakdown is to be prevented.

Southend’s record has remained fairly stable over the past few years at around 70% and is similar to our statistical neighbours and against national figures. Most placement moves have been carefully planned, with most children then remaining in placement for at least 12 months. This provides evidence of well thought through care planning and good support for placements. Southend has over the past 24 months had a large number of young people turn 16 years who no longer count within this indicator, but do however remain in their long term stable placement.

Placement location and type

There are many reasons why some looked after children are placed away from Southend. Whilst availability of placements is a factor, some young people need to live out of area to help to keep them safe from harm or from dangerous influences closer to home. Others may need specialist care that is not available locally, or may be placed further afield but with family kinship carers.

Over the past 2-3 years, there has developed a national shortage of placements both fostering and residential which has led to challenges locally to ensure that placements are well matched. For most of 2017/18 In house fostering services have been running at around 118% capacity, which leads to pressures within fostering families. The support of the Edge of Care Team has been invaluable to carers during what has been a challenging time.

Foster carers feedback:

'Edge of Care taught me how to de-escalate situations. YP would not still be in my care without Edge of Care team'

'Edge of Care has been a revelation for us with our young person. We needed support and it was never at a convenient time. We need people who can work with our young person and us as at the same time and protect the placement and that's exactly what Edge of Care do. The fact they are available at all hours is a total life saver for us and makes us feel valued and not alone. We felt no-one understood how hard it was and we're frequently at the point of giving up. Now that is not going to happen as Edge of Care are there to protect the placement from breaking down. This can only be a good thing as these young people need stability and a secure base.'

Young People's feedback of the work of the Edge of Care Team:

"Thank you for picking me up and being on time. You are such good listeners and I like how you talk to me like I am a person not just a kid"

"You always listen to me and try to understand how I am feeling. It would be better if you could sort out school for me a bit more and get school to listen to me"

"I don't like having lots of different people with me"

"Thank you for supporting me no matter what"

"It's excellent, because they take you out as I haven't been going to school. You get to meet new people. It's better than other services I have worked with in the past as they spend time with you, make it more fun, and actually talk about what's going on for you.'

This issue of supply and demand has also shown an increase in external prices (this was addressed under financial performance).

Of the 292 children looked after by Southend at March 2018:

- 215(73.6%) were placed with foster carers and
- 78.3% were placed less than 20 miles from their home. The majority of those children in placements classified as 'at a distance' were placed in Essex or local authorities bordering Essex or were placed for adoption.

I would rather be here than
anywhere else.

Regarding his foster placement

It is recognised that children placed away from their home area may need additional support and the quality and impact of care and support that they receive is carefully planned and closely monitored. Where young people in any form of residential care, the placements are monitored through the multi-agency Acute and Complex Placement Panel to ensure that their health, including mental health, education and care need are appropriately being met with clear exit plans in place.

Number of looked after children by placement type as at 31st March 2018

Placement Type	Number of looked after children	Percentage
Foster placement (including kinship)	215	73.6%
Placed for adoption	16	5.5%
Placement with parents	6	2.1%
Residential childrens home	21	7.1%
Secure unit	2	0.7%
Youth offender institution*	0	0
Residential school	3	1.2%
Semi independent	27	9.2%
Foster to adopt	2	0.7%
Total	292	292

*Since December 2012 all young people remanded to custody automatically become looked after children (under the Legal Aid, Sentencing and Punishment of Offenders Act 2012)

The vast majority of looked after children are in foster placements (73.6%). Southend has a low number of children in residential children's homes with approximately 21 children in such placements at any one time. The use of residential placements is linked to the number of older young people coming into care, some with very concerning behaviour who struggle to adapt to living in an alternative family environment and for whom it is very difficult to find the right accommodation and has increased over the past 18 months. Southend makes a conscious decision to only use residential care where we cannot offer a placement in a family setting or where to do so would not be in the best interests identified for the young person. Where a residential placement is considered the 'best fit' for a young person, the service aims to move them on as soon as possible through careful care planning with a long term ambition for family life (at home or within a foster placement). The use of residential placements is constantly scrutinised and monitored both by senior managers and as stated earlier through the multi-agency acute and complex placement panel.

At the end of March 18 there were 2 young people placed in welfare secure accommodation. Both had very complex needs and were placed in secure accommodation for their own safety and to reduce the risk of absconding; CSE and gang activity. During this time the service continually plans for their next placement to match their complex needs.

Placement costs

Placement type	2015/6 average weekly cost	2016/17 average weekly cost	2017/18 average weekly cost
In house foster placement	£180 allowance per child but average one off fee of £213	£184 allowance per child but average one off fee of £213	£187 allowance per child but average one off fee of £213
PVI fostering placement	£700	£900	£1000
Residential and secure placements	£3,100	£3,800	£4227

The table above shows the difference in the average weekly costs in payments for in-house foster placements, independent foster placements and residential and secure placements. The figure for in house includes the average fees and allowances paid to in house foster carers, compared to the payments made to external agencies for placements. Costs over the past year for new external placements have risen sharply placing pressure on the external purchasing budget. A comprehensive recruitment strategy has been developed to attract more in-house foster carers. In 2017/18 we exceeded the target set for recruitment of in house carers, although due to a rise in care numbers, this success was quickly negated.

Comparative analysis of actual spend in the 2014/15, 2015/16, 2016/17 and 2017/18 financial years

Looked after children	2014/15	2015/16	2016/17	2017/18
Placement activity	Outturn	Outturn	Outturn	Outturn estimate
In house foster care	2,183,248	2,476,583	2,816,946	2,850,851
PVI foster care	2,129,900	1,412,435	1,447,431	1,228,010
Residential care	2,980,788	2,776,360	3,244,487	3,840,723

Foster carer recruitment

Southend has continued to be able to rely heavily on in house fostering provision against PVI (private, voluntary and independent) provision. Financial restraints mean that there is growing pressure to continue to recruit more in house carers which, as well as having significant financial benefit also facilitates better coordination of support to children.

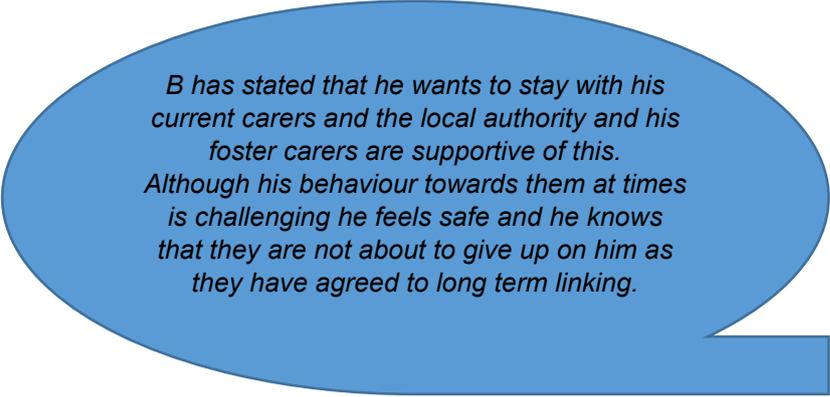
10 mainstream households were approved by Southend in the year 2017/18, alongside 9 kinship (family) carers. In order to meet the challenge of recruiting foster carers, a comprehensive recruitment and retention strategy has been developed. This has a number of strands and has been amalgamated with the Southend adoption recruitment programme. Southend's fees and allowances structure was reviewed in 2015 which enabled more carers to move into a fee paid status, to match and challenge private agencies who traditionally have paid much higher fees than local authorities. Whilst there remains a discrepancy between the two, it has allowed Southend to begin to compete in the market place.

The marketing strategy to recruit foster carers is continuing to develop, with improved usage of social media, targeted recruitment campaigns and drop-in sessions supported by existing foster carers and members of the fostering service. Our marketing officer continues to gain feedback from applicants as to the recruitment activity and it is positive that many say that they have approached Southend through word of mouth. The support over the past year of the edge of care team has been cited as a positive reason in a number of cases where word of mouth has been the vehicle.

A further successful avenue over the past two years has been in gaining carers from the independent sector through our campaigns and particularly through word of mouth. Local authorities were able when care numbers were stable, to begin to use less and less PVI carers which further encouraged a move to the local authority, Southend does however need to continue to support at a high level if we are going to prevent carers from moving away from the local authority in the future to the private sector, now that the demand for PVI placements is nationally beginning again to increase.

The Corporate Parenting Group monitors fostering recruitment closely and detailed information is regularly presented to the group. From sufficiency research locally, Southend needs to increase its core number of carers by at least 5 households annually if we are to begin to increase the number of young people able to remain in-house. If however care numbers begin again to rise at the levels that they have over the past 18 months (263 April 16; 282 April 17; 292 March 18) then we will need to increase our core numbers by nearer to 10-15 carers annually just to stand still. This remains a real challenge.

Southend's extensive foster carer training is highly valued by in-house carers and this has been extended to Special Guardians over the past year. Training includes sessions by the Virtual School and various therapeutic sessions; attachment and self-harm; first aid and behaviour management; safeguarding and understanding risk; Child Sexual Exploitation and Missing; awareness of gangs and drugs. Some training is delivered face to face, but much is now on line at the request of carers. The service will continue to develop its training programme to meet the changing needs and issues in society.



B has stated that he wants to stay with his current carers and the local authority and his foster carers are supportive of this. Although his behaviour towards them at times is challenging he feels safe and he knows that they are not about to give up on him as they have agreed to long term linking.

Additional support for looked after children

An independent visitors and advocacy scheme is available in Southend, commissioned through NYAS (National Youth Advocacy Service). At the end of March 2018, 4 young people were matched with an independent visitor and 3 new referrals were received by the service since March 2017.

The independent visitor service recruits volunteers who befriend, support and advise looked after children and young people. A careful matching process takes place to understand the interests of the young people and the independent visitor so that both the young person and independent visitor may share a hobby sport or interest. The project provides induction, training and supervision for the volunteers.

Social workers refer the young person to the service when they think a young person would benefit from developing a supportive relationship with an independent person. The service is explained to young people and it is the young person who makes the final decision about whether they would like to be matched with an independent visitor. The matter is raised by the independent reviewing officer at all looked after reviews where it is felt that such a service could benefit the young person.

Independent visitors usually have contact with a young person at least once a month, including telephone calls; text message conversations and face to face contact.

“I’m not sure I could have kept going with this without you”

“The volunteer looks fantastic”

“Thanks it’s been really helpful”

Young people comments on the NYAS service

Many of the young people currently matched with an independent visitor are teenagers. Most matches last a few years and usually come to a natural end point as young people get older and lead more independent lives themselves.

The NYAS service also offers and advocacy service for looked after children, where it is felt that maybe they are struggling to have their views and wishes heard.

There were **79** referrals for advocacy services during 2017/18, an increase from **68** the previous year. The main theme of these referrals was generally issues regarding placement moves, attendance at LAC reviews for support and pathway planning. All referrals were picked up by NYAS within 24 hours and contact made with the young person within 72 hours.

Clinical Services

Southend Children's Social Care receives clinical services through the Emotional Welfare and Mental Health Service (EWMHS, previously CAMHS) which is provided through North east London Foundation Trust and is jointly commissioned with Essex and Thurrock.

The clinical service operates on an outreach basis in order to promote accessibility for families, and in the year 2017/18, of referrals received, **54** were identified as being looked after children in Southend and **37** subject to Child Protection Plans.

During 2016/17 there were some key developments with the children and young people emotional well-being and mental health services, such as the development of the community eating disorder service, the review of the Suicide Prevention Toolkit for the Health and Wellbeing Boards and an increase in access to services with extended working times up to 9pm daily.

At the end of March 2017, 631 children and young people completed treatment, 26.94% in under 4 weeks; 20.13% in 4-8 weeks; 19.81% in 8-12 weeks and 33.12% in over 12 weeks. All children and young people presenting at A&E were assessed within 4 hours.

Information from the Success for All Children Group annual report for April 16 to March 17. At the time of writing this report I do not have the 2017/18 report to update this report

The Children with disabilities Service

The Children with disabilities Service is a Children's Social Care resource which offers a universal/plus targeted service for all children with disabilities who require additional support. The service focuses on providing the additional support required by families with disabled children and is based on the criteria of SEND provision and works closely with our partners in health and education to ensure a full wrap around service for some of our most vulnerable children and their families. The team also has a small number of children placed in statutory care and other residential provision.

The team currently support 118 children and young people and their families. Of the 118 children, 30 are female and 88 are male.

Age and disability breakdown for cases open to the Children with Disabilities service Mar 18

Age	Number of children
Under 5	11
5-9	21
10-15	47
16+	39
Total	118

Type of disability many will show in more than one column	Number of children
learning	36
mobility	12
incontinence	5
communication	11
Hearing	5
Behaviour	13
vision	6
Autism/Aspergers	41

Personalised budgets

Personalisation, which is about giving service users choice and control over their lives, particularly in how their needs are met, is an approach that continues to gain popularity as many families choose to take on more control over their lives and the opportunity to choose their own provision to meet family circumstances when it best suits them.

The Children and Family Act 2014 advocates the use of personal budgets, which means that rather than receiving services like accommodation and personal care, disabled people are supported to be able to plan and spend their budget as they choose. This gives families more control over how they use their budget to buy the service that makes sense to them at times that benefit them.

At the end of March 2018 there were **125** children receiving direct payments through Southend.

Short Breaks

Short breaks are defined as any service or activity outside of school hours which gives the family of a disabled child or young person a break from their caring responsibilities, and gives the disabled child or young person an enjoyable experience. Eligible provision therefore includes both targeted and specialist provision and mainstream activities outside school hours, for example holiday play schemes, after school clubs or one to one outreach support. Southend currently commissions around eight short break providers including providers such as Eco Wings and Marvellous Minds.

Excluding those families who access short break provision through direct payment, there are an additional 50 children who access the Short Breaks provision. Where families use their direct payments to access short break provision, they will usually seek support from the children with disabilities team to help to tailor packages to meet their child's specific needs.

Transition

During 2016/17 17 young people transitioned from children's to adult's services as they reached the age of 18. The Children with Disabilities team ensures that referrals are made to Adult Services as early as possible and joint meetings take place to ensure that the transition period is as smooth as possible for families and the young person involved.

If a young person is not likely to be eligible for support from Adult Services then the Children with disabilities team will link the family with transition health services to provide other support.

Special Educational needs

The Children and Families Act 2014 introduced significant changes to the special educational needs system that came into effect from September 2014, replacing educational statements with an Education, Health and Care Plan (EHCP). The team have worked closely with the SEN service to ensure a smooth transition and ensure an integrated approach for disability and special educational needs, where social care relates directly to special educational needs.

Acute and Complex Placement Panel

The aim of the Acute and Complex Placement Panel (ACPP) is to ensure that children with very complex needs, their families, and the universal services they access have the necessary support to, wherever possible, maintain their care at home and their education in the community. If it is not possible to maintain care at home, to ensure that children and young people presented to panel are provided with the opportunity to remain within their

community, supported by creative and flexible multi-agency packages of support which will address their care, educational, health and leisure needs.

The panels' strategic function is also to monitor local services and identify gaps in provision in order to inform the development of a range of local provision that is geared to meeting the needs of children and young people. For example:

- a. Consider outcomes of Disruption Meetings
- b. Investigate and report on quality concerns
- c. Report on external placement activity
- d. Initiate strategic discussion

If children and young people are unable to stay within their local community and if it is not possible for them to be placed within a family setting, in some cases they may require a time-limited experience of support within a residential environment or school. Wherever possible these placements should enable young people to maintain links with their community, friends and family networks. The panel ensures that placements, wherever possible, are planned rather than made in crisis, and to avoid crisis decisions which may have long term negative outcomes. It aims to make full use of the monitoring and review of placements, in tandem with Looked after Reviews and Annual Reviews of EHCP plans, in order to ensure

- e. Best value
- f. A needs-led approach
- g. A focus on outcomes

The ACPP also ensures that young people, either with disabilities or who are Looked After, who will require an ongoing service into adulthood, are reviewed and brought to the attention of the responsible agencies in a timely fashion (at age 14)

The ACPP meets on a monthly basis and includes Social Care; Continuing Health; Commissioners from Individual Placements; EWMHS; Virtual School and SEN.

Leaving Care Services

The Leaving Care service ensures that young people are supported to develop independent living skills, offered career advice and training and educational opportunities, and supported to reach their full potential in all aspects of their life. The local authority keeps in touch with care leavers until they are aged 21, or to the age of 25 and beyond if they are engaged in a full-time course of education, for the duration of the course or have a disability. The leaving care service currently supports 201 (187 previously reported) young people. They provide support to care leavers working closely with colleagues in other service areas to ensure a good transition at the age of 18, when a child's "looked after" care status ends. Leaving care support in Southend is provided by a mixture of qualified social workers and personal advisors, ensuring that young people receive a high quality professional service.

Housing is a significant issue for care leavers and the Leaving Care Service has been active with commissioners to ensure that young people are accommodated in a suitable provision. A young person's Pathway Plan enables the key-work support to be tailored to the needs of the individual young person.

Staying Put arrangements

When a young person reaches the age of 18, they are no longer considered to be "looked after". Foster carers play an important part in ensuring that young people are prepared for the move to independent living if this is what they choose, or by continuing to support them after the age of 18 through schemes such as Staying Put, where a young person's foster placement can be extended beyond their 18th birthday. The transition to adulthood is complex for all young people, and staying put arrangements enable young people to experience a transition from care to independence and adulthood that is more similar to that which most young people experience, and is based on need and not on age alone.

The Children and Families Act 2014 introduced the duty on local authorities in England to facilitate, monitor and support staying put arrangements for fostered young people until they reach the age of 21, where this is what they and their foster carers want, unless the local authority considers that the staying put arrangement is not consistent with the welfare of the young person.

Southend has been successful in driving forward the use of "staying-put" since 2014. The number of care leavers able to make use of this service has dropped significantly this year from 35 young people remaining in stable family placements post 18 against to 14 in March 18. This drop is mostly due a reduction in the cohort of young people aged under 21.

Special Guardianship Orders

The percentage of looked after children exiting care to a special guardianship order increased by 1% in the eastern region between 2014 and 2015, but remained generally static in 2016. In 2015/16 within the region, four out of eleven local authorities had a higher proportion of children exiting care via a special guardianship order including Southend. In 2015/16, 19% of children left care through the special guardianship route. During 2017/18, 8 children and young people became subject to a Special Guardianship Order a reduction from 18 in the previous year. A Special Guardianship Order (SGO) means that while parental responsibility remains with the parents, a carer (including foster carers) or relative can apply for the child to live with them, and make day to day decisions on behalf of the child. The Special Guardian is given over-riding parental responsibility for the child.

Southend work with all SGO families for three years following an order being granted (where the families agree to support) and where appropriate undertake review needs and financial assessments of families to ensure that wherever possible they are able to meet the needs of the young person throughout their childhood. During 2016/17 the specialist worker for SGO in conjunction with the adoption team and Marigold Assessment Plus set up

a new preparation training day for prospective special guardians to help them to take stock of the impact on them and their families of a Special Guardianship Order. In addition training for staff was completed in respect of the assessment process; support plans and highlighting the key areas of pressure for families involved. The training was well received during the past year allowing family members to reflect on and fully understand the impact of an SGO on them as a family.

The Southend SGO panel continues to act as a quality assurance panel, advising the local authority on final care planning options. SGO support in Southend continues to develop. The SGO support group continues to thrive, within which training and advice has been available to anyone in Southend holding an SGO. Proactive support is offered where placements are seen to be under pressure and close links with Marigold Assessment Plus have been further developed during 2017/18 to ensure parenting support and advocacy work where required. In 2017/18 Southend paid £339,323 in SGO/Residence Order allowances to support Southend children.

A concerning trend during 2016/17 was the higher disruption rate in SGO placements and the short timeframe where these have occurred. In several cases where disruption took place, concerns were raised as a part of the assessment process, however despite this, court orders were granted in favour of the special guardian. It became more evident that many Special Guardians did not envisage the level of disruption to their lives that the making of an order created. It was on this basis that the SGO training was developed and this has helped in the understanding for many prospective special guardians. We continue however to see some disruptions, although the level has reduced during 2017/18.

“I wouldn’t change it for the world.....but” is a common sentiment

“I should be the naughty nanny but instead I am having to be the strict parent whilst my daughter is able to be ‘the fun parent’. I have totally lost my role”

“My friends are starting to enjoy their lives; going out; going on holiday and I am having to sort out school uniform”

“I don’t want to start to resent her....but”

“What if I can’t do this”

“Thank you for the support group. It helped me to realise that I am not alone in how I feel and there is help out there”.

Comments from special guardians

Work is on-going with partners and the judiciary to review the use of Special Guardianship to attempt to reduce the level of disruption and ensure that orders are only granted where it is in the child’s best interest to do so.

Adoption

There has been a drive over the past two years to move towards Regional Adoption Agencies, to widen adoption recruitment; improve support for adopters and to place more children with adoptive families within shorter timescales. This has been driven by the DfE in conjunction with the Adoption leadership Board, a national board with a remit to drive significant improvements in the national adoption system of England. Southend are members of the Eastern Region Adoption Board. The Regional Adoption Board brings together Local Authorities and Voluntary Adoption Agencies and adopters, with the purpose of creating more opportunities for children within the region, to have timely access to secure permanent homes and to provide children with the best possible life chances.

In addition, Southend have continued over the past year to work closely with Essex, Hertfordshire, Suffolk, Luton and Adoption plus and Barnardo's (Voluntary adoption agencies) and Adopter Voice to form a Regional Adoption Alliance (Adopt East). It is hoped that this will create a larger pool of approved adopters with whom to match children.

Children placed for adoption

In 2017/18 a total of 38 Southend children were adopted an increase from 28 children adopted in 2016/17. This increase was despite a number of Adoptions being carried over to 2018/19 as a result of court adjournments. At the end of June 2018, 9 children have already been adopted and there are a further 14 children placed for adoption but not yet adopted and a further 33 children where the primary plan is adoption and we are either currently family finding or awaiting court agreement to the plan.

Number (and percentage) of looked after children who ceased to be looked after who were adopted.

	2014/15	2015/16	2016/17	2017/18
Southend	17 (15.7%)	25 (24.3%)	28 (18.3%)	38

Of the 38 children in Southend in 2017/18, 15 were girls and 23 were boys. An age breakdown is included below of the children's age at the time of the adoption order being granted (this will be different from the age when the children were placed with their adopters).

Age breakdown of children's age at the time of the adoption order being granted in 2017/18

Age in years	Number of children
Under 1	6
1-2	13
2-3	4
3+	15

As at the 31st March 2018, there were 16 children placed with their adoptive family but an adoption order had not yet been granted. 14 children had a formal plan for adoption but had not yet been placed with an adoptive family, where either family finding is on-going or we are awaiting the courts ratification of the plan. A further 28 had a potential plan for adoption whilst also having other parallel plans for permanency.

“Thank you for today Lauren, you held my friend’s hand when I couldn’t. I know it’s your job, but I feel like you have a connection with Jo and so I feel I can trust you to support her in the same way I try”

17 July 2018

“To Ann, Thank you for helping our family”

March 18, an adopted child

Adoption scorecard

The adoption scorecard aims to show how swiftly children are placed for adoption in each local authority. The local authorities’ performance is measured against key indicators which are applied to the number of children who have been adopted over a period of three years. As the numbers of children adopted each year in Southend remains relatively small, one child’s journey through the system can have a large impact on the average figures for a number of years.

The average time between a child entering care and moving in with an adoptive family has continued to decrease in Southend from an average of **505** days (2011-14) to **313** days (2014-17) in the latest scorecard. This is well below the national average of 520 days and shows a continuous downward trend. It is expected that average timescales may begin to rise in 2018/19 due to national court delays from adjourned appeals.

Whilst we will continue to work to reduce the average time between a child entering care and moving in with an adoptive family, our approach will always be to take the necessary time to find the right families for our children.

Average time between a child entering care and moving in with its adoptive family, for children who have been adopted (3 year average)

	Adoption Scorecard Outturn 2014/17
Southend	313 days
Southend's ranked position	1 st of 149
England Average	520 days

Southend continues to do significantly better than the national average in the time taken to match a child to an adoptive family once a court decision is received with an average of 107 days against a national average of 220 days. This shows a continued reduction from the previous scorecard.

Average time between a local authority receiving court authority to place a child and the local authority deciding on a match to an adoptive family (3 year average)

	Adoption Scorecard Outturn 2014/17
Southend	107 days
Southend's ranked position	4 th of 149
England Average	220

Recruiting adopters

10 adoptive families were recruited in 2017/18. As at the 31st March 2018 there were 5 Families approved but not yet matched or linked with children. All other families currently being supported by the adoption team have either had children placed with them or are linked to children and are waiting for the placement to be approved at panel.

Recruiting the right adopters for children remains a challenge for all local authorities and the situation in Southend is no different. Considerable work has been undertaken to attract prospective adopters to Southend which has proven very successful of late, with 30 families attending training in February & June of 2018 and a further 7 currently under assessment.

Since 2015, Southend has been working jointly with a number of agencies to consider forming a Regional Adoption Agency/Alliance (Adopt East – more information later). There has been increased activity through this group which includes local authorities and voluntary adoption agencies to ensure the best recruitment across the region of prospective adopters. Our profiles of children have been developed considerably and are well designed, up to date and use good quality dvd's and professional photographs. Responses to requests

for information about children are made in a timely way and the team are creative in the way that the matching process is managed to be most effective for individual children. A matching co-ordinator appointed for Adopt East has focused work across the region for the matching of children in a timely manner.

Support for adoption is currently mostly delivered in house by a highly trained team. Services are brought in and funded through the adoption support fund where needed. Given the size of Southend, decisions for support are able to progress in a timely manner and decisions made into services to be provided without any delay. Due to this, Southend has had no adoption disruptions for over 10 years.

Adoption support

Adoption support was brought back in house several years ago and since that time has developed greatly in speed and quality of the offer. Support for adoptive families is a major event in the life of a child and it has lifelong implications for all of the parties involved. The adoption team recognises that all parties may need support at different stages of the adoption journey.

The adoption service provides support to adoptive parents, their children and birth family members to enable them to remain in touch after an adoption order is granted. The letterbox administrator supports a regular indirect exchange of information between birth families and adopters. The team also provides support to help to maintain direct contact arrangements for adopted children and their birth relatives where this is in the child's interests.

Financial reviews are provided to families in regard to adoption allowance/support payments provided by the service, and adoptive families' needs are assessed when there is a change in circumstances. Ongoing therapeutic support is provided for adoptive families before and after the adoption order has been granted and the team will intervene whenever necessary to prevent the disruption of an adoption. The service works alongside the Marigold Assessment Plus to undertake life story work, offers support to adopted adults to access their records and works as part of intermediary services with birth families and adopted adults.

Adoption support is generally provided within the team and therefore is undertaken by staff who have already developed a strong relationship with the adoptive families; the service is diverse in the services offered and support is developed on an individual basis to meet the very individual needs of each child and their family.

Southend adoption team continue to run two post adoption groups. One is a post approval group, for all approved adopters who have not yet been linked with a child. This allows the team to offer ongoing training and to share profiles of children at an early stage. The Southend post adoption group continues to go from strength to strength and is very much adopter led with training and speakers as requested. The post adoption group continues to allow the team the opportunity to identify stresses within certain placements at an earlier stage and to pick up and undertake direct work with the family before a placement disrupts.

Where preschool children are placed for adoption in Southend families are encouraged to attend SPARKLES. SPARKLES is a group in which adopters are shown and encouraged to play with their own child using Theraplay techniques, a therapeutic approach that promotes the development of attachment relationships. SPARKLES has added benefits for adopters who have often gone on to develop supportive relationships and networks.

The need for families to be supported post placement continues to be on the increase as families seek to re-parent children impacted by the trauma experienced in their early childhoods.

In addition to Southend's on-going sparkles group and adopter training programme during 2017/18 over 35 families requested additional post adoption support many of whom continue to engage and access this service. In reality this means over 60 children are receiving on-going support. This has continued to increase with more children being brought into Southend and families seeing the impact of the support offered.

The Southend adoption team have continued to optimise access to the government Adoption Support Fund Scheme accessing over £48K in 2017/18 despite reduction in availability within the fund. Of this funding additional services are purchased but a significant proportion funds the skilled work the Adoption Team itself is able to provide.

Recognising that most adoptive families will require additional support at different times throughout their child's own journey in this project the Adoption Team is seeking to be proactive and preventative before major crisis occur aiming to minimise the risk of any disruption. For the parents we continued to run an NVR (non-violent resistance) support group, supported by Partnership projects.

The letterbox contact system continues to develop, currently supporting approximately 250 contact plans, in several cases including direct contact arrangements.

As young people are themselves approaching maturity it is recognised that the need for them to consider how their own history integrates with their experience of adoption is more prominent. The Southend adoption team seek to support adopted young adults who have been adopted. Before a young person reaches the age of 18, there is a review of the information exchange and direct contact made with the adoptive parents and young person. The numbers of young people reaching 18 is beginning to rapidly grow due to the increase in adoptive placements made over the past few years. It is recognised that just because a young person is reaching the age of 18 they may not be at a point in their lives where they wish to trace their birth family or request access to their adoption files. The team believe however that it is important that they know what services are available to them as young adults.

Southend Adoption Service recognises that when a child joins an adoptive family it is not only the immediate family that are impacted, but also their extended families and networks. The team regularly hold information sharing evenings for this group, to raise their awareness of the challenges adoption can bring and to explore practical support they may in turn be able to offer. The groups are well attended and have already proven a great success

in supporting placements where difficulties arise and allows the team to tap into the extended support with training to give them the understanding to help. Where families have large support networks or where a child being placed brings additional complexities individual events for families are arranged.

Southend adoption service recognises it can be a challenging and difficult time for existing children within a family who are approved to adopt to wait for a child to be placed in their family. In July 2016 the team started a group for 6 children aged between 6-8 years. The group gave the children an opportunity to share their feelings, ask any questions, make new friends and generally have fun together. Theraplay activities were introduced, which the children will be able to play with their new sibling, and help them to understand the importance of these simple games. The feedback from the children was very positive and is a group which the children have asked continue for both themselves and for new children in the same position. The children wanted this group to be called the “super Sibling Group”. This has continued to develop over the past 12 months.

Southend continues to be successful in recruiting adopters and often being able to utilize these placements for children through the national register forming a positive funding stream for Southend. This is financially beneficial to Southend Council with over £108,000 income generated in 2017/18. This income helps to offset expenditure and over the past few years has exceeded expenditure considerably. It does however have an impact on the level of post adoption support required. Due to the ongoing development of the Regional Adoption Agency Programme, Southend have seen in 2017/18 a dramatic reduction in the number of our families taking placements through the national adoption register which had a negative impact on the funding stream during 2017/18. In March 2018, there was a deficit between income and expenditure for inter-agency costs of around £366,000.

Birth Parent Support Group

Through 2017/18, Southend adoption team continued to run a birth parent support group which directly supports birth families who have been affected by adoption. The Birth parent group continues to meet on a monthly basis in a local community centre. Evidence has shown that the quantity and quality of letters received has continued to improve and has allowed some children to receive contact with birth families that they otherwise would have missed. The group seeks to offer birth parents a nurturing experience, eg they are offered warm drinks and toast and in turn they present as less defensive and more open to receiving support.

The group is advertised in local community areas to ensure that as many families as possible can be supported. The team have supported several young mums through a second pregnancy and have been able to continue to support several very vulnerable parents, post adoption. They have worked closely with the Marigold Pause project for several of these vulnerable young mums. During 2017/18 the team again successfully engaged with some birth parents who previously had no on-going contact with the Department, allowing their

adopted children to receive information about their birth families and therefore to begin to really make sense of their backgrounds.

During 2017/18, Southend adoption team developed further the “Just Right State”. In addition NVR training has been run with a number of partner agencies to support further the work that is undertaken across the Borough.

In 2017/18 the team developed further Mindfulness Meditation Training. This course recognises that in order to manage the continuous challenge of being parents the parents themselves need to be valued and develop strategies. In addition there has been a robust post adoption training agenda looking at parenting techniques and strategies; sharing difficult information; health and social media issues.

Most recently the team have started a pilot project with Cornerstone regarding the use of virtual reality. Cornerstone a Voluntary Agency set up by adoptive parents to support adoptive families began to develop this project in 2017. The initial focus was to find a way to support prospective adopters and foster carers to achieve a greater understanding of the actual reality that children known to social may have previously experienced, more than intellectual understanding. The adoption team from Southend were involved in this from the start with the opportunity to meet with the film crews and influence how the films were initially developed.

The VR films have been filmed in 360 to give the full immersive experience which allow parents and carers to understand the impact of trauma and attachment from the child’s perspective. In turn this can elicit a greater degree of insight and empathy.

Through the immersive films individuals can open up worlds never seen before. That of a child in the care system. What they have been through, how this affected them and, more importantly, how the parent, adopter, foster carer, social worker and teacher can see things from the child’s perspective.

The VR films engage with a different part of the brain to the cognitive rational side most function in which means the experience taps in the emotional and physiological parts as well.

As the pilot has begun to develop many Local Authorities have sought to be become involved recognising the potential. In saying this Southend are definitely at the forefront of this pilot.

The potential it has been recognised is vast in terms of training social workers, recruiting foster carers / adopters, supporting schools to gain greater understanding of the roots of presenting behaviours, supporting young people to gain insight into their own history, preventing placement disruption.

The two primary goals in the first instance in Southend are:-

Pilot 1: Improving Stability in Foster Placements

Pilot 2: Reduce time out of classroom and exclusions - we want to help create trauma informed schools that promote inclusion, emotional wellbeing and learning. The hypothesis is that long term academic outcomes can be achieved by recognising that regulating children appropriately will enable them to engage in learning. The starting point is to support teachers to regulate their own behaviour and each other's through greater awareness of the impact of trauma and attachment issues.

This is an exciting pilot which will run during 2018/19.

Regional Adoption Agency/Alliance

Southend continue to work with our partners towards the Adopt East Regional Adoption Alliance (RAA). During 2017 we worked with Hertfordshire, Suffolk, Essex, Luton, Barnardo's and Adoption Plus to form Adopt East.

During 2017/18 the management board have continued to work towards establishing a clear delivery model for the RAA and establishing a budgetary framework within which this will function. Towards the end of 2017, the Directors agreed to change the pathway for the RAA and to form a Regional Adoption Alliance; working closely with partners whilst maintaining individual control of each adoption agency.

There remain some reservations from the DfE about the plans, however at present we continue to move towards much more joint working within the Alliance in the hope that eventually the project will be fully endorsed by the DfE under their regional agenda.

In early 2018/19, the Alliance has been joined by Norfolk and Thurrock Councils.

Quality Assurance Framework

Children's social care is a complex system and we use many tools to understand learning opportunities, themes and trends within the service to enable the service to continue to adapt and change to new demands. This ensures that we are a responsive and learning service. The Southend Quality Assurance Framework was updated in October 2016 and has continued to develop during 2017/18. This Framework starts from a number of key principles and assumptions:

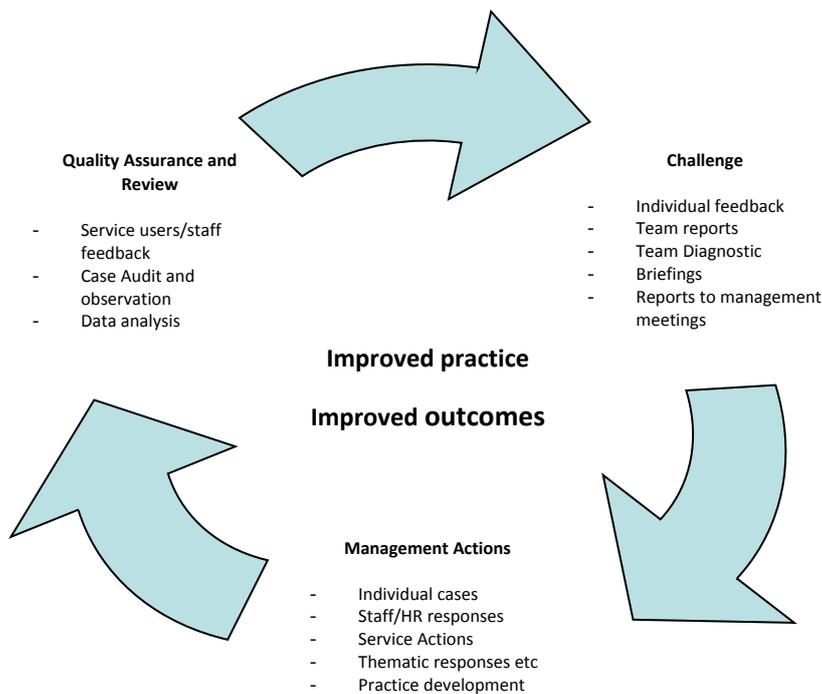
- Southend Children's Services are committed to delivering the very best outcomes for the children it works with;
- Ultimately, the delivery of good outcomes will always take precedence over a focus on process or outputs but all are important in the delivery of children's social care services;
- Outcomes for vulnerable children can always be improved upon and no service ever performs perfectly - social care services require a constantly questioning and interrogative approach to ensure their continuing safety and effectiveness;

- Ensuring an ever-improving quality of all we do is the responsibility of all staff but the prime responsibility will always rest with those who deliver front line services to children and their families;
- Safe and effective services depend on the existence of a healthy tension in the system between those charged with the delivery of services and those who have a scrutinising and oversight role. Managing the tension is part of the role of senior managers who need to ensure a balance is maintained between support and challenge and is always driven by the best outcomes for children.

