

ORANGE BOOK FOR INFORMATION

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

Date: Wednesday, 12th July, 2017

Time: 2.00 p.m.

A G E N D A

1. Health Select Commission (Pages 1 - 11)
2. Overview and Scrutiny Management Board (Pages 12 - 27)
3. Reports for Information (Pages 28 - 37)

HEALTH SELECT COMMISSION
15th June, 2017

Present:- Councillor Evans (in the Chair); Councillors Allcock, Bird, Elliott, Rushforth, Short and Whysall.

Apologies for absence were received from The Mayor (Councillor Eve Rose Keenan) and Councillors Andrews, Ellis, Jarvis, Keenan, Marriott, Williams and Victoria Farnsworth (SpeakUp).

1. DECLARATIONS OF INTEREST

There were no Declarations of Interest made at the meeting.

2. QUESTIONS FROM MEMBERS OF THE PUBLIC AND THE PRESS

There were no members of the public and press present at the meeting.

3. COMMUNICATIONS

Members of the Select Commission were reminded about the demonstration of the Liquid Logic database and cohort data for Adult Social Care which was to take place on 4th July at 4.30 p.m.

4. MINUTES OF THE PREVIOUS MEETING HELD ON 13TH APRIL, 2017

Consideration was given to the minutes of the previous meetings of the Health Select Commission held on 13th April, 2017.

Members' attention was drawn to the supplementary information which had been supplied after the meeting with regard to domestic abuse training (Minute No. 92 RDaSH Quality Account).

With regard to Minute No. 93 (Whole School Approach to Prevention and Early Intervention), it was noted that former Select Commission Member Councillor Cusworth had volunteered to attend the final meeting of the whole steering group as she had attended previous ones. The Select Commission would receive feedback in due course.

Resolved:- That the minutes of the previous meeting held on 13th April, 2017, be approved as a correct record.

5. EVALUATION OF THE INTEGRATED LOCALITY PILOT

Dominic Blaydon, Associate Director of Transformation, and Melanie Simmonds, Strategy and Transformation Manager, presented an evaluation of one of the existing transformational initiatives that was currently underway – The Health Village Integrated Locality Pilot. The report was supplemented by the following powerpoint presentation:-

Key Challenges

- Funding challenges in Health and Social Care
- Increase in older population
- Difference between actual and healthy life expectancy
- Development of new care models
- Early intervention and prevention
- Self-management
- Public expectation
- Fragmentation of services
- Strengthening leadership at all levels

Key Elements of new Service Model

- Multi-disciplinary team
- Breaks down professional and organisational boundaries
- Team supports GP practice populations (Clifton and St. Ann's)
- Designated care homes
- New technology supports interface between locality and acute care
- All workers are co-located
- New leadership model evolving
- Operates a Virtual Ward
- Referral management service

Team Composition

- Community Nurses, Rotherham FT
- Physiotherapists, Rotherham FT
- Occupational Therapists, Rotherham FT
- Social Workers, Rotherham MBC
- Mental Health Workers, RDaSH
- Social Prescribing, VAR
- Community Link Workers, Rotherham MBC

A New Approach

- Community Reablement
- Management of Long Term Conditions
- Community Nursing
- Parity of Esteem
- Assessment and Care Management
- Community Development

Outcomes

- Reduction in unscheduled hospital admissions
- Reduction in admissions to hospital for assessment
- Non-elective bed days
- Average length of stay in hospital

Roll Out

- November 2017-March, 2018 Scoping and Design
- March 2018 Designed and agreed contracting model

- April 2018-2020 Phased implementation
- October 2020 Evaluation, conclusion and conference

Discussion ensued on the presentation with the following issues raised/highlighted:-

- The regulatory responsibility for care homes rested with the CQC. Local Authorities had a duty, as did other public services, to ensure safeguarding and there were powers within their contracts to carry out visits. Rotherham had a dedicated Care Homes Team involved in the Locality Pilot which had reached out to care homes and supporting staff
- The Care Home Support and Locality Teams within the new structure would assist in spotting any issues in care homes
- An away day had been held earlier in the year to allow staff to come together and discuss the difficulties they were experiencing and to agree a joint vision. A staff evaluation before and after the event showed an increase in their satisfaction levels. A further evaluation would be conducted in July to ascertain if they were still engaged, motivated and empowered which reflected on how well the project performed
- There were national issues regarding computer systems linking together with no plans to introduce one system across Acute, Primary and Community Care. However, Rotherham was way ahead of other local authority areas in terms of developing the links and creating a system which increased visibility and then facilitating the interface between Primary, Community and Acute Care. It would continue to be an ongoing challenge until there was single system across the NHS
- Liquid Logic used a client's NHS number enabling the system to read across as to where the person was in the health and care system
- The Village had been chosen for the pilot as there were higher admission rates from the area which was also one with higher deprivation
- Bed blocking was not only an issue in the Winter, however, integrated localities should start to relieve the impact especially when it was rolled out to all localities
- Work was taking place with the Team and Heads of Service looking at the resources needed to roll the Pilot out. If the Health Foundation bid was successful it would provide additional resources to support the work and alleviate those pressures on the individuals allowing

them to concentrate on development. However, the funding was not being relied upon with a clear plan for development of the locality

- Work was also taking place on the impact and pressures in the system and mitigating the risk on other parts of the system
- There had been a lot of interest from other parts of the country in what Rotherham was developing and the interface between Acute and Primary Care
- IT, sharing of information across organisations and having a single care record were major barriers. The next challenge would be a single integrated recording system and care plan
- There would be a full evaluation of the Pilot in December, 2017

Resolved:- (1) That the report be noted.

(2) That the results of the full evaluation be submitted to the Select Commission in December.

6. DIRECTOR OF PUBLIC HEALTH ANNUAL REPORT 2015-16

Giles Ratcliffe, Public Health Consultant, introduced the 2015/16 independent report which highlighted some of the successes in Rotherham as well as a frank assessment of some of the challenges faced as a community. A powerpoint presentation was given on healthy ageing living well and living longer as follows:-

Why focus on healthy ageing?

