

OVERVIEW AND SCRUTINY MANAGEMENT BOARD

Date and Time :- Wednesday, 11 October 2017 at 11.00 a.m.
Venue:- Town Hall, Moorgate Street, Rotherham
Membership:- Councillors Brookes, Clark, Cowles, Cusworth, Evans, Mallinder, Napper, Sheppard, Short, Steele (Chair) Walsh and Wyatt.

AGENDA

1. Apologies for Absence
2. Declarations of Interest
3. To consider whether the press and public should be excluded from the meeting during consideration of any part of the agenda
4. Questions from Members of the Public and the Press

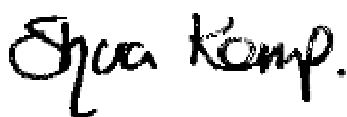
Items for Pre-Decision Scrutiny:-

In accordance with the outcome of the Governance Review, the following item is submitted for pre-scrutiny ahead of the Cabinet and Commissioners' Decision Making Meeting on 16 October 2017. Members of the Overview and Scrutiny Management Board are invited to comment and make recommendations on the proposals contained within the report.

5. Advice Services Review (Pages 1 - 13)
6. Rotherham Side by Side - Housing Related Support Review (Pages 14 - 50)
7. Transport for the North (Pages 51 - 57)

Items for Decision

8. Scrutiny Review - Alternative Management Arrangements for Children's Service in Rotherham (Pages 58 - 225)
9. Scrutiny Review - Emergency Planning (Pages 226 - 273)
10. To determine any item which the Chairman is of the opinion should be considered as a matter of urgency
11. Date and time of next meeting - Wednesday, 25th October, 2017 at 11.00 a.m.



SHARON KEMP,
Chief Executive.

Summary Sheet

Committee Name and Date of Committee Meeting

Overview and Scrutiny Management Board – 11 October 2017

Report Title

Advice Services Review

Is this a Key Decision and has it been included on the Forward Plan?

Yes

Strategic Director Approving Submission of the Report

Shokat Lal, Assistant Chief Executive

Report Author(s)

Steve Eling, Policy and Partnership Officer
01709 254419 or steve.eling@rotherham.gov.uk

Jackie Mould, Head of Performance, Intelligence and Improvement
01709 823618 or jackie.mould@rotherham.gov.uk

Ward(s) Affected

All

Summary

This report arises from a review of advice services in Rotherham and makes recommendations about future strategic direction for the services together with commissioning arrangements.

The review is set in the context of significant need for advice services by the residents of Rotherham, including those already impacted by welfare reforms, especially people with disabilities and families with children; and the anticipated additional demands arising from the full roll-out of Universal Credit from April 2018.

The primary focus of the review is services provided in-house of Advocacy and Appeals and Financial Inclusion, together with external services provided by Citizen's Advice Bureau; Kiveton Park Independent Advice Centre; and Rotherham Diversity Forum immigration and nationality advisor.

The overall objectives of the review are to secure responsive and effective service provision meeting growing complex needs for these services, with maximum efficiency within the challenging budgetary climate.

The way forward seeks to establish a streamlined and collaborative approach across advice services and providers over the medium term. This looks for a two stage approach. The initial stage invites a consortium approach to commissioning from voluntary sector providers through a co-production model. Funding would be awarded aligned to a three year service level agreement(s) commencing in April 2018, with annual reviews to further the evolution of the full collaborative approach and ensure that priority needs continue to be met. The proposed processes for production of the model and commissioning are compliant with the "Rotherham Compact". The second stage, timed for 2019 would move to an integrated model of advice provision both in-house and with the voluntary sector.

Recommendations

That Overview and Scrutiny Management Board consider proposals within the report and make recommendations to Cabinet thereon.

1. That the outcomes of the review be noted.
2. That approval be given to progress arrangements for advice services in Rotherham, including:
 - Co-design with voluntary sector organisations for services to be delivered by voluntary sector advice providers for three years commencing from April 2018;
 - That the scope of services to be delivered by the voluntary sector focus on provision in levels two and three of the advice model through core service level agreements to a total value of £240k per annum, with the provision for additional project based arrangements covering specific advice service demands and developments over the medium term;
 - Collaboration to produce an integrated model of advice provision across advice services including in-house provision effective from April 2019;
 - Commissioning and funding model options that will best provide flexibilities for service development over the medium term through a consortium approach in the voluntary sector; and
 - Identify as part of the Council's Customer Services and Efficiency Programme, improvements to level one signposting and self-serve provision.
3. That, subject to the achievement of the objectives of this approach, service level agreement(s) be entered into with voluntary sector providers, including the expectation of leverage of external funds; adoption of priorities; and performance arrangements.
4. That the detailed arrangements be subject to annual review and participation in the further alignment and other developments of advice services in Rotherham in 2019.

List of Appendices Included

None

Background Papers

Monitoring information received from advice providers and survey forms completed by service users as part of the review.

Consideration by any other Council Committee, Scrutiny or Advisory Panel

Cabinet and Commissioners' Decision Making Meeting – 16 October 2017

Council Approval Required

No

Exempt from the Press and Public

No

Advice Services Review

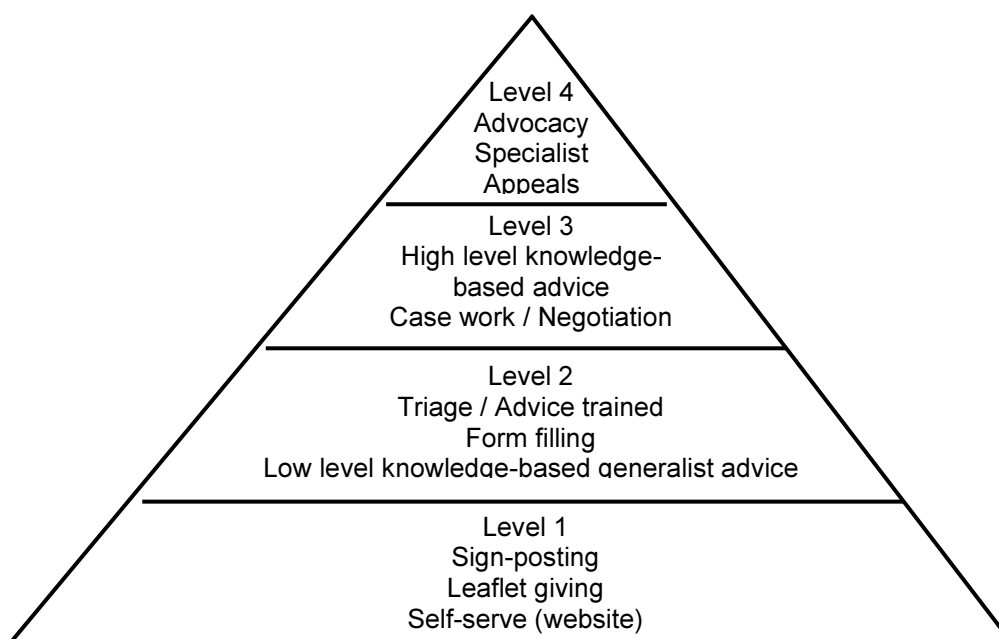
1. Recommendations

- 1.1 That the outcomes of the review be noted.
- 1.2 That approval be given to progress arrangements for advice services in Rotherham, including:
 - Co-design with voluntary sector organisations for services to be delivered by voluntary sector advice providers for three years commencing from April 2018;
 - That the scope of services to be delivered by the voluntary sector focus on provision in levels two and three of the advice model through core service level agreements to a total value of £240k per annum, with the provision for additional project based arrangements covering specific advice service demands and developments over the medium term;
 - Collaboration to produce an integrated model of advice provision across advice services including in-house provision effective from April 2019;
 - Commissioning and funding model options that will best provide flexibilities for service development over the medium term through a consortium approach in the voluntary sector; and
 - Identify as part of the Council's Customer Services and Efficiency Programme, improvements to level one signposting and self-serve provision.
- 1.3 That, subject to the achievement of the objectives of this approach, service level agreement(s) be entered into with voluntary sector providers, including the expectation of leverage of external funds; adoption of priorities; and performance arrangements.
- 1.4 That the detailed arrangements be subject to annual review and participation in the further alignment and other developments of advice services in Rotherham in 2019.

2. Background

Overview

- 2.1 Advice services are critical services to many of the most vulnerable residents of Rotherham, including those already impacted by welfare reforms and especially people with disabilities and families with children who are struggling to make ends meet. The full roll-out of Universal Credit from April 2018 is expected to create significant additional demand for advice services as people are expected to adapt to monthly payments and suffer delays in the processing of benefits creating additional hardship.
- 2.2 Advice services in Rotherham are provided by a number of organisations including the Council, with the Council providing financial support to some advice service providers in the voluntary sector. The current service level agreements with voluntary sector providers expire in March 2018. The services provided are currently structured around a four tier model.



2.3 Level one provision is provided by many service providers both within the Council and by external providers including health services and voluntary sector organisations. Within the Council, Customer Services provide signposting including provision through libraries alongside children's services. Many organisations, especially those in the voluntary sector provide support to people in their communities, and while not being direct advice service providers will recognise advice needs of the people they work with and will signpost accordingly. It is almost certain that the bulk of signposting and referrals is outside of the formal advice provision services specifications or service level agreements. Notwithstanding this, there will be the opportunity as part of the review to explore how self-serve, especially web based, could be used to reduce demand on face to face services for levels two and three provision. There is the potential to link to the Council's Customer Services and Efficiency Programme to identify how signposting and self-serve can be improved.

2.4 Levels two and three cover most of the recorded advice provision work of face to face advice support delivered both within the Council and through the voluntary sector. Twelve providers have been identified as currently providing some forms of levels two and three advice in Rotherham, albeit that most only provide specific categories of advice or cater for a particular client group. The primary categories of advice available are:

- Debt;
- Housing;
- Employment;
- Education;
- Consumer;
- Immigration;
- Welfare;
- Family; and
- Legal.

Some offer open door access whilst others will only take clients by referral. The organisations currently funded by the Council for generalist and immigration advice all offer open door access as well as using an appointment booking system "Nellbooker" shared across voluntary organisations and the Council.

Within the Council, Neighbourhoods provide extensive advice and financial inclusion services funded by the Housing Revenue Account for the benefit of Council tenants. This is a referral service providing housing related support alongside financial inclusion and the impact on tenants of the benefits cap and bedroom tax. It should be noted though that many Council tenants present for advice support at voluntary sector providers that are being funded through the Council's General Fund. As part of the review there will be the opportunity to better align financial inclusion type advice support irrespective of budget source.

- 2.5 Level four services are primarily provided by the Council's Advocacy and Appeals Service; however there is some provision at this level within the voluntary sector. Funding for the Council provided service is a combination of General Fund; Housing Revenue Account; and some external funding provision.

Planning for the future

- 2.6 As part of planning for future provision, a review of advice services has been commenced. This has identified that an issue with the current provision is that it is fragmented both within the Council and across different advice providers. There are also issues where depending on the funding source; some advice services are not accessible to everyone in need of help. These issues can only be addressed through a comprehensive review that overcomes barriers between services to provide seamless services to the community and provides good and effective access to information that can reduce the demand for more intensive advice support.
- 2.7 The primary focus of the review has been services currently provided in-house by Advocacy and Appeals and Financial Inclusion, together with external services provided by Citizen's Advice Bureau (CAB); Kiveton Park Independent Advice Centre; and Rotherham Diversity Forum (RDF) Immigration and Nationality advisor. The overall objectives of the review are to secure responsive and effective service provision meeting growing complex needs for these services, with maximum efficiency within the challenging budgetary climate, establishing a streamlined and collaborative approach across advice services and providers over the medium term.

Demand for services

- 2.8 Key information for the advice service review is being produced for service providers to gain a common understanding of the objects of the review. In addition, a presentation has been made to the July meeting of the Advice in Rotherham Partnership. Survey work has been undertaken through the service providers to seek the experiences and views of service users. This information is being used alongside monitoring data of service demand and usage and any trends identified that indicate changes in, and future demand.

2.9 Detail of the surveys and monitoring information from CAB; Kiveton Park and the Council’s Advocacy & Appeals and Neighbourhoods services show that over 15,000 people accessed the services in the last year. Debt and welfare featured highly with over £3 million being gained in benefits for service users at CAB and Advocacy & Appeals.

2.10 The survey of service users provides more fine grained information. The surveys have been completed by nearly 200 service users at the following service providers:

- CAB;
- Kiveton Park;
- Rotherham Diversity Forum (RDF);
- The Council – Advocacy & Appeals; and
- The Council – Housing Financial Inclusion.

2.11 The top six reasons for seeking advice and support revealed by the user survey were:

Finance (debt)	69
Welfare (benefits)	52
Housing	33
Immigration	29
Health	24
Legal rights	22

Within this, it should be noted that some people presented complex needs across more than one category. Typically this will include finance / debt and welfare; housing and welfare; and health with other categories of need.

2.12 A significant amount of the demand at 98 of those surveyed required help with filling in forms. This was across a broad range of issues indicating a lack of confidence among many in completing forms and getting them right. Requests for advocacy applied to 49 of those surveyed, the majority with the Advocacy and Appeals service, but also at CAB and Kiveton Park.

2.13 There was a 50/50 split between people accessing the services directly and those who were referred there by another service provider. Open access was far more common at CAB; Kiveton Park and RDF than for the Council’s in house services. The client bases varied between providers where the RDF client base was primarily drawn from BME communities with most of the immigration enquiries, whilst Housing Financial Inclusion dealt with Council tenants with issues resulting from benefit cap; employment; and rent arrears featuring highly. It should be noted that only RDF and CAB are registered to provide immigration advice. Neither is registered at level three that allows them to represent people in tribunals, but this level of service is available in Sheffield.

2.14 86 of those surveyed had disabilities.

2.15 Of those who indicated how they accessed the services, by far the most at 119 made a personal visit, whilst 69 contacted by phone. Only four accessed the services on-line.

2.16 The survey also collected post codes for users of the service and means of access. The post code data shows that demand arises from across Rotherham, but as expected is greater in the more deprived neighbourhoods.

The areas with the highest levels of demand identified from the survey are set out in the table:

S25 2	Dinnington
S26 6	Kiveton
S60 2 & 5	Canklow and Brinsworth
S61 1, 3 & 4	Ferham, Kimberworth, Greasbrough
S62 7	Rawmarsh
S63 7	Wath
S65	Eastwood, Clifton, Herringthorpe, East Herringthorpe, Thrybergh
S66 2	Wickersley

2.17 The ongoing demand for advice service provision and to provide advocacy shows no sign of reducing. The complexity of cases including interrelationship between welfare reforms; debt; employment; and other legal matters shows the needs for an integrated approach to advice services. Immigration advice continues to be in demand. It is clear too that many of the processes and forms to be completed are challenging for people resulting in significant demand for the services, as people fear the consequences of getting them wrong. This shows that whilst channel-shift to self-serve for level one provision could assist, there will be ongoing demand for telephone and face to face advice provision.

The way forward

2.18 In developing the proposed way forward, consideration is taking account of the four tier model of advice currently used; the sources of funding; and options for change over the medium term as well as short term changes.

2.19 Achieving the overall objectives of the advice review is complex because of the number of providers; different budgets being used; and restrictions relating to the beneficiaries of some budgets. Whilst the review will tackle these complexities, this will not be possible in the timeframe for awarding new service level agreements for voluntary sector provision from April 2018. There is also an issue of changing and increasing demand over the medium term, especially in relation to further welfare reform that cannot be accurately quantified. Consequently this report recommends a two staged approach as follows:

- **Stage One** – Commissioning provision from the voluntary sector through a consortium co-design process as provided for in the Rotherham Compact, for core advice service provision with a value of £240k per annum. This to be subject to the award of three year service level agreement(s) (SLAs) commencing from April 2018, with sufficient flexibility around annual reviews to future-proof for changes to service specifications arising from stage two of the process. In addition, further project based arrangements may be introduced with the voluntary sector around specific issues including demands arising from welfare reform subject to the demonstration of demand and availability of resources. In particular, the core service SLAs will cover requirements around access to services; outputs and outcomes including:
 - Opening hours and home visit provisions;
 - Open access services in person, by telephone and internet;
 - Referrals and appointments;
 - Specific services offered;
 - Monitoring and report on demand and volumes;
 - Securing financial resilience for service users especially where welfare reform and debt is concerned;
 - Flexibility in service provision adapting to changing needs; and
 - Compliance with grant conditions including partnership working and participation in the advice service review to achieve its objectives and the level of resources available.

The SLAs are timed to be in place by February 2018 at the latest, to be effective from April.

- **Stage two** – Completion of the wider review for delivery and alignment of advice services including the use of and allocation of available resources. This review to be completed by autumn 2018 for implementation from April 2019. Further reports will be required in the interim to agree changes to in-house services required to meet the objectives of the review.

3. Key Issues

- 3.1 The demand for the full range of advice service continues with increasing complexity of cases presented.
- 3.2 The roll-out of Universal Credit (UC) in Rotherham from April 2018 is expected to generate extra demand as all new claimants go directly to UC. The migration of existing benefit claimants will follow on.
- 3.3 There is a significant opportunity to add value through changes to working models including greater use of self-serve where appropriate, and lever in additional resources as match funding to the Council's investment in the voluntary sector.

4. Options considered and recommended proposal

4.1 The recommended option for stage one invites a consortium approach to co-designed collaborative proposals from the advice services in the voluntary sector for their provision for three years commencing in April 2018 and includes provision for voluntary sector engagement in producing the arrangements for stage two. The co-design proposals would be required to demonstrate:

- The priority needs of residents to be met through the services and how residents would access or be referred to them;
- The scope of services to be delivered by the voluntary sector to cover provision in levels two and three of the advice model as a minimum through a core service level agreement with a value of £240k per annum;
- The service provision will be provided within the resources provided by the Council and seek external leverage of resources;
- Collaboration to produce an integrated model of advice provision across advice services including in-house provision effective from April 2019; and
- Identify as part of the Council's Customer Services and Efficiency Programme, improvements to level one signposting and self-serve provision.

4.2 Alternative options provide for the simple letting of new contracts for the service provision by way or competitive tendering. These could be through a single contract to one provider or multiple contracts. Whilst this approach would provide for continued service provision, it would not develop the type of working relationships that would be needed to move the whole review of advice services forward, and would be an opportunity lost. It would probably make the objectives of stage two of the process more difficult to realise. It would also be difficult to provide service specifications for the contract documentation for the medium term given the changing and complex demands for advice, especially with the next stage of welfare reform about to commence.

5. Consultation

5.1 Consultation has taken place with the Advice in Rotherham Partnership. The response from providers supports a co-production collaborative approach to the future of advice provision.

5.2 A survey of 200 advice service users at Kiveton Park; CAB; and RDF; together with the Council's Advocacy and Appeals and Housing Financial Inclusion services has provided valuable information covering types of support requested and user experiences.

5.3 The views of the Overview and Scrutiny management Board will be reported to Cabinet at the meeting.

6. Timetable and Accountability for Implementing this Decision

- 6.1 A decision is required at this time to ensure that there is continuity of voluntary sector advice service provision from April 2018. A further report will be presented in autumn 2018 to make recommendations for implementation of stage two of the review. Further reports will also be required for approval of any other arrangements proposed to be awarded to voluntary sector advice providers for the delivery of any specific advice projects identified through new and changing demand.

7. Financial and Procurement Implications

- 7.1 The financial planning assumptions for the stage one core advice services service level agreement(s) with the voluntary sector involve the commitment of £240k per annum for three years to be funded through general fund budget allocated to the Assistant Chief Executive.
- 7.2 Budgets relating to other Council funded advice services and any project funding are not included in the stage one commissioning, but will be reported when making recommendation for stage two, or as appropriate.
- 7.3 Section 11 of appendix 5 to the Council's constitution (Financial Regulations) sets out the monitoring arrangements to which grant recipients must adhere. The Compact proposes that these arrangements are covered within a Service Level Agreement. This will facilitate a consortium based collaboration co-produced model. This will require all voluntary sector advice providers to have the opportunity to participate, but will need to be separate from the Advice in Rotherham partnership as this includes Council based advice providers. The Financial Regulations set out the relevant requirements for awarding grant programmes together with monitoring, review and accountability and the Compact sets out processes for dispute resolution.
- 7.4 The detail and status of the consortium can be determined as part of the co-design. This could be in the form of a body with its own legal identity that could hold a single service level agreement, or be an umbrella for a legally binding agreement between the voluntary sector advice providers that hold service level agreements with the Council. In the latter model, the service level agreement arrangements between the Council and the voluntary sector providers could be through a single service level agreement with one provider, or through direct service level agreement with each provider within a consortium service provision requirement.

8. Legal Implications

- 8.1 The provision of the advice services covered by this report are discretionary, enabled by the General Power of Competence provided for by Section 1 of the Localism Act 2011 (c. 20). Advice services provided under the statutory provisions of Section 4 of the Care Act 2014 (c. 23) and advice provisions contained in the Children Act 1989 (c. 41) are not included.

9. Human Resources Implications

- 9.1 There are no implications at this stage for Council staff arising from this report. However, the proposals to establish a streamlined and collaborative approach may result in Council staff co-locating with external advice providers, with the potential for secondment of staff in the future.

10. Implications for Children and Young People and Vulnerable Adults

- 10.1 Many of the users of advice services will be from families with children and vulnerable adults, many with disabilities. Continuation of the advice services is important to safeguarding and is consistent with being a child friendly borough.

11 Equalities and Human Rights Implications

- 11.1 The co-design consortium model development has to commence without historic specific allocations to any voluntary sector provider. Advice services provide support to a wide range of people and the future provider(s) will need to identify how they can support individuals with protected characteristics under the Equalities Act and to address the potential for any disproportionate detrimental impact as a result of the new arrangements.

12. Implications for Partners and Other Directorates

- 12.1 The direct arrangements for services delivered in the voluntary sector and proposals for a collaborative approach, set out in stage one, is set to follow the terms of the Rotherham Compact agreed in partnership.
- 12.2 The broader review of advice services, set out in stage two, will have implications for other directorates within the Council. These will be the subject of future reports in the autumn of 2018.

13. Risks and Mitigation

- 13.1 There is the risk that the co-production collaborative approach fails through disagreement between the parties. In these circumstances, should the processes set out in the Compact not produce a resolution, the Council would need to instigate other arrangements to secure continuity of service delivery.

14. Accountable Officer(s)

Shokat Lal, Assistant Chief Executive

Approvals Obtained on behalf of:-

	Named Officer	Date
Strategic Director of Finance & Customer Services	Graham Saxton	28.09.2017
Assistant Director of Legal Services	Stuart Fletcher	26.09.2017
Head of Procurement (if appropriate)	Karen Middlebrook	26.09.2017

Head of Human Resources (if appropriate)	N/A	
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*Report Authors: Steve Eling, Policy and Partnership Officer
Jackie Mould, Head of Performance, Intelligence & Improvement*

This report is published on the Council's website or can be found at:-

<http://modern.gov.rotherham.gov.uk/ieDocHome.aspx?Categories=>

Summary Sheet

Committee Name and Date of Committee Meeting

Overview and Scrutiny Management Board – 11 October 2017

Report Title:

Rotherham Side by Side Review of Housing Related Support

Is this a Key Decision and has it been included on the Forward Plan?

Yes

Strategic Director Approving Submission of the Report

Anne Marie Lubanski, Strategic Director of Adult Care and Housing

Report Author(s)

Kay Nicholes, Commissioning Officer

Nathan Atkinson, Assistant Director Strategic Commissioning

Ward(s) Affected

All

Summary

The report outlines recommendations for the future commissioning of externally provided Housing Related Support Services in Rotherham. Housing Related Support services deliver positive outcomes with the vulnerable people they support, preventing and dealing with emergency homelessness and averting the need for other costlier forms of service provision. Though Housing Related Support services sit within the Adult Care and Housing Directorate portfolio, the preventative element provides whole system benefits.

Homelessness and the risk of homelessness is the focus for all Housing Related Support services. Through the Rotherham Side by Side programme the Council has worked closely with existing providers, service users and wider stakeholders to co-produce the future model of externally commissioned Housing Related Support.

The review was undertaken to remodel the provision, to meet changing demand, and offer better value for money in addition to delivering the savings required for 2018/19.

Recommendations

1. That approval be given to the remodeling of the existing externally commissioned housing related support offer in Rotherham to deliver four Pathways of support to vulnerable people who are at risk of homelessness or are homeless as outlined in sections 4.0 to 4.2. The four pathways are;
 - Vulnerable Adults
 - Complex Need
 - Domestic Abuse
 - Young People and Young Parents
2. That approval be given to the redefinition of the existing offender, single homeless, homeless families, and mental health client groups as **Vulnerable Adults** to better meet multiple needs and redefine the age range across Vulnerable Adults' contracts to **21+** to prevent duplication of service.
3. That approval be given to further efficiencies within the **Vulnerable Adults** pathway through the merger of 3 floating support services, currently providing 205 units in total, into one service providing 220 units.
4. That approval be given to the creation of a pathway for people with **Complex Needs** based on a Housing First model to support 20 – 30 people with complex needs. To achieve this, it is proposed that the Council renegotiate existing contracts of dispersed accommodation. As outlined in sections 4.18 to 4.22.
5. That approval be given to the **Domestic Abuse Pathway** as a priority and that current funding will be protected, at this stage, as outlined in sections 4.23 to 4.34 and to extend the Rotherham Rise refuge contract for 18 months under an exemption from Contract Procedure Rules.
6. That the joint commissioning of the **Young People Pathway** with the designated lead for Children and Young People and designated Adult Care and Housing commissioning lead be approved, as outlined in section 4.35 to 4.40 and the YWCA Yorkshire Fleming Gardens contract be extended for 18 months under an exemption from Contract Procedure Rules.
7. That subject to the remaining efficiencies from the **Vulnerable Adults Pathway** being forthcoming an exemption from Contract Procedure Rules be granted for up to 18 months for the contracts currently provided by South Yorkshire Housing Association at Browning Court and Action Housing & Support Ltd at Elliott House. Further information relating to this approach is outlined in section 4.7 and Table 7.
8. That the proposal to transfer the governance and ownership of the Learning Disabilities contract with KeyRing to the remit of the Head of Service for Learning Disabilities, following conclusion of recommended savings activity as outlined in section 5.1, be approved.
9. That the existing Outcomes Framework for Housing Related Support be adapted as outlined in section 6 to better reflect the nature of the Pathways.

List of Appendices Included

Appendix A Equality Analysis

Background Papers

Overview and Scrutiny Management Board 2 March 2016 and 16 Dec 2016

<http://modern.gov.rotherham.gov.uk/documents/g13363/Public%20reports%20pack%2002nd-Mar-2016%2014.00%20Council%20Meeting.pdf?T=10>

Housing First – Homeless Link

<http://hfe.homeless.org.uk/>

Consideration by any other Council Committee, Scrutiny or Advisory Panel

Cabinet and Commissioners' Decision Making Meeting – 16 October 2017

Council Approval Required

No

Exempt from the Press and Public

No

Rotherham Side by Side Review of Housing Related Support

1. Recommendations

- 1.1 That approval be given to the remodeling of the existing externally commissioned housing related support offer in Rotherham to deliver four Pathways of support to vulnerable people who are at risk of homelessness or are homeless as outlined in sections 4.0 to 4.2. The four pathways are;
 - Vulnerable Adults
 - Complex Need
 - Domestic Abuse
 - Young People and Young Parents
- 1.2 That approval be given to the redefinition of the existing offender, single homeless, homeless families, and mental health client groups as **Vulnerable Adults** to better meet multiple needs and redefine the age range across Vulnerable Adults' contracts to **21+** to prevent duplication of service.
- 1.3 That approval be given to further efficiencies within the **Vulnerable Adults** pathway through the merger of 3 floating support services, currently providing 205 units in total, into one service providing 220 units.
- 1.4 That approval be given to the creation of a pathway for people with **Complex Needs** based on a Housing First model to support 20 – 30 people with complex needs. To achieve this, it is proposed that the Council renegotiate existing contracts of dispersed accommodation. As outlined in sections 4.18 to 4.22.
- 1.5 That approval be given to the **Domestic Abuse Pathway** as a priority and that current funding will be protected, at this stage, as outlined in sections 4.23 to 4.34 and to extend the Rotherham Rise refuge contract for 18 months under an exemption from Contract Procedure Rules.
- 1.6 That the joint commissioning of the **Young People Pathway** with the designated lead for Children and Young People and designated Adult Care and Housing commissioning lead be approved, as outlined in section 4.35 to 4.40 and the YWCA Yorkshire Fleming Gardens contract be extended for 18 months under an exemption from Contract Procedure Rules.
- 1.7 That subject to the remaining efficiencies from the **Vulnerable Adults Pathway** being forthcoming an exemption from Contract Procedure Rules be granted for up to 18 months for the contracts currently provided by South Yorkshire Housing Association at Browning Court and Action Housing & Support Ltd at Elliott House. Further information relating to this approach is outlined in section 4.7 and Table 7.
- 1.8 That the proposal to transfer the governance and ownership of the Learning Disabilities contract with KeyRing to the remit of the Head of Service for Learning Disabilities, following conclusion of recommended savings activity as outlined in section 5.1, be approved.

1.9 That the existing Outcomes Framework for Housing Related Support be adapted as outlined in section 6 to better reflect the nature of the Pathways.

2.0 Background

2.1 The Housing Related Support (HRS) services (formerly known as Supporting People) provides high quality preventative services to vulnerable people of all ages (16+) across many client groups including (but not exclusively);

- Domestic Abuse
- Offenders
- Young Parents & Young people at risk
- Mental Health
- Learning Disabilities
- Homelessness
- Leaving Care
- Older People (sheltered housing)

2.2 All service provision is expected to provide preventative, housing related support to enable vulnerable people to either maintain or gain their independence through;

- accommodation based services (same site and dispersed short term tenancies)
- Floating support (temporary visiting support to set up a home or prevent homelessness).

2.3 Benefits of Housing Related Support (HRS)

HRS services are not statutory services but they are a key provision for supporting statutory services in meeting their objectives and preventing vulnerable people from entering statutory provision. The main homelessness duty to secure accommodation or take reasonable steps to prevent the loss of accommodation apply to applicants who have a priority need for accommodation.

2.4 Several **cost/benefit and social return on investment** studies have been undertaken that demonstrate that housing related support is effective in preventing the need for costlier statutory services (Capgemini Cost: Benefit analysis of Supporting People 2008). There are potential and significant implications of withdrawing funding for services:

- Impact on housing duty for those in priority need – requirement to provide supported accommodation.
- Impact on other Adult Care & Housing budgets as the majority of services have a direct impact.
- Impact on Children & Young People budgets for 16 and 17-year olds as Children and Young People would not have access to this type of accommodation which would increase pressure on the foster care or bed and breakfast budget.
- Impact on outcomes for Better Care Fund (mental health services specifically).
- Requirement to provide preventative services through Care Act 2014.

- Increase costs for usage of temporary accommodation for homeless team.
- Increase in failed tenancies
- Increased repeat homelessness/rough sleeping
- Risk of Domestic Homicide (provide domestic abuse services)
- Increase in hospital admissions, falls and impact on the general health and wellbeing
- Increase in access and/or requirement for assessments from the council
- Increase in antisocial behaviour with lack of support
- Increase in crime with reduced support provision
- Increase in debt problems/rent arrears
- Increase usage of food banks
- Affordability of rent if the additional service charges, currently funded through the HRS contracts, are added to the rent.

2.5 In 2016/17 HRS accommodation based services achieved an overall 85% for increased independence and the floating support services achieved an overall 92% for maintaining independence this can be taken as a real and transferable reflection of the impact of the preventative services provided.

2.6 **Supply of Services**

The Council currently have 23 HRS services with external providers including accommodation based and floating support. Providers include:

Rotherham Rise
South Yorkshire Housing Association
Stonham (Home Group)
Action Housing
Target Housing
Places for People
Anchor Trust
Housing 21
Yorkshire Housing
YWCA Yorkshire
Keyring - Living Support network

2.7 Analysis showed as well as HRS funding from the council a significant level of additional funding amounting to over £4.3m per annum is attracted into Rotherham. The majority of this additional funding is in respect of rental income from supported housing and dispersed tenancies. There is a significant risk that the proposed Local Housing Allowance (LHA) cap on rents for supported housing will reduce income, much of which pays for on-site staff, security and intensive housing management.

2.8 The current services combined employ 79 fte staff with 71 fte delivering direct support and 8 first tier management all delivering 2914 hours of support per week.

2.9 Service User profile

Outcomes Forms are completed on service user exit from the service. Analysis of outcomes data for 2016/17 demonstrates that for short term services:

- 834 people moved on from the service.
- Most service users are women.
- A quarter of service users were under the age of 20 and almost half were under 25 years old.
- The majority were white British (88%) with 11.9% describing their ethnicity as none white.

More details regarding 'protected characteristics' are included in the Equality Assessment attached as Appendix A.

2.10 Table 1 below outlines the primary and secondary needs group for people who exited service in 2016/17.

Table 1 - Primary and Secondary Client Group 2016/17

	Primary Client Group		Secondary Client Group	
	No.	%	No.	%
Older people	1	0.12	3	0.45
Frail elderly	2	0.24	1	0.15
Mental health problem	129	15.47	81	12.18
Learning disabilities	6	0.72	23	3.46
Physical or sensory disability	8	0.96	19	2.86
Single homeless	36	4.32	177	26.62
Alcohol problems	1	0.12	32	4.81
Drug problems			58	8.72
Offenders or at risk	97	11.63	17	2.56
MDO	1	0.12	1	0.15
Young People at risk	248	29.74	5	0.75
Young People leaving care			8	1.20
People at risk of DV	196	23.50	12	1.80
People with HIV/AIDS	1	0.12		
Homeless families	69	8.27	28	4.21
Refugees			15	2.26
Teenage parents	20	2.40	1	0.15
Rough sleeper			4	0.60
Generic/Complex needs	19	2.28	180	27.07
Totals	834	100.00	665	100.00

2.11 The largest client group is Young People at Risk, followed by People at Risk of Domestic Abuse and People with Mental Health Problems. Over the last five years issues relating to Domestic Violence, Mental Health and Young People at Risk have accounted for the majority of people receiving support.

2.12 The secondary client group profile tells us that 27% of service users also had generic or complex needs, 26% are single homeless, 12% had mental health and just over 13% had substance misuse issues.

2.13 **Moving on**

Of the 834 service users who have moved on, 666 people had improved their independence, 663 of these moves were planned moves from the support service (accommodation based) or a planned end to the receipt of service (floating support) in accordance with client's support plan. The average length of stay in service for those who moved on in a planned way is 223.71 days.

Table 2 - Number of days receiving a service

	<30 Days	1 - 3 Months	3 - 6 Months	6 - 12 Months	1 to 2 Years	Over 2 Years
No of users	142	158	200	190	117	27

Of the 834 clients who have moved on, 142 were unplanned moves from the support service (accommodation based) or an unplanned end to the receipt of service (floating support). Service users are increasingly likely to move on from services within 12 months. This reflects the changes to contracts to reduce the target support time from 2 years to 1 year.

2.14 Planned move on varies across the client groups as outlined below:

Table 3 - Planned Move On 2016/17

Planned Move on 2016/17	
Teenage Parents	100.00%
Homeless Families	91.23%
Single Homeless People	61.76%
Mental Health	94.12%
Young People at Risk	76.39%
Offenders	92.50%
Domestic Violence	88.89%

Planned move on is excellent within the Teenage Parents, Homeless Families, Mental Health and Offenders services. Although planned move-on within the Single Homeless and Young People at Risk services during the year is lower there were significant levels of evictions from the single homeless project, with 5 people asked to leave on one occasion. Following discussions with providers they reported that they feel the level of unplanned moves for these client groups partly reflects the complex need of service users accessing the service at present.

2.15 **Outcomes**

HRS externally commissioned contracts are outcome focused, based on the following service level outcomes

1. Be healthy
 2. Stay safe
 3. Enjoy and achieve
 4. Make a positive contribution
 5. Achieve economic well-being
- 2.16 Within these maintaining accommodation is the most likely outcome achieved. Most people who access HRS services are 'the furthest away' from work and obtaining work is consistently the least likely outcome.
- 2.17 However, in the last two years there has been an increase in positive outcomes for obtaining work. The improved performance can be directly linked to focused activity amongst external providers, for example making better use of opportunities to offer and source apprenticeships. Volunteers and apprentices have accessed provider run in-house training programmes and can complete a relevant NVQ up to Level 3. Alongside this, there is opportunity to work with a designated mentor and receive enhanced supervision, coaching and 'on the job' learning. For example, Target Housing have secured over £60,000, through grant funding, for qualified sessional workers to offer a range of artistic and complementary therapies to vulnerable people and community groups, with a further £56,000 invested to develop three local social enterprises.
- 2.18 **Recent changes**

As per the 12 September 2016 Cabinet/Commissioners Review Meeting Decision, three services for Young People have been redesigned and have been subject to a competitive tender due to their contracts ending in March 2017 and their high contract values. In addition, a service for people with an offending history and a homeless service were also put out to tender. The tendering of the five services realised an annual contract saving of £312,896. The actual saving in this financial year will have a shortfall of £97,000 as contracts commenced in June and October of this year, which was later than forecast. The slippage for the new contract start dates has occurred due to additional consultation on the revised specifications.

Table 4 - HRS Tender Outcomes 2017/18

Service	Successful Provider
Offenders dispersed Accommodation based Support	Target
Accommodation based service for single homeless people	Action Housing
Accommodation based support for young people (including emergency provision)	Action Housing
Accommodation based support service for young people	Action Housing
Floating Support Service for Young People	Target

3.0 Case for Change

- 3.1 Continued investment in HRS services represents a sound forward strategy for Rotherham. Although the resources are tight, and there is work to be done in achieving the right configuration of services, the preventative approach taken by the HRS services is realising economies across a range of areas. Most importantly, significant numbers of vulnerable service users are consistently achieving positive outcomes and reliance on costlier services is reduced and often ceases.
- 3.2 There is a need to take a new approach to HRS as the Supporting People funded model was out of date and required review in context of emerging good practice and changing demand. Emerging issues from stakeholders included:
- The desire to look towards new ways of working with an emphasis on co-production
 - The need to prioritise domestic abuse because of a lack of mainstream funding
 - Mental health is a golden thread throughout all Housing Related Support
 - Support for young parent's services should be maintained
 - Specific provision for ex-offenders lower priority
 - The need to access other sources of funding
 - A need to focus on outcomes and person-centred approaches
 - A positive approach - what service users can do; not, what they can't do.
- 3.3 The overall budget allocation for HRS between 2009/10 and 2015/16 reduced from £7.9 million to £5.7 million - an overall reduction of £2.2 million.
- 3.4 There are additional committed savings for HRS (from internal and external services) between 2016/17 and 2018/19 under the Council's MTFS budget. These were confirmed in March 2016 as £2,302,000 over the three years.
- 3.5 In addition, a further £250,000 committed saving from HRS for 2017/18 was approved as part of the Council budget in March 2017. The revised savings over the 3 years are currently £2,552,000.

Table 5 - Breakdown of savings for In-house and External services

Year	In-house	External	Total Savings Target
2016/17	£90,000	£554,000	£644,000
2017/18	£831,000	£435,000	£1,266,000
2018/19	£342,100	£299,900	£642,000
Total	£1,263,100	£1,288,900	£2,552,000

- 3.6 This report focusses solely on the savings for the external HRS services for 2018/19.

- 3.7 The savings outlined for 2016/17 of £554,000 have been achieved in full.
- 3.8 The £435,000 savings for 2017/18 has been achieved through negotiations with providers to reduce contract values and the tender of five services agreed by Commissioner Myers in September 2016. Three of the services tendered were services for Young People.
- 3.9 The delay in commencing the tender exercise meant that the services in scope, required contract extensions for up to 6 months at the original contract values, to facilitate the tender and transition to a new model. This will impact on the savings achievable in year. £337,836 will be achieved by year end with the full £435,000 being achieved from April 2018.
- 3.10 The remaining savings of £299,900 for 2018/19 will be achieved through the remodelling of service provision within the four HRS pathways discussed throughout this report.

3.11 National and Local Strategic Context

The significant reduction in available funding for Housing Related Support makes innovation, joint approaches and targeted intervention a significant challenge, but essential, if early help and intervention is to succeed. The Council need to look to innovative ways of providing early help to prevent dependence on more expensive adult social care, criminal justice and health provisions.

- 3.12 Traditional models of homelessness accommodation are not always successful in engaging or meeting the needs of individuals with complex and multiple needs. However, there is a range of evidence which shows that the Housing First model is highly effective in supporting this group of people.

WHAT IS HOUSING FIRST?

Housing First is an innovative approach, proven to successfully support people with repeat histories of homelessness, who have complex needs, into independent and stable accommodation. Based around a set of core principles, which are designed to achieve optimum outcomes, Housing First is about doing things differently; it requires flexibility and creativity from everyone involved, from support providers and commissioners to housing suppliers. Housing First is most cost-effective when offered to individuals experiencing multiple disadvantages, which traditional services have been unable to successfully support. Individuals are also likely to have had repeat contact with high cost public services in the health and criminal justice sectors.

Research shows that 70-90% of Housing First residents maintain their tenancy, and are empowered to improve other aspects of their lives. This cost-effective approach is popular internationally, and the movement in England is growing.

The principles for Housing First in England are:

1. People have a right to a home
2. Flexible support is provided for as long as is needed
3. Housing and support are separated
4. Individuals have choice and control
5. An active engagement approach is used
6. People are supported to identify their strengths, goals and aspirations
7. A harm reduction approach is used

Due to the level of need and intensity of support, Housing First teams have small caseloads. One worker should not be supporting any more than seven individuals to ensure that flexible, wrap-around support can be provided.

- 3.13 The Council and the Clinical Commissioning Group are prioritising a review of the health and social care pathway for people with mental health problems. There is an increasing need for all services to be able to manage mental health as core to service delivery.
- 3.14 Hospital attendances, admissions and waiting times continue to rise in Rotherham and there is growth in emergency admissions to hospital. Life Expectancy in Rotherham is less than the England average by more than one year and varies by eight years between different parts of Rotherham. The NHS in Rotherham has a £75million efficiency challenge over the next 5 years and the Council has in the region of a £42 million financial gap to close over the next 3 years. The NHS Shared Planning Guidance asked every local health and care system in England to come together to create its own ambitious local plan. The Rotherham Integrated Health and Social Care Place Plan summarises local ambitions for these Sustainability and Transformation Plans. Supported Housing supports the ambitions of the Place Plan as access to suitable housing is one of the wider determinants of health.
- 3.15 A new approach to Domestic Abuse is being developed by Rotherham to improve access to services and a Domestic Abuse Integrated Pathway is being developed.

“Lack of good quality accommodation is a big problem for women offenders.”

3.16 **Need**

The next section outlines the data and evidence of need for services that consolidate existing arrangements into 4 clear pathways:

- Vulnerable Adults
- Complex Need
- Domestic Abuse
- Young People at risk and Young Parents

- 3.17 A remodel of Housing Related Support services provision in Rotherham was required to deliver services that focus on complex and multiple need as well as early help. This required a multi-agency approach between statutory services, service users and providers.

3.18 By using a strength based approach, providers will be required to focus on what people are good at, and what their skills are to lift themselves out of the negative cycle that further deepens the divide from their community. Services need to be:

- Empowering
- Psychologically informed
- Trauma informed
- Person centred
- Holistic
- Instil self-belief
- Community focused
- Co-produced

3.19 In January 2017, the co-production panel, Rotherham Side by Side, was established with providers and service users to undertake a review. The aim of the review was to understand the 'as is' position and to use this as a platform to deliver the vision by putting in place a new service model, better than we had before, for integrated commissioning of Housing Related Support across Rotherham that will:

- improve outcomes for residents by having more joined up services that better respond to their individual needs
- more effectively respond to Council priorities
- identify opportunities to achieve greater alignment of commissioning activities with external partners
- achieve efficiencies by taking a more coproduced approach
- achieve savings by remodelling to target complex need and early help

3.20 **Gaps**

Rotherham Side by Side identified the following gaps in service provision:

- Community Safety
 - Perpetrator programme (Domestic Violence)
 - Support for people recovering from substance and alcohol misuse – exiting detox
- Projects to reduce social isolation- peer support
- Complex needs
 - Women Offenders
 - Chaotic customer group
- Accommodation
 - Affordable accommodation in line with LHA rates for under 35's
 - Safe accommodation
 - Good landlords.
 - Properties that are well maintained that don't exacerbate health difficulties – damp, cold and fuel poverty.

- Affordable accommodation that won't be lost upon finding employment and which remains affordable.
 - Accommodation for people with learning disabilities
 - Lack of appropriate housing
 - Accommodation for older families - a significant amount of support
 - 16-17 years accommodation and specialised housing support
- Floating support
 - Debt Management
 - Fair access and exit
 - Monitoring and review of the LGBT offer
 - The offer to veterans
 - Black and Minority Ethnic Specialism
 - Older people
 - Autism
 - Carers
 - Young LD with babies
 - Disability
 - Women's provision both with and without children
 - Mental Health Support

[A] said activities or courses to train in things such as manual labour would encourage them to stop offending. They suggested getting training so tenants could help with the upkeep of their own properties by doing jobs such as plastering and wallpapering which would make them feel that the property was theirs and would give them an incentive to keep the property in good repair'.

3.21 Key messages, after significant debate with the sector and key stakeholders in the co-production group, Rotherham Side by Side include:

- The need to be innovative to meet complex needs
- There has been a contraction of the Housing Related Support services expenditure. Savings have been offered up in previous years by providers but there is no 'fat' in existing contracts.
- A single access gateway was not desirable due to concerns about restricting access.
- Commissioning requirements to tender services make it difficult to fully co-produce, particularly running a procurement programme alongside the review programme.
- Domestic abuse services continue to be a priority

"A safe secure place away from intimidation and feeling insecure is my top priority."

3.22 All overarching savings identified for Housing Related Support services have been shared with HRS Providers through the Rotherham Side by Side and with each provider individually in relation to specific savings required.

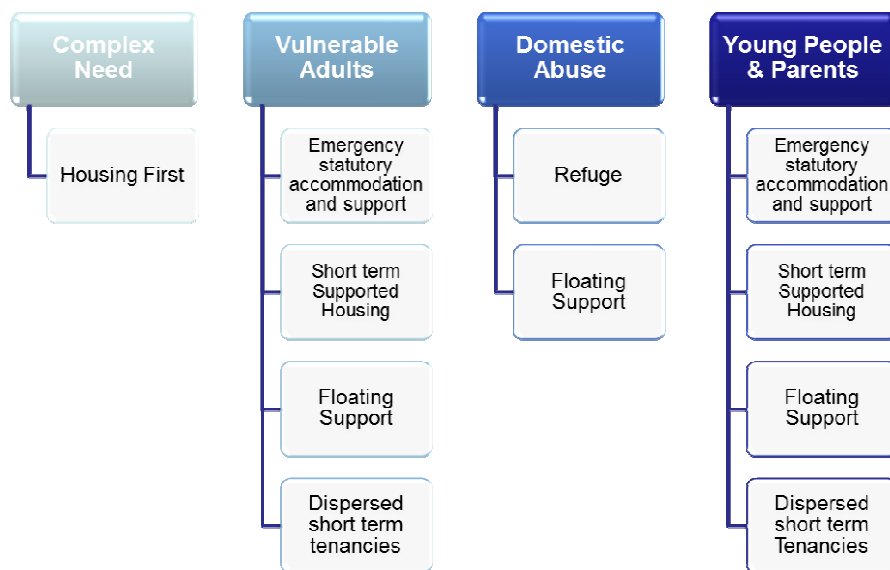
4.0 New Delivery Model

4.1 The proposed model is to streamline externally commissioned services into pathways for the following:

- Vulnerable Adults
- Complex Need
- Domestic Abuse
- Young People and Young Parents

Each of the pathways will focus on those who are homeless or at risk of homelessness, with a person’s specific needs determining which of the four pathways will best meet their needs.

Table 6 - Recommended Housing Related Support Pathway



4.2 Initially it had been proposed that a single gateway was operated to feed into the pathways but following discussion, at Rotherham Side by Side with a range of stakeholders, this was not considered practical. Whilst a Gateway may solve any problems associated with ‘cherry picking’ clients there was no evidence that this occurs. Providers fed back that in another neighbouring authority, once the Gateway was introduced service users referred had fewer needs. There were concerns regarding the quality of assessments i.e. getting the right people to do assessments and unnecessary delays. Stakeholders felt that the ‘channelling’ people through a narrower route, loses people as many potential people don’t choose to approach the council directly for a service. It would also introduce an unnecessary costly tier to the process.

4.3 Vulnerable Adults Pathway

“It would be helpful to do less passing from pillar to post”

The HRS for Vulnerable Adults includes services for single homeless and homeless families, people with mental health problems and ex-offenders. All existing services report a high level of multiple needs with the majority having more than one ‘primary need’. These needs may also include victims of

modern slavery, refugees, people with autism, travellers, victims of FGM and forced marriages, physical disabilities, low level Learning Disability and victims of exploitation and hate crime. The Vulnerable Adults Pathway brings together services across the user groups into a more 'generic' definition recognising that the service users most often have multiple needs.

4.4 The model will consist of:

- Emergency homeless accommodation based support
- Short term accommodation based support
- Dispersed short term tenancies
- Floating Support

4.5 **Emergency homeless accommodation based support**

The Council provide dispersed crash pads to people who are 'emergency' homeless. However, there is no support provided so it is proposed that the model will include support where it is identified as being required to those who are placed in the crash pads.

The service delivered at Elliott Court by Action Housing was subject to tender earlier in the year. It is proposed that this service continues to deliver accommodation and support for people who are in an emergency homeless situation. The contract was awarded for one year, with an option to extend for a further year pending the outcome of the review and is currently due to end in May 2018.

4.6 **Short term accommodation based support**

There are two supported housing schemes that will fit into the short term accommodation pathway; Browning Court (supported by South Yorkshire Housing Association) and Elliot House (supported by Action Housing). Browning Court provides accommodation to 10 people who have mental health problems and has been used as long stay. It is partly funded by the Clinical Commissioning Group. Elliot House provides accommodation to 15 people who have mental health problems and is fully funded through HRS.

“Short term shared would be okay but should be in the interim and is not a permanent solution. “

4.7 The Side by Side co-production exercise identified short term accommodation based support as an area requiring remodelling within the Vulnerable Adults pathway. However, consensus on the recommended way forward was not reached with all stakeholders during the time allocated for the process.

The providers of the current accommodation based services that will be within the Vulnerable Adults Pathway have suggested that they are given opportunity to work together to achieve the remaining savings required and remodel the pathway.

A deadline of the 31st of October 2017 will be given for the group to bring the savings achievable and an outline of a proposed model to Commissioning.

Should the savings not be forthcoming then a tender process will commence to procure the new model with a reduced financial envelope to achieve the remaining savings.

Should an appropriate model and level of savings be forthcoming then Commissioning request that an exemption from Standing Order 48 be granted for up to 18 months for the 2 contracts currently provided by South Yorkshire Housing Association at Browning Court and Interim Homeless Families dispersed accommodation and the Action Housing & Support Ltd contract at Elliott House in order to pilot a new model, gather evidence that this is the correct approach for the pathway and ensure the model is fit for purpose prior to commencing a competitive tender process in 12 months time.

Community was significant to our focus group; Being with people who understand and want to be with them socially. The sense of community helps them with social isolation encouraging them to interact with others in a safe environment.

4.8 Dispersed Tenancies

Dispersed tenancies are temporary single and shared (usually not more than 2 people) properties made available to providers for their service users. 83 existing dispersed tenancies fall into the pathway.

- As part of the contract for Browning Court South Yorkshire Housing Association (SYHA) support to **16** 'satellites' of temporary Accommodation for people with a diagnosed mental health condition.
- SYHA also have **32** dispersed tenancies for families who are statutory homeless
- Target are the successful incumbent provider (following the recent retender) of a dispersed tenancy service for **35** offenders.

4.9 The dispersed tenancies offer a good opportunity to access decent housing for people with complex need. It is recommended that the SYHA satellites and Targets offender service is repurposed to deliver a service for Complex Need as Housing First model. The dispersed tenancies will be reduced overall to 32 units in this pathway a further 20 units will be transferred to the complex need pathway.

4.10 Overall dispersed units available to Rotherham through both pathways will be 52 units. This is a reduction of 31 units overall, however the model will be able to achieve better outcomes for people with complex need and much of this loss will be mitigated by an increase in the provision of floating support.

“Rents are expensive and it is difficult to afford it. They are costs for the rent element, the support element and utilities someone would need to be earning about £500 a week.”

4.11 Floating Support

There are 3 floating support services that fall within the Pathway for Vulnerable Adults. These include SYHA Thursday Project for 90 Homeless Families with Support Needs, Stonham (Home Group) provide 70 units of floating support and Action Housing and Support Ltd provide 45 units of Floating Support for Offenders. It is recommended that remodelling of the 3-existing floating support units into one contract to provide an additional 15 units of support.

- 4.12 The Council has recently launched a Tenancy Support Service (TSS) for Council tenants. An assessment of the proportion of people receiving a floating support and who live in a Council tenancy was 50% (2017). There may be a double counting of support here and it is therefore proposed that consideration is given to revised access to Council tenants. Tenants could initially be offered a TSS rather than floating support service and only referred on to floating support where needs are more complex than the offer from TSS can manage.

4.13 Age range

Currently there is an overlap in services which creates duplication in service offer to 22-25-year olds. To prevent the duplication and 'revolving door' of services it is proposed that the age range for Vulnerable Adults Pathway is increased to 21 (from the current limit of 18 years), with no upper age limit. Young People Services will be available to young people aged 16–21 (or up to 25 where the Council has a duty to care leavers). There will be an overlap of one year as 21-year olds may use all services to ease any transition arrangements. There will be a reduction in number in the vulnerable adult pathway to 0 for 18–20 years and an increase in 21–25 year old service users. The impact on the Young Person Pathway is a potential increase in number of Under 21's but reduction to 0 in the number of 22-25.

- 4.14 Table 7 gives an outline of the current and proposed model of funding and service capacity. The proposed pathway capacity is a minimum of 267 units.

