

MEETING: CABINET
DATE: Thursday 31st January, 2013
TIME: 10.00 am
VENUE: Town Hall, Bootle

Member

Councillor

Councillor P. Dowd (Chair)
Councillor Cummins
Councillor Fairclough
Councillor Hardy
Councillor Maher
Councillor Moncur
Councillor Tweed

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The Cabinet is responsible for making what are known as Key Decisions, which will be notified on the Forward Plan. Items marked with an * on the agenda involve Key Decisions

A key decision, as defined in the Council's Constitution, is: -

- any Executive decision that is not in the Annual Revenue Budget and Capital Programme approved by the Council and which requires a gross budget expenditure, saving or virement of more than £100,000 or more than 2% of a Departmental budget, whichever is the greater
- any Executive decision where the outcome will have a significant impact on a significant number of people living or working in two or more Wards

If you have any special needs that may require arrangements to facilitate your attendance at this meeting, please contact the Committee Officer named above, who will endeavour to assist.

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A G E N D A

Items marked with an * involve key decisions

<u>Item No.</u>	<u>Subject/Author(s)</u>	<u>Wards Affected</u>	
1.	Apologies for Absence		
2.	Declarations of Interest Members are requested to give notice of any disclosable pecuniary interest, which is not already included in their Register of Members' Interests and the nature of that interest, relating to any item on the agenda in accordance with the Members Code of Conduct, before leaving the meeting room during the discussion on that particular item.		
3.	Minutes of Previous Meeting Minutes of the meeting held on 13 December 2012		(Pages 5 - 32)
* 4.	Transformation Programme and Revenue Budget 2012 - 2015 Report of the Head of Transformation Services and Head of Corporate Finance and ICT to follow	All Wards	
* 5.	Setting the Council Tax Base for 2013/14 Report of the Head of Corporate Finance and ICT to follow	All Wards	
* 6.	Welfare Reform Report of the Strategic Director - People	All Wards	(Pages 33 - 42)
* 7.	Social Fund Report of the Strategic Director - People	All Wards	(Pages 43 - 50)
* 8.	Section 75 Partnership Agreement between Sefton Council and Mersey Care NHS Trust Report of the Director of Older People	All Wards	(Pages 51 - 56)
* 9.	Public Health Transition Report of the Director of Public Health	All Wards	(Pages 57 - 82)

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| * 10. | Sefton Home Energy Conservation Act (HECA) Plan
Report of the Director of Built Environment | All Wards | (Pages 83 - 92) |
| * 11. | Business Improvement Districts
Report of the Director of Built Environment | All Wards | (Pages 93 - 102) |

THE "CALL IN" PERIOD FOR THIS SET OF MINUTES ENDS AT 12 NOON ON MONDAY 7 JANUARY 2013. MINUTE NO'S 82, 83 AND 89 ARE NOT SUBJECT TO CALL-IN".

CABINET

MEETING HELD AT THE TOWN HALL, BOOTLE ON THURSDAY 13TH DECEMBER, 2012

PRESENT: Councillor P. Dowd (in the Chair)
Councillors Cummins, Fairclough, Maher, Moncur
and Tweed

78. APOLOGIES FOR ABSENCE

An apology for absence was received from Councillor Hardy.

79. DECLARATIONS OF INTEREST

No declarations of pecuniary interest were made by Members of the Cabinet. Margaret Carney, Chief Executive, declared a personal interest in Minute 90 as she is a Non-Executive Director of Sefton New Directions.

80. MINUTES OF PREVIOUS MEETING

Decision Made:

That the Minutes of the Cabinet meeting held on 8 November 2012 be confirmed as a correct record.

81. TRANSFORMATION PROGRAMME - 2012/13 BUDGET UPDATE

The Cabinet considered the report of the Head of Corporate Finance and ICT on the current position in respect of the achievement of the approved budget savings for 2012/13.

Decision Made:

The progress to date on the achievement of the approved savings for 2012/13 be noted.

Reasons for Decision:

To ensure Cabinet are informed of the latest position on the achievement of savings for the current financial year and to facilitate the achievement of the savings targets for 2012/13.

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Alternative Options Considered and Rejected:

None.

82. TRANSFORMATION PROGRAMME AND REVENUE BUDGET 2012 - 2015

Further to Minute No. 72 of the meeting held on 8 November 2012, the Cabinet considered the report of the Head of Transformation Services and Head of Finance and ICT which set out a further package of budget savings proposals, as the next stage in achieving a balanced budget for 2013/14 and 2014/15. The report indicated that many of the additional savings options were presented to seek approval for appropriate consultation to be undertaken at this stage.

The report contained the following annexes:

Annex A - Work Programme Timetable

Annex B - Review of Street Lighting

Annex C - Option to be redefined

Annex D - Further information on options previously considered

Annex E - External Funding – Funding ceasing or reducing

Annex F – Ways of Working – Options on which various approvals are sought

Annex G – Subsidies and Charges – Options on which various approvals are sought

Annex H – Standards of Service – Options on which various approvals are sought

Annex I – Vulnerable People – Options on which various approvals are sought

The Chief Executive referred to the current budget savings of £43.7m which had to be achieved for the period 2013/14 to 2014/15 and indicated that the Government was due to announce the Local Government Settlement for 2013/14 in the next few days and the confirmation of the external revenue support from the Government would provide greater clarity of the Council's saving requirement for 2013/14.

Members of the Cabinet raised questions on the following issues referred to in the report and Officers responded to the issues as referred to below:

Page/Paragraph in the Report	Question/Response
<p>Page 297 (Councillor Tweed)</p>	<p>Day Care - There is a further option D1.39 on day care opportunities which is detailed on pages 297 – 298. How do you intend to take this option forward?”</p> <p>Response: There is currently a £1.79m Option approved by Cabinet on 13 September 2012 which includes transport element. This is a further option of £1.4m. The total spend on Day Care provision in the Borough is currently £5.1m, supporting a range of Day Care facilities.</p> <p>At present the bulk of Day Centres are provided from Sefton New Directions (13 in total).</p> <p>There are also specialist providers of Day Centres and other provision of which there are 18 in total. Within the nature of Day Care provision there are also inter-dependencies with the Specialist Transport Unit. Some of the saving identified relates to anticipated savings on transportation costs.</p> <p>Given the very challenging budget position we need to look at mobilizing and maximizing Universal and Targeted Services, Council, partners and the VCF Sector.</p> <p>It is very clear that there will continue to be particular specialist needs for the most vulnerable and complex cases and this is expected to form part of a recommissioning process, e.g. acquired brain injury, mental health issues, severe dementia.</p>
<p>Page 205 (Councillor Maher)</p>	<p>Terms and Conditions – The current working assumptions include £6m in relation to terms and conditions. Cabinet recognises that employees have made a significant contribution to the budget over the last few years. Can I ask that Officers continue the consultation with Trade Unions and employees to see if an agreement can be reached.</p> <p>Response: The Director of Corporate Support Services indicated that regular meetings were being held with the Trade Unions to discuss the terms and conditions for Council employees</p>

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Page/Paragraph in the Report	Question/Response
<p>Option D1.22 – Page 261 (Councillor Cummins)</p>	<p>Annex F – Crosby Civic Hall. Can you explain the linkage referred to between this option and the Library Review?</p> <p>Response: The Strategic Director (Place) reported that there is a dependency on the Library Review, as there may be a linkage with the possible use of the Crosby Civic Hall. Further details would be reported back to the Cabinet and local Members would be kept informed of any possible developments and the interim arrangements.</p>
<p>Option D1.30 Page 277 (Councillor Cummins)</p>	<p>Annex G – Pest Control. What will the impacts of introducing a charge for pest control be and will any concessions to a charge be given?</p> <p>Response: The Director of Built Environment indicated that the proposed charge was £20 per treatment and that the service would continue to be free of charge for people on means-tested benefits. The impact of such a change, if approved, will be monitored.</p>
<p>Option 1.42 Page 303 (Councillor Moncur)</p>	<p>Re-enablement. My question relates to option E1.42 on re-enablement set out in more detail on pages 302 – 303. This seems to me, on paper, an excellent invest to save proposal. Can you describe what this will mean in practice – in particular how the proposal will maintain the independence of adults.</p> <p>Response: National research (Longitudinal Study Final Report Summary November 2010) from the Care Services Efficiency Delivery Programme has shown that a targeted re-ablement model of care found that 58% of people who took part in re-ablement do not continue with ongoing domiciliary care or have had a reduced package of care.</p> <p>For example, this will mean that somebody who comes out of hospital with a targeted care plan can be supported to relearn and regain the confidence and skills of daily living in their own home and then will be assessed at the end of that period if they require any ongoing care needs. The model is based on facilitating people to manage day to day tasks and through targeted intervention to work with the individual to help them reach their full potential.</p>

Page/Paragraph in the Report	Question/Response
	In order to take this forward we will work with colleagues in the NHS who are funding this service development and resource will be utilized to pump prime the development of re-ablement services through a programme of commissioning and we will work with a range of providers to set up pilots which will run for the next year.
Option F1.5 Page 238 (Councillor P. Dowd)	<p>Annex D – Allotments Fees and Charges. Have we received any further correspondence other than that included in the background documents for Option F1.5 in Annex D and are there any legal implications?</p> <p>Response: The Director of Street Scene indicated that no further correspondence had been received and that the legal advice received as set out in the report indicate that the proposed action to be taken is considered to be reasonable.</p>

The Chair referred to the need to undertake consultations to ascertain the views of the public on whether a rise in the level of Council Tax for 2013/14 would be acceptable. He also referred to the proposals relating to Option 1.26 in Annex F (Mayoral Services – Reduce Function of Mayor) and indicated that the Council would still continue to take the lead in the organisation of Remembrance Day events and other civic events.

This was a Key Decision and was included in the Council’s Forward Plan of Key Decisions.

Decisions Made:

- (1) it be noted that figures set out in the annexes to the report are working assumptions of options to be considered and the figures should not be seen as predetermining any decisions. Many of these options remain subject to consultation and engagement, and any figures indicated were being used to facilitate outline budgetary forecasting only;
- (2) the work programme timetable contained in Annex A of the report be noted;

Annex B – Review of Street Lighting

- (3) the Council at its meeting on 24 January 2013, be recommended to approve the proposals relating to the Review of Street Lighting, set out in Annex B of the report and authorise Officers to prepare for implementation immediately, pending final decisions;

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Terms and Conditions

- (4) approval be given to the continuation of consultations with Trade Unions and employees, as required, given the need for budget savings, with a view to the implementation of potential changes in terms and conditions. These potential changes would focus on but not be limited to the changes described in paragraph 4.2 of the report;
- (5) that should it be appropriate, the Chief Executive be authorised to dismiss and re-engage those employees of the Local Authority, not including schools, who are employed on Local Authority terms and conditions in order to enable a change to those terms and conditions and achieve necessary savings;
- (6) it be noted that any action taken in respect of the delegation, set out in resolution (5) above, would be reported back to Cabinet during the required notice period and before the termination and re-engagement was actioned;

Options still subject to consultation

- (7) it be noted that the options identified in paragraph 4.7 of the report were still subject to consultation and further reports would be presented before any final decision is considered;

Annex C - Community Meals Option to be redefined

- (8) approval be given to the introduction of a more cost effective, streamlined model for Community Meals (revised Option F1.6), as set out in Annex C of the report which will enable Sefton residents to access a range of meal options;
- (9) Officers be authorised to commence a consultation and engagement process with partners, employees and Trade Unions;
- (10) Officers prepare for implementation at the earliest opportunity including the issuing of required notices;
- (11) Officers be authorised to commence the conversation with current service users as to how the service would change including support for the transition period between the subsidised to the non-subsidised model;

Annex D - Further information on options previously considered

- (12) following consideration of the additional information provided in Annex D of the report, approval be given to the outcomes of the

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review of the commissioning of all residential care beds for Option E2.1;

- (13) it be noted that Officers would continue with consultation and engagement processes with employees and Trade Unions on Option E2.1 in Annex D of the report;
- (14) approval be given to the creation of 3 additional Social Worker posts from within the existing budget;
- (15) the Council is recommended at its meeting to approve a budget reduction of £1million over a two year period for Option E2.1 in Annex D of the report;
- (16) following consideration of the additional information provided in Annex D of the report, including the background documents, approval be given to the completion of actions required to achieve change in respect of Option F1.5 (subsidies to Allotment Users' fees and charges) including the issue of relevant statutory and contractual notifications;
- (17) the Council be recommended to approve a reduction of the subsidy by £40k for Option F1.5 in Annex D of the report;

Annex E - External Funding

- (18) the Chief Executive and appropriate Officers be authorised to take the necessary steps to adjust staffing levels in light of the circumstances set out in paragraph 5 of the report;
- (19) the Strategic Director (Place) in conjunction with the Head of Corporate Legal Services be authorised to negotiate and conclude a commercial settlement with the main contractor for the Southport Cultural Centre (the Atkinson) if it can be shown to be in the Council's best interests, subject to final consultation with the Cabinet Member (Children, Schools, Families and Leisure). The details of any such settlement to be reported back to a further meeting of Cabinet;

Annex F – Ways of Working

- (20) the Council be recommended to give approval to the following action being taken on the following Options set out in Annex F of the report:

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<u>Service Area</u>	<u>Ref</u>	<u>Option</u>	<u>Recommended Action</u>
Early Intervention & Prevention	D1.1	Integrated Youth Support & Targeted Youth Support – Budget re-alignment following the cessation of a contract with one provider. Plus the deletion of a vacant post.	The total budget re-alignment of £92k
	D1.2	Offset Substance Misuse work from Drug Action Team Public Health budget	The budget re-alignment of £124k to Public Health
Learning & Support	D1.3	Budget re-alignment – supplies and services – Complementary Education	Budget reduction of £9k
	D1.4	Welfare Officers – Pupil Attendance (Employment, Attendance and Enforcement) Teaching element to DSG	Budget reduction of £25k
	D1.5	School Admission, Appeals and Student Support – Reduction in administration costs	Budget reduction of £19k
	D1.6	Connexions – make use of Council accommodation	Budget reduction of £60k
Children's Social Care	D1.7	Social Care Commissioned Services – travel, supplies and services. To re-commission Council Children's Social Care travel (vehicle hire, leasing and taxis)	Budget reduction of £100k
Economy	D1.8	Relocate Economic Development staff from the Investment Centre, to Magdalen House	Budget reduction of £48k
Economy	D1.9	Budget re-alignment of salaries to be funded from grants, contracts and reserves	Budget reduction of £116k
Democracy	D1.10	Budget re-alignment – Members Allowances as agreed by July 2012 Council	The budget re-alignment be noted
Corporate Support Services	D1.11	Risk Management (insurance)	Budget reduction of £50k
	D1.12	Procurement, ICT and Financial Support	Budget reduction of £50k

Service Area	Ref	Option	Recommended Action
Council	D1.13	Public Health Integration Efficiencies	The approval of business efficiencies to the value of £1.137m from within Council resources

(21) approval be given to the following action being taken on the following options set out in Annex F of the report where internal consultation is required:

Service Area	Ref	Option	Action
Vulnerable People	D1.14	Assessment Teams – Reconfiguring of teams and skill mix. Care Management teams consist of social work and occupational therapy assessment, review and organise care and support for vulnerable adults	<ul style="list-style-type: none"> • Officers be recommended to continue with consultation and engagement processes with employees and Trade Unions • the intention to move away from a specialism model of delivery to a multi-disciplinary model be noted • it be noted that changes to working practices would seek to improve efficiency and effectiveness of the service

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<u>Service Area</u>	<u>Ref</u>	<u>Option</u>	<u>Action</u>
Vulnerable People	D1.15	Reconfiguration of the Supporting People Commissioning Team	Officers be mandated to commence consultation and engagement processes with employees and Trade Unions
Early Intervention and Prevention	D1.16	Healthy Schools – transfer the function of co-ordination and consultant role to schools	Officers be mandated to commence consultation and engagement processes with partners, employees and Trade Unions
Children's Social Care	D1.17	Social Care – Central Management and Support Costs – A restructure and a re-alignment of duties to remaining posts	Officers be mandated to commence consultation and engagement processes with employees and Trade Unions
Learning & Support	D1.18	Reduce the School Targeted Intervention team	Officers be mandated to commence consultation and engagement processes with employees and Trade Unions
Street Scene	D1.19	Building Cleaning – change of frequency in office cleaning	Officers be mandated to commence consultation and engagement processes with employees and Trade Unions

<u>Service Area</u>	<u>Ref</u>	<u>Option</u>	<u>Action</u>
Environment	D1.20	Trading Standards – staffing restructure	Officers be mandated to commence consultation and engagement processes with employees and Trade Unions
Communications	D1.21	Communications – staffing restructure	Officers be mandated to continue with consultation and engagement processes with employees and Trade Unions

(22) approval be given to the following actions being taken on the following options set out in Annex F of the report, where external consultation is required:

<u>Service Area</u>	<u>Ref</u>	<u>Option</u>	<u>Action</u>
Health and Wellbeing	D1.22	Pilot external management arrangements for Crosby Civic Hall with the option of closure if unsuccessful	<ul style="list-style-type: none"> • The proposed approach be approved • Officers to work in conjunction with the appropriate Cabinet Member to evaluate the pilot • Should the pilot prove successful, Officers be authorised to enter into an appropriate longer term arrangement

