

ORANGE BOOK FOR INFORMATION

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

Date: Wednesday, 22nd May, 2019

Time: 2.00 p.m.

A G E N D A

1. Health Select Commission (Pages 1 - 35)
2. Improving Lives Select Commission (Pages 36 - 66)
3. Improving Places Select Commission (Pages 67 - 86)
4. Overview and Scrutiny Management Board (Pages 87 - 110)

HEALTH SELECT COMMISSION**28th February, 2019**

Present:- Councillor Evans (in the Chair); Councillors Albiston, Andrews, Bird, Cooksey, R. Elliott, Ellis, Jarvis, Keenan, Short, Taylor and Williams.

An apology for absence was received from Councillor Rushforth.

The webcast of the Council Meeting can be viewed at:-

<https://rotherham.public-i.tv/core/portal/home>

69. DECLARATIONS OF INTEREST

There were no Declarations of Interest made at the meeting.

70. QUESTIONS FROM MEMBERS OF THE PUBLIC AND THE PRESS

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

71. MINUTES OF THE LAST MEETING

Consideration was given to the minutes of the previous meeting of the Health Select Commission held on 17th January, 2019.

Resolved:- That the minutes of the previous meeting held on 17th January, 2019, be approved as a correct record.

72. COMMUNICATIONS**Information Pack**

Contained within the information pack were the notes from the Quality Sub-Groups and the quarterly briefing with health partners together with a copy of the Care Quality Commission (CQC) report for CGL. Also included was information about the Schools Mental Health Trailblazer including a map showing which schools were involved.

Integrated Place Plan

A response was due shortly from the Delivery Group to the questions raised in relation to the Integrated Place Plan Quarter 2 performance report that was discussed in a workshop session.

Performance Sub-Group

The Sub-Group had met recently and discussed final Adult Social Care Outcomes Framework (ASCOF) measures and benchmarking data. Notes would follow but from the workshop two further items had been identified for the work programme:-

Carers – given their rights under the Care Act and the need to enable them to carry out their important role in helping people remain independent for as long as possible.

Information, Advice and Guidance – getting this right was imperative for the new approaches and what was hoped to be achieved.

Improving Lives Select Commission

Councillor Jarvis would supply a written report to be circulated to the Select Commission Members.

Carnson House

Councillor Andrews reported that the sub-group had visited the premises and had been impressed with the improvements that had been made and how the service was implemented. There was still progress to be made in some areas but overall it was positive. The transferred staff had settled with recruitment still taking place. Peer mentor support was particular important and further recruitment was planned.

73. CQC INSPECTION OF ROTHERHAM HOSPITAL - UPDATE

Louise Barnett, Chief Executive TRFT, and Angela Wood, Chief Nurse, gave the following powerpoint presentation:-

2018 Inspection Timelines

- 25th-27th September, 2018 – Core Service Inspection: Acute
- 28th September, 2018 – Use of Resources Inspection
- 16th-18th October, 2018 – Core Service Inspection – Community
- 22nd-24th October, 2018 – Well-led Inspection

Overall Timeframes

- 23rd-27th February, 2015 – focussed announced inspection
- 27th-30th September, 2017 – focussed follow-up inspection
- 17th July, 2018 – focussed unannounced inspection

Services Inspected

- Acute
Urgent and Emergency Services
Medical Care
Maternity
Children and Young People
- Community
Children and Young People

Overall Position – Breakdown of Ratings

- 1 Outstanding
- 45 Good
- 16 Requires Improvement
- 2 Inadequate

Headlines from Re-inspection

- Some real positives
Our People, Digital, Multi-Disciplinary Teams
- Some real progress
Children and Young Peoples Services
- Some real challenges
Urgent and Emergency Services
- Some ongoing issues
Mandatory training, risks, incidents

Some Examples of Positive Findings

- Infection Control – Wards and department visibly clean
- Sepsis – tool used, staff had access to guidance and pathway
- Multi-Disciplinary Team Working – good throughout the Trust and work had been carried out to ensure the MDTs were aligned to prevent delays. Quick referrals and improved pathways had led to a reduction in lengths of stay
- Caring Staff – privacy and dignity maintained, compassionate and a real asset
- Outliers (people being cared for in non-speciality wards) – good arrangements, daily reviews
- National Recognition – acupin therapy (wrist band on pressure point to relieve nausea)

Outstanding Practice

- Digital
Innovative use of technology
Award-winning in-house SEPIA system with real time information about patients
Support clinical and operational staff

Great People

- Caring
We have some great people who really care
- Compassionate
People showed compassion, dignity, support for patients
- Open
People were open, honest, shared information

Challenges and Ongoing Issues

- Raising concerns and escalation
- Urgent and Emergency Services
- Staffing
- Medicines management
- Safeguarding
- Training
- Risks

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Progress made since Inspection

- Staffing
- Training and development
- Leadership and support
- Safety and governance

Summary of Must Do (47) and Should Do (27)

Service	Must Do	Should Do
Trust Level	7	3
Urgent and Emergency Care	12	10
Medical Care	11	9
Maternity	9	2
Children and Young People	4	3
Community Children and Young People	7	9
Total Overall	47	27

Our Aim for the Future

- Ambitious
Strive for good and outstanding
- Caring
For our patients and each other
- Together
We all have a role to play

Further detail was provided for the Commission in relation to the principal challenges and ongoing issues identified:-

- Raising concerns and escalation – review of Freedom to Speak Up Guardian role and accessibility of that role in addition to making a permanent appointment. Looked at how staff could share information and established drop-ins for staff with the Chief Nurse and Interim Medical Director to share information around innovations and ideas as well as complaints and concerns. The drop-ins included community as well as hospital based staff
- Back to the Floor Friday – on the last Friday of the month members of the Senior Clinical Team from Nursing got back into uniform and worked on the wards and talked about the key themes for the month, medicine management, escalation and raising concerns, protected meal times had all been discussed. This enabled feedback and to be a visible presence. It was also an opportunity to talk to patients. The feedback was included in the quarterly report to the Quality Assurance Committee and a review of governance processes had taken place
- Urgent and Emergency Services – Paediatric Department – a review had been conducted of the skill mix of nurses, medical support and governance arrangements around huddles and checks. Representatives from Rotherham Clinical Commissioning Group (RCCG) had recently visited and had been very positive about the

changes that had been made. The issues around staffing had been in the context of recent CQC guidance issued just before the inspection and the Trust now exceeded those recommended levels. The Paediatric area was now almost fully established

- Urgent and Emergency Services – the leadership had been increased and dedicated support provided to allow the changes and developments to be made. There was support from NHS Management who had sent a national team to undertake a review of the streaming and flow through the department. The Trust was also doing some work around the culture, leadership and management development and how things were working in there. An action plan had been in place since the inspection which had been enhanced as it progressed. Positive feedback was being received with regard to how staff were feeling and what was happening around patient flow and the monitoring of complaints/incidents
- Staffing – this was a national issue and not particular to Rotherham. A review of the skill mix and establishment review across all wards was being undertaken. The Trust was looking to enhance recruitment of both new and experienced staff including the new Nursing Associate role. The review had considered the current position and where the Trust needed to get to in 5 years to be sustainable
- Medical Staff – looking at international recruitment to fill some of the gaps that were unable to be filled locally and would be considered for nurses as well.
- Medication Management – medicines incidents and omitted doses and the reasons behind them were being looked at. An electronic prescribing system would soon be in place with electronic drug charts feeding information directly through to pharmacy which would reduce delays associated with physical charts. There were areas to improve on but also some areas of good practice and there would be cross fertilisation of this good practice
- Safeguarding – there had been a significant improvement in safeguarding across Rotherham and the Hospital. Some of the comments made during the inspection were around the training delivered, which was both on line and face-to-face, with a suggestion that the amount of face-to-face training was strengthened to meet the inter-Collegiate requirements. This was being reviewed
- Safeguarding - capture of information would be picked up through the digital system and immediate changes were made to systems to save referrals for review later following feedback at the time of the inspection

- Safeguarding – strengthening the team to support Deprivation of Liberty internally had been suggested and would be taken forward
- Mandatory and Statutory Training (MAST) – compliant across the Trust but there were some pockets in the medical teams with doctors not as compliant with the training as one would wish them to be. Ensuring a consistent approach across all areas was needed not just across the whole of the Trust. The training provision had been reviewed as to what was mandatory and what was statutory and how it could be made more accessible for groups of staff whether it be modular or full day training
- Risk Management – work was current underway on a risk management review i.e. how to capture risks, how they were escalated and reported and ensuring that the group with responsibility for overseeing them had full executive oversight. The Terms of Reference had changed and sub-groups established to look at the risks on a monthly basis with divisions. Extra risk management and risk assessment training was being put in place so that staff knew how to use the registers and to monitor/escalate them appropriately
- Patient Safety and Governance Culture – quality care was in everyone's portfolio and the most important thing for people to take forward. The "Safe and Sound Framework" was the tool being used to drive forward all the improvements
- Safe Care and Sound Care and Listening to Patients and Staff – all the challenges and ongoing issues raised would be covered by 7 workstreams each led by the Executive Director with employees of different areas and levels within the organisation giving their opinion and support on how to take the organisation forward to the next level of quality
- Quality Improvement Faculty – the Trust was developing this and had staff on places on the NHS quality initiative. These people would be driving improvements through looking at culture, behaviour and leadership in the action plans for the quality objectives for the year, in Safe and Sound implementation and the CQC action plan. One of the main objectives would be to get the Urgent and Emergency Care Centre (UECC) from where it was currently to "Good" or "Outstanding"

Discussion ensued with the following issues raised/clarified:-

- Reiteration of concerns raised at the quarterly health briefing held on the day after publication of the CQC report whilst acknowledging that some inroads had been made. In particular the pace of progress since July, UECC staff numbers and skills/experience, safeguarding processes and training, leadership and staff engagement were highlighted

- Recognition of the changes required – not only within A&E but throughout the organisation, at all levels, and to ensure that the themes were built on with learning across the board
- CQC – had been invited back and the Trust would be re-rated but it was not known when it would take place. One of the operational objectives for the year would be very focussed on the UECC
- Visibility of senior leaders – the Chief Executive had spoken to the UECC team to understand their concerns, did they recognise the changes that had taken place and were they supportive of them particularly in Paediatrics where the changes were further advanced. The Paediatrics team was extremely positive about the changes in the staffing model and felt confident about the support they received and the service they were running despite the pressures they were under
- Paediatric A&E – the Chief Nurse was now the executive lead. Together with the Interim Medical Director, a new working model had been instigated including the closure of the paediatric area overnight and moved into the main area. Band 6 nurses with greater experience rather than Band 5 nurses now staffed the Unit with a supernumerary Band 7 leader employed to oversee staffing, training and competencies and the smooth running of the departments. Other changes included a Doctor based full-time within the department, installation of CCTV in the waiting room so it could be seen from the nurses' station and other measures to include better visibility of patients
- Safeguarding Training – identified as part of the CQC action plan. Training on the deteriorating patient, induction for new starters and mentoring were also included, in addition to cross-support from the paediatric ward. A Children's Board was to be set up as a forum for information, learning and best practice for all the children's services within the Hospital
- Monitoring of Incidents within Paediatric Department – the Chief Nurse looked at incidents within the Department on a weekly basis, collated by themes and any Safeguarding concerns went straight to her. Staff also held a daily "huddle" at 3.00 p.m. on the unit to discuss staffing for the next 2 days and any issues. The minutes were shared with the Chief Nurse who was assured about the improvements made and that these would continue. Moving forward, it was the intention to have a similar process in the main UECC and ensure resources were used in a more effective way and to give people the time to make the necessary changes
- Timelines for achieving improvements on the ratings of "Requires Improvements" – there were internal milestone set out within the action plan which had been submitted to the CQC earlier that week after approval by the Board. It was a very comprehensive 42 page

document detailing how the improvements would be made. All the must do's and should do's had been responded to in the submission to the regulator. Some actions were small and others very broad under the must do's. Feedback from the CQC to the Trust on the plan would follow

- The improvement of the UECC was the top priority (actions to be completed by 31st August, 2019); the wider Trust actions would be completed by 31st March, 2020, following some audits that needed to be undertaken. It would be driven through the Safe & Sound initiative, pulling the workstreams and appropriate people together and driving that change. Changing culture and leadership styles would take longer and the Trust needed to ensure the physical actions were undertaken and would then introduce a “cultural barometer” and patient safety barometer to ensure where it was now and where it would be in subsequent years to ensure quality was embedded
- Shortcomings of UECC – there were increased numbers of patients attending A&E nationally which resulted in delays to patients being seen, assessments being delayed and pressures meant less time for staff to spend talking and listening in patients. Any incident that occurred was investigated to make sure that it could be learnt from. The journey through UECC was being reviewed looking at streamlining patients as they entered the door with various options ranging from on-site GP to ambulatory care unit rather than waiting in the main department with the aim of getting patients home as soon as possible.
- Agency Staff – in light of the CQC feedback on staffing numbers, there had been increased usage of specialist agency staff within the Paediatric Department. Currently the Department was almost fully established and the use of agency staff had reduced. The Chief Nurse was not unduly concerned about the numbers of agency staff and the ones used had appropriate skills
- Staff Shortages – across the wards there was a staff shortage and sometimes staff had to move around the Trust to cover and share the risk. An assessment would be conducted by the Senior Nurses across the organisation to identify where the gaps were and where there were opportunities to move staff. The Trust had supernumary ward managers which could fill in. A risk assessment would be completed to ensure it was addressed on a daily basis. Any escalation of “red incident” wards was escalated to the Chief Nurse and her deputy who looked to pull staff without clinical responsibility in from more corporate areas. Extra beds because of throughput from the UECC would not be opened without adequate staffing
- Why had some 2017 CQC “Requires Improvement” ratings still unchanged in 2019 and was there confidence now in moving to “Good” – some progress had been made with issues previously

identified but there were others still to move on. In medical wards there had been good feedback on staff engagement and on being able to support staff taking into account the workforce issues. There was confidence in the team, the plans that had been drawn up and the progress made that the Trust could move forward to “Good”

- Adult and Children’s Safeguarding - there was no distinction in the CQC feedback between Adult and Children’s Safeguarding. The issues were with the training and processes to capture information
- Linking with partners for support on Safeguarding – the Trust had already invited themselves to present to both the Safeguarding Adults Board and the Local Safeguarding Children’s Board
- Local Plan to address the Better Births Agenda – the Interim Head of Midwifery was working on this and the issues from the inspection feedback would be tied into the plan
- Quality Care Improvement Plan – there was a significant focus on the UECC but it included all areas to make sure the Trust drove improvements across all areas that required improvement. There was no complacency regarding the areas rated “Good” (whether rated this time or previously) with the aim of moving these to “Outstanding”. The Plan would look across all the services and particularly the learning areas. The CQC were clear that on some of the areas historically identified the Trust had made a positive step change but there were others where insufficient progress had been made and these were re-highlighted. The Trust was confident in being able to embed and sustain the necessary changes through the plans
- Leadership – the Well-led Domain covered a broad range of indicators within it. It absolutely went to the heart of leadership, whether everybody understood what that vision was, had an opportunity to contribute to it, sound governance frameworks in place and ability to monitor and oversee what was being done. It was about culture. There was confidence in terms of the teams that were in place to drive that change. Some of the frameworks around governance needed strengthening further/embedded and more consistency was required in what was being done. Staff engagement had to significantly improve. There was still some considerable work to go as an organisation and the Trust’s engagement plans had been refreshed and its approach to that as an organisation as a whole to ensure motivating and engaging with colleagues. Staff survey results would also be taken on board
- Leadership, management and changing culture without significant changes in personnel – leadership had been strengthened at various levels, including with the new Chief Nurse from a senior clinical perspective, and also within the UECC with a new experienced manager and Head of Nursing

- Awareness of the issues in the UECC – the UECC was a brilliant new facility and the staff worked incredibly hard. UECC work was complex and with unprecedented change in the new way of working, in a new environment and a different model of care and workforce mix. There had been significant scrutiny but a failure to pick up, particularly in Paediatrics, where staff were saying that it was not safe and wanted more support in terms of nursing and medical workforce to ensure appropriate care to patients. Whilst that was raised, the Trust needed to make sure that it was acted upon and dealt with in a far more effective way at pace than it had been. Work was taking place to ensure all staff had an immediate ability to escalate concerns with better joining up across all levels to be able to provide immediate support which was viewed as a key issue
- Patient voice – feedback was received via Friends and Family which was normally positive. The aspects identified in terms of Safeguarding were in relation to practice that had been observed rather than failure to pick up on comments made by patients
- Role of Scrutiny – the Trust had not sufficiently picked up on the critical issue in the Paediatric Department so it would make it extremely difficult for Scrutiny to have done so. The Trust was strengthening the way in which it audited reports and triangulated information within the organisation and ensuring the golden thread was clear at all levels. There may be an opportunity for scrutiny around the Safe and Sound Framework which delivered the services
- Given recent events in Rotherham, it was very disappointing to read the CQC's comments about Safeguarding and CSE referrals. The Trust had made significant progress and had been working across Rotherham to support. The Safeguarding Team was working closely with the Paediatric Team to ensure professional curiosity and weekly meetings had been instigated to discuss cases and ensure a consistent approach
- Nursing Associates and internal staff development – the first national cohort of 1,000 Nurse Associates had qualified in January 2019 with the second cohort of 1,000 due to qualify in April. It was a 2 year programme run through different universities and colleges. 5 Nursing Associates had started in Rotherham 2 years ago and had just qualified. It was hoped to have a cohort of up to 30, recruited from the Trust's Health Care Assistants, who would commence their training in April and supported to go to university one day a week, one day placement on rotation and 3 days within the nursing workforce on a Ward or within a Department. Within the 2 years there would be roles identified for them within the organisation. Financial support had been received from Health Education England provided funding for backfill for when the Nursing Associates were not on the Ward. One limiting factor was the need for basic Maths and English; in-house training

was planned if people lacked this. A set of competencies had been agreed by the Nursing and Midwifery Council for Nursing Associates which would include dispensing of medicines

- Workforce Planning – work was taking place on where the Trust wanted to be, what the Trust needed from Registered Nurses and Senior Registered Nurses and Nursing Associates. It was planned to enhance other roles such as that of the Health Care Assistants and to create a bridging module to become a Registered Nurse. It was important to ensure adequate support and supervision for staff so this did limit the number of trainees at any one time. Having the right competencies, training and assessment and the same standards was important

The responses to Member questions provided some reassurance but the Commission agreed to have a future progress update, potentially in September, in line with the timescale for completion of the UECC actions. Louise and Angela were thanked for their presentation.

Resolved:- (1) That the information presented and responses to the questions from Select Commission Members be noted.

(2) That, when appropriate, feedback be provided on the Safe and Sound Action Plan.

(3) That, when received, the CQC's comments on the action plan be submitted to the Select Commission.

(4) That a presentation be made to the Select Commission on the workforce mix and Nursing Associates.

74. DEVELOPING GENERAL PRACTICE IN ROTHERHAM

Jacqui Tuffnell, Head of Commissioning, Rotherham CCG, gave the following powerpoint presentation:-

National and local demand continues to rise

Year	Rotherham GP activity
2015	1,093,753 appointments
2016	1,180,601 appointments
2017	1,549,034 appointments
2018	1,604,853 appointments

We have

- Now implemented 3 weekend hubs for extended access:-
Dinnington – Saturdays
Magna – Saturdays
Broom Lane – Saturday, Sunday and 6.30-8.00 p.m. Monday-Friday
- Since October 2018 we have been providing an extra 132 hours per week (from 22 hours per week) – over 430 additional appointments

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- Utilisation is improving on average now over 60% and some weeks as high as 80% but DNAs are increasing – there are posters in all practices advertising the access hubs, patient feedback is very positive from those attending – part of winter communications Saturdays were now at nearly 100% but there was spare capacity on Sundays yet at the UECC the busiest days were at the weekends
- Increased the extended hours offer to meet demand on Monday-Friday
- Implemented Nurse, Physio, Pharmacist and Healthcare Assistant appointment
- Enabled 111 and Rotherham Hospital to be able to book directly into the hubs after triage although some patients will still choose to wait
- Started to roll-out the Rotherham 'App' for patients that could ultimately lead to a telephone consultation or face-to-face appointment – it will also be feasible to book directly into the extended access hubs – full cover April 2019 on a phased basis
- Communications – practice notices, MJoG messaging, leafleting, winter campaign
- Implementing a capacity and demand tool to help GPs manage their workload and have the right resources
- Waverley GP service has been procured – The Gateway – delays in building commencement, however, backstop of October 2020
- Implementing teledermatology – rollout commencing April

GP Patient Survey 2018

Q No.	Question	RCCG Results % good	National Results % good
Q3 1	Overall how would you describe your experience of your GP Practice?	84%	84%
Q1	Generally how easy is it to get through to someone at your GP practice on the phone?	71%	70%
Q2	How helpful do you find the receptionist at your GP practice?	88%	90%
Q6	How easy is it to use your practice website to look for information or access services	78%	78%
Q1 6	Being offered a choice of appointment	60%	62%
Q1 7	Satisfaction with type of appointment	73%	74%
Q2 2	Overall experience of making an appointment	67%	69%
Q2 7	Health professional recognising Mental Health needs	89%	89%
Q3 8	Support to manage LTC	81%	79%
Q8	Satisfaction with available appointment times	64%	66%

It was hoped that the responses to several of these question would improve over time with the introduction of the Rotherham App and patients having more control. Further training with receptionists was planned.

The world is changing

- NHS Long Term Plan and new GP contract
- Primary care networks
30-50,000 population
Integrating community care
Funding additional roles
Extended access
Population health management
Joining up Urgent Care Services
Using digital technology
Service developments

Members were reminded of keys issues that had previous been covered in terms of managing demand from patients

- Alternative workforce models
- Retaining and attracting GPs
- Care navigators
- Patients still wanting to see a particular GP at a particular time and being prepared tow ait
- Patients saying they struggle to get through to get an appointment
- Management of the worried well and self-care, no need for a GP
- Work to do on patient education

More detail was provided on the Rotherham App and leaflets were shared with Members. People would be able to access their medical record, make changes to their medication, book appointments and use a symptom checker to help decide if they could self-care or needed an appointment. To get full functionality patients needed to register formally with their practice first for security reasons.