Table 7 - Vulnerable Adults Pathway recommendations

Vulnerable Adults Pathway					
Provider	Service Description	Contract Value	Commissioning intention	Saving	Max annual Contract Value
South Yorkshire Housing Association	32 units of dispersed temporary accommodation for families	£80,000	Remodel to widen client group to vulnerable adults' pathway and maintain exclusive Homeless team referrals	0	£80,000

South Yorkshire Housing Association	10 self-contained units at Browning Court	£114,400 (contract price apportioned between satellite and core project at Browning Court. £52,544 contribution from CCG)	Remodel to widen client group to vulnerable adults' pathway	TBD	£114,400
Action Housing and Support Ltd	Elliot House 15 units of self-contained flats	£100,000	Remodel to widen client group to vulnerable adults' pathway	TBD	£100,000
Action Housing and Support Ltd	Single Homeless Elliot Court 15 units of Temporary Accommodation for single homeless	£175,000	Recently retendered and contract ends 30.09.2018 Remodel as part of vulnerable adult's pathway. Maintain exclusive homeless team referrals	0	£175,000
South Yorkshire Housing Association	Floating Support Thursday Project Homeless Families with Support Needs/Private Sector Bonds 90 units	£204,843	Remodel to fit vulnerable adult's client group Merge floating support contracts into one vulnerable adults' (singles and families) pathway floating support contract for 220 people	£216,543	£373,000
Stonham (Home Group)	70 units of floating support	£209,700			
Action Housing and Support Ltd	45 Floating Support Offenders	£175,000	Total current spend of £589,543		

- 4.15 Anticipated savings per year will be **£216,543**, achieved through remodelling the 3 existing floating support services and providing 15 additional units of support. The dispersed tenancies will be reduced overall but much of this need will transfer to the Complex Need Pathway.

4.16 Complex Need Pathway - Housing First

“What is needed is affordable, stable housing.”

Rotherham Side by Side has considered the Housing First model to support people who have complex need. In May, a day long workshop session was held with Homeless Link to consider the model and its outcomes in detail.

4.17 There are two ways of identifying the cohort:

- Multi agency approach
 - Many Housing First services decide upon their residents through discussions with partner agencies. (e.g. at a steering group or stakeholder panel). To discuss on a regular basis or allow an agency to suggest suitable people. It is highly likely that the majority of individuals considered will be well known to most stakeholders who will, over many years, have had varying degrees of contact with them.
- ‘Chaos Index Assessment’
 - This assessment focusses on the behaviours of an individual; their use of services and levels of risk taking. The form enables services to establish a numerical value around the vulnerability of the person, to target resources at those most suitable.
 - The assessment can be used in multi-agency group discussions

It is recommended that a combination of these is used to identify the cohort. A multi-agency group will be required to coordinate the ‘wrap around’ of the most vulnerable service users. The needs will be assessed by the provider with an agreed methodology using the chaos index.

It was agreed that a permanent house that was fit for purpose was important.

4.18 The multi-agency group or ‘Stakeholder Panel’ will be required, made up of representatives of Vulnerable People Social Work, IDVA Manager, RDASH, Substance Misuse provider, housing providers, Rotherham Council Homelessness, Adult Care Commissioning, NPS, Housing First service provider, other providers in the pathways when referring. The Panel would require strategic buy in and clear terms of reference.

4.19 The model will also utilise the rough sleeping Navigator role (recently funded by Cabinet Office) to identify potential clients and liaise with providers across the pathways.

“You can’t have stability without a home”

4.20 To achieve a model which operates along the Housing First principles, it is recommended that the offender dispersed tenancies delivered by Target and the dispersed tenancies currently supported by SYHA are remodelled. The service would initially identify 20 people with complex need and working

towards a capacity of 30 over an agreed period. This will mean a reduction in the capacity of existing dispersed tenancies however; this presents itself as an opportunity to provide dispersed tenancies to deliver a dispersed refuge.

Table 8 - Complex Needs current and proposed funding

Type	Current Spend	Current Units	Proposed Spend	Proposed Units
Housing First	£0	0	c£167,000	20 (increasing to 30 over time)

Table 9 - Complex Needs Pathway Recommendations

Complex Need Pathway					
Provider	Service Description	Contract Value	Commissioning intention	Saving	
Target Housing	35 dispersed units for offenders	£98,000	Remodel to provide Housing First.	0	£167,000
SYHA	Browning Court Satellites 16 dispersed units for people with a diagnosed Mental Health condition	£69,000 apportioned from Browning Court full contract	Remodel to provide Housing First.	0	

4.21 Domestic Abuse Pathway

Domestic abuse was identified as a priority by all stakeholders and it is recommended that the existing funding is maintained, at this stage. Domestic Abuse services report an increase in demand for medium and standard risk with emerging waiting times to access and receive services.

4.22 Rotherham Rise and Commissioners have introduced shorter support time to increase the capacity of the service which combined with better access to Council housing has seen improved move on from short term services. Rotherham Rise will introduce the agreed 3-tiered model:

- First tier – first contact worker providing first point of contact for advice line and referrals.
- Second tier – providing face to face appointments within 1 week of contact – then offering up to 4 sessions, focus will address immediate safety options
- Third tier – where required up to 8 further session provided, offering more in debt safety/ relationship /wellbeing / complex needs support.

Group work will be available for move on support.

- 4.23 The HRS funding is the most significant investment in Rotherham for Domestic Abuse Services. Other services include the Independent Domestic Abuse Advisers (IDVA's). However, there are potential improvements to value for money by increasing number of people who can be supported through dispersed refuge and use suitable dispersed tenancies that may be surplus from the SYHA and Target dispersed.
- 4.24 Rotherham has been good at maintaining a local connection although for safety accommodating people from Rotherham if family or perpetrators live close by may be too high a risk. Moving from your home and leaving support network is not ideal but some still need that option. Refuge can offer added safeguarding as issues unfold in a refuge setting.
- 4.25 As stakeholders reported the need to improve coordination between services, the Council is developing a new approach to tackling domestic abuse. There is now a project underway to develop a Rotherham Domestic Abuse Integrated Pathway. It is recommended that the current funding within HRS is maintained, at this time. Early Help are focusing on domestic abuse at the core of family relationships and conflicts. There will be a greater focus on working with the perpetrator to change behaviour, positive relationship building and work around the family.
- 4.26 Intelligent information sharing is being developed and flexibility on how we deliver and a central identification route is being sought. Duplication of services is being considered across different areas of support. For example, a young person may be involved with Youth Criminal Justice and work with the Youth Offending Service. Mum, who might be victim of domestic abuse receiving support with Rotherham Rise and mental health service from RDaSH. The number of professionals around that family is potentially large and some might be unnecessary.
- 4.27 Whilst it is recommended that the current level of funding is retained, at the present time, it is also recommended that the service seeks to extend its reach by increasing the number of floating support units and thereby supporting more people in their own homes and prevent homelessness. This can be achieved by:
- bringing the two floating support contracts with Rotherham Rise into one contract to achieve efficiencies.
 - Considering options for extending the refuge model with dispersed tenancies (this may need some additional investment)
- 4.28 Refuge and floating support remodelling may want to consider further the opportunities afforded by the Adults Single Point of Access and the Place Plan emphasis on locality working.

Table 10 - Domestic Abuse Pathway Current and Proposed funding and capacity

Type	Current Spend	Current Units	2018/19	Proposed Units
Refuge	£154,000	10	£154,000	15
Floating Support (BME)	£120,000	32	£290,000	100
Floating Support	£170,000	50		
Total (HRS)	£444,000	92	£444,000	115

- 4.29 Side by Side discussed potential for introducing quotas for the allocation of Refuge accommodation to Rotherham residents, an approach recently adopted by Sheffield City Council. After discussion and further consideration it was recommended that this approach is not implemented for Rotherham. By ensuring that access to refuge type accommodation, both in borough and beyond, is available, Rotherham will ensure that an appropriate place of safety can be sourced to meet an individual's needs.
- 4.30 Rotherham Rise has for some time offered advice to people as part of their referral process. This does not offer an adequate resource to the delivery of a public access helpline for Domestic Abuse in Rotherham. Additional resource would be required for this offer to be scaled up. Therefore consideration needs to be given regarding harmonising and aligning access pathways in line with wider systems thinking.
- 4.31 Like other supported housing, the Refuge and dispersed tenancies have uncertain funding futures as Local Housing Allowance caps are still being considered by Government, though these will remain unchanged in the service model.

Table 11 - Domestic Abuse HRS Pathway Commissioning Intentions

Domestic Abuse Pathway					
Provider	Service Description	Contract Value	Commissioning intention	Saving	Max annual Contract Value
Rotherham Rise	Refuge for 10 families	£154,000 plus £66,000 CYPS Commissioning	Refuge currently has 6 self-contained units for families, 2 single person accommodation with shared kitchen and 2 dispersed tenancies. Remodel refuge to provide dispersed	£0	£154,000 plus £66,000 CYPS Commissioning

			tenancies Use dispersed tenancies from Target and SYHA Contract ends March 2018. Intention is to extend the contract for up to 18 months		
Rotherham Rise	Floating Support	£170,000	Merge floating support into one contract and increase capacity from 82 to 100 until September 2019	£0	£290,000
Rotherham Rise	Floating Support BME	£120,000		£0	

4.32 Young People and Parents Pathway

There has been significant procurement activity connected with young people's services in 2017/18.

From October 2017, the model will be made up of:

- supported housing provided by Action Housing for Young People and YWCA Yorkshire for young parents,
- dispersed tenancies provided by Action Housing and
- 66 units of floating support for young people provided by Target

It is proposed that Young Parents and Young People services are restricted to people aged 21 and under (except care leavers up to 25).

4.33 The **Young People Pathway** will continue to offer accommodation based support at Parkgate (Action Housing) and for young parents at Fleming Gardens. Consideration should be given to the merging of the young people floating support contracts. To avoid duplication of services it is proposed that existing services redefine age range across Children & Young People's contracts to 16 – 21 (25 for care leavers).

4.34 It is recommended that there is a more joined up approach to the Young People and Parent Pathway with stronger links when providing services to 16/17 year olds in particular. 72 people aged 16/17 left services in 2016/7 – 8.6%.

4.35 There may be potential to merge the floating support contract for young people and young parents although it is anticipated that savings would be minimal and therefore it is recommended that the approach is considered as a future option rather than an immediate requirement.

4.36 A short term accommodation based service for 2 young people will be decommissioned and an exit plan will be agreed. The service provides very low level support to 2 young people at any one time, prior to a move on to

independent living. The increased capacity within the Young Person tenancy Floating Support service will mean that young people can move directly to their own tenancy, with support, eliminating the need for this specific service.

4.37 Full year savings from ending this service will be £5,806.

Table 12 - Young People at Risk and Young Parents Pathway Commissioning Intentions

Young People and Parents Pathway					
Provider	Service Description	Contract Value	Commissioning intention	Saving	18/19
YWCA Yorkshire	24 Temporary accommodation for young mothers (Fleming Gardens Project)	£117,775	Existing contract ends March 2018. Intention is to extend this contract until 2019/20	£0	£117,775
Action	Temporary accommodation at Parkgate for Young People at risk including emergency provision same site accommodation and dispersed	£450,000	Recently retendered. Review April 2018. Jointly commission with CYPs 16/17 homeless and care leavers up to 25	£0	£450,000
Target	66 units of floating support for Young People at risk	£75,000	Recently retendered until May 2018 with an option for one year extension until May 2019.	£0	£75,000
YWCA Yorkshire	Young Parents 27 floating support	£76,500	Existing contract ends September 2019.	£0	£76,500
Places for People	2 Temporary Accommodation for young people at risk of homelessness	£5,806	Decommission	£5,806	£0

5.0 Other Externally Commissioned Housing Related Support Services

In addition to the above pathways, the external commissioned services include a Key Ring service for people with Learning Disabilities and some sheltered housing for older people

5.1 Keyring Living Support Networks

Within the existing supply of externally commissioned Housing Related Support there is a floating support service for people with Learning Disabilities. There are 3 networks across the Borough; each network has up to 10 members, at any one time, who receive low level support to enable them to live independently in their own permanent tenancy. The Keyring Living Support network is a popular service and as it involves the use of volunteers and peer support, from associate members (previous service users), offers value for money. Discussions have commenced with the provider to develop a tiered approach to delivery as well as the offer to others in the service in receipt of direct payments. There are obvious links to Learning Disability Commissioning within Adult Social Care. Further research is required to determine if direct payments/brokerage system may be a more appropriate and personalised approach to commissioning this service. Further discussion with commissioners, brokerage, providers and service users is recommended to introduce a personalised payment system.

It is proposed that the budget is reduced from £91,134 to £70,000 for 30 people taking into account that Keyring residents have varying levels of need and support, some of which can be met through their allocated direct payment under a tiered approach. The HRS saving will be **£21,134**.

5.2 Older People

The externally commissioned services include a contribution to emergency alarms in some of the sheltered housing in Rotherham and a contribution to the cost of a handyman service working across the Borough. The emergency alarms service currently provided by Rotherham Council (Rothercare) is scheduled to have no subsidy funding from 2018/19. It is proposed that the same approach is adopted with the externally commissioned alarms to ensure that those accessing an external provision are not disadvantaged. The emergency alarms within the external sheltered accommodation will remain and any costs will be included in the service charges within each of the schemes from April 2019. The scheme providers have taken responsibility for consultation with their tenants around this change. The total saving made will be **£43,673**.

Table 13 - Older Peoples Alarms and Handyman Service - Commissioning Intentions

Provider	Service Description	Contract Value	Commissioning intention	Saving	18/19
Places for People	84 Emergency Alarm contribution for older people in sheltered accommodation	£11,789 (£2.70 per person per week)	Withdraw funding	£11,789	£0
Anchor Trust	108 Emergency Alarm contribution for older people in sheltered accommodation	£12,397 (average of £2.21 per person per week)	Withdraw funding	£12,397	£0
Housing 21	100 Emergency Alarm contribution for older people in sheltered accommodation	£6,387 (Average of £1.22 per person per week)	Withdraw funding	£6,387	£0
Yorkshire Housing	1300 Floating Support - Handy person service for over 55's	£13,100	Withdraw HRS funding – replace under Better Care Fund 2017-19	£13,100	£0

5.3 Summary of cost and savings 2018/19

Table 14 - Summary of cost and Savings of Proposed Model

Pathway	Contract	Saving 2018/19	Contract 2018/19
Vulnerable Adults	Dispersed Tenancies	0	80,000
	Supported Housing	0	114,400
	Supported Housing	TBD (114,000)	0
	Supported Housing	0	175,000
	Floating Support	216,543	373,000
Complex Need	Housing First	0	167,000
Domestic Abuse	Refuge	0	154,000
	Floating Support	0	280,000
Young People & Young Parents	Supported Housing	0	117,775
	Supported Housing	0	450,000
	Floating Support	0	75,000
	Floating Support	0	76,500
	Floating Support	5,806	0
		£222,349	£2,062,675
		(£336,349)	

An additional £70,000 will fund Keyring.

Table 15 - Recommendations for other services

Pathway	Contract	Saving 2018/19	Contract 18/19
Key Ring (LD)	Floating Support	21,134	70,000
Older People	Alarms	30,573	0
	Handyman	13,100	0
		£64,807	£70,000
Total Savings		£287,156 (£401,156)	

6.0 Future Outcomes model

6.1 Service users who were involved in the focus groups prioritised the task of defining the outcomes they wanted to see. These were mapped against the existing outcomes model and the proposed pathways. Rotherham Side by Side agreed to keep the five overall outcome areas. The table below indicates which Pathway will be expected to deliver against each outcome. New outcomes agreed include:

- Better able to manage parenting responsibilities (vulnerable adults, domestic abuse and young people and parents)
- Better able to maintain safe & healthy relationships (all)
- Better manage sexual health* (domestic abuse and young people)
- Improved self-reported self-esteem* (all)
- Appropriate use of legal system* (domestic abuse only)

Table 16 - Outcomes Framework for HRS Pathways

Outcomes for Housing Related Support 2018	Vulnerable Adults	Complex Needs	Domestic Abuse	Young People
I. Achieve Economic Wellbeing				
Maximise income, including receipt of the right benefits	✓	✓	✓	✓
Reduce overall debt	✓	✓	✓	✓
Obtain paid work/participate in paid work	✓		✓	✓
II. Enjoy and Achieve				
Participate in chosen training and/or education, and where applicable, achieving desired qualifications	✓	✓	✓	✓
Participate in chosen leisure/cultural/faith/informal learning activities	✓	✓	✓	✓
Participate in chosen work-like/voluntary/unpaid work activities	✓	✓	✓	✓

Outcomes for Housing Related Support 2018	Vulnerable Adults	Complex Needs	Domestic Abuse	Young People
Establish contact with external service/family/friends.	✓	✓	✓	✓
Better able to manage parenting responsibilities*	✓		✓	✓
Better able to maintain safe & healthy relationships*	✓	✓	✓	✓
III. Be Healthy				
Better manage physical health	✓	✓	✓	✓
Better manage sexual health*			✓	✓
Better manage mental health	✓	✓	✓	✓
Improved self-reported self-esteem*	✓	✓	✓	✓
Better manage substance misuse	✓	✓	✓	✓
Better manage independent living as a result of assistive technology/aids and adaptations.	✓	✓	✓	✓
IV. Stay Safe				
Maintain accommodation and avoid eviction	✓	✓	✓	✓
Comply with statutory orders and processes (in relation to offending behaviour)	✓	✓	✓	✓
Better manage self-harm, avoid causing harm to others, minimise harm/risk of harm from others.	✓	✓	✓	✓
Appropriate use of legal system*			✓	
V. Make a Positive Contribution				
Greater choice and/or control at service level and within the wider community.	✓	✓	✓	✓

6.2 Performance data systems will require the creation of Pathway specific workbooks for providers to demonstrate outcome attainment.

7.0 Implementation Plan

7.1 Renegotiate existing contracts – Repurposing

- Create Housing First pilot – 2 years with 20 – 30 units
- SYHA Browning satellite
- Target Offender dispersed
- Redefine age range across vulnerable adults' contracts
- Redefine age range across Young People's contracts
- Redefine client group definition for Supported housing, floating support and dispersed tenancies across Vulnerable Adults pathway contracts
- Remodel dispersed tenancies - Repurpose surplus dispersed units for domestic abuse pathway.

7.2 Procure through tender

- One contract for Vulnerable Adults floating support. Merge the existing 3 contracts for 205 units into one contract for 220 units for families and Singles.

7.3 Decommission

- Three existing floating support contracts prior to retender as one contract
 - SYHA floating support for 90 families
 - Stonham (Home Group) floating support for 70 people with mental health problems and autism
 - Action Housing and Support Ltd Floating Support for 45 Offenders
- Two domestic abuse floating support contracts prior to tendering for 1 combined domestic abuse floating support

7.4 Consider further

- Young People Pathway - Consider 1 floating support contract for young people and parents
- Exit Strategy required

7.5 Transfer Commissioning lead

- Key Ring to Learning Disability and investigate personal payments options with provider and service users.

7.6 Joint Commission

- Young People and Young Parents Pathway with designated lead for Children and Young People and designated adult care and housing commissioning lead.

8.0 Timetable and Accountability for Implementing this Decision

8.1 Milestone plan

May 2016	Consultation
Sept 2016	Cabinet approval to tender services
Jan - Apr 2017	Tender issued for young people, single homeless and offender services
Jan 2017 – Jul 2017	Establish Rotherham Side By Side Co-Production Panel
Jun 2017 – Oct 2017	Remodelled young people, homeless & offender services commence under new contracts
Jul 2017	Report review progress to Adult Care and Housing DLT
Oct 2017	Cabinet / Commissioners to consider Housing Related Support recommendations and approve
Oct 2017 – Jan 2018	Procurement of services Remodelling of services Decommissioning
Jan 2018 – Mar 2018	Lead in to new model

9.0 Financial and Procurement Implications

9.1 Total savings identified against the agreed £299,900 savings for 2018/19 for external HRS services are **£287,156** assuming the remodelling is achieved by April 2018. This may increase up to **£401,156** with the additional savings of c. £114,000 coming from the remodelling of the accommodation element of the Vulnerable Adults Pathway.

9.2 There is a current forecast shortfall of £97,000 against identified savings in 2017/18 due to delays in commencing the tender exercise and the requirement to extend current contracts for up to 6 months. Other savings options are being explored to meet this shortfall in year. The remaining shortfall will be achieved from April 2018.

10.0 Legal Implications

10.1 In carrying out any public functions the Council must have due regard to the public sector equality duty (PSED) under the Equality Act 2010. The Council must take into account a number of factors including the need to eliminate discrimination, harassment and victimisation, advance equal opportunity and foster good relations. The service users who will benefit from Housing Related Support are likely to be protected by the PSED. The Equality Analysis forms Appendix A to this report.

11.0 Human Resources Implications

11.1 The tender of services and the review of HRS will have implications for external providers and therefore TUPE may apply to staff employed by these providers, though there will be no direct implications for the Council.

12.0 Implications for Children and Young People and Vulnerable Adults

- 12.1 There are implications for children and young people because of the recommendation made in this report.
- 12.2 The age range for Children and Young People services will reduce from 25 to 21. Those 21 and over can continue to access the other Pathways. Vulnerable Adults age range will increase to 21. Under 21's may access the Children and Young People Pathway and the Domestic Abuse Pathway. The Complex Need pathway will be 18+

13.0 Equalities and Human Rights Implications

- 13.1 An Equality Analysis has been undertaken and is attached at Appendix A.

14.0 Implications for Partners and Other Directorates

- 14.1 The review may have impact on vulnerable groups which the Safer Rotherham Partnership will wish to consider, particularly around domestic abuse, people who have an offending history or anti-social behaviour.
- 14.2 The review will also have implications for Homelessness provision in Rotherham and the way in which homelessness is prevented and how its statutory duty is met. Therefore, housing partners will be involved to find solutions as well as develop awareness of the potential impacts.
- 14.3 There will be a need to reconfigure the contractual relationships with accommodation providers – primarily Registered Providers and the Councils own housing stock.

15.0 Risks and Mitigation

- 15.1 A significant risk is that existing providers are not experienced at delivering Housing First which may lead to the failure of the Housing First model to meet complex needs. There is a need to ensure that there is sufficient expertise within the commissioning team and providers to apply the model.
- 15.2 There needs to be buy in from landlords to change the tenancies within dispersed tenancies from short term to long term. If there is no buy in there may be a shortage of suitable accommodation. Commissioners will need to meet regularly with landlords to facilitate this change. A lack of clarity regarding the end goal, how to achieve it and what success looks like may mean that the model fails. Clear specifications and defined, straight forward outcomes targets will to be set to mitigate this risk.
- 15.3 The remodeling of the service has aimed to keep reduction in capacity to a minimum. Some accommodation based support will be decommissioned but to mitigate against this loss the floating support provision is to be increased. The Complex Need pathway will provide a more bespoke service to people most likely to fail.

- 15.4 In September 2016 the Government announced details of its proposed model for future funding. The new system is planned to be implemented from 2019 and the Local Housing Allowance (LHA) cap will not apply to supported and sheltered housing until then.
- From 2019 it is proposed to apply the LHA cap to all claims in supported and sheltered housing with a top-up paid by the local authority.
 - There will be no Shared Accommodation Rate in the calculation of the LHA rate for tenants in the new system. The one-bedroom LHA rate will be used for people under 35 living in supported housing.
- 15.5 The nature of Housing Related Support in Rotherham is that is nearly half of the services are provided to young people who may be subject to LHA single room rate from 2019. There are risks of rent shortfalls for those young people in receipt of higher levels of housing benefit through Intensive Housing Management charges. These will have to be topped up by the Council as the current LHA single room rate is £79.80 per week - less than current rents charged by the Registered Providers. The Council is in regular dialogue with the relevant Registered Provider to discuss how rent levels can be potentially reduced should this approach be mandated, though this is extremely challenging.
- 15.6 The application of the proposed LHA rate in 2019 has yet to be confirmed by Government following extensive consultation conducted during 2016/17. The majority of HRS contracts end in 2019/20. The contracts contain a six month notice clause, so there is the option to decommission if they become unaffordable due to LHA.

16. Accountable Officer(s)

Anne-Marie Lubanski, Strategic Director of Adult Care and Housing
Nathan Atkinson, Assistant Director of Strategic Commissioning

Approvals Obtained on behalf of-

	Named Officer	Date
Strategic Director of Finance & Customer Services	Mark Scarrott	24.08.2017
Assistant Director of Legal Services	Neil Concannon	25.08.2017
Head of Procurement (if appropriate)	Ian Murphy	01.08.2017
Head of Human Resources (if appropriate)	Odette Stringwell	19.07.2017

*Report Authors: Kay Nicholes, Commissioning Officer
Nathan Atkinson, Assistant Director of Strategic Commissioning*

This report is published on the Council's website or can be found at:-
<http://moderngov.rotherham.gov.uk/ieDocHome.aspx?Categories=>

Appendix A – Equality Analysis

<p>Under the Equality Act 2010 Protected characteristics are age, disability, gender, gender identity, race, religion or belief, sexuality, civil partnerships and marriage, pregnancy and maternity.</p>	
<p>Name of policy, service or function. If a policy, list any associated policies:</p>	<p>Budget savings for Housing Related Support Services (previously the Supporting People Programme)</p>
<p>Name of service and Directorate</p>	<p>Strategic Commissioning, Adult Care & Housing</p>
<p>Lead manager</p>	<p>Kay Nicholes</p>
<p>Date of Equality Analysis (EA)</p>	<p>July 2017</p>
<p>Names of those involved in the EA (Should include at least two other people)</p>	<p>Helen Woods Rotherham Side by Side</p>
<p>Aim/Scope (who the Policy /Service affects and intended outcomes if known)</p> <p>Following Cabinet agreement, regarding proposals for meeting the Councils budget deficit for 2016/17 and beyond, the Commissioning team have been tasked with meeting a £2.3m savings from the Housing Related Support budget to support the overall deficit faced by the Council between April 2016 and March 2019.</p> <p>This assessment considers the impact of a co-produced new model for the delivery of Housing Related Support for externally contracted existing Housing Related Support services to realize savings in 2018/19.</p> <p>The aim of the Housing Related Support services (HRS) is to provide a preventative service to vulnerable groups of people aged 16 years and over across many client groups and to deliver HRS service to ensure that those vulnerable groups who are at risk of being homeless, maintain or gain their independence through short term accommodation based services and floating support services.</p> <p>There changes impact</p> <ul style="list-style-type: none"> • Vulnerable adults including people at risk of offending, people with mental health problems that impact on their ability to live independently, people who are homeless or who are at risk of homelessness, people with substance misuse problems including single people and families. • People with complex needs • People at risk of Domestic Abuse • Young People at Risk of Homelessness <p>There will be a reduction in capacity for the dispersed accommodation (approx. 31 units) and same site supported housing (10 – 15 units).</p>	

There will be an increase in capacity of floating support (15 units) from 205 to 220.

There will be an increase in the number of units of floating support for people at risk of domestic abuse (18 units) from 82 to 100.

Overall there is a slight reduction in capacity of between 8 – 13 units

What equality information is available? Include any engagement undertaken and identify any information gaps you are aware of. What monitoring arrangements have you made to monitor the impact of the policy or service on communities/groups according to their protected characteristics?

All providers of contracted services must ensure fair access to their provision through appropriate means including assessment of risk and need of every vulnerable person referred to a service, exclusions must be based on evidenced risk. Service Users and stakeholders were given the opportunity to get involved in the consultation process through Rotherham Side by Side including a series of focus groups with people who use or have used the services and questionnaires.

The meetings discussed current supply of related services, cost of services, any gaps in current provision, how efficiencies might be found and how services can be redesigned to meet the demand for the services but with a reduced financial envelope.

Feedback received was that all services were seeing an increased need for more intense levels of support for people with complex needs associated with multiple disadvantage and often chaotic lifestyles. These were people who do not meet the criteria for statutory care and support services but are not able to successfully manage a tenancy and live independently with the current levels of support available. Currently there are no services available to adequately meet this need.

Feedback from Providers was that there was some uncertainty and that they feel they are 'in limbo', until the outcome of the changes to the Local Housing Allowance (LHA) rent cap in relation to supported housing is announced.

Feedback from Service Users is that they value the current service provided but felt that they wanted permanent rather than temporary housing.

In 2016/17 outcomes monitoring information, submitted by providers for people who had left service, showed the following information by protected characteristic:

Gender

Most service users were women. 351 (42.09%) are male and 483 (57.91%) are female. This is a slight increase from 56.11% in 2015/16. The second most common primary user group is people at risk of domestic violence 23.5%. A quarter of all service users are women under the age of 25. Women are more likely than men to move on in an unplanned way.

There is no negative impact anticipated. All Housing Related Support services are required, through their contracts with the Council, to ensure that services are accessible to all who are eligible. Housing related support for people who have experienced domestic abuse has been identified as a priority for Rotherham.

Age

In 2016/17 of the 222 or 26.62% of clients that are aged 20 or under, 104 (12.47%) are male and 118 (14.15%) are female. Of the 388 or 46.52% of clients that are aged 25 or under, 173 (20.74%) are male and 215 (25.78%) are female. The proportion of under 25's is a slight decrease from the previous year at 49%. The average age of all clients is 30 years. Young People at Risk is the most common primary user group representing 29.7% of all service users who left service in 2016/17.

The outcomes data for 2016/17 indicates that 72 people aged 16/17 left services in 2016/7 (8.6%) and 222 people were under 21 (26.6%) and 612 were 21+ (73%).

The age range for services will be changed for the following Pathways

- Vulnerable Adults 21+
- Complex Needs 18+
- Domestic Abuse 18+
- Young People 16 - 21

The changes will reduce the choice available to 18 - 25's as existing young people services accept referrals up to 25 and the services included in the Vulnerable adult's pathway currently offer a service for 18+.

Ethnicity

Ethnicity is recorded for 823 clients who left service in 2016/17. There are 725 who classify their ethnic origin as White and either British, Irish or other. This is 88% of clients which is in line with the previous year's level. There are 98 clients who classify their ethnic origin as other than white. This is 11.91% of clients whose ethnic origin was recorded. Of 350 males 32 classified their ethnic origin as other than white. Of 473 females 66 classified their ethnic origin as other than white.

The proposals for a single floating support service for the Domestic Abuse Pathway will mean the no BME specific service for survivors of domestic abuse. All Housing Related Support services are required, through their contracts with the Council, to ensure that services are accessible to all who are eligible. Providers will be required as part of the service specification to demonstrate how they have appropriate staffing and meet the needs of diverse communities in Rotherham. The situation should be monitored to further examine the ethnic diversity of housing related support services to ensure fair access.

Economic Status

The short-term outcomes forms record the economic status of clients as follows:

- 50 are in full-time work (24 hrs or more/week)
- 42 are in part-time work (less than 24 hrs/week)
- 1 is undertaking Government training/New Deal
- 156 are job seekers
- 7 are retired
- 206 are not seeking work
- 62 are full-time students
- 251 are long-term sick and disabled
- 27 are classified as other adult

In total, there are 802 clients who have recorded their economic status.

Disability

294 client(s) identified themselves as having a disability. All Housing Related Support

services are required, through their contracts with the Council, to ensure that services are accessible to all who are eligible. The implications for people with disabilities will be further considered in the review. There is no anticipated negative impact.

Religion

The short-term outcomes forms record the religious status of clients as follows:

100	Christian (all denominations)
2	Buddhist
1	Hindu
0	Jewish
54	Muslim
3	Sikh
14	Any other religion
449	No religion

There will be no negative impact. All Housing Related Support services are required, through their contracts with the Council, to ensure that services are accessible to all who are eligible.

<p>Engagement undertaken with customers. (date and group(s) consulted and key findings)</p>	<p>Housing Related Support services work with Rotherham residents from 16+ across all the protected characteristics.</p> <p>7 Focus groups with current and former service users gained the views of 62 participants between January and June 2017.</p> <p>The key findings included</p> <ul style="list-style-type: none"> • The importance of a permanent home. • People value the services they receive and achieve wider positive outcomes to enable them to maintain an home and an independent lifestyle • A place of safety is a top priority for people experiencing domestic abuse • There was a recognition of the reduction in funding to HRS services
<p>Engagement undertaken with staff about the implications on customers (date and group(s) consulted and key findings) See page 7 of guidance step 3</p>	<p>Stakeholders including providers, other service commissioners, representatives of other services, people who use the services were consulted regarding savings targets for their contracted services in 2018/19 and this will be ongoing as current service provisions will be redesigned to achieve the efficiency savings required.</p> <p>Key partners were informed of savings targets and the wider impacts to services were examined with them.</p> <p>An Equality Impact Assessment was undertaken on 25th July 2017 with Rotherham Side by Side.</p> <p>Further consultation is required with staff and service users at Browning court, Elliot House and the dispersed tenancies.</p>

Summary Sheet

Committee Name and Date of Committee Meeting

Overview and Scrutiny Management Board – 11 October 2017

Report Title

Transport for the North

Is this a Key Decision and has it been included on the Forward Plan?

Yes

Strategic Director Approving Submission of the Report

Damien Wilson – Strategic Director of Regeneration and Environment

Report Author(s)

Ian Ashmore – Transportation and Highways Design Manager
01709 822825 or ian.ashmore@rotherham.gov.uk

Andrew Butler – Senior Transportation Engineer
01709 822968 or andy.butler@rotherham.gov.uk

Ward(s) Affected

All

Executive Summary

The purpose of this report is for the Council as Local Highway Authority to consider consenting to the making of Regulations by the Secretary of State to establish Transport for the North (TfN) as a Sub-National Transport Body under section 102J of the Local Transport Act 2008.

The consent of each Highway Authority within the area of each Combined Authority which is a Constituent Authority of TfN is required to the making of Regulations by the Secretary of State because the Regulations contain provisions giving TfN highway powers to be exercised concurrently with the Local Highway Authorities.

The stated purpose of TfN is to transform the transport system of the North of England by planning and delivering the improvements needed to truly connect the region with fast, frequent and reliable transport links, driving economic growth and creating a Northern Powerhouse.

The proposed decision has been requested to be exempt from call-in in order to meet the deadline from Government on 20 October 2017. The Chair of Overview and Scrutiny Management Board and the Leader of the Opposition Group have consented to this request. As part of the pre-decision scrutiny process, it will be presented to the Overview and Scrutiny Management Board on 11 October 2017.

Recommendation

That Rotherham Metropolitan Borough Council formally consent under section 102J of the Local Transport Act 2008 to the making by the Secretary of State of Regulations to establish Transport for the North (TfN) as a Sub-National Transport Body and giving TfN concurrent highway powers.

List of Appendices Included

Appendix A – Constituent member Authorities

Background Papers

None

Consideration by any other Council Committee, Scrutiny or Advisory Panel

Cabinet and Commissioners' Decision Making Meeting – 16 October 2017

Council Approval Required

No

Exempt from the Press and Public

No

Title:

Transport for the North

1. Recommendation:

- 1.1 That Rotherham Metropolitan Borough Council formally consent under section 102J of the Local Transport Act 2008 to the making by the Secretary of State of Regulations to establish Transport for the North (TfN) as a Sub-National Transport Body and giving TfN concurrent highway powers.

2. Background

- 2.1 To address concerns about transport connectivity across the North of England, Local Transport Authorities and Local Enterprise Partnerships across the North came together in 2014 in a partnership with the Department for Transport (DfT) and the National Transport Agencies to form Transport for the North (TfN). Together they have developed an ambitious pan-northern transport strategy to drive economic growth in the North.

- 2.2 In October 2016, with the agreement of the Constituent Authorities; set out in 'Appendix A', TfN submitted a proposal to the Secretary of State for Transport that TfN should be established as the first Sub-National Transport Body (STB) under the provisions of section 102E of the Local Transport Act 2008 as amended by the Cities and Local Government Devolution Act 2016.

- 2.3 The Secretary of State has now formally responded to the proposal and has indicated that he is minded to make Regulations creating TfN as the first Sub-National Transport Body. It will have responsibility for the following functions:

- a) The preparation of a Northern Transport Strategy;
- b) The provision of advice on the North's priorities, as a Statutory Partner in the Department's investment processes;
- c) The coordination of regional transport activities, (such as smart ticketing), and the co-management of the TransPennine Express and Northern rail franchises through the acquisition of Rail North Ltd.

- 2.4 Before the Secretary of State can make the Regulations he must obtain consent to the making of the Regulations from each of the 19 Constituent Authorities identified at 'Appendix A' and also consent to the granting of concurrent highway powers from each of the Highway Authorities within TfN's area.

3. Key Issues

- 3.1 Poor connectivity is central to understanding the economic challenges of the North. There is disproportionately lower investment in transport in the North compared with London and other city regions across Europe. A series of studies have shown how investing in transport infrastructure can unlock the economic potential of the North.

- 3.2 The North has had no way of agreeing strategic priorities, with the responsibility for transport divided over many organisations at different geographical levels. This has made it hard to properly consider and prioritise the right strategic transport interventions to transform economic growth at the regional scale. As a result, the North has been unable to speak with one clearly evidenced voice to Government on its transport priorities in Spending Rounds or rail and road investment plans.
- 3.3 TfN has to date been operating as a non-statutory body and working with the DfT on agreeing its remit whilst at the same time building the organisation. Representatives from Sheffield City Region have been working with TfN to develop the draft regulations that will enable TfN to become a Sub-National Transport Body.
- 3.4 Importantly TfN will not be able to exercise any of the highway powers which they hold concurrently with the Highway Authorities unless the manner in which it proposes to exercise the function has been approved by each of the Highway Authorities through whose area the highway will pass.
- 3.5 There is no intention that TfN will itself become a Highway Authority and before any of these powers may be exercised TfN will need to obtain the express consent of the relevant Highway Authority. These powers would therefore only be exercised in circumstances where all the local Highway Authorities consider that there would be a benefit in TfN carrying out the work.
- 3.6 *Governance*
- 3.6.1 TfN have provided Constituent Authorities with a draft constitution. In terms of governance/decision making the draft constitution sets out that TfN will be made up of one elected member from each Constituent Authority, and this will be, at the choice of the Constituent Authority, either the metro mayor (if applicable), or the chair or leader of the Authority or, where responsibility for transport functions is formally delegated to another elected Member, that elected Member. Each Constituent Authority will have weighted voting rights based on population; for South Yorkshire this is equivalent to 9%. Certain decisions will need a super majority of 75% of the weighted votes (Transport Strategy; Budget and changes to the Constitution).
- 3.6.2 TfN have established a Partnership Board with DfT and other National Agencies and LEP representatives. The role of the Partnership Board is to represent wider business interests and to advise on policies and priorities relating to transport and the effect of transport on the economy of the TfN area and to lead the development operations and delivery of the Regional Transport Strategy.
- 3.6.3 It is intended that before TfN exercises any transport powers or functions it will enter into a written Protocol with the Constituent Authorities or the local Highway Authorities covering the way in which the functions will be exercised.

3.6.4 TfN will participate in the Highways North Board together with Highways England and the Department for Transport. Highways North Board will be the mechanism through which TfN fulfils their statutory partner role in relation to roads. The role of the Board will be to make recommendations in respect of the future Roads Investment Strategy and competitive major roads funding programmes. As previously identified existing Highway Authorities will remain as such with no transfer of functions to TfN.

3.6.5 TfN will participate in the Rail Partnership Board together with the Department for Transport. The Rail Partnership Board will recommend priorities for strategic rail investment and be the forum for TfN to implement its role as statutory partner. The Rail North Partnership Board will be the mechanism through which TfN fulfils their statutory partner role in relation to rail.

4. Options considered and recommended proposal

4.1 Option 1 - The Council does not support the request from Transport for the North which would then have to be reported to the Department for Transport and would likely result in the Government not making the necessary regulations to establish Transport for the North as a Sub-National transport body.

4.2 Option 2 - The Council supports the request from Transport for the North to establish the first Sub-National transport body. This is the recommended option.

4.3 The recommendation of this report is that Rotherham Metropolitan Borough Council formally consent under section 102J of the Local Transport Act 2008 to the making by the Secretary of State of Regulations to establish Transport for the North (TfN) as a Sub-National Transport Body and giving TfN concurrent highway powers.

5. Consultation

5.1 Regulations have now been drafted to create TfN as a Sub-National Transport Body. Before the Secretary of State may make these Regulations each of the Highway Authorities within the areas of the Combined Authorities, which Rotherham is, must consent to the making of the Regulations.

6. Timetable and Accountability for Implementing this Decision

6.1 The TfN's Partnership Board met on the 14th September and reasserted its commitment to the establishment of TfN on a statutory basis by the end of this year with a 'go live' date of 1st April 2018.

6.2 Given the pressure of parliamentary timetable DfT have requested that all consents be submitted to them before 20 October 2017. This deadline is the reason an exemption from call-in has been sought and approved by the Chair of the Overview and Scrutiny Management Board and the Leader of the Opposition Group.

7. Financial and Procurement Implications

- 7.1 In terms of funding, at present the costs of TfN are met from central government funding. However in the future the Constituent Authorities may all be required to contribute to the costs of TfN, but a decision to require such contributions and a decision as to the amount of such contributions would need a unanimous decision of the Constituent Authorities and may only be taken after written consent to the proposal has been received from each of the Constituent Authorities. TfN shall be entitled to accept voluntary contributions towards its costs from any of the Constituent Authorities, this would allow an individual or group of Authorities to fund specific TfN activity.
- 7.2 Payments to support Rail North Limited will continue in their current form which is via South Yorkshire Passenger Transport Executive.

8. Legal Implications

The powers that are to be conferred upon TfN are those relating to the Highways Act 1980 and will be exercised concurrently with the Local Highway Authority:-

- a) Section 8(1) (power to enter agreements with local highways authorities etc for doing certain works)
- b) section 24(2) (power of local highway authority to construct new highways)
- c) section 25(i) (powers to enter into agreement for creation of footpath etc)
- d) section 26 (i) (compulsory powers for creation of footpaths etc)
- e) various functions in sections 239, 240, 246 and 250 relating to the acquisition of land for highway purposes

9. Human Resources Implications

- 9.1 There are no Human Resource implications arising from this report.

10. Implication for Children and Young People and Vulnerable Adults

- 10.1 There are no implications for Children and Young People and Vulnerable Adults.

11. Equalities and Human Rights Implications

- 11.1 There are no Equalities and Human Rights implications relevant to this report.

12. Implications for Partners and Other Directorates

- 12.1 There are no implications for other Directorates whilst if all Constituent Member Highway Authorities support the request then the Government will pass the necessary regulations to create TfN.

13. Risks and Mitigation

- 13.1 There is a risk that one or more of the constituent Highway Authorities may not support the request from TfN which may result in the necessary regulations not being made or delayed.

14. Accountable Officer(s)

Damien Wilson Strategic Director Regeneration & Environment.
 Paul Woodcock Assistant Director - Planning, Regeneration & Transport
 Ian Ashmore Transportation and Highways Design Manager

Approvals obtained on behalf of:-

	Named Officer	Date
Strategic Director of Finance & Customer Services	Judith Badger	28.09.2017
Assistant Director of Legal Services	Dermot Pearson	28.09.2017
Head of Procurement (if appropriate)	N/A	
Head of Human Resources (if appropriate)	N/A	

*Report Author: Ian Ashmore, Transportation & Highways Design Manager
 Andrew Butler, Senior Transportation Engineer*

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Summary Sheet

Committee Name and Date of Committee Meeting

Overview and Scrutiny Management Board – 11 October 2017

Report Title

Scrutiny Review – Alternative Management Arrangements for Children’s Service in Rotherham

Is this a Key Decision and has it been included on the Forward Plan?

No

Director Approving Submission of the Report

Chief Executive

Report author(s):

Caroline Webb, Senior Scrutiny Advisor (Scrutiny and Member Development)
01709 822765

Ward(s) Affected

All

Executive Summary

The scrutiny report (attached as Appendix 1) presents the latest analysis and current thinking of the Improving Lives Select Commission’s cross-party review group on the range of Alternative Management Arrangements (AMAs) for children’s services. It evaluates the relative strengths and challenges of the primary options available to the Council. The paper then provides initial recommendations for future management arrangements. The review was approved by Improving Lives Select Commission at its meeting held on 12th September 2017.

Recommendations

1. That OSMB approve the report and recommendations as outlined in Section 11 of Appendix 1.
2. That OSMB forward the scrutiny review to Cabinet and Commissioners for their consideration.
3. That the response of Cabinet and Commissioners be fed back to Improving Lives Select Commission.

List of Appendices Included

Appendix 1 – Scrutiny Review - Alternative Management Arrangements for Children's Service in Rotherham

Annex 1 – Full Option Appraisal

Annex 2 – Terms of Reference and background information

Annex 3 – Isos Partnership: 2nd Workshop Summary

Annex 4 – Letters from Partners

Annex 5 – Children and Young People's Plan

Background Papers

None

Consideration by any other Council Committee, Scrutiny or Advisory Panel

Improving Lives Select Commission – 12 September 2017

Cabinet and Commissioners' Decision Making Meeting – 13 November 2017

Council Approval Required

No

Exempt from the Press and Public

No

Scrutiny Review – Alternative Management Arrangements for Children’s Service in Rotherham

1 Recommendations

- 1.1 That OSMB approve the report and recommendations as outlined in Section 11 of Appendix 1.
- 1.2 That OSMB forward the scrutiny review to Cabinet and Commissioners for their consideration;
- 1.3 That the response of Cabinet and Commissioners be fed back to Improving Lives Select Commission.

2 Background

- 2.1 The scrutiny review underpinning this report has been undertaken by cross-party members of the Improving Lives Select Commission. In October 2016, (former) Lead Commissioner Sir Derek Myers wrote to the Leader of the Council, Cllr Chris Read, and the Chief Executive, Sharon Kemp, commending the Government’s policy paper “Putting Children First” (Department for Education, 2016). The publication sets out a challenge to all councils to think about how they can make and sustain improvements across children’s services, including considering alternative delivery models or management arrangements.

3 Key Issues

- 3.1 This report presents the latest analysis and current thinking of the Improving Lives Select Commission on the range of Alternative Management Arrangements (AMAs)¹ for children’s services which might secure the long-term success of Rotherham’s Children and Young People’s Services. It evaluates the relative strengths and challenges of the primary options available to the Council and provides initial recommendations for future management arrangements.
- 3.2 The review concluded that a Practice Partner model would secure the most rapid and sustainable improvements in the short term (two years) and present the lowest risk to the Improvement journey. In particular, its evidence suggested that the Practice Partner model will:
 - Establish the right balance of political ownership, oversight and accountability for CYPS at the same time as rigorous external challenge;
 - Enable the good progress being made on the improvement programme to continue at an accelerated pace with minimal disruption to partners, wider council priorities or management focus; and
 - Avoid high transition and operating costs associated with each of the AMAs and enable spend to be focused on front line delivery.

¹ The review defined alternative management arrangements as the delivery of children’s services other than through traditional in-house local authority services. For example creating a new entity (i.e. trust) that will take operational responsibility for delivering children’s services or whereby some or all of children’s service(s) are provided by an existing entity or entities.

- 3.3 It is acknowledged that the peer practice partner model is by definition temporary. Once there is consistent good quality front-line practice, the Council will actively consider other options to work with others through integration, collaboration or further commissioning if this would secure more rapid and sustainable improvement.

4 Options considered and recommended proposal

- 4.1 An option appraisal was undertaken to provide an objective analysis of the range of alternative management arrangements available to the Council. It evaluates the relative strengths and challenges of these options. This is detailed in Section 8 of the report, with the full option appraisal attached as Annex 1.
- 4.2 The options appraisal recommended that a Practice Partner model would secure the most rapid and sustainable improvements (as outlined in para 3.2).

5 Consultation

- 5.1 The views of Improvement Board partners and the Police and Crime Commissioner (PCC) were sought on this preferred option. Each partner supported the continuation of the Practice Partner model and agreed that it was likely to secure better and sustainable outcomes for children and young people in Rotherham.

6 Timetable and Accountability for Implementing this Decision

- 6.1 For ongoing discussion with the Commissioner for Children's Social Care.

7 Financial and Procurement Implications

- 7.1 The following criteria were considered as part of the option appraisal:
- Provide a sustainable, long term platform for high quality children's services in Rotherham;
 - Avoid significant and avoidable detrimental costs, for example, the treatment of VAT; and
 - Avoid protracted and complex negotiations that may be a distraction from the improvement journey (e.g. treatment of overhead/recharge).
- 7.2 Whilst there would be significant financial and procurement implications that would require careful consideration should there be a future decision on the adoption of alternative management arrangements, these are difficult to quantify at this time. However the preferred option would secure the most rapid and sustainable improvements in the short term (two years) and would avoid high transition and operating costs associated with each of the other options and enable spend to be focused on front line delivery.

8 Legal Implications

- 8.1 There are no direct legal implications from the recommendations contained in this report. There would be significant legal implications that would require careful consideration should there be a future decision on the adoption of alternative management arrangements.

9 Human Resources Implications

9.1 The following criteria were considered as part of the option appraisal and the preferred option scored most highly in this area:

- Builds on the progress made in recruitment and retention;
- Ensure that quality staff are attracted to and stay in Rotherham;
- Facilitate ongoing investment in the development of CYPS staff;
- Engage staff throughout the improvement journey.

10 Implications for Children and Young People and Vulnerable Adults

10.1 The review considered which model would secure the most rapid and sustainable improvements in the short term (two years) and present the lowest risk to the Improvement journey of CYPS. The specific considerations for Rotherham in any AMA are:

- Recognising the additional effort required to ensuring continued organisational ownership of a whole family approach;.
- Clarifying additional pathways and relationships that maybe required to retain connections between critical services such as Adult Services;
- Consideration to budget/demand challenge and mechanisms to ensure continued prioritisation/flexibility.

11 Equalities and Human Rights Implications

11.1 The preferred option would not require any additional equality impact assessment.

12 Implications for Partners and Other Directorates

12.1 See 5.1.

13 Risks and Mitigation

13.1 See option appraisal (Section 8 of the report, with the full option appraisal attached as Annex 1)

14 Accountable Officer(s)

14.1 Sharon Kemp, Chief Executive

Approvals Obtained from:

Assistant Director of Finance and Customer Services: Graham Saxton
Service Manager - Litigation and Social Care: Neil Concannon
Head of Procurement (if appropriate): N/A

Name and Job Title – Caroline Webb Senior Adviser (Scrutiny and Member Development)

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Improving Lives
Scrutiny Select Commission

Review of Alternative
Management Arrangements
for Children's Service in
Rotherham

April 2017

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Annex 2 – Terms of Reference and background information

Annex 3 – Isos Partnership: 2nd Workshop Summary

Annex 4 – Letters from Partners

Annex 5 – Children and Young People’s Plan

1 Executive Summary

- 1.1 This report presents the latest analysis and current thinking of the Improving Lives Select Commission on the range of Alternative Management Arrangements (AMAs) for children's services. It evaluates the relative strengths and challenges of the primary options available to the Council. The paper then provides initial recommendations for future management arrangements.
- 1.2 It is recognised that the different delivery models and management arrangements across the country are in various stages of development. The Council will continue to receive further evidence both now and in the future regarding models and ways of working that have the greatest impact on keeping children safe from harm.
- 1.3 The scrutiny review underpinning this report has been undertaken by members of the Improving Lives Select Commission. In October 2016, Lead Commissioner Sir Derek Myers¹ wrote to the Leader of the Council, Cllr Chris Read, and the Chief Executive, Sharon Kemp, commending the Government's policy paper "*Putting Children First*" (Department for Education, 2016). The publication sets out a challenge to all councils to think about how they can make and sustain improvements across children's services, including considering alternative delivery models or management arrangements.
- 1.4 For the purposes of this review, the definition of alternative management arrangements is the delivery of children's services other than through traditional in-house local authority services. For example creating a new entity (i.e. trust) that will take operational responsibility for delivering children's services or whereby some or all of children's service(s) are provided by an existing entity or entities.
- 1.5 The review was asked to consider the lessons learnt from other trust models and also look objectively at other AMAs which might secure the long-term success of Rotherham's Children and Young People's Services.
- 1.6 The supporting evidence underpinning this report was gathered through visits/conversations with other areas to identify the impact their delivery arrangements had on improvements. In addition, Isos Partnership (with the support of the Local Government Association) used an independent research methodology to enable an objective assessment of the model/s most likely to secure sustainable improvements in Children and Young People's Services (CYPS).
- 1.7 In considering whether Rotherham had the innate ability to make sustained

¹ Commissioner Sir Derek Myers stood down from his role as Lead Commissioner on 31 March, 2017. The Lead Commissioner is now Commissioner Mary Ney.

improvement, the review looked at the following factors:

- Capacity to self-assess accurately;
- Capacity to develop strategic priorities that will address weaknesses; and
- Capacity to implement these strategic priorities swiftly and effectively.

Using the Isos framework, it judged Rotherham's position to be in the **"fair to good"** category. This category is the second stage of the improvement journey which focuses on embedding improvements; having been able to demonstrate that children's services leadership are 'getting the basics' rights; that systems and controls are in place, practice is consistent and caseloads are manageable (LGA/Isos (a), 2016, pp. 13-21).

1.8 Alongside this self-assessment, external peer reviews, practice partner feedback, Commissioner's reports, and Ofsted monitoring visits were also used to assess progress and improvements that have been made in Rotherham's Children and Young People's Services. The review undertaken has been a rigorous, member-led process. (The review methodology is detailed in Section 4 of the report.)

1.9 Using this evidence, an option appraisal was undertaken to provide an objective analysis of the range of alternative management arrangements available to the Council. It evaluates the relative strengths and challenges of these primary options. This is detailed in Section 8 of the report, with the full option appraisal attached as Annex 1.

1.10 Across each of the options, particular strengths and challenges identified within the evaluation include the following:

- The importance of ongoing external scrutiny, support and challenge in delivering improved children's outcomes in Rotherham;
- The progress achieved to date and the plans to achieve 'Good' and Outstanding' status for CYPS;
- The operational and financial risks of establishing new organisational entities, particularly those involving multiple stakeholders;
- The risk of disruption to the progress achieved and slowing the pace of progress during transition;
- The use of alternative models to stimulate change when there is not the recognition or the capability to effect change;
- The cost of transition to AMAs, both transaction costs (be that commissioning, set up, tax) as well as management time and focus at the same time as continuing to drive the Improvement programme;
- The complex set of inter-relationships between CYPS and other Council services

and other partners in the borough which require careful management with the introduction of new AMA options; and

- The emerging evidence base for the majority of the alternative models within the children's social care landscape.