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<u>Service Area</u>	<u>Ref</u>	<u>Option</u>	<u>Action</u>
			<ul style="list-style-type: none"> • Should the pilot prove unsuccessful Officers be authorised to take the necessary steps to close Crosby Civic Hall • The Council at its meeting on 24 January 2013 be recommended to approve a budget reduction of £46k
Early Intervention and Prevention	D1.23	Aiming High – Review of Integrated Short Breaks	Officers be mandated to commence consultation and engagement processes with employees and Trade Unions
Street Scene	D1.24	Cleansing – cease provision of free plastic sacks excluding those premises which are currently identified as ‘difficult to access’	Officers be mandated to continue with consultation and engagement processes (inform) with the community
	D1.25	Cease subscription arrangement to Mersey Forest Voluntary - reduction of working hours	Officers be mandated to commence consultation and engagement processes with partners, employees and Trade Unions

<u>Service Area</u>	<u>Ref</u>	<u>Option</u>	<u>Action</u>
Corporate Commissioning	D1.26	Governance & Civic Services – Mayoral services – reduce the function of Mayor to the statutory minimum (that is to Chair the Council meeting)	The option be deferred
	D1.27	Corporate Commissioning and Neighbourhood Co-ordination (CCNC) Service – rationalize service	Officers be mandated to commence consultation and engagement processes with partners, employees and Trade Unions
	D1.28	Voluntary, Community, Faith – reduction in resources	Officers be mandated to commence consultation and engagement processes with the community and partners
	D1.29	Double Rating	Officers be mandated to commence consultation and engagement processes with the community and partners

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- (23) approval be given to the following action being taken on the following options set out in Annex G of the report:

Annex G – Subsidies and Charges

<u>Service Area</u>	<u>Ref</u>	<u>Option</u>	<u>Action</u>
Built Environment	D1.30	Pest Control	<ul style="list-style-type: none">• The ongoing community consultation be noted• The Council be recommended to approve the introduction of a service charge of £20 per treatment
Built Environment	D1.31	Car Parking – Car Parking – On and Off street parking charge increases and the introduction of new on street parking charges	The option be deferred and Officers requested to undertake a targeted consultation with local businesses and interested parties on car parking across the Borough and report back the consultation responses to a future Cabinet meeting

Annex H – Standards of Service

- (24) approval be given to the following action being taken on the following options set out in Annex H of the report:

<u>Service Area</u>	<u>Ref</u>	<u>Option</u>	<u>Action</u>
Street Scene	D1.32	Closure of all public conveniences across the Borough	Officers be mandated to commence consultation with the community and partners as appropriate to effect this change

<u>Service Area</u>	<u>Ref</u>	<u>Option</u>	<u>Action</u>
	D1.33	Cleansing – reorganisation of the workload and work patterns of the Rapid response teams	<ul style="list-style-type: none"> • Officers be mandated to commence consultation with the employees and Trade Unions as appropriate to effect this change • The reduced standards of service that would occur should this budget reduction be agreed, be noted
Built Environment	D1.34	Further deferment of the re-instatement of highway management funding	Approve the further deferment of £800k

Annex I – Vulnerable People

(25) approval be given to the following action being taken on the following options set out in Annex I of the report:

<u>Service Area</u>	<u>Ref</u>	<u>Option</u>	<u>Action</u>
Health and Wellbeing	D1.35	Section 117 After Care funding – the Council will pursue, with our Health colleagues, the identification of service users who receive Section 117 funding and request reviews to see if they still require this provision	<ul style="list-style-type: none"> • The approach be approved • It be noted that consultation would take place as part of ongoing care package reviews which would be conducted by Health colleagues • The content of the impact assessment be noted • It be noted that reviews would be undertaken of all people in receipt of Section 117 funding to ensure that needs still fall within the Council's eligibility criteria

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<u>Service Area</u>	<u>Ref</u>	<u>Option</u>	<u>Action</u>
	D1.36	NHS continuing healthcare – prioritise and undertake reviews of service users currently in nursing care to ensure that they are supported appropriately	<ul style="list-style-type: none"> • The approach be approved • It be noted that consultation would take place as part of ongoing care package reviews which would be conducted by Health colleagues
Health and Wellbeing	D1.37	Use of Assistive Technology equipment that enables service users (vulnerable people) to remain in their own homes with minimal outside support for e.g. Lifeline pendants that are connected to the Careline service	<ul style="list-style-type: none"> • The approach be approved • It be noted that consultation would take place as part of ongoing care package reviews
	D1.38	<p>Increase charges for a range of services, these are an increase of charges to:</p> <ul style="list-style-type: none"> • 100% of disposable income (currently 80%) – Currently Service users will contribute 80% of their disposable income toward their care or service costs and this option will mean a change in Council policy so that 100% of disposable income is considered in the financial assessment process • Reduce disability related expenditure (DRE) which presently stands at £16.00 per user per week to £11.00 per week. This option will mean a change in Council 	<ul style="list-style-type: none"> • The changes in policy be approved • It be noted that consultation about this approach would take place as part of ongoing care package assessments and reviews • It be noted that the Council would continue to meet assessed need • The achievement of a budget saving of £75k relating to the previously approved option E2.8 (Area Finance) be deferred

		<p>policy</p> <ul style="list-style-type: none"> • Couples – disregard income buffer when assessing care needs. This option will mean a change in Council policy 	
<u>Service Area</u>	<u>Ref</u>	<u>Option</u>	<u>Action</u>
Health and Wellbeing	D1.39	Further remodel current day care and associated transport	<ul style="list-style-type: none"> • The commencement of consultation and engagement process with partners and service users be approved • It be noted that consultation about this approach would in part take place as part of ongoing care package assessments and reviews • It be noted that the Council would continue to meet assessed need
	D1.40	Recover surplus, unspent Direct Payment funds at regular and earlier intervals and cease the first year one off workplace insurance payment of £150	<ul style="list-style-type: none"> • The Council be recommended to approve the process for recovery and the option to cease the first year one off workplace insurance payment of £150 • It be noted that consultation about this approach would take place as part of the assessment and review process • It be noted that the Council would continue to meet assessed need

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Service Area	Ref	Option	Action
Health and Wellbeing	D1.41	Respite – reduction from a range up to a maximum of 2 weeks to be authorized by a social worker and anything above that time period to be agreed by a Panel	<ul style="list-style-type: none"> • The Council at its meeting on 24 January 2013 be recommended to approve the change in policy and a budget reduction of £1.9 million • It be noted that consultation about this approach would take place as part of ongoing care package assessments and reviews • It be noted that the Council would continue to meet assessed need
Health and Wellbeing	D1.42	Revise Re-ablement model – To obtain new funding available from Health of £900,000, one year only, to enable more users to go through a re-enablement process, thereby reducing levels of admission to short and long term care	<ul style="list-style-type: none"> • The Council at its meeting on 24 January 2013 be recommended to approve the change in approach and a budget reduction of £1.2m • It be noted that consultation about this approach would take place as part of ongoing care package assessments and reviews • It be noted that the Council would continue to meet assessed need

<u>Service Area</u>	<u>Ref</u>	<u>Option</u>	<u>Action</u>
	D1.43	Housing Related Support incremental reductions in housing related funding have reduced the requirement for commissioning/contractual functions	<ul style="list-style-type: none"> • The Council at its meeting on 24 January 2013 be recommended to approve a change in policy and budget reduction of £500k • It be noted that consultation about this approach would take place as part of ongoing care package assessments and reviews • It be noted that the Council would continue to meet assessed need

- (26) the risks and mitigating actions outlined in Annexes B, C, D, E, F, G, H and I of the report be noted.
- (27) the Public Engagement and Consultation Panel be requested to determine the arrangements for a public consultation exercise to be undertaken to seek views on whether there should be a rise in the level of Council Tax for 2013/14.

Reasons for Decisions:

The recommendations in this report, if approved, are another step in agreeing the 2013/14 budget and a two year budget plan. At this stage there are broadly sufficient options to meet the forecast budget gap assuming the Cabinet approves the report's recommendations. However, additional budget savings and options would need to be identified should the savings gap increase and/or those options currently identified are not approved or delivered. It is a legal requirement to set a balanced budget and to ensure the medium term financial position is robust.

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Early consideration of budget options continues to be essential as this supports informed decision making, including the consideration of the outcome of any consultations undertaken, the impact of any decisions to be made and any steps that can be taken to mitigate the impact of a decision.

Alternative Options Considered and Rejected:

Further options would be presented to a future Cabinet meeting.

83. LOCAL COUNCIL TAX REDUCTION SCHEME 2013/14 AND CHANGES TO COUNCIL TAX DISCOUNTS AND EXEMPTIONS FOR UNOCCUPIED PROPERTIES

Further to Minute No. 27 of the meeting held on 19 July 2012, the Cabinet considered the report of the Head of Corporate Finance and ICT which outlined the results of the consultation relating to the Council Tax Reduction Scheme including the Equality Analysis Report, and the results of consultation relating to the removal of Council Tax discounts and exemptions for unoccupied properties, together with an update on Government changes to proposed legislation, including the Equality Analysis Report.

The report also set out a proposed Council Tax Reduction Scheme and a range of Council Tax discounts and exemption changes; provided an update on the latest Government announcement regarding transitional funding being made available to Local Authorities for the Council Tax Reduction scheme, together with the impact of the proposed grant on Sefton Council; and identified ways in which the Council proposes to help those most financially affected by the change through a hardship fund in order to meet its objective of protecting the most vulnerable residents of Sefton.

The report contained the following annexes:

- Annex A: Council Tax Reduction Scheme options – with financial implications
- Annex B: Council Tax Technical changes with financial implications
- Annex C: Consultation and Engagement relating to the Council Tax Reduction Scheme and Council Tax Technical Changes
- Annex D: Equality Analysis Report – Council Tax Reduction Scheme
- Annex E: Equality Analysis Report – Council Tax Technical changes relating to discount and exemptions for vacant unoccupied properties
- Annex F: Local Council Tax Reduction Scheme

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Decision Taken:

1. That the Council be recommended that
 - (i) the proposed Council Tax Reduction Scheme for 2013/14 summarised in paragraph 14 and set out in Annex F to the report, be approved and adopted to take effect from 1 April 2013;
 - (ii) the changes to discounts and exemptions for empty and unoccupied properties be approved to take effect from 1 April 2013 in order to minimise the impact for non-pensioner claimants, as summarised in paragraph 14, and set out in Annex B of the report;
 - (iii) the introduction of an empty homes premium to take effect from 1 April 2013, as summarised in paragraph 14, and set out in Annex B of the report; be approved;
 - (iv) the Government transitional grant be not accepted.
2. The consideration of any minor changes in legislation/guidance in relation to the Council Tax Reduction Scheme and Council Tax Reduction Technical Changes be delegated to the Head of Corporate Finance & ICT in consultation with the Leader of the Council, and that any significant changes in such legislation/guidance and any further recommendations be reported to the Cabinet meeting on 17 January 2013; and
3. The consideration and implementation of any minor textual changes to the Council Tax Reduction Scheme be delegated to the Head of Corporate Finance & ICT;

Reasons for Decisions:

The Government is abolishing the current national Council Tax Benefit Scheme and requires the Council to formally have in place a Local Council Tax Reduction Scheme by 31 January 2013, to take effect from 1 April 2013. The Government is giving Councils greater flexibility over discounts and exemptions to be applied locally from 1 April 2013, to help towards mitigating the impact on working age claimants.

Alternative Options Considered and Rejected:

The Default Scheme and the Government Transitional Grant are detailed within paragraph 2 and Annex A of the report.

Agenda Item 3

CABINET- THURSDAY 13TH DECEMBER, 2012

84. COUNCIL MOTION - SEFTON SUSTAINABLE ENERGY ACTION PLAN

Further to Minute No. 69 of the Council meeting held on 22 November 2012, the Cabinet considered the report of the Director of Built Environment, which indicated that in accordance with Rule 84 of the Council and Committee Procedure Rules, the following motion had been referred to the Cabinet for consideration of the financial implications in advance of any budgetary commitment and prior to any action being taken to implement the decision:

“This Council welcomes the appointment of consultants for a sustainable energy action plan for the Liverpool City Region.

The Council recognises that a sustainable energy action plan will be of immense importance for investment, businesses, jobs and the environment within Sefton.

This Council commits itself to implementing a sustainable energy action plan and notes that delaying the implementation of an action plan will cost jobs and money.”

Decision Made:

That further to the Council motion on 22 November 2012, it be noted that the Sustainable Energy Action Plan is a mechanism for Liverpool City Region and Sefton Council to co-ordinate its own, externally funded and partner activities to deliver low carbon economy goals, is effectively self funding and in itself has no direct additional financial demands on core Council resources above contributory work streams already in progress.

Reason for the Decision:

To provide clarification of the financial implications of the Council Motion in accordance with Rule 84 of the Council and Committee Procedure Rules (Motions on Expenditure).

Alternative Options Considered and Rejected:

None.

85. LOCAL PLAN FOR SEFTON - OUTCOME OF STUDIES

Further to Minute No. 123 of the meeting held on 1 March 2012, the Cabinet considered the report of the Director of Built Environment on the outcome of key studies which had been undertaken on employment land and premises issues, the Council’s housing requirements and agricultural land issues, to assist in the preparation of the Local Plan for Sefton. The report also included the proposed brief for a Consequences Study and the updated timetable for the Local Plan.

CABINET- THURSDAY 13TH DECEMBER, 2012

This was a Key Decision and was included in the Council's Forward Plan of Key Decisions.

Decisions Made:

- (1) the findings of the studies referred to in the report be accepted for the purposes of carrying out a Consequences Study;
- (2) approval be given to the updated housing figures, as set out in paragraph 3.5 of the report for use in the Consequences Study;
- (3) the brief for the Consequences Study, as set out in Annex 1 to the report be approved, subject to any minor alterations that may be necessary, to be delegated to the Head of Planning Services;
- (4) the revised Local Development Scheme setting out the updated timetable for preparing the Local Plan, as set out in section 5 of the report be approved; and
- (5) the use of the Planning Advisory Service to provide critical advice at key stages of Sefton's Local Plan be endorsed.

Reasons for Decisions:

To inform Members of the results of the key studies and to agree the next steps in the preparation of the Local Plan.

Alternative Options Considered and Rejected:

None.

86. HOUSING TENANCY STRATEGY

The Cabinet considered the report of the Director of Built Environment on the Housing Tenancy Strategy which had been produced in accordance with the provisions on Housing Tenure reform set out in the Localism Act 2011 which place a statutory duty on local housing authorities to prepare and publish a tenancy strategy.

This was a Key Decision and was included in the Council's Forward Plan of Key Decisions.

Decision Made:

That the Housing Tenancy Strategy as set out in the report be approved.

Agenda Item 3

CABINET- THURSDAY 13TH DECEMBER, 2012

Reasons for Decision:

To meet the requirements of Section 150 of the Localism Act 2011, which requires local housing authorities to publish a tenancy strategy by January 2013.

Alternative Options Considered and Rejected:

None.

87. DRAFT SEFTON ECONOMIC STRATEGY - CONSULTATION RESPONSE

Further to Minute No. 130 of the meeting held on 29 March 2012, the Cabinet considered the report of the Director of Built Environment on the consultation response to the Draft Sefton Economic Strategy.

This was a Key Decision and was included in the Council's Forward Plan of Key Decisions.

Decisions Made:

- (1) the contents of the report and the consultation response be noted;
- (2) the final version of the Strategy which included a completed Equalities Impact Analysis be approved; and
- (3) the Director of Built Environment be granted delegated authority to produce and publish a summary version of the Strategy.

Reasons for Decisions:

To adopt the Sefton Economic Strategy as Council Policy.

Alternative Options Considered and Rejected:

None.

88. COMMISSIONING OPTIONS FOR HEALTHWATCH AND THE INDEPENDENT COMPLAINTS ADVOCACY SERVICE

The Cabinet considered the report of the Director of Older People on the various commissioning options for a Local Sefton Healthwatch and Independent Complaints Advocacy Service and the Officers' recommendations which reflected the views of the various stakeholders who have been consulted during the last year whilst LINKs have been preparing for the transition process for the implementation of Local Healthwatch.

CABINET- THURSDAY 13TH DECEMBER, 2012

The Health and Social Care Act 2012 amended the Local Government and Public Involvement in Health Act 2007 to make provisions for a Local Healthwatch as the consumer champion for health and social care services. Local Authorities had a responsibility for commissioning this new service to replace the Local Involvement Networks (LINks) from 1 April 2013 and for the commissioning of a Local Independent Complaints Advocacy Service which was previously commissioned by the NHS.

This was a Key Decision and was included in the Council's Forward Plan of Key Decisions.

Decisions Made:

- (1) that approval be given to “a transitional host being commissioned to help set up a Local Healthwatch as a social enterprise which could be a trading arm of the host organisation”; and
- (2) that approval be given to a joint commissioning approach for an Independent Complaints Advocacy with other Merseyside local authorities being adopted, with Liverpool City Council leading the procurement exercise and Sefton Council being represented on the Selection Panel.