“Provides the opportunity to shine the light on the rich asset that older people are within our society and also to consider the changes that are developing within our older population”

Considerations include:-

- Ageing population
- Changing communities
- Older people as local asset
- Value of focussing on prevention
- Improving quality of later life

Local data highlights

- Rotherham’s over 65s population is growing the fastest. By 2025:-
21.7% of population will be over 65
Over 85s population will rise by over 40%
- Rotherham has lower life expectancy than England (men and women)
- Life expectancy and healthy life expectancy gap is greater than England average (men and women)
- Poor perception of “their own health” reported in Census surveys by older people in Rotherham

Healthy Ageing Framework Structure

Four sections

- Healthy behaviours and lifestyles
- Age friendly environment and community support health
- Encouraging social inclusion
- Quality integrated services and prevention interventions

Healthy behaviours and lifestyles – adding life to years and years to life

Includes

- Obesity
- Fruit and veg
- Inactivity
- Alcohol
- Tobacco
- Sexual health
- Living with long term conditions (LTCs)
- Making Every Contact Count (MECC)

Key messages

- To promote the 5 a day and balanced diet messages and their importance in later life including hydration
- Older adults to be more active and meet CMO guidelines of 150 minutes per week including strength and balance activities
- It is never too late to stop smoking
- Alcohol misuse in later life leads to increased hospital admissions
- Older people are made aware of the health risks of regular and excessive alcohol use

Recommendation 1

- All services should encourage lifestyle behaviour change in older people where appropriate particularly in the most disadvantaged communities. This could be achieved through taking a systematic approach to MECC

Age friendly environment and community supporting health

The impact of where we live on our health in later life and includes

- Role older people play in their communities (e.g. volunteering)
- WHO Age friendly cities and communities
- Excess winter deaths
- Poor quality housing impact
- Cold homes and fuel poverty
- Falls prevention and support

Key messages are to:

- Plan together
Use a Framework or plan to join activity and work towards a common goal for Healthy Ageing
Housing need to plan adequately for the ageing population, considering account of tenure changes and promoting independence

Preventing falls and providing early intervention for those who have fell is an important factor in maintaining independence

- Work together
A wide range of people can identify vulnerable people who may be at increased risk (e.g. cold weather, falls)

Recommendation 2

- Rotherham's Health and Wellbeing Board considers implementing the WHO 'Age Friendly Cities and Communities' and become the first area in South Yorkshire to achieve this accreditation, learning from other UK cities that have already begun this work. This would be complimentary to the Borough's aspiration to be young people and dementia friendly

Encouraging social inclusion

Challenges and opportunities that have an impact in later life includes:-

- Maintaining independence
- Carer responsibilities – for partners, friends, grandchildren
- Income, work, benefits and volunteering (giving back)
- Education and literacy
- Discrimination
- Mental health
- Dementia
- Loneliness and social isolation

Key messages

- Maintaining independence requires all stakeholders to work together and with individuals
- Older people play a significant role as car givers
- Opportunities for over 65s to remain in work are greater
- Volunteering is important as a social activity to combat social isolation and loneliness
- Health literacy is an important factor to support self-management
- Age discrimination needs to continue to be in policy developments
- Dementia prevention and support agenda needs to continue to be considered
- Mental health within later life needs to be responsibility of all organisations across the system

Recommendation 3

- The social inclusion of older people in Rotherham needs to be at the heart of policy and delivery across the Rotherham Partnership, addressing issues such as maintaining independence, income and participation, mental health, loneliness and isolation. To achieve this goal, older people must experience proactive involvement and participation in life and society as a whole

Quality integrated services and preventative interventions

Working together to commission and deliver the best services for older people in Rotherham. Includes:-

- Health and social care integration
- Asset based approaches
- Screening and immunisations
- NHS Healthchecks
- Personalised End of Life Care planning
- Integrated Wellness Services

Key Messages

- Health and social care integration is underway
- Screening programmes identify and treat individuals early
- People 65+ have higher health risks from flu, pneumococcal and shingles
- NHS Health checks detect early signs of illness and disease
- Personalised end of life care planning will increase in importance as our population ages
- Integrated wellness service will target communities and individuals of the greatest need providing a comprehensive behaviour change pathway

Recommendation 4

- All partners to deliver against the aspirations and commitments within the Rotherham Integrated Health and Social Care Place Plan and to continue to strive for the highest quality services for older people. This is to include an increased focus on prevention, early identification and self-management, with clear pathways for lifestyle behaviour change for older people that support individuals to make changes when the time is right for them

Next Steps

- Sharing the report with key stakeholders
- Facilitating the development of key actions
- Developing an action plan
- Monitoring and reporting on progress

Discussion ensued on the report and presentation with the following issues raised/clarified:-

- Rotherham suffered from legacies of its past heavy industries both in terms of individuals in those jobs and a cultural legacy
- Behaviour change was very challenging i.e. how do you change the culture of someone for whom it was tradition e.g. portion size
- The health literacy function was related to overall levels of literacy and what the public's understanding was of health and wellbeing, wellness and fitness. The services and routes into them were not easy to

navigate – the single point of access/single digital offer for lifestyle services was out to tender with the contract to commence in April, 2018

- The rate of smoking in young people had reduced year on year and, although high rates of smoking in adults, Rotherham was better than most areas for quitting smoking. There were issues with alcohol use with the area being one of the highest in terms of admissions to hospital and similarly with substance misuse
- MECC (or Healthy Chats) were part of the Health and Wellbeing Strategy. The commitment from partners had been developed over the past 4 months to train frontline staff to be sufficiently confident to offer advice and signposting to any member of the public they came into contact with and the conversation led into issues of healthy living
- The approach to smoking and nicotine consumption was old fashioned. “Vaping” was something that had progressed far quicker than anticipated and had taken tobacco companies and the Government by surprise. Presently the science had not caught up with the increasing trend and there was no evidence as to its impact. It was not licensed in the same way as tobacco and there were fewer controls on production methods and contents. There was a reluctance on the Department of Health to make any clear statements in support or otherwise of vaping and the Local Authority was limited by national guidance due to there being no evidence base to support an alternative and no guidance as to desired message to young people with regard to e-cigarettes
- Many of the functions the Authority provided were mandatory functions that had to be provided through the Public Health Grant. However, that limited the approach to people who wanted to reduce or cut down smoking with Stop Smoking only allowed to support quitting
- Manchester had done a lot of work on WHO Age Friendly environment taking a whole place view. It was about everybody at every level thinking and reflecting on every decision/policy and whether it helped or hindered older people and hopefully contributed to it being a better place to live. Manchester had used its local communities to develop plans and ideas to develop their own areas to make it age friendly and a more inclusive place for all people to reduce cost and barriers. Some of the things that mattered to young people were the same as to the elderly
- The Local Authority had a good understanding of Health and service assets, however, there were others that were harder to define and measure such as which of the communities were resilient, which had good social networks. Work had/was taking place with regard to Ward profiles and Ward Plans but there was a need to look at it in further detail and understand the full depth of assets

- The Warm Homes funding had focussed on improving housing conditions via installing updated boilers to make properties fit for purpose and fuel efficient. Obviously this was not the whole story with regard to excess winter deaths and still work required on isolation in communities and family finances
- The newly established Financial Inclusion Team within Housing Services focussed on vulnerable peoples' finances
- How RMBC made services such as parks accessible
- The risk factor for social isolation and loneliness was the same as smoking 15 cigarettes a day

Resolved:- (1) That the report be noted.

(2) That a further progress report be submitted on the detailed action plan.

(3) That the previous spotlight review on urinary incontinence be considered in developing the action plan.

