



Overview and Scrutiny Committee

Tue 4 Jul
2017
7.00 pm

Council Chamber
Town Hall
Redditch

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Overview and Scrutiny

Tuesday, 4th July, 2017

7.00 pm

Council Chamber Town Hall

Agenda

Membership:

Cllrs:	Tom Baker-Price (Chair)	Gay Hopkins
	Jane Potter (Vice- Chair)	Paul Swansborough
	Matthew Dormer	Jennifer Wheeler
	Andrew Fry	Nina Wood-Ford
	Pattie Hill	

1. Apologies and named substitutes

2. Declarations of interest and of Party Whip

To invite Councillors to declare any Disclosable Pecuniary Interests and / or Other Disclosable Interests they may have in items on the agenda, and to confirm the nature of those interests, and any Party Whip.

3. Minutes of the meeting of the Overview and Scrutiny Committee held on 1st June 2017 (Pages 1 - 10)

4. Herefordshire and Worcestershire Sustainability and Transformation Plan - Update (Pages 11 - 30)

(Background information attached and presentation to follow).

5. Leisure Intervention Work and Options for a Leisure Trust - Pre-Scrutiny (Executive Director of Finance and Corporate Resources - to Follow)

6. Topic Proposal Form - Civil Protection and Emergency Capability Short Sharp Review (Councillor Baker-Price) (Pages 31 - 34)

7. Mental Health Services for Young People Task Group - Recommendation 4 Update Report (Democratic Services Officer) (Pages 35 - 40)

8. Executive Committee Minutes and Scrutiny of the Executive Committee's Work Programme - Selecting Items for Scrutiny (Pages 41 - 50)

(The next edition of the Executive Committee Leader's Work Programme will be published on 3rd July. Copies of this work programme will be made available for the consideration of the Committee after this date).

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- 9.** Overview and Scrutiny Work Programme (Pages 51 - 54)
- 10.** Working Groups - Update Reports (Councillors Potter and Baker-Price)
 - a) Budget Scrutiny Working Group
 - b) Performance Scrutiny Working Group
- 11.** Task Groups - Progress Reports (Councillors Wood-Ford and Potter)
 - a) Homelessness; and
 - b) Staff Survey Joint Scrutiny.
- 12.** Health Overview and Scrutiny Committee (Councillor Wood-Ford)
- 13.** West Midlands Combined Authority Overview and Scrutiny Committee (Councillor Wheeler on behalf of Councillor Wood-Ford)



Overview and Scrutiny Committee

Thursday, 1st June, 2017

MINUTES

Present:

Councillor Tom Baker-Price (Chair), Councillor Jane Potter (Vice-Chair) and Councillors Gay Hopkins, Paul Swansborough, David Thain, Jennifer Wheeler and Nina Wood-Ford

Officers:

Helen Broughton, Kevin Dicks and Deb Poole

Democratic Services Officers:

J Bayley and Amanda Scarce

1. APOLOGIES AND NAMED SUBSTITUTES

Councillor Baker-Price welcomed Members to the first meeting of the new municipal year and explained that he was trying a new seating plan and room layout in line with best practice.

Apologies for absence were received from Councillors Matthew Dormer, Andrew Fry and Paul Swansborough, with Councillor David Thain in attendance as a substitute for Councillor Dormer.

2. DECLARATIONS OF INTEREST AND OF PARTY WHIP

There were no declarations of interest nor of any party whip.

3. MINUTES OF THE MEETING OF THE OVERVIEW AND SCRUTINY COMMITTEE HELD ON 28TH MARCH 2018

RESOLVED that

the minutes of the meeting held on 28th March 2017 be confirmed as a correct record and signed by the Chair.

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Chair

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4. REDDITCH LOCAL STRATEGIC PARTNERSHIP - MONITORING UPDATE REPORT

The Redditch Partnership Manager provided Members with a brief overview of the Partnership and its various theme groups, together with details of how these groups fed into the Redditch Partnership Executive Group (RPEG). Details of the Partnership's four current priorities were also provided. At its most recent meeting, following an away day which had aimed to refocus the Partnership, it had been agreed that RPEG should concentrate on one particular area per meeting. There was also a recently established sub group, the Suicide Prevention Task Group, which had been created following discussions between Worcestershire County Council (WCC) and Redditch Borough Council amid concerns being raised about the number of suicides from a particular site, and this would be added to the structure. An electronic Directory of Services was also being worked on, together with the Bromsgrove Partnership Manager, and it was hoped that this would be launched by September 2017.

Following presentation of the report Members raised a number of points, which were discussed in detail:

- Whether the directory would include information about different mental health organisations and it was confirmed that Primary Care had put together a directory and these would be incorporated within the new one.
- Whether the directory would give clear information about the work each group carried out and the age range that it catered for. It was confirmed that there might be some signposting within the directory as to where more detailed information could be found.
- Concerns were raised in respect of the directory only being available online, as it was acknowledged that there were still a number of residents who did not have access to the internet. The Redditch Partnership Manager provided Members with information about a recent initiative from one of the partners which was aimed at assisting those people through various means, whether it be by providing training or signposting to the library for example where help could be given in accessing the internet.
- Representatives from the Council, Redditch and Bromsgrove Clinical Commissioning Group (CCG), Worcestershire Health and Care Trust, the Police and Fire Authorities, Bromsgrove and Redditch Network (BARN), Worcestershire County Council, Public Health, Children's Services and Connecting Families all sat on the partnership.

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- However, it had proved harder to engage with representatives from the Education and the Private Sectors, though it was confirmed that representatives from local businesses sat on the Economic Development Theme Group.
- It was confirmed that there was an action plan in place in respect of the four priorities of the Economic Development Theme Group. Members discussed how the actions would be monitored in order to ensure that the work was focused within the right areas. It was acknowledged that this was difficult to quantify in many cases and needed to be looked at as a whole, although there were a number of measures in place within the action plan. This work was ongoing and cost benefit analyses for some areas were being carried out.
- Members discussed the need for joined-up working to ensure that work was not being duplicated, but equally the right areas were being focused on.

The Chief Executive explained to Members that the West Midlands Combined Authority was carrying out a large piece of work in respect of mental health issues, but the concern was that it would still remain an issue for the Council.

RESOLVED that

the Redditch Local Strategic Partnership – Monitoring Update Report be noted.

5. ENGAGEMENT STRATEGY - PRE-SCRUTINY

The Head of Business Transformation and Organisational Development presented the Community Engagement Strategy and explained to Members that it addressed the legal standards surrounding consultation and was designed to help the Council ensure that services met the needs of its residents. The strategy had been created following consultation with a number of residents and community organisations in order to ensure that it worked for everyone. It clearly stated what the Council meant by engagement and the principles that it would work to. It was explained that an action plan would now be formulated to ensure the strategy was put in place. Members requested sight of that plan to understand better its purpose and to ensure that the strategy was implemented appropriately and in a timely manner.

Following presentation of the strategy Members discussed a number of areas including:

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- The use of a Citizens' Jury and how this had been successful in the past. Officers confirmed that something similar had been used previously and currently a group of tenants were being consulted for feedback. Although they did not necessarily meet in person, they were asked for their views on a variety of subjects on a regular basis.
- Members questioned how consultation would work across the Council. Officers confirmed that different approaches were used by different departments and some subjects were easier to engage residents in than others. This ranged from online surveys to people going out and about in the community with a clipboard.
- The use of social media and text messaging in order to get feedback quickly on a particular subject.
- The strategy was not designed as an operational tool and officers would be expected to speak to the Policy Team and work with them to determine how best to engage with residents on a particular issue.
- Consultations which had been undertaken in respect of the Council's Leisure facilities were also discussed and whether the principles had been followed sufficiently.
- The Chief Executive reiterated that the Council needed to consult and engage more with its residents moving forward in light of the challenges it faced and advised that the Overview and Scrutiny function had a role to play in that process.
- Members discussed ways in which measureable outcomes could be demonstrated in order to ensure that the appropriate groups of people had been consulted.
- Officers confirmed there were national benchmarking percentages for the return of surveys which were normally between 25 and 28 per cent. Some subject matters would always be of more interest to people than others, although the Council was keen to get as many responses as possible. It was anticipated that key benchmarks would be included within the action plan.
- Various types of electronic surveys were discussed and officers advised that a piece of software had recently been purchased which allowed the Council to create its own online surveys and also provided a detailed analysis of the responses received.
- The difficulty in engaging with younger age groups and ways in which this could be undertaken, for example Facebook and Twitter.