Reasons for Decisions:

Section 182 of the Health and Social Care Act 2012 imposed a duty on the Council to make contractual arrangements with a Local Healthwatch organisation for the involvement of local people in the commissioning, provision and scrutiny of health and social services.

Section 185 of the Health and Social Care Act 2012 transfers from the government to local authorities the duty to make arrangements for the provision of independent advocacy services for complaints relating to health services.

Alternative Options Considered and Rejected

Details of the alternative options are set out within the report.

89. CAPITAL MAINTENANCE GRANT 2012/13 - ADDITIONAL SCHEMES

Further to Minute No. 4 of the meeting held on 24 May 2012, the Cabinet considered the report of the Director of Young People and Families which sought approval to an increase in the Children's Services funding provision from the Government Capital Allocation of £3,198,000 received for 2012/13.

Agenda Item 3

CABINET- THURSDAY 13TH DECEMBER, 2012

Decisions Made:

- (1) approval be given to the allocation of £536,250 to the proposed schemes set out in the report, to be funded from Capital Maintenance Grant included within the Capital Programme 2012/13;
- (2) the Director of Young People and Families be authorised to progress the projects in conjunction with Capita Symonds; and
- (3) the Council be recommended to approve the addition of the identified schemes totalling £536,250 into the Capital Programme.

Reasons for Decisions:

Final approval for new projects within the Capital Programme is required from Cabinet and Full Council under Paragraph 31 of Chapter 11 of the Constitution.

Alternative Options Considered and Rejected:

None.

90. SEFTON NEW DIRECTIONS - REQUEST TO SEEK VARIOUS PERMISSIONS

The Cabinet considered the report of the Director of Corporate Support Services on the requests received from Sefton New Directions for various permissions to be given which affect the business operations of the Council's Controlled Company.

Decision Made:

- (1) approval be given to the requests from Sefton New Directions for the following permissions:-
 - (a) to the Company to subcontract
 - (b) to allow the Company to appoint new auditors
- (2) the Head of Corporate Legal Services be authorised to make the necessary contractual arrangements in place between the Council and Sefton New Directions; and
- (3) Sefton New Directions be asked to confirm to the Head of Corporate Legal Services in due course, that the necessary changes have been made to their Articles / Memorandums of Association and registered with Companies House accordingly.

Reasons for Decisions:

The Council holds the single shareholding in Sefton New Directions which is a local authority controlled company as regulated under Part V of the Local Government and Housing Act 1989 (as amended). The Council is acting under its powers as a shareholder and exercising those in accordance with the Companies Act 2006 (as amended).

Alternative Options Considered and Rejected:

The only alternative option would be to not grant the permission sought.

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Report to: Cabinet	Date of Meeting: 31 January 2013
Subject: Welfare Reform	
Report of: Strategic Director - People	Wards Affected: All
Is this a Key Decision? Yes	Is it included in the Forward Plan? Yes
Exempt/Confidential	No

Purpose/Summary

- 1) To inform Members of the implications of the Welfare Reform Act 2012.
- 2) To consider how Sefton Council working with key partners can develop a response to Welfare Reform to mitigate where possible any impacts on our communities.
- 3) To provide an update on progress so far on looking at the impacts of Welfare Reform.

Recommendation(s)

It is recommended that:

- 1) the partnership Action Plan approach is endorsed.
- 2) progress to date on the themes in the Action Plan is noted.
- 3) further specific workshops on themes and neighbourhoods are held with partners.
- 4) progress reports are brought back to Cabinet every six months.
- 5) the real energy and commitment from partners and within the Council to mitigate impact where possible is noted and encouraged.
- 6) a small reference group comprising Cabinet Members – Children, Schools, Families and Leisure; Older People and Health and Communities and Environment be established to oversee the direction of Welfare Reform mitigation.

Agenda Item 6

How does the decision contribute to the Council’s Corporate Objectives?

	<u>Corporate Objective</u>	<u>Positive Impact</u>	<u>Neutral Impact</u>	<u>Negative Impact</u>
1	Creating a Learning Community	X		
2	Jobs and Prosperity	X		
3	Environmental Sustainability		X	
4	Health and Well-Being	X		
5	Children and Young People	X		
6	Creating Safe Communities	X		
7	Creating Inclusive Communities	X		
8	Improving the Quality of Council Services and Strengthening Local Democracy	X		

Reasons for the Recommendation:

- (i) Ensure that Cabinet are fully aware of the potential impacts of Welfare Reform.
- (ii) Enable the Council to set a clear direction and focus for efforts to mitigate impacts of Welfare Reform.
- (iii) To put in place any mitigating actions if possible and work with partners to do so.

What will it cost and how will it be financed?

(A) Revenue Costs

There are minimal costs for organising workshops which are already contained within key budgets. The remainder of costs relate to existing officer time. There may be costs associated with pump priming some of the infrastructure for Welfare Reform. These are contained within a separate report dealing with the Social Fund.

(B) Capital Costs

n/a

Implications:

The following implications of this proposal have been considered and where there are specific implications, these are set out below:

Legal - Welfare Reform Act 2012 and S1 Localism Act 2011.
Human Resources

Equality

- | | | |
|----|--|-------------------------------------|
| 1. | No Equality Implication | <input type="checkbox"/> |
| 2. | Equality Implications identified and mitigated | <input type="checkbox"/> |
| 3. | Equality Implication identified and risk remains | <input checked="" type="checkbox"/> |

Impact on Service Delivery: The Action Plan has been put into place to mitigate where possible the impacts of Welfare Reform. However, it is clear that even with partner engagement, the Council will only be able to make a marginal impact. There are significant efforts to raise awareness of welfare reform through the introduction of a shared web page and through training of staff. Similarly, work by housing partners to mitigate the impact of housing benefit and trying to prevent homelessness will support the council. However, Welfare reform will inevitably impact on residents and the Council will need to take a view on potential impact on service delivery. It is difficult at this stage to quantify any future impact.

What consultations have taken place on the proposals and when?

The Head of Corporate Finance (FD2069/13) has been consulted and has no comments on the report.

Head of Corporate Legal Services (LD1385/13) have been consulted and any comments have been incorporated into the report.

Are there any other options available for consideration?

The proposed mitigation measures have been developed in partnership with key organisations such as JobCentre Plus, Citizens Advice Bureau, One Vision Housing and the community, voluntary and faith sector. Various options were suggested through the vibrant and well attended partner workshops and these have been considered for both deliverability and viability. The options put forward in the Action Plan are considered to be those that can be progressed with a practical outcome.

Implementation Date for the Decision

Following the expiry of the “call-in” period for the Minutes of the Cabinet/Cabinet Member Meeting

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Background Papers:

There are no background papers.

Agenda Item 6

1. BACKGROUND AND POLICY CONTEXT

- 1.1 The Welfare Reform Act 2012 received royal assent on the 8th March 2012. The Act – one of the Coalition Government's flagship bills - puts into law many of the proposals, as well as the broad vision, contained in the 2010 Welfare Reform White Paper *Universal Credit: Welfare that Works*. As with that document the Act is primarily concerned with replacing a number of benefits with Universal Credit. It also develops on a number of changes existent in a nascent form in that White Paper, relating to Housing Benefit, Council Tax Benefit, Disability Benefits, and Employment and Support Allowance.
- 1.2 The premise of the Welfare Reform Act is to move more people into work; simplify the complexities that exist around benefits and to realise savings estimated at £28 billion. Various announcements since the initial financial assessment of savings has made this figure significantly higher.

2. KEY ELEMENTS

The following sets out each of the key elements:

2.1 Household Benefit Cap

- 2.1.1 From April 2013 the Government will put a limit on the total amount of benefit that working age people can receive. This means that households claiming out of work benefits will no longer receive more in benefits than the average wage paid to those who are working. Total benefit payable will be limited to a maximum of £500 each week for couples and lone parents and £350 for single people, though entitlement to certain other benefits will exempt claimants from the Household Benefit cap.
- 2.1.2 Local authorities will be responsible for applying the Household Benefit cap to new and existing claims from April 2013, through Housing Benefit deductions. From October 2013 new claims will start to be taken through Universal Credit and the cap will be applied directly to those claims.

2.2 Reforming Council Tax Support

- 2.2.1 Local authorities have been given responsibility for developing a local Council Tax Reduction Scheme within the following framework:
 - Future Council Tax Support to be offered in form of a discount
 - Local authorities must have a Council Tax Support Scheme by 31st January 2013 to begin on 1st April, 2013
 - Support for vulnerable pensioners should be delivered through a national framework of criteria and allowances (with no changes to current levels of award)
 - Support for Council Tax is provided for the most vulnerable in society
 - Schemes should support work incentives and in particular avoid disincentives to move into work

- Schemes must set out the classes of person who are entitled to a reduction and the reductions that will apply
- A billing Council must consult before making a scheme and each year must consider whether to revise or replace the scheme.

2.2.2 At the 2010 Spending Review, the Government announced that it would localise support for council tax from 2013-14, reducing expenditure by 10 per cent. This is part of a wider policy of decentralisation and welfare reform. A separate report setting out the approach to localisation of Council Tax Support was agreed by Cabinet.

2.3 **Universal Credit (UC)**

2.3.1 This will be a single benefit paid on a monthly basis and will replace Income Support, income based Job Seekers Allowance, Housing Benefit, Child Tax Credit and Working Tax Credit.

2.3.2 The Department for Work and Pensions (DWP) has worked in partnership with local authorities through the Local Government Association to examine the options for face to face service delivery and it has been agreed that a national service with targeted local flexibility is the optimum solution from the point of UC rollout. The core UC offering, for the majority of UC claimants will be provided by DWP. However local authorities to provide face-to-face support for a minority of UC claimants, with more complex needs, who will need help to access the new online system and more intensive, work focussed support.

2.3.3 An incremental approach is envisaged from October 2013 with applications for the new benefit arising only from new claims or major changes in a claimant's circumstances. Government are asking local authorities who may be considering reducing their benefits services to have regard to the fact that some capacity will be needed to maintain the Housing Benefit caseload prior to full migration to UC; process new claims to Housing Benefit for some working age claimants until April 2014; and to provide the face to face support described above. New Housing Benefit claims for pensioners will also continue until October 2014 and full migration of all existing claims to UC will not be complete until the end of 2017.

2.3.4 The DWP and the Local Government Association are working together on the development of short term pilots to help ensure that local authorities are ready for Universal Credit in 2013, and longer term pilots to help develop a more diverse model for delivering Universal Credit after 2015. More information about these can be found on the website of the Local Government Association.

2.3.5 During discussions with the DWP and DCLG concerns were expressed about plans to pay rent to claimants, rather than landlords, under UC. Housing Benefit Demonstration Projects are underway in certain local authority areas and will involve directly paying Housing Benefit to approximately 2000 tenants in each local authority to examine approaches to help claimants manage their own money on a monthly cycle, test safeguards for landlords and understand the level of exceptions. Although, Sefton is not one of the selected areas, One Vision Housing are testing this out locally with new housing development in Seaforth to see how this would impact on their tenants in Sefton.

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2.4 Social Fund

- 2.4.1 This will be replaced with a non-ring fenced grant which will be paid to local authorities and they will become responsible for distribution. This covered crisis loans for people at most need, i.e. victims of domestic violence who have been forced to flee their homes and start up somewhere else. A separate report setting out proposals for how the Council may operate this is on the same Cabinet agenda.

2.5 Disability Living Allowance (DLA)

- 2.5.1 This will be replaced for all working age claimants by a Personal Independence Payment. There is no automatic transfer from one to the other, so people currently receiving DLA will have to make a fresh claim for the new benefit and will be reassessed in line with new assessment criteria.

2.6 Employment Support Allowance (ESA)

- 2.6.1 The amount of time that people can receive contribution based ESA will be limited to 265 days for those claimants in a work related activity group or in assessment phase. The youth element of this for disabled young people has been abolished within the Act for those who haven't paid National Insurance contributions.

2.7 The Single Fraud Investigation Service (SFIS)

- 2.7.1 In February 2012 the Government produced a strategy called Tackling Fraud and Error in Government. This outlined plans to tackle fraud and error in the tax credit and benefit system. They will be creating a single integrated fraud investigation service with statutory powers to investigate and sanction all benefit and tax credit offences. They are also piloting a Mobile Regional Taskforce to concentrate on fraud in targeted, small, areas of the UK.
- 2.7.2 In November 2011, the Government announced that local authority staff currently employed on welfare benefit investigation will become part of SFIS from 2013. These staff will remain employed by local authorities, but operate under SFIS powers, policies, and priorities.

2.8 Social Sector Size Criteria

- 2.8.1 From April 2013, the applicable maximum rent will be reduced by a national percentage rate depending on how many bedrooms the household is considered not to require. A 14% reduction will be made for those who under-occupy their home by a single bedroom and a 25% reduction for two bedrooms or more. The assessment of requirements will be against the same criteria currently used for LHA: a bedroom will be allocated for a single adult or couple; every two children under the age of 10 or each child over 10 if they are different genders.
- 2.8.2 Although there are no planned exemptions to the new size criteria, the Government announced that it would add an additional £30m per year to the national discretionary housing payment budget from 2013/14.

This is aimed at supporting two specific groups of social tenants through the changes. The first group are disabled people who live in significantly adapted accommodation and who may need additional support to remain in their existing homes. The second group are foster carers, including those who need to keep an extra room when they are in between fostering.

- 2.8.3 The Government are working with social housing providers and local authorities to build an effective implementation strategy that will support tenants, their advisers and housing providers in preparing properly for this change.

3. DEVELOPING THE COUNCIL'S RESPONSE TO WELFARE REFORM

3.1 Welfare Reform is one of the largest policy changes to be introduced by the current Government. It was recognised immediately that the Council needed to develop a potential mitigation plan for Sefton residents. From the outset, a strong inclusive partnership approach was taken to develop a single message and a collaborative approach. It is also important that the leadership for the approach is undertaken by partners and community agencies in terms of developing community capacity and resilience.

3.2 A partnership group to oversee mitigation for Welfare Reform was established through the Sefton Borough Partnership Operations Board. This group led by the Strategic Director – People has been overseeing the development of an Action Plan for potential mitigating action. Membership is Citizens Advice Bureau (CAB), One Vision Housing – representing the Strategic Housing Partnership, Sefton CVS – representing the VCF sector, Council and Job Centre Plus.

3.3 The Action Plan has been developed through a series of Partnership meetings and wider partner workshops. These have all been exceptionally well attended with a real energy and commitment to doing what we can. The following themes have come out of the workshop and form the basis for the Action Plan:

- Influencing Policy and Strategy
- Information and advice provision
- Awareness raising/training and workforce development
- Working with employers
- Financial Inclusion
- Foodbanks
- Furniture Recycling
- Clothesbanks and Charity Shop Networks
- Communication

4. Update on Themes

4.1 The following sets out a snapshot of existing activity and is not an exhaustive list. If Cabinet require more detailed information on particular themes, the Head of Corporate Commissioning and Neighbourhood Co-ordination can provide this.

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4.1.1 Influencing Policy and Strategy

- Work has been done in broad terms to develop intelligence and customer insight into where impact may be felt the most. This has been linked to the work undertaken around Council Tax Benefit
- Partnership Group is ensuring that Welfare Reform is factored where possible into policy approaches across all organisations
- Sefton Council continues to participate in and influence City Region work around child poverty, financial inclusion, employment and skills

4.1.2 Information and advice provision

- In process of mapping current provision and developing a signposting tool for people needing advice and agencies to signpost
- Investigating possibility of a Welfare Rights Forum for workers
- To agree consultation quality assurance standards for advice
- Developing Lottery application for advice and guidance around benefits

4.1.3 Awareness raising/training and workforce development

- Layered training programme being developed for Council (Members and Officers) and VCF organisations. This will include Member briefings, information packs for Councillor surgeries, training for benefit advisers, basic awareness training for Managers in Council and VCF organisations to cascade to teams.
- Timeline for this is by end of March 2013

4.1.4 Working with employers

- Looking at opportunities to maintain people into work through Sefton e-work

4.1.5 Financial Inclusion

- Considering Credit Union Development in Sefton – this is a substantial area for development – including jamjar accounts, emergency payments and how to stop people taking out payday loans
- Addressing illegal money lending – events are planned
- General welfare reform events planned in neighbourhood areas – two already taken place in Derby ward and one planned for Netherton in February 2013
- Linacre and Netherton wards are looking at how VCF organisations can mitigate the impacts of Welfare Reform at a neighbourhood level
- Tentatively looking at digital inclusion and barriers people will face in accessing benefits online – Grange Childrens Centre will be running IT courses supported by CAB

4.1.6 Foodbanks

- Independent charity for Sefton established with three main hubs
- Sefton CVS facilitating establishments of foodbanks in North and Central Sefton, Sefton Council facilitating establishment in South Sefton
- North Hub- agreed with Lakeside Christian Centre. Temporary storage space agreed

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- Central Hub- Discussions are ongoing about coverage of area. St Lukes Church in Crosby will support a foodbank in parts of central Sefton. Sefton CVS are facilitating discussions with other faith leaders about support for foodbanks.
- South Hub- St Leonards/Bootle Team Ministry agreed as lead. Distribution and referral points agreed.
- Collection points in place for all main Council buildings, including Leisure Centres and Childrens Centres – (south only at this stage)
- Collection points in Fire Stations, Marks and Spencers, Bootle, Strand Shopping Centre, Health and Safety Executive, Marsh Lane Police Station, One Vision Housing, range of VCF organisations inc L3o Centre, Sefton Women's and Childrens Aid
- Meeting with all supermarkets to get sign up in Sefton planned to agree collection weekends
- 1.8 tonnes collected so far. 1 ton is the equivalent to 25,000 cans of soup
- £500 cash donations already made
- Volunteer job descriptions on national volunteering Do-it.org.uk
- Intention to go live as soon as possible but need 4 tonnes of food per foodbank to start

4.1.7 Furniture Recycling

- Currently mapping out who does what around furniture recycling in Sefton and Merseyside
- Potential opportunities with Bulky Bobs, Furniture Resource Centre being explored
- Looking at a potential cost effective agreements with white goods supplier

4.1.8 Clothesbanks and Charity Shop Networks

- Exploring whether charity shops could be part of a voucher system linked to work on Social Fund
- Investigating Liverpool Foodbanks clothes swap approach called Tango

4.1.9 Communication

- Draft webpage developed for use by all partners
- Map of offers made by organisations to support Welfare Reform to be part of webpage signposting people to support

4.2 In terms of the development of the Action Plan and other associated Welfare Reform activity, including related Social Fund initiatives, it is recommended that a Reference Group comprising of the comprising Cabinet Members – Children, Schools, Families and Leisure; Older People and Health and Communities and Environment be established to oversee the direction of Welfare Reform mitigation.

