

CABINET

**Venue: Town Hall, Moorgate
Street, Rotherham. S60
2TH**

Date: Wednesday, 5 November 2014

Time: 10.30 a.m.

A G E N D A

1. To consider questions from Members of the Public.
2. To determine if the following matters are to be considered under the categories suggested in accordance with the Local Government Act 1972.
3. To determine any item which the Chairman is of the opinion should be considered as a matter of urgency.
4. Declarations of Interest.
5. Minutes of the previous meeting held on 15th October, 2014 (copy supplied separately)
6. Workplace Health Programme (herewith)) (Pages 2 - 41)
 - Director of Public Health to report.
7. Scrutiny Review: Access to GPs (report herewith) (Pages 42 - 55)
 - Director of Public Health to report.
8. Capital Programme : Capital Receipts Update (report herewith) (Pages 56 - 64)
 - Strategic Director of Environment and Development Services to report.
9. Rent Collection and Arrears Recovery Policy (report herewith) (Pages 65 - 89)
 - Strategic Director of Neighbourhoods and Adult Services to report.
10. Community Infrastructure Levy : Draft Charging Schedule (report herewith) (Pages 90 - 110)
 - Strategic Director of Environment and Development Services to report.
11. Revision to Standing Orders - Quorum for Cabinet (report herewith) (Pages 111 - 112)
 - Director of Legal and Democratic Services to report.

12. Exclusion of the Press and Public.
Resolved:- That, under Section 100A(4) of the Local Government Act 1972 (as amended March 2006), the press and public be excluded from the meeting for the following item of business on the grounds that it involves the likely disclosure of exempt information as defined in Paragraph 3 of Part I of Schedule 12A to the Local Government Act 1972 (information relating to the financial or business affairs of any particular person (including the Council)).
13. Sale of Unit 3, R-evolution Advanced Manufacturing Park* (report herewith) (Pages 113 - 116)
 - Strategic Director of Environment and Development Services to report.

In accordance with Section (7) of the Local Authorities (Executive Arrangements) (Meetings and Access to Information) (England) Regulations 2012 the Chairman of the Overview and Scrutiny Management Board has agreed that the item marked (*) contains a decision which needs to be acted upon as a matter of urgency and which cannot be reasonably deferred (see notice attached)

Cabinet Meeting – 5th November, 2014

Take notice, in accordance with Regulation 5 of the Local Authorities (Executive Arrangements) (Meetings and Access to Information) (England) Regulations 2012, that the following reports are to be considered in the private part of the meeting without having provided the required twenty-eight days' notice:-

- **Sale of Asset at AMP**

An exemption under Paragraph 3 (information in respect of financial and business affairs of the Council) of Part I of Schedule 12A of the Local Government Act 1972 is requested, as this report contains commercially sensitive information.

The Chair of the Overview and Scrutiny Management Board has agreed that this item is urgent and cannot reasonably be deferred.

Jacqueline Collins
Director of Legal and Democratic Services
24th October, 2014

ROTHERHAM BOROUGH COUNCIL – REPORT TO THE CABINET
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1.	Meeting:	The Cabinet
2.	Date:	05 November 2014
3.	Title:	Workplace Health Programme
4.	Directorate:	Public Health

5. Summary:

Supporting health during a person's working life is a key part of the life course approach to health and the Health and Wellbeing priority of early intervention and prevention.

In June 2014 Public Health England launched a new workplace health initiative; 'The Workplace Wellbeing Charter'. The Workplace Wellbeing Charter is a national framework for local Health and Wellbeing Boards to use as part of their work to address the health and wellbeing of adults, utilising the national framework will allow us to engage businesses and local chambers of commerce into making Rotherham's workforce healthier. The Workplace Wellbeing Charter will contribute to improving the health and wellbeing of working age people through promoting the positive links between health and work and helping more people with health conditions to stay in or return to employment.

6. Recommendations:

That The Cabinet adopts the following recommendations:

- 1. That Rotherham Metropolitan Borough Council: signs up to the Workplace Wellbeing Charter.**
- 2. That Rotherham Occupational Health Advice Service delivers the Workplace Wellbeing Charter as part of the Rotherham Public Health Workplace Health Service.**

7. Proposals and Details:

The Workplace Wellbeing Charter is a tool used by public health teams to encourage organisations to invest in the health and wellbeing of their staff, and is used as a management tool to audit, plan for improvements, and gain external recognition for the participating organisations.

Signing up to deliver the Workplace Wellbeing Charter in Rotherham will further demonstrate the council's commitment to the health and wellbeing of the people of Rotherham. It will send a strong message to employers and employees across Rotherham that Rotherham Metropolitan Borough Council is committed to reducing health inequalities and that the workplace provides a real opportunity to protect and improve the health and wellbeing of staff and to positively improve health behaviours.

The Workplace Wellbeing Charter will support and reward local businesses of all sizes for their commitment to their employees' health and wellbeing. The Workplace Wellbeing Charter provides a clear set of wellbeing standards, covering physical and mental health and health improvement.

Good health is now increasingly recognised as everyone's business. Making Every Contact Count is a way of drawing on the potential of employers in the private and public and third sectors to help tackle health inequalities through the influence they have over health in the workplace. The Charter standards complement the Making Every Contact Count framework.

Whilst the Framework is designed to assist organisations and individuals, the ultimate beneficiaries are of course people, communities and populations. Making Every Contact Count is a powerful tool to improve the health and wellbeing of the public.

The Workplace Wellbeing Charter comes in three levels, each containing different standards to achieve. Each of the three levels will consider issues such as leadership, sickness management, awareness of alcohol and drug misuse, smoking, sexual health, mental health and stress, healthy eating and physical activity.

The assessment contains standards under each of the main areas that an organisation can address to improve the health and wellbeing of their employees. The purpose of the standards are to provide a guide as to what steps can be taken and give an indication of where an organisation may need to improve, or where they are doing well. Under each area, the standards are separated into three categories: Commitment, Achievement and Excellence. These categories are there to provide a general overview as to how an organisation is performing in each area.

Commitment

The organisation has addressed each area and provides employees with the tools to help themselves to improve their health and wellbeing.

Achievement

Having put the building blocks in place, steps are being taken to actively encourage employees to improve their lifestyle and some basic interventions are in place to identify serious health issues.

Excellence

Not only is information easily accessible and well publicised, but the leadership of the organisation is fully engaged in wellbeing and employees have a range of intervention programmes and support mechanisms to help them prevent ill-health, stay in work or return to work as soon as possible.

There will be a requirement for Rotherham Metropolitan Borough Council to register as the commissioning organisation for the Workplace Wellbeing Charter so local businesses have one point of contact. This will be supported by a dedicated web page and resources made available via Public Health England. There will be no additional cost to the council for this resource.

The Workplace Wellbeing Charter assessments will be delivered by Rotherham Occupational Health Advice Service. Support for participating businesses would be provided by Rotherham Occupational Health Advice Service accredited staff and would vary dependant on the business needs. Our early engagement would focus on supporting small and medium size enterprises and businesses furthest from achieving the standards.

The latest sickness absence data available is for the 3 years 2009-2011 and shows that 2.9% of Rotherham employees had at least one day off in the previous week compared to, 2.2% in England and 2.3% Yorkshire and the Humber. The percentage of working days lost due to sickness absence was 2.3% in Rotherham compared to 1.5% in England and 1.7% in Yorkshire and the Humber. (Source: Labour Force Survey, Office for National Statistics).

According to research by PruHealth with Vitality and Mercer (2014), almost one in five (19%) British workers suffer from a chronic illness, including heart disease, diabetes and high blood pressure. Serious health problems cost employers £58 billion a year, the equivalent of 7.78% of their annual wage bill. Most employees are unaware of issues surrounding their health.

In October 2013 a meeting was held with stakeholders to discuss early proposals for how The Charter could be implemented in Rotherham. Further meetings have taken place with the Rotherham and Barnsley Chamber of Commerce and Rotherham Investment and Development Office regarding the introduction of the Workplace Wellbeing Charter in Rotherham. Initial feedback supports the introduction of The Workplace Wellbeing Charter. Discussions have also taken place with the Rotherham Metropolitan Borough Council Human Resources Director.

8. Finance:

Rotherham Occupational Health Advice Service currently has 2 part time members of staff delivering the Workplace Health Programme (1.76 whole time equivalent). The cost of the service including staff on costs is £58,927 per annum.

From October 2014 the Government will be phasing in a Health and Work Service that will be available for people who are off work for up to four weeks. The introduction of this service is likely to result in a gradual reduction in the referrals of those on short-term sick leave to the Primary Care Workplace Health Advice Service currently provided by Rotherham Occupational Health Advice Service. This will give Rotherham Occupational Health Advice Service the capacity needed to begin a phased introduction of the Workplace Wellbeing Charter to Rotherham business.

Implementation of the Workplace Wellbeing Charter in Rotherham will therefore be able to be delivered within existing budgets.

9. Risks and Uncertainties:

It is uncertain at this stage the number of employers who will sign up to the Workplace Wellbeing Charter.

10. Policy and Performance Agenda Implications:

There are two workplace health related indicators in the Public Health Outcomes Framework:

- sickness absence rate
- employment for those with Long Term health conditions/learning disability

The Workplace Wellbeing Charter is one of the key actions in the Public Health England Business Plan 2014 – 2015; Improving the public's health and wellbeing.

Rotherham Occupational Health Services work contributes to the delivery of the Health and Wellbeing Strategy, particularly the themes of prevention and early intervention and poverty.

11. Background Papers and Consultation:

1. Feedback from Liverpool Workplace Wellbeing Charter [W:\Public Health\02 Health Improvement\WWC Self Assessment Standards A4 Booklet Liverpool 2 WEB.pdf](#)
2. Workplace Wellbeing Charter Standards [W:\Public Health\02 Health Improvement\H@W Charter feedback liverpool.pdf](#)

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THE WORKPLACE
WELLBEING CHARTER
NATIONAL AWARD for ENGLAND

Funded in Liverpool by Liverpool City Council
Delivered by Health@Work

Self Assessment
STANDARDS

This pack contains an overview of the Workplace Wellbeing Charter, including the Charter Framework, the Assessment Standards and other useful information.

For additional information on the standards, the assessment process and to find local providers please visit:

www.wellbeingcharter.org.uk

On the site you will also find an online self–assessment tool in addition to useful and practical resources to help employers achieve the standards and improve the health and wellbeing of staff.

THE WORKPLACE WELLBEING CHARTER NATIONAL AWARD for ENGLAND

Welcome...

The Workplace Wellbeing Charter is an opportunity for employers to demonstrate their commitment to the health and well-being of their workforce. The positive impact that employment can have on health and wellbeing is now well documented. There is also strong evidence to show how having a healthy workforce can reduce sickness absence, lower staff turnover and boost productivity - this is good for employers, workers and the wider economy.

The Workplace Wellbeing Charter provides employers with an easy and clear guide on how to make workplaces a supportive and productive environment in which employees can flourish.

Organisations of all sizes can use the Charter standards. The entry level has been developed as a baseline for all businesses to achieve and acts as a useful checklist for smaller organisations to ensure legal obligations are met. The criteria for small businesses should not involve significant financial investments, and there are lots of free resources and guidance on the website as well as support from your local provider.

Employers who volunteer to sign up will find help and support available through the website. This will include a network of providers who can offer employers the services and advice they need to meet the Charter, and help them to build the healthy workforce that business needs for the future.

I urge all employers to consider signing up to the Charter, so they can take advantage of what it has to offer both them and their employees.



A handwritten signature in purple ink that reads "Carol Black".

Professor Dame Carol Black
Expert Adviser on Health and Work
to the Department of Health,
England

WHAT IS THE WORKPLACE WELLBEING CHARTER AND WHAT DOES IT OFFER?

The Workplace Wellbeing Charter is a statement of intent, showing your commitment to the health of the people who work for you.

Organisations using the Charter, benefit in many ways including:

- **The ability to Audit and Benchmark against an established and independent set of standards** – identifying what the organisation already has in place and what gaps there may be in the health, safety and wellbeing of your employees.
- **Developing strategies and plans** – The Charter provides a clear structure that organisations can use to develop health, safety & wellbeing strategies and plans
- **National recognition** – The Charter award process is robust and evidence based. With over 1,000 organisations across England holding the award, The Workplace Wellbeing Charter is now widely recognised as *the* business standard for health, safety & wellbeing across England. The award helps to strengthen the organisation's brand & reputation and supports in sales and marketing activities.

The Standards and the supporting toolkit materials and topic guides have been funded by Public Health England, and are free for all organisations to use on the website. The aim is to support local health and wellbeing partnerships and employers to maximise the potential of their staff, and to make small changes that have large impacts on staff health and wellbeing'.

Employers that sign up to any of the Public Health Responsibility Deal pledges concerning Health at Work, can use the Charter standards as a road map to fulfil the commitments made in the pledge. Similarly, employers that are taking action under the Workplace Wellbeing Charter may also wish to sign-up to the Health at Work pledges under the Public Health Responsibility Deal, in order to demonstrate their commitment in this area.

HOW DOES THE WORKPLACE WELLBEING CHARTER WORK?

Employers can sign up to it using our online self-assessment tool, and find out what they are already doing right, and where they need to improve.

It is relevant to all businesses, no matter how big or small they are, as long as they employ staff and can demonstrate their commitment to the health and wellbeing of those staff. It is open to all public, private and third sector organisations.

The Charter focuses on three key areas – leadership, culture and communication – where even small steps can make a big difference to the health of your staff, and therefore the health of your organisation.

The Workplace Wellbeing Charter comes in three levels, each containing different standards that need to be achieved. Some, or all, will be relevant to you depending on the size and direction of your organisation. The three levels are Commitment, Achievement and Excellence. You can find out about each of those three levels, and what is required to attain them, in the wording of the Charter itself and via our online self-assessment tool. You can progress from one to another by achieving all of the necessary standards.

For smaller organisations the Commitment level acts as a useful checklist to ensure legal obligations are met. The criteria for Commitment level should not involve significant financial investments, and there are lots of free resources and guidance on the website as well as support from your local provider.

Each of the three levels will consider, in different ways, issues such as leadership, sickness and absence management, awareness of alcohol and drug abuse, smoking, mental health and stress, healthy eating and physical activity.

If employers wish to be formally assessed against the standards there is a network of providers across England who can provide formal accreditation services. Providers are either Local Authorities or social enterprises commissioned to deliver on behalf of Local Authorities. Over 1,000 organisations have received the award across England, with a strong mix of small, medium and large employers across the private, public and third sectors.

To find a local provider simply logon to www.wellbeingcharter.org.uk

WHO IS THIS FOR?

The Workplace Wellbeing Charter is a voluntary, self-assessment scheme open to all public, private and voluntary sector organisations based in England. Whatever their size, all organisations and businesses can benefit from working towards Charter standards.

WHY YOU SHOULD TAKE PART?

There is a growing body of evidence to show the financial benefits enjoyed by organisations that implement well-being programmes, including reduced sickness absence, improved productivity and reduced staff turnover.

According to the Office of National Statistics 131 million days were lost due to sickness absences in the UK in 2013.

With employers and employees bearing the burden of sickness absence costs, and the economy losing the output of those who are not in work, it's in everyone's interests to improve the health and well-being of working age people.

The Chartered Institute for Personnel and Development agrees, pointing out that the high costs of absence and 'presenteeism' highlight the value of a strong focus on managing health for all organisations. Effective communications with employees and line managers to identify threats to well-being and a robust understanding of the causes of absence are an essential part of this to ensure effective and timely interventions.

'For many employers, the costs of ill-health, which, given the ageing population and the increase in chronic disease, will only grow in the absence of intervention, is enough to justify a comprehensive wellness scheme'.

PriceWaterhouseCoopers LLP, Building the Case for Wellness (2008).

CHARTER FRAMEWORK

To achieve the maximum benefit and return on employee health and well-being, it is important your organisation has three key elements in place to make your initiatives both successful and sustainable – Leadership, Culture and Communication.

The diagram below shows some examples of what could support each of these areas.

The Three Key Elements of the Charter Framework



THE STANDARDS OF THE WORKPLACE WELLBEING CHARTER

This self-assessment contains standards under each of the main areas that your organisation can address to improve the health and well-being of your employees. The purpose of the standards are to provide a guide as to what steps can be taken and give an indication of where you may need to improve, or where you are doing well.

Under each area, the standards are separated into three categories: Commitment, Achievement and Excellence. These categories are there to provide a general overview as to how you are performing in each area.

COMMITMENT

Your organisation has a set of health, safety and wellbeing policies in place and has addressed each area, providing employees with the tools to help themselves to improve their health and well-being.

ACHIEVEMENT

Having put the building blocks in place, steps are being taken to actively encourage employees to improve their lifestyle and some basic interventions are in place to identify serious health issues.

EXCELLENCE

Not only is information easily accessible and well publicised, but the leadership of the organisation is fully engaged in well-being and employees have a range of intervention programmes and support mechanisms to help them prevent ill-health, stay in work or return to work as soon as possible.

GUIDANCE

In order to progress from one level to another within any one area, e.g. from commitment to achievement within Physical Activity, you must fully meet all of the standards in the lower level.

Against each standard are four options. These indicate where your organisation currently stands on any particular issue:

THE WORKPLACE WELLBEING CHARTER NATIONAL AWARD *for* ENGLAND

Fully Met (FM)

Every aspect of the standard has been met or exceeded. The organisation can evidence this both by documented and practical examples where applicable.

Partially Met (PM)

Some or most of the standard has been met and can be evidenced. This option should be selected if the organisation undertakes activities to meet the standard but cannot evidence it or have not effectively communicated with employees about it.

Not Met (NM)

None or very little of the standard has been met. This option should be selected if activities, procedures or systems are still under development or have not been implemented.

Not Applicable* (NA)

The standard covers an area that does not relate to the organisation due to the nature of its activities, location or other practical reason.

For additional information on the standards, the assessment process and to find local providers please visit:

www.wellbeingcharter.org.uk

On the site you will also find an online self – assessment tool in addition to useful and practical resources to help employers achieve the standards and improve the health and wellbeing of staff.

Leadership

Commitment	FM	PM	NM	NA	Notes/Evidence
The organisation has assessed its needs and priorities around health and work.	●	●	●	●	
Management can demonstrate the process for ongoing consultation and communication with staff on relevant workplace health issues. (Where there is a recognised Trade Union, this should be through an appropriate agreement with them.)	●	●	●	●	
Senior Management encourage a consistent and positive approach to employee well-being throughout the organisation.	●	●	●	●	
The organisation is aware of its responsibilities under the Equality Act 2010 and other equality legislation is known and adhered to.	●	●	●	●	
There is an effective communication policy in place.	●	●	●	●	
An effective policy and procedure to tackle bullying and harassment has been implemented.	●	●	●	●	
Flexible working practices and family friendly policies are in place.	●	●	●	●	
An effective policy is in place for whistle-blowing.	●	●	●	●	
Effective policies are in place to manage disciplinary and grievance procedures.	●	●	●	●	

Achievement					
A system is in place that recognises and rewards good work.	●	●	●	●	
Managers understand the main issues that impact on the health and well-being of their team.	●	●	●	●	
Line managers have relevant leadership and management training.	●	●	●	●	
Excellence					
Line managers demonstrate regular joint working and shared decision making with employees and empower employees to work in an independent way.	●	●	●	●	
Line Managers have training in how to have difficult conversations, developing people skills and resolving disputes.	●	●	●	●	
Employees are offered learning and development opportunities to maximise their potential.	●	●	●	●	
Evidence of managing organisational development and change appropriately.	●	●	●	●	
The organisation has a health, work and well-being strategy in place with a detailed action plan.	●	●	●	●	

Absence Management

Commitment	FM	PM	NM	NA	Notes/Evidence
A clear attendance management policy is in place and procedures are known to staff.	●	●	●	●	
Contact is maintained with absent employees to provide support and aid return to work.	●	●	●	●	
Documented return to work procedures are in place and followed.	●	●	●	●	
Return to work interviews are conducted and recorded with concerns /appropriate support recorded and provided.	●	●	●	●	
Specific risk assessments for individuals are conducted and take into account a person's health status.	●	●	●	●	
Reasonable adjustments are available to employees in line with recommendations made in a Statement of Fitness for Work.	●	●	●	●	
Achievement					
Absence rates and causes are collected and monitored.	●	●	●	●	
Interventions are undertaken where patterns indicate trends of absence.	●	●	●	●	
Managers have participated in Attendance Management training.	●	●	●	●	

Excellence					
Absence trends are monitored across the organisation and specific programs are designed and implemented to address the issues identified to prevent further absence.	●	●	●	●	
The organisation's return to work policies are designed to support sustainable rehabilitation and early return to work with adjustments made to accommodate this when necessary.	●	●	●	●	
The organisation has a proactive system in place to support staff on long term sick to return to work and will raise awareness of and support staff with long term conditions.	●	●	●	●	

Health and Safety

Commitment	FM	PM	NM	NA	Notes/Evidence
Demonstrate an awareness of legal obligations in relation to health and safety.	●	●	●	●	
Relevant health and safety policies and procedures are in place to demonstrate compliance with health and safety legislation.	●	●	●	●	
A risk assessment programme has been implemented and all staff are informed of the workplace risks that affect them and the controls in place.	●	●	●	●	
The workplace environment is conducive to health and employee welfare should be addressed – drinking water, washing facilities, clean toilets, eating facilities etc.	●	●	●	●	
Health and safety training has been given to all staff.	●	●	●	●	
Achievement					
Systems are in place for staff to raise and resolve health and safety issues.	●	●	●	●	
All health and safety policies and workplace activities are regularly monitored for new hazards and improvements are made.	●	●	●	●	