After further general discussion it was

RESOLVED that

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the Community Engagement Strategy be noted, subject to consideration of the Action Plan at a future meeting.

**6. PERFORMANCE SCRUTINY - RESPONSE FROM
BROMSGROVE DISTRICT COUNCIL**

Officers provided background information and reminded Members that this item had been discussed at the Committee's previous meeting in relation to recommendations from the Performance Scrutiny Working Group, who had proposed joint working with the Measures Dashboard Working Group which had been established at Bromsgrove District Council.

The proposals had been considered at the Bromsgrove Overview and Scrutiny Board meeting held on 24th April 2017 when it had been agreed that the Measures Dashboard Working Group would, in the first instance, be interested in informal meetings being arranged biannually with the Performance Scrutiny Working Group. However, Bromsgrove Members did not feel at this stage that it would be appropriate for joint performance scrutiny meetings to be held as they were at a different stage with reviewing the measures dashboard.

**7. OVERVIEW AND SCRUTINY RECOMMENDATIONS -
MONITORING UPDATE REPORT**

Officers introduced the report and in so doing highlighted that a separate sheet had been tabled which included the dates when each of the recommendations listed in the monitoring update had been made by this Committee.

There remained two outstanding items which had been made prior to 2016. In respect of the recommendation from the Voluntary and Community Sector Task Group it was noted that a Grants Officer had now been appointed and that work was in progress to recruit an apprentice, however as this had been outstanding for a number of years, Members requested that a definitive date be given as to when this would be completed.

Members also discussed the following:

- The recommendation from the Budget Scrutiny Working Group in respect of consideration being given to ways to manage the Town Hall and other property assets. Within the response reference was made to the "One Public Estate" exercise currently being undertaken and Members asked for

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further information in respect of this exercise. The Chief Executive undertook to ensure that this was put on the Executive Work Programme in order for the Committee to have the opportunity to pre-scrutinise it at a later date if it so wished.

- There were a number of responses which Members agreed needed further detail in order to establish whether the recommendations had been completed and the Chief Executive supported the need for further detail, particularly in respect of the re-charging process recommendation from the Budget Scrutiny Working Group.
- Reference was also made to the marketing of the Lifeline service, which was from a recommendation by the Performance Scrutiny Working Group and Members discussed the proposed introduction of a Business Development post which would be included in the overall review of the service. It was acknowledged that a large amount of business would need to be generated to justify such a post being created.
- The general use of apprenticeships throughout the Council was discussed and Officers explained that full details could be made available to Members outside of the meeting if required.
- Attention was brought to the recommendations from the Mental Health Services for Young People Task Group and whilst it was accepted that these had only recently been approved, it was understood that in respect of recommendation 4 “the Leader of the Council to write to the Secretary of State for Education” a detailed response had been received. However, as this made greater reference to Sex and Relations Education (SRE) than to Personal, Health, Social and Economic Education (PSHE) lessons, which had been the subject of the group’s recommendation, Members requested a written update to the next meeting of the Committee in respect of this matter.

RESOLVED that

subject to the actions detailed in the pre-amble above, the report be noted.

8. EXECUTIVE COMMITTEE MINUTES AND SCRUTINY OF THE EXECUTIVE COMMITTEE'S WORK PROGRAMME

Officers highlighted to Members that reference was made to the recommendations from the Mental Health Services for Young People Task Group final report. Two recommendations had been

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endorsed by the Executive Committee and one, in respect of the addition of a new theme to the Grants Programme had been rejected. The remaining recommendations had been noted as they were for the consideration of organisations outside of the Council's jurisdiction.

In respect of the Executive Committee Leader's Work Programme an updated version was tabled at the meeting and was considered by the Committee. Officers confirmed that the Leisure Intervention Work and Option for a Leisure Trust was already scheduled in to the Committee's Work Programme for pre-scrutiny.

RESOLVED that

the Executive Committee Minutes of 4th April and the latest edition of the Executive Committee Leader's Work Programme be noted.

9. OVERVIEW AND SCRUTINY WORK PROGRAMME

Officers confirmed that a presentation on the Herefordshire and Worcestershire Sustainability and Transformation Plan update would be received at the next meeting from representatives of the Worcestershire Health and Care Trust and Worcestershire Acute Hospitals NHS Trust. It was agreed that, as previously, all Members would be invited to attend this meeting.

Members discussed the potential to include a presentation in respect of the work of the Lifeline Team. However the Chair highlighted that the Performance Working Group had recently considered this area as part of its work and it was therefore agreed that this should not be considered until that work had been completed.

RESOLVED that

the Overview and Scrutiny Work Programme be noted.

10. WORKING GROUPS - UPDATE REPORTS

Budget Scrutiny Working Group – Chair, Councillor Jane Potter

It was confirmed that the next meeting of the Budget Scrutiny Working Group would take place at 4.00 p.m. on 27th June 2017 and that Councillor Potter would again be Chair of this group.

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Performance Scrutiny Working Group – Chair, Councillor Tom Baker-Price

It was confirmed that the next meeting of the Performance Scrutiny Working Group, which would be chaired by Councillor Baker-Price, would be held on 21st June 2017 commencing at 6.30 p.m.

It was confirmed that the membership for both groups remained the same as in the previous year.

11. TASK GROUPS - PROGRESS REPORTS

a) Homelessness Short, Sharp Review

It was confirmed that this Short sharp Review would be chaired by Councillor Nina Wood-Ford supported by Councillors Natalie Brookes, Anita Clayton, Pattie Hill and Antonia Pulsford. Its first meeting would take place at 10.30 a.m. on 14th June 2017.

b) Staff Survey Joint Scrutiny Task Group

The membership remained the same for this Joint Task Group and it was confirmed that a meeting had not been held since the last update was received by the Committee.

12. HEALTH OVERVIEW AND SCRUTINY COMMITTEE - VERBAL UPDATE (COUNCILLOR WOOD-FORD)

Councillor Wood-Ford, as the Council's representative on the HOSC (Worcestershire Health Overview and Scrutiny Committee), highlighted a number of areas which had been discussed at its most recent meeting. This included:

- Access to Primary Care - a presentation had been received which outlined the current context, local and national developments and what the future might hold for access to Primary Care, including GPs and the importance of their inclusion within any future plans. The role of pharmacists within any future plans was also discussed, together with the potential to upskill nursing staff, a volunteer programme and the availability of apprenticeships.
- Changes to commissioning policies affecting hip and knee replacement surgery – it had been reported that a review of this was required as part of the need to make savings from the combined Worcestershire CCGs' budget for 2017/18. During a budget consultation in 2016, the general public had not been supportive of restricting joint replacement surgery. However,

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the three Worcestershire CCGs had different clinical activities, resulting in unexplained variations in this type of surgery, with Redditch and Bromsgrove CCG having a higher level when benchmarked nationally. Discussions had covered how treatment varied between the north and south of the County.

The Chair thanked Councillor Wood-Ford for her comprehensive update.

13. WEST MIDLANDS COMBINED AUTHORITY OVERVIEW AND SCRUTINY COMMITTEE - VERBAL UPDATE

It was confirmed that whilst there had not been a meeting of the West Midlands Combined Authority Overview and Scrutiny Committee since the last meeting of the Overview and Scrutiny Committee, Councillor Nina Wood-Ford had been appointed as the Council's representative on the Committee for the municipal year and Councillor Jennifer Wheeler would act as the substitute. However, the next meeting was due to take place on 4th July 2017 and unfortunately Councillor Wood-Ford was unable to attend and so Councillor Wheeler would attend in her place.