7. HSC WORK PROGRAMME 2017-18

Janet Spurling, Scrutiny Officer, gave the following presentation on issues for possible inclusion within the Select Commission's 2017/18 work programme:-

The big five issues

- Rotherham Place Plan (Health and Social Care integration)
 - Prevention, self-management, education and early intervention
 - Rolling out integrated locality working model – 'The Village' pilot
 - New Integrated Urgent and Emergency Care Centre (July 2017)
 - Further development 24/7 Care Co-ordination Centre
 - Building a Specialist Re-ablement Centre
- Adult Social Care (development programme and performance)
- Learning Disability
- Mental Health (child and adolescent)
- Regional Scrutiny – NHS reconfiguration

Continuing from 2016/17

- Big Five
- Public Health – annual report
- Carers – links Adult Social Care Programme
- Access to GPs
- Autism

Each year

- NHS Trust Quality Accounts and provider performance including progress on Care Quality Commission action plans following inspections
- Rotherham NHS Foundation Trust (hospital)
- Rotherham, Doncaster and South Yorkshire NHS Foundation Trust (RDaSH)
- Yorkshire Ambulance Service

Other Suggestions

- Dementia (from discussions in April)
- Suicide Prevention Plans – Parliamentary Select Committee
- Health and Wellbeing Strategy implementation

Methods – for example

- Reports – initial and Select Commission to decide if more work needed and information/progress/monitoring
- Presentations
- Reviews – spotlight or full
- Sub-groups
- Visits
- Service user/patient experience – case study or direct

Select Commission Members were asked to submit any suggestions to Janet.

Resolved:- (1) That the Scrutiny Officer work with the Director of Public Health and Assistant Director of Strategic Commissioning to draw up a draft work programme.

(2) That a draft membership of the Quality Account Sub-Groups be submitted to the next meeting for consideration.

8. JOINT HEALTH OVERVIEW AND SCRUTINY COMMITTEE FOR THE COMMISSIONERS WORKING TOGETHER PROGRAMME

The Health Select Commission received an update from the Scrutiny Officer concerning the Joint Health Overview and Scrutiny Committee (JHOSC) for the Commissioners Working Together Programme. The issues highlighted:-

- The decision on the reconfiguration proposals for Hyper Acute Stroke and Children's Surgery and Anaesthesia had been postponed from May until 28th June. However, the Joint Committee of Clinical Commissioning Groups would only be making the decision on the Children's Surgery and Anaesthesia on that date as there was further work taking place with regard to Hyper Acute Stroke. The new date had not been announced for that decision.

- There would be another meeting of the JHOSC in July. This would provide an opportunity to discuss the final decision for Children's Surgery and Anaesthesia and to discuss future scrutiny following any changes.

Resolved:- That the information be noted.

9. HEALTHWATCH ROTHERHAM - ISSUES

- No issues had been raised.

10. HEALTH AND WELLBEING BOARD

The minutes of the meeting of the Health and Wellbeing Board held on 8th March, 2017, were noted.

11. DATE OF NEXT MEETING

Resolved:- That the next meeting of the Health Select Commission be held on Thursday, 20th July, 2017, commencing at 9.30 a.m.

OVERVIEW AND SCRUTINY MANAGEMENT BOARD
5th May, 2017

Present:- Councillor Steele (in the Chair); Councillors Albiston, Allcock, Cowles, Mallinder, Sansome, Short, Julie Turner, Walsh and Wyatt.

Apologies for absence:- Apologies were received from Councillors Clark and Price.

134. DECLARATIONS OF INTEREST

There were no Declarations of Interest to report.

135. MINUTES OF THE PREVIOUS MEETING

Resolved:- That the minutes of the meeting held on 31st March, 2017 be agreed as a true and correct record.

136. QUESTIONS FROM MEMBERS OF THE PUBLIC AND THE PRESS

There were no questions from members of the public or the press.

**137. CHILDREN'S COMMISSIONER'S TAKEOVER CHALLENGE -
ACCESSIBILITY OF PUBLIC TRANSPORT FOR YOUNG PEOPLE**

Consideration was given to the report which highlighted how the Children's Commissioner's Takeover Challenge on 21st February, 2017 focused on the recommendations made by Rotherham Youth Cabinet in their report "Get in Gear" regarding the accessibility of local public transport for young people.

This report outlined the key points from the discussions with the Cabinet Member, South Yorkshire Passenger Transport Executive and representatives from local bus, tram and rail operators.

The response from partner agencies to the young people's recommendations following the spotlight session was included and detailed in Appendix 1.

Resolved:-

1. That the report be noted.
2. That a press statement on the report and recommendations in respect of Accessibility of Public Transport for Young People be prepared for publication following the General Election purdah period.
3. That the report be forwarded to the Sheffield City Region Combined Authority Scrutiny Committee.

4. That an update be reported to the Youth Cabinet in November 2017 and any concerns arising from that discussion be reported back to this committee.

138. PROPERTY ASSET MANAGEMENT POLICY AND STRATEGY

Consideration was given to the report which set out how the Council's Land and Property Assets were not only buildings that supported service delivery, but valuable assets that could further the delivery of the Council's plans and objectives, particularly in achieving a modern, efficient Council.

This report defined the proposed Council Policy and Strategy to guide the use of the Council's Land and Property Assets. It proposed the Council's approach to the management, usage and development of the Council's Land and Property Assets in supporting the Council's Corporate Plan and the Asset Management Improvement Plan.

As an initial observation, Members identified that there were various plots of prime land across the borough that the Council should seek to sell as a priority. Particular reference was made to the site of the former leisure centre on Wickersley Road. Officers acknowledged that this had been an issue and indicated that the Asset Management Improvement Plan had been developed to address such issues.

Assurances were sought in respect of the timescales for implementing the provisions of the strategy and it was noted that work was already underway to establish service asset management plans for each area of the Council, which would set out the requirement over a one, three and five year period.

Reference was made to the future use of Riverside House and the costs incurred by the authority in the running and maintenance of the building. Similarly Members felt that it was necessary to have a better understanding of the future requirement in view of the changing face of local government and the reduction in staff numbers cited in the Workforce Strategy.

The Board was particularly keen to understand the link between this Strategy and the Medium Term Financial Strategy (MTFS). Whilst it was explained that the target for capital receipts from the sale of assets had been exceeded in the previous year, Members wanted further detail on the link between the Asset Management Strategy and the MTFS.

Resolved:-

1. That Cabinet be advised that the recommendations be supported.

2. That an update report be submitted to Overview and Scrutiny Management Board in November 2017 detailing the link between this strategy and the Medium Term Financial Strategy.

139. BUILDING STRONGER COMMUNITIES

Consideration was given to the report which detailed how organisations and agencies across Rotherham were working to support stronger, more cohesive and inclusive local communities. The Council's work in this area was a key priority within the Rotherham Improvement Plan, which called for the development of a corporate policy statement on community cohesion. Dame Louise Casey's recent review of "*opportunity and integration*" in local communities was also having a bearing across the whole of the local government sector.

Other partners, including the police, fire service, voluntary and community sector, and health agencies were all seeking to work in the interests of building stronger communities so that the needs of different areas and demographic groups were better understood and services could be better targeted.