An effective approach to performance and quality assurance must be characterised by four separate but related strands - quality assurance and review, challenge, management action and practice development:

- Quality Assurance and Review - those are the elements of the service designed to review and measure the extent to which the practice is successful, that work is meeting agreed standards and that children are being kept safe within the system and their welfare being promoted;
- Challenge - these are the internal and external processes and arenas which challenge the service to improve performance and outcomes for children based on the quality assurance and review work;
- Management Action and Practice / Practice Development - these are actions taken both to respond to deficits identified through the quality assurance, review and challenge processes and to ensure that performance improvement activities are constantly refocused to deliver the required changes. These set in place those elements which if properly embedded are designed to improve performance.

The Quality Assurance Framework sets out the quality assurance and review arrangements for the service and identifies how this is used to challenge the service and how this is linked to management actions and practice development with the overall aim to improve practice and improve outcomes for children. The service is committed to a model continual improvement (see below)



Management and audit oversight

The audit programme for 2017/18 ensured that a number of activities took place within the Quality Assurance Framework to measure and review the progress of delivery of Children's Services linked to the Children Services Improvement Plan (CSIP). The quality assurance activities that have taken place to achieve this are:

- monthly file audits
- team development periods
- practice week observations
- observations by the practice lead and an external consultant social worker
- informal and formal involvement by the practice lead, with frontline staff and management over the last year
- Participation of young people and families

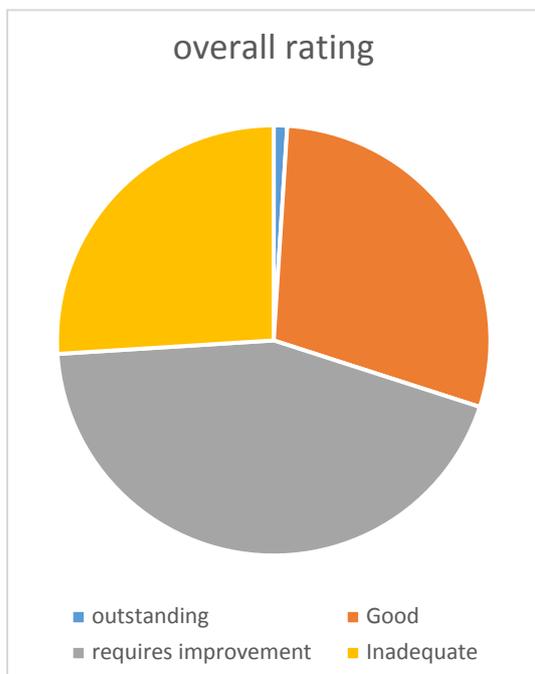
Audits were completed by senior managers within children's services, however of the 271 file audited during the year, the majority were audited by external auditors. The transition around auditing activity is taking place currently from predominately external auditors with no contact with social workers and service users, to managers auditing alongside social workers and families and young people being contacted for their views as a part of the audit process. There has been an increased focus on themed audits completed within each service area. Trends identified are used to inform themes for future audits and case review days/training days and actions arising from the audits are incorporated into the Children's Social Care Improvement Plan to drive forward service improvement.

The other change made has been that rating critically inadequate is no longer used. A tighter process has been developed around inadequate ratings.

As a part of on-going organisational learning, during 2016/17, a Practice Lead was appointed to play a lead role in the quality assurance framework, challenging and supporting practice including mentoring; observing practice, identifying themes and trends and supporting a change in practice to address issues identified, by targeted training through team development periods and one to one support where required. This has continued to prove positive in improving practice during 2017/18. Themed audits have focused on Section 47's, referrals, decision making at the front door and under one's.

During 2017/18, of the 271 audits undertaken the following was found:

Overall judgements on file audit ratings and findings



Overall rating	Number	Percentage
Outstanding	3	1%
Good	79	29%
Requires Improvement	119	44%
Inadequate	70	26%

Conclusion from the past year shows that MASH+ has made a significant improvement around referrals and section 47s and timeliness of strategy meetings. There is sound decision making and management oversight of contacts and referrals. There is still some work to be done between health and social care around monitoring cases of high risk pregnancies from early identification to ensure they are picked up at an earlier stage. Case conference chairs are playing a significant role in ensuring plans are robust and joined up between agencies around planning for unborn babies and children under one. There is good information sharing between agencies and the development of the Adolescent Intervention and Prevention Team has significantly increased the safeguarding of young people at risk of CSE, criminal exploitation and gangs in Southend.

There has been an increase in visits taking place in a timely way and it is important that this time with the family and child is used effectively. The voice of the child and family is not as strong in all areas of practice as it might be and the child's lived experience is often not visible from files although social workers can often talk about it in detail. There is work to be done regarding what is recorded and the standard of recording when it is done. There is still an area for development around direct work with children and families as well as ensuring that all work is recorded and scanned onto the system to help to provide a holistic picture of the child's lived experience. Plans are often SMART and comprehensive from CP and legal processes but not so robust or SMART within the CIN process. Assessment quality is inconsistent and family engagement in assessments and development of plans is limited. Management oversight is inconsistent and supervision is not as regular or reflective, and challenging as it should be. These are all areas of focus during 2018/19.

The premise of restorative practice is to work with families rather than do to them or for them. There is a programme of training around this with staff and an expectation that it becomes the culture in Southend working with colleagues and families.

There has been a focus on the inadequate audits over the last year and this has seen a reduction in the number of files audited inadequate and those being re-audited as inadequate. This will need to continue alongside a greater focus in the next year on files audited requires improvement and activity undertaken to address those to increase the numbers of cases rated good or above. The audit process is also needs to ensure that the child and family's voice is heard whilst being conducted in line with the principles of restorative practice.

OFSTED stated: A whole-council approach and the additional scrutiny and impetus provided by an improvement board has helped the local authority make progress and maintain its focus on areas of practice that are not consistently good, such as the quality of assessments and plans.

Consultation with and participation of young people and their families

The views of children and families using our services are collected in a variety of ways and there are a number of mechanisms in place to ensure that children are supported to represent their views. Children's social care commissions an independent advocacy service, National youth Advocacy service (NYAS), to work with children and young people to ensure they are able to communicate their wishes effectively to practitioners and managers and within the reviewing process.

LAC Councils – Currently one group of between 4 and 8 young people.

During 2016 the young people involved in the lac council decided that they wished to call the group YEGS – Young Experts Group. This group have been looking at ways in which they can influence change to the practice of social workers and other professionals they have involvement with and thus improve experiences of young people in care in Southend.

YEGS meets every fortnight in Civic 2 and is developing a routine of activities, working projects and attending regional and national events.

There are two EOC workers who facilitate the current YEGS group and they link in with the Go East regional working group in order for YEGS to participate in Children's Commissioner Groups, work alongside other Children in Care Council's and planned activities such as the 'Take Over' challenge.

Currently our YEGS are working on a project for the Children's Commissioner developing video's to aid IRO's, Social Workers and other professionals in ways to communicate and work with young people in care. This is due to be shared at a joint meeting the YEGS will attend with other Eastern regions Children in Care Council's and the hope is that this can also be shared with the Corporate Parenting Group in Southend.

The YEGS have previously developed the 'Me Manual' which is a direct work tool that social workers can use in order to communicate with their young people and aims to stop the repetitive nature of a child having to tell their story multiple times to different professionals.

They have also designed the Social Worker Profile – which aims to identify a more 'human' side of social workers to the children they work with.

In addition a stop motion animation that the YEGS worked on last year that talks about their journey in care – This is something that needs to be used as a training tool or uploaded to the intranet for wider sharing to help all professionals working with children to understand some of the feelings and experiences that stay with children when coming into care. The manner in which this is shared has yet to be agreed by the YEGS.

There is currently a small group of young people attending YEGS however there is a plan to increase numbers through opening this group up to children under CP and CIN plans and workers will be re-attending team meetings for all social care staff so that the message is more widely circulated.

The foster care workers in Edge of Care will also be distributing schedules and invites to all foster carers so that these can be given to children coming into their care.

Audit Visits and Young People's views.

Young People's voices – Southend's participation lead ensures that random home visits are completed to young people to gain their views about various themes focused on within audits, enabling them to say how they feel they have been treated and what has been good and bad about their social care involvement. 20% of all audited cases each month are visited and the voice of the child fed back to the Practice Lead.

Young Persons Participation within CWD and the wider SEND team.

This was an area of consultation under development in 2017/18. Visits were arranged to the four main specialist schools, St Christopher's, St Nicolas's, Lancaster and Kingsdown. These schools currently offer wider participation groups and parents advisory sessions and the aim was to tap into these current resources. Further discussions with the SEN Adviser, School Improvement took place in 2017/18 so that wider SEN areas could be included.

The special schools now have a physical representation on the Resource Allocation Panel (RAP) to ensure that their voice is heard when decisions are being made and to ensure that cases in most need are flagged at an earlier stage for additional support.

Forums for the parents of CP and LAC children in Southend

Two consultation forums run on a quarterly basis for parents of children looked after by Southend and those subject to child protection procedures. These are led jointly between the Placement & Resources Teams and Volunteering Matters. Issues raised are fed back to practitioners and managers. Feedback is then given at following meetings to evidence the impact on service delivery and therefore the impact for children and their families.

Themes arising from these meetings are around clear communication; sharing information and reports in a timely manner; clear explanation about the processes involved and where to gain independent advocacy services.

Independent Reviewing Service

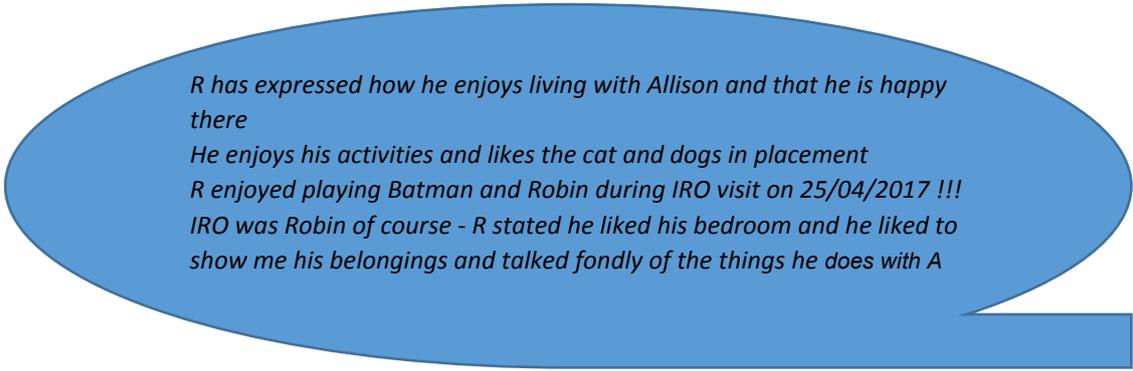
Participation of children in their review meetings is essential to ensure that children are able to have their say in plans for their lives. Independent Reviewing Officers (IRO) must ensure that the views of children are known before care plan decisions can be made.

Figures are not available for the full year 2017 -2018, however, between April 2017 and September 2017 approximately 60% of children attended their reviews in person, which is an increase on 43% the previous year. The remaining children contributed to their meeting either by completing a consultation form or by giving their views to the IRO, their advocate, or other person they identify to speak on their behalf.

The IRO Handbook makes it an expectation that the IROs to speak with the child privately before their first LAC review and thereafter as part of the process. The expectation that IROs speak with children is well embedded for reviews, however, there is still a challenge for IROs speaking with children before their first review meeting when they become looked after.

In 2016/2017, 62.5% of children were personally consulted by their IRO. In 2017/2018 there were changes in how this data is collected however audit outcomes indicate that between

November 2017 and 31st March 2018 audits rated IRO consultations as Good or Outstanding in 87% of cases.



*R has expressed how he enjoys living with Allison and that he is happy there
He enjoys his activities and likes the cat and dogs in placement
R enjoyed playing Batman and Robin during IRO visit on 25/04/2017 !!!
IRO was Robin of course - R stated he liked his bedroom and he liked to show me his belongings and talked fondly of the things he does with A*

Where children are not able to communicate their views verbally to their IRO, their IRO will visit them and use observations or other means of communication to form a view of the child's response to their placement.

Supporting and Developing our Workforce

The provision of high quality services for families and the delivery of improved outcomes for children and young people can only be maintained and improved upon through the continued efforts of a committed and skilled workforce. Children's Social Care is proud of the standard of recruited staff and the culture of learning which has developed. The continued recruitment of high quality qualified social workers has become a challenge over recent years and this is an area closely monitored and extensive work is being undertaken to ensure that Southend remains at the forefront of practice and development to encourage the best applicants to its service.

There is an aim within Children's Social Care to, as far as possible, 'grow our own' social care workforce, providing a clear progression route, if staff wish to progress within the organisation.

Southend during 2017/18 began to introduce a new model of practice, using the Restorative Practice Model. The model of practice for children's services has been developed to improve the experience of children and families who have contact with the service. It forms part of the response to the findings of Ofsted in April 2016 and is contained in the children's services improvement plan. It supports our aim as described in the improvement plan:

Our aim for all children in Southend is that they achieve good outcomes, and exceed their goals, wherever they live in the borough, whichever school they attend and however long they have lived in Southend. We believe this should be irrespective of a child's circumstances, ability or additional needs

The model's reach is the whole of children's services; statutory social work services, early help services, family support services and the youth offending service.

Restorative practice is an approach which is being used successfully in Leeds and supported them in moving from a service judged as Inadequate to one which is Good. The approach is one of high support and high challenge. It places responsibility for determining need and finding solutions with families, with support from practitioners. Using a restorative approach will result in children's services working **with** families rather than **for** them or doing things **to** them.

Restorative practice training has been rolled out across all service areas within children's services since the autumn of 2017. Most staff have now been trained in its use and the new approach will be embedded during 2018/19.

Compliments and Complaints

Children's Social Care monitors compliments received from children and families, external bodies and internally. 24 compliments were received in 2017/18, in comparison to 20 in 2016/17. These compliments are utilised to identify excellence in practice, promote achievements and share learning from good practice across Children's Social Care.

Children's Social Care has a statutory duty to respond to complaints regarding services offered to children and families under the Children's Act 1989. Children Act complaints are an opportunity to learn about what is not working within the service and to implement change and improve practice. Those received in 2017/18 represents an increase in both the number of complaint-related representations received and the percentage that did not progress to become formal complaints. Reasons for representations not being pursued as formal complaints include the issue was resolved through early intervention, the issue was outside of statutory remits and timescales, or the complainant no longer wished to pursue the matter.

The major of complaints in 2017/18 came from parents or guardians. There has been a year on year decrease in complaints made by advocates on behalf of children or young people.

A total of 60 new statutory Children Act complaints, were received in 2017/18; a reduction from 89 the previous year.

In 2017/18 we continued to focus on early resolution of complaints wherever possible. Of the 60 statutory complaints completed as stage 1 complaints, 4 were progressed to Stage 2. Of 4 Stage 2 complaints in 2017/18, 2 progressed to Stage 3.

Lessons learnt from complaints are shared with managers and staff which shows positive impact with the low numbers progressing to stage 2.

Summary of success and challenge going forward

We are proud of the work we are doing in Southend children's services and the recognition that Ofsted gave in the JTAI inspection, however we know we have more to do.

2017/18 saw improvements across Children's Services in a number of areas:

- Adoption performance continued to be high. Timescales for the key adoption indicators in the most recent adoption scorecard were some of the best in the country.
- Ensuring timely care planning for our children has been very positive
- The Family Group Conference Pilot has shown very positive outcomes and feedback from families and will now become a permanent feature in Southend
- Edge of Care has been well received by Foster Carers and has had proven outcomes of preventing some young people entering the care system and supporting foster carers to prevent placement breakdown.
- The results from the JTAI showed a positive move forward both for Social Care and work across the partnership.
- Improvements were seen in educational attainment of looked after children

We know that all too often the life chances of children receiving social care services, especially looked after children and care leavers, are inhibited through their circumstances and we are clear that we will not accept this for our children in Southend. Our ambition is to do all that we can to ensure that their wellbeing and growth is of the highest priority and that they will have every opportunity to achieve the very best that they can in all aspects of their development.

We are strengthening our governance and our Improvement Board, Improvement Plan and transformation of children's services will provide support and challenge to help us drive forward improvements. Over the coming year our key drivers to change are to:

- Deliver an updated Improvement Plan, linked to Southend 2050
- Move forward the transformation of children's services
- Embed restorative practice across the Council
- Ensure positive impact and outcome from our intervention with families

Critically, these drivers will help us to improve outcomes for children and young people and their families in Southend.

I'm used to people coming in and out of my life and not caring about me at all but I know Rod does, alongside his family, his daughter Lisa has done a lot for me as well, even when I kept her up 2 nights in a row when Rod was away she still continued to support and listen to me.

I would be in tears if I had to leave them.

LS

Southend-on-Sea Borough Council

**Report of Deputy Chief Executive (People)
to
Cabinet
on
18th September 2018**

Report prepared by: Brin Martin, Director of Learning

**School Performance Report Summer 2018 (Outcomes at all Key Stages)
People Scrutiny Committee
Executive Councillor: Helen Boyd
A Part 1 (Public) Agenda Item**

1. Purpose of Report

- 1.1 This report informs Cabinet of the high level un-validated performance outcome for all Southend schools at all key stages following the summer tests and examinations in 2018.

2. Recommendations

- 2.1 That Cabinet notes the overall performance of Southend schools at each of the key stages, in particular relative to the emerging national benchmarks.

3. Background

- 3.1 In previous years, Cabinet had not been sighted upon the early outcomes achieved by schools in the summer teacher assessments, tests and examinations.
- 3.2 It should be stressed that at this stage, the majority of the outcomes are “raw” and un-validated. Whilst the overall scores are unlikely to change significantly, results for individual schools may fluctuate, which may affect the overall figures
- 3.3 Results for individual schools are not in the public domain until validated, later in the autumn term. However, in view of likely interest, it is important that Cabinet are aware of the emerging picture of the Borough-wide outcomes.
- 3.5 Lastly, it should be remembered that at key stage four, following on from the introduction of reformed maths and English GCSEs last year, these pupils were the first to take new, more rigorous GCSE exams in 20 subjects, graded 9 to 1. In essence, the previous benchmark of a “C” grade, regarded as a pass, is now broadly equivalent to either a grade 4, a standard pass, with a 5 regarded as a strong pass.

4. Headline Performance Outcomes

4.1 Across all key stages

- 4.1.1 Cabinet should note that in most key stages, Southend pupils continue to outperform the national averages, in some cases increasing at a higher rate than all schools nationally.
- 4.1.2 For each key stage where available, as indicated in appendix one, results are shown for the headline measures, with provisional Southend outcomes shown alongside the emerging national outcomes.

4.2 By Key Stages

- 4.2.1 In **Early Years** (reception year), the percentage of pupils achieving a good level of development is 73.9% (71.5% nationally), in line with results from 2017, however still 2.4% higher than the emerging national figure. **No significant change on last year, above the national.**
- 4.2.2 At the end of **Key Stage One** (years 1-2), the percentage of Southend pupils achieving the expected standard or above in combined reading, writing and maths is 64.6% which is a decrease of 2.0 percentage points compared to 2017. The emerging national based on results from 152 LA's for KS1 reading, writing and maths combined is 65.3% an increase of 1.6 percentage points compared to 2017, this means the Southend figure is currently 0.7 percentage points lower than the emerging national picture. **Decline upon last year, below the national.**
- 4.2.3 The percentage of Southend pupils at the end of **Key Stage Two** (years 3-6) achieving the expected standard or above in combined reading test, writing teacher assessment and maths test is 68.2% - this is an increase of 2.3 percentage points compared to 2017. The interim national results of pupils achieving the expected standard or above in combined reading test, writing TA and maths test is 64.4%, an increase of 3.4 percentage points compared to 2017. **Improvement upon last year, above the national.**

The very recent and provisional Statistical First Release from the Department for Education regarding the Key Stage Two outcomes places Southend above statistical, regional and national results, and currently places us 29th out of all 151 Local Authorities.

Provisional outcomes in terms of **progress made from key stage one to key stage two** show that Southend pupils made average progress in reading (0.0) but were significantly above average in writing (+0.4) and maths (+0.6). A progress score of zero indicates that pupils on average do about as well at KS2 as those with similar prior attainment nationally.

- 4.2.4 At **Key Stage Four** (year 11), the recently announced results are still subject to variation. As mentioned in 3.5 above, the means of calibrating outcomes is in the second year of transition. In essence, the previous benchmark of A*-C in both English and mathematics is broadly equivalent to the new numerical measure of a grade 4 or better in both subjects.

From the data obtained so far, **71.9% of pupils achieved the new benchmark of 4+ in both English and maths.** This is compared to 70.9% for the similar measure last year. Southend's pupils were above the provisional national figures in the subjects of English and maths in terms of those achieving a standard pass (grade 4 or above). Based on data from 10 out of 12 schools, 82.4% of pupils achieved this standard in English, compared to 71.8% nationally, whilst in maths the figures was 78.1%, compared to 71.0% in nationally.

Provisional outcomes for looked after children in Southend also suggest an improvement in the percentage achieving a pass in English & maths at key stage four. **Improvement upon last year, above the national.**

- 4.2.5 At **Key Stage Five** (end of sixth form), provisional results were only available for 8 out of 10 schools in the borough, therefore the following figures should be treated with caution. 11.1% of A-level entries were at A* compared to the national average of 8.0%, and 35.9% of entries were A* or A grades, compared to national figures of 26.4%, with 99.4% of all grades being A*- E grade, above the national equivalent of 97.6%. **Above the national.**

5. Conclusion and implications

- 5.1 In most Key Stages, Southend schools continue to both improve and outperform against national benchmarks. Whilst we await the individual validated school results,

we anticipate that Southend Borough as a whole will continue to improve its rankings nationally and in relation to our statistical and geographical neighbours.

- 5.2 These results will inform the Education Board, and in particular the School Performance Sub Group, in their detailed analysis of both outcomes and progress data through the schools risk register. In turn, the risk register is used to target intervention in schools requiring support and challenge to improve further in particular areas or with specific groups.
- 5.3 This support will be undertaken through our partnership between officers and local leaders of education as well as brokered work with local teaching schools and additional contractors, and take the form of focussed support at individual school level, or through improvement programmes such as the narrowing the gap project at Key Stage Two, or the initiative to encourage more Southend residents to attend one of the four Grammar Schools if appropriate. All of these initiatives are funded through the school improvement money allocated by Council in the budget.

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

None

6.3 Legal Implications

None

6.4 People Implications

None

6.5 Property Implication

None

6.6 Consultation

None required

6.7 Equalities and Diversity Implications

None

6.8 Risk Assessment

Not required

6.9 Value for Money

Not applicable

6.10 Community Safety Implications

Not applicable

6.11 Environmental Impact

None required

7. Background Papers

None

8. Appendices

Appendix 1: 2018 Provisional School Performance Outcomes for Southend-on-Sea

Southend Borough Council Primary School Attainment 2018

School name	Early Years		Key Stage One		Key Stage Two		Key Stage 1-2 Progress			Key Stage Four			Key Stage Five*		
	Cohort	% Good level of Development	Cohort	% Expected + in Re,Wr,Ma	Cohort	% Expected + in RWM	Reading	Writing	Maths	Cohort	% 4+ Eng & Maths	% 5+ Eng & Maths*	Entries	% Entries at A*-A	% Entries at A*-E
Local Authority State-Funded Schools	2176	73.9	2217	64.6	2104	68.2	0.0	0.4	0.6	2016	71.9	60.5	931	35.9	99.4
England		71.5		65.3		64.4	0.0	0.0	0.0		N/A	N/A		26.2	97.6

Operational Performance & Intelligence Team
All data is provisional and subject to change

* Excludes 2 schools

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Southend-on-Sea Borough Council

Agenda
Item No.

Report of Deputy Chief Executive (Place)

to
Cabinet
on

18th September 2018

Report prepared by: Paul Jenkinson, Parks Technical Officer

Centenary Fields

Place Scrutiny Committee
Cabinet Member: Cllr Lesley Salter
A Part 1 (Public Agenda Item)

1. Purpose of Report

- 1.1 To provide background information to Members of the Centenary Fields Programme.
- 1.2 To approve the process for dedicating Southend Cliffs Gardens to Fields in Trust as part of the Centenary Fields Programme.
- 1.3 To identify the potential implications on future maintenance and improvement of the gardens that might result as a consequence of the dedication.

2. Recommendations

That Cabinet;

- 2.1 **Review the draft dedication, Appendix 1, and confirm that they agree with progressing an application to dedicate the Southend Cliff Gardens to Fields in Trust.**
- 2.2 **Agree that if the application is successful that the Southend Cliff Gardens will be dedicated to Fields in Trust and acknowledge that the Council may be restricted from future changes to the gardens.**
- 2.3 **Delegate responsibility for agreeing the final detailed area of the Southend Cliff Gardens to be dedicated as a Centenary Field to the Deputy Chief Executive (Place) in consultation with the appropriate Cabinet member.**
- 2.4 **Note the allocation of £10,000 from the contingency for the investment in any procurement memorabilia.**

3. Background

- 3.1 Fields in Trust, working in partnership with The Royal British Legion has developed a Programme that aims to protect parks, playing fields and other recreational spaces in perpetuity to honour the memory of the millions who lost their lives in World War I.
- 3.2 Landowners across the UK are being encouraged to dedicate war memorial playing fields and recreation grounds, memorial gardens, parks or recreation grounds that contain a war memorial and other valued green spaces that have some significance to World War I as Centenary Fields.
- 3.3 By dedicating land through the Centenary Fields Programme local authorities and other landowners can ensure valuable green space is protected as a living remembrance to those who fought and lost their lives in World War I. This dedication is aligned with the spirit of the Armed Forces Community Covenant and will be recognised by the local community as a clear commitment to the importance of these spaces now and in the future.
- 3.4 Southend Cliff Gardens have been identified as a possible Centenary Field for a number of reasons. The gardens overlook the Thames Estuary and during the First World War, the gardens bore witness to Gotha bombers and Zeppelin raids. Troops were billeted in the surrounding properties. Within the gardens is the town's Cenotaph, designed by Sir Edwin Landseer Lutyen. Today with the floral displays and stunning estuary views the gardens are a popular green space with visitors and residents alike.
- 3.5 Dedicating a site under the Centenary Fields Programme does place a number of restrictions on the site. The following restriction in the deed of dedication should be noted as this could impact on the site: "Not (in so far as it has power to do so) to erect any building or structure on the property the use of which is outside the permitted use stated in Clause 3.1) without consent of Fields in Trust." Full details of the restrictions can be found in the draft dedication, Appendix 1.
- 3.6 The deed of dedication (appendix 1 clause 3.5) provides the Council with the ability to still maintain the site. This is particularly relevant given the historic slippage in the vicinity and a bespoke additional reference will be added to our deed to ensure that this need is highlighted and that any necessary works are not restricted.

4. Other Options

- 4.1 Not participate in the Centenary Fields programme at all.
- 4.2 Dedicate an alternative site.
- 4.3 Members have indicated a desire to participate and this site is the preferred location.

5. **Reasons for Recommendations**

- 5.1 To represent the Borough's formal support to The Royal British Legion and Fields in Trust to honour the memory of the millions who lost their lives in World War I.

6. **Corporate Implications**

6.1 Contribution to Council's Vision & Corporate Priorities

6.2 Financial Implications

6.2.1 There is no external funding available directly to support this initiative.

6.2.2 Any permanent memorabilia for the designated site will need to be funded by the Council and an allocation of £10,000 from the contingency budget will be set aside to fund the relevant investment.

6.2.3 There will be minimal legal costs associated with signing and registering the dedication, which will be contained within existing resources.

6.2.4 There will be a requirement for the Council to maintain the site and the budget available for this is within the existing approved budget for the service.

6.3 Legal Implications

6.3.1 Entering in to the deed of dedication would require the Council's seal.

6.4 People Implications

6.4.1 No people implications have been identified at this time.

6.5 Property Implications

6.5.1 Future uses, development and maintenance of the Cliff Gardens may be restricted. However there are no buildings or structures in the area proposed. Maintenance by the Council is permitted within the draft deed and a specific reference will be made to cover any land movement issues should they arise in the future.

6.6 Consultation

6.6.1 No public consultation has been undertaken.

6.7 Equalities and Diversity Implications

6.7.1 No changes to access or use of the site is proposed as part of the dedication. Therefore, an equalities impact assessment is not required.

6.8 Risk Assessment

Risk	Mitigation
Application turned down by Fields in Trust	None identified at this time. Site will continue to be a public open space.
Restrictions on works within the Cliff Gardens put in place by Fields in Trust prevent reaction to landslides.	Negotiate conditions within the deed of dedication.

6.9 Value for Money

6.9.1 Any associated works will be procured in line with Council policies and procedures.

6.10 Community Safety Implications

6.10.1 No community safety implications have been identified at this time.

6.11 Environmental Impact

6.11.1 No environmental impacts have been identified at this time.

7. Background Papers

7.1 None

8. Appendices

8.1 **Appendix 1 Draft Dedication**

8.2 **Appendix 2 Area of Cliff Gardens to be dedicated**

FIELDS IN TRUST – CENTENARY FIELDS
Annotated Non-Charitable Deed of Dedication
Local Authority Protected

[Name of local authority] (1)

and

National Playing Fields Association (2)

[Name of the site]
Annotations in italics

THIS DEED OF DEDICATION is made on the day of 20

BETWEEN

- (1) **[NAME OF LOCAL AUTHORITY]** of **[address of local authority]** and its successors in title (the **Council**); and
- (2) **NATIONAL PLAYING FIELDS ASSOCIATION**, operating as Fields in Trust, of Kings Chambers, 15 Crinan Street, London N1 9SQ a Royal Charter Organisation established for charitable purposes (registered charity number 306070) and its successors in title (**FIT**)

(the Council and FIT being together called the **Parties**)

WHEREAS:

1. The property more particularly specified in the Schedule (the Property) forms part of the corporate property of the Council.
2. The parties hereby agree that the Property will be dedicated in perpetuity in the manner and for the purposes set out below (but without any intention to create any charitable trust), and in accordance with the mutual undertakings given by the parties.

Clause 2 establishes the contract.

3. The Council gives the following undertakings:
 - 3.1 Not to use the Property or permit the Property to be used for any purpose other than as a [public playing field and recreation ground];

The user clause refers to the property being for "a public playing field and recreation ground". Depending on the property's current or future use, the user clause can be amended by mutual agreement. It can also make reference to a war memorial/memorial garden or similar.

- 3.2 Subject to clause 4 or clause 5, not (in so far as it has the power to do so) to dispose of the Property without the consent of FIT;

This clause establishes additional protection through FIT consistent with the objectives of the Centenary Fields Programme, and by requiring FIT's prior consent to any proposed disposal.

- 3.3 Not (in so far as it has the power to do so) to erect any building or structure on the Property the use of which is outside the permitted uses as stated in Clause 3.1 without the consent of FIT;

Decisions relating to new buildings and structures, or alterations of the same, which fall within the user clause are solely in the control of the landowner or its tenant(s).

- 3.4 To inform FIT without delay of any proposals, intentions or decisions to dispose of or erect any structures on the Property;

This clause supports the objective of protecting the site's recreational use.

- 3.5 To maintain the Property and so far as is consistent with its duties as a local authority to have regard to any advice given from time to time by FIT on the management and running of the Property;

This clause establishes an advisory role for FIT without interfering with the management rights and responsibilities of the authority.

- 3.6 To erect notices on the Property in the form of signage provided by FIT relating to the background of FIT and Centenary Fields, giving recognition of financial support where required;

- 3.7 To apply within three months of the date of this Deed on form RX1 annexed hereto for the registration in the proprietorship register of the registered title of the Property at the Land Registry of a restriction to the following effect:

“No disposition of the registered estate by the proprietor of the registered estate is to be registered without a certificate signed by National Playing Fields Association of 15 Crinan Street, London N1 9SQ or by its conveyancer that the provisions of clause 4 of The Deed of Dedication dated [] (1) and National Playing Fields Association (2) have been complied with”; and

This is an essential part of the land registration and protection process.

- 3.8 To apply within three months of the date of this Deed on form AN1 annexed hereto for the registration in the charges register of the registered title of the Property at the Land Registry of a notice to the following effect:

“A Deed of Dedication dated [] between [] (1) and National Playing Fields Association (2) the land in this title was dedicated for use as a []

This is an essential part of the land registration and protection process.

- 3.9 To supply FIT with evidence that the registrations referred to in clauses 3.7 and 3.8 have been completed within a reasonable period of time after completion.

4. Pursuant to clause 3.2, FIT shall not unreasonably withhold consent to any disposal of the Property provided that the Council at the request of FIT:

- 4.1 Replaces or agrees to replace the Property with a piece of freehold land approved by FIT which is of equivalent or better quality than the Property, with equivalent or better facilities than the Property, of the same or greater dimensions than the Property, in the same catchment area as the Property,

and as accessible to the public as the Property (the **Replacement Site**) and applies such of the proceeds of any sale of the Property as are necessary to do so; and

- 4.2 Enters into another deed of dedication on the same terms as this Deed in respect of the Replacement Site.

Clauses 4.1 and 4.2 take account of potential future change by guaranteeing flexibility in terms of specific location provided the specified criteria are met.

- 5 FIT undertakes that it will not unreasonably withhold consent to any disposal of the property at nil cost to any local authority or non-profit making organisation which will hold the Property and ensure that its use is compatible with clause 3.1, provided that the new landowner enters into another Deed of Dedication with Fields in Trust on the same terms as this Deed in respect of the Replacement Site.
6. FIT undertakes that it will:
- 6.1 Not unreasonably withhold consent to disposal of the Property or the erection of any structures upon it, subject to its duty to perform its charitable objects and provided that the provisions of clause 4 or clause 5 of this Deed have been complied with;
- 6.2 Respond without delay to any notifications of intended disposal or erection of structures, or to any requests for advice; and
- 6.3 Notify the Council without delay of any concerns or matters of advice to which it requires the Council to have regard.
7. The Council DEDICATES the Property in commemoration of the Centenary of World War I as a public playing field and recreation ground for the benefit of the inhabitants of [] and thereabouts and the site will be titled Centenary Field, [].

This is the essential naming clause referring to the dedication as a Centenary Field. The user definition (given as 'playing field and recreation ground' here) can be varied according to the site.

IN WITNESS whereof this Deed of Dedication is executed the day and year first before written

SCHEDULE

All that freehold property known as land at [] which is identified on the plan outlined in red and annexed to this Deed being H M Land Registry Title Number [].

EXECUTED as a **DEED** by affixing the
The **COMMON SEAL** of
[]
in the presence of:

Councillor

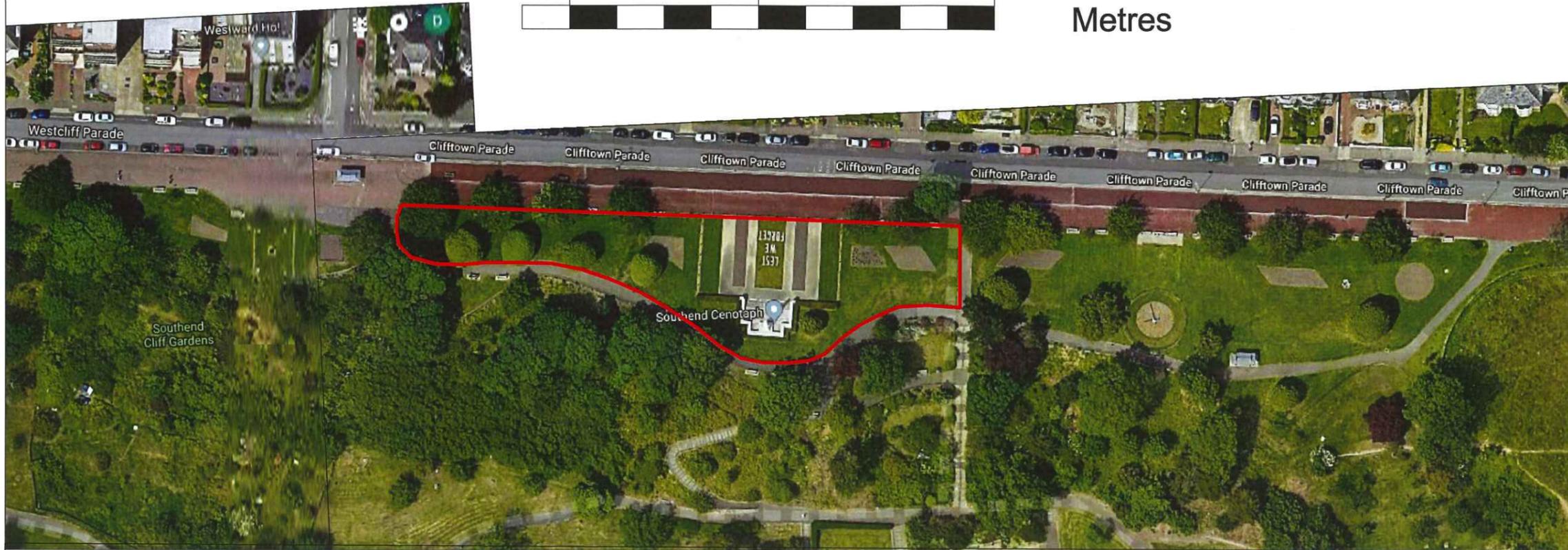
Councillor

EXECUTED as a **DEED** by affixing
The **COMMON SEAL** of **NATIONAL PLAYING FIELDS ASSOCIATION**
under an authority conferred by s.260(2) Charities Act 2011 in the presence of:

Trustee

Trustee

Scale:1:1,000



Scale:1:3,000



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— Area to be Dedicated

**SOUTHEND-ON-SEA
BOROUGH COUNCIL**

HEAD OF CULTURE
SCOTT DOLLING

**Centenary Fields
Application**

Scale: 1:1,000 and 1:3,000

Drawn by: David Giles

Date: 14/08/2018

Drawing No: SBC/CF/Plan/App/002

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Southend-on-Sea Borough Council

Agenda
Item No.