1.11 A summary of the option appraisal is outlined in the table below:

Summary Alternative Management Arrangements Options Appraisal

AMA Option	Strengths	Weaknesses	Score
1. Peer Practice Partner	<ul style="list-style-type: none"> Build on peer model in place – knowledge transfer, critical appraisal, challenge and support Build on partnership and integration work Ensures ownership and political oversight Lower cost / risk of transition 	<ul style="list-style-type: none"> Ability to continue to deliver the pace of improvement required internally Positioning of children’s services in the eyes of the public and other stakeholders – sufficiently strong demonstration of progress 	33/40
2. Commission by Contract	<ul style="list-style-type: none"> Ability to commission new interventions / services to meet needs Greater freedom/flexibilities, building on capabilities of providers and the voluntary sector Risk transfer and outcome based commissioning 	<ul style="list-style-type: none"> Fragmentation of services and providers, hindering the whole system approach to improvement Cost and complexity of commissioning multiple providers / programmes > investment in commissioning capacity Control and oversight of quality / performance 	22/40
3. Wholly Owned Company – Trust	<ul style="list-style-type: none"> Freedom and flexibility to drive pace of improvement but within local authority control Emerging practice from other localities Social work centred organisation – core focus. 	<ul style="list-style-type: none"> Cost, complexity and risk of transition (what’s in scope) Impact on partnerships, integration and whole system approach Limited evidence base and financial risks (e.g. tax) 	25/40
4. Community Interest Company	<ul style="list-style-type: none"> As per Trust arrangements but additional community benefit and positioning in the eyes of stakeholders 	<ul style="list-style-type: none"> As per Trust arrangements. 	26/40
5. Mutual	<ul style="list-style-type: none"> Employee engagement and ownership for Improvement Innovation, customer service and cost control 	<ul style="list-style-type: none"> Lack of control, political oversight Complexity and cost of transition Untested model at the scale of children’s services Pace of decision making (one member one vote) 	16/40
6. Managing Agent	<ul style="list-style-type: none"> Capacity, capability and resources of external partner – e.g. commissioning; commercial Performance management / monitoring 	<ul style="list-style-type: none"> Complexity and confusion – roles and responsibilities Additional cost layer, particularly management costs Fragmentation – whole system approach 	18/40
7. Joint Venture	<ul style="list-style-type: none"> Leverage partner capacity / capability Knowledge transfer – new approaches Share risk and reward 	<ul style="list-style-type: none"> Identification of the right partner with the right culture Cost, complexity of transition Alignment of priorities Control and influence 	15/40
8. Shared Service	<ul style="list-style-type: none"> Best practice and innovations, knowledge transfer Speed and simplicity of contracting arrangements Efficiency / cost savings 	<ul style="list-style-type: none"> Practical local availability of high quality children’s services Learning whilst establishing shared services arrangements Management focus and commissioning capacity/capability 	24/40

1.12 Taken together, both the options appraisal and the independent assessment model (ISOS) suggest that a Practice Partner model would secure the most rapid and sustainable improvements in the short term (two years) and present the lowest risk to the Improvement journey. In particular, the action research and evaluation suggests that the Practice Partner model will:

- Establish the right balance of political ownership, oversight and accountability for CYPS at the same time as rigorous external challenge;
- Enable the good progress being made on the improvement programme to continue at an accelerated pace with minimal disruption to partners, wider council priorities or management focus; and
- Avoid high transition and operating costs associated with each of the AMAs and enable spend to be focused on front line delivery.

1.13 The views of Improvement Board partners and the Police and Crime Commissioner (PCC) were sought on this preferred option. Each partner supported the continuation of the Practice Partner model and agreed that it was likely to secure better and sustainable outcomes for children and young people in Rotherham. The majority of respondents commented on the progress that had been made over the previous two years and how external challenge and peer reviews had made an impact on the quality of service. Partners also highlighted opportunities for further collaboration and development which, in their view, would be best fostered in the current arrangements.

1.14 The Council will continue to work effectively with our Peer Practice Partner, and once assessed as “Requiring Improvement”, we would want to continue with Lincolnshire as a partner in practice given their knowledge and understanding of Rotherham. However, it is acknowledged that the peer practice partner model aids the improvement journey and is by definition temporary. Once there is consistent front- line practice, the Council will actively consider other options to work with others knowing that integration, collaboration or further commissioning will be underpinned by strong and robust operational activity and management oversight.

1.15 It is the Council’s stated ambition to become a “Good” and then “Outstanding” Children’s Service. There is an ongoing commitment, irrespective of rating, to a rigorous and ongoing peer review model through the regional and national Association of Directors of Children’s Services and the ongoing relationship with the Department for Education. To underpin this activity, there would an appropriate amount of funding be set aside to enable external support from the sector to be drawn in either to undertake

reviews or for support. This would be done with the oversight of the Partner in Practice to continue to demonstrate the transparent way the Council now operates.

- 1.16 Whilst continuing with the Council's delivery of Children's Services with a peer practice partner model in the short term is the preferred option based on the information, evidence and research available today, this is not a closed decision. The Council remains open to other Alternative Management Arrangements such as establishing a Trust/CIC, including the potential to integrate with another Children's Trust who is rated as "Good", if there was evidence in the future that this would secure more rapid and sustainable improvement.

2 Introduction

2.1 This scrutiny review has been undertaken by members of the Improving Lives Select Committee. In October 2016, Lead Commissioner Sir Derek Myers wrote to the Leader of the Council, Cllr Chris Read, and the Chief Executive, Sharon Kemp, commending the Government's policy paper "*Putting Children First*" (Department for Education, 2016). The publication sets out a challenge to all councils to think about how they can make and sustain improvements across children's services, including considering alternative delivery models.

2.2 The Commissioner advised that the Council considers the lessons learnt from other Trust models and also look objectively at alternative management arrangements which might secure the long-term success of Rotherham's Children and Young People's Services, including but not limited to:

- A shared service with a neighbouring authority;
- An agency arrangement whereby another authority is invited to run Children's Services on behalf of Rotherham;
- Spinning out some services to staff-led entities;
- Setting up local voluntary organisations or inviting local voluntary organisations to take a greater part in running some services;
- Inviting the children's trust in Doncaster to play some part in Rotherham's provision; or
- Setting up a Trust for Rotherham's Children's Services but making careful decisions about whether the Council retains some functions.

2.3 The Leader and Chief Executive committed to a transparent and evidence based review of alternative management arrangements and asked Cllr Clark, the Chair of Improving Lives, to lead a cross party member working group to undertake this work.

The review was supported by Sharon Kemp, Chief Executive and Ian Thomas, Strategic Director of Children and Young People's Services. Scrutiny support was provided by Caroline Webb.

2.4 This review has been undertaken with the support of the LGA. It is hoped that the outcomes and recommendations can be used by the LGA to contribute to the national evidence base in the consideration of future management arrangements to drive and sustain improvements in children's services.

2.5 For the purposes of this review, the definition of alternative management arrangements is the delivery of children's services other than through traditional in-house local

authority services. For example creating a new entity (i.e. trust) that will take operational responsibility for delivering children's services or whereby some or all of children's service(s) are provided by an existing entity or entities.

3 Rotherham Context

- 3.1 The recent history of Rotherham Council and its children's services is well documented. The Corporate Governance Inspection (CGI) of the Council, led by Dame Louise Casey CB, was instigated in September 2014 as a result of the report of Professor Alexis Jay into the serious, longstanding failings in children's social care in Rotherham findings were reinforced by the Ofsted inspection report in November 2014 which assessed the Council's children's social care services as "inadequate". The CGI set out a succession of serious, corporate failings across the organisation as well as its wider partnership relations. In response to these failings, in February 2015, the Government appointed five commissioners² to take on all Executive responsibilities at the Council and drive the improvements necessary to return decision-making to democratic structures.
- 3.2 Substantial changes have been made to the political and strategic leadership of the Council since that point. A headline achievement has been the appointment of a new senior leadership team, which has been in place in full since summer 2016, which has heralded a change in organisational behaviours and values. There has also been a significant change in the Council membership with over 60% being elected since 2015³, and a new Cabinet appointed in February 2015.
- 3.3 Key elements of the shift that has taken place were captured in an LGA peer review in October 2016. In it, the new Cabinet, Overview and Scrutiny and Audit Chairs, and the Senior Leadership Team were described as "*able, confident and well-focussed, both as individuals and as groups.*" Arrangements for opposition members to gain access to information, and to officer support when they wished to explore specific issues were "*healthy and effective*". The new Leader of the Council and the new Chief Executive (are) "*...highly capable, principled, and intelligent individuals... and share high levels of integrity and parallel commitments to ensure open and transparent governance and decision-making.*" (LGA, 2016). Developments in scrutiny are captured in Commissioner Bradwell's submission to the Secretary of State for Education, which comments on the evidence of greater political ownership and effective challenge from the Improving Lives Scrutiny Select Commission (RMBC (a), 2017, p. 17).

² The Commissioner for Children's Social Care Services has been in place since October 2014 having been appointed by the Secretary of State for Education at that time.

³ 38 out of 63 councillors

- 3.4 It should be acknowledged that the Council is now in a very different to position to that of two years ago. Under this new leadership, there has been a steady return of decision making powers and the majority of services are now under council control, signalling Government confidence in the achievements to date. The recent Ofsted monitoring letter stated “*The local authority is making continuous progress in improving services for children in need of help and protection*” (Ofsted (b), 2017).

4 Methodology

- 4.1 The review commenced in November 2016 and concluded in April 2017, with its findings reported to Improving Lives Select Commission in September 2017. The review consisted of four stages: self-assessment, evidence gathering, options appraisal and recommendations. These are detailed below:

Stage 1 – Self-Assessment

- 4.2 Isos Partnership (with the support of the Local Government Association) facilitated a self-assessment workshop for members of Improving Lives Select Commission, senior RMBC leaders and officers, and partners including the Children’s Social Care Commissioner and Peer Practice Partner. This workshop mapped Rotherham’s improvement journey using an independent methodology. The findings of this workshop are outlined from Section 6. The full report from the workshop is attached as Annex 3.
- 4.3 Alongside this self-assessment, is a précis of external peer reviews, practice partner feedback, Commissioner reports, and Ofsted monitoring visits to provide independent information on the progress and improvements that have been made in Rotherham’s children’s services. These are detailed in Section 5 of the report.

Stage 2 – Evidence Gathering

- 4.4 The review identified the strengths and weaknesses of different delivery models that are currently being used by councils in delivering children’s services, highlighting in particular what has driven and sustained service improvement in different areas.

It reviewed existing documentation and reports and included visits to and conversations with a number of councils and the LGA Children’s Improvement Board to establish:

- the impact of different delivery models of children’s services;
- the pros and cons attached to each approach; and
- common themes from evidence underpinning improvements.

- 4.5 Published information about improvements across children’s services was reviewed

where available⁴. However, there is little research evidence or externally validated evaluation that focuses specifically on the relative strengths of alternative models of improvement support and the circumstances in which these are likely to be effective (LGA/Isos (b), 2017, p. 11). The recent National Audit Report highlights that arrangements for developing, identifying and sharing good practice are “*piecemeal*”, with social workers having difficulty finding out what works, and only a small pool of ‘good’ or ‘outstanding’ authorities available to support those judged ‘inadequate’ (NAO, 2016, p. 8).

Stage 3: Option Appraisal

- 4.6 An option appraisal was undertaken to provide an objective analysis of the range of alternative management arrangements available to the Council. It evaluates the relative strengths and challenges of the primary options available to the Council and provides initial recommendations for future management arrangements. This is detailed in Section 8 of the report and Annex 1.
- 4.7 The review sought the views of key partners on the preferred option and a summary of their feedback is outlined in Section 10. The responses are attached in full in Annex 4.

Stage 4 – Recommendations

- 4.8 On the basis of this evidence and options appraisal, the review recommends an approach and rationale for the future management arrangements based on Rotherham’s current and future ambitions for children’s social care services.

5 Rotherham’s Improvement Journey

- 5.1 Since the appointment of a Children’s Social Care Commissioner in October 2014, there has been evidence of ongoing improvement. The last report of Commissioner Bradwell to the Secretary of State states “*There is a clear vision, purpose and direction for the service, evidence of more stable leadership and good oversight of the improvement journey.*” (RMBC (a), 2017, p. 17)
- 5.2 CYPS has encouraged external scrutiny which has included a regional Association of Directors of Children’s Services (ADCS) Sector-Led Peer Review, which focused on Looked after Children (LAC) and care leavers (October 2016). This followed a similar review on Leadership, Management and Governance (LMG) undertaken in June 2016 (RMBC (b), 2016). Additional peer reviews led by practice partners Lincolnshire, around

⁴ For example the report published by the (LGA (a), 2014) LGA: *Self, sector or centre?* An extended case study has also been published on the establishment of “Achieving for Children” (Spring Consortium, 2016), however the report has not been subject to external verification or financial analysis.

Special Educational Needs and Disabilities (SEND) and social care 'front door' and child sexual exploitation (CSE), took place in November 2016. Practice partners have also reviewed the Medium-Term Financial Strategy and commissioning arrangements.

Evidence of progress

5.3 In November 2014 the regulator published its report following the LA's inspection under the Single Inspection Framework. The inspection focuses on five domains:

- Leadership, Management and Governance
- Early Help and Protection
- Experience of Looked After Children

The above are 'limiting judgements' in that a rating of inadequate in any single domain renders the overall outcome in terms of overall effectiveness to be inadequate. There are two sub judgements pertaining to Looked After Children, viz:

- Adoption
- Care Leavers

When the LA was last inspected all of the above were rated 'Inadequate' with the exception of Adoption, which was deemed to 'Require Improvement'.

5.4 As can be seen below, since the inspection the council has secured significant progress against most domains and is clear on the actions required to continue drive progress across them.

Leadership, Management and Governance

5.5 A new DCS was appointed in January 2015 who immediately set to work on the development of an Improvement Plan. This was submitted to Ofsted on 25 February 2015. A new structure was introduced to address capacity deficits at all levels and a vision to develop outstanding services was consulted on and adopted. Weekly performance meetings were introduced and a number of Boards were established to oversee progress. These included: Children's Improvement Board; CSE Board; Progress Board and Post Abuse Support Board. A programme of coaching was made available for senior leaders and expectations around compliance with statutory child protection procedures, and adherence with statutory guidance, Working Together (WT) 2013 (subsequently replaced by WT15) were introduced as 'non-negotiable' requirements. A new 'front door' went live on 1 April 2015 in the form of a Multi-Agency Safeguarding Hub' and the existing CSE Team was decommissioned and rebuilt, with new operating guidance agreed with South Yorkshire Police.

5.6 The leadership throughout the service is now stable with 57 of circa 60 posts filled on a

permanent basis with competent staff. In a recent Ofsted monitoring letter the regulator reported that they found, *'A stable senior management team, led by the director of children's services (DCS), demonstrates determined, effective, strategic leadership with clear priorities and aspirations, and a sustained focus on improving outcomes for children'* (21 November 2016) (Ofsted (a), 2016). Areas for continued action as detailed and monitored through the Improvement Plan include improving effectiveness at team management level so that the quality of practice improves continuously.

Early Help and Protection

5.7 In late 2014 early help was fragmented, with low numbers of Common Assessment Framework (CAF) plans in place to support families with emerging vulnerabilities, although there were some positive outcomes being secured for 'Troubled Families' by the authority's Families for Change Team.

5.8 Since inspection and the launch of the new integrated Early Help Offer in January 2016, the numbers of early help assessments have increased five-fold to around 1,400. The 'Beyond Auditing Programme' has revealed that quality is mainly within the 'requires improvement' range with some good work emerging. Notably 98% of families in receipt of Early Help rate the service as good or better. In March 2017 Ofsted reported,

'The implementation of multi-disciplinary locality teams is leading to improved quality and coordination of early help support to families. Early help assessments (EHAs) are being undertaken more efficiently, and these are leading to a direct offer of help for individual children and their families. There is much evidence of children's circumstances improving as a result of the early help being provided' (Ofsted (b), 2017)

However, there is work to do to ensure partners lead on more early help assessments to ensure that the right professionals are engaged with families in a timely way, which will result in better outcomes.

5.9 In terms of child protection there have been noteworthy improvements. MASH performance indicators are strong with 90% of referrals responded to effectively within 24 hours. An increasing number of referrals are leading to assessments, which are undertaken in timely manner and re-referral rates are on a (positive) downward trajectory. The majority of Initial Child Protection Conferences are convened within statutory timescales and the 'Strengthening Families' approach is leading to better quality of plans. Most children who are assessed as 'child in need' and are subject to 'child protection plan' have up to date plans and are seen by Social Workers regularly.

5.10 The 'EVOLVE' multiagency CSE has been remodelled and is delivering good work to

protect children and young people who are vulnerable to abuse. This extends to excellent partnership work with South Yorkshire Police to pursue perpetrators, which has resulted in the conviction of 26 criminals over the last year who are now serving a total of circa 350 years in prison. There has been productive work with the PCC to ensure that partners are geared up to dealing with increasing demands over the next few years as a result of National Crime Agency investigations into historical cases of CSE.

- 5.11 Following significant investment and more effective triaging in consultation with Early Help colleagues in the MASH, caseloads are manageable at an average of 16 per social worker. Whilst some of these improvements were reported within the recently published monitoring letter, work continues on robust risk assessment and the quality of work, to move from the 'requires improvement' range, to at least 'good'.

Looked After Children (including adoption and care leavers)

- 5.12 Whilst improvement is evident, the trajectory reflects a mixed picture. This is due to a challenging cohort of children, who have experienced poor case management in the past and a lack of management stability when compared to other areas in social care.
- 5.13 There is evidence of good early permanence work following a service restructure. Whilst numbers of adoptions have decreased in line with national trends the timeliness of the adoption process is generally good. The fostering response is an emerging strength and the LA is delivering on its strategy to recruit more foster carers, with 21 approved in 2016/17 compared with 13 the previous year. As a result of better utilisation of the foster carer community, there has been a sharp increase in family based placements from 220 to 260. Placement stability is improving with fewer breakdowns and as Ofsted reported in November 2016, children feel safe in their placement which is reflected in a dramatically reducing profile of missing children/episodes. Although there has been incremental improvement in practice quality, there are still too many cases judged to be inadequate. This is a key area of focus and work is underway to address this, spearheaded by a new permanent leadership team. This includes Social Workers assessment, coaching with the support from practice partners Lincolnshire, and significant investment made to introduce the 'Signs of Safety' operating model and Restorative Practice approaches.
- 5.14 The Council's self-assessment of the Care Leaving service is 'requires improvement' with some good features. 98% of care leavers are in suitable accommodation with 91% in touch regularly with their Personal Advisor. 70% are in employment, education and

training against a national average of 48%. 9% of the qualifying cohort of young people are at university, compared with 6% nationally. Areas for development include consistency of supervision and improving the quality of pathway plans so they are consistently good.

5.15 The performance in children's social care and early help are captured in Table 1 (below)

Table 1: KPI's - Children's Social Care (CSC) and Early Help (EH)

Service	Measure	As at 30/11/2014	As at 31/03/2017	Difference	Stat Neighbour March 2016	Yorkshire & Humber March 2016	England March 2016
CSC	Children In Need	1825	1617	-208			
CSC	Children In Need per 10k	323.58	286.70	-36.88	372.68	332.8	337.7
CSC	% Contacts with decision within 1 working day	59	86	+27			
CSC	% of referrals going onto assessment	77.8	95.8	+18			
CSC	% of CIN (open at least 45 days) with an up to date plan	43.8	82.7	+38.9			
CSC	% of CPP with visits in the last 2 weeks	39.8	88.4	+48.6			
CSC	% of completed LAC visits which were completed within timescale - National Minimum standard	37.7	94.5	+56.8			
EH	% of Early Help Contacts with an Early Help recommendation that were Triaged during the reporting month within Five working days of receipt (excluding Step downs)	Early Help offer implemented in January 2016	98.6% - 31 March 2017	N/A	N/A	N/A	N/A

Service	Measure	As at 30/11/2014	As at 31/03/2017	Difference	Stat Neighbour March 2016	Yorkshire & Humber March 2016	England March 2016
EH	No of Early Help Assessment's (EHA's) completed since the Early Help offer was launched in January 2016	815 CAF's completed over the previous 3.5 year period (average number of CAFS 19 per month)	1430 EHA's completed – 18 January 2016 - 31 March 2017 (average number of EHAs 102 per month)	+615	N/A	N/A	N/A
EH	Young people aged 16-17 (academic age) who are NEET Annual Outturn taken as an average for Nov, Dec, Jan returns)	5.9% against a target of 6%. Based upon Academic Age 16-18 and with a NEET adjustment in place. (DfE counting rules changed in September 2016)	3.1% against a target of 3.1%. Based upon Academic Age 16-17 only and without a NEET adjustment. (DfE counting rules changed in September 2016)	N/A due to changes in Academic Age and DfE counting rules	3.8% (published Feb 16)	3.1% (published Feb 16)	2.7% (published Feb16)
EH	Customer Satisfaction	Exit Survey implemented in May 2016.	98% people who completed an exit survey rated the support they received as either 'Good' or 'Excellent'. (May 2016-March 2017)	N/A	N/A	N/A	N/A

Partnerships

- 5.16 The Local Safeguarding Children's Board; Children and Young People's Partnership and Health and Wellbeing Boards are maturing and operating effectively, with links to Community Safety and Adult Safeguarding Boards developing. Children and Young people are actively involved in service development within the Youth Cabinet and Looked After Children's Council; and young people are involved in the recruitment of all senior managers.
- 5.17 In June 2016 the council set out its ambition to become a Child Centred Borough. A group chaired by an elected member and supported by the Assistant Chief Executive has been established to ensure that the borough develops into a place where young people can thrive. The ambition starts by declaring that Rotherham wants every child to have a positive start in life and a good childhood so they can grow into well adjusted, emotionally resilient individuals who will enjoy healthy and mutually respectful relationships in adulthood, become responsible citizens and be able to be good parents to their own children when the time comes.
- 5.18 Joint commissioning of services, particularly in the field of Special Educational Needs and Disability is embedding. The Parents' Partnership Forum works well and provides a voice for parents of children with SEND and is seen as a national exemplar. Further work has also taken place with health partners to develop mental health services – including specialist interventions for looked after children. The Joint Management Arrangements with the Clinical Commissioning Group means that CYPS is in a better place to use resources more effectively to meet need.
- 5.19 The recent Ofsted review highlighted some areas for continued improvement. More Early Health Assessments need to be completed by partners. Some immediate action is being taken with school nurses and health visitors to improve this, but it is recognised that further work needs to be done to support partners. There is a need to ensure social workers are present at all ABE (Achieving Best Evidence interviews) with police colleagues; and action is being taken with police partners to rectify this. The feedback from Ofsted has been accepted and plans developed with partners to address the specific issues identified.
- 5.20 Rotherham's recently commissioned Youth Justice Board Peer Review of the YOT Board's Leadership and Governance highlighted some good examples of a strong and supportive partnership.

The peer reviewers' final report stated;

“Rotherham YOT is performing well in relation to reducing reoffending and the use of custody and based on what partners told us it is well regarded and not seen as a service requiring significant remedial attention. Given the serious challenges facing the Council and its partners there was a risk that youth justice would not attract sufficient attention and be left to its own devices. However, we did not find that to be the case and were impressed with the focus that partners in Rotherham had placed on the service and the local youth justice system despite other very pressing priorities.”

Priorities for improving children's outcomes have now been agreed with all partners and are included in a new Children and Young People's Plan (Annex 5).

Medium Term Financial Strategy

- 5.21 As part of Rotherham's ambition to be a Child-Centred Borough, sustained investments have been made to secure a vibrant, healthy and productive future for Rotherham people for generations to come. A robust financial plan with strong governance is inextricably linked with an effective sustainable Children and Young People's Service.
- 5.22 The robustness of the budget proposals within the Strategy have been subject to comprehensive review completed by the Practice Partner for Children's Improvement (Lincolnshire County Council). The proposals seek to address the growing numbers of Looked after Children and the change in the proportion of placement settings in favour of in-house foster care. The investments focus on key areas of practice which will manage social care demand in the longer term. There is also additional investment in staff to ensure that assessments are timely and caseloads remain at a manageable level as well as a focus on workforce development and practice improvement.
- 5.23 The Council has increased its investment in CYPS by £21.9m over the last three years. The budget for 2017/18 now agreed by Council reflects this level of investment and sets the level of funding support for children's services in line with the CYPS Sustainability Strategy.
- 5.24 The CYPS Sustainability Strategy was presented to Cabinet on 14th November 2016, and ratified at Council on 7th December. It seeks to address the budget gap over a five year period to 2020/21 through a mixture of immediate funding support and investment linked to medium and longer term sustainable savings. The budget proposals for CYPS will start to deliver savings in 2017/18 and, over the medium term, will reduce expenditure whilst continuing to protect the most vulnerable in society.

Implications of the Improvement Journey for Alternative Management Arrangements

- 5.25 The council is on an ambitious journey of improvement which is underpinned by a transformation strategy. All areas for improvement above are captured within the dynamic children improvement plan, which is overseen by the Children Improvement Board, chaired by the Practice Partner. Ofsted's recent findings that, "*Workforce planning is highly effective. Recruitment and retention rates are better than the national average. Due to a positive organisational culture staff are highly committed and motivated and they report feeling valued*" means that the conditions are now in place to secure continuous improvement.
- 5.26 A non-negotiable for the Council is to disrupt or negatively impact on the progress of the Improvement journey. The preferred AMA must build on the progress made to date; increase the pace of improvement in areas requiring additional focus, particularly social work practice within LAC.

6 Isos Workshops - improvements in children's services

- 6.1 As part of the review, the Isos Partnership (Isos), working with the Local Government Association (LGA), was invited to provide independent support by drawing on their recent LGA-commissioned research. The research focuses on the enablers and barriers of improvement in local children's services, and on models of external improvement support. Isos facilitated two workshops for members of the Improving Lives Select Commission, senior RMBC leaders and officers, Children's Social Care Commissioner, Peer Practice Partner and partners in Rotherham's improvement journey.

Workshop 1

- 6.2 The first workshop focused on sharing and exploring the findings from the research conducted by Isos in order to inform members' evidence-gathering work from other local areas. It explored the in-depth action research which was conducted across a sample of authorities and stakeholders (with a range of different delivery models and Ofsted ratings). The research describes the kind of improvement activities required to progress from "poor" to "great"⁵ (LGA/Isos (a), 2016, pp. 13-21).
- 6.3 The research from Isos broadly reflected the initial stages of the improvement journey undertaken by Rotherham since intervention in September 2014. The first stage of the improvement process from "poor to fair" focused on 'getting the basics' rights; that

⁵ The research purposely avoided the Ofsted categorisation scale of inadequate to outstanding, instead describing the elements of improvement from poor to fair, to good and to great.

systems and controls are in place, practice is consistent and caseloads are manageable. The second stage of the improvement journey focuses on embedding improvements. The third stage of the journey from “good to great”, reflects further consolidation of culture, practice and management of risk, signalling a shift from improvements being seen as discrete to these activities being seen as the norm.

6.4 The research explored with Councils the key factors underpinning their improvements (what are described as “enablers”). These were used in workshop 2 as a basis for the self-assessment. The enablers were as follows:

- Strategic approach;
- Leadership and governance;
- Engaging and supporting the workforce;
- Engaging partners;
- Building the support apparatus;
- Fostering innovation; and
- Judicious use of resources.

To summarise, the first four enablers focus on the importance of ensuring that key people and organisations were ‘bought’ into the improvement strategy; and this support was reflected in the organisational culture and behaviours of the workforce, partners and political and managerial leadership. Once this has been established, there can be a greater emphasis on high quality social care; further workforce development and maintaining focus on process, quality and outcomes; whilst ensuring that resources and innovations are used to enhance and sustain improvements (LGA/Isos (a), 2016, pp. 8-9).

Workshop 2

6.5 The second workshop focused on drawing together the evidence from Rotherham around two key questions:

- **Where is Rotherham currently on its improvement journey?** What has been achieved, what is the evidence?
- **What are the priorities for the next stage of Rotherham’s improvement journey?** Are conditions in place for further, sustained improvement? What support is needed?

6.6 The workshop drew upon the LGA action research and background evidence to build a shared picture of Rotherham’s improvement journey and establish which model would secure the quickest and most sustainable improvement. Participants were asked to

provide evidence and score where they placed Rotherham’s current position on its improvement journey against the seven key enablers. A small group of Councillors from the review group, officers with Commissioner Bradwell and practice partner lead Debbie Barnes took part in the workshop, bringing a range of views from different professional and lay perspectives.

6.7 Using the “enablers” outlined in paragraph 6.4, workshop participants were asked to ‘plot’ where they judged Rotherham to be on its current improvement journey. As can be seen by Figure 1 (below), the majority of participants judged Rotherham’s position to be in the “fair to good” category.

Figure 1: *Rotherham’s improvement journey: self-assessment exercise, using the framework from LGA action research*



6.8 The evidence underpinning the assertion of “fair to good” is based on the outcomes from the workshop **and** an overview of external reports and feedback. Together these have been used to validate and provide assurance of the progress and improvements that have been made in Rotherham’s children’s services.

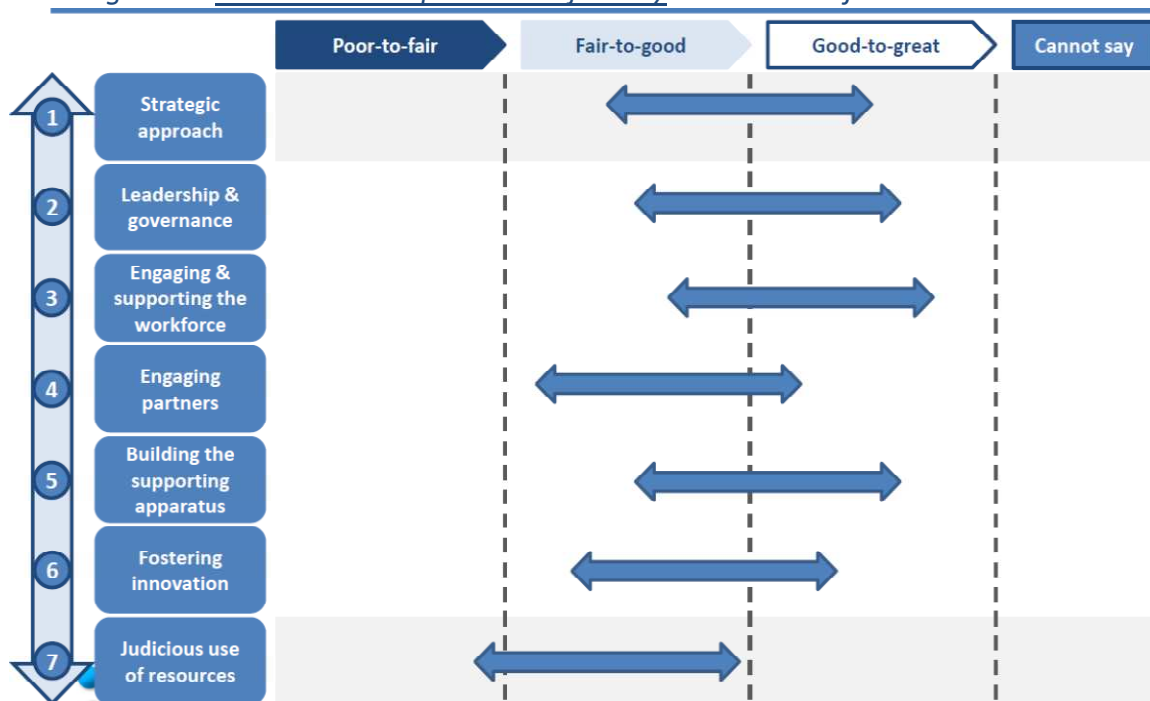
CYPS Directorate Management Team Self-Assessment

6.9 This exercise was also undertaken by CYPS’ Directorate Leadership Team (DLT) – see Figure 2 (below). Using independent evidence sources, the professional practitioners based their assessment on in-depth and specific information from monitoring visits, peer reviews, reports to the Improvement Board and current performance data sets. These data sources have been subject to external validation.

6.10 There is a good level of correlation of evidence between the Workshop and DLT’s self-assessment to support the view of Rotherham improvement journey. These triangulate

with the findings from Ofsted visits and peer reviews as detailed Section 5, which highlight strength and areas for further improvement.

Figure 2⁶: Rotherham’s improvement journey: CYPS DLT self-assessment exercise



6.11 DLT’s self-assessment against the ‘key enablers’ is summarised in Table 2 (below) and is set out next to the commentary from Workshop 2.

Table 2: Isos framework – self-assessment of evidence against “enablers” of improvement

	Comments from Isos Workshop 2	Comments from DLT
Strategic approach	There is a clear, strategic plan for improvement and clarity about “what good looks like”. The data shows a pattern of improvement and compliance with key performance measures. Core “mission-critical” services are now safe. This picture is supported by Ofsted monitoring reports and feedback from external practice partners. The focus now is on increasing the quality of practice, and ensuring members are kept aware of improvements	Performance Management highly effective, HMI/Peer Reviews highlight effectiveness. Senior leader and team demonstrate high expectations and are focused on strategic development of the service. Cycle of improvement in place with developing trends of consistency across all areas of service. Improvement – Embed across the service
Leadership and governance	There is now strong, experienced, credible and stable leadership, both corporately and within children’s services. Heads of Service report feeling empowered and comment positively on the difference over the last twelve months. There is not yet a full	Robust and challenging governance in place. Evidence in internal and external judgements / practice. Middle leaders well engaged with improvement developing. Improvement – Embed across the

⁶ Rather than a series of dots, the responses are represented by an arrow across the range of views.

	Comments from Isos Workshop 2	Comments from DLT
	<p>complement of team managers in place.</p> <p>Members are rightly challenging for evidence of improvement, and are keen to triangulate this through more regular frontline visits.</p>	service
Engaging and supporting the workforce	<p>The workforce is increasingly stable, as shown by benchmarking data and supported by the findings from Ofsted monitoring visits and peer review. A unifying model of social work practice and new practical tools have been rolled out, and staff say (including to Ofsted) that they understand this has been done to support their work. Positive feedback from new recruits suggests Rotherham is increasingly seen as an employer of choice.</p>	<p>Stable workforce across the directorate – continues to be evident. Ofsted/Peer outcomes demonstrate improvements, national interest in the practice being developed and embedded in Rotherham. Staff surveys are positive regarding support, induction and development. Evidence of Rotherham as an employer of choice.</p> <p>Improvement – Embed across the service and further develop the Workforce programme for the service</p>
Engaging partners	<p>Stronger partnerships at a strategic level, but not always matched at an operational level. Multi-agency audits are taking place, but a more systematic and embedded approach is needed. There have been successes in building better partnerships with schools around SEND, and with the VCS. Would welcome greater challenge from partners, but requires trust and confidence to be built. There is recognition this is an incremental process.</p>	<p>Key partner agencies involved in CYP Partnership with a new plan. Steering groups across CYPS areas well established, good support from key agencies. Evidence of key agencies held to account and also key agencies holding CYPS to account. Evidence in the work of the improvement board.</p> <p>Improvement – information sharing, developing, consistency of practice and further engagement with partners</p>
Building the support apparatus	<p>There is pride in an effective management information and data system, which produces accessible dashboards of benchmarked performance data. These are being used with team managers, with support to help them use data to inform decision-making. Data are being used to inform conversations about children and outcomes, not just numbers. There is further to go, however, to see the impact on outcomes and embed the voice of the child</p>	<p>Management information used effectively. Evidence from Ofsted/HMI/Peer challenge, internal, monitoring. Data used well across CYPS with middle managers and external bodies. Data used in planning.</p> <p>Improvement – Embed across the service</p>
Fostering innovation	<p>Innovation, in the sense of being open to new approaches and seeking to embed effective ideas in practice, is championed by children's services leadership and supported by the Council (e.g. investment in new initiatives, participating in the Pause pilot, new approaches around recruitment). In time, the aim is for practitioners to be more</p>	<p>Service open to innovation outward looking and using best practices to inform development i.e. signs of safety. Innovation being integrated into the day to day practice across the service. Evidenced by peer challenge/HMI. Innovation projects moving beyond CYPS, e.g. recruitment and retention activity.</p>

	Comments from Isos Workshop 2	Comments from DLT
	innovative, but this comes with a level of risk and will need to be managed carefully.	Improvement – Embed across the service and continue to identify good and outstanding practice
Judicious use of resources	There has been considerable investment in supporting children’s services improvement. There is now a realistic base budget, which has been used to set robust financial plans for next three years. This provides security for children’s services improvement, but will also allow political and corporate leaders to track and monitor the impact and progress of these investments. Members are rightly keen to hold officers to these plans.	Evidence for resourcing being based on effective planning and benchmarking. Investments and research being made to improve long term development of service. Good practice and expertise increasingly used across CYPS. Improvement – Embed good plan across all areas

Conclusions from the workshop:

6.12 On the basis of the discussions, and evidence from other visits, the review concluded that regardless of how Rotherham’s children’s services are configured; the principles underpinning its model of delivery should be as follows:

- **Be in the best interests of children in Rotherham**—the right future arrangements must be those that provide the best platform for sustaining improvement services that support children and keep them safe
- **Work *with* people, rather than doing *to* them**—particularly by engaging RMBC staff and key strategic partner agencies
- **Maintain strong oversight of children’s services by elected members**— that all Councillors, including the Lead Member, continue to exercise their corporate parenting and scrutiny roles (and in case of lead member statutory responsibilities) to secure the best outcomes for children and young people in Rotherham
- **Maintain links with other local services and strategies that contribute to young people’s development and long-term outcomes** —particularly the links with housing, economic growth and jobs and skills
- **Be sustainable** —the right future arrangements must be those that offer a sustainable long-term basis for delivering high-quality children’s services
- **Involve robust external scrutiny**— this will remain an important part of Rotherham’s ongoing improvement journey, and should be embraced as an opportunity to track progress and address barriers
- **Maintain the integration of services**— avoid creating barriers at key service

interfaces, such as between early help and social care, or with education services.

6.13 These principles have been used to inform the options appraisals outlined in Section 8 (and attached in Annex 1).

6.14 The workshop set out priorities (improving the quality of practice, strengthening partnerships), seven core principles (see paragraph 6.12), and specific actions around strengthening self-assessment and challenge (the voice of the child, enabling members to triangulate evidence through thematic frontline visits) to inform the review's considerations.

6.15 One of the key messages emphasised in the workshop was that two years into the children's services improvement journey, whatever options are considered in the future must not destabilise what has been put in place over the past two years. Although it is accepted that once consistent front-line practice is in place, different options, collaboration or commissioning models will be actively considered, underpinned by strong managerial oversight.

6.16 Having visited other councils, the numbers of alternative delivery models are small, many are in their early stages, and therefore there is not a firm and broad evidence-base regarding their progress. A key finding from the Isos research is that alternative management models *can* play a role in helping to overcome persistent and systemic barriers and to create the conditions for sustained improvement to take place. However, these benefits are not exclusive to alternative delivery models – rather, in certain circumstances, they have helped to overcome barriers that the local area had not been able to previously.

6.17 In considering whether Rotherham had the innate ability to make sustained improvement, we looked at the following factors:

- Capacity to self-assess accurately;
- Capacity to develop strategic priorities that will address weaknesses; and
- Capacity to implement these strategic priorities swiftly and effectively.

The evidence to support these factors are summarised as follows:

- **Routine self-assessments are embedded** – growing culture of reflection and challenge, is now systematic.
- **There is a high level of congruence between internal self-assessment and external feedback** – peer reviews, practice partner reviews, Commissioner reports, Ofsted monitoring visits. Clarity about what is being invested in

improvements, and how this is working.

- **Members are asking probing questions of children’s services** – this is positive and important. Equally important is the willingness of members to triangulate with feedback gathered from thematic frontline visits.
- **Continued outward-facing engagements** – Rotherham has not “hunkered down”, but has remained open to others.
- **Significant (“heroic”) investments for a council of its size** – long-term financial plans, but also monitoring arrangements to take account of changing circumstances.
- **Strong alignment of Council and children’s services priorities** – the Council has embraced the “seven tests”, and there is clarity about how Council plans, financial plans and children’s services plans fit together in the long term.

6.18 The independent methodology developed by Isos sets out a framework which considers the three forms of improvement support which is outlined in Figure 3 below:

Figure 3: A framework for considering the three forms of children’s services improvement support (LGA/Isos (b), 2017, p. 6)

A framework for considering the three forms of children’s services improvement support			
Type of support	Potential benefits	Key success factors	Circumstances when it is likely to be effective
Sector-led improvement	<p>Can build capacity – working alongside those who have done the job.</p> <p>Both rigorous and developmental – challenging, but can create space to improve, less public, high-stakes.</p> <p>Can help to avoid insularity – avoid the risk of “believing your own narrative”.</p>	<p>Rigour – whether formal (rigorous challenge) or informal (project focus).</p> <p>Quality and credibility – must bring practical expertise, gain trust.</p> <p>Flexible and tailored – must be grounded in context of that local area, at the right time and with right people.</p>	<p>Start of an improvement journey – to give (new) leaders a baseline.</p> <p>During the journey (perhaps between inspections) – to test, are we on track?</p> <p>To draw on additional expertise or capacity – in a specific area of practice.</p>
External scrutiny & formal intervention	<p>Can create robust governance – brings focus, shape improvement journey.</p> <p>Can bring partners together – creates impetus and can facilitate partnership.</p> <p>Can mediate between key players – “honest broker” between national and local partners.</p>	<p>Independence – of the person / body providing external scrutiny.</p> <p>Strategic focus – if not, can become bogged down, critical and defensive.</p> <p>Triangulation – able to triangulate reports with evidence from frontline. ... and the basics of good governance.</p>	<p>Where there is the right children’s services leadership capacity, but one of two things may be missing:</p> <ol style="list-style-type: none"> 1. “grip” on one key area of practice – “taken their eye off the ball”; or 2. effective governance – political, corporate and/or partnership.
Alternative delivery models	<p>Fresh start, re-focus improvement journey – getting to good, not running away from inadequate. Able to stabilise leadership, workforce.</p> <p>Speed and focus – of decision-making, sole focus on creating environment conducive to strong children’s services.</p>	<p>Informed design – clear aims re: how will support improvement journey.</p> <p>Clarity relationship with council and partners – governance, other services.</p> <p>All other enablers of improvement – an alternative model can enable, but will not on its own drive, improvement.</p>	<p>Where issues are systemic, deep-rooted and/or persistent ... and where leadership “grip” is lacking in three areas – capacity to:</p> <ol style="list-style-type: none"> 1. diagnose weaknesses accurately; 2. develop strategy to address them; & 3. implement the strategy effectively.

6.19 It sets out the circumstances in which each type of support would be most effective. Using this model, recognising the distance travelled by CYPS whilst acknowledging the there is still much to be done on its improvement journey, the review concluded that “external scrutiny and formal intervention” would provide the platform for further improvement. Its rationale for this is that CYPS has the stable leadership which can identify, initiate and embed an effective approach to improvement. For this reason, at

this stage based on the independent research and evaluation, the review felt that continued support from the Commissioner and Practice Partner would provide the most effective arrangements to secure sustainable improvements in children's services although once consistent practice is established, it is open to considering other options including collaboration or further commissioning opportunities.

7 Themes emerging from visits

7.1 A series of fact-findings visits and conversations were organised by members in early 2017. This built on a number of visits organised by the Chief Executive in the summer of 2016. The findings from their enquiries are themed as follows:

- Impact on improving social care;
- Accountability and Corporate Governance;
- Economies of Scale;
- Finances and Budget;
- Speed of improvement.

Each visit/discussion took place with the respective Chief Executive or Director of Children's Service (DCS) (plus other relevant senior officers) and when available, Lead Member (or Leader). The programme of visits is outlined in Annex 2.

Impact on improving social care

7.2 Particular structures or delivery models – whether in-house or externally provided – do not alone drive improvement within children's social care services. What is fundamental to improvement and recovery from failure is strong, focused leadership and management that can: first, get to grips with performance and associated quantitative data to demonstrate the "health" of the service overall; and, second, when this "quantitative grip" on performance is in place, focus on the quality of service responses, more effective demand management, and move towards a culture of continuous improvement that embraces service transformation.

7.3 A further critical component to successful improvement, across all discussions held, was the need for stability in management, vision and commitment. Fluctuations and uncertainty around any new delivery model was seen to put the service and outcomes at risk. There is evidence that adopting new structures can cause instability in staffing arrangements; which in turn can adversely affect performance.

7.4 Alternative delivery models – such as Children's Trusts, external Community Interest Companies, or shared service approaches with other boroughs - can, however, inspire a positive, fresh start for councils in their drive for improvement following service failure.

Specifically, they can instigate a critical change in senior leadership, where this has previously been lacking, which can positively drive-up standards by inspirational leadership, focusing on ‘what good looks like’, driving-out poorly performing managers and bad professional practice. By the same token, some authorities that had retained their children’s services (with external support such as Improvement Boards), had been able to take decisive action to change leadership and improve practice without a radical change of structure.

- 7.5 Some saw alternative models as providing greater opportunities for innovation and organisational agility – however, evidence of innovatory practice, collaboration and agile working were also seen in local authority controlled children’s services where there was the will and flexibility to make this happen.
- 7.6 In general, there were greater risks perceived to achieving sustainable service improvement and better outcomes for children a result of “imposed” new delivery models. Where local areas work collaboratively with the DfE, practice partners or other support, greater control and focus can be sustained on the needs of the services and the needs of young people.

Accountability and Corporate Governance

- 7.7 Political leaders have a “*crucial role in catalysing a speedy and effective response to serious weaknesses and have a vital role in driving and sustaining improvement*” (LGA/Isos (a), 2016, p. 6). This was evident in a number of the visits where the Leader and Lead Member took an active role in overseeing improvement and transformation. It was acknowledged that in alternative models, the relationship between the lead member; overview and scrutiny and the governance arm of the delivery model, was often more complex.
- 7.8 Externalised models of delivery can create inevitable tensions between the corporate role of a DCS in the organisation– i.e. contributing to all council priorities (particularly in the RMBC context of its “Child Centred Borough” ambitions) - and the need to demonstrate appropriate levels of independence from the Council. There is a risk that in alternative models Children’s Social Care can become more entrenched, not engaging with wider priorities and links between children’s services and the wider corporate, political and partnership landscape and the needs of the borough. This can impact on service issues ranging from transition from Children’s to Adult Social Care; to the need for education and skills considerations being linked to wider economic growth policy (e.g. birth to adulthood strategies). In particular, a strategic disconnect between

children and young people-focused services in a borough can undermine early intervention and preventative approaches, which are critical to long term service efficient and transformation in local government and the wider public sector.

- 7.9 The complex nature of children's services means that local authorities cannot deliver high quality services without input from other agencies and partners. Without exception each of the areas cited the importance of working with partners, although each recognised the difficulties of building and maintaining good relationships. However, without the apparatus of local strategic partnerships (and all key partners attending), the ability to 'unblock' difficult issues may be impeded.

Economies of Scale

- 7.10 A clear driver for some voluntary alternative models has been to generate economies of scale, and reduce costs. For this to work well there is a view that there is a need for a high-performing partner to be part of the arrangements – i.e. pairing together two struggling or failing authorities, solely in the interests of economies of scale, would not be a recommended strategy. To do this effectively, the view is also that sharing needs to be with near neighbours and in areas of common/compatible cultural identity. Shared approaches across wider, unconnected geographical areas are not regarded as viable prospects.
- 7.11 On a positive front, where sharing and collaboration is seen as a viable prospect, there is a view that joining forces can improve the desirability of social work roles, providing social workers more varied and exciting experiences, across different boroughs and contexts, which supports job satisfaction, worker retention and morale.

Finances and Budget

- 7.12 In all cases, it is clear that responding to service failure requires significant investment – the Rotherham situation is repeated elsewhere in this regard, particularly where there have been many years of inadequate practice and the *inadequate* judgement is deep-seated.
- 7.13 Councils need to move rapidly on to focusing on demand management as soon as they have their 'house in order' – again, instability in structures can impact on this. A decision to externalise the delivery model for children's social care can in some instances provide a crucial catalyst towards generating a more modern, renewed focus on service transformation and demand management, away from more traditional, local authority models.

Speed of improvement

7.14 Regardless of the model, improvement took time to embed. Broadly speaking, it was estimated that initial improvements to establish a baseline of the organisation's capacity and competency and stabilise the service and practice may take up to a year. Following this, it was reported that it had taken between a further two and six years to embed quality, consistency; provide systems wide leadership (these improvements are not 'linear' and progress may be stalled and reassessed). This echoes the findings of the Isos research which charted the improvement from "poor to fair" to "good to great" and the time taken to sustain improvements (LGA/Isos (a), 2016, p. 19).

Specific Issues for Rotherham arising from visits

7.15 Addressing corporate, organisation-wide failure has been a key priority of the Council for over two years. The findings from the Corporate Governance Inspection by Dame Louise Casey were accepted and the Council has demonstrated significant improvement with only six services remaining under the decision making control of Commissioners.

7.16 A complete and stabilised senior management cohort has been established within CYPS and is now bedding in. There are, therefore, risks posed by further change in this as a result of a new model. Furthermore, the future council-wide improvement at the council is being embedded by a new Strategic Leadership Team, fully in place since August 2016. Again, new instability as a result of a new model for children's social care could pose particular risks in the Rotherham context.

7.17 There is also the critical role of the Lead Member in the Rotherham context, who is also the Council's Deputy Leader. The Deputy Leader and DCS are demonstrating effective leadership which is subject to review by the Children's Social Care Commissioner. Alternative models could, potentially, create additional issues between these key relationships and would need to be given particular attention.

7.18 Inevitably, externalised models of delivery can create tensions between the corporate role in the organisation of a DCS – i.e. contributing to all council priorities (particularly in the RMBC context of its "Child Centred Borough" ambitions) - and the need to demonstrate appropriate levels of independence from the Council.

Scrutiny work programme

7.19 There are a number of issues arising from visits/conversations that will be included in the scrutiny work programme for 2017/18, demonstrating the value of this work and the commitment of members to Rotherham's improvement journey. In particular, the review

group were keen to explore how corporate parenting responsibilities could be strengthened further for elected members and across the wider council and this will be the focus on an in-depth review in the forthcoming municipal year. Regular visits to frontline staff, voluntary sector providers and service users will be scheduled throughout the year in order for members to validate evidence of performance and improvement.

8 Alternative Management Arrangements: Summary Options Appraisal

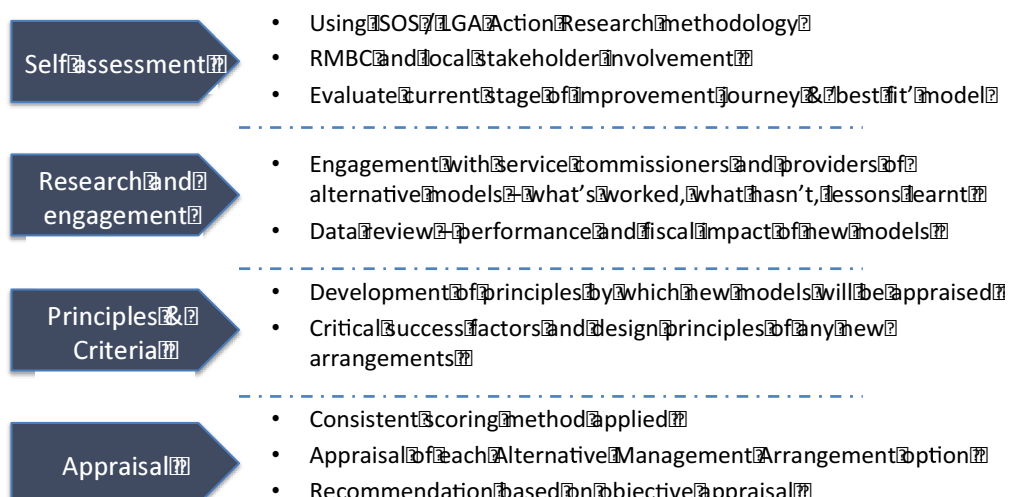
Introduction

- 8.1 This options appraisal presents the latest analysis and current thinking on the range of Alternative Management Arrangements for CYPS. It evaluates the relative strengths and challenges of the primary options available to the Council. The paper then provides initial recommendations for future management arrangements.
- 8.2 It is recognised that the different delivery models and management arrangements across the country are in various stages of development and the Council will continue to receive further evidence both now and in the future regarding models and ways of working that have the greatest impact on keeping children safe from harm.

Methodology

- 8.3 The Council has adopted a structured approach to appraising the range of children's services management arrangements available. The Council's approach has been designed to ensure that a wide range of potentially appropriate options have been considered; that research and evidence from other localities in different stages of the improvement journey have been included; and that a range of stakeholder perspectives (providers, strategic partners and staff) have been factored into the options appraisal process.
- 8.4 The Council has undertaken the following structured process:

Options Appraisal Process



Evaluation criteria

8.5 The evaluation criteria used to appraise each option has been developed in Rotherham by Members, staff and local stakeholders. The criteria, which reflect the key operating and design principles that should underpin any new model, have been categorised into eight themes, described below.

Table 3: Evaluation Criteria for Options Appraisal

Criteria	Description – What should the Option offer?
1. Child Focused	<ul style="list-style-type: none"> Be in the best interests of children in Rotherham Provide the best platform for sustaining improvement in services that support children and keep them safe Enable robust and accountable leadership and management whilst ensuring flexibility and agility to achieve the best outcomes for children Provide leadership and management autonomy for decision making and accountability for the outcomes of children in Rotherham
2. Partnerships	<ul style="list-style-type: none"> Facilitates strong partnership working with local partners and stakeholders, particularly South Yorkshire Police and PCC, schools and health services Avoid, as far as is possible, disruption to partnership arrangements that have been strengthened as part of the improvement journey
3. Commissioning	<ul style="list-style-type: none"> Ensure the right intervention is available at the right time (and right cost) to meet the needs of Rotherham's children Secure the best available provision in the market Adopt a collaborative model that is provider neutral, capturing the best of the public, private and voluntary sector provision Promote local voluntary sector and SME engagement
4. Political oversight	<ul style="list-style-type: none"> All Councillors, including the Lead Member, continue to exercise their corporate parenting and scrutiny roles

and governance arrangements	<ul style="list-style-type: none"> • Maximise transparency and accountability • Retain responsibility for securing the best outcomes for children and the performance of children’s services in Rotherham • Maintain appropriate external scrutiny, tracking progress, addressing challenges, shared problem solving
5. Financial viability and sustainability	<ul style="list-style-type: none"> • Provide a sustainable, long term platform for high quality children’s services in Rotherham • Avoid significant and avoidable detrimental costs, for example, the treatment of VAT • Avoid protracted and complex negotiations that may be a distraction from the improvement journey (e.g. treatment of overhead/recharge)
6. Workforce	<ul style="list-style-type: none"> • Builds on the progress made in recruitment and retention • Ensure that quality staff are attracted to and stay in Rotherham • Facilitate ongoing investment in the development of CYPS staff • Engage staff throughout the improvement journey
7. Integration	<ul style="list-style-type: none"> • Avoid creating barriers at key service interfaces e.g. early help and social care • Ensure education and social care are integrated and seamless • Ensure that CYPS play a part in the wider goals of the Council - economic growth, affordable housing, promoting jobs and skills
8. Risk	<ul style="list-style-type: none"> • Be deliverable and within reasonable timescales • Avoid high costs of transition – both fiscal and management attention that may distract from the improvement journey • Avoid introducing additional significant risk to the delivery of the improvement journey • Be evidence based – a tried and tested model.