Discussion ensued with the following issues raised/clarified:-

- Mobile App – carers would be able to access the app via proxy by the person they cared for
- Computer/smart phone – it had been surprising that the more mature residents had embraced the new technology, however, it was acknowledged that everyone did not have access to a computer/smart phone. The surgery telephone lines that were currently busy would hopefully start to be less so when more utilised the digital technology to make their medical arrangements

Last year it was also agreed to link with the Council on training around the App following a recommendation from this Commission. The project manager had been discussing groups and downloading the app and they utilised it

- Offered the option for appointment at a hub – the doctor's receptionist was required to offer you an alternative venue

Members were encouraged to feed back any issues or concerns about an individual practice to Jacqui

- Medical Records – a patient had to go to their surgery and request access to their medical records. Once that authority had been given you would be able to access it via the app. It was a massive job for the practice as they had to go through every patient's individual medical record, however, they had to do it
- Wider Services - discussions were taking place with the Foundation Trust with regard to making hospital appointments and eventually hoped it would include the Single Point of Access and all services across Rotherham
- GP Patients Survey 2018 – it was felt that the satisfaction rate would increase due to the additional workforce that was going into practices giving the ability to divert patients to services and receive the care they required within a short time rather than having to wait for weeks. Responses could be broken down by practice. Working together in the new primary care networks would have a positive effect
- Logging in for appointments – encourage patients to use the log-in screens at their practice rather than queueing to inform reception of their arrival
- Hubs – why not include a holding message about access to a hub when people were waiting to speak to a doctor's receptionist? This idea was welcomed and would be followed up
- Appointment at a Hub – due to the contract set up by NHS England, appointments were not allowed to be used for urgent care so there had to be a booked appointment system rather than patients just turning up
- Waverley – the building of a surgery at Waverley was connected to the creation of the Waverley Centre, a shopping centre that was being created. There had been planning issues and issues with grants. Rotherham CCG was unable to hold any lease and had to appoint a GP provider, Gateway, who would sign the lease. The CCG's cut off date was now June, 2019 for it to be built by 2020

- Patient Participation Group view of ease of access – it was mixed. Some parts of the population thought it was okay to receive adequate care and access but by participating in a PPG made them realise they should be getting more and helped improve the access arrangements

Jacqui was thanked for her presentation.

Resolved:- That the report be noted.

75. HEALTHWATCH ROTHERHAM - ISSUES

No issues had been raised.

76. SOUTH YORKSHIRE, DERBYSHIRE, NOTTINGHAMSHIRE AND WAKEFIELD JOINT HEALTH OVERVIEW AND SCRUTINY COMMITTEE UPDATE

It was reported that the next meeting would be held on 19th March, 2019. The agenda papers would be shared with the Select Commission once published with the ability to raise any issues/questions to be addressed at the meeting.

77. HEALTH AND WELLBEING BOARD

Consideration was to given to the minutes of the Health and Wellbeing Board held on 30th January, 2019.

Minute No. 41 (Developing a Rotherham Healthy Weight for All Plan):-

“Obesity levels are much higher in our most deprived communities: the three most deprived wards (Rotherham Ease, Rotherham West and Valley) have some of the highest rates for obese children at Reception and Year 6 - Councillor Keenan asked what input had been sought or would be sought from local Councillors embedded in those communities to look at best practice and what resources were they giving to those Councillors to challenge and work? She knew there were individual pockets of good work going on with Rotherham United, healthy eating cafes and things like that and she would like to know where that was going. As one of those Councillors she was concerned it had been put out there without anyone speaking to us?

“Explore opportunities in the work place to promote physical activity such as stair challenges, walking/running groups, moving more often during the working day (linked to Healthy Workplace Award)” - Councillor Keenan asked what opportunities have been put in place for RMBC staff? It was all well and good having that but if we do not have opportunities at Riverside and indeed here (i.e. Town Hall) and including for the Councillors to take on board this exercise plan?

“Schools Meals Service provided approximately 1500 school meals and had a Food for Life Bronze award. Work in this area would hit a cohort from the age of 4 years upwards.” – Councillor Jarvis stated some children did not pay and some did pay what amounted to quite a lot in a week. This service costs schools money as they subsidised the price with people charged less than the full price, which meant the money came out of their teaching and learning budget. So we cannot be complacent and need to see what we can do about the price of school meals as in deprived areas just because children do not qualify for free school meals does not mean it has been solved.

Minute No. 44 (Rotherham Suicide Prevention and Self-Harm Action Plan):-

“After a small decrease ... Rotherham was significantly higher than England and ranked as the second highest compared to 15 CIPFA nearest neighbour LAs” - Councillor Ellis asked would it be timely to have this back to the Commission as this was an issue the Commission had been interested in over time?

Janet Spurling, Scrutiny Adviser, confirmed that it was hoped to arrange a multi-agency workshop session for the Select Commission in April with all partners.

Resolved:- (1) That the minutes of the Health and Wellbeing Board held on 30th January, 2019, be noted.

(2) That the issues raised above be referred to the Cabinet Member for Adult Social Care and Health and the relevant officers for responses.

78. DATE AND TIME OF NEXT MEETING

Resolved:- That a further meeting be held on Thursday, 11th April, 2019, commencing at 10.00 a.m.

**HEALTH SELECT COMMISSION
11th April, 2019**

Present:- Councillor Evans (in the Chair); Councillors Cooksey, R. Elliott, Ellis, Jarvis, Keenan, Rushforth, Short, Williams and Wilson.

Tony Clabby, Healthwatch Rotherham, was in attendance.

Councillor Roche, Cabinet Member for Adult Social Care and Health, was also in attendance at the invitation of the Chair.

Apologies for absence were received from Councillors Andrews, Bird and Taylor.

The webcast of the Council Meeting can be viewed at:-
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79. DECLARATIONS OF INTEREST

There were no Declarations of Interest made at the meeting.

80. QUESTIONS FROM MEMBERS OF THE PUBLIC AND THE PRESS

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

81. MINUTES OF MEETING HELD ON 28TH FEBRUARY, 2019

Consideration was given to the minutes of the previous meeting of the Health Select Commission held on 28th February, 2019.

Resolved:- That the minutes of the previous meeting held on 28th February, 2019, be approved as a correct record.

Arising from Minute No. 72 (Integrated Place Plan), it was noted that a response was awaited on one query which would be circulated when received.

Arising from Minute No. 73 (CQC Inspection of The Rotherham Hospital Trust) (TRFT), it was noted that the Safe and Sound framework was to be discussed at the Quality Sub-Group on 12th April.

With regard to feedback on the delivery of the action plan, it had been agreed that a report would be submitted to the September meeting of the Select Commission after all the actions relating to the UECC had been completed. However, due to the Commission meeting on 5th September, the Chair proposed that it be submitted to the October meeting.

The CQC had fully accepted the action plan developed by TRFT in response to the re-inspection with no amendments. This was quite unusual and, therefore, provided some reassurance that the Trust had

captured all the actions required to make improvements following the findings.

The presentation on the workforce mix and Nursing Associates would be submitted to the October meeting.

Arising from Minute No. 77 (Health and Wellbeing Board), it was noted that Councillor Roche had circulated responses to Select Commission Member questions.

82. COMMUNICATIONS

Information Pack

Contained within the information pack were the notes from the ASCOF Sub-Group, quarterly briefing with health partners together with the slides from the recent NHS Long Term Plan Members Seminar.

Quality Account Sub-Group Meetings

TRFT	12 th April
YAS	16 th April
RDaSH	17 th April

Improving Lives Select Commission

Councillor Jarvis provided details of the issues discussed at the recent Improving Lives Select Commission meeting which included:-

- Feedback from Barnardos regarding the multi-agency project that they had been working on
- Early Help Strategy Phases 2 and 3
- Ofsted Annual Conversation
- Looked After Children/Sufficiency Strategy
- Feedback on the Peer Review of Looked After Children Services

83. INTERMEDIATE CARE AND RE-ABLEMENT PROJECT

Councillor Roche, Cabinet Member, Adult Social Care and Health, stated that Intermediate Care and Re-ablement were a key, essential feature of the vision and way forward as they related to independence, choice and living at home. Re-ablement would be the prime vehicle for moving forward with the approach to localities as it was felt to be the most effective way for services and people. He introduced Anne Marie Lubanski, Strategic Director Adult Care, Housing and Public Health, and Chris Holt, Deputy Chief Executive TRFT, who gave the following powerpoint presentation on the development of the Intermediate Care and Reablement Outline Business Case:-

What do we mean by Intermediate Care and Reablement – Health and Social Care Services Providing:-

- Fast Response
Where there was an urgent increase in Health or Social Care needs which could be safely supported at home
Typically 48 hours but may be up to 7 days
- Home-based Intermediate Care
Including therapies, nursing, equipment and Social Care to support rehabilitation and recovery
- Bed-based Intermediate Care
Where needs were greater than could be delivered at home but consultant-led care was not needed
- Reablement
To help with learning/re-learning skills for every day living, delivered at home

Why Change?

- People have told us
They would like to be at home wherever possible
They would like to regain their independence
Current services were disjointed and could be hard to navigate
- Care Quality
Evidence shows people did better at home
We know that a large number of people received care in a community bed when they could have gone home with the right support
Rotherham had significantly more community beds than other similar areas
Current services were focussed on older people and their physical needs
Through changing the way we worked, more people were going home and our community beds were not fully utilised

Current Services

- Community-based Services
Integrated Rapid Response (TRFT)
Community Locality Therapy – urgent (TRFT)
Independent and Active at Home Team (TRFT and RMBC)
Reablement (RMBC)
- Bed-based Services
Intermediate care at Davies Court and Lordy Hardy Court (RMBC and TRFT)
Oakwood Community Unit (TRFT)
Waterside Grange (Independent Sector)
- Services currently provided by a range of teams and bed-based sites
- In addition, several teams of Social Workers and therapists working into the bed-based provision
- People moved through multiple services rather than an integrated pathway
- Significant duplication and some capacity issues in a number of services

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Project Aim

- Referrals
- Co-ordination
- Integrated Intermediate Care and Reablement Service
 - Pathway 1: Integrated Urgent Response
 - Pathway 2: Integrated Home-based Rehab/Reablement
 - Pathway 3: Integrated Bed-based Rehab/Reablement
- To simplify current provision to provide an integrated, multi-disciplinary approach to support individual needs across Health and Social Care
- To re-align resource to increase support at home, reducing reliance on bed-based care

Future Services

Community-based Pathways	Bed-based Pathway
1. Urgent response (integrated team)	3. Community bed-base – rehabilitation and reablement without nursing (integrated team)
2. Home-based reablement and rehabilitation (integrated team)	3. Community bed-base rehabilitation and reablement with nursing (integrated team)

- 3 core integrated pathways
- Services aligned to work as a single team to provide the 3 pathways
- Increase in community capacity to meet the demand to support people at home (urgent response or rehabilitation/reablement)
- Reduction in community bed-base (phased and double-running for a period with increased community capacity)
- Integrating processes for triage and co-ordination to ensure people get the right support
- Reduction in duplication

Benefits

Patients and Carers	Commissioners (CCG and RMBC)	RMBC (Service delivery)	TRFT
Improved experience of services Telling story once Reduced duplication and hand-offs Improved outcomes More people able to be supported at home	Supports Rotherham Plan for 'Home First' and integration of Service delivery Reduces over reliance on bed base where Rotherham was an outlier More cost effective model	Supports delivery of the Council's target operating model and future sustainability Improving flow through the Social Care system	Supports the Trust's wider plans for bed configuration/estate moves Improving flow through the Hospital and Community Services

Timeline

- January, 2019 – Scoping
- February, 2019 – Develop proposal/engagement
- March, 2019 – Develop and draft proposal
- April/May, 2019 – Finalise and approvals
- May/June, 2019 – Approvals
- June/July, 2019 – Engagement, detailed proposals and implementation

Discussion ensued with the following issues raised/clarified:-

- Intermediate Care and Reablement was one of the priorities of the Urgent and Community Care Transformation Group, which was jointly chaired by Chris and Anne Marie giving a fully joined up Health and Social Care oversight
- It was envisaged that as the Service was developed it would be for people 18+ years of age
- More people chose to go home and the community beds were not fully utilised
- The services that existed were good; it was not because they were bad that they were being changed. There was a lot of skill and capacity in the system but the aim was to try to create more capacity and by getting the right pathways; there was confidence that it would deliver the right thing for individuals. The co-ordinating and alignment of the teams was critical and the right ethos. There were good

services but slightly disjointed in how they operated across Health and Social Care.

- In terms of GPs within the model, the Urgent Response Team would have a direct line and communication link to GPs. The Intermediate Care bed base model would be supported by GPs as it was today but, when aligned, there would be GP input and medical leadership from GPs. There would be greater clarity on step up and down with GPs having more options to avoid sending people to the Emergency Department. Through the Transformation Group there was strong GP representation on the model who were supportive of the business case and approach being taken
- Increased Community capacity would consist of additional Reablement Officers and changing the way people worked, with a focus on therapy rather than rotas and optimising digital. Additional staff would be required whilst the pathways matured and the first year would be very much one of proof of concept.
- The business case was still in draft form; until it was signed off responses could not be given to the detail of the project and the presentation was on the direction of travel.
- Re-admission rates were tracked and Rotherham was in the upper quartile of getting patients back into the right location. The Integrated Discharge Team, consisting of Health and Social Care teams and therapists, were the gate keepers of anyone leaving hospital as to where they would go. The development of that Team was one of the enablers to seeing more people getting back home. The Team had been shortlisted for a national award for the work they had carried out
- It was not just a hospital pathway and about someone leaving hospital but about people having a change in their life at home and reablement and intermediate care may be appropriate for them.
- In terms of patient/carer voice in decisions about care, staff would ascertain people's outcomes of what they wanted to achieve by the intervention. A lot of the principles that were built into the new proposal were based on the recovery from mental health and the principles tied into that; there was strong evidence in terms of people believing that they could recover
- Reablement linked in with use of technology/equipment rather than providing care and it was a question of developing confidence and changing the mindset and expectation of people. It was a journey for people, including for health and social care staff.

It was noted that Anne Marie and Chris were meeting with the Rotherham Clinical Commissioning Group (RCCG) later that day to consider the next draft of the business case. It was hoped by the end of May 2019 it would be signed off.

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

(2) That the principles of the final business case be submitted to the June meeting of the Select Commission.

84. MY FRONT DOOR - UPDATE

Councillor Roche, Cabinet Member for Adult Social Care and Health, reported that the project was now on track to meet the timetable including assessments. This was despite a lack of capacity at times due to difficulties of filling some vacancies and needing to move staff into other work areas. The key was the impact on people in real life and the case studies were now showing some examples. It was hoped to hold an All Member Seminar on the lessons learnt so far and what the next steps were.

He introduced Anne Marie Lubanski, Strategic Director Adult Care, Housing and Public Health, and Jenny Anderton, Transformation Lead, who gave the following powerpoint presentation on My Front Door:-

My Front Door

- Was the vehicle for communication and engagement with all our key stakeholders
- Built on the Learning Disability Strategy and Adult Social Care Vision ensuring the information was accessible and relatable to individual, carers and families
- Supported potential providers to “buy into” our Learning Disability Transformation Programme by pitching their services in real-life ways
- Was our personalised approach to our Learning Disability Transformation Programme moving hearts and minds towards a positive future
- Ensured person-centred planning and enabled our practitioners to engage with people in a new and different way
- Created a narrative that changed all our thinking from a focus on decommissioning services to a focus on the real alternatives and opportunities available for individuals
- Would have engagement activities that were co-produced with individuals and would enable further consultation on new opportunities

Workstreams

- Assessments
- Commissioned Solutions
- Carers Support

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- Accommodation
- Community Catalyst
- Shared Lives
- Transforming Care
- Communications and Engagement
- Health

The MFD Team

- The initial staffing agreement for My Front Door Team was 10 full-time assessing staff plus 2 Workers from Oaks
- 7.8 FTE from 1st April, 2019
- Recruitment was underway with interviews planned
- Team average caseload was 17.52

Employment

- Employment Co-ordinators were facilitating a number of people to access different types of employment/job-based support
 - 10 people were accessing voluntary opportunities (organisations included St. Vincent's, Salvation Army, RSPB, Barnardo's)
 - 19 people were accessing work experience (organisation included RMBC, BA components, Costa, Pound Land, Riverside Café, Mears, Life Wise)
 - 23 people were accessing paid work (organisation/employers included dog walking, Premier Inn, Asda, RMBC, Partech, McDonalds, Broad Horizons)
 - 6 people were paid by BA components
- A piece of work was taking place to validate figures and develop a Project Search offer with the schools and colleges
- There had been a successful bid into European Social Fund which would help us to expand the employment offer

Discussion ensued with the following issues raised/clarified:-

- Voluntary Action Rotherham (VAR) had been really helpful working with the enterprises with regard to developing business models and working with them in partnership
- The work was ongoing about changing the ways of working
- The contract had not changed with VAR as there was no need. What they did within their infrastructure was appropriate in terms of the work of My Front Door
- The project had grown in confidence and more providers were beginning to contact the authority. People were now beginning to see from the learning disability and autism perspective that Rotherham was in a different place. It was a positive evolving journey but would take time

- The successful European Social Fund joint bid was part of the Employment Pathway to get more people ready for work and into jobs. The funding was across Adults and Children so would involve working with those in transition. A meeting was to be held with Sheffield Council in the near future to work through the detail of the funding
- With regard to how many people were waiting for an assessment, the Transformation Lead had a plan to work through the Oaks and that plan was on schedule; everyone was allocated in terms of the assessment pathway within Oaks. Part of the sophistication of the assessments was about confidence and in terms of when the work had started (95 people attending Oaks) now stood at 28
- Mental capacity was a legal requirement of the local authority and had to ensure that the assessment was done correctly. Everyone had been allocated an assessment at Oaks but would be at different stages of their journey due to their own personal complexities. Every individual would have a different pathway and timescale
- Shared Lives was a service that would grow. A number of people had come forward that wanted to be Shared Lives carers and a number of people that wanted to access the Shared Lives Service. Work sometimes took a while to get a suitable match
- There had been no complaints from carers about the work that had taken place and work was taking place with them as part of the Person Centred Plan. Efforts were being made to make sure carers were offered a Carers Assessment
- There was no target for caseload numbers for the MFD Team as the client audience was very complex and some may need a longer period of time than others. The ambition was to meet the requirements as set out in the Cabinet report and was on track to do so. The Social Work Team would increase, however, they were meeting all their targets at the moment
- More and more case studies were emerging. The stories would grow but there were some teething problems. An evaluation would be carried out of the first stage to look at the things that could have been done better and would be submitted to the Select Commission
- Providers were interested in what was happening in Rotherham but because some of the work took time and confidence to build up capacity in the provider, the service was having to work closely with providers because they would not have a whole raft of people going to their service at the beginning. Part of the learning was in terms of how the Services worked with the providers to be sustainable whilst the confidence grew so the transformation could continue

- Community catalysts were a provider who had been commissioned by the Service to conduct a piece of work looking at Rotherham and those that wanted to set up businesses and work with the Service, to ensure they had the right ethos and values and to support them to make that happen. Members were also asked to forward information on anything happening in their wards that might link in with MFD.
- Shared Lives was part of the assessment process to look at people's outcomes and what they wanted to achieve. If, through the support plan Shared Lives was one of the options desired, a referral would be made. It was offered to everyone that wanted it
- In terms of overall quality assurance, as part of the review, some service users with learning disabilities would be asked to quality assure some of the enterprises/new services to make sure they were correct. Also the Contract Compliance Team would pick up on any contracting issues
- It would be difficult to have one quality assurance format that would suit every provider e.g. a day service did not fit within the regulation of CQC. Part of the assessment process was also about checking Safeguarding and the associated risks and that was where a lot of the micro assurance would come from. In terms of wider commissioned providers, the Contract Team would be able to provide information on their contract compliance visits
- It was noted that additional information showing some of the learning from a wider range of case studies and details on the timescales to undertake this transformation work would be useful to inform Members and to help in managing expectations.

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

(2) That an All Member seminar be arranged on Shared Lives and a progress report submitted to the Health Select Commission.

85. IMPLEMENTATION OF THE HEALTH AND WELLBEING STRATEGY 2018-25 - UPDATE

Councillor Roche, Cabinet Member for Adult Social Care and Health, reported that the Health and Wellbeing Strategy was a living document and was a Rotherham success story.

The Rotherham Health and Wellbeing Board was recognised by the Local Government Association as one of the 10 best Boards in the country and been part of a case study last year. Rotherham had been asked to take part again this year. A presentation had been made recently at a conference in London by Inside Government on Rotherham's journey.

Rotherham was one of the few that had taken on board including the Place Plan under the remit of the Health and Wellbeing Board which allowed accountability. It had also added loneliness to its Aims in 2018 and recently added Addictive Gambling to Aim 4.

The Strategy and Place Plan would need to be refreshed to take account of the NHS 10 Year Plan once the detail was known.