Report of Corporate Director of Place

To
Cabinet
On
18th September 2018

Report prepared by:
Elizabeth Georgeou Group Manager

The Official Feed and Food Control Service Plan 2018-19 Place Scrutiny Committee - Executive Council: Councillor Mark Flewitt

A Part 1 Public Agenda item

1. Purpose of Report

- 1.1 To agree the Official Feed and Food Controls Service Plan 2018-19 required by the Food Standards Agency (FSA).

2. Recommendation

- 2.1 **That Cabinet agrees the official Feed and Food Controls Service Plan 2018-19 set out in Appendix 1 of this report and commend it to Full Council for approval.**

3. Background

- 3.1 The Food Standards Agency Framework Agreement on Local Authority Food Law Enforcement requires the production and publication of a service plan to ensure the highest achievable levels of food control (food safety, standards and feeding stuffs) are maintained throughout the borough. Every local authority is required to develop an annual food enforcement service plan, which is the basis on which the local authorities are monitored and audited by the FSA.
- 3.2 To ensure local transparency and accountability, it is a requirement that the official Feed and Food Controls Service Plan is submitted to the relevant Member forum for approval.
- 3.3 The Legislative and Regulatory Reform Act 2006 requires Regulators to have regard to the Principles of Good Regulation. This means that our regulatory activities should be carried out in a way that is proportionate, accountable, consistent, transparent and targeted to situations that need action when we carry out a regulatory function and to have regard to guidance issued. The Statutory Code of Practice for Regulators which will include the provisions

contained in the Regulators Code April 2014 contains details of how this should be carried out.

4 Official Feed and Food Service Plan 2018-19

- 4.1 The Service Plan for 18-19 is attached as **Appendix 1**, forming an integral part of the organisation of the Regulatory Services within Public Protection.
- 4.2 In accordance with the requirements contained within the Framework Agreement, the food service is a mix of enforcement, intelligence based work, investigation and education.
- 4.3 The service plan is to ensure all high and medium risk category programmed inspections are completed within the current financial year and appropriate alternative approaches adopted for the remaining inspections. In Southend there are 1,786 food premises 1,030 premises requiring an official food hygiene intervention this year. In addition, there are 12 Approved Food Premises within the Council which includes the cockle processors which are inspected annually. There is 1 high risk food standards inspection that will be completed this year with all other food standards inspections to be undertaken at the same time as food hygiene inspections where they are due. The Inspection Programme is included at 2.4 in the Service Plan.
- 4.4 Regulatory Services assists businesses to comply with legislation and thereby protect the health of the public from food related illness. Resources will be targeted to ensure a balanced mix of services, which benefit the business sector, consumers and other stakeholders. In accordance with the amendments to the Food Law Code of Practice in 2017 and the published Regulatory Services Team Enforcement Policy, the service will continue to focus enforcement action on the poorer performing businesses.
- 4.5 Priority for inspections and interventions was given to premises which had been risk assessed as presenting the highest risk in terms of their activity and the conditions at the premises. All high risk inspections due during 2017-18 were completed.

5. Other Options

The Food Standards Agency Framework Agreement sets out the statutory duty for Southend-on-Sea Borough Council in developing the Service Plan. There is no alternative to the statutory duty.

6 Reasons for Recommendation

In order for the Council to comply with the Food Standards Agency Framework Agreement, and in line with the Food Standards Agency audit findings, which were agreed by Cabinet on 18th June 2013.

7 Corporate Implications

7.1 Contribution to Council's Vision & Corporate Priorities

The Plan contributes to the Safer, Prosperous and Excellent corporate priorities. Safe by ensuring those Southend residents, workers and visitors are protected from disease and harm. Prosperous - assisting local businesses to comply and protecting the reputation of Southend-on-Sea as a tourist destination.

7.2 Financial Implications

The Service Plan for 2018-19 identifies the resource allocated to the inspection programme and the funding is set within the Service Areas overall budget.

7.3 Legal Implications

The FSA places a requirement on local authorities to develop and submit a Service Plan. Local Authorities are audited and assessed by the FSA on the basis of their food law enforcement service. The Council's constitution requires the adoption of the official Feed and Food Control Service Plan be reserved to Full Council and is funded from within the existing budget of the service.

7.4 People Implications

The Service Plan is seen as key in protecting public health of the town and critical in reducing the incidence of food related illness and thus assists in reducing the number of complaints and enforcement action associated with food businesses.

7.5 Property Implications

None

7.6 Consultation

The Service Plan is developed in line with government guidelines and priorities and is published on the website and feedback encouraged.

7.7 Equalities and Diversity Implications

Equality and diversity implications have already been considered in the Regulatory Service Enforcement Policy and as part of the general work in the Service. A further equalities assessment was carried out when the Enforcement Policy was updated in 2015 in line with the updated Regulators Code April 2014.

7.8 Risk Assessment

Progress against the plan will be reviewed on a monthly basis. The Plan seeks to explore new ways of working to better target resources and enhance protection with resources currently available.

7.9 Value for Money

The Service Plan is to be delivered within existing budget.

7.10 **Community Safety Implications**

None, in the context of feed and food safety.

7.11 **Environmental Impact**

Food related inspections and investigations place controls on commercial food waste and impact on the natural environment.

8 **Background Papers**

Food Standards Agency Framework Agreement

Food Law Code of Practice (England) 2017

Feed Law Enforcement Code of Practice (Issued May 2014)

Regulatory Service Enforcement Policy 2015

Food Standards Agency Audit and Action Plan - Cabinet Report Dated 18/06/13

9. **Appendices**

Appendix 1: Official Feed and Food Control Service Plan 2018-19

Southend on Sea Borough Council
Department for Place
Regulatory Services

Official Feed and Food Control Service Plan 2018-19

Elizabeth Georgeou

Group Manager Regulatory Services

May 2018

Introduction

The Service Plan was compiled within the Regulatory Services Group of Southend-on-Sea Borough Council.

The Service Plan is structured in accordance with the service planning guidance contained in the Framework Agreement on Local Authority Food Law Enforcement. Powers to enable the Agency to monitor and audit local authorities are contained in the Food Standards Act 1999. In accordance with this guidance the plan is submitted to the relevant member or senior officer forum for approval to ensure local transparency and accountability.

The purpose of the Service Plan is to ensure that national priorities and standards are addressed and delivered locally in accordance with the relevant codes of practice and guidance. It is intended to ensure transparency and accountability and detail the contribution that the Group makes to the Corporate Strategy for the Council.

1. Service Aims and Objectives

1.1 Aims and Objectives

The delivery of the plan aims to:

- Ensure that the highest achievable levels of food control (food safety, standards and feeding stuffs) are maintained throughout the Council.

The objectives are to:

- Ensure hygienic conditions in the sale, preparation, manufacture and storage of foodstuffs and feeding stuffs.
- Ensure the wholesomeness and appropriate labelling / composition of foodstuffs and feeding stuffs within the Borough.
- Focus on a risk-based approach to inspections and enforcement activity in accordance with the Regulatory Services Enforcement Policy.
- Administer the legislation in compliance with the approved codes of practice and related official guidance.
- Promote a greater knowledge and understanding of food safety and nutrition within Southend-on-Sea Borough Council.
- Continue participation in the Food Hygiene Rating Scheme (FHRS).
- Work with Public Health England (PHE) to deliver improved health outcomes for residents, visitors and those working in Southend.
- Focus on the local enforcement of illegal oyster harvesting.

1.2 The Corporate Aim of the Council is to:

Provide a Safe, Clean, Healthy, Prosperous Southend and become an Excellent Council which is reflected through each level of service planning from the Corporate Plan, the Public Protection Plan and individual team plans.

Regulatory Services' activities are linked to each of the Council's aims contributing to the Safe, Clean, Healthy and Prosperous priorities and the Public Protection Service Plan through delivering our objectives and the

Excellent priority through enhanced IT systems and undertaking risk based interventions.

2. Background

2.1 Profile of the Area

The Council is an unitary authority. It is a seaside town which is a tourist destination with local shopping areas and a thriving town centre covering 6,785 hectares. It is the closest seaside resort to London and is located within the Thames Gateway region and has over 6 million visitors each year. There are seasonal businesses within the town and the Council actively promotes events in the Borough to support the prosperity of the town.

The total population estimate for 2015 for the Council was 178,700. In 2016 the Business Survey identified, of those that responded, the main activity of their organisations as:

Main Activity	%
Wholesale and retail sector	22
Manufacturing	11
Finance	9
Construction / Building / Renovation	8
Health and Social Care	8
Food / Accommodation	7

There has been an increase to 67 percent of family run businesses with just over three quarters of businesses having between one and five employees. 20 percent of businesses surveyed rated tourism as important to their success rising to 40 percent for those businesses within the food / accommodation sector.

27 percent of Food / accommodation business reported having recruitment difficulties in the last 12 months. Whilst 66 percent of businesses were aware of all of the business support that the Council could provide only 23 percent found the Council useful to them. 41 percent of businesses indicated that they would be willing to pay for business advice of which only one percent of all businesses identified food safety as an area that advice was required.

2.2 Organisational Structure

(Annex 1) The Council structure together with details of responsibilities for food and feed.

The Council sends food for microbiological examination to the Public Health Laboratory (PHE) Laboratory at Colindale via a collection service.

Public Health England Food Water and Environmental Microbiology Lab 61 Colindale Avenue London NW9 5EQ 0208 327 6548 /6550	Consultant of Communicable Disease Control (CCDC), PHE East of England, Health Protection Team, Second Floor, Goodman House, Station Approach, Harlow CM20 2ET Tel: 0300 303 8537	Stool Samples Pathology First at Southend University Hospital NHS Foundation Trust, Katie Stewart-Byrne Laboratory Administrative Officer.
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<p>Fax: 020 8327 6542 fwem@phe.gov.uk</p>	<p>Fax: 01223 724499 Email: EastofEnglandHPT@phe.gov.uk Secure email mailto:phe.eoehpt@nhs.net</p>	<p>Consultant Microbiologists Dr Meyers, Dr Elhag and Dr Barrett Microbiology Dept Prittlewell Chase, WOS, Essex SS0 ORY Tel: 01702 746514 (Direct Dial Admin) 01702 435555 (Switchboard) 01268 968287 (lab administration at Hub katie.stewart- byrne@southend.nhs.uk</p>
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The nominated Public Analysts for food and feeding-stuffs are located at:

<p>Food and Feeding-stuffs Public Analyst Scientific Services Ltd 28 – 32 Brunel Road Westway Estate Acton London W3 7XR Tel: 020 8222 6070</p>	<p>Food Kent Scientific Services 8 Abbey Wood Road Kings Hill West Malling Kent ME19 4YT Tel: 01732 220001</p>
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2.3 Scope of the Regulatory Services Team

The Regulatory Services Team is part of Public Protection which is within the Department for Place. With respect to food and feed the responsibilities of the Group are to:

- Undertake proactive food safety and standards inspections.
- Undertake proactive feed inspections.
- Deal with imported food and feed matters.
- Investigate complaints about food and feed.
- Investigate complaints about food and feed premises.
- Investigate food poisoning and infectious disease referrals / complaints.
- Deal with health and safety and public health matters at food premises related to drainage, industrial noise and rubbish.
- Respond to emerging public health issues.
- Deal with enforcement issues surrounding illegal oyster harvesting.
- Provide consultation recommendations on planning, licensing and event applications.
- Assist with the delivery of the PHE agenda regarding healthy eating and the Responsibility Deal.

2.4 Demands on the Regulatory Services Team

The Service uses Uniform database which is supported by IT and linked to the property gazetteer.

Food Premises profile as at 31 March 2018

Type of Premises	Number
Primary Production	2
Manufacturers / producers* (includes cake makers - home caterers)	99
Distributors	13
Retailers	413
Restaurants / other caterers	1254
Importers	5
Total	1786

Food Hygiene Inspections:

FSA Category	No. of Premises	Frequency Required	Due 2018 - 19	Overdue
A	3	Every 6 months	6	0
B	86	Every 12 months	86	0
C	406	Every 18 months	264	0
D	580	Every 24 months	319	0
E	474	Alternative enforcement or every three years	68	236
Awaiting Inspection*	51	Within 1 month	51	0
Not in programme ⁺	186		0	0

Total Inspections due as at 31/03/18	1,030
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(+includes premises undertaking very low risk activities e.g. selling pre-packed bars and providing teas and coffees.

*Fluctuation in year as new premises register and are inspected which will affect the number of premises due for inspection in year compared to the start of the year.

These figures also includes previously registered child-minders who have extended activities to cater for more than 5 children. This group is routinely inspected by Early Years. It also includes Home-caters where we have undertaken information gathering to identify low risk premises.)

The Food Law Code of Practice (FLCoP) requires that Category A and B food hygiene, Category A food standards and non-compliant C premises be subject to an inspection, partial inspection or audit at the required interval. Broadly compliant C risk food hygiene premises and broadly compliant B risk food standards can alternate between inspection, partial inspection audit and other Official Controls.

Category D risk premises can only alternate between an intervention which is an Official Control, and an intervention that is not an Official Control, if the potential hazard element is less than 30.

Premises rated E for food hygiene and C for food standards can be subject to an alternative enforcement strategy.

Approved Food Premises:

Types	No. of each Type
Cockle Processing	5
Fishery Products	4
Meat Products	1
Cold Stores	2

Food Standards Inspections:

FSA Category	No. of Premises	Frequency Required	Due 2018 - 2019	Overdue
A	1	Every 12 months	1	0
B	149	Every 24 months	56	36
C	138 5	Alternative intervention or every 5 years	64	203
Awaiting Inspection	65		51	14
Not in programme	186		0	0
Total Inspections due as at 31/03/18				186

Feed Premises Inspections:

We have been co-ordinating with other authorities through the National Trading Standards Board (NTSB) and the Food Standards Agency (FSA) to ensure that regionally animal feed enforcement is effective and there are risk-based controls in place across the Region.

The Council had 24 businesses registered under the Feed (Hygiene and Enforcement) Regulations 2005, for feed inspections as at 31 December 2017. These are either manufacturers of animal feedstuffs or they are retail premises which distribute food on for feed purposes and one distributor.

Feed Premises Profile as at 31 December 2017:

Category of Premises	No.
Distributor R05	1
Pet Food Manufacturers R06	4
Supplier of Surplus Food R07	19
Total	24

The Desktop Exercise for 2018/19 identified that seven of these premises must be incorporated into the inspection programme as required by the FSA's Feed Law Code of Practice (England) as detailed below.

Inspections due 2018/2019

Category	No. In category	Due 2017-2018	Number planned
R5	1	1.0	1.0
R6	4	2.0	2.0
R7	19	4.0	4.0

Concerns continue to be raised regarding the harvesting of oysters from the foreshore. There are allegations that these oysters are entering the food chain without the required controls in place.

Regulatory Services will respond to incidents of food fraud with respect to counterfeit products and to emerging public health issues.

Regulatory Services undertake sampling around the National Priorities identified in the FSA's Guidance on the food sampling programme and sampling priorities for the Council. There is no funding available for imported foods. There are also no identified sampling programmes for feed this year.

Service Requests:

Including:

Requests / Complaints	2017-18
*Food Safety and Standards	619
Infectious Disease	254

(*Includes all request for service, including advice.)

Officers are located in the main Civic Centre, Victoria Avenue. The service responds to inspections outside of normal hours. There is a contact centre which can receive emergency calls and is staffed 24 hours.

The Council is a seasonal location with impacts on the transient nature of the businesses in the borough.

2.5 Regulation Policy

The Regulatory Services Enforcement Policy was approved by the Council in 2015. This policy was developed and consulted on; meeting the requirements of the Legislative and Regulatory Reform Act 2006 and the Regulator's Code.

Regulatory Services is participating in the Better Business for All agenda working with the Growth Hub and across Essex authorities to better understand businesses needs to assist them with compliance.

3. Service Delivery

3.1 Interventions by Regulatory Services Officers for Food and Feeding stuffs

Details of inspections due in each category are listed in 2.4. Regulatory Services Officers will prioritise for inspection premises which are:

- A and B rated for food hygiene.
- A rated for food standards.
- Approved food premises: The premises approved for processing shellfish will be inspected at the start of the season and other approved premises where due.
- Feed establishments identified through the Desktop Study for inspection through the National Trading Standards Board (NTSB).
- C rated food hygiene, targeting those which are non-compliant.
- D rated food hygiene, targeting those which are catering or overdue in the first instance.
- Revisits at premises where notices have been served.
- Food hygiene revisits at premises with either a compliance score of 15 or higher for hygiene or structure; or a confidence in management control procedures rating of 20 or higher.
- Food standards revisits at premises either with a current compliance score of 40 or a confidence in management control system score of 30.
- Requests made under the FHRS for re-score visits, appeals and right to reply.

Regulatory Services Officers for food and feed are authorised in line with qualification and competency requirements detailed in the respective Codes of Practice. Those inspecting for food are allocated interventions by ward(s) in which they co-ordinate inspections, complaints, planning, event applications and the inspection of new premises. Co-ordination of feed is through the Lead Feed Officer.

Officers have access to expertise and peer support through attending local liaison group meetings, detailed in section 3.8.

Suitably qualified and competent Enforcement Officers will support the service where possible.

All high-risk food standards are prioritised for inspection each year. All other food standards inspections will be completed at the same time the food hygiene inspection is due, overdue or likely to be due before the next food hygiene inspection.

All new premises will be evaluated in accordance with the risk they represent. New premises should be inspected within 28 days of registration. Where this is not possible those undertaking high risk activities will be prioritised over low risk inspections.

Questionnaires will be used to assess Home caterers to determine the activities being undertaken and the inspection prioritised where high risk activities are being undertaken. Inspections at premises undertaking lower risk activities will be undertaken where resource is available.

Childminders are no longer required to register directly with Environmental Health. An up to date database on childminders is held by the Council's Early Years. Early Years visit Childminders and have undertaken to raise any concerns noted during inspection with Environmental Health. Inspections will be carried out where childminders are providing care for 5 or more children. All other childminders will be categorised as no inspectable risk with no intervention required, unless indicated by Early Years. Information may be provided to this group as an alternative intervention.

Alternative methods of intervention are to be undertaken to ensure that changes to those previously rated as low risk for food hygiene (E rated) are assessed for change.

An assessment of premises categorised as outside the inspection programme will also be undertaken to check that the risk from activities being under have not changed.

Enforcement Officers will assist in alternative interventions for other premises and sampling.

Regulatory Services Officers who inspect food premises also undertake:

- Health and safety interventions and inspections. Health and safety inspections will be undertaken in line with the Health and Safety Executive priorities for proactive inspections. They will also be undertaken where matters of evident concern are noted.
- Public health and nuisance complaints at food premises.
- Responses to planning applications for food premises.

Regulatory Services Officers who inspect feed premises also undertake activities relating to:

- Consumer Protection.
- Product Safety.
- Fair Trading.
- Weights and Measures.

Regulatory Services supports the Safety Advisory Group process for events to ensure that compliant caterers operate at these events. Caterers at these events will normally be those rated 3, 4 and 5 under the FHRS.

Where inspections of mobile traders are carried out at events or markets outcomes will be reported to their registered local authority in line with the FLCoP. Similarly reports from other local authorities regarding mobile traders registered with Southend-on-Sea Borough Council will be used to inform standards.

Regulatory Services Officers for food safety, standards and health and safety, will determine whether additional pro-active inspections are required within their inspection areas.

The Council will continue to participate in the FHRS to promote transparency and enable individuals to make informed choices about where they eat.

The Council will continue to utilise and develop the Uniform database to improve reporting capability.

3.2 Regulatory Services Group Food and Feed Complaints

The demand on the service for 2018-19 is detailed above in 2.4. It is anticipated that the number of complaints received in 2018-19 will be similar to those received in previous years.

All food complaints will be allocated in accordance with Officers inspection area and for feed to the Lead Feed Officer. Investigations of service requests / complaints will be based on intelligence and will be proportionate to the risk.

3.3 Primary Authority Partnership and Home Authority Scheme

The Council does not have any formal arrangements in place for food hygiene, standards or feeding-stuffs. The Enforcement Policy requires all Officers to give consideration to any partnerships and formal intervention strategies prior to taking enforcement action. As part of an informal Home Authority arrangement this authority will continue to undertake sampling for examination of the cockle processing establishments in liaison with the City of London Corporation Port Health Authority.

All Officers have access to the Primary Authority Scheme website and will adhere to inspection plans or priorities identified through this scheme.

3.4 Advice to Business

The level of demand from businesses last year is included in section 2.4 but does not take account of advice given during inspection. Advice to businesses will continue to be given particularly in respect to our obligations under both the FHRS and the Regulators' Code to assist businesses to grow, and for those within the FHRS to achieve a higher rating.

Ad-hoc advice will be given on request and where necessary businesses will be advised of specialist support that they can obtain for themselves. Further improvements will be made to the Council's web pages to provide advice to businesses and links to other providers of businesses.

Regulatory Services has supported the Economic Development team (EDT) by providing advice at events organised by EDT. The team has also supported businesses through bringing attention to grants that are available for business development and energy efficiency.

Details of what to expect during an inspection are included on the reverse of the inspection report which is left on site following an inspection together with the officer's contact details. Advice is also given on any further correspondence and will include the officer's contact details.

Feed and Food Sampling

The food sampling policy is set out in the Food Team Manual. The Regulatory Services Team will continue to participate in the Essex Food Group programme as well as take samples to support local work. It is planned that sampling will be undertaken in accordance with the sampling plan (Annex 2). Enforcement Officers support this work.

PHE continues to provide a free allocation for microbiological sampling but there is no funding available this year from the FSA to support national priorities. Where resources allow the team will participate in the East of England Trading Standards Association (EETSA) programme undertaking compositional food sampling and standards as well as taking samples in support of local work. The team will complete a local project for imported foods.

The UK Food Surveillance System (UKFSS) has continued to be utilised for submitting samples to PHE. The FSA is not taking this information from UKFSS for the returns the sampling information will be uploaded manually this year for the Local Authority Enforcement Monitoring System (LAEMS) return.

Samples for food examination will be submitted to PHE Laboratory at Colindale and samples for food and feed analysis will be sent to Public Analyst Scientific Services Ltd.

3.5 Control and Investigation of Outbreaks and Food Related Infectious Disease

Investigations will be undertaken of outbreaks; other incidents of suspected food poisoning will be monitored and responded to if necessary. The demand for last year is detailed in 2.4 and it is expected to be similar for this year. There are working instructions that detail the responses to be made. The Council has signed up to the Memorandum of Understanding Outbreak Control Plan.

Pandemic flu or similar will increase the demand on time and will result in a reduction in the pro-active programme.

3.6 Incidents

Regulatory Services continues to respond to incidents of illegal harvesting of oysters from the foreshore. Oysters are removed from the food chain where commercial harvesters have been unable to demonstrate that the oysters will be subject to the correct controls.

There are working instructions for incidents in the Food Team Manual and the Feed and Food Law Codes of Practice. Where required by the FSA or the Department for the Environment, Food and Rural Affairs (DEFRA) resources will be provided which will result in a reduction in the pro-active programme. Resource may also be required to support the Council's emergency control plan.

3.7 Liaison with Other Organisations

The Council will continue to participate locally in liaison arrangements with:

- The Essex Food Liaison Group (including microbiological sampling).

- EETSA Food Group.
- EETSA Feed Group.
- Essex Occupational Health and Safety Group.
- Thames Liaison Group for Shellfish.
- Food Hygiene Focus Group.
- Essex Environmental Health Managers Group.
- Public Health England.
- Planning Major Projects Board.

The Council will work with national bodies as appropriate, Food Standards Agency, Chartered Trading Standards Institute, Chartered Institute of Environmental Health, Department for Environmental, Food and Rural Affairs, Department for Business, Energy and Industrial Strategy, Local Government Association.

3.8 Promotional Work and other non-official controls interventions for food and feed

Participation will be as part of a larger exercise organised nationally or through Essex County, these will be evaluated in line with corporate objectives.

Support of initiatives identified through the public health agenda including those identified in action plans for Health and Wellbeing. This will include, the promotion of the Healthy Eating Awards and delivery of the Responsibility Deal with PHE where funding has been made available.

Regulatory Services will also participate in:

- Health Promotion Events organised by SBC.
- Targeted events.

Any promotional work undertaken will be evaluated to measure its effectiveness

4. Resources

4.1 Financial Allocation

	£ Budget 2018-19
Travel and Subsistence	3,350
Equipment	0
IT & Legal (included in management, administration and technical services)	2,600
¹ Sampling Budget	7,000
Staffing Costs	215,500
Additional funding from Centre (oyster enforcement)	11,300

(¹Microbiological samples are taken as part of our free allocation with PHE.)

4.2 Staffing Allocation

Staff	FTE 2015-16	FTE 2016-17	FTE 2017-18
Management Food and Feed	0.5	0.5	0.5

Regulatory Services Officers Food	3.7	3.7	3.7
Enforcement Officers Food	0.52	0.49	0
Contracted food inspections	Not recorded	0.31	0.35
Total Officers	4.72	4.9	4.55
Administration	1.1	0.6	0.6
Regulatory Services Officers Feed	0.03	0.09	0.09

4.3 Staff Development Plan

Training will be identified as part of the appraisal system to meet the needs of the service to be delivered. Registered Environmental Health Practitioners are responsible for managing their own CPD training which will mostly be provided externally and funded by the Council.

Continued assessment of competencies in line with the Code of Practice is undertaken as part of the appraisal system.

Officers who support areas of food, feed, infectious disease and legal processes will receive appropriate training which will be provided both in-house and externally as appropriate.

One Enforcement Officer is undertaking work to complete their log book. There is also one Regulatory Services Officer who has completed the learning element of the Environmental Health degree. These Officers will be supported to complete log books, their learning portfolios and professional interviews. Support will be given to these trainees to help them to achieve their registration.

4.4 Projected resource required to deliver programme

Activity (does not include Business Support time)	FTE
Food Hygiene Inspections	1.86
Approved Premises	0.04
Food Standards (if undertaken at time of food hygiene inspection)	0.4
Revisits to check compliance / FHRS	0.03
Service Requests	0.4
Events applications	0.23
HA / Primary Authority	0.01
Advice to Business	0.21
Formal action	0.1
Co-ordination liaison	0.07
Promotional work	0.01
Sampling activities	0.11
Food poisoning (does not take into account outbreak)	0.23
Incidents (including illegal harvesting of oysters)	0.5
Training for competency (Code of Practice requirement) & internal	0.13
Auditing	0.05
Management of activities (service and improvements)	0.9
Total Food (excluding dedicated administration	5.46
All Feed Activities	0.09

There is resource available to undertake contracted food inspections to assist with meeting the FLCoP requirements on high risk interventions to be completed in year. Feed inspections are being funded through the EETSA Feed Group.

5. Quality Assessment

5.1 Quality Assessment and Internal Monitoring

The Council participated in the Essex Food Group internal audits against the Brand Standard in 2015. An action plan was developed and implemented. Audit procedures were updated to include checks for Brand Standard compliance. The team continues to participate in the data cleansing programmes managed through the FSA and has completed all exercises this year.

The FSA undertook a thematic audit of the Council's food enforcement programme in December 2012. An Action Plan was agreed with Council and has been implemented. Progress against the Action Plan has been reported to the FSA. The audit review by the FSA was completed in April 2014 and the service has been signed off as compliant.

A Data Protection Audit took place in November 2012 and there were no issues raised.

There is an internal audit team within the Council who select areas for review on an annual basis. There is also Member scrutiny through the scrutiny process as appropriate. An audit of the Regulatory Services restructure was carried out during 2013 and a further audit is scheduled for 2018-19.

6. **Review**

6.1 Review against the Service Plan 2017-18

There is continued support for report writing and there are a range of performance reports available.

Food Safety:

FSA Category	Numbers Due	% Achieved
A	19	100
B	133	100
C	302	100
D	269	100
E	132	36
Unrated (includes changes in year)	244	83
Totals of those due	1099	

100 percent of all A, B C and D rated inspections for food hygiene were completed. The percentage of D rated premises inspected increased to 100 percent compared to 98 percent the previous year. Whilst attention is focussed on higher risk inspections an increased number of E rated premises inspections were completed this year.

The team inspected 83 percent of unrated inspections during the year. The majority of those that were not inspected were either assessed by the team as undertaking low risk activities or the business had previously advised that they were not currently trading. The number of unrated premises due for inspection at the beginning of the year was reduced.

Food Standards:

FSA Category	Numbers Due	% Achieved
A	2	100
B	77	67
C	357	64
Unrated (includes changes in year)	126	83
Totals of those due	562	

Food standards were not separately targeted in line with the previous plan, apart from the A-risk premises. Medium and low risk food standards inspections are completed at the same time as the food hygiene inspections are undertaken. Those inspected for food standards will be due, overdue or due before the next food hygiene inspection. This approach has previously reduced the number of overdue food standards inspections. However the number of overdue food standards inspections has increased because of the availability of competent contracted staff. Where contracted staff were not competent to undertake food standards inspections they were not allocated to them.

Feed Premises Profile as at 31 December 2017 (for the 2017-18 inspection programme):

Category of Premises	No.
Pet Food Manufacturers R06	6
Supplier of Surplus Food R07	17
Co Product Producer R12	1
Total	24

Inspections completed in line with the desk-top study at 31 December 2106

Category	No. In category	Due 2017-2018	Completed	% Achieved
R7	17	2.6	3	100
R6	6	1	1	100
R12	1	0		

Training and competency programme for feed is ongoing.

Enforcement in Food Premises:

	2017-18	2016-17	2015-16
<i>Prosecutions</i>	0	3	0
<i>Simple Cautions</i>	0	0	1
<i>Improvement Notices</i>	7	17	15
<i>Prohibitions & Voluntary Closures</i>	3	1	0
<i>Seizure and Detentions (including voluntary surrender)</i>	11	12	15
<i>Remedial Action and detention notices</i>	0	0	1

There continues to be voluntary surrenders of oysters illegally harvested from the seafront and there has been an increase in closures during the year for matters considered to pose an imminent risk to health.

Requests

	2017-18	2016-17	2015-16
<i>Food Safety and Standards</i>	619	701	553
<i>Infectious Disease</i>	254	201	284
<i>Nuisance / Noise / Planning in food</i>	Not counted	33	44

Sampling

	2017-18	2016-17	2015-16
<i>Microbiological Samples Taken</i>	164	215	214
<i>Analytical Samples Taken</i>	0	13	34

(There was a reduction in the number of microbiological samples taken. However, we continue to support national schemes and local priorities. There were no samples taken for analytical testing and there were no samples required to be taken for feed analysis in 2016-17.)

The FSA no longer supports the UKFSS system for the reporting for LAEMS purposes and this was provided manually.

Improvements have continued to be made to the Uniform system and we have upgraded to version 10. There are procedures in place for the use of the system and enhanced reporting tools available.

Questionnaires continue to be used as a method of assessing the risk of the activities of unrated Home Caterers. This group tends to operate sporadically and often do not continue their operation. Undertaking the questionnaires enables the team to target the higher risk activities for inspection within 28 days of opening. Home Caterers already on the inspection cycle will be inspected in line with the priorities detailed in 3.1. Home Caterers assessed as undertaking low risk activities will be inspected outside of these time scales.

The Council has continued to participate in the FHRS. Support has been given to the national campaigns around raising the profile of this scheme and has undertaken data cleansing exercises as required by the FSA.

The Council has embarked on the use of Social Media through a Facebook page to inform business of emerging issues, including reinforcing the FHRs; publicising campaigns and informing members of where a business achieves a five under that scheme.

There has been a contribution through working with PHE, providing details of suitable premises for healthy eating interventions. A Bronze Award has been developed which targets fast food takeaways. There is a high level of fast food takeaways close to schools and it is essential to work with these businesses to improve their menus through offering healthier options.

Officers have continued to support enforcement activity in relation to illegal oyster harvesting and disrupting that activity.

There is continued support of the Safety Advisory Group which provides guidance to event applicants.

6.2 Identification of any Variation from the Service Plan 2017-18

An alternative intervention strategy was not been implemented for E rated premises because of an unfilled post.

There have been two Officers on extended leave; the inspection programme has been discharged through the use of contracted inspectors. There has also been acting up opportunities within the team where cover has been required.

6.3 Areas for Improvement

- Continue to improve the use of the database.
- Continued improvement of remote working facilities to integrate paperwork for inspections.
- Continue to develop reports for performance management purposes.
- Adopt further areas of Uniform to maximise reporting and intelligence.
- Utilise Uniform to report electronically the sampling element of the LAEMS.
- Standardising work where possible and process improvements.
- Continue to vet and prioritise new premises inspections.
- Training of Officers to support work areas and identified competency requirements.
- Determine where 'other official controls' are possible and how IT would need to be mapped to report this.
- Develop the process for alternative enforcement for low risk food hygiene interventions and to include an alternative enforcement approach for food standards.
- Identify areas where support from businesses is required, including using the Business Survey.
- Continue to participate in the Better Business for All agenda.
- Work with Business development on the Visit Southend website to provide information to residents and visitors to Southend on the food hygiene rating scheme and healthy options.

- Assist the Council to ensure that potable water is available at Events through a testing regime.
- Integration on Uniform for all feed establishments and process controls.
- Review provision for feed inspections.
- Integration of Uniform with MySouthend, the new customer contact tool.

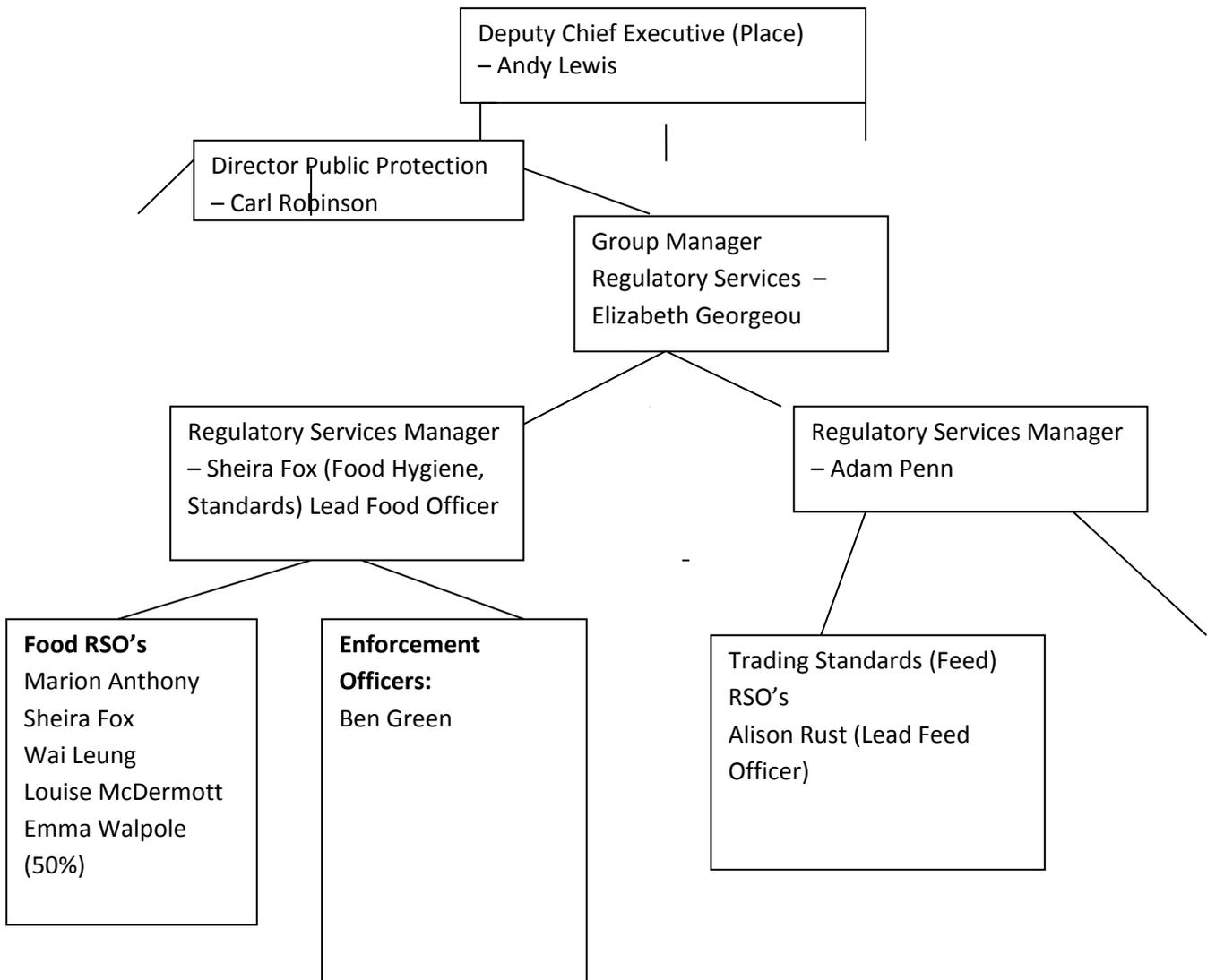
Annex 1

Leader and Cabinet Portfolio for Public Protection:

Leader Councillor John Lamb

Public Protection Councillor Mark Flewitt

Food Service – Officers undertaking food work only:



Annex 2

SOUTHEND-ON-SEA BOROUGH COUNCIL SAMPLING PROGRAMME; 1st April 2018 – 31st March 2019

Samples will be collected from the reception or post room around 3.30pm.