Excellence					
There are identified health and safety representatives (Trade union and/or company representatives).	●	●	●	●	
Staff representatives have been involved in the development and/or evaluation of health and safety policies.	●	●	●	●	
There is a clear emphasis on prevention of ill health across all health and safety policies.	●	●	●	●	
All managers have received health and safety management training.	●	●	●	●	
Regular health and safety meetings are held and recorded.	●	●	●	●	

Mental Health

Commitment	FM	PM	NM	NA	Notes/Evidence
Provide information to employees to reduce the stigma around mental ill-health.	●	●	●	●	
Provide information about mental health and well-being, including work-related stress, and additional further information readily available to staff at all levels.	●	●	●	●	
The organisation ensures that employees are made aware of their legal entitlements regarding working conditions.	●	●	●	●	
The organisation has implemented a mental wellbeing policy that follows the principles of the Health and Safety Executives Management Standards for Stress.	●	●	●	●	
Ensure employees are aware that mental health and well-being issues are valid and people seeking to address these issues are fully supported by the organisation at all levels.	●	●	●	●	
Achievement					
Mental health management training is able to be accessed to help managers identify employees with potential issues.	●	●	●	●	
The organisation has an individual performance review system in place. This allows employees to comment on work related and personal issues that affect their performance and enables training needs to be identified.	●	●	●	●	
The organisation has a protocol in place for the use of risk assessments to prevent stress. This is conducted on an individual and organisational level and is regularly reviewed.	●	●	●	●	
Education and development opportunities are routinely available to managers and staff to enhance their skills and knowledge around workplace mental health issues.	●	●	●	●	
The organisation provides appropriate avenues of communication to keep staff at all levels informed of changes.	●	●	●	●	

Excellence					
A mental health and well-being strategy/stress prevention strategy is in place and followed. This should highlight the promotion of mental wellbeing to the organisation and address investment in the mental wellbeing of the workforce.	●	●	●	●	
Mental health awareness training is available for all employees and it has been delivered to the majority of employees.	●	●	●	●	
Staff consultations/surveys take place that seek information on the mental wellbeing of staff and also covers working conditions, communication, work life balance, cost of living wage, staff support and work related or other causes of stress, with action plans drawn up to address major issues.	●	●	●	●	
The organisation provides a confidential support service in-house or externally to individuals who come forward with a problem.	●	●	●	●	
Ensure organisational and individual change is accompanied by support, information or targeted intervention programmes e.g. retirement, redundancy planning.	●	●	●	●	
Social support groups, volunteering and out-of-work activities are actively encouraged and supported by the organisation.	●	●	●	●	

Smoking and Tobacco

Commitment	FM	PM	NM	NA	Notes/Evidence
Management are aware of their duties under smoke-free legislation and are in compliance.	●	●	●	●	
All staff are aware of the smoke-free and tobacco control laws and how they are applied in their workplace.	●	●	●	●	
Sources of further information and support to quit smoking are readily available.	●	●	●	●	
A working smoke-free policy is in place and staff are aware of it.	●	●	●	●	
The smoke-free policy extends to all smoking habits including Electronic-cigarettes.	●	●	●	●	

Achievement					
Building managers, reception staff, ground staff and those operating in communal areas are aware of how to report breaches of the smoke-free policy.	●	●	●	●	
Excellence					
All open areas (outdoor) are clearly signposted as smoke-free and steps are taken to prevent smoking in these areas.	●	●	●	●	
Actively promote 'stop-smoking' services and allow staff time to attend.	●	●	●	●	

Physical Activity

Commitment	FM	PM	NM	NA	Notes/Evidence
A physical activity statement is in place and employees are aware of it.	●	●	●	●	
Information is made available on the benefits of physical activity.	●	●	●	●	
The minimum legally required breaks are taken by all staff.	●	●	●	●	
Staff are encouraged to take regular breaks.	●	●	●	●	
Achievement					
Physical activity in the workplace is actively encouraged and supported by the physical environment.	●	●	●	●	
Physical activity opportunities in the local area are actively promoted to staff and supported by the organisation.	●	●	●	●	

Excellence					
<p>Opportunities for physical activity linked to the workplace have been investigated and implemented. These activities are sustained over long periods to become embedded in the organisational culture.</p>	●	●	●	●	
<p>Tailored programmes to improve understanding and take-up of physical activity are offered.</p>	●	●	●	●	
<p>The organisation has a travel plan that promotes physically active ways of getting to and from work and travelling between meetings.</p>	●	●	●	●	

Healthy Eating

Commitment	FM	PM	NM	NA	Notes/Evidence
A healthy eating statement is in place and employees are aware of it.	●	●	●	●	
Appropriate, acceptable and accessible information on healthy eating is provided.	●	●	●	●	
Any kitchen facilities or beverage areas are in good condition and conform to the highest possible standards and requirements of food hygiene.	●	●	●	●	
Wherever possible, eating facilities that are clean and user friendly are provided away from work areas. Use of these facilities is promoted to enable regular breaks away from the work area.	●	●	●	●	
Achievement					
Any on-site catering facilities provide healthier options that are actively promoted.	●	●	●	●	

Excellence					
<p>A corporate healthy eating food plan, guidelines or similar has been produced in consultation with staff that covers:</p> <ul style="list-style-type: none"> • Corporate hospitality • Catering provision • Local sourcing of food using local providers • Vending/in-house catering pricing strategy to promote healthy options • Local healthy food availability for staff considered as part of facilities management. 	●	●	●	●	
<p>Tailored programmes to improve understanding and take-up of healthier diets are offered.</p>	●	●	●	●	
<p>Internal or external support is on offer for those who wish to lose weight.</p>	●	●	●	●	
<p>Rolling schedule of planned events to promote the importance of healthy eating are in place.</p>	●	●	●	●	

Alcohol & Substance Misuse

Commitment	FM	PM	NM	NA	Notes/Evidence
A working Alcohol and Substance Misuse Policy is in place, regarding the use of alcohol and other substances in the workplace, that is clear and consistent.	●	●	●	●	
Employees are provided with information about the effects of alcohol and substance misuse that is appropriate, acceptable and accessible.	●	●	●	●	
Alcohol policy includes guidelines on the use of alcohol at business functions.	●	●	●	●	
Employees are supported in seeking help to treat alcohol or substance misuse issues. This includes providing sources of further information and support that are readily available.	●	●	●	●	
Achievement					
Organisational code of conduct and behaviour in relation to alcohol and substances has been well established and well publicised.	●	●	●	●	
New employees are made aware of how to access relevant policies, information and support services at the point of induction.	●	●	●	●	

Excellence					
Managers at all levels are aware of the link between alcohol, substance misuse and mental health in the workplace and aware of why staff may be reluctant to come forward with related problems. Managers actively promote the use of external help and rehabilitation when approached.	●	●	●	●	
Employees are aware of link between alcohol, substance misuse and mental health in the workplace.	●	●	●	●	
Staff representatives from various levels of the organisation are involved in the development or review of the policy which addresses alcohol and other substances.	●	●	●	●	
Managers have access to information on how to identify the signs of alcohol / substance misuse and are aware of where to obtain support or signpost employees with a problem.	●	●	●	●	
Employees have access to alcohol awareness training and it has been delivered to the majority of the employees.	●	●	●	●	

HOW DO I DO THIS?

1. How healthy is your business?

- Health surveys
 - health status of staff and the business
 - awareness of health needs
 - ask them!

2. Is workplace health embedded into your business?

- Identify a workplace health and well-being champion
- Board reports on progress
- Policies and procedures in place

3. Are you engaging with your staff?

- Staff focus-groups
- Suggestion box
- Health, Work and Wellbeing group
- Good communication using appropriate media

4. What will success look like?

- Action plans
- Identify quick wins and longer term goals
- Make local connections to health promotion teams

5. How will you know you have got it right?

- Evaluate your programme
- Record your progress
- What changes in absenteeism have you seen?
- Has it been easier to recruit new staff?
- Has your staff turnover reduced?
- Have you seen an improvement in productivity?
- Has your business reduced costs?
- Is there a change in morale? Make sure you find out staff opinion!
- Is there a change in disciplinary numbers?

FURTHER NOTES/EVIDENCE



**THE WORKPLACE
WELLBEING CHARTER**
NATIONAL AWARD for ENGLAND

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The Workplace Wellbeing Charter



The story so far...

The Charter

The Workplace Wellbeing Charter is an opportunity for employers to demonstrate their commitment to the health and well-being of their workforce.

The Charter provides employers with an easy and clear guide on how to make workplaces a supportive and productive environment in which employees can flourish.

It provides a clear set of wellbeing standards, taking a holistic approach that includes physical and mental health, health promotion and ways to evaluate the services and information you are offering. It also aims to share best practice about health and wellbeing within the workplace.

The Charter focuses on three key areas - leadership, culture and communication - where even small steps can make a big difference to the health of staff, and therefore the profitability of an organisation.

The Workplace Wellbeing Charter is open to all and comes in three levels, each containing different standards that need to be achieved. Some, or all, will be relevant, depending on the size and direction of the organisation.

The support offered in Liverpool consists of:

- An initial meeting with a professional workplace health advisor to discuss the different levels, the organisation's current health and wellbeing activity, and to decide which level to aim for.
- An in-depth consultation to identify gaps in the workplace health strategy and offer advice and support to ensure a holistic approach to health, safety and wellbeing and the achievement of the Charter standards.
- Charter accreditation meeting; a trained consultant will review the collated evidence and talk to staff about their experience of health, safety and wellbeing within their workplace.



The story so far

The development of the Charter was a recommendation from the University of Liverpool's Health is Wealth Commission's final report in 2009.

Liverpool Primary Care Trust identified an opportunity to develop a product that could be used to stimulate positive change among employers and subsequently worked with Health@Work to design, develop and deliver the Charter across Liverpool.

The Workplace Wellbeing Charter was launched in Liverpool in April 2010 as part of the Year of Health and Wellbeing, driven forward by Liverpool PCT and Liverpool City Council.

In the first year 56 organisations were accredited

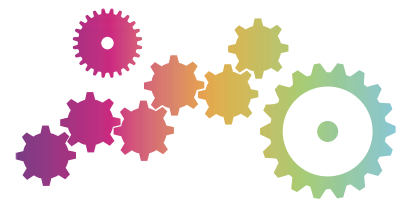
Between April 2011 and March 2012 126 organisations were accredited

Between April 2012 and March 2013 185 organisations will be accredited

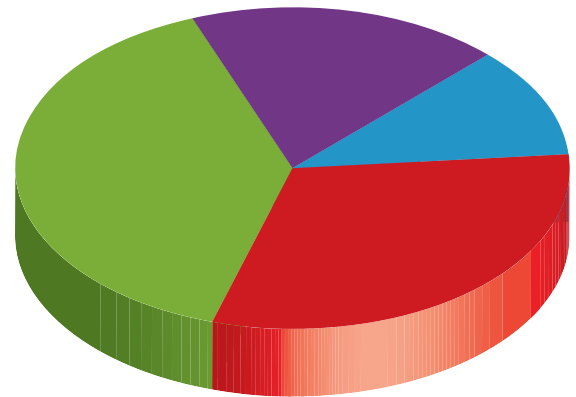
Health@Work has also been delivering the Charter in Ashton, Leigh and Wigan on behalf of Active Wigan and the Primary Care Trust, since April 2012. This is the start of a three year programme that will result in 120 organisations being accredited.

Organisations benefitting from the programme range from small to very large employers:

A Quiet Place, Liverpool Hope University, Alzheimer's Society, Medicash, Abercromby Nursery, Met Quarter, Documents Direct, Merseyside Network for Europe, John Lennon Airport, Symphony Housing Group, Five for Families Trust, KIND, HMP Liverpool, Kuumba Imani Centre, Liverpool City Council, Everton Children and Family Centre, HMRC Queens Dock, GMB, Marriott Hotel, Liverpool Muslim Society, Liverpool Lighthouse, STEC, Liverpool City Council Ethnic Minority & Traveller, City Square Liverpool, Everton Children and Family Centre, Achievement Service, Liverpool Chamber of Commerce, KIND, Gillmoor Medical Centre, St Paschal Baylon's school, Mencap, Westminster MC, Job Centre Plus, Kenyon Fraser and many more.



Size of Liverpool Charter Organisations



- Large 250+ employees
- Medium 26-249 employees
- Small 6-25 employees
- Micro 1-5 employees

What the clients have to say...

96% used the Charter to demonstrate their commitment to health

Employers agreed there were very high levels of awareness of the intervention

83% have directly benefitted from the programme

The top benefits identified are:

- Levels of awareness and activity regarding health and wellbeing increased
- Staff morale increased
- Improved policies and procedures

“It has opened management’s eyes to happy healthy employees improving their productivity. There’s a realisation it is important and it’s cheap to implement”

“There have been no real interventions previously in the workplace - it’s a new fresh idea”

“Taking part in this initiative has instilled confidence within the team”

“We were able to show that we are committed to the well-being of our staff. The programme also highlighted where we can offer further help to our staff. It has been a worthwhile initiative to complete as an organisation and we are really pleased to show our commitment to our staffs well being.”

“Worthwhile programme, found the process easy to follow and well delivered by Health@Work, we are thrilled to have achieved the Charter”

“I found the Charter process really easy to follow and I was really impressed with the support I received from Health@Work, they were really flexible, professional and extremely helpful”

“The process was really quite straight forward; the evidence produced was scrutinised by Health@Work, who helped coach us in the right direction to ensure completion of the Charter.”

“Since achieving an ‘Excellence’ rating, HMP Liverpool have encouraged prison service employees and prisoners to stay fit and well, identify potential health problems, improving staff morale and effectiveness and reducing sickness absence levels”

What the employees have to say...

- 1 in 3 stated the programme had made a great deal or noticeable difference to their health and wellbeing
- Another 1 in 3 felt the programme had made some difference
- That is 20,000 people! Or 17% of the full time employees in Liverpool!

Differences in health and wellbeing most likely to be:

- Increased awareness of health issues
- More healthy eating
- Improved staff morale

Medicash health reward

A LIVERPOOL health insurer was rewarded for its efforts to boost staff health.
Medicash has been named the Workplace Wellbeing Champion for Liverpool F.C. for a month of getting ahead in the charts. The award is given to the company that has the most successful health and safety record.

Government sickness absence review

Health and Safety Executive (HSE) has announced a new government review of the current system for reporting and recording sickness absence. The review will be led by the HSE's Director of Health and Safety, Dr. David Green. The review will consider the current system for reporting and recording sickness absence, and will also consider the impact of the new Health Protection Act 2009 on the current system.



Dr. David Green, Director of Health and Safety, HSE.

make working good for you

Medicash has been named the Workplace Wellbeing Champion for Liverpool F.C. for a month of getting ahead in the charts. The award is given to the company that has the most successful health and safety record. Medicash has implemented a range of measures to improve the health and safety of its staff, including a comprehensive health and safety training programme and a range of health and safety initiatives.



Medicash staff members participating in a health and safety training session.

Good to see sick days are falling

Medicash has been named the Workplace Wellbeing Champion for Liverpool F.C. for a month of getting ahead in the charts. The award is given to the company that has the most successful health and safety record. Medicash has implemented a range of measures to improve the health and safety of its staff, including a comprehensive health and safety training programme and a range of health and safety initiatives.

Hotel sets standards

The Marriott Hotel in Liverpool has been recognised for its efforts in maintaining "high standards of workplace wellbeing". The hotel has implemented a range of measures to improve the health and safety of its staff, including a comprehensive health and safety training programme and a range of health and safety initiatives.



More firms sign up for stress-busting service

LIVERPOOL charity HealthWorks has reported an increase in the number of firms signing up for its stress-busting service. The service is designed to help firms manage the stress of their staff and improve their overall health and safety record. HealthWorks has implemented a range of measures to improve the health and safety of its staff, including a comprehensive health and safety training programme and a range of health and safety initiatives.

Making health a top priority

HealthWorks CIC has announced its plans to make health a top priority for its staff. The charity has implemented a range of measures to improve the health and safety of its staff, including a comprehensive health and safety training programme and a range of health and safety initiatives. HealthWorks has implemented a range of measures to improve the health and safety of its staff, including a comprehensive health and safety training programme and a range of health and safety initiatives.

Push to make Bold Street the healthiest in Liverpool



A group of people are pushing to make Bold Street in Liverpool the healthiest in the city. They have implemented a range of measures to improve the health and safety of the street, including a comprehensive health and safety training programme and a range of health and safety initiatives. The group has implemented a range of measures to improve the health and safety of the street, including a comprehensive health and safety training programme and a range of health and safety initiatives.



HealthWorks representative speaking at a health and safety event.

Andy Bell and Steve Woodhead of Liverpool F.C. and Ken Pym of FWA have been awarded the Healthy Outlook for Businesses award. The award is given to the company that has the most successful health and safety record. Andy Bell and Steve Woodhead of Liverpool F.C. and Ken Pym of FWA have been awarded the Healthy Outlook for Businesses award.

A group of people have been awarded the Award for Healthy Workers. The award is given to the company that has the most successful health and safety record. A group of people have been awarded the Award for Healthy Workers.

A Liverpool health insurer was awarded for its efforts to boost staff health. Medicash has been named the Workplace Wellbeing Champion for Liverpool F.C. for a month of getting ahead in the charts. Medicash has implemented a range of measures to improve the health and safety of its staff, including a comprehensive health and safety training programme and a range of health and safety initiatives.

Press and media coverage

Why do we need workplace health and well-being programmes?

131 million days were lost due to sickness absences in the UK in 2011. [Source: Office of National Statistics Sickness Absence in the Labour Market, April 2012]

For many organisations the cost of absenteeism alone can be huge. Below are some examples based on 2011 from the Chartered Institute of Personal Development's Absence Survey Report.

Public Services

In the public sector the average days lost per employee per year is 9.6 and the average cost per employee per year is £889. An organisation in this sector employing 1000 people will have a cost of absenteeism of around £889,000.

Production and Manufacturing

In the production and manufacturing sector the average days lost per employee per year is 6.5 and the average cost per employee per year is £754. An organisation in this sector employing 250 people will have a cost of absenteeism of around £188,500.

Call Centre

In the call centres the average days lost per employee per year is 12.4 and the average cost per employee per year is £940. An organisation in this sector employing 250 people will have a cost of absenteeism of around £235,000.

Professional Services

In the professional services sector the average days lost per employee per year is 5.1 and the average cost per employee per year is £904. An organisation in this sector employing 50 people will have a cost of absenteeism of around £45,200.

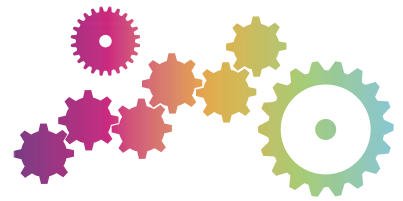
Evidence suggests the cost benefit ratio for programmes targeting absenteeism is between 2.5 and 10.1. [Source: Nice Synopsis of Evidence]

Physical activity programmes at work have been found to reduce absenteeism by up to 20%: Physically active workers take 27% fewer sick days. [Source: Department of Health research July 2011]

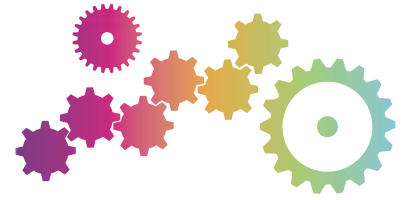


Beyond Liverpool

The Workplace Wellbeing Charter, designed and developed in Liverpool, was adopted in its entirety as the national model and endorsed by Dame Carol Black the National Director for Health and Work.



The Charter is now recognised across the UK and is being actively delivered in many areas. Health@Work works alongside partners across Merseyside, Greater Manchester, Lancashire, the South West, Bristol, Coventry, London and the North East. Training, advice and consultancy have been delivered to disseminate the experience Liverpool has in the promotion and implementation of the Workplace Wellbeing Charter.



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Primary Care Trust

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ROTHERHAM BOROUGH COUNCIL – REPORT TO MEMBERS
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1.	Meeting:	Cabinet
2.	Date:	5th November 2014
3.	Title:	Scrutiny Review: Access to GPs
4.	Directorate:	Resources All wards

5. Summary

This report sets out the response of NHS England (NHS E) the GP service commissioner and Rotherham Clinical Commissioning Group (CCG) to the Review. When the review was compiled it was still unclear to what extent the Care Quality Commission (CQC) the GP regulator would consider access under its new inspection regime. It is clear that this now forms a major part of the new inspections.

The CCG and NHS England will be developing a Rotherham based plan to improve healthcare in the Borough. Both NHS England and the CCG recognise the contribution the review will make to informing this “place based plan”.

6. Recommendations

6.1 That Cabinet receives the response to the Scrutiny Review.

6.2 That Cabinet request the Health and Wellbeing Board to ensure responsible Agencies report progress to the Board.

6.4 That Cabinet considers the future reporting arrangements for Scrutiny Reviews relating to other agencies in relation to the role of the Health and Wellbeing Board.