Terri Roche, Director of Public Health, and Becky Woolley, Policy and Partnerships Officer, gave the following powerpoint presentation:-

Health and Wellbeing Strategy

- Aim 1
All children get the best start in life and go on to achieve their full potential
Sponsors:- Jon Stonehouse (RMBC) and Dr. Jason Page (RCCG)
- Aim 2
All Rotherham people enjoy the best possible mental health and wellbeing and have a good quality of live
Sponsor: Kathryn Singh (RDaSH)
- Aim 3
All Rotherham people live well or longer
Sponsors: Sharon Kemp (RMBC) and Louise Barnett (TRFT)
- Aim 4
All Rotherham people live in healthy, safe and resilient communities
Sponsors: Steve Chapman (SYP) and Paul Woodcock (RMBC)

Aim 1: All children get the best start in life

Key progress has included:-

- New weight management service for children and young people currently being finalised which will be delivered by the 0-19 Service and aligned closely with the National Child Measurement Programme (NCMP) (links also to Healthy Weight for All Plan in Aim 3)
- Implementation of Phase Two and Phase Three of the Early Help Strategy
- The development of a Smoking in Pregnancy Pathway
- Enhancing the use of evidence-based programmes to reduce health and wellbeing inequalities such as sleep programmes, introducing solid foods, Talking Tables, Baby Box University and Bookstart
- Ensuring the effective implementation of the 'Rotherham Family Approach' (Signs of Safety, Restorative Approaches and Social pedagogy) across the wider Children's workforce
- The development of a Draft SEND Sufficiency Strategy
- Supporting young people to be ready for the world of work through a number of programmes – achieved the combined 2018/19 NEET/Not Known Target: 5.8%

Aim 2: All Rotherham people enjoy the best possible mental health and wellbeing and have a good quality of life

Key progress has included:

- The rollout of the Five Ways to Wellbeing campaign across the partnership
- Promotion of workplace wellbeing, including through the launch of the South Yorkshire Workplace Wellbeing Award
- The CORE 24 (Mental Health and Liaison Service) went live from January 2019 with positive joint working in place with other teams including the Alcohol Liaison Team
- Clinically-led review of Rotherham Dementia Care Pathway commenced with consideration of new NICE guidelines – Rotherham has one of the highest rates of dementia diagnosis in Yorkshire and the Humber
- A draft Autism Strategy has been developed. This has been co-produced with people (including young people) with autism, professionals, parents, families, carers and local businesses

Aim 3: All Rotherham people live well or longer

Key progress has included:

- Making Every Contact Count training on smoking and alcohol delivered to over 300 frontline staff across the partnership
- Embedding the QUIT programme for smoking across Rotherham and South Yorkshire
- Rotherham's award winning approach to social prescribing was featured within the national NHS Prevention Vision
- Mapping is underway to develop a Rotherham-wide 'Healthy Weight for All' plan using a whole-system approach to reducing the rise in excess weight and obesity – this will include working towards adopting the Local Authority Declaration on Healthy Weight
- The assurance process for health checks and screenings for cardiovascular risks is currently being reviewed
- Rotherham Activity Partnership established, involving a range of partners, to plan and promote physical activity and sport across the Borough, with a particular focus on children and young people and the least active

Aim 4: All Rotherham people live in healthy, safe and resilient communities

Key progress has included:

- Worked closely with Safer Rotherham Partnership to influence the priority-setting process and to ensure that the impact on health and wellbeing was considered
- SRP funded mental health triage car operational over Christmas period supporting the diversion of punitive action
- Programmes underway with a focus on healthy, sustainable employment for local people
- Links established with the Thriving Neighbourhoods programme to help build resilience in communities

- Piloting the Housing First model in partnership with South Yorkshire Housing Association
- A new Equal and Healthy Communities Supplementary Planning Document is in development
- The pilot of the MECC loneliness training has commenced in the south of the Borough

What are we worried about

- Life expectancy for both men and women in Rotherham was lower than the England average
- Inequalities in health outcomes between our most and least deprived neighbourhoods were increasing
- Specific concerns that have been raised by partners at the Health and Wellbeing Board included:-
Obesity including childhood obesity
Chaotic lifestyles
The impact of austerity

What needs to happen

- Explore opportunities within local and national policy developments to address health inequalities
- Ensure that across partners plans have a focus on upstream prevention and early intervention
- Specific work was being undertaken to address concerns raised:-
Development of a 'Healthy Weight for all Plan' with a particular focus on children and young people
Exploring opportunities to support those with chaotic lifestyles in a more co-ordinated way

Performance Framework

- The Health and Wellbeing Board has approved a performance framework to measure the impact of the Health and Wellbeing Strategy
- This framework seeks to provide a high level and outcomes-focussed overview of performance complimented by other sources such as JSNA and quarterly performance reports on the Place Plan
- This does not seek to capture all of the indicators that the Strategy sought to impact upon rather partners have agreed a number of priority indicators that require a partnership focus

Discussion ensued with the following issues raised/clarified;-

- Concern regarding the phrase “punitive action” when referring to the SRP mental health triage car and agreement that the wording would be changed
- Rotherham’s social prescribing was award winning. It was mostly funded by RCCG and the contract was with VAR. As far as it was understood at the moment, but further detail was awaited in the NHS

10 Year Plan, GPs would be funded up to 100% for signposting through link workers. That was positive because it meant there was money in the system but also a negative because there was already a very good model in Rotherham. There was the threat that there was no money in the system within the Long Term Plan to support the voluntary and community sector

- Social prescribing was being extended to include mental health social prescribing
- It was understood that the Autism Strategy was completed and just waiting on the action plan
- Planning decisions were crosscutting and if they had an impact on people's health and wellbeing it would impact on the other indicators. An indicator would be developed following publication of the Equal and Healthy Communities Supplementary Planning Guidance
- The wording of Aim 4 "number of repeat victims of anti-social behaviour" was aligned with the Safer Rotherham Partnership performance framework. The reason why anti-social behaviour in particular had been stated was because public perception of anti-social behaviour in Rotherham was currently very high but mismatched with recorded incidents of anti-social behaviour. Perception was having an impact on how people felt in their communities
- Having said that there was a mismatch between reality and the numbers, it was known that anti-social behaviour figures were probably different to those being recorded because of the problem with the 101 telephone line and the number of abandoned calls (in excess of 30% in November 2018). The Aim spoke about the perception and numbers and yet the indicator was the number of repeat victims, therefore, based all on the numbers when it was known that there was a mismatch. Was that really the right indicator or should it about whether people felt safe?
- Aim 4 had been developed over the last few months with senior planning officers invited to the Board when planning was discussed. A workshop was to be held shortly on Aim 4. There were national guidelines as to the percentage of green space per new planning development. The Board needed to ask Planning to make sure that always happened
- The Board was a broad umbrella that partners reported to and it was not necessarily involved in the operational difficulties. The performance framework indicators were the priority indicators for partners but did not prevent exploration of other indicators

- Addictive gaming and the effect on children's health – was that something the Board could look at?
- Rotherham Public Health was one of the first to access the free training offered on gambling. The Long Term Plan would provide additional funding to provide appropriate services to support people with addictions
- Reducing the number of children who experienced neglect and abuse was an attempt to catch people/families much earlier and offer them Early Help support; it was not avoiding making children the subject of a Child Protection Plan. It was about supporting families much earlier and recognising neglect
- Currently the training on gambling was aimed at statutory front line staff and not those that worked in a shop e.g. bookmakers. Consideration would be given as to whether an invitation could be extended to such operatives
- Meetings were taking place with carers but, due to the Judicial Review, caution had to be taken as to what was and was not said. The Strategy was being renewed and refreshed and when complete could be submitted to the Commission

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

(2) That the Select Commission participate in an annual performance session.

(3) That when completed the Autism Strategy be submitted to the Select Commission.

(4) That the Carers strategy be submitted to the Select Commission.

86. OUTCOMES FROM JOINT SCRUTINY WORKSHOP - TRANSITION FROM CHILDREN'S TO ADULT SERVICES

Councillor Evans, Chair, presented the outcomes of a workshop held by members of the Health Select Commission and the Improving Lives Select Commission on 19th March, 2019.

The purpose of the workshop was to seek assurance that young people and their families/carers would have a positive transition from Children's to Adult Services, through clear pathways and a strength based approach that sought to maximise independence and inclusion.

Evidence comprised of briefing papers, case studies, a presentation and the refreshed draft Education, Health and Care Plan.

Membership of the sub-group included Councillors Evans (Chair), Cusworth, Elliot, Jarvis, Keenan and Short.

The findings were set out in the report and fell within the following headings:-

- Understanding the cohort – numbers and main presenting needs of the children and young people
- Strategic alignment
- Voice and influence
- Shared approach to assessment and strength-based practice
- Demonstrating outcomes – short and long term

It was noted that the follow-up actions for scrutiny outlined in Section 10 would be considered in the work programme for the new municipal year.

Resolved:- That the report be noted and the following recommendations be forwarded for consideration:-

(1) That the PfA (Preparing for Adulthood) Board develop a range of outcome measures during 2019-20 to supplement output measures such as the number of EHCPs completed in time in order to:

- Understand the impact of the new pathway
- Capture achievement of individual aspirations in EHCPs and in the longer term

(2) That the PfA Board develop measures of satisfaction during 2019-20 for young people and families/carers with regard to the transition/PfA process and new pathways.

(3) That quality assurance processes are in place to monitor the consistency and quality of EHCPs when the new template is introduced.

(4) That Adult Social Care continue to develop its Information, Advice and Guidance offer in 2019-20 for all customer cohorts including young people transitioning from Children and Young People's Services and for people aged 25 who may face a second phase of transition.

(5) That training and workforce development continues to embed taking a strengths-based approach fully with staff across Children and Young People's Services and Adult Care, Housing and Public Health, and with health partners.

(6) That representatives from the PfA Board, including Rotherham Parent Carers Forum, provide Scrutiny with a further progress update during 2019-20.

87. HEALTH SELECT COMMISSION WORK PROGRAMME

Janet Spurling, Scrutiny Officer, gave the following powerpoint presentation on the suggested 2019-20 Work Programme for the Select Commission.

Recap from 2018-19 of longer term issues

- Rotherham Integrated Health and Social Care Place Plan
- Adult Social Care (development/performance)
- Mental Health (especially child and adolescent)
- Quality Improvement – NHS Trusts
- Joint Health Scrutiny – NHS Transformation

Long term issues for 2019-20

- Adult Social Care (development/performance)
 - ASCOF measures
 - Enablement
 - Carers' Strategy implementation
 - Information, Advice and Guidance
 - Delegated from OSMB for ongoing scrutiny
 - Learning Disability
 - Intermediate Care
 - "right sizing" care packages
 - Home care
 - Target Operating Model
- Rotherham Integrated Care Place Plan
 - Ongoing monitoring
 - Performance reports (light touch)
 - Integrated locality implementation?
 - Maternity?
- Mental Health and Wellbeing
 - Trailblazer project
 - Child and Adolescent Mental Health Services
 - Social and Emotional Mental Health Strategy?
- Joint Scrutiny – NHS Transformation
 - Implementation of service changes
 - Children's Surgery and Anaesthesia
 - Hyper Acute Stroke
 - Hospital Services Programme – 5 specialties
 - South Yorkshire and Bassetlaw response to NHS long-term plan

Carried forward from 2018-19

- Autism Strategy
- Suicide Prevention and Self-Harm Action Plan
- The Rotherham Foundation Trust – CQC inspection action plan progress
- Joint Strategic Needs Assessment refresh update

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- Quality Reports NHS providers (annual x 3)
- Rotherham Community Health Centre

Coming up in June-July

- Sexual Health Strategy
- Director of Public Health Annual Report
- Drug and Alcohol Service Update
- Response to Care Homes Workshop
- Review of Respiratory Services
- Primary Care – new guidance/GP contract

In light of the discussion earlier in the agenda, it was suggested that Gaming/Gambling be also included in the work programme.

Resolved:- (1) That the proposed 2019/20 Work Programme be noted.

(2) That any suggested items for inclusion be forwarded to Janet Spurling, Scrutiny Officer.

88. HEALTHWATCH ROTHERHAM

Tony Clabby, Healthwatch Rotherham, reported on the following:-

Maternity Services

Healthwatch Rotherham had recently picked up a cluster of 8 complaints around Maternity and Gynaecology Services in Rotherham. All were very different complaints and all were proceeding through the Complaints Procedure. Feedback would be submitted in due course.

It was queried whether Maternity and Better Births could be given higher priority from that presently stated on the draft work programme given the complaints received. It was noted that liaison was taking place with the CCG on the draft maternity plan.

NHS 10 Year Plan

Healthwatch Rotherham had been requested to carry out engagement work on this matter which included the sharing of an online survey with Rotherham residents. The link would be sent to Janet Spurling, Scrutiny Officer, to forward to members.

Autism Strategy

Tony was a member of the Autism Partnership Board. The Strategy was ready but was missing the “how and who” with work was taking place on this aspect.

Access to GP Surgeries

Given the discussion at the previous meeting, it was queried whether access had been raised as a concern with Healthwatch.

Tony agreed to provide the data that Healthwatch had on this matter.

89. SOUTH YORKSHIRE, DERBYSHIRE, NOTTINGHAMSHIRE AND WAKEFIELD JOINT HEALTH OVERVIEW AND SCRUTINY COMMITTEE UPDATE

Janet Spurling, Scrutiny Officer, reported on the meeting held on 19th March where the following updates had been provided:-

- South Yorkshire and Bassetlaw ICS governance arrangements
- Transformation and progress on hosted network development under the Hospital Services Programme
- NHS Long Term Plan and developing the South Yorkshire and Bassetlaw response

Members had requested:-

- Further work on myth busting around the ICS and how it worked so that it was clearer to the public
- More detail on the communication and engagement plan for the South Yorkshire and Bassetlaw NHS Long Term Plan and then details of the engagement undertaken and emergent themes
- A future item on resources and capacity in the voluntary and community to deliver work on prevention.

90. HEALTH AND WELLBEING BOARD

Consideration was given to the minutes of the Health and Wellbeing Board held on 20th March, 2019.

Resolved:- That the minutes of the Health and Wellbeing Board held on 20th March, 2019, be noted.

91. DATE AND TIME OF NEXT MEETING

Resolved:- That meetings of the Health Select Commission be held during 2019/20 as follows:-

Thursday, 13th June, 2019
 11th July
 5th September
 17th October
 28th November
 9th January, 2020
 20th February
 26th March

all commencing at 10.00 a.m.

IMPROVING LIVES SELECT COMMISSION
5th March, 2019

Present:- Councillor Cusworth (in the Chair); Councillors Beaumont, Clark, Elliot, Ireland, Jarvis, Marles, Marriott, Price and Senior.

Also in attendance was Councillor Watson, Deputy Leader.

Apologies for absence were received from Councillors Brookes, Khan, Pitchley and Short.

The webcast of the Council Meeting can be viewed at:-
<https://rotherham.public-i.tv/core/portal/home>

54. DECLARATIONS OF INTEREST

There were no Declarations of Interest to report.

55. QUESTIONS FROM MEMBERS OF THE PUBLIC AND THE PRESS

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

56. COMMUNICATIONS

The Select Commission noted that feedback from the Performance Sub-Group, Health Select Commission and Corporate Parenting Panel would be circulated by email.

An update from the Review Group had also been fed into the LADO process.

57. MINUTES OF THE PREVIOUS MEETING

Consideration was given to the minutes of the previous meeting of the Improving Lives Select Commission held on 15th January, 2019.

It was noted that an action arising from minutes previously agreed had been completed with a visit to the University Campus by Elected Members, who were very impressed with the facilities and what courses were on offer.

Resolved;- That the minutes of the previous meeting of the Improving Lives Select Commission held on 15th January, 2019 be approved.

58. BARNARDO'S REACHOUT SERVICE UPDATE AND BARNARDO'S REACHOUT FINAL EVALUATION REPORT

Further to Minute No. 5 of the Improving Lives Select Commission held on 5th June, 2018, consideration was given to the report presented by the Deputy Leader and Acting Strategic Commissioning Manager which detailed how the Barnardo's ReachOut project was established in Rotherham under a three year partnership funding agreement between Barnardo's, the KPMG Foundation, Department for Education, Ministry for Housing, Communities and Local Government and Rotherham Metropolitan Borough Council.

The project, an innovative outreach service, strived to support and protect children and young people in Rotherham who were at risk of child sexual exploitation. The key areas of work for the project were:-

- Preventative educations in schools and other settings, primarily delivering the healthy relationships education package 'Real Love Rocks';
- Targeted outreach to young people at risk;
- Direct Support to individual young people and their parents.

The ReachOut Service began delivery in January, 2016 and, therefore, had been operational for just over three years.

The project had been the subject of a full independent evaluation which was undertaken by the University of Bedfordshire and DMSS Research to evaluate the impact of the project and provide ongoing learning and feedback. This report presented an update of the key areas of service delivery, a summary of the full independent evaluation report, and the responses to the recommendations made at the Improving lives Select Commission on the 5th June, 2018.

Following on from an initial update on the ReachOut Project last year further information was provided on the engagement with primary schools, the outcome of discussions with young inspectors about improving the project's profile and the discussion with the Assistant Director, Education and Skills, including information circulated to schools.

The outreach work had evolved and reached over 10,000 people in Rotherham. Barnardo's had also attended community events, targeted help for those considered at risk and had reached a wide audience about the risks of child sexual exploitation as well as working closely with the training of taxi drivers, the Fire Service and Roma community.

Whilst there was still more work to be done in terms of education in schools, every secondary school had been visited over the three year period and engagement had commenced with up to 50% of primary schools as well.

Further action had been recommended on improving engagement, liaising with young inspectors around any ideas or approaches that would improve engagement through the Real Love Rocks offer and promotion of training on social media. All suggestions would be considered as part of improving engagement with schools.

RMBC, CYPS Commissioning, in Partnership with Barnardo's were successful in their bid for £1m funding from the Home Office's Trusted Relationship Fund to widen its remit to include young people at the risk of Child Criminal Exploitation or "County Lines".

Barnardo's were building strong links with the Youth Offending Team and with providers who have a proven track record in delivering services for this cohort of young people. In addition were further developing their assessment indicators to include the risks and vulnerabilities attributed to this exploitation.

A discussion and question and answer session ensued and the following issues were raised and clarified:-

- ❖ Had referrals increased following the work undertaken with different partners and agencies, including the training with the Fire Service and taxi drivers?

Most of referrals came from the normal routes through the MASH as a result of concerns through social care, early help and schools. There had been no referrals made by the public or taxi drivers.

- ❖ How was information shared, including low-level historical intelligence, and used to support Barnardo's areas of work?

The ReachOut Team Manager attended Police meetings and within Barnardo's there were regular meetings and discussions on a daily basis. The service worked closely with early help and social care and fed into weekly meetings.

As well as raising awareness for vulnerable children on "county lines" was information shared about how to raise concerns regarding adults who may pose a risk.

Barnardo's shared awareness about people who may pose a risk and how to recognise the signs and approaches of grooming.

Was work targeted across the borough to reduce the risk of grooming and involvement in gangs? Whilst the report was very positive, much of it was based on work in Eastwood and Ferham. ; was there a reason why these two areas were highlighted?

Staff had taken the bus to other parks in Rotherham, and did attend other areas on a regular basis, however had not seen much activity.

Reference was made to Eastwood and Ferham particularly as a result of responses to intelligence. The outreach work in Eastwood and Ferham had been used as case studies. Analysis had been undertaken of the direct work referrals.

There had also been referrals from each secondary school across Rotherham. This clearly showed the spread of work and the good coverage across the borough.

- ❖ When children were referred for outreach work, was information shared with schools and teachers in case of a need for a re-referral?

If further support was required for a child, information would be shared appropriately to ensure needs met.

- ❖ How closely did Barnado's work with the Early Help service?

The two services worked closely in partnership. Barnado's worked with the children whilst Early Help tended to work with parents. .

- ❖ Were faith schools taking up the offers of support? Were there plans to for this work to inform mandatory relationships education in the future?

There had been take up from the catholic schools in the area.

Barnado's had received funding to look at lack of uptake in some Muslim communities and would be working with the University of Sheffield to establish need.

- ❖ Were Barnardo's liaising with any victims?

Yes the service was liaising with some victims.

- ❖ From the evaluation of the service was there anything that would be could have been done differently.

Overall the ReachOut project was very positive with good feedback from Children and Young People's Services and other agencies. There were currently no elements highlighted as that would have been better done differently. The project had evolved and elements of learning were incorporated as the project progressed. Earlier outreach work had learnt what worked better and how best value for money was achieved.

The three strand model had been very effective and built the foundations for further awareness and targeted education. This gave confidence in people for coming forward for support. This was a model which could be transferrable to other contexts.

- ❖ Did the service feel it had done enough awareness raising and training to make this sustainable?

The project had managed to reach people and embed the thinking and approach. This was going to continue and it was valuable and raised awareness to children and staff allowing them to talk on an ongoing basis about issues and concerns.

- ❖ Figures quoted suggested 50% of primary schools had received input with the addition of a further twenty schools. What were the numbers previously?

About 30% of all primary schools had received input, but from October with offers promoted regularly in the bulletin to schools this had increased. More schools were added each time it was highlighted. There had been lots of activity with some recent discussions about how support could be varied and analysed. It was hoped that to building momentum and importance through liaison with academy chains.

Following the meeting of Improving Lives last year every school had been telephoned and emails sent. There had been attendance at the Safeguarding Forum at the Rockingham Centre and a feature placed in the bulletin for schools and since October staff had been trained in 26 schools.

- ❖ Barnardo's were committed to continue working to raise awareness of child sexual exploitation, but as the focus shifted towards "county lines" was the service confident that child sexual exploration prevention initiatives were sustainable.

With additional funding this support was seen as extra rather than a dilution. .

There was wider remit as often young people presented with risks, but this may be child sexual exploitation, may be gang related exploitation or drugs. With a wider remit and clearer assessment indicators this would ensure links with the Police and Youth Offending. There were other branches of Barnardo's in other parts of the country like Bradford and Manchester and discussions were taking place with them and agencies who were dealing with "county lines".

The Chair thanked officers for their attendance and the information they had shared, welcomed the positive report and suggested work take place on how best schools, that had not engaged in the project, could be encouraged to do so.

Resolved:- (1) That the Barnardo's ReachOut Service update and the independent evaluation report be noted.

(2) That a further update be presented in twelve months' time to report on progress, particularly regarding the widened remit of the service.

(3) That a further piece of work with schools be initiated for those that had not engaged, the reasons why and how the engagement could be improved upon further.

59. PROGRESS TOWARDS IMPLEMENTATION OF PHASE TWO AND PHASE THREE OF THE EARLY HELP STRATEGY 2016-2019

Consideration was given to the briefing report and presentation on the implementation of Phase 2 and 3 of the Early Help Review and an update provided in respect of the progress in establishing Service Level Agreements (SLA's) with schools for youth service provision and related transfer of assets.

With the aid of powerpoint David McWilliams and Eileen Chambers gave a presentation on the Early Help Offer, which highlighted:-

- Rotherham's Early Help Offer.
- Three Phases.
- Phase Two and Three Objectives.
- What was working well.
- Youth Centre Updates.
- What we were worried about.
- Children Centres.
- What was working well.
- What worried about – Broom Valley.
- Day Care.
- Next steps.
- Youth Centres and Team Bases.

A discussion and a question and answer session ensued and the following issues were raised and clarified:-

- Who were the representatives for the unparished areas of the borough.

Representatives were still to be determined.

- What was the current position with regards to the Maltby Playgroup at The Linx.

Confirmation has been distributed and their position was secure in the longer term.

- The target for savings of £205k had been achieved due a combination of freezing vacant posts and non-essential expenditure, but what proportion of the saving was due to vacant posts.

Some posts had been taken out of the structure altogether. To offset the budget pressures across the wider directorate post were kept vacant during the selection process to offset the budget. To achieve the savings of £380,000 a longer freeze would be required from 1st April, 2019 to help with wider pressures and the move towards a more equitable position.