Sampling will take place fortnightly, unless otherwise agreed with PHE lab.

Food Std Sampling Dates	Microbiological Sampling Dates				
		Sampling Projects In-house, HPA, FSA funded, Eastern Region	Factories	Fuud	Cockles (June-Oct)
In-house imported food control (POAO from third country)	Weds	Easter break			
	11/04/2018	In-house rte seafood, dressed crab etc	YES		
	25/04/2018	In-house rte seafood, dressed crab etc			
	09/05/2018	In-house rte seafood, dressed crab etc *RESAMPLES*			
	23/05/2018	In-house scooped & machine ice cream			
	06/06/2018	In-house scooped & machine ice cream		YES	
	20/06/2018	In-house scooped & machine ice cream			
	04/07/2018	PHE project Study 64 Pies etc			
	18/07/2018	PHE project Study 64 Pies etc	YES		
EETSA project on products not in English label	01/08/2018	In-house project Listeria in sliced fruits/melon, sliced meat, pate			
	15/08/2018	In-house project Listeria in sliced fruits/melon, sliced meat, pate			
	29/08/2018	In-house project Raw foods e.g. homemade coleslaw, raw cereal/ seed bars, veg/fruit juice, beef carpaccio, hollandaise sauce, sushi			
	12/09/2018	In-house project Raw foods e.g. homemade coleslaw, raw cereal/ seed bars, veg/fruit juice, beef carpaccio, hollandaise sauce, sushi		YES	
	26/09/2018	In-house project Raw foods e.g. homemade coleslaw, raw cereal/ seed bars, veg/fruit juice, beef carpaccio,			

		hollandaise sauce, sushi			
	10/10/2018	HPE/Regional project – TBC			
	24/10/2018	HPE/Regional project – TBC	YES		
	07/11/2018	In-house project TBC *RESAMPLES*			
	21/11/2018	In-house project TBC		YES	
	05/12/2018	In-house project TBC			
		MERRY CHRISTMAS/HAPPY NEW YEAR *NO SAMPLING ACTIVITY*			
		NEW YEAR - *NO SAMPLING ACTIVITY*			
	09/01/2019	In-house project – emerging risks	YES		
	23/01/2019	In-house project – emerging risks			
	06/02/2019	PHE/Regional project – TBC			
	20/02/2019	PHE/Regional project – TBC		YES	
	06/03/2019	PHE/Regional project – TBC AND *RESAMPLES* AND Water samples (Event)			
	20/03/2019	*RESAMPLES* AND Water samples (Event)			

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Southend-on-Sea Borough Council

Report of Director of Finance & Resources

to
Cabinet

on
18 September 2018

Report prepared by: Joe Chesterton
Director of Finance & Resources

Agenda
Item No.

Fees & Charges Policy
All Scrutiny Committees
Executive Councillor: Councillor John Lamb
A Part 1 Public Agenda Item

1 Purpose of Report

To consider the introduction of a fees and charges policy for services to allow for the setting of fees and charges.

2 Recommendation

Cabinet are asked to approve;

2.1 The proposed fees & charges policy set out in Appendix 1;

2.2 That the existing delegation in Paragraph 3.2(k) in Part 3 Schedule 3 be deleted and replaced by the following wording;

“To set fees and charges in their areas of responsibility (save for parking charges) including making in year changes subject to;

- compliance with the Council’s Fees & Charges Policy;
- compliance with all legal requirements relating to the setting of statutory and discretionary fees and charges, including undertaking any necessary public consultation and assessing the equality impacts; and
- prior consultation with the Council’s Director of Finance & Resources and the relevant Cabinet member”

and that Article 4.02(2) be amended as follows;

“To approve and adopt the Council’s Budget.

[The Budget includes the allocation of financial resources to different services and projects, proposed contingency funds, setting fees and charges (save that fees and charges, other than parking charges, can be set by Chief Officers in accordance with paragraph 3.2(k) in Part 3 Schedule 3), the Council Tax Base, setting the Council Tax and decisions relating to the control of the Council’s borrowing requirement, investments, the control of capital expenditure and the setting of virement limits]”

3 Background

- 3.1 Income from fees and charges are an integral part of the Council’s overall financial and commercial approach especially as we move into an era of financial self-sustainability and therefore support in the overall setting of the Council’s budget.
- 3.2 Clearly the scope to increase fees or charges is determined by a number of factors, of which the most important are: strategic desirability, government direction, elasticity of demand for services, and impact on service users. There is no prescribed increase in individual fees and charges, although the current medium term financial strategy assumes a cpi inflation increase in net income collected (yield) from general price increases. Some fees and charges are also predicated on discreet increases over and above the assumed cpi inflation increase in yield, restructuring existing charges or new charges.

4 Proposed Fees & Charges Policy

- 4.1 As part of the annual budget setting, fees and charges schedules are reported for approval as part of the budget process. In the vast majority of cases the fees and charges for approval are statutory, in line with the required yield increase in the Medium Term Financial Plan or minor in nature.
- 4.2 The proposal is that a Council policy (Appendix 1) is introduced to allow these fees and charges to be set annually by officers for implementation in April of each financial year within the constraints of the policy.
- 4.3 The exception to this approach will be that parking charges due to their strategic and financial importance on the Council will still be reported for approval. Any proposed charges for parking will need to have due regard for the Access, Parking and Transport Strategy, which is elsewhere on this agenda.
- 4.4 If the expected change in yield for a service or category area exceeds the budget guideline increase for fees and charges as set out in the MTFP then these charges will need to be considered as additional income items (savings) as part of the annual budget setting.

5 Other Options

- 5.1 No other options were considered. This report merely brings together the proposed policy for fees and charges, be they statutory or discretionary.

6 Reasons for Recommendations

- 6.1 Part of the process of maintaining a balanced budget includes a requirement to consider the contribution that fees and charges make towards that aim. The adoption of a fees and charges policy will assist in that requirement.

7 Corporate Implications

- 7.1 Contribution to Council's Vision & Critical Priorities

The budget strategy is an integral part of the Council's Corporate Service and Resources Planning Framework.

- 7.2 Financial Implications

As set out in the body of the report. In addition the additional income yield to be generated from fees and charges has been factored into the Council's five year Medium Term Financial Plan

- 7.3 Legal Implications

None at this stage

- 7.4 People Implications

None at this stage

- 7.5 Property Implications

None at this stage

- 7.6 Consultation

None at this stage

- 7.7 Equalities Impact Assessment

None at this stage

7.8 Risk Assessment

The key risks are:

Elasticity of demand for some services may mean that increases in fees & charges lead to a fall in income collected.

Some residents/service users may not be able to afford increases, so that the impact may fall disproportionately on those on low incomes.

7.9 Value for Money

In order to deliver value for money it is essential that the Council gets the right balance between charging for services and funding services from Council Tax.

7.10 Community Safety Implications

None at this stage

7.11 Environmental Impact

None at this stage

8 Background Papers

None

9 Appendices

Appendix 1 – Southend-on-Sea Borough Council - Fees and Charges Policy

Southend-on-Sea Borough Council

Fees and Charges Policy – September 2018

Raising revenue from charges for services is an important element in the overall financing of the Council's services and activities and a key element for financial self-sustainability. It can in other circumstances play a range of other roles, including demonstrating the value of a service or discouraging abuse of a service. It can also play a role in furthering desirable strategic outcomes. Consideration is therefore given on a regular basis to the scope for raising revenue through charges for services and to reviewing the appropriateness and adequacy of the levels of charges being proposed or actually in force.

In accordance with best practice, the Council will:

- undertake regular reviews of the approach to charging, both within service areas and across the whole council
- engage service users in decisions about whether and at what level to charge for services
- collect and use information on service usage and the take-up of concessions, and examine the impact of charges on individual households, to assess whether equality and diversity objectives have been achieved.

This policy is Southend-on-Sea Borough Council's approach to setting fees and charges and allowing concessions. It sets out the principles that the Council will use when setting a charge for services. It ensures consistency in charging customers and community groups. The Council is committed to the highest possible standards of openness and accountability. This policy is driven by those values. Fees and charges will be pitched to deliver the Council's overall outcomes whilst protecting the most vulnerable citizens of Southend.

1. In scope

All discretionary fees and charges (except the Parking charging policy, which will be considered separately)

2. Key Principles

The charging policy will apply across the whole Council. The default position should be to at least recover the cost of providing the service through the fees charged. Where appropriate the Council may knowingly determine not to recover the full cost of some services because of the social impact or other policy reasons including the safeguarding of tourism revenues.

Decisions on prices will take account of/balance the following factors;

- Impact on the Council's strategic outcomes
- Whether the Council should provide the service as opposed to market provision
- Whether the price covers all running costs and fixed costs of the service i.e. full cost recovery
- Commercial services will be priced to generate a surplus. Where commercial services are not achieving that aim they will be reviewed, including the potential to improve the market offer or cease trading altogether

- Comparisons with other local authorities and with broadly similar privately provided facilities
- Ability of “customers” to pay and any need for social pricing, subsidy or free provision of services
- Discount prices for Children
- Effect of changes in prices on demand for the service (and therefore income)
- Statutory restrictions on pricing, including legality of any surplus. Some charges or fees are set by Government for us, and others we are allowed to set within their rules.
- Seasonal factors – whether the same charges can be made all year round
- Demand factors – whether it is appropriate to price differently for off-peak/peak/super peak times
- Whether additional services could be provided at an additional price
- Consultation with users
- Non-residents may be charged differentially to residents where appropriate.
- Each financial year charges will be increased by the Consumer Price Index (CPI). This will ensure charges keep pace with the cost of providing services.
- Increases will be implemented in practical monetary values that make sense to customers. The CPI increase may be applied differently across a group of similar services in order to achieve this.
- National taxation policy e.g. VAT
- Where relevant charging decisions will be supported an equalities impact assessment
- Efficiencies and effectiveness
- Administration costs

3. Concessions

Concessions may be offered;

- To over 16's in full time education
- In receipt of means-tested benefits
- In receipt of the State Pension
- Group discounts may apply where this is consistent with the service charging policy

4. Authority to set fees and charges

- The prices for services will be decided on an annual basis. However, Fees and Charges may be revised at any stage of the financial year if the need arises such as from legislative changes, supply & demand in the market place, etc in line with the Constitution as set out in paragraph 3.2(k) in Part 3 Schedule 3;
- Where fees and charges are increasing in response to the budget guideline yield increase for fees and charges, as set out in the Medium Term Financial Plan (MTFP) then these will automatically be set and applied by Chief Officers in line with the Constitution as set out in paragraph 3.2(k) in Part 3 Schedule 3;
- If the expected change in yield for a service or category area exceeds/does not meet the budget guideline position for fees and charges as set out in the MTFP then these charges will need to be considered as additional income/pressure items (i.e. savings/investments) as part of the annual budget setting.

Report of Chief Executive

To

Cabinet

on

18th September 2018

Report prepared by: Bridgette Cowley
Revenues Group Manager

Debt Management - Position to 31st July 2018

Policy and Resources Scrutiny Committee
Cabinet Member : Councillor John Lamb

A Part 1 Public Agenda Item

1. Purpose of Report

1.1 The purpose of this report is to apprise Cabinet of the following:

- The current position of outstanding debt to the Council, as at 31st July 2018;
- Debts that have been written off, or are recommended for write off, in the current financial year as at 31st July 2018;
- Obtain approval for the write off of irrecoverable debts that are over £25,000.

2. Recommendation

That Cabinet:-

- 2.1 Notes the current outstanding debt position as at 31st July 2018 and the position of debts written off to 31st July 2018 as set out in Appendices A & B.
- 2.2 Approves the write offs greater than £25,000, as detailed in Appendix B.

3. Background

- 3.1 It was agreed by Cabinet on 19th March 2013 that the Director of Finance and Resources would submit regular reports to Cabinet on all aspects of the Council's outstanding debt, along with the required write off position. This is the first report for the financial year 2018/19.

- 3.2 Southend-on-Sea is made up of a number of service areas responsible for the collection and administration of outstanding debt. The main areas are Accounts Receivable and Revenues which are linked to the billing and collection of the vast majority of debts that fall due to be paid to the Council for chargeable services, such as social care (see 4.5) and statutory levies such as Council tax and Non Domestic Rates (Business Rates).

However, there are other areas of debt that are included in this report, namely recovery of Housing Benefit Overpayments, Parking and Enforcement penalties and library fines. In addition, there are also debts for the Housing Revenue Account for rent arrears and service charges.

- 3.3 The process and legislative framework for the collection and write off of debt were detailed in the report to Cabinet on 17th September 2013. However, it is worth noting that the Council has a good success rate in collection of debt, and the collection targets are agreed annually as part of the Councils service planning process.
- 3.4 Debts are only considered for write off where all other courses of recovery available have been undertaken or explored and the debt is considered irrecoverable.

4. Councils Debt Types

4.1 Council Tax

£94.6m of Council Tax is due to be collected in 2018/19, with a collection target of 97.5%. The Council has currently collected £33.7m of this debt which equates to 35.6%, meaning the department is on course to achieve the overall collection rate of 97.5% by the end of the financial year.

Collection continues for the outstanding arrears for that year and for previous years. The chart below shows the actual in year collection rate over the past 4 years, and the collection rate of each year's charge to date, including debts that have been written off.

	Council Tax Performance	
	As at 31st March of relevant year	As at 31 st July 2018
1st April 2014 - 31st March 2015	96.8%	99.4%
1st April 2015 - 31st March 2016	97.2%	99.3%
1st April 2016 - 31st March 2017	97.5%	99.0%
1st April 2017 - 31st March 2018	97.5%	98.2%

4.2 Non Domestic Rates (Business Rates)

£46.8m of Non Domestic rates is due to be collected in 2018/19, with a collection target of 98.3%. The Council has currently collected £18.3m of this debt which equates to 39.2% meaning the department is on course to achieve the overall collection rate of 98.3% by the end of the financial year.

Collection is continuing for outstanding arrears for previous financial years.

The chart below shows the actual in year collection rate over the past 4 years, and the collection rate of each year's charge to date, including debts that have been already written off.

	Non-Domestic Rates Performance	
	As at 31st March of relevant year	As at 31 st July 2018
1st April 2014 - 31st March 2015	97.6%	99.3%
1st April 2015 - 31st March 2016	97.8%	99.8%
1st April 2016 - 31st March 2017	98.0%	99.6%
1st April 2017 - 31st March 2018	98.6%	98.6%

4.3 Housing Benefit Overpayment

This is any entitlement to a rent allowance or rent rebate that a person has received but is not entitled to. Most commonly this accumulates when there is a change to a person's circumstance and they fail to notify us in good time. The overpayment will be invoiced unless they are in receipt of Housing Benefit in which case their benefit entitlement is reduced to enable recovery of the overpayment. The vast majority of Housing Benefit overpayment is due to claimant error.

4.4 Libraries

Library debt is made up of overdue fines and replacing lost or non-returned books.

4.5 Department for People - Adult Services

Adult Services make charges for the following services;

- Contributions to residential accommodation
- Charges for non-residential services i.e. Home Care, Community Support, Day Services and transport to services
- Charges to other local authorities
- Charges to National Health Service

Adult Social Care debt as at 31/7/18 was £4,156,950

It should be noted that of the total amount outstanding;

£2.07m is debt deferred against property;
£0.05m is being collected by Direct Debit;
£0.49m is under 30 days old.

4.6 **Parking**

The recovery of unpaid Penalty Charge Notices is undertaken by semi-judicial process under the current Traffic Management Act 2004.

From 1st April 2018 to 31st July 2018 a total of 15,772 Penalty Charge Notices (PCNs) have been issued identifying a projected income of £455,777. It should be noted that PCNs are issued at a higher rate and lower rate (£70.00 and £50.00 respectively) depending on the seriousness of the parking contravention. PCNs may be paid at a discounted rate of 50% of the charge if paid within 14 days of the date of issue.

This value is continuously being amended as payments are received and it should be recognised that payments made at the 50% discount amount will reduce the projected income level. Generally, 75% of paid PCN's are paid at the discounted payment.

The value of cancelled notices is £42,133 and cases written off where no keeper has been identified totals £110,537.

4.7 **Miscellaneous Income**

This will include a range of services that the Council will charge for including such areas as rental income on commercial properties, recharges to other bodies for services we have provided, and recovering overpaid salaries from staff that have left.

It is important to note that collection can vary month by month depending on the value of invoices raised as a reasonable period needs to be allowed for payment to be made.

4.8 **Housing**

Under the management of South Essex Homes there are the arrears of outstanding debt of Rent and Service Charges. The cost of any write-offs for this category of debt is specifically charged to the Housing Revenue Account and not to Council Tax Payers.

5. Write-Off Levels

5.1 Write off approval levels currently in place are shown in the tables below, which are in accordance with the Financial Procedure rules set out in the Constitution and the latest corporate debt recovery policy.

Debt Type: Council Tax/ Accounts Receivable/Adult Services/ Housing and Council Tax Benefit

Designation	Amount
Assistant Manager	under £5,000
Manager	Up to £10,000
Director	Between £10,000 and £25,000
Cabinet	£25,000 and above

Debt Type: NNDR (Non Domestic Rates)

Designation	Amount
Assistant Manager	under £5,000
Manager	Up to £10,000
Director	Between £10,000 and £25,000
Cabinet	£25,000 and above

Debt Type: Parking

Designation	Amount
Notice Processing Officer & Section Leader	under £5,000
Section Leader	Between £5,000 and £10,000
Group Manager	Between £10,000 and £25,000
Cabinet	£25,000 and above

Debt Type: Housing Rents and Service Charges

South Essex Homes, as managing agent, submit proposed write-offs to the Council, following which the following approval levels are exercised.

Designation	Amount
Head of Service	Under £25,000
Cabinet	£25,000 and above

6. Council Debt Position (as at 31/07/18)

Appendices A and B show the current debt position within each service area, and the amount that has been written off in the current year.

For Council tax and Non Domestic rates there is a net collectable debt at the beginning of the year. Although this can change depending on changes to liability or property being removed or introduced to the lists, it is fairly consistent.

However other service areas may see greater fluctuations as new debts are created during the financial year.

7. Other Options

This is a report notifying members of the current position of the Council's debt and related write offs, and therefore there are no other options.

8. Reasons for Recommendations

All reasonable steps to recover the debt have been taken, and therefore where write off is recommended it is the only course of action available.

If the Council wishes to pursue debts for bankruptcy proceeding, it will follow the agreed and published recovery policy that covers this.

9. Corporate Implications

9.1 Contribution to Council's Vision & Corporate Priorities

Efficient write off of bad and irrecoverable debts, where appropriate, is good financial practice and reduces the bad debt provision and financial impact in the Authority's accounts.

9.2 Financial Implications

Debts that are written off will have been provided for within the Councils bad debt provision and as such there should be no specific financial implications. However it is possible that unforeseen and unplanned additional write offs occur, which lead to the value of debts written off in any year exceeding the bad debt provision.

Where this is likely to happen, this report will act as an early warning system and will enable additional control measures to be agreed and taken to either bring the situation back under control, or to make appropriate adjustments to the bad debt provision.

Relevant service areas have to bear the cost of debts that are written off within their budget.

9.3 Legal Implications

If there are debts to be written off that exceed the level at which officers have delegated powers to deal with the matter, authorisation is required from the Cabinet.

9.4 People Implications

The people implications have been considered and there are none relevant to this report.

9.5 Property Implications

The property implications have been considered and there are none relevant to this report.

9.6 Consultation

Consultation is not required for write off of debt.

9.7 Equalities and Diversity Implications

Debt Collection is managed through a Corporate Debt Management Policy and is based on an approach of "Can't Pay Won't Pay". Each write-off is considered on an individual basis through a standard approach.

9.8 Risk Assessment

There is a financial implication to the bad debt provision if write offs are not dealt with within the current financial year.

9.9 Value for Money

It is a matter of good financial practice and good debt management to regularly report on the value of debt outstanding, collected and written off.

9.10 Community Safety Implications

There are no Community Safety Implications.

9.11 Environmental Impact

There is no environmental impact.

10. Background Papers

Full details of recovery action against each recommended write-off are held within the services computer systems.

11. Appendices

Appendix A Summary of outstanding debt

Appendix B Summary of Write offs

Summary of Outstanding Debt**Outstanding Debt pre 1st April 2018 (arrears)**

Debt pre 1/4/18	Council Tax (a)	Business Rates (a)	Housing Benefit Overpayments (b)	Adult Services	Miscellaneous Income	HRA (Care Line/Service Charges)	Parking (c)	Libraries (d)	HRA Current Tenants (e)	HRA Former Tenants (e)
	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000
Net Collectable Debt	6,080	1,823	6,584	5160	3385	198	12,812	n/a	-	318
Amount Paid @ 31.07.2018	1,001	645	1,277	2,002	2456	29	10,994	448	-	52
Number of Accounts	15,032	224	2578	1173	1233	64	n/a	n/a	-	334
Total Outstanding	5,079	1,178	4,774	3,158	929	169	1,818	n/a	-	266

Current Year Debt (Debt raised in respect of 2018/19)

Debt post 1/4/18	Council Tax (a)	Business Rates (a)	Housing Benefit Overpayments (b)	Adult Services	Miscellaneous Income	HRA (Care Line/Service Charges)	Parking (c)	Libraries (d)	HRA Current Tenants (e)	HRA Former Tenants (e)
	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000	£'000
Net Collectable Debt at 31.03.2018	94,385	46,862	1,426	2959	10,634	1,081	605	n/a	11,122	77
Amount Paid @31.07.2018	33,717	18,369	1,277	1961	9,105	529	346	9	11,096	7
Number of Accounts	75,412	2,415	1262	680	687	3121	n/a	n/a	1,772	109
Total Outstanding	60,668	28,493	1,267	998	1529	552	259	n/a	481	70

NOTES

- (a) Council Tax and Business Rates includes adjustments for write offs, credits and outstanding court costs.
- (b) HB Overpayment is not attributable to a financial year in the same way that Council Tax or NDR are i.e. a yearly debit is not raised. It is also not feasible to state when a payment is made which age of debt it has been paid against. For these reasons the outstanding amounts in the report reflect the actual outstanding debt at the date requested, it does not reflect the outstanding debt against current year and previous year debts.
- (c) Parking total outstanding is net of PCNs cancelled and written off.
- (d) The figure of £448k relates to total payments received since January 2005 until 31/07/2018.
- (e) HRA tenancy debts (residential rent accounts) are rolling amounts, with no breaks in years or rollovers. Any cash received is applied to the oldest rent week outstanding. The figures shown are total arrears outstanding, and therefore include arrears still outstanding from prior years.

Summary of Write Off's

Debts written off in 2018/19

Period 1 April 2018 – 31 March 2019 relating to any year

Write Offs	Council Tax £	Business Rates £	Housing Benefit Overpayment £	Adult Services £	Miscellaneous Income £	HRA (Care Line/Service Charges) £	Parking £	Libraries £	HRA Tenants £
Under £5k	£117,313	£21,443	120,534	55,217	0	1,538	110,537	9897	33,321
£5k-£25k	0	£24,309	5,039	32,727	0	0	0	0	
Over £25k	0	0	0	0	0	0	0	0	0
Total	£117,313	45,752	125,573	87,944	0	1,538	110,537	9897	33,321

Note: Cabinet approved write off's excluding those recommended for write off as listed below

Write off's greater than £25,000 recommended for Cabinet approval

Amount of Write off £	Reason for Write Off	Service Area
£29,723.81	<p>BN – Housing Benefit Overpayment.</p> <p>Housing Benefit Overpayment occurred as DWP report received showing increased assets. This led to nil entitlement for Jobseekers Allowance from 05/12/2008. The increased assets included a payment of £31,000 received by his partner for sale of a property in October 2008. In addition an overpayment of Jobseekers Allowance was created with the DWP.</p> <p>Debt recovery started in November 2012. The debtor has been sent invoices, reminders and final letters. He was also given the opportunity to dispute the overpayment by providing proof of income and bank statements. Partner provided a letter and bank statement in March 2013, but debtors own income and bank statements were not provided. During this period he was listed as director of 2 companies.</p> <p>Only offer of repayment was £5 per month in June 2013 but payments were never received.</p>	Housing Benefit overpayment

Left property where overpayment was created in June 2013 and moved to a further new address located in October 2013. Final letter was re-raised to new address but no contact was made.

Debt was put to Debt Recovery Agents initially. They undertook recovery action and were informed that he had left the country and was now living in Australia. Traces done by them to find alternative UK addresses were unsuccessful, they are unable to trace addresses outside of the UK. Due to this they were unable to enter into an arrangement or gain any payments.

Debt was then passed to a further Debt Recovery Agents. They undertook recovery actions and attempted to trace debtor, but again have been unsuccessful.

No DWP benefits have been in payment since the initial overpayment was created, so the LA OP is unable to be recovered from ongoing HB or a forwarding address found.

Numerous checks have been done via the DWP and HMRC to trace any employment, benefit or address details. All have been unsuccessful.

A profile report has been conducted and also the case was referred for potential legal action.

The findings were:

- There is no current forwarding address in the UK or abroad.
- There are no known assets or any evidence of a means to pay back.
- The prospects of recovery through legal action have been assessed as being extremely low and will only incur further costs.
- Was declared bankrupt on 10th July 2013 this information had never been notified to the LA before.
- No further recovery action can take place on this debt.

£60,180.26	<p><u>Genus Uk Ltd T/A Select</u></p> <p>Non-Domestic Rates debt to be written off as company entered into a Company Voluntary Arrangement on 13.04.2018. Debt relates to 2018/19 financial year. Annual demand was issued for Non-Domestic Rates on 12th March 2018 for the balance of £60,180.26 for the 2018/19 financial year. A NNDR reminder notice was served on 18th May 2018 for the instalment of £6,684.26 due on 1st May 2018 An email was received on 8th May 2018, attaching a letter dated 16th April 2018 from Quantuma LLP (insolvency practitioner) to confirm Genus UK Limited have entered into a Company Voluntary Arrangement.</p>	Business Rates
£27,581.45	<p><u>Ratanpal Business Solution Limited</u></p> <p>£27,581.45 debt to be written off as company dissolved on 17th April 2018. Ratanpal Business Solution Limited occupied 114 High Street from 27th March 2017 - 23rd September 2017. The RV for the property is £122,000 for the 2010 list and £67,500 for the 2017 list. This is a statement of debt to be written off:</p> <p>2016/17 financial year debt £830.60 and costs £95.00, total £925.60 2017/18 financial year debt £26,560.85 and costs £95.00, total £26,655.85</p> <p>No payments were made directly to the account Ratanpal Business Solution Limited were made liable for Non-Domestic Rates following receipt of a tenancy at will supplied by the Landlord, North London Commercial Limited. 2016/17 financial year - a demand was sent on 25th May 2017, a reminder notice on 22nd June 2017 and a summons on 24th July 2017. A Liability Order was granted on 17th August 2017. 2017/18 financial year - a demand was sent on 25th May 2017, a reminder notice on 20th July 2017 and a summons on 21st August 2017. A Liability Order was granted on 13th September 2017.</p>	Business Rates

22nd August 2017 2016/17 year balance and 15th September 2017 2017/18 year balance was issued to Newlyn Enforcement Agent for collection.

12.09.2017 Newlyn Enforcement Agent attended the premises and was not able to gain access. They spoke to residents of flats above premises and were advised that the residents of the flats were not linked to the company.

14.09.2017 Newlyn Enforcement Agent attended the premises and were advised by the current tenants of the shop that Ratanpal Business Solution Limited had vacated.

25.09.2017 Newlyn Enforcement Agent attended the premises and confirm that the premises was empty and advertised by Sorrell Estate Agent for let.

30.09.2017 Case was returned by Newlyn Enforcement Agent marked 'Gone away'.

16th November 2017 - A letter was sent to the Registered Office Address requesting balance in full within seven days.

16th November 2017. Both balances were issued to Rossendales Enforcement Agent for collection. Letters were sent to the Registered Office on 22.11.2017 & 04.12.2017.

27.02.2018 Rossendales Enforcement Agent attended the Registered Office address, which was a residential address occupied by a tenant, who advised he lives in premises alone, receives post for Ratanpal Business Solution Limited but has no links to the company.

28.02.2018 Rossendales Enforcement Agent note that the First Gazette notice to strike off had been lodged with Companies House.

17.04.2018 Ratanpal Business Solution Limited dissolved.

Southend-on-Sea Borough Council

Agenda
Item No.

Report of Chief Executive
to
Cabinet
on
18 September 2018

Report prepared by: Joe Chesterton
Director of Finance and Resources

Quarter One Treasury Management Report – 2018/19
Policy and Resources Scrutiny Committee
Cabinet Member: Councillor John Lamb
A Part 1 Public Agenda Item

1. Purpose of Report

- 1.1 The Quarter One Treasury Management Report covers the treasury management activity for the period from April to June 2018 and compliance with the treasury management strategy for that period.

2. Recommendations

That the following is approved:

- 2.1 The Quarter One Treasury Management Report for 2018/19.**

That the following is noted:

- 2.2 Treasury management activities were carried out in accordance with the CIPFA (The Chartered Institute of Public Finance and Accountancy) Code of Practice for Treasury Management in the Public Sector during the period from April to June 2018.**
- 2.3 The loan and investment portfolios were actively managed to minimise cost and maximise interest earned, whilst maintaining a low level of risk.**
- 2.4 £0.826m of interest was earned during this three month period at an average rate of 4.90%. This is 4.54% over the average 7 day LIBID (London Interbank Bid Rate) and 4.40% over the average bank rate. The breakdown of this overall investment position is set out in section 8.**
- 2.5 The level of borrowing from the Public Works Loan Board (PWLB) (excluding debt relating to services transferred from Essex County Council on 1st April 1998) remained at the same level of £227.8m (HRA: £77.0m, GF: £150.8m) during the period from April to June 2018.**
- 2.6 During the quarter the level of financing for ‘invest to save’ schemes decreased from £8.74m to £8.72m.**

3. Background

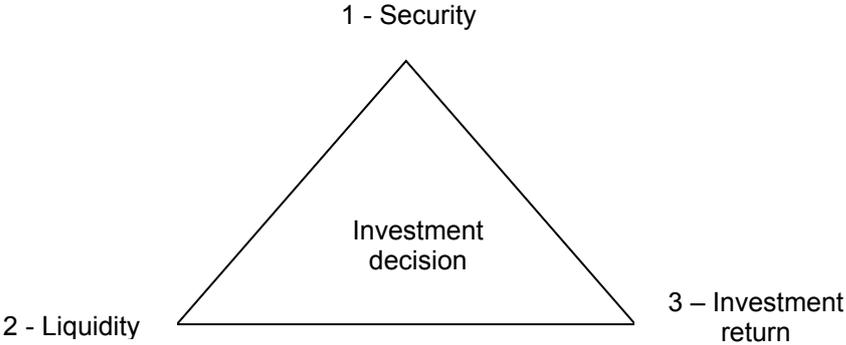
- 3.1 This Council has adopted the 'CIPFA Code of Practice for Treasury Management in the Public Sector' and operates its treasury management service in compliance with this code. The code recommends that local authorities submit reports regularly as part of its Governance arrangements.
- 3.2 Current guidance is that authorities should report formally at least twice a year and preferably quarterly. The Treasury Management Policy Statement for 2018/19 set out that reports would be submitted to Cabinet quarterly on the activities of the treasury management operation. This is the first quarterly report for the financial year 2018/19.
- 3.3 Appendix 1 shows the treasury management position at the end of quarter one of 2018/19.
- 3.4 Appendix 2 shows the treasury management performance specifically for quarter one of 2018/19.

4. National Context

- 4.1 In the UK the rate of GDP growth was 0.4% in the three months to the end of June, double that of the first quarter. On an annual basis the economy grew by 1.3% mainly driven by the services sector which grew by 0.5%. Overall consumer spending grew by 0.3% with consumers taking advantage of the warm weather and the football World Cup. The construction sector also recovered in quarter two after the freezing weather conditions earlier in the year. However, manufacturing output decreased by 0.9%.
- 4.2 CPI was at 2.4% throughout the quarter. The increase in recent months is down to the import intensive areas of the basket of goods used to measure price changes. The unemployment rate for the quarter was 4%, a reduction from the rate in quarter one of 4.2%.
- 4.3 The Bank of England kept the bank base rate at 0.50% throughout the quarter and left their Quantitative Easing (QE) programme at £435bn. On 2nd August they raised the base rate from 0.5% to 0.75% on an assessment that the economy was in better health.
- 4.4 The economic situation together with the financial market conditions prevailing throughout the quarter continued to provide challenges for treasury management activities. Due to the low interest rate environment, only monies needed for day to day cash flow activities were kept in instant access accounts.
- 4.5 Low interest rates prevailed throughout the quarter from April to June 2018 and this led to low investment income earnings from most investments.

5. Investments

- 5.1 A prime objective of our investment activities is the security of the principal sums invested. To ensure this security before an in-house deposit is made an organisation is tested against a matrix of credit criteria and then other relevant information is considered. During the period from April to June 2018 investment deposits were limited to those who met the criteria in the Annual Investment Strategy when the deposit was placed.
- 5.2 Other investment objectives are to maintain liquidity (i.e. adequate cash resources to allow the council to operate) and to optimise the investment income generated by surplus cash in a way that is consistent with a prudent level of risk. Investment decisions are made with reference to these objectives, with security and liquidity being placed ahead of the investment return. This is shown in the diagram below:



Security:

- 5.3 To maintain the security of sums invested, we seek to lower counterparty risk by investing in financial institutions with good credit ratings, across a range of sectors and countries. The risk of loss of principal of all monies is minimised through the Annual Investment Strategy.
- 5.4 Pie chart 1 of Appendix 1 shows that at the end of quarter one; 17% of our in-house investments were placed with financial institutions with a long term credit rating of AAA and 83% with a long term rating of A.
- 5.5 As shown in pie chart 2 of Appendix 1 these monies were with various counterparties, 83% being placed directly with banks and 17% placed with a range of counterparties via money market funds.
- 5.6 Pie chart 3 of Appendix 1 shows the range of countries where the parent company of the financial institution with which we have monies invested is registered. For money market funds there are various counterparties spread across many countries.

Liquidity:

- 5.7 Our in-house monies were available on an instant access basis at the end of quarter one. The maturity profile of our investments is shown in pie chart 4 of Appendix 1.

Investment return:

- 5.8 During the quarter the Council used the enhanced cash fund manager Payden & Rygel to manage monies on its behalf. An average balance of £5.0m was invested in these funds during the quarter earning an average rate of 0.96%. More details are set out in Table 2 of Appendix 2.
- 5.9 The Council had an average of £19.8m of investments managed in-house over the period from April to June 2018, and these earned an average interest rate of 0.63%. Of the in-house managed funds:
- an average of £8.3m was held in call accounts and earned an average return of 0.63% over the quarter;
 - an average of £11.5m was held in money market funds earning an average of 0.63% over the quarter. These work in the same way as a deposit account but the money in the overall fund is invested in a number of counterparties, therefore spreading the counterparty risk.
- 5.10 In accordance with the Treasury Management Strategy the performance during the quarter is compared to the average 7-day LIBID. Overall for both in-house and externally managed investments, performance on all types of investment was higher than the average 7 day LIBID (London Interbank Bid Rate). The bank base rate remained at 0.50% throughout the period from April to June 2018, and the 7 day LIBID rate fluctuated between 0.356% and 0.370%. Performance is shown in Graph 1 of Appendix 2.

6. Short Dated Bond Funds

- 6.1 During the quarter two short dated bond funds were used for the investment of medium term funds: Royal London Investment Grade Short Dated Credit Fund and the AXA Sterling Credit Short Duration Bond Fund.
- 6.2 The monies are invested in units in the fund, the fund is then invested as a whole by the fund managers into corporate bonds in the one to five year range. An income distribution will be generated from the coupon on the bond and income distributions will be reinvested back into the fund. The price of units can rise and fall, depending on the price of bonds in the fund so these funds are invested over the medium term with the aim of realising higher yields than short term investments.
- 6.3 The Council's interest equalisation reserve will be used to capture some of the income in the years when the corporate bond values are rising, and will then be available to offset any losses should bond values fall. Members should be aware that this means that the investment returns in some quarters will look very good and in other quarters there may be losses reported, but these will not

impact the revenue account as the interest equalisation reserve would be used to meet any temporary losses.

- 6.4 An average of £7.6m was managed by AXA Investment Managers UK Limited. During the quarter the value of the fund increased by £0.019m due to an increase in the unit value, giving a return of 1.02%. The fund started the quarter at £7.563m and increased in value with the fund at the end of the period at £7.582m.
- 6.5 An average of £7.7m was managed by Royal London Asset Management. During the quarter the value of the fund decreased by £0.015m due to a decrease in the unit value and increased due to income distributions of £0.080m.
- 6.6 The Royal London fund earned £0.065m during the year from a combination of the decrease in the value of the units and the income distribution, giving a combined return of 3.41%. The fund started the quarter at £7.630m and increased in value with the fund at the end of the period at £7.695m.