The draft "building stronger communities" Strategy appended to this report aimed to provide clear direction for a number of workstreams broadly focused on the cohesion/stronger communities agenda. A draft action plan was also attached setting out a range of actions and milestones across the strategy's key themes, which were:-

- A strong civic community and pride of place.
- Bringing people together.
- Our rights and responsibilities towards each other.
- Expanding opportunity and economic security.

Whilst acknowledging the Council's central role in relation to community cohesion, the Strategy had a clear emphasis on partnership working and – critically – on meaningfully engaging with local communities so that they could help shape the approach.

It was proposed, therefore, that a Stronger Communities Forum (SCF) be established. This could be chaired by the Council Leader, reflecting the Council's pivotal community leadership role, but with membership primarily comprised of community representatives as well as partner public service organisations.

The need for a small grants programme was identified in the action plan. An application for external funding had been made to resource this programme. If the external funding application was not successful, then an internal budget had been identified to provide a £5,000 contribution from the Council to the small grants programme, which would be overseen by the Stronger Communities Forum. The Rotherham Together Partnership had agreed an additional £5,000 for the programme.

Members referred to the section 3.3 of the report which discussed radicalisation in schools and queried how the actions identified would be delivered. In response, it was stated that there was not an easy solution to the issue, however the aspiration was to bring people together outside of schools on a much smaller scale.

The report was broadly welcomed by Members and support was expressed in various ways for the plans detailed therein. Assurances were sought that the work planned would reach beyond the usual suspects and the Leader indicated that the Rotherham Together Partnership would be one route, but it was necessary to understand how the Council and public agencies could reach out to hard-to-reach groups.

Whilst the report was considered to be a step forward, Members further queried whether the document fully appreciated the challenges facing communities and if the policy would do enough within the context of national values. The Leader agreed with the sentiment of the point and indicated that it provided a basis to tackle local issues facing communities in Rotherham, but there were broader challenges nationally and globally that affected the local position.

Members queried how implementation would be monitored in neighbourhoods and what the key milestones would be. The Leader confirmed that there would be a balance between monitoring outputs, which could be measured, and outcomes which were largely around people felt.

Resolved:-

That Cabinet be advised that the recommendations be supported.

140. FLAG PROTOCOL FOR RIVERSIDE HOUSE AND ROTHERHAM TOWN HALL

Consideration was given to a report which identified, following a number of enquiries and requests to fly alternative flags, a protocol being prepared to establish a calendar of dates on which flags should be flown, the circumstances of how those flags should be flown and any associated decision making in respect of flying flags outside of the terms of the protocol.

Whilst the general principle applied by the Authority was to follow the advice provided by Central Government, a framework for local decision making in respect of the flying of flags would assist in the determination of any additional requests.

This report, therefore, sought the approval and adoption of a protocol to govern the flying of flags at Riverside House and Rotherham Town Hall.

Members welcomed the report and considered that the Union Flag should always be flown from the principal flag pole at both Riverside House and Rotherham Town Hall.

Resolved:-

That Cabinet be advised that the recommendations be supported, subject to the schedule of dates for flying flags to make provision for the Union Flag to be flown always as the principal flag.

141. WORK IN PROGRESS (CHAIRS OF SELECT COMMISSIONS TO REPORT)

Councillor Sansome, Chair of the Health Select Commission, reported that meetings had taken place during April to review the quality accounts for the various trusts and indicated that there had been some concerns on performance. Following the April meeting of the Commission, Members had held some initial discussions on the work programme. He further added that he had met with the Chief Executives of the Clinical Commissioning Group, Rotherham Hospital Trust and Rotherham, Doncaster and South Humber NHS Foundation Trust.

Councillor Allcock, Vice-Chair of the Improving Lives Select Commission, reported that the alternative management arrangement review had concluded and a report had been produced. He wished to record his thanks to all Members that had sat on the Commission and paid tribute to the work of the scrutiny officer and link officer who had supported their activities.

Councillor Mallinder, Chair of the Improving Places Select Commission, paid also thanked the members of that body for their commitment and support for the commission's work during the past year.

Resolved:-

That the update be noted.

142. DATE AND TIME OF NEXT MEETING

Resolved:- That the next meeting of the Overview and Scrutiny Management Board take place on Wednesday 21 June 2017 at 11.00 a.m. (pre-meeting for Members commencing at 9.15 a.m.)

OVERVIEW AND SCRUTINY MANAGEMENT BOARD
21st June, 2017

Present:- Councillor Steele (in the Chair); Councillors Brookes, Cowles, Cusworth, Evans, Mallinder, Napper, Short, Walsh and Wyatt.

Apologies for absence were received from Councillors Clark and Sheppard.

1. WELCOME

The Chairman welcomed Councillors Brookes, Cusworth, Evans, Napper and Sheppard (submitted apologies) to their first meeting of the Board.

He also placed his thanks on record to Councillors Albiston, Allcock, Price, Sansome and Julie Turner for their work carried out on behalf of the Board.

2. DECLARATIONS OF INTEREST

There were no Declarations of Interest to report.

3. MINUTES OF THE PREVIOUS MEETING

Resolved:- That the minutes of the meeting held on 5th May, 2017, be agreed as a true and correct record.

4. QUESTIONS FROM MEMBERS OF THE PUBLIC AND THE PRESS

There were no questions from members of the public or the press.

5. INTEGRATED HEALTH AND SOCIAL CARE PLAN

Consideration was given to the report which detailed the proposed governance arrangements to oversee strategic objectives of the Rotherham Integrated Health and Social Care Place Plan and ensure tactical delivery of the identified actions. The report also highlighted the links of health and social care integration to key Council strategic drivers such as The Rotherham Plan – A new perspective 2025.

The Integrated Plan contained five joint priorities (plus Primary Care which sat outside the Plan but was integral to it) that built on existing initiatives but took a whole system approach to increase efficiency and maximise benefits and reach:-

- Prevention, self-management, education and early intervention
- Roll out our integrated locality model 'The Village' pilot
- Urgent and Emergency Care Centre
- 24/7 Care Co-ordination Centre
- Specialist Reablement Centre

In order to oversee the delivery of the Rotherham Integrated Health and Social Care Place Plan and to comply with the deadline for creating an Accountable Care Partnership by September, 2017, an Accountable Care System for the Borough had been formed with partners. This would meet the requirements of the South Yorkshire and Bassetlaw STP with the new governance underpinned by specific terms of reference. Overall ownership and strategic direction would rest with the existing Rotherham Health and Wellbeing Board and the new Rotherham Place Plan Board would report progress thereto.

The Rotherham Place Plan Board would focus on delivery of the Integrated Health and Social Care Place Plan and co-Chaired by the Chief Executive (RMBC) and the Chief Officer of Rotherham Clinical Commissioning Group. The Cabinet Member for Adult Care and Health and Dr. Cullen (Chair and Chair of the Strategic Clinical Executive) would be in attendance at all meetings in a participatory and oversight capacity for both the Council and CCG. Operational activity would be driven by the Rotherham Place Plan Delivery Team which would report into the Rotherham Place Plan Board.

The report set out how the decision making for the Accountable Care System had been derived as well as how the key stakeholders would work together to maximise the utilisation of Rotherham resources.

