

MEETING: CABINET
DATE: Thursday 28th March, 2013
TIME: 10.00 am
VENUE: Town Hall, Southport

Member

Councillor

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

COMMITTEE OFFICER: Steve Pearce
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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 28 February 2013		(Pages 5 - 18)
* 4.	Not in Education, Employment or Training (NEET) Working Group Final Report Report of the Director of Corporate Commissioning Councillor McKinley, Member of the Working Group will attend to outline the findings and recommendations of the Working Group	All Wards	(Pages 19 - 22)
* 5.	Sefton Health and Wellbeing Strategy 2013-2018 and Board Governance Report of the Head of Business Intelligence and Performance	All Wards	(Pages 23 - 106)
* 6.	The REECH Project, Green Deal Go Early Project and REECH Into Business Bid Report of the Director of Built Environment	All Wards	(Pages 107 - 122)
7.	Notice of Motion - Financial Malpractice Report of the Director of Corporate Commissioning	All Wards	(Pages 123 - 130)

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| 8. | Selection of the Mayor and Deputy Chair for 2013/14
Report of the Director of Corporate Commissioning | All Wards | (Pages 131 - 134) |
| 9. | Programme of Meetings - 2013/14 Municipal Year
Report of the Director of Corporate Commissioning | All Wards | (Pages 135 - 146) |

THE "CALL IN" PERIOD FOR THIS SET OF MINUTES ENDS AT 12 NOON ON TUESDAY 12 MARCH 2013. MINUTE NO's 119, 120, 121, 122, 123 AND 124 ARE NOT SUBJECT TO "CALL-IN".

CABINET

MEETING HELD AT THE TOWN HALL, BOOTLE ON THURSDAY 28TH FEBRUARY, 2013

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

ALSO PRESENT: Councillors Ashton, Hartill, Jones, Papworth and
Shaw

116. APOLOGIES FOR ABSENCE

No apologies of absence were received.

117. DECLARATIONS OF INTEREST

No declarations of interest were received.

118. MINUTES OF PREVIOUS MEETING

Decision Made:

That the minutes of the Cabinet meeting held on 14 February 2013 be confirmed as a correct record subject to the resolution in Minute No. 111 being amended by the addition of the following text in the supplementary planning document:

"The Council will look favourably upon applications for one bedroom flats where previously they have been discouraged".

119. TWO YEAR FINANCIAL PLAN AND REVENUE BUDGET 2013 /14

Further to Minute No's 107 and 108 of the meeting held on 14 February 2013, the Cabinet considered the report of the Head of Corporate Finance and ICT which:

- provided an update on the final Local Government Settlement and confirmed the budget gap of £50.8m over the next two years;
- provided further details on the outstanding budget savings options relating to the Review of the Library Services, Street Lighting and Public Conveniences and the proposed changes to the fees and charges for youth sports pitches; learning and development; car parking and public conveniences;

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- provided updates on other budget savings options detailed in the report and requested consideration of what should now be included in the final two year Budget Plan;
- set out the full list of budget savings options to meet the £50.8m budget gap over the two financial years in Annex A to the report.

Following the Cabinet meeting held on 14 February 2013, the proposals for the Transformation Programme and Revenue Budget 2013/15 had been considered in detail at the meeting of the Overview and Scrutiny Committee (Performance and Corporate Services) held on 19 February 2013.

The report indicated that the two year budget plan, as summarised in Annex A would enable a budget for 2013/14 to be approved and identified the policy changes required to deliver a sustainable and robust two year budget plan. Due to the mixture of efficiencies and significant policy changes, some of the options could and would not be realised within a 12 month period and would contribute to the 2014/15 budget as illustrated in the report. This would require the implementation of major change programmes and appropriate capacity would need to be dedicated to ensure deliverability. Given the scale of the budget reductions any slippage or underachievement would have implications for the financial management of the Council and as such robust management and monitoring arrangements would continue to be operated.

The Chief Executive referred to the amendment sheet setting out the typographical errors to Annex A of the report which had been circulated and indicated that there were 7 options within the report that had been specifically highlighted as having a different status to all other options. This was for options where work was in progress including consultation and equality assessments. This information was made clear in Annex A by reference to the Status Column and one example of this was Day Care and Respite Care for Adults. She also indicated that Members would be advised accordingly should any significant implications arise from this ongoing work before a final decision was taken.

The Chief Executive also indicated that further details were available on every budget option and would be made available upon request before and during the Budget Council meeting.

The Chair thanked the officers for the work undertaken on the budget and referred to the Joint Further Submission on the Review of the Library Services endorsed by the Friends of Ainsdale Library; Birkdale Library Action Group (BLAG) and the Friends of Churchtown Library, which had been circulated with the supplementary agenda prior to the meeting. He indicated that the Council was always willing to consider any sustainable and feasible options for the future operation of services impacted by the savings options including libraries.

The Chair also reported that since the publication of the agenda, the Department for Communities and Local Government had published

supplementary guidance entitled “Openness and Accountability in Local Pay: Guidance under Section 40 of the Localism Act 2011” and as a consequence of that, he indicated that amendments should be made to the text in paragraph 3.4.4 of the report.

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

Decisions Made: That :

- (1) the updated information on the Review of Library Services, set out in paragraph 3.2 of the report and the Further Joint Submission be noted; and the Council at its Budget meeting on 28 February 2013 be recommended to approve Option B, as set out in paragraph 1.5 of the report to the Cabinet meeting held on 14 February 2013 in respect of the future library service for the following reasons:-
 - (i) the Council has taken into account its statutory duty to provide a comprehensive and efficient library service in accordance with Section 7 of the Public Libraries and Museums Act 1964 and considers that the adoption of Option B for the future library service would meet the requirement for a comprehensive and efficient library service;
 - (ii) the Council had engaged in an extensive public consultation exercise and the analysis of the 3,026 questionnaires received, indicated that 43% of responders supported Option B; 41% supported Option C; 14% did not support any option and 2% supported Option A. Thus, the highest percentage of support amongst responders to the questionnaire was for Option B;
 - (iii) the Council had considered its Public Sector Equality Duty to eliminate discrimination and to advance equality of opportunity in accordance with Section 149 of the Equality Act 2010 and has produced a comprehensive Public Sector Equality Duty Analysis Report. A key finding of this analysis was that Option B met the Public Sector Equality Duty;
 - (iv) the review process had demonstrated that doing nothing would create an unsustainable network of provision located in buildings that required significant capital investment; and
 - (v) officers pursue the activities, discussions and lines of enquiry referred to in paragraphs 3.29 to 3.35 inclusive of the report to the Cabinet meeting held on 14 February 2013.
- (2) the final outcome of consultations held on budget saving option D1.32 – Public Conveniences be noted and approval be given to the increase in the charges for pay to use facilities and where

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feasible, the introduction of a charge for use at all public convenience facilities.

- (3) approval be given to the implementation of the recommendations of the Street Lighting review as outlined in the budget option form in Annex A of the report;
- (4) the Council be recommended to give approval to the two year budget plan for 2013/14 and 2014/15 contained within the report, which incorporates the decisions set out in resolutions (1) to (3) above; and
- (5) that the Council be recommended to give approval to the addition of the following text as the penultimate sentence in paragraph 3.4.4 of the report:

“Members will note that supplementary guidance has been issued by the Secretary of State namely the Openness and Accountability in Local Pay: Guidance under Section 40 of the Localism Act 2011. The Pay Policy will be amended so as to make clear that any decision taken with respect to severance payments will adhere to this guidance.”

Reasons for Decision:

The recommendations in the report would enable the Council to agree the 2013/14 budget and a two year budget plan.

Alternative Options Considered and Rejected:

All currently feasible / viable options had been put forward for consideration. A number of non viable budget options had been dismissed by Members.

120. LOCAL GOVERNMENT ACT 2003 - CHIEF FINANCIAL OFFICER'S REQUIREMENTS

The Cabinet considered the report of the Head of Corporate Finance and ICT which provided an assessment of the robustness of the estimates and the tax setting calculations, the adequacy of the proposed financial reserves and the longer term revenue capital plans, based on the proposals set out in the reports on the Two Year Financial Plan and Revenue Budget 2013/14 (Minute No. 119) and the Budget and Council Tax Recommendation 2013/14 (Minute No. 121).

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

Decision Made:

That the report be noted.

Reasons for Decision:

The Local Government Act 2003 (section 25) (as amended) requires the Chief Financial Officer to report formally on the following issues:

- (a) An opinion as to the robustness of the estimate made and the tax setting calculations
- (b) The adequacy of the proposed financial reserves
- (c) The production of longer term revenue and capital plans

The Cabinet and Council must note the issues raised in the report during the final stages of determining the financial plan for 2013/14 and 2014/15 and budget for 2013/14.

Alternative Options Considered and Rejected:

None – The statutory report provided advice to Members in determining the two year financial plan and the budget 2013/14.

121. BUDGET AND COUNCIL TAX RECOMMENDATION 2013/14

Further to Minute No's 119 and 120 above, the Cabinet considered the report of the Head of Corporate Finance and ICT on the level of levies and precepts set for 2013/14.

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

Decision Made: That

- (1) the impact of charges relating to external levies for 2013/14 be noted;
- (2) the precepts set by the Police and Crime Commissioner and the Fire and Rescue Authority for 2013/14 be noted;
- (3) the level of Parish Precepts set for 2013/14 be noted;
- (4) the Council be recommended to approve the budget for 2013/14, as set out in paragraph 5 of the report; and
- (5) the Council be recommended to approve a Council Tax increase of 0% for 2013/14 by 10 March 2013 at the latest.

Reasons for Decision:

The Council must set a Council Tax for 2013/14 by 10 March 2013 at the latest.

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Alternative Options Considered and Rejected:

None

122. CAPITAL PROGRAMME 2012/13 AND CAPITAL ALLOCATIONS 2013/14

The Cabinet considered the report of the Head of Corporate Finance and ICT which provided details of the 2013/14 Capital Allocations received to date and their use in the development of a new starts programme for 2013/14.

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

Decisions Made:

That the Council be recommended to:

- (1) note the revised Capital Programme for 2012/13;
- (2) approve for inclusion within the Capital Programme, the allocation of £203,150 Short Break for Disabled Children resources in 2012/13, as outlined in paragraph 2.6 of the report;
- (3) approve for inclusion within the Capital Programme, the allocation of the additional £377,730 Disabled Facilities Grant in 2012/13, as outlined in paragraph 2.7 of the report;
- (4) approve for inclusion within the Capital Programme, the allocation of £427,970 Funding Early Education for Two Year Olds from Lower Income Households in 2012/13, as outlined in paragraph 2.8 of the report;
- (5) approve the inclusion in the Capital Programme of a grant of £727k in respect of the Flood and Coastal Erosion Risk Management as outlined in paragraph 2.9 of the report;
- (6) approve the inclusion in the Capital Programme of refurbishing existing pitches, and providing new pitches, at the Gypsy and Traveller site at Red Rose Park, as outlined in paragraph 2.10 of the report;
- (7) approve the inclusion in the Capital Programme of works to alleviate fuel poverty in relation to the Sefton Affordable Warmth workers, as outlined in paragraph 2.11 of the report;
- (8) note the 2013/14 capital allocations received to date;
- (9) approve for inclusion within the Capital Programme, the Capital Priorities Fund from reserves as outlined in paragraph 4 of the

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report, of which part will be allocated as additional funding to the High Street Innovation Fund revenue funding already received; and

- (10) note the changes to the Capital Finance System, as outlined in paragraph 5 of the report.