7. Property Funds

- 7.1 Throughout the quarter long term funds were invested in two property funds: Rockspring Hanover Property Unit Trust and Lothbury Property Trust.
- 7.2 The monies are invested in units in the fund, the fund is then invested as a whole by the fund managers into properties. An income distribution is generated from the rental income streams from the properties in the fund. Income distributions are reinvested back into the fund. There are high entrance and exit fees and the price of the units can rise and fall, depending on the value of the properties in the fund, so these funds are invested over the long term with the aim of realising higher yields than other investments.
- 7.3 The interest equalisation reserve will be used to capture some of the income in the years when the property values are rising, and will then be available to offset any losses should property values fall. Members should be aware that this means that the investment returns in some quarters will look very good and in other quarters there may be losses reported, but these will not impact the revenue account as the interest equalisation reserve would be used to meet any temporary losses.
- 7.4 An average of £14.2m was managed by Rockspring Property Investment Managers LLP. During the three month period, the value of the fund increased by £0.251m due to the increase in the unit value. There was also an income distribution relating to that period of £0.169m and this distribution will be confirmed and distributed in quarter two.
- 7.5 The Rockspring fund earned £0.420m during this three month period from a combination of the increase in the value of the units and the income distribution, giving a combined return of 11.88%. The fund started the quarter at £14.198m and increased in value with the fund at the end of the quarter at £14.618m.

- 7.6 An average of £13.3m was managed by Lothbury Investment Management Limited. During the three month period, the value of the fund increased by £4.989m due to the additional purchase of units in April 2018 and by £0.171m due to the increase in the unit value. There was also an income distribution relating to that period of £0.108m and this distribution will be confirmed and distributed in quarter two.
- 7.7 The Lothbury fund earned £0.279m during this three month period from a combination of the increase in the value of the units and the income distribution, giving a combined return of 8.40%. The fund started the quarter at £8.427m and increased in value with the fund at the end of the quarter at £13.695m.

8. Overall Investment Position

- 8.1 An average of £19.8m of investments were managed in-house. These earned £0.031m of interest during this three month period at an average rate of 0.63%. This is 0.27% over the average 7-day LIBID and 0.13% over the bank base rate.
- 8.2 An average of £5.0m was managed by an enhanced cash fund manager. This earned £0.012m during this three month period at an average rate of 0.96%.
- 8.3 An average of £15.3m was managed by two short dated bond fund managers. This earned £0.084m during this three month period from a combination of an increase in the value of the units and income distribution, giving a combined return of 2.22%.
- 8.4 An average of £27.5m was managed by two property fund managers. These earned £0.699m during this three month period from a combination of an increase in the value of the units and income distribution, giving a combined return of 10.20%.

9 Borrowing

PWLB and short term borrowing

- 9.1 The Capital Financing Requirement (CFR) is the Council's theoretical need to borrow but the Section 151 Officer can manage the Council's actual borrowing position by either:
- 1 - borrowing to the CFR;
 - 2 – choosing to use temporary cash flow funds instead of borrowing (internal borrowing) or;
 - 3 - borrowing for future increases in the CFR (borrowing in advance of need).
- 9.2 The Council began 2018/19 in the second of the above scenarios, with actual borrowing below CFR.
- 9.3 This, together with the Council's cash flows, the prevailing Public Works Loans Board (PWLB) interest rates and the future requirements of the capital programme, were taken into account when deciding the amount and timing of

any loans. No new PWLB loans were taken out and no loans matured during the quarter. No debt restructuring was carried out during the quarter.

9.4 The level of PWLB borrowing (excluding debt relating to services transferred from Essex County Council on 1st April 1998) remained at £227.8m during quarter one. The average rate of borrowing at the end of the quarter was 4.62%. A profile of the repayment dates is shown in Graph 2 of Appendix 2. All PWLB debt held is repayable on maturity.

9.5 The table below summarises the PWLB activities during the quarter:

Quarter	Borrowing at beginning of quarter (£m)	New Borrowing (£m)	Re-financing (£m)	Borrowing repaid (£m)	Borrowing at end of quarter (£m)
April to June 2018	227.8	0	0	(0)	227.8
<i>Of which:</i>					
General Fund	150.8	0	0	(0)	150.8
HRA	77.0	0	0	(0)	77.0

9.6 The level of PWLB borrowing at £227.8m is in line with the financing requirements of the capital programme and the revenue costs of this borrowing are fully accounted for in the revenue budget. The current level of borrowing is also in line with the Council's prudential indicators and is Prudent, Affordable and Sustainable.

9.7 These figures exclude debt held by Essex County Council of £11.9m relating to assets transferred on 1st April 1998, which this Council is responsible for servicing. The debt is recognised as a deferred liability on our balance sheet.

9.8 Interest rates from the PWLB fluctuated throughout the quarter in response to economic events: 10 year PWLB rates between 2.13% and 2.47%; 25 year PWLB rates between 2.52% and 2.79% and 50 year PWLB rates between 2.25% and 2.53%. These rates are after the PWLB 'certainty rate' discount of 0.20%.

9.9 No short term loans were taken out for cash flow purposes during the quarter and one short term loan for cash flow purposes was repaid during the quarter. See Table 3 of Appendix 2.

Funding for Invest to Save Schemes

9.10 Capital projects were completed on draught proofing and insulation in the Civic Centre, and lighting replacements at University Square Car Park and Westcliff Library which will generate on-going energy savings. These are invest-to-save projects and the predicted revenue streams cover as a minimum the financing costs of the project.

9.11 To finance these projects in total the Council has taken out interest free loans of £0.22m with Salix Finance Ltd which is an independent, not for profit company, funded by the Department for Energy and Climate Change that delivers interest-free capital to the public sector to improve their energy efficiency and reduce their carbon emissions. The loans are for a period of four and five years with

equal instalments to be repaid every six months. There are no revenue budget implications of this funding as there are no interest payments to be made and the revenue savings generated are expected to exceed the amount needed for the repayments. £0.026m of these loans were repaid during the period from April to June 2018.

9.12 At the meeting of Cabinet on 23rd June 2015 the LED Street Lighting and Illuminated Street Furniture Replacement Project was approved which was to be partly funded by 25 year reducing balance 'invest to save' finance from L1 Renewables Finance Limited (formerly the Green Investment Bank). The balance outstanding at the end of quarter one was £8.61m. There were no repayments during the period from April to June 2018.

9.13 Funding of these invest to save schemes is shown in table 3 of Appendix 2.

10. Compliance with Treasury Management Strategy

10.1 The Council's investment policy is governed by the CIPFA Code of Practice for Treasury Management in the Public Sector (revised in December 2017), which has been implemented in the Annual Investment Strategy approved by the Council on 22 February 2018. The investment activity during the quarter conformed to the approved strategy and the cash flow was successfully managed to maintain liquidity. See Table 4 of Appendix 2.

11 Other Options

11.1 There are many options available for the operation of the Treasury Management function, with varying degrees of risk associated with them. The Treasury Management Policy aims to effectively control risk to within a prudent level, whilst providing optimum performance consistent with that level of risk.

12. Reasons for Recommendations

12.1 The CIPFA Code of Practice on Treasury Management recommends that Local Authorities should submit reports regularly. The Treasury Management Policy Statement for 2018/19 set out that reports would be submitted to Cabinet quarterly on the activities of the treasury management operation.

13. Corporate Implications

13.1 Contribution to Council's Vision & Critical Priorities

Treasury Management practices in accordance with statutory requirements, together with compliance with the prudential indicators acknowledge how effective treasury management provides support towards the achievement of the Council's Vision and Critical Priorities.

13.2 Financial Implications

The financial implications of Treasury Management are dealt with throughout this report.

13.3 Legal Implications

The Council has adopted the 'CIPFA Code of Practice for Treasury Management in the Public Sector' and operates its treasury management service in compliance with this Code.

13.4 People Implications

None.

13.5 Property Implications

None.

13.6 Consultation

The key Treasury Management decisions are taken in consultation with our Treasury Management advisers.

13.7 Equalities and Diversity Implications

None.

13.8 Risk Assessment

The Treasury Management Policy acknowledges that the successful identification, monitoring and management of risk are fundamental to the effectiveness of its activities.

13.9 Value for Money

Treasury Management activities include the pursuit of optimum performance consistent with effective control of the risks associated with those activities.

13.10 Community Safety Implications

None.

13.11 Environmental Impact

None.

14. Background Papers

None.

15. Appendices

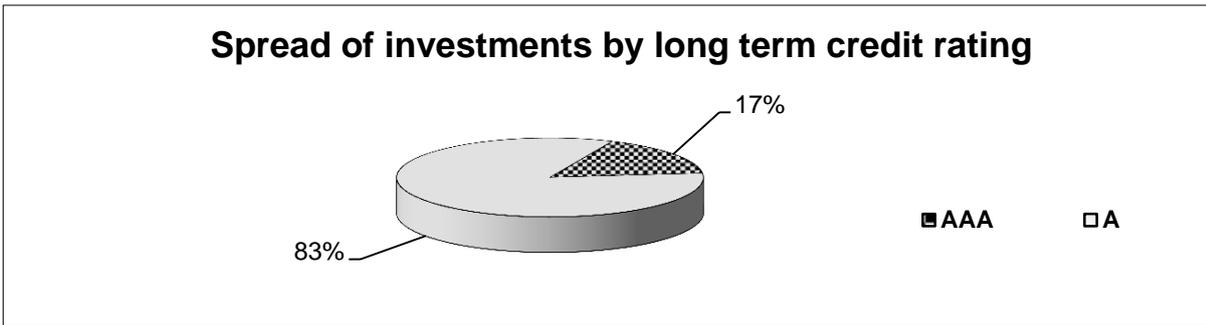
Appendix 1 – In-house Investment Position as at 30th June 2018

Appendix 2 – Treasury Management Performance for Quarter One - 2018/19

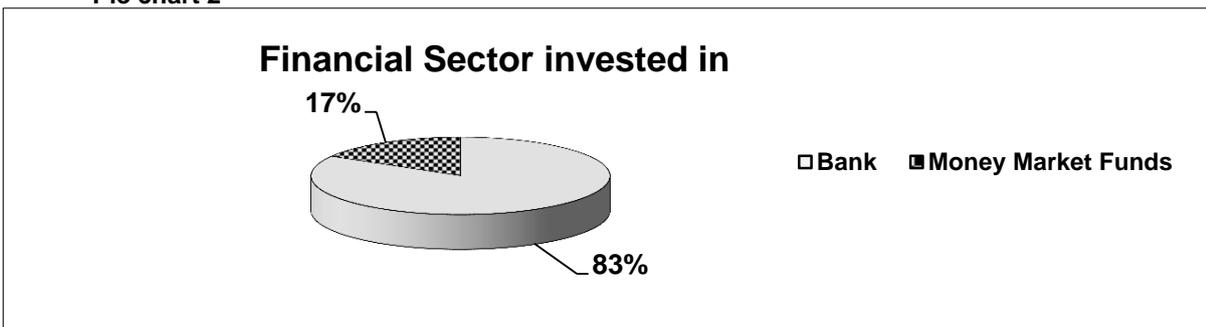
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INVESTMENTS - SECURITY AND LIQUIDITY

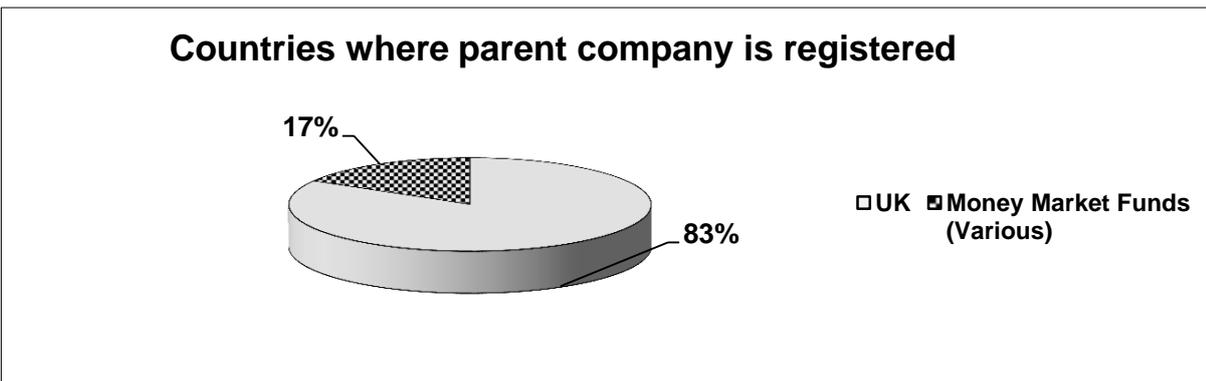
Pie chart 1



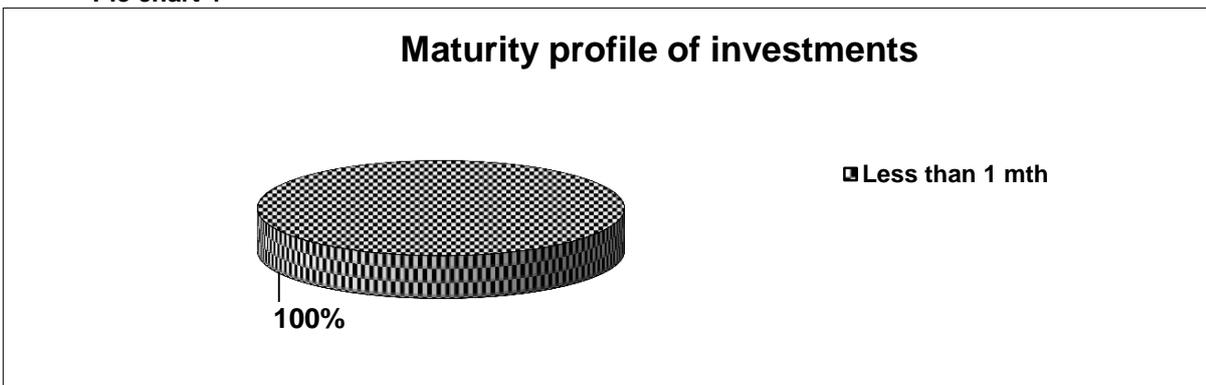
Pie chart 2



Pie chart 3



Pie chart 4



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Graph 1 - Investment Return

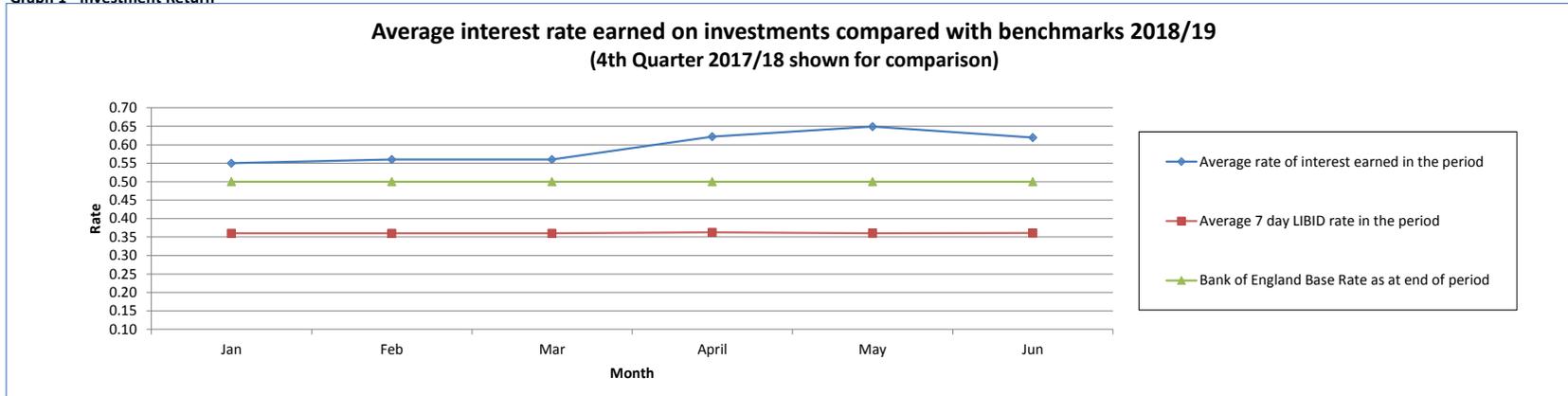


Table 1 - Property Funds

Financial Institution	Quarter	Period of investment	Value of fund at beginning of Qtr 1 £	Number of units at start of Qtr 1 Units	Number of units distributed during Qtr 1 Units	Purchased Units during Qtr 1 £	Purchased of new units during Qtr 1 Units	Number of units at end of Qtr 1 Units	Gross Increase / (Decrease) in fund value £	Income Distribution Qtr 1 £	Value of fund at end Qtr 1 £	Combined interest Rate %
Rockspring Hanover Real Estate Investment Mgt Ltd	1	5 Years +	14,197,587.59	972	7	0	0	979	251,200.22	169,070.16	14,617,857.97	11.88%
Lothbury Investment Management - Property Fund	1	5 Years +	8,427,468.09	4,232.4380	31.6579	4,988,929.26	2,483.000	6,747.0959	171,284.23	107,369.90	13,695,051.48	8.40%
Total											28,312,909.45	

Table 2 - Short Dated Bond Funds/Enhanced Cash Fund

Financial Institution	Quarter	Value of fund at the start of Qtr 1 £	Number of shares Qtr 1 Units	Number of units distributed during Qtr 1 Units	Number of units at the end of Qtr 1 Units	Increase / (Decrease) in fund value £	Income Distribution during the Qtr 1 £	Value of fund at end of Qtr 1 £	Combined Interest Rate %
AXA	1	7,563,055.51	6,442,125.65	N/a	6,442,125.65	19,326.38	N/a	7,582,381.89	1.02%
Royal London	1	7,630,260.34	7,607,438.02	80,315.16	7,687,753.18	(15,334.78)	80,515.37	7,695,440.93	3.41%
Payden & Rygel	1	5,038,455.19	461,646.42	N/a	461,646.42	12,048.93	N/a	5,050,504.12	0.96%
Total								20,328,326.94	

Table 3 - BORROWING

SHORT TERM BORROWING		Rate	Amount (£)	From	To
Repaid this Quarter	Middlesbrough Council	0.80%	£ 7,000,000.00	15/03/2018	18/04/2018
In place during this Quarter	Derbyshire County Council	0.80%	£ 3,500,000.00	03/04/2017	29/03/2019

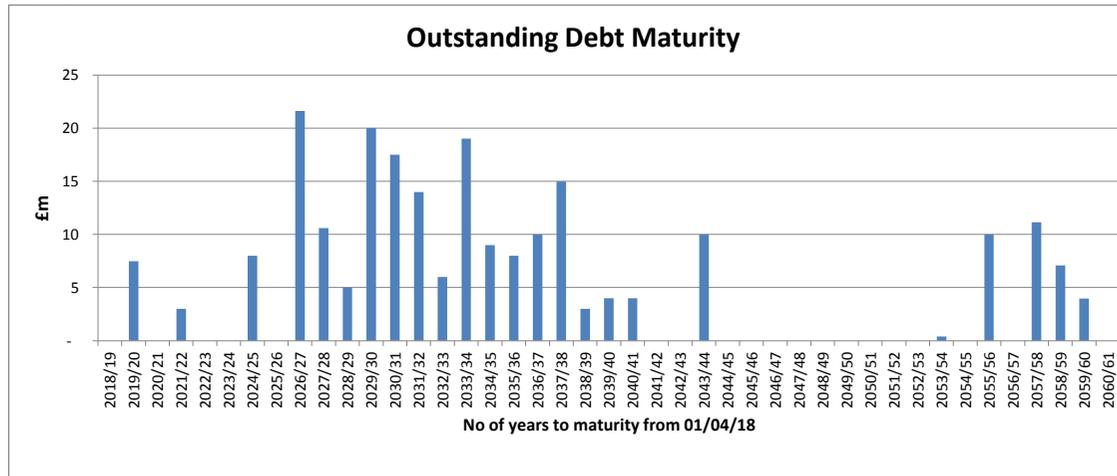
Invest to Save Funding

Financial Institution	Date	Period of loan	Final Repayment date	Amount borrowed £	Amount Repaid to Date £	Amount to be repaid £	Interest rate %
Salix loan - Windows Draughtproofing project	26/03/2015	4 Years	01/04/2019	141,059	(105,794.24)	35,264.76	0%
Salix loan - University Square Car Park and Westcliff Library projects	23/03/2017	5 Years	01/04/2022	82,017	(16,403.40)	65,613.60	0%

L1 Renewables Finance Limited	- 25 year reducing balance finance - balance of £8.6m outstanding at the end of quarter One - there were no repayments during this quarter
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Graph 2

LONG TERM BORROWING - PWLB



	Rate	Amount (£)	From	To
New this quarter	None			
Repaid this quarter	None			
			<u>Lowest</u>	<u>Highest</u>
Range of 10 year PWLB new loan rates this quarter			2.13	2.47
Range of 25 year PWLB new loan rates this quarter			2.52	2.79
Range of 50 year PWLB new loan rates this quarter			2.25	2.53

COMPLIANCE WITH TREASURY MANAGEMENT STRATEGY

Table 4

All transactions properly authorised	✓
All transactions in accordance with approved policy	✓
Recommended changes :	None
All transactions with approved counterparties	✓
Cash Flow successfully managed to maintain liquidity	✓
Any recommended changes to procedures	None

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Southend-on-Sea Borough Council

Report of the Chief Executive

to

Cabinet

on

18 September 2018

Report prepared by: John Williams, Director of Legal and Democratic Services and Senior Information Risk Owner (SIRO); Val Smith, Knowledge and Information Manager, Policy, Engagement and Communication

**Information governance update and
Senior Information Risk Owner (SIRO) Annual Report 2017/18
Policy & Resources Scrutiny Committee
Cabinet Member: John Lamb
A Part 1 Public Agenda Item**

1. Purpose of Report

- 1.1 To provide a summary of the Council's key actions in regard to information governance and management during 2017/18.
- 1.2 To report on opportunities and challenges in regard to information governance during 2018/19.
- 1.3 To comply with the requirement for the Senior Information Risk Owner (SIRO) to provide an annual report.

2. Recommendations

- 2.1 That the SIRO's report on Information Governance in Section 4 for 2017/18 be noted.
- 2.2 That the key actions taken during 2017/18, and the opportunities and challenges for 2018/19 be noted.

3. Background

- 3.1 The Council's Information Management Strategy was agreed by Cabinet in June 2016. The strategy sets out the Council's vision for managing information, the principles supporting the vision and the context and challenges faced by the Council.
- 3.2 It also describes the related governance arrangements and action plan to progress the Council's approach. It is complemented by a range of other strategies, policies and processes, notably the Council's Digital Strategy and Data

Protection Policies.

- 3.3 The Council's SIRO has overall responsibility for the Council's information management framework and acts as the champion for information risk within the Council. The SIRO for the Council is the Director of Legal and Democratic Services.
- 3.4 The SIRO is responsible for producing an annual report on information governance. The report provides an overview of developments in relation to information governance, related work undertaken since April 2017 as well as outlining the strategic direction the Council has adopted. It should provide assurance that the Council's arrangements ensure personal data is held securely, information is disseminated effectively and that the Council is compliant with the legal framework - notably the GDPR and Data Protection Act 2018.

4.0 SIRO Annual Report – 2017-18

4.1 Leadership and Governance

4.1.1 The SIRO has to ensure that identified information threats and vulnerabilities are followed up for risk mitigation, and that perceived or actual information incidents are managed in accordance with Council's Risk Management Framework.

4.1.2 The SIRO's role is supported by:

- Two Privacy Officers (Data Controllers) - the Director of Transformation and the Director of Digital Futures
- The Caldicott Guardian - the Director of Children's Services
- The Information Asset Owners (nominated officers)
- The Council's Data Protection Officer – Knowledge and Information Manager in the PEC Team.

4.1.3 With regard to Cyber Security, the SIRO is supported by the Cyber Security Lead, (the Director of Digital Futures) and the Group Manager ICT. ICT monitor cyber security developments; safeguard corporate systems and provide advice and training to the organisation concerning the responsibility of all staff to be aware of and to guard against cyber security threats. ICT also risk assess those aspects of Data Protection Impact Assessments which involve the use of such technology.

4.1.4 The Data Protection Officer (DPO) assists the organisation in monitoring internal compliance, informing and advising on data protection obligations, providing advice and assistance on Data Protection Impact Assessments and acts as a contact point between the Information Commissioner and the Council. It is a statutory requirement that the DPO reports to the highest management level. Usually this is the Corporate Information Governance Group (CIGG) but on occasions it will be the Corporate Management Team (on which the SIRO sits).

- 4.1.5 The DPO is assisted by the Data Protection and Freedom of Information Advisory Service located within Policy, Engagement and Communication. They provide the organisation with advice and training for these specialisms. They also manage Data Protection and Freedom of Information central records, monitor performance and compliance with legislation and lead on records management.
- 4.1.6 Leadership and governance of information management has been provided by the Corporate Information Governance Group (CIGG) who oversee implementation of the information management strategy and during 2017/18 acted as a project board for implementation of GDPR.
- 4.1.7 The CIGG is chaired by the Director of Transformation, with membership including the SIRO, the Council's two Privacy Officers, the Caldicot Guardian and the DPO.
- 4.1.8 During 2017/18 and until June 2018, a GDPR project group, chaired by the Head of Policy, Engagement & Communication and consisting of representatives across the Council, led on preparations for GDPR. The project group met regularly to progress a detailed GDPR project action plan. The group reported to the CIGG for approval of changes to policy and procedure.
- 4.1.9 To better serve the organisation, the Data Protection/Freedom of Information Co-ordinators Meetings have been reconstituted to become a Data Protection and Freedom of Information Community of Practice, led by the Knowledge and Information Manager. The COP continues to monitor performance but the focus on sharing good practice and providing training is being expanded, as is the role of its members in providing expert knowledge to their colleagues. The SIRO is a member of the COP.
- 4.1.10 The Council is a signatory to the Whole Essex Information Sharing Framework (WEISF) and the associated forum. This assists the Council in sharing appropriate personal data with public, third sector and contracted private organisations across Essex in a lawful, safe and informed way. All sharing agreements are hosted in a portal managed by Essex County Council.

4.2 Training and Awareness

- 4.2.1 Data Protection training continues to feature as a key part of ensuring staff are aware of their responsibilities. In 2017/18 this comprised of formal class room training, induction training and SPARK e-learning module (which is also a gateway to permission being allowed to work remotely).
- 4.2.2 The Data Protection Officer has passed the examination for the Practitioner Certificate in Data Protection (awarded by PDP) and the Information Governance Advisor has attended a number of in-depth data protection courses in preparation for their role.
- 4.2.3 When examining data protection security incidents, the Data Protection Advisory Service routinely consider resultant training needs, advising attendance at one of the training options or bespoke training as required.

- 4.2.4 In addition to the standard training options, a series of face to face training events designed to raise awareness of GDPR were delivered, tailored to different audiences. An awareness session for Members was also held. These sessions reached 417 delegates over 13 sessions. For those staff not requiring specialist training, desk based training was provided.
- 4.2.5 During 2017/18 the Council's traded services for schools included assistance from the GDPR Project Manager with preparation for GDPR, including policies and procedures and in person discussions. As from 25 May 2018 schools are required to have their own Data Protection Officer, this service has now ended. An on-line Schools Data Protection Officer Community of Practice has been established on the SBC School Learning Network to facilitate Schools DPOs in assisting each other.
- 4.2.6 In preparation for GDPR, a series of messages were provided to staff alerting them to the new legislation. These included blogs from the Chief Executive and Data Protection Officer, posters emphasising the value of personal data, 'In the Loop' content and animated videos.
- 4.2.7 In addition to the above, throughout 2017/18 ICT have delivered training and awareness sessions specifically relating to cyber security. Regular cyber security messages are issued by ICT to staff.
- 4.2.8 The Workforce Strategy team in the Department for People provided e-learning training materials for the use of external Adult Social Care providers to assist them in their duty to correctly process the data of their staff and residents. School nurses receive additional training to meet NHS requirements.
- 4.2.9 As a result of all the above, staff awareness of data protection requirements and associated organisational processes has been raised. This is a welcome outcome, however it is generating a considerable amount of associated work for the Data Protection Advisory Service and this is expected to continue during 2018/19 while the new processes bed in.
- 4.2.10 As can be seen from the above, there are a number of strands to the data protection training being provided. During 2018/19 a revised approach is being devised. This will be based on e-learning of varying levels of complexity dependent on need, bite-sized learning to promote general awareness and face to face training for those who need to understand the organisational context or where there is an identified specialist audience. The current SPARK e-learning module will be replaced.

4.3 General Data Protection Regulation and Data Protection Act 2018

- 4.3.1 The European Union General Data Protection Regulation (GDPR) came into effect on 25 May 2018. The GDPR has direct effect across all member states and is the main point of reference for most data protection legal obligations.

- 4.3.2 The Data Protection Act 2018 (DPA 2018) also came into effect on that date. This details UK specific provisions allowed for by the GDPR and applies similar standards to GDPR to the handling of personal data which is not covered by EU law, for example to data relating to immigration.
- 4.3.3 The DPA 2018 also brings the EU Law Enforcement Directive into UK domestic law. This sets out the requirements for the processing of personal data for criminal law enforcement purposes and will apply to the Council in regulatory activities which may result in criminal prosecution.
- 4.3.4 As national security is also outside the scope of EU law, the DPA 2018 also specifies the data protection standards to be met by the intelligence services, based on the Council of Europe Data Protection Convention 108.

The DPA 2018 also covers the duties, functions and powers of the Information Commissioner (ICO) and the corresponding enforcement provisions.

- 4.3.5 The DPA 1998 has been repealed and is superseded by the DPA 2018. The provisions of the GDPR will remain in effect when the UK leaves the EU as it will be adopted into UK law. The GDPR and DPA 2018 must be read side by side when considering the application of data protection legislation.
- 4.3.6 During 2017/18 the GDPR Project Group led on the preparations of the Council for GDPR and the DPA 2018. The Group worked to a detailed project plan which was independently externally audited by data protection specialists 'Act Now' to ensure it incorporated all necessary steps for successful transition to the new legislation.
- 4.3.7 The breadth of knowledge of the organisation and the insight which the team provided proved invaluable and, while the project has now finished, a GDPR Group comprised of former project group members will continue for at least a further six months to support the bedding in of new processes.
- 4.3.8 Preparation for the new legislation provided an opportunity for the Council to review and enhance its systems and processes for managing information, how it uses data and other information and ensuring personal data is kept secure.
- 4.3.9 During the project, the Council's data protection policies and procedures were reviewed and revised to ensure compliance with the new requirements. Significant among these were revised processes for enhanced data subject rights, data security incidents and data protection by design and default.
- 4.3.10 A further significant effect of the new legislation is that the Council can seldom rely on the previously commonly used 'consent' or 'legitimate interests' as a basis for processing personal data. An alternative basis from those available has to be identified by services and this is requiring some adjustment in thinking.
- 4.3.11 Where the Council is a Data Controller, contracts and Information Sharing Agreements have been being reviewed on a risk basis and are being varied where required. Similarly, where the Council is a Data Processor, the relevant

contractor is requiring the Council's acceptance of contract variations. Procurement and the Data Protection Advisory Service will continue to work closely with contract managers during 2018/19.

4.3.12 Although processes have been developed and published, it will take time for them to bed in and become business as usual. In particular, the impact on volumes of work of the newly introduced data subject rights and of the withdrawal of the fee for subject access requests will only become apparent over time.

4.4 Information Governance Toolkit

4.4.1 The Information Governance Toolkit (IG Toolkit) is a Department of Health (DH) policy delivery vehicle which draws together the legal rules and central guidance set out by DH policy and presents them in a single standard as a set of Information Governance requirements.

4.4.2 This independently audited self-assessment tool enables the Council to demonstrate to DH that it can be trusted to maintain the confidentiality and security of personal information, in particular Public Health and Adult Social Care personal records.

4.4.3 The 2017/18 IG Toolkit was successfully completed with the Council achieving a score of 95%. Out of 28 requirements, the Council achieved level 3, the highest possible level, in 24 requirements and a level 2 in the remaining 4.

4.4.4 For 2018/19 the toolkit has been rebranded as the Data Security and Protection Toolkit and will have an increased focus on cyber security. Work is underway in the Data Protection Advisory Service to identify the new requirements and in particular to liaise with colleagues in ICT and the Emergency Planning and Business Continuity team to ensure that the Council will be compliant.

4.4.5 These actions, the revised structure and resourcing for emergency planning and business continuity and the ICT Disaster Recovery Plan, will support the GDPR requirement for organisations to ensure they have 'the ability to restore the availability and access to personal data in a timely manner in the event of a physical or technical incident'.

4.5 Freedom of Information

4.5.1 Under Freedom of Information legislation, individuals are entitled to ask the Council for a copy of information it holds. This is known as a Freedom of Information request (FOI).

4.5.2 1238 FOI requests were received in 2017/18, compared to 1185 in 2016/17. To ensure consistency and compliance the FOI function is managed corporately within the Policy, Engagement and Communication (PEC) team. Requests are recorded centrally and then dispersed to departmental specialists for collation of data and for response. Where a response requires data from multiple departments, the response is collated by PEC.

4.5.3 In 2017/18 the Council replied to 1192 requests, 75.08% within the required 20 working days. This compares to 1160 replied to in the previous year with 84.22% compliance. The Information Commissioner has indicated that their expectation is in excess of 90% compliance and ways of improving the Council's performance are being considered by PEC and the Data Protection and Freedom of Information Community of Practice.

4.5.4 The Council's Freedom of Information Publication Scheme has been updated to provide regularly requested information in a more accessible and up to date way. Further work is being undertaken to promote an open and transparent approach to providing information to residents, and others, which, in addition to enabling them to be better informed should also help to reduce the number (and/or complexity) of FOI requests that would otherwise be processed.

4.6 Subject Access Requests

4.6.1 Under data protection legislation, individuals are entitled to ask the Council for a copy of the information it holds about them. This is known as a Subject Access Request (SAR).

4.6.2 There have been 64 SARs processed in 2017/18 an increase from 55 in the previous year. These are requests from customers for copies of their personal data held by the Council. The Council replied to 56.25% of these requests within the 40 calendar day target. Some SARs are highly complex as they involve weighing the data protection rights of multiple data subjects within a record and may involve hundreds of documents.

4.6.3 In 2018/19 additional resource has been provided for the Department for People, who have the majority of SAR requests, to increase the speed with which requests are processed. Early indications are that an improvement is already being demonstrated.

4.6.4 It is not yet known whether the removal of the former £10 charge for a SAR will result in an increased number of applications.

4.7 Requests for Data Sharing

4.7.1 In 2017/18 a total of 918 requests for data sharing were received. Such requests are mostly received from the Police, for third party information. These requests are generally received through Legal and Democratic Services, Revenues and Benefits, Counter Fraud and Investigation and the PEC team.

4.7.2 Requests are centrally recorded to encourage consistency in decision making and to provide an audit trail in the event of a query regarding the appropriateness of data sharing.

4.7.3 Where information sharing is a regular occurrence, the Data Protection Advisory Service continue to work with service areas to introduce formal Information Sharing Agreements to promote clarity of responsibilities between all parties.

4.8 Data Security Incidents

- 4.8.1 41 data security incident investigations were undertaken in 2017/18 from which 20 breaches were identified. Recommendations were made to the SIRO on the significant cases.
- 4.8.2 In 2017/18 no data breaches required notification to the Information Commissioner. The threshold for reporting data security breaches to the ICO has however changed under GDPR and the effect of this on the Council's reporting to the ICO during 2018/19 is yet to be determined.
- 4.8.3 The data protection training carried out in 2017/18 has raised awareness within the organisation of the need to formally report data security incidents and early indications are that this is likely to result in an increase in the numbers investigated. Not all reported incidents will have resulted in a breach. Even where there is no breach, incidents can provide valuable insight into processes and procedures which may need to be strengthened as a preventative measure or training required.

4.9 Records Management

- 4.9.1 With increasing public access to Council records, it is important that necessary documents are retained and that records are destroyed as part of a managed process that is adequately documented. Therefore, services must have in place clearly defined arrangements for the assessment and selection of records for disposal, and for documenting this work. All record keeping procedures must comply with the Council's Document Retention and Disposal Policy.
- 4.9.2 The Council has an Information Asset Register which acts as a mechanism for understanding and managing the Council's information assets and the risks to them.
- 4.9.3 The Council's Information Asset Register has been digitised during 2017/18. During 2018/19 it will be systematically reviewed and updated as new assets are introduced. The longer term aspiration is for all data protection records to be electronically cross-referenced to the relevant information asset, allowing the Council improved assurance regarding data protection compliance.

4.10 Information Security (including Cyber Security)

- 4.10.1 The 'Cyber Essentials' scheme is a government backed, industry-supported scheme to help organisations protect themselves against common online threats. ICT have been using its principles to inform the Council's approach to cyber security and will continue to do so in 2018/19. The PSN Code of Practice is being used similarly. As a result older technology, such as Lagan and CareFirst, has been retired and is being decommissioned.