What work was taking place with the Children and Young People's Consortium and wider voluntary sector to maximise funding bids to offset financial pressures?

This action was already taking place. The Council was working with VAR, the Children's Consortium, Parish Councils and a number of independent organisations to bid more collectively and collaboratively. The Council was becoming more targeted and consortium bids had been submitted around holiday hunger. . It was challenging and people were working closely and more collaboratively in search of the larger pots of money on a more sustainable basis.

- Was it likely that some of the children centre provision would continue following the de-registration of some children's centres and was there a spread of where this was still happening.

In many cases there was no change to delivery, but the change was from where it was delivered from.

For example – the children centre offer was delivered from Tesco's Tuesday and Thursday morning and this was very popular. This could be observed by Members if there was a wish for this to be arranged.

In addition, Greasbrough Library offered support to around 20/30 parents and again delivered outside the children's centre.

- Could the personal support and help offered in Children's Centres be provided in more diverse settings?

Part of the restructure was to keep roles for outreach and engagement. There were people that worked with the 0-5, but in the new structure there was to be a 0-19 engagement post. The service

had been on this journey for some time, but were confident the shift for working from different places and locations would be positive. Particular posts had been retained, but this would be subject to close monitoring.

- If there was no interest from a private provider and there was a sufficiency need for provision, the Local Authority would look to continuing the childcare delivery for a period of three years. Was this likely?

There would be no change to the way day care was run as the building was still available at Broom and the care would be provided whilst there was the demand.

- Remedial work was required even with deregistration. Who, therefore, was picking up the costs of remedial work at Wath Victoria.

Very minor works were required for completion.

- With regards to the corporate property assets how was this working out given the impact of having to save £118,000.

The saving had already been made. Assets had been handed over and the budget reduced by that amount. Responsibility was now with the Corporate Property Unit. This was a real saving to the service and a smaller cost to the Corporate Centre.

The Council's position was now for Asset Management to decide on the use of those buildings for. Some of the buildings may be sold or the sites used for alternative purposes.

The only one in terms of all those buildings agreed that was not going according to plan was the one at Broom. The school had changed their mind about this provision. The transfer of the Broom Valley building would be delayed until the end of the summer term so as not to disrupt the Foundation 1 children currently using the building.

- When would costs be finalised.

There was a need for capacity in the Legal Services which was being addressed. . There was no impact on service users.

The Chair thanked officers for their presentation and suggested the Improving Lives Select Commission continue to have a watching brief.

Resolved:- (1) That officers be thanked for their presentation.

(2) That the report and the presentation be received and the contents noted.

(3) That a further report be submitted to the Improving Lives Select Commission once all the details had been finalised.

60. PRESENTATION - OFSTED ANNUAL CONVERSATION UPDATE

Consideration was given to a presentation on the Ofsted Annual Conversation Officer by Jon Stonehouse, Strategic Director.

This was a key part of the Inspection of Local Authority Children's Services framework and assisted Local Authorities to critically evaluate their own performance

The presentation covered:-

- Annual Conversation – 20th November, 2018
- Discussions:-
 - ❖ Complexity of the local area.
 - ❖ LAC review.
 - ❖ Partnership working.
 - ❖ Permanence planning.
 - ❖ SEND sufficiency.
 - ❖ Initial Health Assessments and thresholds.
- Next steps and possibility of a focused visit.

A discussion and a question and answer session ensued and the following issues were raised and clarified:-

- Given the concerns around “county lines” and exclusions and vulnerable children and young people, were there concerns about home education and if this was being used as an alternative to exclusion.

The Council had a priority for making its education system as inclusive as possible and wanted to make sure that there was a range of provision for as many young people as possible. This was a national issue and should not be looked at in isolation in order that resources were used as effectively as possible to accommodate the majority of children and young people.

- Had there been a discussion with Ofsted about a focused visit and was the service ready for this to be undertaken? ?

The peer review would help with preparations and the service would be as ready as it would be for any Ofsted challenge with strong performance management arrangements in place which mean the

service was already reasonably well prepared. However, the service would not become complacent and always ready for a challenge.

It was reassuring that nothing discussed was of a surprise. Partnership Board and Performance Board met on a monthly basis examining and challenging where it was required.

The Chair spoke for the Vice-Chair who was unable to attend today's meeting and confirmed the Performance Sub-Group of this Commission was working well with a good level of challenge and explanation.

Resolved:- (1) That officers be thanked for their informative presentation.

(2) That for any future inspections information be circulated to this Improving Lives Selection Commission.

61. PRESENTATION - LOOKED AFTER CHILDREN SUFFICIENCY STRATEGY - UPDATE

Consideration was given to a presentation on the Looked After Children Sufficient Strategy which sought to deliver and improve outcomes for children who were looked after. This would ensure the right placements and also delivery significant savings to the Local Authority,

The needs analysis supported the market management work going forward. Another project led by the Head of Service about demand, the Right Care Right Child Strategy was linked and informed by Looked After Children Sufficiency Strategy.

The presentation highlighted:-

- LAC Sufficiency Strategy - Purpose.
- LAC Profile.
- Pattern of Admissions to Care.
- The National and Regional Picture.
- Placement Profile.
- Placement Spend and Unit Costs.
- In-House Foster Care.
- Independent Fostering Agencies.
- Residential Provision.
- Right Child, Right Care Approach.
- LAC Sufficiency Strategy Principles.
- Next Steps.

A discussion and a question and answer session ensued and the following issues were raised and clarified:-

- How many mother and baby placements were there.

There were three in-house mother and baby foster placements. It was hoped that this could be developed as part of the service, but it was a matter of finding the right carers, with the right skills and commitment.

- What was the average timeframe for becoming a foster carer.

This was an area that was being looked into as part of the foster carer recruitment process. There was a need to encourage people, share the message, support and look in detail about the process to reduce the current timescales from expressions of interest to being presented to the Fostering Panel. Currently the average timeframe was eight/nine months.

- Some disabled children received respite care, but remained living at home. Were those children classed as being looked after? Where there any disabled children in specialist residential provision outside of Rotherham?

Determination of whether a child was looked after or not, depended on the percentage time they were in placement. Ten per cent of the Looked After Children population were disabled and the majority of these were placed in residential rather than foster care provision. A high proportion of these placements were out of authority. However, work was taking place to develop local provision which was hoped to open shortly.

The Chair thanked officers for their attendance and welcomed the good work taking place and suggested a sub-group of this Commission look into the options as they emerge from the Looked After Children Sufficiency Strategy.

Resolved:- (1) That officers be thanked for their informative presentation and the contents noted.

(2) That nominations be sought for a Sub-Group from the Improving Lives Select Commission in due course looking in detail as options emerged from this Strategy.

62. IMPROVEMENT PARTNER PEER REVIEW OF THE LOOKED AFTER CHILDREN SERVICE (NOVEMBER 2018)

Consideration was given to the report which detailed the findings of the Council's Improvement Partner, Lincolnshire Children's Services, Peer Review of the Looked After Children (LAC) Service in November, 2018. This was almost two years after the previous Peer Review in December, 2016 and twelve months after the Ofsted Inspection in November, 2017.

The rationale for this further Review was to gauge the ongoing improvements within the service given that the LAC Service was the only part of Children and Young People's Services to be graded as "Requires Improvement" by Ofsted. Whilst the Inspection identified that, "The local authority has improved the services it provides for children looked after since the last inspection" it also concluded that many of the changes were too new and insufficiently embedded for any other conclusion to be reached.

The remit of the Review was to undertake an assessment was determined and a number of Focus Groups were arranged to meet with the Peer Review Team (PRT) and looked particularly at:-

- Scope.
- Evidence.
- What was working well.
- What we were still worried about.
- What we were doing about it.

A discussion and answer session ensued and the following questions were raised and clarified:-

- Good practice recommended pre-birth assessments should start at 28 weeks and finish at 36 weeks. Was Rotherham on track to comply with this?

This was not been on target. Capacity was being addressed and the backlog being worked through. The service were now confident it could now meet those timescales.

- What was the level of confidence that that the decision to move to care proceedings was the right one?

In 94% of the cases the Local Authority was successful in getting the care order it requested, but the 6% were where the court may not have felt confident about making a decision and often defer for further work. 94% was strong performance.

- Were there any barriers to developing foster carers in Muslim communities?.

There was a need to actively engage to become a community strength based model and for members of the Muslim community to understand the requirements for foster carers.

Attempts were being made to engage with the local Mosque Community Forum and to recognise some of the needs of young people . This was an exciting prospect and could change the experiences of looked after children.

- Were there any worries about Regulation 24?

Regulation 24 was kinship care provided on an emergency basis whilst viability assessments were undertaken. These placements lasted up to sixteen weeks with an expectation that kinship carers would become foster carers with a named individual in their care. An extension could be requested.

Most of the Regulation 24 placements progressed to permanence in the form of Special Guardianship Orders. There is a specialist worker in place to provide guidance to the relevant teams on the status of kinship placements

- Was there a timeframe for the achievements of developments identified in the review to be undertaken?

There were many innovations and developments in the service. Mockingbird had commenced and the service were aiming for a fifth hub by end of year.

The latest innovation had successfully gained a place of the second wave of lifelong links for long term looked after young people. Lifelong links identified young people aged 13-16 where there was little prospect of returning home or adoption in care long term. This would facilitate a family group conference co-ordinator “eco mapping” the life of the young person. All those people involved in their life would be invited to contribute and have some commitment to continued involvement. The first strategic meeting would take place on Friday, 8th March where the first cohort of twelve would be identified.

- Was there an action plan timeframe that could be measured?

Each case would have an action plan and tracker where any slippage would be monitored. The Right Child, Right Care 1 was complete and Right Child, Right Care 2 was being driven forward. All projects were tracked and project managed, with performance meetings arranged to monitor and overcome barriers and blockages.

- Was there a separate action plan in the peer review report.

Some detail could be provided on the actions as not all were projects and some were one-off processes.

- Was this being monitored through Corporate Parenting Panel.

Some of the performance was monitored through the Corporate Parenting Panel and some through the Performance Board.

- There was a 12 week window from the start of a PLO (Public Law Outline) meeting, to a children being taken into care.. Were there any external factors which were having an impact on timescales and outcomes?

The time was set by the Local Authority to a final decision in 26 weeks. Court timetabling across South Yorkshire and its capacity impacted on timescales and the ability to discharge care orders. An issues resolution hearing had been negotiated and this dealt with some of the discharge hearings dealt rather than a full hearing as long as CAFASS were satisfied.

- The service endeavoured to do work within 12 week window were it was safe and proportionate and safe to do so. Sometimes it was done in less time and in complex cases it took longer.

Perhaps it would be helpful to the Select Commission to understand the legal aspects around children's social care in the form of a presentation at a later date. This would provide greater understanding of the process and challenges, areas of good performance and areas that needed to improve.

Resolved:- (1) That officers be thanked for their informative presentation.

(2) That the report and presentation be received and the contents noted.

(3) That arrangements be made in the future for a presentation on the legal aspects of children's social care.

63. DATE AND TIME OF THE NEXT MEETING

Resolved:- That the next meeting of the Improving Lives Select Commission take place on Tuesday, 16th April, 2019 at 5.30 p.m.

**IMPROVING LIVES SELECT COMMISSION
16th April, 2019**

Present:- Councillor Cusworth (in the Chair); Councillors Beaumont, Brookes, Clark, Elliot, Ireland, Jarvis, Khan, Marriott, Price, Senior and Short.

Councillor Watson, Deputy Leader, was in attendance at the invitation of the Chair.

The webcast of the Council Meeting can be viewed at:-

<https://rotherham.public-i.tv/core/portal/home>

64. DECLARATIONS OF INTEREST

Councillor Clark declared a Personal Interest (Member of the Pause Rotherham Board).

65. QUESTIONS FROM MEMBERS OF THE PUBLIC AND THE PRESS

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

66. COMMUNICATIONS

Health Select Commission

Councillor Jarvis reported that the following items had been discussed at the recent meeting of the Health Select Commission:-

- Intermediate Care and Re-ablement Project
- My Front Door
- Implementation of the Health and Wellbeing Strategy 2018-25
- Outcomes from Joint Scrutiny Workshop – Transition from Children's to Adults Services

All the above items were linked to the changes in provision for adults with learning difficulties and the transition in that area.

Corporate Parenting Panel Sub-Group

The Chair reported that the above Sub-Group had commenced a review of the Local Authority Designated Officer (LADO) process. Feedback would be provided to the next meeting of the Corporate Parenting Panel.

67. MINUTES OF THE PREVIOUS MEETING HELD ON 5TH MARCH 2019

Consideration was given to the minutes of the previous meeting of the Improving Lives Select Commission held on 5th March, 2019.

It was noted that it should read "Aileen Chambers" and not "Eileen Chambers" at Minute No. 59 (Progress towards Implementation of Phase Two and Phase Three of the Early Help Strategy 2016-2019).

It was noted in relation to Minute No. 58 (Barnardo's Reachout Service Update and Barnardo's Reachout Final Evaluation Report) the following text be included:

"Clarification was sought if historic victims or 'experts by experience' were involved in training or awareness raising with professionals, or to inform the needs analysis or evaluation. It was confirmed that this was not the case."

Resolved:- That the minutes of the previous meeting of the Improving Lives Select Commission held on 5th March, 2019 be approved subject to the above clerical corrections.

68. SPECIAL EDUCATIONAL NEEDS AND DISABILITY (SEND), SUFFICIENCY AND INCREASE IN EDUCATIONAL PROVISION - PHASE 2

Consideration was given to the report presented by Jenny Lingrell, Joint Assistant Director of Commissioning, Performance and Inclusion, which was submitted to Improving Lives Select Commission for pre-decision scrutiny prior to consideration by Cabinet at its meeting in May, 2019.

The reports set out the proposed second phase of the Council's plans to increase and develop special educational needs provision in Rotherham and outlined the available capital budget allocated by Central Government to enable these developments to be implemented.

The report, therefore, recommended that the Council consult with providers in relation to new provision to meet the needs identified within the sufficiency strategy with allocation of the capital funds to develop this provision.

Mary Jarrett, Head of Inclusion, gave the following powerpoint presentation on SEND Sufficiency:-

High Needs Budget

- £36.5m budget - £5.31m pressure
- Out of Authority provision (£4.4m pressure)

Forecast – EHCP Growth

- The number of children and young people (CYP) on EHCP was currently 2,095 (as at 11th February 2019)
- Forecasting over the next 10 year period would see a potential increase of over 700 EHCPs in the next 2 years
- Forecast projection for the next 4-5 years would see a potential rise of over 1,000 additional CYP on EHCPs
- Long term, 8-9 years ahead, the number of CYP on EHCPs could potentially double in numbers to over 4,000
- Over the 10 year forecast this was an increase of 105%

Forecast – Population Growth Age/Key Stage Groups

- Children and young people aged 8-11 years old (covering Key Stage 2 phase) and CYP who were of Post 16+ age were the most affected cohort now and would continue to be the most affected young people that required support
- Aged 5-7 years (Key Stage 1) cohort indicated an increase from 233 to 452 CYP with an EHCP over a 10 year period seeing an increase in need of 93%
- Aged 8-11 years (KS2) cohort indicates an increase from 523 to 984 CYP with an EHCP over a 10 year period seeing an increase in need of 88%
- Aged 17-26 years (Post 16) cohort indicate an increase from 535 to 1,679 CYP with an EHCP over a 10 year period seeing an increase in need of 213%

Forecast - Primary Need Growth

- Visual Impairment
- Speech, Language, Communication Difficulty
- Specific Learning Difficulty
- Social, Emotional and Mental Health
- Severe learning Difficulty
- Profound and Multi learning Difficulty
- Physical Disability
- Other Difficulty/Disability
- Multi-Sensory Impairment
- Moderate Learning Difficulty
- Medical
- Hearing Impairment
- Autism Spectrum Disorder

Primary needs

- Autism Spectrum Disorder – 651 CYP – 32% of 2019 cohort
- Moderate Learning Difficulty – 447 CYP – 22% of 2019 cohort
- Social, Emotional and Mental Health – 373 CYP – 18% of 2019 cohort
- Analysis on forecasting projections of Primary Needs shows that within the next 10 years the number of CYP with a Primary need of ASD, MLD, SEMH increase as follows:-
 - MLD cohort indicates an increase from 447 to 999 CYP with an EHCP over a 10 year period seeing an increase in primary need of 123%
 - ASD cohort indicates an increase from 651 to 1,399 CYP with an EHCP over a 10 year period seeing an increase in primary need of 114%
 - SEMH cohort indicates an increase from 373 to 789 CYP with an EHCP over a 10 year period seeing an increase in primary need of 111%
 - These needs are our largest Primary needs now and projected for the future

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- Further analysis indicates that for children with MLD the potential increase in need will be most significant at age 8-11 years KS2 and Post 16
- For children with ASD the potential increase in need would be most significant at KS1, KS2 and Post 16
- For children with SEMH the potential increase in need will be most significant at KS2 and Post 16

Forecast for School/College Provision

- ‘Rotherham Special Schools’ and ‘Post 16+ places in Higher/Further Education’ were the most affected provisions with the highest number of children attending these school types
- Growth in demand for School/FE places for children with EHCPs was projected as follows:-
 - Post 16 provision – currently 392 to 1,262 CYP with an EHCP over a 10 year period an increase in demand by 879 (2215)
 - Special School provision – currently 678 to 1,069 CYP with an EHCP over a 10 year period an increase in demand by 391 (57%)
 - Rotherham School/Academy – currently 583 to 992 CYP with an EHCP over a 10 year period an increase in demand by 409 (70%)

Forecast for School/College provision Out of Authority Area

- Out of Authority – Post 16+ and Special School types were the Authority’s largest provision that CYP with an EHCP attended outside of Rotherham
- The forecasted projection continued for the future

Phase 2

Projects	Project, estimated cost and funding stream
Wales High School (2019/20 financial year)	10 secondary ASC places £166k – DfE Grant (Year 2) £34k – Approved Capital Programme – Invest to Save
Aspire (site TBC) (2019/20 financial year)	15 High Level SEMH therapeutic places (primary and secondary) £75k – approved Capital Programme – Invest to Save
Milton School (2020/21 financial year)	10 Complex Needs Primary/Secondary places £166k DfE Grant (Year 3) £34k – approved Capital Programme – Invest to Save
Waverley Junior Academy (2021/21 financial year)	10 primary ASC places £tbc – funded from Section 106 of the Town and Country Planning Act developer contributions

Phase 3

SEND/SEMH Phase 2 report to be submitted to Cabinet May 2019 seeking approval to consult	£0.9m Basic Need Funding (allocated early to local authority from DfE for 2019/20 and 2020/21 allocations) £116k from DfE initial announcement of additional £50m SEND funding £223k from DfE additional announcement of additional £100m SEND funding £100k Remainder from previous unspent money for partnerships
	Total = £1.348m

A 5 Year Plan

- Sufficiency for children with complex needs within Special Schools – Phase 1 of project (2018/29)
- Children who were within the mainstream ability range but who had an EHCP and need higher levels of support were integrated within mainstream learning settings able to differentiate for specific subjects and there was a developed offer of a range of Inclusion units – Phase 2/3 of project (2018/20)
- Specific outreach teams with specialisms in Autism and SEMH at both primary and secondary level were developed to support schools and develop the graduated response – Phase 4 of project (2019/21)
- A range of high quality post-16 options with increased capacity for supported internships and work placements – Phase 5 of project (2019/21)

Increase use of Inclusion Units: 50 Places

- 2 x 10 pupil Primary School Inclusion Units one of which to be Autism specialism and one to be SEMH
- 2 x 15 pupil Secondary School Inclusion Units one of which to be SEMH and one of which to be combined MLD
- Develop new ASD secondary provision at Wales at existing Swinton provision

Criteria for Business Case

Evidence of

- Reduction in Permanent Exclusions across Trust/Academy
- Inclusive Practice
- MAT/Academy investment in Project
- Clear business plan and project lead
- Deliverable outcomes from September 2019
- Borough-wide approach (consideration of feeder schools and geography)
- Developing good practice and expertise in SEN
- Multi-agency working and development of partnership approaches
- Proven track record of delivering at least good or outstanding education
- Financial stability

Timescales

- Expressions of Interest and Business Cases to Mary Jarrett by 31st May 2019
- Shorting Panel and follow-up completed by 30th June 2019
- Cabinet report requesting permission to consult in relation to successful projects timetables for May 2019
- New provision to Cabinet for approvals August 2019
- Units have staggered start from September 2020

Discussion ensued with the following issues raised/clarified:-

- Phase 2 was a one year plan to lead to a further year's delivery
- SEND Sufficiency was not just about school places but all the services that wrapped around children with disabilities were in place
- Rotherham had seen the highest and steepest growth of children with an EHCP in the country. The Authority had an escalating level of need and was adapting to the new code of practice. Under this code EHCPs applied up to the age of 25 compared with the previous Statement of Special Educational Needs which applied while a child was of statutory school age
- There was huge growth in children with Autistic Spectrum Disorder, multiple learning difficulties and SEMH difficulties nationally however, there was a higher prevalence of Autism in Rotherham together with higher levels of deprivation. The work that had taken place on developing the All Age Autism Strategy would hopefully provide some understanding as to the reasons why Rotherham had such a high prevalence of Autism
- Additional Special School places were required for those children who had the ability to learn at mainstream level but needed additional support
- Within the 5 Year Plan Outreach Teams would be developed who would have specialisms to work with children who had complex needs and vulnerable
- A potential behaviour pathway would align services to intervene much earlier with families. There were concerns that needs were not met early enough with the present system and escalated to the point where parents were keen for their children to have a diagnosis; their perception was that if they had a diagnosis it would unlock additional resources. It was recognised for some children and families a diagnosis was helpful as it could help young people understand why they felt different from others

- An analysis/benchmarking exercise had not been done recently. If one was to be undertaken, it would need to be done across the whole system e.g. health
- The report had been presented to the Rotherham Education Strategic Partnership. Rotherham schools wanted assistance to support this cohort of children and young people, particularly those that did not fit/meet the threshold for specialist provision
- The Schools Forum had also considered the report and had been equally supportive
- The focus of the presentation on the SEND Sufficiency was the allocation of Capital funding to create additional resources to meet the needs of children with special educational needs and disabilities but at the same time the Service would like to consult with schools on their ideas for wider provision i.e. those children that did not have an EHCP or even have SEN support identified but where there might be a risk that they may not be fully engaged with the mainstream curriculum and possibly at risk of exclusion
- It had been taken into consideration that not all disabilities experienced in childhood carry on into adulthood but there were also children living longer with complex needs. Part of the issue was around transition from childhood to adulthood
- Rotherham was a net importer of children into its Special Schools by a marginal number. Rotherham had LAC from other authorities placed within the Borough or its periphery as well as Rotherham children accessing education placements in other local authorities particularly around SEMH
- The Government required local authorities to place children and young people in a category relating to their primary needs to count them however, it was recognised that often the child or young person may have multiple needs which may not be reflected in the data
- The financial and procurement implications had been completed by the Head of Finance in Children and Young People's Services, therefore, confidence that the figures were robust
- It was difficult to know how realistic the case for prudential borrowing might be until the specific business case had been developed. It would be an Invest to Save model
- If Capital funding was released as described it would create a delay as to when the places were available for the children and young people; it may be in the Authority's interests to speed up that process by having a short term Invest to Save plan if it meant that the children

could remain within the Borough. There was a risk that if children went out of the Borough and were settled in their placement, it may not be appropriate to end the placement

- It was the intention to share the information presented to the Select Commission with Schools and Academies and seek their views on the proposals outlined
- As a matter of urgency there was a need to increase the specialist provision hence the drive to develop the inclusion places. The initial Capital investment was still to be realised. Also, whilst that was taking place, the development of services to intervene much earlier was required to avoid the escalation in the projected data
- Rotherham had a relatively high number of special schools that were extremely good. In the first instance expansion of the existing provision would be considered rather than building new schools
- It was noted that an out of date Equality Impact Assessment template had been used and some of the protected characteristics were listed incorrectly.
- Further clarification was sought about the options put forward in the proposals as it was felt that Option 1 to retain SEND sufficiency at current levels was not realistic or sustainable. It was outlined that the only other option available was to build more special schools and special school places. The Local Authority had taken the view that the solution was to create resilience and good practice within mainstream academies rather than building further special schools. Special schools were very important for children with complex needs but the majority of disabled children that attended special school provision would go on to live in mainstream society. Provision needed improving for this group
- Option 1, as described in the report, was not a realistic option. A 3 year plan had to be submitted to the DfE on how the Authority was going to recover its position on the High Needs Budget. It was obliged to show the activity and the actions that were being taken to reduce that budgetary pressure and overspend; to do nothing would not allow the Authority to submit that plan in any realistic way because without additional in-Borough provision, whether mainstream or special, it would not be in position to meet the needs of the children and continue to rely on out of authority provision which cost much more money

Resolved:- (1) the report and recommendations to Cabinet as set out in the report and supports the recommendations to Cabinet as set out in the report submitted.