The Meeting commenced at 7.00 pm
and closed at 8.25 pm

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Health and care services in Herefordshire & Worcestershire are changing

An update on a five year plan to provide safe,
effective and sustainable care in our area

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Your Health & Wellbeing
#YourConversation

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Agenda Item 4



Why our health and care services need to change

Across Herefordshire and Worcestershire, health and care organisations are committed to providing safe and effective services, but the way some services are run may need to change.

This is because we have a growing population with people living longer than ever, but as we age our health needs change. This leads to rising demands on services, and we want to make sure we can provide safe and effective services with the resources available.

We are also experiencing some practical issues in our area:

- Recruiting and retaining staff is a challenge
- Our health, local authority and other care services are not always joined up, designed to meet people's individual needs and do not always balance physical health with mental health and wellbeing

- We spend too much of our time and resources treating illnesses which can be prevented or supported in different ways
- On current projections, we won't have enough funding to meet expected levels of demand

All of this means we have to make some really tough decisions about how we provide and access care, treatment and support in our local area. By working together as organisations and with our patients and communities we think we can do lots of things better, but we also have to be clear that we can't carry on doing what we've always done, and some hard choices are required which may mean some things being delivered differently, or not at all, over the coming few years.



#YourConversation

This update provides some thoughts on how health and care service could change to help us continue providing safe, effective and sustainable care and support. We won't make these tough choices without the views of patients and our wider communities and while there may be constraints on what is possible, there will be lots of opportunities to get involved in helping shape things moving forward. The information described in this update are some initial thoughts and concepts, they are not set in stone.

This is your health and wellbeing, and therefore #YourConversation so we want you to let us know what you think. Details of how you can do this are at the end of this document.

What you've told us is important

Over the last few years health and care organisations across Herefordshire and

Worcestershire have been out and about listening to feedback on services and the way care has been organised. This has helped inform some of the thoughts described in this document.

We have heard that:

- You want to receive more care at home or as close to home as possible
- You want us to provide more care, including urgent care through GP practices
- You want better communication between teams/staff so you don't have to repeat your story over and over again
- You want to access the right service, first time but often it is not clear how to do this
- You and your family want to be part of developing your care plan, and you want easy access to help and support
- You want to be empowered to self-care aspects of your conditions where this is appropriate
- You want improvements in the range of mental health services and support so you can access help before things get too serious
- Transport needs to be key consideration in any proposals to change how services are provided.

Safe, effective and sustainable

Our vision:

Local people will live well in a supportive community with joined up care underpinned by specialist expertise and delivered in the best place by the most appropriate people.

- Making our current out-of-hospital system more efficient and effective
- Improving access to urgent care
- Ensuring our specialist services are safe and sustainable

In reality this will mean:

- Organisations working better in partnership to make services easier to navigate and access
- We all need to do more to support healthy living, or to self-care and manage aspects of our conditions ourselves
- Improving parity of esteem between mental and physical health, so both types of conditions are viewed equally
- Providing more care in the place where you live or closer to home, reducing avoidable hospital admissions





We know there are lots of serious and long-term health conditions such as diabetes, stroke and heart disease which in lots of cases can be prevented.

We also recognise that if we can encourage healthy living within children and young people then they are likely to take their healthy life choices into adult hood, which will help prevent the kinds of illness which are influenced by lifestyle. We also want to encourage children and young people to get active and healthier now so avoidable health issues, for example those triggered by obesity, can be prevented.

We want to view prevention and healthy living as everyone's responsibility, and not just an issue for health and social care organisations. We want

to work better with housing providers, schools, colleges and local businesses, and we also need to empower local communities, voluntary sector organisations and other community groups to help put physical and mental wellbeing at the heart of our communities.

When someone does get ill we want to be better equipped to support them and their families with tools to stay independent and in control which lots of people tell us is important. We want patients to become equal partners with those caring for them, make more decisions about their own treatment plans; ensure timely advice and support; and to enable them to become increasingly confident to manage their own conditions supported by useful and usable technology. For example, the number of people living with dementia is increasing,

but early diagnosis and support can help people to live as well as possible. We want to support people who notice that their own or a loved one's health is deteriorating, so that they can make timely decisions about the support they might need to live independently and safely and so that carers are supported and able to keep themselves well.

Carers

Carers are key to providing safe and effective out of hospital care however they don't always get the recognition and support they need to;

- a) help and support the person they care for to safely manage their condition at home,
- b) stay well themselves so they have the resilience to fulfil their caring role.

We need to work with carers to better understand the impact of any changes we make.

Patient story – Kate

Kate was a real sports fan but an injury stopped her playing for a few months and she struggled to get back in to it. By the age of 40 Kate did little exercise herself. She was stressed at work, and because she was putting in long hours she had become over reliant on fast food. On a regular check-up at her GP, Kate was told she was quite overweight and that there was a risk of developing diabetes as well as other health conditions if things didn't change. She was encouraged to change her lifestyle habits and was put in touch with a fitness coach who could recommend an exercise programme. She downloaded an app so she could access healthy food options, and was put in touch with primary care mental health teams which provided help to alleviate stress and anxiety. The fitness programme helped her get back into shape and when things do start getting too much at work, she has some self-help tools to keep things manageable. She's now thinking about re-joining her tennis club as well joining a local amateur running club to maintain her new found fitness.



Getting an appointment at my local GP

It can be really frustrating ringing for a routine GP appointment and being told you may have to wait two or three weeks. We also know that once you get one, the consultation with your GP is often restricted to just 10 minutes. This is because demand on GPs is increasing too, making it almost impossible to get same day appointments in some of our surgeries.

We think there are opportunities for local surgeries to pool their resources to more effectively share some of the demand. We also need to think, 'if I need an appointment, does it really need to be with my preferred GP'?

There may be times and circumstances when that is appropriate, but in lots of cases people have illnesses or conditions which can be just as effectively dealt with by a nurse who works in the local surgery.

This could help people get appointments much sooner, get the help and treatment needed, reduce demand on GPs, and ensure when someone really needs to see the GP they have a better chance of getting an appointment quicker. If this works we also want to increase the consultation time for those who need it.

We also want to develop our local community teams with input from local GPs to help maintain someone's health at home and reduce the risk of them being admitted to hospital unnecessarily.



Most admissions in people over 75 have bypassed GPs or out-of-hours services. Older people are more likely to call an ambulance, more likely to be conveyed to hospital, and once there, more likely to be admitted.

Providing more care at home or out of hospital

Wherever possible we should ensure that people do not get admitted to hospital unless they absolutely need to be there. Currently too many people are admitted to hospital for issues which could reasonably be treated at home or in the place where they live.

We also know that once admitted to a hospital bed, sometimes people stay there longer than necessary. This can actually have a bad effect on someone's health so we want to make sure they can leave hospital as soon as they are well enough. We have services which are equipped at providing

care at home and reducing the risk of hospital admission; for example we have teams which support children with complex conditions at home; we have community nursing and therapy teams who help manage long-term issues at home or in care homes, including dressing wounds and support with medication; and we also have social care teams which provide domiciliary care at home, such as supporting someone preparing meals, dressing and washing.

However these services don't always work well together and the communication between the teams could be better. By working better in partnership we think there are real improvements to be made to the care we are able to give people at home.



GP Practice



Therapists



Nurses

(Physical & Mental health)



Social Workers

How could we do this?

More than 70% of hospital bed days are occupied by emergency admissions, so we want to reduce the risk of emergency. We will do this by developing multi-skilled teams who will work around a person at home, helping reduce unnecessary admission to hospital.

The physical and mental health nurses, therapists and social care professionals will all be part of one team who will get to know the person and their medical history. There will be one contact point which can be used whenever additional help is required. There will still be health issues, but wherever possible these can be dealt with at home by the local team who will work on the principle that 'your own bed is best'.

If someone does need to be taken to hospital, the team will know about it and will ensure they are able to leave and return home without delay. Delays in getting discharged from a hospital bed can be a real problem, often caused by challenges arranging social care or community support back home. But the local team will be able to sort this out much more quickly and easily, reducing the chance of any delay.