- 4.10.2 Following the cyber security internal audit in 2016, the Council's security posture with external consultants has been reviewed and changes regarding processes and software to manage and contain RansomeWare have been made. A further internal audit will be undertaken during 2018/19 where the current position will be assessed.
- 4.10.3 In 2017/18, in accordance with national guidance, specific procedures were put in place to guard against the possibility of state-sponsored attacks on election processes. This risk will continue to be assessed during 2018/19.
- 4.10.4 During 2018/19, with the Essex On-Line Partnership, the Council will contribute to the development of the Local Government Association's cyber security stocktake questionnaire which will ultimately be rolled out for organisations to use to assess their cyber security position.
- 4.10.5 In 2018/19 ICT will move the organisation from its current secure e-mail platform, GCSX, to DMARC systems. This will provide improved security for confidential or sensitive e-mailed information.
- 4.10.6 Scoping for a Data Warehouse for the Borough continues. Partners across Essex are assisting by sharing their experience of creating such a facility.
- 4.10.7 The movement of on-premises IT systems to the more secure environment of the new server room was progressed during 2017/18 and will continue during 2018/19.

5 Strategic Direction - Future Programme of Work

- 5.1.1 The primary focus for the Council in relation to information management and data protection in the coming months will, as described above, be to consolidate and capitalise on the progress already achieved during the preparations for GDPR.
- 5.1.2 This will put the Council in a sound position to fulfil its ambition of using data and information more effectively and complement other key areas of work including its ambitions for Southend 2050, Transformation and Channel Shift, Digital Strategy and Infrastructure, Big Data and Open Data.

7 Corporate Implications

7.1 Contribution to the Council's vision and Corporate Priorities.

Sound information management and the protection of personal data contribute to all the Council's aims and corporate priorities.

7.2 Financial Implications

Any financial implications arising from this work will be considered through the normal financial management processes. Proactively managing information can result in reduced costs to the Council by reducing exposure to potential loss (such as fines from the Information Commissioner which could be up to £17million).

7.3 Legal Implications

Information management and Data Protection are subject to a range of legislation, but in particular the General Data Protection Regulation and Data Protection Act 2018 as detailed in this report.

7.4 People Implications

Any people implications will be considered through the Council's normal business management processes.

7.5 Property Implications

None

7.6 Consultation

Internal

7.7 Equalities and Diversity Implications

Data Protection Policies and Procedures are available on the Council's website and transactional forms are included in MySouthend. Alternative channels remain available for those customers who may not be able to access or use digital services, and reasonable adjustments for disability are made where required.

7.8 Risk Assessment

Non-compliance with the law would adversely affect the Council's reputation in the community, reduce public trust and could lead to regulatory penalties and disruption to business continuity.

7.9 Value for Money - None

7.10 Community Safety Implications - None

7.11 Environmental Impact - None

8 Background Papers - None

9 Appendices - None

Southend-on-Sea Borough Council

Agenda
Item No.

Report of Director of Legal and Democratic Services

to
Cabinet

on

18 September 2018

Report prepared by:

John Williams, Director of Legal & Democratic Services

Regulation of Investigatory Powers Act 2000 (RIPA) - Annual Report

**Policy & Resources Scrutiny Committee –
Cabinet member: Councillor Lamb**

A Part 1 public agenda item

1. Purpose of Report

To report on the use of powers available to the Council under the Regulation of Investigatory Powers Act 2000 (“RIPA”) during the financial year 2017/18.

To obtain authority to amend the Council’s *“Policy and Procedures for undertaking Directed Covert Surveillance and the use of Covert Human Intelligence Sources”*

To provide an update on staff training and awareness.

2. Recommendations

2.1 To note that the Council has not used the surveillance powers available to it under RIPA between 1 April 2017 and the 31st March 2018 and neither has it used any covert human intelligence sources during this period.

2.2 To agree the changes to the Council’s “Policy and Procedures for undertaking Directed Covert Surveillance and the use of Covert Human Intelligence Sources” as set out in **Appendix 1**

3. Background to RIPA

3.1 If a Council wants to carry out directed covert surveillance then:

(a) It must be in connection with the investigation of a criminal offence which attracts a maximum custodial sentence of 6 months or more, or involves the underage sale of alcohol or tobacco;

(b) It must not be intrusive surveillance (only the Police can carry out intrusive surveillance inside a house or vehicle);

- (c) Such surveillance must be properly authorised internally. In particular authorising officers must be formally designated and trained – and only authorised and trained officers should carry out surveillance;
- (d) A Justice of the Peace must make an Order approving the grant of authorisation referred to in (c) above; and
- (e) There must be compliance with the Codes of Practice issued by the Home Office, Guidance issued by the former Office of Surveillance Commissioners (OSC) and the Council's own Policy & Procedures (see 3.3 below).
The Investigatory Powers Commissioner's Office (IPCO), which has superseded the OSC, will shortly be issuing its own guidance.

3.2 Similar requirements also apply if the Council wants to use a covert human intelligent source (CHIS).

3.3 In order to ensure that the Council acts legally and properly and complies with RIPA, it has put in place "*Policy and Procedures for undertaking Directed Covert Surveillance and the use of Covert Human Intelligence Sources*".

The Policy & Procedures are regularly updated to ensure they are fit for purpose and incorporate legislative, procedural and staff changes.

Attached at **Appendix 1** is the revised Policy and Procedures with the amendments required duly marked.

3.4 It is important that Council officers who are, or could be, involved with surveillance receive proper training.
A training session for staff was held in 2017 and a further training session is planned for October this year, where there will be a particular focus on the interrogation of social media.
In the context of social media, it is planned to carry out an audit of the Council's use of social media in the next few months.

3.5 The IPCO provides independent oversight of the use of investigatory powers by intelligence agencies, police forces and other public authorities.
The Council is subject to inspection by the IPCO to ensure compliance with the statutory provisions which govern surveillance.
The Council's last inspection was in August 2016 and was carried out by the former OSC: This presented a very positive picture.

3.6 It is important that elected Members of a local authority should review the authority's use of RIPA and its policies and procedures; hence the need for this report.

4. Other Options

None

5. Reasons for Recommendations

To comply with the Home Office Codes of Practice and OSC Guidance on RIPA.

6. Corporate Implications

6.1 Contribution to Council's Vision & Corporate Priorities

Excellent – Deliver targeted services that meet the identified needs of our community.

6.2 Financial Implications

None

6.3 Legal Implications

This report has been prepared to comply with Home Office and OSC Guidance on RIPA.

6.4 People Implications

None

6.5 Property Implications

None

6.6 Consultation

Internal only

6.7 Equalities and Diversity Implications

None

6.8 Risk Assessment

Having up to date RIPA Policy and Procedures and a staff training programme, ensures any risks associated with surveillance or use of a CHIS are minimised.

6.9 Value for Money

N/A

6.10 Community Safety Implications

N/A

6.11 Environmental Impact

N/A

7. Background Papers

None

8. Appendices

Appendix 1 – The revised “Policy and Procedures for undertaking Directed Covert Surveillance and the use of Covert Human Intelligence Source”



P

Policy and Procedures
for undertaking Directed Covert Surveillance
and the use of Covert Human Intelligence Sources

Produced by:

- Internal Audit Services, April 2010
- Updated w.e. 1st November 2012
- Updated May 2014
- Updated June 2016
- UPDATED OCTOBER 2016
- **UPDATED SEPT 2018**

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CONTENTS

PART 1 POLICY FOR UNDERTAKING DIRECTED COVERT SURVEILLANCE AND USE OF COVERT HUMAN INTELLIGENCE SOURCES

1. Introduction
2. Background
3. What is Surveillance?
4. What is a Covert Human Intelligence Source (CHIS)?
5. Procedural principles for Surveillance and use of CHISs
6. Surveillance outside of RIPA
7. Use of CCTV
8. Use of material as evidence
9. Safeguards of material
10. Errors
11. Complaints
12. Oversight by Investigatory Powers Commissioner
- ~~8. Internet and use of Social Media within investigations~~

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PART 2 DETAILED PROCEDURES FOR UNDERTAKING DIRECTED COVERT SURVEILLANCE

1. Purpose
2. Scope
3. Procedure
4. Joint Agency Surveillance

PART 3 DETAILED PROCEDURES FOR USE OF COVERT HUMAN INTELLIGENCE SOURCES

1. Purpose
2. Scope

3. Procedure

APPENDIX 1

a) Flow Chart Directed Surveillance

b) Sample application form for use of Directed Covert Surveillance

APPENDIX 2

a) Flow Chart for the procedure for the Application to the Justice of the Peace for an order to approve the grant of a RIPA Authorisation or Notice

b) Copy application form and order for judicial approval

PART 1: POLICY FOR UNDERTAKING DIRECTED COVERT SURVEILLANCE AND USE OF COVERT HUMAN INTELLIGENCE SOURCES

1. Introduction

1.1 The performance of certain investigatory functions of Local Authorities may require the surveillance of individuals or the use of informants. Such actions may intrude on the privacy of individuals and can result in private information being obtained and as such, should not be undertaken without full and proper consideration. Legislation now governs how Local Authorities should administer and record surveillance and the use of informants and renders evidence obtained lawful for all purposes. This Policy sets out the Council's rules and procedures.

1.2 The purpose of this Policy is to ensure there is a consistent approach to the undertaking and authorisation of surveillance activity. Therefore, this Policy is to be used by all Council service areas and officers undertaking investigation work and using the techniques of surveillance or the use of Covert Human Intelligence Sources (CHIS's).

1.3 In this Policy the following terms shall have the meanings stated:

“Investigating Officer” – shall mean any Council Officer undertaking or wishing to undertake directed covert surveillance or to use a CHIS provided he / she has received appropriate training.

“Authorising Officer” – shall mean all Chief Officers and the following ~~Group Managers~~ staff in the Department for ~~Place (Group Manager, Regulatory Services;~~ Group Manager, Waste & Environmental Care ~~and Group Manager, Partnership Community Safety)~~ and the Director of Public Protection who can authorise directed covert surveillance or the use of a CHIS provided he / she has received appropriate training. This role is currently held by two members of staff Steven Crowther and Carl Robinson.

~~stephencrowther@southend.gov.uk~~

~~carlrobinson@southend.gov.uk~~

“Senior Responsible Officer” – shall mean the ~~Head Director~~ of Legal & Democratic Services and a role currently held by John Williams.

~~johnwilliam@southend.gov.uk~~

“Principal Legal Executive” – shall mean the officer with this job title and a role currently held by Tessa O’Connell.

~~tessaconnell@southend.gov.uk~~

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1.4 ~~This Policy was further updated in November 2012 to reflect the provisions of the Protection of Freedoms Act 2012 which from the 1st November 2012 requires that a Justice of the Peace ("JP") must approve all Local Authority RIPA applications and renewals.~~

~~Two guidance documents explaining this new authorisation process have been issued by the Home Office to Local Authorities and Magistrates and these are available on the following website:~~

~~I would put these docs on the intranet in a RIPA folder with the Codes etc as it stops you always having to check if the links are current.~~

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This policy was again updated in June 2016 to incorporate additional information on surveillance outside RIPA in Section 6 and regarding the internet and social media in Section 8.

This Policy was also updated in September 2018 to reflect the changes in the August 2018 Codes of Practice.

~~I would remove all of the below I don't think it is needed. It then reads better.~~

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~~Practice~~ April 2010 to reflect the following Statutory Instruments and new codes of practice for Covert Surveillance and Covert Human Intelligence Source (CHIS):

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- ~~▪ The Regulation of Investigatory (Communications Data) Order 2010 [SI 2010/480].~~
- ~~▪ The Regulation of Investigatory Powers (Directed Surveillance and Covert Human Intelligence Sources) Order 2010 [SI 2010/521] together with an Explanatory Memorandum as amended by the Regulation of Investigatory Powers (Directed Surveillance and Covert Human Intelligence Sources) (Amendment) Order 2012 [SI 2012/1500].~~
- ~~▪ The Regulation of Investigatory Powers (Covert Human Intelligence Sources: Code of Practice) Order 2010 [2010/462] together with an Explanatory Memorandum.~~
- ~~▪ The Regulation of Investigatory Powers (Covert Surveillance and Property Interference: Code of Practice) Order 2010 [SI 2010/463] together with an Explanatory Memorandum.~~
- ~~▪ The Regulation of Investigatory Powers (Extension of Authorisation Provisions: Legal Consultations) Order 2010 [SI 2010/461] together with an Explanatory Memorandum.~~

~~1.5 RIPA was overseen by the Office of Surveillance Commissioners (OSC). However, from 1 Sept 2017 oversight is now provided by the Investigatory Powers Commissioner's Office (IPCO). They are the independent inspection regime whose remit includes providing comprehensive oversight of the use of the powers to which the RIPA code applies, and adherence to the practices and processes described in it. They also provide guidance to be followed which is separate to the codes.~~

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~~1.64 Failure to comply with RIPA is likely to result in errors (see section ???) and may may leave the Council open to potential claims for damages or infringement of individual's human rights. It may also mean that any evidence obtained in breach of the provisions of RIPA is rendered inadmissible in Court.~~

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~~1.5 This Policy was further updated in November 2012 to reflect the provisions of the Protection of Freedoms Act 2012 which from the 1st November 2012 requires that a Justice of the Peace ("JP") must approve all Local Authority RIPA applications and renewals.~~

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~~Two guidance documents explaining this new authorisation process have been issued by the Home Office to Local Authorities and Magistrates and these are available on the following website:~~

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~~(((QUERY ?? are these the link needed?)))~~

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Is it?

~~<https://osc.independent.gov.uk/wp-content/uploads/2016/07/OSC-Procedures-Guidance-July-2016.pdf>~~

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~~https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/118173/local-authority-england-wales.pdf~~

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~~1.6 This policy was again updated in June 2016 to incorporate additional information on surveillance outside RIPA in Section 6 and regarding the internet and social media in Section 8.~~

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~~1.67 This is intended to be a best practice guide. It is not intended to replace the Home Office Codes and where necessary the Codes should be consulted. However, following the guide ensures compliance with the codes.~~

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~~1.7 This is not intended to be an exhaustive guide and specific legal advice should be sought if officers do not find questions answered after reading~~

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this document and the Home Office Codes. Officers should always consult the Legal Team before seeking authorisation.

2. Background

- 2.1 On 2nd October 2000 the Human Rights Act 1998 (HRA) came into force making it potentially unlawful for a Local Authority to breach any article of the European Convention on Human Rights (ECHR). Any such breach may now be dealt with by the UK courts directly, rather than through the European Court at Strasbourg.
- 2.2 Article 8 of the ECHR states that everyone has the right to respect for his private and family life, his home and his correspondence. There shall be no interference by a public authority with the exercise of this right except such as is in accordance with the law and is necessary in a democratic society in the interests of:
- National security
 - Public safety
 - The economic well-being of the country
 - The prevention of disorder or crime
 - The protection of health or morals
 - The protection of the rights and freedoms of others
- 2.3 The performance of certain functions by Local Authorities may require the directed covert surveillance of individuals or the use of informants or undercover officers, known as CHIS.
- 2.4 Those who undertake directed covert surveillance on behalf of a Local Authority may breach an individual's human rights, unless such surveillance is consistent with Article 8 of the ECHR and is both necessary and proportionate to the matter being investigated.
- 2.5 As a result of the legislative changes referred to in 1 above, Local Authorities can now only authorise directed covert surveillance under RIPA for the purpose of preventing or detecting conduct which constitutes a criminal offence which is:
- (a) punishable (whether on summary conviction or indictment) by a maximum term of at least six months imprisonment; or
 - (b) involves the sale of alcohol or tobacco to children.

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2.6 Furthermore, if authorised by an authorised officer, –the Council's authorisation can only be given effect once an Order approving the authorisation has been granted by a JP.

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2.7 Note

- A Local Authority cannot authorise the use of directed covert surveillance under RIPA to investigate low level offences e.g. littering, dog control and fly posting. Neither can a Local Authority authorise such surveillance for the purpose of preventing disorder, unless this involves a criminal offence punishable in the way described above.
- The crime threshold referred to above applies only to the authorisation of directed covert surveillance under RIPA, not to the authorisation of Local Authority use of CHIS or their acquisition of communications data.

2.8 In order to properly regulate the use of directed covert surveillance and the use of CHISs in compliance with the HRA, the Regulation of Investigatory Powers Act 2000 (RIPA) came into force on 25th September 2000.

2.9 RIPA requires that all applications to undertake directed covert surveillance of individuals or to use CHISs are properly authorised, recorded and monitored. This Policy sets out the procedures that need to be followed by officers of the Council prior to undertaking and during such activities, to meet the requirements of RIPA.

2.10 Failure to comply with RIPA may leave the Council open to potential claims for damages or infringement of individual's human rights. It may also mean that any evidence obtained in breach of the provisions of RIPA is rendered inadmissible in Court.

3. What is Surveillance?

3.1 Surveillance is:

- Monitoring, observing or listening to persons, their movements, their conversations or their other activities or communications.
- Recording anything monitored, observed or listened to in the course of surveillance, with or without the assistance of a device.

3.2 By its very nature, surveillance involves invading an individual's right to privacy. The level of privacy which individuals can expect depends upon the nature of the environment they are within at the time. For example, within an individual's own home or private vehicle, an

individual can expect the highest level of privacy. The level of expectation of privacy may reduce if the individual transfers out into public areas.

3.3 There are different types of surveillance which, depending on their nature, are either allowable or not allowable and require different degrees of authorisation and monitoring under RIPA.

3.4 **Overt surveillance** is where the subject of surveillance is aware that it is taking place. Overt surveillance ~~is outside the scope of RIPA and therefore does not contravene the HRA and therefore does not require authorisation. compliance with RIPA. Therefore~~ **The codes also provide guidance that authorisation under RIPA is not required for the following types of activity: surveillance of the following kinds:**

- General observations that do not involve the systematic surveillance of an individual or a group of people.
- Use of overt CCTV surveillance.
- ~~Surveillance where no private information is likely to be obtained~~
- Use of overt ANPR systems to monitor traffic flows or detect motoring offences.
- Surveillance undertaken as an immediate response to a situation.
- Review of staff usage of the internet & e-mail (but see Section 6 below).
- ~~Surveillance not on statutory grounds. (see section 6 Surveillance outside of RIPA)~~

3.5 **Covert surveillance** is defined as “surveillance which is carried out in a manner calculated to ensure that the persons subject to the surveillance are unaware that it is or may be taking place” and is covered by RIPA. Covert surveillance is categorised as either intrusive or directed.

3.6 ~~Intrusive covert surveillance~~ is defined as covert surveillance that is carried out in relation to anything taking place on any residential premises or in any private vehicle and involves the presence of an individual on the premises or in the vehicle or is carried out by means of a surveillance device. RIPA does not empower Local Authorities to authorise or undertake intrusive covert surveillance. Other means of investigation should be considered. ~~I need to check see if there is more on this anywhere~~

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3.7 **Directed covert surveillance** is surveillance which is covert but not intrusive and undertaken:

- For the purposes of a planned specific investigation or operation;
- In such a manner as is likely to result in the obtaining of private information about a person (whether or not that person is specifically targeted for the purposes of an investigation or operation);and
- Other than by immediate response to circumstances when it would not be practical to seek authorisation, for example, noticing suspicious behaviour and continuing to observe it.

3.7.1 **Private information** includes any information relating to a person's private or family life. As a result, private information is capable of including any aspect of a person's private or personal relationship with others, such as family¹¹ and professional or business relationships. Information which is non-private may include publicly available information such as books, newspapers, journals, TV and radio broadcasts, newswires, web sites, mapping imagery, academic articles, conference proceedings, business reports, and more. Such information may also include commercially available data where a fee may be charged, and any data which is available on request or made available at a meeting to a member of the public. Non-private data will also include the attributes of inanimate objects such as the class to which a cargo ship belongs.

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~~The above is updated from the codes~~

~~Private information should be interpreted to include any information relating to a personsn individuals private, family or working life. The concept of private information should be taken generally to include any aspect of a person's private or personal relations with others, including family and professional or business relationships. Family life should be treated as extending beyond the formal relationships created by marriage.~~

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3.7.2 Whilst a person may have a reduced expectation of privacy when in a public place, covert surveillance of that person's activities in public may still result in the obtaining of private information. This is likely to be the case where that person has a reasonable expectation of privacy even though acting in public and where a record is being made by a public authority of that person's activities for future consideration or analysis. Surveillance of publicly accessible areas of the internet should be treated in a similar way, recognising that there may be an expectation of privacy over information which is on the internet, particularly where accessing information on social media websites.

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~~Whilst a person may have a reduced expectation of privacy when in a public place; directed covert surveillance of that person's activities in public may still result in the obtaining private information.~~

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3.7.3 Private information may include personal data, such as names, telephone numbers and address details. Where such information is acquired by means of directed covert surveillance of a person having a reasonable expectation of privacy authorisation is required.

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~~3.7.4 Private life considerations are particularly likely to arise if several records are to be analysed together in order to establish, for example, a pattern of behaviour, or if one or more pieces of information (whether or not available in the public domain) are covertly (or in some cases overtly) obtained for the purpose of making a permanent record about a person or for subsequent data processing to generate further information. In such circumstances, the totality of information gleaned may constitute private information even if individual records do not. Where such conduct includes covert surveillance, a directed surveillance authorisation may be considered appropriate.~~

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3.7.54 Directed covert surveillance involves the observation of a person or persons with the intention of gathering private information to produce a detailed picture of a person's life, activities and associations. Private information may include personal data such as names, telephone numbers and address details.

3.7.65 Directed covert surveillance does not include entry on or interference with property or wireless telegraphy but may include the use of photographic and video equipment (including the use of CCTV).

3.7.76 Directed covert surveillance is covered by RIPA and requires prior authorisation.

4. What is a Covert Human Intelligence Source (CHIS)?

4.1 A CHIS is defined in section 25(7) of the RIPA as a person who establishes or maintains a personal or other relationship with another person for the covert purpose of facilitating anything that:

- (a) Covertly uses such a relationship to obtain information or to provide access to any information to another person; or
- b) Covertly discloses information obtained by the use of such a relationship or as a consequence of the existence of such a relationship.

- 4.2 By virtue of section 26(9)(b) of RIPA a purpose is covert, in relation to the establishment or maintenance of a personal or other relationship, if and only if, the relationship is conducted in a manner that is calculated to ensure that one of the parties to the relationship is unaware of the purpose.
- 4.3 By virtue of section 26(9)(c) of RIPA a relationship is used covertly, and information obtained as above is disclosed covertly, if and only if it is used or, as the case may be, disclosed in a manner that is calculated to ensure that one of the parties to the relationship is unaware of the use or disclosure in question.

Vulnerable and Juvenile Sources

4.4 **Special consideration must be given to the use of Vulnerable Individuals** for CHIS. A 'Vulnerable Individual' is a person who is or may be in need of community care services by reason of mental or other disability, age or illness and who is or may be unable to take care of himself, or unable to protect himself against significant harm or exploitation. Any individual of this description, or a Juvenile as defined below, should only be authorised to act as a source in the most exceptional circumstances and only then when authorised by the Chief Executive (or, in his absence, the Deputy Chief Executive).

4.5 Special safeguards also apply to the use or conduct of Juvenile Sources; that is sources under the age of 18 years. On no occasion should the use or conduct of a source under 16 years of age be authorised to give information against his parents or any person who has parental responsibility for him.

4.6 **Legal advice must be sought if considering using a vulnerable or juvenile CHIS.**

4.74 **It is not anticipated that CHISs will be ~~used~~ used often in the normal course of Council investigatory activity.** Any Council Officer considering the use of a CHIS must first contact the Senior Responsible Officer or the Principal Legal Executive to discuss the suitability of this approach.

4.85 Authorisation is not required when individuals, including members of the public, are requested to provide information pertaining to other individuals, unless they are required to form a relationship, or manipulate an existing relationship with those other individuals.

5. Procedural principles for Surveillance and use of CHIS's

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5.1 Comprehensive procedures for undertaking directed covert surveillance and the use of CHISs are given in Parts 2 and 3 of this Policy respectively.

5.2 The conduct of surveillance which is consistent with these procedures can be undertaken with confidence that any evidence obtained will be admissible in a criminal trial, provided the conduct is authorised and is carried out in accordance with the authorisation. The authorisation must be shown to be necessary on the grounds of preventing or detecting crime (see 2.5 above).

5.3 The Investigating Officer seeking authorisation for directed covert surveillance or CHIS activity and the Authorising Officer must give consideration to the following factors:

- **Necessity** – on the statutory grounds (Criminal offence 6 months imprisonment or relate to the sale of alcohol or tobacco to children) and Is directed covert surveillance or CHIS activity the only or best way to obtain the desired information, or are other less invasive methods appropriate?
- **Proportionality** – Is the surveillance activity or CHIS activity proportional to the evidence that will be obtained and to the privacy the subject could reasonably expect? The methods used to obtain evidence should not be excessive and should be as non-invasive as it possible. The surveillance should not restrict an individual's right for privacy more than is absolutely necessary.
- **Collateral Intrusion** – Will the surveillance result in the observing of innocent people? If so can it be avoided or minimised?

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5.4 Further Considerations:

- Does the application relate to a prevalent offence which has a maximum sentence of at least 6 months or relate to the sale of alcohol or -tobacco to children
- Have other ways of getting the information been investigated?
- Is surveillance a reasonable approach and “not a sledge hammer to crack a nut”?
- The risk of the direct surveillance and CHIS activity must be considered and managed.
- Surveillance authorisations remain valid for 3 months but must be cancelled prior to that if no longer required.

- CHIS authorisations remain valid for 12 months and must be cancelled prior to that if no longer required.
 - Authorisations should be periodically reviewed by the Authorising Officer and the need for continued surveillance or CHIS activity ascertained; if no longer required authorisations should be cancelled.
- 5.5 All officers undertaking directed cover surveillance or wishing to use a CHIS must have received appropriate training to enable them to undertake this task.
- 5.6 Training should be periodically arranged to ensure that sufficient Authorising Officers are available.
- 5.7 Where directed cover surveillance or the use of a CHIS is likely to result in the obtaining of confidential information, it is imperative that legal advice should first be sought from the Senior Responsible Officer or the Principal Legal Executive. Confidential information includes, though is not limited to, matters subject to legal privilege, confidential personal information and confidential journalistic material. Confidential personal information is information held in confidence relating to the physical or mental health or spiritual counselling concerning an individual (whether living or dead) who can be identified from it.
- 5.8 The application for authorisation must include the following elements and the Authorising Officer must consider these, before authorising the directed covert surveillance or CHIS activity:
- full details of the reason for the directed covert surveillance or CHIS activity and the intended outcome;
 - the proposed surveillance activity described as fully as possible, with the use of maps or other plans as appropriate;
 - the necessity and proportionality to the potential offence consideration and whether other methods of less intrusive investigation should / have been attempted and whether they are appropriate;
 - the resources to be applied and tactics and methods should also be included;
 - the anticipated start date and duration of the activity, if necessary broken down over stages;
 - details (including unique reference number) of any surveillance previously conducted on the individual.

5.9 In addition the Authorising Officer should notify the Chief Executive and Town Clerk of an authorisation.

5.10 Services that undertake surveillance activity or use of CHISs should put in place adequate arrangements for the retention of evidence gathered. The arrangements must comply with the Criminal Procedure and Investigations Act 1996 and any other relevant guidance or procedures to ensure the integrity of the evidence.-

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5.11 Evidence or intelligence obtained as a result of a RIPA authorisation should not be passed to other agencies such as the Police unless the request meets the Data Protection Act 2018 requirements under the Law Enforcement processing procedures or Schedule 2, Part 1 Paragraph 2 the replacement for ~~Therefore~~Therefore, a section 29 DPA form should be received by the officer in charge of the Council investigation. This will assist with oversight of the process.

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5.12 The Authorising Officer's statement on the authorisation form should clearly demonstrate agreement that the activity is necessary and proportionate and that he / she has thoroughly considered the matter before authorising and state exactly what activity is authorised, against whom, where and in what circumstances.-

5.13 The responsibilities of the Senior Responsible Officer are:

- Maintaining the Council's RIPA Policy and Procedures
- Ensuring the integrity of the processes in place within the Council to authorise directed covert surveillance
- compliance with the legislation and Codes of Practice
- engagement with the Office of Surveillance Commissioners ("OSC") and inspectors when they conduct their inspections,
- where necessary, overseeing the implementation of any post inspection action plans recommended or approved by a Commissioner; and
- for ensuring that all *Authorising Officers* are of an appropriate standard in light of any recommendations in the inspection reports prepared by the Office of Surveillance Commissioners. Where an inspection report highlights concerns about the standards of *Authorising Officers*, this individual will be responsible for ensuring the concerns are addressed.

5.14 The Principal Legal Executive will maintain a Central Record of RIPA Applications and Authorisations (including the JP approval form). This Central Record will be used to track the progress of authorisations and ensure that reviews, renewals and cancellations take place within the prescribed timeframe. Copies of all RIPA authorisations, reviews, renewals and cancellations should be forwarded to the Principal Legal Executive promptly. The record will be available to the Office of Surveillance Commissioners (“OSC”), at any time. The Central Register format will be consistent with that detailed in the Home Office Code of Practice. [CHECK HOW GET UNIQUE NO](#)

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5.15 A report on the use of RIPA will be submitted to the first Cabinet in the municipal year. Cabinet will consider this Policy and review the Council's use of RIPA.

5.16 The head of each section which undertakes directed surveillance or CHIS activity will ensure that:

- staff receive the necessary training;
- all activity is in accordance with RIPA, the Codes of Practice and this Policy; and
- relevant procedures are maintained to ensure the above.

6. Surveillance outside of RIPA

6.1 As a result of the change in the law from the 1st November 2012 directed surveillance under RIPA will only apply to the detection and prevention of a criminal offence that attracts a penalty of 6 months imprisonment or more or relates to the sale of alcohol or tobacco to children. This essentially excludes surveillance of many offences that the Council may investigate such as disorder (unless it has 6 months custodial sentence) and most summary offences such as littering, dog fouling etc. Other examples are referred to below.

6.2 This change does not mean that Council enforcement officers cannot undertake such surveillance, but because it is **not** regulated by the OSC, responsibility for monitoring this type of activity falls to the Council's Senior Responsible Officer (SRO). As a result procedures need to be in place to ensure that the Council can prove that it has given due consideration to necessity and proportionality which are central tenets of European Law and the likely grounds of any challenge.

6.3 If it is necessary for the Council to undertake surveillance which does not meet the criteria to use the RIPA legislation, such as in cases of

disciplinary investigations against staff or surveillance relating to Anti-Social Behavior appertaining to disorder. The Council must still meet its obligations under the Human Rights Act and be able to demonstrate that its actions which may infringe a person's article 8 rights to privacy are necessary and proportionate, which includes taking account of the intrusion issues. To demonstrate this accountability, the decision making process and the management of such surveillance must be documented. Therefore, should staff have a requirement to undertake such surveillance outside of RIPA, they should complete the Non RIPA Surveillance form (available from the RIPA pages on the intranet). This should be submitted to one of the RIPA Authorising Officers listed within this Policy to be considered for authorisation before any activity can be undertaken. There will be no requirement to have the authorisation approved by a Justice of the Peace. Should the activity be approved, the procedures to be followed will be the same as any RIPA authorised activity. Therefore, the Council expects that the procedure and management of the activity, from the initial surveillance assessment, through to completion and cancellation to be managed appropriately at the same level that the RIPA legislation and guidance requires. For further advice, refer to the RIPA pages on the Intranet.

6.4 Examples of Surveillance outside of RIPA

6.4.1 Planning

Some planning scenarios require evidence to be gathered either before service of a notice or post service of a notice to establish whether the notice has been breached. A common example may be someone running a car repair business from home. It is often the case that this causes disruption and disturbance to neighbours who complain. Diary sheets may be issued to establish the level of activity and the person may be spoken to by a Planning Enforcement officer. It is often the case that the person states they only repair a few cars as a hobby for friends and family and are not running a business. At some stage it may be necessary for a Notice to be issued to the person. The repairs may then continue with the neighbours complaining. It is at this stage that targeted covert surveillance may be required as the best means of gathering the required information to establish if the Notice has been breached which would be a criminal offence. The offence does not meet the 6 months imprisonment criteria for it to be RIPA surveillance.

6.4.2 Social Services

Other examples may be Social Services investigations to protect vulnerable persons such as children. These would not be treated as criminal investigations and are normally dealt with in the Family Court. There may be occasions where some form of targeted covert surveillance activity is required to gather evidence for decision making or court proceedings. It is often the case that this type of surveillance is carried out by outside contractors. If this is the case the above procedure for surveillance outside of RIPA should be followed in order to demonstrate that the Council has considered the activity

with regard to Necessity and Proportionality and taken account of the intrusion on anyone.

6.4.3 Disciplinary Investigations

There may be serious disciplinary investigations that require some form of targeted covert surveillance activity which will engage article 8 rights to privacy. There is specific guidance issued by the Information Commissioners Office (ICO) in the Employment Practices Code under Part 3 Monitoring at Work. This guidance make it clear that surveillance should only be used for serious matters and that the activity must be Necessary and Proportionate taking account of the intrusion issues.

- 6.4.4 In the above scenarios, if these issues were criminal investigations and the offences carried the required sentence of 6 months imprisonment they would be meet the Directed Surveillance criteria under RIPA and would require authorisation. However these scenarios are to be treated as targeted surveillance operations outside of RIPA and the procedure for surveillance outside of RIPA should be followed in order to demonstrate that the Council has considered the activity with regard to Necessity and Proportionality and taken account of the intrusion on anyone.

6.5 Other routine activity that may be surveillance

- 6.5.1 There are other routine scenarios that may amount to surveillance under the definition contained within the Codes of Practice and this Policy such as the **deployment of a noise recording machine**, which may be monitoring persons and conversations etc. In these ~~instances~~instances, the persons responsible for the noise are notified that the recording activity may take place, which would give them a reduced expectancy of privacy. However, the Council still has an obligation to consider the intrusion issues and Necessity and Proportionality which will include the management and disposal of any personal data obtained. ~~Therefore~~Therefore, staff should carry out some form of privacy impact assessment and be able to demonstrate why it was necessary to deploy the noise machine and that it was a proportionate response to the problem to be resolved. It is likely that this can be documented and managed within the case notes of that particular complaint.

6.5.2 Internet and Social Media Investigations ~~(See further at Section 8 below)~~

Online open source research is widely regarded as the collection, evaluation and analysis of material from online sources available to the public, whether by payment or otherwise to use as intelligence and evidence.

6.5.3 The use of online open source internet and social media research techniques has become a productive method of obtaining information to assist the council with its regulatory and enforcement functions. It can also assist with service delivery issues and debt recovery. However, the use of the internet and social media is constantly evolving and with it the risks associated with these types of enquiries, particularly regarding breaches of privacy under Article 8 Human Rights Act (HRA) and other operational risks. The activity may also require a RIPA authorisations for Directed Surveillance

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or CHIS. Where this is the case, the application process and the contents of this policy is to be followed.

6.5.4 Where the activity falls within the criterial of surveillance or CHIS outside of RIPA, again this will require authorising on a non RIPA form which will be authorised internally.

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6.5.5 **There is a detailed separate corporate policy which deal with online open source research which should be read and followed in conjunction with this policy.**

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~~Enquires by checking the internet and Social Media such as Facebook within investigations and complaints has now become common practice. However, it is well documented that these types of enquiries are no different to any ether type of enquiry and may amount to Directed Surveillance under RIPA or Surveillance outside of RIPA. In either case the procedures in this Policy should be followed.~~

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~~Whether the activity amounts to surveillance or not, staff have an obligation to consider Necessity and Proportionality and take account of the intrusion issues in all cases. The Council is a Public Authority in law and therefore has to take account of the HRA, which in turn means that staff have to take account of the legislation and be able to justify their actions. There is likely to be a considerable amount of intrusion with the likelihood of obtaining personal data when carrying out internet investigations or research. Privacy impact assessments should be carried out for internet research which should be ongoing. The OSC have advised carrying out a privacy assessment, which should be ongoing. The activities should be compliant with the HRA legislation, whether carried out within RIPA or outside of the RIPA legislation. The key issue is accountability and recording what and why the activities were taken.~~

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The repeat covert viewing of someone's Social Media is likely to amount to monitoring which would be surveillance. Most activities will involve obtaining private information. If this is the case, and if the offences under investigation are criminal and have a sentence of 6 months imprisonment, an authorisation under RIPA should be considered. To covertly infiltrate a closed group in connection with a criminal investigation is likely to amount to a CHIS.

Most enquiries carried out by staff are not RIPA type enquiries. They may be to research a complaint or enquiry, which is not a RIPA scenario. Common internet checks are carried out to research a person's story to check it against their claim for something from the Council such as a homelessness claim. Checks are also carried out re debt recovery. Planning or licensing staff may check to see if someone is adhering to their licence. ~~ALL CAN NOW GO~~

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7. Use of CCTV

7.1 The use of the CCTV systems operated by the Council do not normally fall under the RIPA regulations. However, it does fall under the Data Protection Act ~~2018, 1998~~ and the Council's CCTV Policy. ~~Guidance on their operation is provided in the Surveillance Camera Code of Practice issued under the Protection of Freedoms Act 2012 ("the 2012 Act") and overseen by the Surveillance Camera Commissioner. Public authorities should also be aware of the relevant Information Commissioner's code ("In the Picture – A Data Protection Code of Practice for Surveillance Cameras and Personal Information").~~ However, ~~s~~Should there be a requirement for the CCTV cameras to be used for a specific purpose to conduct surveillance it is likely that the activity will fall under directed covert surveillance and therefore require an authorisation.