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Agenda Item 7

Report to: Cabinet

Report: 31st January 2013

Subject: Social Fund

Report of: Strategic Director - People

Wards Affected: All

Is this a Key Decision? Yes

Is it included in the Forward Plan? Yes

Exempt/Confidential: No

Purpose/Summary

The purpose of this report is to enable Cabinet to determine the scope of the Social Fund

Recommendation(s)

It is recommended to:

- 1) note the contents of the report and give full consideration to the options of delivering a crisis fund in Sefton.
- 2) include the available grant and the associated expenditure into the 2013/14 budget
- 3) establish a local scheme in accordance with the principles set out in Section 6 of the report.
- 4) approve the utilisation of a proportion of the grant available to establish a number of posts to deal with additional administration and to develop the VCF sector in respect of alternative support.
- 5) agree that the reference group comprising of the Strategic Director – People, in consultation with the Cabinet Member - Children, Schools & Families and Leisure, Cabinet Member - Older People and Health and Cabinet Member - Communities and Environment being given delegated authority to allocate £200,000 of the Social Fund to enable resilience and capacity in our communities.

Agenda Item 7

How does the decision contribute to the Council's Corporate Objectives?

<u>Corporate Objective</u>		<u>Positive Impact</u>	<u>Neutral Impact</u>	<u>Negative Impact</u>
1	Creating a Learning Community		√	
2	Jobs and Prosperity		√	
3	Environmental Sustainability		√	
4	Health and Well-Being			√
5	Children and Young People		√	
6	Creating Safe Communities		√	
7	Creating Inclusive Communities		√	
8	Improving the Quality of Council Services and Strengthening Local Democracy		√	

Reasons for the Recommendation

The government has introduced major changes to the welfare environment through the Welfare Reform Act 2012.

From April 2013 elements of the discretionary Social Fund budget – Community Care Grants and Crisis Loans will be devolved to upper tier authorities who will then be able to determine how the funding is spent.

The budget allocation has only been confirmed for a two year period there is no guarantee of additional funding beyond that period.

What will it cost and how will it be financed?

(A) Revenue Costs

The Grant funding has been determined for 2013/14 and consists of a main allocation (£955,455) and a separate administration grant element (£201,895). Funding for the 2014/15 main element has yet to be confirmed and the indicative funding for administration is £185,058.

This funding is initially for two years and is finite in nature.

(B) Capital Costs

None.

Implications

The following implications of this proposal have been considered and where there are specific implications, these are set out below:

<p>Legal LD 1386/13</p> <p>Welfare Reform Act 2012</p> <p>Finance FD2070/12</p>

Human Resources				
Equality See Section 3				
<p>The Corporate Commissioning Team holds the responsibility for taking an overview on Equality Impact Assessments and assessing the impact of decisions. These will be published on the Council website.</p>				
<ol style="list-style-type: none"> 1. No Equality Implication 2. Equality Implications identified and mitigated 3. Equality Implication identified and risk remains 	<table border="1" style="margin-left: auto; margin-right: auto;"> <tr><td style="width: 30px; height: 20px;"></td></tr> <tr><td style="width: 30px; height: 20px;"></td></tr> <tr><td style="width: 30px; height: 20px; text-align: center;">X</td></tr> </table>			X
X				
<p>In relation to compliance with the Equality Act 2010, Section 149, Members need to make decisions in an open minded balanced way showing due regard to the impact of the recommendations being presented. Members need to have a full understanding of any risks in terms of people with protected characteristics and any mitigation that has been put in place. Equality Impact Assessments, including consultation, provide a clear process to demonstrate that Cabinet and Council have consciously shown due regard and complied with the duty.</p>				

Impact on Service Delivery

None.

What consultations have taken place on the proposals and when?

There have been a number of meetings in respect of the implications of the Welfare Reform Act and a steering group established.

Agenda Item 7

The Head of Corporate Finance and ICT (FD2070/12) has been consulted and would make the comment that the application of this funding must be carefully managed to ensure there is no over application of the monies available.

Are there any other options available for consideration?

The Council does not have to provide a crisis scheme.

Implementation Date for the Decision

1st April 2013.

Contact Officer: Margaret Milne
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Email: margaret.milne@sefton.gov.uk

Background Papers:

www.gov.uk/community-care-grant
www.gov.uk/crisis-loans

1. Introduction/Background

- 1.1 The Social Fund is currently administered by Department of Works and Pensions via Jobcentre Plus.
- 1.2 From 1st April 2013 elements of the discretionary Social Fund budget - Community Care Grants and Crisis Loans, which currently provide finance for emergency expenditures and transition into the community, will be devolved to upper tier local authorities including Sefton.
- 1.3 These authorities will be free to determine how this funding is spent.
- 1.3.1 The allocation is made up of two elements £955,455 for the fund plus an Administration Grant of £201,895 these funds will transfer to the local authority.
- 1.4 There is no guarantee of this level of funding after 2 years.
- 1.5 The funding is not ring-fenced.
- 1.6 There is no obligation on the local authority to provide a crisis scheme.

2. Social Fund Reform

- 2.1 Universal Credit will provide extended eligibility to access DWP support including
 - Funeral payments
 - Sure Start maternity grants
 - Cold weather payments
 - Budget advances
 - Advance of benefit where appropriate
- 2.2 To be abolished
 - Community Care Grants
 - Crisis Loans
 - Interim payments
 - Crisis loans for alignment of benefit
 - Social Fund Commissioner
- 2.3 To be introduced from 1st April 2013
 - Short term benefit advances
 - Local welfare provision

3. Data Sharing

- 3.1 Currently Department of Works and Pensions are trying to establish if local authorities can be given access to customer information.

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3.2 Should it be determined that this information will be made available it will not be until after the 1st April 2013.

4. Trends and Administration

4.1 The following table shows the trends over the last 5 years and a disproportionate increase in the number of crisis loans whilst the value of the awards has only marginally changed.

2005/06	2009/10
Community Care Grant	Community Care Grant
£678,300 (1640 awards)	£705,300 (1730 awards)
Average award £414	Average award £408
Crisis Loans	Crisis Loans
£70,400 (1260 awards)	£474,400 (8280 awards)
Average award £56	Average award £57

4.2 In 2009/10 there were 14,110 applications received and 10,010 awarded.

4.3 The funding is finite.

4.4 The administration grant has been confirmed as £201,895 in year 1 and £185,058 in year 2.

5. Claimants

5.1 Categories of claimants

- Families under exceptional pressure
- Homeless people or rough sleepers
- Vulnerable older people
- People fleeing domestic violence
- Young people leaving care
- People moving out of institutional residential care
- Ex-offenders leaving prison or detention centres
- Chronically or terminally ill people
- People with alcohol or drug issues
- People with learning difficulties

5.2 Assistance given to claimants

- Have no essential funds
- Need essential goods associated with infants/children
- Have no heating
- Require help with emergency travel costs
- Have suffered a major upheaval or disaster
- Require suitable clothing for job interview or work
- Require help towards essential medical related costs
- Require assistance to cover living expenses until they receive their first payment of benefit or salary, where this is not met by other benefits from 1st April 2013 this will be covered by a new benefit known as 'Short Term Benefit Advance'

6. Local Scheme

6.1 It is proposed to establish a local assistance scheme to provide limited support to the categories of people listed in Section 5 above. The scheme will follow the following principles:-

- It is for emergency situations only
- The scheme will not provide loans.
- Assistance will not have a cash provision unless in exceptional circumstances.
- There will be an on-line application process supported through the Customer Access Team.
- There will be an appropriate, timely and effective decision making process put in place to respond to bids.
- There will be no appeal process following decisions.
- Unsuccessful applicants will be given clear referral routes to other help and support.
- The budget is cash limited and will be subject to monthly reviews to ensure that expenditure is maintained within budgetary provision.

6.2 In terms of support to the scheme resources will be made available for the funding of 2 FTE staff members to assist claimants within the One Stop Shop.

6.3 The scheme will be subject to review on a six monthly basis in the context of the development of other forms of support, as set out in Section 7 below.

7. Options for Delivery/Support

7.1 In line with the themes of the Action Plan for Welfare Reform, it is suggested that £200,000 from the Social Fund allocation is utilised for pump priming some of the infrastructure support for welfare reform. This will support and build resilience and capacity in our communities in an attempt to limit the demand on the fund. The use of this funding be delegated to the reference group comprising of the Strategic Director – People, in consultation with the Cabinet Member - Children, Schools &

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Families and Leisure, Cabinet Member - Older People and Health and Cabinet Member - Communities and Environment.

7.2 In broad terms, the themes will cover:

- Foodbanks
- Furniture recycling and white goods
- Information and Advice
- Financial Inclusion

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Report to: Cabinet

Date of Meeting: 31st January 2013

Subject: Section 75 Partnership Agreement between Sefton Council and Mersey Care NHS Trust

Report of: Director of Older People

Wards Affected: All

Is this a Key Decision? Yes

Is it included in the Forward Plan?

Yes

Exempt/Confidential

No

Purpose/Summary

Section 75 of the National Health Service Act (2006) (formerly Section 31 of the 1999 NHS Act) provides the framework under which this agreement is made. Section 75 allows for health bodies and health related local authority services to pool money, delegate functions and integrate resources and management structures. The framework allows for the commissioning of existing or new services and provide for arrangements for working together.

A Joint working agreement between Sefton Council and Mersey Care NHS Trust for the provision of integrated Mental Health Care Management Services in Sefton was originally established in 2004. This agreement included the secondment of mental health care management staff to Mersey Care NHS Trust.

Recommendation(s)

The Cabinet is requested to authorise a dissolving of the current agreement and to authorise the Director of Older People's Services, in consultation with the Cabinet Member – Older People and Health and subject to the final approval of relevant senior officers within Mersey Care NHS Trust, to enter into a formal agreement for the joint delivery of Mental Health Services as outlined in this report.

How does the decision contribute to the Council's Corporate Objectives?

	<u>Corporate Objective</u>	<u>Positive Impact</u>	<u>Neutral Impact</u>	<u>Negative Impact</u>
1	Creating a Learning Community		x	
2	Jobs and Prosperity		x	
3	Environmental Sustainability		x	
4	Health and Well-Being	x		
5	Children and Young People		x	
6	Creating Safe Communities	x		
7	Creating Inclusive Communities	x		
8	Improving the Quality of Council Services and Strengthening Local Democracy		x	

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Reasons for the Recommendation:

The Original Section 75 has been reviewed. A new Section 75 Agreement between the Council and Mersey Care NHS Trust will provide an updated agreement that will continue to contribute to the Council's Vision of partnership working, most particularly through assisting the Council in achieving its Community Priorities.

It is proposed that the Council enter into a Section 75 Agreement with Mersey Care NHS Trust for the provision of mental health services in the borough and continue the partnership arrangement that already exists and is well established for the joint delivery of these services locally. Re-entering into the agreement will continue to formalise this within legal agreements under the National Health Services Act (2006). A draft of the Agreement is appended to this report as Appendix 1.

What will it cost and how will it be financed?

(A) Revenue Costs There will be no additional cost. Costs will continue to be met from the Adult Social Care salaries budget.

(B) Capital Costs – N/A

Implications:

The following implications of this proposal have been considered and where there are specific implications, these are set out below:

Legal		
Human Resources		
Equality		
1.	No Equality Implication	<input checked="" type="checkbox"/>
2.	Equality Implications identified and mitigated	<input checked="" type="checkbox"/>
3.	Equality Implication identified and risk remains	<input type="checkbox"/>

Impact on Service Delivery:

To enable both the Council and Mersey Care to meet their respective statutory obligations and to improve services for Service Users and their carers through a closer working partnership

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What consultations have taken place on the proposals and when?

The Head of Corporate Finance and ICT (FD2032/12) has been consulted and comments are incorporated in the report, and Head of Corporate Legal Services (LD1349/12) have been consulted and has no comments

Are there any other options available for consideration? N/A

Implementation Date for the Decision

Following the expiry of the “call-in” period for the Minutes of the Cabinet/Cabinet Member Meeting

Contact Officer: Tina Wilkins

Tel:

Email: tina.wilkins@sefton.gov.uk

Background Papers:

None

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1. Background

- 1.1 Section 75 of the National Health Service Act (2006) (formerly Section 31 of the 1999 NHS Act) provides the framework for which this agreement is made. Section 75 allows for health bodies and health related local authority services to pool money, delegate functions and integrate resources and management structures. The framework allows for the commissioning of existing or new services and arrangements for working together.

A Joint working agreement between Sefton Council and Mersey Care NHS Trust for the provision of integrated Mental Health Care Management Services in Sefton was originally established in 2004. This agreement included the secondment of mental health care management staff to Mersey Care NHS Trust.

Section 75 of the National Health Service Act 2006 consolidated Section 31 of the Health Act 1999 and in so doing became the statutory authority both for the continuation of existing partnership agreements between Health and the LA and for any new such agreements entered into. The section provides for designated Health and Social Care bodies to act on each other's behalf in the commissioning or delivery of services for people for whom there is a shared responsibility.

- 1.2 The Section 75 Agreement sets out a partnership agreement between the Council and Mersey Care NHS Trust, demonstrating how both organisations are contributing to the delivery of Mental Health Services in the borough. In terms of the Council's contribution, this includes 34 members of staff that are employed by the Council. These members of staff are currently managed within the Mersey Care management structure with accountability to the Director of Older People.

The Section 75 Agreement proposes to formalise current arrangements through a continued secondment of staff to Mersey Care NHS Trust. The staff members will, however, remain as Sefton MBC employees, under Sefton MBC terms and conditions. An Executive Steering Group will also be established with senior officer representation from both organisations to performance manage arrangements relating to the agreement.

- 1.3 The Section 75 Agreement can be accessed via this link to the Council's website <http://sb1msgov1:9070/documents/s44185/Section%2075%20Agreement.pdf>

and the key components can be summarised as follows:

- To enable both the Council and Mersey Care to meet their respective statutory obligations and to improve services for Service Users and their carers through a closer working partnership
- Raise standards by improving the quality and responsiveness of Services
- To enable the Secondment of staff from the Council to Mersey Care in accordance with the Agreement to enable the Trust to perform and manage the service and staff.

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- Mersey Care shall be accountable to the Council for performance in accordance with agreed Functions which it will exercise on behalf of the Council.

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Agenda Item 9

Report to: Cabinet

Date of Meeting: 31 January 2013

Subject: Public Health Transition

Report of: Director of Public Health **Wards Affected:** All

Is this a Key Decision? Yes

Is it included in the Forward Plan?
Yes

Exempt/Confidential No

Purpose/Summary

The report updates Members on the public health allocation and the transition process that is being undertaken to prepare the Council for taking on its new statutory duties for public health from April 2013. It seeks support for extension of contracts that will be included in the statutory transfer scheme from NHS Sefton, subject to approval by the NW Strategic Health Authority, and for establishment of the public health structure and transfer of staff in substantive posts through the statutory transfer scheme.

Recommendation(s)

The Cabinet approves

1. the inclusion of the ring-fenced public health allocation into the 2013/14 and 2014/15 budget
2. the proposed budget profile for 2013/14
3. submission of a proposal to extend a range of current PCT contracts as outlined in the report and authorises the Head of Corporate Legal Services to confirm the same to the Strategic Health Authority.
4. the establishment of the public health structure outlined at Appendix D
5. an application for recognition as a training location for the specialist public health training scheme
6. to delegate to the Head of Corporate Personnel and Director of Corporate Support Services so that the Authority may make any appropriate arrangements for the transfer of public health employees as required in accordance with the transfer of the public health function (this includes but is not limited to) confirming the Director of Public Health's appointment and all other employees at a time deemed appropriate by the Head of Corporate Personnel
7. to delegate to the final sign off of the transfer scheme to the Cabinet Member for Older People and Health.