7. Proposals and details

- 7.1 Following discussion at Health Select Commission meetings a scrutiny review of Access to GPs was agreed as a priority in the work programme for 2013-14 as Members had raised concerns about waiting times for GP appointments on the basis of public feedback.
- 7.2 The key focus of Members' attention was to identify any anomalies, issues or barriers which impact on patients in Rotherham accessing their GP and in particular in respect of obtaining a convenient appointment within 48 hours.

There were seven aims of the review, which were to:

- establish the respective roles and responsibilities of NHS England and GP practices with regard to access to GPs
- ascertain how NHS England oversees and monitors access to GPs
- identify national and local pressures that impact on access to GPs – current and future
- determine how GP practices manage appointments and promote access for all patients
- identify how NHS England Area Team will be responding to changes nationally
- consider satisfaction data from the GP Patient Survey on a practice by practice basis and to compare Rotherham with the national picture
- identify areas for improvement in current access to GPs (locally and nationally)

- 7.3 A full scrutiny review was carried out, chaired by Cllr Emma Hoddinott and evidence gathering began in October 2013, concluding in March 2014. This comprised round table discussions and written evidence from health partners, reviewing the National GP Patient Survey data, desktop research and fact finding visits to four GP practices.
- 7.4 Members recognised the national and local pressures that impact upon access to GPs. On the supply side there is reducing funding, shortages of GPs and nurses, and premises that are not always suitable for the increasing range of services now delivered at GP practices. Patient demographics with a growing and ageing population, coupled with the prevalence of ill health and long term conditions, and local deprivation in some areas, means increasing demand. This needs adequate resourcing to ensure good access to services for all patients.
- 7.5 Patients' experiences of accessing GPs do vary from practice to practice with some long waiting times reported. Expectations and preferences are changing and it is a question of striking a balance between clinical need, patient expectations and convenient access, with practices needing to work with their patients to develop systems that work well for both. Patient education and information is also important.
- 7.6 GPs offer a range of appointment booking systems and one size does not fit all given the variations in practice size and practice populations. Members noted some very good practice and willingness to trial new systems but would like all practices to consider opening up some time each day for sit and wait appointments.

7.7 There are 12 recommendations, set out in full in section 7 of the review report and these are summarised below, covering the following areas:

Improving access – ensuring patients’ views on access and ways to improve are heard; maintaining access to professional interpretation services; and adopting hybrid and flexible approaches to appointment systems.

Sharing good practice – showcasing best practice and sharing successes on providing good access to patients.

Improving information for patients – maintaining up to date information about each GP practice; the importance of cancelling unneeded appointments; and accessing the right health care service and health care professional at the right time.

Capacity to deliver primary care – mitigating risk to primary care in Rotherham in light of future challenges; encouraging GPs to remain in Rotherham after training; and being proactive about future increases in demand.

8. Finance

NHS Bodies will need to incorporate any financial consequences in their annual planning arrangements.

9. Risks and Uncertainties

It is important that people in all parts of the borough have accessible and high quality primary health care. Due to the demographic profile of Rotherham with an ageing population and high incidence of limiting long term conditions, demand for GP services is likely to increase further over time.

The national review of the Personal Medical Services contracts by NHS England poses a risk of reduced financial resources for the majority of our GP practices and therefore to future services.

10. Policy and Performance Agenda Implications

RMBC Corporate Plan Priorities:

- Helping to create safe and healthy communities.
- Ensuring care and protection are available for those people who need it most.

Health and Wellbeing Strategy

Public Health Outcomes Framework

11. Background Papers and Consultation

See Section 8 of the review report and appendices.

12. Author

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Cabinet's Response to Scrutiny Review Access to GPs

Recommendation	Cabinet Decision (Accepted/ Rejected/ Deferred)	Cabinet Response (detailing proposed action if accepted, rationale for rejection, and why and when issue will be reconsidered if deferred)	Agency Responsible	Action by (Date)
<p>1. Patients' experiences of accessing GPs vary from practice to practice; therefore NHS England needs to ensure that patients' views on access are reflected in the forthcoming Personal Medical Services contract re-negotiations and five year commissioning plan.</p>	Accepted	<p><i>Context</i></p> <p><i>Contract negotiations are currently at a National Level for the GP Contract. PMS Contracts are being reviewed and in some practices reduced. Local variation will not be possible by NHS England. Responsibility for overseeing the GP Contract is however proposed to be shared with local management by the CCG and the development of local place based services. Such services would be commissioned separately from the core contract. Each area will be responsible for developing a "place based plan".</i></p> <p><i>The new CQC inspection regime focusses on patient experience and quality of that experience as part of the regime.</i></p> <p><i>Access will form a key aspect of CQC inspection of the NHS. All General Practices will be inspected and rated from October</i></p> <p>NHS England Response</p> <p>NHS England take seriously the results of the National Patient Survey and include these in our monitoring of all primary care contractors.</p> <p>We agree that the way patients access GPs still vary from</p>	<p>NHS England Rotherham CCG CQC</p>	<p>October 2014 CQC visits begin</p> <p>April 2015 Place Based Plan in Place for Rotherham</p>

Recommendation	Cabinet Decision <i>(Accepted/ Rejected/ Deferred)</i>	Cabinet Response <i>(detailing proposed action if accepted, rationale for rejection, and why and when issue will be reconsidered if deferred)</i>	Agency Responsible	Action by (Date)
		<p>practice to practice. It is important however to recognise that an increasing numbers of practices are offering new innovative ways of contact with patients e.g. electronic prescriptions, text reminders and there is further scope for e-consultations etc. We will be working with CCGs to encourage those practices that have not yet done so, to embrace new technologies.</p> <p>We also recognise that the move to deliver fair equitable funding to all GP practices, through reviewing Personal Medical Services contracts and the impact of the phasing out of Minimum Practice Income Guarantee, with redistribution of resources back into general practice, could have a destabilising effect on some practices. Therefore we are working with Rotherham CCG to develop a coherent place based strategy for improving health care and outcomes for the population of Rotherham. As part of that we aim to reinvest any funding released from one practice into primary care within Rotherham CCG area, ensuring that we secure real improvements in care and outcomes for patients.</p>		

Recommendation	Cabinet Decision <i>(Accepted/ Rejected/ Deferred)</i>	Cabinet Response <i>(detailing proposed action if accepted, rationale for rejection, and why and when issue will be reconsidered if deferred)</i>	Agency Responsible	Action by (Date)
<p>2. The continuation of the Patient Participation Directed Enhanced Service in 2014-15 should be used to ensure patients are well informed and empowered through the Patient Participation Groups to challenge poor access and suggest improvements. All practices should be encouraged either to participate in the PPDES or to establish other effective mechanisms for ensuring patient engagement.</p>	<p>Accepted</p>	<p>NHS England agree that patients should be well informed and empowered to challenge poor access and suggest improvements. NHS E continue to encourage practices to work closely with their Patient Participation Groups, and to act upon their suggestions for improving access and services within the Practice. Likewise the Care Quality Commission (CQC) will look for evidence that access to clinicians is sufficient to meet reasonable need, and that patient survey results alongside any complaints are taken addressed. In December 2014 the new Friends & Family Test, which is compulsory, will be introduced to all practices. All patients that attend the Practice on a given day, whether to see a clinician, or pick up a prescription, will be asked two questions:</p> <ul style="list-style-type: none"> a. Would you recommend this Practice to another person? (mandatory question) b. One other question the Practice want to ask the patient (this could be agreed with the Patient Participation Group) <p>This will provide further stimulus to practices to respond to the views expressed by their patients.</p>	<p>Rotherham CCG NHS England CQC</p>	<p>On-going</p>

Recommendation	Cabinet Decision (Accepted/ Rejected/ Deferred)	Cabinet Response (detailing proposed action if accepted, rationale for rejection, and why and when issue will be reconsidered if deferred)	Agency Responsible	Action by (Date)
<p>3. Although recognising the importance of clinical need, the expectations and preferences of patients are changing, and practices should explore more hybrid and flexible approaches to appointments. All GP practices should be encouraged to have a part of each day for sit and wait slots.</p>	<p>Deferred</p>	<p><i>Context</i></p> <p><i>All General Practices should have adequate arrangements to see urgent or same day cases. Appropriate arrangements will vary from practice to practice. These should form part of the new CQC inspections. The Commissioner should be requested to produce a report summarising the adequacy of access on the basis of these reports to the Health and Wellbeing Board in October 2015.</i></p> <p>NHS England agree that a flexible approach to appointments and accessing primary care services is helpful and all practices already ensure that they can respond to urgent/ immediate requests for patient appointments that are clinically appropriate.</p> <p>NHS England believe, based on good evidence from other practices that the right approach to improve accessibility and convenience for patients is by practices having flexible electronic booking systems, enabling booking ahead as well as for same day appointments. Furthermore, not all patients want or need a direct face-to-face appointment with a GP but are seeking clinical advice from the practice. Increasingly practices are making better use of telephone triage, emails, IT consultations as well as more flexible opening times. Our vision for the future is to achieve 24/7 access to a range</p>	<p>NHS England Rotherham CCG</p>	<p>October 2015</p>

Recommendation	Cabinet Decision <i>(Accepted/ Rejected/ Deferred)</i>	Cabinet Response <i>(detailing proposed action if accepted, rationale for rejection, and why and when issue will be reconsidered if deferred)</i>	Agency Responsible	Action by (Date)
		<p>of community based diagnostic treatment, care and advice that patients can use to consult with GPs, nurses and importantly with community and hospital based services available in the community. This vision is shared by CCGs.</p> <p>This may well involve practices increasingly working together, in networks or federations, pooling resources and cooperating to offer their patients wider and better access to a greater range of GP and other care services. We, together with Rotherham CCG recognise that this will not occur overnight nor will it be cost neutral. This will be considered as part of our proposed co commissioning arrangements with the CCG and will feature as part of the place based plans I referred to earlier.</p>		
<p>4. NHS England should maintain access to interpretation services for GPs, with an emphasis on professional services, supported by training for GPs and practice staff to increase confidence in using telephone services where appropriate.</p>	<p>Accepted</p>	<p>NHS England agree that for many patients whose first language is not English that being able to access a good interpreting service will enable better understanding of patient needs and ensure a clinically appropriate response for the patient. NHS England at national level is looking to develop either a single framework provider contract or national service specification to secure consistent and reliable access for patients across England. In the meantime, we will continue to work closely with Rotherham CCG, Rotherham MBC Public Health, and the Health and Wellbeing Board, and where appropriate, other stakeholders, to consider how by</p>	<p>NHS England</p>	<p>Immediate</p>

Recommendation	Cabinet Decision <i>(Accepted/ Rejected/ Deferred)</i>	Cabinet Response <i>(detailing proposed action if accepted, rationale for rejection, and why and when issue will be reconsidered if deferred)</i>	Agency Responsible	Action by (Date)
		working together we can ensure people are able to access care services appropriate to their needs and are able to easily navigate such services.		
5. NHS England should review their current interpretation provision to see if economies could be achieved through signing up to Rotherham MBC's framework agreement, which is open to partner agencies. Sharing existing good practice	Accepted	<p>NHS England agree that best practice should be shared, and we will continue to work with and encourage the CCG and practices to share learning. A number of new national programmes to support General Practice to improve patient access to primary care provision have been established, these include the PM Challenge Fund pilots, which funds 20 areas across England (7 in the North of England) to innovate to improve GP access arrangements. It is hoped that further pilots will be established in the coming year and, if so, we will fully support Rotherham practices to take such an opportunity to not only innovate themselves but to learn from the existing PM Challenge Fund pilots.</p> <p>NHS IQ (Improvement and Quality), also operates a programme to improve the efficiency and effectiveness of GP practices, which we are encouraging practices to participate in. We are also considering whether an e-based learning platform could be developed to further support practices to share and learn from each other. The</p>	NHS England	Immediate

Recommendation	Cabinet Decision (Accepted/ Rejected/ Deferred)	Cabinet Response (detailing proposed action if accepted, rationale for rejection, and why and when issue will be reconsidered if deferred)	Agency Responsible	Action by (Date)
		CCG also facilitates a practice learning event on a regular basis covering a wide range of topics aimed at improving care and outcomes for patients.		
6. GP practices should regularly showcase best practice and share successes on providing good access to patients through existing means such as the practice manager forum and Protected Learning Time events. Improving information for patients	Accepted	Rotherham CCG is building relationships with NHE England so that quality in GP practice can be developed. The practice managers' forum already has designated time for NHS England. 'Sharing of best practice' will become a standard agenda item for future meetings. Sharing of best practices will also become a topic for consideration when planning future PLT events.	Rotherham CCG	Actioned
7. Patient information and education is important, both generic information about local services and specific information about how their surgery works. a. GP practices should ensure their practice leaflets and websites are kept up to date about opening times, closure dates for training and how the out of hours service works. b. NHS England should explore	Accepted	a.NHS England agree that information for patients must be accurate, timely and relevant. It is a contractual requirement for each Practice to maintain a practice leaflet and website, containing up-to-date information for patients with specific information. NHS E continue to monitor practice compliance on a regular basis. b.NHS E will explore this option further, recognising the importance of harnessing new technology, in use by many age groups. c. NHS E would welcome the opportunity to engage with the Health & Wellbeing Board on this matter.	NHS England Rotherham CCG	a.Immediate b. Deferred c.CCG Winter 2014/15

Recommendation	Cabinet Decision <i>(Accepted/ Rejected/ Deferred)</i>	Cabinet Response <i>(detailing proposed action if accepted, rationale for rejection, and why and when issue will be reconsidered if deferred)</i>	Agency Responsible	Action by (Date)
<p>developing an App with practice information that people with smartphones and tablets can download.</p> <p>c. Health and Wellbeing Board should consider developing a borough wide publicity campaign to raise awareness about the impact of not cancelling unneeded appointments.</p> <p>d. GP practices should work with their reception staff, patients and Patient Participation Groups to encourage patients to provide more information to staff when contacting the practice, enabling them to see the right person in the practice team.</p> <p>e. Health and Wellbeing Board should consider revisiting the “Choose Well” campaign to raise awareness of how to access local services and which is the most appropriate service in a range of situations.</p>		<p>d. NHS E agree that patients should be encouraged to provide sufficient information to aid their signposting to the most appropriate service/professional. Patients must also have a right to expect that personal information about their health and care is treated confidentiality to give confidence to them to share.</p> <p>e NHS E would welcome the opportunity to engage with the Health & Wellbeing Board on this matter.</p>		<p>d.e. NHS England</p>

Recommendation	Cabinet Decision <i>(Accepted/ Rejected/ Deferred)</i>	Cabinet Response <i>(detailing proposed action if accepted, rationale for rejection, and why and when issue will be reconsidered if deferred)</i>	Agency Responsible	Action by (Date)
8. In light of the future challenges for Rotherham outlined in the report the review recommends that a proactive approach is taken by the Health and Wellbeing Board to mitigate risk to the delivery of primary care.	Accepted	In the light of Co-commissioning of Primary care between NHS England and the CCG the Board has agreed to receive a report on GP access for patients and will expect the CCG Commissioning plan to reflect a proactive approach to ensuring Rotherham is an attractive place to undertake General Practice.	Health and Wellbeing Board	April 2015
9. NHS England should consider incentives to attract GPs to start their career in Rotherham following training in the area, to help address the demographic issues of our current GPs.	Accepted non financial	<p>NHS England recognise the challenges that practices face in terms of capacity to deliver primary care and the increasing difficulty to recruit to fill practice vacancies, not only GPs but also nurses and other care staff. We are working with Rotherham CCG and Health Education England (HEE) to explore how to minimise recruitment and retention difficulties so as to attract as many more GPs and Nurses as possible.</p> <p>In order to have a sustainable workforce we need to make general practice an attractive place to work for the long term. We are looking at examples where non-traditional GP professionals (Physiotherapists, Pharmacists, etc.) have joined practices and the impact this has had on reducing GP workload.</p> <p>We will continue to work with HEE to promote practices becoming involved in the Advanced Training Practices scheme which aims to generate increasing numbers of</p>	NHS England	On-going

Recommendation	Cabinet Decision (Accepted/ Rejected/ Deferred)	Cabinet Response (detailing proposed action if accepted, rationale for rejection, and why and when issue will be reconsidered if deferred)	Agency Responsible	Action by (Date)
		qualified practice nurses. But it is not just about the practice workforce, we will support CCGs to explore further the scope for attaching community and current hospital based clinical staff to work closer with general practice so as to be able to offer a wider range of care and services close to the patient and enabling general practice to increasingly act as a co-ordinator of care to patients with a number of chronic conditions.		
10. Rotherham CCG should collect and analyse monitoring information to ensure services are resourced to meet peaks in demand during protected learning time at the new Emergency Care Centre from 2015.	Accepted	<p>NHS 111, who now provide the call handling information and Care UK (who provide the OOH) have both been contacted and asked to provide regular activity information. This will be fed into the planning process for the Emergency Care Centre.</p> <p>The System Resilience Group set up by the NHS in all areas of the Country to ensure proper access to emergency care will also consider this matter.</p>	Rotherham CCG	By April 2015
11. NHS England needs to be more proactive in managing increases in GP demand due to new housing developments, rather than waiting for existing services to reach capacity.	Accepted	NHS England have already established formative links with some of the Local Authority planning departments across South Yorkshire & Bassetlaw and we welcome this reviews recommendations that health partners are invited by the Planning Department to be part of a multi-disciplinary approach to proposed new developments in Rotherham	NHS England	Immediate

Recommendation	Cabinet Decision <i>(Accepted/ Rejected/ Deferred)</i>	Cabinet Response <i>(detailing proposed action if accepted, rationale for rejection, and why and when issue will be reconsidered if deferred)</i>	Agency Responsible	Action by (Date)
12. Rotherham MBC, when considering its response to the scrutiny review of supporting the local economy, should ensure health partners are invited by the Planning Department to be part of the multi-disciplinary approach to proposed new developments.	Accepted	Rotherham MBC Planning fully agree with this.	Rotherham MBC	Immediate

ROTHERHAM BOROUGH COUNCIL

1.	Meeting:	Cabinet
2.	Date:	5 November 2014
3.	Title:	Capital Programme : Capital Receipts Update All Wards
4.	Directorate	Environment and Development Services

5. Summary

This is a half year report on capital receipts for 2014/15 and highlights changes to the forecast of capital receipts. In the first half of 2014/15 a total of £3.822m has been achieved and a further £4.876m is anticipated to be completed by the financial year end.

The Asset Management service has generated over £15m in capital receipts over the last 2 full years and these have helped the Council address its budget challenge by significantly reducing debt management and property running costs.

6. Recommendations

Cabinet is asked to note the current position on the capital receipts programme.

7. Proposals and Details

Summary of Financial Position

The table in **Appendix 1** summarises both the current year's actual and anticipated capital receipts, together with a forecast of estimated capital receipts over a 4 year period. Appendices 2 to 5 provide further detail on the specific sites targeted to be disposed of over the same 4 year period.

Assets are only added to the programme after a Cabinet decision has been made to release an asset for sale and the appropriate call in period has expired. The table in Appendix 1 shows how the position has changed since the previous report presented to Cabinet on 18 June 2014. The table in Appendix 1 also identifies projected receipts in risk bands (High, Medium and Low) and shows the total projected receipts in each banding. The programme reflects the risks associated with disposing of the types of assets the Council currently holds for sale. The risk bands indicate the known and anticipated risks of disposals being achieved within their allocated quarter-year and take account of the current generally depressed local and regional markets.

In the first 6 months of 2014/15 a total of £3.822m in receipts has been achieved and a further £4.876m is anticipated to be completed by the financial year end, giving projected total receipts for the 14/15 year of £8.698m, including disposals considered 'high risk'.

Approach adopted by Asset Management

As previously reported the Estates Team has this year already completed sales of three difficult sites known as r/o 22a West Park Drive, Fitzwilliam Rd & Cottingham St (former car park A) and land adjacent to Mill Close.

In addition to this the Estates Team has now completed on the sale of three more assets known as The Maltings, Fitzwilliam Rd & Cottenham Road Car Parks and Saville Street, Dalton which is being developed as a doctor's surgery. These, together with the completion of the former depots at Wadsworth Road, Bramley and Hamilton Road, Maltby has realised a further £3m in capital receipts.

Furthermore, in the next quarter to December the Council has contractual agreements in place on 3 more assets that will realise an additional £3.75m in capital receipts. Coupled with the receipts already secured this year this will bring the total completed receipts to £7.57m; this will more than double Asset Managements self-imposed target of £3.5m for the full year by the end of the third quarter.

For the remainder of (final quarter) 2014/15 capital receipts of £1.137m, of which £0.186m is HRA, have also been identified for completion. These are, however, allocated a high risk profile either because there are no contractual obligations in place or because they are scheduled to complete in the final quarter of the financial year.

The Estates Team also continues to review and identify further assets for sale through the property rationalisation programme. In the current financial year surplus

assets of £4.24m have been successfully identified for the ongoing disposal programme of which £0.175m is HRA. This surpasses the Asset Managements self-imposed target of £3.5m for the full year by the second quarter.

