

# AGENDA

## Cabinet

Date:	Thursday 20 October 2011
Time:	2.00 pm
Place:	The Council Chamber, Brockington, 35 Hafod Road, Hereford
Notes:	Please note the <b>time, date</b> and <b>venue</b> of the meeting. For any further information please contact:
	Sally Cole, Committee Manager Executive Tel: (01432) 260249 Email: scole@herefordshire.gov.uk

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## Agenda for the Meeting of the Cabinet

## Membership

Chairman

**Councillor JG Jarvis** 

Councillor AJM Blackshaw Councillor PM Morgan Councillor RJ Phillips Councillor PD Price Councillor DB Wilcox

## **GUIDANCE ON DECLARING PERSONAL AND PREJUDICIAL INTERESTS AT MEETINGS**

The Council's Members' Code of Conduct requires Councillors to declare against an Agenda item(s) the nature of an interest and whether the interest is personal or prejudicial. Councillors have to decide first whether or not they have a personal interest in the matter under discussion. They will then have to decide whether that personal interest is also prejudicial.

A personal interest is an interest that affects the Councillor more than most other people in the area. People in the area include those who live, work or have property in the area of the Council. Councillors will also have a personal interest if their partner, relative or a close friend, or an organisation that they or the member works for, is affected more than other people in the area. If they do have a personal interest, they must declare it but can stay and take part and vote in the meeting.

Whether an interest is prejudicial is a matter of judgement for each Councillor. What Councillors have to do is ask themselves whether a member of the public – if he or she knew all the facts – would think that the Councillor's interest was so important that their decision would be affected by it. If a Councillor has a prejudicial interest then they must declare what that interest is. A Councillor who has declared a prejudicial interest at a meeting may nevertheless be able to address that meeting, but only in circumstances where an ordinary member of the public would be also allowed to speak. In such circumstances, the Councillor concerned will have the same opportunity to address the meeting and on the same terms. However, a Councillor exercising their ability to speak in these circumstances must leave the meeting immediately after they have spoken.

## AGENDA

	AGENDA	Pages
		<b>3</b>
1.	APOLOGIES FOR ABSENCE	
	To receive any apologies for absence.	
2.	DECLARATIONS OF INTEREST	
	To receive any declarations of interest by Members in respect of items on the Agenda.	
3.	MINUTES	1 - 2
	To approve and sign the minutes of the meeting held on 15 September 2011.	
4.	YOUTH JUSTICE PLAN	3 - 24
	The Youth Justice Plan is prepared on an annual basis on behalf of Herefordshire Council and Worcestershire County Council. The basic plan preparation is undertaken by the Youth Offending Service according to the deadlines and guidance from the Youth Justice Board for England and Wales (YJB).	
5.	NEW CHARTER 2011	25 - 40
	To approve the New Charter 2011 between Herefordshire Council and Local Councils in the County.	
6.	HEREFORDSHIRE PUBLIC SERVICES PARTNERSHIP GOVERNANCE	41 - 52
	This paper describes the current governance for the Herefordshire Public Services (HPS) partnership and proposes revised arrangements for the future, to reflect the national changes to health commissioning and health and well being and the new Clinical Commissioning Group, Herefordshire Health-Care Commissioners (HHCC). A similar paper is being presented to the NHS Herefordshire Board on 19 October and the HHCC Board on 25 October 2011.	
7.	INTEGRATED CORPORATE PERFORMANCE REPORT	53 - 90
	To provide Cabinet with an overview of performance against the Joint Corporate Plan 2011-14 for the first five months of 2011-12.	
8.	LOCALITY ASSET REVIEW AND ACCOMMODATION PROGRAMME	91 - 96
	To note progress made on locality asset reviews (including the Hereford Accommodation Programme) and to endorse the proposed master plan and work programme within each locality including the accommodation solution for Herefordshire Public Services (HPS) back office staff in Hereford as part of the Hereford City locality.	
9.	ESTABLISHING THE EVIDENCE BASE FOR COMMISSIONING	97 - 100
	To present the 2011 Joint Strategic Needs Assessment and State of Herefordshire Reports, and provide an overview of the work being undertaken across HPS to develop an overall Integrated Needs Assessment.	
10.	DIRECTOR OF PUBLIC HEALTH ANNUAL REPORT 2011	101 - 120

	To inform the Cabinet of key population health issues in Herefordshire and of the recommended strategies and actions to address these as set out in the Annual Report of the Director of Public Health – 2011.	
11.	BUDGET MONITORING REPORT 2011/12	121 - 140
	To report the forecast financial position for both revenue and capital to 31 August 2011 and provide an update on Directorates' recovery plans IN PLACE to address projected overspends.	
12.	REVIEW OF PARLIAMENTARY CONSTITUENCIES	141 - 146
	To explain to the Cabinet the Boundary Commission for England's proposals for new Parliamentary constituencies in Herefordshire and to ask if it wishes to make representations to Council on the Boundary Commission's proposals as they affect the Herefordshire Parliamentary constituencies.	

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## HEREFORDSHIRE COUNCIL

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HEREFORDSHIRE COUNCIL

## MINUTES of the meeting of Cabinet held at The Council Chamber, Brockington, 35 Hafod Road, Hereford on Thursday 15 September 2011 at 3.00 pm

Present: Councillor JG Jarvis (Chairman)

## Councillors: AJM Blackshaw, PM Morgan, PD Price and DB Wilcox

## In attendance: Councillors H Bramer, MAF Hubbard, JA Hyde, TM James, RI Matthews, NP Nenadich and GJ Powell

## 119. APOLOGIES FOR ABSENCE

Apologies for absence were received from Councillor RJ Phillips, Cabinet Member Enterprise and Culture.

## 120. DECLARATIONS OF INTEREST

There were no declarations of interest made.

## 121. MINUTES

## **RESOLVED:** That the Minutes of the meeting held on 28 July 2011 be approved as a correct record and signed by the Chairman.

## 122. LOCAL DEVELOPMENT FRAMEWORK REVISED PREFERRED OPTION: CONSULTATION AND COMMUNITY POLL

The Leader of the Council introduced the Local Development Framework report and emphasised that the report was for the consideration of the most appropriate way forward for the consultation process and the community poll, and was not about debating the Local Development Framework itself. That would be discussed at the Council meeting considering the final Core Strategy. He added that it was proposed that the consultation would be held between 26 September and 28 November 2011.

The main points discussed by cabinet:

- A relief road for the county was one of the biggest decisions for the Council and any decision needed to have the will of the majority of residents / businesses supporting, it was believed there was the support in the county.
- Statistics presented at a recent seminar stated 79% of respondents wanted a relief road, with only 21% not wanting the road.
- An extensive schedule of consultation meetings was proposed with City, market town and parish councils, the latter on a ward by ward basis.
- A full and thorough consultation would be carried out using established consultation channels
- Consultation with MPs and political group leaders had already taken place.
- The Hearn report states that 14,400 additional homes were needed to maintain the current population of working age. .

- The multi modal model report and the Amey report state that a relief road would be needed to address congestion in the city and support any additional homes.
- The Parsons Brinkerhoff review states the eastern route is not an option for a relief road, leaving the western route as the only option.
- The Highways Agency has stated it believed the county would become grid locked without a relief road.
- The relief road was not a single item but part of an integrated transport plan with a park and ride system and about examining the infrastructure as a whole, including sustainable transport measures.
- A variety of public and private sector organisation are to be invited to a stakeholder seminar.
- It was stressed that the proposed poll was not asking residents to state which route was preferred, but on whether a relief road was wanted to the west of the city. On that basis Cabinet agreed that a poll was not required as it was believed there was no choice over the route to be taken and that the majority residents were in support of a relief road.

The Leader stated that he believed that as a result of the reports provided a community poll would not show good use of council tax money, as he felt there was no choice on which route to use. Therefore, a western route would be the proposal for the consultation.

Comments from political group leaders and backbench Members:

- A no road option had not been considered or consulted upon.
- Cabinet had not considered the issues relating to the environmental capacity of Herefordshire in accommodating the proposed growth.
- Issues around air and water quality and sewage treatment capacity had not yet been resolved and were key issues for the development.
- With regard to the community poll it was stated that a legal challenge might be made relating to the impact to the Special Area of Conservation, the River Wye.
- Concern that the Council had increased the risk that the plan could be found to be unsound as it was believed that the testing of alternative options had been inadequate.
- There was support both for and against an eastern relief road.
- A community poll should be carried out as it would prove that the majority of residents were in favour of a relief road.
- Clarity was sought on whether the relief road was to be a single road.
- Any document provided for consultation must be clear so that everyone is fully aware of the proposals.

The Leader gave an undertaking to provide a detailed response to the questions raised in a statement by one of the group leaders.

## RESOLVED

THAT:

- a) the arrangements for consultation on the Local Development Framework Core Strategy Revised Preferred Option be agreed; and
- b) the final arrangements for the consultation be delegated to the Director for Places and Communities upon legal advice, in consultation with the relevant Cabinet Members.

The meeting ended at 4.15 pm

### CHAIRMAN



MEETING:	CABINET
DATE:	20 OCTOBER 2011
TITLE OF REPORT:	YOUTH JUSTICE PLAN
PORTFOLIO AREA:	CORPORATE STRATEGY AND FINANCE

## **CLASSIFICATION: Open**

## Wards Affected

County-wide

## Purpose

The Youth Justice Plan is prepared on an annual basis on behalf of Herefordshire Council and Worcestershire County Council. The basic plan preparation is undertaken by the Youth Offending Service according to the deadlines and guidance from the Youth Justice Board for England and Wales (YJB).

## **Key Decision**

This is not a Key Decision.

## Recommendation

THAT the Youth Justice Plan as prepared be endorsed and that it be recommended within the Policy Framework that the Plan be approved by Council at its meeting on 18 November 2011.

## **Key Points Summary**

The Youth Justice Plan sets out how youth justice services across Herefordshire and Worcestershire are structured and identifies key actions to address identified risks to service delivery and improvement.

## Alternative Options

There are no alternative options.

## **Reasons for Recommendations**

The Youth Justice Plan is endorsed by Herefordshire Council annually.

## Introduction and Background

Under section 40 of the Crime and Disorder Act 1998 each Local Authority has a duty to produce a Youth Justice Plan setting out how Youth Justice Services in their area are provided and funded and how the Youth Offending Service for the area is funded and composed, the plan is submitted to the Youth Justice Board for England and Wales

The Youth Justice Plan for 2010/11 was prepared in March 2011 in line with the guidance issued by the YJB, the draft plan was agreed at the Youth Offending Management Board on 4 April 2011 and signed off by Management Board members in July 2011.

A comparative analysis of resources with other Youth Offending Services within the family group (statistical neighbour group)undertaken in 2008, demonstrated that in terms of delivering performance, meeting National Standards and cost per youth justice disposal Worcestershire and Herefordshire YOS represented good value for money. Within the family group of 10 youth offending services Worcestershire and Herefordshire had the lowest overall cost per disposal at £2350 (range £2350 to £4394), had a higher than average case load per worker but was the fourth highest performing YOS in the family group, in terms of the overall performance, and the highest performing in terms of meeting the key performance indicators.

A Core Case Inspection was undertaken by Her Majesty's Inspectors in January 2011 and recorded that "... we consider this a very encouraging set of findings and that the prospects for the future are good".

During 2010/11 the Management Board reviewed their role in relation to providing strategic direction to the service and has commissioned a sub-group to appraise future service delivery options for 2012 onwards. The review is considering developing the strategic leadership into a West Mercia model, incorporating Worcestershire and Herefordshire, Shropshire and Telford and Wrekin authorities. This model would mirror the strategic leadership of the Police and Probation Services across West Mercia and is seen as being able to achieve more value for money through shared services such as IT and improved performance through increased opportunities for sharing best practice. The operation of the YOS would remain Local Authority based, enabling specific operational processes to continue to reflect local needs and preferences.

## **Key Considerations**

The Youth Offending Service had five indicators in the set of national indicators for local areas. Performance against the indicators for Worcestershire and Herefordshire is outlined in the plan and actions identified to address risks to performance improvement.

Key data relating to YOS Performance and Youth Offending for Herefordshire is provided at Appendix 2 to this report.

## **Community Impact**

The principal aim of the Youth Justice System is the prevention of offending and re-offending by children and young people. The Youth Justice Plan set out an action plan to address future service delivery and improvement.

## **Financial Implications**

The costs attributed to Herefordshire for YOS provision are covered by the existing budgetary contribution. However the Youth Justice Board is reviewing the national funding formula.

The grant streams previously made available for YOS have been ring fenced to specific activities, and each has had its own allocation formula. Some grants have only been available to a restricted number of YOS, for example the grant for Integrated Resettlement Support was only available to areas where there was a Drug Intervention Programme. From 2012/13 the Youth Justice Grant will be a single pot and allocated across all YOS, and the Youth Justice Board (YJB) have been engaged in work on developing an allocation formula.

The YJB have recently completed a consultation process on four formulae, and based on current year funding, the Worcestershire and Herefordshire grant would increase for two of the formulae, and decrease for other two. The YJB have committed to doing further work on revised versions of two of the formulae as the nation consultation has not identified any one of the four formulae as being most popular. Once a formula has been decided, there are a number of implementation options being considered to ensure that no YOS sustains too greater loss, the options being considered are phased implementation, capping and floor damping.

In addition to any effect of the single pot allocation formula, the YJB currently do not know whether and to what level contributions from departments other than the Ministry of Justice will be for 2012/13.

The position for 2012/13 is, therefore, currently unclear but the YJB have committed to letting local areas know the level of their grant by the end of the calendar year.

## Legal Implications

There are no legal implications.

## **Risk Management**

There are no risks associated with the endorsement of the Youth Justice Plan.

## Consultees

As detailed in the Youth Justice Plan

## Appendices

Appendix 1 – Youth Justice Plan

Appendix 2 – Youth Offending Service Key Data for Herefordshire

## **Background Papers**

None identified.

# WORCESTERSHIRE AND HEREFORDSHIRE YOUTH OFFENDING SERVICE



# **ANNUAL YOUTH JUSTICE PLAN**

# 2011/12

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Worcestershire and Herefordshire Youth Offending Service Annual Youth Justice Plan 2011/12

Worcestershire and Herefordshire Youth Offending Service Annual Youth Justice Plan 2011/12

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(i)	Assessment and Intervention Planning:	Ensuring that the quality of intervention and risk plans are raised
(ii)	Quality Assurance:	Reviewing current systems to ensure they meet the recommendations of the CCI
(iii)	Management of Risk:	Implementation of revised procedures to ensure that risk management plans are integrated with intervention plans.
(iv)	Review Structural and Governance Arrangements:	Appraise service delivery options across West Mercia and implement any agreed changes for 2012/13
٤	Service User Involvement:	Ensure that young people are meaningfully involved in the assessment and intervention planning processes
(vi)	Victim Information and Involvement	Ensure that information is obtained, appropriately recorded and a high priority is given to victim safety
Deta	Detailed actions to meet these priorities are included	included in section 6 of this Annual Plan.

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Indicator	Dorformanco		Commontant
ΠΙΔΙζαιΟΙ			
NI19	2005 12 month rate	1.30	The change in the rate of proven re-offending between 2005 and
Proven rate of reoffending for young	2009 12 month rate	1.19	2009 is -8.7%
offenders	Percentage change	-8.7%	
	1		During 2010/11 the YOS has reviewed and revised its Management
	(the rate represents	(the rate represents the average number	of Risk Policy and Procedure and all staff briefed on the policy and
	of re-offences per	offender in the re-	procedure. In 2011/12 it is planned to merge the management of
	offending cohort)		DYOs with the emerging Integrated Offender Management
			arrangements in both Counties.
NI 43	2006/07	3.7%	The custody rate between the 2006/07 baseline and the April to
Young people within the youth justice	April – Dec 2010	3.2%	December 2009 shows an increase in performance with a reduction
system receiving a conviction in court		-13%	in the proportion of custodial sentences of -13%. Due to the
who are sentenced to custody			numbers of young people processed through the Courts falling, the
			percentage rate masks the actual reduction in the number of young
			people being made subject to a custodial sentence, from 62 in
			2006/07 to 46 in 2009/10
NI44		% of % of	There is a slight over representation in the BME groups of Mixed
Ethinic composition of offenders on youth			and Black. Disaggregated data shows that this over representation
justice system disposals.			is found in Worcestershire rather than Herefordshire
		pop. in 2009/10 2009/10	
	White	95.7% 95.0%	Analysis regarding this disproportionality has been undertaken by
	Mixed	2.3% 2.0%	to the low numbers of young people involved the disproportionality
	Asian	1.3% 1.9%	may be statistically insignificant, and the comparator (based on
	Black	0.6% 0.5%	projections from the 2001 Census) may also be inaccurate. Disproportionality is constantly under review by the Yos Diversity
	Chinese	0.1% 0.5%	Group.

Worcestershire and Herefordshire Youth Offending Service Annual Youth Justice Plan 2011/12

Indicator	Performance	<u> </u>	Commentary
NI45 Young Offenders engagement in education, training or employment.	in April to December 2010	71.7% C	Compared to the position in 2006/07 when the rate was 64.6 the performance is showing an increase of 10.9% and is a slight improvement on 2009/10 where the performance was 70.3%.
NI111 2008/09 rate per 100 First time entrants to the youth justice of 10 – 17 population system 2009/10 rate per 100 of 10 – 17 population % change	000 00	1420 H 1420 H 1030 1 1030 V V V V V V V V V V V V V V V S S S S S	The reduction of first time entrants in Worcestershire and Herefordshire between 08/09 and 09/10, is -27.4%. There has been a sustained reduction in first time entrants since 2005/06 when the rate per 100 000 youth population was 2050. The Youth Inclusion and Support Panel (YISP) continues to work with those assessed as at risk of entering the system in Worcestershire. In Herefordshire work for those at risk will be provide through integrated locality teams. 2010/11 was the first full year of operation for the West Mercia Police Community Resolution scheme which diverts low level offending from formal criminal justice interventions.

Worcestershire and Herefordshire Youth Offending Service Annual Youth Justice Plan 2011/12

The YOS has a complex budget structure comprising of partner agency cash and in kind contributions and the single youth justice grant administered through the YJB. The expected contributions for 2011/12 are outlined in the table below. <u>YOS Funding 2011/12</u>	Cash Seconded Delegated Contribution Staff Funds Total	West Mercia Police         121,228         152,848         274,076           West Mercia Probation Trust         83,606         77,260         29,000         189,866           Worcestershire Childrens Services         753,433         53,979         38,000         845,462           Worcestershire Childrens Services         194,749         93,874         2,800         291,423           Worcestershire Health         67,118         43,648         110,766         43,549           Youth Justice Board         1,092,441         1,092,441         1,092,441	2,312,625 465,158 69,800 2,847,583 Worcestershire EIG 180,000 180,000	Ring Fenced Grants 180,000 0 0 180,000	Total Funding 2,492,625 465,158 69,800 3,027,583	The budget represents an overall reduction of 16% from 2010/12. Despite this, due to falling workloads in statutory work as a result of reduction in first time entrants, the service is confident it will be able to meet its statutory duties and comply with National Standards within current resources. The Management Board recognise that resources may be further reduced in forthcoming years and have commissioned a sub group to appraise service delivery options for implementation for 2012/13. A comparative analysis of resources with other Youth Offending Services within the family group (statistical neighbour group) undertaken in 2008, demonstrated that in terms of delivering performance, meeting National Standards and cost per youth justice disposal Worcestershire and Herefordshire YOS represented good value for money. Within the family group of 10 youth offending services Worcestershire and Herefordshire had the lowest overall cost per disposal at £2350 (range £2350 to £4394), had a higher than average case load per worker but was the fourth highest performing YOS in the family group, in terms of the overall performance, and the highest performing in terms of meeting the key performance indicators.
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3. Resources and Value for Money

undertaken disposal W services **W** 

	4. Structure and Governance
	The YOS has a total salaried staff compliment of 71 full time equivalent staff, supported by sessional workers and volunteers. The service is split into 6 teams, three area based Youth Offending Teams (Yots), a Prevention Team, the ISS Team and the Central Office (Business Support) Team.
	The Yots comprise YOS Officers (qualified officers), Assistant YOS Officers and a number of either seconded or specialist staff including Police Officers, Probation Officers, Health Officers (CPN and Health Visitor), Victim Liaison Officers, Education Officers, Bail Support Officers, ISS Case Officers and Specified Activity Programme Workers. Within the Prevention Team there are YISP Key Workers and the Parenting and Mentoring Workers. The Parenting Workers and Reparation Co-ordinator work across the whole service. Staff are employed by seven different employing bodies including a third sector organisation.
14	The YOS is hosted by Worcestershire County Council and line management for the Head of Service is provided by the Head of Safeguarding and Services to Children and Young People in the Children's Services Directorate. It is clear, however, that this relationship is structural and the YOS remains a partnership service with a distinct clear identity operating across and within both Local Authority Children Services. The YOS recognises the importance of reducing the distance between services in order to improve outcomes for children and their families and is increasingly working more closely and in partnership with other parts of children Services.
	The YOS has a strong Management Board jointly chaired by the Director for Children's Services for Herefordshire and the Director for Children's Services in Worcestershire. Other Board members are senior strategic managers from each of the agencies with a statutory duty to co-operate with the Local Authorities in establishing and resourcing youth justice services. The current membership of the YOS Management Board is outlined in the table below.

Name	Agency	Role
Gail Quinton (Joint Chair)	Worcestershire County Council	Director for Children's Services
Jo Davidson (Joint Chair)	Herefordshire Council	Director for Children's Services
David Chantler	West Mercia Probation Trust	Chief Executive
Simon Edens	West Mercia Police	Assistant Chief Constable
Due Doheny	NHS Herefordshire	Director of Clinical Leadership and Quality
Francis Howie	NHS Worcestershire	Assistant Director for Public Health
Siobhan Williams	Worcestershire County Council	Head of Safeguarding and Services to Children and Young People

The Board has three clear functions;

- including ensuring adequate finance and human resources, infrastructure and provision of professional support Support -
- Including performance management, approval and monitoring of service plans, budget approval and monitoring quality assurance Scrutiny –
- including enabling access to mainstream services within organisations represented on the Board and support in accessing other mainstream provision and ensuring that services offered are value for money. Services -

the Youth Justice Forum. The Forum meets quarterly and focuses on operational, performance and effective practice issues. The A wider range of stakeholders, including Her Majesty's Court Service and the third sector are engaged through representation in Forum is chaired by a nominated member of the Management Board to ensure a direct link between the Forum and the Board During 2010/11 the Management Board reviewed their role in relation to providing strategic direction to the service and have commissioned a sub-group to appraise future service delivery options for 2012 onwards.

5 Partnership Arrangements
Worcestershire and Herefordshire Youth Offending Service operates within a complex local planning environment comprising of two top tier Local Authority areas, six district level Local Authorities, five Community Safety Partnerships (with differing levels of strategic integration at district level and across partnerships), two Drug and Alcohol Action Teams (or equivalent) and two Primary Care Trusts. From a criminal justice perspective the YOS links with West Mercia Court Service, West Mercia CPS, West Mercia Criminal Justice Board, West Mercia Probation Trust and West Mercia Police.
Despite the demands of this complex local planning environment the YOS has prioritised involvement and engagement with partner agencies and is represented on numerous key strategic forums including;
<ul> <li>Two Local Safeguarding Children's Boards and relevant sub-groups</li> <li>West Mercia Criminal Justice Board and relevant sub groups</li> <li>Two DATs and Joint Commissioning Groups</li> <li>Worcestershire Children's Trust Board</li> <li>Herefordshire Children and Young People's Partnership</li> <li>The Community Safety Partnerships (x 5)</li> <li>MAPPA Strategic Management Board</li> </ul>
<ul> <li>West Mercia Youth Panel Chairs Meetings, Youth Panel Meetings, Youth and Crown Court User Groups.</li> <li>The Prolific and Other Priority Offender Strategy (Prevent &amp; Deter) has provided an opportunity for the Police, Community Safety Partnerships, Probation and the YOS to work cooperatively on the management of PPOs and particularly around the need to prevent young people from becoming involved in the criminal justice system. The YOS is involved in the development of Integrated Offender Management (IOM) across both Counties and, in particular seeking to ensure the management of DYOs is integrated as part of the IOM arrangements.</li> </ul>
Worcestershire and Herefordshire Youth Offending Service

Plan	
Action	
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Action	Strategic	Service	Owner	Timescale
	Objective	Development Priority		
Establish an Inspection Improvement Task Group to provide oversight and direction for improvement actions	1, 2, 3 & 4	i to vi	SoH	June 2011
To elicit peer support in informing Inspection improvement	1, 2, 3 & 4	i to vi	HoS	June 2011
Assessment guidance to be updated to ensure that it is clear that WDYT? or other clear evidence of the young persons involvement in the assessment process is recorded	1 & 4	i & v	ATM - Assessment Lead	August 2011
Training to be provided on enhancing skills of assessment and analysis including assessment of risk of harm and vulnerability	1, 2, 4 & 5	i, ii & iii	DHoS	September – Dec 2011
Assessment QA process reviewed to include reviewing for all AFI identified in the Inspection Report	1, 3, 4 & 5	i & ii	ATM - Assessment Lead	August 2011
Development of a set of standards for ROSH assessments	1, 3 & 4	i & iii	ATM - Assessment Lead	July 2011
Revise ROSH assessment guidance to reflect the ROSH standards.	1, 3 & 4	i & iii	ATM - Assessment Lead	July 2011
All staff to be briefed on revised ROSH guidance	1, 2, 3 & 4	i & iii	All ATMs	August/Sept 2011
Quality audit tool for ROSH developed and implemented	1&4	i, ii & iii	ATM - Assessment Lead	September/October 2011
To develop a set of standards for Intervention Plans, RMP and VMP which address all AFI identified in the Inspection Report	1, 3, 4 & 5	i, iii, v & vi	DHoS	August 2011
Revise APIS guidance to ensure that it reflects the set of planning standards.	1, 3, 4 & 5	i, iii, v & vi	DHoS	September 2011
All staff to be briefed on the revised APIS guidance	1, 2, 3, 4 & 5	i, iii, v & vi	All ATMs	Sept/Oct 2011
Development of an quality audit tool and procedure based on the APIS set of standards.	1, 3, 4 & 5	i, ii, iii, v & vi	DHoS	Sept/Oct 2011

Worcestershire and Herefordshire Youth Offending Service Annual Youth Justice Plan 2011/12

Action	Strategic Objective	Service Development Priority	Owner	Timescale
Training on use of YOIS to ensure that staff are using it as a tool to support their work and that key processes are appropriately recorded	2		DHoS	August 2011
Revise Quality Assurance process and tools to ensure reviews are timely and appropriately recorded and to reflect all AFIs identified in the Inspection Report	1&4	i, ii & iii	SoH	September 2011
Training on the use of YOIS for Managers to ensure that management oversight of decisions and key quality assurance processes are appropriately recorded.	1, 2 & 4	i, ii & iii	Rok	August 2011
Update recording guidance.	1,3&4	i, ii & iii	MdI	July 2011
Review and update victim information and liaison arrangements. Revise Victim Policy	3	vi	ATM – Victim Lead	July 2011
Review victim information recording processes in accordance with YJB advice on Information Management for YOTs and the Victim Code of Practice	e	ĸi	ATM – Victim Lead	July 2011
Update APIS guidance to ensure the inclusion of assessment of victim safety is included.	e	i & vi	DHoS	August 2011
Review and update YOS Prevention Strategy	1&4	i & iii	DHoS/DPM	October 2011
Develop YOS Reducing Re-Offending Strategy to reflect developing IOM arrangements and DYO processes	1, 3, 4 & 5	:=	DHoS	October 2001
To appraise future service delivery options	1 to 5	.2	Task Group	September 2011
To implement any agreed changes to service delivery/ service structure	1 to 5	Ņ	Management Board/HOS	March 2012
To develop a use of volunteers strategy – including structure for training and support	1, 2, 4 & 5	<b>=</b>	DHoS	November 2011
To review and revise YOS MAPPA guidance	1, 3 & 5	iii	DHoS	August 2011
MAPPA awareness training for staff and managers	1, 2, 3 & 5	iii	DHoS	September 2011
Development of a Strategy to reduce the number of young offenders NEET	1&4	i	HoS	October 2011

Worcestershire and Herefordshire Youth Offending Service Annual Youth Justice Plan 2011/12

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Name	Position	Representing	Signature
Ms Gail Quinton	DCS	Worcestershire County Council	
Ms Jo Davidson	DCS	Herefordshire Council	
Mr David Chantler	Chief Executive	West Mercia Probation Trust	
Mr Simon Edens	Assistant Chief Constable	West Mercia Police	
Dr Francis Howie	Deputy Director for Public Health	NHS Worcestershire	
Ms Sue Doheny	Director of Clinical Leadership and Quality	NHS Herefordshire	
Ms Siobhan Williams	Head of Safeguarding and Services to Children and Young People	Worcestershire County Council	

## Glossary

Areas for Improvement	Assessment, Planning Interventions and Supervision	YOS Assessment Tool	Community Psychiatric Nurse	Drug Action Team	Deter Young Offender	Integrated Offender Management	Intensive Supervision and Surveillance	Multi Agency Public Protection Arrangements	Not in Education, Employment or Training	Prolific and other Priority Offender	Quality Assurance	Risk Management Plan	Risk of Serious Harm to other assessment	Vulnerability Management Plan	What Do You Think - Young Person's Assessment Questionnaire	Youth Justice Board for England and Wales	Youth Offending Information System	Youth Offending Service	
AFI	APIS	Asset	CPN	DAT	DYO	NOI	ISS	MAPPA	NEET	РРО	QA	RMP	ROSH	VMP	WDYT?	YJB	YOIS	YOS	

Worcestershire and Herefordshire Youth Offending Service Annual Youth Justice Plan 2011/12

## Worcestershire and Herefordshire Youth Offending Service



## Key Data – Herefordshire

The overall performance of the Worcestershire and Herefordshire Youth Offending Service is good in comparison with statistical, regional and national figures.