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How does the decision contribute to the Council's Corporate Objectives?

	<u>Corporate Objective</u>	<u>Positive Impact</u>	<u>Neutral Impact</u>	<u>Negative Impact</u>
1	Creating a Learning Community		x	
2	Jobs and Prosperity		x	
3	Environmental Sustainability		x	
4	Health and Well-Being	x		
5	Children and Young People		x	
6	Creating Safe Communities	x		
7	Creating Inclusive Communities	x		
8	Improving the Quality of Council Services and Strengthening Local Democracy		x	

Reasons for the Recommendation:

What will it cost and how will it be financed?

(A) Revenue Costs The council will receive a ring-fenced public health grant from the Department of Health of £19.4m in 2013/14 and £19.9m in 2014/15

(B) **Capital Costs**

N/A

Implications:

Legal

As a consequence of PCTs being abolished as legal entities on 1 April 2013 it is necessary to transfer all assets and liabilities currently belonging to PCTs to other legal entities, such as local authorities, Public Health England, National Health Service Commissioning Board and Clinical Commissioning Groups.

The Health and Social Care Act 2012 provides a mechanism for this process whereby a Transfer Scheme, which is an instrument in writing made by the Secretary of State under sections 300 to 302 of the Act, lists all the assets and liabilities which will be automatically transferred to the legal ownership of a receiving organisation on 31 March 2013

Assets are those things that the PCT uses in performing its statutory functions or business, such as, the premises where they operate, any plant and equipment, the IT that they use and any contracts entered into by them with third parties. Liabilities may include any outstanding obligations, disputes, and claims by third parties (including legal

claims) under a contract or monies owed by the PCT.

The PCT in collaboration with the Council is responsible for drafting the list of assets and liabilities which will be submitted to the Secretary of State for inclusion in the Transfer Scheme. The PCT and the Council need to formally agree the contents of the list of assets and liabilities before it is submitted to the Secretary of State via the Strategic Health Authority.

The deadline for submitting requests for extension to contracts is 31 January 2013 to enable these to be included in the final transfer scheme that will be completed in March.

Human Resources

Staff currently employed in substantive roles by NHS Sefton whose functions will transfer into Sefton Council from 1 April 2013 will be subject to a statutory transfer in accordance with national principles that have been communicated.

Equality

No Equality Implication

Impact on Service Delivery:

What consultations have taken place on the proposals and when?

The transition process has been managed by a group with representation of appropriate officers from NHS and Sefton Council. This has included a thorough review of all transferring functions and contracts. Employees and trade unions affected by the transfer are currently being formally engaged in a TUPE consultation process. The Head of Corporate Finance (FD 207513) and the Head of Corporate Legal Services (LD1391/13) have been consulted and any comments have been incorporated into the report.

Are there any other options available for consideration?

No

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Implementation Date for the Decision

Following the expiry of the “call-in” period for the Minutes of the Cabinet/Cabinet Member Meeting

Contact Officer: Dr Janet Atherton
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Background Papers:

None

1. Introduction/Background

- 1.1 Sefton Council will take on the lead role for public health from 1 April 2013 as a result of the Health and Social Care Act 2012. The future responsibilities of the Council are set out in Appendix A.
- 1.2 Some public health functions will be undertaken by the NHS Commissioning Board and Public Health England, and the Council will be required to provide a specialist public health service to the Sefton Clinical Commissioning Groups. It will, therefore, be important to establish effective working relationships with these new bodies.
- 1.3 A public health transition group meets monthly and is implementing the public health transition plan. The group has senior representation from colleagues in both Sefton Council and NHS Sefton. The key aim of the group has been to ensure a smooth and safe transition.
- 1.4 Progress against the transition plan has been monitored by the Strategic Health Authority, and more recently through a Local Government Association stocktake process undertaken in October 2012. Implementation is progressing to plan, although delays in receiving final financial allocations and national guidance on key issues such as human resources and contracts mean that there are still several issues to finalise in the limited time remaining ahead of the transfer date.
- 1.5 The transition is now in its final phase and Sefton Council is making good progress in delivering its new public health function, building on many years of close working between the public health team and colleagues across the Council. The public health team moved to their new accommodation in Merton House in September and are already working from council IT systems. Close working within other council departments and NHS colleagues, particularly finance, legal, HR and procurement is aiding the work to understand budget commitments and contractual arrangements.
- 1.6 This paper outlines the new public health responsibilities of the Council, provides details of the ring-fenced public health grant allocation, sets out a proposed budget, and seeks approval for the transfer of commissioned service contracts to the Council and for establishment of the public health structure and transfer of staff in substantive roles within the structure.

2. Health and Well-being

- 2.1 At the same time as the Council takes on responsibility for public health, the Health and Wellbeing Board that has been operating in shadow form will need to be established as a formal committee of the Council. Final statutory guidance on the role of the Health and Wellbeing Board is awaited.
- 2.2 Public health will be in the portfolio of the Cabinet Member for Health and Social Care and the Director of Public Health will be the principal adviser for public health to the Council.

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- 2.3 A key responsibility of the Director of Public Health (DPH) and their team will be to undertake surveillance and assessment of the population's health and well-being. This links with the DPH statutory responsibility to produce a Public Health Annual Report and the Health and Well-being Board's requirement to produce a Joint Strategic Needs Assessment (JSNA) and Health and Well-being Strategy.
- 2.4 The Sefton Strategic Needs Assessment has been completed and the draft Joint Health and Wellbeing Strategy is currently subject to a consultation and engagement exercise prior to being finalised in March 2013.
- 2.5 The final Public Health Annual Report for NHS Sefton was published in September 2012 and is available on the Council website.

3. Budget Allocation and Commissioning

- 3.1 The Council has received notification of its first ring-fenced public health grant allocation on 10 January 2013 – £19.4m in 2013/14 and £19.9m in 2014/15. The allocations have been based on a detailed budget audit process that identified expenditure in 2010/11 and 2011/12 against the public health functions transferring to the Council and include an uplift of 2.8% in both financial years.
- 3.2 The public health grant has conditions about how it can be used and there are reporting requirements set out in the grant conditions to ensure that the grant is used appropriately on programmes to improve public health outcomes.

The public health grant is being provided to give local authorities the funding needed to discharge their new public health responsibilities. It is vital that these funds are used to:-

- improve significantly the health and wellbeing of local populations
- carry out health protection functions delegated from the Secretary of State
- reduce health inequalities across the life course, including within hard to reach groups
- ensure the provision of population healthcare advice.

The Chief Executive will be accountable for reporting appropriate use of the grant.

- 3.3 The commissioning responsibilities of the Council are set out in Appendix A. The PCT has a range of commissioned contracts against these responsibilities.

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All existing contracts have been reviewed through the contracts transition process led by NHS Merseyside. A database of contracts transferring into public health has been developed and each contract has been reviewed to ascertain:

- End date
- Fitness for purpose of specification and performance indicators
- Contract monitoring and reporting arrangements

3.4 Whilst there are some issues still to be resolved regarding budgets and commissioning responsibilities between the Council, CCGs and NHSCB the breakdown of current commitments against the Public Health budget can be summarised as:-

Major Commissioning Budgets	Spend	Contract Extension required until
NHS Healthchecks	£517,000	31/03/2014
Sexual Health Services	£2,712,626	31/03/2014
Drugs and Alcohol	£2,181,598	31/03/2013
Healthy Living Centres	£540,386	31/03/2014
Citizen's Advice Bureau	£283,712	31/03/2014
Sefton CVS	£92,975	31/03/2014
Champs Collaborative	£153,215	31/03/2014
Drugs and Alcohol services included in tender specification	£3,329,675	31/08/2013
Sefton Council commissioned services	£1,868,053	31/03/2014
LCH Contract	£3,782,786	31/03/2014
Other Contracts	£557,815	31/03/2014
Miscellaneous	£174,087	Not applicable
Staffing	£1,430,291	Not applicable
Infrastructure	£245,000	Not applicable
TOTAL	£17,869,219	
Outstanding Contract Issues to be resolved	£393,081	
Cabinet agreed efficiencies	£1,137,700	2013/2014
OVERALL TOTAL	£19,400,000	

These commitments can be met from within the ring-fenced grant available.

3.5 In the December 2012 Cabinet, £1.1m efficiencies (£800k in 2013/14 and £300k in 2014/15) from the integration of public health into the Council were approved. These efficiencies have been accounted for in the budget set out above. An additional £600k of efficiencies have been identified for consultation and are included on a report elsewhere on the Agenda. Should these savings be agreed then the impact on the above commitments above would be to reduce infrastructure costs by 100k and expenditure on Drugs and Alcohol by 500k. It is important to note that the full ring-fenced budget will need to be accounted for to the Department of Health.

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- 3.6 Many of the current contracts for public health programmes are due to expire on 31 March 2013/14. In order to ensure that there is a smooth transition, with no avoidable disruption to clinical services, the transition group has reviewed all contracts and set out a timetable for review and reprocurement where appropriate.

MAJOR COMMISSIONING BUDGETS	COMMISSIONING REVIEW TIMESCALE
NHS Healthchecks	New specification 13/14
Sexual Health Services	Tender 13/14
Drugs and Alcohol Services	Tender 12/13
Healthy Living Centres	Review 13/14
Citizen's Advice Bureau	Review 13/14
Sefton CVS	Review 13/14
Champs Collaborative	Review with CMDPH in 13/14
Sefton Council	Review 13/14
Liverpool Community Health	Review 13/14 & 14/15
Other Contracts	Review 13/14

- 3.7 In order to allow time for the necessary procurement processes to be followed and to avoid disruption to services the public health transition group believe the appropriate way forward would be for the PCT to apply to the Strategic Health Authority for permission to extend contracts until 31 August 2013 for services that will be included in the planned drugs and alcohol services tender, and to extend other contracts (as set out in the above table) until 31 March 2014. Such contracts would then form part of the list of assets and liabilities which will be submitted to the Secretary of State for inclusion in the Transfer Scheme automatically passing those assets and liabilities to the Council on 1 April 2013.
- 3.8 In order to facilitate that process the PCT are required to submit to the Strategic Health Authority a list of all the contracts they wish to extend with an explanation as to why it is considered appropriate to extend the contracts together with confirmation from the Council that they are in agreement with the proposal.
- 3.9 The current contract with Liverpool Community Health (LCH) NHS Trust is due to run until 31 March 2014. We are exploring whether it is possible to become an associate to the Sefton CCG contract with LCH for 2013/14. This allows time for review of the contract and to consider whether a standalone Council contract would be beneficial or not for 2014/15 onwards.

Risk management

- 3.10 Funding allocations beyond 2014/15 are subject to the outcome of the forthcoming Comprehensive Spending Review. The stated intention of the Department of Health is to achieve movement towards target allocations through levelling up rather than reducing allocations to areas that are currently above target such as Sefton. This has been the case with the allocations for 2013/14 and 2014/15 where all councils received an uplift in their allocations but those above target received smaller increases.
- 3.11 The budget audit has been a complex process, particularly where public health services have been part of larger NHS Trust contracts. Some of the costs need further work and if there are any discrepancies these will need resolution with the CCGs and NHSCB. Where any costs would make a material difference then it may be possible to get an adjustment to future budget allocations to reflect this.
- 3.12 The contracts subgroup of the public health transition group has done an initial review of all contracts and set out a phased procurement plan over the next two years to ensure that all contracts provide maximum effectiveness and value for money. Future commissioning intentions will be closely aligned with the priorities identified in the JSNA and JHWS.
- 3.13 We are required to commission the NHS Healthcheck Programme that is currently delivered by in general practices and pharmacies across the borough. This is currently managed through a Locally Enhanced Service linked to the main primary care contract. Options for future contracting mechanisms are still being clarified.
- 3.14 Staff capacity to review and reprocure all contracts is limited, and the procurement process itself can take up to 12 months, and hence a phased timetable is required to ensure that we recommission services safely and minimise the risk of unplanned disruption to services.

4. Public Health Advisory Role

- 4.1 The Director of Public Health will be the main source of public health advice to the Council to enable it to fulfil its new statutory duties. The DPH role will be a statutory Chief Officer and a statutory member of the Health and Wellbeing Board. The DPH will be directly accountable to the Chief Executive for delivery of public health functions and line managed by the Deputy Chief Executive alongside the Director of Adult Services and the Director of Children's Services. Additional information about the DPH role and its statutory duties is set out in DH guidance. In order to fulfil the role effectively the DPH needs to be supported by a specialist team. DPH will also have accountable link to the Cabinet Member for Older People and Health
- 4.2 The Council will be required to provide public health advice to the Sefton CCGs. A draft memorandum of understanding (MOU) between Sefton Council public health team and the Sefton CCGs has been developed (Appendix B). The Deputy Director of Public Health and a Consultant in Public Health lead

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the public health input to Southport and Formby CCG and South Sefton CCG respectively.

- 4.3 The health protection duties of the DPH including emergency planning and preparedness will be specified in regulations that are due to go before Parliament shortly, and supplemented by guidance. It will be important for the Council and Public Health England to work effectively together to ensure that the population of Sefton is protected from threats to health, and that a timely and appropriate response is made to public health incidents. In major incidents, there may be a need to support PHE or other authorities by staff providing surge capacity through mutual aid arrangements.
- 4.4 CCGs will also have a role in planning, preventing and responding to emergencies. A Local Health Resilience Partnership (LHRP) has been established in shadow form. This is led by the Merseyside Local Area Team of the National Commissioning Board (NCB) and co-chaired by a local DPH, as per national guidance. The DPH for Liverpool, Dr Paula Grey, is the co chair of the LHRP for Merseyside. A Merseyside scenario based event was held recently and attended by Public Health and Local Authority emergency planning colleagues feedback from the scenario testing is being fed back to Department of Health.
- 4.5 Sefton will have a specific role around public health intelligence providing specialist analysis for commissioning of public health services based on needs, for the JSNA and to support CCGs in their commissioning role.
- 4.6 Much of the health data that public health analysts need to fulfil their role is held within NHS systems. A number of options for securing continued access to these data sources are being explored and the work needed to ensure good information governance is underway. A memorandum of understanding has been developed across Merseyside public health departments with the NHS commissioning support unit in relation to access to data sources and mutual support.

5. Human Resources

- 5.1 The structure for the public health team has been reviewed to ensure it meets the requirements of the new system (Appendix C).
- 5.2 Public health staff employed by NHS Sefton will transfer to Sefton MBC on 1st April 2013 by way of a Transfer Scheme, to be published by the Department of Health. NHS Sefton anticipates the transfer of 26 staff members.
- 5.3 This Transfer Scheme is in accordance with national guidance which confirms that employees should be treated no less favourably as if TUPE applied (subject to any amendments that may be made in the staff transfer documentation).
- 5.4 Formal consultation has commenced with joint trade union bodies and the staff members together with managers and officers from the PCT and Council

and the organisations will continue to work in partnership in respect of this transfer. As part of the ongoing consultation a 'Frequently Asked Questions' document continues to be developed and the two employers are involved in a due diligence process.

- 5.5 There have been some recent resignations and the Director of Public Health will assess the most cost effective way of continuing to deliver the service going forward.
- 5.6 Staff have already started to receive a tailored Induction programme to assist their transition from NHS employment to working within a local authority.
- 5.7 Sefton has been a successful training location for the public health specialist training scheme for many years. We have benefited from having up to three registrars placed with us at any one time, at no cost to the organisation. We wish to continue to be a recognised training location following the move to the Council.
- 5.8 Some of the infrastructure costs for the team including support functions have been absorbed by the organisation and were identified as an efficiency against the budget in the December Cabinet report. However the remaining infrastructure costs are required for commissioning support, additional accommodation costs and nonpay costs of the staff.

6. Conclusions

The process for transition of public health into the council has been lengthy and complex, and is being managed simultaneously with major NHS reform and significant budgetary reductions in Sefton Council. However, the process is progressing to plan, and it is anticipated that significant outstanding issues outlined in the report can be resolved ahead of the transfer date.

The full impact of the opportunities and benefits arising from embedding public health within local authorities are yet to be realised but the potential for improving health and reducing health inequalities within local communities is great and the Health and Well-being Board has a key leadership role in this.

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Appendix A

Future Destination for Public Health Responsibilities

NHS Commissioning Board published a commissioning fact sheet in July 2012, which sets out the services to be commissioned by the CCGs along with complementary services to be commissioned by the NHS Commissioning Board (NHS CB), Local Authorities and Public Health England (PHE).

Local authorities will take the lead for improving health and coordinating local efforts to protect the public's health & well-being. They will also provide advice and expertise on how to ensure that health services commissioned by the CCG best improve population health and reduce health inequalities which include health services to meet all the reasonable requirements of patients. With the exception of:

- Certain services commissioned directly by the NHS CB
- Health improvement services commissioned by local authorities
- Health protection and promotion services provided by PHE.