Evidence of transactions and interest in available sites shows that signs of recovery in local markets are not uniformly spread across the Borough. Through maintaining a flexible approach that is sensitive to the local market and, by continually working with proposed purchasers to overcome site constraints, the Estates Team has not only secured market leading land values but has also realised further benefits from disposal of its assets. Examples of these benefits are given in detail below;

- **Former Council Depot, Wadsworth Road, Bramley**

Since the date of the last report planning permission has been granted for the development of 48 units, 20% of which are affordable homes with an additional £10,000 commuted sum towards affordable housing. In addition to this £5,000 was granted to the Parish Council for the upkeep of children's playing facilities in the area together with a £120,000 sum towards education for the authority. As well as these contributions the disposal will realise significant savings in relation to property running costs, a new homes bonus for 48 units and the creation of jobs in the construction phase of the development. Since reporting to CSART this sale has now completed.

- **Eastwood Depot, Eastwood Trading Estate**

Significant property defects and high running costs made a sale particularly challenging. However after working with the purchaser to overcome these issues we have negotiated an unconditional offer and a sale of the asset is due to complete imminently. The purchaser of the site is an established local company. Their acquisition will allow them to expand their current operation with the possibility of job creation in the local area. This sale will also allow the Council to save on significant property running costs.

- **Former Council Depot, Hamilton Road, Maltby**

A joint marketing agreement with the adjoining land owner has now secured a sale for the re-development of both sites. Planning permission has now been granted for the erection of a 10,000ft² low cost food retail outlet which will see the creation of 40 full time equivalent posts for the local area. The remaining part of the site will see the development of 54 residential units 25% of which will be affordable housing. In addition to this there will be revenue savings in the form of property running costs, a future new homes bonus for 54 units and job creation in the construction phase of each development. Since reporting to CSART this sale has now completed.

8. Finance

Maintenance costs of Housing Revenue Account assets until sale are funded from the HRA account. The maintenance cost of the General Fund Assets held for sale is currently unbudgeted in the Land and Property Bank and is being reported as part of the overspend on the Land and Property Bank. There is also a budget pressure relating to the costs of disposing of assets at the current level of disposals.

Assets with receipts of £10,000 and less are placed on a de-minimis list given their classification as revenue income.

9. Risks and Uncertainties

As with all property transactions a capital receipt cannot be guaranteed until the sale is completed. If the current economic climate again begins to stagnate and depress the property market, the risks associated with achieving targets will continue to increase.

Longer holding periods to reflect poor market conditions are increasing maintenance costs as assets, particularly buildings, suffer increased vandalism and anti social behaviour and general deterioration.

10. Policy and Performance Agenda Implications

The sale of surplus assets supports the Council's priorities by releasing capital from unwanted/underused property assets.

The sale of assets recycles buildings for alternative use and land for development.

11. Background Papers and Consultation

Financial Services approved on 23 October 2014

Ward Members, the Town/Parish Council, the NHS Rotherham, South Yorkshire Police and Directors of Service have been consulted on all assets included in the current programme.

This report is presented to CSART, SLT and then Cabinet.

Appendix 1 to 5 – Table summarising possible and completed Capital Receipts 2014/2018 including list of properties in the programme.

Contact Names:

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	Position at 15 May 2014		Position at 7 October 2014	
2014/15 receipts	GF	HRA	GF	HRA
Completed	£857,000	£0	£3,709,932	£112,000
Low risk	£2,812,000	£143,000	£4,333,477	£66,000
Medium Risk	£1,231,900	£120,000	£145,500	£70,000
High risk	£6,015,842	£60,000	£139,500	£50,000
Total 2014/15	£10,916,742	£323,000	£8,328,409	£298,000
2015/16 receipts				
Low risk	£0	£0	£965,000	£0
Medium Risk	£1,576,000	£324,000	£2,172,000	£374,000
High risk	£2,672,500	£0	£3,392,850	£0
Total 2015/16	£4,248,500	£324,000	£6,529,850	£374,000
2016/17 receipts				
Low risk	£0	£0	£0	£0
Medium Risk	£4,050,000	£0	£4,050,000	£0
High risk	£1,595,000	£75,000	£1,795,000	£75,000
Total 2016/17	£5,645,000	£75,000	£5,845,000	£75,000
2017/18 receipts				
Low risk	£0	£0	£0	£0
Medium Risk	£416,000	£234,000	£416,000	£234,000
High risk	£50,000	£1,293,333	£140,000	£1,293,333
Total 2017/18	£466,000	£1,527,333	£556,000	£1,527,333
Grand Totals	£21,276,242	£2,249,333	£21,259,259	£2,274,333

Completed 2014/15	Ward
Sanctuary Fields, North Anston land adj 29	Anston and Woodsetts
Malkiln St, The Maltings	Boston Castle
Mill Close and land adj , Templeborough	Boston Castle
Wadsworth Road, Bramley Sites A. B & C - Deposit	Hellaby
Wadsworth Road, Bramley Sites A. B & C	Hellaby
Hamilton Road Depot, Maltby	Maltby
Land to r/o 22a West Park Drive, Swallownest	Rother Vale
Fitzwilliam Rd car park A, Eastwood - Deposit	Rotherham East
Fitzwilliam Rd car park A, Eastwood	Rotherham East
Fitzwilliam Rd car park B, Eastwood - Deposit	Rotherham East
Fitzwilliam Rd car park B, Eastwood	Rotherham East
Saville St, Dalton	Valley
Serlby Lane, Harthill (footpath)	Wales
Kimberworth Library/Clinic - Wheatley Rd - Deposit	Wingfield

Completion Expected 2014/15	Ward
Dog Kennels Lane, Parkstone House, South Anston	Anston & Woodsetts
TCN Tesco Overage, Rotherham Town Centre	Boston Castle
Clifton Court, Doncaster Gate	Boston Castle
High Nook Rd, Dinnington (land RO 62A)	Dinnington
Wesley Ave, Swallownest - r/o 2 to 8	Holderness
Bellows Road shopping centre	Rawmarsh
Eastwood Depot, Chesterton Road	Rotherham East
Greasbrough Depot, North Drive	Rotherham West
March Flatts Community Centre, Thrybergh	Silverwood
Kimberworth Library, clinic, greenspace, Wheatley Rd	Wingfield

Completion Expected 2015/16	Ward
Doncaster Gate, Former Council Offices	Boston Castle
Oakwood Road West (land to R/O), Broom	Boston Castle
Rothwell Grange, Broom Valley Road	Boston Castle
Maltby Craggs Nursery Site, Walters Road	Maltby
Rawmarsh Library & District Office, Parkgate	Rawmarsh
Old Fence Church, Swallownest - Land adj	Rother Vale
Fenton Rd/Henley Lane	Rotherham West
Ferham Road, Holmes (land off)	Rotherham West
Kirk House, Browning Road	Valley
Dalton Lane, Dalton	Valley
Century Business Park East Plot 3, Wath	Wath
Century Business Park East Plot 4, Wath	Wath
Century Business Park East Plot 5A, Wath	Wath
Century Business Park East Plot 5B, Wath	Wath
Century Business Park East Plot 6, Wath	Wath
Station Road, Manvers Way - Hotel Site	Wath
Former International Centre, Kimberworth	Wingfield

Completion Expected 2016/17	Ward
Herringthorpe Leisure Site	Boston Castle
Undergate Rd, Dinnington - Site 2	Dinnington
Melton High Street, (Longfold) West Melton	Hoover
Pontefract Road, Manvers Way - Land adj	Wath
Station Road, Land adj Turner Hire	Wath
Swinton House Club, Swinton	Swinton
Undergate Rd, Dinnington - Island Site	Dinnington
Undergate Rd, Dinnington - Leisure Site	Dinnington

Completion Expected 2017/18	Ward
Attlee Close, 10 & 10A, Maltby	Maltby
Millside Training Centre, Dalton	Valley
Zamor Crescent, Thurcroft	Rother Vale
Brampton Road, adj 75, Thurcroft	Rother Vale
Bushfield Road, Wath upon Dearne	Wath
Denman Road, Wath - Phase 2A of Site 1A	Wath
Denman Road, Wath - Remainder of 1C	Wath
Midland Road, Kimberworth	Rotherham West
Thorpe Steet - rear of 116 , Thorpe Hesley	Keppel
Warris Close, Kimberworth	Wingfield

Rotherham MBC

1.	Meeting:	Cabinet
2.	Date:	5 November 2014
3.	Title:	Rent Collection and Arrears Recovery Policy
4.	Programme Area:	Housing and Neighbourhoods Service

5. Summary

This report outlines the proposed Rent Collection and Arrears Recovery Policy and associated processes which have been refreshed given the challenges faced to maximise income recovery to the Housing Revenue account (HRA) given the ongoing Welfare Reform agenda. The report provides information about the service challenges brought about by the implementation of welfare reform and proposes in light of the current and ongoing changes the new rents collection policy and processes required. The report was submitted to the Improving Places Select Commission on 16 September 2014 which recommended particular emphasis be placed on minimising the number of tenants falling into increased debt by targeting support work when arrears are below £250.

6. Recommendations

That Cabinet:

6.1 Note contents of the report.

6.2 Comments on the Rent Collection and Arrears Recovery Policy.

6.3 Approve the Rent Collection and Arrears Recovery Policy.

7. Proposal and details

7.1 Introduction

7.1.1 The government's ongoing Welfare Reform agenda including the introduction of under occupancy criteria is having a direct impact on the number of active arrears cases being managed by the Housing Income Team. The number of tenants affected has remained relatively stable since April 2013 at around 3,300 tenants, of which approximately 2,500 are in arrears. During the first twelve months of welfare changes there has been limited intervention in these cases by the Income team due to the low level of arrears that exist. However if unaddressed over time, this will become a significant issue for both tenants and the councils finances.

7.1.2 The report outlines the revised policy and procedure for the recovery of unpaid rent to recover an increase in collectable income as a result of the Welfare Reforms.

7.2 Background

7.2.1 The Housing Income Service has a proven track record in terms of the level of rent it recovers. This is supported by continuous improvement in its rent collection rates and upper & middle quartile performance nationally in a number of key performance indicators associated with rent recovery. For the first time in several years performance dipped slightly in 2013-14 following the introduction of the Under Occupancy Supplement but the service still maintained upper & middle quartile performance when compared nationally.

7.2.2 Over the years the service has sought to achieve an objective balance between enforcement action and its preventative techniques, which saw the number of evictions halve from 110 in 2007 to 55 in 2012/13. The change in approach has been brought about by working more closely with tenants from the onset of the tenancy and forging strong links with other stakeholders such as Housing Benefits, debt support agencies and Credit Unions to ensure customers get the best possible advice and assistance. It is fair to say since the onset of welfare reforms we have seen the reducing trend reverse with a total of 107 evictions in 2013-14 and 35 evictions to the end of June in 2014-15.

7.2.3 The environment in which we operate is changing as a direct result of the Welfare Reforms. One element of the reforms currently affecting Council tenants in Rotherham is the under occupancy charge. 3,349 Council tenants in Rotherham now have some rent to pay as a result of having a spare bedroom and of these 2,145 (64%) have fallen into arrears. The new charges have increased rent arrears by over £390,000 (as at end June 2014). As a result of the charge 200 tenants now have sufficient arrears where legal proceeding will commence because the value of arrears are now sufficient to pass the Department of Justice Pre-action Protocol Proportionality tests (i.e. £500+, this has recently increased from £250+ due to an increase in court costs, if we had remained at £250+ the total number of cases would be 489).

7.3 Recovery Processes

7.3.1 The recovery process starts on the third week of non-clearance when a first reminder letter is sent to the tenant outlining what's owing. This letter is only triggered when the balance exceeds £30 to ensure the process is cost effective and equitable. A second reminder is sent on the fourth week of arrears when balances exceed £45. If the debt remains outstanding and no contact has been made we will visit the tenant to establish their personal circumstance. At this stage we will make an arrangement with the tenant to clear the balance by instalments. If balances remain outstanding after 5 weeks and/or the agreement is breached we will consider serving a Notice of Intention to Seek Possession which is the first step prior to litigation. All cases must meet the requirements of the Court pre-action protocol which determines we must make personal contact with the tenant prior to the case being entered into County Court. Entry into Court does not guarantee an outright possession order; common outcomes are payment orders and adjournments. Before considering litigation we take the view that commencing action below a threshold of £300 is disproportionate to the debt hence why very few tenants affected by Under Occupancy Charge have been submitted prior to the current year. A summary of the arrears Rent Collection and Arrears Recovery processes can be viewed at Appendix 2.

7.4 Proposed changes to the Rent Collection & Arrears Recovery Policy

7.4.1 Some organisations have proposed 'no eviction policies' in response to the changes brought about by Welfare Reforms. For example both Brighton and Edinburgh Councils have said they will not evict a tenant if the individual's circumstance were "solely due to the under-occupancy penalty". They estimate the average loss in rental income per property per year will be in the region £600. They argue that with the average cost of eviction being £6000 and the authority having to incur temporary homelessness charges, costs to the public purse could be in the region of £6 to £10k per eviction.

7.4.2 There are, however some serious risks associated around the fairness of protecting a single group of tenants from eviction, which could carry the risk of legal challenge. For these reasons it is felt inappropriate to adopt this tactic as it sends out mixed messages to tenants that it's ok to not pay your rent if your difficulties result from the under occupancy charge, whereas other tenants with debts for other reasons will still be subject to existing recovery processes. Such an approach would inevitably see the tenants' debt rise over time to unmanageable levels.

7.4.3 The favoured approach therefore is the introduction of a mixed range of initiatives targeted to support tenants in financial hardship caused by welfare reforms. The key changes within the policy are detailed below and should be read in conjunction with the Rent Collection and Arrears Recovery Policy at Appendix 1 and Rent Collection Procedures at Appendix 2. These include:

Payment of one week's rent up front

It is a condition of the Tenancy Agreement that one week's rent is paid up front. To date it is fair to say that this has never been actively implemented, with rent being paid following the tenant being signed up and moving into the property. In future it is proposed that all new tenants have to pay their first week's rent up front at time of sign up as per the tenancy agreement even where they may be eligible for Housing Benefit. This will ensure new tenants understand it is their responsibility to pay rent given the future proposals for Housing Benefit to be paid direct to the tenant through Universal Credit.

Advocacy and Support

Prospective tenants and tenants affected by welfare reform will be able to access 5 key areas of advocacy. The newly created posts of Tenancy Support Officer, Money Advice Officers, Employment Solutions Officer and CYPS Support Workers will enable tenants to access areas of specialist advice via self-referral or by the Housing Options or Income staff as part of the revised recovery process. Agreement has already been reached with CYPS to provide alerts at the proposed court action stage and similar agreements are being worked on with the other agencies. Under the new process recovery action will be suspended pending review by CYPS; this will ensure tenants have income maximisation and budgetary skills to enable them to prioritise their debts.

In addition to the above support, all Income officers within the team now ensure no court action will be taken against a tenant unless Housing Benefit and DHP applications have been submitted where they are eligible. This is seen as key to reducing arrears for those tenants having debts over £250 as more often than not many are eligible for Housing benefit payments but due to chaotic lifestyles they have not been completed. The challenge with this approach is getting the tenant to engage to provide support in completing the applications to assist in clearing arrears.

Tenancy Agreement DVD

The existing Tenancy Agreement DVD is being updated to promote sustainable tenancies and to encourage prospective tenants to "think it through" more before they take on a tenancy. The DVD is split into chapters to include steps the customers must consider before they become a tenant eg have some savings to buy furniture and other essential items, and will also cover the responsibilities of becoming a tenant which include paying their rent. The DVD's will also be used at the Young Persons Moving on Panel and will be distributed to support providers.

Risk Assessments

The Housing Options team will now advise the Housing Income team of all new tenants they deem to be at potentially high risk of not paying their rent given income levels and/ or lifestyle choices. For all such referrals the Housing Income Officer will contact the tenant to confirm they are paying the correct

rent, check Housing Benefit eligibility, support applications for DHP and offer an appointment with tenancy support, Money Advice or Employment Solutions.

Peer Case Review

Cases deemed to be a high risk, for instance involving the potential eviction of young children or people with mental health issues will be subject to a peer review to ensure all necessary support actions have been undertaken prior to any court action being taken.

Change the rent arrears policy for new lettings (from 28 October 2014)

Revisions to the Allocations Policy are due to come into effect on 28 October 2014 which are intended to help promote more sustainable lettings and place more emphasis on customers to pay/ reduce any housing debts already owed. This will include affordability checks with a right to refuse prospective tenants who are unable to demonstrate that they can afford to pay the weekly rent. As part of this process tenants will be subject to credit check to ensure all debts (with the exception of any through unregulated money lenders) have been declared as part of the affordability assessment.

The revised Allocations Policy will also require prospective tenants with arrears from a previous tenancy (including Housing Associations) to pay back a minimum of 25% prior to being accepted onto the housing register where the debt exceeds £800. If the debt is less than £800 they will be placed on the register but suspended until 25% of the debt has been repaid.

Further joint-working is underway with the Housing Options team to improve the focus on income collection both before and during new tenancy sign-up, ensuring tenants deemed to be at a high risk of falling into arrears are highlighted to the Income Team immediately after sign up. In addition the Housing Options team actively encourage new tenants to sign up to Direct Debit payment.

Right to Reviews

The Housing Assessment Panel or the Evictions Review Panel would consider the critical cases under the Right to Review of None Qualification due to debt to the Council or Housing Associations.

Targeting of arrears balances below £250

Work is ongoing to target all arrears balances below £250 through telephone calls by the Contact centre. At this level of arrears it is still manageable for tenants to agree low value repayment plans to repay the debt over a 12 month timeframe. Once arrears exceed this value it is often inevitable that the debt will take several years to repay or result in eviction and consequently in the majority of cases the debt not being recovered. Where additional support is required by the tenant to meet rent payments these cases will be referred to the Housing

Income team for intensive support including assistance with Housing Benefit and DHP claims.

Tenants with arrears balances over £1000

We have started to gather a greater understanding of tenants with arrears balances over £1000 as this group of tenants contributes the most towards current arrears. From this work we have identified the majority of tenants are aged 25 to 45, single and not claiming Housing Benefit. Of the 435 cases in arrears over £1000+, 67% are not claiming Housing benefit and £736,000 of the arrears within the £1000+ category of attributable to single tenants (total balance of arrears for accounts more than £1000+ is £834,000)

As a result a targeted campaign for promoting the take up of Housing Benefit is being implemented for this group of tenants to try and increase take up and tackle ongoing increase in arrears. Alongside this if it is evident the tenant will not be eligible for Housing Benefit we will attempt further negotiation on repayment of the debt and ongoing rent via Direct debit, as if no eligibility for Housing Benefit they will most likely be in paid employment.

In addition to the changes in approach to how we tackle arrears we have also introduced a number of projects to assist tenants to increase income, become more independent or reduce rent charges. These initiatives include:

Funding for Age UK Rotherham

The HRA has provided £30,000 of funding to Age UK Rotherham who are delivering a project targeting over 65's to assess if tenants are eligible for Attendance Allowance and providing support in the application process. This provides tenants with a potential important source of additional income to pay for care needs and general day to day living expenses, including their Rent, District Heating and Rothercare charges.

Homeswapper

This allows tenants to register for down sizing. This is especially important for those families affected by under occupancy supplement or generally struggling to make rent payments. The table below provides details on number of tenants that have down sized since 1 April 2013 to present.

	Number
Number of people registered for down sizing	341
Number of people registered for down sizing that were affected by the under occupancy supplement	243 (71% of total registered)
Number of people successfully down sized	113 (33% of total registered)
Number of people successfully down sized that were in financial difficulty	94 (27% of total registered)

Families For Change Project

Intensive support is provided where we offer additional support with budgeting, job search and sourcing alternate accommodation to reduce weekly rent payable where tenants are no longer able to afford rent due to the benefit cap.

Laser Credit

Where we have tenants struggling with arrears and through completing income and expenditure assessments we identify high cost debt from companies such as Provident and Brighthouse, we will sign post the tenant to Laser Credit Union to arrange a lower cost loan to repay the debt or purchase white goods etc. This approach will free up additional monies for the tenant to put towards payment of rent.

DHP Top Up

We have made a £60,000 contribution to top up the Discretionary Housing Payment budget from HRA funds in 2013-14 to assist tenants affected by welfare reform and the challenging economic climate. We are currently reviewing with Revenue & Benefits if further top up funding is required in 2014-15.

8.0 Finance

8.1 Since 2012-13 total income to collect has increased by £9.23mm due to rent increases. Total income due during 2014-15 is £82.55m.

At the same time we have seen an increase in tenant arrears from £4.47m in 2012-13 to £5.31m in 2013-14, an increase of £840k within year, of which approximately £340,000 is attributable to the under occupancy supplement. The remaining balance of approximately £500k is due to tenants being generally unable to honour their rent due to ongoing budget pressures given the wider economic environment.

As at 30 June 2014 cumulative rent arrears for current tenants was £2,067,734. Since 1 April 2014 there has been an increase in current tenant arrears of £329,629.

We are currently forecasting all rent arrears (current and former tenants) for 2014-15 to be approximately £980k by 31 March 2015. This would be an increase of £140,000 against all rent arrears of £840,000 for 2013-14.

There are currently over 10,000 tenancies with some form of arrears, which depending on the time of month can peak at over 14,000. There are 5,500 tenants subject to ongoing arrears proceedings and 2,444 owe greater than £250.