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7.2 On the occasions when the CCTV cameras are to be used for directed covert surveillance, either by enforcement officers from relevant departments within the Council or outside Law Enforcement Agencies such as the Police, either the CCTV staff are to have a copy of the ~~notes of the application form in a redacted format, or~~ ~~at least a copy of the authorisation page.~~ It is important that the staff check the authority and only carry out what is authorised.

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7.3 Operators of the Council's CCTV system need to be aware of the RIPA issues associated with using CCTV and that continued, prolonged, systematic surveillance of an individual may require an authorisation.

~~8 Using the Internet to Conduct Online Covert Activity~~

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8.1 ~~The internet is a useful investigative tool, giving access to a large amount of information which could not otherwise be obtained. The techniques and websites used change frequently and so it is difficult for definitive guidance to be written by the IPCO, the OSC as, by the time it is published, it may be obsolete. There is also a lack of definitive case law in this area. However, there is no doubt that these types of enquiries pose a risk to the Council for breaches of privacy and non-compliance with RIPA.~~

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8.2 ~~The Codes of Practice at ~~3.10~~ 2.29 now provide guidance regarding the use of the internet to conduct covert enquiries. Therefore, the guidance provided in the codes of practice have been replicated in full to avoid confusion.~~

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8.3 ~~Code 2.29 states "The use of the internet may be required to gather information prior to and/or during an operation, which may amount to directed surveillance. Whenever a public authority intends to use the internet as part of an investigation, they must first consider whether the proposed activity is likely to interfere with a person's Article 8 rights,~~

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including the effect of any collateral intrusion. Any activity likely to interfere with an individual's Article 8 rights should only be used when necessary and proportionate to meet the objectives of a specific case. Where it is considered that private information is likely to be obtained, an authorisation (combined or separate) must be sought as set out elsewhere in this Code. Where an investigator may need to communicate covertly online, for example contacting individuals using social media websites, a CHIS authorisation should be considered".

8.4 There is no doubt that certain conduct of repeat viewing, particularly of Social Networking Sites may meet the test of surveillance. If this activity meets the test for Directed Surveillance then a RIPA authorisation should be sought.

8.5 If it does not meet the Directed Surveillance criteria it is essential that detailed notes be made by any officer viewing material on the internet explaining what they were seeking, why it was necessary and proportionate to do so and why prior authorisation was not sought. Where material is printed or saved consideration must be given to the management of collateral intrusion — there may be personal data of people not subject to the investigation and this must be managed appropriately.

8.6 ~~There is other guidance available issued by the OSC which can be provided should staff require additional information. This can be obtained by contacting Head of Legal and Democratic Services or the Principal Legal Executive~~

~~Removed as its now in the codes~~

8 Use of material as evidence

8.1 Material obtained through directed surveillance, or entry on, may be used as evidence in criminal proceedings. The admissibility of evidence is governed primarily by the common law, the Criminal Procedure and Investigations Act 1996, the Civil Procedure Rules, section 78 of the Police and Criminal Evidence Act 1984 and the Human Rights Act 1998.

8.2 Ensuring the continuity and integrity of evidence is critical to every prosecution. Accordingly, considerations as to evidential integrity are an important part of the disclosure regime under the Criminal Procedure and Investigations Act 1996 and these considerations will apply to any material acquired through covert surveillance or property interference that is used in evidence. When information obtained under a covert surveillance authorisation is used evidentially, it will be necessary to be able to demonstrate how the evidence has been obtained, to the extent required by the relevant rules of evidence and disclosure.

9 Safeguards of Material

9.1 The Council and all staff should ensure that their actions when handling information obtained by means of covert surveillance comply with the

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Data Protection Act 2018, the Councils data retention policy and the Criminal Procedures Investigation Act (CPIA). This will ensure that any interference with privacy is justified in accordance with Article 8(2) of the European Convention on Human Rights. Compliance with these legal frameworks will ensure that the handling of private information so obtained continues to be lawful, justified and strictly controlled, and is subject to robust and effective safeguards.

9.2 Dissemination, copying and retention of material must be limited to the minimum necessary for authorised purposes. This obligation applies equally to disclosure to additional persons within the Council and to disclosure outside the authority.

Storage

9.3 Material obtained through covert surveillance or property interference, and all copies, extracts and summaries of it, must be handled and stored securely, so as to minimise risk. It must be held so as to be inaccessible to persons who would not need to see it (where applicable). This requirement applies to all those who are responsible for the handling of the material.

9.4 Any breaches of data protection requirements should be reported to the Councils DPA Officer and the SRO as it is likely to constitute an error

10 Errors

10.1 Proper application of the surveillance provisions in the RIPA codes should reduce the scope for making errors.

10.2 An error must be reported if it is a “relevant error”. A relevant error for is any error by a public authority in complying with any requirements that are imposed on it by any enactment which are subject to review by a Judicial Commissioner. This would include compliance by public authorities with Part II of the 2000 Act (RIPA).

10.3 Examples of relevant errors occurring would include circumstances where:

- Surveillance activity has taken place without lawful authorisation.
- There has been a failure to adhere to the safeguards set out in the relevant statutory provisions and Chapter 9 of the Surveillance Codes of Practice relating to the safeguards of the material.

10.4 Errors can have very significant consequences on an affected individual’s rights. All relevant errors made by public authorities must

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be reported to the Investigatory Powers Commissioner by the public authority that is aware of the error as soon as reasonably practicable and a full report no later than ten working days. The report should include information on the cause of the error; the amount of surveillance or property interference conducted, and material obtained or disclosed; any unintended collateral intrusion; any analysis or action taken; whether any material has been retained or destroyed; and a summary of the steps taken to prevent recurrence.

Serious Errors

- 10.5 The Investigatory Powers Commissioner must inform a person of any relevant error relating to that person if the Commissioner considers that the error is a serious error and that it is in the public interest for the person concerned to be informed of the error. The Commissioner may not decide that an error is a serious error unless they consider that the error has caused significant prejudice or harm to the person concerned. The fact that there has been a breach of a person's Convention rights (within the meaning of the Human Rights Act 1998) is not sufficient by itself for an error to be a serious error.
- 10.6 It is important that all staff involved in the RIPA process report any issues so they can be assessed as to whether it constitutes an error which requires reporting.

11. Complaints

11.1.1 The Investigatory Powers Tribunal (IPT) has jurisdiction to investigate and determine complaints against public authority use of investigatory powers, including those covered by this code, and is the only appropriate tribunal for human rights claims against the intelligence services. Any complaints about the use of powers as described in this code should be directed to the IPT.

11.2 The IPT is entirely independent from Her Majesty's Government and all public authorities who use investigatory powers. It is made up of members of the judiciary and senior members of the legal profession. Following receipt of a complaint or claim from a person, the IPT can undertake its own enquiries and investigations and can demand access to all information necessary to establish the facts of a claim and to reach a determination. A 'person' for these purposes includes an organisation, an association, or combination of persons (see section 81(1) of RIPA), as well as an individual.

~~There is provision under RIPA for the establishment of an Independent Tribunal. This Tribunal is will be made up of senior members of the legal profession or judiciary and will be independent of the government.~~

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~~4.2 The Tribunal has full powers to investigate and decide upon complaints made to them within its jurisdiction, including complaints made by a person who is aggrieved by any conduct to which Part II of RIPA applies, where he believes such conduct to have taken place in "challengeable circumstances" or to have been carried out by or on behalf of any of the intelligence services.~~

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~~4.3 Conduct takes place in "challengeable circumstances" if it takes place:~~

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- ~~(i) with the authority or purported authority of an authorisation under Part II of the Act; or~~
- ~~(ii) the circumstances are such that it would not have been appropriate for the conduct to take place without authority; or at least without proper consideration having been given to whether such authority should be sought.~~

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~~4.11.3-4 Further information on the exercise of the Tribunal's functions and details of the relevant complaints procedure can be obtained from:~~

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Investigatory Powers Tribunal
PO Box 33220
London
SW1H 9ZQ

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Tel 020 7273 4514

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www.ipt-uk.com.

~~11.~~

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~~4.5 Notwithstanding the above, members of the public will still be able to avail themselves of the Council's internal complaints - procedure, where appropriate, which ultimately comes to the attention of the Local Government Ombudsman.~~

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~~5.12 Oversight by Investigatory Powers Commissioner~~

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~~The Office of Surveillance Commissioners~~

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~~12.1 The Investigatory Powers Act provides for an Investigatory Powers Commissioner ("the Commissioner"), whose remit includes providing comprehensive oversight of the use of the powers to which this code applies, and adherence to the practices and processes described in it. The Commissioner will be, or will have been, a member of the senior judiciary and will be entirely independent of Her Majesty's Government or any of the public authorities authorised to use investigatory powers. The Commissioner will be supported by inspectors and others, such as technical experts, qualified to~~

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assist the Commissioner in his or her work. The Commissioner will also be advised by the 'Technology Advisory Panel'.

12.2 One of the duties of the IPCO is to carry out planned inspections of those public authorities who carry out surveillance as specified in RIPA, to ensure compliance with the statutory authorisation procedures. At these inspections they have unfettered access to all locations, documentation and information systems as necessary to carry out their full functions and duties. All relevant persons using investigatory powers must provide all necessary assistance to the Commissioner and anyone who is acting on behalf of the Commissioner.

~~5.1 The Act also provides for the independent oversight and review of the use of the powers contained within Part II of RIPA, by a duly appointed Chief Surveillance Commissioner.~~

~~5.2 The Office for Surveillance Commissioners (OSC) was established to oversee covert surveillance carried out by public authorities and within this Office an Inspectorate has been formed, to assist the Chief Surveillance Commissioner in the discharge of his review responsibilities.~~

~~5.3 One of the duties of the OSC-IPCO is to carry out planned inspections of those public authorities who carry out surveillance as specified in RIPA, to ensure compliance with the statutory authorisation procedures. At these inspections they have unfettered access to all locations, documentation and information systems as necessary to carry out their full functions and duties~~

~~, policies and procedures in relation to directed surveillance and CHIS operations will be examined and there will be examined and there will be some random sampling of selected operations. The central record of authorisations will also be inspected. Chief Officers will be given at least two weeks' notice of any such inspection.~~

~~12.3.4~~ An inspection report will be presented to the Chief Officer, which should highlight any significant issues, draw conclusions and make appropriate recommendations. The aim of inspections is to be helpful rather than to measure or assess operational performance.

~~5.12.45~~ In addition to routine inspections, spot checks may be carried out from time to time.

~~12.55.6~~ There is a duty on every person who uses the powers provided by Part II of RIPA, which governs the use of covert surveillance or covert human intelligence sources, to disclose or provide to

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the Chief Commissioner (or his duly appointed Inspectors) all such documents and information that he may require for the purposes of enabling him to carry out his functions.

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PART 2 DETAILED PROCEDURE FOR UNDERTAKING DIRECTED COVERT SURVEILLANCE

1. Purpose

- 1.1 To ensure that surveillance is only undertaken in appropriate cases, is properly authorised and recorded and is compliant with the Human Rights Act 1998, the Regulation of Investigatory Powers Act 2000 and appropriate Code of Practices, made there under.

2. Scope

- 2.1 This procedure must be complied with by all sections and Investigating Officers, who routinely or occasionally undertake covert directed surveillance in connection with preventing or detecting crime **with a maximum 6 months imprisonment or relate to the sale of alcohol or tobacco to children** (the only permitted purpose for such surveillance). Local investigation procedures should make reference to this policy.

3. Procedure

- 3.1 It is very important that the correct authorisation procedure is followed prior to undertaking surveillance activity. Interference of the right to privacy without proper authorisation may render any evidence obtained unusable in a criminal court. If surveillance is conducted on individuals without the necessary authorisation, the Council and possibly individuals may be sued for damages for a breach of Human Rights. In civil matters adverse inferences may be drawn from such interference.
- 3.2 This procedure is supported by the Home Office "Code of Practice – Covert Surveillance" which is available on the Home Office website. If the surveillance is not likely to obtain private information, the codes do not apply. All Investigating Officers and Authorising Officers should fully acquaint themselves with the Code of Practice and refer to it during both the application and authorisation processes. ~~THINK THE CODES SHOULD BE ON YOUR INTRANET~~

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- 3.3 All directed covert surveillance activity must be approved prior to the activity taking place by an Authorising Officer and a Justice of the Peace (“JP”). Officers seeking authority to undertake surveillance should complete the form, “Application for use of Directed Covert Surveillance”. A sample application form with notes is attached at **Appendix 1**, but the latest version from the Gov.UK website must always be used. Completed application forms should be forwarded to the relevant Authorising Officer.
- 3.4 Completed authorisation forms should be allocated a reference number by the Investigating Officer relevant to the department / team and the particular investigation. The Investigating Officer should also obtain the next unique reference number from the Central Record of RIPA Applications and Authorisations maintained by the Principal Legal Executive.
- 3.5 The Authorising Officer will consider the completed application form and inform the Investigating Officer of his / her decision. The Authorising Officer will retain a copy of the authorisation form and monitor this for review, renewal and cancellation should it be approved by a JP. The original will be required to be returned to the applicant if authorised to be presented before a JP. If refused by the Authorising Officer or JP the original will be forwarded to the Principal Legal Executive for filing.
- 3.6 In addition the Authorising Officer must notify the Chief Executive & Town Clerk of an authorisation. IS THIS STILL NECESSARY
- 3.7 The Investigating Officer and the Authorising Officer must give consideration to the following factors:
- **Necessity** – is covert surveillance the only or best way to retrieve the desired information, or is other less invasive methods appropriate?
 - **Proportionality:**
 - balancing the size and scope of the proposed activity against the gravity and extent of the perceived crime or offence;
 - explaining how and why the methods to be adopted will cause the least possible intrusion on the subject and others;
 - considering whether the activity is an appropriate use of the legislation and a reasonable way, having considered all reasonable alternatives, of obtaining the necessary result; and

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- evidencing, as far as reasonable practicable, what other methods had been considered and why they were not implemented.

- **Collateral intrusion** – that is the obtaining of information relating to persons other than the subject of the investigation and the need to minimise this.

- **Confidential Information** - The Investigating Officer and the Authorising Officer must consider the possibility that the surveillance activity may result in the acquiring of confidential information. If this is considered to be likely then the Investigating Officer must highlight this on the application.

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3.8 **All Investigating Officers completing RIPA applications must ensure** that applications are sufficiently detailed. When completing an application or authorisation, the applicant and authorising officer must ensure that the case for the authorisation is presented in the application in a fair and balanced way. In particular, all reasonable efforts should be made to take into account information which weakens the case for the warrant or authorisation. Authorising Officers should refuse to authorise applications that are not to the required standard and should refer them back to the Investigating Officers.

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3.98 **Magistrates' Court Approval:** As from the 1st November 2012 all applications and renewals for Directed Covert Surveillance and use of a CHIS will be required to have a JP's approval.

3.109 Having had the activity authorised by the Authorising Officer, the Investigating Officer must now complete the relevant Judicial Approval form to seek approval from a JP. The Investigating Officer must ensure compliance with the statutory provisions and should refer to the Home Office publication (October 2012) "Protection of Freedoms Act 2012 – changes to provisions under the Regulation of Investigatory Powers Act 2000 (RIPA) Home Office guidance to local authorities in England and Wales on the judicial approval process for RIPA and the crime threshold for directed surveillance"

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<https://www.gov.uk/government/publications/changes-to-local-authority-use-of-ripa>).

3.110 The Judicial Approval form (see **Appendix 2**) will be submitted to the JP for approval. The form requires the Investigating Officer to provide a brief summary of the circumstances of the case on the judicial application form.

3.124 The contact numbers for Her Majesty's Court and Tribunals Service to arrange a hearing is:

- Within office hours 01245 313315 or 01245 313313
- If out of hours the contact numbers are 07736 638551 or 07774 238418 ARE THESE NUMBERS STILL CORRECT

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3.132 At the hearing which is on oath, the officer must present to the JP:

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- the partially completed judicial approval/ order form;
- a copy of the RIPA application / authorisation form, together with any supporting documents setting out the case, and
- the original application / authorisation form (this must be retained by Investigating Officer).
- *It is preferred that the Authorising Officer also attends the hearing at the Magistrates Court*

3.143 The JP will consider the paperwork and may ask questions to clarify points or require additional reassurance on particular matters.

The JP will:

- Consider whether he or she is satisfied that at the time the authorisation was granted or renewed, there were reasonable grounds for believing that the authorisation was necessary and proportionate;
- Consider whether there continues to be reasonable grounds;
- Consider whether the person who granted the authorisation or gave the notice was an appropriate designated person within the Local Authority, and
- Consider whether if the authorisation was made in accordance with the law, i.e. that the crime threshold for directed covert surveillance has been met.

3.154 The JP may:

- Decide to approve the Grant or renewal of an authorisation which will then take effect and the Local Authority may proceed to use the technique in that particular case, or
- Refuse to approve the grant or renewal of an authorisation in which case the RIPA authorisation will not take effect and the Local Authority may not use the technique in that case.

3.165 Where an application has been refused the Investigating Officer should consider the reasons for that refusal. If more information was required

by the JP to determine whether the application / authorisation has met the tests, and this is the reason for refusal, the Investigating Officer should consider whether they can reapply, for example, if there was information to support the application which was available to the Local Authority, but not included in the papers provided at the hearing.

- | 3.176 Where the JP refuses to approve the application / authorisation or renew the application / authorisation and decides to quash the original authorisation or notice the court must not exercise its power to quash the application / authorisation unless the applicant has had at least 2 business days from the date of the refusal in which to make representations. If this is the case the officer will inform Legal Services who will consider whether to make any representations.
- | 3.187 Whatever the decision, the JP will record their decision on the order section of the judicial application / order form. The court will retain the copy of the Local Authority RIPA application and authorisation form and the judicial application / order form. The officer will retain the original application / authorisation and a copy of the judicial application / order form.
- | 3.198 As previously stated the Principal Legal Executive is responsible for giving each authorisation a central unique identification number using a standard consistent format and recording it in a Central Record of RIPA Applications and Authorisations. This is to ensure that an up-to-date central record is maintained for all directed covert surveillance activity. Similarly, copies of all cancellations, renewals and review applications should be forwarded to the Principal Legal Executive promptly. The original authorisation should be kept on the investigation file.
- | ~~3.19 The Investigating Officer and the Authorising Officer must consider the possibility that the surveillance activity may result in the acquiring of confidential information. If this is considered to be likely then the Investigating Officer must highlight this on the application. **MOVED TO EARLIER**~~
- | 3.20 Written surveillance authorisations last for a maximum of three months. **They cannot be authorised for a lesser period and the commencement date is the date approved by the J.P..** —Surveillance authorisations must be cancelled when no longer required (see 3.30 below).
- | ~~3.21 All Investigating Officers completing RIPA applications must ensure that applications are sufficiently detailed. Authorising Officers should refuse to authorise applications that are not to the required standard and should refer them back to the Investigating Officers.~~
- | 3.22 **Review:** Any proposed or unforeseen changes to the nature or extent of the surveillance operation which may result in the further or greater intrusion into the private life of any person should be brought to the attention of the Authorising Officer by means of a review.

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Reviews

3.213 The Authorising Officer has the responsibility to set the review dates for each authorisation and will determine what the review dates will be. The review date is detailed on the authorisation form. The review date will be at most one month from the date approved by the JP or previous review. The Authorising Officer should conduct the review with the Investigating Officer. Reviews should not be conducted solely by the Investigating Officer. Details of the review should be recorded on the form "Review of the use of Directed Surveillance Authorisation", available on the Home Office website and retained with the original authorisation. The Authorising Officer must ensure through diarisation or otherwise that reviews are conducted at the correct date.

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3.22 Any proposed or unforeseen changes to the nature or extent of the surveillance operation which may result in the further or greater intrusion into the private life of any person should be brought to the attention of the Authorising Officer by means of a review. **MOVED FROM EARLIER**

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3.234 There is no requirement for a review form to be submitted to a JP. However if a different surveillance techniques is required it is likely a new application will have to be completed and approved by a JP.

Renewal

3.245 ~~Renewal:~~ Should it be necessary to renew a Directed Covert Surveillance or CHIS application / authorisation, this must be approved by a JP.

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3.256 Applications for renewals should not be made until shortly before the original authorisation period is due to expire but the applicant must take account of factors which may delay the renewal process (e.g. intervening weekends or the availability of the relevant authorising officer and a JP to consider the application).

3.267 The applicant should complete all the sections within the renewal form and submit the form to the authorising officer.

3.278 Authorising Officers should examine the circumstances with regard to Necessity, Proportionality and the Collateral Intrusions issues before making a decision to renew the activity. A CHIS application should not be renewed unless a thorough review has been carried out covering the use made of the source, the tasks given to them and information obtained. The Authorising Officer must consider the results of the review when deciding whether to renew or not. The review and the consideration must be documented.

| 3.289 If the Authorising Officer refuses to renew the application the cancellation process should be completed. If the Authorisation Officer authorises the renewal of the activity the same process is to be followed as mentioned earlier for the initial application.

A renewal takes effect on the day on which the authorisation would have ceased and lasts for a further period of three months.

Cancellation

| 3.2930 **Cancellation**—The Investigating Officer must complete the “Cancellation of the use of Directed Covert Surveillance” form available on the Home Office website and forward to the Authorising Officer who granted or last renewed the authorisation. It must be cancelled if they are satisfied that the directed covert surveillance no longer meets the criteria upon which it was authorised. Where the Authorising Officer is no longer available, this duty will fall on the person who has taken over the role of Authorising Officer or the person who is acting as Authorising Officer.

| 3.304 As soon as the decision is taken that directed covert surveillance should be discontinued, the applicant or other investigating officer involved in the investigation should inform the Authorising Officer. The Authorising Officer will formally instruct the Investigating Officer to cease the surveillance, noting the time and date of their decision. This will be required for the cancellation form. The date and time when such an instruction was given should also be recorded in the Central Record of RIPA Applications and Authorisations along with a note of the amount of time spent on the surveillance.

| 3.312 The officer submitting the cancellation must complete in detail the relevant sections of the form and include the period of surveillance and what if any images were obtained and any images containing third parties. The Authorising Officer must then take this into account and issues instructions regarding the management and disposal of the images etc.

| 3.323 The cancellation process should also be used to evaluate whether the objectives have been achieved and whether the applicant carried out what they stated was necessary in the application form. This check will form part of the oversight function. Where issues are identified they will be brought to the attention of the line manager and the Senior Responsible Officer. This will assist with future audits and oversight.

4. Joint Agency Surveillance

4.1 In cases where one agency is acting on behalf of another, it is usually for the lead agency to obtain or provide the authorisation. For example, where surveillance is carried out by Council employees on behalf of the

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Police, authorisation would be sought by the Police. If it is a joint operation involving both agencies the lead agency should seek authorisation.

- 4.2 Council staff involved with joint agency surveillance are to ensure that all parties taking part are authorised on the authorisation page of the application to carry out the activity. When staff are operating on another organisation's authorisation they are to ensure they see what activity they are authorised to carry out and make a written record. They should also inform the Senior Responsible Officer or the Principal Legal Executive of the unique reference number, the agencies involved and the name of the officer in charge of the surveillance.

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PART 3 DETAILED PROCEDURE FOR USE OF COVERT HUMAN INTELLIGENCE SOURCES (CHIS)

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1. Purpose

1.1 To ensure that CHIS activity is only undertaken in appropriate cases is properly authorised and recorded and is compliant with the Human Rights Act 1998 and the Regulation of Investigatory Powers Act 2000 and the appropriate Code of Practices, made there under.

2. Scope

2.1 This procedure applies to all usage of under-cover officers or informants, referred to as Covert Human Intelligence Sources (CHIS). This procedure does not apply to members of the public or Council officers who volunteer information pertaining to other individuals unless they are required to form a relationship with those other individuals.

2.2. Test purchase activity does not in general require authorisation under RIPA as vendor-purchaser activity does not constitute a relationship. **However, if a number of visits are undertaken a relationship may be established and authorisation as a CHIS should be considered. Equally a test purchase may meet the definition of directed surveillance.**

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2.3 ~~All sections of the Council who routinely or occasionally~~ **that** undertake CHIS activity must comply with this procedure and ensure that their local procedures make reference to this document.

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2.4 Should a CHIS authority be required, all of the staff involved in the process should make themselves fully aware of all of the aspects relating to tasking contained within the CHIS codes of Practice.

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3. Procedure

3.1 It is very important that the correct authorisation procedure is followed prior to undertaking CHIS activity. Interference of the right to privacy without proper authorisation may render any evidence obtained unusable in a criminal court. If CHIS activity is conducted without the necessary authorisation, the Council and possibly individuals may be sued for damages for a breach of Human Rights. In civil matters adverse inferences may be drawn from such unlawful interference.

3.2 This procedure is supported by the Home Office "The Use of Covert Human Intelligence Sources" Code of Practice, which is available on the Gov.UK website. All Investigating Officers and Authorising Officers should fully acquaint themselves with the Code of Practice and refer to

it during both the application and authorisation processes. ~~I think these should be on the intranet~~

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- 3.3 All CHIS activity must be ~~authorised, approved and approved by a JP~~ prior to the activity taking place. ~~by an Authorising Officer and a Justice of the Peace ("JP")~~. Officers seeking authority to undertake CHIS activity should complete the form "Application for the Use of a Covert Human Intelligence Source (CHIS)" available from the Home Office Website. Completed application forms should be forwarded to the relevant Authorising Officer.

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- 3.4 Within the provisions there has to be:

- (a) a person who has the day to day responsibility for dealing with the source and for the source's security and welfare (**Handler**)
- (b) at all times there will be another person who will have general oversight of the use made of the source (**Controller**)
- (c) at all times there will be a person who will have responsibility for maintaining a record of the use made of the source

The **Handler** will have day to day responsibility for:

- dealing with the source on behalf of the Local Authority concerned ;
- directing the day to day activities of the source;
- recording the information supplied by the source; and
- monitoring the source's security and welfare.

The Controller will be responsible for the general oversight of the use of the source.

- 3.5 **Tasking** is the assignment given to the source by the Handler or Controller ~~such as~~ by asking him to obtain information, to provide access to information or to otherwise act, incidentally, for the benefit of the relevant Local Authority. Authorisation for the use or conduct of a source is required prior to any tasking where such tasking requires the source to establish or maintain a personal or other relationship for a covert purpose.

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- 3.6 ~~Authorisations should not be drawn so narrowly that a separate authorisation is required each time the CHIS is tasked. Rather, an authorisation might cover, in broad terms, the nature of the source's task.~~

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3.76 ~~Not all human source activity will meet the definition of a CHIS. For example, a source may be a public volunteer or someone who discloses information out of professional or statutory duty or has been tasked to obtain information other than by way of a covert relationship.~~

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3.8 In some instances, the tasking given to a person will not require the source to establish a personal or other relationship for a covert purpose. ~~For example, a member of the public is asked to maintain a record of all vehicles arriving and leaving a specific location or to record the details of visitors to a neighbouring house. A relationship has not been established or maintained in order to gather the information and a CHIS authorisation is therefore not available. Other authorisations under the Act, for example, directed surveillance, may need to be considered where there is a possible interference with the Article 8 rights of an individual, a source may be tasked with finding out purely factual information about the layout of commercial premises. Alternatively, a Council Officer may be involved in the test purchase of items which have been labelled misleadingly or are unfit for consumption. In such cases, it is for the Council to determine where, and in what circumstances, such activity may require authorisation.~~

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Use of equipment by a CHIS

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3.9 If a CHIS is required to wear or carrying a surveillance device such as a covert camera it does not need a separate intrusive or directed surveillance authorisation, provided the device will only be used in the presence of the CHIS. It should be authorised as part of the conduct of the CHIS.

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3.10 CHIS, whether or not wearing or carrying a surveillance device, in residential premises or a private vehicle, does not require additional authorisation to record any activity taking place inside those premises or that vehicle which takes place in their presence. This also applies to the recording of telephone conversations

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~~3.87 Should a CHIS authority be required, all of the staff involved in the process should make themselves fully aware of all of the aspects relating to tasking contained within the CHIS codes of Practice.~~
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3.11 ~~All officers completing CHIS applications and in particular officers authorising applications must ensure that applications are sufficiently detailed. Authorising Officers should refuse to authorise applications that are not to the required standard and should refer them back to the originating officers.~~ MOVED TO HERE MORE APPROPRIATE

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3.12 ~~The Investigating Officer and the Authorising Officer must consider the possibility that the CHIS activity may result in the acquiring of confidential information. If this is considered to be likely then the investigating officer must state this on the application.~~ ~~MOVED TO HERE~~

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3.138 Application forms should be allocated a reference number by the applicant relevant to the department and the particular investigation. The reference number should also reflect the number of authorisations in respect of the investigation.

~~3.143-9~~ The application for authorisation must include full details of the reason for the CHIS and the intended outcome of the activity. The necessity for the CHIS activity should be explained. The CHIS activity must be proportionate to the potential offence or irregularity under consideration and should only be used when other methods of less intrusive investigation have been attempted or are not appropriate. CHIS authorisation forms must include enough detail for the Authorising Officer to make an assessment of the necessity and proportionality of the application. The application form must include details of the resources to be applied, the anticipated start date and duration of the activity, if necessary broken down over stages. Details should also be given of any CHIS activity previously conducted on the individual.

~~3.150~~ The authorisation request should be accompanied by a risk assessment, giving details of how the CHIS is going to be handled and the arrangements which are in place for ensuring that there is at all times a person with responsibility for maintaining a record of the use made of CHIS. The risk assessment should take into account the safety and welfare of the CHIS in relation to the activity and should consider the likely consequences should the role of the CHIS become known. The ongoing security and welfare of the CHIS after the cancellation of the authorisation should also be considered at the outset. ~~Completed authorisation forms should be allocated a reference number by the Investigating Officer relevant to the department / team and the particular investigation. The Investigating Officer should also obtain the next unique reference number from the Central Record of RIPA Applications and Authorisations maintained by the Principal Legal Executive.~~ ~~REPEATED FROM ABOVE~~

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3.164 The Authorising Officer will consider the completed application form and inform the officer making the application of his decision. The Authorising Officer will retain a copy of the authorisation form and monitor this for review, renewal and cancellation.

3.17 ———In addition the Authorising Officer must notify the Chief Executive & Town Clerk of an authorisation

3.182 The Investigating Officer requesting authorisation for CHIS activity must give consideration to the following factors:

- **Necessity** – ~~is the use of the CHIS covert activity is covert surveillance~~ the only or best way to retrieve the desired information or is other less invasive methods appropriate.

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▪ ~~Proportionality~~ – is the CHIS covert activity surveillance activity proportional to the evidence that will be obtained and how it will benefit the investigation against the and intrusion into the privacy of the subject and others that may be affected, could reasonably expect or the. Are the methods used excessive and are they as non-invasive as is possible, and does the activity surveillance restrict an individual's right for privacy more than is absolutely necessary. To demonstrate proportionality it is useful to compare the cost of the proposed surveillance activity with the scope of the problem and the potential impact on those impacted by the problem, and to identify how much the activity will impinge on the subjects. DON'T THINK THIS IS APPROPRIATE DUSCUSS

3.19 The following elements of proportionality should therefore be considered:

- balancing the size and scope of the proposed activity against the gravity and extent of the perceived crime or harm;
- explaining how and why the methods to be adopted will cause the least possible intrusion on the subject and others;
- whether the conduct to be authorised will have any implications for the privacy of others, and an explanation of why (if relevant) it is nevertheless proportionate to proceed with the operation;
- evidencing, as far as reasonably practicable, what other methods had been considered and why they were not implemented, or have been implemented unsuccessfully;
- considering whether the activity is an appropriate use of the legislation and a reasonable way, having considered all reasonable alternatives, of obtaining the information sought.

▪ **3.20 Collateral intrusion** – is the obtaining of information relating to persons other than the subject of the investigation. The application must show what steps are to be taken so as to minimise collateral intrusion.

3.2143 **Magistrates Court Approval:** As stated above from the 1st November 2012 all applications and renewals for Directed Covert Surveillance and use of a CHIS will be required to have a JP's approval. The procedure of obtaining the JP approval is the same as directed surveillance mentioned earlier.

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3.14 ~~Having received approval from an Authorising Officer the Investigating Officer must now complete the relevant application form to seek approval from a JP. An application form is attached at **Appendix 2**. The Investigating Officer must ensure compliance with the statutory provisions and should see the Home Office publication (October 2012) "Protection of Freedoms Act 2012 — changes to provisions under the Regulation of Investigatory Powers Act 2000 (RIPA) Home Office guidance to Local Authorities in England and Wales on the judicial approval process for RIPA and the crime threshold for directed surveillance"~~

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~~<https://www.gov.uk/government/publications/changes-to-local-authority-use-of-ripa>~~

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3.15 ~~The application form will be submitted to an Authorising Officer for consideration. The form requires the Investigating Officer to provide a brief summary of the circumstances of the case on the judicial application form.~~

3.16 ~~The contact numbers for Her Majesty's Court and Tribunals Service to arrange a hearing is:~~

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- ~~▪ Within office hours 01245 313315 or 01245 313313~~
- ~~▪ If out of hours the contact numbers are 07736 638551 or 07774 238418~~

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~~3.17 At the hearing, the officer must present to the JP:~~

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- ~~▪ the partially completed judicial application/order form;~~
- ~~▪ a copy of the RIPA application / authorisation form, together with any supporting documents setting out the case, and~~
- ~~▪ the original application / authorisation form (this must be retained by Investigating Officer).~~

~~3.18 The JP will consider the paperwork and may ask questions to clarify points or require additional reassurance on particular matters.~~

~~The JP will:~~

- ~~▪ Consider whether he or she is satisfied that at the time the authorisation was granted or renewed, there were reasonable grounds for believing that the authorisation was necessary and proportionate;~~
- ~~▪ Consider whether there continues to be reasonable grounds;~~
- ~~▪ Consider whether the person who granted the authorisation or gave the notice was an appropriate designated person within the Local Authority, and~~
- ~~▪ Consider whether the authorisation was made in accordance with the law.~~

~~3.19 The JP may:~~

- ~~▪ Decide to approve the Grant or renewal of an authorisation which will then take effect and the authority may proceed to use the technique in that particular case; or~~
- ~~▪ Refuse to approve the grant or renewal of an authorisation in which case the RIPA authorisation will not take effect and the Local Authority may not use the technique in that case.~~

~~3.20 Where an application has been refused the Investigating Officer should consider the reasons for that refusal. If more information was required by the JP to determine whether the application / authorisation has met the tests, and this is the reason for refusal the Investigating Officer should consider whether they can reapply, for example, if there was information to support the application which was available to the Local Authority, but not included in the papers provided at the hearing.~~

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~~3.21 Where the JP refuses to approve the application / authorisation or renew the application / authorisation and decides to quash the original authorisation or notice the court must not exercise its power to quash the application / authorisation unless the applicant has had at least 2 business days from the date of the refusal in which to make representations. If this is the case the officer will inform Legal Services who will consider whether the Council should make any representations.~~

~~3.22 Whatever the decision, the JP will record their decision on the order section of the judicial application / order form. The court will retain the copy of the Local Authority RIPA application and authorisation form and the judicial application / order form. The officer will retain the original application / authorisation and a copy of the judicial application / order form.~~

~~The original application and the copy of the judicial application / order form must be forwarded to the Principal Legal Executive for the Central Record of RIPA Applications and Authorisations.~~

~~3.23~~ The original application and the copy of the judicial application / order form must be forwarded to the Principal Legal Executive promptly before the CHIS activity commences to ensure it meets all the necessary requirements. As previously stated Principal Legal Executive is responsible for giving each authorisation a central unique identification number using a standard consistent format and recording it in a central register. This is to ensure that an up-to-date central record is maintained for all CHIS activity. Similarly, copies of all cancellations, renewals and review applications should be forwarded to the Principal Legal Executive promptly. The original authorisation should be kept on the investigation file.

~~3.24 All Investigating Officers completing CHIS applications must ensure that applications are sufficiently detailed. Authorising Officers should refuse to authorise applications that are not to the required standard and should refer them back to the Investigating Officers.~~ REPEATED

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~~3.25 All officers completing CHIS applications and in particular officers authorising applications must ensure that applications are sufficiently detailed. Authorising Officers should refuse to authorise applications that are not to the required standard and should refer them back to the originating officers.~~ MOVED TO EARLIER

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~~3.26 The Investigating Officer and the Authorising Officer must consider the possibility that the CHIS activity may result in the acquiring of confidential information. If this is considered to be likely then the investigating officer must state this on the application.~~ MOVED TO EARLIER

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3.237 Written CHIS authorisations last for a maximum of 12 months and cannot be authorised for a lesser period. CHIS authorisations should be cancelled when no longer required. The investigating officer should complete the "Cancellation of an Authorisation of the Use or Conduct of a Covert Human Intelligence Source (CHIS)" form available on the Home Offices website and forward to the relevant Authorising Officer.

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Management

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3.248 The operation will require managing by the handler and controller which will included ensuring that the activities of the source and the operation remained focused and there is no status drift, It is important that the intrusion is assessed to ensure the operation remains proportionate. The security and welfare of the source will also be monitored. The Authorising Officer should maintain general oversight of these functions.