PHE will take the lead for public health at a national level, delivering a number of national health services and support the development of the public health workforce.

The NHS CB will also commission some public health services nationally as agreed by the secretary of state. The destination for all public health services is outlined below;

Public Health Services to be commissioned by the NHS CB

- Public health services for children from pregnancy to age 5 (Healthy Child Programme 0-5), including health visiting, family nurse partnership, responsibility for Child Health Information Systems.
- (Responsibility for children's public health 0-5 due to transfer to local authorities in 2015).
- Immunisation programmes
- National screening programmes
- Public health care for people in prison and other places of detention
- Sexual assault referral services

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Public Health services to be provided or commissioned by Local Authority

Local authorities will also need to ensure plans are in place to protect the health of their population and will have a supporting role in infectious disease surveillance and control and in emergency preparedness and response.

Local authority commissioning	Topic area	Related CCG commissioning	Related NHS CB commissioning
Children's public health 5-19	Healthy Child Programme for school-age children, including school nursing	Treatment services for children, including child and adolescent mental health services (CAMHS)	Healthy Child programme (pregnancy to five years old), including health visiting and family nurse partnership immunisation programmes.
Sexual health	Contraception over and above GP contract. Testing and treatment of sexually transmitted infections (excluding HIV treatment) Sexual health advice, prevention and promotion	Promotion of opportunistic testing and treatment Termination of pregnancy services (with consultation on longer-term arrangements) Sterilisation and vasectomy services	Contraceptive services commissioned through GP contract Sexual assault referral centres HIV treatment
Public mental health	Mental health promotion, mental illness prevention and suicide prevention	Treatment for mental ill health	Mental health interventions under GP contract Some specialised mental health services
Physical activity	Local programmes to address inactivity and other interventions to promote physical activity	Advice as part of other healthcare contacts	Brief interventions in primary care
Obesity programmes	Local programmes to prevent and address obesity, e.g. National Child Measurement Programme and weight management services	Advice as part of other healthcare contacts NHS treatment of overweight and obese patients	Brief interventions in primary care Some specialist morbid obesity services
Drug misuse	Drug misuse services, prevention and treatment	Advice as part of other healthcare contracts	Brief interventions in primary care

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Local authority commissioning	Topic area	Related CCG commissioning	Related NHS CB commissioning
Alcohol misuse	Alcohol misuse services, prevention and treatment	Alcohol health workers in a variety of healthcare settings	Brief interventions in primary care
Tobacco control	Local activity, including stop smoking services, prevention activity, enforcement and communications	Brief interventions in secondary care and maternity care	Brief interventions in primary care
Nutrition	Any locally-led initiatives	Nutrition as part of treatment services, dietary advice in healthcare settings	Brief interventions in primary care
NHS Health Check Programme	Assessment and lifestyle interventions	NHS treatment following NHS Health Check assessments and ongoing risk management	Support in primary care for people with long term conditions identified through NHS Health Checks
Reducing and prevention birth defects	Population level interventions to reduce and prevent birth defects (with PHE)	Maternity services	Interventions in primary care such as pre-pregnancy counselling or smoking cessation programmes Some specialist genetic services Antenatal and newborn screening aspects of maternity services
Health at work	Any local initiatives on workplace health	NHS occupational health services	
Dental public health	Epidemiology, dental screening and oral health improvement, including water fluoridation (subject to consultation)	Oral health as part of dental contracts	
Accidental injury prevention	Local initiatives as falls prevention services		
Seasonal mortality	Local initiatives to reduce excess deaths	Flu and pneumococcal vaccination programmes	

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Some of the above services will be mandated for local authorities and the commissioning of other services will be discretionary. More information is available at:

www.dh.gov.uk/prodconsumdh/groupsdigitalassets/documents/digitalasset/dh11901.pdf

Public health services to be provided or commissioned by PHE – and related NHS CB/CCG commissioning

PHE	Topic Area	Related CCG commissioning	Related NHSCB commissioning
Prevention and early presentation	Health improvement support for local authorities and NHS CB Social marketing and behaviour change campaigns including campaigns to prompt early diagnosis via awareness of symptoms	Promoting early diagnosis as part of community health services and outpatient services	Promoting early diagnosis as part of primary care.
Infectious disease	Current functions of the Health Protection Agency (HPA) in this area Public oversight of prevention and control, including co-ordination of outbreak management (with supporting role for local authorities)	Treatment of infectious disease Co-operation with PHE and local authorities on outbreak control and related activity	Co-operation with PHE and local authorities on outbreak control and related activity Some specialist infectious disease services
Emergency preparedness and response	Current functions of HPA Emergency preparedness including pandemic influenza preparedness (supported by local authorities)	Emergency planning and resilience remains part of the core business for the NHS	Mobilising the NHS in the event of an emergency.

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Health intelligence and information	Intelligence and information on health improvement and health protection (with local authorities), including many existing functions of Public Health Observatories, Cancer Registries, National Cancer Intelligence Network, HPA and National Treatment Agency for Substance Misuse's National Drug Treatment Monitoring System	NHS data collection and information reporting systems (for example, Secondary Uses Service)	NHS data collection and information reporting systems
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Appendix B

Sefton Metropolitan Borough Council Public Health Directorate and Sefton Clinical Commissioning Groups

Memorandum of Understanding¹

1. The purpose of this Memorandum of Understanding is to establish a framework for relationships between Sefton MBC and Sefton Clinical Commissioning Groups in regard of the Public Health Directorate for 2012/13 and beyond.

2. Since 1974, specialist public health staff within the NHS have assumed the lead for the three core public health responsibilities on behalf of the NHS and local communities:

Health improvement e.g. lifestyle factors and the wider determinants of health.

Health protection e.g. prevention and control of communicable diseases, public health input into incidents, emergencies and threats, and, screening

Population healthcare e.g. input to the commissioning of health services, evidence of effectiveness, care pathways.

3. With the implementation of the Health and Social Care Bill 2010, primary responsibility for health improvement and health protection will transfer at the national level from the NHS to Public Health England (PHE), and at local level from PCTs to Local Authorities, and to some extent to PHE, although CCGs will still have an important role in this.

Responsibility for strategic planning and commissioning of NHS services will transfer to Clinical Commissioning Groups and to the NHS Commissioning Board.

4. Public health professional staff will formally transfer to the Local Authority in April 2013 and already are functioning in shadow form. There remains a requirement for them to provide public health expertise and support to the CCGs.

5. There will be a nominated PH consultant lead for each of Sefton's two CCGs staff to liaise with. The wider public health team will support each CCG depending on the area of expertise required, e.g. behaviour change in practice population, long term condition management, health needs assessment etc.

1

Based on the Nottingham City and Lincolnshire PCTs drafts.

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Some support may be offered from a shared public health service working under the established governance of CHAMPs (Cheshire & Merseyside Partnerships for Health). Some public health tasks are delivered most effectively and efficiently on a larger foot print e.g. screening, emergency planning and some specialised services, and as such will be delivered by teams that may work across existing boundaries.

6. Public Health support is aligned to specific commissioning priority areas. This includes PH support to joint commissioning arrangements with the LA and to commissioning of Social care as needed.

Improving Health and Reducing Inequalities

7. The Health and Social Care Bill gives the Local Authority statutory duties to improve the health of the population from April 2013. CCGs also have a duty to secure improvement in health and to reduce inequalities. This will require action along the entire care pathway from prevention to tertiary care. Therefore, Sefton MBC and Sefton CCGs have a collective interest, and are likely to have individual and collective responsibility for health improvement, both during the transition period and thereafter.

8. This will give new opportunities to address the wider determinants of health. The Health and Wellbeing Board will hold the parties to account for their actions and impact on improving health.

For 2012/13:

Sefton Public Health Department will:

- *Refresh its delivery and lead role in current strategies and action plans to improve health and reduce health inequalities, with input from the CCG.*
- *Maintain, and refresh as necessary, metrics to allow the progress and outcomes of preventive measures to be monitored, particularly as they relate to delivery of key NHS and LA strategies.*
- *Support primary care with health improvement tasks appropriate to its provider healthcare responsibilities -for example by offering training opportunities for staff in relation to targeted behaviour health change programmes and services.*
- *Lead health improvement partnership working between the CCG, local partners and residents to integrate and optimise local efforts for health improvement and disease prevention.*
- *Provide advice to CCG to align CCG investment and actions with Health and wellbeing Board programme of health improvements and investment*

- *Work with CCGs and providers to embed public health programmes around improving lifestyles into frontline services towards improving outcomes and reducing demand on treatment services*

Sefton CCGs will:

- *Contribute to strategies and action plans to improve health and reduce health inequalities.*
- *Ensure that constituent practices maximise their contribution to disease prevention – for example by taking every opportunity to address smoking, alcohol, and obesity in their patients and by optimising management of long term conditions.*
- *Ensure primary and secondary prevention is incorporated within commissioning practice*
- *Commission to reduce health inequalities and inequity of access to services*
- *Support and contribute to locally driven public health campaigns*

Health Protection

9. The Health and Social Act will be followed by regulations which are likely to give Sefton MBC and the Director of Public Health a series of responsibilities in respect of health protection, on behalf of Public Health England. These are likely to include preventing and responding to outbreaks of communicable disease, planning for and mitigating the effects of environmental hazards, and NHS resilience.

10. The Act gives CCGs a duty to ensure that they are properly prepared to deal with relevant emergencies. The Secretary of State retains emergency powers to direct any NHS body to extend or cease functions, and is likely to discharge these through the Director of Public Health, with advice from Public Health England.

11. Therefore, to ensure robust health protection arrangements for 2012/13: **Sefton Public Health Directorate will:**

- **Ensure that robust comprehensive agreed interagency plans are in place to protect the health of the population from public health incidents, emergencies, outbreaks of infection and other threats**
- **Provide, or ensure access through Cheshire and Merseyside Health Protection Unit and others, to specialist health protection advice, information and expertise for the CCG and clinical community.**
- **Provide local leadership and support, alongside Cheshire and Merseyside Health Protection Unit, (for details on the role of the HPU see annex1) for key NHS health protection functions, including childhood vaccination, adult vaccination including influenza, blood borne virus prevention and control**

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(Hepatitis and HIV), tuberculosis prevention and control and sexually transmitted infection prevention and control programmes.

Sefton CCG will:

- Familiarise themselves with strategic plans for responding to public health emergencies and outbreaks and arrangements for Health Emergency Preparedness, Resilience and Response from April 2013 as set out by the Department of Health at:
http://www.dh.gov.uk/prod_consum_dh/groups/dh_digitalassets/:dh/?en/documents/digitalasset/dh_133597.pdf
- Participate in exercises when requested to do so.
- Ensure that provider contracts include appropriate business continuity arrangements.
- Ensure that constituent practices have business continuity plans in place to cover action in the event of the most likely public health emergencies.
- Assist with co-ordination of the response to public health emergencies, through local command and control arrangements.
- Ensure that resources are available to assist with the response to public health emergencies, by invoking provider business continuity arrangements and through action by constituent practices.
- Contribute to strategies and action plans and specifications to protect health and reduce inequalities.
- Ensure that constituent practices maximise their contribution to health protection – for example by maximising vaccination uptake and reducing variation in uptake of childhood and adult vaccinations across practices; increasing access to HIV testing, increasing access to STI testing and treatment for those at risk.
- Support and contribute to locally driven health protection campaigns

Commissioning NHS Services

12. The Health and Social Care Bill establishes CCGs as the main local commissioners of NHS services and gives them a duty to continuously improve the effectiveness, safety and quality of services. The Sefton Health and Well-being Board has been established as the primary mechanism of ensuring the responsibilities around health improvement and health and social care provision to identify the needs of the population and ensure that these are to be addressed through GP Commissioning Consortia, public health and social care commissioning plans and activities.

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13. Public health specialist staff currently provides a range of support for specific NHS commissioning functions. The requirement for this support will not diminish but much of the information is also relevant to the commission of social services and integrated commissioning and DH guidance indicates that this support should be obtained from an appropriately skilled local public health specialist team.

The expectations for 2012/13 and following years are that:

Sefton Public Health Directorate will develop a work plan based on the following areas:

- Provide specialist public health advice to the CCG including working up a more defined specification for comprehensive public health support.
- For agreed topics, assess the health needs of the local population, and how they can best be met using evidence-based interventions
- Ensure the reduction of health inequalities are prioritised in the commissioning of services
- Support the Clinical Commissioning Groups in developing evidence based care pathways, service specifications and quality indicators to improve patient outcomes
- For agreed topics, set out the contribution that interventions make to defined outcomes (modelling) and the relative return on investment across the portfolio of commissioned services
- Design monitoring and evaluation frameworks, collect and interpret results
- Promote and facilitate joint working with local authority and wider partners to maximise health gain through integrated commissioning practice and service design
- Support the clinical effectiveness and quality functions of the CCGs including input into assessing the evidence
- Support the development of public health skills for CCG staff
- Lead the development of and professional support for, the Sefton Health and Wellbeing Board.
- Through the Joint Strategic Needs Assessment (JSNA), refresh the needs and assets assessment of the population and ensure that this is relevant to the borough. The production of the JSNA will be complemented by a programme of targeted needs assessments. CCGs will be co-participants in the production of the JSNA.

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- Lead production of the Joint Health and Wellbeing Strategy and ensure that the CCG is fully involved in the production of this strategy
- Lead the co-ordination of appropriate health commissioning work between the NHS, PHE, ChaMPs and LA at a local level.

Sefton CCG will:

- Consider how to incorporate specialist public health advice into decision making processes, in order that public health skills and expertise can inform key commissioning decisions.
- Support a process for defining public health support to CCGs beyond 2013.
- Utilise specialist public health skills to target services at greatest population need and towards a reduction of health inequalities
- Contribute intelligence and capacity to the production of the JSNA
- Provide public health with access to data required to fulfil public health function to CCGs, e.g. MCSS NHS level data
- Agree with the Commissioning Support Service (CSS) which parts they will be commissioned to deliver, and agree with the PH support to the CSS where there will be Public Health input.

The new structures give fresh opportunities to address the whole range of health and wellbeing by strengthening partnerships across health, social services and the third sector. The CCG has an essential part to play and the Public Health department can help to facilitate this.

Hannah Chellaswamy
Deputy Director of Public Health
Sefton MBC/NHS Sefton August 2012

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Annex 1

Cheshire and Merseyside Health Protection Unit (CMHPU) support to CCGs

The HEALTH PROTECTION AGENCY (HPA) is a statutory body which acts to protect the public from present and future threats to their health from infectious diseases and environmental hazards (natural, accidental or deliberate) by providing advice, information response to health professionals, the general public and national and local government. From April 2013, these functions will continue to be undertaken by Public Health England.

What is CMHPU and what do we do?

CMHPU is the HPA's local delivery arm. It delivers the first line response to public health incidents (in conjunction with other health agencies, local authorities and relevant partners) and acts as the gateway to rapid national expert advice in the following three main areas:

- Communicable disease control
- Environmental hazards including exposure to chemicals, radiation and other environmental hazards
- Emergency planning and preparedness for pandemics and environmental incidents, as well as deliberate releases

As well as providing a reactive response CMHPU undertakes proactive and preventative work in all three areas and undertakes surveillance of notifiable diseases.

The unit comprises six Public Health specialists at Consultant grade, five senior nurses, a surveillance analyst and administration staff.