The profile of current tenant arrears is detailed in the table below:

Arrears £	Total Value £	Number of tenancies
00.01 to 99.99	183,343	3,802
100 – 249.99	639,730	2,953
250 – 499.99	521,848	1,226
500 – 999.99	645,568	783
1000+	852,141	435
	2,842,630*	9,199

*figure differs from arrears quoted for 30 June 2014 as this is an in month snap shot

9.0 Risks and Uncertainties

9.1 Legislative changes presents considerable risks to the HRA's projected income as housing benefit is gradually phased out. Under current proposals all tenants soon will be expected to make payments to their own rent accounts ultimately increasing the pressures on the housing income team to income collection and arrears recovery processes.

9.2 If the Council fails to review and adapt its recovery processes to meet the challenges posed by changes in legislation it runs the risk of:

- ✓ Increasing poverty
- ✓ Widening the gap between the most and least deprived areas
- ✓ Failing to collect rental income
- ✓ Drop in performance on certain indicators including income collection and void repair costs / re-let times
- ✓ Increasing homelessness due to evictions
- ✓ Increasing personal debt as some tenants may resort to high interest and illegal lenders, possibly leading to increasing crime levels
- ✓ Increasing costs to the NHS as a result of stress and anxiety which can be caused by debt and threat of eviction and homelessness

The Rent Collection Policy sets out one element of the strategy to mitigate the impact of Welfare Reform on our tenants and ultimately the long term viability of the HRA 30 Year Business Plan. Greater emphasis has also been placed on providing support to tenants that are willing to work with the Council to access individual financial assessments, advocacy and support.

10. Policy Performance and agenda implications

Previous Cabinet and DLT reports have highlighted the impact the Welfare Reforms will have on service. The reports have brought in additional resources to tackle issues such as increased indebtedness amongst tenants and provision for advice and support services. These combined with the Rent Collection and Arrears Recovery Process will clearly help tenants sustain their tenancies and mitigate the impact on HRA 30 Year Business Plan.

11. Background papers and consultation

- RMBC's Rent Arrears and Collection processes
- RMBC's Housing Allocation Policy
- Localism Act 2011
- Homelessness Code of Guidance
- Welfare Reform

12. Contact details

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Rent Collection and Arrears Recovery Policy

Version : 1	Issue date : May 2014
Author : Business and Commercial Programme Manager	Date approved:
Review due : November 2015	Date planned for review : November 2015

Strategy/Policy Control Statement

1	Document Title	Rent Collection and Arrears Recovery Policy
2	Date of Document	October 2014
3	Service Lead	Business and Commercial Programme Manager
4	Author	Business and Commercial Programme Manager
5	Date approved and by who	
6	Date last reviewed	N/A
7	Amendment record	N/A
8	Next review date	November 2015
9	Staff Consultation	May 2014
10	Other Services Consultation	May 2014
11	Customer Consultation	N/A
12	Equality Impact Assessment: insert priority as agreed with E/D team, insert start date, completion date and published date. Insert date copy of EIA sent to E/D team.	To be completed
13	Confirm that document meets current legislative requirements	Yes
14	Confirm that VFM implications have been assessed-links to VFM template	Yes
15	Sign off of statement by Author and Service Lead: name and date	Paul Elliott, Business and Commercial Programme Manager 22.10.14

Introduction

The purpose of this policy is to explain how RMBC will collect rent and other charges from its tenants and the approach it adopts to recovering rent arrears.

RMBC takes rent arrears very seriously and we expect all tenants to pay the rent that is due each week. This is an important condition of the Tenancy Agreement. It is the responsibility of each tenant to ensure that their rent is paid in full.

However, we recognise that occasionally tenants may have genuine financial difficulties and are unable to pay the rent due. In these cases our service aim is to adopt a firm but fair approach to arrears recovery offering all tenants, where possible, clear, practical repayment plans appropriate to their means.

Policy Statement

RMBC aims to collect rent and other charges due promptly from tenants in order to sustain tenancies and protect the provision of services. The key aims are therefore to maximise income collection and minimise bad debts. In cases where rent arrears do accrue, these are kept to a minimum and effectively reduced through a fair, responsive and, where necessary, firm approach.

Strategic Objectives

The Key Strategic Objectives of the policy and procedure can be summarised as follows:

- *Collect rent promptly from tenants to sustain tenancies*
- *Maximise Income Collection*
- *Minimise Bad Debts*

Key Aims of Policy and Procedure

The prime objective of the Rent Collection and Arrears Recovery Policy is to sustain tenancies by taking early intervention to prevent arrears accruing in the first place and by pro-actively encouraging tenants to clear any debts that do occur. With this in mind, the aims are:

- To ensure that tenants are only allocated properties that they can afford.

- To ensure that all existing and new tenants are aware of their responsibility to pay the rent and, where appropriate, any other charges.
- To inform tenants promptly of any changes to rent charges.
- To inform all tenants of the different payment methods available to them.
- To maximise Housing Benefit take-up by raising awareness of entitlement and assisting with the completion of application forms where appropriate.
- To ensure that all those tenants entitled to Housing Benefit are aware that it is their responsibility to provide necessary documentation in relation to their claim, to follow-up claims with the Housing Benefit team and to advise them immediately should their financial circumstances change.
- To establish close and effective liaison with Housing Benefit, advising them of any known changes in circumstances, in exceptional circumstances requesting payments on account where claims have been delayed and ensuring the prompt payment of Housing Benefit.
- To provide or sign-post advice and assistance on welfare benefits to maximise tenant income.
- To promote financial inclusion by providing budgeting advice and signposting to other agencies or departments such as Citizen's Advice Bureau, Money Advice and Employment Solutions.
- To ensure that all communications are clear, customer friendly and encourage contact.
- To act promptly by providing personal contact and to offer advice to a tenant who falls into arrears, establishing the real reason for non-payment.
- To work closely with any advice agency or authorised person acting on behalf of the tenant.
- To undertake financial assessment of a tenants' circumstances, and ability to pay, with a view to making realistic arrangements to pay off arrears.
- To identify where tenants owe RMBC more than one debt and ensure that recovery action and / or repayment arrangements takes account of the total amount owed.

- To advise tenants of the next course of action and the ultimate consequences of non-payment throughout the recovery process.
- To take legal action against tenants who persistently fail to pay rent and other charges.
- To treat all tenants fairly and consistently and to act lawfully.
- To maximise the use of IT systems to monitor and record rent payments.
- To train colleagues to ensure they maximise the use of resources, such as IT and benefits advice.
- To provide colleagues with guidance on relevant legislation and recovery methods available to recover unpaid rent, service charges and recharges.
- To have a rent arrears recovery procedure that is clear, easy to follow and complies with all of the above, ensuring all arrears cases are actioned in a consistent and fair manner.
- The rent arrears recovery process will be regularly reviewed and updated to incorporate areas of best practice, in particular with reference to the characteristics of an excellent service provider

Legal Context

RMBC will at all times meet legislative and regulatory requirements, including but not limited to, the Homes and Communities Agency Regulatory Code and Guidance, the Ministry of Justice Pre-Action Protocol, the Housing Act 2004 and the Data Protection Act 1998.

Implementation

General

We will prevent arrears by providing services in ways that work best for the customer. We will be easy to contact and will give customers information and support that helps them understand and deal with rent issues. Support shall include signposting customers to other agencies that may be able to assist. We will charge and collect rent in a fair way, giving customers good advice on keeping rent up to date. We will encourage good starts by ensuring tenants understand how to manage their tenancy through paying rent and setting up utilities. We encourage tenancy end well by explaining the obligations for ending a tenancy.

We will pick up on current arrears early on, providing extra help and advice to people where they need it. When customers fall behind with their rent, we will contact them and make a fair arrangement to repay in a reasonable time (We will advise a tenant by letter on the first Monday their rent account is 3 net weeks in arrears and provide extra help and support if required). We will be honest with customers in arrears on where they stand and what options they have. We will assist tenants to prevent court action.

Even if recovery action becomes necessary, we will continue to give good advice on payments that will prevent attendance at court and eviction. We will work with other services that can help and support customers with a variety of needs that affect ability to pay rent. We will work with services that represent tenants in court with current arrears. We shall work to ensure that as few tenants as possible face eviction due to current arrears.

Rent Statements

We will provide detailed rent statements every quarter where tenants have opted to receive them. If a tenant has a credit or debit balance of £250 or more a statement will also be issued. Statements or balances are also available on request. At the start of the tenancy and each April thereafter we will issue tenants with a Rent Card to allow them to track payment history.

Interviews

Interviews will be conducted both over the phone and face to face depending on the circumstances of that case.

All interviews will be conducted assertively yet maintaining a sensitive and non-threatening manner with due consideration to privacy and confidentiality.

The first rent interview will take place at a pre-arranged appointment. If we experience difficulties making contact with the tenant the interview will be undertaken without prior appointment being made, upon contact the tenant will be made aware that a rent interview is to take place. If it is not convenient for the tenant to discuss the rent account details an alternative appointment will be agreed and documented.

Failure by the tenant to agree to or keep a subsequent appointment will result in triggering the next stage of the rent arrears recovery procedures unless there is good cause not to do so.

Where an interview is to be conducted at the tenant's home, colleagues will always produce their identity cards and explain the purpose of the visit. All interviews will be documented and the key points confirmed in writing.

New Tenants

All properties will be let through a two stage lettings process, with tenants attending a meeting at one of RMBC's offices in addition to viewing the property. The office meeting will be conducted by a Housing Advice Officer who will discuss the tenant's responsibility to pay rent and the consequences of non-payment and conduct an income and expenditure assessment where appropriate and undertake housing benefit verification / claims assistance work as necessary.

The first week's rent will be taken in advance at sign-up irrespective of whether eligible for Housing Benefit or not. In exceptional circumstances the Housing Advice Officer may consider a payment of less than one full

The Housing Advice Officer will:

- Provide information about the different payment methods available, promoting the take-up of direct debits;
- Encourage tenants to authorise the direct payment of Housing Benefit where applicable.
- Advise tenants to contact the Housing Income team promptly should their financial circumstances change or they are having difficulty paying their rent.
- Offer an appointment with the Tenancy Support, Money Advice or Employment Solution Officers where appropriate.
- Signpost the tenant to agencies providing independent debt management advice and income maximisation services where appropriate, including Age UK for tenants over 60 and potentially eligible for Attendance Allowance.

Follow-up contact will be made for tenants deemed to be at a high risk of not paying sufficient rent upon moving into a RMBC property. This will:

- Confirm that they are paying the correct rent due
- Check Housing Benefit has been or is likely to be received where appropriate
- Support tenants in making an application for Discretionary Housing Payment
- Advise of the consequences of not paying i.e. eviction from their home
- Offer an appointment with the Tenancy Support, Money Advice or Employment Solution Officers where appropriate.

Payment

Rents are due weekly over a 48-week (or 49-week) collection year. An account will be considered to be in arrears if a payment has not been received within the week in which it is due.

Payments can be made by one of the following methods:

- Payment at any Post OfficeTM with cash, cheque or debit card;
- Payment by cash, credit or debit card at any store displaying the Pay Point logo;
- Payment by telephone via debit or credit card at any time - the service is available 24 hours a day, 7 days a week;
- Payment by telephone via debit or credit card between 8.45am and 8pm (weekdays) at RMBC Contact Centre;
- Payment over the internet via debit or credit card at any time – the service is available 24 hours a day, 7 days a week at www.rmbc.gov.uk;
- From a bank/building society by direct debit or standing order;
- By direct transfer from a bank/ building society account using internet banking
- By authorising direct payment of Housing Benefit to RMBC;
- By cheque, sent through the post to Income Services at Riverside House offices.

Every opportunity will be taken to promote direct debits as a preferred method of payment. Any tenant in arrears will be asked to make a payment during any contact with the Housing Income Officer.

Action for non-payment

The procedure for rent arrears recovery gives full details of the action that RMBC will take and outline's relevant timescales, for each stage. The procedure is founded on the need for personal contact with the tenant throughout the process and is designed to help the tenant to repay the rent arrears and wherever possible avoid possession proceedings. For tenants who are persistently in arrears or for those that are unwilling to pay their rent due, RMBC promptly escalate the arrears recovery process to an advance stage of the procedure to minimise the potential bad debt. Whilst RMBC would not wish to take action that results in the eviction of tenants, it will do so, as a last resort, if other attempts to recover arrears are unsuccessful.

In all arrears cases we will follow the guidance on good practice as reflected in the Pre-action protocol for possession claims based on rent arrears.

Vulnerability

RMBC has many tenants who are elderly, tenants who are vulnerable through mental or physical disabilities and tenants who have young dependent children.

In such instances Housing Income will as appropriate:

Contact the Homelessness Prevention team prior to any court proceedings.

Inform the designated officer within Children & Young Peoples Service at the earliest opportunity where eviction appears inevitable.

Refer tenants to Age UK for assistance in applying for Attendance Allowance

In implementing this policy RMBC will ensure that any tenants who have mobility problems due to disability or stress, or who need information in other formats and languages, or who may need interpreters or signers, or who have difficulty with reading are provided with assistance as deemed reasonable by the officer managing the case.

RMBC will ensure that equality and diversity considerations are integral to the rent arrears recovery process.

RMBC: Housing Benefit

Housing Income will work closely with RMBC's Housing Benefit Section to ensure prompt payment of benefit. The Housing Income team will arrange for quarterly liaison meetings with the Housing Benefits team in respect of the day to day administration of Housing Benefit payments.

Department of Work and Pensions (DWP)

The Housing Income team will liaise with the DWP about direct payment of rent arrears from income support where appropriate.

Joint Tenancies

All joint tenants are jointly and severally liable for rent arrears that may accrue.

RMBC will:

- Address all letters to all the tenants named in the tenancy agreement
- Make arrangements and hold interviews with any tenant who appears to be acting on behalf of all parties in the tenancy agreement
- Provide a copy of all legal documents to all parties named in the tenancy agreement

Sole Tenancies

In households with single tenancy agreements and where the householders are married, cohabiting for tax or benefit purposes, or have joint custody over children under 16 we will always encourage the tenant to keep other interested parties within the household informed of any legal action in connection with rent arrears; interested parties do not include lodgers and those who sublet.

Garage Tenancies

In order to protect the principal tenancy and therefore to avoid possible eviction, a garage tenancy will be terminated in situations where the tenant is in arrears on the main tenancy and the agreed repayment plan has not been adhered to. The tenant will be free to apply for another garage once arrears have been cleared and the account remains clear for a period of 6 months.

Former Tenant Arrears

RMBC will ensure that tenants are made aware of their obligations even after termination of their tenancy. Where a tenant is in arrears and they terminate the tenancy no extension to the tenancy will be given. Upon notice of termination, the tenant will be made aware of any rental balance due and a forwarding address will be requested. Where the outgoing tenant is not in a position to clear any balance prior to termination, an affordable and realistic repayment agreement will be reached. This agreement will be confirmed in writing and the tenant will be made fully aware of the methods of payment after termination.

RMBC will pursue all recoverable former tenant arrears. Where no forwarding address is given, every effort will be made to trace the former tenants' whereabouts using Experian. A collection agency will also be used if appropriate.

Failure to agree to or maintain an acceptable repayment arrangement will result in further recovery action. The appropriateness of such action will be considered on a case by case basis and may include

- Money judgement
- Attachment of earnings
- Third Party Debt Order
- Warrant of Execution
- Order to Obtain Information
- Bankruptcy
- Selling on Debts

RMBC will only normally house an applicant where there is an outstanding debt owing if a payment arrangement has been agreed and maintained by the applicant as per section 2.4 of the Allocations Policy.

Where it makes no financial sense to pursue a debt it will be written off in accordance with RMBC standing orders.

MONITORING AND RESPONSIBILITIES

It is the responsibility of the Director of Housing and Neighbourhoods to ensure that implementation of the Rent Collection and Arrears Recovery policy is monitored.

The Business and Commercial Programme Manager is responsible for delivering the policy and will be accountable for its implementation and colleague training.

All colleagues dealing with rent collection and arrears recovery issues has the responsibility to read, understand and implement this policy.

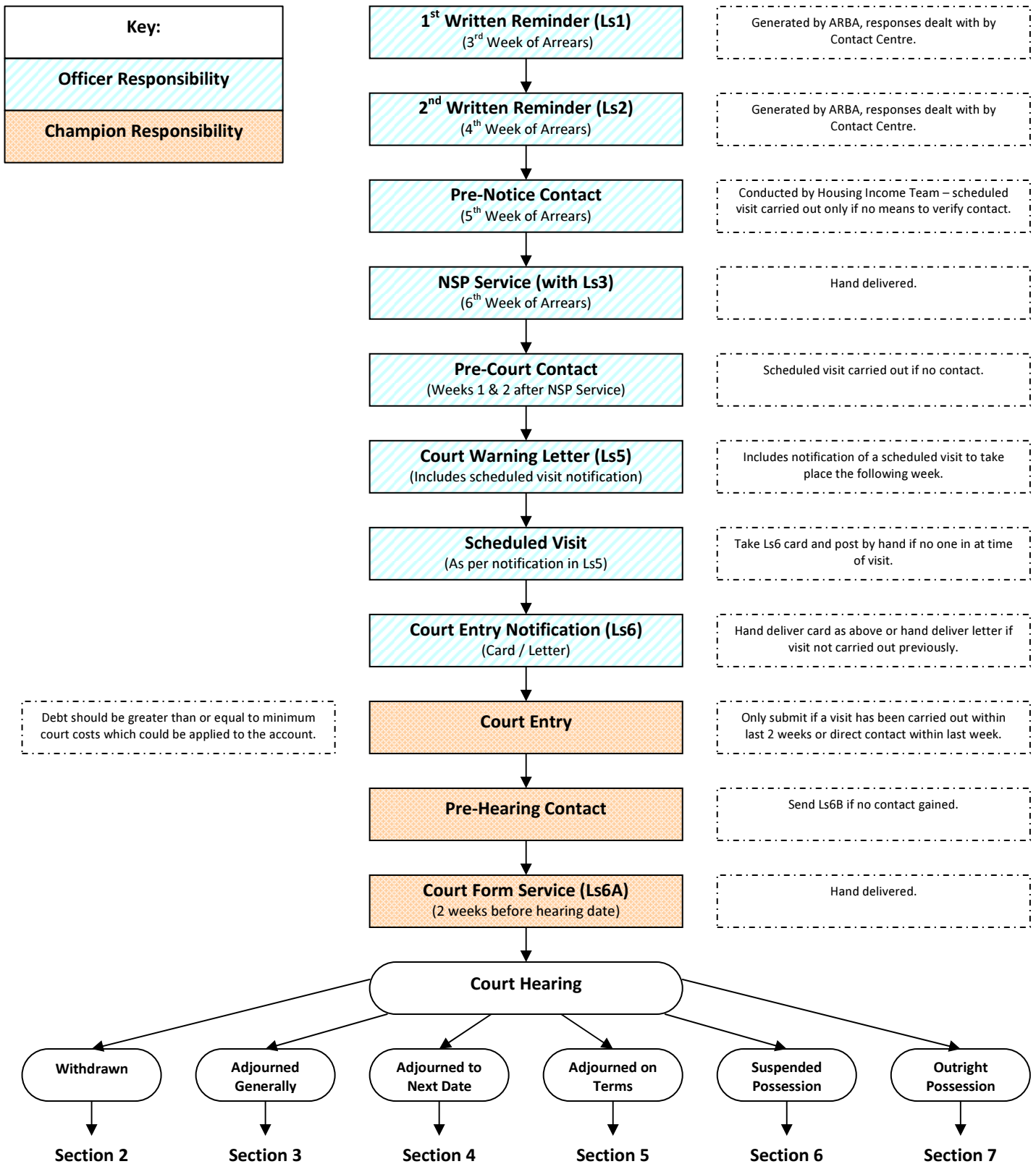
ASSOCIATED DOCUMENTS

Rent Collection & Arrears Recovery Procedures
Allocations Policy & Procedures
Customer Complaints Policy & Procedure
Customer Care Standards
HCA Regulatory Framework
Ministry of Justice Pre-Action Protocol

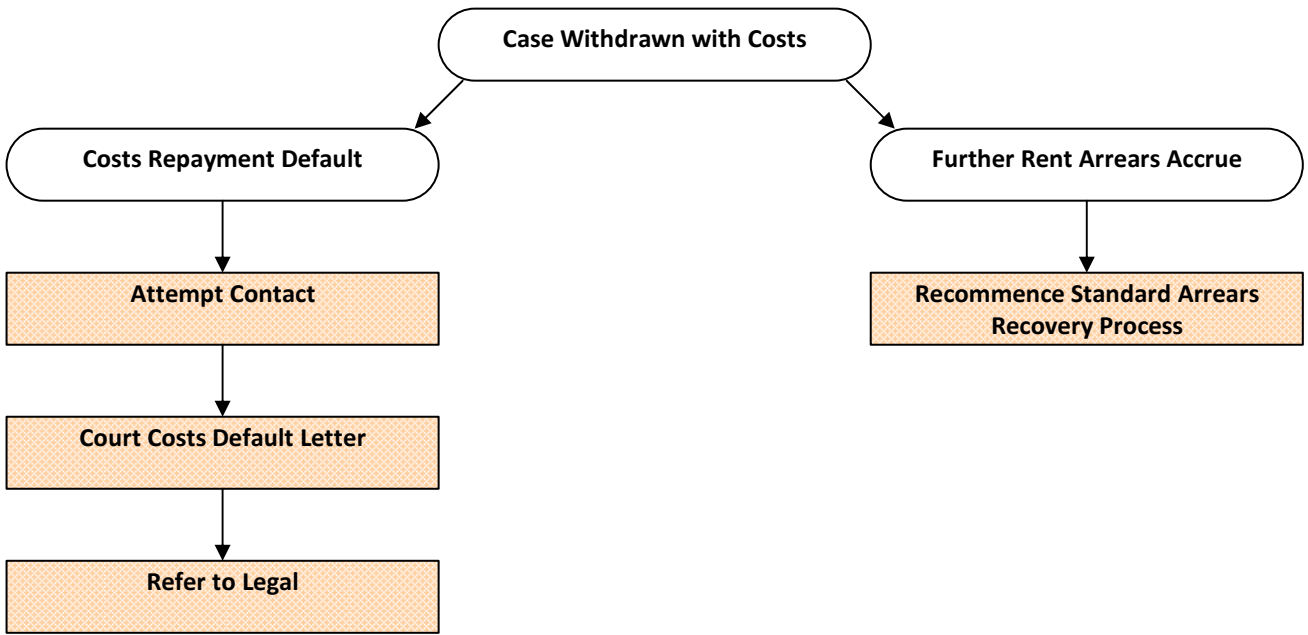
Arrears Process Flowchart – Secure Tenancies

The standard minimum procedural steps relating to the secure tenancy arrears process are outlined below.