We could also support this by developing something called an 'integrated frailty pathway', which in simple terms is about ensuring those identified as being at greatest risk of being admitted to hospital have access to staff who can provide 24 hour care in their home. It is also about having real alternatives to hospital admission when someone needs more care than we can deliver at home.

Patient story – Margaret and Len

After she turned 80, Margaret found her health deteriorating. She was diagnosed with diabetes and emphysema (COPD), as well as early stage dementia. She lives with her husband, Len, who is also in his 80s, and who has his own health issues.

Margaret's GP said she needed to be supported by the local community nursing team. Angela, a member of the community team, is her care coordinator and following an initial visit, quickly arranged what support Margaret needs from the rest of the team. Margaret is visited a few times a week, once by a nurse, then a therapist and finally from a mental health professional to support her with her dementia. A social worker will also visit to help with any domiciliary care needs. As each of them are part of the

same team they each have up to date notes on Margaret's condition and she gets familiar with all of them, building up a rapport and an understanding. There is a contact number which she or Len can use if there is a problem. They have only used it a couple of times but on each occasion someone from the team have been out to check on them, and have been able to provide additional support without them needing to go to hospital.

There are volunteers from a local carers charity who are also part of the team and they contact Len regularly to check he's coping well too. They also give him support to maintain his own health.



Mental health and well-being

We believe 'there is no health without mental health' and so through partnership with other public services, local business and communities we will support people to understand how to keep themselves well, and how to access support and guidance if they need it.

Sometimes people will need expert care and at the moment, particularly for children and young people, this might mean travelling to another part of the country. We want to be able to provide specialist care in our two counties so that people can stay connected to their families and friends whilst they recover.

Having a baby is often a joyful event but sometimes it can affect people's mental as well as physical wellbeing. We are committed to ensuring that staff supporting women and their families through pregnancy childbirth have the skills to support women's mental and physical health needs.

Living with complex mental health problems can also affect some people's physical health. We will prioritise how we use our resources so to reduce the impact this has on people's quality and length of life.

We want to support more people with mental health issues early to prevent issues escalating, and then at home or in the community when more care is needed. This is what people tell us is important.

When admission to a mental health ward is required this should be more recovery focused and designed to help people get back home quicker so they can regain control and independence over their lives.



Patient story – Adam

Following a family bereavement Adam had become increasingly isolated and had withdrawn from his social circle. He had even told a colleague at work that he couldn't continue with things the way they were. He was persuaded to seek help and after the GP referred him to the local mental health team he was diagnosed with severe depression. He was in the care of the community mental health team who visited him regularly at home to check he was doing ok; Adam had a contact number he could use if he felt really unwell. Adam's depression meant he had to give up work, but through the support of his mental health nurse he was put on a work placement programme which provides opportunities for those recovering from a mental health problem to get back into employment. He really benefitted from this and is now starting to apply for part-time work. Because he's made

so much progress he's been discharged from the community mental health team, but he has lots of self-help resources which he can refer too, and he also has contact details for primary care services which can help those with more common mental health illnesses.





Community Hospitals

These alleviate pressure on the acute hospital sites and traditionally provide short-term in-patient support for someone who can't stay at home, but neither are they too poorly that they require the specialist expertise of an acute bed.

Community hospitals will play a key role in our local system, and we believe there is potential for some of them to do even more than they currently do.

This would mean even more services provided in the local community, closer to home.

As we provide more responsive local support in people's homes, we do think the use of community hospitals might change.

We will be working with stakeholders to understand how many beds we may need and how community hospitals could offer a broader range of services such as more outpatient or day case activities.

Urgent Care

Sometimes we all need urgent care for an emergency or life threatening condition and we want to make sure that the right care is available across our two counties, 24 hours a day. This is about getting someone in this position the right care they need when they need it and in the most appropriate place without unnecessary delays.

But we also know that many people go to A&E when they could have been treated elsewhere. This overloads the services and leads to long waiting times and too many people waiting on trolleys in corridors.

To help understand the pressures in A&E we have been looking at A&E attendance, performance and staffing levels to ensure that people who really need it are getting the best service possible in the right place, from the right professionals who have the skills to meet people's physical and mental health needs.

We also need to strengthen the range of 7-day services and support for both physical and mental health issues, to prevent people getting in crisis and requiring urgent care services. This links back to the improvements we want to make to our out of hospital services.

In Herefordshire we have already worked with the public and local clinicians to identify what outcomes are important to people, and how we can best meet their urgent care needs through local services. We have used this to look at what changes we might need to make and we will be consulting on this in the coming months.



Acute Hospitals

By preventing the risk of avoidable hospital admissions and by moving some activity into the community, this will help ensure that only those with an acute medical condition need to access an acute hospital, and when that is required they don't have to stay any longer than required.

Given some of the challenges we have recruiting to certain specialist roles, we want to ensure they are sustainable so we aren't spreading our resources too thinly which is a risk. We need to make sure we have the right staff equipped and skilled to provide the specialise care needed. This might mean having to travel further in some cases in order to get the safest and most effective care possible.

Some services are already delivered in a specialist 'centre' which is safer and more clinically appropriate, for example:

- **Major trauma** – if you are in a car accident and suffer a head injury you are taken straight to a major trauma centre out of county

- **Stroke** – anyone who has a stroke in Worcestershire is treated at the Worcestershire Royal where a specialist stroke team is available to provide the highest level of care
- **Heart attacks** – if you have a heart attack because your arteries are clogged up you are likely to need a stent (a small tube) to re-open them. This is done in a specialist centre in Worcester where there are highly trained staff capable of carrying out this life saving procedure.



Ten days in a hospital bed for someone over 75 leads to a 10% loss of aerobic capacity and 14% loss of muscle strength – **equivalent to 10 years of life**



A sustainable system

Using our land and buildings better:

We want to bring all our NHS and local government sites up to modern standards. We want to make better use of our out of hospital sites, which may mean selling some buildings to invest in other modern, local facilities.

We want to explore how we can work together to get more value from our land and buildings.

Using technology to modernise health:

Good information and advice helps people take control of their health. Shared information will help hospital clinicians, GP practices, local community teams, which include health and social care, to work together more effectively. Technology will help us to provide more rapid and reliable information for patients, and our clinicians will make sure technology is built into new services, with support provided for those who might need it.



But with demand increasing it's expected that we'll need an additional **£230m unless we act now**

Finances

We will receive more money over the next five years but on current projections it won't be enough to meet the continual rise in demand. Even with the increase in funding, if we do nothing the gap between what we receive and what we would need to meet that demand will be around £230million.

We have thoroughly reviewed our finances, including making comparisons with national

figures, looking for opportunities to secure savings and ways to organise services more efficiently. We continue to look at the demands on services and our costs.

We think the types of changes described in this update will help us save money and ensure we have sustainable services long-term. We cannot continue overspending as it puts services at greater risk so while the quality of care will always be our priority, we will also have to make sure we are using our resources the best we can.

In summary, we will...

- Maximise efficiency and effectiveness across clinical, service and support functions
- Put prevention at the heart of what we do, and create an environment where people stay healthy supported by resilient communities
- Improve our services which care for people at home or closer to home, supported by GPs working alongside community teams
- Ensure acute sites have the capacity to provide the care the staff are trained to provide
- Ensure our specialist services are safe and sustainable
- Involve and engage our communities before any significant changes to services.



Providing more care at home

Safe and effective hospital care when you need it

Prevention and self care

We will ensure that prevention and self-care are at the heart of the health and care services we provide. We need to encourage healthier lifestyles, and empower people to take greater responsibility for their own health, so together we can help prevent issues and illnesses which are influenced by lifestyle.

We also want to support more people to self-care more of the day to day aspects of their conditions, and to only access the support of healthcare professionals for the complex bits.

Caring for you at home

More health and care services will be provided at home with one local team who know you and your medical history

- More people cared for at home
- Fewer admissions to a hospital bed
- Getting you out of hospital as soon as you are medically fit to leave

Urgent Care

Improving access to urgent or emergency care when you need it, in the right place first time.