The first meeting of the Place Plan Board would meet in shadow form in July, 2017 with the aim to formally meet from 1st April, 2018 as a fully constituted body.

Clarification was sought on a number of areas through Members' questioning and were summarised as:-

- The effectiveness of the 'The Village' pilot was to be evaluated and submitted to the Health Select Commission in due course
- An announcement on the transformational funding had been delayed due to the General Election. However, the plans had been drawn up prior to any knowledge of possible additional funding so, although would accelerate progress, was not dependent upon it
- As the Plan developed extra funding may be required but would be considered by each of the partner organisations through their own decision making processes
- There were no Human Resources implications at present but going forward would be part of the Accountable Care System
- When would the review of the 24/7 Care Co-ordination Centre be submitted?

OVERVIEW AND SCRUTINY MANAGEMENT BOARD - 21/06/17

- Had every GP practice undertaken a productive general practice by March 2017?
- Would the Accountable Care Partnership be created by September, 2017?
- Was the phrase “efficiency challenge” an adequate description of the service reductions which will be needed to achieve savings of £75 million over the next five years?

The Strategic Director for Neighbourhood and Adult Services agreed to raise the questions regarding 24/7 care co-ordination and GP Practice with the relevant colleagues from TRFT and the CCG.

Resolved:-

1. That the Cabinet be advised that the recommendations be supported.
2. That the Health Select Commission continues to scrutinise the implementation of this plan.

6. LOCAL PLAN: ADDITIONAL CONSULTATION ON SITES AND POLICIES DOCUMENT

Consideration was given to the report which highlighted proposed consultation on additional housing sites in Wath upon Dearne, Brampton Bierlow and West Melton necessary to accommodate the changes required by the Planning Inspector.

The Inspector required the Council to identify and consult on additional housing sites in the said areas to remedy a shortfall against the Core Strategy housing target for the area that had come to light as part of the examination. Consultation was required as an additional stage before the Council consulted on the Inspector's Proposed Main Modifications.

Two sites had been identified which minimised the release of further Green Belt land and were the most sustainable sites to meet the shortfall against the target for the area. Together they would provide around 500 new homes:-

Land off Far Field Lane, Wath upon Dearne (site reference LDF0849)

Land between Pontefract Road and Barnsley Road, West Melton (site reference LDF0263).

Subject to Cabinet approval, it was proposed that the public consultation would take place during July and August, 2017 with comments forwarded to the Inspector.

A drop-in session for all Members had been held on 13th June, 2017.

Clarification was sought on a number of areas through Members' questioning and were summarised as:-

- Prospective development sites were subject to a vigorous planning inspection taking transport and the infrastructure into consideration
- A briefing note had been produced for Members and MPs. Statutory consultation with local residents would take place including site notices and notices in the local press. Residents that lived in the vicinity would receive individual letters informing them of the proposal as well as being available on the website.
- All comments received would be forwarded to the independent Inspector who had requested the additional consultation and had set aside some dates for hearings
- There was criteria with regard to the provision of additional school places etc. and the number of new properties built

It was noted that, due to the deadline set by the independent inspector, when the report was considered by Cabinet on 26th June, 2017, the Chairman and Vice-Chairman of the Board had agreed that this item would not be subject to call-in.

Resolved:-

That the Cabinet be advised that the recommendations be supported.

7. COUNCIL PLAN 2017 - 2020

Consideration was given to a report which detailed the 2017-2020 Council Plan, the core document that underpinned the Council's overall vision setting out headline priorities, indicators and measures that would demonstrate its delivery. It sat alongside the Corporate Performance Management Framework explaining to all Council staff how robust performance monitoring and management arrangements were in place to ensure focus on implementation.

The Plan included 103 Performance Indicators which had been monitored in quarterly public reports to Cabinet throughout 2016-17. Following a review of the success of the Plan, it had been refreshed and the Indicators revisited.

The refreshed Plan, Council Plan, was intended to cover a three year period, 2017-2020 and maintained the vision and associated priorities established for the Corporate Plan and refined the number of Performance Indicators to enable a more focused approach to Performance Management. It also included reference to relevant elements of the recently launched Rotherham Plan 2025.

Monthly performance updates would continue to be provided to Cabinet Members, Commissioners, Chief Executive and Strategic Directors with quarterly reports submitted to the Cabinet and Commissioners' Decision Making meeting.

Clarification was sought on a number of areas through Members' questioning and were summarised as:-

- Desire for the term “domestic abuse” to be used as opposed to “domestic violence” as it covered physical as well as other aspects of abuse
- Inclusion of baseline indicator where available to enable a comparison to be made at year end
- Concerns regarding the design of the document and the difficulties some members of the public may have in reading it
- The sickness absence target to be reviewed annually

Resolved:-

1. That the Cabinet be advised that the recommendations be supported.
2. That the Council uses the term ‘domestic abuse’ consistently in relevant Council documentation
3. That information be provided on baseline indicators for all measures in order to enable a comparison to be made at year end.

8. HOME TO SCHOOL TRANSPORT POLICY

Councillor Hoddinott, Cabinet Member for Waste, Roads and Community Safety, introduced Martin Raper, Streetscene Manager, who gave the following powerpoint presentation on the Council's Home to School Transport Policy:-

Legislation

- Education Act (amended by Education & Inspections Act 2006)
Sections 508B, 508C and Schedule 35B
- Equality Act 2010
Disability and Impairment
- Home to School Travel & Transport Guidance 2014
Department for Education (DfE)
- Children & Families Act 2014
Section 10 ‘SEN’ Education, Health and Care Plans

The Statutory Duty to provide free transport assistance

- The Education Act 1996 (amended by the Education & Inspections Act 2006)

Sections 508B and 508C and Schedule 35B places a duty on the Council to make suitable travel arrangements to facilitate attendance at school for eligible children to qualifying schools and for a low income family. Includes criteria of free transport assistance for:-

Eligible children are those of compulsory school age 5-16

Statutory walking distances criteria for children to a qualifying school:

Beyond 2 miles (below the age of 8) e.g. a primary school or

Beyond 3 miles (aged 8 to 16) e.g. a secondary school or

Between 2 and 6 miles for pupils from low income families or

No statutory distances for pupils with a disability or mobility problems

- Equality Act 2010

Relates to Children and Young People with a Disability and Impairment can be defined as:

Physical, mental, learning, progressive conditions, visual and hearing impairments

This includes a parent/carer with a disability who is unable to accompany their child to and from school

- Department for Education 2014: Special Educational Needs, a disability or mobility problems eligibility:

Make transport arrangements for those children who cannot reasonably be expected to walk to school because of their mobility problems or associated health and safety issues related to their SEND (Special Education Needs and Disabilities)

- Children & Families Act 2014: Section 10 defines 'SEN'

Children and Young People with an Education, Health and Care Plan (previously a Statement of Special Educational Needs)

A single plan which covers the education, health and social care needs of a child or young person with special educational needs and/or a disability (SEND) aged 0-25 years