(2) That consideration is given as to why Option 1 to retain SEND sufficiency at current levels has been included as a viable option.

(3) That discussions take place with regard to possible work with partners to look at the high prevalence within Rotherham of Autism.

69. ROTHERHAM PAUSE PRACTICE - UPDATE

Jenny Lingrell, Joint Assistant Director of Commissioning, Performance and Inclusion, and Lindsey Knight, Pause Practice Lead, presented an update on Rotherham Pause Practice which had become operational in July 2018. This report followed on from a previous scoping report submitted to Improving Lives Select Commission in October 2017, which prompted the decision to proceed with the project.

The Pause model kept the women at the centre and enabled them to address a number of complex and intersecting needs. As of March 2019, the team were working with a cohort of 24 women and of these 16 were fully engaged with the Pause Practice had which meant that the women agreed to use an effective form of long-term reversible contraception, which gave them the chance to pause and take control over their lives with the aim of preventing repeated pregnancy. The 24 women in the cohort had had 78 children removed between them, an average of 3.3 children removed per woman.

Pause Rotherham had been extremely effective at identifying and engaging women on the programme achieving 87% appointment attendance last quarter. The women identified what areas they would like to focus on with the highest priority being relationship with children. It had been successful in supporting women to engage in the court process and complete Life Story work

During the last quarter Pause Rotherham had:-

- supported 8 women with their housing needs including supporting 3 to access new properties and working in partnership with Housing colleagues to avoid an eviction
- supported 3 women to access a GP surgery, one to go to hospital for an operation, 4 to access Mental Health Services and 3 to access support from the Sexual Health Clinic

The Pause Rotherham Board had been established and included a broad multi-agency representation including a Councillor. It had also undertaken joint work with the National Team including the Practice Lead being elected to sit on the Pause National Practice Board to help shape and drive forward practice nationally.

However, whilst the evidence suggested that Pause Rotherham was implementing the model successfully and partners were supportive, it was necessary to start work to explore if Rotherham wanted to sustain the

practice and how it would be funded. The final figures in April 2018 showed 270 women who were eligible for Pause equating to 720 children who had been removed.

A Pause Success Event was to be held in July 2019 to celebrate the first year of the practice. It was hoped by that time further plans would be in place to address the sustainability of the project including the Practice Lead submitting a sustainability report and meeting with all agencies involved to look at the overall cost benefit analysis. Work was taking place with the South Yorkshire Police looking at cost savings related to crime and domestic abuse within the cohort.

Over the course of the next 6 months the women would continue to work on their goals and benefit from the 1:1 sessions with their practitioner. The women would move into the transition work in October 2019 where they would be supported with their plans moving forward once having completed the 18 month programme.

Discussion ensued with the following issues raised/clarified:-

- The national Pause Team was helping Rotherham to build a profile of the money the project was saving other service areas. The challenge encountered in Rotherham was not unique. It was quite easy to attribute costs to Children's Service where there was the cost avoidance of removing children that might be born in the future but also the cost avoidance for other services i.e. missed appointments, responding to anti-social behaviour and crime, eviction. The work of Pause supported all those areas of work. The aim was to build the evidence base and the awareness thereof to potentially create a sustainable funding model that was not reliant on the funding stream from one Directorate
- Although predominantly a service for women, it recognised that there were a number of women who, although may not be in healthy relationships, wanted to remain in them. Part of the work included their male partners to support them to understand healthy relationships
- The National Pause Team was currently looking at what a Pause offer could look like to men as it was recognised that they too had experienced loss when children were removed
- Pause nationally was continuing to undertake work on its longitudinal studies and the success rate of the interventions. Pause practices were now being expanded throughout the country, moving into Scotland and Northern Ireland. Research had been undertaken by Lancaster University previously which had looked at the impact of the recurrent care proceedings on women.

It was asked if more current research was underway on the success of the Pause intervention to inform the evaluation prior to a decision being taken to allocated more funding. This would be raised with the Chief Executive of Pause National who sat on Rotherham's Strategic Board

- There were a small number of women who were currently working with Pause who had much more chaotic lifestyles with substance misuse, unstable housing needs, difficulties with partners, mental health issues etc.. Part of the model was intensive and consistent outreach work adapting to different needs.
- Following on from the scoping exercise where 270 women had been identified, prioritised using a model based on the research conducted at Lancaster University. The research highlighted particular categories that identified women who were at higher risk of having babies e.g. age of the woman when she had her first child, succession/age of the children, whether the children had been adopted, whether the women was a victim of CSE, whether she was a care leaver as well as her age in terms of child bearing years. All 270 had been considered using that criteria to identify those thought to be the highest risk women of recurrent pregnancies. The project was working with 13 out of the top 20 who were classed as the highest risk. There were still a number of women that were eligible for Pause. The Team Co-ordinator was taking referrals on a regular basis from Social Workers or other agencies who were identifying more women. The Pause model specified it worked with only 24 women to ensure that the intervention was deliverable
- The remaining 246 women not supported by Pause would be supported by existing services such as Drug and Alcohol Services, Mental Health, Rotherham Hospital and the Community and Voluntary Sector
- The project worked closely with the Sexual Health Service in an attempt to strengthen pathways for the women to access those appointments, who may otherwise struggle to manage these commitments
- Pause worked very closely with Housing colleagues who were very supportive of the work of the project and were a member of the Strategic Board. Consideration would be given to the possible progression of women within the project to Housing First when work had stopped with the current cohort. There was a Housing representative on the Strategic Board
- Now the first cohort of Pause women were established to prove the efficacy of the project, it was now the focus of the Strategy Group to build a sustainable model and meet with colleagues across the

partnership and see where the project had helped reduce demand on other parts of the Service and not just CYPS

- The Pause National Team database was used to record all the activity that took place which enabled a quarterly report to be submitted. This also enabled benchmarking against other areas
- Approximately 15 women had not wanted to take up the Pause offer. Their refusal had been respected as it was a voluntary service

The Select Commission wished the message to be conveyed to “Bluebell” that she was an inspiration after Members had heard her case study.

Resolved:- (1) That the progress of the Rotherham Pause Practice and the impact on the women on the caseload be noted.

(2) That a further update be submitted on partner contributions.

(3) That further details be submitted regarding the longitudinal impact of the Pause project.

(4) That exploration take place of whether the women who had completed the Pause project could progress to the support of Housing First.

70. UPDATE ON THE OUTCOME OF THE HMI OFSTED FOCUSSED VISIT: 21ST-22ND MARCH 2019

Ailsa Barr, Acting Assistant Director Safeguarding, gave the following powerpoint presentation on the recent Ofsted Focussed Visit (21st-22nd March, 2019), and the outcome thereof:-

What's Working Well

Improved practice in respect of children coming into care:-

- Most recent S20 Audit (February 2019) evidenced appropriate use or a clear rationale for Section 20 placements and thus minimal drift
- Of the 33 children subject of Section 20, 6 were Unaccompanied Asylum Seeker Children, 10 by virtue of receiving short breaks, 6 were 17+, 8 in PLO/legal process and 3 with a plan for reunification
- All admissions presented to Public Law Outline Panel including emergency admissions so that:
 - Opportunities for reunification fully explored
 - All family options exhausted and viability assessments appropriate front loaded
 - Adoption planning including (early permanence) considered at earliest opportunity

Improving Placement Stability

- Long term placement stability tracker
 - Process managed within Performance Clinics
 - 21 long term matches achieved in 2018/19
 - 13 more with Panel date already booked (7 x IFAs)
- Better use of Special Guardianship Orders/Child Arrangements Orders
 - Early use of Interim Supervision order/CAO at initial hearings
 - 28 Looked After Children stepped down to SGO/CAO in 2018/19
 - 83 children made subject of SGO/CAO not previously Looked After over same period
 - 273 SGO/CAO placements financially supported by CYPs
 - Post-SGO Support Worker to encourage greater sign up by carers
 - Letterbox co-ordinator

A 'Good' Adoption Service

- 32 adoptions successfully completed – 22 of these children in the 'Hard to Place' categories
- Time limited searches by exception only and in accordance with identified needs of the child
- RMBC acknowledged as regional Early Permanence leads – 6 EP placements in 2018/19 with 7 more in process
- Only 1 disrupted adoption
- 35 more children already in adoptive placements, 25 of whom were in 'Hard to Place' categories
- Post-adoption support
 - Rotherham Therapeutic Team
 - Adoption Support Fund – 136 applications
- A collective commitment to ensure the Regional Adoption Agency does not impact on performance and adoption outcomes for our children

Innovative Practice

- Intensive Intervention Programme using predictive analytics to identify and support the most vulnerable towards increased placement stability
- Right Child Right Care – providing targeted and performance managed interventions to support more Looked After Children to permanent arrangements
- Edge of Care Service – significant investment in a range of Edge of Care Services (PAUSE, MST, FGC, Edge of Care Team) to support children to remain living with birth/extended families and to support Looked After Children to return home
- Life-Long Links (2nd wave) to re-establish long term social and family connections using Family Group Conferencing model and social mapping processes to improve placement stability
- The House Project – contributing to the 'coming Home' objectives in supporting 16 and 17 year olds to move for Out of Authority placements and towards semi-independent living

Areas for Further Development

- Although the quality of Life-Story had significantly improved, it could be produced too late and was not yet widely available beyond children in the adoption pathway
- Insufficiency of in-house foster carers could impact on matching practices and placement stability
- Foster carer retention had been an issue
- A small number of pre-birth assessments had been concluded too close to the end of the pregnancy to allow for a full 12 week consideration within the PLO process
- Quality of some Care Plans and Support Plans could dissuade the Court from endorsing early permanence

What We Are Doing About It

- Continued Right Child Right Care implementation until we are confident it had become embedded practice
- Improved foster care recruitment
Revised Marketing and Placement Sufficiency Strategy
Foster Carer Diversity Scheme
Mockingbird
Challenge 63
Fostering Network retention project
- Task and Finish Group had produced a Pre-birth Planning Process and Tracker with milestones measured in Performance Clinics
- Production of life-story work to become a performance measure
- Improve the quality of Care Plans via the continued drive for 'Outstanding' Social Work practice

Feedback – What's Going Well

- Significant improvement in Permanence Planning for Looked After Children
- A real focus on securing the long-term future for Looked After Children with some very creative interventions that were well-adapted to the needs of individual children
- Progress was very evident and effective strategic management had built on existing strengths and improved management oversight
- Right Child Right Care was progressing to becoming standard practice
- The Service was reflective and adaptive having embraced the learning identified in previous Peer Reviews
- There was strong evidence of front-loading assessments and twin track planning

Feedback – Areas for Improvement

- Social Workers were able to well articulate the plans for their children but they were less well reflected in case files in a consistent way
- The unique identity of our children was not always captured in assessments especially in regard to ethnic identity and some of our

risk assessments were not sufficiently robust to inform placement decisions and permanence plans

- Sufficiency was an issue in terms of both demand and the complexity of our young people leading to a small but significant number of unregulated placements

The Strategic Director and Leadership Team were proud of the Service for the progress it had made and the drive for improvement.

The letter received from Ofsted on the outcome of their visit set out very clearly the positive strides the Service had made and set out some of the issues/recommendations identified correlated with those already identified by the Service itself and would form an improvement plan.

Discussion ensued with the following issues raised/clarified:-

- It was noted that children who were Looked After had to be placed in an Ofsted registered provision i.e. a foster care placement which had been approved under national standards; placed with their parents if an appropriate assessment had been undertaken or placed in a registered children's home. If a child was placed anywhere else it was an "unregulated placement". An explanation was given outlining under what circumstances "unregulated placements" occurred and the steps taken to address this
- The Authority could care for a child in that arrangement for up to 20 days.
- Ofsted had looked at a small number of case files related to "unregulated placements" and had felt that the plan for the child was appropriate but was concerned that the written risk assessment contained within the case file was not clear enough about the risks being considered and why, therefore, the actions outlined had been taken. The Service needed to ensure that consistent managerial oversight was in place, to make sure that risk assessments were up to date, and Social Workers used these to record the rationale for their actions/ decisions clearly consistently in the case records
- Any proformas used needed to be useful for practitioners and work would take place with workers to develop them. The operational model work around Signs of Safety was enabling Social Workers to succinctly record what they were worried about, what they were going to do and why

Resolved:- (1) That the progress made be noted.

(2) That the Select Commission continue to have oversight of performance of Children and Young People's Services.

71. OUTCOMES FROM JOINT SCRUTINY WORKSHOP SESSION - TRANSITION FROM CHILDREN'S TO ADULT SERVICES

Caroline Webb, Senior Adviser (Scrutiny and Member Development), presented the outcomes of a workshop held by members of the Health Select Commission and the Improving Lives Select Commission on 19th March, 2019.

The purpose of the workshop was to seek assurance that young people and their families/carers would have a positive transition from Children's to Adult Services, through clear pathways and a strength based approach that sought to maximise independence and inclusion.

Evidence comprised of briefing papers, case studies, a presentation and the refreshed draft Education, Health and Care Plan.

Membership of the sub-group included Councillors Evans (Chair), Cusworth, Elliot, Jarvis, Keenan and Short.

The findings were set out in the report and fell within the following headings:-

- Understanding the cohort – numbers and main presenting needs of the children and young people
- Strategic alignment
- Voice and influence
- Shared approach to assessment and strength-based practice
- Demonstrating outcomes – short and long term

It was noted that the follow-up actions for scrutiny outlined in Section 10 of the report would be considered in the work programme for the new municipal year.

Resolved:- That the report be noted and the following recommendations be forwarded for consideration:-

(1) That the PfA (Preparing for Adulthood) Board develop a range of outcome measures during 2019-20 to supplement output measures such as the number of EHCPs completed in time in order to:

- Understand the impact of the new pathway
- Capture achievement of individual aspirations in EHCPs and in the longer term

(2) That the PfA Board develop measures of satisfaction during 2019-20 for young people and families/carers with regard to the transition/PfA process and new pathways.

(3) That quality assurance processes are in place to monitor the consistency and quality of EHCPs when the new template is introduced.

(4) That Adult Social Care continue to develop its Information, Advice and Guidance offer in 2019-20 for all customer cohorts including young people transitioning from Children and Young People's Services and for people aged 25 who may face a second phase of transition.

(5) That training and workforce development continues to embed taking a strengths-based approach fully with staff across Children and Young People's Services and Adult Care, Housing and Public Health, and with health partners.

(6) That representatives from the PfA Board, including Rotherham Parent Carers Forum, provide Scrutiny with a further progress update during 2019-20.

72. DATE AND TIME OF FUTURE MEETINGS

Resolved:- That meetings take place during the 2019/20 Municipal year as follows:-

Tuesday 11th June, 2019

9th July

17th September

29th October

3rd December

7th January, 2020

10th March

all commencing at 5.30 p.m.

IMPROVING PLACES SELECT COMMISSION
7th March, 2019

Present:- Councillor Mallinder (in the Chair); Councillors Atkin, Buckley, B. Cutts, Elliot, Jepson, Jones, Khan, McNeely, Reeder, Sheppard, Vjestica, Walsh, Whysall and Wyatt.

Also in attendance Mrs. W. Birch and Mrs. L. Shears (Rotherfed), Co-optees.

Apologies for absence were received from Councillors Fenwick-Green and Sansome.

The webcast of the Council Meeting can be viewed at:-
<https://rotherham.public-i.tv/core/portal/home>

44. DECLARATIONS OF INTEREST

Councillor Sheppard declared a personal interest as he was Chair of the Planning Board so was technically involved with the Community Infrastructure Levy from the Planning Board perspective.

45. QUESTIONS FROM MEMBERS OF THE PUBLIC AND THE PRESS

There were no questions from members of the public.

46. COMMUNICATIONS

There were none.

47. MINUTES OF THE PREVIOUS MEETING HELD ON 14TH FEBRUARY, 2019

Resolved:- (1) That the minutes of the previous meeting of the Improving Places Selection Commission held on Thursday, 14th February, 2019 be deferred due to a number of comments having been received after the agenda had been published.

(2) That the minutes of the previous meeting be included for consideration as part of the agenda pack for the meeting scheduled for Thursday, 18th April, 2019.

(3) That prior to consideration of the minutes in April, 2019, further information be provided to the Select Commission on the outcome of the decision with funeral directors and circulation of the Project Liaison Group minutes.

48. **UPDATE ON THE ROTHERHAM COMMUNITY INFRASTRUCTURE LEVY**

Consideration was given to the report introduced by Councillor Lelliott, Cabinet Member for Jobs and the Local Economy, which provided an update on the implementation of the Rotherham Community Infrastructure Levy (CIL), which was a financial charge via the Planning system, introduced as a tool for local authorities in England and Wales to help deliver infrastructure to support the development of their area.

The Community Infrastructure Levy was introduced by the Planning Act 2008 and adopted by the Council in 2017 and was intended to largely replace Section 106 agreements on individual planning permissions. It was intended to help to fund infrastructure such as:-

- Extra school places
- Road improvements
- Public transport improvements
- Better green spaces

Rotherham's CIL was prepared in tandem with the Local Plan Core Strategy. The strategy included an Infrastructure Delivery Plan summarising what infrastructure was required to support Local Plan growth. Government regulations set out that the Council could only spend CIL income on infrastructure to support the development of its area. It could not be used for general funding. CIL would help to fund this infrastructure, however, the total cost of the infrastructure required (£50m) far exceeded the likely income from CIL (£15m). Therefore, other sources of funding would still be required and the Council will have to prioritise how CIL income was spent.

With the aid of powerpoint Bronwen Knight, Acting Assistant Director for Planning, Regeneration and Transport, and Andy Duncan, Acting Head of Planning and Building Control, provided a presentation which detailed the aim to deliver a local plan development plan to guide all future development.

The presentation covered:-

- Strategy and sites to deliver growth.
- Rotherham Local Plan – Core Strategy.
- Rotherham Local Plan – Sites and Policies.
- Employment Growth Areas.
- Housing Growth Areas – Regulation 123 List.
- Local Plan Housing Sites.
- Why CIL was needed – 83 new housing sites, 36 employment sites and 30,200² m retail floorspace.
- Community Infrastructure Levy – implemented July, 2017.

- Rotherham CIL Documents – Charging Schedule, Regulation 123 List and Instalments Policy.
- Rotherham CIL Charge Rates.
- Rotherham Residential Charging Zones.
- When CIL applied
- When CIL did not apply.
- New Infrastructure.
- Example - RAG rating for schools.
- Regulation 123 List.
- Projected CIL Income – Estimate £14.7 million for the plan period = £1.3 million per year.
- CIL income received to date.
- How CIL spent was spent – Strategic (85%), Local (15%) and Admin (5%).
- CIL spend approval route.
- Payments to Parish Councils.
- CIL and Neighbourhood Planning.
- CIL income due to Parishes.
- How Parishes could spend CIL.
- Parishes supporting development.
- Parish spend of CIL.
- Parish CIL reporting – annual statement.
- Benefits of CIL over Section 106 Agreements.
- Section 106 Agreements.
- Section 106 Account in last five years.
- Section 106 spend in last five years.
- Changes to CIL and Section 106 Agreements.

A discussion and a question and answer session ensued and the following issues were raised and subsequently clarified:-

- ❖ Payments to Parish Councils of either 15% or 25% and whether it was possible to pool together CIL for joint infrastructure projects to get maximum return.

There was scope in the regulations to pool on negotiation to support a scheme.

- ❖ Decision making process for non-parished areas and whether Ward Members could be involved or views sought.

The views of Ward Members would be taken on board.

- ❖ How do Rotherham's CIL regulations compare with others in South Yorkshire.

Other authorities were comparable with Rotherham being a little cheaper than Sheffield and the same as Bassetlaw. Part of the decision for CIL had looked at other areas and demand.

- ❖ Payment of CIL to Parish Councils and whether there were checks and balances on high expenditure items.

Accrued CIL was issued direct to Parish Councils on a six monthly basis and any money owed had to be paid. The only restriction placed on funds was for it to be spent on infrastructure to support local development.