This will ensure there is capacity for emergency/ life threatening care when it is required.

Hospital beds

Community Hospitals

The role of these might change and could provide more outpatient clinics which support the plan to deliver more services closer to home.

Acute hospitals

Ensuring that only those with acute conditions which require specialist care access acute hospitals.



Your local GP surgery



Therapists
Nurses
(Physical & Mental health)
Social Workers

When you are medically fit to return home you will, without delay.

A sustainable system

Reducing duplication

Better use of our buildings

The right workforce

Partnership working

#YOURCONVERSATION

YOUR HEALTH AND
WELLBEING IN
HEREFORDSHIRE AND
WORCESTERSHIRE



Your Health & Wellbeing
#YourConversation

We want your views on the information in this update which provides some thoughts for how health and care services may change over the next five years.

There will be more details to follow and we won't make any significant changes until we have carried out full engagement and consultation work with our patients, staff and

the wider community. You can join in the conversation online at: **www.yourconversationhw.nhs.uk** or by following the organisations on social media. We will be getting out and engaging our patients and local communities on this update over the next few months and we will be publicising events and engagement activity at **www.yourconversationhw.nhs.uk**

**OVERVIEW AND SCRUTINY
COMMITTEE**4th July 2017**CIVIL PROTECTION AND EMERGENCY CAPABILITY – PROPOSED SHORT
SHARP REVIEW**

Relevant Portfolio Holder	Councillor Joe Baker, Portfolio Holder for Community Safety and Regulatory Services.
Portfolio Holder Consulted	No.
Relevant director	Deputy Chief Executive
Ward(s) Affected	All wards.

1. SUMMARY OF PROPOSALS

This report provides Members with an opportunity to consider a proposal that has been received for Members to undertake a Short, Sharp Review of the Council's civil contingencies arrangements.

2. RECOMMENDATIONS

The Committee is asked to RESOLVE to approve one of the following options:

- 1) Subject to any changes agreed during the meeting, the proposed Civil Protection and Emergency Capability Short, sharp Review be launched.
- 2) Members receive a presentation on the subject of civil contingency arrangements in the Borough at a forthcoming meeting (or meetings) of the Overview and Scrutiny Committee.
- 3) No further action be taken by Overview and Scrutiny Members in respect of this matter.
- 4) Alternative action, to be identified and clearly specified during the meeting, be taken in relation to this matter.

3. KEY ISSUES**Background**

- 3.1 The Overview and Scrutiny Committee can launch reviews of a range of topics. To ensure best use of resources Members are encouraged to focus on subjects that address the needs of the local community.
- 3.2 Civil contingency arrangements have become the focus of public attention nationally following the fire at Grenfell Tower in London in July 2017.

**OVERVIEW AND SCRUTINY
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Financial Implications

- 3.3 There are no direct financial implications for the Council.

Legal Implications

- 3.4 There are no direct legal implications for the Council.

Service / Operational Implications

- 3.5 The Overview and Scrutiny Committee is asked to note that as agreed in 2016/17 whilst meetings of the working groups continue to take place there are only sufficient officer resources to facilitate one Task Group or short sharp review at any one time.
- 3.6 The Homelessness Short, Sharp Review that is currently taking place is scheduled to be completed in September 2017. Therefore this proposed review, if it is approved by Members, could be launched in September.

Customer / Equalities and Diversity Implications

- 3.7 One of the key principles of Overview and Scrutiny identified by the Centre for Public Scrutiny (CfPS), a charity which specialises in scrutiny matters nationally, is that it should reflect the voice and concerns of the public and local communities to be heard. A review of this subject might help to reassure the public that the Council is making every effort to ensure that similar events to the Grenfell Tower incident do not occur in Redditch.

4. RISK MANAGEMENT

No specific risks have been identified.

5. APPENDICES

Appendix 1 – Civil Protection and Emergency Capability Short, Sharp Review – Scoping Document.

AUTHOR OF REPORT

Name: Jess Bayley, Democratic Services Officer
Email: jess.bayley@bromsgroveandredditch.gov.uk
Tel: (01527) 64252 Ext: 3268

Scrutiny Proposal Form

(This form should be completed by sponsoring Member(s), Officers and / or members of the public when proposing an item for Scrutiny).

Note: The matters detailed below have not yet received any detailed consideration. The Overview and Scrutiny Committee reserves the right to reject suggestions for scrutiny that fall outside the Borough Council's remit.

Proposer's name and designation	Cllr. Tom Baker-Price Chair of the Overview and Scrutiny Committee	Date of referral	04/07/17
Proposed topic title	Civil protection and emergency capability short sharp review.		
Link to national, regional and local priorities and targets	<p>The civil contingencies act 2004 (The act) requires this council as a category 1 responder to assess, plan and advise the public in the event of emergencies. The act defines an emergency in section 1 of the act which includes a diverse range of events such as the disruption to food supplies, the substantial loss of life and homelessness.</p> <p>Although these types of emergencies are highly unlikely to occur if they do happen the response of Redditch Borough Council (RBC) is vital to the protection of life and the public at large. RBC has a moral and legal duty to have credible well thought out plans and capability to protect the population with partners in an event of an emergency.</p>		
Background to the issue	<p>Grenfell tower fire in London has focused national attention on how local authorities plan and protect the public during emergencies. Kensington and Chelsea Borough council became responsible for providing emergency relief for hundreds of families. The authorities' difficulty in responding to this crisis has led to social unrest, continued difficulty for the victims and has led to further human security risks.</p> <p>This council must be mindful it may have a legal duty to provide significant additional services resourced from existing budgets and staff without notice.</p> <p>The protection of the public from harm during an emergency could be the most important task this council ever undertakes in terms of direct impact upon residents. Scrutiny of the plans RBC has to protect the public and its capability to deliver is in the public interest to ensure the council is prepared.</p>		
Key Objectives Please keep to SMART objectives (Specific,	1) To review how RBC has made assessments under the act of relevant emergencies and the procedures designed to keep the assessment of relevant risks under review.		

<p>Measurable, Achievable, Relevant and Timely)</p>	<ol style="list-style-type: none"> 2) To scrutinise the plan(s) RBC has made in discharging its duty under the act ensuring they are credible, relevant and effective during a crisis. 3) To ensure RBC is prepared and able to provide emergency advice in line with the act. 4) Invite partner category 1 responders to comment on the plan to ensure best practice, prevent duplication and ensure residents receive an integrated response. 5) To seek best practice from the experiences of other local authorities nationally by reviewing relevant cases.
<p>How long do you think is needed to complete this exercise? (Where possible please estimate the number of weeks, months and meetings required)</p>	<p>It is suggested that this review should be completed within a maximum of three months.</p>

Please return this form to: Jess Bayley or Amanda Scarce, Democratic Services Officers, Redditch Borough Council, Town Hall, Walter Stranz Square, Redditch, B98 8AH
Email: jess.bayley@bromsgroveandredditch.gov.uk / Amanda.scarce@bromsgroveandredditch.gov.uk

**OVERVIEW AND SCRUTINY
COMMITTEE**4th July 2017**MENTAL HEALTH SERVICES FOR YOUNG PEOPLE TASK GROUP – RESPONSE
TO RECOMMENDATION 4**

Relevant Portfolio Holder	Councillor Bill Hartnett, Leader of the Council
Portfolio Holder Consulted	No.
Relevant Head of Services	Head of Legal, Equality and Democratic Services
Ward(s) Affected	All wards.

1. SUMMARY OF PROPOSALS

This report provides Members with an update on the response received from the former Minister of State for Vulnerable Children and Families in relation to the Mental Health Services for Young People Task Group's fourth recommendation.

2. RECOMMENDATIONS

The Committee is asked to RESOLVE whether any further action should be taken in respect of the Mental Health Services for Young People Task Group's fourth recommendation.