Statutory Guidance for Local Authorities – Department of Education Jul 2014

Home to School Travel and Transport Guidance

- In order to comply with the above DfE Guidance the Council has a statutory duty to make transport arrangements for all eligible children

- Special Educational Needs, a disability or mobility problems eligibility

Make transport arrangements for those children who cannot reasonably be expected to walk to school because of their mobility problems or associated health and safety issues related to their SEND

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- Unsafe route eligibility
For all children who cannot reasonably be expected to walk to the nearest suitable school because the route is deemed unsafe to walk
- Extended rights eligibility
Provide free transport assistance where pupils aged 5-16 are entitled to e.g. free school meals

What the current Policy provides

- Covers journeys to mainstream schools, special schools and colleges within Rotherham and out of Borough
- Children and young people's eligibility for transport assistance was based on distance, medical condition, means testing and availability of public services/route safety
- Transport provision can be a travel claim, zero fare bus pass, coach, minibus or taxi
- Externally procured contacted approved operators and public network services within South Yorkshire (via SYPTE) used
- Journeys to mainstream schools, special schools and colleges within Rotherham and out of Borough
- Post-16 students and under 5's can also travel on network services
- Some discretionary respite transport to Liberty House provided

Current Provision

Type	Pupils	2016-17 Expenditure
Zero fare bus passes (5-16)	1,005	£303k
Taxi/minibus to mainstream (5-16)	67	£106k
Transport to resourced units (5-16)	65	£221k
Transport to special schools (2-19) and transport of SEN/EHCP (5-16) Includes some mainstream schools	520 21	£1,935m
Transport to colleges (16-19)	23	£79k
Extra district schools (5-19)	70	£607k
Those pupils travelling in taxis	210	
Travel claims (5-19)	22	£14k

Home to School Transport Benchmarking

- Average cost of transporting a pupil £4,260
(report comparators – lowest £1,800 highest £5,100)
- Average number of pupils per route 2.95
(report comparators – highest 3.63 lowest 1.40)
- Single occupancy routes 48%
(report comparators - lowest 15% highest 48%)

Arrangements with Children's Services

- Education, Health and Care Plan Team (EHCA) recommend and name the school/college where the young person is due to attend for their special educational needs
- Family, or their advocate, or their school complete an online transport assessment form
- Passenger Services Team (PST) at CTU assesses transport requirements e.g. height, distance, medical and physical needs
- Available space on a vehicle or a new route is identified along with Care Plan, relevant training etc.
- Family informed of details of transport operator and boarding points and estimated times etc.
- School or college informed about which operator the young person will be travelling
- For LAC transport (Social Work funded) an online assessment/request is completed via the C&YPS locality team and the named Social Worker is informed and they cascade information to parent/carer

Discussion ensued with the following issues raised/clarified:-

- The retendering process that had been undertaken at the end of 2016 had raised some concerns by Councillors and families. The process had been reviewed and would be considered by the Improving Lives Select Commission. Legally the contracts had to be renewed but the lessons learnt would be carried forward when the process was repeated
- There were transition arrangements offered to individuals in order to deal with some of the complex issues where children were used to certain taxi drivers and escorts. The work overlapped so the new operator worked with the child/parent and school before the old contract came to an end
- The School Transport Section had adopted the same standards as the Rotherham Taxi Licensing Scheme and all taxis that worked on the Service had to be licensed in Rotherham
- There had been an incident of a company sub-contracting which had been reviewed by the Team and all the appropriate checks and training had been undertaken by the individual. If a company was used that was not known to the Service the contract would be stopped immediately
- There had been some changes in the provision but had no financial impact on individuals nor any impact on any of the Care Plans

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- The contracted taxi company could sub-contract; this was a loophole in the Regulations that the Authority would wish to be closed down
- The Authority could not stop out-of-borough companies tendering for contracts but they would be required to comply with the Taxi Licensing Standards adopted by Rotherham
- If a child attended a school of parental choice it may be that there was no transport provision because of it being a family decision unless there was compliance with some of the other criteria or the child had a disability. In real terms, if someone made a parental choice the requirement of transport was removed from the Service
- A presentation had been given for the Police and Crime Commissioner to explain Rotherham's Taxi Licensing Policy. The other 3 South Yorkshire authorities were very keen to ensure their standards matched those of Rotherham's. The Licensing Manager had set up a network with other Licensing Managers across the county to look at how they could make their licensing standards similar to Rotherham's
- There was still more work to be done from the benchmarking with aspects that could be done slightly different e.g. single occupancy rate, the use of travel plans and giving more choice as to how families took their children to school

Resolved:- (1) That the presentation be noted.

(2) That the Board would endorse that taxi companies in Rotherham be not allowed to sub-let their contract unless the sub-contractor met Rotherham's Taxi Licensing Policy including the use of CCTV cameras in their vehicles.

(3) That the relevant sections of the Education Act 1996 that the Council had to abide by be supplied to the Board for information.

9. OVERVIEW AND SCRUTINY ANNUAL REPORT 2016-17

Janet Spurling, Scrutiny Officer, presented the final draft of the Scrutiny Annual Report 2016-17 for consideration prior to submission to the 12th July 2017 Council meeting.

It was noted that the Scrutiny Annual Report aimed to provide a retrospective look over the past year in terms of work completed and outcomes achieved. It also offered a look ahead for the coming municipal year in terms of future priorities through a headline work programme. Members further noted the document as an opportunity to provide vital information to Members, officers, partner agencies and the general public about the role and work of scrutiny and to formally thank the co-optees for their contributions.

Pre-decision scrutiny had added another dimension to the scrutiny function in 2016-17 with recommendations made by the Board accepted by Cabinet and Commissioners on a range of policy decisions.

Resolved:-

1. That the draft Annual Report 2016-17 be received.
2. That the Annual Report 2016-17 be referred to the meeting of the Council on 12th July 2017 for formal agreement.
3. That it be noted that membership details for 2017-18 may be subject to change following the Council meeting on the 12th July and would therefore be reflected in the final published version.

(THE CHAIRMAN AGREED THAT MINUTE NO. 12 BE CONSIDERED IN THE CLOSED PART OF THE MEETING TO ENABLE A FULL DISCUSSION TO TAKE PLACE.)

10. EXCLUSION OF THE PRESS AND PUBLIC

Resolved:- That, under Section 100A(4) of the Local Government Act 1972, the press and public be excluded from the meeting for the following item of business on the grounds that it involves the likely disclosure of exempt information as defined in Paragraph 3 of Part I of Schedule 12A to the Local Government Act 1972 (information relating to the financial or business affairs of any particular person (including the Council)).

11. ACQUISITION OF 3-7 CORPORATION STREET, ROTHERHAM

Consideration was given to the report which highlighted proposals to continue to negotiate the purchase of Nos. 3-7 Corporation Street, Rotherham together with consideration of the Compulsory Purchase of the properties should agreement on the terms not be agreed.