- ❖ CIL would provide financial support for community infrastructure for development in a particular community, but was there any consultation for non-parished areas.

Consultation would take place with local communities, including Ward Members and neighbourhood partnerships and CIL would be provided for those areas.

- ❖ Catcliffe Parish Council's precept would be impacted on with the new Waverley Parish Council. Could the funds due to them from CIL support their revenue to help maximise their loss.

The 15% of CIL due to Catcliffe must be spent on infrastructure development and this would have to be evidenced in the area.

- ❖ Oversight of the regulations and timeframes for CIL would be undertaken by the Housing and Regeneration Programme Delivery Board, but what happened if companies went bankrupt.

CIL had to be paid upfront to safeguard when development began on site. Developers had a certain time limit to notify the Council and in not doing so faced a stringent fine on top of the CIL.

The Housing and Regeneration Programme Delivery Board was not politically influenced or biased and all decisions made were fair and equitable.

- ❖ How were the CIL charging rates determined when supermarkets paid £60 and retail warehouses only paid £30.

The rates for CIL were derived following technical work with consultants about market rates, viability and land costs and looked at typical land values resulting in a benchmark for the borough.

- ❖ For Parishes adopting a neighbourhood plan would parishers pay less precept.

Adoption of a neighbourhood plan would result in a Parish Council being eligible for 25% of CIL. However, this was a separate regime to the parish precept and this would not be affected by the charge.

- ❖ As there were no adopted neighbourhood plans in the Borough payments to parishes were calculated at 15% with up to 5% retained by the Council to cover the cost of applying the charge. Did this 5% come from the strategic or the local CIL.

The Council could potentially use some of the income from CIL to administer at that point. This would be an amount up to 5% and any leftover would transfer into the general pot.

- ❖ Would Parish Councils suffer from paying an administration charge or would they get their full 15% local CIL.

Up to 5% of CIL could be used by the Council to administer the process. At which point the administration charge was deducted would be clarified further.

- ❖ Would affordable housing bought by Local Authority be liable for CIL (example properties in South Anston) and would reducing the number of properties, therefore, reduce the CIL.

Properties would need to meet the defined criteria to be exempt and meet the definition for affordable housing. This would then deem them exempt from a CIL payment.

- ❖ In terms of Parish Council infrastructure works would a cemetery extension fall into this remit.

The monies paid to Parish Councils were somewhat flexible and if it could be evidenced and demonstrated that this was infrastructure then this was within the rules. The Council was happy to work with Parish Councils to help them understand the rules and provide guidance on suggested proposals.

- ❖ Why had it taken six months for CIL payments to commence when the framework was approved in 2017.

There was a six month lead in time for developers and to get the logistics for CIL put into place given the complexities of the software package. These were the reasons for the delay.

- ❖ Why was there no reference to demand and income or mention of increases in the child birth rate.

CIL was directly related to new housing and new employment sites which required new infrastructure to support the development that was going to go ahead.

Local plan sites were directly related to population growth and this was about developers contributing to infrastructure requirements that the Council could collect from this process.

- ❖ Section 106 funds had to be given back if it was not used. Did this apply to CIL money and would this money be used to contribute towards any grants applied for within a pool if CIL money was left for several years.

Section 106 funds for new school places had to be used within five years. In terms of CIL pooled funds there was a grants gap of around £50 million, but CIL would only amount to about £15 million. It could be used as match funding to gain Government grants and maximise the potential for use in communities.

- ❖ If CIL was not spent would this disadvantage communities that did not have a Parish Council or could it just end up in a bigger pot.

CIL money had to be spent on communities. Work would take place with neighbourhoods, Parish Councils and non-parished areas to ensure everyone had a say on how this money was spent in their area.

- ❖ How was it decided on how many houses could be built and when did the charge for CIL commence.

Planning permission would specify how many houses would be built on a development. The CIL charge was made on individual properties.

- ❖ What were the reasons for the differences in charges between the £55 and the £15 larger amount in certain areas.

The scale of charges was based on the viability of that particular area and cost of particular sites. Land values were higher in Wickersley and the values and build costs were determined on how much an area could stand. This was the reason for this tiered charging process.

- ❖ Was there a difference for CIL if land was being sold and additional pieces of lesser value were included.

If both pieces of land were in the same area the same CIL rate was applied, but this was subject to land values and the charges set to make developments more affordable.

- ❖ Why was the CIL charge for Bassingthorpe Farm much cheaper than Wickersley - £55 and £15 was the difference.

- ❖ The Bassingthorpe Farm ground conditions required some remedial work and the building out of this development would require huge infrastructure costs.

- ❖ How was the Rotherham CIL Charging Schedule adopted and were Members involved in the decision making for CIL.
- ❖ The Rotherham CIL Charging Schedule was adopted by Council. Discussion would take place with Cabinet and Ward Members prior to the Housing and Regeneration Programme Delivery Board considered CIL spend. The Board would need some political input, but within an open and transparent process.
- ❖ Was there a rationale behind the breakdown of Section 106 spend by service area as the lowest appeared to be Transportation.

The spend by service area needed SYPTE and Transportation to be considered together. It was normal for £500 to be sought per property towards sustainable travel and the costs were then taken as a whole.

Resolved:- (1) That officers be thanked for their very informative presentation.

(2) That the contents of the report be noted.

(3) That any updates on the progress of Neighbourhood Plans and on the Infrastructure Development Group with Ward Members be reported to the Improving Places Select Commission.

(4) That clarification be provided to the Improving Places Select Commission on the stage at which the administration charges up to 5% were deduced from CIL.

49. **DATE AND TIME OF THE NEXT MEETING**

Consideration was given to the date and time of the next meeting and in doing so the Commission were also asked to give some thought about the Work Plan for 2019/20. Any suggestions should be sent through to the Scrutiny Adviser.

Resolved:- That the next meeting of the Improving Places Select Commission take place on Thursday, 18th April, 2019 commencing at 1.30 p.m.

**IMPROVING PLACES SELECT COMMISSION
18th April, 2019**

Present:- Councillor Mallinder (in the Chair); Councillors Birch, B. Cutts, Elliot, Fenwick-Green, Jones, Khan, McNeely, Reeder, Sansome, Mrs. L. Shears, Vjestica, Walsh and Wyatt and Mrs. W. Birch and Mrs. L. Shears (Co-opted Members).

Councillor Hoddinott, Cabinet Member of Waste, Roads and Community Safety, was in attendance at the invitation of the Chair.

Apologies for absence were received from Councillors Atkin, Buckley, Jepson, Sheppard and Whysall.

The webcast of the Council Meeting can be viewed at:-
<https://rotherham.public-i.tv/core/portal/home>

50. DECLARATIONS OF INTEREST

There were no Declarations of Interest made at the meeting.

51. QUESTIONS FROM MEMBERS OF THE PUBLIC AND THE PRESS

A member of the public raised concerns regarding household waste and flytipping that was taking place in certain areas of the Borough, particularly Ferham, which was having an impact on other householders and their ability to put their own dustbins out for collection. He felt that community skips would help alleviate these problems.

Councillor Hoddinott, Cabinet Member for Waste, Roads and Community Safety, reported that the member of the public had raised similar issues at the recent Cabinet meeting. Councillor Allen, Cabinet Member for Cleaner, Greener Communities, had offered to visit Ferham to look at the specific issues.

52. MINUTES OF THE PREVIOUS MEETINGS HELD ON 14TH FEBRUARY AND 7TH MARCH, 2019

Consideration was given to the minutes of the meetings held on 14th February and 7th March, 2019.

14th February, 2019

Arising from Minute No. Minute No. 42 (Agreement between Dignity Funerals Ltd. and Rotherham Metropolitan Borough Council), it was queried whether the issue of lighting on the East Herringthorpe driveway had been resolved.

Councillor Hoddinott, Cabinet Member for Waste, Roads and Community Safety, reported that the feedback was that it had never worked despite it being in place for some time. Currently the issue was with the Community

Safety and Street Scene Service to look at the requirements and costs to get it working. A report back would be submitted to Dignity.

With regard to the proposed periodic meetings, a meeting of the Funeral Directors Forum had been scheduled for 25th March. However, the funeral directors had stated that they would prefer 1:1 meetings. A series of meeting would commence next month.

The Memorial Masons Registration Scheme had been discussed at a recent Project Liaison meeting. Due to the current Scheme being very out of date, work was taking place on an updated Scheme which would be submitted to the next Project Liaison meeting for discussion. It would include the cleaning of stones on site and environmental aspects with regard to the chemicals used during the cleaning process.

The outcome of the negotiations with regard to the national issue relating to Terms and Conditions of the Coroner's Office was not known. Councillor Hoddinott would endeavour to get a response.

7th March, 2019

Arising from Minute No. 48 (Update on the Rotherham Community Infrastructure Levy, the following clerical correction:-

“Catcliffe Parish Council's precept would be impacted on with the new Waverley Parish Council. Could the funds due to them from CIL support their revenue to help *mitigate the consequences of their loss in the short term*” instead of “maximise their loss” as stated.

It was also queried where/who the fine would go if developers did not notify the Council within the specified time frame. An answer would be sought and fed back to the Select Commission.

Resolved:- (1) That the minutes of the meeting of the Improving Places Select Commission held on Thursday, 14th February, 2019, be approved as a correct record.

(2) That the minutes of the previous meeting of the Improving Places Select Commission held on Thursday, 7th March, 2019, be approved subject to the clerical correction set out above.

53. ROTHER VALLEY CARAVAN PARK

The Chair reported that a briefing had been received on the recently opened Caravan Park which included that the Camp Management Booking System which was now in operation. The system had been “road tested” and found to be customer friendly and easy to navigate.

A full report would be submitted in September/October on bookings and the effects of traffic on the nearby properties

Discussion ensued with the following issues raised:-

- The report should contain customer reviews/experience of the site
- Disappointment that there were only 3 pitches for motor homes when it was becoming more popular
- The update should also include how many potential customers had had to be turned away due there not being the appropriate pitch for their needs
- How could a system be classed as “successfully implemented” when the second part of the system i.e. the actual bookings turning up until the season had been completed?

Resolved:- (1) That the introduction of the Camp Management Booking System be noted.

(2) That a further report be submitted in September, 2019.

54. IMMOBILISATION POLICY

Tom Smith, Assistant Director, Community Safety and Street Scene, reported that the Council had made a decision whereby the Authority could immobilise vehicles of persistent evaders and those who had not paid parking tickets. Where they were subject to 6 or more unpaid PCNs the Authority could now clamp the vehicle and call for assistance in terms of vehicle removal and impound the vehicle. It was much safer for staff and also meant that there was a much stronger enforcement process.

There had been a number of successes since it had been in place and enabled the Service to be much more robust for repeat evaders. There had been a number of people who had been subject to 6 PCNs and paid the fine and not been in same situation again.

The Overview and Scrutiny Management Board had recommended that it be reduced from 6 PCNs to 3. An analysis had been carried out and very shortly there would be a delegated decision to reduce the number down to 4. It was felt that reducing it to 3 PCNs would vastly increase the number of evaders and there would not be the confidence of resource availability to ensure robust enforcement of the policy.

Martin Beard, Parking Services Manager, was in attendance to assist with any questions.

Discussion ensued with the following issues raised/clarified:-

- Monitoring was already taking place. It was the intention that people got the message that they could not avoid paying with the ultimate message that hopefully people had parked properly. It was known how many people fit the categories and would like to see the numbers fall in those categories. It was also known how many people paid and something that was monitored very closely

- The Traffic Management Act clearly set out that an Authority could not hold someone's vehicle to ransom. The Act stated that they had to pay the release fee of £105 plus the PCN that had been issued on the day. The Authority did not let anyone do that until there was absolute certainty as to their identity and address. If every piece of documentation requested could not be provided, the vehicle would not be released and they then incurred storage charges
- A vehicle was stored in the compound for up to 35 days. If a vehicle was not claimed within that time and, if there was a registered keeper, they would be written to giving them 7 days to collect or the vehicle would be disposed of
- It was not known if a person would be allowed to buy the vehicle back if it went to auction and an answer would be sought. The initial reaction was that it could not be prevented
- 2 of the first 8 vehicles that had been removed and impounded had belonged to the same person. The process now gave the Authority a fair and better chance and had already seen a decrease in the number of cases of persistent evaders
- Data could be provided to support the decision to reduce to 4 PCNs and not 3. Limited benchmarking had been carried out due to Rotherham being at the forefront of this approach with others waiting to see how successful it was. There was some information from the British Parking Association but was limited due to the small numbers taking the action
- The removed vehicles were taken to the contractor's compound at Maltby
- It is so successful it has generated income, it may be possible to extend the scheme and reduce to 3 PCNs but there was a need to ensure there was the officer time to do so. Part of the success of the Policy was hopefully that there was less indiscriminate parking and therefore no income generated
- An unpaid parking fine was only unpaid at the point when the full process finished. If someone had appealed a ticket it would not be part of the numbers until the appeal process had finished and proven that the ticket was issued correctly
- The possibility of the services being provided inhouse had not currently been explored. However, it was felt that the constraints of it being a relatively specialist job, having the appropriate kit to remove vehicles and it being relatively sporadic would be cost prohibitive. Whilst there were a number of people who committed repeat offences

there was probably not enough on a daily basis to employ a team or vehicles just on removing vehicles off the street. Since the Authority had started clamping vehicles in January 2019 it had collected approximately £3,000 in release and PCN fees; the cost of the contractor involved in those lifts had been £1,365

- A very specialist vehicle was required to remove vehicles from the highway
- 35 vehicles had been impounded since September 2016-2019, 17 from January 2019 to date

Resolved:- That the update be noted.

55. EMERGENCY PLANNING

Councillor Wyatt gave a verbal update on the Emergency Planning arrangements for the Authority.

The Improving Places Select Commission had undertaken a Scrutiny Review of the arrangements in 2016/17 concluding with 15 recommendations the response to which was reported to the Select Commission in November 2017.

There had been a commitment in the work programme to keep an ongoing overview of the Major Incident Plan and arrangements and progress of the recommendations.

A meeting had taken place with the key officers last month but there were still some gaps but the progress so far was as follows:-

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.**

A date has been provisionally agreed at the end of September/beginning of October 2019 for the final draft of the refreshed Major Incident Plan. The proposal was that a few Members from this Select Commission got together to carry out a desktop look at the final draft before it was submitted for approval.

- 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.**

There had been a couple of training sessions and also flagged up the fact that it was an all-out election in 2020 and that needed to be included for potential new Members.

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.**

There was regular training and reports to the Strategic Leadership Team around that performance.

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.**

Exercise Thunderbird took place in 2019 involving a test scenario around a rail crash and included all elements of the Major Incident Plan. There had also been a cold call exercise which involved testing the availability of people to be able to respond to a Major Incident to ascertain their availability. In some respects that probably was of little value because it was done during working hours. At the end of the month the contact lists would be updated as scheduled.

5. **A targeted approach to recruitment from employees who can be “job matched” to appropriate roles in the operation of the Major Incident Plan.**

There was confidence that there was a good team of Forward Liaison Officers (8 at the moment) and Borough Emergency Co-ordinators that were filled by Strategic Directors. Only permanent contract employees were included.

6. **There are sufficient volunteers to staff the EP for at least two shift changes.**

The recruitment was ongoing.

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.**

There was a lot of joint working taking place with the South Yorkshire Resilience Forum which would hopefully ensure that organisations were keeping each other in the communications loop.

8. **A facilitated meeting/away day involving the emergency services and RMBC major incident staff on the ground to promote team working.**

Again reference to South Yorkshire Resilience Forum. There was a scheduled Gold Symposium, no date as yet for it taking place.

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.**

Some work has been carried out with Parish Councils but somewhat piecemeal. Some Parish Councils were more engaged than others. Work in progress.

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.**

There was confidence that, because of the representations from Finance and Customer Services, everything could be properly recorded i.e. spend, orders etc. Even though representation from Procurement was not in the room there were ties in under the arrangements. This was very important because if there were any subsequent claims through the Belwin Scheme there had to be proof of what the money had been spent on. It was very important that this was covered.

11. **Through the Shared Service Agreement funding is secured for a Community Resilience Worker.**

Still being looked at and conscious that a positive response was down to funding.

12. **The Corporate Risk Manager is involved in the role of a “critical friend” any amendments of the Major Incident Plan**

That has happened.

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.**

Assurance that this was completely included in the Major Incident Plan. Ward Members and Cabinet Members should flow from that notification.

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.**

There were still no regular meetings being held. There needed to be the right people together from Sheffield and Rotherham in terms of governance. The outcome of the forthcoming election in Sheffield was awaited and what the structures in place would be.

15. **The situation relating to the unsupported IT systems is rectified.**

The Emergency Planning Information System (EPIS) has been moved to a newer platform which was a safe and supported system but had some difficulties with regard to updating the information. Luke Sayers, Assistant Director, Customer, Information & Digital Services, was involved.

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

(2) That a small group of Members attend a one-off meeting to carry out a desk top review of the final draft of the renewed Major Incident Plan with relevant officers prior submission to Cabinet.

(3) That an email be sent seeking volunteers for (2) above once a date has been set.

56. REFUSE AND RECYCLING COLLECTIONS SERVICE CHANGES UPDATE

Councillor Hoddinott, Cabinet Member for Waste, Roads and Community Safety, together with Tom Smith, Assistant Director Community Safety and Street Scene, and Martin Raper, Head of Street Scene Services, presented an update on the implementation of the new waste and recycling services across Rotherham.

A video was shown to the Commission - "Household Bin Collection in Rotherham" which was available at www.rotherham.gov.uk/bins.

Since October 2018, the residents of Rotherham had experienced big changes in terms of their bin collections. It had been a huge undertaking to introduce the new garden waste collection and the new black (pink lid) service.

Councillor Hoddinott expressed her thanks to the staff who had worked long hours in making this happen and also to the residents for working through it as well.

Attention was drawn to:-

- Rotherham was one of the lower quartile councils for recycling
- Initial figures were very encouraging - how do we ensure the level of recycling was sustained
- Approximate 27% increase in paper and cardboard collection
- Garden Waste Collection – seeing a rise in subscriptions at the moment. Approximately 35,000 households that had subscribed
- Black bin (pink lid) – reduced the size of the main bin – general waste had reduced by 7%
- Black bins – increased by 50%
- Numerous requests for green and black bins for people to be able to recycle

- Flytipping – there had not been a marked increase. The Authority would continue to pursue and prosecute anyone flytipping
- The next big challenge for the Service was flats. Everyone should have the opportunity to recycle. Although keen to keep to the same system as those in houses it was known that some variances would be required to accommodate some premises. Work had taken place, together with Housing Services, to map all the sites and proposals for each. There would be a Member drop-in on 24th May to enable Members to see what the proposals were for premises in their area before it went out to residents
- It had not just been about the delivery or collection of bins; there had been a new treatment contract to procure, negotiate with existing general waste contractor, purchase of 16 new collection refuse vehicles and a huge amount of communication and engagement work
- The call centre had been under resourced initially but that had been recognised and additional resources put in
- How do we engage further? How do we increase recycling?

Discussion ensued with the following issues raised/clarified:-

- It was still early days in terms of any indicators of the level of contamination of waste:-
 Paper and cardboard – this has been running the longest. The type of contamination seen has been the continuation of garden waste in the bottom with paper on the top. Initially the contamination rate had been quite high but more recently 12% which was getting towards the acceptable level. A lot of work had taken place with the company that took the paper with daily monitoring on the site looking at how they did sampling and processing of the contamination levels. Photographs of any contamination that came through were taken and discussed with the crew and the engagement team targeting the area

 Plastic, cans and glass – it was very early at present. There were higher levels than would have liked, above 15%, and would like to try and improve that. Some of the key items going into the bin had already been identified e.g. film, carrier bags and hard plastic and that was being dealt with that. Areas where the problems were coming from would be identified and target engagement in those particular areas and work with the crews. It was very difficult for staff because it had been easier to see contamination when the waste had been in a blue box
- The figures for increases in recycling had had the levels of contamination taken off them

- There had been a spike in calls to the call centre and it had taken far too long for them to be answered. However, additional resources had been put into the call centre to deal with the increased demand. Details could be provided on the calls as the Head of Service received a weekly update. The last phase of the roll out had seen a peak in calls about middle of February where calls had increased as expected. Since then it had reduced and now running at a similar level of calls at the first week of the programme
- There was a large proportion of people signing up for the Garden Waste online rather than by telephone. Discussions were continuing on how some of the simple waste requests could be available online for members of the public to complete themselves
- Regular events to promote recycling and continued reminding of the public of the importance of recycling. It was important to maintain the momentum that had been introduced through the introduction of the bins
- When a vehicle went into the site for processing, they actually took a load and dissected it so they got an understanding of what was in the load; the percentage of contamination was based on that analysis. A whole load was not contaminated. Not every load was examined; there was a programme for each of the recycling streams that the contractors followed. They took out the contaminants leaving the Service with the recyclable material and then analysed the material giving a full list of the data quantities for the records. The Service used that data to try and understand how it could improve the recycling rates in the future
- Officers had done the analysis before and knew those areas that did not recycle as much. Those areas had been seen targeted action by engagement staff going door to door when the rollout had been taking place
- In terms of complaints, the number could be provided. However, the perception of not being able to manage with a smaller pink lidded bin had been unfounded. The Service was working with a number of households that had more than 5 people in them and those with medical needs that had previously received additional bins
- A lot of engagement work had taken place in some areas. 8-10 places across the Borough had been identified where some additional intensive engagement work had been put in on the ground
- A session had been held with the Complaints Team and Customer Services to look at the complaints that had been received and what issues had been raised. A number had been upheld which were worth looking at as a comparison to give an idea of what was happening. However, the number of complaints received was lower

than expected. Those complaints that were upheld were mostly around missed bin collection

- One of the biggest problems for recycling around flats, maisonettes and complexes was the security of some of the community collection sites and how to protect them. The previous trial in flats had seen a huge increase in recycling particularly in those places that had not had the opportunity to recycle previously. Lessons had been learnt from that. Joint work was/had taken place with Housing staff to engage during the changeover, look at every area and ascertain what was needed to be in place with some requiring proper secure bin storage built in. Members were encouraged to attend the drop-in session to find out the proposals for their area
- The biggest spike of flytipping was between December 2018/January 2019 and was clearly linked to the Christmas period and disposal of large items
- There were vulnerable people out there that required additional support in terms of the service. There were engagement resources available if people needed that support during the transition. There had been discussion with regard to putting a purple flower on bins for Dementia/Alzheimer sufferers and braille for the blind/visually impaired. The idea of the purple flower had not been progressed but a knock system on the bins for the visually impaired so they could tell which bin was which had been explored and the kit ordered. Anyone who was blind or partially sighted could have their bins marked
- There was also the ability for those suffering with Dementia and unable to cope with multiple bins to contact the Service who would attempt to tailor a solution for that individual family
- A recycling challenge would be the chute disposal system which was installed in medium to high rise blocks of flats. It was appreciated that some areas would be more successful than others. Those properties with the chute system in place would be given a communal arrangement for recycling which would be positioned somewhere near to the entrance/car park to where residents would be passing. It was an area of discussion with Housing about how recycling was introduced to see how successful it was with a small number initially. It would be monitored as it progressed.
- During the rollout there had been extremely high winds. The original 240 litre bins had blown over as well as the new smaller lighter pink lidded bins. Crews had been encouraged to place the bins during the rollout somewhere safer i.e. front doors or behind walls but unfortunately they could not be taken down people's paths due to time constraints. Crews would be requested to be considerate in adverse weather conditions

- During the consultation one of the key issues for members of the public was to reuse existing bins so the Authority was not investing too heavily in new bins. As the majority of the Borough already had green bins it had seemed logical to use them for the new paper/card collection service as not everyone would subscribe to the new Garden Collection Service. The re-use of the greens bins had meant the Authority had not had to buy 70,000 additional bins at a cost of £10-15 per bin
- However, there were questions moving forward with regard to the National Consultation which talked about standardisation of colours on bins – what happened to the different bins used by authorities at the present time?
- There was a national conversation and challenge to manufacturers/retailers about the amount of packaging they used some of which were easier to recycle than others
- Would a visit to the Waste Disposal Centre be useful?
- Would be nice to see in the complaints report a “you said we did” section
- If there was a particular issue with the position a bin had been left e.g. preventing someone in a wheelchair from leaving their property, it should be reported to the Service. Most residents who were in need of support signed up to the Assisted Collection Service
- Information could be provided in terms of what could and could not be allowed to be burnt. Domestic household waste which would be classed as a nuisance if it was causing problems to neighbours. The issue of bonfires was not something that had been seen as an issue but it was reliant upon it being reported. There was very clear Legislation to deal with that statutory nuisance from an Environmental Health perspective. There were very strict regulations as to what could and could not be burnt. <https://www.gov.uk/garden-bonfires-rules>
- Was the inclusion of a purple flower on a bin not giving a sign to say there was a vulnerable person? It had been suggested that it was put inside the bin lid
- The brown bin continued to be owned by the Authority. If someone decided they no longer wished to subscribe to the Garden Waste Collection Service, the Service would look to recover the bin and keep it for future use/replacements
- The whole of Rotherham was a Smoke Control Area. You could not and should not be burning waste in your garden

- The law would say that you could not burn garden waste

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

(2) That a visit be arranged for all Members to the Manvers Waste Disposal Centre.