There is a data health warning due to the low numbers contributing to the data for Herefordshire in that one or two young people entering any cohort can change the direction of travel (improvement or worsening) very quickly. However, the situation described by the First Time Entrants graph below does demonstrate a strong trend in improvement.

An inspection of the case management processes undertaken by Her Majesty's Inspectors in January 2011 judged that the Safeguarding aspects of the work were done well enough 74% of the time. With the Public Protection aspects, work to keep to a minimum each individual's Risk of Harm to others was done well enough 63% of the time, and the work to make each individual less likely to reoffend was done well enough 68% of the time. These figures compare positively with National figures and are for the Worcestershire and Herefordshire service combined.

The following figures are Herefordshire Performance figures and not combined Worcestershire and Herefordshire figures.

## 1. First Time Entrants to the Youth Justice System (NI 111)

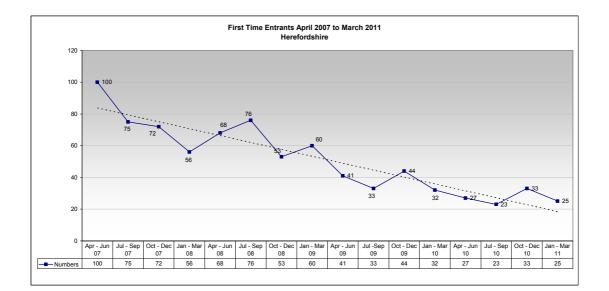
First time entrants are defined as those young people receiving their first criminal justice sanction (either a reprimand, final warning or a conviction). The National Indicator is measured by the Department for Education using PNC<sup>1</sup> and there is time delay in the publication of the results. The YOS collects and submits first time entrant data to the Youth Justice Board, who publish the data as an indication of direction of travel. The graph below outlines the first time entrant figures submitted to the YJB.

The YCAP<sup>2</sup> set a national aspiration for the reduction of first time entrants of 20% by 2020. On the official DfE figures a reduction of 47% had been achieved in Herefordshire between 07/08 and 09/10.

The graph shows a trend of a continuous reduction in the numbers of first time entrants since the end of 2006. This is likely to be the result of a number of developments including the targeting on young people at risk for interventions through the Prevent and Deter process, the work of the Targeted Family Support Project (now Herefordshire Families Matter), development of the CAF process and from July 2009 the introduction of Community Resolutions by the Police, and the development of the multi agency approaches adopted through Locality working in Children's Services.

<sup>&</sup>lt;sup>1</sup> Police National Computer

<sup>&</sup>lt;sup>2</sup> Youth Crime Action Plan (2008)



## 2 NI 19 – Rate of proven re-offending by young offenders

The indictor compares the proven rate of re-offending of a cohort of offenders (over a 12 month period) against a cohort of offenders identified in 2005. The measure used is the average number of re-offences per offender in the cohort.

Cohort	Average number of Re- offences after 12 months
2005	1.26
2008	1.16
2009	1.43
2010	1.14

The 2010 performance represents a 9.5% decrease in number of re-offences compared with 2005 cohort.

3 NI 43 (Custodial Sentences as a proportion of all sentencing outcomes) & NI 45 (Proportion of young offenders in full time education, training or employment at the end of their YOS Intervention)

Performance Indicator	2009/10	2010/11
NI 43 – Custodial Sentences as a proportion of all sentencing	3.2%	3.7%
outcomes		
NI 45 – Proportion of young offenders in full time education,	74.1%	70.9%
training or employment at the end of their YOS Intervention		

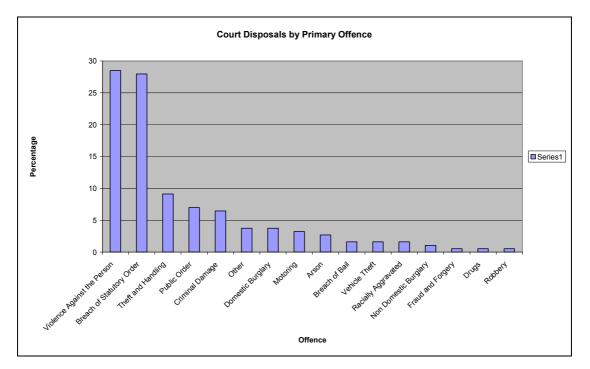
NI 43 – The previous national target was custodial sentences should not account for more than 5% of all sentencing outcomes. In both performance years reported in the table the performance in Herefordshire is well above the target. This is set against a national average of 5.6% (10/11) and a Family Group (statistical neighbour) average of 4.5%.

NI 45 – The performance for this indicator in 2010/11 is slightly lower than in 2009/10. This is mainly the effect of the increase in the number of young people above statutory school age who are NEET. The performance is in line with the Family

Group average of 71.4%. This area of work is being targeted by the Management Board and the YOS are working in conjunction with the Herefordshire NEET strategy in order to improve outcomes under this indicator. The indicator will be removed as a national measure in 2012/13 but will remain as a local measure for the foreseeable future.

## 4 Young People Offending by Offence Type

The graph below outlines the primary offence<sup>3</sup> for Herefordshire young people sentenced by the Court during 2010/11

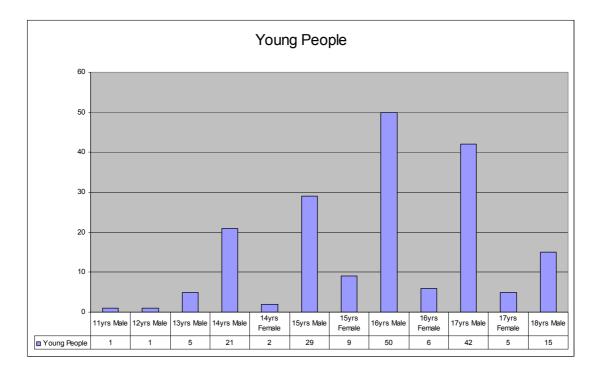


The most frequently occurring primary offence are offences of violence against the person accounting for 28% of primary offences.

## 5 Young people offending by Age and Gender

The graph below outlines the age and gender of Herefordshire young people sentenced by the Courts during 2010/11.

<sup>&</sup>lt;sup>3</sup> Primary offence relates to the most serious offence in a sentencing episode, there may be more than one offence and different types of offences at each sentencing episode.



The peak age for young males sentenced is 16 years and for young females 15 years. Males accounted for 79% of sentencing outcomes and females for 21%



MEETING:	CABINET
DATE:	OCTOBER 20 2011.
TITLE OF REPORT:	NEW CHARTER 2011.
PORTFOLIO AREA:	CORPORATE STRATEGY AND FINANCE

## CLASSIFICATION: Open

## Wards Affected

County-wide

## Purpose

To approve the New Charter 2011 between Herefordshire Council and Local Councils in the County.

## Key Decision

This is not a Key Decision.

## Recommendation

THAT: the New Charter 2011 be approved.

## **Key Points Summary**

- The councils in Herefordshire have agreed to review and update the Charter which sets out how they aim to work together. The New Charter 2011 is the result of discussions locally and across Herefordshire to confirm existing good practice and to establish some new and enhanced ways of working.
- In Herefordshire, there are 134 Parish and Town Councils and four Parish Meetings all playing an increasingly valuable role in local democracy and service provision.
- The councils jointly represent all levels of democratic local government, to whose principles they are all committed. They are all keen to see continued efforts made to improve our system of local democracy and to see greater public participation in and appreciation of the system.
- Parish and town councils are the grass-roots level of local government. By working with them and the Herefordshire Association of Local Councils, Herefordshire Council aims to act in partnership with local communities, whilst balancing the needs of the wider locality.
- This New Charter 2011 updates and replaces the Charter for Herefordshire Councils agreed and published in October 2002.
- The New Charter 2011 has been drawn up following discussions between representatives from the Herefordshire Association of Local Councils, the Market Towns Forum and Herefordshire

Council (Cabinet member and officers).

- The New Charter 2011 was the subject of a full consultation with Members and all parish, town and City councils in the May to August 2011 period.
- The approval of Cabinet is now sought for the New Charter 2011. Simultaneously, HALC will seek endorsement from their AGM which is on 22 October.

## Alternative Options

1. The alternative option is to do nothing. However the existing Charter is over eight years old and contains a commitment to review on a regular basis. In addition with the launch of the Big Society and the whole localism agenda, it is timely to review and update the Charter.

## **Reasons for Recommendations**

2 The New Charter 2011 has been drawn up following discussions between the Herefordshire Association of Local Councils (including the Market Towns Forum) and Herefordshire Council. All parish, town and city councils have been consulted on the proposals.

## Introduction and Background

3 The existing Charter outlining how the councils in Herefordshire should work together was originally agreed in October 2002. It is now eight years since this agreement was reached and thus with the launch of the Big Society and the localism agenda it is both timely and necessary that this Charter is reviewed and updated. A working group made up of representatives from Herefordshire Council and the Herefordshire Association of Local Councils (including the Market Towns Forum) has agreed a draft New Charter 2011 which was consulted upon in the May to August period. Approval is now being sought from Cabinet.

## **Key Considerations**

The Coalition Government is committed to a decentralisation agenda transferring power to local government and the communities they serve. The existing Charter has been reviewed, expanded and brought up to date to meet this new localism agenda.

- 4 The New Charter 2011 (appendix 1) sets out the principles on how the councils will work together. It is a living document and will be developed in the coming months adding more details about how the relationship will work locally.
- 5 The New Charter 2011 covers a wide range of activities including communication, ICT, community-led planning and community engagement, local governance and democracy, community resilience, delegation, devolution and adoption of services, clustering, practical support from Herefordshire Council, asset transfer and sharing of assets.
- 6 By developing a closer working relationship in partnership, councils seek to deliver better and more effective services to the communities they serve.
- 7 The New Charter 2011 will be reviewed regularly. The first review will take place at the end of 2011 following the enactment of the Localism Bill.

## **Community Impact**

8 In their role as democratically accountable bodies, local councils offer a means of shaping the

decisions that affect their communities. They offer a means of decentralising the provision of certain services and of revitalising local communities. The New Charter 2011 is pivotal in establishing the mechanism by which all councils in Herefordshire will work together, in partnership, to the betterment of our communities

## **Financial Implications**

9 The costs of operating this New Charter are restricted to officer time working in partnership with the Herefordshire Association of Local Councils.

## Legal Implications

10 This document is not a legally binding document but relies on partnership working. It is conceivable, following the passing of the Localism Act that an instrument of this nature may be legally required in future.

## **Risk Management**

- 11 Councils should be open to share details of risks they face (including the opportunities open to them by actively managing risks) with the other councils, thus ensuring there are no surprises in the future and giving them an opportunity to share solutions
- 12 The devolution of powers to local councils may make it more difficult for Herefordshire Council to fulfil its agenda and plans. However designing a robust mechanism for managing any transfer should minimise this risk.
- 13 The partnership between the councils proposed and the support offered to local councils by Herefordshire Council may stretch the unitary council's resources. However the practical support offered will be on a costed basis and officer resource is in place to facilitate the partnership.
- 14 Communication between all councils may not be consistent. However this will be mitigated by regular meetings, email alerts and ward member involvement.

## Consultees

15 A working group, made up of representatives from Herefordshire Council and the Herefordshire Association of Local Councils (including the Market Towns Forum), have drawn up this New Charter. A Consultation with all parish, town and City councils has taken place.

## Appendices

16 Appendix 1 – New Charter 2011

## **Background Papers**

• None identified.

## <u>DRAFT</u>

## NEW CHARTER 2011.

## <u>A Shared Community</u> <u>Working relationships in Local Government in</u> <u>Herefordshire.</u>

October 2011 (Version Cabinet October 20<sup>th</sup>)

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## NEW CHARTER 2011.

# THE WORKING PARTNERSHIP BETWEEN THE COUNCILS IN HEREFORDSHIRE

## **Definition**

In this document:

## *Local Councils* means all Parish, Town and City Councils. *Councils* means *Local Councils* and Herefordshire Council

## Introduction

Herefordshire Council is the unitary authority for the County of Herefordshire. There are 58 Ward Councillors (Members) in 40 wards. The County is 100% parished with 1200 parish councillors in 134 parish and town/City Councils and 4 parish meetings.

Herefordshire Council and Local Councils within Herefordshire have agreed to publish a Charter which sets out how they aim to work together. This Charter is the result of discussions locally and across Herefordshire to confirm existing good practice and to establish some new and enhanced ways of working.

The Councils jointly represent all levels of democratic local government, to whose principles they are all committed. They are keen to see continued efforts made to improve our system of local democracy and to see greater public participation in and appreciation of the system.

In Herefordshire, individual town and parish Councils can become members of its county association of Local Councils, Herefordshire Association of Local Councils (HALC). HALC is the representative body for Local Councils and supports its members by providing an advisory service, including legal advice supported by their national organisation, the National Association of Local Councils.

Herefordshire Council employs a Parish Liaison Officer to further the interests of this Charter and to work with Local Councils in their dealings with Herefordshire Council.

This 2011 Charter updates and replaces the Charter for Herefordshire Councils agreed and published in October 2002.

### The Local Context

Herefordshire is establishing its approach to locality working, which is about working in partnership with communities and the efficient delivery of services locally.

A tiered approach to devolving services or budgets through a corporate and partnership policy framework will be a key plank of Herefordshire's locality strategy and to achieving its aims and objectives. Taking a partnership approach to decisions being made at the closest possible point to communities will be instrumental in gaining an understanding of how devolution (of decisions, budgets or services) could work and what this means in relation to local people and communities having a say about services that matter most to them.

Local Councils are the grass-roots level of local government. They have an increasingly valuable role to play in local democracy and service provision. By working with them and HALC, Herefordshire Council aims to act in partnership with local communities, whilst balancing the needs of the wider locality.

In their role as democratically accountable bodies, Local Councils offer a means of shaping the decisions that affect their communities. They offer a means of decentralising the provision of certain services and of revitalising local communities. In turn, Herefordshire Council has a strategic role in ensuring the equitable distribution of services which they have to achieve.

This is consistent with the Sustainable Community Strategy for Herefordshire which states that across Herefordshire: "We will develop stronger, vibrant, more inclusive communities in which people enjoy a good quality of life and feel they have influence over decisions that affect them". A strong community is one that feels empowered, confident and accepted. In order to achieve this there should be respect for each other and groups. Individuals from all backgrounds need to be informed and have the opportunity to get involved in making decisions which affect their communities.

### The National Context

The Big Society aims to put the community at the heart of taking action in their area by encouraging volunteering and involvement in social action, giving communities a greater say over local planning and delivering local services.

The current Localism bill sets out a radical shift of power from central government to local communities helping to create the Big Society.

More decisions will be taken within communities about how public money is raised and spent. This will give people more choice and a better standard of service. Local government will be held more accountable to its communities giving local people opportunities to take control of the process of decentralisation.

### THE NEW CHARTER

This New Charter sets out the broad framework on how the Councils will work together. Councils agree that an action plan will be developed, adding more details about how the relationship will work locally across the County.

Strong working relationships, that have already been developed and that can be further built upon, are key to the delivery of better and more effective services for our communities.

### **Working in Partnership**

- 1. Herefordshire Council will seek to involve Local Councils in its governance arrangements and liaise in the following ways:
  - a) Local Councils will invite appropriate Members and Officers of Herefordshire Council to their meetings.

- b) Members and officers of Herefordshire Council invited to attend local council meetings will use their best endeavours to attend such meetings
- c) Herefordshire Council will maintain its close working relationship with HALC through
  - the regular attendance of the Parish Liaison Officer at its meetings
  - informal quarterly meetings between senior Council Members and Officers of Herefordshire Council and HALC.

### Local Democracy

2. Herefordshire Council will work with Local Councils and HALC to promote and to develop the public's interest in local government and to strive to improve a broad community involvement in local democracy, specifically through attendance at local council meetings, participation in parish council working groups and/or standing as parish/town councillors.

Local Councils will:-

- Encourage the public to attend their meetings and give an opportunity to ask questions and make comments.
- seek to encourage the talent available in communities to participate in local council business
- Make available to the public a wide range of information making effective use of ICT.
- Work with their Herefordshire Council Ward Members to carry out their ward responsibilities.
- Advise Herefordshire Council Ward Members of their meeting dates and agenda.
- Promote interest in local council elections
- Encourage a diverse and representative membership of their council.

Herefordshire Council will:-

- Encourage their Members to work closely with their Local Councils by regularly attending parish/town council meetings and holding surgeries.
- Encourage their Members and officers to attend training courses on "working with Local Councils".

### Clustering of Local Councils and Cross Border Issues

- 3. It is recognised that some Local Councils may decide that there are advantages in "clustering" together to deliver a service and this may benefit the business case.
- 4. It is recognised that Local Councils may wish to cluster with Councils across county borders or with Councils in Wales. Councils agree to promote cross-border cooperation, taking into account legal and funding constraints.

## **Consultation**

- 5. Herefordshire Council will seek to give Local Councils and HALC the opportunity to comment before making decisions that affect their local area. The subject areas will include formulation of policy, planning issues and the delivery of services and functions at local level.
- 6. In consulting with them, Herefordshire Council will provide Local Councils with sufficient information to enable them to reach an informed view on the matter under consideration and give adequate time to respond in accordance with Herefordshire Council's standard and with any statutory requirements where applicable. Consultations will make full use of information technology.
- 7. Local Councils will take the lead in actively encouraging their local communities to produce community-led plans that will not only inform those Local Councils' business plans but also feed into Herefordshire Council's service plans. The aim is to achieve 100% community-led plan coverage within five years. Local Councils will also ensure that the plans are reviewed at least annually and updated every 5 years.

- 8. Local Councils will ensure there is a mechanism in place to engage with their communities with regard to understanding and responding effectively to day-to-day issues as they arise.
- 9. Local Councils will involve their communities in the annual budgeting process and promote participatory budgeting as a means of meeting the needs of their communities.

### **Communication**

- 10. All Local Councils should make use of ICT wherever possible for the exchange of information, consultation documents, planning applications, committee papers and general correspondence. It is anticipated that this will be the preferred means of communication in the future ensuring that effective and efficient communication is achieved between the two tiers of local government.
- 11. Furthermore, all Councils will be encouraged to set up and maintain websites for their communities and to link into partner websites.
- 12. In order to optimise the ICT opportunity Herefordshire Council will endeavour to promote the development of superfast broadband as an efficient means of delivering 21<sup>st</sup> Century services.

### Service Delivery

### Delegation, Devolution and adoption of Services

- 13. Local Councils will work with the Herefordshire Council and consider any delegated responsibility in detail, taking into consideration the cost, quality, local preferences and practicability at all times.
- 14. Where a request for delegation or devolution is made, Local Councils will produce a costed business case in support of the request and provide evidence of local need for the service. A mechanism for the transfer of services between Councils will be developed following the adoption of this New Charter.

15. Any application should be accompanied by the Local Council demonstrating how they will achieve Quality Status standards.

### Service changes by Herefordshire Council

16. Where Herefordshire Council decides to end a particular service, Local Councils will be given the choice of delivering the service at their cost by either funding Herefordshire Council or its partners to deliver the service or by providing the service themselves.

### Asset Transfer and/or Sharing of Assets

- 17. Asset transfers will be considered by Herefordshire Council, subject to the demonstration of community need and in accordance with the Council's Community Asset Transfer policy.
- 18. Critical to the success of any transfer is having a clear rationale backed by a robust business-case demonstrating the sustainability of the proposal, and the ability of the recipient to manage the asset effectively, including an assessment of the financial and organisational capacity of the council.
- 19. Local Councils will work with the Herefordshire Council to identify public assets that can be re-modelled or shared to improve service delivery at the locality level.
- 20. It is recognised that asset transfer is a two-way process and Local Councils may wish to discuss with Herefordshire Council, transferring assets currently owned by them.
- 21. All cases of service transfer to and from Local Councils under this New Charter will be reported annually to Herefordshire Council and by the Herefordshire Association of Local Councils to all Councils, including a nil return if applicable and published in the public domain.

### **Operational Arrangements**

### Quality Status and Power of Well-Being.

- 22. Herefordshire Council will work with Local Councils and HALC to promote the take–up by Local Councils of the Quality Parish Council Scheme (QPS) as a basic benchmark of good practice, embracing aspects of legal compliance, public accountability and community engagement.
- 23. Local Councils are encouraged to adopt the Power of Well Being that will offer them more powers to benefit their communities' social, economic and environmental well-being.

### **Emergency Planning**

- 24. Local Councils will undertake to co-operate with the Herefordshire Council's Emergency Planning procedures.
- 25. Local Councils will be provided with e-mail alerts regarding emergency information, as appropriate.

### **Community Resilience**

26. Councils will work together to encourage the development of a community resilience information file for each Local Council.

### Training and Development

- 27. Local Councils, clerks and councillors will be encouraged to attend training and information sharing events whenever possible.
- 28. Local Councils will encourage all their clerks to become qualified with the aim that all clerks in the County should hold the CiLCA qualification.
- 29. Herefordshire Council will assist in identifying and helping to meet the training needs of Local Councils and participate in training events organised by HALC subject to staff availability.

30. Herefordshire Council will include the topic "working with your parish/town Councils" in the new ward members' induction programme.

### Compliments, Comments, Complaints and disputes

- 31. Any concerns about the operation of this New Charter will be resolved by early dialogue between Local Councils firstly by the clerk of the concerned council and the lead officer of Herefordshire Council and secondly by the Chair of the Local Council and the Lead Member of Herefordshire Council with officer support.
- 32. Where practical and possible the Herefordshire Council will offer Local Councils access to support services to enable them to take advantage of facilities such as printing, ICT procurement and other services.
- 33. Herefordshire Council will explore the provision of training and support on issues such as business planning and risk assessments.

### Social and Economic Sustainability.

34. Councils agree to work in ways that are sustainable, reconciling the long-term needs with those of the present and protecting and improving the quality of life of current generations without compromising the quality of life of future generations.

### Equality of Opportunity

- 35. Herefordshire Council embraces equality and diversity in all its work and is committed to serving the diverse needs of our communities, recognising that people have different needs, cultures, experiences and expectations.
- 36. Local Councils will make the same commitments to eliminate discrimination in all its forms, providing equality of opportunity to all the communities we serve. Wherever practicable they will endeavour to base local decisions on a broad community mandate, whilst taking into account the needs of the most vulnerable.

### **Funding**

- 37. Innovative ways to make the best use of limited resources will need to be identified, to reduce wastage wherever possible and to deliver services in the most cost effective way.
- 38. All Councils will seek to include the principles of participatory budgeting in their future budgeting processes.

### Monitoring, Further work and Review

- 39. This 2011 Charter is a living document and will be formally reviewed and evaluated regularly (at least annually) by the "Charter Group", made up of representatives of Local Councils, HALC, the Market Towns Forum and Herefordshire Council. The first review is planned to be at the end of 2011 following the enactment of the Localism Bill and other relevant legislation.
- 40. Following the adoption of the New Charter 2011 a mechanism for the transfer of services between Councils will be agreed and published.

October 2011.



MEETING:	CABINET	
DATE:	20 OCTOBER 2011	
TITLE OF REPORT:	HEREFORDSHIRE PUBLIC SERVICES: PARTNERSHIP GOVERNANCE	
PORTFOLIO AREA:	CORPORATE STRATEGY AND FINANCE	

### CLASSIFICATION: Open

### Wards Affected

County-wide

### Purpose

This paper describes the current governance for the Herefordshire Public Services (HPS) partnership and proposes revised arrangements for the future, to reflect the national changes to health commissioning and health and well being and the new Clinical Commissioning Group, Herefordshire Health-Care Commissioners (HHCC). A similar paper is being presented to the NHS Herefordshire Board on 19 October and the HHCC Board on 25 October 2011.

## Key Decision

This is not a Key Decision.

### Recommendation

#### THAT Cabinet:

Agrees to the establishment of a Herefordshire Public Services Board to oversee the partnership between Herefordshire Council, Herefordshire Health-Care Commissioners and NHS Herefordshire, in accordance with the Terms of Reference and Constitution set out in Appendix A.

### Key Points Summary

- Herefordshire Public Services (HPS) is the partnership between Herefordshire Council and NHS Herefordshire, which has been in development since 2006.
- Although a vision for integrated working has been agreed, both bodies remain separately accountable public authorities, making decisions through their respective governance processes.
- The HPS Steering Group has provided the main forum for the governance of the partnership since February 2007.