A full explanation was given of the Compulsory Purchase Order procedure and the need to continue to try to engage with the property owners to bring the properties back into use. If not, when public examination stage was reached, the history would be checked to ascertain if the Local Authority had exhausted all attempts to engage. If the process had not been followed appropriately then the Compulsory Purchase Order could fail.

Unsuccessful attempts had been made to engage with the property owners to date but would continue in order to try and encourage them to bring the properties back into use.

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Clarification was sought on a number of areas through Members' questioning with regard to the Compulsory Purchase Order procedure and the Town Centre Master Plan.

Resolved:-

That the Cabinet be advised that the recommendations be supported.

12. DATE AND TIME OF NEXT MEETING

Resolved:- That the next meeting of the Overview and Scrutiny Management Board take place on Wednesday, 5th July, 2017, commencing at 11.00 a.m. (pre-meeting for Members commencing at 9.15 a.m.)

EARLY RELEASE/FLEXIBLE RETIREMENTS PANEL
15th May, 2017

Present:- Councillor Alam (in the Chair); Commissioner Ney, Councillors Cowles, Hoddinott, Read and Watson.

Apologies for absence were received from Councillors Roche.

EXCLUSION OF THE PRESS AND PUBLIC

Resolved:- That, under Section 100A(4) of the Local Government Act 1972, the press and public be excluded from the meeting for the following items of business on the grounds that they involve the likely disclosure of exempt information as defined in Paragraph 1 of Part I of Schedule 12A to the Local Government Act 1972 (information relating to an individual).

RELEASE OF PRESERVED BENEFITS ON COMPASSIONATE GROUNDS - REGENERATION AND ENVIRONMENT

The Panel considered an application for release of preserved benefits on compassionate grounds from a former employee of Regeneration and Environment Services.

Resolved:- That the application be approved.

FLEXIBLE RETIREMENT REQUEST - CHILDREN AND YOUNG PEOPLE'S SERVICES

The Panel considered an application for flexible retirement from an employee in Children and Young People's Services.

Resolved:- That the application be approved.

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Resolved:- That the application be approved.

FLEXIBLE RETIREMENT REQUEST - REGENERATION AND ENVIRONMENT

The Panel considered an application for flexible retirement from an employee in Regeneration and Environment Services.

Resolved:- That the application be deferred pending further investigation and information.

**RELEASE OF PRESERVED BENEFITS ON COMPASSIONATE
GROUNDS - ADULT CARE AND HOUSING**

The Panel considered an application for the release of preserved benefits on compassionate grounds from a former employee in Adult Care and Housing.

Resolved:- That the application be refused.

**COUNCIL SEMINAR
23rd May, 2017**

Present:- Councillor Roche (in the Chair); Councillors Albiston, Allcock, Beaumont, Clark, Cooksey, Cowles, Jarvis, Khan, Lelliott, McNeely, Mallinder, Napper, Reeder, Russell, Short, Simpson, Walsh, Williams and Wyatt.

Apologies for absence were received from Councillors Bird, Cutts, Cutts, Ellis, Jepson, Marriott and John Turner.

ROTHERHAM'S INTEGRATED HEALTH AND SOCIAL CARE PLACE PLAN

Councillor Roche, Cabinet Member for Adult Social Care and Health and Chairman, welcomed Sharon Kemp, Chief Executive, and AnneMarie Lubanski, Strategic Director for Adult Care and Housing, who gave a brief overview of Rotherham's Integrated Health and Social Care Plan.

With the aid of powerpoint the presentation highlighted:-

- Rotherham Plan 2025 – a new perspective
- Rotherham Integrated Health and Social Care Place Plan
- Rotherham Context – the case for change
- The five joint priorities within the Place Plan
 - Prevention, self-management, education and early intervention
 - Rolling out the integrated locality model – 'the village' pilot
 - Opening an integrated Urgent and Emergency Care Centre
 - Further development of a 24/7 Care Co-ordination Centre
 - Building a Specialist Re-ablement Centre
- Enablers
 - Rotherham Place Plan Board
 - Rotherham Place Plan Delivery Team
 - Rotherham "Accountable Care System" Principles
 - STP October 2016 Submission Summary

The presentation also included general information with regard to the Sustainability and Transformation Plan.

Discussion ensued with the following issues raised/highlighted:-

- Quality of care provided in care homes linked to the number of emergency hospital admissions
- Did the Local Authority have any jurisdiction with regard to staff within the care home setting carrying out the jobs they were employed to do and not multi-tasking?

- Monitoring of the new Emergency Care Centre
- What finance was required to achieve what was hoped to be achieved
- The word “vision” had a different interpretation to a member of the public
- What percentage of funding was expected from partners
- Consideration given to the allocation of rooms to those admitted onto the step up step down scheme so as not affecting other residents
- Clarity of the funding position with regard to savings offered by Adult Social Care and the increased Adult Social Care precept
- Explanation required on future Council Tax bills around the Adult Social Care precept

The Chair thanked Members for their attendance and Sharon and AnneMarie for their informative presentation. It was suggested that a seminar be arranged on care homes in July, 2017.

**COUNCIL SEMINAR
13th June, 2017**

Present:- Councillor Yasseen (in the Chair); Councillors Albiston, Allcock, Allen, Atkin, Beaumont, Clark, Cooksey, Cusworth, Elliott, Ellis, Evans, Jarvis, Jepson, Jones, Khan, McNeely, Mallinder, Reeder, Russell, Sansome, Sheppard, Short, Simpson, Steele, Taylor and Walsh.

Apologies for absence were received from Councillors Cowles, Cutts, Marriott, Napper, John Turner, Watson and Williams.

FUTURE APPROACH TO LEARNING AND DEVELOPMENT FOR COUNCILLORS

Councillor Yasseen, Cabinet Member for Neighbourhood and Cultural Services and Chair, welcomed James McLaughlin, Democratic Services Manager, and Bryony Rudkin, Deputy Leader Ipswich Council, who gave a brief overview of the future approach to Learning and Development for Councillors.

With the aid of powerpoint the presentation highlighted:-

Context

- Member development and induction programme has been key in enabling the return of powers to Council
- Local Government Association support
- Aspiration for continuous development of Members to support good governance and representation of communities

Member Development Panel

- Chaired by Cabinet Member for Neighbourhood Working and Cultural Services and made up of 6 other members with cross-party representation
- Developed a draft strategy to inform the Authority's approach to learning and development
- Will have an ongoing role in monitoring the delivery of the strategy

Objectives

- To help Members develop and strengthen their awareness, knowledge and understanding of:-
 - Local and national challenges and opportunities for the Borough
 - Complex issues facing local government
 - Skills and competencies needed in the modern world, including effective communications, community leadership and ICT competencies

What the Council will do to deliver the objectives

- Foster and support a Member-led approach
- Plan a strategic approach

- Develop and deliver an effective Learning and Development programme
- Assist Members to develop their capacity
- Support all Members in the development
- Assess training needs and evaluate learning and development
- Provide a budget and facilities for learning and development