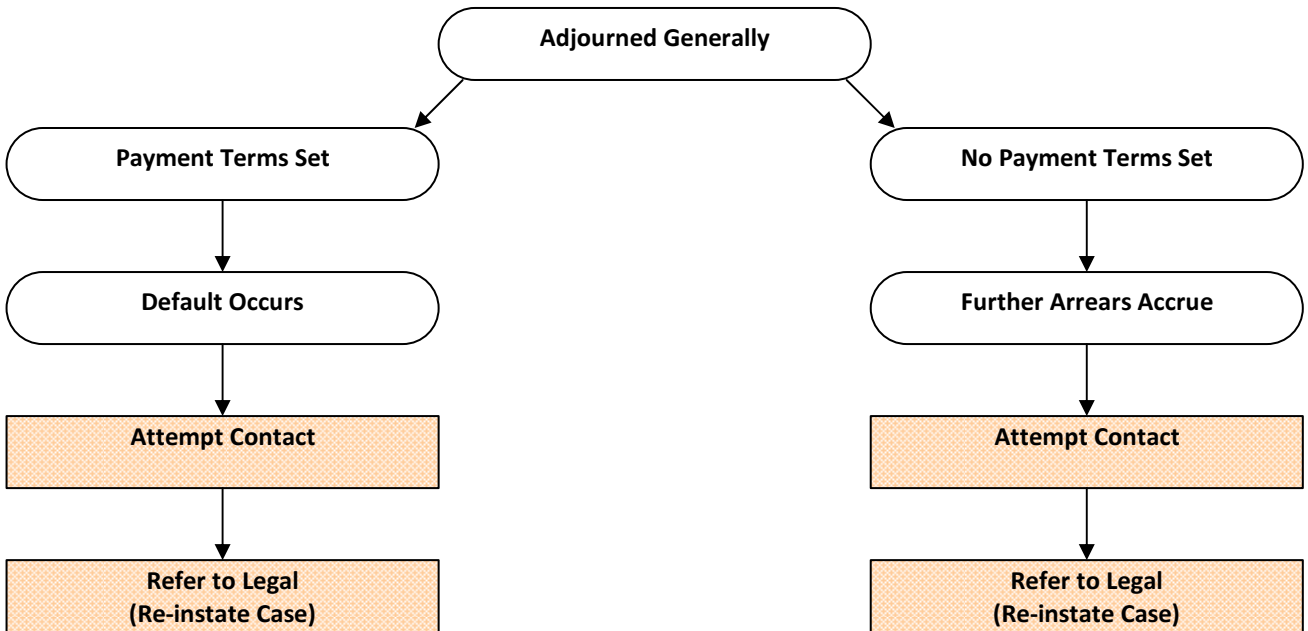
Section 1: Initial Arrears to Court Entry



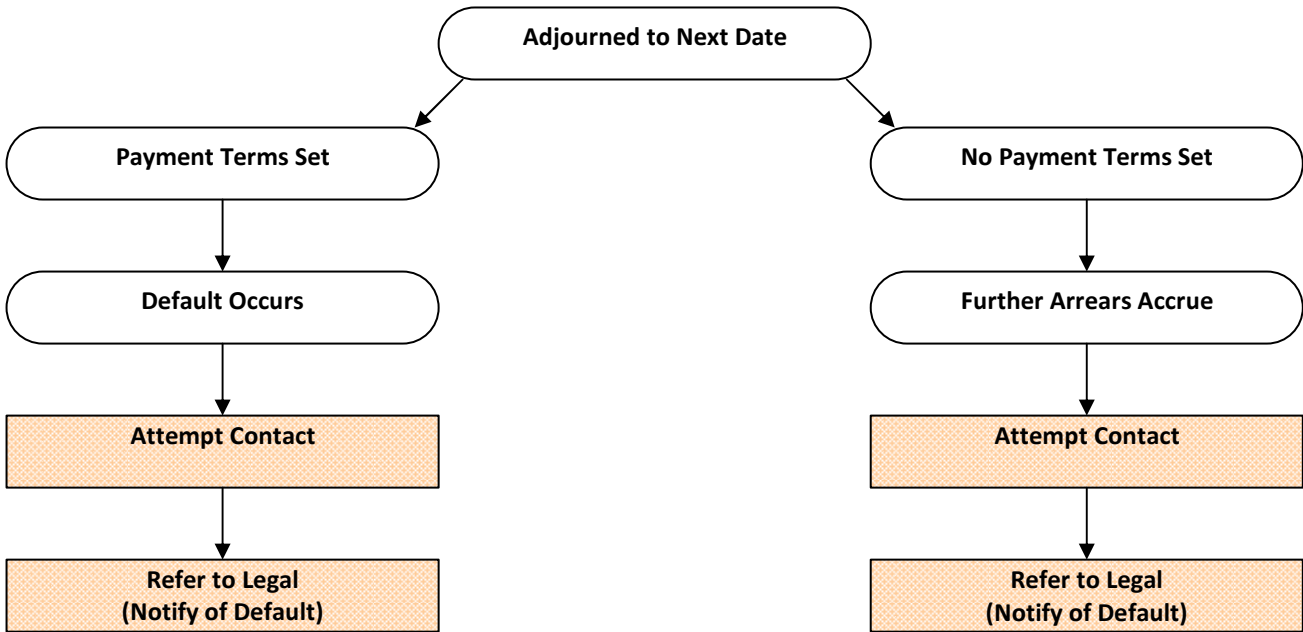
Section 2: Case Withdrawn (with Order for Costs)



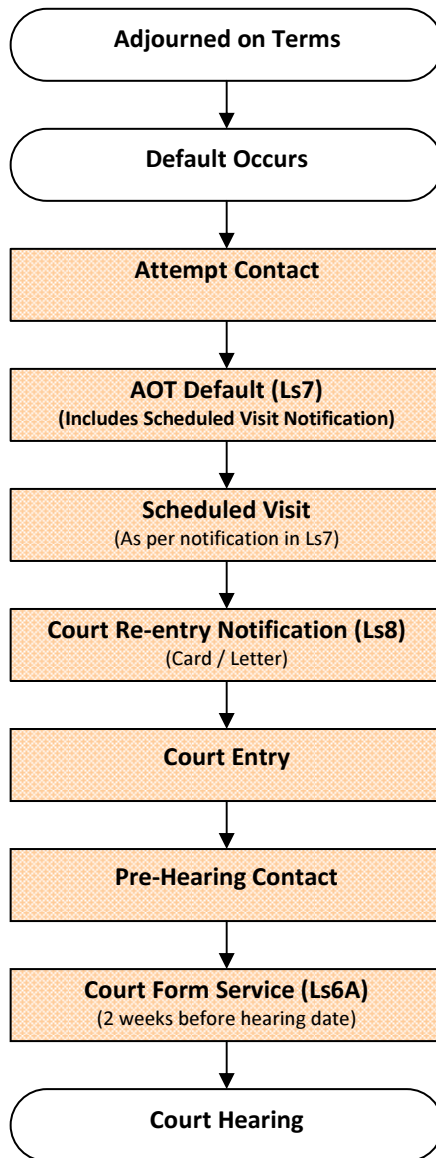
Section 3: Case Adjourned Generally



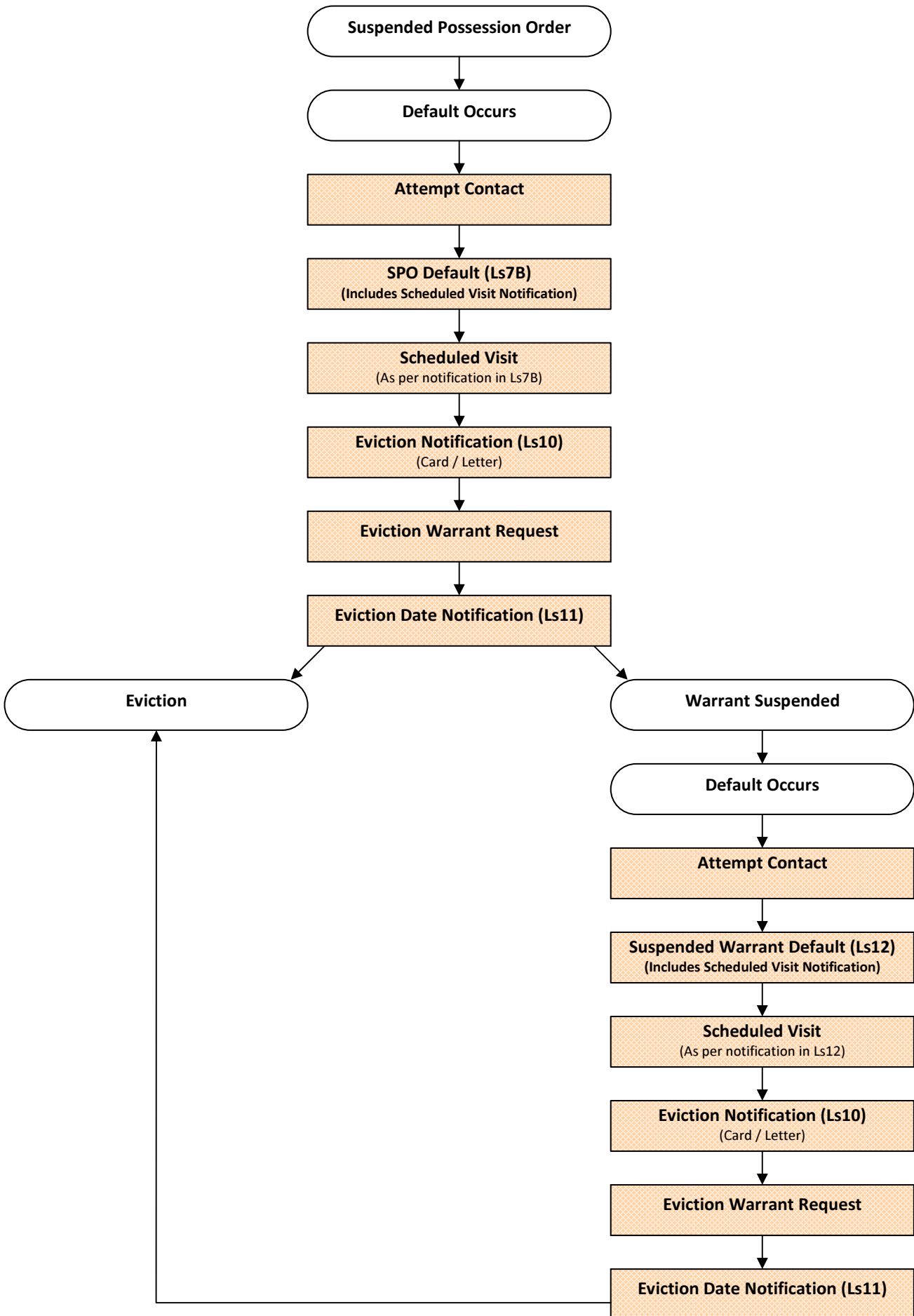
Section 4: Case Adjourned to Next Available Date



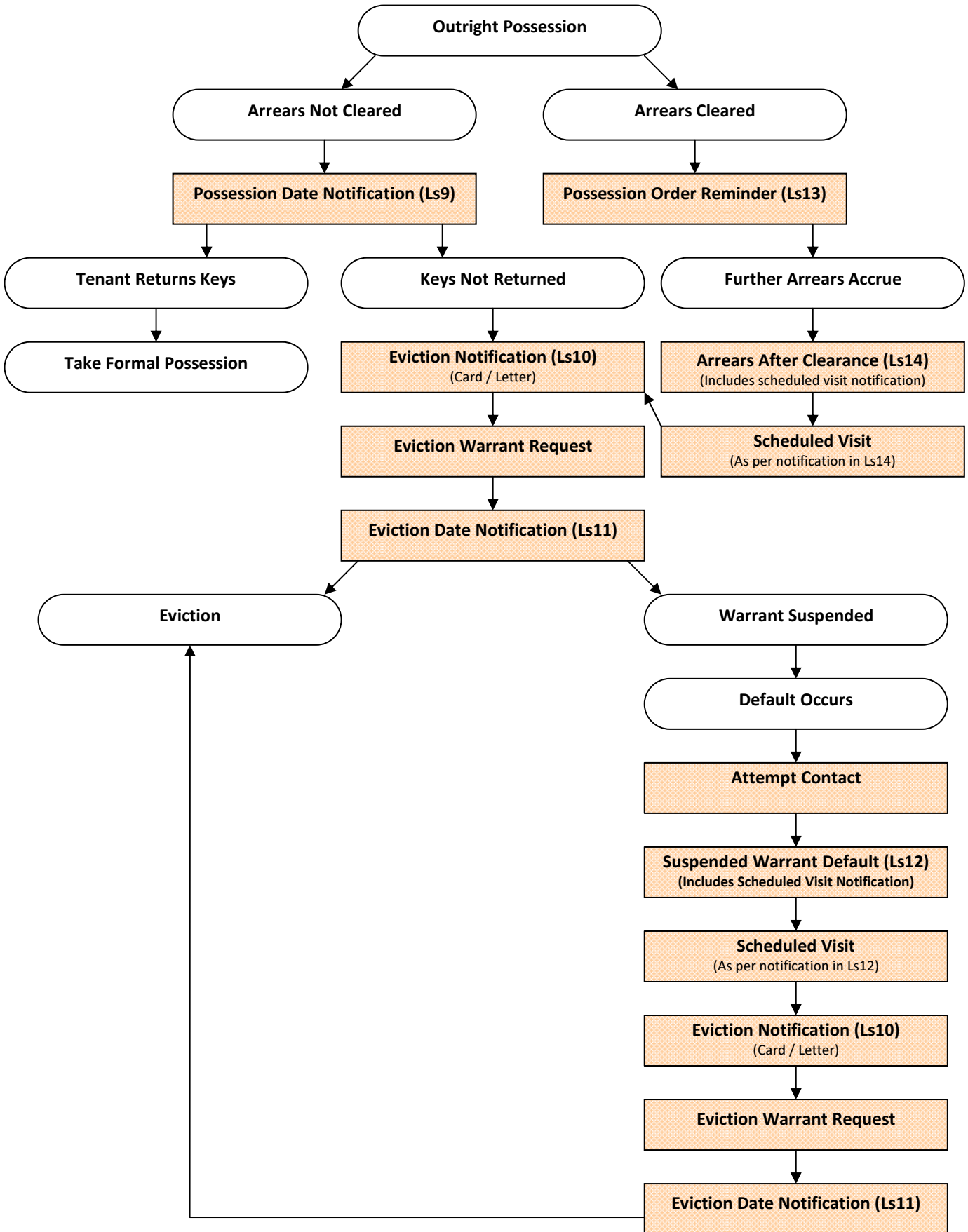
Section 5: Case Adjourned on Terms



Section 6: Suspended Possession Order Granted



Section 7: Outright Possession Order Granted



ROTHERHAM BOROUGH COUNCIL - REPORT TO MEMBERS

1. Meeting:	Cabinet
2. Date:	05 November 2014
3. Title:	Community Infrastructure Levy Draft Charging Schedule
4. Directorate:	Environment & Development Services

5. Summary

This report seeks approval for consultation on a Rotherham Community Infrastructure Levy Draft Charging Schedule.

6. Recommendations

That Cabinet approves consultation on a Rotherham Community Infrastructure Levy Draft Charging Schedule.

7. Proposals and details

Background

The Council is preparing a Community Infrastructure Levy (CIL) to help raise the money required to support local infrastructure needed as result of development proposed in the Local Plan.

Cabinet (24/07/2013) previously approved consultation on a Preliminary Draft CIL Charging Schedule which was undertaken in August – October 2013. Appendix 1 summarises responses received.

Since then, the Local Plan's Core Strategy has been adopted. Rotherham's confirmed housing target has allowed an update to the assessment of infrastructure required to deliver the Local Plan. It has also allowed the CIL viability evidence to be enhanced. This work now permits progression of CIL to consultation on a Draft Charging Schedule.

CIL

CIL will largely replace off-site Section 106 financial contributions negotiated on a site-by-site basis (e.g. school places). S106 will still be used, where appropriate, to secure affordable housing and on-site mitigation.

In the majority of cases, CIL charges will replace the amounts currently paid via s106 so most developers are not likely to notice a difference in development cost. However, developments that have been below current s106 thresholds (in terms of size) will now be required to make a contribution towards cumulative infrastructure costs.

An amount of CIL will also be required to deliver a "meaningful proportion" of infrastructure improvements locally by direct payment to local parish councils. In Rotherham, this will amount to 15% of any CIL revenue generated by development in a parish's area. This would be 25% where any local Neighbourhood Plan is adopted – there are none in Rotherham at present.

Proposed Charge Rates: Draft Charging Schedule

Consultants were appointed by the Council in May 2013 to undertake a CIL Viability Study to support CIL preparation. Following responses received to the Preliminary Draft Charging Schedule this viability evidence has been revised, to justify the following CIL rates.

The recommended CIL rates are based on the ability of development to pay. The Viability Study has shown that CIL remains viable for residential, supermarkets and retail warehouse but not for any other development type. A new separate charge category for retirement living is also proposed.

The Viability Study recommends the following levels of CIL, which for residential vary across 4 zones:

Type of Development	Charge Area	Rate £/m ²)
Residential Zone 1 High	Broom, Moorgate, Whiston, Wickersley, Bramley & Ravenfield	£55
Residential Zone 2 Medium	Rural North West, the Dearne and South Rotherham	£30
Residential Zone 3 Low	Rest of Rotherham Urban Area (part)	£15
Residential Zone 4	Bassingthorpe Farm Strategic Allocation	£15
Retirement Living ¹	Borough-wide	£20
Supermarket ²	Borough-wide	£60
Retail Warehouse / Retail Parks ³	Borough-wide	£30
All Other Uses	Borough-wide	£0

Appendix 2 gives the Draft Charging Schedule which includes an updated map of these zones.

CIL Income, Funding Gap, Infrastructure Provision & the “Regulation 123” List

If all of the planned growth in the Local Plan takes place, then the estimated income based on the above CIL rates is at least £12m. Updates to the infrastructure assessment shows that total infrastructure requirements in Rotherham are estimated to cost about £99m. Of this, £48.8m funding is anticipated from mainstream or known sources, thus leaving a CIL funding gap of just over £50m.

This funding gap is to be expected, as CIL income will never be sufficient to plug the entire infrastructure funding requirement. Indeed, it is necessary to show such a gap exists at CIL examination to justify introduction of the levy. The Rotherham Infrastructure Delivery Study sets out a number of measures to manage this funding gap and ensure that infrastructure needed to meet the needs of growth is delivered in a timely manner.

A draft ‘Regulation 123’ has been produced which is required to set out what infrastructure the Council *may* fund, in whole or in part, from CIL receipts and so avoid double funding using s106 developer contributions. This list is not exhaustive and, subject to further consultation, is capable of ready amendment (unless the change is so significant it affects the viability evidence underpinning CIL).

Any generic infrastructure type (e.g. education provision) or individual project (e.g. extension to a school) included on the list cannot be funded via S.106 Planning Obligations / S.278 highway agreements. Also from April 2015, no more than five

¹ Defined as residential units which are sold with an age restriction, typically over 50s/55s, with design features and support services available to enable self-care and independent living. For the purposes of the CIL charge, this type of development has been excluded from the residential use category.

² Defined as a shop which is a shopping destination in its own right, where weekly and daily food shopping needs can be met and which can also include non-food floor space as a part of the overall mix of the unit.

³ Defined as stores selling comparison goods such as bulky goods, furniture, other household and gardening products, clothing, footwear and recreational goods. These stores will comprise of single storey format (with flexibility to include an internal mezzanine floor) and will have dedicated free car parking provision to serve the units.

S106 obligations can be pooled to pay for a generic infrastructure type or individual project; which includes obligations used to pay for such infrastructure since April 2010. The wording of the Regs 123 list is therefore critical to ongoing use of S106.

Rotherham's proposed Regulation 123 list is as follows. (The detailed lists referred to in the table below are set out in Appendix 3).