- It is timely to review the direction of and arrangements for the next phase of the partnership in the light of the national changes to health commissioning and health and well being and following the local Elections.
- This paper describes the current governance and proposes that a new HPS Board is set up to oversee the partnership between Herefordshire Council, Herefordshire Health-Care Commissioners and NHS Herefordshire over the next 18 months

### **Alternative Options**

- 1 Given the strategic importance of the HPS partnership, it is essential that some form of governance is in place. Other options for this include:
  - **Option 1**: retain the HPS Steering Group but include HHCC representation
  - **Option 2**: establish a new Herefordshire Health and Wellbeing Steering Group, with the three organisations to oversee QIPP, joint commissioning plans, formulation of health and wellbeing strategy etc and to promote integration to deliver this
  - **Option 3**: promote Herefordshire system wide integration through the Herefordshire Partnership Executive Group, with HPS co-ordination through informal meetings of the Chairs, Leader and Chief Executives
- 2 A review of the options has concluded that a new HPS Board with a remit to oversee both partnership working and to co-ordinate health and well being will best meet the challenges over the next 18 months.

### **Reasons for Recommendations**

3 Revised governance arrangements for HPS are required to reflect the local and national changes that will impact on HPS, in particular the need engaged the Clinical Commissioning Group within HPS, to manage the transition period for the NHS and public health reforms and work together to manage the impact of further significant budgets cuts over the next 2/3 years

### Introduction and Background

#### Herefordshire Public Services

- 4 The concept of Herefordshire Public Services was developed in 2006 in response to the consultation on the reconfiguration of PCTs. The proposed partnership (at the time described as a public service trust) was supported by the Council, the PCT, the SHA and by Government
- 5 A project and "roadmap" for the development of HPS was set out in 2007 following various workshops and consultation. This contained milestones for several phases from first principles to deep integration
- 6 Since 2007 a great deal has been achieved and Herefordshire's model has been recognised nationally as leading the way.

### **Key Considerations**

#### **Review of Current Arrangements**

- 7 Current arrangements are considered in two areas:
  - the **direction** for HPS
  - the governance arrangements that have been put in place

#### Direction

- 8 At the start of the partnership in 2006, a paper was produced that set out a direction for HPS and a plan for integration. During the first year or so HPS development was run as a project, but over recent years the approach has been to see HPS development as **core business**, not just a project
- 9 This has led to a more organic approach, which has enabled opportunities to be taken to integrate and reduce costs as they have arisen. But this has also meant less structure and formal recording of the benefits.
- 10 Joint working has, nevertheless, taken place in key areas, for example:
  - Shared Services
  - Organisational Design
  - Rising to the Challenge (RTTC)
  - Integration of Health and Social Care
- 11 In addition, major strategies and plans that cross the local authority and NHS have been considered by both Cabinet and PCT Board, for example:
  - Joint Corporate Plan
  - Medium Term Financial Plan
  - Commercial Strategy
  - Customer Strategy
  - Communications Plans

#### Governance

- 12 Governance and mechanisms for the co-ordination of activity across HPS has taken three main forms:
  - **HPS Steering Group**: consisting of the Leader and Chair of the PCT and 3 Cabinet Members and 3 NEDs, with agreed terms of reference, formal agenda and minutes (see further below)
  - **Cabinet Member/NEDs Meetings**: informal and ad hoc meetings, largely focusing on major partnership topics such as the joint corporate plan and budget
  - Joint Management Team/HPS Leadership Team: weekly meetings of the Chief Executive and Directors, covering the whole range of joint business, including bi-monthly performance review meetings and bi-monthly RTTC Board meetings

- 13 The core role of the HPS SG has been:
  - Set the strategic direction for HPS integration and the priorities for realising that strategy
  - Establish the criteria for measurement of success including the delivery of benefits through an integrated approach to services
  - Provide assurance that the partnership system is held to account for progress against those success criteria

#### **Comments on Current Arrangements**

- 14 There has been demonstrable progress and clear benefits from the HPS integration. We have an agreed statement of Values, Principles, Organisational Vision and the Rising to the Challenge transformation programme.
- 15 The recent national changes have inevitably distracted some attention from the integration agenda and raised questions about how HPS will continue as a result of the clinical commissioning and the abolition of the PCT. However, the leadership of the Council, the PCT and the Clinical Commissioning Group are clear that integration is as important as ever.
- 16 The observation from the West Mercia Cluster perspective is that the action taken across HPS have put Herefordshire in a stronger position than other areas to meet the challenges ahead, to manage the risks and to implement the national reforms.
- 17 The Joint Management Team and now the HPS Leadership Team has been central to the success of HPS:
  - Joint appointments and formal management responsibilities for Council and PCT services has developed integration
  - Specifically, we have been able to reduce management costs, share expertise and knowledge and enhance collective capacity and resilience
  - JMT/HPSLT has been the key forum for the development of joint strategies (eg: customer, locality, commercial, health and social care commissioning)
- 18 The HPS Steering Group has also been effective in monitoring the key partnership activities such as risks, communications, and latterly RTTC. But it is recongised that partnership governance needs to provide a clear direction for the partnership and be the prime forum for debating key issues around integration and for capturing the benefits of the partnership.

#### Conclusions

- 19 The conclusions form the review of current arrangements are as follows:
  - We need to restate the purpose of HPS, the vision we aspire to and set out a number of priorities for our joint work over the next 18 months, up to April 2013
  - Previous governance arrangements have served a valuable purpose and have added to the achievements so far
  - But just as HPS needs to restate its purpose, so governance needs to change to meet the new agenda

- Central to this is the formal engagement of the Clinical Commissioning Group within HPS that is: *HPS needs to be a three way partnership for the future*
- The new governance arrangements should also be seen as a bridge from the current 3 way partnership until 2013 when the PCT is to be abolished and HHCC and HWBB have statutory powers
- The changes to HPS purpose and governance also need to align with the other key local partnerships within which HPS operates, in particular the Herefordshire Partnership. It is crucial that we understand the wider strategic role of the Herefordshire Partnership and engage other partners in our vision and priorities

#### A Renewed Purpose for HPS

#### Context

- 20 In considering our future purpose, it is important to be clear about the local and national changes and other factors that will impact on HPS, including:
  - □ Newly elected Council... the need to review the arrangements in the light of the new Administration's priorities
  - □ Establishment of the Clinical Commissioning Group... the need to engage representatives of HHCC in HPS
  - □ Shadow Health and Wellbeing Board... how the Board's future role in system leadership and service integration will fit with the HPS vision
  - □ West Mercia Cluster... ensuring that there is no conflict between the role of the Cluster and what we are seeking to achieve locally
  - **Future of the PCT**... the current proposal is for the abolition of PCTs by April 2013
  - □ **Public sector funding**... how we will work together to manage the impact of further significant budgets cuts over the next 2/3 years
  - Strategic Direction... a purpose that is aligned with our overall vision and objectives set out in the Joint Corporate Plan and HPS Organisational Vision and using Rising to the Challenge: as the overarching programme for managing change and realizing benefits
  - □ Herefordshire Partnership: the big prize is further integration with the Herefordshire Partnership, HPS playing a leading role in shaping the 9 localities
  - □ **Providers**: forging strong links with Wye Valley NHS Trust and other providers, given the objectives of Integrated Care and the inter-dependencies between us

#### Key Principles for HPS

- 21 A number of key principles are suggested upon which we will base the narrative of the renewed purpose and priorities of HPS:
  - **Herefordshire**: the further integration of public services is an essential response to meeting the challenges facing Herefordshire over the next decade or more

- **Outcomes**: our partnership is based on delivering better outcomes for residents, not simply being a better partnership; this can only be achieved by working together at all levels, using the new integrated need assessment as our focus
- Integration: customers and patients expect services that are designed around their needs, integration and service change is essential to break down silo delivery and create service pathways that provide better outcomes and earlier intervention
- Capacity and Capability: our organisations are small and stretched in many directions; we do
  not have the capacity and capability to deliver what we need to do alone, but together –
  sharing leadership, skills and knowledge we can
- Value for Money: there are still areas of duplication, waste and separate processes which add to our costs, reduce funding for direct service delivery and do not offer value for money for local tax payers; shared services needs to enter a new phase
- **Community Engagement**: we share the aim of a step change in our relationship with residents so that they are better informed, take greater personal responsibility for their lifes and we can plan services around their needs

#### **Priorities for HPS**

- 22 Translating these principles into **priorities** the focus for HPS over the next 18 months will need to include:
  - Integrated governance for leadership, strategy and accountability for delivery
  - Integrated commissioning strategy, support and delivery (including Section 75 agreements)
  - Delivery of the QIPP and Adult Social Care cost improvement plan, including care pathway transformation and early intervention and prevention
  - Health and well being, including the development of the new Board, production of a new Integrated Needs Assessment and the Health and Well Being Strategy
  - Supporting the development of HHCC towards full authorisation and further delegation of functions and budgets
  - Integrated local delivery within the framework of the 9 areas
  - Maximum empowerment to frontline staff across the health and social care system to respond flexibly to meet patient and service user needs
  - Integrated customer access channels and data
  - Integrated plan to support staff through the transition and to ensure that we have the right skills and capacity for the future
  - Joint Communication and Community engagement, for example through Hearts of Herefordshire
  - Integrated corporate support functions
  - Shared and rationalised office accommodation

• Shared performance and risk management

#### **Future Governance Options**

- 23 Based on the proposals about renewed Direction, a number of future options for HPS governance have been reviewed:
  - **Option 1**: retain the HPS Steering Group but include Clinical Commissioning Group (HHCC) representation
  - □ Option 2: establish a new Herefordshire Health and Wellbeing Steering Group, with the three organisations to oversee QIPP, joint commissioning plans, formulation of health and wellbeing strategy etc and to promote integration to deliver this
  - □ Option 3: establish a new HPS Board that has formal delegated authority from the constituent members (as agreed) to approve plans and integrated structures and budgets to deliver QIPP, agreement of joint commissioning plans, formulation of health and wellbeing strategy
  - □ Option 4: promote Herefordshire system wide integration through the Herefordshire Partnership Executive Group, with HPS co-ordination through informal meetings of the Chairs, Leader and Chief Executives
- A review of the options has concluded that a combination of Options 3 and 4 a new HPS Board with a remit to oversee both partnership working and to co-ordinate health and well being – will best meet the challenges over the next 18 months.
- 25 Proposed Terms of Reference, working arrangements for the new HPS Board are set out in **Appendix A.**

### **Community Impact**

The HPS partnership plays a significant part in delivering essential services and better outcomes for Herefordshire residents.

### **Financial Implications**

No direct financial implications from this report. However, the increasing financial constraints on the public sector mean that we need to address areas of duplication, waste and separate processes which add to our costs, reduce funding for direct service delivery and do not offer value for money for local tax payers.

### Legal Implications

The Council and PCT are and will remain separate legal bodies. The Health and Social Care Bill will create new statutory framework for NHS commissioning and establish the Health and Well Being Board. The new governance arrangements for HPS anticipate these changes.

### **Risk Management**

Failure to revise HPS purpose and governance will; impact on the effective management of the transition to the new NHS and public health system. A new HPS Risk Register will be produced for the Board.

## Consultees

Herefordshire Cabinet.

NHS Herefordshire Board.

Herefordshire Health-Care Commissioners Board.

## Appendices

Appendix A HPS Board Terms of Reference.

## **Background Papers**

None.

## HEREFORDSHIRE PUBLIC SERVICES BOARD

### TERMS OF REFERENCE

Purpose:	The governance of Herefordshire Public Services (HPS) is based on the operation of an extensive partnership between Herefordshire Council (HC), through its executive Cabinet, and the NHS in Herefordshire, through the Primary Care Trust Board (NHSH) and Herefordshire Healthcare Commissioning Consortium (HHCC). The partners remain separately accountable public authorities, making publicly accountable decisions through their respective governance processes.		
	The Board has been established to provide a forum for the agreement of integrated structures and budgets to realise both the strategic vision for Herefordshire and the implementation of joint commissioning plans agreed by the Health & Wellbeing Board; the promotion of system wide integration within the county and to oversee the transition through the NHS and public health reforms.		
Membership:	<ul> <li>The Board is appointed from amongst the Cabinet, NHSH Board HHCC Board and officers of the constituent member bodies. The membership will include:</li> <li>Leader of the Council</li> <li>Chair of NHSH</li> <li>Chair of HHCC</li> <li>One further Cabinet Member, and a nominated alternative</li> <li>One further Non-Executive NHSH Director, and a nominated alternative</li> <li>One further HHCC Board Member, and a nominated alternative</li> <li>HPS Chief Executive</li> <li>HHCC Chief Officer</li> <li>Deputy Chief Executive and Director of Corporate Services (Lead Officer)</li> </ul>		

Authority:	In pursuit of the objectives of HPS, the Board will exercise all powers available to its individual members, within the authority delegated by existing HC, NHSH, and HHCC governance arrangements.	
Accountability:	The Board is a working group that is jointly accountable to HC's Cabinet, the NHSH Board, and the HHCC Board.	
Reporting Arrangements:	The minutes of Board meetings shall be formally recorded. Any issues that require disclosure to the Cabinet/Council/NHSH Board/HHCC Board, or require their action, shall be reported accordingly.	
Secretarial/ Administrative Support:	<ul> <li>Administrative and secretarial support will be provided to the Board by the democratic services team. This will include the:</li> <li>Attendance at meetings to take minutes, keep a record of matters arising, decisions taken, action agreed and issues to be carried forward;</li> <li>Preparation of the agenda and collation of papers;</li> <li>Provision of general administrative support to the Board in relation to its work.</li> </ul>	
Frequency of Meetings:	Meetings shall be held not less than quarterly. Other meetings may be held by agreement of the Board or its Chair if it is considered necessary to the successful development of Herefordshire's public services.	
Minimum notice period for meetings:	A schedule of meetings will be agreed by the Board. Agenda and papers will normally be distributed a minimum of five working days prior to the date of the meeting.	
Attendance:	The Directors for People's Services and Places & Communities, and other officers of HC, NHSH, HHCC or its partner organisations, may be invited to attend meetings to report on specific issues, respond to any questions of Board members and to seek advice or clarification on any issues requiring the support or direction of the Board as appropriate.	
	A representative from the West Mercia NHS Cluster (Director of Commissioning Development?) will receive papers and have the	

right to attend meetings as appropriate.

**Key Relationships:** The Board is accountable to the HC Cabinet, NHSH Board, and HHCC Board. The Board should provide strategic direction on integration issues to relevant bodies including:

- Health & Wellbeing Board
- The Shared Services Partnership Company
- West Mercia NHS Cluster Board
- QIPP/Social Care Delivery Board
- Herefordshire Partnership Executive Group
- Wye Valley NHS Trust
- 2gether NHS Trust

Principal Responsibilities / Duties: The responsibilities of the Board will be to:

- Set the strategic direction for HPS integration and the priorities for realising that strategy in line with the key principles agreed
- Establish the criteria for measurement of success including the identification, quantification and effective delivery of benefits (both financial and outcome) to be achieved through integration of public services in Herefordshire, maintaining a focus throughout on delivering better outcomes for the people of Herefordshire
- Provide assurance that the partnership system is held to account for progress against those success criteria
- Oversee the transition to the new NHS and public health system in Herefordshire, in particular supporting the development of the Clinical Commissioning Group and the Health and Well Being Board

These will be achieved through development of a rolling work programme focussed on:

- Ensuring that robust and effective partnership arrangements are in place
- Providing guidance to the Cabinet, NHSH and HHCC Boards regarding policy co-ordination, resource allocation and implementation to ensure the objectives of HPS are achieved
- Ensuring a unified and integrated approach to business in pursuit of optimising efficiency, effectiveness and services for people in Herefordshire
- Promotion of system wide integration in Herefordshire and ensuring that the benefits are communicated widely and fully understood
- Ensuring that arrangements for supporting effective transition

of public health and commissioning functions to the new arrangements are established and effectively resourced, with accountabilities for delivery clearly identified

• Maintaining an effective system of integrated governance, internal control and risk management, across the whole of its activities (both non-clinical and clinical), in support of the achievement of its aims and objectives.

**Date Established:** October 2011

Terms of Reference Annual to be reviewed:

#### Date of Next Review October 2012

All Terms of Reference, Agenda, Papers, Minutes, Action Plans and Reports must be archived in accordance with current best practice.



MEETING:	CABINET
DATE:	20 OCTOBER 2011
TITLE OF REPORT:	INTEGRATED CORPORATE PERFORMANCE REPORT – TO END OF AUGUST 2011
PORTFOLIO AREA:	CORPORATE SERVICES AND EDUCATION

### CLASSIFICATION: Open

### Wards Affected

County-wide

### Purpose

To provide Cabinet with an overview of performance against the Joint Corporate Plan 2011-14 for the first five months of 2011-12.

## Key Decision

This is not a Key Decision.

### **Recommendations**

#### THAT :

- (a) performance to the end of August 2011 and the measures being taken to address areas of under-performance be considered; and
- (b) proposed amendments to the Joint Corporate Plan 2011-14 in relation to Theme 2, 'Improve health and social care' be considered.

### **Key Points Summary**

- The proportion of performance measures achieving or better than target is 56.5%, broadly similar to that at the end of June. Where comparison with the same period last year is available, 58% are showing improvement (33.3% at the end of June).
- The majority of key projects are being delivered to schedule.
- The overall revenue budget position for the Council at the end of August shows a projected £2.75m overspend.
- A refresh of Joint Corporate Plan Theme 2, 'Improve health and social care', is proposed to better illustrate progress in delivering the relevant outcomes.

## **Alternative Options**

1. The Joint Performance Improvement Framework provides that Cabinet will formally review performance against the Joint Corporate Plan quarterly. There are therefore no alternative options.

### **Reasons for Recommendations**

2. To ensure that progress against the priorities, targets and commitments, as set out in the Joint Corporate Plan 2011-14, are understood. Further, to ensure that the reasons for important areas of actual or potential under-performance are understood and are being addressed to the Cabinet's satisfaction.

### Introduction and Background

- 3. The Integrated Corporate Performance Report is a regular report, focusing on progress towards achievement of the six themes (34 outcomes) in the Joint Corporate Plan 2011-14. Progress is measured through the management and monitoring of selected performance indicators and projects. The appendices to this report include:
  - **Appendix 1** a key to what the symbols used in Appendices 2b and 2c represent and a list of the themes and outcomes, with lead directors;
  - **Appendix 2a** exception report for those indicators and projects that are ahead of target; and
  - Appendix 2b exception report for those indicators and projects that are behind target.
  - Appendix 3 Proposed amendments to the Joint Corporate Plan 2011-14
- 4. The more detailed financial context for this report is set out in the budget monitoring report elsewhere on your agenda. The key financial headlines are included in the commentary in the scorecard below.

## Key Considerations

5. Based on a balanced scorecard approach, the following six elements (A-F) have been identified to provide an overview of the key issues that enable the Council and NHS Herefordshire to achieve the desired outcomes of the Joint Corporate Plan. These elements are monitored bi-monthly by the Herefordshire Public Services Leadership Team. Work is underway to improve further the presentation of performance information.

#### A – Performance against indicators

- 6. The nature of the indicators selected for the Joint Corporate Plan means that not all have data reported at the same time / frequency. In particular, some indicators are only reported annually. These are only reported at the appropriate time in the year. At that time Cabinet can assure themselves that appropriate in year actions are being taken to maintain good performance or improve it where necessary.
- 7. A large range of data is used to assess the quality of services provided and aid decision making. Herefordshire Public Services is committed to ensuring that its performance data is both reliable and accurate. Cabinet monitors performance against a range of indicators for each of the themes in the Joint Corporate Plan; this is summarised in the next 2 tables and full details are shown in Appendices 2a and 2b for those indicators that are significantly under or over achieving.

		*	•		
Theme	No. of indicators monitored this quarter	More than 10% ahead of target	Achieved or exceeding target by less than 10%	Up to 5% behind target	More than 5% behind target
Create a thriving economy	3	0	2 66.7%	0	1 33.3%
Improve health and social care	14	2 14.3%	5 35.7%	2 14. 3%	5 35. 7%
Raise standards for children and young people	7	0	3 42.9%	0	4 57.1%
Promote self reliant local communities	9	0	3 33.3%	1 11.1%	5 55.6%
Create a resilient Herefordshire	8	4 50%	3 37.5%	0	1 12.5%
Commission the right services	5	3 60%	1 20%	0	1 20%
Total	46	9 19.5%	17 37%	3 6.5%	17 37%

	% of indicators improving compared to last year
Create a thriving economy	-
Improve health and social care	1/1 100%
Raise standards for children and young people	-
Promote self reliant local communities	1 / 2
	50%
Create a resilient Herefordshire	2 / 5
	40%
Commission the right services	3 / 4
Commission the right services	75%
Total	7 / 12
	58.3%

8. Performance against target and direction of travel is broadly similar to last year. When

considering the direction of travel it needs to be recognised that the majority of performance measures in the Joint Corporate Plan have no historic data to allow a judgement to be made. It should also be noted that at this period, there are still a relatively low number of measures where data is available to illustrate progress towards delivery of the various outcomes.

9. The People's Services Directorate are proposing a refresh of Joint Corporate Plan Theme 2, 'Improve health and social care', to include revised performance measures and projects, that would better serve to illustrate progress in delivering the relevant outcomes. These proposals are in appendices 3, 3a and 3b.

#### Directorate summary reports on performance

10. The following directorate reports provide a more in-depth overview of performance than the review of indicators and projects in appendices 2a and 2b alone. The directorate reports reflect on performance against the Joint Corporate Plan, but also on other performance issues that may have an impact on delivery of the Joint Corporate Plan.

#### 11. Places and Communities

#### What has gone well?

Performance in the area of Waste Management is pleasing, in particular in increasing reuse, recycling and composting as well as well as in the reduction of residual household waste.

It is also pleasing to see the positive reductions in carbon usage from Local Authority Operations, this level of performance will need to be maintained in order to meet the challenging target of a 30% reduction in emissions by April 2015. Supported by prudential borrowing, the introduction of a scheme to introduce LED lighting should help in future carbon reduction.

Examples of projects/schemes currently progressing well are:

Overall we continue to see good progress with the delivery of key economic projects delivered by the Directorate. The achievement of Enterprise Zone status with regards to Rotherwas Futures is particularly significant.

The retail quarter development continues to progress with the vacation of the old livestock market site delivered, including the relocation of staff from Garrick to Franklin House, which was successfully managed by Property Services.

The Herefordshire Branding Project is progressing well. This includes communicating the various opportunities and potential of the county, as well as the creation of a concept which can be used as part of a wider campaign. The brand was launched to the press on 6th October at Hampton Court and will be carefully managed over the next few months. Work will continue in order to bring on board key businesses and brand champions.

Work on the delivery of the Localities Strategy, as well as reviews of cultural services delivery are also progressing well.

The Broadband Project continues to make good progress, 8 companies submitted PQQ (prequalification questionnaire) with 6 companies proceeding to the next stage.

The delivery of the Yazor Brook Flood Alleviation and Connect 2 Greenway schemes remains on programme for completion by the end of March 2012 and spring 2013 respectively.

#### What has gone not so well?

Despite the Councils efforts to promote the use of public transport there has been a failure to meet targets relating to bus patronage. In light of increasing pressures on the subsidized bus network a high level public consultation was undertaken to capture the public's views and

priorities for this network. The results will inform the council's decision on how to prioritise its services in the future.

An increasing number of the domestic abuse cases heard at the Multi Agency Risk Assessment Conference (MARAC) are repeat cases. As a result a forum meeting was convened in August where this was discussed. Further actions are taking place in order to try and reduce the occurrence of repeated domestic abuse.

The level of crime in the County is also currently higher than target, however this is in line with seasonal expectations and a re-profiling of the target may take place in order to reflect this. The Integrated Offender Management Group is making good progress with the selection progress for prolific and priority offenders.

Concerns remain around the affordable homes delivery target and work is being undertaken by the Housing Needs and Development Service Manager in order to produce a revised target. All options are being considered to increase delivery by reviewing partners, negotiating with developers and promoting affordable single plots.

The project in relation to the construction/delivery of the link road from Edgar Street to the bottom of Aylestone Hill has been delayed. A detailed review of funding opportunities has been conducted and will be considered as part of the Capital Programme.

#### What has been done to rectify these problems?

See above for detailed actions against each measure/project.

In addition we review all areas of performance on a regular basis and concerns are raised with assistant directors and service managers to ensure that remedial actions are put in place to ensure we can deliver against agreed or revised targets in agreement with Herefordshire Public Services Leadership Team, and Cabinet Members.

As a directorate we continue to review our action plans and targets for the forthcoming period through performance sessions at Directorate Management Team.

#### Major Contract/Commissioning Agreements update:

From a financial perspective all projected outturns for the major Places and Communities Commissioning agreements are currently in line with what was originally agreed, which is very pleasing.

In terms of performance, all former National Indicator and Joint Corporate Plan targets relating to the waste collection and disposal contracts are being met. With regards to the Amey Contract, a new reporting system has been implemented, which should improve the service to local parishes by working with them to identify defects within their Parishes. All projects and outcomes for the Courtyard are on target for quarter 1.

Areas of concern include the risks associated with not securing planning permission of the proposed Energy from Waste plant in Worcestershire; the planning inquiry for this will take place on the 20th November. Outside of this the Contractors continue to meet or exceed the targets contained within the Waste PFI (Private Finance Initiative) (and relevant variations) for diversion from landfill. A long list tender process to build the new Energy for Waste plant is also currently being evaluated by the contractor. Another area of concern is the number of people using Halo facilities in the County as this is currently below target; work is taking place to increase joint working between Herefordshire Council and Halo with regards to customer feedback and also marketing in order to further improve the service and increase usage. Usage of gym and swim facilities is currently above target.

#### 12. **Peoples Services**

#### Commissioning

#### What has gone well?

- Work to build on the launch of personalisation and resource allocation system.
- Some delivery lines of the cost improvement programme.
- Joint approach to the challenges of the QIPP (Quality, Innovation, Prevention and Productivity framework) and Adult Social Care Cost Improvement Programme, led by the Deputy Chief Executive.
- Initial work of interim programme director of adult social care has provided leadership and focus to key areas of the joint corporate plan and transformation agenda.
- Support for schools choosing academy status.
- Successful start of the academic year in terms of admissions (percentage of parents getting their first choice of school) and transport arrangements.

What has not gone so well and how are issues being addressed?

- Significant budget challenges across the health and social care economy, particularly for adults, including significant cost pressures due to back dated packages being identified.
- Some areas are losing staff and therefore capacity or experiencing significant levels of sickness.

#### What has been done to rectify these problems?

- Work led by the Deputy Chief Executive to ensure a single approach across QIPP (Quality, Innovation, Prevention and Productivity framework) and Adult Social Care.
- Engagement of regional support to develop our transformation approach.
- Budget assurance work to ensure, following the transfer of services to 2gether and Wye Valley NHS Trust, there is clear budget accountability and robust budget management processes.
- Review of all cost improvement programmes and QIPP (Quality, Innovation, Prevention and Productivity framework) programmes. Work underway to establish alternatives to address budget shortfall.
- Work underway to establish clear vision, principles and actions for adults in Herefordshire to be used in development with members, clinical commissioning group and other partners.