Member responsibilities and commitments

- New and returning Members will participate in the induction programme
- All Members will attend training or briefings on a range of local and national issues
- All Members will attend training on the Code of Conduct, Corporate Parenting and Safeguarding
- All Members will participate in specific training sessions related to their role e.g. Planning and Licensing
- Supporting each other through mentoring and advice
- Sharing learning
- Completing pre and post-training evaluation and providing feedback

Learning and Development Programme

- Based on a 4 year cycle that has flexibility to meet the needs of new Members
- Evaluation of need matched to Council priorities, role profiles and the Member Skills Framework
- Personal Development Plan interview every 2 years to identify training and development needs
- PDP interviews in first year during induction and third year of term of office
- Leads to Training Needs Assessment Summary to guide development of Learning and Development Programme

What are the core knowledge and skills for Members/

- Democracy and governance e.g. Committees, Scrutiny
- Legal and constitutional framework
- Diversity and equality
- IT skills, media and communications
- Managing casework and dealing with complaints
- Safeguarding and Corporate Parenting
- Finance and budgets
- Data Protection and Freedom of Information
- Risk and resilience planning
- Partnership working

Delivering the Programme

- Must use approaches that encourage Member involvement and generate participation:
briefing notes and learning guides

e-learning packages
 external conferences, seminars and network meetings
 inhouse briefings
 peer coaching and mentoring
 visits to other authorities
 training with partner organisations and neighbouring authorities
 information from leading sector sources e.g. LGA, LGIU and INLOGOV

Discussion ensued with the following issues raised/highlighted:-

- 85% of Councillors had already participated in the Personal Development Plan (PDP) interview
- Identification by the Strategic Leadership Team of the need for effective communications/interactions between officers and Members and an understanding of Members' requirements
- Provision of training tailored to the subject matter i.e. smaller groups may be preferable for more complicated issues
- Access training more cost effectively rather than attending conferences – use of local universities?
- Creativity in how knowledge and skills were accessed
- Information on attendance by Members at training was stored within their HR portal
- Evaluation of training through a smaller feedback session rather than completion of feedback form
- Complimentary sessions on Planning and Licensing as part of Members' induction
- Should training be mandatory for Planning and Licensing Board Members?
- Support for PDPs being conducted every 2 years
- Smaller list of core knowledge and skills and then details of the next level of training as Members became more experienced
- A schedule of all training available to enable Members so they could plan their own development
- Officers' e-learning package made available to Members
- Fact sheet of what Councillors responsibilities were and those of Officers

The Chair thanked Members for their attendance and James for his presentation. It was noted that the comments would be made into the Member Development Panel's meeting on 19th June. The draft Strategy would be considered by the Cabinet/Commissioners Decision Making Meeting in September, 2017.

It was agreed that the draft Member Development Strategy be circulated for comment.

**COUNCIL SEMINAR
21st June, 2017**

Present:- Councillor Beck (in the Chair); Councillors Atkin, Beaumont, Buckley, D. Cutts, Jarvis, McNeely, Marriott, Pitchley, Reeder and Simpson.

Apologies for absence were received from Councillors Clark, Cowles, Cusworth, Mallinder, Sheppard and Williams.

ROTHERHAM SITE CLUSTER PROGRAMME

Councillor Beck, Cabinet Member Housing and Chairman, welcomed Tom Bell, Assistant Director of Housing and Neighbourhood Services, who gave a brief overview of Rotherham's Site Cluster Programme.

With the aid of powerpoint the presentation highlighted:-

Concept

- A programme of housebuilding across 7 sites
- The sites were all Council and owned by the Housing Revenue Account
- Only one site was viable if delivered separately
- Works managed by one company, Wates
- Developer Agent Model so Wates designed, built and sold homes
- The Council funds all the works, receives revenue from the sales and the new social housing
- A new and innovative delivery route to maximise the value of assets and deliver more high quality new homes

Background

- 12th September, 2016 Cabinet accepted tender from Wates Construction Ltd. to deliver 185 new homes – design reviewed and now to be 217 properties developed
- Approval of the pre-development works budget for enabling works
- All sites now had planning permission with ground investigations completed
- RLB appointed by the Council to act as Employers Agent
- Developer agreement and works contracts prepared
- Pioneering approach – use of sales receipts from the OMS units (along HRA resources) to build new Council homes

Proposed Scheme

- Planning permission granted for 217 new homes
- Sites:-
 - Braithwell Road, Maltby
 - Gaitskell Close, Maltby
 - Shakespeare Drive, Dinnington
 - Conway Crescent, East Herringthorpe

Farnsworth Road, East Herringthorpe
Rotherview Road, Canklow (2 sites)

Range of New Homes

- 83 homes for open market sale
- 93 new general need Council homes
- 5 new specialist Council homes
- 36 new Shared Ownership and Rent to Buy homes

The Key Benefits

- 217 new homes – more than double the numbers if delivered without the cluster approach
- Wide-ranging economic benefits
- New homes for specialist housing provision
- The Council retains ownership of the land
- 90% of overage generated from increased sales values/cost reductions retained by RMBC
- The Council retains control and influence over:-
 - Design and quality
 - Pace of delivery
 - Wider community benefits/investment
 - Tenure split
 - Local labour (subject to demonstrating best value)

Financial Implications

- Overall developments costs - £29M
- Funded from HRA reserves, unallocated HRA Capital Receipts, Strategic Acquisition Budget and use of sales receipts from open market sales
- 83 Open Market Sale
- 98 homes built for Council housing
- 21 homes for shared ownership and rent to buy – part funded by SOAHP grant
- 15 shared ownership apartments – part of Section 106 contribution

Specialist Housing

- 5 specialist housing units:-
 - 2 homes for people with learning difficulties
 - 2 homes for young vulnerable people
 - One for a foster care family

Next Steps

- Cabinet decision – 10th July
- Start on site – September, 2017
- First homes completed – March, 2018
- Scheme complete – May, 2020

Discussion ensued with the following issues raised/clarified:-

- Shared ownership had been slow within South Yorkshire, however, was becoming more attractive for first time buyers given the increase in property prices
- The Council owned the freehold title on the sites. A decision had not been made as yet but believed that the properties would be sold as freehold
- Work had taken place with Children and Young Peoples' Services and Adult Social Care with regard to the design, appropriateness and location of the specialist housing units
- It had been made clear within the contract that the Council was in control of the pace of the Programme
- Work would take place with the Canklow neighbourhood and community as to the possible impact of the development on Rotherview Road on the local primary school and community facilities
- The Council was not reliant on Government funding for the Programme
- External legal support had been sought due to the innovative Programme in developing the contracts and legal framework to ensure clarity regarding timetabling and sequencing of works
- Most of the sites were brownfield sites
- Tenants of the new properties would have the same rights with regard to Right to Buy, however, there would be a cost floor evaluation of the properties as part of a sale which included not only bricks and mortar but also the land capital cost. This would make the properties much more expensive
- Wates had been selected not only on cost and value but they had an architect that designed bespoke properties for the specific site
- Where exclusively building social homes there was no obligation to contribute to Section 106 monies

The Chairman thanked Members for their attendance and Tom for his presentation.