Draft Rotherham Regulation 123 List for CIL

- Primary and Secondary School Places (see detailed list) (excluding school places at Bassingthorpe Farm, where Primary provision will be funded by S106 on site; and extensions to Greasbrough Secondary School will be funded by S106).
- Named highway junction improvements (see detailed list).
- Key Bus Routes (improvements to public transport infrastructure).
- Doctors Surgeries excluding the provision of an on-site GP surgery to serve the Bassingthorpe Farm development (which will be funded via S106).
- Improvements to existing green infrastructure, recreation and open space (excludes new provision which will be met by developers mainly on-site as enabling / design requirements) (see detailed list).
- Public Library extension, refurbishment and redevelopment (excluding refurbishment of Greasbrough library which will be funded by S106 as part of Bassingthorpe Farm).
- Police Station expansion at Dinnington and Wath.
- Rotherham Renaissance Flood Defence Scheme.

Revenue from CIL has to be ring-fenced for infrastructure but the Council has flexibility to spend on its priority infrastructure to help deliver the development in the Local Plan. The CIL Study makes no recommendations on how CIL should be prioritised or spent. Prioritisation of CIL revenue spend on items shown on the Regulations 123 List will be guided by an infrastructure delivery group and will be informed by regular consultation with developer and infrastructure service providers to help support the delivery of the Local Plan strategy.

Consultation

Approval is being sought for consultation on a Draft Charging Schedule for CIL, for a 6 week period from 24 November 2014 to 5 January 2015. This will largely be a web-based consultation targeted at key stakeholders.

The Council then has an opportunity to consider issues raised by respondents before the Draft is submitted to government for independent examination by the Planning Inspectorate. Adoption would then follow as soon as possible.

8. Finance

In the majority of cases, CIL charges will replace the amounts currently paid by developers via s106 agreements so most developers are not likely to notice a difference in development cost. However, developments that have been below current s106 thresholds (in terms of size) will now be required to make a contribution towards cumulative infrastructure costs.

The Planning Service will meet the costs associated with the production of the Community Infrastructure Levy, including its consultation, from existing budgets. The CIL Regulations allow for up to 5% of CIL income to be used for the preparation and ongoing administration of CIL which, in the first three years of CIL implementation, can be pooled on a rolling basis to meet the initial preparation and set-up costs.

9 Risks and Uncertainties

The Community Infrastructure Levy is one of the key funding mechanisms that can *help* fund the infrastructure needed to deliver the developments proposed in Rotherham's Local Plan. Consultation with developers, landowners and the public is an important part of CIL preparation.

Failure to introduce a local CIL could severely restrict the Council's ability to ensure that new development contributes to the infrastructure required because of the limitation on pooling s106 agreements which will come into force nationally in April 2015. It is a priority that Rotherham adopts its CIL Charging Schedule as soon as practically possible after this date.

10 Policy and Performance Agenda Implications

Consultation on a CIL Draft Charging Schedule will enable the Council to help realise the development proposed in the Local Plan.

Once adopted, the CIL will introduce an additional funding mechanism of potential benefit to assist the provision of infrastructure by a wide range of services, both within and beyond the Council.

11 Background Papers and Consultation

August 2013 CIL Preliminary Draft Charging Schedule and supporting documents:
<http://rotherham.limehouse.co.uk/portal/planning/cil/cil?tab=files>

12 Contact

David Edwards, Senior Planning Officer
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Appendix 1 Responses to August 2013 Consultation CIL Preliminary Draft Charging Schedule

Cabinet (24/07/2013) approved consultation on a Preliminary Draft CIL Charging Schedule (PDCS) which was undertaken in August – October 2013.

Consultation on the PDCS produced comments from a total of 21 respondents (2 of which were received late but accepted).

Summary of key issues received

- Concern that CIL payments may exceed S106 costs.
- Retail CIL charge is too high. Alternative rates suggested for residential and retail. Zero rate for employment development is supported.
- Mixed response regarding whether to introduce exceptional circumstances relief.
- Mixed response to proposed payments instalment policy.
- Regs 123 list should be made available alongside Draft Charging Schedule.
- Parishes: should receive the local CIL allocation (15%) for development in adjacent parishes; Borough Council should not pool CIL receipts – all should be allocated to parishes.
- Brownfield sites should be charged at zero CIL rate; and greenbelt sites at the highest CIL rate.
- Bassingthorpe Farm should not be charged at lowest CIL rate. However, the majority landowner at Bassingthorpe Farm requests zero CIL rate due to viability concerns affecting deliverability of this strategic allocation.
- CIL rates should match relative distribution of new housing proposed in the Local Plan.
- Environment Agency support the use of CIL for Rotherham Renaissance Flood and other flood alleviation schemes.
- Evidence base under-estimates building costs; over-estimates sales values; omits others sources of funding (e.g. council tax/ New Homes Bonus).
- Zero rate should be levied against sheltered housing / elderly specialist accommodation. agricultural buildings, agriculture tied housing and barn conversions.
- SYPTE: support use of CIL to help pay for new public transport infrastructure.

Appendix 2 Draft Charging Schedule

**Rotherham
Community
Infrastructure
Levy**



Draft Charging Schedule November 2014

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Background to the CIL

1. The Community Infrastructure Levy (CIL) is a new way of securing contributions from developers towards infrastructure provision through the planning system. To a large degree it will replace previous payments negotiated individually as planning obligations (known as Section 106 Agreements).
2. CIL seeks to ensure that new developments contribute to the provision of infrastructure improvements where viable. The money raised will be put towards providing essential infrastructure, needed across the Borough to enable new development to take place. This new infrastructure could include, for example, transport improvements, school places, open space and others.
3. This document, the Draft Charging Schedule, sets out the proposed rates that will be charged on new development, and this is subject to a period of public consultation that runs from **24 November 2014 to 5 January 2015**.
4. The proposed charges were agreed for consultation by the Council's Cabinet on 05 November 2014, and are based solely on the ability of development to pay, so must be financially viable. To determine this, independent consultants, Peter Brett Associates, undertook a CIL (Viability and Infrastructure) Study, updated by Addendum October 2014, and this has been used as the basis for setting the proposed charges. The charges should represent an appropriate balance between raising sufficient funding to contribute towards providing essential infrastructure, whilst not being so high as to threaten the economic viability of development as a whole in Rotherham.

Consultation on the CIL

5. The Council consulted on a Preliminary Draft Charging Schedule in August 2013. A number of responses were received and these together with further work have informed a revised draft. We welcome comments on this draft, updated accompanying CIL Study and other background evidence.
6. Comments on this Schedule can be made online at <http://rotherham.limehouse.co.uk/portal/>, by emailing planning.policy@rotherham.gov.uk or in writing to 'CIL Consultation, Rotherham MBC, Planning Policy, Planning and Regeneration Service, Riverside House, Main Street, Rotherham, S60 1AE'. Please note that responses cannot be treated as confidential.
7. If you have any questions, please contact David Edwards on 01709 823824 / david.edwards@rotherham.gov.uk

The Need for CIL to Fund Infrastructure

8. The CIL rates must be based on the ability of development to pay. The CIL Study by specialist independent consultants has provided evidence that some development in the Borough can afford to pay a CIL charge to help meet identified needs for infrastructure (<http://rotherham.limehouse.co.uk/portal/>).
9. Charges are expressed as a cost per square metre of additional net gross internal floorspace. Developments of less than 100 square metres will not pay a charge, unless they involve the provision of a new dwelling.
10. An update to the Infrastructure Delivery Plan is included in a CIL Background Paper. This Paper also includes a draft “Regulation 123 list” which lists those infrastructure types and projects that CIL may be used to fund (see <http://rotherham.limehouse.co.uk/portal/>).
11. The CIL Legislation in Regulation 14(1)⁴, requires that the Council:
- “In setting rates (including differential rates) in a charging schedule, a charging authority must strike an appropriate balance between:*
- a. the desirability of funding from CIL (in whole or in part) the actual and expected estimated total cost of infrastructure required to support the development of its area, taking into account other actual and expected sources of funding; and*
- b. the potential effects (taken as a whole) of the imposition of CIL on the economic viability of development across its area.”*
12. This approach is reiterated in the CIL Guidance in Paragraph 19⁵.
13. The Council is proposing to charge the following levels of CIL: (Charges for residential development will vary according to zone, whereas charges for all other development as listed below will apply for all of Rotherham Borough – see Map 1).

Proposed CIL Rates

Type of Development	Charge Area	Rate £/m ²
Residential Zone 1 High	Broom, Moorgate, Whiston, Wickersley, Bramley & Ravenfield	£55
Residential Zone 2 Medium	Rural North West, the Dearne and South Rotherham	£30
Residential Zone 3 Low	Rest of Rotherham Urban Area (part)	£15
Residential Zone 4	Bassingthorpe Farm Strategic Allocation	£15
Retirement Living ⁶	Borough-wide	£20
Supermarket ⁷	Borough-wide	£60
Retail Warehouse / Retail Parks ⁸	Borough-wide	£30
All Other Uses	Borough-wide	£0

Proposed Instalments Policy

⁴ http://www.legislation.gov.uk/ukdsi/2010/9780111492390/pdfs/ukdsi_9780111492390_en.pdf
http://www.legislation.gov.uk/ukdsi/2011/9780111506301/pdfs/ukdsi_9780111506301_en.pdf
http://www.legislation.gov.uk/ukdsi/2012/2975/pdfs/ukdsi_20122975_en.pdf
http://www.legislation.gov.uk/ukdsi/2013/982/pdfs/ukdsi_20130982_en.pdf
http://www.legislation.gov.uk/ukdsi/2014/9780111106761/pdfs/ukdsi_9780111106761_en.pdf

⁵ <http://planningguidance.planningportal.gov.uk/blog/guidance/community-infrastructure-levy/>

⁶ Defined as residential units which are sold with an age restriction typically over 50s/55s with design features and support services available to enable self-care and independent living. For the purposes of the CIL charge, this type of development has been excluded from the residential use category.

⁷ Defined as a shop which is a shopping destination in its own right, where weekly and daily food shopping needs can be met and which can also include non-food floor space as a part of the overall mix of the unit.

⁸ Defined as stores selling comparison goods such as bulky goods, furniture, other household and gardening products, clothing, footwear and recreational goods. These stores will comprise of single storey format (with flexibility to include an internal mezzanine floor) and will have dedicated free car parking provision to serve the units.

14. In line with Regulation 69B of the CIL regulations, the Council is proposing to offer payment of CIL in instalments as a matter of course. This will make it easier for developers to pay the charge, as receipts from new development can then be used to make the CIL payments. The proposed policy is as follows:

- The Community Infrastructure Levy will be payable as follows:

Instalment Provisions : Chargeable Amount					
Less than £100,000			Equal to or More than £100,000		
Instalment	Amount Due	Due Date*	Instalment	Amount Due	Due Date*
1 st	50%	180 days	1 st	25%	180 days
2 nd	50%	360 days	2 nd	50%	260 days
			3 rd	25%	450 days

* days after commencement of development - commencement will be taken to be the date advised by the developer in the commencement notice under CIL Regulation 67.

Next Stages

15. Setting up a CIL has to be done through legislation originally in the Planning Act of 2008⁹, enacted in 2010¹⁰, and amended in 2011¹¹, 2012¹², 2013¹³ and 2014¹⁴. Once consultation has closed on the Draft Charging Schedule, the next stage will be to submit the Charging Schedule for examination with adoption anticipated in Autumn 2015.
16. The detailed spending arrangements for the Levy funds are still to be determined but the current thinking is that once CIL is in place it will be the main mechanism for securing developer contributions towards the cost of infrastructure and s106 contributions will be scaled right back.
17. It is proposed to set up a Developer Forum similar to the existing Infrastructure Forum to help inform spending priorities to be aligned with actual delivery. The Council wishes to assure developers that CIL funding will be used to support timely infrastructure to help deliver growth. A Memorandum of Agreement is being drafted for this.

Availability of Documents

18. The Draft Charging Schedule, Draft Regulations 123 List, Statement of Representations from the previous 2013 Consultation and other background evidence including the CIL Study (2013) and Addendum (2014) is available to view via www.rotherham.gov.uk/planningpolicy or <http://rotherham.limehouse.co.uk/portal/>.

⁹ <http://www.legislation.gov.uk/ukpga/2008/29/part/11>

¹⁰ http://www.legislation.gov.uk/ukdsi/2010/9780111492390/pdfs/ukdsi_9780111492390_en.pdf

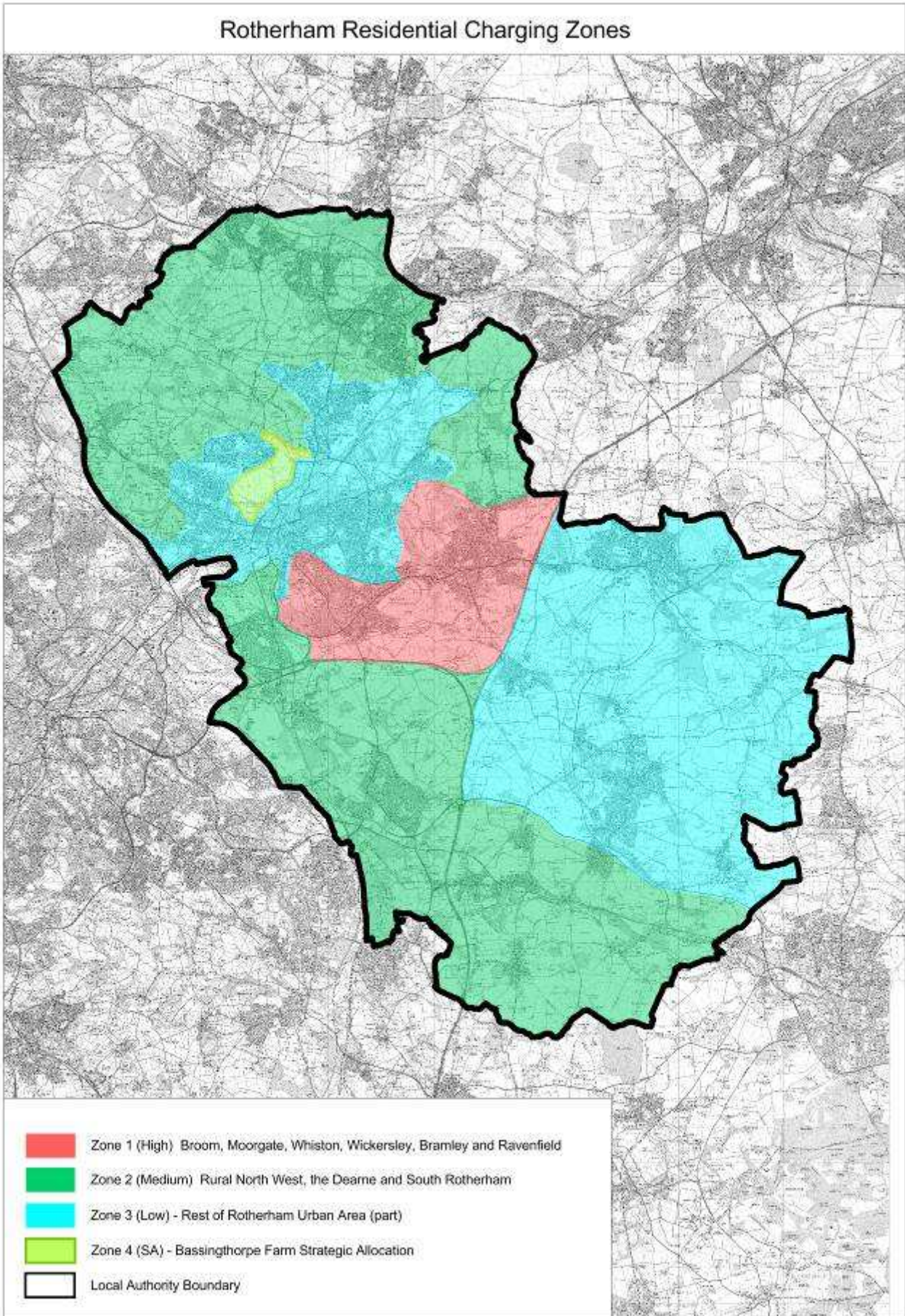
¹¹ http://www.legislation.gov.uk/ukdsi/2011/9780111506301/pdfs/ukdsi_9780111506301_en.pdf

¹² http://www.legislation.gov.uk/ukdsi/2012/2975/pdfs/ukdsi_20122975_en.pdf

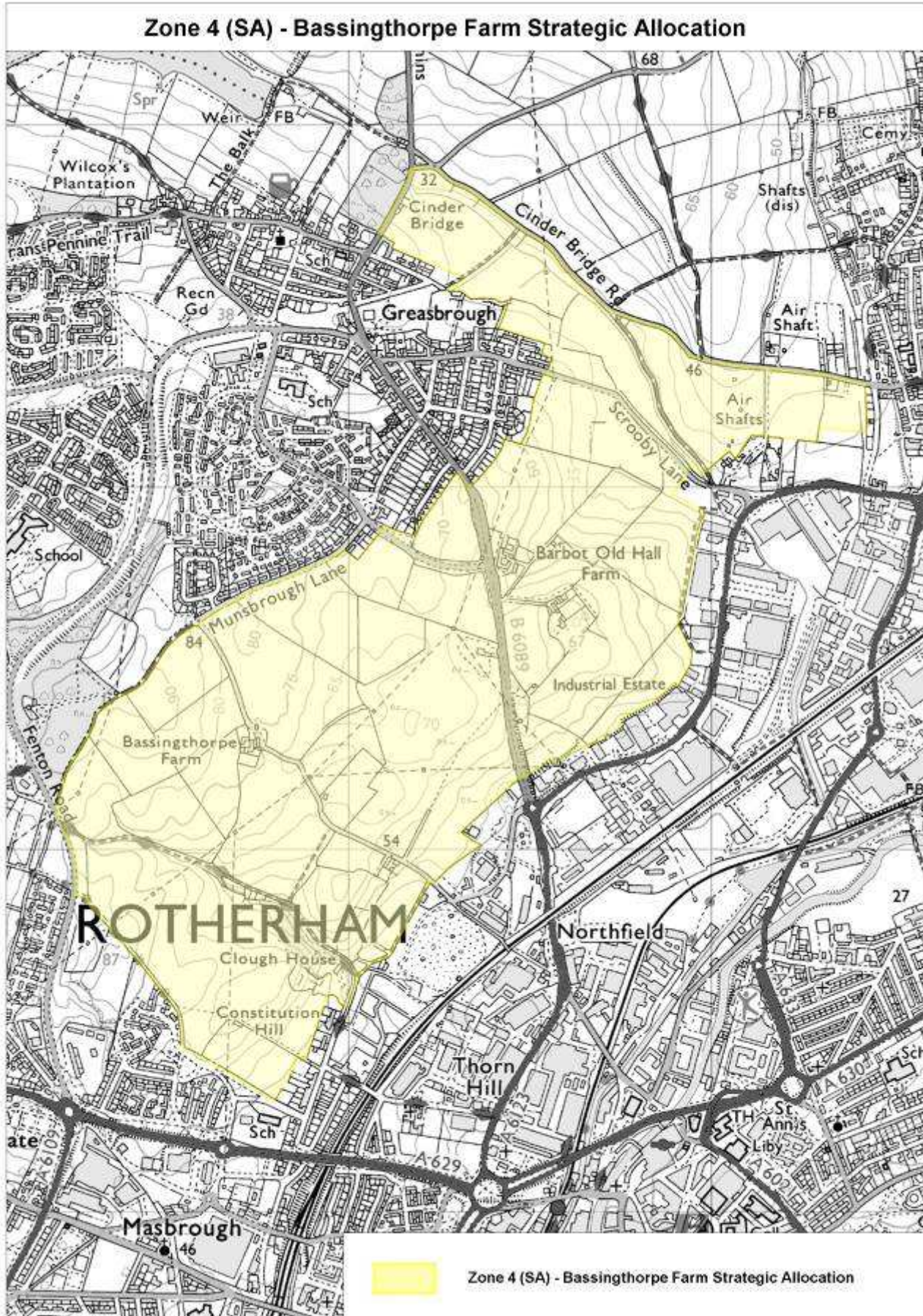
¹³ http://www.legislation.gov.uk/ukdsi/2013/982/pdfs/ukdsi_20130982_en.pdf

¹⁴ http://www.legislation.gov.uk/ukdsi/2014/9780111106761/pdfs/ukdsi_9780111106761_en.pdf

Map 1 Rotherham Residential Charging Zones



Map 2 Residential Charging Zone : Bassingthorpe Farm Strategic Allocation



**Rotherham
Community
Infrastructure
Levy**

**ROTHERHAM
METROPOLITAN BOROUGH COUNCIL**

COMMUNITY INFRASTRUCTURE LEVY

Draft Regulation 123 List

November 2014

**Rotherham Metropolitan Borough Council
Draft CIL Regulation 123 List**

The infrastructure projects / types which Rotherham Metropolitan Borough Council may fund, in whole or in part, from CIL receipts is set out below.

Note, this list is not exhaustive and does not prioritise how the Council will actually spend CIL receipts.

This list also commits the Council to not require developments to contribute to the items listed via 'S106 Planning Obligations' (under Section 106 of the Town & Country Planning Act 1990, as amended by Section 12 of the 1991 Planning and Compensation Act, and the Localism Act 2011) and/ or 'S278 Agreements' under Section 278(1) of the Highways Act 1980 (amended by Section 23 of the New Roads and Street Works Act 1991).