Reasons for Decision:

To determine the utilisation of the 2013/14 Capital Allocations received to date and an additional allocation of Short Breaks for Disabled Children, Disabled Facilities Grant, and Early Education Funding for Two Year Olds from Lower Income Households in 2012/13.

Alternative Options Considered and Rejected:

The options available for the use of non ring-fenced capital grant allocations were included in the report.

123. CAPITAL ALLOCATION FRAMEWORK AND CAPITAL STRATEGY

The Cabinet considered the report of the Strategic Director – Place which provided details of a Capital Allocation Framework and Capital Strategy, including a prioritisation model for the single capital pot, to enable the determination of the Council's Capital Investment Plan for 2013-14 onwards.

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

Decision Made:

That the Council be recommended to:

- (1) approve the Capital Allocations Framework for the management of the Council's Capital Investment for 2013–14 onwards, as detailed in Appendix A of the report;
- (2) approve the Capital Strategy and the Single Capital Pot prioritisation scoring model for the determination of the Council's Capital Investment Plan for 2013–14 onwards, as detailed in Appendix C of the report;
- (3) approve the Capital Strategy Governance Structure for the management of the Council's Capital Investment for 2013-14 onwards, as detailed in Appendix B of the report; and
- (4) note that following a review to be undertaken, a further report would be presented in relation to the Strategic Asset Management Plan.

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Reasons for the Decision:

To agree a single Capital allocation framework and governance structure, to support the prioritisation of the Single Capital Pot for 2013/14 onwards, and the development of the Capital Investment Plan.

Alternative Options Considered and Rejected:

The Council could choose to allocate capital resources using an alternative prioritisation and allocation model.

124. LIVERPOOL CITY REGION LOCAL TRANSPORT BODY AND APPRAISAL OF LOCAL MAJOR TRANSPORT SCHEMES

The Cabinet considered the report of the Director of Built Environment on the proposals by the Department for Transport (DfT) to devolve funding for local major transport schemes to local areas in the next spending review period which would necessitate the establishment of a new body called a Local Transport Body (LTB) to oversee the process, guided by an Assurance Framework, which must be agreed with the DfT in respect of its governance and management arrangements.

The report provided details about the way this would be implemented in the Liverpool City Region (LCR), the proposed representation on the LTB, and the proposed Assurance Framework and Scheme Prioritisation Methodology.

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

Decision Made: That:

- (1) the Council be recommended to nominate the Leader of the Council onto the new Local Transport Body, together with an alternate member, the Cabinet Member - Transportation, to represent the Authority on the LTB as required;
- (2) the draft Assurance Framework and its associated principles, as set out within the Appendix of the report be approved for submission to the Department for Transport;
- (3) the Director of Built Environment submit follow-up information on the above issues, at appropriate intervals;
- (4) the Director of Built Environment be requested to commence preparation of a list of potential local major transport schemes in Sefton to be considered for submission to the LTB and to be agreed through the Council's Strategic Capital Investment Board; and

- (5) it be noted that preliminary discussions have been held with the Head of Legal and Democratic Services at the Merseyside Integrated Transport Authority to explore whether a more wide ranging partnership agreement as set out in paragraph 5 of the report is required. The Head of Corporate Legal Services would prepare the agreement, should that prove necessary, in consultation with the Cabinet Member - Performance and Corporate Services.

Reasons for Decision:

The proposed arrangements for the Liverpool City Region LTB had been discussed and agreed by the LCR partners, but the appointments to the LTB and the assurance framework and prioritisation methodology had to be formally approved by each of the LCR partners.

Alternative Options Considered and Rejected:

No other options were available. The proposed arrangements for the Liverpool City Region LTB had been discussed and agreed by the LCR partners. If the Council decided not to make the appointment to the LTB, it would mean that Sefton Council would not be represented in the City Region decision making process for local major transport schemes.

125. LIVERPOOL CITY REGION PORT ACCESS - PROPOSED TEN - T BID

The Cabinet considered the report of the Director of Built Environment which indicated that as part of the City Region Deal, a Port Access Steering Group (chaired by Sefton Council) had been established and a work programme was being developed based on the recommendations of the Access to the Port of Liverpool Study. Several of the potential interventions require detailed feasibility studies or options assessment work to be completed before any specific proposals can be confirmed or implemented. This work needs to be done to enable the port access interventions to make progress.

In November 2012, the Trans European Transport Network (TEN-T) Executive Agency released a call for bids for the next round of TEN-T funding. The studies required for the port access work fit well within the scope and qualifying criteria for a TEN-T bid, which has enabled a proposed TEN-T Bid to be developed.

The report provided information about the proposed City Region TEN-T Bid which had been collaborated by the LEP and Sefton Council (as the lead authority for the port access element of the City Region Deal and proposals for Sefton Council to act as the accountable body for the Bid on behalf of the Liverpool City Region.

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Decision Made: That:

- (1) the City Region proposal to submit a TEN-T Bid be endorsed and the proposed content and scope of the Bid be noted;
- (2) approval be given to the proposal that Sefton Council should be the accountable body for the Bid on behalf of the Liverpool City Region;
- (3) the Director of Built Environment submit a further report on the Bid once the outcome of that Bid is known; and
- (4) it be noted that the proposal is a Key Decision but had not been included in 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 the Cabinet 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 the deadline for submission of the Liverpool City Region Trans European Transport Network (TEN-T) Bid is the 26 March 2013. If the decision was deferred until the next Forward Plan, the decision would not be made until the 28 March, after the submission deadline. Cabinet approval is required for Sefton Council to be identified as the accountable body on behalf of the Liverpool City Region for the proposed TEN-T funding bid. The item was not included on the Forward Plan because the Call for Proposals was released by the TEN-T Executive Agency on the 29 November 2012. The deadline for items for the Forward Plan for the Cabinet meeting on the 28 February 2013, was the 18 December 2012. Although initial discussions had been held by then about the submission of a Liverpool City Region Bid, the proposal that Sefton should be the accountable body had not been agreed. The proposal for Sefton to act on behalf of the LCR as the accountable body was endorsed by the LCR Port Access Steering Group on the 21 January 2013. The recent nature of the Call for Proposals and the decision that Sefton Council should be the accountable body meant that it was not included on the Forward Plan and the timing of future Cabinet and Council meetings means that it cannot be deferred to the next Forward Plan.

Reasons for Decision:

Sefton Council has been leading the co-ordination of City Region activities associated with port access on behalf of the City Region partners.

Alternative Options Considered and Rejected:

Two other options were available. One option was not to submit a TEN-T Bid. Given the importance of the issue and the level of support from City Region partners, this was not a realistic option. The other option was for another partner to act as accountable body. However, the proposed arrangements for Sefton to act as accountable body had been discussed and agreed by the LCR partners and were consistent with Sefton's role on behalf of the City Region partners in leading on port access issues. At this late stage, getting agreement for another organisation to act as accountable body would potentially put the Bid process at risk.

126. REGIONAL GROWTH FUNDING ROUND 4

The Cabinet considered the report of the Director of Built Environment which provided details of the preparation of an application for Regional Growth Fund (Round 4) for South Sefton to seek funding to invest in new homes, remodel employment land, bring forward private sector investment in available employment sites, and develop infrastructure to help unlock growth and create jobs in South Sefton.

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

Decision Made: That:

- (1) the Director of Built Environment be authorised in consultation with the Head of Corporate Finance and ICT to prepare an application for Regional Growth Fund;
- (2) the approval of the completed application be delegated to the Director of Built Environment in conjunction with the Cabinet Member - Regeneration and Tourism, before the deadline of 20th March 2013; and
- (3) the "Prospectus for Growth" approach to securing additional public and private sector investment in the regeneration of south Sefton be noted.

Reasons for Decision:

To enable progress to be made in respect of an external funding application.

Alternative Options Considered and Rejected:

None - Not to apply for Regional Growth Fund would be to forego a major funding opportunity, at a time of financial constraint.

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127. IDENTIFICATION AND DISPOSAL OF SURPLUS COUNCIL OWNED SITES FOR HOUSING DEVELOPMENT

The Cabinet considered the report of the Director of Built Environment which provided details of a number of surplus Council owned sites that may in principle be suitable for housing development subject to planning permission, and sought endorsement to dispose of the identified sites in the short term. These sites would then be added to the Council's 5 year supply at the appropriate times and any formal re-designation of land/sites would only be done as part of the preparation of the Local Plan.

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

Decision Made: That:

- (1) it be agreed that the identified 'less constrained' sites in Table 1 of the report (that are not currently subject to disposal proceedings) are in principle, suitable locations for housing (subject to planning permission), and would be disposed of for housing development within two years.
- (2) It be agreed that the 'former Z Blocks' sites in Netherton are in principle, suitable locations for housing (subject to planning permission) and would be disposed of for housing development within the next three years
- (3) it be agreed that the 'constrained sites' identified in Table 1 of the report are in principle, suitable locations for housing development (subject to planning permission), and that these sites be progressed for development when circumstances allow. At that point in time, these sites may be brought into the Council's '5 year supply'; and
- (4) the planning policy context to the identification of these sites, and in particular the requirement to identify a '5 year supply' of deliverable housing sites be noted and the sites listed in the report be included in the Council's 5 year supply at the appropriate times.

Reasons for Decision:

To give approval to the disposal of surplus Council owned sites for housing development.

Alternative Options Considered and Rejected:

None

128. NORTH WESTERN INSHORE FISHERIES AND CONSERVATION AUTHORITY - CHANGE IN COUNCIL'S APPOINTED REPRESENTATIVE

The Cabinet considered the report of the Director of Corporate commissioning seeking approval to a proposed change in the Council's representation on the North Western Inshore Fisheries and Conservation Authority for the remainder of the Municipal Year 2012/13.

Decision Made:

That Councillor John Joseph Kelly be appointed as the Council representative on the North Western Inshore Fisheries and Conservation Authority for the remainder of the Municipal Year 2012/13.

Reasons for Decision:

The Cabinet had delegated powers to approve the Council's representation on Outside Bodies.

Alternative Options Considered and Rejected:

None

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Agenda Item 4

Report to: Overview and Scrutiny Committee (Regeneration and Environmental Services) **Date of Meeting:** 19th March 2012

Overview and Scrutiny Committee (Children's Services) 26th March 2013

Cabinet 28th March 2012

Subject: NEETS Working Group – Final Report

Report of: Director of Corporate Commissioning **Wards Affected:** All

Is this a Key Decision? Yes **Is it included in the Forward Plan?** Yes

Exempt/Confidential No

Purpose/Summary

To formally present the recommendations in the final report of the NEETS Working Group (not in education, employment and training).