3. KEY ISSUES**Background**

- 3.1 The Mental Health Services for Young People Task Group reviewed mental health service provision in the Borough in 2016/17. At the end of the review Members proposed seven recommendations. Three of the group's recommendations were reported to the Executive Committee for consideration.
- 3.2 At a meeting of the Executive Committee on 4th April 2017 Members endorsed two of the group's recommendations. This included the group's fourth recommendation which proposed that the Leader of the Council should write to the Secretary of State for Education, the Rt. Hon. Justine Greening, urging her to ensure that Personal, Social, Health and Economic Education (PSHE) lessons, to include lessons about mental health and wellbeing issues, become a statutory part of the national school curriculum.
- 3.3 As requested the Leader of the Council contacted the Secretary of State for Education in April 2017 to raise this issue on behalf of the group. A copy of the group's final report was sent with this correspondence.
- 3.4 In May 2017 a response was received from the then Minister of State for Vulnerable Children and Families, former MP Edward Timpson (to view a copy of the letter please see Appendix 1).

REDDITCH BOROUGH COUNCIL**OVERVIEW AND SCRUTINY
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- 3.5 At a meeting of the Overview and Scrutiny Committee on 1st June 2017 Members received a report which provided an update on action that had been taken to implement recommendations made through the scrutiny process. Reference was made in this report to the response that had been received from the Minister, though a decision was taken not to publish the letter at this time due to the purdah arrangements that were in place in the lead up to the general election that took place on 8th June 2017.
- 3.6 During consideration of the correspondence from the Minister Members welcomed the news that in future all secondary schools in England and Wales, including academies and free schools, will be required to teach Relationships and Sex Education (RSE). Parents will retain the power to request that their children are withdrawn from these lessons.
- 3.7 However, whilst reference was made in the letter to PSHE lessons Members raised concerns that no commitment was received in the letter to investigating the potential to make PSHE lessons a compulsory part of the national curriculum. The Committee therefore asked to view the correspondence from the Minister at their next meeting and to discuss whether any further action should be taken in response.

Financial Implications

- 3.8 There are no direct financial implications for the Council.

Legal Implications

- 3.9 There are no direct legal implications for the Council.

Service / Operational Implications

- 3.10 There are no specific service or operational implications.

Customer / Equalities and Diversity Implications

- 3.11 The Mental Health Services for Young People Task Group concluded that delivery of PSHE lessons as a compulsory part of the national curriculum would have a beneficial impact on young people. In particular the group agreed that this would enable young people to develop greater resilience and useful life skills that would have a positive impact on their mental wellbeing in the long-term.

4. RISK MANAGEMENT

No specific risks have been identified.

**OVERVIEW AND SCRUTINY
COMMITTEE**4th July 2017

5. APPENDICES

Appendix 1 – Letter from the former Minister of State for Vulnerable Children and Families.

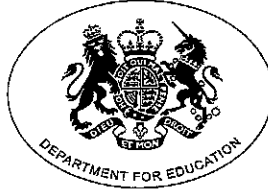
6. BACKGROUND PAPERS

Mental Health Services for Young People Task group – final report

AUTHOR OF REPORT

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2017-0025448ETPO

Edward Timpson

Minister of State for Vulnerable Children and Families

Sanctuary Buildings 20 Great Smith Street Westminster London SW1P 3BT
tel: 0370 000 2288 www.education.gov.uk/help/contactus

Councillor Bill Hartnett
Leader, Redditch Borough Council
Town Hall, Walter Stranz Square
Redditch
Worcester
B98 8AH

May 2017

Dear Councillor Hartnett,

Thank you for your letter of 13 April, addressed to the Secretary of State, about Personal, Social, Health and Economic (PSHE) education. I am replying as the minister responsible for this policy area.

I was very interested to read the review by undertaken by Redditch Task Group, to inform and improve mental health services for your people in Redditch. The mental health of young people is a priority for this department. It wants all children to fulfil their potential. Tackling mental health problems will play a key role in enabling future generations to develop into resilient and confident adults. Improving it starts with ensuring that children and young people get the help and support they need and deserve.

The department wants to provide all young people with a curriculum that ensures they are prepared for adult life in modern Britain. Both relationships and sex education (RSE) and PSHE can help provide pupils with the key knowledge and skills to ensure that they can keep themselves safe, develop healthy and positive relationships, maintain good mental health, build resilience, manage their finances, prepare for the workplace, and successfully navigate the changing world in which they are growing up.

As you will be aware, new clauses to the Children and Social Work Bill have been introduced, to provide for regulations to require all secondary schools in England, including maintained schools, academies and independent schools, to teach RSE. The focus in primary school will be on building healthy relationships and staying safe. As children get older and move on to secondary school, it is important that they start to develop their understanding of healthy adult relationships in more depth, with sex education delivered in that context. Parents will retain the right to withdraw their child from sex education.

Schools and colleges have an important role to play in educating children and young people about mental health. The department wants to encourage them to develop their PSHE programmes to reflect the needs of their students. It has, therefore, provided resources from expert organisations, to help students understand the issues relating to mental health.

The department has funded the PSHE Association to provide mental health guidance and lesson plans, which support age-appropriate teaching about mental illnesses, including promoting emotional wellbeing and healthy coping strategies. Further details are available on the PSHE Association's website at: www.pshe-association.org.uk.

*Your ever,
Edward.*

Edward Timpson
Minister of State for Vulnerable Children and Families



Executive Committee

Tuesday, 6 June 2017

MINUTES

Present:

Councillor Bill Hartnett (Chair), Councillor Greg Chance (Vice-Chair – during Minute No's 3 to 17) and Councillors Joe Baker, Juliet Brunner, Debbie Chance, Brandon Clayton and Pat Witherspoon

Officers:

Ray Cooke, Clare Flanagan, John Godwin, Sue Hanley, Julie Heyes, Jayne Pickering, Deb Poole and Becky Talbot

Democratic Services Officer:

Debbie Parker-Jones

1. APOLOGIES

An apology for absence was received from Councillor Mark Shurmer.

2. DECLARATIONS OF INTEREST

There were no declarations of interest.

3. LEADER'S ANNOUNCEMENTS

Councillor Joe Baker

The Leader welcomed Councillor Baker to his first meeting of the Executive Committee following his appointment, at the Annual Meeting, as Portfolio Holder for Community Safety and Regulatory Services. Congratulations were also expressed to Councillor Baker on his recent marriage.

Additional Papers

It was noted that there were no Additional Papers for consideration, and that the 1st June 2017 Overview and Scrutiny Committee's pre-scrutiny of the Community Engagement Strategy at Agenda Item 6

.....
Chair

Executive Committee

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had not resulted in any urgent Minute extract and/or opposing recommendation for Members' consideration.

Work Programme

The following reports which were due to be considered, or possibly considered, at the meeting had been deferred to a later date:

- Anti-Fraud and Corruption Policy;
- Council Procedure Rules;
- Financial Regulations;
- Leisure Intervention Update (this report would combine with the previously listed separate 'Options for a Leisure Trust' report, to form a single report);
- Planning Fees;
- Planning Policy Review Business Case;
- Policy for HRA Gas Maintenance Service and Review of Service Delivery Options – HRA Gas Maintenance Service (these two reports would combine to form a single 'Service Delivery Options – HRA Gas Maintenance' report);
- Review of Saturday Opening Hours; and
- Write Offs April 2016 to March 2017 Annual Report.

The following reports had been removed from the Work Programme:

- Housing Business Case (removed pending work on Housing Locality Strategic Intervention); and
- Partnership with a Licensed Energy Company for the Provision of Energy (put on hold as a consequence of changes in national policy).

4. MINUTES OF THE MEETING OF THE EXECUTIVE COMMITTEE HELD ON 4TH APRIL 2017

RESOLVED that

the minutes of the meeting of the Executive Committee held on 4th April 2017 be agreed as a correct record and signed by the Chair.

5. HEALTH AND SAFETY POLICIES - STATUTORY INSPECTION, DRIVING AT WORK AND CORPORATE HEALTH AND SAFETY

Members considered three Health and Safety policies (the Policies), all of which had been updated in accordance with recent changes in legislation, with only minor changes being required to these.