#### Children & Young People

#### What has gone well?

- Significant improvements in early years and primary performance, according to the provisional 2011 examination results. Improvement in the Early Years Foundation Stage Profile has been one of the biggest in the country. Achievement in Key Stage 2, English and Maths in Herefordshire is above the national average, indicating an upward trend which, if continued, will move Herefordshire primary schools into the upper quartile of performance nationally.
- Continuing good engagement of local stakeholders in the 7 locality Multi-Agency Groups resulting in early intervention and prevention services being implemented for vulnerable children and young people.

• Work to address social worker recruitment with corporate support

#### What has not gone so well and how are issues being addressed?

- Timeliness of initial assessments continues to be below target although there is a slow improvement trend.
- Continuing high number of contacts to children's social care not resulting in a social care service.
- Slippage on the delivery of a number of service specifications within the Women, Children and Families Commissioning Programme.
- Increase in the number of a high costs agency placements for looked after children as a result of 3 young people remanded to local authority care.
- Some Initial Child Protection Conferences not taking place within 15 working days of the strategy meeting.

#### What has been done to rectify these problems?

- Work to address social worker recruitment being taken up with support from the Directorate of the Deputy Chief Executive and Corporate Services.
- Co-location of an officer from the Family Protection Unit with the Family Assessment and Safeguarding Team to more effectively filter and screen contacts from the police.
- Roll out of targeted training to professionals on the Levels of Need policy (threshold criteria) to ensure that thresholds are clearly understood and applied.
- Re-assessment of the service specifications expected to be produced leading to a prioritised programme of specifications that can be delivered in the current financial year.
- Targeted assessment of 3 young people remanded to local authority care to consider their longer term needs and whether they can be cared for in a family environment. Ongoing work to review residential placements to ensure value for money.
- Revised, streamlined process and setup for initial and review child protection conferences developed for consideration by Herefordshire Safeguarding Children Board Steering Group in October 2011.

#### Public Health

#### What has gone well?

- Smoking cessation performance has improved and is now on target and the QIPP (Quality, Innovation, Prevention and Productivity framework) financial savings target for reducing smoking related hospital admissions is achieving above target.
- Environmental Health has piloted an out of hour's noise complaints team on Friday and Saturday nights over the summer period. The initial evaluation suggests it has been a successful service development. Consideration is being given to establishing the service on a permanent basis.
- MRSA performance has improved and is well within target, but an outbreak of Clostridium difficile (C diff) means there have been a high number of Clostridium difficile (C diff) cases. Outbreak control measures have been taken and the number of new cases of Clostridium difficile (C diff) has been brought back within a revised target.

What has not gone so well and how are issues being addressed?

- The NHS constitution includes an entitlement to a free NHS Health Check once every five years for people age 40-74, and there is a requirement to establish an NHS Health Check programme in Herefordshire. The national annual target is to offer a health check to 18% of the eligible population and is expected to be delivered as a 5-year programme that will result in 90% of the eligible population offered a health check. The plan to implement the programme in Herefordshire is being finalised and the first offers of a Health Check will be made in October with full roll out of the scheme by January 2012, and 36% of the eligible population being offered a Health Check by March 2013.
- Alcohol admission rates are rising year on year, and alcohol harm reduction is the initial focus for the shadow Health and Wellbeing Board (HWBB) with the intention of agreeing an integrated strategy for alcohol harm reduction in December to inform 2012/13 commissioning plans. The licensing team, trading standards team, police and third sector have been involved in the integrated needs assessment being carried out to inform the strategy development.

#### 13. Corporate Services

An overview of performance for Finance, Customers and Employees appears in Sections C, D and E. For other areas of Corporate Services:

#### What has gone well?

- A Direction has been received from the NHS Pensions Agency for the transfer of NHS Employees to The Shared Services Partnership; the transfer will take place on 1 November 2011.
- There have been a number of Property related achievements:

Asset Transfer of former Bulmer's Bowling Club Pavilion to Herefordshire Cricket Limited for development of County Centre of Excellence (completed);

Phase 1 of Hereford Leisure Pool refurbishment completed, phase 2 to commence end October;

Hereford Centre opened on 8<sup>th</sup> August – deadline achieved; and

Multi-agency offices (CYPD) all complete.

- The Organisational Design Project continues to meet its objectives:
  - Corporate timeline on track;
  - Corporate reviews progressing although improved clarity is required with regards to key milestones against which progress can be monitored; and
  - Change Champions playing a key role.
- Herefordshire's work on Equalities and Human Rights has been showcased at the Equality and Human Rights Commission in London in respect of the development of our Human Rights Charter and future delivery of outcomes. The European Fundamental Rights Agency is also maintaining an interest in the work of the team.

#### What has not gone so well?

• Delivery of effective Health and Safety provision remains a corporate risk given demand and recruitment difficulties.

- Significant objections to the proposed staff car parking proposals have been raised by the Trade Unions. Change Champions are also highlighting this as an issue impacting upon staff morale.
- Unison are balloting their members about whether they are prepared to take strike action over the proposed revised national pension arrangements. Other Trade Unions are awaiting the outcome of national negotiations that are scheduled to conclude on 31 October 2011. The Unison ballot ends on the 3rd November 2011 and the results should be available shortly afterwards. The impact of potential strike action on the 30 November 2011 is being assessed with a focus on our critical services.

#### What has been done to rectify these problems?

- The new Resilience Forum has provided a new corporate focus for health and safety. Recruitment of a Health and Safety Adviser is underway.
- Further engagement of Trade union members, staff and mangers is proposed in order to establish the best way of achieving the objectives set for this initiative.
- The risk associated with industrial action to be added to the risk register and mitigation actions taken forward through the resilience group.

#### **B** – Delivery of projects

14. The majority of projects are being delivered to plan, although nine are currently reported as being behind schedule. These are listed in Appendix 2b and, where applicable, also referred to in the directorate commentaries in paragraphs 11-13 above.

Of those that are behind schedule, 5 are within the theme of 'Improve Health Care and Social Care'.

#### C – Finance

15. As at 31<sup>st</sup> August 2011 the overall revenue budget position for 2011/12 shows a projected £2.75m overspend. This is approximately 1.9% of the council's £146.3m revenue budget (excluding Dedicated Schools Grant funding).

The key area of concern continues to be the People's Services Directorate, with a projected £3.39m overspend, which is being addressed.

A detailed report on financial outturn appears elsewhere on today's agenda.

The Audit Commission anticipates issuing an unqualified opinion on both the statement of accounts for 2010/11 and the Council's arrangements for securing value for money by the statutory deadline of 30 September 2011. The Audit Commission has not identified any material or significant issues. Significantly there are no important weaknesses in internal control and it has been noted that proper arrangements are in place to secure value for money.

In 2010/11 the Council was required for the first time, to prepare financial statements under International Financial Reporting Standards (IFRS) and The Audit Commission commented that this project was very well managed.

Finally, the Audit Commission reached an unqualified conclusion stating that the Council had adequate arrangements to secure economy, efficiency and effectiveness in the use of resources

#### **D – Customers** (Corporate Plan indicators identified in **bold**)

#### 16. Service Delivery

**Organisational Reputation (Council 40%, PCT 65% approval rating)** – Performance against both measures are derived from annual/ biannual surveys. Ongoing performance therefore needs to be measured by proxy. In this instance this is progress against the Organisational Communications and Reputation Management Strategy action plan. Progress against each section of the 6 sections of the plan is broadly on track. Of note, the review of Herefordshire Matters which has begun through feedback requested through the last edition. Initial results show an approximate 75% approval rating

This area is also primarily affected by *LICS02 '% of calls answered within 15 secs' (57.3%)*. Here performance has held up well with that of the same period last year. There have been a number of contributing factors to the under-performance to date, including the move to the new contact centre and a delay in the issue of council tax reminders. Further improvements to the performance management processes are planned which should gain additional performance. For LICS *06 '% of issues resolved at first contact (60%)*. Performance is broadly in-line with that of the same period last year. The Customer Organisation/ Digital Channels projects will have a positive impact on performance in this area. For *LICS1 'Did you get the outcome you wanted'* (87%) a small number of returns has skewed performance in period – however some clearly identifiable issues have contributed to performance which will be addresses through the SLA review process.

#### Service Quality

*LICS5 – Reduction in avoidable contact (20%):* There has been a significant improvement year to date compared with 2010 / 2011 where performance was regularly around 30% or more. Current performance is 19.98%. Customer satisfaction surveys will be reviewed at SLA meetings to ensure a consistent approach is taken to reducing avoidable contacts.

**For LICS4 'Overall satisfaction with the service provided' (80%) -** There is some detailed analysis of the reasons cited by customers for this answer underway. Where issues are clearly identified, customer service managers will work with service managers to rectify the problems through the review of information and service delivery processes

**LICIU1 Satisfaction of complaint handling (90%)** - The number of satisfaction surveys returned is low however, all have been positive and performance is therefore currently 100%. This can be attributed to the work of the Customer insight Unit acting and advocating on behalf of complainants to get issues resolved quickly and definitively. Work is underway to increase the overall level of returns.

*LI.ICT.PI.03 Better Connected annual audit of website (3\*)* – The digital channels project will result in the implementation of many elements which will contribute to the achievement of target. However, for 2011/2012 the audit will likely occur just before the new website gets implemented. Nevertheless an action plan has been developed to attain the highest possible score – following the recently announced changes to the measurement of this audit.

For LICS2 'Whether you felt listened to and understood '(87%) and LICS3 'Politeness and courtesy of staff' (95%). Performance in both areas year on year is favourable. A formal training package is currently being developed for roll out later in the year, which will address these areas of service quality.

#### Service Failure

*Number of complaints escalated to the ombudsman (council 5%, PCT 5%)* – Performance against this measure is strong with just 0.5% of complaints escalated to the local government ombudsman and 5% to the Health and Parliamentary Ombudsman. This demonstrates an increase in performance for the council in particular, compared to previous years.

For *LICS7 Call Centre Abandon Rate (8.9%)* performance year on year has been quite strong. However, the clear decreasing trend in performance has been the result of the factors described above. Year-to-date performance is circa 6.4%. These specific issues are being addressed and it is expected that performance will return to target levels within the financial year.

#### E – Employees

17. Currently only sickness absence within the Council and NHS Herefordshire is reported in the Integrated Corporate Performance Report; this is currently better than target.

#### F – Risks

18. Further improvements have been made to risk management processes, and key performance risks are described in section **A** above.

### **Community Impact**

19. Delivering the Joint Corporate Plan is central to achieving the positive impact that Herefordshire Public Services wishes to make across Herefordshire and all its communities.

### **Financial Implications**

20. None.

### Legal Implications

21. None.

#### **Risk Management**

22. By highlighting progress against the Joint Corporate Plan, including the major risks to achievement and how they are being mitigated, this report is an essential component of the management of risks.

### Consultees

23. None.

### Appendices

Appendix 1	Key to what the symbols used in Appendices 2a and 2b represent, and a list of the themes and outcomes with lead directors		
Appendix 2a	Exception report for those measures and projects that are ahead of target; and		

Appendix 2b	Exception report for those measures and projects that are behind target
Appendix 3	Proposals from People's Services Directorate for refreshing Theme 2 of the Joint Corporate Plan
Appendix 3a	Current Joint Corporate Plan Theme 2
Appendix 3b	Proposed Joint Corporate Plan Theme 2

# **Background Papers**

24. None.

Measures	Symbols	Projects
More than 10% ahead of target	*	Ahead of Plan
Achieved or exceeded target by less than 10%	•	On schedule
Up to 5% behind target		N/A
More than 5% behind target	<b>A</b>	Behind Plan
Better than the same period last year		N/A
Same performance as last year	-	N/A
Worse than the same period last year	•	N/A

### List of Joint Corporate Plan themes and outcomes

Theme and Outcome	Lead Director
Theme 1 Create a thriving economy	
HPS 1.1 The regeneration of Herefordshire with a particular focus on Hereford City	Places and Communities
HPS 1.2 The delivery and maintenance of key infrastructure including actions to reduce congestion	Places and Communities
HPS 1.3 Growing businesses, jobs & wage levels.	Places and Communities
HPS 1.4 The development of employment skills, including access to higher education	Places and Communities
HPS 1.5 A reduction in health inequalities for the working age population	People's Services
HPS 1.6 Improved access to superfast broadband and wider use of technologies	Places and Communities
Theme 2 Improve health care and social care	
HPS 2.1 Improved intervention and support for older people and keeping them safe	People's Services
HPS 2.2 A robust & healthy provider market	People's Services
HPS 2.3 Financial balance across Herefordshire's health & social care economy	People's Services
HPS 2.4 The development of a new local commissioning infrastructure	DCX and Corporate Services
HPS 2.5 Good quality corporate and clinical governance standards are embedded in all services provided	TBC
HPS 2.6 A reduction in health inequalities for frail, elderly people	People's Services
HPS 2.7 More people retaining their independence through greater choice and control	People's Services
Theme 3 Raise standards for children and young people	
HPS 3.1 Sustainable educational provision throughout Herefordshire	People's Services
HPS 3.2 Improved intervention and support for children & young people and keeping them safe	People's Services
HPS 3.3 Improved performance by early years and primary school pupils including vulnerable groups relative to their peers	People's Services
HPS 3.4 Reduced child poverty	People's Services
HPS 3.5 Families & communities that are able to support all children & young people effectively	People's Services
HPS 3.6 A reduction in health inequalities for children & young people	People's Services
Theme 4 Promote self reliant local communities	
HPS 4.1 Vibrant cultural opportunities	Places and Communities
HPS 4.2 Safe places where people feel secure	Places and Communities
HPS 4.3 Enhanced local democracy and community engagement.	Places and Communities

Theme and Outcome	Lead Director
HPS 4.4 Ways of working that reflect the needs and priorities of people & place	Places and Communities
HPS 4.5 A balanced housing market to meet resident's needs	Places and Communities
Theme 5 Create a resilient Herefordshire	
HPS 5.1 The preservation and enhancement of our environment.	Places and Communities
HPS 5.2 Accessible services and countryside	Places and Communities
HPS 5.3 A strong regional and national reputation	DCX and Corporate Services
HPS 5.4 The protection of people's health & wellbeing	People's Services
HPS 5.5 Increased equality of opportunity	DCX and Corporate Services
HPS 5.6 Sustainable public transport provision	Places and Communities
Theme 6 Commission the right services	
HPS 6.1 High quality assessments of need	NHS Resources and Delivery
HPS 6.2 Streamlined, working practices	DCX and Corporate Services
HPS 6.3 High levels of customer and citizen satisfaction	DCX and Corporate Services
HPS 6.4 A high quality workforce	DCX and Corporate Services

Appendix 2a

Key Performance Indicat	ators – Ex	ceptions (Gr	tors – Exceptions (Green – 10% or more ahead of target)	iore ahead of	f target)		
Theme & Measure		Frequency of reporting	Performance (Year to Date)	DoT since last year	Date of Judgement	Actual (Year to Date)	Target (Year To Date)
Improve health care and social care							
Comply with Healthcare Acquired Infection targets - MRSA	Smaller is better	Monthly	*	n/a	31/08/2011	0	N
The average weekly rate of delayed transfers of care from all NHS hospitals per 100,000 population aged 18 or over.	Smaller is better	Monthly	*	•	31/07/2011	9.77	18.6
Create a resilient Herefordshire							
Number of Schools taking part in Schools Energy Challenge	Bigger is better	Monthly	*	n/a	31/07/2011	16	10
% of complaints received that are referred to the ombudsman (LA)	Smaller is better	Monthly	*	n/a	31/07/2011	1.82	5
% of complaints received that are referred to the ombudsman (Health)	Smaller is better	Monthly	*	n/a	31/07/2011	1.25	5
No. of people killed or seriously injured in road traffic collisions	Smaller is better	Monthly	¥	•	31/07/2011	47	58
Commission the right services							
Satisfaction with Complaint Handling	Bigger is better	Monthly	*	n/a	31/07/2011	100	06
Average sickness FTE (Council)	Smaller is better	Monthly	*	•	31/05/2011	3.15	4.1

Appendix 2a

Key Performance Indicators – Exceptions (Green – 10% or more ahead of target)	ators – Ex	ceptions (Gr	een – 10% or m	iore ahead of	f target)		
Theme & Measure		Frequency of reporting	requency Performance of (Year to reporting Date)	DoT since last year	Date of Judgement	Actual (Year to Date)	Target (Year To Date)
Average sickness FTE (PCT)	Smaller is better	Monthly	*	•	30/06/2011	2.17	3.9

Projects – Exceptions (C	Exceptions (Green – ahead of schedule)	nedule)	
Project	Responsible Officer	Latest rating	Due Date
Commission the right services			
Customer Organisation Project (CRM / Self Service)	Programme Manager (Customer Organisation)	*	31/03-2012

2b	
Appendix	

Key Performance Indicators – Exceptions (Red and Amber - behind target)	dicators -	Exceptions	(Red and Ambe	r - behind ta	rget)		
Theme & Measure		Frequency of reporting	Performance (Year to Date)	DoT since last year	Date of Judgement	Actual (Year to Date)	Target (Year To Date)
Create a thriving economy							
Proportion of the population aged 40-74 to be offered an NHS Health Check	Bigger is better	Quarterly	<	n/a	30/06/2011	0	18
Remedial Action: It is intended that this programme will be operational from 1st October 2011 with GP practices delivering the Health Check invitation, assessment and disease follow up elements of the programme and HALO Leisure Services delivering additional lifestyle support through LIFT for high risk patients. Tender waiver applications have been submitted to NHSH for Health Smart IT software to support the health	Il be opera of the pro cations ha	ttional from 13 gramme and we been subr	st October 2011 HALO Leisure So mitted to NHSH fi	with GP pract ervices delive or Health Sm	ices delivering th ring additional lii art IT software to	he Health C festyle supp support th	heck ort e health
check assessment programme and to extend the LIFT contract to support patients with an identified high risk following a health check. In the event that the waivers are not granted then a view will need to be taken as to whether the programme will be deferred while a full competitive	contract tc	o support pations to v	ents with an ider whether the progr	tified high rist ramme will be	k following a hea e deferred while	alth check. I a full compe	n the stitive
tendering exercise is undertaken or whether the service delivery model is revised to reflect elements of what is achievable within current	e delivery i	model is revis	ed to reflect eler	nents of what	is achievable w	ithin curren	)
resources and capacity.							
Improve health care and social care							
Average length of stay for older people	Smaller is better	Monthly	•	n/a	31/07/2011	4.46	4.18
Remedial Action:							
Proportion of people who have had a stroke who spend at least 90% of their time in acute hospital on	Bigger is	Monthly	-	n/a	31/08/2011	77	80
a stroke unit Remedial Action: As reported previously, over the past		is commissio	better	d closely with	Hereford Hospit	tals Trust/M	ve Vallev
NHS Trust colleagues to deliver improvements in stroke	e care anc	I NHSH has r	care and NHSH has received assurance that the Trust Board is committed to improving	ce that the Tr	ust Board is con	nmitted to in	proving
the quality of stroke care.	into: into	aim 10001 40400				410001 40000	10 PC
INTENT WORE to the VYPE Valley Trust Chief Executive setting interim local targets to be achieved during June, with the full hautonal targets to be met from July onwards. It was stated that failure to do this would result in a Performance Notice/Contract Query Notice being issued. This will be taken forward via Contract Monitoring meetings	etting inter this would	rim iocal targe result in a Pe	sis to be acriteve srformance Notic	a auring June e/Contract Qu	e, with the rull ha uery Notice bein	uonal large g issued. T	s to be his will be
Proportion of people at high risk from a stroke and	Bigger			-1	1100/00/10	C	Q
experience a TIA who are assessed and treated within 24 hours	ls better	Montniy	1	n/a	1.102/80/1.5	ŊÇ	00

Appendix 2b

Key Performance Indicators – Exceptions (Red and Amber - behind target)	cators – Ex	(ceptions (	Red and Ambe	r - behind ta	rget)		
Theme & Measure	Fr 76	Frequency of reporting	Performance (Year to Date)	DoT since last year	Date of Judgement	Actual (Year to Date)	Target (Year To Date)
Remedial Action: As reported previously, over the past 1 NHS Trust colleagues to deliver improvements in stroke (	18 months c care and NI	commission HSH has re	18 months commissioners have worked closely with Hereford Hospitals Trust/Wye Valley care and NHSH has received assurance that the Trust Board is committed to improving	d closely with ce that the Tr	Hereford Hosp ust Board is coi	itals Trust/W mmitted to in	ye Valley ıproving
the quality of stroke care. NHSH wrote to the Wye Valley Trust Chief Executive setting interim local targets to be achieved during June, with the full national targets to be met from July onwards. It was stated that failure to do this would result in a Performance Notice/Contract Query Notice being issued. This will be	tting interim iis would res	local targe sult in a Pe	ts to be achieve rformance Notic	d during June e/Contract Q	e, with the full na uery Notice beir	ational targe: ng issued. T	's to be his will be
taken forward via Contract Monitoring meetings.							
OIPP savings plan	Bigger C	Quarterly	•	n/a	30/06/2011	2 48	3 66
	Ŀ	(		5		)	)
Remedial Action: Overall savings not yet achieved. QIPP schemes are running at a delivery rate of circa 68% of expected delivery at month 4.	P schemes	are running	ı at a delivery ra	te of circa 68	% of expected	delivery at m	onth 4.
More detailed information provided in QIPP stock take.							
ASC Cost Improvement Plan	Bigger C	Quarterly	•	n/a	30/06/2011	721,124	1.5 m
-	SC.	<b>`</b>					
Remedial Action: For full commentary please see CIP commentary calculated by savings of twelfths over the year and savings to date	ommentary	calculated	by savings of tw	elfths over th	e year and savi	ings to date.	
Comply with Healthcare Acquired Infection targets -	Smaller Is	Monthly	•	n/a	31/07/2011	50	30
C.all	better						
Remedial Action:							
	Bigger	Monthly	•		31/08/2011	12.58	40
	better						
Remedial Action: The target to achieve is 40% by March	-	as been ide	2012. It has been identified that some significant pieces of work around processes and	e significant p	ieces of work a	round proces	sses and
systems needed to take place to admere this. We have trained 300+ frontline practitioners and launched new supported assessment framework. Significant changes have been made to	ddns wəu ba	oorted asse	ssment framew	ork. Significaı	nt changes have	e been made	to
Framework-i to support the up-take of self-directed support. As a result of these changes anomalies have been identified in the monitoring against this indicator which has impacted on the performance figure reported for July. The latest August data shows an improvement to 12.58% and we	ort. As a res ure reportec	sult of these d for July. <sup>7</sup>	e changes anon The latest Augus	ialies have be st data shows	en identified in an improvemer	the monitori nt to 12.58%	ng against and we

Appendix 2b

Key Performance Indi	licators –	- Exceptions	Exceptions (Red and Amber - behind target)	r - behind ta	rget)		
Theme & Measure		Frequency of reporting	Performance (Year to Date)	DoT since last year	Date of Judgement	Actual (Year to Date)	Target (Year To Date)
are expecting this performance to increase as we move Raise standards for children and vound people	towards	towards March 2012.					
	Cmollor						
Number of schools in an Ofsted category	sinaller is better	Monthly	1	n/a	31/07/2011	~	0
	חכווכו						
Remedial Action: One primary school remains in an Ofsted category - special measures - but is making good progress towards meeting its targets and is anticipated to be removed from the category at its next inspection	sted cate	gory - special next inspectio	measures - but i n	s making goc	d progress tows	ards meeting	ı its
Percentage of initial assessments completed in 10	Bigger is	Monthly	•	e/u	31/07/2011	501	75
working days.	better			5		-	2
Remedial Action: Performance is improving from a low	base.	affing in the te	Staffing in the team is now at full establishment but work is ongoing to improve the	l establishme	nt but work is or	igoing to im	orove the
way in which it works and management capacity to sign		off electronic assessments.		del of working	A new model of working went live on 25 July 2011	5 July 2011.	
The percentage reduction in the number of contacts	Bigger			c/u	31/07/20114	76.7	30
and referrals not resulting in social care services	better					t. 04	3
Remedial Action: Many of the contacts received are actually notifications of information and requests for information and as such, would not be	tually not	ifications of in	formation and re	quests for inf	ormation and as	such, would	l not be
referrals for social care services. Work is underway with the police to reduce the number of contacts that are information only, including the co-	h the poli	ce to reduce ti	he number of co	ntacts that an	e information on	ly, including	the co-
location of the Family Protection Unit with the Family Assessment and Safeguarding Team from September 2011 and the appointment of a	ssessmen	t and Safegue	arding Team fron	1 September	2011 and the ap	pointment c	fa
Detective Sergeant post to join the front line social care	edesk.						
The percentage reduction in the number of high cost	Bigger is	Monthlv	<	e/u	31/07/2011	~	¢.
agency placements	better			5		1	>
Remedial Action: From April to June, good progress had been made in beginning to see the number of residential placements reducing. However, in July, three teenage boys were taken into secure accommodation following a serious offence, were subsequently remanded into local authority care and required placements outside of the Herefordshire area. All were placed in costly residential placements. Plans are now in place to assess those three teenagers and consider their long term needs in order to identify whether they can be cared for in a family	ad been m ecure acc Herefordsh eir long tei	nade in beginr commodation 1 nire area. All v rm needs in ou	iing to see the ni ollowing a seriou vere placed in c der to identify w	umber of resid is offence, we ostly residenti hether they o	dential placemer are subsequentl ial placements. an be cared for i	nts reducing y remanded Plans are n in a family	into local ow in
environment. Further work continues to review residential placements.	tial placer	nents.					