Summary List (to be read in conjunction with Detailed List)

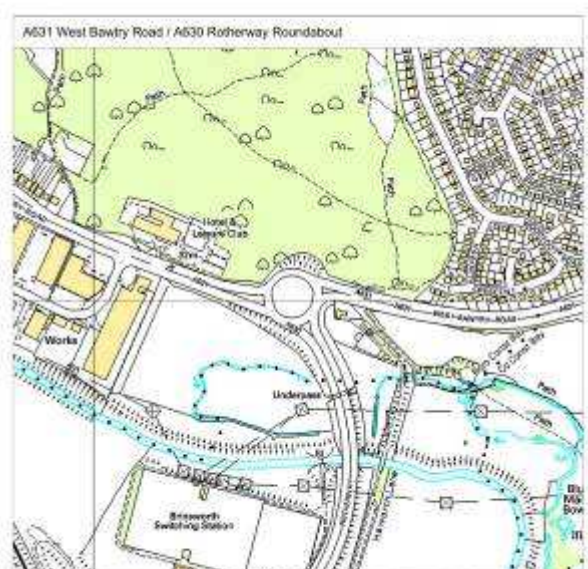
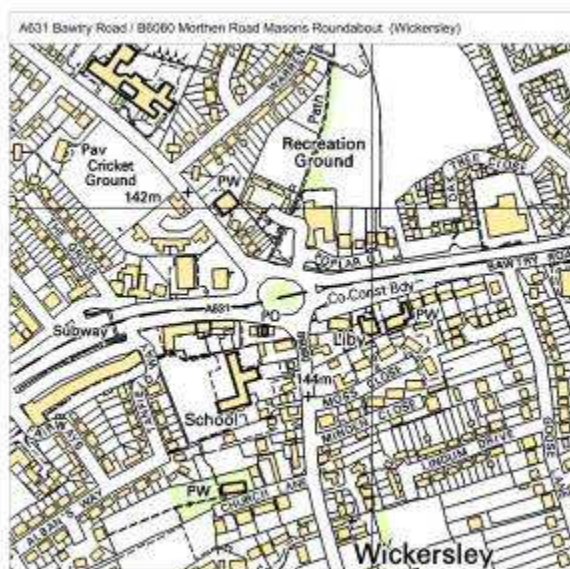
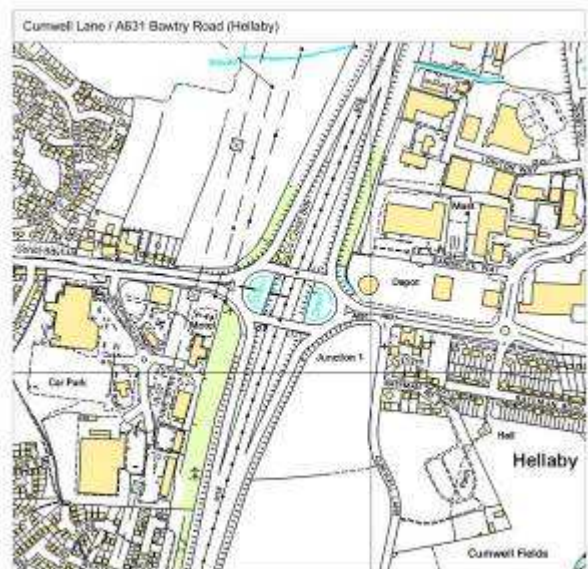
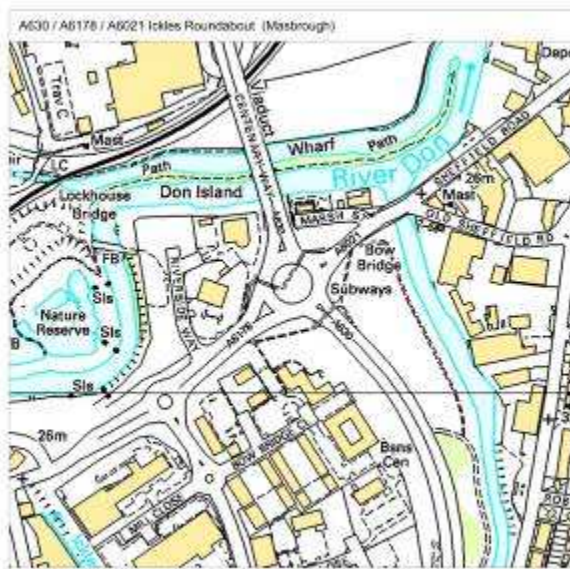
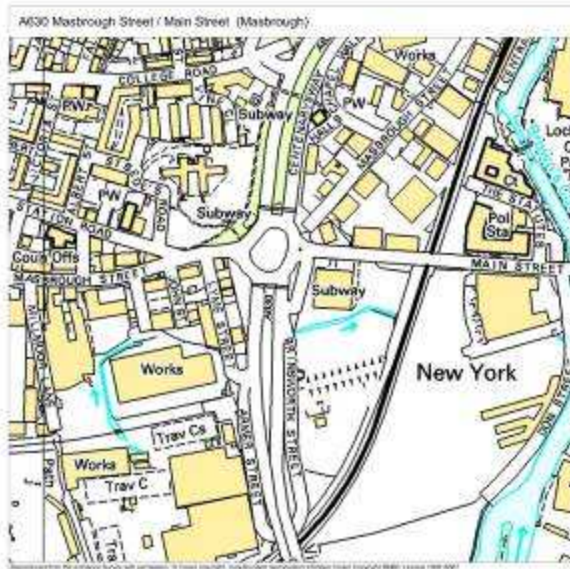
- Primary and Secondary School Places (see detailed list) (excluding school places at Bassingthorpe Farm, where Primary provision will be funded by S106 on site; and extensions to Greasbrough Secondary School will be funded by S106).
- Named highway junction improvements (see detailed list)
- Key Bus Routes (improvements to public transport infrastructure)
- Doctors Surgeries excluding the provision of an on-site GP surgery to serve the Bassingthorpe Farm development (which will be funded via S106).
- Improvements to existing green infrastructure, recreation and open space (excludes new provision which will be met by developers mainly on-site as enabling / design requirements) (see detailed list).
- Public Library extension, refurbishment and redevelopment (excluding refurbishment of Greasbrough library which will be funded by S106 as part of Bassingthorpe Farm).
- Police Station expansion at Dinnington and Wath.
- Rotherham Renaissance Flood Defence Scheme.

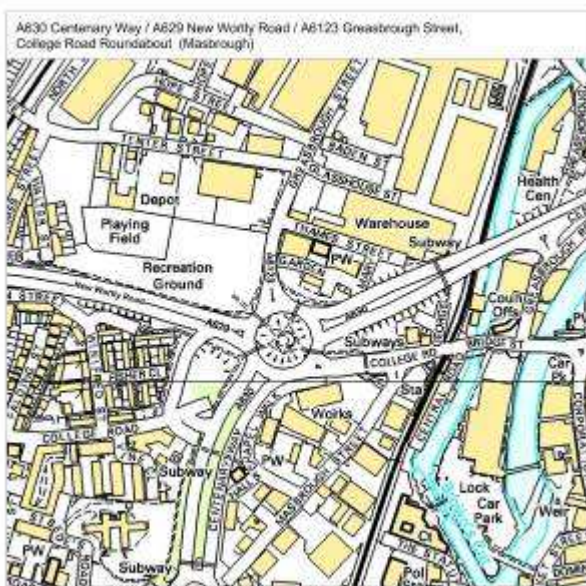
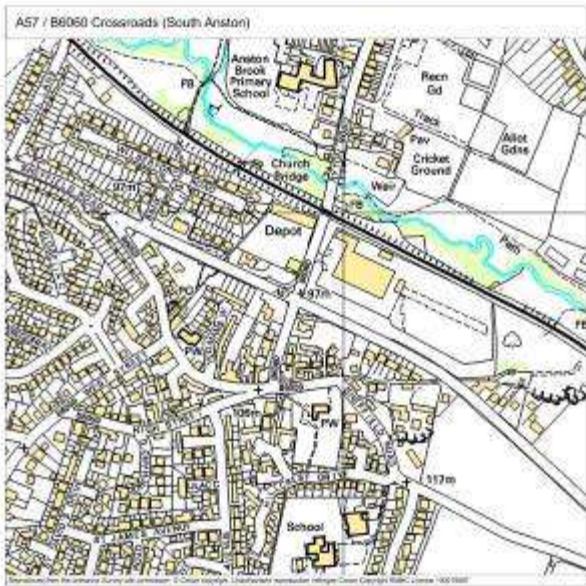
Detailed List (to be read in conjunction with Summary List)

- Primary and Secondary School Places where CIL funding may be used.
 - Whiston/ Brecks - primary extensions
 - Land off Westgate - primary extensions
 - Rawmarsh Upper Haugh/ Grange Road - primary extensions
 - Thrybergh - primary extensions
 - Dinnington, Anston & Laughton Common - primary extensions
 - Dinnington, Anston & Laughton Common - secondary extension
 - Wath/ Brampton - primary extensions
 - Wath - secondary extension
 - Maltby - primary extensions
 - Bramley, Wickersley & Ravenfield - primary extensions
 - Bramley, Wickersley & Ravenfield - secondary extension
 - Aston - secondary extension
 - Wales & Kiveton Park/ Todwick - primary extensions
 - Wales & Kiveton Park - secondary extension
 - Catcliffe, Treeton & Orgreave - secondary extensions
 - Rotherham Central schools

- Named highway junction improvements where CIL funding may be used.







- Improvements to existing green infrastructure, recreation and open space where CIL funding may be used (excludes new provision which will be met by developers mainly on-site as enabling / design requirements) (see detailed list).

Grade	Typology	Site Name
Borough	Natural	Pit House West, Wales
Borough	Parks	Boston Castle Park, Moorgate
Borough	Natural	Canklow Wood, Canklow
Borough	Parks	Clifton Park, Rotherham Town Centre
Borough	Outdoor sports	Herringthorpe Playing Fields, Herringthorpe
Borough	Parks	Thrybergh Country Park, Thrybergh
Borough	Cemeteries	Moorgate Cemetery, Moorgate
Borough	Parks	Rother Valley Park, Wales
Neighbourhood	Outdoor sports	Claypit Lane Rec, Rawmarsh
Neighbourhood	Parks	Victoria Park, Rawmarsh
Neighbourhood	Outdoor sports	Rawmarsh Leisure Centre, Rawmarsh
Neighbourhood	Parks	Greenlands park, North Anston
Neighbourhood	Outdoor sports	Fairview Drive, Aston, Aston
Neighbourhood	Natural	Gibbing Greave Wood, Herringthorpe
Neighbourhood	Parks	Brinsworth parish fields, Brinsworth
Neighbourhood	Parks	Bradgate Park, Bradgate
Neighbourhood	Parks	Ferham Park, Masbrough
Neighbourhood	Outdoor sports	Dinnington Comprehensive, Dinnington
Neighbourhood	Outdoor sports	Dinnington Miner's Welfare, Dinnington
Neighbourhood	Parks	Greasborough Park, Greasbrough
Neighbourhood	Parks	Spence Field, Harthill, Harthill
Neighbourhood	Parks	Valley Park, Herringthorpe
Neighbourhood	Outdoor sports	Wales Parish playing fields, Wales
Neighbourhood	Parks	Coronation Park, Maltby
Neighbourhood	Parks	Gordon Bennett park, Thurcroft
Neighbourhood	Outdoor sports	Brampton Sports Centre, Brampton Bierlow
Neighbourhood	Parks	Wath Community Park, Wath upon Dearne
Neighbourhood	Parks	Manvers Lake and Surrounds, Wath upon Dearne
Neighbourhood	Parks	Newhill Park, Wath upon Dearne
Neighbourhood	Natural	Ulley Country Park, Ulley
Neighbourhood	Outdoor sports	Bill Hawes, Bramley
Neighbourhood	Parks	Eldon Rd, Eastwood
Neighbourhood	Parks	Ruby Cook, Flanderwell
Neighbourhood	Parks	Warren Road Park, Wickersley
Neighbourhood	Parks	Barrie Grove, Hellaby
Neighbourhood	Parks	Alexandra Park Annex, Swallownest
Neighbourhood	Parks	Alexandra Park, Swallownest
Neighbourhood	Parks	Barkers park, Kimberworth Park
Neighbourhood	Parks	Blackburn & Kimberworth Roundwalk NE, Kimberworth
Neighbourhood	Parks	Highfield Park, Swinton
Neighbourhood	Outdoor sports	Woodsetts Parish field, Woodsetts
Local	Amenity green space	Hart Hill green space, Upper Haugh
Local	Amenity green space	Stubbin Lane green space, Upper Haugh
Local	Outdoor sports	School Lane Rec, Parkgate

Grade	Typology	Site Name
Local	Natural	Infirmity Road Hill, Parkgate
Local	Amenity green space	Hague Avenue green space, Rawmarsh
Local	Parks	Sandhills park, Sandhill
Local	Natural	Moordale View open space, Sandhill
Local	Natural	Gwyn Reed Nature Area, Rawmarsh
Local	Natural	Sandhill green link, Sandhill
Local	Natural	Birch Wood, Rawmarsh
Local	Natural	Treeton Wood, Treeton
Local	Natural	Hail Mary Wood & Falconer Wood, Treeton
Local	Natural	former Treeton tip, Treeton
Local	Natural	Whiston Meadows, Whiston
Local	Natural	Hudson's Rough, Kimberworth Park
Local	Natural	Brook walk, North Anston
Local	Natural	Anston Stones Wood, North Anston
Local	Amenity green space	Nursery Road, North Anston
Local	Natural	Engine House plantation, Aston
Local	Amenity green space	Waleswood View green, Aston
Local	Amenity green space	Lodge Lane, Aston
Local	Amenity green space	Catherine Avenue green space, Aston
Local	Natural	Rotherham Road natural space, Swallownest
Local	Amenity green space	Bawtry Road green space, Brinsworth
Local	Amenity green space	Castle Avenue green space, Canklow
Local	Parks	Canklow Road MUGA & Play Area, Canklow
Local	Amenity green space	Centenary Way green spaces, Canklow
Local	Outdoor sports	Washfield Lane Rec, Treeton
Local	Natural	Rother Crescent, Treeton
Local	Amenity green space	Shorland Drive green, Treeton
Local	Amenity green space	Vincent Road Green, Ravenfield
Local	Outdoor sports	Hollings Lane green, Ravenfield
Local	Amenity green space	Laural Avenue green, Bramley
Local	Amenity green space	Bramley Park, Bramley
Local	Amenity green space	Fenton Road green 3, Kimberworth Park
Local	Amenity green space	Kelford School, Kimberworth
Local	Natural	Henley Way, Bradgate
Local	Amenity green space	Laughton Road, Dinnington
Local	Natural	Undergate Road Hill, Dinnington, Dinnington
Local	Amenity green space	Constable Lane green, Dinnington, Dinnington
Local	Parks	Hangman Lane park, Laughton Common
Local	Natural	Manor Lane natural site, Dinnington
Local	Amenity green space	St Leger Avenue Green Space, Laughton Common
Local	Amenity green space	Hatfield Crescent Green Space, Laughton Common
Local	Amenity green space	Main Street, Swallownest
Local	Amenity green space	Wetherby Drive, Swallownest
Local	Amenity green space	Breck Lane Green, Dinnington
Local	Parks	Chestnut Grove Park, Dinnington
Local	Amenity green space	Manor Lane, Throapham, Dinnington
Local	Amenity green space	Riverside Court, Laughton Common
Local	Natural	High Nook Road, Dinnington

Grade	Typology	Site Name
Local	Outdoor sports	Silverwood Miners Welfare, Dalton
Local	Amenity green space	Brierly Road, Dalton
Local	Amenity green space	Roughwood Road green, Wingfield
Local	Amenity green space	Fenton Road green 2, Kimberworth Park
Local	Parks	Grayson Rd Rec, Greasbrough
Local	Natural	Fenton Road, Kimberworth Park
Local	Natural	Munsborough Lane, Greasbrough
Local	Outdoor sports	Winney Hill Park, Harthill, Harthill
Local	Natural	Aldwarke Locke Island, Eastwood
Local	Amenity green space	Fretwell Rd green space, East Herringthorpe
Local	Amenity green space	Conway Crescent green space, East Herringthorpe
Local	Parks	Bar Park, Thorpe Hesley
Local	Natural	Hesley Lane green space, Thorpe Hesley
Local	Natural	Brook Hill greenspace, Thorpe Hesley
Local	Natural	Wentworth Road, Thorpe Hesley
Local	Amenity green space	Kestrel Avenue greenspace, Thorpe Hesley
Local	Parks	King Georges field, Thorpe Hesley
Local	Outdoor sports	Red Hill rec, Kiveton Park
Local	Amenity green space	Essex Close green, Kiveton Park
Local	Natural	Stockwell Ave open space, Wales
Local	Natural	Salisbury Road, Maltby
Local	Outdoor sports	Maltby Manor Rec, Maltby
Local	Amenity green space	Littlewood Way Green Space, Maltby
Local	Amenity green space	Tickhill Road green 1, Maltby
Local	Amenity green space	Mortimer Road 2, Maltby
Local	Parks	Cherry Tree Park, Maltby
Local	Amenity green space	Somerset Street, Maltby
Local	Amenity green space	Ascension close, Maltby
Local	Amenity green space	Addison Road green space, Maltby
Local	Natural	Redwood Drive natural site, Maltby
Local	Amenity green space	Upperfield Close, Maltby
Local	Natural	Dale Hill Road, Maltby
Local	Amenity green space	Victoria Way Wood, Lily Hall, Maltby
Local	Amenity green space	The Walk, East Dene
Local	Parks	Thomas street park, Swinton
Local	Amenity green space	Thomas Street greenspace, Swinton
Local	Parks	Horsefair Park, Swinton
Local	Parks	Queen's Street Park, Swinton
Local	Outdoor sports	Piccadilly Road Outdoor sports, Swinton
Local	Natural	Piccadilly Road natural site (Creighton Wood), Swinton
Local	Amenity green space	Carlisle Street Greenspace, Swinton
Local	Natural	Kilnhurst Ings, Kilnhurst
Local	Natural	Kilnhurst Ings, Kilnhurst
Local	Parks	Piccadilly POS, Swinton
Local	Amenity green space	Calladine Way, Swinton
Local	Outdoor sports	Kilnhurst Miners Welfare, Kilnhurst
Local	Amenity green space	The Crescent green, Thurcroft
Local	Amenity green space	Green Arbour School, Thurcroft

Grade	Typology	Site Name
Local	Natural	Zamor Crescent, Thurcroft
Local	Outdoor sports	Wath Road Park, Brampton Bierlow
Local	Amenity green space	Smithy Bridge Lane, Brampton Bierlow
Local	Parks	Packman Road Play Area, Brampton Bierlow
Local	Parks	West Melton park, West Melton
Local	Amenity green space	Well Road greenspace, West Melton
Local	Amenity green space	Tennyson Rise, West Melton
Local	Amenity green space	West Street, West Melton
Local	Natural	Wath Tip site, Wath upon Dearne
Local	Outdoor sports	White Bear Estate, Wath upon Dearne
Local	Amenity green space	Durham Places, Herringthorpe
Local	Amenity green space	Rosemary Road, Wickersley
Local	Parks	Sorby Way Park, Wickersley
Local	Natural	Brecks Wood (Wickersley Wood), Wickersley
Local	Amenity green space	Leewood Close, Cortonwood, Brampton Bierlow
Local	Amenity green space	Hague Court, Cortonwood, Brampton Bierlow

ROTHERHAM BOROUGH COUNCIL- REPORT TO MEMBERS

1.	To:	Cabinet
2.	Date:	5th November 2014
3.	Title:	Revision to Standing Orders – Quorum for Cabinet

4. Summary

The report proposes a reduction to the quorum for Cabinet meetings from five to four Members.

5. Recommendations:-

That Cabinet recommends to Council amending the Council's Standing Orders to provide for a reduction in the quorum of Cabinet from five to four Members.

6. Proposals and Details

In accordance with the rule 4(2) of the Executive Procedure Rules the quorum for Cabinet is five members. However, with the recent reduction in the number of Cabinet members from ten to nine, and then to seven, the proportion of Members required for a quorum to be met has risen to above half.

At recent Cabinet meetings it has been the challenge to ensure that the quorum is fulfilled. In addition to the predictable absence of members due to leave, there are regular occasions when individual Cabinet members have declared discloseable pecuniary interests and have had to leave the meeting. This has resulted in difficulties in achieving a quorum for a decision making.

Therefore to ensure reasonable arrangements for the conducting of Cabinet business, it is proposed that the quorum should be reduced from five to four members. However, owing to the significance of decisions taken at Cabinet, it is not considered appropriate to reduce the number below this level.

In accordance with the Standing Order 56.1 decisions to amend the Council's Standing Orders need to be recommended to Council by either Cabinet or the Standards Committee.

7. Finance

No implications.

8. Risks and Uncertainties

The reduction in the quorum will ensure that Cabinet business can be transacted with the minimum of disruption.

8. Policy and Performance

Nil

9. Background Papers

Nil

Contact Name: *Jacqueline Collins, Director of Legal and Democratic Services, telephone 01709 8255768 or e-mail jacqueline.collins@rotherham.gov.uk*

By virtue of paragraph(s) 3 of Part 1 of Schedule 12A
of the Local Government Act 1972.

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