Recommendation(s)

The Overview & Scrutiny Committees are requested to support the following recommendations and commend them to the Cabinet for approval:-

The Cabinet is requested to approve the following recommendations:-

That the Director of Young People and Families be authorised:-

1. to request head-teachers, and chairs of governors of high schools (including academies and free schools) within the Borough to consider increasing the breadth, range and quality of impartial advice and guidance provision for young people in schools, prior to leaving year 11, to receive advice on the full range of options available to them, and for information to also be made available to parents.
2. to request head-teachers of high schools and principals of colleges within the Borough to consider increasing the level of mentoring support and guidance for young people, in order for them to be better supported in learning about the range of options available to them, prior to leaving school and college.
3. to produce a follow-up report, to be submitted to the relevant Overview and Scrutiny Committee (s) in twelve months time, to include (i) whether the Council is receiving best value for money in terms of services provided within the NEETS area; and (ii) monitoring of looked after young people leaving Council care and their achievements or whether they subsequently fall into the NEETS category.

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4. to produce six monthly reports, to be submitted to the relevant Overview and Scrutiny Committee, outlining the latest position with regard to the NEETS.
5. to ensure that the Council and its partners be encouraged to use all available statistical evidence to identify NEET hotspots and agree robust intervention targets to reduce numbers in these areas, together with agreed robust systems for monitoring and evaluating the impact of joint interventions.

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 Working Group has made a number of recommendations that require approval by the Overview & Scrutiny Committee (Regeneration and Environmental Services), the Overview & Scrutiny Committee (Children's Services) and the Cabinet.

What will it cost and how will it be financed?

There are no financial implications arising for the Council as a direct result of this report.

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Implications: N/A

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

Legal N/A	
Human Resource N/A	
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: N/A

What consultations have taken place on the proposals and when?

The Head of Corporate Finance and ICT has been consulted and has no comments on this report because the contents of the report have no financial implications for the Council. (FD: 2187/13).

The Head of Legal Services has been consulted and has no comments on this report as there are no legal implications arising from the contents of this report. (LD: 1503/13).

The Director of Young People and Families has been consulted on the recommendations contained within this report.

The training providers named within the final report have been advised of the proposals via receipt of the final report.

Are there any other options available for consideration? The Cabinet could refuse approval of the recommendations.

Implementation Date for the Decision

Following the expiry of the "call-in" period for the Minutes of the Cabinet.

Contact Officer: Debbie Campbell

Tel: ext. 2254

Email: debbie.campbell@sefton.gov.uk

Background Papers:

There are no background papers available for inspection.

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BACKGROUND:

The NEETS Working Group, jointly established by the Overview & Scrutiny Committee (Regeneration & Environmental Services) and the Overview & Scrutiny Committee (Children's Services), have undertaken a review on issues surrounding the delivery of the NEETS (**not in education, employment and training**) service within the Borough and its final report is attached for consideration.

The Overview and Scrutiny Committees are requested to support the recommendations and commend them to the Cabinet for approval.

The Cabinet is requested to approve the recommendations.

A copy of the report by the NEETS Working Group can be accessed on the Council's website via the following link:

<http://modgov.sefton.gov.uk/moderngov/ecSDDisplay.aspx?NAME=SD1453&ID=1453&RPID=7091941&sch=doc&cat=13388&path=13383%2c13388>

Agenda Item 5

Report to: Cabinet

Date of Meeting: 28th March 2013

Subject: Sefton Health and Wellbeing Strategy 2013 – 2018 and Board Governance

Report of: Head of Business Intelligence and Performance

Wards Affected: All

Is this a Key Decision? No

Is it included in the Forward Plan? Yes

Exempt/Confidential No

Purpose/Summary

To request Cabinet to consider and agree the attached Health and Wellbeing Strategy for Sefton, to consider the EIA, as attached to the report and to consider and recommend to Council, the composition of the Board and several matters set out in the report, having had regard to the views expressed by the Shadow Health and Wellbeing Board.

Recommendation(s) That

- (1) subject to the delegation set out below, Council be recommended to approve the Health and Wellbeing Strategy for Sefton, and that the findings within the Equality Analysis report be noted;
- (2) authority be delegated to the Strategic Director - People in consultation with the Chair of the Shadow Health and Wellbeing Board (Cabinet Member for Children, Schools, Families and Leisure), to agree the next iteration of the strategy which shall be submitted to the Council for approval;
- (3) having due regard to the views expressed by the Shadow Board, Council be recommended that membership of the Board shall comprise the following:
 - Councillors (as determined by the Leader of the Council);
 - One representative of the local Healthwatch organisation;
 - One clinical representative of the NHS Southport and Formby Clinical Commissioning Group;
 - One clinical representative of the NHS South Sefton Clinical Commissioning Group;
 - The statutory director for adult social care;
 - The statutory director for children's services;
 - The statutory director of public health;
 - The Chief Officer of NHS Southport and Formby and the NHS South Sefton Clinical Commissioning Groups; and
 - One representative of the National Commissioning Board
- (4) That Council be recommended to agree a criteria for determining future membership of the Board beyond that listed above, so as to enable a process to operate whereby future membership could be increased, provided that the tests set out in paragraph 4.6 are met;

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- (5) Council be recommended to agree that substitution should not apply to Board Members;
- (6) Council be recommended to agree that all members of the Board shall have the right to vote, but that this vote will only be exercised in exceptional circumstances: the convention that shall apply is that the Board will have an open debate and will reach decisions based on consensus. Should a vote be required, then it will be based on a simple majority of those present and voting at the meeting;
- (7) Council be recommended to note that the Board -does not favour the creation of sub-committees at this time and that the requirements relating to the Code of Conduct and declaration of interests applies to Board members;
- (8) the principle functions of the Board be noted and considered by the Audit and Governance Committee and Council for inclusion within the Council's Constitution as set out in paragraph 4.6 of the 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		

Reasons for the Recommendation:

The Health and Social Care Act 2012 gives health and wellbeing boards specific functions. One of the statutory functions is to prepare a Joint Strategic Needs Assessment and Joint Health and Wellbeing Strategy. The Council, NHS Clinical Commissioning Groups, the National Commissioning Board, along with others, have a duty to co-operate. The regulations under section 194 of that Act set out the constitutional and governance arrangements of the Board. The Board has statutory powers from 1st April 2013, and is required to publish a Health and Wellbeing Strategy by April 2013. The purpose of this report is to seek approval of the strategy and to establish the Board.

What will it cost and how will it be financed?

(A) Revenue Costs

The strategy will be delivered through existing resources in the Council, the NHS Clinical Commissioning Groups and wider partners across the borough. The revenue implications for the Council will be described within the Councils Business Plan which will translate what has been agreed by Council in setting the two year financial plan.

(B) Capital Costs

Implications:

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

Legal The Health and Wellbeing Board is statutorily required to produce a Health and Wellbeing Strategy, based on a Joint Strategic Needs Assessment and for these to be in place by April 2013 when the Board becomes a statutory committee of the Council. Health and Social Care Act 2012, The Local Authority (Public Health, Health and Wellbeing Boards and Health Scrutiny) Regulations 2013
Human Resources
Equality 1. No Equality Implication <input 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:

The health and wellbeing strategy will seek to support the Council to transform the commissioning of services to focus on value for money whilst improving outcomes.

What consultations have taken place on the proposals and when?

The Head of Corporate Finance and ICT (FD2214/13) and Head of Corporate Legal Services (LD 1530/13) have been consulted and any comments have been incorporated into the report.

Extensive engagement and consultation has taken place with members of the public, service users, partners and key stakeholders. The outcomes of these processes have directly informed the production of the Sefton Strategic Needs Assessment and the Health and Wellbeing Strategy. The details of this feedback can be found within the consultation and engagement feedback reports.

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Are there any other options available for consideration?

No, as there is a statutory requirement to produce a Health and Wellbeing Strategy and to establish a Health and Wellbeing Board.

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:

Technical Sefton Strategic Needs Assessment (SSNA)

Summary Sefton Strategic Needs Assessment

Consultation Feedback report on the draft Health and Wellbeing Strategy

These documents can be accessed on the Council’s website via this link:

<http://modgov.sefton.gov.uk/moderngov/ecCatDisplay.aspx?sch=doc&cat=13430&path=13158,13197>

1. Introduction/Background

- 1.1 The Shadow Sefton Health and Wellbeing Board and the partners which comprise the Board, have a statutory responsibility to undertake a Joint Strategic Needs Assessment (otherwise known in Sefton as the Sefton Strategic Needs Assessment) and to produce a Health and Wellbeing Strategy for the Borough, to be published in April 2013.
- 1.2 Over the last 9 months, work has taken place to produce a technical Sefton Strategic Needs Assessment, a summary thereof, and a detailed process of consultation and engagement to ensure full and active engagement of stakeholders, partners, individuals, and representative groups within the Borough. Consultation and engagement on the needs assessment ended on 19th October 2012 and a detailed feedback report was produced, together with a summary report.
- 1.3 The Health and Wellbeing Board met on 29th October 2012 and went through a process whereby it assimilated the evidence from the needs assessment process, the feedback from the consultation and engagement process, and refined and determined its priorities, which are known as its strategic objectives, as they relate to a broad health and wellbeing vision and outcomes framework for Sefton. The Board produced a draft Health and Wellbeing Strategy, which was extensively consulted upon during the period from November 2012 to February 2013. A summary feedback report on the consultation and engagement on the draft Health and Wellbeing Strategy is attached, with the full report is available as a background document.
- 1.4 As part of the consultation process people's views were also sought on the commissioning intentions for the public health service and both Clinical Commissioning Groups for Sefton. This enabled people to understand these commissioning intentions in the context of the strategic objectives of the Health and Wellbeing Board, and how they relate to the Borough Vision and Outcomes Framework that has emerged through the development of the Strategy.
- 1.5 A crucial part of the process of producing and consulting on the Health and Wellbeing Strategy is a focus on leadership and ownership from the level of the individual, family, community to organisational and partnership leadership and ownership. To this end individuals, community representatives and organisational leaders were asked to make a personal pledge to achieve change and improve health and wellbeing in Sefton.

2. Health and Wellbeing Strategy 2013 – 2018

- 2.1 The draft Health and Wellbeing Strategy 2013 – 2018 was produced in October 2012 and extensively consulted upon during the period November 2012 – February 2013, in order to ascertain the views of the public and all interested parties, on the priorities and objectives therein. As part of the consultation and engagement

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processes, local people, service providers and stakeholders also worked alongside members of the Health and Wellbeing Board to define a set of outcomes and high level actions for delivery. These are detailed within the strategy.

2.2 Through the consultation and engagement process on the Sefton Strategic Needs Assessment, and what the analytical evidence told us, the following six strategic objectives were identified for the Health and Wellbeing Strategy:

- Ensure all children have a positive start in life;
- Support people early to prevent and treat avoidable illnesses and reduce inequalities in health;
- Support older people and those with long term conditions and disabilities to remain independent and in their own homes;
- Promote positive mental health and wellbeing;
- Seek to address the wider social, environmental and economic issues that contribute to poor health and wellbeing; and
- Build capacity and resilience to empower and strengthen communities

2.3 These objectives were incorporated into the draft Health and Wellbeing Strategy and tested out through consultation and engagement, and the overwhelming feedback was that they were the right things for the Health and Wellbeing Strategy to focus on, and that people's needs would be met by them. As part of the consultation, people were asked to prioritise actions and most people fed back as to how difficult the process of prioritising is. This awareness raising with the public, partners and stakeholders on making tough choices about how and on what resources should be deployed is crucial at a time of reducing public resources and growing demands for services. Delivering value for money and maximising the "Sefton £" has been the cornerstone on which the Health and Wellbeing Strategy has been developed.