vppendix	2b
$\triangleleft$	be

Key Performance Indi	dicators -	- Exceptions	cators – Exceptions (Red and Amber - behind target)	r - behind ta	rget)		
Theme & Measure		Frequency of reporting	Performance (Year to Date)	DoT since last year	Date of Judgement	Actual (Year to Date)	Target (Year To Date)
Promote self reliant local communities							
Number of People using Halo Leisure Facilities	Bigger is better	Monthly	•	n/a	31/08/2011	536,452	570,849
Remedial Action:							
Repeat incidents of domestic abuse cases reviewed at MARAC	Smaller is better	Quarterly	-	n/a	30/06/2011	38	30
Remedial Action: 12 month rolling total to 30th June 2011. 38% of cases heard at MARAC were repeat cases. Domestic Abuse Forum meeting held in August where performance was discussed Further discussions being held.	011. 38% ther discu	of cases hear ssions being h	d at MARAC we. Ield	re repeat casi	es. Domestic At	use Forum	neeting
Remedial Action:	5005		5				
The number of affordable homes delivered. This							
includes social rented housing and intermediate	bigger is	Ouartarly			30/06/2011	22	30
housing, which is housing at prices or rents above those of social-rent but helow market prices or rents	better	<u>a</u> uai lei ly				77	2
Remedial Action: Delivery is currently below target with	h concern	s about meetii	concerns about meeting overall target following a quarterly review.	following a qu	uarterly review.	We are now	
reviewing all sites for potential delivery this year, considering land in the SHLAA and delivering under UDP policies, as well as supporting schemes through the HCA funding for equity shares direct with developers.	dering lan rect with d	d in the SHLA. evelopers.	A and delivering	under UDP p	oolicies, as well a	as supportin	g
Commission the right services							
Overall satisfaction with the service provided (bi- mthly)	Bigger is better	Bi-monthly	<	-	31/07/2011	80	85
Remedial Action: YTD performance is comparable to the 2010 - 2011 performance. The frequency of issuing the satisfaction surveys has changed; the change in frequency may have an impact on the customer response. In addition to the change of frequency of the survey, there has been significant changes within service areas, during any period of planned chang it is fairly typical to see an initial down turn in performance during initial periods of change, however on the provision to service business plans deliver the longer term objectives we would expect to see an improvement over time.	the 2010 - changed; t e has beer nce during see an imp	2011 perform he change in 1 n significant ch i initial periods rovement ove	le 2010 - 2011 performance. Janged; the change in frequency may have an impact on the customer response. In has been significant changes within service areas, during any period of planned change, ce during initial periods of change, however on the provision to service business plans e an improvement over time.	iave an impac rvice areas, c ever on the p	t on the custom turing any perio rovision to servi	er response d of plannea ce business	ln change, plans

Appendix 2b

	-		
Project	Responsible Officer	Latest rating	Due Date
Create a thriving economy			
Construction / Delivery of Link Road a	Director of Place and Communities	•	31/12/2014
Remedial Actions: A detailed review of funding opportunities has been conducted and will be considered as part of the Capital Programme.	conducted and will be	considered as part of the Ca	ipital Programme.
Improve health care and social care			
Frail Older People Pathway Implementation	Interim Programme Director: Adult Social Care	•	31/03/2012
Remedial Actions: Work on this is now being accelerated; focus on neight and will be prioritised going forward.	hbourhood teams and	rated; focus on neighbourhood teams and reablement are key to pathway development	way development
Review of Continuing Health Care and Funding Nurse Care	Interim Programme Director: Adult Social Care	-	30/01/2012
Remedial Actions: Plan required to deliver savings. Review has begun, so accelerated.	some savings have b	Review has begun, some savings have been secured. Pace of review has been	w has been
QIPP Plan In	Interim Programme Director: Adult Social Care	•	31/03/2012
Remedial Actions: Overall savings are not yet achieved – QIPP schemes are running at a delivery rate of 68% of expected delivery at month 4. A detailed report was provided at HPSLT on 6 <sup>th</sup> September, with mitigation plans.	s are running at a del on plans.	ivery rate of 68% of expected	d delivery at month 4.
CIP Plan	Interim Programme Director: Adult Social Care	•	31/03/2012

Appendix 2b

Projects – Exceptions (	Exceptions (Red – behind schedule)	edule)	
Project	Responsible Officer	Latest rating	Due Date
Remedial Actions: 19% delivered to date; the savings target is monitored for Adult Social Care on a monthly basis by the Cost Improvement Board.	ed for Adult Social Car	e on a monthly basis by the C	Cost Improvement
Supporting People into Accommodation	Interim Programme Director: Adult Social Care	•	31/03/2012
Remedial Actions: Need to bring back residential working age adults back in county. Work progressed to date replacing residential care with supported accommodation. Requirements to use care funding calculator to negotiate with providers.	rking age adults back in county. Work progress e funding calculator to negotiate with providers.	ogressed to date replacing re viders.	esidential care with
Raise standards for children and young people			
Implementation of the Women, Children and Families commissioning programme	Assistant Director People's Services Commissioning	▼	01/04/2012
Remedial Actions: There has been slippage on the development of service specifications and the ability to deliver all that was anticipated in the year. Each area has been reassessed and a prioritised list of service specifications to be developed has been agreed. However, savings in relation to the maternity service are being delivered.	vice specifications and oecifications to be dev	the ability to deliver all that w eloped has been agreed. Ho	vas anticipated in the wever, savings in
Promote self reliant local communities			
Increase delivery of affordable housing	Housing Needs and Development Manager		31/03/2012
Remedial Actions: Below target; considering all options to increase the delivery by reviewing partners and negotiating with developers and promoting affordable single plots.	delivery by reviewing <sub>I</sub>	oartners and negotiating with	developers and
Address housing conditions and their impact on health	Private Sector Housing Manager		31/03/2012
Remedial Actions: Steering Group still to be established.			

Projects – Exceptions (	- Exceptions (Red - behind schedule)	edule)	
Project	Responsible Officer	Latest rating	Due Date
Create a resilient Herefordshire			
Commission Waste to Energy Plant	Waste Services Manager	-	31/03/2012
Remedial Actions: Project remains subject to delay due to call in by Secretary of State.	cretary of State.		
Produce King George V and Queenswood Country Park Management Plans		-	31/03-2012
Remedial Actions: QCP key stakeholder visioning to be carried out w/c compiled.	5 <sup>th</sup> September 2011.	be carried out w/c 5 <sup>th</sup> September 2011. Project plans and timings to be assessed and	be assessed and
Meeting arranged with Amey to allocate tasks and report back on initial findings of grounds maintenance review.	tindings of grounds ma	aintenance review.	

# HEALTH AND SOCIAL CARE REVISIONS TO JOINT CORPORATE PLAN – THEME 2

### **REPORT OWNER: JO DAVIDSON**

## APPENDUM BRIEFING NOTE

### Purpose

To outline proposed revisions to theme 2 in the joint corporate plan 2011/12, in light of changes to QIPP and ASC Cost Improvement Plan, and NHS Operating Plan.

Those revisions agreed will be the key projects and targets that will be monitored for the remaining 6 months of the year. Priorities for 2012/13 will be developed via the Corporate Planning cycle and in liaison with members and NEDS over the coming 2/3 months.

## Recommendation(s)

#### THAT:

- (a) Revisions to Outcome 2 are noted
- (b) The changes are agreed; and
- (c) HPS LT support delivery of projects and measures

## **Key Points Summary**

- The projects and measures contained in the original QIPP system plan, and Health and Social Care strategy were developed in February and March 2011. Revisions to these plans and subsequent revisions to the NHS Operating Framework have meant the need to review which projects and measures are included and how these are described within the plan.
- The main focus of the changes is centred on theme 2 and the 7 outcomes within this theme. In some cases the descriptions have been slightly reframed to ensure greater consistency and alignment with QIPP and CIPs plans to make certain the projects are recognisable to officers, members and NEDs alike. Additionally 'duplicates' have been removed from these outcomes.
- Work has also been undertaken to develop targets and measures within JCP that align with QIPP and CIP and which can be can be reported against easily. These measures relate to the key projects. The aim has been to ensure that the plan also identifies the key priorities for the organisation and focuses on the 2-4 key projects/programmes and 3-5 key measures per outcome.
- The suggested refreshed plan in detail can be found in appendix 3b. The key projects in the refreshed plan by outcome are:
  - Improved intervention and support for older people and keeping them safe
     Review of Reablement and Intermediate Care Services

For further information on this report please contact the report author: Chris Baird, Assistant 25 Director People's Services Commissioning on tel: 01432 260 264

- Review of Continuing Healthcare and Free Nursing Care (considers funding an process issues)
- Delivery of Frail and Elderly Care Pathway, to improve outcomes for older people
- A robust & healthy provider market
  - Improve NHS Dentistry access and use
  - Market Development Project to improve the range of provision across health and social care (includes development of Market development strategy)
  - Re-commissioning the third sector, to improve range of services and level of provision
- Financial balance across Herefordshire's health & social care economy
  - Delivery of NHS QIPP Plan and associated savings
  - Delivery of Adult Social Care Cost Improvement Plan
  - ASC & NHS Management Cost Savings
- The development of a new local commissioning infrastructure
  - Commissioning and Commercial Market Strategy and Framework
  - GP Consortium Implementation of a work plan for GP commissioning
- Good quality corporate and clinical governance standards are embedded in all services provided
  - Deliver Healthcare Acquired Infection Strategy and Work plan
  - Integration of quality schedules and safeguarding requirements in provider contracts
  - 10 Work streams of the Service Integration programmes
  - Enhancing safeguarding arrangements and processes
- More people retaining their independence through greater choice and control
  - Personalisation implementation of RAS and customer journey to increase uptake of Personal Budgets and improve outcomes for adults
  - Further develop rapid response service and urgent care to reduce emergency admissions
  - Supporting people of working age into employment and accommodation
  - Delivery of Stroke Care pathway and improvement of stroke services

# Considerations

In identifying the key targets and initiatives the following issues were considered:

- 1. The Joint Corporate Plan aligns with existing plans and targets developed for the QIPP and Adult Social Care Cost Improvement plan and delivers the outcomes stated in the Joint Corporate Plan.
- 2. The projects and initiatives link with the outcomes agreed by Cabinet for 2011/12 relating to health and social care, which were:
  - o Improved intervention and support for older people and keeping them safe
  - A robust & healthy provider market
  - Financial balance across Herefordshire's health & social care economy
  - The development of a new local commissioning infrastructure
  - Good quality corporate and clinical governance standards are embedded in all services provided
  - A reduction in health inequalities for frail, elderly people

More people retaining their independence through greater choice and control

The projects and targets within the plan should relate to the delivery of these outcomes

- 3. Projects and initiatives within plan relate to initiatives and projects local authority officers and NHS staff recognise as key deliverables within the QIPP and ASC Plan for 2011/12.
- 4. Members and NEDs understand and recognise the priority projects being delivered and the main focus of the organisation's work around health and social care intended to deliver improved outcomes for Herefordshire residents.
- 5. Measures and projects link and support one another, and there is minimal duplication across the outcomes.
- 6. Performance Indicators and targets selected for 2011/12 are ones that can be measured from existing data collection mechanisms and collections, and link to Community Impact.

### **Financial Implications**

Delivery of financial savings attached to the QIPP and CIP plans are priority targets for Herefordshire Public Services, it is essential we deliver these to make sure we continue to deliver good quality services within the challenging financial constraints we are now facing.

### **Risk Management**

The key risks relate to the capacity to deliver the priorities and targets within the plan, and to being clear around the governance and accountabilities around the work programme. These risks will be monitored via the HPS risk register.

### Legal Implications

Need to ensure that we maintain a focus on our statutory responsibilities in delivering our corporate priorities i.e. responsibilities of DASS.

### **Alternative Options**

To maintain the descriptions of the existing projects and targets within the plan, and focus on developing 12/13 targets and priorities; however this would result in a plan that had limited ownership within the organisation.

## Communication

Consultation has taken place with both Council and PCT staff.

### Appendices

Appendix 3a - Original Theme 2

Appendix 3b - Proposed Theme 2

For further information on this report please contact the report author: Chris Baird, Assistant Director People's Services Commissioning on tel: 01432 260 264

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			2. Im	2. Improve health care & social care	care
<b>RTTC link</b>	Customer focus	Better services	Streamlining the business	Better services	Better services
Long term outcome	2.1 Improved intervention and support for older people and keeping them safe Director: People's Services Lead AD: Adult Social Care	2.2 A robust & healthy provider market Director: People's Services Lead AD: Adult Social Care	2.3 Financial balance across Herefordshire's health & social care economy Director: People's Services Lead AD: TBA	2.4 The development of a new local commissioning infrastructure Director: DCX & Director Corporate Services Lead AD: Head Commercial Services GP Commissioning Lead - Director NHS resources and Delivery	2.5 Good quality corporate and clinical governance standards are embedded in all services provided Director: Director NHS resources and Delivery Lead AD: Director of Clinical Quality and Leadership
Measures and targets 28	<ul> <li>Increase the number of older people discharged from hospital to rehabilitation or intermediate care, who are living at home 91 days after discharge by 10%</li> <li>Reduce emergency bed days associated with multiple (two or more in a year) acute hospital admissions for over 75s by 4%</li> <li>Reduce by 15% admissions to residential care homes, per 1,000 population</li> <li>Reduced average length of stay for older people by 10% over 2 years</li> </ul>	<ul> <li>5% reduction in new outpatient referrals in 2011/12 resulting in a 1% reduction in input and day case activity.</li> <li>Reduce in outpatient new to follow ups by 1.5% and follow up by 17.5%</li> <li>Reduced number of consultant to consultant referrals by 1% (2011/12)</li> <li>Increase in proportion of people who have had a stroke who spend at least 90% of their time in acute hospital on a stroke unit to 100% by 2012</li> </ul>	<ul> <li>Saving measures 2011-12</li> <li>Same Activity for less (cost)</li> <li>Right Care - £1,377,000</li> <li>Planned Care - £1,648,000</li> <li>Mental Health and Learning Disabilities</li> <li>£500,000</li> <li>Care pathways approach</li> <li>£1,771,000</li> <li>Care pathways approach</li> <li>£1,771,000</li> <li>Care pathways approach</li> <li>£1,771,000</li> <li>Care pathways approach</li> <li>£500,000</li> <li>Maternity and new born -</li> <li>£500,000</li> <li>Low priority treatments -</li> <li>£28,000</li> <li>Medicines use &amp;</li> </ul>	<ul> <li>Number of services re- commissioned and market tested in accordance with the Plan</li> <li>Target: TBA once plan and savings agreed</li> <li>Savings achieved for each new re-commissioned service Target: TBA once plan and savings agreed</li> <li>Lower costs from co-working with key suppliers on initiatives to lower or remove costs</li> </ul>	<ul> <li>Comply with Healthcare Acquired Infection targets C.diff - TBA MRSA – TBA</li> <li>No single sex accommodation breaches</li> <li>Reduction in delayed transfers of care - target TBA</li> </ul>

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B6	<ul> <li>Reduced average length of stay for older people by 10% over 2 years non-elective spells</li> <li>Personalisation and protection</li> <li>Whole system re-ablement and CHC and free nursing</li> </ul>	<ul> <li>Increase in proportion of people at high risk of Stroke and experience a TIA who are assessed and treated within 24 hours to 60% over 4 years</li> <li>Decrease the percentage of emergency admissions to any hospital in England occurring within 28 days of the last, previous discharge from hospital by 10% over 5 years</li> <li>Decrease A&amp;E attendances by 730 in 2011/12 by utilising rapid response</li> <li>Personalisation and protection including Personal Health Budgets</li> <li>Whole system redesign to</li> </ul>	<ul> <li>procurement - £1,400,000</li> <li>Whole system re-ablement review</li> <li>£1,200,000</li> <li>Other Qipp schemes TBA</li> <li>Mental health procurement</li> <li>£500,000</li> <li>Reduced demand</li> <li>Healthy individual projects - £75,000</li> <li>Management costs</li> <li>£1,300,000</li> <li>Personalisation and Protection</li> <li>Whole system re-ablement</li> <li>Further develop Rapid</li> </ul>	<ul> <li>2011-12 - 1% savings</li> <li>2012-13 - 2% savings</li> <li>2013-14 - 2% savings</li> <li>2013-14 - 2% savings</li> <li>e % of commissioning budget managed by the GPC managed by the GPC <u>Target</u>: 70%</li> <li>Managed by the GPC <u>Target</u>: 70%</li> <li>Commissioning and Commercial Market Strategy</li> <li>Commissioning Plan</li> <li>Develop a prioritised</li> </ul>	<ul> <li>Healthcare Acquired</li> <li>Healthcare Acquired</li> <li>Infection Strategy and Work plan</li> <li>Integration of quality</li> </ul>
	<ul> <li>Frail Elderly People Pathway</li> <li>Frail Elderly People Pathway</li> <li>Develop Urgent Care</li> <li>Prevention, early intervention and reablement in mental health and dementia</li> <li>Improve end of life care</li> </ul>	<ul> <li>improve prevention, early intervention and care closer to home</li> <li>NHS Dentistry access and use</li> <li>Mental health service improvement</li> <li>Market Development Project to improve the range of provision</li> <li>Diabetes pathway implementation</li> <li>Radiotherapy service</li> </ul>	<ul> <li>Response</li> <li>Urgent Care</li> <li>Increase the take up of Telecare by 50%</li> <li>Reduce cost of packages &gt; £25,000 by 10%</li> <li>Reduce the number of older people in residential care by 50 placements</li> <li>Increase in charges made to clients</li> <li>Reduce the number of</li> </ul>	milestone plan for re- commissioning and market testing services • GP Consortium - Implementation of a work plan for GP commissioning	schedules in provider contracts • 10 Work streams of the Service Integration programmes

working age adults in	residential care by 25	placements	<ul> <li>Review existing service users</li> </ul>	as to Increase the number of	personal budgets costing <	£13k by 30%	<ul> <li>Reduce the number of</li> </ul>	reablement residential beds	within the County	<ul> <li>Increase use of reablement</li> </ul>	to improve number of people	no longer requiring health	and social care or with	substantially reduced on-	going needs for care $\&$	support	<ul> <li>ICO vacancy target</li> </ul>
improvement																	
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<b>RTTC link</b>	Customer focus	Better services	Streamlining the business	Better services	Better services	Customer focus	Better services
Long term outcome	2.1 Improved intervention and support for older people and keeping them safe	2.2 A robust & healthy provider market	2.3 Financial balance across Herefordshire's health & social care economy	2.4 The development of a new local commissioning infrastructure Director: DCX & Director	2.5 Good quality corporate and clinical governance standards are embedded in all services provided	2.6 A reduction in health inequalities for frail, elderly people	2.7 More people retaining their independence through greater choice and control
	Director: People's Services Lead AD: Adult Social Care	Director: People's Services Lead AD: Adult Social Care	Director: People's Services Lead AD: TBA	Corporate Services Lead AD: Head Commercial Services GP Commissioning Lead - Director NHS resources and Delivery	Director: Director NHS resources and Delivery Lead AD: Director of Clinical Quality and Leadership	Director: People's Services Lead AD: Health and Well Being Services	Director: People's Services Lead AD: Adult Social Care
Measures and targets 68	<ul> <li>Number of older people discharged from hospital to rehabilitation or intermediate care, who are living at home 91 days after discharge</li> <li>Target 2011/12 – 80%</li> <li>Emergency bed days associated with multiple (two or more in a year) acute hospital admissions for over 75s</li> <li>Target 2011/12 – 14,500 (validating)</li> <li>Reduced average length of stay for older people in acute setting</li> <li>Target 2011/12 – xx days days</li> <li>Target 2011/12 – 88%</li> <li>Timeliness of assessments</li> <li>Target 2011/12 – 90%</li> <li>Timeliness of social care packages</li> <li>Target 2011/12 – 90%</li> <li>Increase number of jointly funded packages (tbc)</li> </ul>	<ul> <li>Access to primary dental services - year-on-year improvements in number of patients accessing NHS dental services</li> <li>Target 2011-12 -</li> <li>Market development strategy</li> <li>Target - publish -</li> <li>November</li> <li>Recommissioning the 3<sup>rd</sup> Sector</li> <li>Target 2011/12 - 80 per cent of Contracts reviewed and re-commissioned</li> </ul>	<ul> <li>Delivery of QIPPs Savings Target 2011/12 - <u>£10.9m</u></li> <li>Delivery Adult Social Care Cost Improvement Plan Target 2011/12 - E3.6m</li> <li>Delivery of Management Cost Savings across Health and Social Care Target 2011/12 - £1.3m</li> </ul>	<ul> <li>Number of services re- commissioned and market tested in accordance with the Plan</li> <li>Savings agreed</li> <li>Savings achieved for each new re-commissioned service Target: TBA once plan and savings agreed (move to 2.2?)</li> <li>Lower costs from co-working with key suppliers on initiatives to lower or remove costs</li> <li>Lower costs from co-working with key suppliers on initiatives to lower or remove costs</li> <li>Lower costs from co-working with key suppliers on budget managed by the GPC Target: 70%</li> </ul>	<ul> <li>Comply with Healthcare Acquired Infection targets Target - 2011-12 C.diff - 72 WRSA - 2</li> <li>No single sex accommodation breaches Target 2011/12 - 0</li> <li>Rate of delayed transfers of care per 100,000 population (aged 18 and over) Target - 2011-12 - 18.6</li> <li>Safeguarding measure to be defined by HSAB</li> </ul>	<ul> <li>Reduce rate of admissions for falls in population age 75 plus (baseline to be set)</li> <li>Increase the number of older people receiving a home assessment and advice and support to reduce their risk of a fall at home (local baseline to be set by Dec 2011)</li> <li>Increase the number of older people regularly exercising to maintain muscle strength (local baseline to be set by Dec 2011)</li> <li>Increase the number of older people receiving a medicines review to reduce their risk of a fall (local baseline to be set by Dec 2011)</li> <li>Increase the number of older people receiving a medicines review to reduce their risk of a fall (local baseline to be set by Dec 2011)</li> </ul>	<ul> <li>The percentage of emergency admissions occurring within 28 days of the last, previous discharge from hospital Target - 2011/12 -</li> <li>Reduce Emergency admissions 2011/12 admissions 2011/12</li> <li>Reduce Emergency admissions 2011/12</li> <li>Adults with mental illness or LD in employment employment illness or LD disability in settled accommodation Target - 2011/12 - 79% (tbc)</li> <li>Social care clients receiving Self Directed Support</li> <li>Proportion of people who have had a stroke unit</li> <li>Proportion of people who spend at least 90% of their time in acute hospital on a stroke unit</li> <li>Proportion of people who spend at least 90% of their time in acute hospital on a stroke unit</li> </ul>
							<u>Target – 2011-12 – 60 %</u>

<ul> <li>Personalisation -</li> </ul>	implementation of RAS and	customer journey to increase	uptake of Personal budgets	<ul> <li>Further develop rapid</li> </ul>	response service and urgent	care to reduce emergency	admissions	<ul> <li>Supporting people of working</li> </ul>	age into employment and	accommodation	Delivery of stroke Care	pathway
<ul> <li>Extend the falls prevention</li> </ul>	programme to deliver	effective prevention c	measures to a greater	proportion of the older	population at risk of falling.	0		•			•	
<ul> <li>Deliver Healthcare Acquired</li> </ul>	Infection Strategy and Work	plan	<ul> <li>Integration of quality</li> </ul>	schedules and safeguarding	requirements in provider	contracts	<ul> <li>10 Work streams of the</li> </ul>	Service Integration	programmes		Enhancing Safeguarding	Governance and Procedures
<ul> <li>Commissioning and</li> </ul>	Commercial Market	Framework & Strategy	<ul> <li>GP Consortium -</li> </ul>	Implementation of a work	plan for GP commissioning							
<ul> <li>Delivery of NHS QIPP</li> </ul>	Plan and associated	savings	<ul> <li>Delivery of Adult Social</li> </ul>	Care Cost Improvement	Plan	<ul> <li>Management Cost</li> </ul>	Savings					
<ul> <li>Improve NHS Dentistry</li> </ul>	access and use	<ul> <li>Market Development</li> </ul>	Project to improve the	range of provision	across Health and	Social Care	<ul> <li>Re-commissioning the</li> </ul>	third sector, to improve	range of services and	level of provision		
<ul> <li>Review of Reablement</li> </ul>	and Intermediate Care	Services	<ul> <li>Review of Continuing</li> </ul>	Healthcare and Free	Nursing Care	<ul> <li>Delivery of Frail and</li> </ul>	Elderly Care Pathway,	to improve outcomes	for older people			
Projects												



MEETING:	CABINET
DATE:	20 OCTOBER 2011
TITLE OF REPORT:	LOCALITY ASSET REVIEW AND ACCOMMODATION PROGRAMME
PORTFOLIO AREA:	CORPORATE SERVICES AND EDUCATION

### CLASSIFICATION: Open

# Wards Affected

County-wide

## Purpose

To note progress made on locality asset reviews (including the Hereford Accommodation Programme) and to endorse the proposed master plan and work programme within each locality including the accommodation solution for Herefordshire Public Services (HPS) back office staff in Hereford as part of the Hereford City locality.

# Key Decision

This is not a Key Decision.

## Recommendation(s)

#### THAT:

- (a) the overall principles to form an accommodation and asset management plan for the requirements within each of the localities be endorsed;
- (b) the master plan and work programmes for each locality be endorsed;
- (c) the proposal to deliver a refurbished Plough Lane facility rather than extend the site be agreed; and
- (d) the options for partner organisations to be co-located at the Plough Lane site continue to be explored.

# **Key Points Summary**

- The Localities Asset Review work forms part of the Council's Locality Strategy and is delivered through the Communities First work stream in Rising to the Challenge.
- This report summarises the work carried out to date and the locality master plans attached as appendices indicate the potential work programme of key projects that could be undertaken within each of the localities.

Further information on the subject of this report is available from Geoff Hughes, Director for Places and Communities on 01432 260695 David Powell, Chief Officer: Financial and Commercial on 01432 383518

- The Hereford City locality strategy encompasses the Council's Accommodation strategy with Plough Lane being the main focus for HPS back office staff. Following a high level review in June and July 2011 a refurbished office (without the need to extend the building) can accommodate projected staff numbers.
- This refurbishment option is feasible with a parallel strategy for relocation of Shared Services staff in line with the Joint Venture Company's aspirations. A high level review of property options for Shared Services has indicated a medium term cost neutral option.
- An outline refurbishment scheme for Plough Lane has been developed and costed based on a most likely headcount scenario of 800 with a 6 desks to 10 people working ratio.
- The refurbishment of Plough Lane would be funded through a programme of disposals of surplus properties and prudential borrowing funded by revenue savings from vacated properties. This means no additional costs of the refurbishment will be met by the council tax payer.
- The refurbishment of Plough Lane will mean that the provision of a new car park to the north of Plough Lane and a link from Yazor Road to Plough Lane is not now necessary.
- The revised proposal presents opportunities for use of the land acquired from Heineken adjacent to the Plough Lane offices. This will need to be investigated further with partners.
- The Plough Lane scheme and associated decant of HPS staff into the building is dependent on the delivery of a new Modern Records Unit (MRU) accommodation.
- The Plough Lane scheme and associated decant of staff into a refurbished building will be delivered alongside the provision of a new site for the Council Chamber and democratic services (most likely in Hereford Shire Hall).

## **Alternative Options**

- 1 The Locality Asset Review process identifies options to support a locality based approach to service delivery. It is possible that alternatives may emerge as detailed delivery plans are developed.
- 2 The decision to purchase Plough Lane in 2009 signalled the commitment to bring together functions on a single site being delivered from several locations across Hereford. The initial assessment in 2008 suggested that a significant enlargement of the capacity at the site would be needed. This option is no longer appropriate given the changes delivered since the date of purchase.

## **Reasons for Recommendations**

- 3 The accommodation and asset management plan developed for each locality identifies opportunities for services to co-locate as well as opportunities to dispose of properties no longer suitable for service delivery. Transforming the portfolio of public sector assets across the county seeks to improve outcomes for the local population within existing financial constraints.
- 4 The refurbishment of Plough Lane will enable the release of various properties. This will assist the delivery of the Herefordshire locality master plan and improve service delivery.