Specific considerations

8.6 There are a number of areas that whilst included within the Criteria and explored within the Options Appraisal are worthy of some further exploration here namely:

- a) how the Council continues to discharge its statutory responsibilities particularly line of sight on performance and quality;
- b) the operational impact of a separation between services;
- c) the role a good corporate Council contributes to a Children’s Services and how this would need to be maintained.

Statutory responsibilities, performance and quality.

8.7 In **any** new model, the Council would retain its role in discharging its statutory duties⁷ and these would need to be clearly articulated within a Memorandum of Understanding

⁷ The Director and Lead Members of Children’s Services are appointed for the purposes of discharging the education and children’s social services functions of the local authority. The functions for which they are responsible are set out in section 18(2) of the Children Act 2004. This includes (but is not limited to) responsibility for children and young people receiving education or children’s social care services in their area and all children looked after by the local authority or in custody (regardless of where they are placed).

(MoU) and Service Contract with the DfE and the Trust. From the site visits, Doncaster, has agreed that whilst the Trust is accountable to the Secretary of State via its Trust Board Chair, the Council acts as the local commissioner with the responsibility for the contract management. This has recognised that the Trust and the Council have a wider relationship as providers of services within a whole system partnership and that the statutory functions of the Director of Children's Services (DCS) and Lead Member are required to be retained within the Council. DMBC remains ultimately accountable for the children's social care functions that have been assigned to the Trust through a Statutory Direction from the Secretary of State.

8.8 This model has been replicated in Slough. Under Direction from the Secretary of State, Slough Borough Council contracts with the Trust to deliver agreed services on its behalf. The Services Contract will stay in place for the duration of the Statutory Direction. The Council will remain statutorily responsible and accountable for the exercise of its children's social care functions under section 497A(4) of the Education Act 1996. This model suggests:

- Monitoring, evaluation and reporting requirements between the Council and any AMA model would need to be set out within a Service Contract to ensure line of sight on performance and quality and this would need to be subject to formal agreement between the parties and the DfE.
- In Doncaster for example, the contract between the Council and the Trust sets out arrangements for quarterly performance monitoring (QPM) meetings which are supported by a suite of performance indicators, and an annual review meeting. In addition, the DCS is required to report six-monthly to the Scrutiny Committee on the performance of the Trust.
- A series of informal meetings underpin these arrangements, for example monthly 'finance to finance' meetings, meetings between the Chief Executive and the DCS, Trust Directors and Assistant Directors in the Council and meetings with the Lead Member. The Trust Chair meets regularly with the Chief Executive of the Council, and these meetings also involve the DCS and the Trust Chief Executive.

8.9 The specific considerations for Rotherham in any AMA are:

- To recognise the importance of clarity within the MoU and Service Contract, articulating the specific roles and responsibilities of each party in terms of statutory duties;
- To retain corporate statutory roles (e.g. a DCS) within the Council, alongside

commissioning and contract management/performance monitoring arrangements, with the cost and complexity this may create;

- The development and agreement of a performance management/monitoring framework and sufficient resource/capability to interrogate and act on the analysis
- Clarity on the role of the Council's Scrutiny function and the particular requirements on the AMA to report regularly in an open and transparent manner;
- The strength and robustness of performance monitoring system(s) to produce timely management information or the set up costs of establishing these.

The operational impact of the separation of services

8.10 There are risks in separating children's social work and other services (both in children's services and wider council services) hence the criteria regarding integration. Evidence from Doncaster suggests that this is a real risk to be assessed and managed in the set-up of any arrangements.

8.11 The Slough Children's Services Trust model is attempting to address this by moving a greater proportion of children's services into the Trust, including the following:

- Early Help, Assessment and Children in Need
- Child Protection and Looked After Children
- Placement and Resources
- Safeguarding and Quality Assurance

8.12 The specific considerations for Rotherham in any AMA are:

- The diligent review of the scope of any AMA in terms of services included and the application of the learning from the current models;
- The consideration of the maturity of the early help offer and in particular the roles of partners (i.e. how resilient would early help be to a change in operating structures);
- Retaining a stable workforce and connections across wider services that contribute to outcomes for children and young people.

The contribution of a good corporate council to Children's Services

8.13 The Council has clearly stated its ambition to be a Child-Centred Borough and has embraced the 7 tests from the Children Services Commissioner which clearly set out the contribution that a 'good' Council contributes to safeguarding children as well as creating the conditions for their future success. This relates to but is not exclusive to corporate parenting, community safety, education, dealing effectively with domestic

abuse, drug/alcohol abuse and mental health.

8.14 The Options Appraisals has a key principle of 'child focused' and any new AMA would need to demonstrate the ability to continue the progress that has been made in developing organisational ownership of a whole family approach to issues that impact upon children and young people.

A particular area of acute focus is the connection between children's and adults services. Learning from the importance of this has been taken from Doncaster's experience.

8.15 The research into other AMAs highlighted the budget and demand challenge in a number of localities that have moved to a different Trust type model. Participants in the research suggested that moving to an AMA does not take away the budget/demand challenge and instead makes it more difficult to respond flexibly, using wider council resources, to meet those challenges.

8.16 The specific considerations for Rotherham in any AMA are:

- Recognising the additional effort required to ensuring continued organisational ownership of a whole family approach.
- Clarifying additional pathways and relationships that maybe required to retain connections between critical services such as Adult Services.
- Consideration to budget/demand challenge and mechanisms to ensure continued prioritisation/flexibility.

Overview of Alternative Management Arrangements options

8.17 Stage one and two of this option appraisal process (self-assessment, research and engagement) has highlighted that there are a wide range of potential Alternative Management Arrangements. Using the learning, evidence and research from these stages we have aggregated the various options in to eight AMAs, categorised under 'Collaborative in house'; 'External vehicle'; and 'Strategic partner' options. It is not an exhaustive list, rather, we have selected AMAs which may offer a realistic prospect of future management arrangements for CYPS in Rotherham.

8.18 In developing this shortlist of AMA options, it should be noted that stakeholders and research targets highlighted the following key themes:

- AMAs are not a silver bullet and a change of structure and/or ownership does not in itself deliver improvements to children's services.

- There is limited but emerging evidence base for a number of AMAs in the children's services context.
- The timing of the adoption of an AMA has in the most part been when the service(s) have experienced Inadequate Ofsted inspection results and are perceived as broken and require a dramatic, catalytic change – to both reform the service, children's outcomes and re-position the service in the eyes of local stakeholders, building public trust.

8.19 The table below provides a summary overview of each option appraised within this paper:

Table 4: Summary Overview of Options

Strategic Option	AMA Option	Description
<p>'Collaborative In House' services – the Council retains control, working with external partners to deliver Children's Services.</p>	<p>1. Appointment of a Peer Practice Partner</p>	<p>Structured external advice and continuous improvement from sector leading experts and local authority peers working in partnership with DfE.</p> <p>Formal and informal arrangements e.g. data sharing, training etc with the Practice Partner, which has been recognised by the DfE for its innovation, quality of practice and children's outcomes.</p> <p>RMBC commissions / delivers all elements of children's services.</p>
	<p>2. Commission by contract</p>	<p>Commissioning parts or the whole service to another entity or entities by contract. The Council would commission services/operations currently provided in house to an external provider.</p>
<p>External Vehicle – creation of a new entity to deliver Children's Services.</p>	<p>3. Wholly owned council limited company – 'Trust' arrangements</p>	<p>A company registered with Companies House, wholly owned by the Council. Children's services that are agreed to be in scope (covering operations, assets and staff) are transferred into the company.</p> <p>Some or all of current CYPS would be transferred into the new entity.</p>
	<p>4. Community Interest Company</p>	<p>Traditional social enterprise model that locks assets and defines a social purpose within the Companies Act 2004.</p> <p>As per 3, services, staff, operations and assets in scope are transferred into the CIC.</p>
	<p>5. Employee owned mutual</p>	<p>An independent business established by a mutual community who have a common interest in the services provided by the mutual.</p>

		As per 3, services, staff, operations and assets in scope are transferred into the mutual.
Strategic Partner – Some or all CYP Service(s) are provided by an existing entity or entities.	6. Managing Agent	A third party selected to manage the services in scope on behalf of the Council, which may include commissioning in house services and external services.
	7. Joint Venture	A Joint Venture (JV) (registered with Companies House and subject to legislation) wholly owned by the Council with one or more parties from the public, private or not for profit sectors. As per 3, services, staff, operations and assets in scope are transferred into the JV.
	8. Shared Service	One or more elements of CYP Services are delivered by another Authority through an SLA, contract or in certain circumstances a JV. This may include a Trust or similar wholly owned local authority vehicle.

Options Appraisal

8.20 The detailed options appraisal, exploring each option against each of the evaluation criteria, is included as Annex 1 to this report.

Each option was appraised against each criteria out of a score of 5:

0 = unsatisfactory, does not meet any of the requirements of the criteria

3 = meets some aspects of the criteria but with risks and concerns

5 = fully meets the requirements of the criteria, no material risks or concerns

Each option is then given a total score and summary appraisal, with a relative ranking provided within the conclusion.

8.21 A summary of the relative strengths / weaknesses of each option and the evaluation score is provided in the table on the following page.

Table 5: Summary Alternative Management Arrangements Options Appraisal

AMA Option	Strengths	Weaknesses	Score
1. Peer Practice Partner	<ul style="list-style-type: none"> Build on peer model in place – knowledge transfer, critical appraisal, challenge and support Build on partnership and integration work Ensures ownership and political oversight Lower cost / risk of transition 	<ul style="list-style-type: none"> Ability to continue to deliver the pace of improvement required internally Positioning of children’s services in the eyes of the public and other stakeholders – sufficiently strong demonstration of progress 	33/40
2. Commission by Contract	<ul style="list-style-type: none"> Ability to commission new interventions / services to meet needs Greater freedom/flexibilities, building on capabilities of providers and the voluntary sector Risk transfer and outcome based commissioning 	<ul style="list-style-type: none"> Fragmentation of services and providers, hindering the whole system approach to improvement Cost and complexity of commissioning multiple providers / programmes > investment in commissioning capacity Control and oversight of quality / performance 	22/40
3. Wholly Owned Company – Trust	<ul style="list-style-type: none"> Freedom and flexibility to drive pace of improvement but within local authority control Emerging practice from other localities Social work centred organisation – core focus. 	<ul style="list-style-type: none"> Cost, complexity and risk of transition (what’s in scope) Impact on partnerships, integration and whole system approach Limited evidence base and financial risks (e.g. tax) 	25/40
4. Community Interest Company	<ul style="list-style-type: none"> As per Trust arrangements but additional community benefit and positioning in the eyes of stakeholders 	<ul style="list-style-type: none"> As per Trust arrangements. 	26/40
5. Mutual	<ul style="list-style-type: none"> Employee engagement and ownership for improvement Innovation, customer service and cost control 	<ul style="list-style-type: none"> Lack of control, political oversight Complexity and cost of transition Untested model at the scale of children’s services Pace of decision making (one member one vote) 	16/40
6. Managing Agent	<ul style="list-style-type: none"> Capacity, capability and resources of external partner – e.g. commissioning; commercial Performance management / monitoring 	<ul style="list-style-type: none"> Complexity and confusion – roles and responsibilities Additional cost layer, particularly management costs Fragmentation – whole system approach 	18/40
7. Joint Venture	<ul style="list-style-type: none"> Leverage partner capacity / capability Knowledge transfer – new approaches Share risk and reward 	<ul style="list-style-type: none"> Identification of the right partner with the right culture Cost, complexity of transition Alignment of priorities Control and influence 	15/40
8. Shared Service	<ul style="list-style-type: none"> Best practice and innovations, knowledge transfer Speed and simplicity of contracting arrangements Efficiency / cost savings 	<ul style="list-style-type: none"> Practical local availability of high quality children’s services Learning whilst establishing shared services arrangements Management focus and commissioning capacity/capability 	24/40

Ongoing performance monitoring and continuous improvement

- 8.22 A consistent theme from local authorities and other stakeholders involved in the research of AMAs was that a change in structure or ownership is not an end in itself in driving improvements in children's services. In particular, the need to establish a wider culture of continuous improvement; openness and candour; constructive challenge; staff ownership for seeking solutions and problem solving; constructive working relationships between members and staff; and seeking external insight and peer review/challenge were all critical in establishing a culture that enabled children's services to be good or outstanding over the long term.
- 8.23 Alongside the cultural aspects of sustained improvement, supporting systems and processes should include robust performance monitoring; peer reviews; transparent performance management; engaged member oversight and effective scrutiny; rigorous inspection and audit arrangements etc – all approaches that are model neutral.
- 8.24 Ensuring that Rotherham has a continued rigorous performance and improvement culture and system is a key part of the improvement plan and is becoming embedded. This will remain of critical importance irrespective of any future ratings (or model). This is particularly relevant given the recent incidences of Council's who were good or outstanding receiving OFSTED judgements of inadequate.

9 Conclusions

- 9.1 These conclusions set out the relative scores, ranking and implications of the options appraisal; the high level themes and considerations emerging; and the recommendations in taking forward the preferred option(s).
- 9.2 The table below ranks each option by the total appraisal score from Table 4 (Summary Alternative Management Arrangements Options Appraisal)

Table 6: Appraisal score

AMA Option	Total Score
1. Practice Partner	33/40
4. Community Interest Company	26/40
3. Wholly owned company	25/40
8. Shared Services	24/40
2. Commission by contract	22/40
6. Managing Agent	18/40
5. Mutual	16/40
7. Joint Venture	15/40

- 9.3 Across each of the options, particular strengths and challenges identified within the evaluation include the following:
- The importance of ongoing external scrutiny, support and challenge in delivering improved children's outcomes in Rotherham.
 - The operational and financial risks of establishing new organisation entities, particularly those involving multiple stakeholders.
 - The risk of disruption to the progress achieved and slowing the pace of progress during transition.
 - The use of alternative models to stimulate change when there is not the recognition or the capability to effect change.
 - The high cost of transition to AMAs, both transaction costs (be that commissioning, set up, tax) as well as management time and focus at the same time as continuing to drive the Improvement programme.
 - The complex set of inter-relationships between CYPS and other Council services and other partners in the borough (particularly the police, PCC, health, schools etc) which could be destabilised by new AMA options.

- The emerging evidence base for the majority of the alternative models within the children's social care landscape.

9.4 The scores and analysis suggests there are three clusters of options. Firstly, there is clear water between the Peer Practice Partner Model and the other options within the options appraisal. The Peer Practice Partner model offered high scores in each response (4 or above) apart from Financial Viability and Sustainability, scoring a 3. The Peer Practice Partner model evaluation highlighted the benefits to the continuation of the Improvement journey; the lower risk in destabilising partner relationships and cross council working; the ability to drive integration of CYPS alongside other Council services and priorities; ongoing and strengthened external appraisal and challenge to CYPS; and the reduction in the costs. Secondly, the Community Interest Company, Shared Services, Wholly Owned Company and Commission by Contract options are clustered with scores from 22-26 out of 40. As the CIC can be established at the same time as the Wholly Owned Company we would treat this as one option (with marginally stronger benefits within the Child Focus score as a result of a stronger community purpose under the CIC option). Within this cluster our analysis suggests there **are two key considerations**.

9.5 The first consideration is A) the cost/benefit of establishing a Trust/CIC:

- Performance would need to be identified as sufficiently poor, and unlikely to improve, to justify the level of identified risks and lack of evidence in the trust model.
- The trust model would need to deliver substantial improvements over and above the Practice Partner Model to justify the disruption to the improvement journey.
- The move to a Trust model could reduce the political ownership and oversight of children's services (and the ownership of a child centred borough). Given the significant improvement in member oversight and scrutiny, any reduction would be a backward step in the improvements achieved so far.

The evaluation suggests, on the current evidence of the improvement programme and evidence from localities that have moved to a trust model that the Peer Practice Partner model presents the right balance of risk/reward, but this is subject to ongoing performance improvements and the strengthening of the evidence base of trust models elsewhere.

9.6 The second consideration, B) is the extent to which the insight, innovation and best practice from third party organisations (be they commissioned or shared) can be

leveraged within the Practice Partner or Trust/CIC arrangements. The evaluation highlighted both the opportunities and challenges of greater third party involvement. The evaluation suggested that a wholesale shift from one model to an externalised model presented too great a risk to progress, whilst acknowledging that these models can deliver innovation/insight. The recently undertaken LGA Peer Review of commissioning capacity/capability in the Council highlighted both the strengths (e.g. Leadership within CYPS) and the challenges in increasing the role of external parties in delivery, particularly the practical commissioning resources needed to increase the pace/scale of commissioned services.

9.7 The final cluster of options which scored the lowest (Joint Venture, Mutual, Managing Agent) within the evaluation offered higher levels of risk over the other options. Whilst the potential benefit of external partners and insight was welcomed, the organization forms presented both high set up costs; commissioning complexity; risk in terms of competing priorities with third parties; availability of good organisations to partner with, potential damage to partner relationships in the borough and the lack of any evidence base for children's social care.

9.8 The evaluation across the options suggests that a number of key themes within the options are not mutually exclusive. In particular, in selecting a Practice Partner model or Trust/CIC arrangements, the Council should continue to:

- Strengthen its commissioning capacity/capability
- Look outwards and capture innovation and best practice from the public, private and not for profit sectors
- Seek independent advice and critical appraisal as part of a cycle of continuous improvement
- Establish shared services arrangements, further integration or collaborations where it makes sense to do so with other partners in Rotherham and neighbouring local authorities
- Strengthen the relationship with, and the role of, the voluntary sector within CYPS.

10 Feedback from Partners

- 10.1 The views of Improvement Board partners and the Police and Crime Commissioner were sought on this preferred option. Each partner supported the continuation of the Practice Partner model and agreed that it likely to secure better and sustainable outcomes for children and young people in Rotherham in the short term.
- 10.2 The majority of respondents commented on the “*considerable*” progress that had been made and the positive changes underway, “*Rotherham is a different town to the one it was two years ago*”. There was an acknowledgment of the positive change in culture, confidence and direction, and how this had been driven by the leadership.
- 10.3 Specific comments from school partners highlighted the improvement in practice, particularly in response to referrals and in the development of the multi-agency safeguarding hub, locality working and Early Help. The partners expressed a view that external challenge from the Practice Partner and peer reviews had made a positive impact and it provided an opportunity to reflect upon and develop practice accordingly.
- 10.4 A detailed response was received from the Chair of the Local Children’s Safeguarding Board. She cites the improvements that have taken place in corporate services (HR and Legal) to support the drives in improvement and how this reflects well on the aspiration to become a Child Centred Borough. She also outlines the improvements in information and how this drives performance, which is moving from compliance to improving quality of delivery.
- 10.5 A school partner acknowledged that there were still areas for development in children’s services, but was reassured that partners were sighted on these areas and robust plans were in place to address them. These arrangements were described as “*heartening*”. Although partnership relationships were viewed positively, it was suggested that there is still progress to be made in developing challenge, trust and consistency at all levels.
- 10.6 The consensus emerging from partners is that the improvement journey requires stability and they were keen that any future model could develop and sustain progress in partnership working across all relevant agencies from early help to child protection. To this end, opportunities for further collaboration or integration, including an exploration of alternative arrangements, could be considered at a future point. However, at the current time it was agreed that a change in delivery model at this stage, may undo some of the improvements that have been achieved, undermine momentum and act as a distraction.

11 Recommendations

11.1 Taken together, both the options appraisal and the independent assessment model (ISOS) suggest that a Practice Partner model would secure the most rapid and sustainable improvements in the short term (two years) and present the lowest risk to the Improvement journey. In particular, the action research and evaluation suggests that the Practice Partner model will:

- Establish the right balance of political ownership, oversight and accountability for CYPS at the same time as rigorous external challenge;
- Enable the good progress being made on the Improvement programme to continue at an accelerated pace with minimal disruption to partners, wider council priorities or management focus; and
- Avoid high transition and operating costs associated with each of the AMAs.

11.2 The Council will continue to work effectively with our Peer Practice Partner, and once assessed as “Requiring Improvement”, we would want to continue with Lincolnshire as a partner in practice given their knowledge and understanding of Rotherham.

11.3 It is the Council’s stated ambition to become a “Good” and then “Outstanding” Children’s Service. There is an ongoing commitment, irrespective of rating, to a rigorous and ongoing peer review model through the regional and national Association of Directors of Children’s Services and the ongoing relationship with the Department for Education. To underpin this activity, there would an appropriate amount of funding be set aside to enable external support from the sector to be drawn in either to undertake reviews or for support. This would be done with the oversight of the Partner in Practice to continue to demonstrate the transparent way the Council now operates

11.4 However, it is acknowledged that the peer practice partner model aids the improvement journey and is by definition temporary. Once there is consistent front line practice, the Council will actively consider other options to work with others knowing that integration, collaboration or further commissioning will be underpinned by strong and robust operational activity and management oversight.

11.5 Whilst continuing with the Practice Partner is the preferred option based on the information, evidence and research available today, this is not a closed decision. The Council remains open to other Alternative Management Arrangements such as establishing a Trust/CIC, including the potential to integrate with another Children’s Trust who is rated as “Good”, if there is evidence in the future that this would secure more rapid and sustainable improvement. .

12 Thanks

Cllr Clark extends her thanks to the following for their generosity in supporting the review:

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- LGA Children’s Improvement Board
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- Cllr Judith Blake, Leader of Leeds City Council and Cllr Lisa Mulherin, Lead Member
- Tom Riordan, Chief Executive, and Steve Walker, DCS, Leeds City Council and colleagues
- Trevor Doughty, DCS, Cornwall Council
- Ade Adetesoye, Deputy Chief Executive, London Borough of Bromley
- Dr Alan Billings, Police and Crime Commissioner, South Yorkshire
- Christine Cassell, Independent Chair of Rotherham Local Children’s Safeguarding Board
- Chief Supt Robert Odell South Yorkshire Police
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- Andy Bowie, 50 Degrees Ltd
- Justin Homer, Former Head of Policy, Improvement & Partnerships, RMBC

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Improving Lives
Scrutiny Select Commission

Review of Alternative Management Arrangements
for Children's Service in Rotherham

April 2017

Table of Annexes

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ANNEX ONE – DETAILED OPTIONS APPRAISAL

Option 1 – Appointment of a Peer Practice Partner

Practice Partners have been selected by the DfE to understand how local authorities get to good and what it takes to move from good to excellent; to interrogate the most important practice questions facing children’s social care; and to drive sector-led peer-to-peer improvement. The Partners in Practice are all demonstrating excellent practice and are committed to innovation and continuous improvement. They have all delivered successful Innovation Programme projects and continue to gather and disseminate learning through the Innovation Programme learning network. They are all also actively driving sector-led improvement, particularly in authorities working to get to good.

The Practice Partners include a number of authorities that the Council has engaged as part of its research for this options appraisal (including Achieving for Children; Leeds City Council) and the Council’s ongoing work with Lincolnshire County Council as part of its Improvement programme. This option would involve formally appointing a Practice Partner to support Rotherham continue to deliver its Improvement programme, sharing innovation; insight; best practice; critical appraisal; and practical support on key functional areas to improve Children’s Services.

Criteria	Evaluation	Score
1. Child Focused	<ul style="list-style-type: none"> + Selection of advisers and experts who can support the council to focus on Children’s outcomes, operating at a strategic level to support and challenge RMBC’s improvement journey. + Ability to leverage practice specific advice, best practice and innovation from partner authorities / experts to improve the pace of improvement. + Build on the progress made towards improving Children’s outcomes (as evidenced by Ofsted monitoring visits letters; peer reviews (ADCS) and the Commissioner’s reports to Secretary of State). + Strategies have been established, together with partners, to improve Children’s outcomes and make Rotherham a child friendly borough. For example, Rotherham’s Children and Young People’s Plan 2016-2019. By retaining control of Children’s Services, the Council would ensure that all services are focused on Rotherham being a child centred borough, not only the remit of Children’s Services. + Maintains corporate parenting role and ensures Member and senior officer ownership and accountability for children’s outcomes in the borough. + Facilitates an integrated approach across education, early help and social care services to improve children’s outcomes (see Integration below). • Contingent on ongoing improvement against agreed milestones and improved practice particularly within the quality of social work in the LAC service and strengthened management stability. 	4

2. Partnerships	<ul style="list-style-type: none"> + The Practice Partner model will build on the good progress made in engaging partners in the Improvement journey, with a lack of disruption in terms of new organisation identify / structures, particularly recognising the increasing engagement required of partners to play their part in the delivery of the Improvement Plan. + External advisers will bring external challenge to ensure partners are playing their part in the Improvement journey – sharing lessons and insight from other localities and best practice models + Partner engagement and involvement has been a particular focus of the Improvement programme, particularly schools, health services and the Police. Feedback has highlighted the importance of sustained engagement at a strategic and operational level to maintain improvement. • Contingent on ongoing leadership from Children’s Services management team to prioritise local partnership work alongside internal service improvements. 	5
3. Commissioning	<ul style="list-style-type: none"> + The Practice Partner model will provide ongoing support and challenge to ensure that Children’s Services are leveraging the best available provision, interventions and services available in the market. + The Council has proactively commissioned a peer review on its commissioning approach and identified ways in which it can improve its commissioning capacity and capability, including Children’s Services (see option 2). + The Council would not need to invest in additional commissioning or procurement costs to deliver this option, but strengthen its commissioning capacity/capability to drive the quality and performance of services commissioned. 	4
4. Political oversight and governance arrangements	<ul style="list-style-type: none"> + Rotherham has invested heavily in engaging new Members and involving Members in Children’s Services, the Council’s corporate parenting role and alternative management arrangements. + The peer practice partner model will mean that political ownership and oversight is retained by Members, the Lead Member and Leader, alongside additional external peer challenge. + The Council’s strengthened internal governance arrangements, including partner involvement in the Improvement process, would remain – strong governance is a pre-requisite of the Practice Partner model to succeed. + The peer practice partner model creates additional independent scrutiny and challenge, alongside playing an honest broker role between the Council, local stakeholders and other parties (e.g. DfE) + The peer practice partner model means that the Council retains control of Children’s Services and means that a Council wide approach to children (a child friendly borough) is retained – a one Council approach. – In establishing the model, the Council would need and want to ensure that the governance arrangements, scope and remit of the external advisers have sufficient teeth to escalate and challenge the Council. 	4

5. Financial viability and sustainability	<ul style="list-style-type: none"> + There is a low cost of transition to the peer practice model, other than the continued funding for the peer practice partner and administration costs of hosting and facilitating Practice Partner board meetings, visits, etc. + The Council has made significant investment in Children’s Service (£20m over the last two years) and has an agreed funding plan for social care over the next 3 years. + By retaining control and ownership, the Council is able to – if it choses – to invest additional funds in Children’s Services and is not locked into a long term commercial deal with a provider. + Additional demand risks to Children’s Services remain with the Council, directly impacting on the Council’s budget. + The Peer Practice Partner model supplemented by other peer reviews means that alternative approaches to demand management; cost reduction; funding models etc can be captured and shared at a strategic level. – The Council faces significant budget pressures over the next three years (c£42m savings required) at the same time as demand pressures within Children’s and Adults Services. The Practice Partner model does not change the budget position. 	3
6. Workforce	<ul style="list-style-type: none"> + Staff would be retained by the Council and there would be no changes to T&Cs as a result of this option. This means limited impact on staff or management distraction focusing on structures rather than performance. + As part of its Improvement programme, the Council has implemented a number of workforce reforms and more flexible models to improve recruitment, retention and reduced agency usage. + The Improvement programme has evidenced the strong leadership in place (referenced by Ofsted) and the series of measures undertaken to attract staff; retain staff; improve quality and practice have resulted in significant improvements in permanent recruitment and lower than national average agency rates. + Significant investment has been to implement the Signs of Safety Model from April 2017 to improve the quality of social work within LAC to ensure all children/families receive a high quality, responsive service. + The Practice Partner model is designed to build capacity through close collaboration from professional peers. This should happen at both a strategic level and also operational (facilitated best practice, job shadowing, rotation etc). – Whilst this option creates significantly less upheaval compared to a number of the other AMAs, . The model is contingent on the strong leadership, focus and capability of not just the senior management team but social work managers driving performance and quality. – Whilst progress has been made there is work to do to continue to reduce agency staff and turnover. 	4
7. Integration	<ul style="list-style-type: none"> + The Peer Practice Partner model facilitates strong integration between Council services as there will be senior leadership team driving the best outcomes for children across all Council service . Similarly, 	5

	integration with other services, including health, housing, education, criminal justice is enhanced by adopting a 'one council' model.	
8. Risk	<ul style="list-style-type: none"> + The peer practice partner model presents the lowest risk and cost of transition of the AMAs. However, the risk lies in the ability of the Council to continue to deliver improvements and drive the pace of change alongside its wider priorities and budget challenges. + There is good evidence from other localities that the structured involvement of peers model (in different forms and structures) delivers sustained results in the quality of Children's Services and children's outcomes (including Leeds and Cornwall from our research visits), which in part has led to the development of the Practice Partner model. - Realism is required on the pace of change, with each of the local authorities visited as part of the research process articulating a five year journey from Inadequate to Good. - The model is contingent on sourcing, securing and retaining suitable individuals with the time, skills and aptitude to fulfil the wider peer reviews to full effect. Demand challenges will continue to present a challenge to the sustainability of the Children's Services model. 	4
	TOTAL SCORE	33 / 40

Option 2 – Commission by Contract

This option would involve the Council commissioning Children’s Services to external providers. Whilst the Council already commissions a number of providers (e.g. LAC accommodation), this option would see a greater degree of commissioning and in particular those areas traditionally seen as ‘in-house’ services. Clearly the extent of commissioning would be a Council-led decision.

Criteria	Evaluation	Score
1. Child Focused	<ul style="list-style-type: none"> + As the Council would retain control of Children’s Services, the Council would be able to build on the progress made towards improving Children’s outcomes (as evidenced by Ofsted monitoring visits letters; peer reviews (ADCS) and the Commissioner’s reports to Secretary of State). + Commissioning activity would be directed at those services, functions or interventions that are under-performing or failing to improve fast enough to meet children’s needs in Rotherham. This may increase the pace of change, if the right external provider(s) are identified. + Commissioning activity would be within the context of existing strategies established to meet children’s needs in Rotherham. For example, Rotherham’s Children and Young People’s Plan 2016-2019. By retaining control of Children’s Services, + By retaining control of Children’s Services, the Council would ensure that commissioning activity is aligned to the Council’s wider priorities e.g. being a child friendly borough. + Commissioning services may enable the Council to secure more innovation and best practice in the delivery of Children’s Services, selecting providers that have a proven track record of meeting children’s needs in other localities. + The Council would maintain its corporate parenting role and ensures Member and senior officer ownership for children’s outcomes in the borough. However, the extent of commissioned activity may impact on this. – The greater the extent of commissioned activity, the greater the chance of fragmentation and disconnects between different commissioned services, particularly in relation to partnership working, early help and wider council services. 	4
2. Partnerships	<ul style="list-style-type: none"> + Again the potential impact on partnerships is contingent on the scope of commissioned activity; the procurement process and timetable for delivery. The greater the extent of commissioned activity, particularly if broken down into separate lots/contract packages, the greater the complexity, confusion and risk - who does what where – for partners. – Effective partnership working (with the CCG, the NHS Trust; SY Police; schools) is contingent on stable long term trusting relationships between key personnel, and robust supporting processes. Moving to a predominantly commissioned model brings uncertainty, potential changes to staff roles, terms and 	2

	<p>conditions and processes and accountabilities.</p> <ul style="list-style-type: none"> – The transition process may result in greater internal focus rather than external collaborative working, particularly if core functions are transferred to a new provider(s) – The move to a predominantly commissioned model may result in additional complexity of partnership working in terms of the role of the Council, commissioned providers, and partners, linked to the scope of the contract. 			
<p>3. Commissioning</p>	<p>The Council has undertaken a Commissioning Peer Review via the LGA to assess the quality and structures of commissioning across the Council (with partners) to deliver good outcomes. It identified the following strengths and areas for consideration:</p> <table border="1" data-bbox="427 502 1830 796"> <tr> <td data-bbox="427 502 1131 796"> <ul style="list-style-type: none"> • Strengths • Strong leadership from Director of Children’s Services and senior team inspiring confidence • Clear mission • Driving change • Can evidence progress • Good transferable commissioning models • Addressing the issues e.g. sufficiency, mental health, etc. </td> <td data-bbox="1131 502 1830 796"> <ul style="list-style-type: none"> • Areas for consideration • Opportunities to influence Rotherham Clinical Commissioning Group • Building commissioning capability • Balancing Ofsted expectations and need for development • Whole family approach to commissioning • Senior commissioning succession planning • 0-25 agenda </td> </tr> </table> <ul style="list-style-type: none"> – In moving to a predominantly commissioned model, the implications are three-fold. Firstly, a significant investment in commissioning capacity/capability (under the existing leadership) to effectively manage a large scale and complex commissioning process. Secondly, integrated commissioning as far as is practical and possible with health/other partners to deliver shared outcomes. Thirdly, the ability to adopt alternative commissioning models (e.g. outcome based commissioning, PBR pay mechanisms) to transfer risk and align providers to shared outcomes. – The scale and complexity of commissioning activity would strongly suggest a long lead time in terms of market engagement, development, procurement, negotiation and contracting, particularly if multiple providers are selected over multiple lots. This activity could be phased, but would bring more uncertainty for staff and partners. 	<ul style="list-style-type: none"> • Strengths • Strong leadership from Director of Children’s Services and senior team inspiring confidence • Clear mission • Driving change • Can evidence progress • Good transferable commissioning models • Addressing the issues e.g. sufficiency, mental health, etc. 	<ul style="list-style-type: none"> • Areas for consideration • Opportunities to influence Rotherham Clinical Commissioning Group • Building commissioning capability • Balancing Ofsted expectations and need for development • Whole family approach to commissioning • Senior commissioning succession planning • 0-25 agenda 	<p>3</p>
<ul style="list-style-type: none"> • Strengths • Strong leadership from Director of Children’s Services and senior team inspiring confidence • Clear mission • Driving change • Can evidence progress • Good transferable commissioning models • Addressing the issues e.g. sufficiency, mental health, etc. 	<ul style="list-style-type: none"> • Areas for consideration • Opportunities to influence Rotherham Clinical Commissioning Group • Building commissioning capability • Balancing Ofsted expectations and need for development • Whole family approach to commissioning • Senior commissioning succession planning • 0-25 agenda 			
<p>4. Political oversight and governance arrangements</p>	<ul style="list-style-type: none"> + The Council would retain ownership and oversight of Children’s Services. The model will mean that political ownership and oversight is retained by Members, the Lead Member and the Leader. – The strength of the commissioning function (under the right leadership) and the commissioning/contracting model selected would dictate the extent to which provider(s) have autonomy to make changes to deliver in the best interests of children. In selecting this option there is a balance to be struck between getting the benefits of commissioning (freedom, flexibility, greater ability to invest, respond to changes) vs retaining control and oversight of the providers and outcomes specified. 	<p>3</p>		

	<ul style="list-style-type: none"> - In commissioning services there is a higher degree of risk in services not being aligned to wider Council services that support achieving the best outcomes for children (e.g. providers operating in isolation; lack of flexibility or insufficient change control processes in place to respond to changing commissioner needs). This may create inevitable tension between the Council's commitment to make safeguarding everyone's responsibility and being a child friendly borough and the selected providers. - The executive structure and extent to which there are any dual roles between the commissioning function and key provider(s) would be subject to negotiation and contract scope. - The role of the Lead Member and Scrutiny Committee would continue to be critical in providing political oversight of Children's Services, however, the extent of influence of contracted providers maybe more limited (e.g. requests for service changes that are out of scope of the agreed contract) or more costly. - The wider corporate parenting responsibilities of the Council would be at greater risk the greater the levels of commissioning due to the greater separation. 	
5. Financial viability and sustainability	<ul style="list-style-type: none"> + Selecting providers with the right commercial and financial standing may incentivise better cost control and enable the Council to more quickly achieve efficiency gains or better outcomes for lower cost. + The Council could elect risk share or outcome based commissioning payment mechanisms to drive efficiencies through the contract(s) and incentivise performance linked to children's outcomes. - Because of the demand risks to the Children's Budget the extent to which the Council would need to carry an element of demand risk along with the provider(s) would be subject to negotiation – it is unlikely that providers would accept the demand risk without a risk premium. - The scope of the commissioned service may impact on areas that have hindered Trust arrangements (see option 3) such as the treatment of overhead and back office services. - The Council's budget challenge requires a whole council approach – recognising the inter-relationship between children's and adult services budgets in relation to transitions. - The cost of large scale commissioning activity would be significant. Not only in terms of the procurement process but also the design phase (understanding the true cost of current delivery including overhead contribution); legal costs; performance monitoring regime (e.g. IT investment to monitor a more complex set of providers / outcomes) - Alongside the cost of set up, there maybe additional costs to the Council, including for example the treatment of buildings that are co-located between services; the separation of services; establishing new processes to manage the inter-relationship with provider(s). 	3
6. Workforce	<ul style="list-style-type: none"> + Staff would transfer (under TUPE) to selected provider(s). This brings both benefits (ability to use the experience of existing staff) but is also a complex, and time consuming process and transfers the cost of local government terms and conditions to provider(s). This may reduce the attractiveness of the contracts to the market and not realise significant savings in the short term. + The extent to which the Children's Services leadership team would transfer to the providers would be 	2

	<p>subject to the scope of commissioning activity. If the leadership team remains in house, this would provide stability and ensure the Improvement journey ethos continues within the new entity.</p> <ul style="list-style-type: none"> + The transfer to new providers may facilitate and be a stimulus for practice improvement – with new provider(s) bringing different ways of working, new interventions or services. – The transfer process, however well managed, introduces uncertainty to staff and may result in internal focus rather than the improvement journey and collaborative work with partners. – The benefits of existing investments in the workforce and improvements made in terms of recruiting permanent staff, reduction in agency staff etc would accrue to new providers and there could be fragmentation of the Signs of Safety model across different providers. However, new provider(s) maybe able to more quickly deliver the workforce reforms required to improve children’s outcomes 	
7. Integration	<ul style="list-style-type: none"> – Commissioning activity may impact on the extent of integration. There may be a direct impact on children’s outcomes through a less integrated approach with partners to early help and managing the demand drivers for LAC. Particularly if multiple providers are engaged at different stages of the social work journey. – The focus of commissioning and design activity would need to focus on the ‘grey areas’ where commissioned services, the Council and local partner services interact in terms of ownership and referral processes. Fragmentation, a lack of consistency and ownership are highlighted as particular risks to outcomes. 	2
8. Risk	<ul style="list-style-type: none"> + The selection of the right providers could facilitate increased flexibility to respond to changes in demand / requirements, greater innovation and ability to invest in Children’s Services specific requirements. – The extent of commissioning would dictate the level of risk (and potential reward) to the Council. Commissioning within Children’s Services is business as usual within Rotherham and most local authorities. However, the contracting out of in-house services (e.g. assessment function, fostering and adoption teams) on a large scale is relatively un-tested. – The risks to the Council reflect the wider risks of commissioning, including: <ul style="list-style-type: none"> o Political – lack of control on provider behaviour / performance o Commissioning capacity / capability – only by investing in additional resource could the Council effectively commission a wider range of services on a larger scale o Financial – difficulty in forecasting medium term budgets and demand risk to contracts would increase the risk premium (i.e. cost) o Sharing of information – Commissioning services across different providers increases the challenge of effective information sharing. o Quality / performance – lack of control on the quality of delivery or performance of providers, particularly if insufficient investment is made in commissioning capacity – The risk of fragmentation (different providers with different priorities) presents a real risk to the Improvement journey. Particularly so when the potential impact on partnership working is factored in. 	3

	<ul style="list-style-type: none"> – As well as the specific costs of transition and commissioning costs, there would be considerable effort required (Senior Leadership Team/ Children’s Services Management Team) to design and implement the model at the same time as the ongoing need to drive the Improvement journey. 	
	TOTAL SCORE	22 / 40

DRAFT

Option 3 – Wholly owned company – establishing a “Trust”

This option would result in the Council establishing a new wholly owned company. The company would be a Teckal company and not subject to competition regulations (i.e. limited legal barriers to set up). The Trust would commission and deliver services deemed to be in-scope.

The majority of Trusts established so far have been predominantly social work focused Trusts – not education or wider Children’s Services. The notable exception to this model is Achieving for Children, which priorities integrated education and social work at a local school cluster level.

The independent evidence from the LGA commissioned research identifies Trusts as the model where disruptive change is required to fix fundamentally broken systems. Rotherham is two years into its improvement journey with evidence from Peer Reviews, the Peer Practice Partner and Ofsted that significant progress has been made with clear plans, robust performance data and the leadership and management both politically and managerially to continue the improvements.

Criteria	Evaluation	Score
1. Child Focused	<ul style="list-style-type: none"> + The establishment of a Trust focused on children’s social work could bring a strong, clear voice to the council, partners and to Rotherham. + Trust arrangements would facilitate greater autonomy and control to implement reforms in the best interest of the trust’s commissioned outcomes (i.e. children’s outcomes) – The sole focus on Children’s Services will mean that wider Council issues/challenges (e.g. the budget challenge to 2020 or demand challenges on adult services) would not be a distraction. However, Council wide priorities, e.g. a child friendly borough and the significant contribution other Council Services play in safeguarding (such as regulatory enforcement, housing, adult social care) could be lost as children’s services become the responsibility of the provider (the trust) rather than the Council as a whole. – There is a risk that in moving to a Trust that the good work over the last two years is undermined unnecessarily. – The scope of the Trust (in terms of the breadth/depth of children’s services) may impact on the delivery of children’s outcomes. Too narrow in its focus (i.e. a social work focused trust) would result in fragmentation and a loss of the systemic reforms underway. A wider scope to include services such as early help and SEND may impact on demand (i.e. budget risk) and the outcomes for children not in social work or SEND . – The scale of disruption would be significant in terms of management focus, cost of transition and staff transfers to the new organisation entity. This may unavoidably impact on children’s 	4

	outcomes as staff/managers focus internally rather than on the Improvement journey.	
2. Partnerships	<ul style="list-style-type: none"> – There is a significant risk to the strength of partnership working in Rotherham in moving to a Trust model. Evidence from research areas highlighted the detrimental impact on partner relationships and clarity on roles and responsibilities. – Effective partnership working (with the CCG, the NHS Trust; SY Police; schools) is contingent on stable long term trusting relationships between key personnel, and robust supporting processes. Moving to a Trust model brings uncertainty, potential changes to staff roles and processes and accountabilities. – The transition process may result in greater internal focus rather than external collaborative working – The move to a Trust model may result in additional complexity of partnership working in terms of the role of the Council, the new Trust, and partners, linked to the scope of the contract. 	2
3. Commissioning	<ul style="list-style-type: none"> + The Trust will have the autonomy to commission new / different interventions and services to meet the needs of children in Rotherham, with potentially greater freedom and flexibility to de-commission and re-commission services at pace. + The Trust model avoids EU procurement legislation via establishing the Trust as wholly owned company in procurement terms a 'Teckal company' which satisfies Reg 12 of the Public Contracts Regulations 2015. – The Trust would likely require investment in commercial capability within the new entity, alongside additional commissioning capacity. – The Council would also required additional commercial/commissioning capacity / capability to manage the contract with the Trust. – There is an ongoing risk of commissioner/provider relationship management. Given the critical interplay between Children's Services and the wider Council, mature, open and transparent working would be required. 	4
4. Political oversight and governance arrangements	<ul style="list-style-type: none"> + The Trust would remain within Council ownership. However, the Trust would have leadership and management autonomy to make changes (strategic/operational) to deliver in the best interests of children in Rotherham. + The executive structure and extent to which there are any dual roles (Council SLT and Trust Executive for example) would be subject to negotiation and contract scope. For example, the role of the Lead Member and DCS will likely retain statutory responsibilities but have to navigate the relationship with the Trust Board and the wider Council. – The role of the Lead Member and Scrutiny Committee in areas with alternative management arrangements is more diffuse – reducing (in the eyes of local research contributors) the political 	3

	<p>oversight of Children's Services.</p> <ul style="list-style-type: none"> - The Trust would require a new governance structure between the Council and the Trust that establishes collaborative partner and inter-council relationships – a complex and time consuming process to set up and run effectively. - Establishing a Trust presents the substantial risk of reducing political engagement, ownership and oversight of Children's Services in the Borough – a key area of progress in the last two years. This is as a result of Children's Services being 'the Trust's problem/remit'. - The wider corporate parenting responsibilities of the Council maybe at risk, with officers deferring to the Trust for all children related matters. 	
5. Financial viability and sustainability	<ul style="list-style-type: none"> + Establishing the Trust may incentivise better cost control and surplus/profit generation - Existing Trusts that have been established are experiencing financial difficulties. One Children's Trust is 8% over its revenue budget with the local Council being its only customer. - It is likely that a fixed budget over the medium term is required to facilitate planning. However, the impact of rising demand for Children's Services would directly impact on the base budget. - The treatment of overhead and back office services have proven problematic in previous Trust arrangements, both in terms of the cost and lack of flexibility of Council support services, and the disruption in appointing new providers. - The Council's budget challenge requires a whole council approach – recognising the inter-relationship between children's and adult services. Moving to a Trust arrangement would not take away the budget challenge or the contribution that the Trust would need to make. - The transition costs in moving to a Trust are significant. Research in other localities suggest set up costs of £3-5m – costs which the Council could not carry within its existing revenue budgets. - Trust arrangements bring additional tax and VAT implications, particularly the treatment of irrecoverable VAT which add a 20% cost to services in scope. - Alongside the cost of set up, there are additional costs to the Council, including for example the treatment of buildings that are co-located between services; the separation of services; establishing new processes to manage the inter-relationship with the Trust. 	2
6. Workforce	<ul style="list-style-type: none"> + The Trust would introduce greater freedoms and flexibilities to recruit, develop and performance manage staff, with more flexible packages of employment benefits. However the Council has already implemented a comprehensive offer that is being seen as positive practice and is demonstrating significant impact on increasing permanent recruitment and reducing agency usage. + The transfer to a new organisation may facilitate and be a stimulus for practice improvement – establishing a new culture via symbolic changes to a new organisation identity 	5

	<ul style="list-style-type: none"> + Staff would transfer (under TUPE) to the new entity. This brings both benefits (ability to use the experience of existing staff) but is also a complex, and time consuming process and transfers the cost of local government terms and conditions to the Trust. + Some of the Children's Services leadership team would likely transfer to the new entity, providing some stability and ensuring the Improvement journey ethos continues within the new entity. - The transfer process, however well managed, introduces uncertainty to staff and may result in internal focus rather than the improvement journey, collaborative work with partners and see a reduction in permanent recruitment and an increase in agency usage and turnover. - The benefits of existing investments in the workforce and improvements made in terms of recruiting permanent staff, reduction in agency staff etc would accrue to the new Trust entity. 	
7. Integration	<ul style="list-style-type: none"> - Moving to a Trust model presents a significant threat that Children's Services becomes a more entrenched silo, not engaging with wider priorities that safeguard and provide better life chances for children. This can impact on service issues ranging from transition from Children's to Adult Social Care; to the need for education and skills considerations being linked to wider economic growth policy (e.g. birth to adulthood strategies). - There may also be a direct impact on children's outcomes through a less integrated approach with partners to early help and managing the demand drivers for LAC. - Research from other localities has highlighted the crucial role of the scope of any Trust services, particularly the 'grey areas' where Trust, Council and local partner services interact in terms of ownership and referral processes. Fragmentation, a lack of consistency and ownership are highlighted as particular risks to outcomes. 	2
8. Risk	<ul style="list-style-type: none"> + A move to a Trust model should facilitate increased flexibility to respond to changes in demand / requirements. - The move to a Trust model clearly introduces more risks (financial, transition, partners, integration as highlighted above). There is a poor evidence base to support the move to a Trust model. Existing trusts are in different development stages but as a whole are in there infancy as a proven AMA. Feedback from localities has consistently highlighted that a change in structure or ownership does not de facto deliver performance or practice improvement. - As well as the specific costs of transition, considerable effort is required (SLT/ Children's Services SMT) to design and implement the model at the same time as the ongoing need to drive the Improvement journey. - The cost and complexity of support services and disentangling Children's Services from wider Council Services are significant. - If the leadership, management and staffing are transferred to a new entity, the question remains to what extent is the new entity able to realise significant change if the staffing resource remains the same? 	3

	<ul style="list-style-type: none"> - The timetable for implementation, delivery and transformation has been highlighted by research as a three to five year journey to move from the As Is model to sustained improvements in outcomes (good/outstanding). 	
	TOTAL SCORE	25

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Option 4 – Community Interest Company

In establishing a wholly owned company, the Council may also chose to incorporate the Trust as a Community Interest Company (often described by the generic term social enterprise). The features of a Community Interest Company are:

- *A CIC can reassure the public as the community purpose of the organisation is regulated*
- *There is an asset lock in place – with any assets transferred to another asset locked body should the company be wound up.*
- *Surpluses are re-invested in the company or in the local community (cannot be returned to the Council)*
- *The asset lock means that the assets can only be used for the good of the community, in this case Rotherham’s children and young people*
- *A CIC is required to report annually on how it achieves its community interest – bringing greater transparency.*

Because the arrangements would be the same as a Wholly Owned Company (Option 3), rather than repeating the evaluation content we have identified where there maybe any material benefits/disadvantages in selecting a CIC over and above a wholly owned company.

Criteria	Evaluation	Score
1. Child Focused	<ul style="list-style-type: none"> + The asset lock and community purpose (in particular the re-investment of surplus into the community / young people or children in Rotherham may re-assure local stakeholders + The CIC may help to position the Trust as more separate and distinct from the Council (if this was desired) 	5
2. Partnerships	<ul style="list-style-type: none"> • No change to Option 3. 	2
3. Commissioning	<ul style="list-style-type: none"> • No change to Option 3 as the Trust would be established as both a Wholly Owned Company <i>and</i> CIC (avoiding procurement regulation issues). 	4
4. Political oversight and governance arrangements	<ul style="list-style-type: none"> • No change to Option 3 other than the increased transparency as a result of publishing the community benefit of the CIC on an annual basis. 	3
5. Financial viability and sustainability	<ul style="list-style-type: none"> + Establishing the CIC alongside the wholly owned company would be relatively straightforward and quick, easy to establish. It is a tried and tested model. – Importantly the CIC does not have charitable status and is unable to access the full range of tax advantages of charitable entities. 	2
6. Workforce	<ul style="list-style-type: none"> • No change to Option 3. 	5

7. Integration	<ul style="list-style-type: none"> No change to Option 3. 	2
8. Risk	<p>+ There is existing precedent for establishing a wholly owned company and CIC through 'Achieving for Children', which is a wholly owned company limited by guarantee and registered as CIC. Please note that the scope of the Achieving for Children model is wider than social care and delivers all education support, childrens services and integrated health for children with disabilities.</p> <ul style="list-style-type: none"> No other changes to Option 3. 	3
	TOTAL SCORE	26

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Option 5 – Employee owned Mutual

In establishing a Trust, the Council could elect to chose a ‘mutual’ (a co-operative society) organisation structure, with the Council retaining a stake and potentially other third parties. The mutual would be a separate organisation. This is a separate option from the wholly owned company / CIC described above.