We will support CCGs by:

- Advising commissioners on health protection priorities and the health protection aspects of provider contracts
- Leadership and partnership working with NHS commissioners and providers (primary and community care, hospitals), the blue light services, local authorities, water companies, the Environment Agency and others in response to health protection incidents and outbreaks
- Providing advice and information for the public health management of infectious diseases and environmental hazards, including: investigation of individual cases of communicable diseases (e.g. E coli 0157), immunisation, infection control, risk from chemical exposures and environmental hazards such as heat waves and flooding

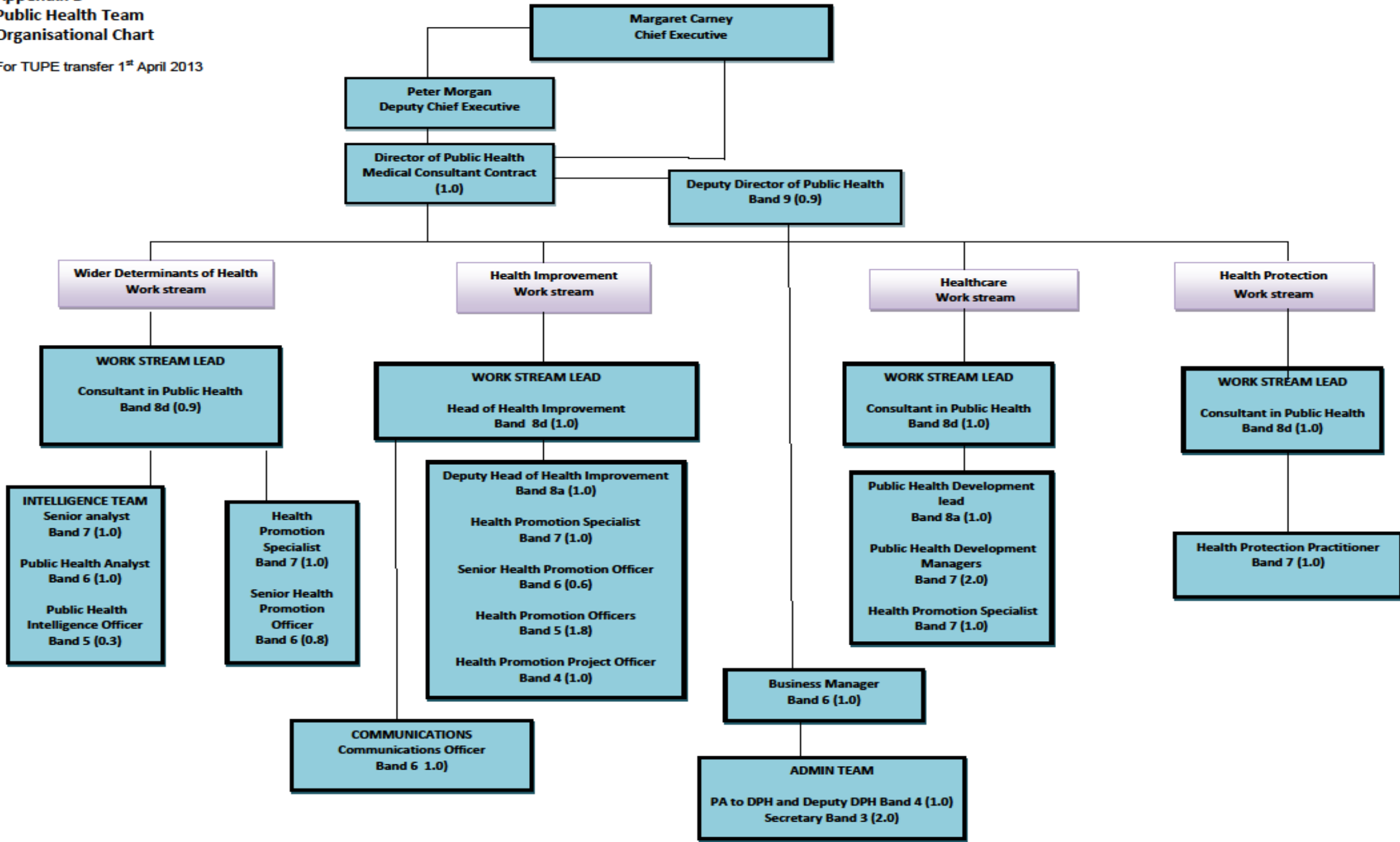
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- Providing effective a 24/7 response to public health incidents and outbreaks. Recent examples include the Merseyside measles outbreak and exposures to toxic substances in land and drains
- Ensuring governance and a safe in- and out-of-hours acute Public Health service
- Research and Development
- Teaching and Training

CMHPU can be contacted at
Cheshire & Merseyside Health Protection Unit
5th Floor, Rail House, Lord Nelson Street, Liverpool L1 1JF
Tel: 0844 225 1295 (choose option 1 twice); Fax: 0151 708 8417

Appendix D
Public Health Team
Organisational Chart

For TUPE transfer 1st April 2013



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Report to: Overview and Scrutiny Committee (Regeneration and Environmental Services) Cabinet
Date of Meeting: 22 January 2013
31 January 2013

Subject: Sefton Home Energy Conservation Act (HECA) Plan 2013-27

Report of: Director of Built Environment
Wards Affected: All

Is this a Key Decision? Yes

Is it included in the Forward Plan? Yes

Exempt/Confidential No

Purpose

Using powers under the Home Energy Conservation Act 1995 (HECA), the Secretary of State for Energy and Climate Change requires all English ECA's (Energy Conservation Authorities), otherwise known as local authorities with a housing obligation, to prepare a new baseline HECA plan by 31 March 2013.

The HECA plan must set out the energy conservation measures and ambitious priorities that the ECA considers practicable, cost-effective and likely to result in significant reduction in the energy consumption of all tenures of residential accommodation in our communities.

Due to the significant potential to attract external investment through Green Deal and the Energy Company Obligation (ECO) the HECA Plan represents a public declaration of intent in this respect and therefore, by acting now Sefton Council will be one of the earliest UK Local Authorities (LA) to publish its plan and thereby gain first mover early advantage in attracting external investment into Sefton.

Recommendation(s)

That the Cabinet give approval for the Sefton HECA Plan to be submitted to the Secretary of State for Energy and Climate Change

How does the decision contribute to the Council's Corporate Objectives?

	<u>Corporate Objective</u>	<u>Positive Impact</u>	<u>Neutral Impact</u>	<u>Negative Impact</u>
1	Creating a Learning Community		✓	
2	Jobs and Prosperity	✓		
3	Environmental Sustainability	✓		
4	Health and Well-Being	✓		
5	Children and Young People	✓		
6	Creating Safe Communities		✓	
7	Creating Inclusive Communities	✓		

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8	Improving the Quality of Council Services and Strengthening Local Democracy	✓		
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Reasons for the Recommendation:

The Home Energy Conservation Act 1995 (HECA) represents a Statutory duty upon the Council to reduce energy consumptions, carbon emissions and reduce fuel poverty. The first period of HECA reporting ended in 2010. The Secretary of State issued revised guidance to ECA's in July 2012 using powers under section 5(1)(b) of the act, requiring further plans to be drawn up by March 2013. The further Sefton HECA Plan (2010-2027) meets the requisite policy framework response by setting out long term priorities for Sefton and requires Member Approval.

What will it cost and how will it be financed?

(A) Revenue Costs No additional costs for the Council arising from this report. Any staff resource implications to enable the delivery of investment programmes would be met from within external funding sources and would allow for use of existing Council staffing to achieve savings elsewhere.

(B) Capital Costs: No additional costs for the Council arising from this report. Delivery of HECA plan will in fact bring significant amounts of external capital investment funding into Sefton area as well as reduce fuel poverty, carbon emissions and offer wider economic benefits.

Implications:

The following implications of this proposal have been considered and where there are specific implications, these are set out below:

Legal: Production of a baseline HECA Report by 31 March 2013 is a statutory requirement under the Home Energy Conservation Act (HECA)		
Human Resources	None	
Equality		
1.	No Equality Implication	<input checked="" type="checkbox"/>
2.	Equality Implications identified and mitigated	<input type="checkbox"/>
3.	Equality Implication identified and risk remains	<input type="checkbox"/>

Impact on Service Delivery:

This extended statutory obligation will put pressure on the existing staff resource which was reduced previously under 2010/11 round of Council budget savings by removal of vacant post. However, within the proposals and current externally funded programmes, the opportunity exists to upscale staffing resource to deliver on demanding targets and continue to lever external funding.

What consultations have taken place on the proposals and when?

The Head of Corporate Finance & ICT (FD 2060) has been consulted and notes there are no direct financial consequences for the Council. The attraction of significant potential external funding to improve energy efficiency of housing in Sefton and positive economic effects is to be welcomed.

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The Head of Corporate Legal Services (LD 1376) has been consulted and any comments have been incorporated into the report.

Are there any other options available for consideration?

Not to produce a HECA Plan for Sefton would put the Council in breach of its Statutory obligations and impede external investment opportunities e.g. under Green Deal and ECO for which the plan is a pre-requisite.

Implementation Date for the Decision: immediately after call-in in period.

Contact Officer: Mr Ian Weller
Section Manager – Energy and Environmental Management
Tel: 0151 934 4221
Email: ian.weller@sefton.gov.uk

Background Papers:
None

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1.0 **BACKGROUND**

- 1.1 Since 1996 Local Authorities have held the statutory responsibility to set out plans and report on their approaches to reduce home energy consumption in their local authority area. Initially each authority was obliged to work towards a 30% improvement target in energy consumption target by 2010.
- 1.2 Through a combination of intelligent commissioning, external funding, private sector leverage, partnerships and running investment programmes by 2010 Sefton had achieved a 30.07% savings in energy need in all tenure housing, equivalent to £330million investment and saving 700,120 tonnes of CO₂ per annum.
- 1.3 With powers in the Home Energy Conservation Act 1995 (HECA), the Secretary of State for Energy and Climate Change now requires all English ECA's (Energy Conservation Authorities), otherwise known as local authorities with a housing obligation, to publish further plans by 31 March 2013.
- 1.4 Department of Energy and Climate Change (DECC) guidance requires that our HECA plan should set out the energy conservation measures and ambitious priorities that the ECA considers practicable, cost-effective and likely to result in significant reduction in the energy consumption of all tenures of residential accommodation in our communities. These are summarised in Section 2.0 of this report.
- 1.5 Progress against the Council's published HECA Plan will be reported to the Secretary of State for Energy and Climate Change bi-annually. The HECA plan will now cover the period 2013 to 2027.
- 1.6 In preparing Sefton's HECA Plan, pursuant to Section 4 of HECA, the Secretary of State considers that the Council should have explicit regard to the following:
 - i. The energy savings measures that take advantage of financial assistance and other benefits offered from central Government initiatives such as the new Green Deal, Energy Company Obligation (ECO) and Renewable Heat Incentive (RHI), or other initiatives to help result in significant energy efficiency improvements of residential accommodation.
 - ii. The energy savings measures which an ECA has developed to implement energy efficiency improvements cost-effectively in residential accommodation by using street by street roll out.
- 1.7 Due to the significant potential to attract external investment through Green Deal and ECO, the new Sefton HECA Plan represents a firm declaration of intent in this respect and therefore in February 2013, Sefton Council will be one of the earliest UK LA's to publish its plan. This gives Sefton significant first mover advantage as Green Deal Provider and ECO obligated parties will

be seeking proactive partners as early as possible to focus their actions and investment.

2.0 NEW HECA PLAN FOR SEFTON (2010 – 2027) SUMMARY OF ACTIONS

2.1 The previous HECA plan (1996 - 2010) required the ECA to adopt energy efficiency plans based on Gigajoules consumed by the housing stock, regardless of tenure or income. However, the revised HECA guidance now gives the ECA the freedom to choose its own priority and at the same time set ambitious programmes.

2.2 The ECA also has the flexibility to plan suitable timings for such priorities. Given that the previous HECA plan finished in 2010/11 we have used 2010 as our revised baseline year due to availability of sufficient and detailed data, which can sometimes be delayed by up to 2 heating seasons to be provided. It also brings continuation from the last plan.

2.3 The HECA Plan covers the following principle areas defined via DECC guidance:

- Sefton Council Housing Stock Profile
- Background to HECA Delivery
- Baseline Year
- Fuel Poverty in Sefton
- Headline Priorities and Targets
- Key Investment Opportunities in Sefton
 - Green Deal
 - Fuel Poverty Programme
 - ECO Programme
- Area Based Delivery
- Local initiatives
 - Local Advice
 - Collective Switching
- Links to Local and National Strategies
- Existing Partnerships

2.4 The Energy and Environment Section have considered a variety of potential HECA priorities (targets), including:

- CO₂ savings
- Energy efficiency improvements
- Energy Performance Certificate ratings
- Zero Carbon Homes (new build)
- Investment in low carbon goods and services
- Installed renewable energy capacity
- Fuel poverty.

2.5 In discussions with key local stakeholders preference was given to addressing fuel poverty as our key priority (Para 2.13). However, it is implicit the others will still be addressed as part of overall plan.

Delivery of HECA

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- 2.6 Whilst achievement of the published priorities is not required by the guidance, Sefton is expected to report publically on progress every 2 years. The plan can be reviewed and revised in line with ongoing developments and achievements. The HECA Plan (Annex 1) sets out how this could be achieved by the physical improvements available and policy levers currently available.

Using measures that take advantage of schemes offered from central Government initiatives

- 2.7 The HECA plan applies the Green Deal methodology to identify opportunities for the whole stock and our fuel poverty programmes and ECO schemes in the HECA plan.

- 2.8 The Green Deal (GD) is an innovative financing mechanism that lets people pay for energy-efficiency improvements through savings on their energy bills. Repayments will be no more than what a typical household should save in energy costs. Suppliers of GD works are able to recoup their investment through additional charges on energy bills. This removes any upfront costs for investment but still allows the resident to attain energy savings.

- 2.9 Applying the principles and methods of GD to our Sefton stock energy database has allowed us to identify a GD potential for the whole borough. This programme suggests that there are;

- 542,870 potential energy improvements available (an average over 5 improvements per home)
- This equates to £1.56 billion in investment terms
- This would equate to a 35% reduction in CO₂ arising from household energy use

- 2.10 The HECA plan recognises it is unrealistic to expect the full GD potential to be achieved, of even this cautious assessment. The HECA plan therefore, suggests that if 2% of that potential activity was captured per annum to 2027 this would more reflective of the commercial potential. This therefore gives us a more realistic, yet still ambitious outlook.

- 152,004 energy improvements
- An estimated investment of £435 million
- A 9.6% reduction in CO₂ emissions (this is an additional 81,448 tonnes to the 700,120 tonnes already achieved under the original HECA plan)
- A 12.49% increase in average SAP levels across the borough

- 2.11 Even though the HECA plan is set from 2010 to 2027, Green Deal is only being fully implemented in 2013 and therefore only allows for a 14 year model. The HECA plan provides a detailed illustrative mix of actions, however it is not intended to restrict actions to a specific set of improvements and instead allow policy and funding opportunities to allow the Council to facilitate whichever systems are most favourable at the time.

- 2.12 Within the HECA plan how this 2% potential is achieved is explored within the key the priority of Fuel Poverty and funding opportunities principally via ECO.

The following sections show how Sefton can act and aim to attract the necessary investment to realise this potential activity.

Fuel Poverty as Sefton HECA Plan Priority

- 2.13 The HECA plan identifies the depth of issues around fuel poverty and existing actions which the Council and its partners have participated in. Due to a number of policy factors the optimum metric for measuring fuel poverty is the number of properties with a Standard Assessment Procedure (SAP) score of 35 and below (SAP is a measure of the energy efficiency of a property on a scale from 1-100 and anything below 35 is considered to be almost certainly tied to fuel poverty).
- 2.14 From the 2010 baseline we calculate there to be 6,315 properties with SAP of 35 or less. Under a previous programme (Local Area Agreements Stretch Target) Sefton successfully used a targeted approach to reduce the number of properties in this category by 3% per annum from 2006/07 - 2009/10. This target was over-achieved.
- 2.15 Therefore, it is now proposed that a more ambitious plan is enacted within HECA to reduce the number of properties with a SAP of 35 or less, by removing 5% of properties from this category per annum. The table below shows the anticipated programme timescales (as per required HECA reporting dates) and progress indicators of how this should be achieved.

Year	Number of under SAP 35 properties
2010	6,315
2013	5,414
2015	4,886
2017	4,410
2019	3,980
2021	3,592
2023	3,242
2025	2,926
2027	2,640

- 2.16 The estimated investment costs for achieving all viable improvements, based on Green Deal criteria, would be £41.6 million (see table below). This would still leave 953 properties below SAP 35. As the anticipated target is to remove 3,675 properties there is significant scope to achieve the desired objectives. There is flexibility not to oblige the use some of the more expensive options, such as solar water heating and solar photovoltaic. This could mitigate the investment needed to £20.2 million for improvements and still comfortably achieve the target.

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Measure	Total Number	Total Installation Cost	Mean Cost per SAP point per install	Total CO2 Reduction	Total Savings
Hot Water Cylinder Insulation	1,831	£131,102	£22.61	780	£263,136
Low Energy Lights	3,180	£74,234	£38.03	210	£93,105
Cavity Wall Insulation	1,595	£674,442	£39.06	2,008	£415,320
New Or Replacement Storage Heaters	1,523	£2,093,632	£48.20	259	£1,779,573
Loft Insulation	2,277	£763,333	£54.37	1,804	£332,260
Cylinder Thermostat	1,545	£386,161	£62.04	1,017	£179,542
Upgrade Heating Controls (For Radiator System)	838	£333,992	£72.59	533	£94,089
Change Heating To Condensing Gas Boiler (Fuel Switch)	962	£3,040,830	£78.93	3,369	£1,124,404
Change Heating To Condensing Gas Boiler (No Fuel Switch)	819	£2,395,645	£105.95	2,630	£522,198
Draughtproofing	51	£5,111	£157.60	8	£1,854
Upgrade Boiler, Same Fuel	1,822	£4,247,930	£169.52	3,172	£559,058
Biomass Room Heater With Boiler	44	£198,031	£388.74	664	£31,205
Double Glazing	819	£1,971,546	£447.14	749	£111,144
Solid Wall Insulation	451	£3,591,447	£564.29	984	£127,898
Floor Insulation	145	£341,536	£755.68	63	£9,254
Photovoltaics	2,559	£18,830,604	£847.94	2,197	£1,439,197
Solar Water Heating	1,014	£2,521,195	£1,305.48	340	£49,747
TOTALS	21,473	£41,600,771	Average £193.11	20,786	£7,132,981

2.17 The strategy for delivering the HECA priority will augment the existing affordable warmth strategy, which involves identifying those properties that are eligible for ECO and other externally funded schemes and then promoting the opportunities, enforcing housing standards in rented accommodation and seeking external funding sources to assist the vulnerable. It can be seen that achieving this alone will contribute nearly a quarter of the CO₂ target for the HECA plan not to mention delivering £6 million of energy savings to over 3,000 households.