# Introduction and Background

- 5 Detailed analysis has been undertaken in each of the nine localities within the county, taking account of the approach endorsed by the Herefordshire Partnership. As a result detailed master plans have been developed for each locality.
- 6 The Hereford City locality strategy and master plan includes the Council's Accommodation strategy with Plough Lane being the main focus for HPS back office staff.
- 7 A detailed benefits case has been made for the refurbishment of Plough Lane which can be delivered in parallel with a relocation of Shared Services staff in line with the Joint Venture Company's aspirations
- 8 This scheme can be delivered without new build or new infrastructure and will allow opportunities for the use of the land adjacent to the Plough Lane offices.

## Key Considerations

- 9 The 2009 Joint Corporate Property Strategy set out a vision to support the integrated delivery of Public Services across the County through accessible and adaptable, community based, multi-functional buildings, shared by public agencies. The Total Place agenda and the Government's emerging approach to place-based asset management, when coupled with ever-increasing financial constraints has seen Herefordshire Public Services develop a common approach to localities in Herefordshire.
- 10 A series of asset reviews have been undertaken within the county over the past 12 months. Potential options include the identification of opportunities for services to co-locate, as well as those properties no longer suitable for service delivery. This means that properties surplus to operational requirements and available for disposal (either to achieve a capital receipt or a community asset transfer) have all been assessed with the following objectives:
  - a. More effective/efficient use of assets
  - b. Improved public access to services
  - c. Increased co-location and co-working across all sectors
  - d. Reduced revenue expenditure by sharing and redesigning services
  - e. Reduced county carbon footprint
- 11. Funding from the Regional Improvement & Efficiency Partnership (RIEP) has enabled the Council to commission support (EC Harris) for a number of feasibility studies in order to test and validate the outputs from these reviews. This process has looked at capital delivery projects required to transform the portfolio of public sector assets across the county.
- 12. Detailed analysis has been undertaken in each of the nine localities within the county, taking account of the tiered approach to service delivery and community engagement that has been endorsed by the Herefordshire Partnership. A further general principal is that any proposals must have regard to our key partner organisations. Proposals would need to be tested with Local Elected Members; Parish and Town Councils; and other local stakeholders. It is then intended that this work may be shared with newly established locality based partnerships by the end of 2011.
- 13. The attached table provides an initial analysis of those properties potentially within scope of a rationalisation of our localities asset base. This synthesises work done by Asset Management and Property Services, EC Harris and others, and constitutes our first take on the work that could be undertaken within each of the localities.
- 14. The following summarises this analysis into key projects:

- a. Hereford: accommodation strategy (back office), city centre campus (including Hereford Centre), data centre and records office.
- b. Leominster: redevelopment of the Westfield Walk / Windsor Place area, consolidation of the Old Priory and Earl Mortimer hubs.
- c. Ross-on-Wye: integrated customer services and visitor centre, community asset transfers of Tudorville and Wilton sports pavilion, John Kyrle High School redevelopment to incorporate leisure hub.
- d. Ledbury: creation of integrated service hub at Master's House.
- e. Kington: potential for community asset transfers of Old Police Station and Mill Street offices, relocation of Police and Fire Station.
- f. Bromyard: limited opportunities given the development of the public services hub model in the Bromyard Centre, and Children's & families services at the HOPE Centre.
- g. Golden Valley/Mortimer/Weobley: limited opportunities given the small size of the asset base in these localities.
- h. Wigmore: HALO Management.
- i. Peterchurch: Police and Fire Station and mobile provision.
- 15. Herefordshire Council's aim is to ensure that assets are managed in a way that strongly underpins wider corporate aims. Where appropriate asset transfers are to be used as a means of enabling voluntary sector organisations to improve outcomes for local people and become sustainable on a long-term basis.
- 16. The Hereford locality centres on a Plough Lane HQ building for HPS back office staff. It also identifies the refurbishment of the Shire Hall and a replacement archive/data centre and modern records unit as key 'spoke' projects to help deliver the locality strategy objectives.
- 17. In December 2009 the Council acquired land from Heineken adjacent to the Plough Lane to deliver a HQ project. Following a period of internal management of the project the Council commissioned EC Harris to manage the programme of accommodation projects, including development of the overall programme and procurement of the design and construction phases of the individual project elements of the programme.
- 18. During Phase 1 of their commission EC Harris collected data through a series of interviews which suggested that the HPS organisation would have an approximate headcount of 1,150 in 2014. With a desk sharing ratio of 6 desks to 10 people this indicated that it would be necessary to extend Plough Lane to provide a floor area of 7,400 m2, which included a new building of 3,200m2.
- 19. At that time EC Harris analysis showed that the Plough Lane extension project was financially viable and depending on headcount and desk sharing ratios could deliver up to £18m of net benefit. Their suggested option of 1,150 FTEs with a 6:10 ratio was agreed at this stage.
- 20. Work progressed on this option. However in June 2011 a review of the scheme was undertaken prior to the Plough Lane Extension scheme being finalised and submitted for planning. As staff numbers directly drive the overall office requirement and staff numbers had undoubtedly changed as a result of reorganisations since the original interviews in August 2010 it was considered prudent to review at this stage.
- 21. EC Harris undertook a high level review to understand the numbers of staff that could be incorporated into the existing building without extension and this short review indicated that up to 998 (with a working ratio of 6:10) could be housed within a reconfigured building without the need to extend.

- 22. A more detailed process was then commenced to obtain a firmer view of current and future headcount of the organisation to enable refurbishment scheme options to be developed and costed for consideration by the Accommodation Board.
- 23. During July and August 2011 EC Harris undertook a series of focus interviews with Directors and key staff which enabled a better understanding of current and future headcount forecasts for directorates than that collected in August 2010.
- 24. This work has indicated that the likely headcount at Plough Lane in 2014 will be in the region of 800 staff. This cannot be achieved without changing the accommodation layout at Plough Lane. This will also require changes to the way that employees work, including flexible working and the use of new technology. This is being addressed through the New Ways of Working project under Rising to the Challenge.
- 25. Based on this information EC Harris have created scheme options / space plans for a refurbished Plough Lane for headcounts ranging from 920 to 800 and even down to 700 should further reorganisations bring such staff reductions. They have undertaken a structural review of the existing building to inform the refurbishment scheme options.
- 26. Using the most likely scenario of 800 people in the organisation (with a 6:10 desk sharing ratio) a detailed benefits case has been modelled for this refurbishment project which indicates positive benefits and supports the consolidation of staff at Plough Lane without requiring additional build and infrastructure.
- 27. The consolidation of accommodation will see up to twenty properties being disposed with the sale proceeds supporting the funding model. The likely income which would be raised by disposing of these assets has been reviewed and there is a current estimate of £5.3m receipts.
- 28. The impact of disposing the current portfolio will be to reduce operational costs. A detailed review of current operational costs has been undertaken and a forward view of likely costs of a refurbished Plough Lane indicate that operational costs could significantly reduce from £828.5K to £348K. In addition, by disposing of these buildings the current backlog maintenance costs of £884K would be avoided.
- 29. There will also be wider benefits associated with the Plough Lane refurbishment these include transportation benefits from greater co-location and reduced travel; improved environmental performance of the asset which will assist in our carbon reduction targets; improved ways of working, improved productivity and service delivery improvements through co-location.
- 30. This refurbishment option is feasible with a parallel strategy for relocation of The Shared Services Partnership (TSSP) out of Plough Lane. As the refurbishment scheme was being investigated a high level review of property options for TSSP was undertaken with the aspiration of siting all of the organisations staff within one facility.
- 31. The review indicates that across Hereford buildings which are large and used for offices are generally split up into small office suites whilst there are a limited number other larger office blocks they are not in the Council's ownership. Given the limited options and possible high costs associated with finding a building large enough to house all TSSP staff it seems that a feasible option will be to use existing locations to deliver a cost neutral solution.
- 32. As a result of not extending the office building there may be opportunities for use of the land acquired from Heineken adjacent to the Plough Lane offices. Options continue to be investigated further with partners.
- 33. The Plough Lane scheme is dependent on delivering a long term solution for Modern Records accommodation. Work on this proposal has been progressing alongside the Plough Lane project. Concepts for a new build have been developed and a potential site has been identified at Rotherwas following evaluation of a number of alternatives. A detailed design and planning

application will now be developed for this project and funding may be released from the car parking now available as a result of the reduced proposal for Plough Lane.

34. The Plough Lane scheme will be delivered alongside the provision of a new site for the Council Chamber and democratic services (most likely in Hereford Shire Hall). A project initiation document is currently being developed for this project for agreement with the Accommodation Board.

### **Community Impact**

35 High as this impacts on people's ability to access the services they want, when and how they want to receive them.

## **Financial Implications**

- 36 Capital costs for the 920, 800 and 700 refurbishment scheme options have been developed which range from £8.9m, £8.8m and £8.7m respectively. It should be noted that these cost estimates are based on concepts for the Plough Lane offices and will need to be regularly reviewed as the scheme progresses with an associated review of the benefits case.
- 37. A current estimated £5.3m capital receipt from properties no longer required will make a significant contribution to the cost with the balance being funded by savings from the current costs of running existing buildings.
- 38. Based on this the scheme demonstrates a clear positive Net Present Value of £540K over a 25 year period.
- 39. The Council's current capital programme includes funding of £17.08mm for corporate accommodation. To date £6.05m has been spent. The proposal for a reduced corporate accommodation project will release funding to support other key requirements such as a new Archives and Modern Records facility.

## Legal Implications

40 None at this stage.

### **Risk Management**

- 41 The risk that insufficient resources are allocated to enable this work to be undertaken is mitigated by business cases to identify required resources.
- 42 There may be a risk that failure to secure buy in from key stakeholders affects delivery. The mitigation is that proposals will be fully tested across Herefordshire Partnership.
- 43 The nine locality master plans will need to be delivered in a manner that secures partnership working is a key success factor to closer working relationships at a local level.

## **Appendices**

43 Master plans of potential work that could be undertaken within each of the localities.

# Background Papers

None identified.



MEETING:	CABINET
DATE:	20 OCTOBER 2011
TITLE OF REPORT:	ESTABLISHING THE EVIDENCE BASE FOR COMMISSIONING
PORTFOLIO AREA:	HEALTH AND WELLBEING

#### CLASSIFICATION: Open

## Wards Affected

County-wide

### Purpose

To present the 2011 Joint Strategic Needs Assessment and State of Herefordshire Reports, and provide an overview of the work being undertaken across HPS to develop an overall Integrated Needs Assessment.

## **Key Decision**

This is not a Key Decision.

## Recommendation(s)

#### THAT:

- (a) the 2011 JSNA key points and recommendations document be noted;
- (b) the 2011 State of Herefordshire key findings report be noted;
- (c) the plans to develop an Integrated Needs Assessment (INA) be noted.

## **Key Points Summary**

- The 2011 JSNA has been produced using research and analysis undertaken across HPS throughout the year. More detail can be found on the JSNA webpages at <u>www.Herefordshire.gov.uk/JSNA</u>, along with the summary document provided as the 2011 Key Points and Recommendations (see Appendix 1).
- The State of Herefordshire (SOH) report has been refreshed for 2011, and the summary provided as Appendix 2.
- A more comprehensive examination of the JSNA process and how needs assessments are undertaken across HPS is being undertaken to inform the development of a wider INA. As

Further information on the subject of this report is available from Dr A Talbot-Smith on (01432) 344344 part of a three year programme to a 'Gold Standard INA' it will result in the 2012 JSNA being produced in line with planning and commissioning frameworks, by the end of June 2012.

## Alternative Options

1 There are no alternative options – statutory requirement.

## **Reasons for Recommendations**

2 To comply with statutory requirements.

## Introduction and Background

- 3. The intention for 2011 has been to refresh the JSNA and SOH reports. The summary findings are provided as Appendix 1 and 2.
- 4. Underpinning the JSNA Key Points and Recommendations summary document, and the State of Herefordshire report summary document, are the relevant websites which are integrated with the 'Facts and Figures' web-site resource. This provides a central repository of detailed analysis and research information that allow colleagues and stakeholders to find additional information on a range of areas as required, ranging from information by topic through to specific needs assessment that have been undertaken over the last year (e.g. the child poverty needs assessment; local economic assessment). This approach is line with good practice undertaken by many areas across the country.

# Key Considerations

- 5. The recommendations of the 2011 JSNA have been categorised as i) Areas for future work and ii) Challenges for commissioners. The dynamic approach to the JSNA means that many of these have been fed into the relevant fora in-year. The fact that work is already underway on some of these areas is a measure of success.
- 6. The development of an INA is intended to improve how we undertake needs assessments and analysis across HPS and with our partners. The key products to be delivered include:
  - A standard methodology for undertaking needs assessment that is robust and produces high quality analysis and intelligence
  - A high quality 'Gold Standard' INA through a three year development programme but with the first iteration late June 2012 to ensure synergy with the annual commissioning cycle
  - > A corporately agreed and prioritised programme of needs assessments
- 7. In moving forward with this work a number of key issues have been identified:
  - A need for greater engagement and involvement of stakeholders across the third sector. Events and workshops are being held in October to ensure this input occurs. This will feed into the development of the JSNA in 2012 and the INA process.
  - The JSNA and State of Herefordshire report support one another and are heavily interlinked. As we develop a 'Gold Standard' JSNA this relationship will become stronger, and we anticipate them being incorporated into a single integrated evidence base for commissioners available online. This will enable us to encapsulate the broad range of inter-linked issues that need to be considered but minimise duplication, enabling us to be more efficient in the way we identify, analyse, and present our intelligence.

The importance of the locality approach, with stakeholders knowledge providing important local knowledge to supplement routine data collection.

# **Community Impact**

- 8. Good quality needs assessments and analysis are essential to determining both community needs and gaps in service provision. This type of analysis is required to enable robust commissioning, planning and development of services that meet the needs of communities and individuals.
- 9. The documents will be available on the JSNA and 'Facts and Figures' public facing web-sites. Much of the underlying evidence for JSNA and SoH is already available on this website.

## **Financial Implications**

10. Good quality needs assessment and analysis will enable robust financial decision making and prioritisation processes, aiding how it allocates and makes the best use of resource.

## Legal Implications

11. The Health and Social Care reform Bill proposes that the delivery of a JSNA should be the statutory duty of the Health and Wellbeing Board, with both the Clinical Commissioning Group and the Local Authority having responsibility for its delivery

### **Risk Management**

12. There is a risk that the JSNA does not become integral to the commissioning cycle and that it's importance is not acknowledged. To ensure that the assessment of need and the associated process is recognised as a key analytical tool, a programme of engagement and promotion is planned.

# Consultees

13. There is no requirement to consult on the production of this document; however the findings are being presented to the Herefordshire Healthcare Commissioning Consortium, NHS Herefordshire Board, Herefordshire Partnership Executive Group and Health and Wellbeing Board.

## Appendices

Appendix 1 - Herefordshire's 2011 JSNA Key Points and Recommendations.

Appendix 2 - 2011 State of Herefordshire report.

## **Background Papers**

None identified.



MEETING:	CABINET
DATE:	20 OCTOBER 2011
TITLE OF REPORT:	DIRECTOR OF PUBLIC HEALTH ANNUAL REPORT 2011
PORTFOLIO AREA:	HEALTH AND WELLBEING

#### CLASSIFICATION: Open

## Wards Affected

County-wide

## Purpose

- 1. To inform the Cabinet of key population health issues in Herefordshire and of the recommended strategies and actions to address these as set out in the Annual Report of the Director of Public Health 2011.
- 2. To seek support from the Cabinet that the recommended approach and actions highlighted in the report will inform service development and commissioning aimed at improving health and wellbeing of the population of Herefordshire.

# **Key Decision**

This is not a Key Decision.

## Recommendation(s)

THAT:

- the Director of Public Health Annual Report 2011 Executive Summary, attached as Appendix 1 to the report be received. The full report can be accessed at <u>http://www.herefordshire.nhs.uk/156.aspx;</u>
- (b) the implementation of the report's recommendations and the proposed approach and actions highlighted in the report to inform service development and commissioning during the next planning cycle and in the medium term be supported; and
- (c) the dissemination of the report and help to cascade the key messages be supported.

Further information on the subject of this report is available from Dr Sarah Aitken, Interim Director of Public Health on (01432) 260668

# **Key Points Summary**

- This is the third Annual Report of the Director of Public Health since the appointment of a Joint Director of Public Health for the county;
- This year, the key messages are:
  - There is a social gradient in health in Herefordshire and reducing that social gradient is important for the sustainability of both the economy and health and social care services in the county.;
  - The ladder of intervention framework provides a vehicle for integrating lifestyle and enforcement action into a single integrated strategy for improving population health and wellbeing.
  - The social gradient in health starts in the womb and accumulates through life. A life course approach is necessary to reduce the social gradient in health.
  - A child's readiness for school at age 5 is strongly predictive of their future health and wellbeing, and the development of 5 year olds in Herefordshire is significantly below average for England.
  - Circulatory disease is the single largest cause of long term ill-health and disability in Herefordshire. The NHS Health Checks programme has the potential to reduce the social gradient in circulatory disease in Herefordshire.
  - The cost of falls-related admissions for older people in Herefordshire is substantial and could be reduced through strength and balance training, assessment of hazards in the home, assessment of vision and medication review.

# **Alternative Options**

1 There are no Alternative Options as the Director of Public Health Annual Report is a statutory requirement.

## **Reasons for Recommendations**

2 The report is required to provide an overview of health and wellbeing in the county and is the view of the Director of Public Health. The Cabinet is asked to support the recommended approach and actions to improve health and wellbeing in Herefordshire.

## Introduction and Background

- 3 There has been significant progress in implementing the recommendations from the previous reports and the longer term strategic actions from those reports are now embedded in current strategic and operational plans.
  - The report complements the Joint Strategic Needs Assessment and recommends areas of focus over the next 3 years to reduce the social gradient in health and reduce health inequalities;
  - The Executive Summary of the report is attached and will be made widely available.
  - The full report will be available online via the Herefordshire Public Services websites, with a

limited number printed for distribution on request.

• The 2011 Public Health Annual Report was launched at the public meeting of the shadow Health and Wellbeing Board on 18 October 2011

## **Key Considerations**

- 4 These are as follows:
  - Implications for the health and well-being of HPS staff as members of the local population and as key providers of the lifestyle management interventions recommended in the report.
  - Implications for changing traditional work practices, adding more people to the lifestyle management workforce and for staff training across HPS to accommodate the proposals in the report.
  - Supports the NHS Herefordshire QIPP agenda (quality, innovation, productivity and prevention).
  - Supports the implementation of the Public Health system reforms proposed in the white paper 'Healthy Lives, Healthy People'.

### **Community Impact**

5 The report highlights a range of health inequalities in the county and makes recommendations in relation to reducing inequalities.

### **Financial Implications**

6 Following consultation with relevant stakeholders and through the annual planning and prioritisation processes, if agreed, the cost of implementation of recommended actions would be included in annual operating budgets of relevant partner organisations in the county. There are potential long term financial and workforce implications around the strategic shift to the prevention of ill health.

## Legal Implications

7 None

### **Risk Management**

8 If not addressed, issues raised in the report will have an impact on the achievement of health and wellbeing targets to reduce inequalities in health.

The main risks revolve around the implementation of service transformation and challenge to traditional practices.

## Consultees

9	HPS Leadership Team	(6 September 2011)
	Leader's Briefing	(15 September 2011)

PCT Public Board(28 September 2011)Health and Wellbeing Public Board(18 October 2011)Cabinet(20 October 2011)

## Appendices

10 Appendix 1 - Director of Public Health Annual Report 2011 – Executive Summary

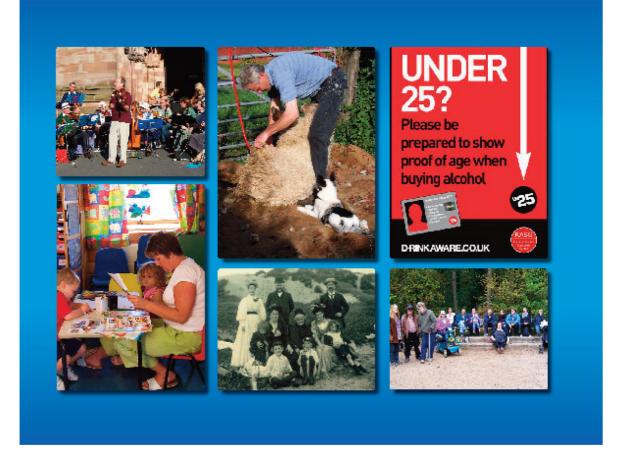
## **Background Papers**

None.



# Public Health Annual Report 2011

## Healthy Lives, Healthy People in Herefordshire







Working in partnership for the people of Herefordshire

# Introduction: The social gradient in preventable lifestyle-related disease and premature death

## **Key Points**

• Overall, people from deprived socio-economic groups not only have shorter lives, but also spend more of their later years living with a chronic disease or disability compared to more affluent people.

• On average the difference in life expectancy between people who live in the most deprived parts of England compared to those living in the least deprived areas is *seven* years (the difference in years between the lowest and highest parts of the upper curve in Figure A).

• On average the difference in disability-free life expectancy between people who live in the most deprived parts of England compared to those living in the least deprived areas is *seventeen* years (the difference in years between the lowest and highest parts of the lower curve in Figure A).

• As a result of this social gradient in health, only around a quarter of adults in England presently reach the proposed retirement age of 68 without having developed a chronic health condition or disability (the intersection of the green line and the lower curve in Figure A).

• The same social gradient in health exists in Herefordshire (Figure B) but is disguised by average health in Herefordshire being better than average for England

• The social gradient in health starts in the womb and accumulates through life meaning it is necessary to take a life course approach to reducing the social gradient in health, with the most effective interventions being those in the first years of life.

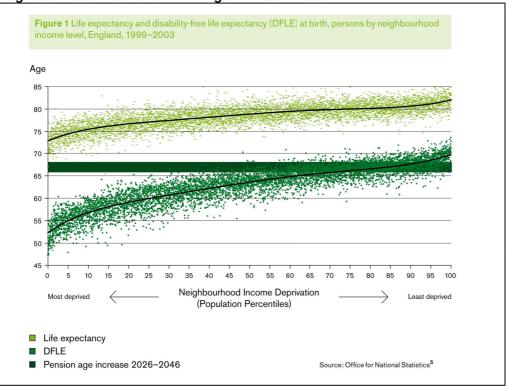
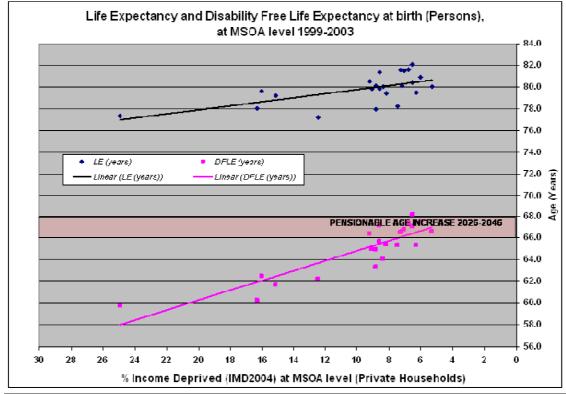


Figure A: Life expectancy and disability-free life expectancy at birth, persons by neighbourhood income level in England 1999 - 2003

Office for National Statistics (2009) Health expectancy at birth. http://www.statistics. gov.uk/StatBase/Product.asp?vlnk=1296

Figure B: Life expectancy and disability-free life expectancy at birth, persons by MSOA level in Herefordshire 1999 - 2003



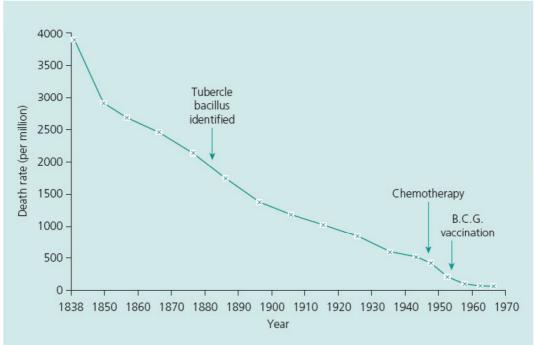
Office for National Statistics (2009) Health expectancy at birth. http://www.statistics. gov.uk/StatBase/Product.asp?vlnk=12964

## Chapter 1: Learning from the history of public health in Herefordshire: the importance of environmental and social change

## **Key Points**

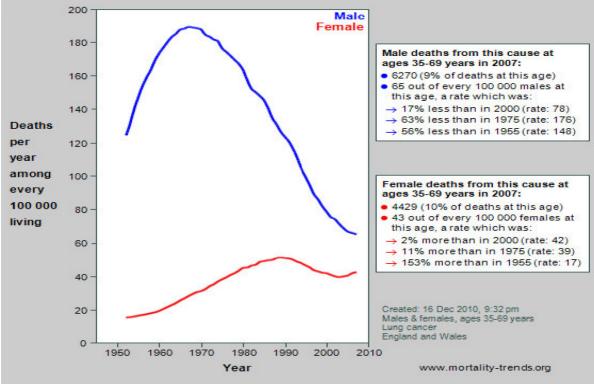
- A review of the history of improving population health and wellbeing in Herefordshire reminds us that environmental and social changes in living conditions and the introduction of public health legislation rather than innovations in health care led to a dramatic reduction in the death rate from infectious disease in the nineteenth and early twentieth centuries.
- A good example is the 90% decline in the death rate from tuberculosis before the introduction of chemotherapy and vaccination, as shown in Figure EX1.1. The TB sanatorium in Herefordshire closed in 1952 a year before the introduction of the BCG vaccination in UK secondary schools.

Figure EX1.1: Respiratory tuberculosis death rates in England & Wales 1838-1970



McKeown, T (1976) The Modern Rise of Population, Hodder, London

- Lifestyle related diseases have replaced infectious diseases as the main cause of premature deaths in England and Wales, as demonstrated by the rise in the premature death rate from lung cancer during the twentieth century (Figure EX1.2)
- The increase in the lung cancer death rate was first attributed to the increase in smoking rates among men by Sir Richard Doll in 1950, but it was not until 1970 that fewer men smoking started to result in lung cancer death rates falling. Conversely lung cancer death rates in women continued to rise as more women started smoking in response to increasing social freedom for women (Figure EX1.2) demonstrating the importance of the social determinants of health even when a behaviour is known to be harmful.