3. Delivery of the Health and Wellbeing Strategy

3.1 The Shadow Health and Wellbeing Board at its meeting on 13th March 2013, considered the Health and Wellbeing Strategy for Sefton. The latest draft of the strategy included a series of actions and high level outcomes. The Board reviewed the strategy at its meeting, and in particular, discussed the breadth of actions which contribute towards the achievement of the outcomes. In broad terms, the Board was satisfied that the outcomes are the right ones, and translated the strategic objectives. In terms of the actions within the draft strategy, the approach taken is to list those that not only would the Members of the Board be accountable for delivering through their own business plans, but to show actions within the strategy for other partners, stakeholders and for individuals. With this in mind, the Board took the view that the strategy could be recommended for approval by the Council, but that the specific actions within the strategy would need to continue to be the subject of discussion with a wider range of partners and stakeholders, particularly as some of the actions would be delivered by others outside of the Board.

3.2 The Health and Wellbeing Board recognises that it cannot do everything itself and has defined its role as '*influencing*' others to deliver on the objectives and outcomes within the strategy. The Health and Wellbeing Board does not intend to duplicate the work of other Boards, for example the Children and Adults Safeguarding

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Boards, and the Health and Wellbeing Strategy aligns itself with, but does not duplicate, other strategies and plans, for example the draft Local Plan.

- 3.3 The Health and Wellbeing Board will seek to provide the overarching framework to hold commissioners to account on the extent to which the strategic objectives and outcomes for Health and Wellbeing defined within this Strategy are reflected in commissioning plans, and performance managed, as appropriate. The Board is seeking to develop an approach to performance based on 'what works' and delivers value for money and support commissioners to be bold enough to decommission, stop or commission new things. The Health and Wellbeing Board endorses a commissioning model that systematically draws on the intelligence available from a number of sources, and the strategy poses a range of questions that commissioners need to ask themselves in finalising their commissioning plans.
- 3.4 The strategy, therefore, attached to this report is the latest iteration. The Cabinet is asked to note and agree that work continues between the Cabinet meeting and the Council meeting, to firm up the actions within the strategy. The Health and Wellbeing Board agreed to delegate this responsibility to the Sefton Council's Strategic Director - People, in consultation with the Chair, and accordingly a similar delegation is sought from the Cabinet. This delegation will ensure that where there are actions for which the Council or CCGs are responsible for delivering, they align with the priorities identified either through the budget setting process, or through the business planning process. In terms of actions to be delivered by others, or with others, these will continue to be refined over the next 6 months, to ensure that they are deliverable, measurable and owned by those responsible for taking the action.
- 3.5 The Board will receive an update within 6 months and will then be in a position, to assure itself that the actions within the Strategy are deliverable.
- 3.6 It is recognised by the Health and Wellbeing Board that whilst the Strategy covers the five year period from 2013 to 2018, there is a need for an annual formal review to check progress and if necessary change direction. The outcomes of this review will be formally reported to Cabinet. As indicated above, in this first year of operation of the strategy, as work is still on going to firm up the deliverability of actions within the strategy, this review will take place within six months, and therein after on an annual basis.
- 3.7 The Board is developing a communications and engagement plan, and this will describe how this work across the wider stakeholder/partner organisations will be undertaken, in order to ensure that the strategy is appropriately resourced. In addition, the Board is also developing a Performance Management Framework, which links the outcomes within the strategy across the many national outcomes frameworks that the partners to the Board are responsible for delivering against. Its development will help establish the metrics to enable judgements to be made about the achievement of the outcomes described in the strategy.
- 3.8 The Council's website will include web pages for the Board, and in particular, this medium will be used to inform, communicate and engage people on the Health and Wellbeing Strategy for Sefton, and will hold together the supporting evidence within the Sefton Strategic Needs Assessment. The communications and engagement plan will detail the other processes for seeking to exercise its role of influencing

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across the whole range of health and wellbeing outcomes.

- 3.9 The Health and Wellbeing Board will seek to bring key stakeholders together twice a year to check progress, review evidence and sense check if the strategy is still fit for purpose. This will build upon, and support, a continuous public engagement process through both Council mechanisms and the new body 'Healthwatch', the Government's mandated body to act as the public voice on health and wellbeing services, which the Council is charged with commissioning on behalf of partners within the Borough.
- 3.10 The Health and Wellbeing Strategy is supported by an equality analysis report to ensure due regard has been shown to the Equality Act 2010. It is also supported by a detailed consultation and engagement report, and a summary thereof, and a summary of the Strategy. These documents will be published on the Council's website in support of this report.

4. Governance

- 4.1 The Health and Social Care Act 2012 gives health and wellbeing boards specific functions. The regulations made under section 194 of that Act, namely the Local Authority (Public Health, Health and Wellbeing Boards and Health Scrutiny) Regulations 2013, provide, amongst other things, that the Board shall be a committee of the Council. The regulations aim to provide local areas with the flexibility and freedom to shape their health and wellbeing boards as best fits with local circumstances and certain aspects of the Local Government Act 1972 have been disapplied.
- 4.2 This report deals with the creation of the Board under those regulations, in so far as it relates to the membership of the committee. The detail of the constitutional changes necessary to create the Board will be dealt with through the normal processes for making and effecting constitutional amendments, and will be the subject of a separate report to Council dealing with these matters. However, in order to create the Board so as to have effect from 1st April 2013, pending formal appointments to that body for the new municipal year, this report deals with the composition, and role to be performed by the Board as it relates to the statutory requirements to have a Board in place, in addition to seeking approval of the Health and Wellbeing Strategy that has been developed by the Shadow Board.
- 4.3 To that end, the Shadow Health and Wellbeing Board met on 13th March 2013, and considered governance issues relating to the creation of the Board. The 2012 Act provides a statutory minimum membership of the Board. The Board considered this and other factors and recommends that Council should approve the following Board composition:
- Councillors (it being noted that the regulations provide that the Leader of the Council shall determine the councillor representatives on the Board);
 - One representative of the local Healthwatch organisation;
 - One clinical representative of the NHS Southport and Formby Clinical Commissioning Group;
 - One clinical representative of the NHS South Sefton Clinical Commissioning Group;

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- The statutory director for adult social care;
- The statutory director for children's services;
- The statutory director of public health;
- The Chief Officer of NHS Southport and Formby and the NHS South Sefton Clinical Commissioning Groups; and
- One representative of the National Commissioning Board

4.4 Each organisation listed above, will be asked to appoint named representative(s). It was agreed in so doing, that any named representative shall prioritise attendance at all formal meetings of the Board, and participate fully in any informal briefings/training. The dates of formal Board meetings will be included in the Council's calendar of meetings, and Board meetings will ordinarily be held at either Southport or Bootle Town Halls. The provisions relating to Access to Information apply to the Board.

4.5 The Chief Executive and Strategic Director – People of the Council were members of the Shadow Board, and shall stand down from the Board and act in a strategic advisory capacity. The representative on the Shadow Board from NHS Merseyside shall also stand down from the Board.

4.6 The Regulations provide that the following are matters for local determination and the Board has given consideration to these matters and recommend that Council agrees with the following proposals:

- Substitution – there shall be no provision for substitutes on the Board;
- Voting – all members of the Board shall have a right to vote, but that this vote will only be exercised in exceptional circumstances. The convention that shall apply is that the Board will have an open debate and will reach decisions based on consensus. Should a vote be required, then it will be based on a simple majority of those present and voting at the meeting;
- Sub-Committees – the Board can create sub-committees, but the Board does not favour the creation of such at this time;
- Criteria for Membership – given that the Board is a committee of the Council, and the composition of such is a matter for the Council in the first instance, the Board is of the view that the Council should restrict membership to those recommended above. However, the Board also recommends that the Council adopts the following criteria on behalf of the Board, to enable a process to operate whereby future membership could be increased. It is recommended that when considering applications or requests to join the Board, or when the Board considers the discharge of its responsibilities, that the test to be applied to requests to join the Board or when considering widening of membership to bridge an identified gap, is as follows:
 - by virtue of membership, the person/organization bridges a gap, either identified by the Board in its current membership or which the potential member can demonstrate is a gap, which cannot be fulfilled through the Board's sub-structure or through discharge of its responsibility through the wider partnership/stakeholder network;
 - would the person making the request, or under consideration by extending membership, be able to comply fully with the requirements of

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- the Council's constitution as it relates to the Board;
- is membership of the Board the only means by which the interests of the person or organization, can be represented, or are there other means by which the Board can have regard to the interests of the person or organization they represent.
 - Code of Conduct – as a committee of the Council, members of the Board must comply with the provisions within the Council's Constitution, and in particular the rules relating to registering and declaring interests. It is therefore proposed that a short induction process be undertaken for Board members;
 - Functions of the Board – that the Board has the following main functions, namely:
 - encourage integrated working between commissioners of health services, public health and social care services.
 - encourage those who provide services related to wider affects of health, such as housing, to work closely with the Health and Wellbeing Board.
 - lead on the Joint Strategic Needs Assessment (JSNA) and Joint Health and Wellbeing Strategy (JHWS) including involving users and the public in their development.
 - be involved throughout the process as Clinical Commissioning Groups develop their commissioning plans and ensure that they take proper account of the Joint Health and Wellbeing Strategy when developing these plans.

The Board also undertook a formal role in authorising and establishing Clinical Commissioning Groups. Completed in early 2013.

- 4.7 This report fulfils the requirement on reporting on the production of a JSNA and Joint Health and Wellbeing Strategy. However, the Board's primary responsibility is to take a leadership role in delivering the outcomes within the Strategy, through partnership and collaborative working, and by influencing a wide range of stakeholders across the health and wellbeing system. In terms of integrated working, this is a role the Board is progressing. With regards to other functions, this is properly a matter for the Council, but it is not proposed that the Board shall discharge any other Local Authority functions.
- 4.8 The Cabinet is requested to consider the recommendations of the Shadow Board and have regard to the views expressed, and to make recommendations to Council with regards to composition of the Board, criteria for membership and the several matters relating to voting and functions of the Board. Approval of the aforementioned membership will enable the Board to take statutory effect on 1st April 2013. The Leader will be asked to advise the Council as to who he wishes to appoint to the Board. Thereinafter, the Councillor Representatives will be dealt with as part of the normal appointments to committees report to Council. Members are asked to note that the regulations provide that the political balance arrangements do not apply to the committee, and that the councillor appointments to the Board, are a matter for the leader of the Council.
- 4.9 Given that the legislation and regulations are new, the Board expressed the view

that it would want to recommend that it keeps the arrangements under review, particularly as whilst the Board is a committee of the Council, it is like no other committee, and the usual constitutional rules and provisions, have been relaxed, varied or dis-applied. The Cabinet is asked to endorse this approach.