It was noted that, as an employer, the Council had a legal duty to have these policies in place for its employees, and that whilst the Corporate Health and Safety Policy was an overarching policy, there was a requirement to also have specific (additional) policies in place.

Members supported the Policies and thanked Officers for their work on these, which set out the Council's commitment to its staff and the public. It was noted that all three Policies had been approved by the Council's Health and Safety Committee and trade unions.

RECOMMENDED that

the Statutory Inspection Policy and Table, Driving/Riding at Work Policy and Corporate Health and Safety Policy and Procedures Manual, as appended to the report, be approved.

6. COMMUNITY ENGAGEMENT STRATEGY

Members considered a new (updated) Community Engagement Strategy (the Strategy) for 2017-2020. It was noted that the Strategy had been considered and supported by the Overview and Scrutiny Committee at its meeting on 1st June 2017.

Officers advised that the Strategy addressed the legal standards surrounding consultation and would be reviewed every 4 years or sooner to comply with changes to the law or policy and practice. The Strategy would enable the community to be informed, involved and influential in the Council's decision-making process. The Strategy also supported the Council's approach to equality and diversity and would form overarching principles for how the Council engaged with all members of the community. Housing Services had been involved in the development of the Strategy, which had also been considered by the Housing Strategy Group. Officers advised that, in relation to Tenant Involvement and Engagement, the first survey would be going out to tenants shortly.

Members supported the Strategy and thanked all who had been involved with this. It was noted that this was a high level strategy which would be underpinned by an accompanying Action Plan, which Officers advised the Overview and Scrutiny Committee had asked to see. Members highlighted the importance of the Council continually seeking to find new ways of engaging with the community, particularly with hard to reach groups.

RECOMMENDED that

the Community Engagement Strategy, attached at Appendix 1 to the report, be approved and adopted.

7. EQUALITY STRATEGY

Members considered a new (updated) Equality Strategy (the Strategy) for 2017-2020.

Officers advised that the Strategy worked closely with the Community Engagement Strategy detailed under the previous agenda item. The Strategy contributed to how the Council met the Public Sector Equality Duty established under the Equality Act 2010, and also tied in with the current Council Plan. Officers highlighted an amendment under section 4 (The Protected Characteristics) of the updated draft Equal Opportunity Policy May 2017, as appended to the report, which related to a change in current trans/transgender accepted terminology.

Members supported the Strategy and thanked all who had been involved with this. It was noted that this was a high level strategy which would be underpinned by an accompanying Action Plan. Members requested that in light of recent events reference be made within the appropriate documentation to hate crimes, which it was agreed would be included in the resulting detail of the Strategy.

RECOMMENDED that

the Equality Strategy, attached at Appendix 1 to the report, be approved and adopted.

8. FINANCE MONITORING OUTTURN 2016/17

Members considered a report which detailed the Council's draft final financial position for 2016/17, for both the General Fund and Housing Revenue Account (HRA).

Officers advised that the figures before Members were draft as they were subject to external audit, with the draft accounts due to be issued to Grant Thornton (the Council's external auditors) later that week. Officers were pleased to report that the draft accounts had been produced a month earlier than usual, in anticipation of the earlier statutory deadline for submission of accounts which was due to be introduced from 2017/18.

Officers proceeded to highlight the key elements of the report, which included:

- additional income generated on the back of the Council's commercialisation agenda;

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- as a result of the savings made, additional 1 year reserves which had been set aside (if required) for specific projects to improve the services and community infrastructure; and
- a financial accounting error which had occurred in relation to the recharge calculation for the HRA. Members were advised that the error had been made, identified and reported/acted on by Officers. New processes had since been put in place by Officers to ensure that there would not be any repeat of this issue in the future. Officers had spoken with Grant Thornton on the error and Grant Thornton had stated that this had not impacted on the Council's general accounts. The related shortfall had been met by other savings in 2016/17 and Officers were currently addressing the impact of this for 2017/18, and would report back to Members on this in due course.

Officers acknowledged that certain of the variances were quite significant and that there had been some issues in predicting budgets. The online system for Managers to monitor their budgets direct was due to be rolled out later in the year which should help to address this issue. The loss of income in dwelling rents as a result of the Government's rent reduction and increased right to buys was noted, as were the measures which the Council was putting place to try and offset this.

Officers responded to Members' questions and in doing so agreed to provide further details to Members outside of the meeting on:

- the community safety underspend in relation to anti-social behaviour (a HRA saving); and
- the significant variation for the Repairs and Maintenance service, including the high demand for ad-hoc property repairs and unpaid past repair works on void properties – including numbers of properties involved, types of repairs undertaken and separate breakdown of costs for ad-hoc and void properties, set against the context of the overall budget.

RECOMMENDED that

- 1) the financial position on Revenue and Capital for the financial year 2016/17 as detailed in the report, and the transfer to balances of £348k as at 31st March 2017, be noted;**
- 2) the movements of £170k in existing General Fund Reserves as included in Appendix 4 which reflects the approval required for April 2016 to March 2017 be approved;**

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- 3) the addition of new General Fund Reserves of £557k as included in Appendix 4 which reflects the approval required for April 2016 to March 2017 be approved; and
- 4) the movements of £540k in existing HRA Reserves as included in Appendix 2 which reflects the approval required for April 2016 to March 2017 be approved.

9. **MINUTES OF THE MEETING OF THE OVERVIEW AND SCRUTINY COMMITTEE HELD ON 28TH MARCH 2017**

The Committee received the minutes of the meeting of the Overview and Scrutiny Committee held on 28th March 2017.

It was noted that there were no recommendations to consider as the recommendations from the Mental Health Services for Young People Task Group had been dealt with at the 4th April 2017 Executive Committee.

10. **MINUTES / REFERRALS - TO RECEIVE AND CONSIDER ANY OUTSTANDING MINUTES OR REFERRALS FROM THE OVERVIEW AND SCRUTINY COMMITTEE, EXECUTIVE PANELS ETC.**

There were no outstanding referrals to consider.

11. **CORPORATE PARENTING BOARD - VERBAL UPDATE FROM PORTFOLIO HOLDER FOR COMMUNITY SAFETY AND REGULATORY SERVICES**

It was noted that as Councillor Baker had only been appointed as the new Portfolio Holder for Community Safety and Regulatory Services at the Annual Meeting of the Council in May, he had not, at that point, attended any meetings of the Corporate Parenting Board and therefore had no update to give on this. Councillor Baker commented that he had met with Officers to discuss the various different bodies to which he had been appointed in his capacity as Portfolio Holder, and that he and Councillor Smith had also met for a handover briefing.

Members took this opportunity of expressing their thanks to Councillor Yvonne Smith for all of her hard work in carrying out the role of Portfolio Holder for Community Safety and Regulatory Services, which was much appreciated.

RESOLVED that

the position be noted.

12. ADVISORY PANELS - UPDATE REPORT

Members received the regular update report on the work of the Executive Committee's Advisory Panels and similar bodies which reported via the Executive Committee.

A Member noted that the last meeting of the Constitutional Review Working Party (the Party) had taken place on 27th January 2015 and queried when the next meeting of this was due to take place. Officers confirmed their understanding that no future meeting date was currently planned. The Member responded that two items of business within the Party's remit currently remained outstanding, namely:

- the change of day on which the Overview and Scrutiny (O&S) Committee met; and
- an issue which had arisen some two years previously in relation to Members of the Council speaking during the pre-election period/'purdah'.

In relation to the change of O&S meeting day, Officers advised that it was their understanding that following the Notice of Motion which had been submitted to full Council in this regard earlier in this year – and which was duly declared lost at Council – the O&S Committee had subsequently re-considered this matter and had decided to change the day of the meetings where this was feasible, with the 2017/18 Calendar of Meetings having been amended by Officers accordingly. No comments were forthcoming in relation to the pre-election/purdah issue and Officers agreed to check the position in both regards and to report back to Members on this.

RESOLVED that

- 1) the report be noted; and
- 2) Officers check the position in relation to the queries raised regarding possible outstanding business of the Constitutional Review Working Party, and report back to Members on the position with this.