57. DATE AND TIME OF NEXT MEETING:-

Resolved:- That a further meeting be held on Thursday, 6th June, 2019, commencing at 1.30 p.m.

OVERVIEW AND SCRUTINY MANAGEMENT BOARD
30th January, 2019

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

Apologies were received from Councillors Keenan, Mallinder and Sansome.

The webcast of the Council Meeting can be viewed at:-

<https://rotherham.public-i.tv/core/portal/home>

154. MINUTES OF PREVIOUS MEETINGS

Resolved:-

That the minutes of the meetings of the Overview and Scrutiny Management Board held on 17 October, 14 and 28 November and 12 December 2018 be approved as true and correct records of the proceedings.

155. DECLARATIONS OF INTEREST

There were no declarations of interest.

156. QUESTIONS FROM MEMBERS OF THE PUBLIC AND THE PRESS

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

157. EXCLUSION OF THE PRESS AND PUBLIC

The Chair advised that there were no items of business on the agenda that would require the exclusion of the press or public from the meeting.

158. CHILDREN AND YOUNG PEOPLE'S SERVICES BUDGET MONITORING - HIGH NEEDS FINANCE UPDATE AND BUDGET SUSTAINABILITY OPTIONS

Consideration was given to a report which summarised the increase in the number of Education and Health Care Plans, the growth in demand for specialist provision and the financial position in 2018/19 of the High Needs Block of the Dedicated Schools Grant (DSG) and the revised cumulative deficit. The paper outlined the recent growth in volume through increased demand for special educational places and the impact on cost was compared against previous years.

It was reported that the High Needs Block Recovery Plan aimed to bring in-year expenditure in line with the annual budget allocation and focus on a longer term plan which would contribute to reducing the cumulative deficit.

Members sought to understand the complexity of the challenges in the borough and how that compared to other authorities nationally. In response, the Strategic Director explained that the position was dictated by complexity of need. He considered that Rotherham MBC was now able to identify needs more effectively and had experienced a sharper increase in need compared to other areas.

Clarification was sought in respect of the impact of removing 1.5% of the Schools Block funding. In response it was confirmed that there had been an increase and that the Growth Fund was in excess of the needs of Rotherham schools. It was further confirmed that no schools had been adversely affected and there would only be an impact if pupil numbers drop.

Members sought assurances that the approach adopted by the Council was leading to better outcomes for children. The Strategic Director indicated the preference was always to keep children within the borough and in local provision, as there was confidence that outcomes would be stronger. He advised that he was confident in the skill set and capacity in the borough, but counselled that the right level of capacity had not necessarily been enabled at the present time. Too many children and young people were going to specialist providers outside of the borough. To that end, the Strategic Director advised that the Council would want as high a percentage to be in mainstream settings with additional support, which would lead to better outcomes.

Members queried whether any other authorities had sought approval from the Department for Education in Whitehall for disapplications in respect of funding pressures. In response, it was confirmed that a significant number of councils had approached the Secretary of State for Education and an announcement in respect of additional funding had been made in December 2018 with a view to reducing the number of disapplications.

In response to a technical question in respect of accounting, it was confirmed that the Dedicated Schools Grant (DSG) had its own specific reserve, which accrued year on year and was not linked to the General Fund or had any impact on specific reserves.

Members sought to understand the position of the Schools Forum on the paper and how the forum had commented on capacity to support children and young people with special educational needs and disabilities. The Strategic Director confirmed that the Schools Forum had supported the proposal and reflected on the expression of common intent by the Forum and the Strategic Educational Partnership to do better for those students and create new types of provision, with enhanced supported units.

Clarification was sought in respect of how the Council could influence the number of exclusions from school. In response, the Deputy Leader of the Council explained that significant work had been done through the Virtual School on emotionally friendly schools. Training had taken place with individual members staff in respect of emotional health and wellbeing and those schools which had participated had reduced the number of exclusions generally.

Once again, Members sought to understand what alternative plans were in place if the Council did not succeed in achieving the return of children to the borough or if demand outstripped pace. In response, the Strategic Director was very confident that the measures proposed were the right thing to do, however confidence on reducing the whole deficit was difficult to answer, due to unpredictable demand. Members expressed their appreciation for the honesty of the response from the Strategic Director and understood that this was a long challenge. The Deputy Leader also indicated that the Council's approach had his full support.

Resolved:-

That a further report be submitted in six months detailing the progress made against the High Needs Block.

159. EVALUATION OF PUBLIC SPACES PROTECTION ORDER FOR THE TOWN CENTRE

Consideration was given to a report that provided a detailed review of the implementation of the Public Space Protection Order (PSPO) in Rotherham Town Centre and Clifton Park. The report stated that whilst it was encouraging that incidents in the PSPO had continued to decrease, further attention was required in the areas identified as 'hot spots'. Further monitoring and swift enforcement against repeat offenders would also be required, to prevent escalation to nine breaches of the PSPO, as in the case of the individual referenced within the report.

Members noted that the allocation of resources continued to be a challenge and this pressure was likely to increase in the short term. This would challenge officers in respect of maintaining enforcement levels and could lead to short term reductions in enforcement activities. Members were advised that the pressures arising should lead to consideration of the potential use of sporadic, targeted, operations, drawing resource from other areas and focussing on problem times or problem areas.

It was reported that officers had no reason to propose an adjustment of the Public Space Protection Order at this stage and it was recommended that a further formal review was undertaken during the summer of 2020, prior to the order lapsing in October 2020.

OVERVIEW AND SCRUTINY MANAGEMENT BOARD - 30/01/19

In response to a Member question in respect of the data provided, it was explained that the police had changed their method of recording data. This had the effect of skewing the data and it was considered necessary to review longer term trends.

Members queried whether the introduction of the PSPO had led to a dispersal of criminal behaviours to other locations. In response, the Cabinet Member indicated that there were hot spots on the fringe of the town centre, but there was no intelligence to suggest that it had dispersed. It was confirmed that the position would be kept under review and there was displacement from shifting hotspots but that it was not outside the entire area designated with the PSPO.

Clarification was requested in respect of the times of day that offences were being committed and whether that could be linked to the hours worked by officers. In response, it was confirmed that one of the hot spot times was for closing time for bars and pubs from 2300 until 0300 on Fridays, Saturdays and Sundays.

Members sought to understand how the resource deployed to manage the PSPO. It was confirmed that officers from the Council and South Yorkshire Police were responsible for enforcement of the order. It was confirmed that officers from the council and South Yorkshire Police were alive to the peak times for the town centre. The PSPO was an additional tool for enforcement and was being used accordingly. Furthermore it was considered to have been a success to date. Enforcement practices had painted a good picture of the situation in the area and had enabled quick responses to particular behaviours.

Members reflected on the historic concerns expressed by people regarding feeling safe in town centre and queried whether people were reporting that they now felt more secure. In response, it was explained that there had been a slight increases in women feeling safer in the town centre, but more work was required to understand what had driven that perception.

Resolved:-

That a further report evaluating the success of the Public Spaces Protection Order for the town centre be submitted to Overview and Scrutiny Management Board in February 2020.

160. PROPOSED PUBLIC SPACE PROTECTION ORDER - FITZWILLIAM ROAD, ROTHERHAM

Consideration was given to a report which introduced a potential Public Space Protection Order (PSPO) for the area surrounding Fitzwilliam Road, within Rotherham East ward, as a part of the Eastwood Deal that was adopted in November 2017. The report detailed the evidence available to support potential implementation, alongside a proposed

process to meet the legal requirement in relation to due process, including statutory consultation.

The report stated that consideration needed to be given as to whether the overall decline in anti-social behaviour and crime support the need to develop, consult and potentially implement a PSPO. Should the levels identified be sufficient to warrant such activity, then the recommendations based on each potential condition would need to be considered individually. It was noted that consultation and implementation would develop expectations within the local community. It was noted there were already challenges in terms of maintaining a presence in the area and responding to the current demand.

Members sought to understand how the enforcement of the proposed PSPO would be resourced. In response, the Cabinet Member for Waste, Roads and Community Safety confirmed that there would not be additional resources. Existing police and enforcement staff would be used, although the proposed PSPO was about giving them a different tool to use.

Reflecting on consultation, Members recalled the dissatisfaction expressed by a number of people at the previous consultation on the PSPO for the town centre and sought to understand how consultation would be appropriate and target the right people. The Cabinet Member indicated that the consultation process would be in accordance with corporate standards in respect of consultation and engagement.

Resolved:-

That Cabinet be advised that consultation on the proposed Public Space Protection Order for Fitzwilliam Road in Rotherham be supported.

161. YOUTH CABINET/YOUNG PEOPLE'S ISSUES

It was reported that work was underway to prepare for the Children's Commissioner Takeover Challenge meeting of the Overview and Scrutiny Management Board and a date in April would be confirmed in due course. In addition, the Cabinet's response to the recommendations made in respect of work experience opportunities in last year's report was expected to be reported imminently.

The Chair reported that he had attended the Youth Voice Star Awards organised by the British Youth Council on Saturday 19 January 2019. He was happy to report that there had been great success for young people from the borough and officers from Rotherham MBC.

Resolved:-

That the update be noted.

162. WORK IN PROGRESS - SELECT COMMISSIONS

The Chair invited the Select Commission Chairs to provide updates on current and planned activities:-

Health Select Commission

Councillor Evans reported that the Health Select Commission had:-

- participated in the refresh of the Joint Strategic Needs Assessment
- held a workshop session on the Place Plan after discussions in November. Have fed back and awaiting response
- held Quality Accounts meetings for RDASH AND TRFT, which had been very positive meetings.

Looking ahead, Members were due to visit the Drug and Alcohol Action Team at Carnson House that afternoon and on 1 February would hold the quarterly briefing with Health Partners. The next meeting of the Health Select Commission at the end of February would include the annual update on GP services.

Improving Lives Select Commission

Councillor Cusworth reported that the Commission had last met on 15 January 2019 where Members received:-

- an update on Domestic Abuse
- a report on the outcomes of the Rotherham Voice of the Child Lifestyle Survey
- an update on the work towards a Regional Adoption Agency for South Yorkshire
- a report on the progress made against recommendations from Ofsted

The next meeting was scheduled to take place on 5 March 2019 where the following agenda items were scheduled for consideration:-

- Barnardo's ReachOut Service Update and Barnardo's ReachOut Final Evaluation Report
- Progress towards implementation of Phase Two and Phase Three of the Early Help Strategy 2016-2019
- Presentation - Ofsted Annual Conversation Update
- Presentation - Looked After Children Sufficiency Strategy – Update
- Improvement Partner Peer Review of the Looked After Children Service (November 2018)

Improving Places Select Commission

An update was provided on behalf of the Chair and Vice-Chair of the Improving Places Select Commission, which reported on recommendations that had been made in respect of reports for Cabinet on Clean Air Zones and the Immobilisation of Vehicles. Furthermore, the Commission had received an update on Asset Management and had considered the draft Employment and Skills Plan. The February meeting of the Commission was planned to receive representatives from Dignity to review the progress made in respect of the bereavement services contract.

Resolved:-

That the updates be noted.

163. CALL-IN ISSUES

The Chair reported that no Cabinet decisions had been called-in for scrutiny.

164. URGENT BUSINESS

The Chair reported that there were no items of business requiring urgent consideration by the Board.

165. DATE AND TIME OF NEXT MEETING**Resolved:-**

That the next meeting of the Overview and Scrutiny Management Board be held on Wednesday 13 February 2019 at 11.00 a.m. in Rotherham Town Hall.

OVERVIEW AND SCRUTINY MANAGEMENT BOARD
13th February, 2019

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

Apologies were received from Councillors Evans and Sansome.

The webcast of the Council Meeting can be viewed at:-

<https://rotherham.public-i.tv/core/portal/home>

166. MINUTES OF PREVIOUS MEETINGS

Resolved:-

1. That the minutes of the meetings held on 24 and 26 October 2018 be approved as true and correct records of the proceedings.
2. That, subject to the amendment of the recommendation to the Cabinet in respect of the Amendments to the Housing Allocations Policy and the inclusion of comments made by Councillor Brookes in respect of discretionary payments on the Housing Revenue Account Business Plan, the minutes of the meeting held on 16 January 2019 be approved as a true and correct record of the proceedings.

167. DECLARATIONS OF INTEREST

There were no declarations of interest.

168. QUESTIONS FROM MEMBERS OF THE PUBLIC AND THE PRESS

A member of the public introduced himself as Mr Steve Hambleton, Chief Executive of Sheffield Royal Society for the Blind, which was responsible for Rotherham Sight and Sound. He referred to the budget proposals which had been subject to consultation from October until the end of November that had sought to reduce funding from the Council for the services provided by Rotherham Sight and Sound. He was pleased to reflect on the way in which the Council had listened to the representations made during the consultation on the budget proposals and was happy with the outcome of the deliberations with senior officers since the close of consultation. He concluded by urging Members to support the budget proposals that had been presented for scrutiny at the meeting.

The Chair thanked Mr Hambleton for his remarks and was pleased to see that the consultation process had proved to be a listening exercise which demonstrated that the Council was open to feedback and amending proposals.

A question was put by another member of the public in respect of why he had not received a response from the Chair of Overview and Scrutiny Management Board on his request for written clarification on the use of the webcasting technology during meetings of the Board where petitions were being considered or requests from the public to review responses from the Council to petitions were being considered.

In response, the Chair confirmed that he had written to the member of the public earlier that day and apologised for the delay in writing back to him. He further indicated that petitions would continue to be considered in public, but when all representations had been made the Board would ask all present to leave the room during their deliberations, before inviting all to return to hear the outcome and reasons for the recommendations from Members.

In a supplementary question, the member of the public sought clarification from the Chair in respect of why he had not been provided with an explanation of the Council's Complaints Procedure following a question that he had raised at the meeting on 16 January 2019. In response, the Chair indicated that he understood that the individual had met with the Chief Executive and Assistant Chief Executive and had expected that the issue would have been addressed there. As that had not been the case, he would follow up and respond to the individual directly.

169. EXCLUSION OF THE PRESS AND PUBLIC

The Chair reported that there were no items of business that formally required the exclusion of the press or public from the meeting under any paragraph under Schedule 12A of the Local Government Act 1972. However, he was minded to ask the press, public and other attendees to leave the room whilst the Board debated the petitions (minutes 171 and 172 refer) and gave an undertaking that all attendees would be readmitted for the confirmation of the Board's recommendations.

170. PETITION - RE-NAME PUBLIC SPACE IN ROTHERHAM TOWN CENTRE "CHUCKLE SQUARE"

Consideration was given to a petition, which had received 681 eligible signatures under the Council's petition scheme, submitted by *The Rotherham Advertiser* calling for public space in Rotherham Town Centre to be re-named as 'Chuckle Square' in tribute to the brothers, Barry and Paul Elliott, known as "The Chuckle Brothers".

In presenting the petition, Mr. Gareth Dennison from *The Rotherham Advertiser* reflected on the honours conferred by the Council in recent years on The Yorkshire Regiment and Howard Webb through Freedom of the Borough, which had been great town centre celebrations. The area referred to in the petition was where Effingham Street crossed Howard Street in the town centre, outside Boots. Mr Dennison submitted that the petition showed widespread, popular support for the Chuckle Brothers to

be deserving of such a tribute. The idea for the petition had come about following the death of Barry Elliott in August 2018. The Chuckle Brothers had put Rotherham on the map and such a move would literally put the Chuckle Brothers on the map. *The Rotherham Advertiser* had launched the campaign after learning that the Council was looking for ideas to name the square, so it was hoped that there would be no budgetary reason to not proceed with the proposal within the petition. Mr Dennison reflected on the positive, free, media coverage that the town had enjoyed since the petition was launched and specifically in the days leading up to the Board's consideration of the petition. In summary, it was noted that the petition was a light hearted, yet sincere, request to honour the legacy of The Chuckle Brothers and after a rough few years, Mr Dennison, surmised that Rotherham could "do with a chuckle."

The Chair thanked Mr. Dennison for his contribution and invited officers to provide comment. The Acting Assistant Director of Planning, Regeneration and Transportation indicated that there was no formal position from officers in respect of the request made in the petition. A technical explanation was provided to Members in respect of the process followed in naming streets or locations.

It was reported that a representation had been received by the Chair which opposed the request made within the petition. The Chair read the representation to the meeting. Mr. Dennison noted that he could have supplied many comments from those in support of the proposal in the petition, which he would have been happy to have shared with the Board.

After a period of deliberation, the Board had regard to the submissions made during the meeting on behalf of *The Rotherham Advertiser* and recognised the strength of feeling that had been expressed through the petition and other media in respect of the contribution of Barry and Paul Elliott, as the Chuckle Brothers, to the reputation of the borough. Members indicated that they were keen to see the positive contribution made by The Chuckle Brothers acknowledged. As Members were aware of a family connection to Maltby, it was been proposed that the Strategic Director of Regeneration and Environment consider naming a street, children's play park or other public space as a tribute to the Chuckle Brothers. Members noted that new housing developments in Maltby would provide an opportunity to realise such a tribute in the near future and that when named, the "To Me, To you" signpost designed by *The Rotherham Advertiser* should be incorporated within the location.

Resolved:-

1. That the Strategic Director of Regeneration and Environment be recommended to consider naming a street, play park or public space in Maltby in tribute to The Chuckle Brothers.
2. That the Strategic Director of Regeneration and Environment be recommended to include a signpost designed in the same fashion

as submitted by *The Rotherham Advertiser* with the iconic catchphrase “To Me To You” marking the location.

3. That no further action be taken in respect of the petition.

171. PETITION - ZEBRA CROSSING ON VICTORIA STREET, KILNHURST

Consideration was given to a petition, signed by 1,379 people, which called on the Council to change a zebra crossing on Victoria Street, Kilnhurst, to a pelican crossing.

Representations supporting the petition were made by Mr. Steve Straw who provided a brief history of the issues faced by pedestrians at the location over a number of years since the zebra crossing was installed over thirty five years ago. He explained that Victoria Street was a principal route connecting to Doncaster, the A1 and M18 motorways and, as such, there was a heavy level of traffic using the road which had led to a number of accidents over the years. Reference was made to the presence of a primary school, nursery and other amenities near to the location of the zebra crossing and that there was a lack of confidence amongst the local community that drivers would stop at the zebra crossing if a child attempted to cross the road.

In summary, the petition had been gathered by approaching the local community for their signature and support, rather than making use of social media or e-petitioning. Mr. Straw felt that Members should have regard to this strength of feeling in considering the petition and actively support the installation of a pelican crossing to replace the extant zebra crossing.

In a question to the lead petitioner, Members sought to establish if a crossing patrol warden was in place at the zebra crossing at the beginning and end of the school day and the number of accidents at the location. In response, Mr. Straw confirmed that there was no longer a patrol warden and he understood there to have been three accidents at the location in the past couple of years. Following on from Mr. Straw's remarks, Councillors Cusworth and Wyatt provided some further clarification in respect of the crossing patrol warden position and the efforts of ward councillors to contribute devolved budgets to the funding of an ongoing patrol presence.

The Chair read a letter of support for the petition from Councillor Sansome, a ward councillor in the neighbouring Swinton ward, who was unable to attend the meeting.