#### EX1.2 Mortality trends for lung cancer: 35-69 years of age, England and Wales

www.mortality-trends.org, using data from WHO and the UN Population Division

#### Milestones in the History of Improving Health and Wellbeing in Herefordshire

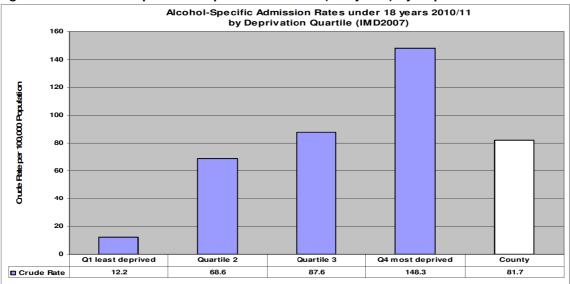
- Pre-19<sup>th</sup> century: philanthropy and folklore. The rise of the almshouses after the reformation; the first voluntary hospital; local folk remedies, and John Kyrle, the Man of Ross.
- 19<sup>th</sup> century: the dawn of public health legislation. Public Health legislation in a national and local context; sanitation improvements in the towns of Herefordshire, Reverend John Venn, benefactor to the people of Hereford.
- Early 20<sup>th</sup> century: the need for healthy recruits for the army. The development of the system of Medical Officers of Health and evidence from local records; children's health and medical inspections with examples of the effects of good food in rural areas; army recruitment, and pandemic influenza.
- 1920-1947: a better organised public health system. Further improvements in sanitation in Herefordshire market towns; the Herefordshire TB sanatorium opened, despite large reductions in TB cases due to public health improvements; Philanthropy through the Bulmer family to support housing improvements.
- 1947: the advent of the National Health Service. Reporting on post-war housing requirements; sanitation for rural areas; the rise of deaths from lung cancer in Herefordshire and the impacts of smoking; transfer of public health to the National Health Service.
- Late 20<sup>th</sup> Century: the age of expanding health inequalities. A report on health inequalities every decade from the 1970s onwards; Legionnaire's disease in Hereford
- 21<sup>st</sup> century: proposed transfer of public health back to local authorities

# Chapter 2: The ladder of interventions: an integrated approach to improving people's health and wellbeing through alcohol harm reduction in Herefordshire

## Key points

- This chapter focuses on employing the ladder of interventions to develop an integrated approach to alcohol harm reduction in Herefordshire.
- In Herefordshire, there has been a 10% increase in alcohol-related hospital admissions every year since 2007-08 with a significant increase in people aged 20-24 years
- It is estimated that the annual cost of alcohol related hospital admissions for Herefordshire residents is in the order of £5.5 million.
- A young person living in the most deprived quartile in Herefordshire is twelve times more likely to be admitted with an alcohol-specific condition than the one living in the least deprived quartile (Fig EX2.1)

Figure EX2.1 Alcohol-specific Hospital Admissions (<18 years) by Deprivation Quartile 2010-11



Data Source: Hospital Episode Statistics (HES), Analysis: Public Health Dept, Herefordshire PCT

- The strong social gradient in alcohol specific admissions evident in Figure EX2.1 suggests a social gradient in young people's attitude to harmful drinking.
- The "Bottletop" project has been an innovative local example of designing a campaign message that is relevant to young people
- Provision of Identification and Brief Advice (IBA) programme is very limited in Herefordshire
- Covert underage test purchases for both off-sales and on-sales of alcohol in Herefordshire, and prosecution of proprietors found guilty of selling illegally has been effective in reducing under age sales of alcohol.
- There is evidence that limiting the number of licensed outlets and licensed opening hours is effective in reducing the cost to society of harmful alcohol consumption.

 Alcohol consumption is directly related to the price. It is estimated that a minimum price for alcohol of 50p per unit would result in 98,000 fewer hospital admission per year in England. A minimum price of 21p per unit of beer and 28p per unit of spirits has been proposed by the coalition government in England.

#### Recommendations

#### Monitor the current situation

• Further develop the A&E data base for alcohol-related attendances

#### **Provide information**

- Support schools in Herefordshire to provide evidence based drug and alcohol education as an integral part of the school curriculum
- Expand the Bottletop project to promote sensible drinking using social marketing to target young people living in areas of multiple deprivation
- Locally enhance national campaigns to 'Know Your Limits' and to increase awareness of the units of alcohol in standard measures of alcoholic drinks

#### Enable choice and support people to change their behaviour

• Develop a commissioning strategy for alcohol harm reduction services to provide county wide Identification and Brief Advice services and a pathway to Tier 3 and Tier 4 specialist services

#### Guide choice through changing the default choice

• Ensure provision of readily available fresh water at all times in the night clubs, to give customers a free alternative to alcohol

#### Guide choice through incentives

• The effectiveness of any local scheme to provide incentives to reduce harmful alcohol consumption should be robustly evaluated

#### Guide choice through disincentives

Consider licensing restrictions on premises selling alcohol at less than 50p per unit

### **Restrict choice**

• Consider restricting opening hours of licensed premises and reducing the density of licensed outlets in Hereford city and the market towns.

#### Eliminate choice

• Strengthen the use of enforcement measures such as Dispersal Orders, Designated Public Place Orders and multiagency operations to stop underage sales to eliminate opportunities for young people to drink alcohol hazardously.

# Chapter Three: The Foundation Years: the social gradient is established before children start school

## **Key Points**

- The government has adopted the term Foundation Years to mean the phase of life from pregnancy to age five and its importance in underpinning later achievement and health
- Social gradient in health starts in the womb and accumulates through life.
- By the time today's 5 year olds reach retirement age they will be expected to work to age 68 years but many will not be healthy enough to do so without urgent action to reduce the social gradient in health
- The cost effectiveness of interventions to reduce the social gradient is highest in the foundation years and reduces as the child becomes older with interventions costing more and having less effect
- Action to reduce child poverty has close synergy with action to improve population health because reducing the social gradient in readiness for school at age 5 is the effective way to achieve both goals.
- Parenting is the biggest determinant of a child's readiness for school at age five, with the social gradient being strongly evident by age three.
- The average 'readiness for school' of 5 year olds in Herefordshire is significantly worse than average for England. (Fig EX3.1)

#### EXS3.1 London Health Observatory Marmot Indicators for Local Authorities in England





#### Marmot Indicators for Local Authorities in England

The chart below shows key indicators of the social determinants of health, health outcomes and social inequality that correspond, as closely as is currently possible, to the indicators proposed in Fair Society, Healthy Lives. Results for each indicator for this local authority are shown below. On the chart, the value for this local authority is shown as a circle, against the range of results for England, shown as a bar.

percentile

nercentile

Significantly better than England value     Not significantly different from England value	Regional value England	England value	England
<ul> <li>Significantly worse than England value</li> </ul>	Worst	25 <sup>th</sup> 75 <sup>th</sup>	Best

#### Herefordshire, County of

	Indicator	Local Authority Value	Regional Value	England Value	England Worst	Range	England Best
	Health outcomes						
	Males						
1	Male life expectancy at birth (years)	79.1	77.5	78.3	73.7		84.4
2	Inequality in male life expectancy (years)	3.5	8.7	8.8	16.6	•	2.7
3	Inequality in male disability-free life expectancy (years)	6.1	11.3	10.9	20.0	•	1.8
	Females						
4	Female life expectancy at birth (years)	83.3	81.9	82.3	79.1		89.0
5	Inequality in female life expectancy (years)	2.5	5.8	5.9	11.5		1.8
6	Inequality in female disability-free life expectancy (years)	5.0	9.2	9.2	17.1		1.3
	Social determinants						
7	Children achieving a good level of development at age 5 (%)	45.4	56.4	55.7	41.9		69.3
8	Young people not in employment, education or training (NEET) (%)	6.7	7.2	7.0	13.8		2.6
9	People in households in receipt of means-tested benefits (%)	11.6	17.9	15.5	41.1		5.1
10	Inequality in people in receipt of means-tested benefits (% points)	16.8	37.9	30.6	61.3	•	2.9

http://www.lho.org.uk/LHO Topics/national lead areas/marmot/marmotindicators.aspx

## EXS3.2 An overview of the Healthy Child Programme

Universal	Progressive	Higher Risk
Health and development reviews	Promoting child development including language	Referral for specialist input
Screening and physical examinations	Additional support and monitoring for infants with health or developmental problems	Contribution to care package led by specialist service
Immunisations		
Promotion of health and wellbeing, e.g.: - smoking - diet and physical activity - breast feeding - healthy weaning - keeping safe - prevention of sudden infant death (SIDS) - dental health	Promotion and extra support with breastfeeding. Support with behaviour change (smoking, diet, keeping safe, SIDS, dental health).	
Promotion of warm, sensitive, authorative parenting	Parenting support programmes including assessment and promotion of parent-baby interaction	High-intensity-based intervention
Involvement of fathers		
Mental health needs assessed	Emotional and psychological problems addressed	
Preparation and support with transition to parenthood and family relationships	Topic based groups and learning opportunities	Intensive structured home visiting programmes by skilled practitioners
Signposting to information and services Help with accessing of services and sources information and advice		Action to safeguard the child
	Common Assessment Framework completed	

## Recommendations

- A high priority should be given to improving the 'readiness for school' of 5 year olds in Herefordshire, with an emphasis on reducing the social gradient
- A commissioning strategy should be developed to increase support to all parents of children in the foundation years, with proportionately more support offered to parents of children with poor language development and/or behaviour problems and/or poor parent-child interaction.
- A commissioning strategy should be developed to achieve full implementation of the Healthy Child Programme, with an emphasis on reducing the social gradient in health through county-wide implementation of the progression from 'universal' services to 'universal plus' and 'universal partnership plus', (Fig EX3.2)
- The expansion of the Health Visiting workforce provides an opportunity to identify children with below average language development and/or poor behaviour and to provide or organise additional support to the child and parents to improve their readiness for school.
- The new offer of 15 hours per week free early education to 2 year olds from disadvantaged backgrounds provides an opportunity to reduce the social gradient in readiness for school.
- A decision as to whether or not to commission a Family Nurse Partnership Programme in Herefordshire should be taken once the results of the current trial are reported in 2013.
- At school entry age, all children should be assessed for their readiness for school and if necessary provided with additional support to bring them up to the average for England, with intensive support provided for those children significantly below the English average.
- The governance for action to reduce the social gradient in health in the Foundation Years should be encompassed by the governance arrangements for the Herefordshire Child Poverty Strategy.

# Chapter Four: Adults of working age: the social gradient in preventable lifestyle-related disease and premature death

## **Key Points**

• Circulatory disease makes a major contribution to the burden of avoidable chronic disease and premature death. It is the single largest cause of long-term ill health and disability in Herefordshire and the second leading cause of premature death.

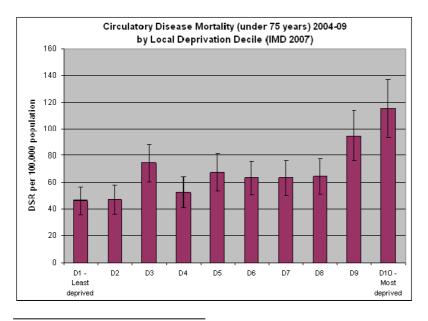
• A social gradient in circulatory disease is seen both at a national level (figure EX 4.1) and within Herefordshire (figure EX 4.2).

Figure EX 4.1<sup>1</sup> Age standardised circulatory disease and cancer death rates at ages under 75 by local ward deprivation level, 1999 and 2001-2003



ONS Health Statistics Quarterly

Figure EX 4.2 Circulatory disease mortality



<sup>1</sup> Marmot Review

Source: Dr Foster

• Nationally, health inequalities have been estimated to cost  $\pounds$ 31-33 billion per year in lost productivity,  $\pounds$ 20-32 billion per year in lost taxes and higher welfare payments and over  $\pounds$ 5.5 billion per year in the provision of additional NHS health care.

• Chronic disease impacts on people's ability to work and to be economically active. Unless efforts are made to improve the social gradient in the health of adults, many people will not be fit enough to work until the proposed new retirement age of 68 years with wide economic impact.

• Lifestyle behavioural factors such as smoking, diet, physical inactivity and alcohol consumption make a major contribution to the development of circulatory disease.

• These factors are all potentially modifiable through behaviour change interventions aimed at supporting people to quit smoking, to become more physically active, to eat healthily and to drink alcohol within recommended limits.

• The NHS Health Checks programme invites people aged 40-74, who haven't already been diagnosed with a chronic disease, to have an assessment of their risk of developing circulatory disease. This programme has the potential to make a major contribution to improving population health and to reducing future health and social care costs associated with the management of long-term conditions.

#### Recommendations

- Greater priority should be given to identifying people at high risk of circulatory and other chronic disease due to their unhealthy lifestyle behaviours and supporting them to change their behaviour to reduce their risk.
- The NHS Health Checks programme should be fully implemented in Herefordshire as soon as possible, ensuring that a range of services are available to support people found to be at high risk of circulatory disease to change their lifestyles.
- A high priority should be given to ensuring that healthy lifestyle services reduce the social gradient in health and are accessible to those at highest risk, particularly those from deprived communities where levels of unhealthy lifestyle behaviours are higher.
- High priority must continue be given to ensuring that smokers are identified and supported to quit smoking through the continued expansion of structured brief intervention by frontline NHS staff, the continued expansion of the network of providers of smoking cessation support, and the development of new smoking cessation support services delivered in workplaces employing unskilled and semiskilled workers.
- New healthy lifestyle services should be developed within an integrated 'ladder of intervention' approach to reducing the social gradient in adult health with increasing physical activity levels and reducing harmful alcohol consumption being the priorities for new service development.
- Brief intervention training should become more generic so that frontline NHS staff are able to provide brief intervention in relation to a range of lifestyle risk factors

# Chapter Five: Older people's health and wellbeing: focus on falls prevention

## **Key Points**

- Older people are the main users of health and social care services. At a national level over 65 year olds make up 16% of the population but account for 43% (£16.47bn) of total NHS spend and 58% of the total social services budget (£6.38bn).
- Falls in older people are a major public health issue and can have a serious impact on older people's health and wellbeing.
- Falls are the commonest cause of accident-related hospital admission and the third most common cause of accidental death in Herefordshire. Over recent years there has been an increasing overall trend in the number of hospital admissions due to falls in the county.
- In Herefordshire there were around 760 falls-related hospital admissions in older people in 2010/11 and there are typically around 200 hip fractures per year. This figure can be expected to increase as the local population ages.
- Over half of all serious falls occur at home and slips, trips and stumbles (32%), steps and stairs (11%) and falls from beds and chairs (7%) are the top three contributory factors. Over 60% of the falls that lead to hospital admission in Herefordshire occur in people over the age of 65.
- The serious consequences of falls include physical injury such as fractures of the hip, lost confidence, increased social isolation and reduced independence. Fear of falling in itself can severely limit an older person's daily activities and thereby have a dramatically detrimental effect on their physical and mental wellbeing.
- Estimates of the average cost of each hip fracture range from £11,700 to the NHS and over £3,800 over 2 years for social care to over £28,000 for combined health and social care costs.
- In 2010/11 the costs associated with hospital admissions for falls-related injuries in older people in Herefordshire stood at over £2.48m this does not include any social care costs.
- Falls prevention measures can reduce the incidence of falls by up to 30%, but "falls prevention services" typically focus only on people who have already had a fall (secondary prevention).
- There are cost-effective and evidence-based interventions which can be used to reduce the incidence of falls. The interventions which are known to be effective are simple and inexpensive and have the potential to save many thousands of pounds in health and social care costs. These include a combination of strength and balance training, assessment of hazards in the home, assessment of vision and medication review.
- Falls are not an inevitable part of growing older and, as discussed in Chapter 4, many of the lifestyle-related chronic diseases affecting people in their later life are preventable.
- Taking part in social activities and maintaining an active lifestyle throughout adulthood and into older age is good for the physical health and mental wellbeing of older people. Staying fit and healthy into older age is an achievable goal.



Photo: Bandemonium performing outside Hereford Cathedral

#### Recommendations

- A new Herefordshire falls prevention strategy should be developed with an emphasis on the primary prevention of falls in older people.
- A review of the existing falls prevention services in Herefordshire should be undertaken. Services which are ineffective or not based on sound evidence of effectiveness should be discontinued so that the funding can be invested in effective interventions.
- A local system needs to be developed for identifying those older people in the community who may be at risk of a first fall and ensuring that they receive appropriate sources of support.
- Front-line staff who are routinely in contact with older people (such as sheltered housing and care home staff, GP practice staff, environmental health and trading standards staff, community transport and library staff) have an important role in identifying people who are at risk of falling and should receive training in referring or signposting them to sources of help.
- A range of exercise programmes for older people which are designed to build strength and improve balance should be available across the county. This should include programmes in different settings (eg care homes, sheltered housing, community settings), of different types (eg chair-based exercises, "over 60s" exercise classes in the community, tailored home-based programmes) and in different geographical locations across the county.
- Despite the financial pressures on public services an affordable and trusted home improvement service should be available to vulnerable older people as a measure to prevent the much higher health and social care costs of falls-related hospital admissions.
- The Health and Wellbeing Board should develop and agree an integrated falls prevention strategy that incorporates strength and balance training, assessment of hazards in the home, assessment of vision and medication review.

#### Acknowledgements

Thankyou to everyone involved in the production of this report, particularly the authors for each chapter: Clare Wichbold, Dr Arif Mahmood, Dr Sarah Aitken, Hilary Sharpe, and Dr Alison Merry. Other colleagues in Public Health and Environmental Health and Trading Standards have supported the authors of the various chapters, for which, grateful thanks.

Peter Stebbings undertook much of the data analysis and produced many of the graphics, and Dr Alison Talbot-Smith also contributed health intelligence information for the report.

To prevent waste and save costs, only a small number of copies of the full report are being printed. The full Public Health Annual Report 2011 can be downloaded from <u>www.herefordshire.nhs.uk/156.aspx</u>. If you require a paper copy of the full report, please contact Louise Harper, email <u>louise.harper@herefordpct.nhs.uk</u>. The executive summary is also available as either a paper copy or a download from the same website.

The Joint Strategic Needs Assessment (JSNA) can be downloaded from <a href="http://www.herefordshire.gov.uk/factsandfigures/jsna.aspx">http://www.herefordshire.gov.uk/factsandfigures/jsna.aspx</a>



MEETING:	CABINET
DATE:	20 OCTOBER 2011
TITLE OF REPORT:	BUDGET MONITORING REPORT 2011/12
PORTFOLIO AREA:	CORPORATE SERVICES AND EDUCATION

### CLASSIFICATION: Open

#### Wards Affected

County-wide

## Purpose

To report the forecast financial position for both revenue and capital to 31 August 2011 and provide an update on Directorates' recovery plans IN PLACE to address projected overspends.

## Recommendation(s)

THAT:

- (a) Cabinet note the report and the forecast deficit position of £2.75 million; and
- (b) Cabinet note the Chief Executive's requirement that Directors deliver recovery plans to ensure a balanced revenue budget.

## **Key Points Summary**

• As at 31 August 2011 the overall revenue budget position for 2011/12 shows a projected £2.75m overspend. This is approximately 1.9% of the council's £146.3m revenue budget (excluding Dedicated Schools Grant funding).

### Considerations

- 1. Appendix A includes the detailed revenue budget monitoring report. The key area of concern continues to be the People's Services Directorate, with a projected £3.4m overspend. The position was a projected £3.0m overspend in July.
- 2. The major area of overspend within People's Services is commissioning of adult services, where there is an underlying overspend position and continuing demographic pressures. A detailed recovery plan is in place aimed at balancing the budget over a 2 year period.

Further information on the subject of this report is available from Heather Foster, Head of Corporate Finance on 01432 260284

- 3. The council's overall financial performance has a direct bearing on the level of reserves balance at year end, as any overspend on the revenue account would be funded from this source.
- 4. The overall revenue position continues to be mitigated by savings on borrowing, partly due to slippage in the capital programme and timing of borrowing in the year. This is playing a key part supporting the overall position.
- 5. Appendix B includes the position on the capital programme for 2011/12, which is a forecast out-turn spend of £57.3.
- 6. Appendix C sets out the treasury management position, which currently shows a projected under-spend of £600k.

## **Community Impact**

7. Not applicable.

## **Financial Implications**

8. These are contained in the report.

#### **Risk Management**

9. Effective financial reports, used to facilitate robust budget monitoring are an essential element in the management of risks and the delivery of the council's and Herefordshire Partnership's priorities.

### Legal Implications

10. None.

## **Alternative Options**

• There are no Alternative Options.

## Appendices

Appendix A – Revenue Budget Monitoring

- Appendix B Capital Monitoring
- Appendix C Treasury Management



## **REVENUE BUDGET MONITORING**

#### Summary

1. The following table summarises the 2011/12 projected outturn based on the financial position as at 31st August 2011.

£'000	Budget	Projected (over) or under spend
Director of People's Services	74,619	(3,389)
Director for Places and Communities	34,739	25
Deputy Chief Executive and Director of Corporate Services	23,079	250
Directorate Position	132,437	(3,114)
Capital funding	16,609	500
Investments	(249)	100
Revenue contribution to capital	95	0
WMS Profit Share	(624)	0
Centrally Held Budgets	1,355	0
Government grants	(2,810)	(70)
Transfer to/from Reserves	(500)	
Total	146,313	(2,584)

- 2. As of the end of August 2011 the overall revenue budget position for 2011/12 shows a projected £2.58m overspend. This is approximately 1.6% of the council's £146m revenue budget (excluding Dedicated Schools Grant funding). In order to address the forecast position the delivery of recovery plans is required by the relevant Directorates, and ongoing monitoring by HPSLT of those recovery actions..
- 3. The most significant overspend relates to commissioning of adult services, which relates to the brought forward budget issues plus increasing service pressures.
- 4. In addition to the revenue overview a capital monitoring summary is provided at Appendix B. The forecast outturn spend is £57.3m. The council has been successful in its application for a capitalisation direction of up to £1.5m to enable statutory redundancy costs incurred in this financial year to be capitalised.
- 5. Appendix C provides a Treasury Management update and explains an expected underspend of £500k on borrowing costs and £100k on interest received. The savings on loan charges are due to slippage on the capital programme, lower borrowing rates than forecast and the timing of

Further information on the subject of this report is available from Heather Foster, Head of Corporate Finance on 01432 260284 taking out loans. Additional interest earned is due to both higher cash balances and improved returns through investing in longer term deposits.

#### **Revenue Reserves Position**

- 6. The general reserve balance as at 31st March 2011 was £6.4m. The council has a policy of maintaining a minimum of £4.5m of general reserves as a contingency against unforeseen emergencies and events.
- 7. At 1st April 2011 the council held £17.6m of earmarked reserves, which are detailed in the table below

#### **Earmarked Reserves**

	31 Mar 2011
	£000
Balances held by schools under a scheme of delegation	6,002
Grange Court	41
Commuted sums	36
Industrial Estates - maintenance	400
Schools Balance of Risk	175
ІСТ	595
Members ICT	40
Planning	24
College Hill Community Centre	180
Waste Disposal	2,907
Invest to Save	305
Contingent liabilities	300
Edgar Street Grid	482
Whitecross school PFI	331
LPSA 2 reward grant	210
Schools Rates Reserve	217
Economic Development	168
Insurance reserve	296
Pool car reserve	10
Unused Grants cfwd	4,853
	17,572

#### DIRECTOR FOR PEOPLE'S SERVICES

£'000	Annual Budget	Under / (Over) spend
Services Commissioning – Adults	48,549	(2,964)
- Childrens*		
Public Health	2,116	0
Children's and Young People Provider Services*	23,954	(425)
Total	74,619	(3,389)

8. \* The allocation of the Children and Young People's Directorate budget between Provider Services and Commissioning has not yet been finalised, therefore the full budget is shown against provider services. This will be updated when budgets are confirmed.

#### **Services Commissioning - Adults**

- 9. The current report for adult services indicates an outturn position of £51,513k against a budget of £48,549k resulting in a projected £2,964k overspend. This projection also assumes the delivery in full of a £3,565k savings target and £1,043k transfer of NHS funding.
- The budgeted £3,565k savings target contributes towards the recovery of the brought forward deficit and achievement of a balanced budget by 31<sup>st</sup> March 2013. This leaves a further target saving of £3,614k to be achieved in 2012/13.
- 11. As at 31<sup>st</sup> August £721k has been achieved towards the target of £3,565k. This current position shows that £2,745k will be achieved across 16 schemes with a potential shortfall in year of £820k. Further work is being undertaken to identify savings to compensate for the shortfall and a report is to be taken to HPSLT by October.
- 12. The key pressures lie within Physical Disabilities (£1,372k), Mental Health (£881k) and Learning Disabilities (£1,114k). In the case of the first two pressures these are a direct result of demographic changes with an ageing population living longer, often in poor health.
- 13. Pressures within the Learning Disabilities budget are partly demographic as people with these disabilities live longer due to improved health care, partly due to increasing numbers coming through from Children's services (also due to more children with complex needs surviving to adulthood and increasing numbers of Children with Special Educational Needs) and pressures on an aging carer population which itself requires additional support.
- 14. The outturn position has increased by £393k as a result of:
  - a. Increases in residential (£87k) and personal budgets (£127k) over the expected demographic levels which in some cases have been backdated.
  - b. Contract inflation of £55k (agreed at 2.5% previously committed at 1%), contract let with no base budget of £50k (this was previously paid for out of transformation grant),
  - c. An increase in carers breaks; £33k and staff costs.
  - d. This is partially compensated by a reduction in domiciliary care.

#### Integrated Commissioning Recovery Plan

- 15. The schemes within the recovery plan are underway although some will only be realised as a part year effect due to the ability to: review cases, implement more effective processes and procedures for care planning and further the work in effective contract monitoring.
- 16. The proposed changes to charging rates are due to go out to consultation, with potential implementation in December 2011. In addition work is underway to improve financial assessments and collection which will start to make savings over the coming months.
- 17. The recovery measures are monitored on a monthly basis by the Cost Improvement Programme (CIP) Board and also through the Benefits Board. The CIP has three main themes; Managing Demand, Diverting Demand and Reducing Demand.
- 18. The recovery plan is regularly reviewed in order to bring forward new schemes upon presentation of sound business cases in order to achieve the target of budget balance by April 2013.

#### Public Health

- 19. Overall this service expects to meet budget for 2011/12, achieving the planned savings of £297k for the year.
- 20. At this point savings above the planned level cannot be predicted with any degree of certainty, some savings may emerge in landfill maintenance budgets but requirements vary according to weather conditions and cannot be anticipated in advance of the winter.
- 21. Charges for services which are not dictated by nationally set rates are being reviewed in line with the income strategy and will be increased wherever appropriate, subject to market conditions and parity with neighbouring authorities. Increases will be introduced as early as possible subject to Cabinet member and other relevant bodies approval.

#### Children's Services

- 22. Children's Services is currently predicting an over spend of £425k. This relates principally to Safeguarding services where costs are currently predicted to be £774k over the agreed budget. The two key reasons for the high level of over spend relate to the costs of caring for Looked after Children (LAC) and also the requirement to use agency social workers to cover vacancies and long term absences.
- 23. Looked after Children costs for agency and residential placements are predicted to be £307k over budget due to the continuing high numbers. The service has had some success in returning children home or placing with Herefordshire's own foster carers (a lower cost option) which has resulted in an additional 4 placements over the budget at an additional cost of £97k. Conversely there have been a number of emergency agency foster placements which have resulted in no overall reduction in numbers. At the end of August there were 60 looked after children in agency placements (13 in residential and 47 in agency foster care placements). At the end of August 2010 the comparable figures were 16 and 37, a total of 53 placements.
- 24. The continued high level of cases has meant that social work vacancies cannot be left unfilled in the key teams for looked after children, children in need (field work teams) and the referral and assessment service. Two additional short term agency social workers have been agreed to ensure all Child protection cases are covered. Overall the anticipated overspend is £306k on staffing for these teams.
- 25. The other key overspend within Safeguarding relates to a planned reduction of £60k in court costs, however numbers of children requiring court intervention have not reduced and therefore these planned savings will not be delivered in 11/12.

