

PUBLIC QUESTIONS TO CABINET – 15 DECEMBER 2022

Question 1

From: Mr P McKay, Leominster

To: Cabinet Member, Infrastructure & Transport

Referencing questions 21-07-2022 and 27-10-2022, when the Parish Submissions that have now been digitised are added to the PROW website increasing visibility and availability, it will be seen that comparing the Parish Submissions for CRF with early Definitive Maps identifies that this led to many, well over 100, Green lanes being shown as Footpath, council officers never using non-statutory CRF when raising the definitive map, nor as RUPP as intended, and the ROWIP finding that the byway and bridleway network is very fragmented with more bridleways needed throughout the county.

With the non-statutory term CRF coming about due to Government issuing guidance to Parishes that included non-statutory terms will you ask them to acknowledge this, and with use not considered by Parish meeting to be limited to that of footpath include mention of this in your List of Anomalies?

Response

Thank you for your question.

The council's Modifying the Definitive Map process is publicised on the council's website, link below:

<https://www.herefordshire.gov.uk/public-rights-way/definitive-map-statement-dms/3>

If there is evidence that a route is not correctly defined and there needs to be a change to the Definitive Map, the council will review and address as to the process, this will be managed as resources become available.

The council will not add CRF to the list of Anomalies as we do not have the supporting evidence to justify. The council advise that any evidence and request to amend the Definitive Map should be submitted as set out in the process.

Question 2

From: Ms D Conway, Leominster

To: Cabinet Member, Children and Families

In July, at Full Council, the claim was made that the incidence of Fabricated and Induced Illness (FII) in Herefordshire is 100 times the national average. In response, members and the public have been reassured by senior figures in this Council that the incidence of cases of is "not unusual when considered against other authorities".

When challenged in October to justify this claim, the public were told an audit was underway but not yet complete.

The Council committed to completing the audit by 18 November and to publishing the data "if it was ready".

Can the Council explain the delay and confirm when the data will be ready please?

Response

We recognise that there is considerable interest in the outcome of this request. The data is currently being validated and cross-checked and a further electronic search of case records has been requested by the Director of Children's Services to ensure that we have the most accurate

information possible before publishing this. We expect this activity to be concluded by mid-January.

Question 3

From: Hannah Currie, Hereford
To: Cabinet Member, Children and Families

The new plan, whilst commendably constructed, fails to grasp staff remain in post who are known to have toxic views. Toxic views do not just mean arrogance and the term "that's the Herefordshire way" or equivalent paraphrasing, it means deeply unsettling bullying characters and immoral view points.

An inability to recognise disabled parents traits that do not come from a malicious point is present. In turn disabled parents are pigeonholed into malicious categories unnecessarily. This is an equality/discrimination issue showing a clear lack of training.

At the full council meeting a former directorate employee has borne witness to a phrase "you hatch we snatch" being commonly used within the directorate. I cannot imagine any reasonable person agreeing that it is acceptable behaviour.

Are you going to send a clear message this behaviour will not be tolerated via public dismissals?

Response

We do not recognise the former employee's assertion that this is a phrase in use in the service but if it were, we would have no hesitation whatsoever to give a clear message that it would be unacceptable and would not be tolerated in this service along with any other language or behaviour that might be considered to be bullying or discriminatory.

Question 4

From: Rachel Gallagher, Hereford
To: Cabinet Member, Children and Families

What support are you offering for the children that have lost a sibling to adoption and what are you doing to prevent it?

There has been no change, how can we trust you to not permanently separate more sibling groups especially when the adoption rates in Herefordshire are higher than the national average?

Response

Whilst we will always try to keep siblings together there are occasionally times when this is not possible. Multi-agency support is offered to children and young people who have been separated from their sibling(s). This support is individually tailored to each child and circumstance.

The decision whether or not to keep siblings together where the plan is one of adoption is carefully considered and scrutinised. The Local Authority, the Guardian ad litem, and the Courts have a duty to consider the needs of each individual child which, in rare occasions, might mean that siblings are not placed together. This could include cases where the courts grants Placement and Adoption orders.

Adoption rates in Herefordshire in 2021-22 and for the current year in progress are not higher than the national average.

Question 5

From: Sarah de Rohan, High Sheriff of Herefordshire 2022-23
To: Cabinet Member Commissioning, Procurement and Assets

What plans have the Council for ensuring that the Shirehall does not deteriorate further? What budget and what action is to be implemented? When do the Council anticipate that the Nightingale (temporary court) will be up and running at Churchill House?

Response

Thank you for the query. To answer first the second part of the query, the Council continues to work with and support HMC&TS to bring a temporary court on line. Lease terms have been offered to take occupation of a building the Council owns and we await HMC&TS formal acceptance and legal completion. The HMC&TS have submitted a Listed Building Consent application for works that need to be undertaken to the temporary court site. Once approval is obtained we anticipate a formal plan of action from HMC&TS about their plans for occupation.

With regards the Shirehall property, works continue to make safe ceiling plasterwork, after seeking specialist advice, with the building being maintained and monitored in line with its listed status and winter conditions ie: heating is on, checks are scheduled, remaining works to stabilise the structural features implemented. The Council is using a mix of both revenue and capital funding to manage the site.

Question 6

From: Ms Reid, Hereford
To: Cabinet Member, Children and Families

The Ofsted report states:

“The timely and robust identification and multi-agency response to children and young people who are at risk of harm, including, but not limited to, the response to pre-birth children and babies ...”

which is effectively support to pregnant women and mothers of babies.

The draft Herefordshire Children’s Services Improvement Plan states: “Pre-birth pathway completed (September 2022)” though the implementation date is not mentioned.

When will all women needing help under the pathway receive it and will support be given to the mothers of babies under one under the pathway or separately and when will this be implemented? Should the Plan be finessed?

The rate of babies taken into care in Herefordshire increased to 6.7 per 10,000 children (2021-22) from 3.6 (2020-21). I estimate the rate for babies under one taken into care is 120 per 10,000.

Response

It is really important to us that expectant mothers (and all families) are provided appropriate levels as support as soon as they need it.

The revised pre-birth pathway has already been introduced and positive results are being seen. Assessments, support and interventions are timelier. Health partners have been complimentary of the new pathway and over time we shall be gathering and evaluating the feedback from families in receipt of services. We will continue to monitor this and evaluate the impact over time.

The rate (per 10,000 children) of children under the age of one taken into care was 3.6 in 2020/21 and 6.7 in 2021/22; this equates to an additional 11 children.