5. Conclusion

- 5.1 The Shadow Health and Wellbeing Board has discharged its responsibilities in accordance with all statutory regulations and guidance, and its work has culminated in the production of the attached Health and Wellbeing Strategy for Sefton. The Strategy provides the overarching framework for all policies and strategies within Sefton. The Sefton Strategic Needs Assessment provides the evidence for all commissioning and delivery within Sefton, by not only the Council, CCG's the NCB, but for all partners/stakeholders, and is sufficiently robust evidence on which to base the HWBS.
- 5.2 Extensive consultation and engagement on the Strategic Needs Assessment and Strategy have been undertaken, and the attached summary consultation reports, the EIA, and the full and summary strategy, provide Cabinet with the evidence which supports the recommendation from the Board that the Cabinet recommend the strategy to the Council. The Cabinet is asked to agree, in so doing, that it delegates authority to the Chair of the Board (The Cabinet Member for Children, Schools, Families and Leisure) together with Sefton Council's Strategic Director - People, to continue to develop the actions within the strategy, so that the next iteration thereof to Council, firms up the actions therein. Further, Cabinet is asked to note that work will continue to be undertaken over the next 6 months to refine the actions within the strategy with the partners/stakeholders, and others to assure the Board, Council and CCG's on the deliverability of the strategy. Considerable work has been undertaken by the Board during its consultation and engagement to map the partnerships/stakeholders and others, and this will be refined alongside the strategy, so that there is an accountability (Performance Management) framework in place for the strategy.
- 5.3 The Board has been extremely successful in working collaboratively, sharing resources, expertise and working in an integrated way. The Board recommends that Council agrees to keep the Membership of the Board tight, whilst recognising that there needs to be criteria to enable the board to test whether it has the right Membership to enable it to discharge its responsibilities. However, the Board fully recognises that it cannot achieve the outcomes within the strategy on its own, so its primary role is to influence others in the wider health and wellbeing system, to work with it to achieve the aspirations within the strategy.
- 5.4 The Board will develop a Performance Management Framework and a Communications and Engagement Strategy - referred to above. The Performance Management Framework will set out how the Board will measure whether it is achieving the aspirations for communities in Sefton. The Communications and Engagement Strategy will set out how the Board will perform its role as influencing the wider health and wellbeing system.
- 5.5 The Regulations under the Act relating to Governance will be considered by the Audit and Governance Committee to recommend the -requirements of the act and regulations be included within the council's constitution. Approving the strategy and the governance arrangements set out in this report will enable the Board to be

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statutorily created on 1st April 2013. In terms of Councillor representation on the Board, it is proposed that the current members continue in position until the appointments to committees are made in the new municipal year.

Sefton Council 

NHS

South Sefton Clinical Commissioning Group
Southport and Formby Clinical Commissioning Group

Sefton's Health and Wellbeing Strategy 2013 - 2018



April 2013

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Foreword

Sefton's Health and Wellbeing Strategy for 2013 – 2018 outlines the top priorities for improving the health and wellbeing of all people living in Sefton. This Strategy has been developed through the Sefton Health and Wellbeing Board, the range of partnership groups that exist within the borough and with the communities of Sefton. Sefton's Health and Wellbeing Board brings together those who buy services across the NHS, public health, social care and children's services, plus Elected Councillors and service user representatives, to jointly consider local needs and plan the right services for the population of Sefton. This is a new approach, and this Strategy, sets out the priorities for commissioners to purchase not only health and social care services, but other services such as housing, environment and the economy. In addition there is a recognition that the financial challenges facing the public services of Sefton need to be tackled in partnership if we are to successfully improve outcomes for local people.

This Strategy is the culmination of extensive consultation and engagement which has taken place with local people and you have told us what your priorities are and I want to thank you for your participation in this process. We have also listened to local stakeholders, clinicians, the voluntary, community and faith sector, hospital trusts and providers of a wide range of services and it will be there job to help us deliver on the ambitions set out in this Strategy. The information gathered has been used to set the strategic objectives, actions and outcomes within this Strategy. I recognise the importance of continuing to listen to local people in assessing if this Strategy is achieving what it is setting out to do and I will ensure that the Health and Wellbeing Board continues to do this.



Councillor Ian Moncur
Chair of Sefton's Health and Wellbeing Board

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Section One: Summary of Strategic Objectives

The Health and Wellbeing Board for Sefton has defined the following strategic objectives for Health and Wellbeing in Sefton. These have been developed through both understanding the needs of the population and what the public, community organisations and groups, commissioners and providers of services told us during the consultation and engagement process.

The strategic objectives for Health and Wellbeing in Sefton are:

- Ensure all children have a positive start in life
- Support people early to prevent and treat avoidable illnesses and reduce inequalities in health
- Support older people and those with long term conditions and disabilities to remain independent and in their own homes
- Promote positive mental health and wellbeing
- Seek to address the wider social, environmental and economic issues that contribute to poor health and wellbeing
- Build capacity and resilience to empower and strengthen communities

In seeking to address the objectives set out above, and to ensure that our work and that of our wider partners is holistic and consistent (both in delivery and commissioning), the following set of principles have been adopted by the Health and Wellbeing Board:

We will....

- build on the many assets and resources that are available, including social value

- enable early intervention and prevention through robust arrangements for identifying those with needs, and predicting those whose needs may emerge due to changes in national policy such as the Welfare Reform.
- address health inequalities and equity of access to narrow the gap between different neighbourhoods and communities, including communities of interest
- secure value for money and consistency in the quality of care and support
- tackle the wider determinants that contribute to ill health such as air quality, road deaths, transport, noise, violence, housing, fuel poverty and use of outdoor space. ([Department of Health “Living Well for Longer – A call to action to reduce avoidable premature mortality”, March 2013](#)) demonstrate integrated health and social care service solutions, including the wider contribution the Council and partners can make
- deliver discernible improvements to the agreed defined outcomes in this Strategy
- make good use of existing strategic partnerships to address complex health and social care issues
- use the authority of the Health and Wellbeing Board to enable and encourage partners to work together

In Appendix One, a broad model of commissioning is described and commended to those responsible for responding to the strategic objectives outlined in this strategy in developing commissioning intentions and plans.

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Section Two: Introduction and Context

We are pleased to present this first Health and Wellbeing Strategy for Sefton which has been developed from the consultation and engagement feedback on the Sefton Strategic Needs Assessment. Whilst it marks an important milestone in the implementation of the 2012 Health and Social Care Act, perhaps more importantly it represents a further step in developing the shared vision for improving the health and wellbeing of the population of Sefton. The Health and Wellbeing Board is a new partnership that is responsible, with partners, for the Health and Wellbeing Strategy. It comprises of the Chairs and Chief Officer from Southport and Formby and South Sefton Clinical Commissioning Groups, alongside Elected Members and senior managers from Sefton Council and the Chair of Sefton Healthwatch. Appendix Two details the current membership and role of the Health and Wellbeing Board. The Council, partners and the Health and Wellbeing Board recognise that it will take time to develop strong and effective working relationships during this period of transition and change. Achieving a consensus on the priorities, actions and outcomes outlined in this Strategy has been a tremendous achievement and provides a good foundation for the future.

This Health and Wellbeing Strategy will be reviewed annually, including a review of the strategic objectives and actions. This review will be based on updated information from the Sefton Strategic Needs Assessment and feedback from the public.

In compliance with the Equality Act 2010, and the public sector equality duty (Section 149), an equality analysis report has been completed and this is available alongside this Strategy.

The Health and Wellbeing Strategy provides commissioners with strategic objectives from which all services that promote health and wellbeing in Sefton can be commissioned. It provides a focus and a vision from which to plan ahead in the short, medium and long term. It is not about taking action on everything at once; but about setting priorities and objectives for collective action and making a real sustainable impact on people's lives.

Through this Strategy partners will:

- provide collective leadership to improve health and wellbeing.
- strive to improve the quality of life and outcomes for the people of Sefton
- identify health and wellbeing priorities for the commissioners in the Council, the NHS and partners
- hold commissioners to account for their decisions
- further develop partnerships and collaborations that provide solutions to commissioning challenges and maximise resources
- focus on early intervention and prevention activity utilising information from the community and target those areas most in need.
- share and use data intelligently, including benchmarking and performance data.
- review and evaluate work, learning from best practice and research, including through the involvement of local people, and groups and the, voluntary, community and faith sector.

This Strategy is the single plan for Health and Wellbeing in Sefton and builds upon a compendium of all relevant, national and local strategies and plans. It is underpinned by the national outcomes frameworks for the NHS, Adult Social Care and Public Health. These frameworks provide the tools for identifying Sefton's current baseline and for measuring year on year progress.

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National Context

The Government has introduced new policy and legislation that is having a fundamental impact on the way in which all public services, including council, health and social care, are to be delivered. The Localism Act 2011 is already transforming the way Councils commission and deliver services, with local people, employees, communities and the voluntary sector being given the opportunity to play a more significant role through the Community Right to Challenge to run public services. The Open Public Services White Paper 2011 sets out further reforms with regard to transparency on data, commissioning and performance. The paper encourages open competition across providers to promote innovation, efficiency and effectiveness and seeks to give choice to individual people to challenge performance of public services thereby making services accountable to the users of those services and the tax payer. In addition the Health and Social Care Act 2012 is possibly the most radical restructuring of the NHS since its inception.

The major changes include:

- shifting many of the responsibilities historically located in the Department of Health to a new, politically independent NHS Commissioning Board
- giving groups of GP practices and other professionals – Clinical Commissioning Groups (CCGs) – responsibility for the majority of NHS commissioning
- transferring responsibility for public health from the NHS to the local authority.
- giving local authorities, through Health and Wellbeing Boards (HWBs), a new role in encouraging joined-up commissioning across the NHS, social care, public health and other local partners.
- moving all NHS trusts to foundation trust status.

- creation of a health specific economic regulator (Monitor) with a mandate to guard against 'anti-competitive' practices.
- Introducing a new organisation called 'Healthwatch' to be the public voice of patients, carers and the public on the Health and Wellbeing Board.

The Marmot Review in 2010, '[Fair Society, Healthy Lives](#)', proposed evidence-based strategies for reducing health inequalities based on addressing the social determinants of health. It concluded that a good start in life, a decent home, good nutrition, a quality education, sufficient income, healthy habits, a safe neighbourhood, a sense of community and citizenship are the fundamentals for improving quality of life and reducing health inequalities. We recognise that in order to improve the health and wellbeing of local people we need to understand these wider determinants and through this address health inequalities and improve opportunities for all our residents with a focus on those who are experiencing poverty and deprivation.

We endorse the following from the [Marmot Review](#) 2010:

- To create an enabling society that maximises individual and community potential
- To ensure social justice, health and sustainability are at the heart of all policies

'Focusing solely on those who are most disadvantaged will not reduce inequalities sufficiently. To reduce the steepness of the social gradient, actions must be universal, but with a scale and intensity that is proportionate to the level of disadvantage. We call this 'proportionate universalism'. For specific groups who face particular disadvantage and exclusion, additional efforts and investments and diversified provisions will be needed to reach them and to try to reduce the multiple disadvantages they experience.'

This Strategy will seek to address these wider determinants through the identified priorities and objectives which we will collectively commission against.