13. EXCLUSION OF THE PUBLIC**RESOLVED that**

under S.100 I of the Local Government Act 1972, as amended by the Local Government (Access to Information) (Variation) Order 2006, the public be excluded from the meeting for the following matters on the grounds that they involve the likely

disclosure of exempt information as defined in paragraph 4 of Part 1 of Schedule 12 (A) of the said Act, as amended:

- (i) Item 14 – Minutes of the meeting of the Shared Services Board (private meeting – relating to Items 16 and 17);**
- (ii) Item 15 – Legal, Equalities and Democratic Services Review Business Case;**
- (iii) Item 16 – Facility Management and Cleaning Services Review Business Case; and**
- (iv) Item 17 – Parks and Green Space Stewardship Services Review Business Case.**

14. CONFIDENTIAL MINUTES / REFERRALS - TO INCLUDE THE MINUTES OF THE MEETING OF THE SHARED SERVICES BOARD HELD ON 15TH MAY 2017

The Committee received the minutes of the meeting of the Shared Services Board held on 15th May 2017, which were considered with the Facility Management and Cleaning Services and Parks and Green Space Stewardship Services Business Cases at agenda items 16 and 17 respectively.

RESOLVED that

the minutes of the meeting of the Shared Services Board held on 15th May 2017 be received and noted.

15. LEGAL, EQUALITIES AND DEMOCRATIC SERVICES REVIEW - BUSINESS CASE

The Committee received a confidential report on the Business Case for the Legal, Equalities and Democratic Services (the Service) Service Review, which contained details of a proposed restructure within the Service in response to changed demands from within the organisation and the wider challenges facing the public sector. It was noted that the Business Case had not been referred to the Shared Services Board on 15th May 2017 as the Service was already shared between Redditch Borough Council and Bromsgrove District Council, with the Business Case relating to a restructure of the current shared service.

Officers advised that the Head of Service had met with all members of staff to show them the Business Case, and that informal discussions had taken place with staff in this regard. It was noted that the Council's trade unions had also been consulted on this. Formal consultation with staff would commence once the Business

Case had been considered by both Councils. Members sought confirmation that any responses received as part of the consultation would be fed back to them, which Officers confirmed would be the case. Members commented that full meaningful consultation was required with staff as part of the process.

Officers outlined the proposed changes detailed within the Business Case and the rationale behind these. Officers responded to Members' questions, in particular in relation to proposed staff changes within the Democratic Services Team and the future capacity within that team. Members also assumed that the Departmental Structure chart should include Redditch Borough Council in the title to make clear that this covered both authorities.

A Member raised a query in relation to the current stance on Overview and Scrutiny (O&S) joint working across the two authorities, which another Member commented had previously been considered and voted out by the Redditch O&S Committee. Officers advised that occasional cross authority working groups had been established. A request was made for Officers to provide clarity on the position with this outside of the meeting.

RECOMMENDED that

the Business Case for the Legal, Equalities and Democratic Services Service Review be approved.

16. FACILITY MANAGEMENT AND CLEANING SERVICES REVIEW - BUSINESS CASE

The Committee received a confidential report on the Business Case for a proposed shared Facility Management (Caretaking) and Cleaning service for Bromsgrove District Council and Redditch Borough Council. It was noted that the Business Case had been considered by the Shared Services Board at its meeting on 15th May 2017, the minutes of which Members considered along with the Business Case.

Officers provided an overview of the principles behind the Business Case and proposed structure. Officers felt that the proposed structure would deliver a more flexible, resilient and efficient service, provide for more effective use of resources and result in improved service standards. Officers proceeded to detail the timeline and process involved with implementation of the proposed Business Case.

Members supported the Business Case and commented that they looked forward to the formal staff consultation on this.

RECOMMENDED that

the Business Case for the Facility Management and Cleaning Service Shared Service be approved.

**17. PARKS AND GREEN SPACE STEWARDSHIP SERVICES
REVIEW - BUSINESS CASE**

The Committee received a confidential report on the Business Case for a proposed shared Parks and Green Space Stewardship service for Bromsgrove District Council and Redditch Borough Council. It was noted that the Business Case had been considered by the Shared Services Board at its meeting on 15th May 2017, the minutes of which Members considered along with the Business Case.

Officers advised that the Business Case had been trialed for approximately two years with Environmental Services. Officers proceeded to give an overview of the principles behind the Business Case and proposed structure, and the aims and objectives of the working trials and the main drivers for change within the existing services. Officers felt that the proposed format would provide for a completely flexible system which could be slotted into a variety of management operating models without negatively impacting on the customer or other service areas, and which aimed to future-proof service delivery as far ahead as practically possible. Officers detailed the timeline and process involved with implementation of the proposed Business Case, and gave an update on the current staffing element of this.

Members supported the Business Case and commented that they looked forward to the formal staff consultation on this.

RECOMMENDED that

the Business Case for the Parks and Green Space Stewardship Services Shared Service be approved.

The Meeting commenced at 7.00 pm
and closed at 8.20 pm

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Chair

Overview & Scrutiny

Committee

4th July 2017

WORK PROGRAMME

(Report of the Chief Executive)

Date of Meeting	Subject Matter	Officer(s) Responsible for report
ALL MEETINGS	REGULAR ITEMS	(CHIEF EXECUTIVE)
	Minutes of previous meeting Consideration of the Executive Committee Work Programme Call-ins (if any) Pre-scrutiny (if any) Task Groups / Short, Sharp Review Groups – feedback Working Groups - feedback Committee Work Programme	Chief Executive Chief Executive Chief Executive Chief Executive Chair of Task Group / Short, Sharp Review Chair of Working Group Chief Executive
	REGULAR ITEMS Update on the work of the Crime and Disorder Scrutiny Panel. Tracker Report Updates on the work of the Worcestershire Health Overview and Scrutiny Committee Annual Monitoring Report – Redditch Sustainable Community Strategy	Chair of the Crime and Disorder Scrutiny Panel Relevant Lead Head(s) of Service Redditch Borough Council representative on the Health Overview and Scrutiny Committee Relevant Lead Head(s) of Service

Overview & Scrutiny

Committee

4th July 2017

OTHER ITEMS - DATE FIXED		
4th July 2017	Leisure Intervention Work and Options for a Leisure Trust – Pre-Scrutiny	Relevant Lead Director
4th July 2017	Mental Health Services Review – Considering the Letter from the Minister for Vulnerable Children and Families	Relevant Lead Head(s) of Service
4th July 2017	Sustainability and Transformation Plan - Update	Representatives of the Worcestershire Health and Care Trust and Worcestershire Acute Hospitals NHS Trust
7th September 2017	Homelessness Short, Sharp Review – Interim Report	Councillor Wood-Ford
7th September 2017	One Public Estate Exercise – Pre-Scrutiny	Relevant Lead Director
26th October 2017	Fees and Charges 2018/19 – Pre-Scrutiny	Relevant Lead Director
26th October 2017	Housing Benefits Presentation	Relevant Lead Head(s) of Service
26th October 2017	Medium Term Financial Plan – Update Report	Relevant Lead Director
7th December 2017	Economic Development Strategy - Presentation	Relevant Lead Director

Overview & Scrutiny

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7th December 2017	Medium Term Financial Plan – Update Report	Relevant Lead Director
11th January 2018	HRA Initial Budget 2018/19 – 2020/21 – Pre-Scrutiny	Relevant Lead Director
11th January 2018	Medium Term Financial Plan – Update Report	Relevant Lead Director
13th February 2018	Medium Term Financial Plan 2018/19 – 2021/22 – Scrutiny of budget proposals	Relevant Lead Director
22nd March 2018	Overview and Scrutiny Annual Report 2017/18	
OTHER ITEMS – DATE NOT FIXED		
	Joint Strategic Needs Assessment - Presentation	To be confirmed
	Leisure Services Options Short, Sharp Review – reconsideration of the group’s final report	Councillor Potter
	Place Partnership Presentation	Relevant Lead Head(s) of Service
	Tackling Obesity Task Group - Feedback	Councillor Potter

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