Criteria	Evaluation	Score
1. Child Focused	<ul style="list-style-type: none"> + Outside of the Children’s Services context, there is reasonable evidence that employee owned enterprises (Mutuals) incentivises increased innovation, customer service and ownership. + The move to an employee owned Mutual would establish strong operational independence from the Council and may facilitate additional focus on the child as its core business. The establishment of the mutual with this sole purpose could bring a strong, clear voice to the council, partners and to Rotherham. + A Mutual would facilitate greater autonomy and control to implement reforms in the best interest of the Mutual’s commissioned outcomes (i.e. children’s outcomes). – However, Council wide priorities, e.g. a child friendly borough, could be lost as children’s services become the responsibility of the provider (the Mutual) rather than the Council as a whole. . – The scope of the Mutual agreement (in terms of the breadth/depth of children’s services) may impact on the delivery of children’s outcomes. Too narrow in its focus (i.e. a social work focused Mutual) would result in fragmentation and a loss of the systemic reforms underway. This includes the integration with education, early help, skills and employment. This may impact on demand (i.e. budget risk) and the outcomes of children not in social work. – The scale of disruption would be significant in terms of management focus, cost of transition and staff transfers to the new organisation entity. This may unavoidably impact on children’s outcomes as staff/managers focus internally / on new structures rather than on the Improvement journey. 	4
2. Partnerships	<ul style="list-style-type: none"> – There is a significant risk to the strength of partnership working in Rotherham in moving to a new entity model such as a Mutual. Evidence from research areas highlighted the detrimental impact on partner relationships and clarity on roles and responsibilities. – Effective partnership working (with the CCG, the NHS Trust; SY Police; schools) is contingent on stable long term trusting relationships between key personnel, and robust supporting processes. Moving to a Mutual model brings uncertainty, potential changes to staff roles and processes and accountabilities. – The transition process may result in greater internal focus rather than external collaborative 	2

	working.	
3. Commissioning	<ul style="list-style-type: none"> + A Mutual will have the autonomy to commission new / different interventions and services to meet the needs of children in Rotherham, with potentially greater freedom and flexibility to de-commission and re-commission services at pace. – The Mutual maybe required to compete for the Service Contract under regulation 77 PCR 2015 (unlike a wholly owned company which is not subject to procurement under the Public Contracts Regulations 2015) – making an illegal direct award if no open and competitive procurement process takes place. – The maximum length of term for a Mutual (spun out of public sector control) contract is 3 years. Research from other localities has highlighted the length of time required to manage the transition to a new entity, to embed the systems, controls and focus on quality as 3-5 years. – The Mutual – as per Trust arrangements - would likely require investment in commercial capability within the new entity, alongside additional commissioning capacity. Similarly, the Council would also required additional commercial/commissioning capacity / capability to manage the contract with the Mutual. 	1
4. Political oversight and governance arrangements	<ul style="list-style-type: none"> – A Mutual introduces greater independence over and above a Trust (wholly owned company). Under normal Mutual governance arrangements for example, the Mutual has the ability to remove Directors at a General Meeting. It will be more difficult for the Council to step in and instigate changes where performance / quality is not meeting the Council's expectations. – Outside of the Council's ownership, the Mutual would have leadership and management autonomy to make changes (strategic/operational) to deliver in the best interests of children in Rotherham. This maybe counter to wider Council strategic priorities. This creates inevitable tension between the Council's purpose, priorities, budget and the Mutual's. – The executive structure and extent to which there are any dual roles (Council SLT and Mutual Executive for example) would be subject to negotiation and contract scope. For example, the role of the Lead Member and DCS will likely retain statutory responsibilities but have to navigate the relationship with the Mutual Board and the wider Council. – The role of the Lead Member and Scrutiny Committee in areas with alternative management arrangements is more diffuse – reducing (in the eyes of local research contributors) the political oversight of Children's Services. – The Mutual would require a new governance structure between the Council and the Trust that establishes collaborative partner and inter-council relationships – a complex and time consuming process to set up and run effectively. – Establishing a Mutual presents the substantial risk of losing political engagement, ownership and oversight of Children's Services in the Borough – a key area of progress in the last two years. 	1

	<p>This is as a result of Children’s Services being ‘the Mutual’s problem/remit’.</p> <ul style="list-style-type: none"> – The wider corporate parenting responsibilities of the Council maybe at risk, with officers (perhaps sub-consciously) deferring to the Mutual for children related services/decisions. 	
5. Financial viability and sustainability	<ul style="list-style-type: none"> + There is some evidence in Mutuals (outside of the Children’s Services context) that Mutuals can incentivise greater innovation, cost reduction and efficiency as the budget becomes part of everyone’s role. – Mutuals – in general – have limited access to external capital and investors during the start up and initial trading years. This may negate any potential ability to invest in drivers for improvement (e.g. technology). – The complexity of establishing a Mutual would be proportionately higher than establishing a Trust. – As per establishing a Trust, the following financial challenges apply: <ul style="list-style-type: none"> o It is likely that a fixed budget over the medium term is required to facilitate planning. However, the impact of rising demand for Children’s Services would directly impact on the base budget. o The treatment of overhead and back office services (transfer from the Council? Establish new providers?) have proven problematic in previous Trust/new entity arrangements, both in terms of the cost and lack of flexibility of Council support services, and the disruption in appointing new providers. o The Council’s budget challenge requires a whole council approach – recognising the inter-relationship between children’s and adult services. Moving to a Mutual arrangement would not take away the budget challenge or the contribution that the Mutual would need to make. o The transition costs in moving to a Mutual are significant. Research in other localities suggest set up costs of £3-5m – costs which the Council could not carry within its existing revenue budgets. o Mutual arrangements bring additional tax and VAT implications, particularly the treatment of irrecoverable VAT which add a 20% cost to services in scope. o Alongside the cost of set up, there are additional costs to the Council, including for example the treatment of buildings that are co-located between services; the separation of services; establishing new processes to manage the inter-relationship with the Mutual 	1
6. Workforce	<ul style="list-style-type: none"> + There is some evidence of lower absenteeism and higher employee engagement in Mutuals within the public sector landscape. + Establishing a mutual would enable the Mutual members to protect staff terms and conditions, increasing employee engagement. 	3

	<ul style="list-style-type: none"> + The transfer to a new organisation may facilitate and be a stimulus for practice improvement – establishing a new culture via symbolic changes to a new organisation identity. + TUPE would apply to staff transfers with the benefits/costs associated as described above. – The Council is investing heavily in the Signs of Safety model to improve the quality of social work practice, without evidence of outstanding practice transferring to an employee led mutual would not be a rationale option. – The practical realities of a large membership organisation would mean that staff would be distanced from decision making. The ‘one member one vote’ model would not support day to day operating decisions within the Children’s Services context. – The Mutual would require additional investment in commercial capability to facilitate the Mutual operating on an independent, financially sound basis. + The transfer process, however well managed, introduces uncertainty to staff and may result in internal focus rather than the improvement journey and collaborative work with partners. 	
7. Integration	<ul style="list-style-type: none"> – Moving to a Mutual model presents a significant threat that Children’s Services becomes a more entrenched silo, not engaging with wider priorities and the needs of the borough. This can impact on service issues ranging from transition from Children’s to Adult Social Care; to the need for education and skills considerations being linked to wider economic growth policy (e.g. birth to adulthood strategies). – There may also be a direct impact on children’s outcomes through a less integrated approach with partners to early help and managing the demand drivers for LAC. – Research from other localities has highlighted the crucial role of the scope of any new entity’s services, particularly the ‘grey areas’ where a Mutual, Council and local partner services interact in terms of ownership and referral processes. Fragmentation, a lack of consistency and ownership are highlighted as particular risks to outcomes. 	2
8. Risk	<ul style="list-style-type: none"> + Employee ownership would undoubtedly increase employee engagement, and therefore the ownership for the Improvement challenge may increase, as well as the focus on children and innovation / problem solving. – There are no social care mutuals operating in the Children’s Services landscape of this size and complexity. – Moving to a Mutual would be an untested model. – The decision making processes within a Mutual (one member one vote) may not introduce the freedoms and flexibilities that the Council would want in establishing a new organisational entity freed from local government control. – A mutual presents more complex set up and legal processes, particularly if there are additional stakeholders (e.g. the Council retains a share, staff ownership and another provider) 	2

	<ul style="list-style-type: none"> - As well as the specific costs of transition, considerable effort is required (SLT/ Children’s Services SMT) to design and implement the model at the same time as the ongoing need to drive the Improvement journey. - The cost and complexity of support services and disentangling Children’s Services from wider Council Services are significant. - If the leadership, management and staffing are transferred to a new entity, the question remains to what extent is the new entity able to realise significant change if the staffing resource remains the same? - The timetable for implementation, delivery and transformation has been highlighted by research as a three to five year journey to move from the As Is model to sustained improvements in outcomes (good/outstanding). 	
Summary	TOTAL SCORE	16

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Option 6 – Managing Agent

A Managing Agent can be appointed by the Council to provide an independent management function, working to an appropriate governance framework. The Managing Agent would be responsible for commissioning services, developing business cases for change, and driving the performance of Children’s Services. The Managing Agent maybe responsible for delivering some aspects of the service.

Criteria	Evaluation	Score
1. Child Focused	<ul style="list-style-type: none"> + A Managing Agent, subject to the scope of the contract, would bring independent challenge and ownership for driving the performance and quality of Children’s Services in Rotherham. + A Managing Agent could bring additional capabilities to facilitate a stronger focus on children’s services. This could include technology, performance management and monitoring, best practice interventions, commissioning capacity/capability – to improve services for children in Rotherham. + The Council would retain control of Children’s Services, but the ability to influence and impact on the Managing Agent would be contingent on the quality of the procurement process (e.g. contract terms, change control) and contract management/monitoring. Given the Council would retain control, it should be able to ensure that the Managing Agent continues to build on the progress made towards improving Children’s outcomes (as evidenced by Ofsted monitoring visits letters; peer reviews (ADCS) and the Commissioner’s reports to the Secretary of State). + The Managing Agent would be directed to target services, functions or interventions that are under-performing or failing to improve fast enough to meet children’s needs in Rotherham. This may increase the pace of change. The Managing Agent may be able to more quickly commission new services or de-commission functions/interventions that are not improving at the scale required. + By retaining control of Children’s Services, the Council would ensure that the Managing Agent’s activities are aligned to the Council’s wider priorities e.g. being a child friendly borough. + Commissioning a Managing Agent may enable the Council to secure more innovation and best practice in the delivery of Children’s Services. The Agent would be able to select providers that have a proven track record of meeting children’s needs in other localities. – The Council would maintain its corporate parenting role and ensures Member and senior officer ownership for children’s outcomes in the borough. However, the role of the Managing Agent maybe confusing (both internally and externally) and hinder the Improvement journey. 	3
2. Partnerships	<ul style="list-style-type: none"> – The impact on partnership working would be impacted by the scope of the Managing Agent arrangement. It is likely that the Managing Agent would have some negative implications for partnership working if there is a lack of clarity between the roles of the Managing Agent and 	2

	<p>Children’s Services staff; the specific remit of the Managing Agent and remaining Council services.</p> <ul style="list-style-type: none"> – Effective partnership working (with the CCG, the NHS Trust; SY Police; schools) is contingent on stable long term trusting relationships between key personnel, and robust supporting processes. The Council may lose some control over the extent of commissioned services, bringing uncertainty, potential changes to staff roles and processes and accountabilities. – The transition process may result in greater internal focus rather than external collaborative working, particularly if core functions are transferred to a new provider(s). – The move to a Managing Agent model may result in additional complexity of partnership working in terms of the role of the Council, the Managing Agent, commissioned providers, and partners, linked to the scope of the contract. 	
3. Commissioning	<ul style="list-style-type: none"> + It is likely that the Managing Agent would be given autonomy to commission / de-commission services to drive service improvements, subject to agreed governance / sign off processes with the Council. + The Managing Agent would bring additional commissioning capacity/capability, and potentially stronger business processes (business case, data/analytics) to strengthen the commissioning of children’s services. – The Council would also be required to invest in additional commercial and commissioning capacity / capability to procure and then manage the contract with the Managing Agent. – There is an ongoing risk of commissioner/provider relationship management. Given the critical interplay between Children’s Services and the wider Council, mature, open and transparent working would be required with the Managing Agent. 	2
4. Political oversight and governance arrangements	<ul style="list-style-type: none"> + The Council would retain political oversight and corporate responsibility for Children’s Services. However, the extent of the role of the Managing Agent may impact on the extent of ‘ownership’ for Children’s Services. – New governance arrangements would need to be established to provide effective management of the Managing Agent and establishes collaborative partner and inter-council relationships – a complex and time consuming process to set up and run effectively. – The executive structure and extent to which there are any dual roles would be subject to negotiation and contract scope. For example, the role of the Lead Member and DCS will likely retain statutory responsibilities but be required to navigate the roles/services provided by the Managing Agent. – The Managing Agent presents the risk of losing political engagement, ownership and oversight of Children’s Services in the Borough – a key area of progress in the last two years. This is as a result of Children’s Services being ‘the Managing Agent’s problem/remit’. 	2

	<ul style="list-style-type: none"> - The wider corporate parenting responsibilities of the Council maybe at risk, with officers (perhaps sub-consciously) deferring to the Managing Agent for children related services/decisions. - The risk of a 'blame game' between the remaining Council services and the Managing Agent exists. 	
5. Financial viability and sustainability	<ul style="list-style-type: none"> + The Council could elect risk share or outcome based commissioning payment mechanisms to drive efficiencies through the contract(s) and incentivise the performance of the Managing Agent linked to children's outcomes. - Appointing a Managing Agent would bring additional management costs to the delivery of Children's Services. The cost/benefit could only be justified if the Managing Agent delivers improved children's outcomes and financial savings over and above the baseline projections. - Because of the demand risks to the Children's Budget the extent to which the Council would need to carry an element of demand risk along with the Managing Agent would be subject to negotiation. - The scope of the Managing Agent role may impact on areas that have hindered Trust arrangements (see option 3) such as the treatment of overhead and back office services. - The Council's budget challenge requires a whole council approach – recognising the inter-relationship between children's and adult services. The Managing Agent role would not take away the budget challenge or the contribution that Children's Services would need to make. - The cost of appointing a Managing Agent would be significant in terms of the complexity of the procurement process, set up and mobilisation, and the wider potential areas of contract scope for example the treatment of buildings that are co-located between services; the separation of services; establishing new processes to manage the inter-relationship with existing commercial providers. 	3
6. Workforce	<ul style="list-style-type: none"> + The impact on the workforce would be contingent on the scope of the contract. However, it is likely that both management and delivery staff would transfer to the Managing Agent, alongside the Agent's existing resource. Staff transfers would be subject to TUPE and the costs/benefits this brings (see option 3). + The Managing Agent would partly be appointed on the basis of its ability to drive the quality of practice and performance of staff. - The extent to which the Children's Services leadership team would transfer to the Managing Agent would be subject to the scope of the Managing Agent contract. If the leadership team remains in house, this would provide stability and ensure the Improvement journey ethos continues within the new entity. - The transfer process, however well managed, introduces uncertainty to staff and may result in 	2

	internal focus rather than the improvement journey and collaborative work with partners.	
7. Integration	<ul style="list-style-type: none"> – Contingent on the scope of the services agreed, there may be a direct impact on children’s outcomes through a less integrated approach with partners to early help and managing the demand drivers for LAC. – Alongside the integration of the Managing Agent with partner services (Schools, Health etc) the issues would remain regarding the ‘grey areas’ where the Managing Agent, the Council and local partner services interact in terms of ownership and referral processes. Fragmentation, a lack of consistency and ownership are highlighted as particular risks to outcomes. 	2
8. Risk	<ul style="list-style-type: none"> + The Managing Agent model could potentially increase the pace of the Improvement journey, but only following a time-consuming procurement process and subsequent mobilisation and stabilisation phase. – There is limited evidence of a Managing Agent model operating effectively within the Children’s Services landscape. – The risk of appointing a Managing Agent, with the disruption and cost that it entails, could only be justified by significant confidence levels in the step change in performance of Children’s Services. – The Council’s budget challenge will remain a challenge for Children’s Services alongside the Improvement programme within this model. Additional pressure may be exerted to deliver savings through to 2020 if other parts of the Council do not deliver their savings. – Demand challenges will continue to present a challenge to the sustainability of the Children’s Services model. 	2
TOTAL SCORE		18

Option 7 – Joint Venture

The Council may chose to enter into a Joint Venture with one or more organisations (from the public, private or not for profit sectors). The Joint Venture would be a separate, incorporated company, running Children’s Services via a contract with the Council.

Criteria	Evaluation	Score
1. Child Focused	<ul style="list-style-type: none"> + The Joint Venture (JV) model would predominantly, subject to the scope of the contract between the Council and the JV, be focused on children’s social work services. The establishment of a JV with this sole purpose could bring a strong, clear voice to the council, partners and to Rotherham. + The sole focus on Children’s Services will mean that wider Council issues/challenges (e.g. the budget challenge to 2020 or demand challenges on adult services) would not be a distraction. + Establishing the Joint Venture could be a dramatic stimulus for change within the Directorate, potentially increasing the pace of change and re-positioning Children’s Services in the eyes of children and young people in the borough. + A JV would facilitate greater autonomy and control to implement reforms in the best interest of the commissioned outcomes (i.e. children’s outcomes). + Identifying the right JV partner(s) could bring additional specialisms, expertise and innovation to meet children’s needs (including learning from other areas that may have been through an Improvement journey) if a partner could be found . The partner maybe from the public, private or not for profit sectors. + Alongside the specific contracted services with the JV, there maybe more informal peer to peer learning and sharing of best practice to enhance children’s outcomes from the third party(s). – Council wide priorities, e.g. a child friendly borough, could be lost as Children’s Services become the responsibility of the JV rather than the Council as a whole. – There is a risk that in moving to a JV that the good work over the last two years is undermined unnecessarily and evidence shows that moving to such a model is best undertaken where disruptive change is required and this is not the case in Rotherham 2 years into the improvement journey with significant progress made. – The scope of the JV (in terms of the breadth/depth of children’s services) may impact on the delivery of children’s outcomes. Too narrow in its focus (i.e. a social work focused JV) would result in fragmentation and a loss of the systemic reforms underway. This includes the integration with education, early help, skills and employment. This may impact on demand (i.e. budget risk) and the outcomes of children not in social work. – The scale of disruption would be significant in terms of management focus, cost of transition and staff transfers to the new organisation entity. This may unavoidably impact on children’s 	3

	outcomes as staff/managers focus internally rather than on the Improvement journey.	
2. Partnerships	<ul style="list-style-type: none"> - There is a significant risk to the strength of partnership working in Rotherham in moving to a JV model. The role of the Council within the JV may mitigate the risk, but effective partnership working (with the CCG, the NHS Trust; SY Police; schools) is contingent on stable long term trusting relationships between key personnel, and robust supporting processes. Moving to a JV model brings uncertainty, potential changes to staff roles and processes and accountabilities. - The transition process may result in greater internal focus rather than external collaborative working with partners. - The move to a JV model may result in additional complexity of partnership working in terms of the role of the Council, the JV partner, and partners, linked to the scope of the contract. 	2
3. Commissioning	<ul style="list-style-type: none"> + The JV will have the autonomy to commission new / different interventions and services to meet the needs of children in Rotherham, with potentially greater freedom and flexibility to de-commission and re-commission services at pace. + Subject to the Council's role, the JV model may avoid EU procurement legislation via establishing the JV in procurement terms a 'Teckal company' which satisfies Reg 12 of the Public Contracts Regulations 2015. - The JV would likely require investment in commercial capability within the new entity, alongside additional commissioning capacity. Similarly, the Council would also required additional commercial/commissioning capacity / capability to manage the contract with the JV. - There is an ongoing risk of commissioner/provider relationship management. Given the critical interplay between Children's Services and the wider Council, mature, open and transparent working would be required. - Establishing the JV may impact on existing commercial arrangements with commissioned providers. 	2
4. Political oversight and governance arrangements	<ul style="list-style-type: none"> - The JV would be subject to the other party(s) strategic priorities. The extent of control by the Council would therefore be contingent on the Council's shareholding within the JV (e.g. a controlling stake). - The JV would have leadership and management autonomy to make changes (strategic/operational) to deliver in the best interests of children in Rotherham. This maybe counter to wider Council strategic priorities. This creates inevitable tension between the Council's purpose, priorities, budget and the JV. - The executive structure and extent to which there are any dual roles (Council SLT and JV Executive for example) would be subject to negotiation and contract scope. For example, the role of the Lead Member and DCS will likely retain statutory responsibilities but have to navigate the 	1

	<p>relationship with the JV Board and the wider Council.</p> <ul style="list-style-type: none"> - A JV would require a new governance structure between the Council and the JV that establishes collaborative partner and inter-council relationships – a complex and time consuming process to set up and run effectively, more complex than a Trust given the role of other parties within the JV. - Establishing a JV also presents the substantial risk of losing political engagement, ownership and oversight of Children’s Services in the Borough – a key area of progress in the last two years. This is as a result of Children’s Services being ‘the JV’s problem/remit’. - The wider corporate parenting responsibilities of the Council maybe at risk, with officers (perhaps sub-consciously) deferring to the JV for children’s decisions/ services. - The risk of a ‘blame game’ between the Council, the JV or parties within the JV, particularly if performance drops or there are budget pressures, exists. 	
5. Financial viability and sustainability	<ul style="list-style-type: none"> + There may be opportunities for economies of scale and cost savings through pooled resources; streamlined procurement; more innovation as a result of selecting the right JV parties. + There would be opportunities to identify shared risk / reward options with the JV parties to incentivise cost reduction and performance linked to children’s outcomes. - The financial strength of the third parties may impact on the longevity and sustainability of the JV arrangement. - The treatment of overhead and back office services (transfer from the Council? Establish new providers?) have proven problematic in previous JV arrangements, both in terms of the cost and lack of flexibility of Council support services, and the disruption in appointing new providers. - The transition costs in moving to a JV would be significant, as per Trust arrangements but with potentially additional complexity. Research in other localities suggest set up costs of £3-5m – costs which the Council could not carry within its existing revenue budgets. - It is likely that JV arrangements bring additional tax and VAT implications, particularly the treatment of irrecoverable VAT which add a 20% cost to services in scope. - Alongside the cost of set up, there are additional costs to the Council, including for example the treatment of buildings that are co-located between services; the separation of services; establishing new processes to manage the inter-relationship with the JV. 	2
6. Workforce	<ul style="list-style-type: none"> + The JV would introduce greater freedoms and flexibilities to recruit, develop and performance manage staff, with more flexible packages of employment benefits. + Staff would transfer (under TUPE) to the new entity. This brings both benefits (ability to use the experience of existing staff) but is also a complex, and time consuming process, particularly given the multi-party dimension of a JV structure. + Some the Children’s Services leadership team would transfer to the new entity, providing stability 	2

	<p>and ensuring the Improvement journey ethos continues within the new entity.</p> <ul style="list-style-type: none"> + The transfer to a new organisation may facilitate and be a stimulus for practice improvement – establishing a new culture via symbolic changes to a new organisation identity. – If RMBC did not have a controlling stake in the JV (less than 50%) then the JV would be able to lawfully change the T&Cs of employees compared to RMBC. The cost benefits of this (and the increased flexibility to recruit staff with alternative benefits packages) may be negated by the lack of control the Council would have. – The transfer process, however well managed, introduces uncertainty to staff and may result in internal focus rather than the improvement journey and collaborative work with partners. – Collaboration with the third party on areas such as recruitment, retention may deliver cost improvements and reduce agency staff use, and improve social worker retention. 	
7. Integration	<ul style="list-style-type: none"> – Moving to a JV model presents a significant threat that Children’s Services becomes a more entrenched silo, not engaging with wider priorities and the needs of the borough. This can impact on service issues ranging from transition from Children’s to Adult Social Care; to the need for education and skills considerations being linked to wider economic growth policy (e.g. birth to adulthood strategies). – There may also be a direct impact on children’s outcomes through a less integrated approach with partners to early help and managing the demand drivers for LAC. – Research from other localities has highlighted the crucial role of the scope of any new entity services, particularly the ‘grey areas’ where a JV, Council and local partner services interact in terms of ownership and referral processes. Fragmentation, a lack of consistency and ownership are highlighted as particular risks to outcomes. 	1
8. Risk	<ul style="list-style-type: none"> + The right JV partner may, subject to effective contracting, cultural fit etc, help improve the pace of the Improvement journey, through increased innovation, best practice etc. – The JV model presents a very practical problem of identifying the right JV partner, that brings both the right technical, managerial and sector/practice specific capabilities, alongside a good cultural fit with the Council and its staff. – The JV presents additional complexity over and above Trust arrangements. This may increase the cost of set up, extend the contracting and mobilisation process. – The JV presents additional governance and alignment risks over Trust arrangements, given the role of third parties, potential conflicting priorities, and risks to the integration of provision. – There is limited evidence of large scale JV activity within children’s social care. There are smaller scale examples of partnership / commissioning activity in particular services, but not on the size, scope or complexity of Children’s Services in Rotherham. – There are risks involved in identifying and contracting with parties with the right values, financial 	2

	<p>strength and relevant skills/experience to add real value to the JV.</p> <ul style="list-style-type: none"> - The Council's budget challenge will remain a challenge for Children's Services alongside the Improvement programme within this model. - Demand challenges will continue to present a challenge to the sustainability of the Children's Services model within a JV. 	
	TOTAL SCORE	15

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Option 8 – Shared Service

The Council may chose to establish a Shared Services agreement with another local authority (or wholly owned company) which would provide services as agreed within a contract or SLA. The scope of the service would determine the level of risk and transition costs to the Council.

Criteria	Evaluation	Score
1. Child Focused	<ul style="list-style-type: none"> + Within a Shared Service arrangement, the Council would retain control of Children’s Services commissioning / delivery but collaborates on certain aspects or services where: there is good quality provision provided by another authority; the authority has an evidenced track record of providing those services; the relationship brings additional innovation / interventions to drive Children’s Outcomes in Rotherham. + Because the extent of Shared Services would be at the discretion of the Council, a starting point would be that the Council would only select services that would demonstrably improve children’s outcomes in the borough. + Identifying the right Shared Services provider would bring additional specialisms, expertise and innovation to meet children’s needs (including learning from other areas that may have been through an Improvement journey) + If the Shared Service provider is co-terminus with Rotherham there may be a positive geographic impact in terms of cross border working around school clusters, or out of borough LAC placements + Alongside the specific contracted / SLA services provided by the other party(s), there maybe more informal peer to peer learning and sharing of best practice to enhance children’s outcomes + As per in-house options, by retaining control of Children’s Services, the Council would ensure that all services are focused on Rotherham being a child centred borough, not only the remit of Children’s Services. + The Council would maintain its corporate parenting role and ensures Member and senior officer ownership for children’s outcomes in the borough. – The scope of the Shared Services (in terms of the breadth/depth of children’s services) may impact on the delivery of children’s outcomes. The handoffs / referrals between each party may result in fragmentation and a loss of the systemic reforms underway. This includes the integration with education, early help, skills and employment. – The scale of disruption could be significant in terms of management focus, cost of transition and staff transfers to elements of Children’s Services delivered by the third party. This may unavoidably impact on children’s outcomes as staff/managers focus internally rather than on the 	4

	Improvement journey.	
2. Partnerships	<ul style="list-style-type: none"> + The Council has direct experience of collaborating with other local authorities in South Yorkshire and the region, including collaborative working in Children’s Services such as the Regional Agency Protocol to drive down costs of Social Workers and the development of Regional Adoption Agency proposals – The scope of Shared Services would determine the impact on existing partnership arrangements. If significant elements of Children’s Services are transferred this would have a corresponding impact on partnership working arrangements. – Effective partnership working (with the CCG, the NHS Trust; SY Police; schools) is contingent on stable long term trusting relationships between key personnel, and robust supporting processes. If parts of the service are transferred to a new provider this may bring uncertainty, potential changes to staff roles and processes and accountabilities. – The strength of partnership working under Shared Services arrangements would be contingent on ongoing leadership from Children’s Services management team to prioritise local partnership work alongside internal service improvements and contract management of shared services. 	3
3. Commissioning	<ul style="list-style-type: none"> + The Shared Service could operate at the commissioning or provider level (or both). The benefits of integrated commissioning may include economies of scale; reduced unit costs; stronger relationship management with key suppliers. – The scope of the shared services agreement would impact on the complexity and timetable of any commissioning activity to appoint the Shared Service provider. The more complex and larger in scope the arrangement, the increased investment required by the Council to commission / negotiate the contract/SLA. – The Council would also required additional commercial/commissioning capacity / capability to manage the ongoing performance and outcomes of the service. – There is an ongoing risk of commissioner/provider relationship management. Given the critical interplay between Children’s Services and the wider Council, mature, open and transparent working would be required. 	3
4. Political oversight and governance arrangements	<ul style="list-style-type: none"> + The Council would retain political oversight and corporate responsibility for Children’s Services. However, the extent of the services provided by another Authority may impact on the extent of ‘ownership’ for Children’s Services. – The relationship, contingent on the scope of the services, have the risk of being more transactional rather than strategic, focusing on service delivery rather than external support and challenge at a strategic level to the Council. – New governance arrangements would need to be established to provide effective management of 	3

	<p>the Shared Services and establishes collaborative partner and inter-council relationships – a complex and time consuming process to set up and run effectively.</p> <ul style="list-style-type: none"> – The executive structure and extent to which there are any dual roles would be subject to negotiation and contract scope. For example, the role of the Lead Member and DCS will likely retain statutory responsibilities but be required to navigate the roles/services provided by another Authority – Establishing Shared Services arrangements presents the risk of losing political engagement, ownership and oversight of Children’s Services in the Borough – a key area of progress in the last two years. This is as a result of Children’s Services being ‘the Shared Service provider’s problem/remit’. – The wider corporate parenting responsibilities of the Council maybe at risk, with officers (perhaps sub-consciously) deferring to Shared Services provider children’s related decisions. – The risk of a ‘blame game’ between the remaining Council services and the Shared Service provider exists. 	
<p>5. Financial viability and sustainability</p>	<ul style="list-style-type: none"> + There may be opportunities for economies of scale and cost savings through pooled resources; streamlined procurement; more innovation as a result of selecting the right shared services provider. + There would be opportunities to identify shared risk / reward options with the provider to incentivise cost reduction and performance linked to children’s outcomes. + Compared to a Trust model there is a comparatively low cost of transition to the Shared Service model, contingent on the scope of the arrangement. The Council would be contracting with an existing entity. – The Council would have less flexibility to invest additional funds in Children’s Services to meet demand if elements of the service are the responsibility of a third party. – Additional demand risks to Children’s Services may remain with the Council, directly impacting on the Council’s budget. – The financial strength of the third party may impact on the longevity and sustainability of the Shared Service arrangement. The party may chose for financial (or other reasons e.g. political) to disengage from the shared service arrangement. 	<p>3</p>
<p>6. Workforce</p>	<ul style="list-style-type: none"> + Collaboration with the third party on areas such as recruitment, retention may deliver cost improvements and reduce agency staff use, and improve social worker retention. + Where staff are in scope of transfer, this may facilitate and be a stimulus for practice improvement – establishing a new culture via symbolic changes within a new organisation. It may also ‘raise the game’ of the services that remain within Council control/delivery. – Contingent on the nature of the Shared Service arrangement, TUPE may apply, resulting in staff 	<p>3</p>

	<p>transfer and the relative benefits/disadvantages as laid out under the 'new entity' models described above i.e. uncertainty; distraction; lack of change as a result of the same management/staff delivering the service.</p> <ul style="list-style-type: none"> – With another local authority providing the Shared Service, there may not be the improvements in flexibility / freedoms to recruit new staff and offer alternative benefit packages. – Contingent on the scope of the Shared Services, the transition process may result in internal focus rather than the improvement journey and collaborative work with partners 	
7. Integration	<ul style="list-style-type: none"> – Contingent on the scope of the services agreed, there may be a direct impact on children's outcomes through a less integrated approach with partners to early help and managing the demand drivers for LAC. – Alongside the integration of Shared Services provision with partner services (Schools, Health etc) the issues would remain regarding the 'grey areas' where the Shared Services provider, the Council and local partner services interact in terms of ownership and referral processes. Fragmentation, a lack of consistency and ownership are highlighted as particular risks to outcomes. 	3
8. Risk	<ul style="list-style-type: none"> – There is a lack of robust evidence to demonstrate that Shared Services, at a large scale, within Children's Services will deliver sustained improvements. – Where shared services have been established for Children's Services, they have been developed on the back of a long history of collaborative working. In South Yorkshire there is a lack of history of shared services in social care. The adoption of a Shared Services model would be a learning curve for the authorities involved at the same time as focusing on delivering the Improvement programme. – There is also a practical risk in so far as the self assessment and Ofsted ratings of neighbouring authorities in South Yorkshire are not strong – certainly each authority (and the Doncaster Children's Trust as referenced in the Trust section above) would require detailed due diligence as part of the commissioning process to establish the quality and performance impact over and above the Rotherham baseline. – Realism would continue to be required on the pace of change – both in terms of the time to deliver the Shared Services agreement (12 months) and then sustain the improvement journey over the next three years. – The Council's budget challenge will remain a challenge for Children's Services alongside the Improvement programme within this model. Additional pressure may be exerted to deliver savings through to 2020 if other parts of the Council do not deliver their savings. – Demand challenges will continue to present a challenge to the sustainability of the Children's Services model. 	4

	TOTAL SCORE	24
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Annex 2.

1 Terms of Reference

1.1 The following terms of reference were agreed by the review group:

- To identify the strengths and weaknesses of alternative management arrangements (AMA) that are currently being used by councils in delivering children's services, highlighting in particular what has driven and sustained service improvement in different areas.
- On the basis of this evidence, to make recommendations on the most appropriate model of governance and delivery based on Rotherham's current and future ambitions for children's social care services.

1.2 The review compared and contrasted AMAs of social care and how this impacts on accountability, improvement, wider corporate working and the delivery of the authority's statutory social care duties. In considering AMAs, specifically those outlined by Commissioner Myers, the review explored the potential impact that these could have on the achievement of outcomes for children and young people; financial sustainability; and how AMAs support innovation and transformation within Children and Young People's Services. Also central to members' consideration was how alternative models could support the Council's strategic response to the seven tests for RMBC children's social care set out to the Department for Education (detailed below).

1.3 The following cross-party group of members of the Improving Lives Select Commissions undertook the review:

- Cllr Leon Allcock
- Cllr Maggi Clark (Chair)
- Cllr Victoria Cusworth
- Cllr Jayne Senior
- Cllr Peter Short

2 Seven tests Children and Young People's services (as set out by Commissioner Newsam)

- 2.1 **Well-functioning corporate services** which prioritises children's social care and deliver effective financial, human resources and infrastructure support. It is critical that the corporate leadership is well engaged with the issues within children's services and provides effective support and challenge. I have outlined the risk that energy and resources will lean towards services already handed back at the expense of the prioritisation on children's social care services but it is clear to me that improvement will not be sustainable without high quality human resources, financial, legal and infrastructure support
- 2.2 **Stable and capable leadership** at both a Member and officer level. There are all out elections in May, and the Labour Group has indicated that if it returns to administration the cabinet will remain largely as is, allowing the continued development of the existing members. If that is not the case then there is the wider consideration of developing the necessary skills and experience of the new councillors. Cabinet meetings are now being held in public so over the next few months it will be a measure of readiness to see how well portfolio holders manage their new responsibilities. A permanent senior management team in the Council has been appointed and the Children's Directorate now has the benefit of a permanent departmental leadership down to heads of service. By September I would expect to see much less reliance on temporary managers at that level.
- 2.3 **Continued improvement in the quality and effectiveness of practice**, including progress against the actions in the improvement plan and evidence that recommendations from quality assurance, audits and Ofsted improvement visits have been dealt with promptly and effective. The Strategic Director has set out a vision for the delivery of outstanding child-centred services through a major transformation programme. I would expect this to be widely understood and embedded by September and progress robustly programme managed.
- 2.4 **Strong and supportive partnerships**. My progress report signals a step change in the partnership through better leadership, increased collaboration and improved working practices. Although there is much improvement, to date, partnerships have not been well supported by transparent and rigorous governance and going forward there is a need to be clear about shared priorities and how they are resourced. The new Children and Young People's Partnership (Children's Trust Board Arrangements) was re-launched in February 2016 with excellent representation

across the system, including young people, and three task and finish groups were established to lead on: development of a Children and Young People's Plan; Embedding Early Help and the development of a well-performing workforce across the partnership. Over the next six months, it should be delivering against this plan and harnessing resources around a shared agenda. Overall, by September, I would want the LSCB and the Strategic Partnership to be making good progress and this partnership commitment to be evidenced through improved outcomes.

- 2.5 **Robust financial management.** As I have indicated, the budget set for 2016/17 is unlikely to meet the forecast demands. The Strategic Director has led on the production of a medium term financial strategy which will both drive more cost effective practices through service transformation and deliver savings over the lifetime of the plan. To support him and his management team he will need the senior financial capacity with the right skills and experience to undertake the necessary financial modelling. While this has been agreed in principle, it will take some time before the benefits of better resource management and more effective commissioning begin to be evidenced in the bottom line.
- 2.6 **A compelling strategy for the workforce** which has delivered a settled structure for children's social care, more permanent social care staff in post, nearing national averages, and a return to only using interim staff as a means of upskilling or supplementing, when necessary, the permanent staffing establishment. I would expect to see in place comprehensive professional development for staff at all levels supporting effective practice and staff retention.
- 2.7 **Effective performance information and quality assurance** which is being used to measure outcomes for children and improve practice. Data has been used very effectively to monitor and drive better performance but to improve practice further there needs to be a greater emphasis on the outcomes being achieved and a clearer understanding of the quality of practice with children and young people. Performance information needs to demonstrate stable and sustained delivery of services, milestones set out in the improvement plan need to be met or on course for delivery, the budget agreed and the transformation programme for children's social care services understood and delivering.

3 The schedule of meetings

3.1 The schedule of meetings and the subject matter discussed at each is set out below:

14th November 2016

- to discuss scope of the review;
- outline of policy context - "Putting Children First";
- recap on previous visits/telephone conversations undertaken by CX/DCS

18th November

- agree terms of reference
- consider available literature (detailed in Section 13)

30th November

- Isos Workshop (1) – to consider key enablers and timescales for improvement from LGA action research

13th December

- To agree lines of enquiry (in light of Isos workshop)
- Agree visits

23rd January – 28th February 2017

- Visits /telephone conversations with Local Authorities (detailed in Section 7)

17th February

- Isos Workshop (2) – where is Rotherham on its improvement journey and what are the priorities for the next stage?

13th March

- Review of evidence to date
- Consideration of improvement evidence (CYPS)

15th March

- Children's Improvement Board – high level sector led challenge of approach adopted and initial findings

10th April

- Agree final report
- Agree recommendations

4 Schedule of visits

4.1 Outline of visits/discussion programme:

London Borough of Richmond upon Thames <i>Community Interest Company with neighbouring authority</i>	Tuesday 19th April 2016
Royal Borough of Windsor and Maidenhead <i>Transferring to Community Interest Company with neighbouring authorities</i>	Tuesday 3rd May 2016
Slough Borough Council <i>DfE Trust</i>	Tuesday 3rd May 2016
Hampshire County Council <i>Agency Arrangement</i>	Wednesday 1st June (tele-conference) 2016
London Borough of Kingston upon Thames <i>Community Interest Company with neighbouring authority</i>	Wednesday 15th June (tele-conference) 2016
Doncaster Council and Doncaster Children's Trust <i>Neighbouring Authority – DfE trust</i>	Monday 23rd January 2017
Cornwall Council <i>Sector Led Improvement</i>	Monday 6th February (tele-conference) 2017
Birmingham City Council <i>Wholly owned company (shadow arrangements)</i>	Wednesday 9th February 2017
Leeds City Council <i>Sector Led Improvement</i>	Thursday 23rd February 2017
London Borough of Bromley <i>Intervention (Commissioner)</i>	Tuesday 7th March (tele-conference) 2017

Rotherham Metropolitan Borough Council Improvement in local children's services

Members' Overview & Scrutiny Committee review
Second workshop: Summary

Isos Partnership

February 2017



Introduction

Context: Children's Services Overview & Scrutiny Committee review

- In 2016, members of Rotherham Metropolitan Borough Council's (RMBC) Children's Services Overview & Scrutiny Committee initiated a review of the options for sustaining rapid and long-term improvement in children's services.
- The purpose of the review was to gather a wide range of evidence from within Rotherham's children's services, from across the Council as a whole, from partners supporting Rotherham's improvement journey, and from other local areas about what they had done and what supported had helped them on their improvement journey.
- As part of this process, Isos Partnership, working with the Local Government Association (LGA), was invited to support this review by drawing on the recent LGA-commissioned research we have carried out. This focuses on the enablers and barriers of improvement in local children's services, and on models of external improvement support.

The workshops: Isos' support for this review

- Isos was invited by RMBC and the LGA to facilitate two workshops for members of Children's Services Overview & Scrutiny Committee, senior RMBC leaders and officers, and partners in Rotherham's improvement journey. The first workshop took place on 30 November 2016, and focused on sharing and exploring the findings from our research in order to inform Children's Services Overview & Scrutiny members' evidence-gathering work in other local areas.
- The second workshop took place on 17 February 2017, and focused on drawing together the evidence around two key questions.
 1. **Where is Rotherham currently on its improvement journey?** What has been achieved, what is the evidence?
 2. **What are the priorities for the next stage of Rotherham's improvement journey?** Are conditions in place for further, sustained improvement? What support is needed?
- This document summarises the discussions at the second workshop. A small group of Councillors, officers, Commissioner Bradwell and practice partners lead Debbie Barnes took part in the workshop, bringing a range of views from different professional and lay perspectives.



1 Rotherham's improvement journey: We started with a self-assessment exercise, using the framework from our LGA action research.



Rotherham's improvement journey: This page summarises the evidence that you described to support your view of Rotherham improvement journey.

The evidence and rationale you gave for your for self-assessment scores

1

Strategic approach

There is a clear, strategic plan for improvement and clarity about “what good looks like”. The data shows a pattern of improvement and compliance with key performance measures. Core “mission-critical” services are now safe. This picture is supported by Ofsted monitoring reports and feedback from external practice partners. The focus now is on increasing the quality of practice, and ensuring members are kept aware of improvements.

2

Leadership & governance

There is now strong, experienced, credible and stable leadership, both corporately and within children’s services. Heads of Service report feeling empowered and comment positively on the difference over the last twelve months. There is not yet a full complement of team managers in place. Members are rightly challenging for evidence of improvement, and are keen to triangulate this through more regular frontline visits.

3

Engaging & supporting the workforce

The workforce is increasingly stable, as shown by benchmarking data and supported by the findings from Ofsted monitoring visits and peer review. A unifying model of social work practice and new practical tools have been rolled out, and staff say (including to Ofsted) that they understand this has been done to support their work. Positive feedback from new recruits suggests Rotherham is increasingly seen as an employer of choice.

4

Engaging partners

Stronger partnerships at a strategic level, but not always matched at an operational level. Multi-agency audits are taking place, but a more systematic and embedded approach is needed. There have been successes in building better partnerships with schools around SEND, and with the VCS. Would welcome greater challenge from partners, but requires trust and confidence to be built. There is recognition this is an incremental process.

5

Building the supporting apparatus

There is pride in an effective management information and data system, which produces accessible dashboards of benchmarked performance data. These are being used with team managers, with support to help them use data to inform decision-making. Data are being used to inform conversations about children and outcomes, not just numbers. There is further to go, however, to see the impact on outcomes and embed the voice of the child.

6

Fostering innovation

Innovation, in the sense of being open to new approaches and seeking to embed effective ideas in practice, is championed by children’s services leadership and supported by the Council (e.g. investment in new initiatives, participating in the Pause pilot, new approaches around recruitment). In time, the aim is for practitioners to be more innovative, but this comes with a level of risk and will need to be managed carefully.

7

Judicious use of resources

There has been considerable investment in supporting children’s services improvement. There is now a realistic base budget, which has been used to set robust financial plans for next three years. This provides security for children’s services improvement, but will also allow political and corporate leaders to track and monitor the impact and progress of these investments. Members are rightly keen to hold officers to these plans.

Priorities for the future: You highlighted three priorities that should be at the heart of the next stage of Rotherham's children's services improvement journey.

You identified three priorities for the next stage of Rotherham's improvement journey.

Overall, your aspiration is to foster a sense of confidence and pride in Rotherham's children's services, with a culture that is forward-facing and outward-looking, learning from others and generously sharing your experience. Informed by your self-assessment, you identified three key priorities for sustaining improvements.

1. **Ensuring consistently high-quality practice** – there was strong consensus that the next stage of Rotherham's improvement journey should be focused on the transition from a safe, compliant, core service to a consistently high-quality one. Embedding *signs of safety*, strengthening audits and routines to drive practice improvement, strengthening the voice of the child, and securing improvements in LAC services were highlighted as key areas of focus.
2. **Strengthening your engagement with key partners** – you want to build strong relationships with partners so that they are working alongside the Council in planning, developing and delivering services, and are providing healthy, mutual challenge about children's services improvement. In particular, you wanted to strengthen partnership working (a) to tackle the impact of domestic abuse, and (b) with key health services – starting by maximising the value of RMBC-controlled services such as school nurses and health visitors, then seeking to influence improvements in CAMHS services, and then developing approaches with other therapeutic support services.
3. **Maintaining a sustainable budget** – implementing effectively and closely monitoring your three-year financial plans, and ensuring investments in frontline practice support early help and help to reduce demands on statutory services.

You highlighted two areas where you would welcome further support on the next stage of your improvement journey.

1. **Practice-focused support** – you saw an important and ongoing role for external scrutiny, but also that this needed to be balanced with practice-orientated support from other local areas and practitioners in order to support ongoing work to improve the consistency and quality of practice – e.g. around support for LAC, the voice of the child.
2. **Partnership working** – part of the role of external scrutiny in the future may also be to act as the “honest broker” to strengthen relationships, and to build trust, confidence and mutual challenge among strategic partners.

Priorities for the future: We used our LGA research to consider the evidence of whether the conditions are in place for sustained improvement in Rotherham.

Condition	Descriptor	Evidence
Capacity to self-assess accurately	Able to identify strengths and weaknesses, accepts external feedback, and uses external support effectively.	<p>Routine self-assessments are embedded – growing culture of reflection and challenge, now systematic.</p> <p>There is a high level of congruence between internal self-assessment and external feedback – peer reviews, practice partner reviews, Commissioner reports, Ofsted monitoring visits. Clarity about what is being invested in improvements, and how this is working.</p> <p>Members are asking probing questions of children’s services – this is positive and important. Equally important is the willingness of members to triangulate with feedback gathered from thematic frontline visits.</p> <p>Continued outward-facing engagements – Rotherham has not “hunkered down”, but has remained open to others.</p>
Capacity to develop strategic priorities that will address weaknesses	Understands what works to drive improvement, and able to develop strategies and actions to deliver improvement.	
Capacity to implement these strategic priorities swiftly and effectively	Able to put in place right resources, workforce capacity, and corporate, political and partner support for improvement.	

2 Priorities for the future: In considering options for the next stage of Rotherham's improvement journey, you highlighted seven key principles.

You argued that however Rotherham's children's services are arranged in the future, the approach agreed upon must ...

- 1 **Be in the best interests of children in Rotherham** – the right future arrangements must be those that provide the best platform for sustaining improvement services that support children and keep them safe
- 2 **Be sustainable** – the right future arrangements must be those that offer a sustainable long-term basis for delivering high-quality children's services
- 3 **Work *with* people, rather than doing *to* them** – particularly by engaging RMBC staff and key strategic partner agencies
- 4 **Involve robust external scrutiny** – you recognise this will remain an important part of Rotherham's ongoing improvement journey, and should be embraced as an opportunity to track progress and address barriers
- 5 **Maintain strong elected member oversight of children's services** – all Councillors, including the Lead Member, continue to exercise corporate parenting and scrutiny roles (and, in case of the Lead Member, statutory responsibilities) to secure the best outcomes for young people in Rotherham regardless of which model is adopted
- 6 **Maintain the integration of services** – you are keen to avoid creating barriers at key service interfaces, such as between early help and social care, or with education services
- 7 **Maintain links with other local services and strategies that contribute to young people's development and long-term outcomes** – particularly the links with housing, economic growth and jobs and skills

Priorities for the future: The next stage of Rotherham's children's services improvement journey – final points from the workshop discussion.

- **Through the Overview & Scrutiny Committee review and your discussions with national decision-makers, you are keen to have a principled, evidence-informed discussion about how best to sustain improvements in Rotherham's children's services.** You have set out priorities (improving the quality of practice, strengthening partnerships), seven core principles, and specific actions around strengthening self-assessment and challenge (the voice of the child, enabling members to triangulate evidence through thematic frontline visits) that can inform your considerations.
- **One of the key messages you emphasised in the workshop was that you are now two years into your children's services improvement journey** and, furthermore, that whatever options are considered in the future must not destabilise what has been put in place over the past two years.
- **The Overview & Scrutiny Committee review has visited local areas that have established or are establishing alternative delivery models.** You are aware that the numbers of alternative delivery models are small, that many are in their early stages, and therefore that there is not a firm and broad evidence-base about their progress. In our LGA research, we explore two types of alternative delivery models – executive leadership models and new organisations – and discuss some of the potential benefits local areas that have developed these models have achieved. A key finding from our research is that alternative delivery models can play a role in helping to overcome persistent and systemic barriers and to create the conditions for sustained improvement to take place. (Another key finding, however, is that these benefits are not exclusive to alternative delivery models – rather, in certain circumstances, they have helped to overcome barriers that the local area had not been able to previously.)
- **As we discussed in our workshop, you are confident that you will be able to draw on evidence to show that improvements are taking place in Rotherham's children's services.** You agreed that a key action was to marshal the evidence from external peer reviews, practice partner feedback, Commissioner reports, and Ofsted monitoring visits in order to validate and provide assurance of the progress and improvements that have been made in Rotherham.
- **Equally, however, you were not complacent and recognised that the way in which children's services may be delivered in the future would need to evolve and change according to the demands on the service,** and that there may be benefits in exploring new ways of commissioning local services to meet local needs more effectively.

Annex 4:

Aston Hall J& I School
Church Lane
Aston
Sheffield
S26 2AX
Tel: 0114 2879811

27th March 2017

Councillor Maggi Clark

Dear Councillor Clark,

Many thanks for the opportunity afforded to me to share my views regarding the future direction of children's services in Rotherham. As a serving head teacher with the Local Authority for the past fifteen years I have been witness to many changes, both inside and outside education, and supported many of the most vulnerable children and families through particularly challenging and potentially life-changing circumstances. School leaders are also familiar with the improvement cycle of peer review, partner feedback, Ofsted Inspections and action planning to address priority development areas. As part of the CYPS Strategic Improvement Board I have seen at first hand the journey Rotherham has been on from the inception of the Board until now.

It would be accurate to say that Rotherham is a very different town to the one it was two years ago. The depth and breadth of improved practise within Rotherham is demonstrable in many areas such as improved workforce capacity, improved response times to referrals, updated and more responsive systems such as multi-agency safeguarding hub, locality teams and Early Help. It is heartening to see partners from Health, Social Care, Police, Education and the Borough sit around a table and talk knowledgeably about what is making a real difference to the lives of children and families in the town and also recognise what more can be done.

The changes and systems now in place are starting to make things better for our most vulnerable residents and stabilise lives that were once out of control. it would be fair to reflect that whilst some exemplary practice is evident and improved outcomes are being reported daily, there are still some are pockets of weakness and areas to be further developed but all partners are well-sighted on these and have robust plans in place to swiftly address them.

It would seem sensible therefore to endorse therefore the preferred option of continuing to work with the current model of peer practice partnership, which provides the opportunity to put up that reflective lens to all development areas. This methodology also provides opportunities for Rotherham to continue to learn from good and outstanding partners and adopt and amend and improve their systems and practices whilst creating some of our own. The change to an alternative delivery model would not be without risk and may actually undo some of the improvements now in place. I am reassured that external peer review, partnership feedback, monitoring visits and commitment high quality partnership working is the correct model and that we will continue to see impact and further improvement.

Yours sincerely,

Donna Humphries
Executive Headteacher

From: ROBERT ODELL [<mailto:Rob.Odell@southyorks.pnn.police.uk>]

Sent: 28 March 2017 13:15

To: Hatton, Lesley

Subject: RE: Letter from the Chief Executive

Lesley

Thank you for the letter

For the sake of completeness and having discussed it this end we concur that the current arrangements are the best option going forward....

Regards

Rob

From: Pepe Di'Iasio [<mailto:pd@waleshigh.com>]

Sent: 03 April 2017 17:42

To: Hatton, Lesley

Subject: Re: FAO Chief Executive, RMBC

Good afternoon Sharon,

Thank you for the opportunity to contribute to this important discussion.

I have been both proud and privileged to work alongside such dedicated professionals over the last two years as part of the 'Improvement Board' and feel I can take some (small) credit from the considerable steps that we have seen taken to improve the quality of provision and service to the young people and families of Rotherham.

I would certainly want to see a continuation in the existing arrangements whereby the LA is supported through a variety of peer to peer reviews and external challenge from identified providers of outstanding practice from across the country. I believe that it is fair to say that this has demonstrated high quality impact and is starting to 'bare real fruit'. I would be seriously concerned to see this progress jeopardised from a potential change in momentum or direction at this stage.

I remain convinced that young people, schools and families from across Rotherham remain best served by their local communities and through a local model within the Local Authority and would wish to see this remain

Pepe Di'Iasio
Headteacher
Wales High School

From: Janet Wheatley [mailto:Janet.Wheatley@varotherham.org.uk]

Sent: 27 April 2017 12:11

To: Webb, Caroline

Cc: Hatton, Lesley

Subject: RE: Request for assistance: Scrutiny review of Alternative Management Arrangement for Children's Services

Hi Caroline

Thank you for offering VAR the opportunity to express our views about the management arrangements for Children's Services going forward. The views below represent our views and input from the Children Young People and Families VCS Consortia

Our view is that with the current refreshed leadership and the changes instigated, Children's Services needs a period of stability. There also needs to be on the part of stakeholders, a realistic timeframe to embed the change management and the associated culture and relationships that have and are continuing to develop

Our experience has been the Children's Services have worked positively in partnership with the voluntary and community sector (VCS) and continues to do so. Some of the examples of this are:

1) VCS Input and direct involvement in the Peer Challenge review meetings / process

2) VCS direct input, consultation, representation and involvement in a number of both strategic and operational boards, to ensure best outcomes for CYP. Some examples of these boards / groups includes:

- | | |
|----------------------|--------------------------------------|
| People's Partnership | i) The Children & Young |
| Board | ii) The Local Children Safeguarding |
| sub group | iii) Performance & Quality Assurance |
| group | iv) Learning and Improvement sub |
| | v) CSE & Missing sub group |
| Voice & Influence | vi) Child Centred Borough and YP |
| | vii) Sexual Health Strategy Group |
| | viii) Youth Offending Board |

3) VCS direct input, consultation and involvement in the development of various pieces of work and initiatives, for e.g:

- i) Development of the Children's Plan
- ii) Development of the Early Help strategy
- iii) Development of the SEND offer

4) Partnership and voluntary community sector (VCS) input into the recruitment and selection of key personnel in Children Services, for e.g:

- i) Deputy Director Children Services
- ii) Assistant Directors
- iii) Senior commissioning roles
- iv) Heads of Localities & Early Help

5) Recognition of the value of the VCS, by direct support of the VCS infrastructure that supports the development and contribution / co-ordination of VCS into and alongside the CYP agenda and service areas; by part funding the Children, Young People & Families Consortium, without which there would not be the level of VCS engagement with CYP Services.

Rotherham Borough Council, along with a number of other statutory partners have supported the refresh of the local COMPACT with voluntary and community organisations and the reviewed version has now been adopted in Rotherham. The agreed COMPACT will provide all partners with a framework to continue to work even better together for the benefit of Rotherham communities.

We cannot say we have any experience or expertise re the merits and disadvantages of particular / alternative management arrangements for Children's Services and nor have we assessed any evidence of alternative arrangements working better elsewhere. The VCS does constructively challenge and raise issues as required and our view is that we are actively talking with Children's Services about co-production of services and there is a greater than ever recognition of the importance of prevention and early intervention; and the particular role of the VCS.