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Welfare Reform

In addition to the above, the Welfare Reform Act 2012, which is currently being implemented on a phased basis, heralds the most significant changes to the welfare system since the Beveridge Report, 1942. The reforms include the following measures:

- A 'Localised Council Tax Reduction Scheme' to be administered by Local Authorities.
- Working-age tenants in receipt of Housing Benefit will experience a reduction in their benefit entitlement if they live in housing that is deemed to be too large for their needs. Affected tenants will face a reduction in their Housing Benefit entitlement of 14% for one additional (spare) bedroom and 25% where there are two or more additional (spare) bedrooms.
- A 'benefit cap' on the total amount of benefit that working-age people and households can receive. Benefit levels will be capped at the level of the average working family income after tax which it is currently forecasted to be £500 a week for families and £350 a week for single people.

From October 2013, the Government will introduce the 'universal credit' which will replace income based working age benefits such as Income Support, Housing Benefit and Tax Credits. The Government expects all benefit claimants to be on 'universal credit' by the end of 2017.

The full impact of these changes on the health and wellbeing of the population of Sefton is not yet fully understood. The Health and Wellbeing Board will continue to monitor any potential impacts to inform commissioners of any changing needs of the population.

What is Wellbeing?

Wellbeing is often simply defined as “feeling good and functioning well”. This includes having a fair share of material resources, influence and control, a sense of meaning, belonging and connection with people and place and the capability to manage problems and change.

Health and Wellbeing in Sefton

The Sefton Strategic Needs Assessment (also known as the Joint Strategic Needs Assessment - JSNA) 2012 provides an overview of the health and wellbeing needs of the people of Sefton to enable commissioners to plan services for the future, not only health and wellbeing services, but also other services such as housing, education and the economy . The Sefton Strategic Needs Assessment 2012 was a full review of data and analysis has now been updated with the recently published Census data. The analysis is structured around the following themes:-

- What it is like to live in Sefton
- Children and Young People
- Older People
- People who are not as well as others (sometimes referred to as Health Inequalities)
- People with long term conditions

This needs assessment has underpinned the development of the priorities in this Health and Wellbeing Strategy and has identified social, economic and health needs that will require a longer term approach if outcomes are to be improved.

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What is it like to live in Sefton?

Sefton is an area that stretches from Southport in the North to Bootle in the South. To the east lies the town of Maghull and the west is bordered by an award winning coastline covering Crosby through to Formby and Ainsdale. There are a lot of things that make life good for people but it is not so good for others. The health and wellbeing of everyone is important to Sefton's Health and Wellbeing Board. People enjoy living in Sefton with 80% of Sefton residents saying that they are either very or fairly satisfied with their local area as a place to live. Our young people achieve well in school and crime rates are either equal to or lower than the average for our neighbouring authorities in the Liverpool City Region. There is a good quality coast line and green spaces which residents and visitors enjoy.

Sefton's overall population has reduced between 2001 and 2011, however Sefton's Strategic Needs Assessment includes official government population projections (Office of National Statistics), which indicates that Sefton's population will increase by the year 2035, with the most significant increase occurring amongst the over 65 population. However, ONS guidance states that projections are uncertain and become increasingly so the further they are carried forward. There are less people in employment and a significant increase in youth unemployment; there are areas of the borough where people and families are in poverty and this leads to poorer health and wellbeing. The Council currently spends over £90 million on acute services for older people, and the NHS spends £15.2 million a year on routine and emergency surgery for older citizens in the borough. The Council spends a further £33 million on children's social care. These present significant challenges to commissioners.

Over 86% of homes in Sefton are privately owned, however, around 20% are in serious disrepair or do not meet the statutory fitness standard. Many are hard to heat. There is a need for more good quality housing to meet the projected increase in the numbers of households, and the Council is responsible for ensuring there is an adequate supply of land on which to build houses and associated high quality amenity spaces, as well as to grow businesses and create jobs.

What is life like for children and young people?

The number of children and young people living in Sefton (0-19 year olds) is 62,100 a fall of 14% (9,900) since 2001.

Sefton is a good place for children and young people to live and grow up. Most receive their immunisations, with rates being close to - or above - the national average; our children and young people achieve in school and they have access to a wide range of physical activity opportunities. There are fewer teenage mothers in the borough than in previous years and the health of children and young people is generally improving.

Whilst the general birth rate in Sefton is not rising, the numbers of births to non-British born mothers is, particularly for Polish and Latvian born mothers. This can present barriers to the take up of health services as experienced by some of the local GP practices.

Whilst most children achieve in school there are still some that do not reach their full potential which impacts on their ability to go into further education, training and to get a job. Childhood smoking rates are average, but alcohol consumption rates among our young people are higher than average; Sefton is significantly worse than the English average for those who smoke whilst pregnant, who breast feed and for children with tooth decay. Although there is good access to physical activity opportunities almost 20% of our children are obese when they leave primary school at 11 years.

Some of our children and young people cannot live with their parents or families, they live with Foster Carers, in Children's homes or are adopted. These children and young people are more likely to experience poor life chances.

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What is life like for older people?

There are 56,400 people over 65 years living here, an increase of 2,900 since 2001, and 7,300 people who are over 85 years old, an increase of 14% since 2001. The numbers of older people living in Sefton is expected to further increase to 83,000 by 2035. This projection will pose a significant challenge for the commissioners as demand for services rise.

Older citizens tell us that they enjoy living in Sefton. Lots of older citizens live active, healthy lives by volunteering, running small voluntary groups and being part of networks such as the Sefton Partnership for Older Citizens.

Some older people, however, need help and support to remain independent and live at home. We have seen a rise in the numbers of people receiving direct payments and the numbers of people receiving intensive homecare support with the numbers of carers increasing.

As with everyone, sometimes people have accidents or become unwell, and we have found that many older citizens are being admitted to hospital. Some older citizens fall due to being unsteady on their feet, some develop problems with their heart or breathing (respiratory), get kidney or bladder infections, need cataracts removed from their eyes and have problems with their stomach.

What is life like for people who are not as well as others?

Some people who live in Sefton are not as well and healthy as others, this is termed 'Health Inequalities'. Overall, our findings show that progress has been made on reducing health inequalities, but in some areas they still persist.

People are living longer in Sefton, but women continue to live longer than men (men are living for 77 years on average and women 81 years). In some of the poorer areas of the borough people live shorter lives and live many years in poor health.

Heart disease, lung cancer, other cancers, liver disease and suicide (for men) are the main causes of deaths in the poorest parts of Sefton.

There are a number of vulnerable individuals in Sefton whose health outcomes are likely to be worse than the majority of Sefton residents because they do not understand how to access services especially amongst our minority ethnic populations.

Unemployment is rising with jobseeker's allowance claim rates being higher than the regional and national averages, particularly among young people; this impacts on the mental health of people with increasing rates of depression. Residents tell us that "local" services should be, on average, within five miles of their home; two miles or less in the poorest areas.

What is life like for people with long term conditions?

We know that Sefton has higher than average levels of people who are diagnosed with a long term condition such as chronic heart disease, diabetes and high blood pressure. Whilst lifestyle factors – better eating / stopping smoking / greater exercise – are reducing the numbers of people with these conditions, levels still vary across the borough from one community to another.

Sefton sees a slightly higher level of diagnosed long term conditions than the national average although we think that there are more people with asthma, kidney disease, chronic heart disease, dementia, diabetes and high blood pressure that have not yet been diagnosed.

Projections suggest that Sefton's ageing population could mean 2,500 more people with high blood pressure and 1,000 with chronic heart disease, within five years, and numbers of people with dementia and experiencing the effects of stroke are also likely to rise.

Rates of people dying early from cancer are higher than the national average, but are falling, and whilst smoking and drinking rates in Sefton are lower than the national average, rates vary greatly within the borough.

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People being overweight remains an issue, with as much as half of the population classified as overweight or obese. Also a quarter of children aged four – five years old are overweight or obese, which is above the national average; and patient satisfaction with their local GP practice is generally higher than the national average.

The information set out above is intended to give a general picture of the health and wellbeing of Sefton's population. This information is a summary of the overall strategic needs assessment for Sefton which can be viewed at www.sefton.gov.uk.

The strategic needs assessment and the outcomes from the consultation and engagement provides a wide range of evidence about the varying needs of the population of Sefton. This suggests that those responsible for commissioning services for Sefton's population must balance a complex range of competing priorities. This Health and Wellbeing Strategy describes the key health and wellbeing strategic objectives for Sefton underpinned by the principles of collective leadership, shared ownership and collaboration to effect change and take action.

What we currently spend on services that promote health and wellbeing

In very broad terms the statutory services currently have the following budgets available:

NHS Sefton's total budget in 2012/13 budget was £355 million and was spent on:

- doctors, dentists, opticians and pharmacists (24 per cent)
- hospitals and other patient services (49 per cent)
- community and adult social care services (19 per cent)
- other services (8 per cent)
- a ring-fenced Public Health budget of approximately £19.4m which will transfer to Sefton Council from April 2013

In 2012/13, the Council had a net budget of £236 million which was spent on:

- vulnerable children and adults, (54%)
- economic development, tourism and support for children in schools and those with special educational needs (7%)
- housing, environmental health, planning, landscape, cleansing, school meals and crossings, bin collection and recycling, security and vehicle maintenance (16%)
- youth offending, substance misuse, early years, troubled families, support and short breaks for disabled children, family and children's centres, parenting services (6%)
- leisure, libraries and arts (4%)
- governance, legal, finance, ICT, personnel, business intelligence and performance and neighbourhood co-ordination (7%)
- insurances, levies and grants (6%)

Over the next two years the Council has to reduce its budget by around £50 million due to a combination of reduced government grants and the need to put aside £10 million to meet the increasing needs of older citizens. Such budgetary pressures will impact on the ability of services to respond to needs and this will focus the attention of commissioners and providers on the most effective way to deploy resources. Whilst resources are tight, with increasing budgetary pressures, there is real potential to achieve better outcomes through joined-up approaches to the commissioning and delivery of core services. This Strategy is intended to support such efforts across all partners through the pooling of resources and integrated commissioning. In doing so it endorses the process that commissioners use to secure the best service, care and support, at the best value for both individuals and the local population. It involves translating their aspirations and needs into services that:

- deliver the best possible health and well-being outcomes, including promoting equality;
- provide the best possible health and social care provisions; and
- achieve this with the best use of available resources.

The following sections set out the vision, priorities and strategic objectives for health and wellbeing.

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Section Three: Vision, Priorities and Strategic Objectives for Health and Wellbeing

During the last year the Council, partners and community organisations have been working together to develop a Vision for the Borough. Our vision is:

Together we are Sefton – a great place to be!

We will work as one Sefton for the benefit of local people,
businesses and visitors

Underpinning the Vision is our promise as agencies commissioning and delivering services in Sefton, to improve the health and wellbeing of everyone.