ECO (Energy Company Obligation)

- 2.18 The Green Deal scheme has been developed alongside the revamping of the Energy Suppliers' license obligations to reduce CO₂ emissions. The latest requirement is known as the Energy Company Obligation (ECO). This means that in many cases where ECO funding is available it will dovetail with Green Deal arrangements. The ECO is designed to reduce Britain's energy consumption by funding home improvements worth around £1.3 billion every year. The funding comes from the big six energy suppliers.
- 2.19 There are 4 types of funds. The two that offer most potential are Carbon Saving element which is there to augment GD plans for Solid Wall insulation to make them cost effective. This pool of funding nationally is estimated at £760 million and will go a long way to subsidising most GD where solid wall insulation is concerned. This is estimated at over 500 homes per year for Sefton.
- 2.20 The second more locally relevant funding element of ECO is the Carbon Saving Community Obligation (CSCO). This funding is restricted to the 15% most deprived Lower Super Output Areas (LSOA) in the borough. Of the 190 LSOA in Sefton, 41 of them qualify for the CSCO scheme. Whilst the national funding allocation is more modest at £190 million it targeted nature means it is easier to access. Sefton has a good track record through past schemes that have operated in a similar manner (e.g. over 800 homes in the Knowsley /Peel Road area have had external wall insulation under Community Energy Saving Programme funding).
- 2.21 The Council would ideally seek a Green Deal and ECO partner as a single entity but due to the market situation it may be more beneficial to appoint two separate partners (one GD provider and ECO funder). The Council will test the market for both scenarios in the first half of 2013. Due to Sefton's housing stock, combined with its socio-demographic attributes, it will mean that ECO will act as the central tool to this further HECA Plan.

None physical measures that form part of the plan

- 2.22 The original HECA plan relied on a variety of methods and many where not actual improvements to housing but advice, information, training, attendance at events, web activity and tailored reports. The new plan will seek to maintain elements to give the support that residents' need.
- 2.23 A recent opportunity that is being revived and updated is Collective Energy switching. This involves joining interest parties together to bargain for a better energy offer from energy providers. This works best when at least 10,000 join a scheme. Sefton has already entered into dialogue with other Liverpool City Region authorities to seek a scheme that would benefit Sefton residents.

3.0 Final Version of HECA Plan

The proposed HECA plan can be accessed via this link to the Council's website:

<http://sb1msmgov1:9070/ecSDDisplay.aspx?NAME=SD1364&ID=1364&RPID=6861329&sch=doc&cat=13197&path=13158%2c13197>

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Report to: Cabinet **Date of Meeting:** 31st January 2013

Subject: Business Improvement Districts

Report of: Director of Built Environment **Wards Affected:** Southport wards

Is this a Key Decision? Yes **Is it included in the Forward Plan?** No (Rule 26 Consent received)

Exempt/Confidential: No

Purpose/Summary

To report on the economic, financial and legal feasibility of establishing Business Improvement Districts (BIDs) in Sefton.

To recommend Southport as the first tourism/retail Business Improvement District in the borough.

Recommendations

- (i) To accept the appraisal of potential BIDs made in paras 11-13
- (ii) To recommend that further BID development work is focussed on the Southport Town Centre/Seafront area, as defined in Appendix 3 to this report
- (iii) To agree in-principle support for a BID in Southport
- (iv) To invite the private sector-led Southport BID Development Group to prepare a Business Plan and submit it to the Council in due course
- (v) To agree in-principle use of part or all of Sefton's allocation of £100,000 High Street Innovation Fund for (a) local authority BID start-up costs that cannot be absorbed in any other way by the Council or its contractors, (b) approved development costs of the BID Development Group, and (c) the fixed-term salary and on-costs of a BID Development Officer within Economy & Tourism.
- (vi) To authorise the Director of the Built Environment to co-ordinate further research and preparations into a BID for Southport, and to report back with a refined statement of costs to the Council and a request for High Street Innovation Fund
- (vii) To note the need for a wider vision and investment prospectus to guide the broader development of Southport
- (viii) it be noted that the proposal was a Key Decision but had not been included in

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the Council's Forward Plan of Key Decisions. Consequently, the Leader of the Council and the Chair of the Overview and Scrutiny Committee (Regeneration and Environmental Services) had been consulted under Rule 26 of the Access to Information Procedure Rules of the Constitution, to the decision being made by as a matter of urgency on the basis that it was impracticable to defer the decision until the commencement of the next Forward Plan, because in February 2013, the Cabinet will be receiving a Business Plan for a Business Improvement District in Southport, and members must have made a prior assessment of the value and importance of BIDs to Sefton in order to determine the application. This assessment has just been completed and is now available for Members to consider.

How does the decision contribute to the Council's Corporate Objectives?

	<u>Corporate Objective</u>	<u>Positive Impact</u>	<u>Neutral Impact</u>	<u>Negative Impact</u>
1	Creating a Learning Community		/	
2	Jobs and Prosperity	/		
3	Environmental Sustainability		/	
4	Health and Well-Being		/	
5	Children and Young People		/	
6	Creating Safe Communities		/	
7	Creating Inclusive Communities		/	
8	Improving the Quality of Council Services and Strengthening Local Democracy		/	

Reasons for the Recommendation(s):

To allow preparations for a BID campaign and ballot to commence.

What will it cost and how will it be financed?

Although the post of Event Manager can be funded from within the existing approved revenue budget, the intention is that a further report be submitted to Cabinet for Members to agree an allocation from the High Street Innovation Fund (HSIF) to cover the costs of this post. The post is currently vacant and it is proposed that consideration is given to filling the post (with a re-worked brief) on a fixed term basis, pending a review of the continued need for the post and the availability of funding in the longer term.

The HSIF a £100,000 grant from government allocated to Sefton in March 2012 and has been received by the Council in the current financial year.

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Southport BID Development Group has requested funding for a BID campaign over an 18 month period. There is no provision for these costs in the approved revenue budget. It is proposed that Members approve use of the HSIF for this purpose.

The costs of a ballot in Southport are expected to be in the region of £10,000. This will only be incurred if a decision is made to proceed with a BID scheme. There is currently no provision for this within the Council's approved revenue budget, and a subsequent report to Members will advise how this cost can be funded.

If a BID is approved by ballot the ongoing costs associated with billing and collection may be recharged to the BID Company through the levy, albeit reducing the total income to BidCo.

Implications:

The following implications of this proposal have been considered and where there are specific implications, these are set out below:

Legal None		
Human Resources None		
Equality		
1.	No Equality Implication	<input checked="" type="checkbox"/>
2.	Equality Implications identified and mitigated	<input type="checkbox"/>
3.	Equality Implication identified and risk remains	<input type="checkbox"/>

Impact on Service Delivery:

No direct impact on service delivery. A Baseline Operating Statement detailing planned levels of service by the Council to businesses in the BID area will be prepared, to help BID proposers clearly state the extra added by their BID Business Plan.

What consultations have taken place on the proposals and when?

The Head of Corporate Finance and ICT Strategy (FD1984/12) has been consulted and any comments on this report have been incorporated into it.

The Head of Corporate Legal Services (LD1301/12) has been consulted and any comments on this report have been incorporated into it.

Are there any other options available for consideration?

Not to proceed with a Business Improvement District – see para 25 below for why this is not recommended.

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Implementation Date for the Decision

Following the expiry of the “call-in” period for the Minutes of the Cabinet Meeting

Contact Officer: Mark Long
Tel: 0151 934 3471
Email: mark.long@sefton.gov.uk

Background Papers:

None

Background

- 1 In September 2012 Cabinet approved consultation on a range of more complex thematic budget options with multiple implications and potential cumulative effects. Economy & Tourism was named as a service area for thematic review.
- 2 In addition to short-term savings, officers have now evaluated a medium and long-term mechanism for securing stronger private sector engagement in the operation and improvement of our town centres – Business Improvement Districts (BIDs).
- 3 This report presents a preliminary economic, financial and legal appraisal of the feasibility of establishing BIDs in Sefton. It concludes that the BID with the greatest chance of success at the ballot box, and as a sustainable management company, is Southport Town Centre & Seafront.

What is a Business Improvement District?

- 4 A BID is a flexible funding mechanism to manage a clearly defined retail, commercial or industrial area.

The Local Government Act 2003 allows local businesses and other stakeholders to form a partnership to improve their area, improvements which must be additional to services the Council already provides.

The BID business plan is put to a ballot and must be agreed both by the Council and by a majority of business ratepayers (and a majority of the Rateable Value) in the area).

The Council, as billing authority, is then authorised to levy an additional rate on all balloted businesses (whether they supported the BID or not), and to pass the revenue onto the BID Company (BidCo).

The BidCo is responsible for delivery of the business plan and is accountable to its ratepayers and to the Council. It is normally a not-for-profit limited company, and is governed by the Business Improvement District (England) Regulations 2004.

Every BidCo is required to periodically re-ballot business ratepayers to renew consent to the levy and the business plan.

- 5 BIDs are a tried and tested method of regenerating town centres, commercial districts and some tourism zones. There are currently 126 formal BIDs in the UK, of which 39 have been successfully renewed. Around 80% of ballots for a new BID return a “yes” vote. BIDs on Merseyside include City Central BID and The Commercial District.

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- 6 Tourism BIDS (TBIDs) are new and being actively promoted by Visit England who have established an 'Early Adopters' group to help develop and share best practice. Sefton and its Southport BID are invited members of that group.
- 7 Sefton has previous experience of BIDs. About 120 businesses in Chapel Street, Southport were balloted in 2006 and 2007, but on both occasions declined by the narrowest of margins to become a BID. This is believed to be mainly due to the opposition of the Arcadia Group which had a national policy of not joining BIDs. However, Arcadia's presence in the town centre has since reduced, and the climate has changed considerably in the High Street with much greater interest in collaboration.
- 8 Appendix 1 contains "A selective list of BIDs in England and Wales" with detailed information about them, and Appendix 2 contains "A Local Authority Guide to Business Improvement Districts" (Association of London Government, 2005) for background information on how other local authorities have supported BIDs.

BID Task & Finish Group

- 9 A Task & Finish Group was set up with the Chief Executive's support to evaluate the feasibility of BIDs in Sefton. Its job was to undertake "due diligence" in terms of risks and rewards to the Council, and not to actually set up a BID.
- 10 It met four times over the summer, with officers from Economic Development, Tourism, Planning, Governance & Civic Services, Neighbourhood Co-ordination, Business Intelligence, Finance, Legal Services and Arvato.

BID appraisal

- 11 The Group evaluated the potential of Sefton's town centres to become a Business Improvement District, in terms of their overall *viability* i.e. whether there was a critical mass of sustainable income, the number and types of levy payer, the centre's strategic significance, and the added value of using a BID to grow the centre.
- 12 The key finding was that off all the areas considered, only Southport met both criteria of viability and local support.
- 13 Based on this conclusion, a more detailed BID Appraisal Analysis for Southport was then commissioned from the Council's Business Intelligence Team – see Appendix 3. Using local knowledge, hereditaments classified by the Valuation Office were allocated into two possible Southport BID configurations, and the results mapped. The yield from a 1% levy from each option was also calculated.

Two options for a BID were considered. Both are considerably larger than the 2005/07 proposals for Southport:

- Option 1 (accommodation, attraction, hospitality, retail) = 833 businesses, RV of £29m, 1% levy = £290,400 p.a.
- Option 2 (as above + commercial, light industry) = 1,138 businesses, RV of £32.8m, 1% levy = £328,400 p.a.

(Caution: the estimates given above make a number of assumptions (e.g. the boundary of the BID, eligible businesses, 100% collection rates) and are for discussion purposes only. For example, actual collection rates in Sefton are around 97.5% and could be lower for the BID levy. The figures are shown gross and make no allowance for the cost of billing and collection of the levy. See Appendix 2 for full details of analysis.)

- 14 Whilst the exact shape, scope and reach of the BID has yet to be finally decided by stakeholders, this is sufficient baseline information to start a detailed discussion with Southport businesses on the role, scale and scope of a BID for the town.
- 15 There are many technical issues which influence cost, complexity and levels of compliance, such as billing periods, enforcement options and whether the BID levy is integrated with or separate from the mainstream business rates payment. The advice of Head of Revenues is that the simplest, most affordable and collectable BID levy is:
- Separately administered from business rates
 - An upfront annual levy, billed by the Council
 - “Simple reminder + gentle enforcement” with the involvement of BidCo
 - No reliefs
 - Use baseline Rateable Values and only update at BID renewal stage.

A more detailed analysis of the options can be found in Appendix 4.

Early assistance for the Southport BID campaign

- 16 Southport has a strong core group of retailers, attraction operators and other town centre & seafront businesses, who have worked with each other and alongside the Council in Southport Partnership, Southport Tourism Business Network, and most recently in Southport Town Team.
- 17 This core business group has demonstrated a real willingness to take a leadership role, and met the Leader of the Council on two occasions in September and November. The business group has subsequently indicated they are ready to establish a Development Group and to deliver a campaign culminating in a ballot. A sub-group is preparing a BID Business Plan.
- 18 Under the BID Regulations, the BID Business Plan must be submitted to members for approval. Cabinet must then consider whether to approve the plan and to incur all the costs associated with the start-up phase, including the costs of holding a ballot of business ratepayers in the defined area. Members

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are recommended to invite the Development Group to submit a Business Plan for the Council to consider.

- 19 The Group anticipate the ballot of ratepayers could take place by the end of 2013. It reports that the appetite for change and co-operation is currently very strong.
- 20 The Council will best mitigate risks associated with start-up by offering its support during the early stages, and in particular
 - Co-ordination of Council input to the definition of the BID area and eligible businesses
 - Design of the payment and collection mechanism
 - Preparations for the ballot
 - Preparation of a Baseline Operating Agreement
 - Financial and policy appraisal of the BID Business Plan.
- 21 In-house support during the start-up phase of the BID (i.e. to March 2014) can be provided by re-working the vacant post of Events Manager (Grade I) within the Economy & Tourism Service (with consideration to the post being on a fixed term basis from external funding – see para 23).
- 22 If a BID is approved, then the operation of BidCo will create additional ongoing costs for the five year life of the BID, principally the rates collection fee charged by Arvato, and software licensing costs. These ongoing costs, and methods for mitigating them, need further clarification before members can be advised on the best means of handling them (see Appendices 4 and 5).
- 23 As has been pointed out, there is no revenue provision for the start-up and ongoing costs of a Business Improvement District. However, the Dept for Communities & Local Government announced on 30th March 2012 that Sefton had been awarded £100,000 of High Street Innovation Fund. This is intended to promote high street revival and new models of prosperity in town centres. Establishing a BID is compatible with this aim.
- 24 Therefore it is recommended that Cabinet agrees to the in-principle use of High Street Innovation Fund towards (a) local authority costs that cannot be absorbed in any other way by the Council or its contractors, (b) approved development costs of the BID Development Group, and (c) the fixed-term salary and on-costs of a BID Development Officer within Economy & Tourism. A separate report will be brought back to Cabinet for members to agree a specific allocation of HSIF in line with this recommendation.

Summary

- 25 Officer advice is that
 - Southport Town Centre/Seafront is the only presently viable candidate for development of a BID in Sefton

- A private-sector led BID for Southport is an attractive option because it answers the Council's call for businesses to take a greater share of the costs of place marketing and destination management
- With the withdrawal of large-scale regeneration funding for Southport, there are few if any alternatives to an income-generation vehicle
- It is nevertheless reasonable for the Council to contribute to the start-up of a Southport BID because it is an investment that will repay itself many times over in the continued vitality and prosperity of the town.

Putting the BID in context

- 26 For the Southport BID to be a success it needs some context – a broader narrative saying what the town is for and what it needs to do to get there. Other activity and investment is required across the town to bring out its full potential. The most recent statement of purpose was Southport Investment Strategy (2008), which offered a powerful vision of visitor-based prosperity coupled with social inclusion.
- 27 The world has changed considerably in the past five years, and the North West Development Agency which sponsored the Investment Strategy has been abolished, as have most of the public investment funds the Agency directed. While public resources are still available and should be targeted (e.g. Coastal Communities Fund, post 2013 EU funds), there is a pressing need to bring forward a prospectus for Southport which actively creates the conditions for recovery, and elicits private-sector investment.
- 28 Cabinet 's views on this approach and the preparation of a wider vision and prospectus are invited.

The following Appendices referred to in this report can be accessed electronically from the Council's website, via this link:

<http://sb1msgov1/ecCatDisplay.aspx?sch=doc&cat=13415&path=13158,13197>

Appendix 1

A selective list of BIDs in England & Wales

Appendix 2

A Local Authority Guide to Business Improvement Districts (Association of London Government, 2005)

Appendix 3

Business Improvement District (BID) - Appraisal Analysis (Sefton Business Intelligence & Performance Team, September 2012)

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Appendix 4

Administrative and Collection Issues for consideration (Head of Revenue, Sefton MBC, September 2012)

Appendix 5

Issues in establishing a BID requiring further research