In light of all the above we agree with the preferred option of Rotherham Metropolitan Borough Council's Improving Lives Select Commission scrutiny review to continue with the preferred option of continuing with the current model of peer practice partner approach. We also believe that this will secure the most rapid and sustainable improvements for children and young people's services in the short term. I would be grateful if you could pass our views onto Cllr Maggi Clark

If you have any queries or need anything further please do not hesitate to contact us.

Best Wishes

Janet

Janet Wheatley
Chief Executive

Voluntary Action Rotherham
The Spectrum
Coke Hill
Rotherham S60 2HX

Tel: 01709 829821
Fax: 01709 829822
Email: janet.wheatley@varotherham.org.uk
Web: <http://www.varotherham.org.uk>

Registered Charity Number: 1075995
Registered Company Number: 2222190

Our reference LB/CH/smj/125

Your reference

Date 6th April 2017

Rotherham Hospital
Moorgate Road
Oakwood
Rotherham
S60 2UD

Telephone 01709 820000
www.therotherhamft.nhs.uk

Sharon Kemp
Chief Executive
Rotherham Metropolitan Borough Council

Dear Sharon,


I am writing in response to Scrutiny Commission's review of children's services in Rotherham set out in your letter of 23rd March 2017.

I can confirm that The Rotherham NHS Foundation Trust (TRFT) supports the preferred option, to continue with a peer practice partnership approach. We agree that this is likely to secure better and sustainable outcomes for Children and Young People.

It is clear from TRFT's perspective, that Rotherham MBC has made significant progress over the last two years and that continuing with the current approach will provide the greatest opportunity to see these changes continue and become embedded. Thus, changing the delivery model at this stage could add significant risk.

I am pleased that the review has not ruled out the adoption of other approaches in the future and we are very interested in exploring further integration opportunities between our organisations moving forward, similar to those that are evolving for adult services. This will allow the exploration of alternative delivery models and on the basis that we are committed to maintaining this dialogue, TRFT is supportive of the proposed approach taken by RMBC.

Yours sincerely



Louise Barnett
Chief Executive

Louise Barnett
Chief Executive, The Rotherham NHS Foundation Trust

Direct Line 01709 424576
Executive Assistant: Sharree Johnstone
Direct Line 01709 424001 Fax 01709 304200 Email sharree.johnstone@rothgen.nhs.uk





Rotherham
Clinical Commissioning Group

Direct Dial: 01709 302009
Our ref: CE/WAC
E-mail: chris.edwards@rotherhamccg.nhs.uk
Date: 30 March 2017

Oak House
Moorhead Way
Bramley
Rotherham
S66 1YY

Sharon Kemp
Chief Executive
RMBC
Riverside House
Main Street
Rotherham
S60 1AE

Dear Sharon,

Thanks you for your letter dated 23rd March 2017.

As a key stakeholder we appreciate that you are seeking our views on the direction of travel.

I can confirm that NHS Rotherham CCG supports your preferred option of continuing with the peer practice partner approach.

We look forward to continue working closely with you to continue to improve services in the future.

Yours sincerely

Chris Edwards
Chief Officer

Chief Executive Office

Woodfield House,
Tickhill Road Site, Tickhill Road,
Balby, DONCASTER,
DN4 8QN
Tel: (01302) 796400

Email: kathryn.singh@rdash.nhs.uk
Text only phone for deaf/hard of hearing: 07771 933869

Our ref KS/dj

18 April 2017

Sharon Kemp
Chief Executive
Rotherham MBC
Riverside House
Main Street
ROTHERHAM
S60 1AE

Dear Sharon

Further to your letter of 23 March 2017 in respect of seeking our views on a preferred option for Rotherham MBC's Children's Services I am now able to provide you with a response.

Firstly, please accept my apologies for our delayed reply, however thank you for the opportunity to comment.

Having considered the options that Sir Derek has set out, we would concur that the most sensible option to support is indeed the preferred option of the continuation of the current model.

I hope this response is helpful

Yours sincerely



**KATHRYN SINGH
CHIEF EXECUTIVE**

Rotherham Local Safeguarding Children Board

1st Floor, Wing A, Riverside House, Main Street,
Rotherham, S60 1AE
Tel: (01709) 254925 Fax: (01709) 373336



3rd April 2017

Councillor Maggi Clark
Chair, Improving Lives Select Commission
Rotherham Metropolitan Borough Council

Dear Cllr Clark,

I am writing in response to your request of my observations concerning your review on the potential future arrangements for the delivery of children's services. My comments are based on observations made in my role as independent chair and on the evidence from the work of the LSCB since I came to Rotherham 17 months ago. I have used the action research into improvement in children's services commissioned by the Local Government Association to inform my response to you.

The appointment of permanent staff to leadership positions in the council has strengthened the co-ordinated sense of purpose for children's services. The council has embraced its responsibility for children's services as part of its overall functions. It has recognised the need to focus HR and legal services support to drive the necessary children's services improvements and taken action to ensure that its wider functions safeguard children. The plans to realise the ambition for Rotherham to be a child centred borough are as yet at an early stage but they have the potential to provide a powerful context within which children's services can understand the needs of the population of children it serves and be sensitive to their views.

Detailed performance information on children's services is now scrutinised by leaders and councillors, and is increasingly open to partners. There is a shared understanding of the improvements made in complying with statutory requirements and the need now to move to improvements in the quality of the services delivered. Children's services have also welcomed and made good use of external scrutiny and peer review as part of its improvement journey.

There are clear thresholds in place across the safeguarding system, from early help to child protection, and plans that will develop common language and understanding about levels of need across partners.

Relationships with partner agencies are developing but there is still significant progress to be made towards the degree of trust, transparency and challenge at all levels, from strategic to front-line, that drives good children's services. There are pockets of good partnership working but that is not yet consistent at all levels.

Progress since early 2016 has been rapid, with the pace maintained by determined leadership from the senior leaders appointed. The greatest change I have perceived since

coming to Rotherham has been in the culture of the organisation. Staff from across the council, as well as in children's services, display an increased sense of confidence and direction. Senior leaders in children's services make a point of regularly acknowledging the good practice of individuals, contributing to the development of confident professional decision-making and understanding of 'what good looks like'.

The progress I have observed in children's services is at a critical stage with crucial shifts taking place, for example, from compliance to quality in practice, from willingness to listen to children to a comprehensive engagement with children at strategic through to front line level and from openness to partnership working to a strong cohesive approach. All of these shifts require consistency and determination and anything that may cause distraction or diversion of energy should be avoided at this stage. I therefore support the conclusion of the ILSC review that the current peer practice partner model should be maintained at present.

The progress of children's services must and will of course be kept under review, both internally and by the inspectorate, and I agree that alternative future delivery models cannot be ruled out where there is evidence that these will better deliver the necessary outcomes. As LSCB chair I would want to be assured that any future proposed model could develop and sustain progress in partnership working across agencies and in particular with schools, which are crucial organisations in the safeguarding system, from early help through to child protection.

The further development of partnership working across the safeguarding system will be the focus for further improvement both through the current LSCB and its replacement as defined by the Children and Social Work Bill. The LSCB has an important role to play in securing improvements in children's services and the wider safeguarding system in Rotherham and I look forward to continuing engagement in gathering evidence on what is working and what requires further improvement.

Yours sincerely



Christine Cassell
Independent Chair to the RLSCB

C.C. Sharon Kemp, Chief Executive, RMBC

Rotherham's Children and Young People's Plan 2016 to 2019





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About This Plan

The Children and Young People’s Plan (CYPP) is a single strategic, overarching plan for local services where outcomes for children, young people and their families need to improve.

Planning is not a diversion from effective front line activity and is essential if services are to be developed to meet the needs of children, young people and families; if resources and the workforce are to be deployed to best effect; and partners focus on achieving the best possible local outcomes. The CYPP is to support the Strategic Partnership as they work together to agree clear targets and priorities for the services for children and young people in Rotherham.

The Children and Young People’s Strategic Partnership brings together a wide range of organisations including Rotherham Council, South Yorkshire Police, Health Services, Education and Colleges, South Yorkshire Fire and Rescue service and the Voluntary and Community Sector.

The strategic outcomes in this plan have been determined by the Children and Young People’s Strategic Partnership, adopting good governance principles, with a plan that is underpinned by a common vision that is understood by all parties and is based on consultation and what young people, parents and carers in Rotherham have said about services for children and young people.

The strategic priorities that would benefit from a more focused partnership approach have been identified for this plan recognising that there are other strategic plans for Rotherham which also include priorities for children and young people.

The three main strategic outcomes to be achieved for children, young people and their families in Rotherham through the Children and Young People’s Plan are:

- Children and young people are healthy and safe from harm
- Children and young people start school ready to learn for life
- Children, young people and their families are ready for the world of work.

The Children and Young People’s Strategic Partnership is accountable for the delivery of this plan and therefore will allocate and approve the resources; hold partners to account for delivery; and take a lead on engaging and involving children, young people and their families.

The Children and Young People’s Strategic Partnership is committed to developing a skilled workforce, making sure that the people working with children, young people and families in Rotherham have the skills to be able to identify, assess and intervene to support families. This will be achieved through existing organisational workforce development strategies but where a multi-agency focus is required in relation to a specific workforce issue or a multi-agency training requirement, such developments will be determined by the Children’s Strategic Partnership.

Information About Rotherham can be found at page 30 along with further details about how Our Young People, Parents and Carers have influenced the development of this Plan.

Governance Arrangements and links to Other Strategic Priorities and Plans

There are priorities of the Children and Young People's Strategic Partnership that are already integrated into other strategic plans, such as the Health and Wellbeing Strategy and the Rotherham Safeguarding Children Board business plan, which are being delivered by the respective Partnerships Boards. These include:

- **The Rotherham Together Partnership** – delivering improvements for local people and communities through the Rotherham Together Partnership Plan.
 - **Health and Wellbeing Board** – planning how best to meet the health and wellbeing needs of the local population, tackle inequalities in health through the new Rotherham Health and Wellbeing Strategy. Some of the key priorities in this strategy where the Children's Strategic Partnership will contribute to achieving include ensuring all children get the best start in life; children and young people achieve their potential and have a healthy adolescence and early adulthood; and all children and young people enjoy the best possible mental health and wellbeing and have a good quality of life.
 - **Safer Rotherham Partnership** – includes the Council and South Yorkshire Police and a range of other partners who make decisions relating to crime and community safety issues through the draft Safer Rotherham Partnership Plan. Reducing the threat of domestic abuse and reducing the harm to victims is a priority recognising that the impact of **domestic abuse** on the victim and children is severe.
- Reducing the threat of **Child Sexual Exploitation** (CSE) and the harm to victims is also a priority, along with preventing and tackling CSE recognising that CSE has a lifelong impact on its victims. Therefore, children, young people and their families must have confidence in Rotherham's multi-agency approach to prevention, support and bringing perpetrators to justice.
- **The Rotherham Local Safeguarding Children Board** – sets out the work the Board will do to help keep Rotherham's children and young people safe through their Business Plan 2016-18. The priority areas include governance and accountability; community engagement and the voice of the child; scrutinising front line practice, and children in specific circumstances including the **safeguarding of Looked after Children**, Child Sexual Exploitation and children who go missing and **Neglect**. Children suffering neglect is the biggest category of those who are suffering significant harm. Care is a vital part of our child protection system and most Looked After Children (LAC) say their experiences are good. However children in care are at greater risk than their peers and more needs to be done to ensure that corporate parenting has a positive impact on their health, education and safety and they can move successfully into adulthood.
 - **The Rotherham Looked After Children Strategy** 2014-2017 sets out the vision for the range of services provided in partnership for looked after children, identifying priority objectives to make sure that outcomes for Looked After Children are as good in all aspects of their lives.

There will also be strategies and plans that are developed over the term of this Children and Young People's Plan. For example, changes will be required as a result of the new **Children and Social Work Bill 2016 -2017** which makes provision about looked after children; to make other provision in relation to the welfare of children; and to make provision about the regulations of social workers.

Working in partnership is essential to delivering the outcomes in this plan. It is acknowledged that there are also other organisations in Rotherham and Departments of the Council that contribute significantly to improving the health and wellbeing of children and young people, for example, Leisure and Green Spaces contribute to improving the health and wellbeing of children and young people.

The Children and Young People's Strategic Partnership will work with the Health and Wellbeing Board to ensure the priorities in the Health and Wellbeing strategy that are related to children and young people and their families are implemented. The Children and Young People's Strategic Partnership will be the delivery mechanism for those priorities enabling a wider partnership focus.

The Children and Young People's Strategic Partnership will work with the Rotherham Safeguarding Children Board to keep children and young people safe and a working protocol is in place setting out the relationship between the Children's Strategic Partnership and the Safeguarding Children Board.



Foreword by Councillor Watson

I am delighted to introduce Rotherham's new Children and Young People's Plan for 2016 to 2019 which has been developed by the partners on the Children, Young People and Families Strategic Partnership. Rotherham already has successful partnership working and it is clear there is a commitment by all partners to improve the outcomes for children, young people and families in Rotherham.

The Children and Young People's Plan is a strategic plan which sets out the vision for children and young people and their families and the outcomes that need to be improved.

Our plan also details some of the ways in which we are engaging and listening to the views of young people and how they are influencing service standards. Our Young Inspectors are telling us how we need to provide more digital solutions and improve information about services, develop customer standards and improve the overall customer journey. Our Youth Cabinet have been working with Public Health around mental health and how to improve access for young people seeking help including the development of the Website 'My Mind Matters' and much more work is planned. We continue to support the LAC Promise and within the plan there are details of various services that the LAC council have influenced including some of our commissioned services.

It is acknowledged that there are other strategic plans in place about keeping children and young people safe and improving their health and wellbeing and it is the intention that the Children and Young People's

Plan is an overarching plan which focuses on where outcomes need to be improved that would benefit from a wider partnership focus.

There are a number of focused priorities within this plan to ensure children and young people are healthy and safe from harm, are able to start school ready to learn for life and from being engaged in learning, they are ready for the world of work.

The challenge the Children and Young People Strategic Partnership faces is to achieve better outcomes for children and young people with fewer resources. So it is important that the resources that we do have are used effectively and that staff have the right skills to turn around the lives of our most troubled and challenged families.



Councillor Gordon Watson

The Vision for Rotherham's Children and Young People

The Children and Young People's Strategic Partnership have identified a vision and three main Strategic outcomes that align to the points in a child's life when they will require additional help and support.

Our Vision is to be a child centred Borough which will ensure our children, young people and their families:

- are healthy and safe from harm;
- start school ready to learn for life
- are ready for the world of work
- working with children, families and our partners, for Rotherham's Children's Services to be rated outstanding by 2018.

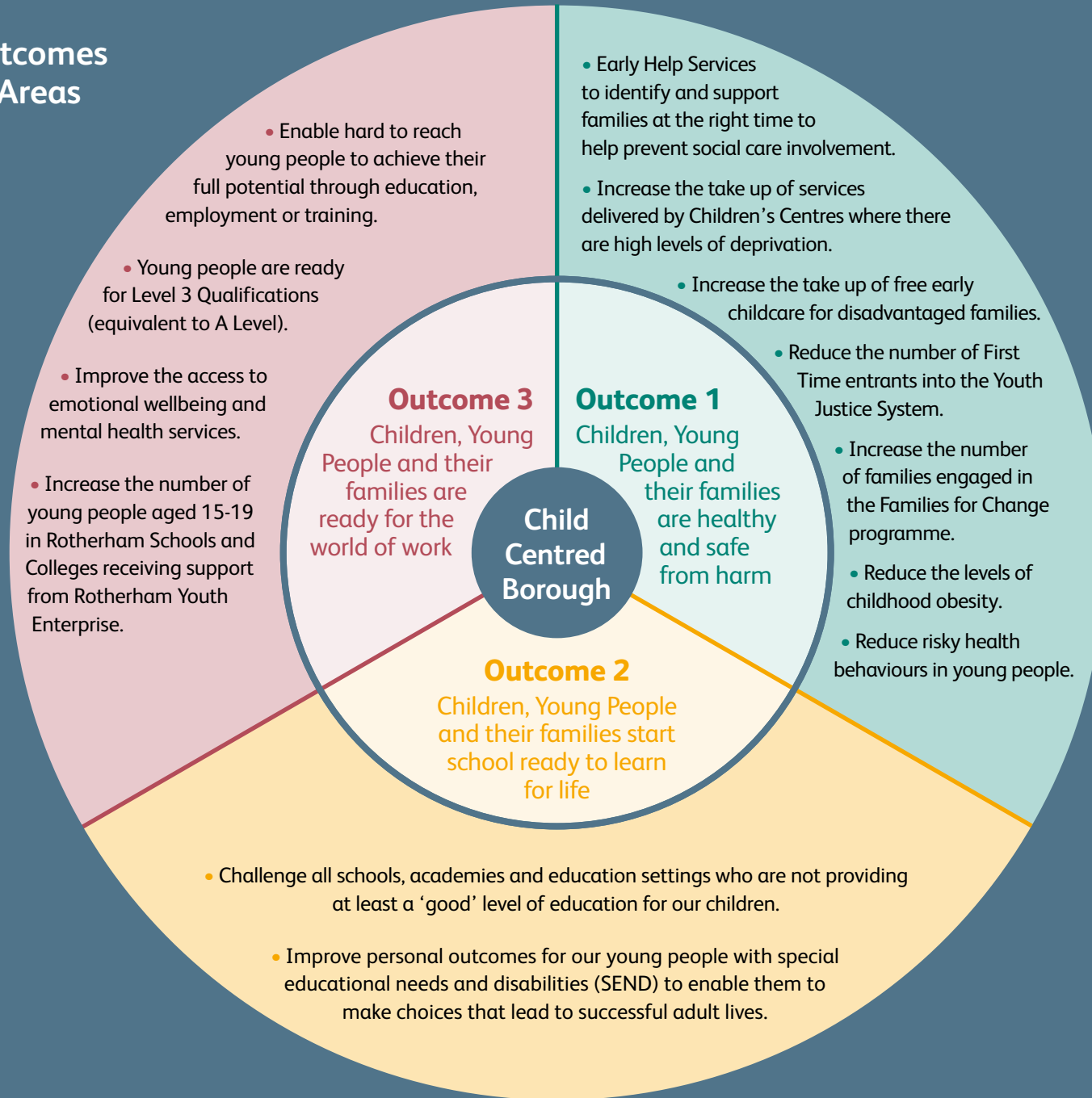
This will mean our children, young people and families are proud to live and work in Rotherham.

A Child Centred Borough

We adopt a partnership approach because achieving improved outcomes for all children and young people in Rotherham is the responsibility of everyone who works with and cares about children and young people. Our aspiration to become a Child Centred Borough is at the heart of our Vision to ensure our children and young people are safe, healthy, successful, heard, involved and respected at home, at school, in their communities and are part of the decisions that affect them.

Establishing the best start in life for children and young people is essential as all aspects of their development - physical, emotional and intellectual – are established in early childhood. Development in the early years can have a lifelong impact on health and wellbeing, educational achievement and economic status. A proactive and preventative approach prior to any problems occurring is required to ensure good child development and health behaviours. By placing an increased focus on health and wellbeing in those early years we hope that all Rotherham children will be able to fulfil their potential.

Strategic Outcomes and Priority Areas





Outcome 1: Children, Young People and their Families are Healthy and Safe from Harm

Early Help

Priority: Early Help Services to identify and support families at the right time to help prevent social care involvement.

Performance Measures:

- A reduction in the Children in Need Rate (rate per 10K population).
- Percentage reduction in children who had a social care concern raised within 12 months of the last concern ending (re-referrals).
- Increase in the number of multi-agency Early Help assessments.

We know that early identification and intervention are key to preventing poor outcomes for children and young people and that providing support at the earliest point can stop issues escalating. Early intervention in childhood can help reduce physical and mental health problems and prevent social dysfunction being passed from one generation to the next.

Through our Early Help Strategy we aim to improve outcomes for children and families in Rotherham and at the same time, reduce the demands upon specialist and higher tier services.

In Rotherham, most children, young people and family's needs are met by universal services, or those services that are available to everyone.

For those children and families who face more challenges and may have multiple needs, our services will provide support and expertise, building on a 'One Family, One Worker, One Plan' principle. An Early Help Assessment will ensure they receive all the support they require. Further information about Early Help services is available at:

<http://www.rotherham.gov.uk/earlyhelp>

Early Help Assessments

Early Help Teams provide intense, focused support when problems first emerge. The right service at the right time can reduce or prevent specific problems from getting worse and becoming deep seated or entrenched.

Our integrated Early Help Teams are based in nine Locality Teams, across three Areas - North, South and Central and can provide advice and support for the whole family on issues such as: Parenting; Teenagers; Behaviour; Emotional wellbeing; Drugs and alcohol; Domestic abuse; Money, benefits and housing; Staying safe – outdoors and online; And places to go and things to do.

From the 1st November 2015, (the pilot stage for the Early Help Assessment) until 30 March 2016 there were 799 triage outcomes that requested an Early Help Assessment.

In February 2016 weekly Step-Down Panel meetings commenced to ensure there is a consistent and robust process in place to manage, monitor and clearly record outcomes for all cases stepping down from Duty and Assessment teams and/or those coming off a Children in Need plan. At the end of March 2016 we have stepped down 73 families (191 children) to our Early Help Locality Teams, along with making recommendations for seven families and 15 children to be worked with by our partners.

Early Help Pathways

In January 2016, we launched our new; Early Help Pathway; Early Help Request for Support; Early Help Assessment; and Early Help Offer website. The Pathway to Services document outlines the Early Help offer and a virtual 'pathway to Early Help services' in Rotherham. These services are currently provided by Rotherham Metropolitan Borough Council, Health providers, the Voluntary Sector, schools, early years and education settings for children and young people aged 0 to 19* years and their parents/carers *(25 for young people with a disability). It is intended to be a sign-posting tool for families, practitioners and professionals. It is not an exhaustive guide of all services available and should be used alongside the online Early Help Service Directory and other useful documents that can be found on the website.

The Early Help offer and pathway commence with services which are classed as 'universal' – available for all families in Rotherham to access when appropriate. It also includes more 'targeted' early help support and services that are there to offer advice, support and guidance around individually identified needs for children, young people and their family.

The Pathway to Services document:

www.rotherham.gov.uk/downloads/file/2797/early_help_pathways

Rotherham Children's Centres

Priority: Increase the take up of services delivered by Children's Centres where there are high levels of deprivation in those communities.

Performance Measures:

- Increased percentage of children aged 0-5 living in the Rotherham area who have accessed Children Centre activity.

A Children's Centre is where families with children under five years can go to access a range of services and information. They deliver services in one building, or at a variety of venues in a local area.

The centre's work in partnership with parents and service providers to deliver inclusive services that are:

- child-friendly accessible
- respond to the needs of local families
- help children to reach their full potential.

Each centre will also have the services of a qualified early years teacher. They will work with early years professionals so that all children have access to quality early learning experiences. This is whether it is at school or nursery.

There are also family support workers and health professionals that are either based at or visit the centre.

Services vary between centres but will cover the following:

- Early education and childcare. This is provided by the centre, childminders, other days providers, out of school clubs or extended schools
- Support for you and your family
- Child and family health services
- Information for parents and carers
- Information about training and employment

There are 12 Children's Centres with 10 linked sites in Rotherham.

Performance against the Children's Centres measures continued to improve in the final quarter of the year, with the percentage of children aged 0-5 living in the Rotherham area who are registered with a Children's Centre reaching 91.4% against the target of 95%.

Although this was slightly below the target it still represents a good achievement for the year and work is already underway to ensure that we are targeting those residing in the 30% Lower Super Output Area's (LSOA's) and to improve registration rates across these areas and at the linked sites.

The access figures have also increased, with performance reaching 54% against the annual target of 66%. Heads of Centres and frontline staff focussed on the 30% LSOA's and achieved much improved performance of 63% against the 66% target; despite the impact of an increase in the reach areas and with a reduction in the number of outreach staff.

Early Childcare for Disadvantaged Families

Priority: Increase the take up of free Early Childcare for disadvantaged families

Performance Measures:

- Percentage of entitled two year old accessing childcare.

Giving children and families the very best start in life continues to be a key priority for Rotherham. The entitlement to free early year's provision was first introduced in the National Childcare Strategy (DfEE 1998). By January 2010 almost all eligible four-year-olds and the vast majority of eligible three year olds in England were benefiting from the entitlement to free early years provision (DfE 2010). There is evidence showing that receiving good quality early years education is associated with improved outcomes for children's development, and is particularly beneficial for children from disadvantaged backgrounds, 'breaking the cycle' between early disadvantage and poor outcomes through life which can be linked to a number of health, education, economic and social outcomes. The priority therefore is to increase the take up of free Early Childcare for disadvantaged families in Rotherham.

Youth Offending Teams

Priority: Reduce the number of First Time Entrants into the Youth Justice System

Performance Measures:

- Percentage reduction in First Time Entrants (FTE) into youth justice system.

Youth Offending Teams (YOT's) have three targets that they are required to report back to the Ministry of Justice and Youth Justice Board (YJB). These are:

- Reducing the number of First Time Entrants into the Youth Justice system
- Reducing Reoffending
- Reducing the use of custody

Performance is measured by the YJB by comparing performance against the same period in the previous year, and comparing local with national performance. A quarterly report is produced by the YJB for Ministers RAG rating YOT's and highlighting remedial action taken for YOT's rated "red". Rotherham is currently rated as a "green" YOT.

Although YOT's return data to the YJB, with the exception of custody data, the data used by the YJB for First Time Entrants and Reoffending is taken from the Police National Computer (PNC) database. This data is provided to YOT's a month after quarterly data is submitted.

For First Time Entrants the data is shown in rolling full-years for the 12 months to March, July, September, and December of each year. The latest data is for July 2015 to June 2016 at 460 (rate per 10,000 of 10-17 population).

Reoffending figures are based on proven reoffending. A proven re-offence is defined as any offence committed in a one year follow-up period that leads to a court conviction, caution, reprimand or warning in the one year follow-up or within a further six month waiting period to allow the offence to be proven in court. Latest data is for the January 2014 to December 2014 period at 27.3%.

Rotherham is regarded by the Youth Justice Board as a well performing YOT and the service is fully compliant with the requirements for the constitution and staffing of a youth justice service as outlined in the Crime and Disorder Act 1998.

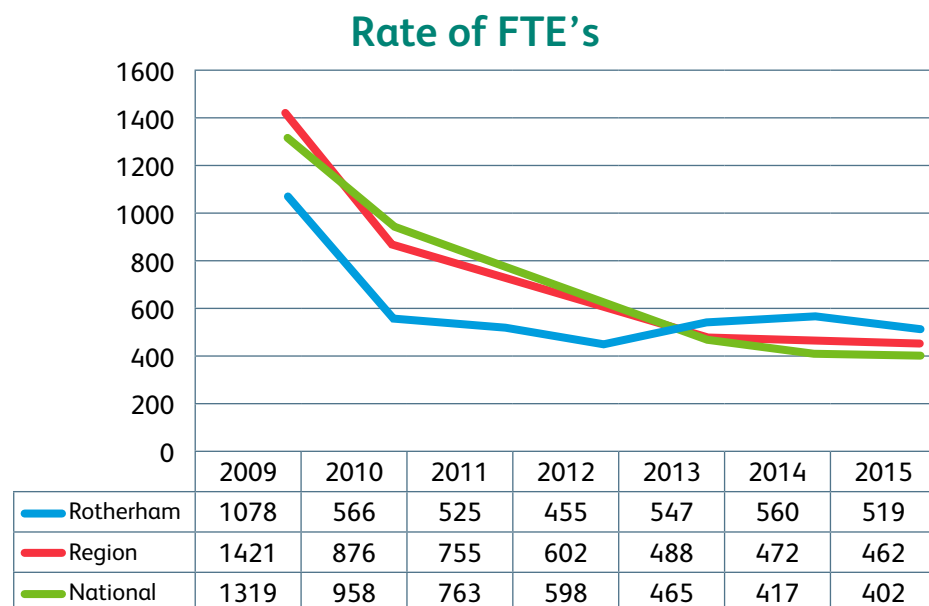
In addition to the Act's requirements the YOT is also compliant with the 190 National Standards required by the Ministry of Justice and Youth Justice Board and the Home Office Code of Practice for Victims of Crime. Compliance in respect of these two areas is audited yearly and the results fed back to the Youth Justice Board with the YOT Management Board taking responsibility for any remedial action required.

Overall in the last five years, the numbers of First Time Entrants (FTEs) for Rotherham has gone down in line with the downward trend nationally and in South Yorkshir. Rotherham's YOT Comparison Group also showed a downward trend from 2010 to 2015 although the

numbers for Sheffield have risen in 2015 compared with 2013 figures. In comparison, Walsall’s (also in our comparison group) numbers rose in 2014 but reduced again in 2015 and are still well below the figures in 2010.

Since the middle of 2012 first time entrant numbers (those entering the youth Justice System) have been slowly increasing. This follows a period in which the numbers were significantly decreasing and were above those of regional and national rates. Whilst the gap between Rotherham’s rates and regional and national rates is not huge (Fig 1.) and numbers involved are relatively small, (Table 1). It is nevertheless a concern that from a low baseline rates have risen above regional and national trends.

Fig 1



Families for Change Service

Families for Change (FfC) is the local delivery of the Troubled Families initiative, a national programme to work with families with multiple high cost problems. The Families for Change work is embedded in Children’s Services as part of the Early Help offer.

The initiative asks local authorities to identify families using specific criteria, and deliver interventions that lead to behaviour change and better outcomes. The programme challenges local services to work together and ensure that service delivery is family-focused and well-coordinated.

Phase one of the programme was launched in April 2012 and ended in April 2015; families were identified if children were not attending school, young people were committing crime, families were involved in anti-social behaviour and adults were out of work. In Rotherham we were asked to identify and achieve outcomes with 730 families; we were successful in delivering 100% of this target.

Phase two began in April 2015. The roll out of the programme builds on the work of phase two, whilst expanding the scope in terms of identifying the families that we work with. There is an increased emphasis on service transformation, both improve outcomes for families and ensure more efficient and effective use of public money for the long-term. In phase two, Rotherham is challenged to work with 2470 families, and committed to working with 371 families in 2015/16 and 882 in 2016/17.

To be eligible for the expanded programme, each family must have at least two of the following six problems:

- Parents or children involved in crime or anti-social behaviour
- Children who have not been attending school regularly
- Children who need help; children of all ages, who need help, are identified as in need or are subject to a Child Protection Plan
- Adults out of work or at risk of financial exclusion or young people at risk of worklessness
- Families affected by domestic violence and abuse
- Parents or children with a range of health problems

The work will be deemed successful, and payment by results funding will be available, if significant and sustained progress is identified across all the problems that are identified by the family, or if a family member enters and sustains employment.

In Rotherham the work is now fully embedded in the Early Help Offer. All families supported by the service will receive a holistic offer of support, so that there is ‘one family, one worker, one plan’ and that the workforce will have the skills, experience and tools to meet the presenting need in each locality. The Early Help Offer is a multi-agency response to meet the needs of vulnerable families; the family outcomes tracked through Families for Change will provide an indicator of how effective we are at working collectively to deliver outstanding services and supporting Rotherham families to thrive.

Children and Young People achieve their potential and have a healthy adolescence and early adulthood

This is one of the key aims within Rotherham’s Health and Wellbeing Strategy. This strategy provides a high level framework which will direct the Health and Wellbeing Board activity over the next three years.

Whilst tackling inequalities in health requires focused action from the start of life and in the early years, the commitment needs to be maintained throughout childhood and adolescence. We need to provide good education and healthcare, and opportunities for good work and training in order to support young people to thrive. In common with all the priorities, whilst we need to ensure these are available for all children and young people within the borough, we must focus on those children and young people who are most vulnerable; those who are looked after, those with mental health problems, physical and learning disabilities and those from our most deprived communities.

This is a key period for developing individual resilience: developing a sense of purpose and self-esteem, becoming emotionally aware, taking responsibility for their own physical and emotional needs and being connected to others. Resilience enables children and young people to cope with the challenges they face and to contribute positively within their community.

Hospital admissions caused by unintentional and deliberate injuries

Injuries are a leading cause of hospitalisation and represent a cause of premature mortality for children and young people. They are also a source of long-term health issues, including mental health related to experience. This is a key indicator for partnership working to reduce injuries, including child safeguarding.

Childhood Obesity

Priority: Reduce the levels of childhood obesity.

Performance Measures:

- Reduce year-on-year levels of childhood obesity for:
 - (a) Reception year children (age 4/5) and (b) year 6 children (age 10/11)

Childhood is a critical time for the development of obesity. In Rotherham, levels of obesity are more than double between school age at reception (aged 4-5 years – 10.3% obese, similar to the England average) and year 6 (aged 10-11 years – 21.8% obese, higher than the England average of 19.1%). There are many contributing factors to this increase including access to a high fat and high sugar diet (including drinks) and the local environment.

Through the Lifestyle Survey, young people have told us that they are eating less of their five portions of fruit and vegetables per day when compared to 2014 (40%). Boys in year 10 are more likely not to eat

any fruit or vegetables per day, this being at 12%. When asked about how many glasses of water they drank a day, 2114 (68%) of young people said that they drank one to five glasses of water (down from 73% in 2014). 746 (24%) said they had 6-10 glasses (up from 18% in 2014) and 249 (8%) said that they drank no water at all (1% lower than 2014). More boys said they drank no water at all, 9% compared to 7% of girls.

2084 (67%) of pupils have a snack at break time (down from 70% in 2014). This year, fruit is the most popular choice compared with crisps last year. When asked where they mainly have lunch, 1524 (49%) said that they have a school lunch (up from 44% last year). Year 7 pupils are more likely to have school meals than year 10 pupils (61%) of year 7 pupils said they have them compared to 37% of year 10.

In relation to sport and exercise, the national recommendation is that all children and young people should engage in moderate to vigorous physical activity for at least 60 minutes per day. 2488 (80%) of pupils said that they regularly take part in sport or exercise (up from 77% in 2014). Overall Boys are more likely to exercise regularly (80%) compared to girls (75%). There is an improved increase in the frequency of times per week that pupils are exercising.

Young people were asked how they feel about their general health. Pupils who said they felt their weight was about normal size was 2022 (65%), (compared to 73% who said they weight was healthy in 2014 survey). 93 (3%) of young people felt that they were very overweight (up from 2% in 2014) and 622 (20%) felt that they were overweight (up from 17% in 2014).

The priority for Rotherham is to reduce the levels of childhood obesity especially in relation to those families who access services in Rotherham. A whole systems approach is being adopted by partners to reduce childhood obesity as part of implementing the new national Obesity Strategy from 2016.

Self Harm and Suicide

Rotherham uses the NICE (2012) definition for self-harm which is; 'any act of self-poisoning or self-injury carried out by an individual irrespective of motivation. This commonly involves self-poisoning with medication or self-injury by cutting.' Research suggests that nationally around 10% of 15-16 year olds have self-harmed. Self-harm is more common in young women, although it is on the increase among young men.

Following a group of suicide events in Rotherham from November 2011, an Independent Review has been undertaken. The report dated January, 2015 recognises the multi-agency response established promptly but recognises the learning from such events that need to take place. An awareness of the signs of self-harm and suicidal thoughts is essential if we are to be able to respond to these vulnerable young people quickly and effectively.

Supporting Children & Young People who Self Harm: Rotherham Self Harm Practice Guidance

Priority: Reduce risky health behaviours in young people. Reduce the risk of self-harm and suicide among young people

Performance Measures:

- Hospital admissions caused by unintentional and deliberate injuries (0-14 and 15-24 years).
- Hospital admissions for mental health conditions (0-17)
- Hospital admissions as a result of self harm (10-24 years)

Often discussion around the difference between suicide and self-harm can lead to confusion amongst professions. 'While some would argue that self-harm is in fact the opposite of suicide, there is equally compelling argument that they are part of the same continuum, both being a response to distress. There is sufficient evidence to suggest that skilled support at the time of the first episode of self-harming offers an opportunity to prevent further self-harming and, potentially a suicide attempt' NSPCC (2009). The guidance explains about self-harm and suicide, what are the risk factors and warning signs, coping strategies, who is at risk and how professionals can help, the Do's and Don'ts.

Care about Suicide cards have been developed as guidelines for the general public on suicide prevention, what signs to look for, how to respond and support the individual concerned and where to get further advice and access services. The guidance explains that mental health is something everyone has, like physical health and that mental health affects how we cope with life events and that a person's mental health affects how they learn, function from day to day, how they form, keep and end relationships.

The **Rotherham Suicide and Serious Self Harm Community Response Plan** has been developed. Research estimates that between 1 and 5% of all suicides by young people occur in the context of a cluster, and that 6% of suicides in prisons and 10% of suicide by people with mental illness are due to imitation or clustering effects. This plan is a multi-agency plan to support agencies and individuals specifically those who work with children and young people and is activated when Public Health perceives that a cluster is occurring or is at risk of occurring. An initial suicide may be the precipitating factor, but other external events may also act as triggers. These might include one or more deaths from other causes (e.g. trauma) which influence others to engage in suicidal acts out of grief, or pervasive environmental circumstances (e.g. economic downturn or extreme weather incidents) which cause stress for a whole community.

A Rotherham Care Pathway for Children and Young People Bereaved by Sudden Traumatic Death has also been developed.

Determining the underlying causes of suicide and self-harm and improving the emotional and mental well-being is a priority for all children and young people and there is a Rotherham Suicide and Prevention Self Harm Group taking this forward.

Risky Health Behaviours in Young People

During adolescence young people become more independent. With this increasing autonomy they may experiment with risk taking behaviours. They may try alcohol, tobacco and other substances, and may become sexually active. Modelled estimates suggest 10% of 15 year olds in Rotherham smoke regularly (daily or weekly), which is higher than the England estimate. Alcohol specific hospital admissions for under 18s, however, are significantly better in Rotherham than the England average (29.1 per 100,000 under 18 year olds in Rotherham, compared to 40.1 per 100,000 for England).

In Rotherham we have a higher diagnosis rate of new sexually transmitted infections (STIs) than the England average. However, care needs to be taken when interpreting this data as higher diagnosis rates may not necessarily indicate that more young people have STIs. This may reflect that local services are more accessible and young people friendly.

“One in ten children aged 5-16 years has a clinically diagnosable mental health problem and, of adults with long-term mental health problems, half will have experienced their first symptoms before the age of 14. Self-harming and substance abuse are known to be much more common in children and young people with mental health disorders – with ten per cent of 15-16 year olds having self-harmed. Failure to treat mental health disorders in children can have a devastating impact on their future, resulting in reduced job and life expectations. (Source – Public Health England)”.



Outcome 2: Children, Young People and their Families Start School Ready to Learn from Life

Special Educational Needs and Disabilities (SEND)

Priority: Improve personal outcomes for our young people with SEND to enable them to make choices that lead to successful adult lives.

Performance Measures:

- Increase in the number of Education Health and Care Plans completed in statutory timescales justice system.

Consultation in relation to the Local Offer for children and young people with special educational needs and their parents has taken place with a wide range of stakeholders including children and young people with special educational needs and their parents. Providers of services have also been engaged to gain a further picture of how to develop and present the Rotherham offer.

The Children and Families Act (2014) and SEND Code of Practice (2015) have led to significant changes in the approach to provision for children and young people with Special Educational Needs and/or Disability. In particular;

- A move from provision through statements and the registered stages of School Action Plus or School Action to needs met through Education, Health and Care Plans (EHCs) and a single registered stage of SEN Support. Within Rotherham, SEN Support and EHC provision is embedded in a waved approach usually described as the Graduated Response to need

- The statutory requirement for Local Authorities to publish a Local Offer of relevant SEND services and support, including publication of how the views of young people and their parents have been acted upon.
- A clear directive for agencies and services to be led by the views of children, young people and their families in the delivery and monitoring of provision that supports SEND
- A move to provision from birth to 25 to aid transition to adult services and to improve outcomes in adulthood
- A joint approach to commissioning of services across involved areas including education, health and social care
- A potential for the provision of personal budgets to enable young people and families to purchase some services directly.

The SEND Local Offer in Rotherham aims to provide information for parents and young people about resources, services, support, activities and events for Rotherham’s children and young people with Special Educational Needs and/or Disabilities and their families. Information is arranged according to age from pre-school through to early adulthood.

www.rotherhamsendlocaloffer.org

Rotherham Charter

In partnership with parents, carers, children and young people, adults and families a Rotherham Charter has been developed. This Charter is the partnerships commitment to care, include, communicate and work in partnership so that together all achieve their potential.

www.rotherhamcharter.co.uk

Short Breaks

Short Breaks are commissioned for young people. Each year we discuss this service with disabled children and young people and their parents and carers as part of the needs assessment for short breaks. An issue that is often mentioned is access to universal services and making sure that there are suitable facilities for disabled children and young people. We are working with the YMCA to help disabled children and young people access universal services by providing some one to one support. The Council's parks department are also working with the local community in North Anston to provide playground facilities that can be used by disabled and non-disabled children. In the coming years we will continue to work with our disabled children and young people and their families to help them access activities as well as working with universal service providers to help them become more inclusive.

SEND Major Project

The area of SEND provision has been identified for further development. A strategic plan to address the planning of SEND provision for the future is being written based on findings over the past year which has included consultation with providers and families. Services to support this area have been brought together within the inclusion department, a leadership structure has now been established and greater links with social care and health services are now being developed. A data dashboard has been established with closer links to the Joint Strategic Needs Assessment. The financial sufficiency and sustainability of services and provisions is targeted for development over the next three years and incorporated into the CYPs Improvement plan. This work includes;

Rotherham Joint Commissioning Strategy

The Rotherham Joint Commissioning Strategy for Children and Young People with Special Educational Needs and/or Disabilities (SEND) provides an overview of how the joint commissioning of services for children and young people with SEND in Rotherham will be developed and implemented in line with the requirements of the Children's and Families Act 2014.

The mapping and consultation undertaken has informed the development of this strategy for Children and Young People with Special Educational Needs and/or Disabilities (SEND), which provides an overview of how the joint commissioning of services for children and young people with SEND in Rotherham will be developed and

implemented. The Strategy outlines what joint commissioning is, the partners involved in the arrangement, the governance structure, the current Rotherham SEND Local Offer and how we will implement the Strategy.

The development of a SEND Assessment Hub is key to improving the co-ordination of SEND provision, as well as formalising joint working arrangements and the streamlining of assessments. The preferred option for the SEND Assessment Hub is Kimberworth Place, as a number of SEND services are already based there and therefore the number of services moving bases would be minimised.

The priorities identified for this Strategy have been identified by parents/carers and young people through the consultation undertaken. Parent/carer representation will continue through the SEND Joint Commissioning Group.

The nine priority areas of work contained within the Rotherham Joint Commissioning Strategy for Children and Young People with SEND are as follows:

- Create a joint SEND Education, Health and Social Care Assessment hub at Kimberworth Place. Year 1
- Review and re-model services that provide support for children and young people with social, emotional and mental health needs. Year 1
- Develop a performance and outcomes framework that will be applied across all local authority and Clinical Commissioning Group (CCG) SEND provision. To be implemented by Year 3
- Align local authority and CCG specifications for SEND service provision, so as to facilitate commonality of practice and a consistent approach (thus reducing duplication, improving efficiencies and developing clearer pathways). Year 1
- Develop the Education, Health and Care Planning (EHCP) process to look at how the assessment process (including the decision making process/panels and allocation of resources) can be streamlined and strengthened, so as to reduce the multiple assessments that young people and their families have to undertake. Year 1
- Ensure that there is a co-ordinated joint workforce development plan. Year 2
- Develop and implement Personal Budgets. Year 1
- Develop pathways to adulthood. To be implemented by Year 3
- Develop approaches to improving life experiences To be implemented by Year 3

Sustainable Education and Skills

Priority: Challenge all schools, academies and education settings who are not providing at least a 'good' level of education to our children.

Performance Measures:

- All children make good or better progress,
- The progress a pupil makes from the end of primary school to the end of secondary school (Key Stage 4 Progress 8 Measures).

A priority is that the quality of education for children and young people should enable them to be well prepared for further education, higher education and work.

All young people should have the tools and opportunities they need to fulfil their potential, regardless of background or life circumstances. We believe that all young people should have access to opportunities to develop skills for life and work and to create a more responsible, engaged and cohesive society.

Key Stage 2 is the final year of primary education when pupils are aged between seven and 11. Key Stage 4 is the term used for the two years of school education which incorporate GCSEs, and other exams, normally Year 10 and 11 when pupils are aged between 14 and 16.

The priority is that all children make good or better progress from the end of primary school to the end of secondary school (Key Stage 4).



Outcome 3: Children, Young People and their Families are Ready for the World of Work

Priority: Enable hard to reach young people to achieve their full potential through education, employment or training.

Measure:

- Reduction in the percentage of young people aged 16-18 who are Not in Education, Employment or Training (NEET)

Priority: Increase the number of young people aged 15-19 in Rotherham Schools and Colleges receiving support from Rotherham Youth Enterprise (FYE).

Measure:

- Increase in the number of young people receiving support from RYE in terms of the delivery of employability skills sessions and self-employment awareness sessions

Priority: Young people are ready for Level 3 Qualifications (equivalent to A Level).

Measure:

- The progress a pupil makes from the end of primary school to the end of secondary school. (Key Stage 4 Progress 8 Measure.)

We need to make sure that there are high quality options for young people to undertake both academic and vocational education, including apprenticeships and traineeships.

Education and Skills are involved in a number of activities to help prepare young people for the world of work.

The focus on preparing young people for the world of work is through good participation in learning (i.e. apprenticeships, college, school or university) and strong attainment outcomes (especially at Key Stage 4 and Level 3 at 19). However, it should be recognised that there is no universal offer, funding, or authority (e.g. careers guidance, education-business links, work experience, or curriculum enrichment around employability and enterprise skills) for the Council to prepare young people for the world of work, as responsibility and resources rests with colleges and schools.

However, there are a number of work areas that Council is involved in:

- Early help work is undertaken with vulnerable young people and/or NEETs. Early Help also send out weekly apprenticeship bulletin distributed to all colleges and schools. A Search and Apply and Youthi websites have been developed which provide an online prospectus and application process of all 16-18 provision and careers, support and vacancy information. This is the only universal information to young people.
- The Council is working with Rotherham North Notts (RNN) College (North Notts College and Rotherham College who completed a merger on 1st February 2016 to create a new organisation called the RNN Group (Rotherham and North Notts Group)) to successfully

bid for £4.4m from the Sheffield City Region Capital Growth Fund towards the building of a new £11m Centre for High Level Skills at Doncaster Gate. The Centre, due to open by 2018, will work with businesses and communities to address the shortfall in skills. It will provide both accessible and affordable higher education provision in Rotherham and is key to the economic regeneration of the town centre.

- Science, Technology, Engineering & Maths (STEM) Co-ordinator (jointly employed by Sheffield and Rotherham Council) and partially funded by Mondelez International (Cadbury) to:
 - Raise awareness of STEM for students to find out more about the industry. Including, working with employers to give young people a taste of work – including visits to employers and employer led projects. E.g. Sandvik, TATA Steel, Mondelez International, Gripple
 - Support teaching and learning in schools and colleges to raise attainment and engagement with key subjects e.g. Advanced Manufacturing Research Centre (AMRC) to raise attainment in maths
 - Celebrate success of young people including the Annual STEM Celebration.

An annual business-education event for teachers, this year focussed on post-16 options with a range of employers and post-16 providers exhibiting and 50 delegates attending.

£676k Ambition pilot to the Local Authority (Jan 15-July 17) to engage 259 jobseeker claimants aged 18-24 into work placements with 104 securing sustainable employment – as of March 2016, 111 starts and 40 securing employment.

Rotherham Youth Enterprise (RYE) contributes to the local economy by supporting young people/adults to make the leap from education into self-employment and business; supporting business growth; and long term business survival rates. RYE:

- Supported businesses to have an 81 % survival rate at five years of trading
- Support 30 - 40 new business starts per year
- Work with around 1,800 students in schools and colleges raising awareness of self-employment, including engaging post 16 students in an annual Business Planning Competition, delivering a range of employability and enterprise activities in schools and colleges
- Is a key partner in the annual Local Employers Advisory Forum (last year 71 businesses and providers exhibited at Magna to 863 attendees from schools, colleges and the workless community. Job Centre Plus (JCP) reported that a month after the event 27 people had secured jobs with companies who exhibited on the day)
- Run the annual Rotherham Young Entrepreneur of the Year Awards
- Delivering the Government/SCR's new Enterprise Adviser programme and achieved the target to match 20 employers to 20 schools and colleges in Rotherham to advise them on how better to engage with the business community and prepare young people for the world of work. The programme aims to widen young people's horizons, increase their knowledge of the range of career opportunities and the new and emerging sectors that are 'out there'

- To increase the number of business encounters in schools/ colleges, address the issue of employers offering work experience opportunities to special needs young people and better prepare young people for the ‘world of work’
- Establishing a Post-16 Providers Network led by the sector to identify and develop proposals for schools, the LA, employers and the SCR to better support young people into the world of work; and to work collaboratively to develop progression pathways and support transition into further learning and/or employment for 16, 17 and 18 year olds.

Economic Regeneration is supporting Commissioners to ‘Get Rotherham Working’ by supporting employers to:

- Become a Schools Enterprise Advisor, working with a schools senior leadership team to improve awareness of business, and assist young people to develop their future employability skills
- Exhibit at the Local Employer Advisory Forum (LEAF) – Rotherham Jobs and Career event which is held annually in November. Advising schools as well as working with job seekers to fill current vacancies and provide them with the knowledge of the skills needed to be successful in employment
- Take on a university / college intern
- Provide industry talks or visits to schools and colleges
- Take on an apprentice or a trainee
- Provide work experience opportunities for school students and/or the unemployed community

- Convert existing employees into apprentices, including higher level apprentices
- Undertake new in work training.

Employability skills within Study Programmes

Department of Education (DFE) guidance on Study Programmes states that:

- “All 16 to 19 students should be given the opportunity to take a study programme which reflects their prior attainment, education and career goals
- Study programmes should normally include substantial academic or applied and technical qualifications; non-qualification activity including work experience; and the study of English and maths where students do not hold a GCSE graded A*-C in these subjects
- Study programmes should be focused on progression to the next level of education, a traineeship or apprenticeship, or other employment”.

In terms of the work experience element, the guidance states that all study programmes should

- “allow for meaningful work experience (related to the vocational area) and/or other non-qualification activity to develop students’ personal skills and/or prepare them for employment, training or higher/further education.

Work experience can take many forms including work tasters, participation in social action projects, or a work placement.

Whilst training in a simulated work environment can help a student develop new skills and support progression into an external working environment, it is a work placement with an employer in an external work environment that has the greatest impact on students' employability. We expect providers to ensure that wherever possible all young people spend time in an external workplace.”

Source: Departmental advice for education providers on the planning and delivery of 16 to 19 study programmes, DFE, January 2016.

Successfully planning and delivering this work experience is an important factor when devising and implementing study programmes. This often includes work related activities for the basic development of a student's employability skills through to work related experience such as volunteering on community projects. Independent work experience is where students have undertaken work experience or a placement for Employers and experience what it is like in the world of work. There are various organisations in Rotherham providing work experience for young people.

Improving Access to Emotional Wellbeing and Mental Health Services

Priority: To improve the access to emotional wellbeing and mental health services.

Measure:

- CAMHS referrals triaged for urgency within 24 hours of receipt
- Percentage of triaged CAMHS referrals that were assessed within three weeks.

The NHS England Future in Mind Report was published in May 2015 and sets out a clear national ambition to transform the design and delivery of a local offer of services for children and young people with mental health needs. This covers five key themes:

- Promoting resilience, prevention and early intervention
- Improving access to effective support – a system without tiers
- Care for the most vulnerable
- Accountability and transparency
- Developing the workforce

The Clinical Commissioning Group (CCG) responded to the guidance with a Local Transformation Plan (LTP) that is a five year vision to transform the system for children's mental health and wellbeing.

Consultation took place with parents and carers and young people to identify the issues with the current services. These comments have been used to inform the key objectives in the transformation plan. A significant number of comments related to having better access to mental health services. Parent and carer representatives are also on the partnership group and continue to influence the implementation of the plan.

The reconfiguration includes the establishment of clear treatment pathways, a Single Point of Access (SPA) and locality workers linked with locality based Early Help and Social Care teams as well as schools and GPs. Extensive staff consultation and recruitment to a whole new structure has taken place.

The Future in Mind & Local Transformation Plan will be finalised in December 2016 and has provided some new investment into the service allowing for the recruitment of additional resource. Staff are being mobilised into new ways of working.

The key objectives in the transformation plan are:

- **Support for Universal Services** – The development of an enhanced single point of access with a Primary Mental Health Worker based within the Early Help Hub. Named Child and Adolescent Mental Health Service (CAMHS) workers for schools and primary care.
- **Move away from the current tiered system** – Implement a consultation model that moves away from referrals and towards joint working, advice, guidance and support.

- **Implement the crisis care concordat** – Implement all aspects of the concordat, in particular the embedding of a new 24/7 helpline, ensuring no child or young person is placed in a police cell as a place of safety. Creation of a nurse liaison provision to work within the acute hospital setting.
- **Development of an Intensive Home Treatment Provision** – Implementing a new home treatment service that acts as an alternative to inpatient services and has a key role in pre-crisis, enabling step down from acute/inpatient services.
- **Eating Disorders** – Creation of a new community eating disorder service to reflect local need.
- **Caring for the most vulnerable** – Dismantling the barriers and reach out to children and young people in need through better assessment and an integrated flexible system that provides services in a way that are evidenced based.
- **Children, Young People and Families have a voice** – By developing sustainable methods to effectively engage with our children, young people and families so they have a voice and shape our services. Young Minds have been commissioned to support this.

Significant engagement has been undertaken with schools as it is recognised the key role they play in the identification of emotional health and wellbeing as well as the on-going support they provide.

About Rotherham

The Joint Strategic Needs Assessment for Rotherham tells us:

There are approximately 204,400 adults resident in Rotherham (2015 Mid Year Estimate) of whom 64,600 people are aged 60 and over (24.8% of the population), 37,100 are aged 18 to 29 years (14.2%) and 102,700 are aged 30 to 59 years (39.4%).