Our Promise

As commissioners and providers of services we will:

- put people at the heart of what we do
- listen, value and respect each other's views
- develop a culture of challenge, ownership, innovation and improvement
- be ambassadors for Sefton
- be responsive and efficient
- be clear about what we can and cannot do

As leaders we will:

- give direction
- be honest
- show confidence
- be bold
- be visible
- communicate
- inspire
- be accountable
- value People

We will work in partnership with the public, partners, providers, businesses, visitors to enable us all to:

- be responsible – everyone to take ownership of their lives
- respect each other
- have pride in the Borough
- get involved and have a say about the services that are delivered and the places in which we live and work
- challenge each other and question what we all do

This vision and promise sets out how we as collective agencies want to work with each other, and with our communities, to make Sefton a great place to be.

Setting strategic priorities for health and wellbeing

The factors which influence health and wellbeing outcomes and health inequalities are well documented, the latest findings of which can be found in the Marmot Report, 'Fair Society, Healthy Lives', February 2010. The health and wellbeing of Sefton's residents is affected by where they live, their environment, economic circumstances, social and family support, interaction with the local community, lifestyle choices that are made, community safety and access to appropriate services.

And as illustrated below, commissioners will need to think about the wider determinants of health in commissioning not only those traditionally defined as health and wellbeing services, but all services in the Borough.

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Making a difference to the health and wellbeing of the population is the responsibility and business of all. Action is required at the individual, family, community and service level to improve health outcomes and life chances.

We have defined the following broad criteria which have been used to determine the strategic objectives for health and wellbeing within this Strategy:

- These are agreed to be the most important from both evidence and what our communities have told us
- They require a multi-agency response
- They address the wider determinants of health such as air quality, road deaths, transport, noise, violence, housing, fuel poverty and the use of outdoor space. (Department of Health “Living Well for Longer – A call to action to reduce avoidable premature mortality”, March 2013) They will deliver the most benefit to the health and wellbeing of the population
- They will impact upon health inequalities
- They will have a positive preventative effect through promoting early and timely intervention, making every contact count

Strategic Priorities for Health and Wellbeing

The following strategic priorities are not in any rank order. They have been developed through both understanding the analysis of need and the feedback from our communities through the extensive consultation and engagement. These draft priorities are for the borough of Sefton, and through partnership working seek to deliver:

- healthy and well supported communities
- access to opportunities for all
- attractive and sustainable place and communities
- empowered and supported residents

Within each overarching strategic priority there are many objectives and actions that need to be taken by different organisations and partnerships to ensure that outcomes for the population of Sefton are improved and health inequalities are reduced. This Strategy identifies the specific strategic objectives which we believe will improve health and wellbeing and reduce health inequalities. Partners will commission and deliver services which focus on the above priorities. The Health and Wellbeing Board will focus its attention on the commissioning and delivering of services against its strategic objectives where the Board believes it can make a difference.

Strategic Objectives for Health and Wellbeing

The following are the proposed draft strategic objectives for health and wellbeing in Sefton:

- Ensure all children have a positive start in life
- Support people early to prevent and treat avoidable illnesses and reduce inequalities in health
- Support older people and those with long term conditions and disabilities to remain independent and in their own homes

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- Promote positive mental health and wellbeing
- Seek to address the wider social, environmental and economic issues that contribute to poor health and wellbeing
- Build capacity and resilience to empower and strengthen communities

The following sections outline the strategic objectives, why we chose the objective - based on evidence and what you told us.

The actions which underpin the achievement of the outcomes, described in this strategy, are ones we would want, as a Board, to encourage and work with a range of partners, stakeholders and individuals on to ensure that between us the actions we take will best achieve the outcomes for Sefton communities. These are not the only actions that the organisations represented on the Board will take – additional actions are described in our business plans and commissioning strategies and plans.

Importantly, we cannot deliver the actions on our own, and over the next 6 months we intend to work with partners, stakeholders and individuals to firm up these actions, and describe the actions we collectively together will take to improve outcomes for our communities.

We will describe how we will do this through a communications and engagement plan, which we will publish.

Within 6 months we will aim to report on progress in refining the actions within the strategy and the framework for assessing success. Thereafter we will undertake this review on an annual basis.

Strategic Objective: Ensure all children have a positive start in life

<p>We want to...</p>	<p>Ensure that children and young people, including those with complex needs and disabilities have the best opportunities in life to enable them to become healthy adults and make the best of their life chances.</p>
<p>What the Sefton Needs Assessment told us</p>	<p>Generally, health outcomes for Sefton’s children and young people are improving, but some are still below the England average</p> <p>Sefton’s breastfeeding initiation rates are rising but still comparatively low. Both initiation and duration rates are strongly linked to deprivation</p> <p>Whilst childhood smoking rates are average, alcohol consumption rates are higher than average</p> <p>The level of child poverty in Sefton has risen slightly from 21% to 21.8% in 2010 and is slightly worse than the English average of 21.3%.</p> <p>The numbers of births to non British born mothers is rising, particularly for Polish and Latvian born mothers</p> <p>Childhood Immunisation rates are generally either close to or above national averages.</p> <p>Obesity in Sefton is higher than national and regional estimates for reception year (ages 4-5) but lower for Year 6 (ages 10-11).</p> <p>7.9% of 16-18 year olds are not in education, employment or training (NEET) which has deteriorated by 1.28% from 2011</p> <p>There are 900+ children on Sefton’s voluntary disabled children register</p> <p>Sefton has successfully narrowed the inequalities gap in teenage pregnancy, however, post pregnancy the health of teenage mothers and their children continues to be poor</p>
<p>What you told us was important to you through consultation and engagement</p>	<p>Services provided from children’s centres which support vulnerable families and children, in particular those in the poorest neighbourhoods, affordable childcare and promote friendships and relationships</p> <p>The creation of training and volunteering that lead to real jobs for all young people</p> <p>Access to affordable childcare, decent affordable housing with support for care leavers and young parents</p>

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	<p>Children and young people, in particular care leavers, want to be listened to and for this to be consistent</p>
<p>What we are seeking to do</p>	<p>Commission services that deliver high quality pre and post natal care, early years and healthy childhood services, that promote and sustain breastfeeding and provide support for teenage parents</p> <p>Promote and support a healthy balanced diet for children and young people at home and in school (including the provision of breakfast) to reduce obesity</p> <p>Support the provision of after school, school holiday and youth activity clubs that promote health and wellbeing and reduce negative risk taking behaviours e.g. smoking, drinking alcohol, and becoming parents</p> <p>Ensure children and young people feel safe and are protected, and that accessible and appropriate information and education is available to support this.</p> <p>Target, as appropriate, to parents, carers, prospective parents and teenage parents through the offer a parenting service which is based on education and support</p> <p>Ensure appropriate and early assessments of children and young people provide for, and work with, parents to improve health and wellbeing outcomes</p> <p>Review the number of children’s residential care beds and increase the number of foster parents</p> <p>Ensure schools are aware of, and use, their unique role in influencing and enabling better health and wellbeing for children, including support for children with special educational needs, in-school counselling and family therapy services and the role of School nurses in focussing on Health and Wellbeing messages in their work</p> <p>Undertake training and development with School Governors and other colleagues to promote Health and Wellbeing</p> <p>Encourage children to have aspirations and to achieve through their work in schools, college and training, linked to support in the labour</p>

	<p>market</p> <p>Seek to mitigate, as far as possible, the potential effects of Welfare Reform on children, minimising where possible child poverty</p> <p>Work with schools to ensure all food and meals provided by Sefton MBC meet the quality standards (mandating guidelines), and bring back into use school kitchens to promote healthy eating, develop more opportunities to promote breakfast clubs and safe routes with school crossing patrols.</p> <p>Work to ensure integrated working to deliver the objectives and outcomes for children and young people as described in the South Sefton and Southport and Formby Clinical Commissioning Groups 'Everyone Counts - Planning for Patients' and the Integrated Commissioning Plan for Health and Wellbeing in Sefton.</p> <p>Develop a coherent approach to supporting children and young people to be listened to in designing, delivering and reviewing services</p>
<p>What will be the outcomes</p>	<p>Children and young people will have good physical and emotional health and wellbeing and will lead healthy lifestyles</p> <p>Children and young people will be safe</p> <p>Children and young people will be aspirational and achieving through the enjoyment of going to school and college</p> <p>Parents will have the skills, support and infrastructure to enjoy being parents</p> <p>Children and young people will have a voice, will be listened to and their views will influence service design, delivery and review</p>

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Strategic Objective: Support people early to prevent and treat avoidable illnesses and reduce inequalities in health

<p>We want to...</p>	<p>Narrow the gap between those neighbourhoods and communities with the best and the worst health outcomes, whilst improving the health of all</p>
<p>What the Sefton Needs Assessment told us</p>	<p>Sefton has higher than average levels of long term conditions, with almost one quarter of Sefton being classed as belonging to the 20% most deprived area of England.</p> <p>There are wide variations in deprivation levels across Sefton, some masked when looking at deprivation levels for the whole area. Sefton is ranked 92 out of 326 authorities in the 2010 Index of Deprivation (1 is most deprived).</p> <p>25% of school children in Sefton receive free school meals, slightly lower than the England average of 26%</p> <p>There are currently 7 JSA claimants in Sefton for every Job Centre Plus vacancy</p> <p>Sefton generally has slightly higher levels of diagnosed long term conditions than average. Asthma, kidney disease, Chronic Heart Disease, dementia, diabetes and hypertension may be under diagnosed in the population. Almost half of the population of Sefton may be classified as overweight or obese.</p> <p>On average, men are living for nearly 77 years, women are living for nearly 81 years; however, it remains the case that men living within 3 miles of each other (Seaforth to Maghull) could have a difference in life expectancy of 11 years.</p> <p>Whilst Sefton's rate of admissions is lower than other Merseyside LAs, alcohol related hospital admissions continue to rise.</p>
<p>What you told us was important to you through consultation and engagement</p>	<p>Continue to promote physical activities, healthy lifestyles and healthy food, although healthy food is expensive</p> <p>Primary health services need to be local and accessible, reduce waiting times for GP appointments, accessible walk in centres, focus on early diagnosis to prevent cancer, heart disease and stroke and improve falls prevention services</p> <p>Equality of access to drug treatment and mental health services</p> <p>Walk in Centre centres are more flexible in meeting health needs however key issue of access due to location</p> <p>Find different ways to support people early to avoid them needing</p>

	expensive acute services and surgical procedures
<p>What we are seeking to do</p>	<p>Encourage the adoption and maintenance of healthy life styles across all ages by building on achievements in smoking cessation, obesity reduction and increasing physical activity</p> <p>Increase availability and promotion of health screening services and expand the roles of health professionals</p> <p>Deliver an integrated drug and alcohol prevention and treatment service that focuses on early intervention and addresses the needs of people with mental health needs</p> <p>Identify those people at risk of poor health outcomes early and intervene appropriately to reduce the widening gaps in life expectancy</p> <p>Develop and implement primary prevention programmes in general practices to prevent and treat avoidable illnesses and improve health outcomes</p> <p>Provide access to understandable, appropriate information and advice on how to prevent long-term conditions</p> <p>Recognise the value of clean, safe, healthy environments in promoting Health and Wellbeing, and encourage and promote the health benefits through the use of natural, physical and other assets (Park, Countryside and Coast)</p> <p>Work with schools to open up access to school playing fields outside of school hours</p> <p>Develop a programme of social prescribing to signpost early to leisure activities</p> <p>Use the statutory, environmental compliance regimes to protect, and where resources allow, improve the health and wellbeing of the public</p> <p>Deliver Sefton’s Economic Strategy to increase employment and training opportunities</p>