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~~Each CHIS should be managed through a system of tasking and review. Tasking is the assignment given to the CHIS by the Handler. The task could be asking the CHIS to obtain information, to provide access to information or to otherwise act for the benefit of the Council. The handler is responsible for dealing with the CHIS on a day to day basis, recording the information provided and monitoring the CHIS's security and welfare. The Authorising Officer should maintain general oversight of these functions. THIS WAS ALL REPEATED >~~

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3.259 During CHIS activity there may be occasions when unforeseen action or undertakings occur. Such incidences should be recorded as soon as practicable after the event and if the existing authorisation is insufficient, it should either be dealt with by way of a review updated and re-authorised (for minor amendments only) or it should be cancelledcancelled, and a new authorisation obtained before any further action is carried out. Similarly, where it is intended to task a CHIS in a new significantly different way than previously identified, the proposed tasking should be referred to the Authorising Officer, who should consider whether a separate authorisation is required. This should be done in advance of any tasking and details of such referrals must be recorded.

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Review

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3.2630 The authorising officer will stipulate the frequency of formal reviews and the controller should maintain an audit of case work sufficient to ensure that the use or conduct of the CHIS remains within the parameters of the extant authorisation. This will not prevent additional reviews being conducted by the authorising officer in response to changing circumstances such as where the nature or extent of intrusion into the private or family life of any person becomes greater than that anticipated in the original authorisation, the authorising officer

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should immediately review the authorisation and reconsider the proportionality of the operation as mentioned earlier.

~~3.30 **Review:** Any proposed or unforeseen changes to the nature or extent of the surveillance operation which may result in the further or greater intrusion into the private life of any person should be brought to the attention of the Authorising Officer by means of a review.~~

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3.2734 Each application should be reviewed after an appropriate period of time and at most one month after the authorisation or previous review. The responsibility for review rests with the Authorising Officer who should conduct the review with the Investigating Officer. Reviews should not be conducted solely by the Investigating Officer. ~~In some cases, the Authorising Officer may delegate the responsibility for conducting of reviews to a subordinate Officer.~~ The review should include a reassessment of the risk assessment, with particular attention given to the safety and welfare of the CHIS. The Authorising Officer should decide whether it is appropriate for the authorisation to continue. Details of the review should be recorded on the form "Review of a Covert Human Intelligence Source (CHIS) Authorisation" available on the Home Office website, and retained with the original authorisation. ~~Cases should be reviewed at no more than one month intervals. The Authorising Officer must ensure, through diarisation or otherwise, that regular reviews are conducted within the correct timeframe.~~ REPEATED BELOW.

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~~3.2832~~ Details of the review should be recorded on the form "Review of the use of Directed Surveillance Authorisation", available on the Gov.UK website and retained with the original authorisation. The Authorising Officer must ensure through diarisation or otherwise that regular reviews are conducted within the correct timeframe.

3.2933 There is no requirement for a review form to be submitted to a JP. ~~However:~~ However, if a different surveillance techniques is required it is likely a new application will have to be completed and approved by a JP.

Renewal

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3.304 ~~Renewal:~~ Should it be necessary to renew a Directed Surveillance or CHIS application / authorisation, this must be approved by a JP.

3.315 Applications for renewals should not be made until shortly before the original authorisation period is due to expire but the applicant must take account of factors which may delay the renewal process (e.g. intervening weekends or the availability of the relevant authorising officer and a Justice of the Peace to consider the application).

- | 3.326 The applicant should complete all the sections within the renewal form and submit the form to the authorising officer.
- | 3.337 Authorising Officers should examine the circumstances with regard to Necessity, Proportionality and the Collateral Intrusions issues before making a decision to renew the activity. A CHIS application should not be renewed unless a thorough review has been carried out covering the use made of the source, the tasks given to them and information obtained. The Authorising Officer must consider the results of the review when deciding whether to renew or not. The review and the consideration must be documented.
- | 3.348 If the Authorising Officer refuses to renew the application the cancellation process should be completed. If the Authorisation Officer authorises the renewal of the activity the same process is to be followed as mentioned earlier for the initial application.
- | 3.359 A renewal takes effect on the day on which the authorisation would have ceased and lasts for a further period of three months.

Cancellation

- | 3.3640 **Cancellation**—The Investigating Officer must complete the “Cancellation of an authorisation for the use or conduct of a Covert Human Intelligence Source” form available on the Gov.UK website and forward to the Authorising Officer who granted or last renewed the authorisation. Where the Authorising Officer is no longer available, this duty will fall on the person who has taken over the role of Authorising Officer or the person who is acting as Authorising Officer.
- | 3.3744 As soon as the decision is taken that CHIS activity should be discontinued, the applicant or other Investigating Officer involved in the investigation should inform the Authorising Officer. The Authorising Officer will formally instruct the Investigating Officer to cease such activity, noting the time and date of their decision. This will be required for the cancellation form. The date and time when such an instruction was given should also be recorded in the Central Record of RIPA Applications and Authorisations.
- | 3.3842 The officer submitting the cancellation should complete in detail the relevant sections of the form.
- | 3.3943 The cancellation process should also be used to evaluate whether the objectives have been achieved and whether the applicant carried out what they stated was necessary in the application form. This check will form part of the oversight function. Where issues are identified they will be brought to the attention of the line manager and

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the Senior Responsible Officer. This will assist with future audits and oversight.

3.40 An assessment of the welfare and safety of the source should also be assessed, and any issues identified.

Record Management for CHIS

3.414 ~~Record Management for CHIS~~ — Proper records must be kept of the authorisation and use of a source. The particulars to be contained within the records are:

- the identity of the source;
- the identity, where known, used by the source;
- any relevant investigating authority other than the Local Authority maintaining the records;
- the means by which the source is referred to within each relevant investigating authority;
- any other significant information connected with the security and welfare of the source;
- any confirmation made by a person granting or renewing an authorisation for the conduct or use of a source that the information in paragraph (d) has been considered and that any identified risks to the security and welfare of the source have where appropriate been properly explained to and understood by the source;
- the date when, and the circumstances in which the source was recruited;
- the identities of the persons who, in relation to the source, are discharging or have discharged the functions mentioned in section 29(5)(a) to (c) of the 2000 Act or in any order made by the Secretary of State under section 29(2)(c);
- the periods during which those persons have discharged those responsibilities;
- the tasks given to the source and the demands made of him in relation to his activities as a source;
- all contacts or communications between the source and a person acting on behalf of any relevant investigating authority;

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- the information obtained by each relevant investigating authority by the conduct or use of the source;
- any dissemination by that authority of information obtained in that way; and
- in the case of a source who is not an undercover operative, every payment, benefit or reward and every offer of a payment, benefit or reward that is made or provided by or on behalf of any relevant investigating authority in respect of the source's activities for the benefit of that or any other relevant investigating authority.

Further documentation

3.42 Records or copies of the following, as appropriate, will also be kept by the relevant authority for at least five years:

- a copy of the authorisation together with any supplementary documentation and notification of the approval given by the authorising officer;
- a copy of any renewal of an authorisation, together with the supporting documentation submitted when the renewal was requested;
- the reason why the person renewing an authorisation considered it necessary to do so;
- any risk assessment made in relation to the CHIS;
- the circumstances in which tasks were given to the CHIS;
- the value of the CHIS to the investigating authority;
- a record of the results of any reviews of the authorisation;
- the reasons, if any, for not renewing an authorisation;
- the reasons for cancelling an authorisation; and
- the date and time when any instruction was given by the authorising officer that the conduct or use of a CHIS must cease.

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3.43 The records kept by public authorities should be maintained in such a way as to preserve the confidentiality, or prevent disclosure of the identity of the CHIS, and the information provided by that CHIS.

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RIPA FLOW CHART 1 : DIRECTED SURVEILLANCE

Requesting Officer (The Applicant) must:

- . Read the Corporate Policy & Procedures Document and be aware of any other guidance
- . Determine that directed surveillance is required (For CHIS see Flowchart 2).
- . Assess whether authorisation will be in accordance with the law.
- . Assess whether authorisation is necessary under RIPA and whether it could be done overtly.
- . Consider whether surveillance will be proportionate.
- . If authorisation is approved review or renew regularly with Authorised Officer.

If a less intrusive option is available and practicable : USE THAT OPTION! use that option.

If authorisation is necessary and proportionate, prepare and submit your application form to the Authorised Officer .

Authorised Officer must:

- Consider in detail whether all options have been duly considered, including the Corporate Policy & Procedures Document and any other guidance issued by the SRO
- Consider whether surveillance is considered by him/her to be in accordance with the law, necessary and proportionate.
- Authorise only if an overt or less intrusive option is not practicable.

The Applicant must: **REVIEW REGULARLY** And complete the review form and submit to Authorised

The Applicant must: If operation is no longer necessary or proportionate, complete **CANCELLATION FORM** and submit to Authorised Officer

Essential
Applications for Directed Surveillance will be completed on the electronic database and need to be maintained appropriately. The electronic database forms the Central Database for RIPA.

Authorised Officer must: If surveillance is still necessary and proportionate after authorised period:

- Renew authorisation
- Set an appropriate further review date and use

Authorised Officer must: Cancel authorisation when it is no longer necessary or proportionate to need the same.

NB if in doubt, ask the Group Manager (Legal and Democratic) BEFORE any directed surveillance and/or CHIS is authorised, reviewed, renewed, cancelled, or rejected.

Appendix 1 (b)

SAMPLE APPLICATION FORM FOR USE OF DIRECTED COVERT SURVEILLANCE

Unique Reference Number	Refer to your policy as to how you obtain the unique number. All applications must have one and put on each page.
--------------------------------	---

Part II of the Regulation of Investigatory Powers Act 2000

Authorisation Directed Surveillance

Public Authority <i>(Including full address)</i>	State your Public Authority Name and full address		
Name of Applicant	Details of the person completing the form	Unit/Branch /Division	Section and department
Full Address	Provide the address of your department		
Contact Details	Provide full contact details including email address. Make it easy for the Authorising Officer, or anyone else associated with the process to contact you.		
Investigation/Operation Name (if applicable)	This may be an investigation reference number allocated to this case, or some other reference		
Investigating Officer (if a person other than the applicant)	If the form is being completed by someone who is not the investigator, then the investigators details must be put in this box.		

DETAILS OF APPLICATION

1. Give rank or position of authorising officer in accordance with the Regulation of Investigatory Powers (Directed Surveillance and Covert Human Intelligence Sources) Order 2010 No. 521.¹

s above.

For local authorities: The exact position of the authorising officer should be given. For example, Head of Trading Standards.

Also use the description of the person's position contained within your policy to remove any confusion.

Describe the purpose of the specific operation or investigation.

Describe the investigation to date including the offences and the relevant legislation. When, where and how are the offences occurring. Remember the Authorising Officer needs to be clear what the offence is and the circumstances. (keep information relevant and to the point)

Include the details of the suspects and persons involved and the role they play within the investigation. (Do not put confidential information in such as informants' names)

Consider disclosure implications under CPIA with regards to not revealing unnecessary information. However, the AO needs sufficient relevant information to make a decision. The provisions of using CPIA sensitive information may be a way of dealing with the sensitivity issues later, by editing material if it has to be disclosed. However, if the document contains sensitive information remember to keep it secure at all times.

Cross reference where necessary to other relevant applications

Describe in detail the surveillance operation to be authorised and expected duration, including any premises, vehicles or equipment (e.g. camera, binoculars, recorder) that may be used.

¹ For local authorities: The exact position of the authorising officer should be given. For example, Head of Trading Standards.

should be completed, after attending the area of where the activity is to be carried out, and having carried out a surveillance assessment having taken into account risks or limiting factors. Limiting factors are anything can affect the success of the operation.

Consider the AO statement in box 12, the 5 WH. The applicant can only do what is authorised on the AO, not what they have applied for.

Consider the aims and objectives, confirmation of address may only need static observations; however, lifestyle intelligence may require foot/mobile and use of covert cameras etc.

What exactly do you want to do? Is it static observations, foot or mobile? You want a combination? However, only ask for what you can realistically carry out. It is not a wish list; it should be carried out to achieve the objectives.

How do you want to carry out the surveillance and what equipment do you want to use? You must make the AO aware of the capabilities of any equipment you want to use.

Where is the activity to take place? Who is the activity against and when do you want to carry it out?

What is the expected duration? It does not mean that it must only be authorised to this point. Once signed, the authorisation lasts for a 3 month period. You must update the AO when you set the review dates. If your operation ends prior to any review date or the 3 month period, you must cancel it straight away and submit the cancellation form. It does not expire.

REMEMBER YOU CAN ONLY DO WHAT IS AUTHORISED ON THE AO SECTION, NOT WHAT YOU HAVE APPLIED FOR IN THIS SECTION.

The identities, where known, of those to be subject of the directed surveillance.

- Name:
- Address:
- DOB:
- Other information as appropriate:

If you do not know who the subjects are, insert any descriptions you may have. If as a result of the surveillance, you identify anyone, you must submit this information on a review form to the AO.

Consider any known associates. If the intelligence is that the subject of the surveillance has known associates, are they likely to become subjects of the surveillance? If so, detail them as part of the application.

Explain the information that it is desired to obtain as a result of the directed surveillance.

These are the surveillance objectives. They should have been identified during the planning stage and a feasibility study carried out to assess whether they can be achieved. It's no use setting objectives that can't be achieved.

What is the surveillance going to tell you?

What, if any, criminality will it establish?

Will it identify subjects involved in criminality?

Will it house subject or their criminal associates?

g.

Identify the location of the subject's place of work

To gather intelligence and evidence to establish the extent of the criminality (size).

Identify other persons involved, such as suppliers.

Identify other premises involved, such as storage buildings.

Obtain best evidence through the use of photographic equipment to assist with identifying the offenders

Obtain best evidence to assist with a prosecution of offenders

Identify on which grounds the directed surveillance is **necessary** under Section 28(3) of RIPA. *Delete those that are inapplicable. Ensure that you know which of these grounds you are entitled to rely on (SI 2010 No.521).*

In the interests of national security;
For the purpose of preventing or detecting crime or of preventing disorder;
In the interests of the economic well-being of the United Kingdom;
In the interests of public safety;
For the purpose of protecting public health;
For the purpose of assessing or collecting any tax, duty, levy or other imposition, contribution or charge payable to a government department;

Directed Surveillance, Local Authorities only lawful purpose is preventing or detecting crime and the crime must be capable of carrying six months imprisonment or criminal offences relating to the underage sale of alcohol or tobacco under sections 146, 147 or 147A of the Licensing Act 2003 or section 7 of the Children and Young Persons Act 1933. Due to the nature of the offences, if any other areas above are applicable such as protection of public health, this should be made clear in the body of the application and the proportionality section.

Explain **why** this directed surveillance is necessary on the grounds you have identified [Code paragraph 3.3].

You can reiterate the criminal offences

Why is it necessary at this stage of the enquiry to carry out covert activity?

What is the purpose of the operation?

How will the activity assist or progress the investigation?

What will be the consequences of the proposed action be to the victim?

Why do we need this evidence/intelligence/information?

What other enquiries have been carried out and results? This does not have to be a last resort, but if there is a less intrusive way of achieving your objectives you should take that option, or explain why you can't take that option.

Consequences of not taking action

It is not for the applicant to state on the application that they believe it to be necessary. This is the responsibility of the AO to reach that decision.

8. Supply details of any potential collateral intrusion and why the intrusion is unavoidable. [Bear in mind Code paragraphs 3.8 to 3.11.]

Describe precautions you will take to minimise collateral intrusion.

There are three parts to this section (see above). You must answer them all, as this section directly impacts upon the proportionality test.

1. SUPPLY DETAILS OF POTENTIAL COLLATERAL INTRUSION

Visit the location of where the activity is to take place and carry out a risk assessment. Who lives at the property that you may be watching. Have they got children who might be affected such as going to school etc.?

Determine where you need to be to carry out the surveillance. What else can you see?

What equipment will you be using and what will it see and record?

Consider Confidential Information

It may be useful to paint the picture in words of what it is you will be watching in the locality. This will assist the AO. You may also want to refer to any plans or maps attached to the application.

2. WHY IS THE INTRUSION UNAVOIDABLE?

Consider why the intrusion is unavoidable, such as the location and time frame that the observations have to be carried out. It may be that you are limited to the use of certain equipment only and therefore governed by its operating capabilities. Your observation position may be the only place you can use.

3. DESCRIBE THE PRECAUTIONS YOU WILL TAKE TO MINIMISE COLLATERAL INTRUSION

Having carried out the risk assessment and identified what the intrusion is, consider ways of reducing the intrusion, or keeping it to a minimum. You should consider:

State who the activity will be focused on, such as the subject etc., not the innocent third parties subject to the collateral intrusion.

Keeping the surveillance activity focussed with regards to length of time spent on the observations. However, remember that you still need time to achieve your objectives. You will need some flexibility built in to your timings.

If using technical equipment such as video or covert recordings, consider the position and focal length of the lenses when filming to reduce the intrusion. Consider when and who you will use the equipment against, such as the suspects only.

How will you manage any images obtained? Consider Data Protection, confidentiality, security, dissemination of the images, and any guidance provided by your organisation, including any Home Office guidance.

Are the staff trained to carry out the activity? If so, this may assist, as they should know what they are doing with regards to collateral intrusion.

The activity needs to be tightly managed and reviewed constantly. If there is a considerable change in the intrusion once the activity commences, then the AO needs to be made aware.

9. Explain why this directed surveillance is proportionate to what it seeks to achieve. How intrusive might it be on the subject of surveillance or on others? And why is this intrusion outweighed by the need for surveillance in operational terms or can the evidence be obtained by any other means [Code paragraphs 3.4 to 3.7]?

In the necessity box we stated why it was necessary to carry out the covert activity. In this box we are assessing whether the actions requested are proportionate to the overall operational aims within the investigation, having taken into account of the intrusion issues.

How serious are the offences under investigation? What is the direct or accumulative consequence of the offences?

What are the effects of the offences on the victim or the consequences of what is happening?

Are you asking to do a lot to achieve a little? Do not use a sledgehammer to crack the nut.

If you have provided a good explanation of how the intrusion will be reduced and managed in the collateral intrusion box, refer them to it.

Explain why you need to undertake this activity to achieve your objectives, against using other methods. Why, in operational terms, does your need to use the activity (how the activity will progress the investigation) outweigh the level of intrusion? Why is this method the least intrusive option?

Are your methods/tactics balanced in relation to the likely results?

Consider the length of time of the surveillance operation

What methods are required to achieve the objectives and are there any less intrusive methods? You should explain what if any less intrusive methods have been considered. If they can be used they should be. If however less intrusive methods cannot be used, explain why. You should also take account that technical surveillance may be more intrusive.

Consequences of not taking action.

--

10. Confidential information [Code paragraphs 4.1 to 4.31].
 INDICATE THE LIKELIHOOD OF ACQUIRING ANY CONFIDENTIAL INFORMATION:

Is there any likelihood of Health, Solicitors, Counselling, and Spiritual etc.

It is unlikely that you will obtain this type of material, but an assessment should take place. If you are, it is a higher level of Authorising Officer who needs to consider it.

Do not mix this up with Private Information which is part of the consideration when assessing whether the activity falls under RIPA.

11. Applicant's Details

Name (print)		Tel No:	
Grade/Rank		Date	
Signature			

12. Authorising Officer's Statement. [Spell out the "5 Ws" – Who; What; Where; When; Why and HOW– in this and the following box.]

--

I hereby authorise directed surveillance defined as follows: [*Why is the surveillance necessary, whom is the surveillance directed against, Where and When will it take place, What surveillance activity/equipment is sanctioned, How is it to be achieved?*]

REMEMBER THAT EACH CASE HAS TO BE ASSESSED ON ITS OWN MERITS.

Who are you authorising to carry out the activity? Are the staff from one office? Or if a joint operation, please state that fact and name the other organisation. You have to actually authorise the other organisation's staff in writing.

What are you authorising them to do and what equipment are you authorising them to use? You should have a knowledge of the equipments capability.

Who are you authorising them to do it against, person, address, vehicle,etc?

When are you authorising them to do it?

Where are you authorising the activity to take place?

Why are you authorising whatever you are allowing them to do? They should have stated within the application earlier what they are hoping to achieve.

When authorising the activity, it is live for 3 months. In other words, as an AO, you cannot authorise for less. You should set a review date for you to review it if you think that the surveillance should be a shorter period.

DO NOT BE AFRAID AS AN AO, TO ONLY ALLOW THEM TO UNDERTAKE CERTAIN ACTIVITY, AS OPPOSED TO ALL THE ACTIVITY APPLIED FOR, IF IT MEANS THAT IT IS PROPORTIONATE. STATE WHY ON THE FORM

IF NOT AUTHORISING, STATE WHY.

13. Explain why you believe the directed surveillance is necessary [Code paragraph 3.3].

Explain why you believe the directed surveillance to be proportionate to what is sought to be achieved by carrying it out [Code paragraphs 3.4 to 3.7].

IF YOU ARE WRITING IN THIS SECTION, PRINT THE FORM OUT WITH ENOUGH SPACE TO WRITE IN. YOU WILL REQUIRE SOME SPACE TO DETAIL HOW YOU HAVE COME TO YOUR DECISION.

Below are 5 areas that should be dealt with by the AO when considering the application.

Code 3.3 requires that the person granting an authorisation BELIEVES that the authorisation is necessary in the circumstances of the particular case for one of the statutory reasons (see box 6). Have they made clear what the offence or offences are in the body of the application?

Code 3.4 then if the activities are necessary, the person granting the authorisation must

BELIEVE that they are proportionate to what is sought to be achieved by carrying them out. AO must also **BELIEVE** that the objectives can't be met by other less intrusive means.

Sec 72 RIPA 2000, a person exercising or performing any power or duty in relation to which provision may be made by a code of practice under section 71 shall, in doing so, **HAVE REGARD TO THE PROVISIONS** (so far as they are applicable) of every code of practice for the time being in force under that section. (You have to know what the codes say).

Collateral Intrusion Code of Practice 3.8 before authorising surveillance the authorising officer should also **TAKE INTO ACCOUNT** the risk of intrusion into the privacy of persons other than those who are directly the subjects of the investigation or operation.

Code of Practice 3.15 .Any person granting or applying for an authorisation will also **NEED TO BE AWARE OF** particular sensitivities in the local community where the surveillance is taking place and of similar activities being undertaken by other public authorities which could impact on the deployment of surveillance.

This will take some consideration. Read and study the application fully. Refer to the applicants boxes that deal with these issues.

Detail your thought processes. How have you come to the conclusion? Do not rubber stamp, do not use template or cut and paste answers. This is your original note that you may be relying on in court. If you are making decisions from reading supporting material, mention the material and keep a copy which needs to be part of the central register. Be careful to make your decisions on written material not discussions with the case officer which may be difficult to justify at a later date at court.

Model answer from codes and OSC

- balancing the size and scope of the proposed activity against the gravity and extent of the perceived crime or offence;
- explaining how and why the methods to be adopted will cause the least possible intrusion on the target and others;
- considering whether the activity is an appropriate use of the legislation and a reasonable way, having considered all reasonable alternatives, of obtaining the necessary result;
- evidencing, as far as reasonably practicable, what other methods had been considered and why they were not implemented.

14. (Confidential Information Authorisation.) Supply detail demonstrating compliance with Code paragraphs 4.1 to 4.31.

This is completed by the AO who has the responsibility to consider the authorisation if confidential information is likely to be obtained. (Usually someone of a much higher position than a normal AO.) e.g. In a Local Authority it will be the Chief Executive.

See rear of codes of practice for relevant position and refer to your policy.

Date of first review

AO must set the review date. Consider what the applicant has stated regarding the length of time required. Remember, this is so you as the AO can now review the need for the activity to continue on the date you have set. Also refer to policy. Most state that it must not be longer than a month. However, you must assess it against all the facts.

Programme for subsequent reviews of this authorisation: [Code paragraph 3.23]. Only complete this box if review dates after first review are known. If not or inappropriate to set additional review dates then leave blank.

As above.			
Name (Print)		Grade / Rank	
Signature		Date and time	
Expiry date and time [e.g.: authorisation granted on 1 April 2005 - expires on 30 June 2005, 23.59]		<p>From 1 Nov 12 this date will be from when a Magistrate approves it.</p> <p>Put in the expiry date. Remember it lasts for 3 months once signed (see opposite)</p>	

15. Urgent Authorisation [Code paragraph 5.9]: Authorising officer: explain why you considered the case so urgent that an oral instead of a written authorisation was given.

OSC guidance states that there is no longer a requirement to complete the whole application form; contemporaneous notes should have been made by both applicant and AO. However, check what your policy says as some organisations still require at least this part to be completed with certain other sections. If your policy does not make it clear, seek advice.

FROM 1 NOVEMBER 2012 THERE WILL BE NO URGENT PROVISIONA AVAILABLE FOR LOCAL AUTHORITIES

16. If you are only entitled to act in urgent cases: explain why it was not reasonably practicable for the application to be considered by a fully qualified authorising officer.

This is because the legislation allows for a lower rank/grade to authorise in urgent cases for some organisations. Refer to your policy.

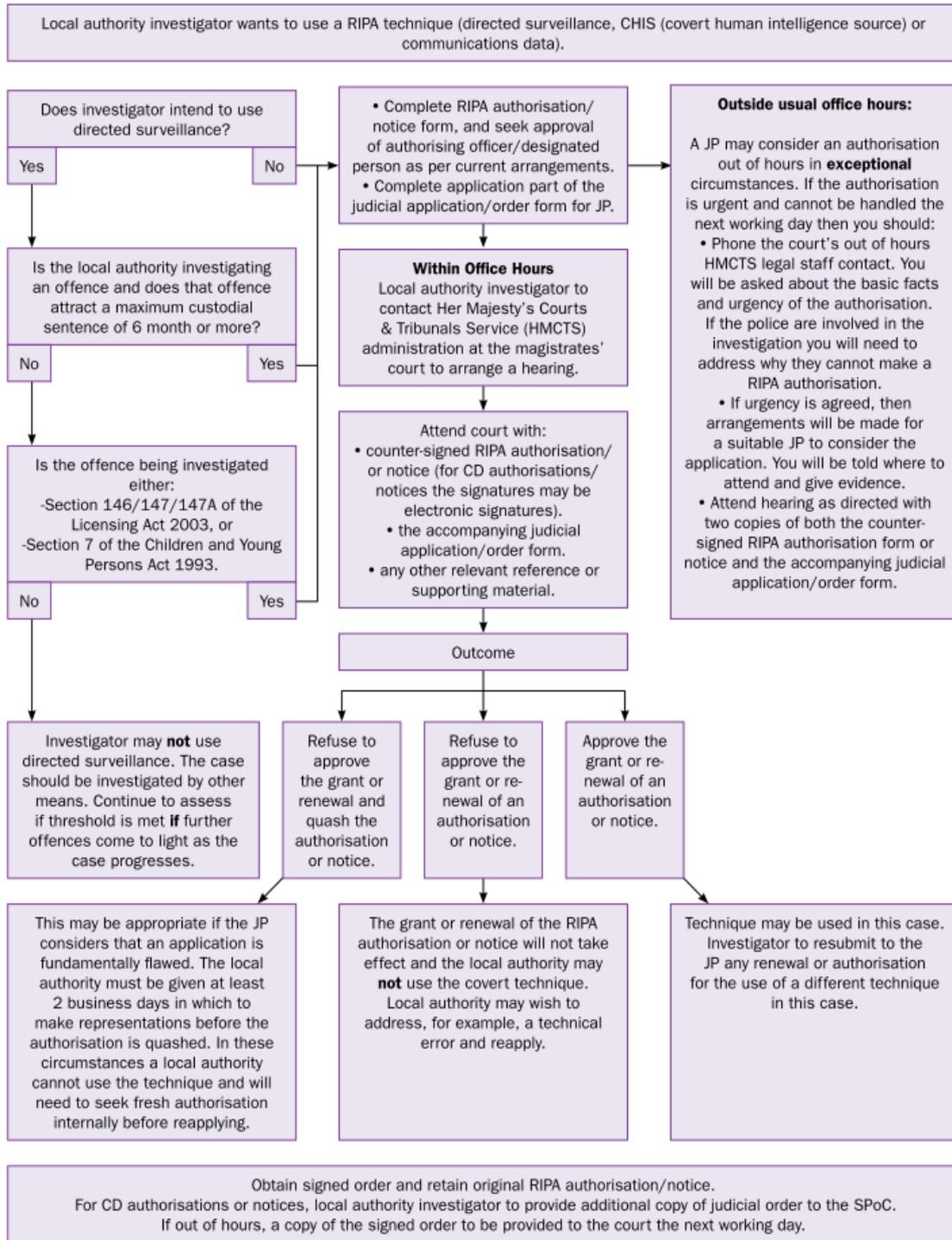
See Statutory Instrument 2010 No 521.

Name (Print)		Grade/ Rank		
Signature		Date and Time		

Urgent authorisation Expiry date:		Expiry time:	
<i>Remember the 72 hour rule for urgent authorities – check Code of Practice.</i>	e.g. authorisation granted at 5pm on June 1 st expires 4.59pm on 4 th June		

Appendix 2(a)

LOCAL AUTHORITY PROCEDURE: APPLICATION TO A JUSTICE OF THE PEACE SEEKING AN ORDER TO APPROVE THE GRANT OF A RIPA AUTHORISATION OR NOTICE



COPY APPLICATION FORM AND ORDER FOR JUDICIAL APPROVAL

Application for judicial approval for authorisation to obtain or disclose communications data, to use a covert human intelligence source or to conduct directed surveillance. Regulation of Investigatory Powers Act 2000 sections 23A, 23B, 32A, 32B.

Local authority:.....
Local authority department:
Offence under investigation:
Address of premises or identity of subject:
.....
.....

Covert technique requested: (tick one and specify details)

- Communications Data
- Covert Human Intelligence Source
- Directed Surveillance

Summary of details

.....
.....
.....
.....
.....

Note: this application should be read in conjunction with the attached RIPA authorisation/RIPA application or notice.

Investigating Officer:.....
Authorising Officer/Designated Person:
Officer(s) appearing before JP:
Address of applicant department:
.....
Contact telephone number:.....
Contact email address (optional):
Local authority reference:
Number of pages:.....

Order made on an application for judicial approval of communications data, to use a covert human intelligence source. Regulation of Investigatory Powers Act 2000

Magistrates' court:.....

Having considered the application, I (tick one):

- am satisfied that there are reasonable grounds for believing that the use of the covert human intelligence source is necessary in the interests of national security, the economic well-being of the United Kingdom, the physical or mental health of any individual, or the safety of any individual, and remain satisfied, and that the relevant conditions are met for the grant or renewal of the authorisation/notice.
- refuse to approve the grant or renewal of the authorisation/notice.
- refuse to approve the grant or renewal and quash the authorisation/notice.

Notes

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.....
.....

Reasons

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.....
.....

Signed:

Date:

Time:

Full name:

Address of magistrates' court:

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SOUTHEND-ON-SEA BOROUGH COUNCIL

Meeting of School Places Working Party

Date: Tuesday, 12th June, 2018

Place: Committee Room 2 - Civic Suite

Present: Councillor H Boyd (Chair)
Councillors A Bright, L Burton, A Chalk, J McMahon, D Nelson,
G Phillips and J Ware-Lane

In Attendance: S Leftley, B Martin, F Abbott, C Braun and J Edwards

Start/End Time: 6.00 - 7.25 pm

1 Apologies for Absence

None received.

2 Declarations of Interest

The following interests were declared at the meeting:-

- (a) Councillor Ware-Lane - Future Provision of Secondary Places in Southend – Non-pecuniary – daughter attends sixth form in borough; partner is a teacher at school in borough;
- (b) Councillor Burton - Future Provision of Secondary Places in Southend – Non-pecuniary – Director of English and Maths at SEEVIC College and schools discussed are feeder schools;
- (c) Councillor Chalk - Future Provision of Secondary Places in Southend – Non-pecuniary – previously worked at St Bernard's School;
- (d) Councillor Nelson - Future Provision of Secondary Places in Southend – Non-pecuniary – alumni of Greensward School, mentioned in discussion.

3 Terms of Reference of Working Party

Resolved:-

That the terms of reference of the Working Party be noted.

4 Minutes of the Meeting held on Monday, 6th February, 2017

Resolved:-

That the Minutes of the Meeting held on Monday, 6th February, 2017 be confirmed as a correct record.

5 Exclusion of the Public

Resolved:-

That, under Section 100(A)(4) of the Local Government Act 1972, the public be excluded from the meeting for the items of business set out below, on the grounds that they would involve the likely disclosure of exempt information as defined in Part 1 of Schedule 12A to the Act and that the public interest in maintaining the exemption outweighs the public interest in disclosing the information.

6 The Future Provision of Secondary Places in Southend

The Working Party considered a report of the Deputy Chief Executive (People) which provided a progress report on the strategy for the provision of secondary places.

The Working Party commented as follows:-

- Recognised the duty to provide sufficient school places and that all options need to be pursued to fulfil this duty, and we should take a longer term strategic approach.
- Noted the forecast position based on current figures, detailed at section 4.1 of the report and the years which have a potential shortfall and 3 years are below 1 form of entry.
- Noted position regarding headroom for places.
- Noted the balance needed between over-provision of secondary places & risk of under-provision.
- Noted the position with regard to housing forecasts, detailed at section 5 of the report, whereby pupil product from new Southend housing developments are included in forecasts once the development has been granted planning permission and the expected first occupation date is known.
- Noted that Access and Inclusion will be kept updated and work collaboratively across the council regarding the South Essex 2050 plan and Housing Strategy, to ensure that Members are kept informed of key future areas for place planning needs.
- Noted the position with regard to 2018 – 2028 year 7 secondary forecasts.
- Noted the position with regard to Essex schools which have capacity to meet current demands.

Resolved:-

That Cabinet be advised that the Working Party has the following comments:-

1. To agree the continuation of the current agreed expansions with all secondary schools
2. That a paper be developed, outlining pro's and con's on potential challenges, growth and options around how to deliver future school places in relation to continued expansion need beyond 2021 and future delivery of places across all phases due to housing growth in the area and linked to the local.

SOUTHEND-ON-SEA BOROUGH COUNCIL

Meeting of the Senior Management Pay Panel

Date: Tuesday, 17th July 2018

**Place: Executive Boardroom,
Civic Suite, Civic Centre, Southend-on-Sea**

Present: Cllr Lamb (Chair), Cllr Courtenay (Vice-Chair), Cllr Salter,
Cllr Gilbert, Cllr Woodley and Michelle Kirk (EELGA)

In attendance: A Griffin, J Ruffle, S.Putt

Start/End Time: 10.00am/

1 Apologies and substitutions

None

2 Declarations of interest

JR for item 5. JR withdrew from the discussion at the relevant point in the meeting.

3. Exclusion of the Public

Resolved:-

That, under Section 100(A)(4) of the Local Government Act 1972, the public be excluded from the meeting for the item of business set out below, on the grounds that it would involve the likely disclosure of exempt information as defined in Part 1 of Schedule 12A to the Act and that the public interest in maintaining the exemption outweighs the public interest in disclosing the information.

4 Senior Managers Pay Award 2017/18

The Panel considered the report of the Director of Transformation.

Resolved:

To recommend to Cabinet that they agree the following:

A pay award of 2% is applied to the senior management grades for

2018/19 effective from April 2018.

It was further noted that a salary benchmarking report be considered by the panel in Autumn 2018.

5 Appraisal and Target Setting

The panel considered the report of the Director of Transformation.

Resolved:

1. That the outcomes of the targets for 2017/18 be noted subject to minor amendments as agreed with the Chief Executive.
2. That the targets for Senior Managers for 2018/19 as recommended by the Chief Executive and the relevant Cabinet member be agreed subject to minor amendment as discussed with the Chief Executive.

It was further noted that the appraisal process for 2019/20 will be reviewed for consistency, transparency and efficiency.

CABINET

Tuesday, 18th September 2018

COUNCIL PROCEDURE RULE 46

The following action taken in accordance with Council Procedure Rule 46 is reported. In consultation with the appropriate Cabinet Member(s):-

1. The Deputy Chief Executive (People) authorised:

1.1 Adoption of the Agreed Syllabus for Religious Education in Southend from September 2018

The formal endorsement of the recommendation by SACRE (Standing Advisory Council for Religious Education) at its meeting on 5th July 2018 to adopt the syllabus by RE Today from 1st September 2018 as the agreed syllabus for non-aided maintained schools in the Borough to September 2023.

1.2 Re-commissioning of the Integrated Sexual Health Service (ISHS)

Following notification from the current provider (EPUT) of their intention to terminate the existing Sexual Health contract, the re-commissioning and preparation of the tender documentation has commenced for the procurement of a new contract to begin on 1st April 2019. The estimated contract costs are detailed on the confidential sheet.

1.3 Friars New Nursery Funding Agreement and PSP Southend LLP (The LLP)

The Council has bid for, and received just over £330,000 of funding from the Department for Education towards the construction of a new nursery building at Constable Way. The construction project is being delivered via PSP Southend LLP and this letter endorses the transfer of the funding from the Council to the LLP for the scheme to be delivered.

2. The Director of Finance and Resources authorised:

2.1 Disposal of 7 Ceylon Road, Westcliff on Sea

The sale, by auction, of the above-mentioned property which comprises two flats, with a recommended reserve of £300,000. The property is held under the general fund and which does not form part of the normal housing stock. The capital generated will be used to pay-down borrowing debt and assist with the Council's capital receipts generation target.

2.2 Airport Business Park Management Company Arrangements

The establishment of the estate management company for the Airport Business Park, enabling those tenants with major freehold and leasehold interests in the business park to become Directors of the company going forward and dealing with the Council's company administration matters.

By virtue of paragraph(s) 1 of Part 1 of Schedule 12A
of the Local Government Act 1972.

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