The number of children and young people aged 0 to 17 years is 56,400 (21.6%) of whom 16,000 are aged 0-4 (6.1%).

There were 43,128 children and young people attending state funded schools in Rotherham as at January 2016. 22.8% of children live in low income families.

The percentage of pupils with special educational needs reduced from 25% in 2010 to 19.5% in 2014 and the percentage with statements fell from 2.5% to 2.3% over the same period. The general reduction is in line with national trends although the percentage with statements has not been falling nationally.

According to the Index of Multiple Deprivation (IMD 2015), Rotherham is the 52nd most deprived out of 326 English districts. The Indices of Deprivation 2015 domains that are most challenging for Rotherham are: Health and Disability; Education, Training and Skills; Employment.

Almost a fifth of Rotherham's population live in areas which are amongst the most deprived 10% in England. The most deprived areas of Rotherham have seen deprivation increase the most between 2010 and 2015. From the needs analysis it is evidenced that there is a high

correlation between deprivation (IMD 2010) and risk of/experience of CSE.

Rotherham's Black and Minority Ethnic (BME) population is relatively small but has been growing and becoming increasingly diverse. According to the 2011 Census, 8.1% of Rotherham's population were from BME communities but the 2016 School Census shows that 16.7% of pupils were BME. The largest BME community is Pakistani and Kashmiri who numbered 7,912 in the 2011 Census. The Kashmiri and Pakistani community is well established in Rotherham. There are also much smaller established communities such as Chinese, Indian and Irish. The fastest growing population has been Black African communities and the Eastern Europeans. The Slovak and Czech Roma community is estimated at around 4,000 people and several hundred Romanian Roma have settled in Rotherham since 2014.

The full joint strategic needs assessment for Rotherham can be found at www.rotherham.gov.uk/jsna

Our Young People, Parents and Carers

The priorities in this plan have been based on what children, young people and their families/carers have told us about services for children and young people in Rotherham. Some of the ways in which these views are captured are detailed in this section.

Young Carers

Through consultation with young people through the Lifestyle Survey, 653 young people considered themselves to be young carers. When asked about what the three main things are that they do to help, the results are very similar for both year 7 and 10 and follow the same pattern as 2014. Helping around the house is the highest rated task, followed by helping to look after a brother or sister and keeping someone company is third choice. There has been an increase in the percentage of pupils saying they care more than eight hours per day. 89 pupils said they are caring more than eight hours per day. Caring for between one to three hours and four to seven hours, the percentage has reduced from 2014. There has been a positive increase in the number of young people who have heard about the Young Carers Service, this has increased to 33 % (from 26 % in 2014).

Many young people within Rotherham are helping to care and the person being cared for will usually be a family member such as a parent, grandparent, sibling, or someone very close to the family. The person or people they care for will have a serious or long term illness, disability, mental health difficulties or problematic use of alcohol or drugs; many young carers also help to care for younger siblings.

Rotherham Young Carers Service, which is currently commissioned from Barnardos Services Limited, works with young people aged 8-18 years,

and offers the young people guidance and support around issues they face as a young carer. They offer the young people activities during the school holidays, giving young carers a break and a chance to get together as a large group. The service also provides training and advice to other services and schools in contact with young carers.

The Rotherham Young Carers Service has increased the number of young carers and their families supported by 35 % in 2015/16. Throughout the year, the Service supported 135 young people and their families by assessing need and making a long-term difference; meaning that children and families can support each other without long term dependency on multiple service interventions. Of the 135 young people supported; 48 young people were male; 87 female. 26.7 % of children worked with had either a current or historical Child Protection Plan.

The service identified a very small number of females who have accessed the support of CSE services, some having allocated CSE social workers. While this number was very low it continues to highlight the vulnerability of young carers. Having CSE specialist workers within Barnardo's helped the service undertake joint work.

In 2015/16, 44 % of young carers accessing the service were caring for someone who had mental health and substance misuse issues. Some young people care for more than one person and many young carers help care for siblings.

Service users that are more vulnerable, where possible have been actively encouraged to participate in the Young Carers Council to maintain some contact when they no longer need to be an open case with the service.

Rotherham Youth Cabinet

Rotherham Youth Cabinet is a group of enthusiastic, motivated and committed young people who endeavour to campaign on issues which are important to other young people in Rotherham. Their main aim is to be an active voice, representing all young people equally in order to have a positive effect throughout our communities.

What Youth Cabinet Do

- Undertake research and campaigns to help improve Rotherham
- Ensure that all young people in Rotherham are listened to and have a Voice
- Convert words into action
- Hold formal meetings at Rotherham Town Hall and informal sessions at Myplace
- Have FUN, make friends, meet new people, develop confidence, gain skills, work with Elected Members and decision makers in Rotherham
- Plus lots more...

How they do this

- Consultation with other young people to find out what we need to work on
- Meet regularly and work together as a team on our issues
- Have training to enable us to perform our role

- Go on residentials and visits to help us develop our skills and knowledge and to help us work as a group.

Current Campaigns

Every summer, following consultation with other young people in Rotherham, Youth Cabinet members write their Manifesto which is launched during Local Democracy Week. Their key aims for 2015-2016 were:

- Young People's Mental Health & Emotional Wellbeing
- Improving Public Transport For Young People
- Supporting other Young People to Understand Politics
- Helping to create a Proud and Positive Image of Rotherham
- Understanding the needs of all people from within our diverse communities to help community cohesion

Youth Cabinet Members will be creating a new manifesto during the summer, which will detail their priorities for 2016/2017.

Examples of Recent Achievements

One of the main areas that Youth Cabinet members have worked on is mental health. Some of this work has included:

- Working with Council Scrutiny, Councillors and a wide range of stakeholders around support for young people who self harm; with their recommendations being incorporated into CAMHS Service Plan and Public Health Self Harm Practice Guidance for professionals

- Working with the Commissioning Team on the development of the Mental Health Strategy and Transformation Plan in Rotherham
- Shared issues and concerns with CAMHS managers about young people accessing their services which helped to inform their Service Plan
- A member was elected as a Governor for RDASH and now attends Governors Meetings and CAMHS Partnership and Strategy Meetings, ensuring young people have a voice in this group
- Wrote a report 'Mind The Gap' on the national and local picture of Mental Health services for young people, which gave ten recommendations on how improvements could be made
- RYC members worked with Public Health and Commissioners to develop an Emotional Well-being support Website 'My Mind Matters' (www.mymindmatters.org.uk)
- Supported a CAMHS Scrutiny Review and fed into their findings to the Scrutiny Review Panel
- Members held a successful Children's Commissioner Takeover Day with the Overview Scrutiny Management Board and a range of partners and stakeholders, resulting in 11 recommendations being made
- Organised a conference for 120 young people and professionals around Mental Health called 'It's My Mind'. This provided workshops, stalls, speakers etc delivered by mental health professionals to enable young people and adults gain strategies to help support and maintain positive mental health
- Supported the commissioning of the new 0-19 Public Health Nursing Service
- Participated in a Department of Health Takeover Day in London with Alistair Burt MP, the Minister for Social Care, where they discussed issues raised by young people with regard to Mental Health Services
- Attended a Yorkshire and Humber regional meeting hosted by the NHS Mental Health Improvement Managers, where young people met with local Mental Health Commissioners and discussed barriers to services and how to break these down to improve services for young people.

The group have received a Diana Award for their contribution to mental health services for young people.

Further Involvement and Achievements

Youth Cabinet Members have also completed vast amounts of work to achieve their other Aims. These include:

- Creating videos and music to endeavour to get young people interested in Politics
- Liaising with South Yorkshire Passenger Transport Executive (SYPTEx) and transport organisations around bus passes for young people
- Working with Looked After Children's Council and Rush House on projects to encourage young people to be proud of where they live
- Representing young people on other groups such as; Children & Young People's Strategic Partnership Group, Police Young People's

Advisory Group, Rdash/CAMHs Partnership Group, Healthwatch Ambassadors, Rotherham Transport User Group

- Participating in interview panels for Senior Officers and Directors within RMBC
- Taking part in events such as Holocaust Memorial Day, Armed Forces Day, White Ribbon Campaign Event etc.

Looked After Children and Care Leavers

The Council takes its role as Corporate Parent to Looked After Children very seriously. Members and officers understand that looked after children as a group are more vulnerable than their non-looked after peers and that in general, outcomes and life chances are poorer for looked after children than for other children. The Leaving Care Service has a duty to ensure that young people leaving care are found suitable accommodation. The aim is to achieve the best possible outcomes for all children and young people looked after and the provision of suitable accommodation for Care Leavers is a key factor in achieving this by providing safe and secure accommodation.

Rotherham has a Looked After Children Strategy Group which includes multi-agency professionals working with looked after children in local authority services and professionals working with looked after children in key partner agency services. This partnership is responsible for making sure that outcomes for Looked After Children are good in all aspects of their lives and in achieving successful independence as adults. The Rotherham Looked After Children Strategy 2014-2017 sets out the vision for the range of services provided by the Council and

its partner agencies for looked after children, and identifying priority objectives. These include:

- To improve the degree and timeliness of placement stability and permanence and ensure children are able to enjoy continuity of relationships
- To improve the emotional wellbeing and physical health of looked after children
- To improve educational progress and attainment and narrow the gap between attainment of looked after children and their non-looked after peers
- To improve the support for and opportunities open to care leavers sufficiently to increase the number and proportion of them who are in employment, education or training (EET)
- To listen to children and young people so as to ensure that their views influence their own plans, as well as wider service delivery and development.

Voice of the Child Education Lifestyle Survey

The Lifestyle Survey is open to all young people in Y7 and Y10 in secondary schools and Pupil Referral Units. This is an electronic survey that is accessed by pupils in educational establishments through a web-link. All young people that participated in the survey were able to do so anonymously and this is the 8th year that the survey has been run in Rotherham.

Each educational establishment that participated receives a data pack giving them access to their own level of survey data; which they use to compare with borough wide information once published. The borough wide results are shared with partners and specific trend data shared with partners on their specialism to allow them to update the overarching action plan. Individual school reports will be used by schools to help them gauge how well they are meeting their own health and wellbeing objectives and help shape their PSHE curriculum.

A summary of the findings of the 2015 Lifestyle Survey includes:

- In total 3110 participated in lifestyle survey
- 3 Schools chose not to participate in the survey
- Participation in the survey varied widely between schools, the variances ranged between 14 % to 90 % participation rates from one school to another.

Positive Results

- Fruit is the most popular snack option
- There has been an increase in the number of young people having school dinners and an overall reduction in the number of young people not having lunch at all
- More young people are participating in regular exercise
- There is greater awareness of where to obtain support if a young person had a weight issue

- Good awareness amongst young people where they can get support if they have any issue relating to mental health
- More young people are aspiring to go to university
- Almost all young people aware of internet safety
- Reduction in the number of young carers
- Greater awareness of Young Carers Service
- Less young people report being bullied
- Fewer young people are drinking high energy drinks
- Increase in positive responses against participating in smoking, drinking alcohol and use of drugs – gives positive message against the peer pressure to partake in these
- Reduction in the number of young people actually smoking or trying alcohol
- Improvement on the sale of cigarettes to under-age young people from local shops
- Improvement in all areas of young people feeling safe in all areas including Rotherham town centre locations.

Areas for attention

- Greater awareness around disability and long-term illnesses, more young people putting themselves in this category
- More young people saying they have a weight issue

- A proportion of young people in Y7 saying they use the internet to meet new friends
- Increase in the number of young carers, saying they need to care eight or more hours per day
- Although less young people reported bullying, less young people also said that they felt as though they were helped after being bullied
- Less young people wanting to stop smoking
- Increase in number of young people trying electronic cigarettes
- One third of young people who said they have drunk alcohol, have tried it before age of 12
- Large proportion of young people who said they have drunk alcohol, said they have been drunk in past four weeks
- The use of legal highs increased
- Education around sexual exploitation, 40% of Y7 and 29% of Y10 still need to be taught this
- Almost a quarter of those pupils who said they have had sex, did not use contraception
- Young people visiting Rotherham town centre has reduced
- Y10 girls are the most likely not to recommend living in Rotherham or want to live in Rotherham in 10 years' time

- In response to the questions in relating to recommending Rotherham as a place to live or wanting to live in Rotherham in 10 years' time – more young people were unsure and gave the responses don't know or maybe rather than a definite yes or no.

Demographic Information

At the time of the survey there were 3251 young people in year 7 and 3356 in year 10 attending 16 secondary schools and three Pupil Referral Units in Rotherham. The survey was offered to all 16 secondary schools and three Pupil Referral Units in Rotherham. 13 out of 16 secondary schools and all pupil referral units took part in the 2015 survey with 3110 young people participated in total.

Participation rates for those 13 schools and Pupil Referral Units was 60%. Overall participation rate for all Y7 & Y10 young people was 47%.

In 2014 all 16 secondary schools participated and three pupil referral units in the survey in total 4,123 young people participated give a participation rate of 63%. Of the pupils that completed the 2015 survey, 1624 (52%) were female and 1486 (48%) were male. 1624 (52%) were in year 7 and 1,486 (48%) were in year 10.

2,564 pupils described themselves as White British (82%, slightly down from 84% in last year's survey), 451 were classed as Black & Minority Ethnic (BME) (15%, up from 13% last year) and 95 preferred not to say (3%).

496 (16%) of pupils said they had a long term illness, health problem or disability, this is a 7% increase from 2014. This large increase could

be due to the change in the question in 2015; this was changed to ask if they had a diagnosed long-term disability/illness or medical condition. In 2014 pupils were asked if they had a long-term illness or disability.

Young Inspectors

A commitment was made in our Children and Young People's Single Improvement Plan 2015 to develop a Young Inspectors Programme to ensure that young people are at the heart of service delivery and effective quality assurance arrangements are in place. In 2016 an action was also developed to utilise the Young Inspectors Programme to measure progress against our key priorities.

This contributes to improving the direct engagement of children and young people following Ofsted recommendations to ensure that the voices and experiences of the most vulnerable are heard, and they inform strategic planning and commissioning.

Rotherham's Young Inspectors Programme was set up in May 2015; based on good practice from Lincolnshire Council, national good practice and previous experience from within the Youth Service. The purpose of the Young Inspectors Programme is to:

- Place young people (aged between 13 and 24) at the heart of inspecting services delivered to children, young people and their families to ensure compliance against standards and inform service improvements
- Ensure the views and experiences of the Young Inspectors and children, young people and families are actively listened to, and acted upon to make a difference

- Improve the direct engagement of children and young people to ensure that the voices and experiences of the most vulnerable are heard, and they inform strategic planning and commissioning
- Provide young people from across Rotherham with opportunities to develop their skills, raise their confidence and self-esteem, all of which can lead to improved life chances
- Increase uptake and participation in services by those children and young people who have previously not engaged with Children and Young People's Services.

The Young Inspectors team currently consists of eight young people, four male and four female, of White British origin, ranging between ages 13 to 19 who are Rotherham residents. Some of the young people have a learning disability or social, emotional and mental health needs. Some of our young people are vulnerable and have received services and support from Children and Young People's Services.

The Young Inspectors have developed a Young Inspector Programme which has carried out 15 inspections over the school holidays. The Young Inspectors themselves have also achieved positive outcomes such as undertaking the Assessment and Qualifications Alliance Award, enhanced their social and personal development, increased skills, raised confidence and self-esteem and they have made a difference to other children and young people following the improvements made.

The Young Inspectors have identified many positive areas through their inspection programme including where children and young people feel they are actively listened to. The outcomes achieved:

- Lots of improvements have been made to the quality, range and access to information on the website – making it young person friendly
- Improvements have been made to our buildings with numerous repairs, maintenance, cleaning and gardening carried out
- The quality of information has been improved at our customer access points and buildings; where children and young people visit and live. For example signage, leaflets, notice boards and new furnishings
- New procedures have been implemented, for example complaints, ‘meet and greet’, increased choice for meals and activities
- Young Inspector experiences and findings informed a wider variety of staff training, new training matrix and induction files.

The Young Inspectors have a packed scheduled planned for more inspections of services also. Further work is required to understand children and young people’s journeys for accessing information and services through the website; ensuring easily accessible, customer friendly experiences, which take into account immediate access for our mobile and internet users.

During the summer holidays an exchange is planned with Lincolnshire Young Inspectors whereby each Local Authority will choose a theme for the young people to inspect; through the eyes of first time visitors.

Rotherham’s Young Inspectors Programme has been identified as good practice by Derbyshire Council. Key activities include fundraising, newsletters, press releases, attendance at events, promotional DVD (working with a student undertaking a filming/media course) and

Young Inspector personal stories. In the longer term Inspections of wider Council Services and Commissioned Services may be explored, inspecting wider public and private sector organisations. The future challenges of the Young Inspectors Programme include delivery within constraint budgets, group sustainability and momentum of inspections and outcomes. This will be managed through innovative thinking, planned communication and marketing campaigns, working towards our ambition of being a child-centred Borough and continued support from the Young Inspectors Team, Directors, Managers and staff.

Parents Carers Forum

The forum is led by Rotherham parents, working in partnership with RMBC, Rotherham CCG and supported by Contact a Family.

The main aim is to ensure the needs of all children and young people (aged 0-25) who are disabled or have additional needs in Rotherham are met. The vision is that all children, young people and their families living with disabilities/additional needs in our town enjoy the same opportunities, hopes and aspirations as other families in Education, Health, Social Care and leisure.

They aim to bring together parents/carers from across the borough to provide mutual support, share experience, exchange information, and influence policy.

The parents carers forum have developed a website:

<http://www.rpcf.co.uk>

Rotherham Parents Forum meet at the new Tesco Extra Store in the Community Space every Wednesday (apart from school holidays), 9.30am to 11.30am and we also hold a family drop-in session every

Monday evening (term-time only) at Kimberworth Place from 5.30pm to 7.30pm. Please see the Regular Events page on the website for further details.

Rotherham Looked After Children's Council

The LAC Council is a Voice & Influence Project which means children and young people are supported, empowered and encouraged to run their own LACC meetings, set their own agendas, have their say about things that matter to them and are provided with opportunities to influence decisions about how services are run.

LAC stands for Looked After Children and the LAC Council are a group of children and young people who are in care and leaving care, aged 11 to 18 years old. They hold regular meetings to raise awareness and have their say about things that affect them and work together to influence positive decisions to improve the lives of young people living in Care in Rotherham. The LAC Council has adopted the following statement from Article 12, of the United Nations Convention on the Rights of the Child:

“Children and young people have the right to say what they think should happen when adults are making decisions that affect them, and to have their opinions taken into account”.

The aims of the Rotherham LAC Council are to:

- Improve services for Rotherham looked after children and care leavers
- Raise awareness of the issues faced by looked after children and care leavers in Rotherham
- Build confidence, raise self-esteem and aspirations, make friends, work together and have fun!

The Looked After Children's Council have been able to positively impact on things that matter to them and meet all of their core aims within this period. Alongside working together on team building skills, increasing social capital, self-awareness and self-esteem building activities, young people have engaged in a high volume of co-production work to shape Services for looked after children. Some of the recent projects that members of the Looked After Children Council have been involved in includes:-

- **Commissioning of Foster Care Agencies for Rotherham Children & Young People** Working alongside Commissioning, a question within the tendering documents was specifically focused on the 'Voices of LAC & Young People'. Young people were surprised to receive 24 lengthy tenders from Foster Care Agencies wanting to work with Rotherham Looked After Children. Young people's task was to read and score these tenders. This was a huge undertaking with a very mixed ability group some of whom have Special Educational Needs, Mental Health Issues, Attention, Language and Comprehension challenges etc. However, with much encouragement and support, young people worked hard to complete this mammoth task and also developed an interview panel for the Foster Care Agencies
- **Dragons Den Interviews:** a collaborative piece of work where three young people from the LAC Council, the Youth Cabinet and Young Inspectors spoke to Managers, front line workers and Service users to find out how embedded good practice actually is. Valuable information from these interviews will be analysed by the Commissioning, Performance & Quality Team and utilised in future service improvement

- **Holocaust Memorial Day Event @ Town Hall:** Young people have wrote and rehearsed a presentation around the HMD theme 'Don't Stand By' where they have identified eight strong historical and contemporary characters who stood up against oppression and changed the world because of it
- **Rotherham's Early Help Service – Caring for Cared for Young People:** LAC Council members have also assisted in creating this information leaflet for Early Help Service, coming up with the title 'Caring for Cared for Young People' and ensuring the wording was young people friendly before being launched
- **Recruitment & Promotion of LAC Council:** young people looked at ways in which they could raise awareness of the many opportunities available in the LACC to other LAC across the borough and hopefully boost membership. LACC leaflets and information has been sent out to all LAC Designated Teachers in the 16 Secondary Schools across Rotherham asking for their help to spread the word about LACC with LAC young people within their schools. Also the group are creating posters to advertise the LACC which will be posted around Rotherham next week
- **LAC Council Pantomime 'oh yes it was' – Cinderella @ Civic Theatre Rotherham and LACC Christmas Party @ Cosmos Sheffield:** In order to build positive memories around Christmas for young people who may have had negative experiences in the past, and potentially distract from the pain of being separated from families at this time, the group traditionally plan for December to be a very festive fun month for the group. Alongside our annual visits to the above venues, young people shared together the fun and

engaged in Christmas Arts and craft Sessions, fun activities, carol singing and games. Great fun was had by all

- **Corporate LAC Promise – Evidencing the changes:** Following from co-production of the LAC Promise and delivery of the LAC Summit in September the LAC Council were again asked to engage in a piece of work together to place the nine items within the promise in order of importance so that each month starting from February 2016 Social Care can focus on one theme each month and evidence how they are sticking to the promises they have signed up to. This LACC session caused much debate and negotiation amongst young people who had to concede some points to gain others, the task was a wonderful experience to distinguish the differences between argument and debate!

Children, Young People and Families' Consortium – Rotherham Voluntary Sector Consortium

The Children, Young People and Families Consortium is a partnership of voluntary and community sector organisations which provide services for children, young people and families across Rotherham.

Members work together and with wider partners to develop and raise standards, share knowledge and good practice, and influence change. It acts as a conduit for sharing information, engaging with partners and brings members' vast array of knowledge and good practice into one place.

Consortium members meet monthly, receive regular information updates, attend subgroups and represent the Consortium on a wide range of strategic groups to support local policy developments. Members offer each other support and the consortium is a vehicle to respond collectively and in appropriate time-scales to our changing environment. Members also work within the Consortium to develop networks and partnerships to maximise resources and jointly bring funds into the borough to meet outcomes for children and young people.

Within this flexible and responsive structure, the Consortium has a clear set of priorities which are:

- To build on the collective voice and experience of members to improve outcomes for children, young people and families through sharing skills, knowledge and good practice, and workforce development
- To work with partners to innovate and change how services are delivered to continue to meet the needs of children, young people and families amidst a challenging environment and reduced resources

- To strengthen a collaborative consortia approach to pro-actively plan ways to maximise funding and other opportunities to anticipate and meet the needs of local children, young people and families
- To continue to raise safeguarding standards amongst voluntary sector members and share learning to influence the wider sector to keep children and young people safe
- To work with partners to ensure our service users (children, young people and families) and our member organisations have a voice to influence policy and change things for the better and are responsive to emerging issues.

Activities and Deliverables have included:

- Consortium members complete Section 11 Audit tool to ensure compliance with safeguarding standards
- Consortium members working with RMBC to develop an on-line Section 11 Audit tool
- CSE Community awareness raising materials developed and activities delivered across Rotherham
- Successful bid for Home Office funding, for CSE Support across the borough (the Base Project), with over 175 victims, survivors and family members have accessed services provided by organisations within the Base project
- Consortium members' facilitated service user's involvement to Children and Adolescent Mental Health Services (CAMHS) voice and influence project
- Consortium members' contribution as strategic representatives on Children and Young People's Strategic Partnership and Rotherham Local Safeguarding Children Board and subgroups.

Delivering and monitoring the Strategic Outcomes



The Children's Strategic Partnership has made a commitment to evaluate its effectiveness in delivering the Children and Young People's Plan 2016 to 2019. Outcomes Based Accountability (OBA) is a conceptual approach to planning services and assessing performance that focuses attention on the outcomes that the services are intended to achieve. This will involve the collection and use of relevant performance data, involving stakeholders, including service users and the wider community, in achieving better outcomes.

Relevant quantitative and qualitative outcomes will be reported by each strategic partner and summarised as follows:

- How much did we do?
- How well did we do it?
- Is anyone better off?

The Children and Young People's Plan Performance Scorecard will be used to monitor performance data and be reported to the Children's Strategic Partnership Board.

The following action plan includes the three outcomes to be achieved and describes the main outcome measures, performance indicators and targets.

Action Plans

Outcome 1: Children Young People and their families are healthy and safe from harm							
Priority Area	Ref No	Measure	Good Performance	Performance	Target 2016/17	Accountable Partner Organisation	Why this priority area is included in this Plan
Early Help Services to identify and support families at the right time to help prevent social care involvement.	1.A1	Early Help – Reduction in Children in Need rate per 10,000 population.	Low	320 (2015/16)	No target	Rotherham Borough Council	Identifying problems early can stop them escalating. To reduce demand upon specialist and higher tier services.
	1.A2	Social Care – Percentage reduction children who had a social care concern raised within 12 months of the last concern ending (re-referrals).	Low	30.9% (2015/16)	April – September 26%. October to March 23%	Rotherham Borough Council	Improve quality of service. Reduction in re-referrals demonstrates impact of early help interventions.
	1.A3	Early Help – Number of Early Help Assessments completed.	High	536 (Cumulative December 2016)	No target	Rotherham Borough Council	Greater access to early help services reduces the need for more costly social care intervention.
Increase the take up of services delivered by Children’s Centres.	1.B1	Early Help – increase percentage of children aged 0-5 living in the Rotherham area who have accessed Children’s Centre where there are high levels of deprivation.	High	91.4% (2015/16)	95%	Rotherham Borough Council	Families with children under five can access a range of services and information including family support workers and health professionals.
Increase the take up of free Early Child Care for disadvantaged families.	1.C1	Early Help – Percentage increase of entitled two-year-olds accessing child care.	High	78% (Summer term 2015)	80%	Rotherham Borough Council	Receiving good quality early years education is associated with improved outcomes for children’s development.

Outcome 1: Children Young People and their families are healthy and safe from harm							
Priority Area	Ref No	Measure	Good Performance	Performance	Target 2016/17	Accountable Partner Organisation	Why this priority area is included in this Plan
Increase the number of families engaged in the Families for Change Programme.	1.D(a)	Number and percentage of families engaged as a percentage of annual target Families for Change (FFC) Y2.	High	100% (2015/16)	822 families	Rotherham Borough Council	Service focusses on early intervention, including family intervention, to support families with multiple problems. Successful programme – turning the lives of families around.
Reduce the number of First Time Entrants into the Youth Justice System.	1.E1	Early Help – percentage reduction in first time entrants into criminal justice system. Per 10,000 10-17 years population.	Low	519 (2015/2016)	No target	Rotherham Borough Council	The life chances of young people who have a criminal conviction may be adversely affected in many ways in both the short term and long term. Prevention of offending is a priority.

Outcome 1: Children Young People and their families are healthy and safe from harm							
Priority Area	Ref No	Measure	Good Performance	Performance	Target 2016/17	Accountable Partner Organisation	Why this priority area is included in this Plan
Reduce the number of unintentional accidents resulting in hospital admissions.	1.F1(a)	Rate of hospital admissions caused by unintentional and deliberate injuries in children aged 0-4 years per 10,000 resident population.	Low	129.8 per 10,000 resident population* (498 hospital admissions). (2014/2015)	No target	The Rotherham Foundation Trust	Injuries are a leading cause of hospitalisation and a source of long-term health issues. This is a key indicator for cross-sectoral and partnership working to reduce injuries, including child safeguarding. (Source – Public Health England)”
	1.F1(b)	Rate of hospital admissions caused by unintentional and deliberate injuries in children aged 0-14 years per 10,000 resident population.	Low	106.5 per 10,000 resident population* (498 hospital admissions). (2014/2015)	No target	The Rotherham Foundation Trust	*Data Source: Hospital Episode Statistics (HES). Copyright 2016. Re-used with the permission of the Health and Social Care Information Centre. All rights reserved
	1.F1(c)	Rate of hospital admissions caused by unintentional and deliberate injuries in children aged 15-24 years per 10,000 resident population.	Low	122.6 per 10,000 resident population* (378 hospital admissions). (2014/2015)	No target	The Rotherham Foundation Trust	

Outcome 1: Children Young People and their families are healthy and safe from harm

Priority Area	Ref No	Measure	Good Performance	Performance	Target 2016/17	Accountable Partner Organisation	Why this priority area is included in this Plan
Reduce the levels of childhood obesity	1.G1(a)	Reduce year-on-year levels of childhood obesity for (a) Reception year children (age 4/5).	Low	10.3% (2015/16)	Downward trend in excess weight by 2020	Rotherham Borough Council	Obesity can seriously affect the physical and mental health of children, reduce self-esteem and increase the risk of social isolation
	1.G1(b)	Reduce year-on-year levels of childhood obesity for (b) year 6 children (age 10/11).	Low	21.8% (2015/16)	Downward trend in excess weight by 2020	Rotherham Borough Council	Obese children are at risk of becoming obese adults, reducing life expectancy. Partners to contribute to preventing obesity in childhood.

Outcome 1: Children Young People and their families are healthy and safe from harm							
Priority Area	Ref No	Measure	Good Performance	Performance	Target 2016/17	Accountable Partner Organisation	Why this priority area is included in this Plan
Reduce risky health behaviours in young people.	1.H1(a)	Reduce suicide and self-harm: Hospital admissions caused by unintentional and deliberate injuries (0-14 years).	Low	106.5 per 10,000 resident population (498 hospital admissions (2014/15))	To reduce	Rotherham Borough Council	Group of suicide events in Rotherham from November 2011.
	1.H1(b)	Hospital admissions caused by unintentional and deliberate injuries (15-24 years).	Low	122.6 per 10,000 resident population (378 hospital admissions) (2014/15)	To reduce	Rotherham Borough Council	One in ten children aged 5-16 years has a clinically diagnosable mental health problem and, of adults with long-term mental health problems, half will have experienced their first symptoms before the age of 14. Self-harming and substance abuse are known to be much more common in children and young people with mental health disorders – with ten per cent of 15-16 year olds having self-harmed. Failure to treat mental health disorders in children can have a devastating impact on their future, resulting in reduced job and life expectations. (Source – Public Health England)”
	1.H1(c)	Hospital admissions for mental health conditions (0-17).	Low	40.8 per 100,000 resident population (23 hospital admissions) (2014/15)	To reduce	Clinical Commissioning Group	
	1.H1(d)	Hospital admissions as a result of self harm (10-24 years).	Low	312.1 per 100,000 resident population (143 hospital admissions). (2014/15)	To reduce	Clinical Commissioning Group	Determining the underlying causes of suicide and self-harm and improving the mental health well-being is a priority for all children and young people. Multi-agency suicide and serious self harm community response plan developed.

Outcome 2: Children, Young People and their Families Start School Ready to Learn from Life							
Priority Area	Ref No	Measure	Good Performance	Performance	Target 2016/17	Accountable Partner Organisation	Why this priority area is included in this Plan
Special Educational Need and Disabilities – Improve personal outcomes for our young people with SEND to enable them to make choices that lead to successful adult lives.	2.A1(a)	Percentage of Education Health and Care Plans completed in statutory. (New plans issue 9 from September 2014).	High	58.3% (2015/16)	90% (by April 2018)	Rotherham Borough Council	Legislation led to significant changes in the approach to provision for children and young people with SEND. Development of Rotherham offer required. Joint approach to commissioning services. Provision of personal budgets.
	2.A1(b)	Percentage of Education Health and Care Plans completed in statutory timescales (based on conversations from statements to EHCP) from September 2014).	High	85.5% (2015/16)	90% (by April 2018)	Rotherham Borough Council	
Sustainable Education and Skills – Challenge all schools academies and education setting who are not providing at least a ‘good’ level of education for our children.	2.B1	All children make good or better progress. The progress a pupil makes from the end of primary school to the end of secondary school (Key Stage 4 progress 8 Measures).	High	New measure for secondary accountability in 2016 there is currently no performance data.	No target	Rotherham Borough Council	All young people should have the tools and opportunities to fulfil their potential. Quality of education for children and young people should enable them to be well prepared for further education, higher education and work.

Outcome 3: Children Young People and their families are healthy and safe from harm							
Priority Area	Ref No	Measure	Good Performance	Performance	Target 2016/17	Accountable Partner Organisation	Why this priority area is included in this Plan
Enable hard to reach young people to achieve their full potential through education, employment or training.	3.A1	Percentage of young people aged 16-18 who are Not in Education, Employment or Training (NEET).	Low	5.3 % (2015/16)	3.1 %	Rotherham Borough Council	Families with children under five can access a range of services and information including family support workers and health professionals.
Improve the access to emotional wellbeing and mental health services.	3.B1(a)	CAMHS referrals triaged within 24 hours of receipt.	High	99.4 % (2015/16)	100 %	Rotherham, Doncaster and South Humber (RDASH)	Tackling inequalities with a focus on young people who are vulnerable, specifically around mental health. Access to community mental health services needs to improve.
	3.B1(b)	Percentage of triaged CAMHS referrals that were assessed within three weeks.	High	26.3 %	95 %	Rotherham, Doncaster and South Humber (RDASH)	
Young People are ready for Level 3 Qualifications (equivalent to A Level).	3.C1	The progress a pupil makes from the end of primary school to the end of secondary school. (Key Stage 4 progress 8 measure.)	High	No data – new measure	No target	Rotherham Borough Council	All young people should have the option to undertake academic and vocational education, including apprenticeships and traineeships. A level 3 qualification enables access to these opportunities.

Outcome 3: Children Young People and their families are healthy and safe from harm							
Priority Area	Ref No	Measure	Good Performance	Performance	Target 2016/17	Accountable Partner Organisation	Why this priority area is included in this Plan
Increase the number of young people aged 15-19 in Rotherham Schools and Colleges receiving support from Rotherham Youth Enterprise.	3.D1	No of young people aged 15-19 in Rotherham Schools and Colleges receiving support from RYE in terms of the delivery of employability skills sessions and self-employment awareness sessions.	High	4,805 (2015/2016)	No target	Rotherham Youth Enterprise	Rotherham Youth Enterprise contributes to the local economy by supporting young people/ adults to make the leap from education into self-employment and business; supporting business growth; and long term business survival rates.

CONTACT DETAILS

Clare Burton

E-mail: clare.burton@rotherham.gov.uk

Telephone: (01709) 254835

Visit: Riverside House
Main Street
Rotherham
S60 1AE

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If you or someone you know needs help to understand or read this document, please contact us:

☎ (01709) 254835

✉ clare.burton@rotherham.gov.uk

Ak vy alebo niekto koho poznáte potrebuje pomoc pri pochopení alebo čítaní tohto dokumentu, prosím kontaktujte nás na vyššie uvedenom čísle alebo nám pošlite e-mail.

ئەگەر تۆ یان كەسێك كە تۆ دەیناسی پێویستی بەیارمەتی هەبێت بۆ ئەوەی لەم بەلگەنامە یە تیگات یان بیخوینیتەوه، تکیه پهیوهندیمان پێوه بکه لەسەر ئەو ژمارەیهی سەرۆهەدا یان بەو ئیمهیلە.

إذا كنت انت أو اي شخص تعرفه بحاجة إلى مساعدة لفهم أقرأة هذه الوثيقة، الرجاء الاتصال على الرقم اعلاه، أو مراسلتنا عبر البريد الإلكتروني

اگر آپ یا آپ کے جاننے والے کسی شخص کو اس دستاویز کو سمجھنے یا پڑھنے کیلئے مدد کی ضرورت ہے تو برائے مہربانی مندرجہ بالا نمبر پر ہم سے رابطہ کریں یا ہمیں ای میل کریں۔

اگر جناب عالی یا شخص دیگرى كہ شما اورا می شناسید برای خواندن یا فهمیدن این مدارك نیاز به كمك دارد لطفا با ما بوسیله شماره بالا یا ایمیل تماس حاصل فرمایید۔

Summary Sheet

Name of Committee and Date of Committee Meeting

Overview and Scrutiny Management Board – 11 October 2017

Title

Scrutiny Review: Emergency Planning

Is this a Key Decision and has it been included on the Forward Plan?

No

Strategic Director Approving Submission of the Report

Shokat Lal, Assistant Chief Executive

Report Author

Christine Bradley, Scrutiny Officer, Democratic Services
01709 822738 or christine.bradley@rotherham.gov.uk

Ward(s) Affected

All

Executive Summary

The scrutiny review report (attached at Appendix 1) outlines the findings from the scrutiny review into the Emergency Planning process for Rotherham Metropolitan Borough Council. The determining factors for undertaking the review were that the existing Emergency Plan was considered to be out of date and this, coupled with high turnover of both officers and Members, warranted a review as it called into question the resilience of the existing plan.

A Task and Finish Group was established from Members of the Improving Places Select Commission to carry out the review, which was undertaken by interviewing relevant Members and officers from the Council, along with a fact finding visit to Stockton-on-Tees to learn how their Emergency Planning Service is provided.

The legal context governing the provision of the Emergency Plan is covered in the report, together with basic details covering the Joint Service Agreement which exists between Rotherham and Sheffield Councils to provide the Emergency Plan.

Running in parallel to this review was a refresh of the Emergency Plan, which has now been renamed the Major Incident Plan. The 15 recommendations resulting from this scrutiny review are set out on pages 28 and 29 of the review report in Appendix 1. Subject to approval these will be incorporated into the Major Incident Plan.

Recommendations

1. That consideration be given to the review report on Emergency Planning.
2. That the report be forwarded to the Cabinet and Commissioners for their consideration and response to the recommendations.

List of Appendices Included

Appendix 1 Scrutiny Review: Emergency Planning

Consideration by any other Council Committee, Scrutiny or Advisory Panel

Improving Places Select Commission – 20 September 2017

Council Approval Required

No

Exempt from the Press and Public

No

Scrutiny Review: Emergency Planning

1. Recommendations

- 1.1 That consideration be given to the review report on Emergency Planning.
- 1.2 That the report be forwarded to the Cabinet and Commissioners for their consideration and response to the recommendations.

2. Background

- 2.1 The legal framework governing the Emergency Plan is the Civil Contingencies Act 2004.
- 2.2 A Joint Service Agreement is in place between Rotherham and Sheffield Councils to provide the Emergency Plan.
- 2.3 The primary factors influencing this review being undertaken were:-
 - The current Emergency Plan was considered to be out of date, having been written in September 2013.
 - The significant turnover of both officers and Members within the Council recently brought into question the resilience of the existing plan.

3. Key Issues

- 3.1 The main findings from the review are summarised below:
 - How the Emergency Plan, as a controlled document, is being shared and managed.
 - Lack of joint meetings between Rotherham and Sheffield under the Joint Service Agreement.
 - Overall management of the Emergency Planning process due to changes in officers and Members.
 - Primary operations room is not exclusively used for Emergency Planning purposes but also as a training facility.
 - The secondary operations room at Clifton Park provides limited resources.
 - Requirement to recruit and train more volunteers.
 - Lack of a corporate exercise for the service.
 - Lack of information sharing between partner organisations
 - The need to provide training to Parish Councillors on the Emergency Plan.
 - No dedicated 4x4 wheeled drive vehicle.
 - Procurement staff have been excluded from the Emergency Planning process over time.
 - When the Emergency Plan is operational, the Council effectively becomes an emergency service, a fact to be made known to the Council's suppliers of goods and services.

- A Corporate Risk Manager is employed by the Council and is available to provide a “critical friend” support to the Emergency Planning Team when rewriting the plan.
- Attention is given to improving community resilience in the time of an emergency.
- Ward Councillors need to receive training on the Emergency Plan and to understand their role in the process, along with supporting the Cabinet Member.
- The types of risk in the Borough could change – e.g. having the Advanced Manufacturing Park within its boundaries; this could be seen as a target for terrorism.
- All members of the Communications Team are proficient in dealing with all media types and have access to all documents on a shared drive.
- All the Managers in the Communications Team have received training in the Emergency Planning process.
- A member of the Communications Team is on call at all times, working closely with the Borough Emergency Co-ordinator in when the Emergency Plan is operational.
- The system currently in use in the Borough Emergency Operations Rooms (BEOR) is unsupported and further work needs to be done to establish the access codes for the system.
- Overall the IT systems relating to the Emergency Plan need to be examined and ultimately systems need to be based in the Cloud, eliminating the need for a BEOR.
- The IT systems are not part of the shared service agreement with Sheffield.

3.2 The review group formulated 15 recommendations, as set out on pages 28 and 29 of Appendix 1, covering a range of strategic and operational issues.

4. Options considered and recommended proposal

4.1 Options available to the Improving Places Select Commission were:-

- a) To allow the refresh of the Emergency Plan / Major Incident Plan to be undertaken by officers. Considering the Emergency Plan was last updated in September 2013 it was agreed by officers that not updating the plan could potentially provide a significant risk to life if the Emergency Plan was not fit for purpose in an emergency situation.
- b) Not to undertake the scrutiny review of Emergency Planning. This was an option with the Task & Finish Group available to agree another topic from the Improving Places Select Commission work plan to scrutinise.
- c) Undertake the scrutiny review alongside the updating of the Emergency Plan. This was the preferred option as it provided the additional benefit of scrutiny making recommendations to enhance the work of the officers updating the Emergency Plan.

5. Consultation

- 5.1 No external consultation was required but a fact finding visit to Stockton-on-Tees took place to explore how the Emergency plan operates in the area.

6. Timetable and Accountability for Implementing this Decision

- 6.1 The findings and recommendations from the review have been submitted to Improving Places Select Commission for discussion and agreement.
- 6.2 The final report will be forwarded to the Overview and Management Board for their consideration before being submitted to Cabinet for a response to the recommendations.

7. Finance and Procurement Implications

- 7.1 Any financial and procurement implications will be considered by Cabinet in their response to the recommendations.

8. Legal Implications

- 8.1 The legal framework governing the Emergency Plan is the Civil Contingencies Act 2004 and any changes to the plan or emergency planning arrangements will need to comply with the legislation.

9. Human Resources Implications

- 9.1 The response to the review recommendations will explore any implications for human resources arising from the review.

10 Implications for Children and Young People and Vulnerable Adults

- 10.1 Any changes to Emergency Planning arrangements following the review need to take account of the needs and requirements of all groups in the community.

11. Equalities and Human Rights Implications

- 11.1 As 10.1.

12 Implications for Partner and Other Directorates

- 12.1 The Council works in partnership with Sheffield City Council through the joint agreement and all directorates are involved in the emergency planning arrangements.

13 Risks and Mitigation

- 13.1 The review and refresh of the Major Incident Plan and the Council's Emergency Planning arrangements will ensure future resilience and enhance readiness to deal with emergency situations.

14 Accountable Officer(s)

James McLaughlin, Democratic Services Manager

This report is published on the Council's website or can be found at:-

<http://moderngov.rotherham.gov.uk/ieDocHome.aspx?Categories=>

Scrutiny Review: Emergency Planning

Review from the Improving Places Select
Commission Task & Finish Group

August 2017

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Executive Summary

The Improving Places Select Commission chose to undertake a review of the Emergency Plan in 2016/2017, due to the fact that the current Emergency Plan was dated September 2013, this along with the high turnover of both Members and Officers at RMBC in recent years, a review was urgently needed. Members were aware that not having an effective EP in place could potentially lead to the loss of life.

The aim of the review was to test the resilience of the EP operational from the perspective of internal governance, resilience arrangements within Directorates and also with external agencies. The anticipated outcome is to have a strong, resilient EP which is fit for purpose.

A cross party Task & Finish Group was established to undertake the review which involved a fact finding visit to Stockton-on-Tees to meet the relevant officers and Members involved in the EP process. In Rotherham interviews were held with Senior Officers, a Cabinet Member and various officers with a role to play in the operational EP.

The Legal Context covering the EP is the Civil Contingencies Act 2004, which provides a definition of an emergency, along with the responsibilities of all Category 1 responders, which Local Authorities are one of, to mitigate and manage emergencies. This work is carried out through the South Yorkshire Local Resilience Forum (SYLRF) and its Sub Group Structure.

Joint Service Agreement with Sheffield (JSA)

This agreement was signed in 2011 between Rotherham and Sheffield, the principle driver being to achieve greater effectiveness and efficiency in the delivery of services. This agreement has been in place for six years.

The findings from the review identified

- Circulation of a controlled document
- Lack of joint meetings between Rotherham and Sheffield under the Joint Service Agreement.
- Overall management of the EP process due to changes in officers and members.
- Primary operations room is not exclusively used for EP purposes but also as a training facility.
- The secondary operations room at Clifton Park provides limited resources.
- Requirement to recruit and train more volunteers.
- Lack of a corporate exercise for the service.
- Lack of information sharing between partner organisations

- The need to provide training to Parish Councillors on the EP
- No dedicated 4x4 wheeled drive vehicle.
- Procurement staff, over time have been excluded from the EP process.
- When the EP is operational, the Council effectively becomes an emergency service, a fact to be made know to the Council's suppliers of goods and services.
- Corporate Risk Manager is employed by the Council and is available to provide a "critical friend" support to the EP Team when rewriting the plan.
- Attention is given to improving community resilience in the time of an emergency.
- Ward Councillors need to receive training on the EP and to understand their role in the process along with supporting the Cabinet Member.
- The types of risk in borough could change – e.g. having the Advanced Manufacturing Park within its boundaries, this could be seen as a target for terrorism
- All members of the Communications Team are proficient in dealing with all media types along with having access to all documents on a shared drive.
- All the Managers in the Communications Team have received training in the EP process
- A member of the Communications Team is on call at all times and when they work closely with the Borough Emergency Co-ordinator in when the EP is operational.
- The system currently in use in the Borough Emergency Operations Rooms (BEOR) are unsupported and further work needs to be done to establish the access codes for the system.
- Overall the IT systems relating to the EP need to be examined and ultimately systems need to be based in the Cloud, therefore eliminating the need for a BEOR.
- The IT systems are not part of the shared service agreement with Sheffield.

Conclusion

The decision to undertake this review has been justified by the findings it has identified, which need to be addressed in order to add strength to the revised Emergency Plan. The Group concluded that due to the importance of the EP, it should be reviewed on a regular basis.

Recommendations

1. That the Major Incident Plan is reviewed bi-annually by a group of Members from the IPSC and this work forms part of the work programme for that year, however the document is to be reviewed by officers on a continual basis.

2. Mandatory training is to be provided to all Members about the Major Incident Plan to increase their awareness and involvement in any major incident.
3. Training relating to the Major Incident Plan should be mandatory to ensure all staff who volunteered are confident in the role they play in the management of the incident.
4. An “out of hours” training exercise to take place once all volunteers have been trained. Full training exercises then take place on a regular basis.
5. A targeted approach to recruitment from employees who can be “job matched” to appropriate roles in the operation of the Major Incident Plan.
6. There are sufficient volunteers to staff the EP for at least two shift changes.
7. A protocol to be developed to ensure that the partner organisations in the Major Incident Plan are notified as a matter of course when significant incidents occur in the borough and through the Local Resilience Forum, ways are to be identified and carried out on building relationships between partner organisations involved in the Emergency Plan – in particular to the turnover in staff.
8. A facilitated meeting/away day involving the emergency services and RMBC major incident staff on the ground to promote team working.
9. An on-going programme of training sessions for Parish Council members should be arranged to ensure any new members receive training on the subject.
10. A representative from Procurement to be involved in the Borough Emergency Operations Room to facilitate timely ordering of goods/services and to provide information if the Belwin Fund becomes operational.
11. Through the Shared Service Agreement funding is secured for a Community Resilience Worker.
12. The Corporate Risk Manager is involved in the role of a “critical friend” any amendments of the Major Incident Plan
13. A flow chart to be designed detailing the Major Incident Process and highlighting how and when Members are to be involved in the process.

14. The Chief Executive / Leader of the Council to inform counterparts in Sheffield of their concerns over the lack of meetings in relation to the Joint Service Agreement.
15. The situation relating to the unsupported IT systems is rectified.

Why Members wanted to undertake this review.

The Select Commission for 'Improving Places' identified that a review of the corporate Emergency Plan (EP) was a priority for the year 2016 / 2017 because:

- The existing EP was out of date, the current version is dated September 2013 Amendment 35;
- of high turnover of staff in the authority at a senior level over a short timescale;
- of high number of new elected Members in the Council; and
- the number of staffing changes in other organisations linked with the EP

Concern was expressed over the strength, structure and the effectiveness of the plan in an emergency situation. The Select Commission Group was aware that lives could potentially be at risk in circumstances where the EP would be made operational and it would not be sufficiently robust.

The aim of the review was to

Test the resilience of the Emergency Plan operation including examining the:-

- Internal governance including meetings structure, attendance and terms of reference for all the groups involved.
- Resilience arrangements networked within Directorates.
(The existing group of Directorate representatives is no longer reflective of the current Council structure.)
- Resilience of arrangements with external agencies involved in the EP process

The anticipated outcome of the review was to have an improved Emergency Plan that was fit for purpose and would provide reassurance that the service was adequately resourced to meet potential disasters and significant incidents which could occur in the Rotherham Borough.

To confirm that the governance structures are robust, effective, efficient and provide senior leadership team with the reassurance they required.

The potential impact of not having a robust EP could ultimately result in loss of life.

The unknown risks surrounding the Borough Emergency Plan requires that a robust and resilient framework exists, which enables the organisations involved to be able to react to any emergency situation when needed. It was agreed that this would be developed and implemented at the earliest opportunity.

It is important to note that when this review commenced work, officers, were progressing work to update the corporate EP, which when published will be renamed as the 'Major Incident Plan'.

Both elements of work, to develop the framework and to revise the EP, have been run concurrently, with input to the review from Senior Officers.

Method

The preferred method to evaluate the current plan was to undertake an in depth review by a Task and Finish Group (referred to in this report as "Group") which consisted of the following representatives from the Improving Places Select Commission.

Cllr Brian Cutts (UKIP)
Cllr Ian Jones (Lab) Vice Chair
Cllr Rose McNeely (Lab)
Cllr Kath Reeder (UKIP)
Cllr David Sheppard (Lab)
Cllr Robert Taylor (Lab)
Cllrs Bob Walsh (Lab)
Cllr Ken Wyatt (Lab) Chair

Co-optee Members

Mr Pat Cahill
Mrs Lilian Shears
Mr Brian Walker

The activities undertaken included a fact finding visit to Stockton-On-Tees, which took place on 17th October 2016. The objective of this visit was to learn how the Emergency Plan is managed in the Cleveland Emergency Planning Unit. Attendance on the visit included members of the Group along with the Senior Resilience Officer, now the Emergency & Safety Officer, and Claire Hanson.

During the visit Stuart Marshall, the Chief Emergency Planning Officer and Local Resilience Forum Manager at the Cleveland Emergency Planning Unit along with Cllr Marjorie James (Hartlepool Borough Council) the lead member for EP, provided an open and honest account of how their EP operates and shared their experiences with the T&F GP.

Additionally, a number of key personnel from Rotherham MBC, who have a role within the EP process, were interviewed, including:

Jo Abbot - Borough Emergency Co-ordinator

Cllr Saghir Alam – Cabinet Member for Corporate Services and Budgeting (includes EP)

Helen Chambers - Senior Procurement Category Manager

Simon Dennis - Corporate Risk Manager

Claire Hanson – Emergency & Safety Manager

Karen Hanson - Assistant Director Community Safety & Street Scene

Leona Marshall - Communications and Marketing Manager

Jane Pearson - Forward Liaison Officer

Robert Parker - Forward Liaison Officer

Luke Sayers - Assistant Director Customer Information and Digital Services

Damien Wilson - Strategic Director for Regeneration & Environment.

Paul Woodcock - Borough Emergency Co-ordinator

Three members of the Group observed the exercise 'Golden Winter,' which was facilitated by officers from the Counter Terrorism Unit in Riverside House on 28th February 2017

To provide context to this review, previous Council papers have been referred to and are referenced at the end of this report.

Legal Context

The legal framework which governs civil emergency is the Civil Contingencies Act 2004.

What is an emergency?

An emergency is defined in section 1 of the Civil Contingencies Act 2004 as:

1. An event or situation which threatens serious **damage to human welfare** in a place in the United Kingdom
2. An event or situation which threatens serious **damage to the environment** or a place in the United Kingdom
3. War or terrorism, which threatens serious **damage to the security** of the United Kingdom.

Emergency planning is the process by which unexpected incidents can be mitigated. In general terms, it is the work that the Government, local authorities, the emergency services, health services and partners all do in preparing plans and procedures for dealing with and recovering from any emergency or major incident that has an impact on the emergency services or the community.