Matthew Reynolds, Transportation Manager, responded to the points raised by the lead petitioner and explained that road safety was an important issue and that officers wished to work with the petitioners and the local community to examine what could be done to address the issues raised. He indicated that tube surveys were already in place at the

location to establish data in respect of the volume of traffic, as any decisions to spend money to make changes had to be supported by a strong evidence base. Furthermore, reference was made to regulations from the Department for Transport, supported by Council policy, which were rigorous in assessing the appropriateness of siting zebra or pelican crossings. Other considerations were environmental factors, proximity to junctions, movements associated with nearby bus laybys and widths of footpaths, but the most relevant determinant would be the speed of vehicles approaching the location and the speed survey would be most critical piece of evidence in deciding what action to take. It was confirmed there were no recorded accidents at the location in the past five years, however there had been accidents on Victoria Street that were not related to the zebra crossing and there was no statistical significance arising from national statistics to suggest that a pelican crossing would be safer for pedestrians than a zebra crossing.

The Lead Petitioner asked how school children would be able to cross the road safely if no pelican crossing could be installed and without a crossing patrol warden. In response, officers confirmed that a number of initiatives had been introduced including a humped crossing, upgraded Belisha beacons and wider environmental initiatives. Reference was also made to driver awareness with better usage of signage and parking restrictions to improve visibility on the approach to the crossing. It was confirmed that all of the aforementioned issues would be considered again in response to the petition.

Members queried whether any analysis had taken place in respect of the feasibility of converting to a pelican crossing at the location in view of the traffic lights on the humpbacked bridge further up Victoria Street. In response, it was explained that there were stringent guidelines in respect of the installation of pelican crossings, although it was anticipated that this proposal would fit within those guidelines, but further investigation would confirm that.

Reference was made to driver behaviour and it was considered that this might be a significant issue with drivers speeding to get through the green light at the traffic lights on the humpbacked bridge on Victoria Street. Furthermore, clarity was provided from Members that data would only be available from recordable accidents, rather than the anecdotal information concerning accidents which local residents would be more familiar with. In response, officers confirmed that decision making would be based on statistics, evidence and data.

Members queried the extent to which the Public Health function worked with the Transportation service to improve road safety. In response it was confirmed that the two services did work together, but it was principally to support walking and cycling initiatives. In view of the suggestion made by Members, officers agreed to investigate further the feasibility of using these funds to improve road safety.

The Chair invited the Lead Petitioner to submit further questions to officers in respect of the period of time that data would be collected. It was anticipated that the data would be collated and available for analysis by April 2019.

After a period of deliberation, having considered the representations made by the lead petitioner and information supplied by officers, Members recognised the concerns of the people of Kilnhurst regarding road safety on the zebra crossing on Victoria Street. To this end, Members recommended that officers fully investigate the request within the petition and report back to the Improving Places Select Commission at the earliest opportunity.

Resolved:-

1. That the petition be supported.
2. That the Strategic Director of Regeneration and Environment investigate fully the feasibility of installing a pelican crossing at the location on Victoria Street, Kilnhurst, in line with the request made within the petition.
3. That the outcome of the investigation be reported back to the Improving Places Select Commission at the earliest opportunity.

172. BUDGET AND COUNCIL TAX 2019/20 AND MEDIUM TERM FINANCIAL STRATEGY

Consideration was given to a report which was due to be considered by the Cabinet meeting on 18 February 2019 that proposed the Council's Budget and Council Tax for 2019/20. The proposals were based on the outcome of the Council's Final Local Government Finance Settlement, budget consultation and the consideration of Directorate budget proposals through the Council's formal Budget and Scrutiny process alongside a review of the financial planning assumptions within the Medium Term Financial Strategy.

In setting the proposed 2019/20 budget, the report sought Cabinet's endorsement of a recommendation to Council an increase of 2.99% in the Council's basic Council Tax. The report contained proposals to balance the revenue budget for both 2019/20 and 2020/21. The Budget and Council Tax Report 2018/19 highlighted the need to address a £30m financial gap over the period 2019/20 and 2020/21.

The Leader of the Council and Cabinet Member for Corporate Services and Finance attended the meeting to respond to specific queries from Members in respect of the proposals.

Assurances were sought by Members in respect of how realistic the proposals were for reductions in the numbers of looked after children by 2020-21, which predicated significant savings within the budget proposals. In response, it was explained that extensive benchmarking had taken place of practice in other authorities where Children and Young People's Services had been in a process of recovery and the analysis provided confidence that the numbers in the report were achievable whilst maintaining the safety of the child. Assurances had also been provided by professionals based on the best information available and the service was moving in the right direction in reducing costs.

Members sought assurances in respect of monitoring and evaluation in respect of the proposed increase associated with independent adult care sector provision. In response, the Leader expressed the view that there was no reason to believe that the proposal would have an adverse impact. He further reflected on the financial pressures facing the sector, however it was noted that there was presently an over provision within the borough in respect of independent adult care.

Reference was made to the report indicating that the Council would pursue a more commercial and outward facing approach to doing business, generating income and leveraging the resources and assets of partners in the borough. Members sought to understand exactly what that meant. In response, the Leader confirmed that the authority would continue to pursue projects from previous years which would take time to be realised. In a supplementary question, reference was made to the work done in Trafford to improve the Sunday market which revolved around an excellent food offer and whether the Council had given consideration to introducing something similar within the borough. In response, the Leader did not believe that anything specific had been considered, but reminded Members of the existing on-street market which traded at a surplus for the Council.

Assurances were sought in respect of the proposed capital expenditure on Microsoft Office 365, which was significant in value and in terms of its impact on every service, officer and Member of the Council. An explanation was provided to the Board regarding the rationale for the project and the purchase of software licences for the product. Further assurances were provided in respect of Cabinet Member and senior officer oversight and reporting on the implementation of the project.

Reflecting on previous recommendations from Overview and Scrutiny Management Board, the Leader provided a synopsis of the consultation process in respect of the budget proposals, the methodology and how effective social media had been in increasing contact and engagement on the proposals. Whilst there remained lessons for the future, the general feeling was that the process had improved on previous years.

Resolved:-

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

173. COMMISSIONING AND PROCUREMENT OF A NEW DELIVERY MODEL FOR HOME CARE AND SUPPORT SERVICES

Consideration was given to a report which provided an overview of the current home care and support service in Rotherham, particularly the state of the local market in terms of ability to meet current demand for service and the pressures faced by providers. The report highlighted the case for change, before focusing on the key principles and approaches that would underpin a new delivery model for home care and support services. Those principles were proposed to be incorporated into a new service specification produced following a co-production exercise with a range of stakeholders. The intention was therefore to procure a new model of home care and support through a competitive tender process, with alternative service arrangements in place from November 2019.

Members sought clarification in respect of how the service would recruit, train and retain young people to make this an attractive career option. In response, it was explained that conversations were ongoing with local colleges in respect of promoting health and care diplomas and reference was also made to the career routes through the NHS which would enable carers to progress to becoming nurses.

Assurances were also sought in respect of how consistency of standards would be achieved across the borough with different providers. In response, it was explained that dialogue would be ongoing with providers as consistency was really important. The Council's contract compliance function would ensure that there would be consistency in respect of training, recruitment and safety, as it was part of the authority's statutory role to ensure that the local market was well developed and properly managed.

Members commented that the report read more like a specification of requirements rather than a process of system design and sought assurances that the Target Operating Model was sufficiently developed to use as a basis for contracts in the coming years. In response, the Strategic Director confirmed that the new operating model would cover the whole service and providers needed to be thinking differently, which would represent a cultural challenge for them given that the new model required new ways of working. Specifications and contracts would be drawn up with new providers to build in flexibility so that the Council could make changes as required.

Further assurances were sought in respect of the buy-in from frontline staff for the proposals and it was confirmed that they had been involved in the core design of the proposals.

Members sought assurances that risks arising from Brexit which may impact on workforce numbers had been considered. In response, it was confirmed that the challenges posed by the exit from the European Union in respect of workforce in the care sector required national consideration and response. There were concerns regarding the fragility of the home care market, but the model proposed was designed to address systemic issues and develop the attractiveness of the sector with a career path for younger people to follow.

It was confirmed that the contracts were anticipated to be in place by November 2019, however the procurement process for this needed to commence in April 2019. On this basis, Members agreed that the Health Select Commission should receive an update on performance outcomes from the contract after twelve months of operation in November 2020.

Resolved:-

1. That Cabinet be advised that the recommendations be supported.
2. That performance outcomes in respect of the contracts be reported to the Health Select Commission in November 2020.

174. URGENT BUSINESS

The Chair reported that there was no business requiring urgent consideration by the Board.

175. DATE AND TIME OF NEXT MEETING

The Chair reported that he had consented to the cancellation of the planned next meeting on 20 February 2019 and it was therefore

Resolved:-

That the next meeting of the Overview and Scrutiny Management Board be held on Wednesday 13 March 2019 at 11.00 a.m. in Rotherham Town Hall.

OVERVIEW AND SCRUTINY MANAGEMENT BOARD
13th March, 2019

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

Apologies were received from Councillors Sansome.

The webcast of the Council Meeting can be viewed at:-

<https://rotherham.public-i.tv/core/portal/home>

176. MINUTES OF THE PREVIOUS MEETING HELD ON 13 FEBRUARY 2019

Resolved:-

That the minutes of the previous meeting held on 13 February 2019 be approved as a true and correct record of the proceedings.

177. DECLARATIONS OF INTEREST

There were no declarations of interest.

178. QUESTIONS FROM MEMBERS OF THE PUBLIC AND THE PRESS

A member of the public asked the Chair about the effectiveness of Democratic Services on a scale of 1 to 10, with 10. In response, the Chair indicated his confidence in the service and the support provided to elected Members. As a supplementary question, the member of public asked the Chair how he rated the performance of officers and the complaints procedure after it had taken six and a half months for his complaint to reach stage 2 of the Corporate Complaints Procedure. In response, the Chair indicated that he could not comment on individual cases and reminded the member of the public that he had followed up concerns on his behalf previously, which the Chair understood to have been followed up with officers.

A member of the public asked the Chair why the webcasting equipment was not used during the Board's deliberations of petitions and requests to review petition responses where the subject matter was not considered to be sensitive. In response, the Chair indicated that he had taken the decision in respect of webcasting, as he did not consider it appropriate to discuss concerns regarding decisions taken by officers publicly. Any deliberation would be followed up with a public record of the outcome of the deliberation and the reasons for any recommendation. It was consistent practice that discussions concerning individuals would be undertaken privately and he would continue to uphold that practice.

A member of the public asked a question concerning the Council's responsibilities and those of other public bodies in respect of protecting individuals from slavery. In response, the Chair indicated that the Council had adopted a policy on Modern Slavery in 2018, however he would ask an officer to respond directly to the member of the public in respect of the specific concerns raised.

179. 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 agenda item 7 (Site Cluster Programme Amendments) 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

180. AREA HOUSING PANEL REVIEW

Consideration was given to a report submitted by the Strategic Director of Adult Care, Housing and Public Health which was due to be determined by the Cabinet at its meeting on 18 March 2019, which set out the basis for a review of the current Area Housing Panel arrangements, in the context of the new neighbourhood working approach.

The report proposed that the current geographical arrangements for Area Housing Panels should be reviewed and recommendations brought forward for Cabinet consideration later in the year. The report also referred to the current arrangements for the allocation and governance of the annual Area Housing Panel budget and the options considered for the structuring of the budget from 2019/20, including revised governance processes.

The Board were keen to further understand the administrative arrangements supporting the allocation of monies and the governance processes that would be followed. Assurances were sought for Members and Area Housing Panels to receive appropriate training and support. In response, the Cabinet Member for Housing indicated that the majority of training, support and awareness raising would be undertaken with elected Members. This would be addressed in the further report proposed to be considered by Cabinet, but it was acknowledged that there needed to be stronger governance processes around Area Housing Panels on a ward level.

Assurances were sought in respect of the procedures in place to ensure that the additional monies would be spent on council properties rather than other priorities in wards. In response, it was confirmed that guidance was in place to assist Members, officers and residents. It was confirmed that there should always be a substantial benefit for tenants associated with any proposal.

Clarification was sought in respect of whether officers or Members had decision making responsibility on the spend of funds. In response, the Cabinet Member for Housing confirmed that the priority would be remain legal at all times and the Housing Revenue Account would be audited annually. In the event of there being an issue or disagree, it would be referred to the Assistant Director of Housing Services and the Head of Service who would provide guidance for Members to consider. Following up, the Chair sought assurances as to who would provide final approval to spend funds. It was confirmed in response that funding would be allocated to each ward and it would be looked at with ward Members to fit in with Ward Plan priorities. The Cabinet Member confirmed that the governance arrangements needed further consideration. In the event of a dispute, there would need to be honest conversations to achieve a consensus so that monies could be allocated accordingly.

Members sought to understand what work would be undertaken with tenants before changes were implemented, as the proposals could be seen as a move to take power away from them. The Cabinet Member for Housing indicated that a significant amount of consultation had taken place with the Housing Involvement Panel and the Quality & Standards Steering Group. The feedback to date had indicated that tenants were supportive of the proposed move to a ward based model.

Members were broadly content with the proposals in the report, commenting that the recommendations were fair and the levelling out of funding per ward was the right course of action. However, concerns remained in respect of the lack of clarity as to who would ultimately be responsible for decision making and this would need to be confirmed before the proposals were implemented.

Resolved:-

1. That Cabinet be advised that the recommendations be supported.
2. That the second report in respect of arrangements for 2020/21 and beyond be brought for scrutiny prior to consideration by Cabinet
3. That the governance arrangements and clarity in respect of delegated decision making be addressed in the future report to be considered by Cabinet

181. SITE CLUSTER PROGRAMME AMENDMENTS

Consideration was given to a report submitted by the Strategic Director of Adult Care, Housing and Public Health which was due to be determined by the Cabinet on 18 March 2019 concerning proposed amendments to the Site Cluster programme which was increasing and accelerating the amount of new housing in Rotherham. Members noted that, at the point of reporting to Cabinet in 2017, the total scheme cost could only be

estimated. Given that the sites concerned were extremely challenging and extensive ground remediation work had been necessary to make them developable. Other unforeseeable costs had arisen from utilities diversions and an industry-wide increase in the cost of materials and labour. The report to Cabinet in July 2017 stated that in order to protect the Council from exposure to a situation where the amount exceeded the amount authorised, the development agreement provided the Council with the ability to reduce the number of units built on the final site. The report indicated to Cabinet that the authority needed to decide whether to reduce the programme to ensure the original budget was not exceeded, or to increase the budget to enable all 217 homes to be built, and Rotherham to receive the full range of benefits afforded by the partnership. The report recommended the latter approach.

It was reported that the Council and its Employer Agent, Rider Levett Bucknall, had challenged and scrutinised all costs presented by Wates and a range of efficiencies had been identified. The remaining risks had been analysed and a realistic maximum price had been calculated. If a decision was reached to increase the budget, there would be two further options to consider. One option was to continue with the current contractual arrangements. If any savings were identified, the final cost could potentially fall below the revised budget figure. However, the Council would bear the costs associated with any further risks that materialise for example as a result of the UK's exit from the European Union or adverse weather conditions. Alternatively, the Council could renegotiate the contract to a fixed, guaranteed maximum price contract, which would ensure no further risk of cost increases for the Council. This was the recommended approach.

Members were encouraged to see due diligence being undertaken in the management of the project, with measures devised to manage the risks associated. Whilst risk appetite was high at the outset of the project, it was evident that things had not progressed as had been intended and the approach now was to minimise the risk associated with the programme. Members sought assurances that the risk appetite had been lowered in the light of this experience and whether there was a commitment to pursue fixed price contracts in future. In response, the Cabinet Member for Housing indicated that a lot of lessons had been learned from this experience. The approach had been adopted as the Council was directly delivering homes and there was commitment the authority's leadership to make sure that they were built. It was accepted that there would be less risk with the proposed approach and more information would be provided in future before financial terms would be presented for approval. Assurances were provided that lessons had been learned and officers were clear on the need to provide as much information as possible and clearly assess risk.

A further question was put in respect of why the Council was not doing more to deliver housing directly. In response, the Cabinet Member for Housing indicated that there would be further reports coming for to Cabinet for determination that would propose to do exactly that. However, a point would be reached where there would no longer be sufficient monies available from the Housing Revenue Account and this would limit what more could be done in future.

Members sought assurances as to what work had been undertaken with Finance and Procurement to ensure that there would not be further spike in costs associated with the programme. Officers reiterated that lessons had been learned and there was a needed for a sizable contingency in the programme. Some increases referred to in the report had taken account of inflation and the costs of labour, but other costs could not be identified until the ground had been dug to establish conditions. With regard to assurances, officers were scrutinising every line of the project with Wates and believed the majority of risks to be known and anticipated no further increases.

Clarification was sought in respect of what lessons had been learned from experience. The Cabinet Member for Housing confirmed that multiple lessons had been learned, including the need to establish as much information as possible before agreeing the financial envelope and the need to hold developers to account much more. It was also noted that the tender process needed to be much clearer, but officers had taken a lot of learning from the project and a number of measures had been put into place as a result.

Members asked a number of questions concerning the financial information set out in the exempt appendix to the report. Assurances were provided by officers in respect of the robustness and reliability of the information provided.

The Board were satisfied with the proposed approach detailed within the report, but were also keen to ensure that the learning from the project, specifically in respect of tendering and contract arrangements, were shared broadly across the Council to ensure that this was built into future major contracts and procurement processes.

Resolved:-

1. That Cabinet be advised that the recommendations be supported.
2. That the Section 151 Officer be requested to share the learning from this project in respect of the tender and contract agreement process, to ensure that larger scale projects undertaken across the authority are well managed and controlled.

182. EUROPEAN UNION EXIT RISK ASSESSMENT AND CONTINGENCY PLANNING

Consideration was given a report which provided:-

- a briefing about progress towards the anticipated departure of the United Kingdom (UK) from the European Union (EU) including potential scenarios
- an assessment of issues and potential risks to the people and economy of Rotherham associated with the UK exit from the EU.
- an overview of the contingency planning undertaken by the Council and its partners in response to potential risks associated with EU exit.

The report reflected that there had been much uncertainty about how the UK would leave the EU and the clarity anticipated by autumn 2018 had yet to be realised. EU exit presented a significant change which would have economic and social consequences across the UK, including Rotherham. The Council had sought to identify and address the local risks through contingency planning based on potential scenarios, notably a 'no deal' EU exit where the impact and risks would be greatest. It was noted that EU citizens would need to apply for settled status and the Council and partners would support this process with the Home Office.

Clarification was sought from Members in respect of how EU citizens would be informed of the need to apply online for settled status and how the Council would be assisting them. In response, officers confirmed that there was a central government information campaign which was targeted across the country, which was anticipated to inform the majority of EU citizens. Within Rotherham, a communications strategy was being developed by the Council which would complement the central government campaign.

Members sought assurances from an emergency planning perspective and the extent to which the community had been included in the planning. In response, officers confirmed that emergency planning was critical for statutory and public bodies and a tactical process had taken place to check and challenge business continuity plans. Officers were assured that the Council was doing as much as possible. Furthermore, the Assistant Chief Executive explained that had been very difficult to communicate to the community around the EU Exit process, however there were a number of voluntary sector organisations that had been working closely with EU citizens around the challenges on how they feel. Whilst this had not been comprehensive, it needed to be noted such engagement had taken place. It was clarified that there was a separation between major incident plans and business continuity, therefore town and parish councils were not part of the business continuity process.

Clarification was sought as to the number of EU citizens in the borough and whether they had self-declared. In response, officers confirmed that the numbers quoted were an estimate, as any EU citizen could come to Rotherham. However, the sources used for the calculation were the 2018 Schools Census, Allowances for Pre-School, and the 2017-18 Annual Population Survey. In response to a question concerning the number of ex-patriots who might return to Rotherham following the EU Exit, it was explained that there was no data available to suggest what those numbers would be. There was no intelligence available to suggest that there would be an influx of people returning from the EU.

Members acknowledged that there was no precedent for the process of exiting the EU and consequently the robustness of business continuity plans would be critical. It was noted that the risks associated with business continuity and Brexit had been raised by the Audit Committee during the last twelve months and Members' view had been that there needed to be a joint agency approach to respond to the challenges presented. Concerns were also raised in respect of the Sheffield City Region and the impact of the loss of structural funding currently provided by the EU.

Assurances were sought on the impact of EU Exit on Council services and staffing arrangements. In response, officers explained that there would be changes in legislation which would impact on policy, which were principally thought to relate to environmental issues, however, the full extent would not be known until the arrangements for exiting the EU were confirmed. With regard to staffing, the authority would continue to have its role in emergency planning and civil contingencies, but this would be more of a leadership and coordinating role.

Reflecting on community tensions, Members indicated their concern around the potential for increases in hate crime and sought assurances in respect of what the Council and its partners were doing to mitigate that. In response, officers explained that there had been a lot of work put into monitoring community tensions, which had been led by South Yorkshire Police, but had been undertaken on a partnership approach. Members were advised that if they were aware of tensions, this could be fed into partners for monitoring and action as required. It was acknowledged that there needed to be broader engagement with Members and a need to share more information.

Following on, Members raised concerns about anger that they were encountering in the community generally and sought assurances around what the Council would do to ensure that Members were safe. In response, officers explained that a review of personal safety would be offered by Democratic Services through a completion of a risk assessment of ward surgeries and other community meetings that Members attend. It was noted that a training session on Personal Safety was due to take place later in March 2019 and all Members were encouraged to attend. Reference was also made to the need to review the provision of

information which be considered as 'sensitive interests' on Members' Register of Interests forms and the action to remove such information to protect Members' personal safety.

Reference was made to the diversity of the workforce supporting adult social care across the borough and clarification was sought as to the work being undertaken to ensure that people's lives would not be adversely affected if care homes struggled to retain and recruit. In response, officers confirmed that work had taken place with the health and social care sectors and contract managers were being supported. It was understood that there was not a significant proportion of the care workforce that would be affected by the EU Exit and consequently there was not expected to be a significant impact in the borough.

Assurances were sought from Members in respect of the capacity of the authority to deliver a referendum or other unplanned, borough-wide electoral event. In response, officers confirmed that Electoral Services were prepared to deliver any electoral event as required.

Resolved:-

1. That the content of the report and potential risks associated with EU exit be noted.
2. That the work undertaken by the Council and partners on contingency planning in response to risks associated with EU exit be noted.
3. That risk assessments in respect of personal safety be provided for Members' Ward Surgeries.

183. URGENT BUSINESS

The Chair reported that there were no items of business requiring the urgent consideration of the Board.

184. DATE AND TIME OF NEXT MEETING

Resolved:-

That the next meeting of the Overview and Scrutiny Management Board be held on Wednesday 27 March 2019 commencing at 11.00 a.m. in Rotherham Town Hall.