- 26. There are other significant savings targets to be delivered as part of the Children's Services and, although there are some areas of risk, there are opportunities to use grant funding to mitigate these pressures. This has been factored in to the overall forecast outturn.
- 27. There are a number of activities currently underway in order to deliver the budget savings. An update on the current status is provided below.

#### **Current Actions to Manage Budget Pressures**

- 28. The planned Children's Services restructure is now almost complete and savings are on track to meet the budgeted savings.
- 29. Additional resources recruited to increase the numbers of in house foster carers are now in place. Activities will be closely monitored to ensure the target increase of eight additional carers is achieved.
- 30. The Children's Services commissioning team is almost ready to sign a framework agreement with Worcestershire for agency foster care placements and initial discussions have been started to consider the development of a similar framework arrangement with residential placement providers.
- 31. The directorate has been successful in using legacy grants to offset staffing costs within Early Years, Youth services and parenting and family support. This has delivered the £349k which has reduced the overall over spend down form the £774k in Safeguarding to the overall total of £425k.

#### Provider and Commissioned Services

32. This report has been prepared for Children's Services based upon the old Children and Young People's Directorate (CYPD) budget as work has not yet been completed on finalising the split into provider and commissioned services. Future reports will be produced on the new structure once arrangements have been finalised following completion of the OD3 consultation process.

#### Potential Change to Academies Funding

33. As previously reported, the Secretary of State for Education has announced a review of the methodology for cutting Local Authority funds to provide the funds for Academies. The review is not yet complete and therefore it is not possible to second guess the outcomes. For Herefordshire either a scenario based on numbers of currently open Academies, or one based on number of current Academy applications would have a significantly adverse impact on the LA funding for Herefordshire. The impact could be up to between £0.5- £2.0m for 2012/13. This figure cannot be confirmed until the outcome of the review is complete and new methodology is confirmed.

#### DIRECTOR FOR PLACES AND COMMUNITIES

£'000	Annual Budget	Under / (Over) Spend
Economic, Environment and Cultural Services	6,932	(130)
Homes and Community Services	1,220	(130)
Place Based Commissioning	26,103	15
Director and Management	484	270
Total	34,739	25

#### Overview

34. The Directorate is expected to underspend by £25k.There are pressures on income budgets within parking and planning but these will be managed within the Directorate along with the £2.2m savings target for the year.

#### **Economic, Environment & Cultural Services**

- 35. Building control income to the end of August 2011 is 20% lower than the same period in the previous financial year however Development Control income is 32% higher than the previous year. Based on income patterns over the last two years, it is projected that there will be a net income shortfall in 2011/12 Planning income of £100k. This fall in income is due to the economic climate and the impact of the change in the timing of fee collection implemented in 2010/11, Fee income will continue to be closely monitored.
- 36. The transfer of Libraries frontline staff to Customer Services from the end of June 2011 has been agreed along with a base budget transfer with a savings target of £98k. The delay in carrying out the review of the Mobile Library service leaves Libraries with a savings shortfall of £30k.
- 37. Income at the Hereford Butter Market continues to be under pressure. It is likely that the £70k shortfall can be met from increased income from Street Trading and Open Markets.

#### Homes & Communities

- 38. Car parking charges will be increased from 1<sup>st</sup> November. Based on the annual income projections expected from these increases, income is unlikely to achieve the 11/12 budget by £210k. This shortfall reflects the slippage in the introduction of prices increases from the original implementation date of 1<sup>st</sup> September 2011. This pressure can be partly mitigated by other parking income which is currently above budget by £32k and is expected to exceed income budgets by £60k for the year.
- 39. There is an underspend in Housing of £20k in relation to staff costs due to vacancies.

#### Place Based Commissioning

40. The cost to Herefordshire of the joint Waste Disposal contract for 2011/12 is expected to be £8.9m if tonnage levels remain the same as in 2010/11. Whilst the annual budget is £8.7m, there is additional funding available of up to £790k set aside as part of the 2011/12 budget to meet this pressure if necessary.

- 41. The decision by Worcester County Council to grant planning permission for the new Energy from Waste plant at Hartlebury has been called in for review by the Communities Secretary of State. This will have an impact on the current year costs.
- 42. There is currently a review of the provision of public transport in light of the reduction in government funding. The results of this will be known shortly with the intention that contracts with providers can be renegotiated from 1<sup>st</sup> October 2011 to reduce contracts costs by £135k in 2011/12. Further other one off savings of £129k will help mitigate the overall 2011/12 pressure of £264k
- 43. There continues to be pressure on the Street Lighting budgets in relation to energy costs of £61k however this is expected to be managed by a plan to replace 2,000 street lights in residential areas of Herefordshire with alternative lights sources (Light Emitting Diode LED) along with the replacement of 959 halogen traffic signals with LEDs. This forms part of the Carbon Management Action Plan. The funding of this plan is currently being reviewed.
- 44. There is an underspend of £15k in relation to staff costs in the directorate management support team.

#### **Director and Management**

45. There is currently £270k underspend in relation to the Directorate's annual non pay inflation and OD2 savings which is currently available to help mitigate the pressures in Parking and Planning.

#### DEPUTY CHIEF EXECUTIVE AND DIRECTOR OF CORPORATE SERVICES

£'000	Annual Budget	Under / (Over) Spend
Customer Services and Communications	2,896	0
People, Policy and Partnership	7,859	0
Law, Governance and Resilience	3,036	0
Chief Finance Officer and Commercial	8,670	250
Directors	618	0
Total	23,079	250

#### Overview

- 46. The Corporate directorate has combined Deputy Chief Executive, Central Services and Resources areas. The savings target for the combined Directorate in 2011/12 is £1.5m. All savings plans are on track.
- 47. The Budget includes the elements contracted to The Shared Services Partnership and the provider of Internal Audit.

#### **Customer Services and Communications**

48. The Customer Organisation project will introduce a new system and look at our business processes for delivering front line services; this project will deliver savings targets in 2011/12.

#### People, Policy and Partnership

- 49. Corporate Transformation and the ICT Strategy have been brought together in this service.
- 50. Herefordshire Partnership, Human Resources and Policy Team are projected to spend within budget, achieving there efficiency savings targets.

#### Law, Governance and Resilience

51. Local Land Charges income continues to put pressure on the budget. However, there is a one off grant this year which will reduce the issue to £30k overspend. To reduce this overspend a review of how the current service is provided will be completed.

52. Locums in Legal Services remain until the service is restructured. This may cause a £80k budget pressure full year. However vacancy savings in other areas of Governance will cover this overspend until the restructure is implemented.

#### Chief Finance Officer and Commercial

53. Property outturn expenditure will match the total budget. This assumes that there is no reactive maintenance expenditure later in the year. The loss of income from the Cattle Market will be more than compensated for by revenue from the new Livestock Market by the year end.

- 54. The current system of Housing Benefit provides a financial incentive for authorities to recover overpayments of benefits from recipients. The Department for Works and Pensions pays Housing Benefit Subsidy to authorities based on benefits disbursed inclusive of overpayments (subject to conditions). Authorities effective in recovering overpayments may therefore receive a higher level of subsidy. It is estimated that the subsidy received will result in an underspend of £350,000. Reductions in the level of benefits payable and changes to the subsidy system are likely to mean that this level of surplus will not continue in future years.
- 55. The authority also receives subsidy to cover the costs of administering benefits. The amount receivable this year is estimated to be approximately £100,000 less than the amount budgeted. Further reductions are expected in future years.

## **Capital Forecast**

1. The capital forecast for 2011/12 totals £57.3m. A summary by directorate and funding source is provided in Table A below.

Directorate	2011/12 Forecast £'000	Prudential Borrowing £'000	Grant £'000	Capital Receipts Reserves £'000
People's Services	21,752	1,014	20,524	214
Places & Communities	27,614	3,516	20,655	3,443
Corporate Services	7,600	6,706	612	282
Contingency	383	383	-	-
Total	57,349	11,619	41,791	3,939

## Table A – Funding of 2011/12 Capital Forecast

- 2. The changes from the previous forecast are due to the following;-
  - The Hereford leisure pool budget has been increased to represent S106 receipts received and the allocation of prudential borrowing (to be repaid by HALO's increased future income stream) to enable the completion of the capital works.
  - The successful receipt of a capitalisation direction (£1.5m) from the Department for Communities and Local Government to enable the Council to capitalise statutory redundancy costs incurred in this financial year. This is the maximum sum available to be utilised and results in the Council being able to spread the cost incurred over a number of financial years.

#### 3. Table B - Schemes with a forecast exceeding £500k in 2011/12

Scheme	Spend to end August £'000	2011/12 Forecast £'000	Comments
People's Services			
Hereford Wyebridge Academy	2,051	5,852	Scheme within budget and on schedule, new building works complete
Schools Devolved Capital Programme	761	3,755	Devolved allocation and carry forward of capital funding to schools
Condition property works	366	2,696	Annual programme of works at various sites committed on a highest need first basis
SEN Targeted Capital Fund	1,071	2,417	Block funding allocation towards SEN provision at Hampton Dene, Barrs Court and Blackmartons
Basic Need - Schools	-	2,154	This funding is being allocated to schools through a bidding process, approved schemes will be notified in September
Primary Grant	133	1,731	To provide an all through primary school provision in Leominster

Places & Communities			
Local Transport Plan	3,296	10,348	Annual programme of works to highways, footways and bridges
Ledbury Library	26	2,487	This is the original funding allocation, scheme being progressed on a piecemeal basis
Grange Court	475	2,213	Refurbishment works underway
Disabled Facilities Grant	265	1,727	There is a large demand for these grants, applications are progressed through an approval process
Rural Enterprise Grant	694	1,667	Various grant funded schemes
Credenhill Flood Alleviation Scheme	1,502	1,617	Grant funded flood alleviation works in association with Hereford Futures
Livestock Market	1,784	1,352	New market provision open
Broadband Pilot	-	1,000	Herefordshire's Pilot scheme awarded by central government
Affordable Housing Grants	380	766	Various grants awarded to approved schemes
Rotherwas Futures	240	528	Work progressing on the northern access road
Connect 2	135	509	Non-motorised connection between the city centre and Rotherwas, preferred route in planning
Putson Community Building	21	500	S106 funded new build
Corporate Services			
Hereford Leisure Pool	1,834	3,396	Improvement works to complete in November
Corporate accommodation	593	1,100	Budget allocated to deliver a new headquarters, building work expected to start in 2012/13
Herefordshire's ICT efficiencies	490	638	Improved ICT provision to generate efficiencies
Sub Total	16,117	48,453	
Schemes with a budget <£500k in 2011/12	2,436	8,896	
Total	18,553	57,349	

## **Prudential Borrowing**

4. A summary of the forecast Prudential Borrowing (PB) position is set out below.

	£'000	£'000
2011/12 Original Prudential Borrowing Forecast		10,920
Add: Halo loan	1,700	
Capitalisation direction	1,543	
		3,243
Less: Slippage into future years		(2,544)
Expected use of Prudential Borrowing in 2011/12		11,619

5. The slippage of funds into future years relates to schemes slipping into 2011/12 and then into 2012/13, the main scheme slippage relates to the corporate accommodation capital scheme.

#### **Capital Receipts Reserve**

6. The opening capital receipts reserve balance was £6.8m as at 1st April 2011. During 2011/12 £3.9m is expected to fund the capital forecast and receipts are expected from the sale of Hillrise and the former Whitecross school site. The remaining capital receipts reserve balance is earmarked to fund corporate accommodation, any remaining compensation claims relating to the Rotherwas development and an element of infrastructure works required as part of Hereford Futures.

This report demonstrates the council is embracing best practice in accordance with CIPFA's recommendations, by keeping members informed of Treasury Management activity.

#### 1. The Economy

- 1.1. Recent economic events and statistics show the following:
  - Financial conditions deteriorating in most major economies.
  - Inflation remaining high (4.4% in July) and expected to increase further in the short term due to increases in gas and electricity prices.
  - Unemployement increasing in the quarter to June 2011 from 7.7% to 7.9%.
  - The Bank Base Rate now expected to remain at 0.50% until late 2012 or early 2013.

#### 2. The Council's Investments

2.1 As at 31st August 2011 the council held the following investments:

Investment	Term	Maturity Date	Interest Rate	Amount £m	invested £m
Instant access bank accounts:					
National Westminster Royal Bank of Scotland	N/A N/A	N/A N/A	1.10% 1.10%	2.50 5.00	7.50
Instant access Money Market F	unds:				
Prime Rate	N/A	N/A	0.73%	4.95	
Ignis	N/A	N/A	0.74%	2.01	6.96
Rolling monthly programme of £	1 million one	year term depo	osits:		
Barclays	364 days	16/09/11	1.46%	1.00	
Nationwide	334 days	25/10/11	1.25%	1.00	
Nationwide	364 days	24/11/11	1.33%	1.00	
Bank of Scotland	335 days	28/12/11	1.82%	1.00	
Bank of Scotland	364 days	26/01/12	1.95%	1.00	
Bank of Scotland	364 days	13/02/12	2.05%	1.00	
Newcastle City Council	364 days	15/03/12	1.55%	1.00	
Bank of Scotland	364 days	05/04/12	2.05%	1.00	
Bank of Scotland	364 days	02/05/12	2.05%	1.00	
Barclays	364 days	14/06/12	1.52%	1.00	
Lloyds TSB	364 days	25/07/12	2.05%	1.00	11.00
Rolling monthly programme of £	1 million six n	nonth term der	oosits:		
Lloyds TSB	182 days	17/02/12	1.42%	1.00	1.00
Other fixed term deposits:	400 1	05/44/44	4.040/	0.00	
Santander	122 days	25/11/11	1.21%	2.00	
Nationwide	215 days	05/12/11	1.09%	1.00	
Santander	148 days	21/12/11	1.28%	2.00	
Nationwide	245 days	01/01/12	1.14%	1.00	

#### **Treasury Management Interim Report Five months to 31 August 2011**

#### Appendix C

Total	Lloyds TSB	449 days	27/07/12	2.65%	0.50	13.50 <b>39.96</b>
	Barclays Barclays	306 days 328 days	27/02/12 20/03/12	1.41% 1.47%	1.00 1.00	12 50
	Barclays Nationwide Newcastle City Council	275 days 278 days 339 days	27/01/12 06/02/12 27/02/12	1.32% 1.19% 1.48%	1.00 1.00 2.00	
	Santander	184 days	26/01/12	1.41%	1.00	

#### The term deposits shaded grey are those placed in the last three months

- 2.2 Recent weeks have seen a deterioration in financial markets in the "Eurozone" where the lack of any real progress in resolving sovereign debt problems is having a wider effect. The Council has responded to advice from its treasury management advisors (Arlingclose) that the maximum maturity limit for UK and foreign banks and the Nationwide building society be reduced from one year to six months. The exceptions are Santander and Clydesdale where the limits have similarly been halved to become three months and one week respectively.
- 2.3 Arlingclose have stated that they do not believe that there are solvency issues with any of the institutions on their recommended lending list but believe the reduced maximum maturity limits is an appropriate and prudent response to recent events.
- 2.4 For the foreseeable future the council intends to continue restricting its investments to the largest of the UK financial institutions.
- 2.5 The forecast of the first change in the Bank Base Rate has once again been put back and is not now expected to take place until the end of 2012. Arlingclose has provided the following forecast (forecast provided in August 2011):

Bank Rate	Sep-11	Dec-11	Mar-12	Jun-12	Sep-12	Dec-12	Mar-13	Jun-13	Sep-13	Dec-13
Upside risk				+0.25	+0.25	+0.25	+0.50	+0.50	+0.50	+0.50
Central case	0.50	050	0.50	0.50	0.50	0.75	0.75	1.00	1.25	1.50
Downside risk						-0.25	-0.25	-0.50	-0.50	-0.50

2.6 The council has earned interest on its investments as follows:

Month	Average Invested £m	Average rate of interest earned	Amount of interest earned
April 2011	40.6	1.08%	£36,046
May 2011	47.4	1.15%	£46,099
June 2011	47.0	1.17%	£45,261
July 2011	48.2	1.17%	£47,788
August 2011	48.0	1.23%	£49,707
Total			£224,901

2.7 Interest earned in the first five months has exceeded budget due to both higher investment balances and higher average interest rates, due principally to the effect on income of maintaining the rolling programme of one year deposits. Reducing the maximum maturity limit for investments will have an impact on the amount of interest received but it is anticipated that interest earned in 2011/12 should still exceed the £249k budget by at least £100,000.

#### 3. The Council's Borrowing

- 3.1 On 12<sup>th</sup> July 2011 the council borrowed a further £7.50 million from the Public Works Loan Board. The new loan is for a period of 15 years at an interest rate of 3.59%, with £250,000 being repaid to the PWLB every six months.
- 3.2 On 12<sup>th</sup> July the June CPI inflation figure was released showing that the June figure had fallen to 4.2% from 4.5% a month earlier. At this point PWLB rates fell by 0.14%. Arlingclose advised that the rates would quickly go up and so we took the opportunity to take out some further borrowing at a rate which, at the time, was the lowest in 2011.
- 3.3 In recent weeks the unresolved debt problems in Europe have caused rates to remain low. A further loan will therefore be taken out before rates resume an upward trend. The council will delay as long as possible because of the cost of carry in the short-term, but rates will be monitored to ensure that the opportunity is not missed. The council can demonstrate a use for this funding.
- 3.4 As previously reported, the long-term borrowing budget was set in January 2011 at a time when PWLB rates were steadily increasing and there was concern over the interest rates that would need to be paid on future borrowing. Arlingclose's forecast was for the 20 year PWLB rate to reach 6% in the third quarter of 2011. In order to set a prudent budget, and give the council flexibility with regard to maturity periods, the budget was set using an interest rate of 5.75%. The borrowing budget can be analysed as follows:

	Budget	Forecast	Surplus
	£m	£m	£m
Minimum Revenue Provision	9.87	9.69	0.18
Interest on existing loans (January 2011 position)	5.43	5.43	-
Borrowing of £5m to be taken out before the end of 2010/11 (Budget 4.00%; Actual 3.71%)	0.20	0.18	0.02
Borrowing requirement for 2011/12 (Actual loan of £7.5m now taken out at lower rates than budgeted)	0.40	0.19	0.21
Borrowing of $\pounds$ 10m to externalise internal borrowing used to support the capital programme in 2008/09 and 2009/10	0.58	0.32	0.26
Provision for refinancing of LOBO loans at a higher rate	0.12	0.04	0.08
Total	16.60	15.85	0.75

#### Treasury Management Interim Report Five months to 31 August 2011

3.5 When interest rates were increasing rapidly it was a possibility that the council would borrow sooner rather than later. However the slowdown in the upward trend, then subsequent reversal, has delayed borrowing in 2011/12.



MEETING:	CABINET
DATE:	20 OCTOBER 2011
TITLE OF REPORT:	REVIEW OF PARLIAMENTRY CONSTITUENCIES
REPORT BY	

#### CLASSIFICATION: Open

## Wards Affected

County-wide

## Purpose

To explain to the Cabinet the Boundary Commission for England's' proposals for new Parliamentary constituencies in Herefordshire and to ask if it wishes to make representations to Council on the Boundary Commission's proposals as they affect the Herefordshire Parliamentary constituencies.

## Key Decision

This is not a Key Decision.

## Reason for Urgency

The last date for the submission of representations on these proposals is 5 December and the only meeting of Council before then is on 18 November.

## Recommendation

#### THAT:

The Cabinet formulates a view on the proposed new constituencies for Herefordshire and makes a recommendation to Council on 18 November 2011.

## **Key Points Summary**

- The first stage of the review process for the new Parliamentary constituency boundaries in England has been completed and the initial proposals have been published.
- Consultation on the initial proposals will close on 5 December 2011.
- The West Midlands region has been allocated 54 constituencies, which is a reduction of five from the current arrangements.

• The Commission's proposals include a constituency that would contain electorate from Herefordshire only, a constituency with electorate from both Herefordshire and Shropshire to include the towns of Leominster and Ludlow, and another constituency, which would include electorate from both Herefordshire and Worcestershire to include the towns of Leobury and Great Malvern.

## Alternative Options

1 That no response be made to the Boundary Commission for England for new Parliamentary constituencies.

## **Reasons for Recommendations**

2 It is for Members of the Cabinet to formulate a view on the proposals.

### Introduction and Background

3 The Boundary Commission for England are undertaking a periodic review of all the Parliamentary constituencies in England. It is currently conducting a review on the basis of new rules laid down by Parliament. These rules involve a significant reduction in the number of constituencies in England from 533 to 502 and require that every constituency apart from two specific exceptions (relating to the Isle of White) must have an electorate that is no smaller than 72,810 and no larger the 80,473.

## Key Considerations

#### Initial proposals

- 4 The Boundary Commission for England has now completed the first stage of the review process and has published its initial proposals for the new Parliamentary constituency boundaries in England.
- 5 The West Midlands region has now been allocated 54 constituencies which is a reduction of five from the current arrangements. The current proposals leave 10 of the existing 59 constituencies unchanged.
- 6 As it has not always been possible to allocate whole numbers of constituencies to individual counties, the Boundary Commission has grouped some Local Authority areas into sub-regions. The number of constituencies allocated to each sub-region is determined by the electorate of the combined Local Authorities.

Sub-Region	Existing Allocation	Proposed Allocation
------------	---------------------	---------------------

Herefordshire,	13	12
Shropshire,		
Telford and Wrekin and		
Worcestershire		
Staffordshire and	12	11
Stoke on Trent		
Warwickshire and	34	31
West Midlands		

- 7 The Commission's proposals include a Hereford constituency (76,780 electorate), a constituency which contains electorate from both Herefordshire and Shropshire which includes the towns of Leominster and Ludlow (77,911 electorate) and another constituency which includes electors from both Herefordshire and Worcestershire combing the towns of Leobury and Great Malvern (79,100 electorate),
- 8 Details of the Herefordshire wards in the new constituencies including the electorate are attached as an Appendix to this report.
- 9 In deciding boundaries of Parliamentary constituencies the Commissioner takes into account:
  - (a) Special geographical considerations, including the size, shape and accessibility of a constituency;
  - (b) Local Government boundaries as they existed on 6 May 2010;
  - (c) Boundaries of existing constituencies; and
  - (d) Any local ties that would be broken by the changes in constituencies
- 10 None of the above factors will override the necessity to achieve an electorate in each constituency that is within the range allowed.
- 11 The Boundary Commission for England is currently consulting on the proposals until 5 December 2011. It will then publish the representations made on the proposals, following which there will be a further four week period when additional written representations on the submissions can be made.
- 12 If the Commission decide to change its proposals as a result of the representations received, it will publish revised proposals and consult on them for a further period of eight weeks.
- 13 When the Commission has decided on its final recommendations for the whole of England, it will submit its proposals to the Government.
- 14 With regard to the naming of any new Constituency the Commissions policy is that when Constituencies remain largely unchanged, the existing constituency name would usually

3

remain unchanged. Generally, the name would reflect the main population centres contained in the constituency, though if a suitable alternative name is proposed which generally commands greater support locally, then the Commission will usually be prepared to recommend the alternative.

15 On receipt of the Commissioners final report the Government will then lay a draft order in Council which will be debated in Parliament. It is proposed that the new constituencies take effect at the Next General Election (2015). Any by-elections held in the meantime will be held on the basis of the existing constituencies.

## **Community Impact**

16 Local ties could be broken by the proposed changes in the constituencies and there could well be accessibility issues for constituents and the Member of Parliament.

## **Financial Implications**

17 There would be costs to the Council in preparing electoral data for the new Constituencies. These have not as yet been assessed.

## Legal Implications

18 None

### **Risk Management**

19 There are minor risks around the preparation of electoral data in the lead up to the next Parliamentary elections to ensure that no elector is disenfranchised.

## Consultees

20 All Members of the Council have been advised of the Boundary Commission for England's proposals and there has been a national publicity exercise.

## Appendices

21 Appendix 1- Proposed constituencies including wards and electorates for the Herefordshire constituencies

## **Background Papers**

None

## Appendix 1

Constituency	Ward	District/borough/city/county	Electorate
Hereford CC			76,780
	Aylestone	Herefordshire	4,987
	Backbury	Herefordshire	2,474
	Belmont	Herefordshire	6,364
	Burghill, Holmer & Lyde	Herefordshire	2,618
	Central	Herefordshire	2,001
	Credenhill	Herefordshire	2,581
	Hollington	Herefordshire	1,566
	Kerne Bridge	Herefordshire	2,548
	Llangarron	Herefordshire	2,619
	Old Gore	Herefordshire	2,518
	Penyard	Herefordshire	2,680
	Pontrilas	Herefordshire	2,809
	Ross – on – Wye East	Herefordshire	3,823
	Ross – on – Wye West	Herefordshire	4,246
	St Martins and Hinton	Herefordshire	8,313
	St Nicholas	Herefordshire	4,860
	Stoney Street	Herefordshire	2,419
	Three Elms	Herefordshire	7,643
	Tupsley	Herefordshire	7,089
	Vallets	Herefordshire	2,622
Ludlow and Leominster			77,911
CC	Bircher	Herefordshire	2,340
	Castle	Herefordshire	2,528
	Golden Cross with Weobley	Herefordshire	2,342
	Golden Valley North	Herefordshire	2,379
	Golden Valley South	Herefordshire	2,384
	Kington Town	Herefordshire	2,451
	Leominster North	Herefordshire	4,156
	Leominster South	Herefordshire	4,433
	Mortimer	Herefordshire	2,578
	Pembridge and Lyonshall with Titley	Herefordshire	2,387
	Upton	Herefordshire	2,330
	Wormsley Ridge	Herefordshire	2,047
	Alveley and Claverley	Shropshire	3,299
	Bishop's Castle	Shropshire	2,837
	Brown Clee	Shropshire	3,033
	Chirbury and Worthen	Shropshire	2,397
	Church Stretton and Craven Arms	Shropshire	6,933
	Clee	Shropshire	3,566
	Cleobury Mortimer	Shropshire	5,509
	Clun	Shropshire	3,093
	Corvedale	Shropshire	3,050
	Highley	Shropshire	2,720
	Ludlow East	Shropshire	3,038
	Ludlow North	Shropshire	3,030
	Ludlow South	Shropshire	3,051
Malvern and Ledbury CC			79,100
-	Bringsty	Herefordshire	2,290
	Bromyard	Herefordshire	4,547
			1,017

## Appendix 1

Frome Hagley Hampton Court Hope End Ledbury Sutton Walls Alfrick and Leigh Baldwin Broadheath Chase Dyson Perrins Hallow Lindridge Link Martley Pickersleigh Priory Teme Valley Tenbury West Woodbury Hartlebury	Herefordshire Herefordshire Herefordshire Herefordshire Herefordshire Malvern Hills Malvern Hills	2,751 2,909 2,157 4,492 7,342 2,440 2,927 1,691 2,825 4,876 2,906 1,534 1,823 4,958 1,419 4,481 2,965 1,559 3,022 3,240 1,660 2,139
Lovett and North Claines Ombersley	Wychavon Wychavon	4,287 1,860