Under the Civil Contingencies Act 2004 local authorities and other Category 1 responders, such as the emergency services and NHS bodies, have a statutory duty to:

- Assess the risk of emergencies or major incidents occurring and use this to inform contingency planning.
- Put in place robust emergency plans and recovery arrangements.
- Put in place arrangements to make information available to the public about civil protection matters and maintain arrangements to warn, inform and advise the public in the event of an emergency or major incident.
- Share information and co-operate with other local responders to enhance co-ordination, collaboration and efficiency.
- Put in place Business Continuity Management arrangements. Local authorities must: 'maintain plans to ensure that they can continue to perform their functions in the event of an emergency or major incident, as far as is reasonably practicable'.
- Provide advice and assistance to businesses and voluntary organisations about Business Continuity Management (local authorities only from May 2006).
- **(reference report – cabinet Sept 2010**
[mhttp://modgovapp/documents/g8466/Public%20reports%20pack%2022nd-Sep-2010%2010.30%20The%20former%20Cabinet%20-%202nd%20June%202004%20-%204th%20February%202015.pdf?T=10](http://modgovapp/documents/g8466/Public%20reports%20pack%2022nd-Sep-2010%2010.30%20The%20former%20Cabinet%20-%202nd%20June%202004%20-%204th%20February%202015.pdf?T=10)

South Yorkshire Local Resilience Forum (SYLRF) and Sub Group Structure

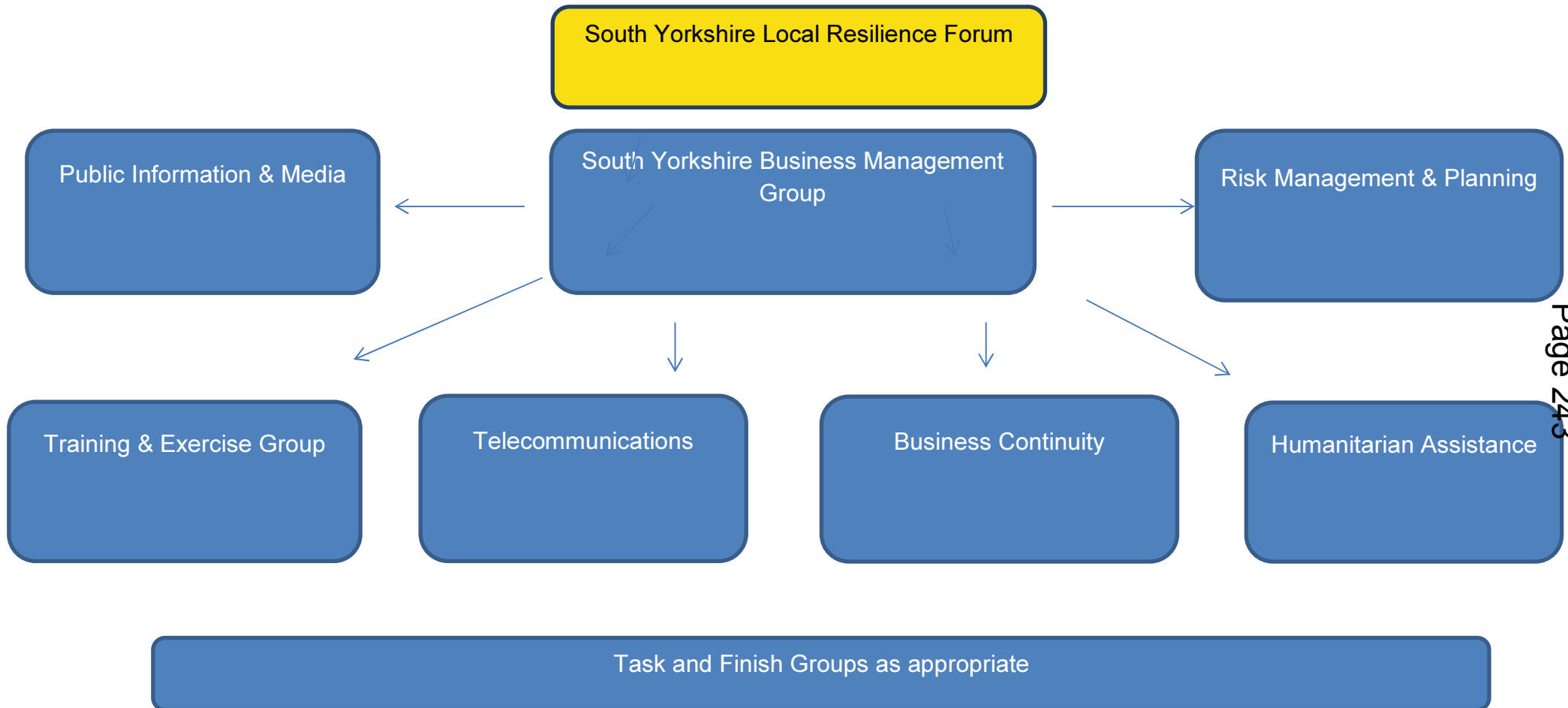
The SYLRF provides the governance structure to ensure that there is an adequate level of multi agency preparedness as required by the duties under the Civil Contingencies Act to enable an effective response to emergency incidents that may have a significant impact on the communities of South Yorkshire and its

neighbouring communities. The structure is highlighted in **Diagram 1** along with the Terms of Reference noted in **Appendix 1**

This group meets twice a year in May and November. The list shows dates of meetings of past and future meetings.

- 9th June 2015,
- 12th November 2015
- 26th May 2016
- 17th November 2016
- 11th May 2017
- 16th November 2017

Local Resilience Forum and Sub Group Structure



Joint Service Agreement with Sheffield. (JSA)

Within the SYLRF there is a separate service agreement between Rotherham and Sheffield

The background to this agreement is that in November 2009 Rotherham Metropolitan Borough Council was approached by the then Deputy Chief Executive of Sheffield City Council to explore arrangements for a Shared Service approach to be formed between the two areas.

The principal driver of this initiative was to achieve greater effectiveness and efficiency in the delivery of services to the communities and not primarily driven by budget savings. Under this option Rotherham MBC did see a reduction of cost in providing this service.

The signing of a legal agreement to formalise the new service arrangements was undertaken on 1st June 2011.

The legal agreement has been in place for six years and provides an overview of the obligations of both councils on aspects of commencement and terms of the agreement; representations on outside bodies; fraud and irregularity; withdrawal and termination.

The amount of funding available under the Joint Service Agreement is based allocated per head of the population so a 68/32 percentage split.

Diagram 2 shows the staffing structure agreed to deliver the shared service.

The formulation of the JSA has resulted in one team to provide an EP service for both areas. Individuals are based at one of the local authority offices, but there is no allegiance to one authority. The work is divided on a theme basis covering Rotherham and Sheffield however there are individual Major Incident Plans in place.

With the signing of the agreement came the formulation of the Emergency Planning Shared Service (Rotherham and Sheffield) Joint Committee and its role to oversee the implementation, development and operational performance of the service in accordance with the terms of the agreement. Part of the duties is to manage the budget for the service along with producing an Annual Report on activities during the year. The last Annual Report was produced in May 2016.

Appendix 2 provides the Terms of Reference for the Joint Committee (JC).

The timescale for the JC to meet is on a half yearly basis and they have met on the dates shown below.

15th July 2014

20th January 2015

3rd September 2015 – Cancelled (not quorate)

21st March 2016

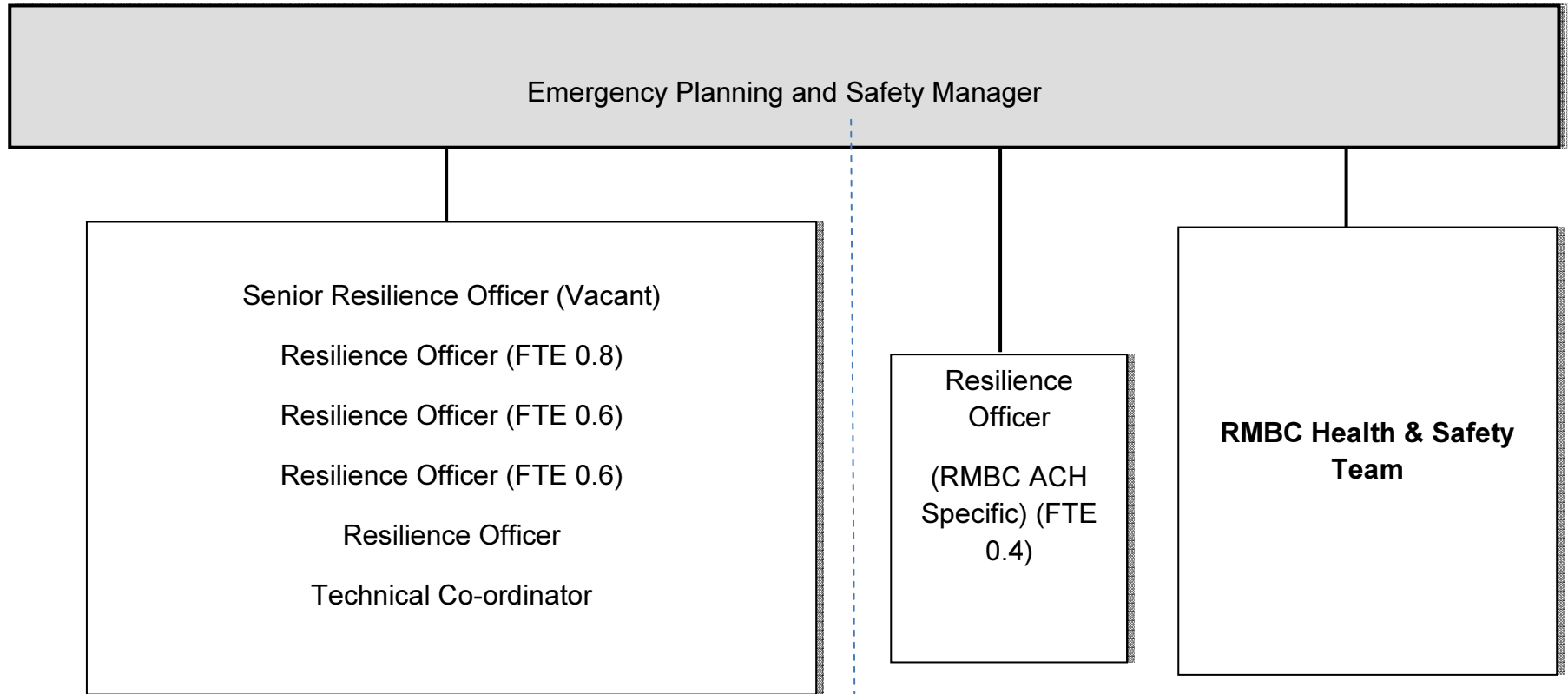
3rd November 2016 – Cancelled (not quorate)

Three people interviewed as part of the review raised concerns regarding the Joint Service Committee meetings with Sheffield which are not happening to the agreed timescale, due to lack of attendance from Sheffield. Alternative options to face to face meeting have been put forward such as teleconference calls to allow the meetings to take place. To date, no alternative solution has been implemented and consequently the occurrence of the meetings remains inconsistent.

It was also unclear from the Rotherham membership as to who the relevant councillors are from Sheffield on this committee.

The JSA will continue on an annual basis until one authority gives notice to end the agreement. Any necessary changes to the JSA are approved and noted as they arise.

Diagram 2 Emergency and Safety Team – Team Establishment



Emergency Planning Shared Service
(Rotherham MBC and Sheffield CC)

Rotherham MBC only

Emergency Plan

The current version of the Emergency Plan was published in September 2013 and is considered to be out of date. A refresh of the EP ran concurrently with this review and mutual support was provided by the Emergency & Safety Manager. The revised Emergency Plan will be renamed the Major Incident Plan.

One issue that came to light at the inception of the review is how the EP, as a controlled document, is being shared and managed. This was illustrated by the fact that the document had been issued to members of the Group without any registration of the fact neither did there appear to be a one-to-one exchange for the document (old for new). Therefore, a controlled document has now become uncontrolled. Hard copies of the EP are not widely issued as a matter of course. The copies were issued for information only for the review. A hard copy is provided to the newly trained Borough Emergency Co-ordinator (BEC) as part of their kit. From this point it is the responsibility of the BEC to keep the document up to date. It is practice that circulation of hard copies should be recorded. Hard copies are kept in the Primary Operations Room (Riverside) and other pertinent locations the Secondary Operations Room (Garden Room Clifton Park Museum) and the Emergency Operations Room in Sheffield. These copies are kept up to date by a member of the EP Team.

Copies of critical reference documents including, but not limited to plans, rotas, contact directory etc. are stored electronically on a shared W drive which is accessible by Borough Emergency Co-ordinators (BEC) and all other response staff. When the plans are updated all response staff are notified by email, requesting confirmation that the individual has received and accessed the document. Responsibility for storage and retention remains with the individual.

One point that was identified by several sources was that some focus surrounding the management and implementation of the EP has been lost following the departure of the previous the Emergency Planning Manager in February 2012. This has been compounded by the fact that there have been major changes in both the number of newly elected Members and Council Staff at all levels since 2014, providing the perception that the current EP is unfit for purpose in its current state.

Finance is not considered within the scope of this review, however the Group did mention the Belwin Fund which is a potential contribution from Central Government towards the cost of managing extreme situations. Further details can be found by the following link.

<https://www.gov.uk/government/publications/bellwin-scheme-2013-to-2014-guidance>

One change outlined by the Emergency & Safety Manager (ESM) is that the Primary Operations Room, is not exclusively used for that purpose, but is available to other

services within the council and is used as a training facility /meeting room. The room is in constant use and therefore this is not a sterile environment when the EP is called into operation. The identified risk with this arrangement is that when the EP is called into operation there is a time delay in clearing the room and preparing the services for the operation. It is a condition in the room booking policy that the room is to be vacated immediately if it is to be used as the Borough Emergency Operations Room. If there is an issue with this request, the ESM will contact Facilities Services for them to have the room vacated whilst they concentrate on the task in hand. This is a protocol that the Group endorses.

A check of the equipment required for use, in the room, in the event of an emergency is carried out once a month by a member of staff which takes approximately 8 hours. It could be questioned if this is the most appropriate use of limited staff time.

The Secondary Operations Room at Clifton Park provides limited resources stored in a cupboard and staff are required to take their own equipment. If the situation arose that Riverside House was destroyed, from an IT perspective, there would be no EP systems available and it is unlikely that there should be sufficient connectivity at Clifton Park to provide a service. The non-availability of the Emergency Planning Incident Management System (EPIMS) would mean that the staff would default to a paper based system.

In the event of a joint emergency situation, there is a larger operations room in Sheffield which is sterile and can be brought into use if needed.

Volunteer Structure

There are 28 volunteers available to staff the operation of the EP, (excluding FLO and BEC), but there are no trained staff for the role of Response Co-ordinator. A recruitment drive took place at the end of December, beginning of January 2017 which resulted in the appointment of 2 Forward Liaison Officers and 1 Assistant Forward Liaison Officer. Training for these roles was provided immediately and the officers joined the EP rota in May 2017.

The table below shows the current volunteer structure available for the operation of the emergency plan.

BEOR Role	Nov 2016	June 2017
Response Coordinator	2	0
Log keeper/PA	5	5 (plus 1 dual role)
Mapping officer	12	9 (3 have left the authority)
Report Writer	3	5

BEOR Manager	6	7
TOTAL	28	26+2 vol. to be trained= 28

The recruitment drive did not yield as many volunteers as expected so there will be a few more attempts to increase the numbers this year. There have always been sufficient volunteers to run the BEOR for at least at change over in shift.

The view provided by the Service is that In terms of staffing for shift rotas ideally one person should fill a 6 hour shift so requiring 4 staff for each role in a 24 hour period. There is little room for redundancy for example during school holidays, Christmas period where attendance levels may be lower due to high percentage of annual leave. The ultimate goal would be to have 12 volunteers per role. As an aside, there is a “call out test” every six months (approx.) and this has shown that on the volunteers available, there is sufficient response, at the time of an exercise. This has provided managers with some confidence in the organisations’ ability to respond, but it should be noted that the exercises have thus far been conducted “in office hours”.

Training of Volunteers

Since January the following training sessions have been completed:

- Borough Emergency Operations Room (BEOR) refresher and new starter training on January 25th, February 28th, March 7 and April 27th
- Mapping officer refresher training March 30th
- April 11th set up a small BEOR as part of the Control of Major Accident Hazards (COMAH) Exercise Vitrex for new inexperienced volunteers only

Further BEOR refresher training courses in were held in May following which the planned BEOR training will build up the skill sets and experiences of BEOR volunteers.

At present the BEOR training program has been based around refreshing and training all volunteers in the basics and to ensure everyone receives the same course and a baseline of expertise exists. This will switch from refresher training to specialised role training and mini exercise experience over the period from May to August. Planned specialist training includes:

- Report writer training to be confirmed for June 13th or August 3rd pending feedback from the BEOR volunteers.
- Response coordinator training for June 13th / August 3rd
- Emergency Planning Information Management Systems (EPIMS) paper based training– Provisionally booked for August 29th

- “Mini-exercises” are scheduled for June 27th and July 27th to give further experience to all staff. These mini exercises will be for 1-2hrs to give as many BEOR volunteers as possible opportunity to practice.

The view from Members is that ideally a corporate exercise would be scheduled immediately after this training has taken place, potentially around September /October time (details pending ratification from our Directorate Management Team / Strategic Leadership Team,)

Emergency Planning training has been delivered to SLT.

- 20/09/2016 BEC Training
- 18/10/2016 Exercise Cygnus n- strategic representation at a multi-agency strategic meeting
- 25/11/2016 BEC Training
- 08/02/2017 SLT Gold Management Training
- 28/02/2017 Exercise Golden Winter – the Counter Terrorism exercise delivered to SLT and others by the local police Counter Terrorist Security advisors
- 19/03/2017 Exercise Historian

The Group supports a recommendation to be made by the Emergency & Safety Manager to the Strategic Leadership Team that a process of targeted recruitment take place, e.g. by targeting a particular skills set, those who use the Geographic Information System in their daily role become Mapping Assistants in an EP situation.

From a strategic staffing perspective on both the officer and Member side there is always the Chief Executive or Leader or their deputy in the borough to cover any emergency situation.

The Interviews were conducted with a Borough Emergency Co-ordinator (BEC) and a Forward Liaison Officer (FLO).

The group found that each of the officers had an excellent understanding of their respective roles

The main role of the BEC is to act on behalf of the Council in a major emergency situation and they decide when to commence the EP. They do not necessarily have to be on site to make this decision, as they act on intelligence provided by the Forward Liaison Officer and if the situations dictates, an Assistant Forward Liaison Officer, who are described as the “eyes and ears” of the Council at the site of an emergency.

Together they are the first point of contact for the Emergency Services along with gathering and recording of information in a log book about the emergency and they

also cover a Health & Safety role for other staff members on site. Being on site of an emergency provides the opportunity for FLO's to network with the members of the emergency services. It is important that other organisations know and understand the role the FLO plays in being the first point of contact for all incidents.

Neither the BEC or FLO are allowed to drink alcohol whilst on call and the FLO must be within 45minutes travel time from the centre of Rotherham.

Social media is used widely by the population in the case of an emergency and the group asked if the FLO used this as a tool whilst undertaking their duties. The response was that social media is not used by the FLO's but they rely on official reports from the EOR and that they are usually too busy dealing with the situation

Both BECs and the FLOs interviewed have a number of years of experience working in these emergency roles, but with this in mind, they thought it important to have continual assessments to maintain the level of skills required to do the role. The training sessions should be mandatory otherwise there is potential for the same volunteers to receive training and it is essential for everyone to know their role they have in the EP situation along with knowing their role in the wider team.

Any changes in the rota to accommodate leave and sickness cover are managed by the Emergency and Safety Officer, who issues a revised schedule to all FLOs and BECs so that everyone is aware of the changes.

EP Team and any "incidental changes" are co-ordinated by the FLOs with any changes being reported to the duty BEC.

One point the BEC/FLOs brought to the attention of the group was that on a few occasions, the latest one being before Christmas 2016, when there was a fire at the Rotherham Interchange, the EP team heard about this incident from the 'grapevine' and not from colleagues in the EP partner organisations.

The Group has learnt that SYPTE has their own Business Continuity Plan – which would have likely been called into action as a result of this incident, nevertheless it would have been prudent to notify other EP agencies of the event.

It could be said that this highlights the need to have a good understanding of the roles of the other organisation involved in the EP Process along with the need to have good channels of communication.

Training for all roles involved in the EP is carried out prior to being included on any rota for being on call. In previous years, training was carried out at the Emergency Planning College at Easingwold, York, however RMBC went on to develop its own package. Training exercises are provided with a multi-agency approach to situations along with a programme of desk top exercises which are facilitated by SYF&R at their HQ in Handsworth, Sheffield. Over the years, the type of training sessions required to be undertaken include the subjects of biological warfare and terrorism. In order to promote team working and promote a better understanding of the roles

required to make the EP operational, one suggestion was to have a facilitated meeting identifying individual roles and responsibilities.

Public Health 'has been part of local government since 2013. Since then there have been two BECs with this background in Rotherham. As noted public health issues tend to evolve and do not always present as an instant disaster e.g. flu pandemic.

The list of equipment kept in the personal grab bag and the communal grab bag can be seen in Appendix 3

The Group were assured through discussions with the competent and experienced FLO's that there were no issues identified relating to the handover of duties with their colleagues.

The BEC/FLO were asked what was their understanding of community resilience.

Community resilience is about the community preparing themselves for certain situations and providing an understanding of what they might have to deal with.

Once the EP is activated, this sets off links to the community through each of the Directorates. Actions and requests are cascaded down to the appropriate level to provide a response or service. The winter weather plan has community teams in place, but it was suggested that more localised plans should be developed to meet the needs of the residents in that area.

From the perspective of the T&F Group a great deal of expertise has been lost recently in a short period of time which could leave the organisation exposed. It was considered that the EP is always evolving but the test is, if it works once put into action.

It is necessary for the EP to provide guidelines around the co-ordination and management of volunteers, in an EP situation, to ensure they are connecting with other services/teams working on the emergency. In order to provide and improve community resilience then a co-ordinated approach with partner agencies, e.g. Area Plans and Parish Councils, needs to be applied.

Previously information relating to the EP had been shared with some Parish Councils but this had been on an ad hoc basis. The Group supported the provision of training sessions to be scheduled in the summer for Parish Council members.

How confident does the BEC/FLO feel on hand over from an EP situation to a recovery phase?

The activation of the EP initiates the control room activities and introduces a different team dynamic with the identified response staff.

Once the control room activities are complete and the function reverts to stand by there is a Corporate Framework for Recovery, which includes a Stand Down Section and hand over procedures. Also the FLO will check for any outstanding actions noted in the log book.

Other points raised during the interview included the fact that there is no specific 4x4 vehicle for the EP team as had been the case previously. In most cases the FLO needs to get to site which does not always warrant a 4x4 vehicle. What is important is that the EP team has immediate/priority access to this type of vehicle.

Overall the perception with the EP is that things are getting better. An increased awareness of EP is being paid to it and it is being brought to the forefront.

Most countries have a civil defence corps, except for the UK; this fact increases the importance of the Emergency Plan.

Procurement

One of the main issues experienced by the procurement team in relation to the EP is that there has been a significant turnover of staff in the service area, resulting in little or no experience of the EP and supporting processes.

In previous years there had been a procurement officer in the control room during an EP operation, to expedite any emergency purchasing.

Concerns were raised by the Group that the procurement services should not be marginalised from the EP process and an officer should be present in the Operations Room to ensure the timely acquisition of goods and services, whilst accurately monitoring expenditure, in order to provide evidence in relation to instigating the Belwin Scheme.

If at any time the procurement system is unavailable, the FLO can revert to a paper based system.

There are dedicated phone numbers for procurement in the EP.

Category Managers are currently working on obtaining a complete list of goods and services that contracted suppliers provide.

As part of the Business Continuity Plans for Procurement information is being requested from suppliers to state that in the event of an emergency they would still be able to provide a level of service.

The Group were assured that, it would be possible, if the need arose to open a community shelter in the middle of the night and supplies could be obtained from Education Catering Services as they hold two weeks supply of food.

On the list of suppliers there are a number of food vans who can be commissioned and then bill the Council direct. Local supermarkets have been very community spirited by providing supplies and donations, however this is a goodwill gesture and cannot always be relied on. The point to note here is that more supermarkets are open 24 hours and are accessible for provisions.

Another example of the work of procurement during an emergency relates to the ordering of skips and how this process might work. The Category managers have a list of suppliers, but in an emergency it may not be the Council's preferred supplier that is used but the supplier who can meet the requirements at that time, indeed, it may be many suppliers together is what is required to meet the need.

Having queried the impact of the outsourcing of services, the Group were advised that few services had been subject to outsourcing. Changes have occurred in the Public Contract Service, which is a staged application process. Central Government has ruled that the first stage of the application should only include basic information providing the opportunity to a wider range of suppliers to apply. The second stage is when further details are asked for which includes details of their Business Continuity Plans. RMBC and the Government have differing views on this process, in that RMBC would prefer the information on Business Continuity Plans to be included in stage one of the application process.

In effect, when the Emergency Plan is in operation, the Council effectively becomes an emergency service and wishes this fact to be made known to the Council's suppliers of goods and services. In an example of this during the bad winter of 2010 Wilmot Dixon was an exemplar when dealing with frozen boiler pipes in Council properties.

Corporate Risk Management

The role of the Corporate Risk Manager is to ensure that the Risk Policy and Guidance is kept up to date and applied consistently. Over the last six months, training has been provided to all M2 managers and above in the subject of Corporate Risk Management with officers from the EP Team being some of the recipients.

The EP is included on the Corporate Risk Register. Archive information included on earlier risk registers studied by the Corporate Risk Manager identifies that the EP is out of date and also that there are insufficient staff to run the EP service.

The service provided by the Corporate Risk Manager is available to all other sections in the Council to assist in writing their own Risk Register.

Cabinet Member for Emergency Planning.

Councillor Alam as Cabinet Member for Corporate Services and Finance, which includes Emergency Planning, has a monthly meeting with the Strategic Director of Regeneration and Environment, Damien Wilson on the topic along with receiving weekly updates from the BEC and FLO.

Councillor Alam told the Group that Members needed to become more involved in the EP process, as Members know their localities and the residents there which would be valuable intelligence when overseeing the response to an emergency situation. The elected members also have a role to support the Cabinet Member.

Note. One good example which came to light regarding how local ward members and a colleague from another ward in the borough got involved in a major incident was seen on 8th May 2017 in Swinton/Kilnhurst. Ward members were on site shortly before the FLO and by using their local knowledge were very proactive in arranging a safe area for some residents along with providing much needed refreshments.

As part of this review, Members were issued the booklet compiled by the Local Government Association “A councillor’s guide to civil emergencies”, however no specific training is provided for Members on what their role is in a Rotherham context.

Councillor Alam thought the EP should be included in the Member induction programme when becoming a Cllr and this should include a process flow diagram of the EP processes, detailing how and when Members would be involved.

In order to prevent the EP becoming outdated then it should be seen as a living document and should be reviewed on a quarterly basis, with controlled reissues.

Another point worth noting is that from previous experience positive outcomes arise from inviting VIPs to the scene of a disaster.

As an example John Major and Tony Blair visited Dunblane and the result was that a new school was commissioned. It is important to emphasise that in the aftermath of a disaster the recognition/involvement by national government in response to the tragedy/disaster

In the floods of 2007 Prince Charles visited Rotherham and provided a much needed boost to morale to those affected by the disaster along with marking the occasion in the history books.

The type of risks also change, as can be considered by the operations of an Advance Manufacturing Park in the borough, this could be seen as a target for terrorism along with other local sites such as Meadowhall and the M1.

The option of providing the EP Service on a South Yorkshire basis was thought to be an option to be considered. After all there are other services provided on a regional basis (Joint Waste Authority)

Regarding communications during an EP operation Councillor Alam indicated that he preferred to keep people “in the loop” and promoted good communications between all parties involved.

The recent incident in the Transport Exchange just before Christmas provided an example of how a lack of communications can impact the EP communities.

Interview with Leona Marshall, Interim Head of Communications and Marketing

The Communications and Marketing Team are located near the EP Team and close to the Service Centres in Riverside House. There was a restructure of the team towards the end of 2015/2016 which created a group of mini teams one to support each of the Directorates. Each member of the team is proficient in dealing with all media types.

All members of the team have access to all documents on the shared computer drive.

Information provided by the Interim Head of Communications and Marketing confirmed that there was a member of the Communications Team on call at all times and that they work with the Duty BEC

All the managers who are part of the Communications Team have taken part in EP training. As part of the Communications Team role in the EP they have regular contact with other external agencies keeping up to date on current events and activities from the Home Office, Environment Agency, Weather Alerts (including flood warnings) and the South Yorkshire Resilience Forum.

Findings from Interview with Luke Sayers

One point to work towards in an emergency situation is to ensure people can continue to work remotely, which is achieved by using a Virtual Private Network (VPN) solution connecting to remotely hosted or ‘cloud’ based services.

EP Operations Room at Riverside is a concern. The systems currently in use are unsupported as they were written by an employee who has since left the authority and there is no access to either the design or to the design code of the software. Currently work is underway to rectify this it is hoped that eventually all EP systems will be based on more contemporary IT solutions which will be hosted in the Cloud.

Riverside is not the only base from where the EP can be controlled from as there is a secondary site located at Clifton Park. Note that Riverside was built with flood protection systems and the IT suite does have a back-up generator for power, which will maintain operation of the server infrastructure. However if Riverside suffered a catastrophic failure and systems became unavailable or inaccessible then the EP

systems would be rendered inoperable and it is recognised that there is currently insufficient connectivity at Clifton Park. Considering the longer term, RMBC needs to get to the position where the location of the EP room becomes irrelevant as the systems should be based in the Cloud, with effective network connectivity from all sites.

A conclusion drawn from talking to the Assistant Director (Customer, Information and Digital Services) was that the IT systems should be located in the Cloud. One of the first tasks for IT is to list all the current IT systems, conduct risk assessments, complete cost analysis and then prioritise their transition to Cloud based services or locally hosted upgrades. The EP systems are considered to be prime candidates for transition to the cloud.

Included in this is an element Business Continuity Plan (which sits beneath the EP) and in that emails form part of the communications element. In the event that Riverside House is unavailable, there is no backup solution for the current email system leaving the sector of the communications at risk.

One system that is already Cloud based is that relating to Social Care and Vulnerable Adults.

The group requested clarification on whether or not the IT systems were part of the shared service agreement with Sheffield and the Assistant Director was able to confirm that under the agreement each authority has its own IT systems.

However, there are links between the different authorities across SY relating to IT through an officer network, so the Assistant Director has contact with his counterparts across the regions.

This suggests that there is an option for Rotherham to share some of its systems, as the Data centre at Riverside was built with spare capacity and for a fee, RMBC are currently hosting systems for Sunderland Council and SY Police.

For cloud based systems the requirement for a hosting building is reduced and services could be accessed from multiple locations including people's homes, although it should be recognised that within the sphere of EP the distribution of staff could adversely the dynamics of a response team. However, the potential is worthy of note.

An Email system should be developed and used alongside the phone system to communicate during any emergency. This should be automated within a new EP system.

The Good App is being phased out during June 2017 and will be replaced by an email access system that is in the Cloud and can be accessed using personal or work phones It is anticipated that the email system will be transitioned, during the

early part of 2018, to a cloud based service. This will mean that email will continue to work even if Riverside House or any other Council building is not available for use.

Operation Golden Winter

This training exercise happened on Tuesday 28th February 2017 in the operations room at Riverside House and was facilitated by officers from the Counter Terrorism Unit, with three representatives from The Group observing the session. All the officers from the Strategic Leadership Team, along with officers from Asset Management took part in the training. Not all of members of SLT stayed for the duration of the training session.

The outline of the training session was to bring out the pre-emptive thought process of an emerging terrorist threat which started overseas and through a series of events became a situation in the borough.

The main messages to come out of the session could be applied to any situation when the EP is called into operation.

- The level of threat / the incident is based on actual intelligence.
- Be aware of the potential for a terrorist attack
- Take control of the situation.
- Make use of intelligence of community engagement / intelligence
- Know your communities
- Involve Ward Members
- Provide reassurance to the community
- Adequate and appropriate communication feed
- Make sure all information logged by the note taker and decisions are recorded.
- Regular practice of activating the Emergency Plan.
- Know your part in the EP

Conclusion

There is a framework for dealing with various emergency situations as identified in Diagram 1 the South Yorkshire Resilience Forum and Sub Group Structure.

The decision to undertake this review was timely as the neglect of this service for a number of organisational issues had become apparent and focused attention was required to bring this service back to the status it commands as a category 1 responder under the CLA. Work had already started in rectifying the situation with the review of the Emergency Plan into the newly named Major Incident Plan,

The first concern identified was in relation to the lack of Joint Services meetings being held with Sheffield, with only 1 of the 2 meetings required each year taking place. Overall this shows lack of priority given to the shared service arrangements which could have implications on the delivery of the overall service.

Overtime dedicated resources available to the EP team have been reduced in so far as there is no longer a sterile room as an BEOR neither is there a dedicated 4x4 vehicle for use by the FLO's.

With regards to informing / training new officers and Members to the authority to date the training has been provided to the officers in the Strategic Leadership Team but as yet there is no specific training for Members

The number of volunteers available to run the BEOR total 28 with varying totals in role; overall this is insufficient to provide cover for a 24 hour period.

Training for everyone is being provided but is being delivered on a basic level around the BEOR with specific job training provided afterwards. A full exercise will not happen until everyone has been fully trained.

The BEC and FLO's interviewed were both experienced and confident in their roles and they could see positive changes in the structure of the EP

Community resilience is an area that needs to be developed as our findings from colleagues in the North East demonstrate that correct usage provides valuable capacity, from community resources, to support local needs.

As an organisation we are reliant on IT and need to be confident that it is accessible and useable. The critical systems currently in use are old and contain vulnerabilities. They need to be refreshed and ideally transferred to the Cloud.

The Group concluded that the Corporate Risk Manager has an important role to play in the re-writing of the EP in that an independent view can be applied to the document once a draft is available and through mitigating any risks that may be highlighted, the EP could be strengthened.

Recommendations

1. That the Major Incident Plan is reviewed bi-annually by a group of Members from the IPSC and this work forms part of the work programme for that year, however the document is to be reviewed by officers on a continual basis.
2. Mandatory training is to be provided to all Members about the Major Incident Plan to increase their awareness and involvement in any major incident.

3. Training relating to the Major Incident Plan should be mandatory to ensure all staff who volunteered are confident in the role they play in the management of the incident.
4. An “out of hours” training exercise to take place once all volunteers have been trained. Full training exercises then take place on a regular basis.
5. A targeted approach to recruitment from employees who can be “job matched” to appropriate roles in the operation of the Major Incident Plan.
6. There are sufficient volunteers to staff the EP for at least two shift changes.
7. A protocol to be developed to ensure that the partner organisations in the Major Incident Plan are notified as a matter of course when significant incidents occur in the borough and through the Local Resilience Forum, ways are to be identified and carried out on building relationships between partner organisations involved in the Emergency Plan – in particular to the turnover in staff.
8. A facilitated meeting/away day involving the emergency services and RMBC major incident staff on the ground to promote team working.
9. An on-going programme of training sessions for Parish Council members should be arranged to ensure any new members receive training on the subject.
10. A representative from Procurement to be involved in the Borough Emergency Operations Room to facilitate timely ordering of goods/services and to provide information if the Belwin Fund becomes operational.
11. Through the Shared Service Agreement funding is secured for a Community Resilience Worker.
12. The Corporate Risk Manager is involved in the role of a “critical friend” any amendments of the Major Incident Plan
13. A flow chart to be designed detailing the Major Incident Process and highlighting how and when Members are to be involved in the process.
14. The Chief Executive / Leader of the Council to inform counterparts in Sheffield of their concerns over the lack of meetings in relation to the Joint Service Agreement.
15. The situation relating to the unsupported IT systems is rectified.

Thanks

- Jo Abbot, Public Health Consultant, Health Protection / Borough Emergency Coordinator
- Cllr Saghir Alam, Cabinet Member for Corporate Services and Finance
- Helen Chambers (Milner), Senior Procurement Category Manager, Procurement
- Simon Dennis, Corporate Risk Manager, Policy, Improvement & Partnership
- Claire Hanson, Senior Resilience Officer, Community Safety & Street Scene
- Karen Hanson, Assistant Director, Community Safety & Street Scene
- Cllr Marjorie James (Hartlepool Council) the lead member for EP.
- Leona Marshall, Communications & Marketing Manager.
- Stuart Marshal, the Chief Emergency Planning Officer and Local Resilience Forum Manager at the Cleveland Emergency Planning Unit
- James McLaughlin, Democratic Services Manager
- Jane Pearson Forward Liaison Officer.
- Robert Parker, Business Support Manager, Legal and Democratic Services/Forward Liaison Officer
- Luke Sayers, Assistant Director Customer Information and Digital Services
- Damien Wilson, Strategic Director, Regeneration & Environment
- Paul Woodcock, Director, Planning, Regeneration & Transportation / Borough Emergency Coordinator

Glossary

EP Emergency Plan(ning)

LRF Local Resilience Forum

BEP Borough Emergency Plan

BEOR Borough Emergency Ops Room

DMT Directorate Management Team

SLT Strategic Management Team

COMAH Control of Major Accidents Hazards

FLO Forward Liaison Officer

RVP Rendezvous Point

Local Resilience Forum – Terms of Reference

AIM

The aim of the LRF is to ensure that there is an adequate level of multi agency preparedness as required by the duties under the Civil Contingencies Act to enable an effective response to emergency incidents that may have a significant impact on the communities of South Yorkshire and its neighbouring communities.

OBJECTIVES

The Group exists to provide strategic direction to multi-agency emergency planning preparations. Specific objectives are to:

1. To determine and approve joint strategic policy decisions relating to South Yorkshire's preparedness and response arrangements.
2. To approve the Community Risk Register and ensure it provides a robust basis for planning.
3. To ensure that appropriate multi-agency plans, procedures, training and exercises that are necessary to address identified or foreseeable local and wider area hazards, are in place and outstanding gaps identified.
4. To approve the business plan of the South Yorkshire LRF Business management Group (BMG).
5. To receive and consider horizon scanning and security reports from the Regional Emergencies Division (RED) or the Civil Contingencies Secretariat on current threat levels, on any gaps in planning and progress on any actions tasked.
6. To ensure that appropriate resources are made available to the South Yorkshire Local Resilience Forum BMG to fulfil statutory responsibilities and the work programme.
7. To consider the strategic implications of legislation, national initiatives and the decisions and recommendations of central government and its subsidiaries.

MEMBERSHIP

Category 1 responders should attend and be represented by individuals who have the right combination of seniority and expertise to speak with authority. Category 2 responders may attend as a right or may be invited (if they are required to attend because of the subject matter to be discussed).

CHAIR AND DEPUTY

To be determined by the South Yorkshire Local Resilience Forum.

FREQUENCY OF MEETINGS

The LRF will meet twice a year, normally in May and November.

Notes:

For efficient and effective functioning of the LRF, the following procedures should be followed:

- a. Set standard agenda, for example as follows:
 - i. Minutes / actions
 - ii. Forward look (horizon scanning / security)
 - iii. Legislation / policy changes
 - iv. Approval of business plan / Review of progress (one of, at each meeting)
 - v. Items presented by BMG (risk, contingency planning, training, events)
 - vi. Review of actions agreed
 - vii. AOB
- b. Each item on agenda to be supported by a short brief in a standard format.
- c. Unapproved record of meeting to be circulated quickly and include an action plan

Findings from the North East – Stockton-On-Tees visit.**Background**

The Emergency Planning Joint Committee is an Executive Committee of the four constituent unitary Local Authorities in the former area of the County of Cleveland, namely Hartlepool Borough Council; Stockton-On-Tees Borough Council; Middlesbrough Borough Council and Redcar & Cleveland Borough Council.

The Emergency Planning Joint Committee (EPJC) oversees the work of the CEPU and comprises of representatives from each of the local authorities. The EPJC meets on a quarterly basis. All papers including the finance reports and annual work plans are publically available; at least 3 member authorities must be present to be quorate with the Chair rotating between Authorities.

The Unit is co-located in premises with planners from Cleveland Police and Cleveland Fire Brigade. With Borough Officers generally hot desking within their host authorities.

Hartlepool Borough Council has been nominated as the “host / lead” authority for the Cleveland Emergency Planning Unit (CEPU) and provides the following services and facilities for/to the CEPU:

- Human Resources
- Finance
- Democratic Services
- Legal Services
- Information Technology (IT)

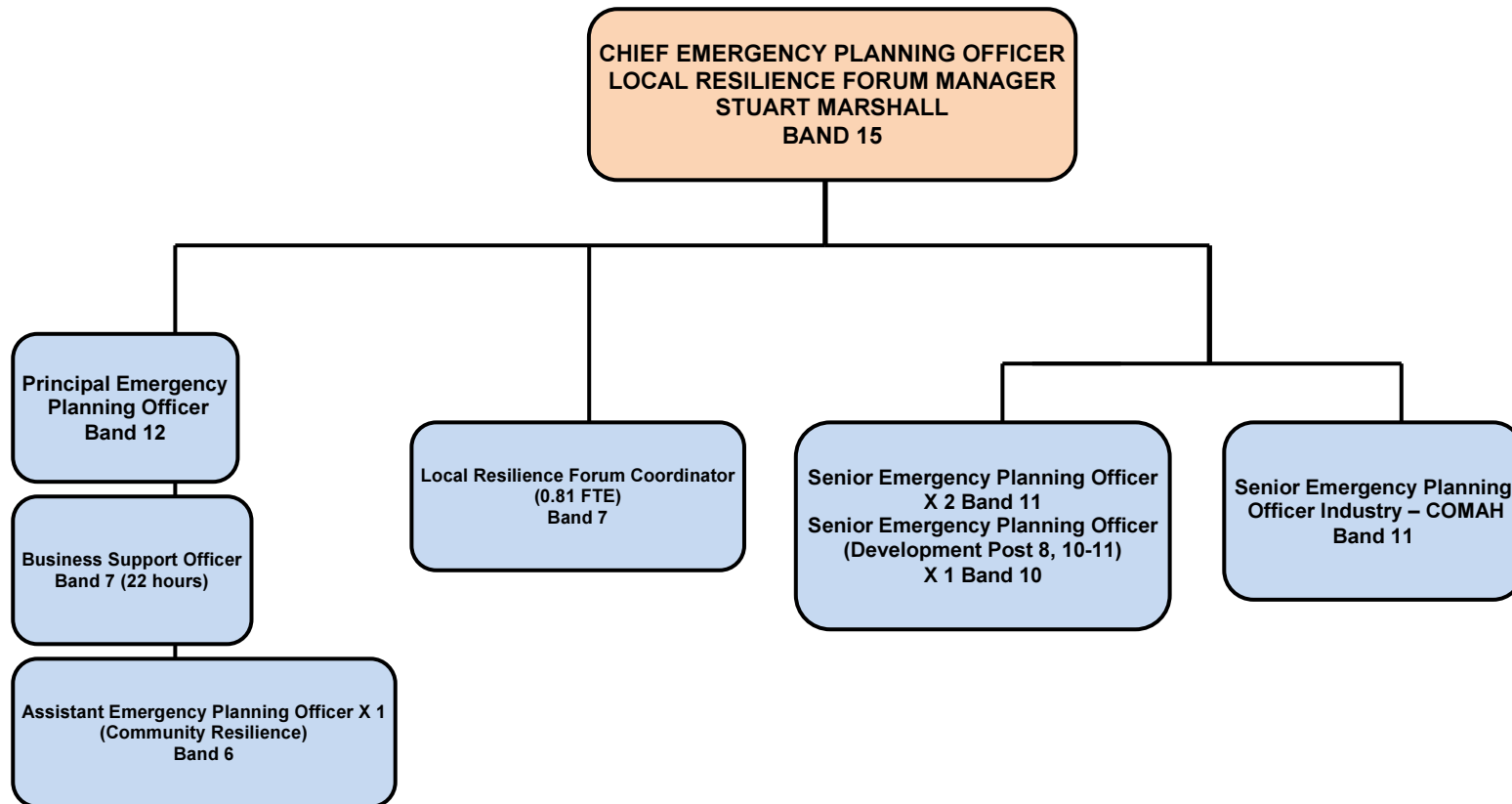
The legal position is that both the Emergency Planning Joint Committee and Cleveland Emergency Planning Unit are a public authority for the purposes of the Local Government Act and the Freedom of Information Act and are classed as an “outside body”.

The CEPU is a standalone unit and is managed by the Chief Emergency Planning Officer (CEPO), which is a non-political appointment. The CEPO is line managed by a Director within the lead Unitary Authority, with a number of reporting lines to the other authorities.

The Unit is structured as per the below outline, with an officer allocated to each of the four authorities, a specialist officer and business support. This officer has the lead for ensuring that the activities required by legislation and the CEPU workplan within their geographic area.

CLEVELAND EMERGENCY PLANNING UNIT

6th March 2017



The arrangement relies on lead officers within the Unitary Authorities (normally a Director) to whom officers from CEPU report to. This is supported by Emergency Management Response Teams, established within each authority and comprising of representatives from service areas (e.g. Highways, Neighbourhoods, Social Care).

The teams EMRTs meet approximately quarterly to train, develop plans and review incidents. In the event of an incident the EMRT members provide the backbone of the authorities' response. The EMRT members are generally not on a formal call out arrangement, but have provided their contact details should a response by the authority be required out of normal hours.

During an incident the CEPU duty officer is acts as a tactical advisor, liaising between agencies and advising on courses of action. They generally cannot activate procedures / arrangements which impact on the authorities without the consent of the impacted authority.

Therefore during a response the CEPU Officer will contact a designated Borough Coordination Officer – this is generally a middle manage with the ability to activate council resources from any department of their authority out of hours. One point was highlighted in relation to cross departmental working and the need on occasion for staff to be able to take direction from staff in other departments and at lower grade.

A number of benefits were highlighted including:

- Economies of scale,
- The ability for officers to specialise in certain risks
- The ability to request mutual aid from agencies who have the same plans, training and procedures
- Provision of a 24/7 duty officer and additional resilience during protracted incidents.

The Local Resilience Forum

In addition to the Local Authority role the Chief EPO undertakes a role of Local Resilience Forum Manager, assisted by a Local Resilience Forum Coordinator.

This arrangement ensures that there is a point of contact for the LRF capable of both the routine work, as well as provision of advice and guidance to LRF members. New guidance coming from Central Government is received by the CEPO and circulated/delegated to officers in the Local Resilience Forum. Recently there has been a drive to coordinate the work of the LRF with neighbouring areas, for example the adoption of the same templates, joint working groups etc. reducing the demands on cross LRF organisations.

Cleveland Local Resilience Forum (CLRf) provides a structure to help agencies plan and prepare for major incidents and meet their statutory duties under law (the Civil

Contingencies Act 2004 (Contingency Planning) Regulations 2005 and accompanying statutory guidance entitled "Preparing for Emergencies).

Cleveland LRF

1. Is not a statutory body
2. Operates on the boundary of Cleveland Police Force
3. Comprises of a number of agencies from the emergency services, utilities, health and local government
4. Is Chaired by a Senior Fire Officer
5. Has a secretariat provided by the Cleveland Emergency Planning Unit
6. Establishes sub-groups as required to cover specific issues such as communications or flooding

Industrial Legislation

In addition to general emergency planning under the Civil Contingencies Act 2004, the CEPU is responsible for producing legally required documents under the Control of Major Accident Hazard Regulations, Pipeline Safety Regulations and the Radiation (Emergency Preparedness and Public Information) Regulations 2001.

The area has 29 Upper Tier Chemical (COMAH) sites and a significant pipeline network, due to the demands of the related legislation a specific officer undertakes the majority of planning and exercising of industrial emergency plans.

Finance

The Unit is financed by a number of routes including:

- Contributions from authorities based upon population
- Contributions from LRF members towards the secretariat function
- Recharges to industry in relation to legislative duties
- Income generation from training

The main overheads relate to the staffing of the Unit and accommodation. One issue faced by the EP partnership is dealing with austerity measures. Pressures include the ongoing austerity which has seen significant reductions in the contributions to the Unit and the risk of experienced and skilled staff leaving for positions within other sectors - the time required to develop officers being significant.

Duty Officer

Out of office hours there is one point of contact through the Emergency Planning Officer (EPO) who covers the 4 areas and who must be able to attend central locations within 30 minutes deployment time. The officer receives an allowance for periods of standby which are generally 7 days.

The Duty EPO has a kit bag, containing a laptop and paper copies of essential documents (maps, contact details of relevant people/organisations and procedures) as required. Each Officer is issued with personal protective equipment etc.

Community Resilience

Via the Local Levy Fund the area has had a Community Resilience Officer for a number of years working primarily on flooding. The scheme was funded via a local levy where each authority adds a levy on the council tax on all properties at band D and above. The total levied is paid to the Environment Agency to assist with flood alleviation and up until recently funded a Resilience Worker, who worked with young people, the community and businesses. This source of funding allows the EA to use contributions towards applying for grant income from various sources.

One of the main objectives of the project was to support the community to help it's self in certain situations. Examples included raising awareness of household products, encouraging sign up for warning systems, working with schools and industry to develop flood plans.

On this point the group put forward the idea of involving the Rotherham Area Assemblies in the community resilience angle of the EP along with the use of snow wardens and community champions in appropriate situations.

Stockton-On-Tees

The main findings from the visit to Stockton-On-Tees revolved around how the EP service is provided across the four unitary authorities and the group highlighted similarities between the service provision in the NE and how it could be applied in the region of South Yorkshire particularly as other emergencies services such as the Police and Fire Services already work regionally.

The group were interested in the structure of the EP Services with one non-political officer leading operations who worked in conjunction with the emergency services and local resilience forum.

The community resilience officer was also an initiative that caught the imagination of the group as they saw the opportunity that the community could be assisted in helping themselves, their families, property and the community in applying appropriate measures in the event of an emergency. Two key factors here is the funding of such a post and where would that come from and as highlighted by

colleagues in the NE the importance of getting the right person employed in the job, preferably someone with a passion for the role.

One of the first questions for the group was to understand what constitutes an emergency situation and so bringing the EP into operation. It was suggested that not everyone in the authority would have this knowledge so an option of publishing an information leaflet providing this information was put forward as a solution, along with the circulation of the booklet produced by the LGA "Councillors Role in an Emergency" which should be issued to all new members on as part of their induction to the Council.

FORWARD LIAISON OFFICER BAG

Contents:

Bags x 2	✓
Tablet includes sim card for remote connection (R51649) Docking Station (R51657) and charger/charging dock	✓
Instructions for using Tablet	✓
Sat Nav & Car Charger – FLOs stated not required at this time there is one stored in the Emergency Planning Team if and when required.	
2016 FLO Log Book	✓
Flood Incident and Action Plan	✓
A4 Weather Writer	✓
Borough Emergency Plan (now in 2 soft folders, Section 8 and the rest)	✓
Forward Liaison Officer Action Card x 2	✓
2015 South Yorkshire Street Map x 1	✓
Forward Liaison Officer Car Stickers	✓
Emergency Planning Handbook	✓
Action Cards for Key Plans	✓
Standard List of COMAH Contacts	✓
Multi-Agency Flood Response Plan (Section 7 only, flood addresses and maps, in a soft folder)	✓
Digital Voice Recorder	✓
Manual Order book and instruction	✓
Mobile Phone – 07748 760500	✓
Mobile Phone Charger	✓
Procedure for putting evacuees up in Hotels	✓
Emergency Response & Recovery Contact Details	✓
Handwash x 1	✓
Network Cable x 1	✓

Access to Emergency Plans can be accessed by all FLO's through the following link:
 W:\Community Safety and Emergencies\Plans - In Case of Emergency

Learning from the EP operation in Swinton / Kilnhurst on 8th May 2017

The following comments were made by officers who played an active part in the activation of the Major Incident Plan

Polly Hamilton

Assistant Director Culture, Sport and Tourism

BEC during the incident.

What Worked Well

- Empowering the BEC to lead: As a new BEC, the opportunity to shadow Paul, as an experienced BEC, was invaluable. It was great to observe initially, work with him on key decisions and communications with the CEO, SLT and Members, and then to fully take the lead from Day 2, with his support available if required. I would recommend that all new BECs have the opportunity to shadow an experienced BEC, ideally prior to being on the rota. Because of the professionalism of all the Council staff involved, the experience was a positive one: I really enjoyed it!
- Responsiveness of the Council Team: I was impressed by the speed in which the Emergency Ops Room was set up and the way the team came together to manage the emergency. Emergency Planning were central to this, but large numbers of officers from across the Council also contributed. People were entirely committed to making sure that the focus was on ensuring the safety and wellbeing of Council clients and local residents. People worked hard to consider all the issues and to advise on the best course of action. It was a privilege to see the team in action: people understood their roles, what was required of them and they worked at speed to meet key deadlines. People within my own team were also supportive, reorganising my diary, picking up key tasks or making alternative arrangements as required.
- Identifying Critical Comms Needs and Expectations Quickly: The need to brief Ward Members, Cabinet, SLT, schools and other stakeholders regularly with progress on the incident meant that we worked hard to identify our critical Comms needs early on. This ensured that we knew who we needed to communicate with, key messages and critical timescales – and we could be really clear with the Fire Service as the lead agency about our information needs.

What I Would Do Differently

- **Formal, early clarification of a Major Incident:** Formally establish who the lead agency is and whether they have declared a 'major incident'. Other agencies, such as Public Health England, may not prioritise the incident if it is not deemed to be 'major'. In our case, this meant that obtaining clear, up-to-date information about the toxicity of the smoke was difficult – which meant

that were not in a position to reassure the public as quickly as we would have liked. In this case, both the Fire Service and the Police Service claimed that each other had declared a 'major incident', when in fact, neither had done so.

- **Communications**

- **Multi-Agency Command Structures:** Establish communications early on with the command structures in emergency services partners, ensuring that we have up-to-date contact information in place and that if there are changes in personnel, that these are communicated to us. This is important in the event any issues need to be clarified quickly at a senior level or if any issue needs to be escalated.
- **Multi-Agency Communications Plan:** Ensure that there is a multi-agency Communications Plan in place very early on to clarify who will lead and to make sure that they understand their role and our information needs and expectations. For example, on Day 2, we spent several hours chasing key messages from the Fire Service in relation to advice for residents about when they could return home, what to do if they had health concerns and advice on cleaning, having identified these issues in the morning. We knew this was important because of intelligence from staff at the Resource Centre and the queries we were fielding via the Contact Centre. Obtaining this information from the Fire Service sooner would have enabled us to reassure people much earlier, or provide them with a timeframe for when more news would be available. This would have helped residents to plan their return to their homes earlier in the day, rather than respond after 9pm which was when the formal notification came through from the Fire Service.
- **Involve the Contact Centre early:** The Contact Centre Manager got involved later in the day once enquiries had been received and this enabled him to be added to the distribution list and attend update meetings. The Contact Centre could usefully be involved at the outset to ensure early identification of key messages for Contact Centre staff to use in dealing with enquiries.

Robert Parker

Business Support Manager

Forward Liaison Officer

My initial observations would be: -

1 – The FLO received a call from both South Yorkshire Police and South Yorkshire Fire & Rescue confirming the incident and requirement for support from the Local Authority

2 – I would say the calls were timely in as much that we were involved from the early stages.

3 – The FLO was supported by an Assistant FLO which was very useful for an incident of this nature.

4 – The initial Rendezvous point (RVP) was confirmed as the Community Centre, Glasshouse Lane however on arrival at the scene it had changed. I was able to quickly determine the new RVP as being the Resource Centre, Victoria Street and no delays were experienced.

5 – SYF&R took the lead as expected and regular updates were co-ordinated throughout the first day.

6 – Lines of communication with the Borough Operation Room were effective.

7 – Use of the Resource Centre facilities was appreciated and very useful and staff within the centre were very helpful and deserve a big thank you.