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	<p>Progress and implement Sefton's Local Plan</p> <p>Work to ensure integrated working to deliver the objectives and outcomes for children and young people as described in the South Sefton and Southport and Formby Clinical Commissioning Groups 'Everyone Counts - Planning for Patients' and the Integrated Commissioning Plan for Health and Wellbeing in Sefton.</p>
What will be the outcomes	<p>There will be effective prevention and early intervention with people being empowered to determine their own outcomes through the experience of quality services</p> <p>There will be improved health and wellbeing against the wider factors that lead to poor health and wellbeing</p> <p>There is education, skills and support for people to change their lifestyles and to do things for themselves</p> <p>The population is protected from incidents and other threats, including infectious diseases, accidents, excess winter deaths whilst reducing health inequalities</p>

Strategic Objective: Support older people and those with long term conditions and disabilities to remain independent and in their own homes

<p>We want to...</p>	<p>Support people to remain independent and healthier for longer through early support and care close to home</p>
<p>What the Sefton Needs Assessment told us</p>	<p>Sefton already has a sizeable population of older people and it is growing; more people over 65 (3,500) and over 85 (2,700) since 2001.</p> <p>An increasingly elderly population are more likely to attend A&E and be admitted to hospital as a result of falls – estimated 28% more by 2030.</p> <p>The number of people receiving direct payments is increasing, as is the rate of households receiving intensive homecare</p> <p>Based on the 2001 census there are 6,600 carers in Sefton aged over 65 and the numbers receiving a needs assessment or review are rising. Estimation of 34,500 providing unpaid care</p> <p>By 2030, it is projected that 34% more people aged 65 and over will have dementia, which will impact on their wider health and their care needs.</p> <p>Deaths at home in Sefton are rising and Sefton’s rate of deaths at home is better than comparable LAs and is similar to other north Mersey LAs</p> <p>The areas of highest income deprivation affecting older people are concentrated in the south of the Borough, and with pockets in central Southport.</p> <p>By 2015, over 2,300 people are forecast to be living in a care or nursing home – this will rise by over a quarter by 2030.</p>
<p>What you told us was important to you through consultation and engagement</p>	<p>Promote services and lifestyles that allow older people to remain in their homes and the community longer</p> <p>There are considerably more carers in the borough aged over 65 years than shown in the 2001 Census data (6,600). The 2001 Census revealed that there may be as many as 32,000 unpaid carers in Sefton. Ensure early and effective support for those diagnosed and suffering with dementia</p> <p>Effective support network for all carers, and identify those through effective Health Service monitoring. Effective support network for older people generally, and ensure that through it they maintain their “voice”</p> <p>Maintaining independence by supporting people to remain well, with care close to home, improvement of primary care through virtual wards, good access to public transport and early intervention, prevention and</p>

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	diagnosis for those with limiting long term illness and / or disabilities
What we are seeking to do	<p>Support the building of capacity and resilience in voluntary, primary and community services to reduce reliance on secondary care and encourage the development and use of friendship groups and lunch clubs</p> <p>Seek to deliver care closer to home with organisations working more closely together to improve community services and support.</p> <p>Facilitating closer organisational and multi-disciplinary team working; in order to prevent inappropriate hospitalisation and ready access to healthcare.</p> <p>Work together to increase the number of people utilising Direct Payments, thereby giving them more choice and control over the services they purchase and the care they receive</p> <p>Working collaboratively in integrated services to support and improve recovery from fragility fractures, strokes, and long term conditions</p> <p>Improve people’s ability to reach their best possible level of independence by redesigning re-ablement services in different local settings</p> <p>Work to provide an integrated approach to hospital discharge and the provision of support and care in the home, to enable people to recover more quickly and reduce the numbers of people returning back to hospital</p> <p>Seek to ensure the availability of regular, early health assessments and checkups, and expand the roles of health professionals</p> <p>Continue to assess the needs of carers and seek to meet their needs to reduce the number of people needing secondary hospital care</p> <p>Educate for, and encourage, early identification of conditions and available help, including access to supported self management programmes and technology</p>

	<p>Informed advice and information on choices and services is available, and offered appropriately</p> <p>Work to ensure all services are joined up and continuity of help and support is available dependant on the needs of individuals</p> <p>Facilitate the involvement of older people in the identification of long term conditions and use their skills and experience of the health and social care system to improve things</p> <p>Undertake targeted public health campaigns and innovative ways of involving health care professionals</p> <p>Encourage and provide a system for families and carers to feedback their experiences of end of life services, and develop systems accordingly</p> <p>Undertake mapping of all end of life services, identify gaps in service provision and develop system change as required</p> <p>Deliver Sefton's Economic Strategy to promote economic wellbeing</p> <p>Develop and implement a new Housing Strategy for Sefton</p> <p>Target greater use of existing natural resources, such as parks, the coast and other assets</p> <p>Introduce a range of quality assisted technologies to enable people to live independently in their own home</p> <p>Introduce additional safety monitoring and security to promote a service of security in the home</p> <p>Review and refresh the Carers Strategy, to include the development of appropriate pathways in primary care to both early assessment and support services</p> <p>Work to ensure integrated working to deliver the objectives and outcomes for children and young people as described in the South</p>
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	Sefton and Southport and Formby Clinical Commissioning Groups 'Everyone Counts - Planning for Patients' and the Integrated Commissioning Plan for Health and Wellbeing in Sefton.
What will be the outcomes	<p>There will be system wide improvements across social care and care pathways, supported with access to information about early diagnosis and prevention</p> <p>There will be effective management of long term conditions for all adults, including mental health and dementia</p> <p>There will be outstanding end of life services</p> <p>There will be access to information about early diagnosis and prevention services</p> <p>There will be increased physical, emotional and economic wellbeing</p> <p>There will be access to appropriate, high quality housing across Sefton.</p>

Strategic Objective: Promote positive mental health and wellbeing

<p>We want to...</p>	<p>Enable good child and adult mental health through effective, accessible mental health promotion and early intervention services.</p>
<p>What the Sefton Needs Assessment told us</p>	<p>Over 1 in 6 of Sefton’s population could be suffering from depressive episodes, mixed anxiety and depression or generalised anxiety – generally only around half of cases are doctor diagnosed. This compares to less than 1 in 8 in England as a whole.</p> <p>The 2010 Sefton Lifestyle Survey reported that nearly one third of respondents have low mental well being; this compares well with two previous Citizens Panel surveys, however, the 2009 North West Well Being Survey produced higher levels of high mental well being, particularly for the NW.</p> <p>Mental well being is strongly related to deprivation. Respondents from the most deprived quintile are almost twice as likely to have low mental well being as respondents from the least deprived quintile</p> <p>Compared to England, Sefton had 10 excess deaths due to mental health conditions – this figure has fallen in recent years. However, mental health is the biggest cause of ill health (loss of healthy life years).</p> <p>In 2009/10, Sefton spent approximately £10m on inpatient and secure mental health hospital services, with another £26m on community based services. Over a three year period, 56% of hospital spells were repeat admissions – 15 patients accounted for 189 admissions.</p>
<p>What you told us was important to you through consultation and engagement</p>	<p>Equality of access to mental health and drug treatment services</p> <p>Use of language in describing mental health could be improved</p> <p>Alcohol and drugs have a specific role to play in terms of mental health</p> <p>People should be encouraged to admit problems and seek help early</p>

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<p>What we are seeking to do</p>	<p>Undertake a mapping exercise of all Mental Health Services, including the Dementia Strategy and Service Review Plan, to seek to ensure they are fit for purpose</p> <p>Facilitate help and support, such as drug and alcohol treatment services, are linked to Mental Health provision, and the availability of Psychotherapy support within local settings</p> <p>Raise awareness of all services available, and access to relevant information so users can feel empowered to support themselves and their families</p> <p>Re-engage into community settings low-level services and interventions</p> <p>Facilitate access to routes and pathways for engagement with mental health services including a proportionate distribution of services throughout the Borough</p> <p>Develop Workforce Charters to help staff focus on their own and their community's Health and Wellbeing needs</p> <p>Work to ensure integrated working to deliver the objectives and outcomes for children and young people as described in the South Sefton and Southport and Formby Clinical Commissioning Groups 'Everyone Counts - Planning for Patients' and the Integrated Commissioning Plan for Health and Wellbeing in Sefton.</p>
<p>What will be the outcomes</p>	<p>The infrastructure will be place so that all people can access information, preventative and treatment services</p> <p>People will be empowered, have a sense of purpose and take care of themselves and their family</p> <p>The mental health services that are commissioned will be fit for purpose</p> <p>We will have stronger communities involved in their own wellbeing and wider community's mental health services</p> <p>There will be an increase in physical and emotional health and wellbeing</p>

Strategic Objective: Address the wider social, environmental and economic issues that contribute to poor health and wellbeing

<p>We want to...</p>	<p>Address poor health and wellbeing outcomes which are often a reflection of wider social, environmental and economic inequalities present in society, such as high levels of unemployment (particularly long-term), low skill levels, dependence on benefits and social housing. We will seek to improve outcomes for our most deprived residents. Seek ways to improve places so that people are able to live, work and spend their leisure time in a safe and healthy environment.</p>
<p>What the Sefton Needs Assessment told us</p>	<p>Almost 60% (113) of 190 LSOAs that make up Sefton have had a reduction in deprivation, a further 16% (31) have had no change, although for 24% (46) the deprivation has worsened. Most significantly, of the 46 LSOAs that were among the most deprived 20% within Sefton in 2004, 28% (13) not only remain among the most deprived areas, but are becoming more deprived.</p> <p>The number of JSA claimants within Sefton as of January 2013 is 8,570, accounting for 5.1% (1 in 20) of the working age population, proportionally higher than both the North West (4.4%) and Great Britain (3.8%) averages.</p> <p>There were a total of 32,260 benefit claimants of working age in Sefton during May 2012, which represents an increase of almost 9% (2,630) in five years.</p> <p>Despite population reductions within Sefton the housing stock within the area has increased by 2.5% between 2001 and 2011 to 123,830. The proportion of properties within Sefton that are rented from either Local Authority or Registered Social Landlord (RSL) has reduced</p> <p>In crime, Rowdy / Inconsiderate Behaviour accounts for 58% of all ASB in the Borough and is predominantly youth related (80%).</p> <p>Those accessing Drug Services show that the number of Opiate and Crack Users in the 45+ age category increased year on year indicating an ageing user population</p> <p>There are lots of parks and green spaces in Sefton, however, there is a pressure for space to build new housing</p>
<p>What you told us was important to you through consultation and engagement</p>	<p>More Police foot patrols especially in certain parts of the Borough</p> <p>Provide and maintain parks and green open spaces</p> <p>Access to work, training and volunteering for all ages and abilities, training that leads to real jobs</p>

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	<p>Access to affordable, good quality housing with support for care leavers and young parents</p>
<p>What we are seeking to do</p>	<p>Work to develop services so they are provided close to public transport hubs, and improve transport services throughout the Borough, especially between the East and West of the Borough</p> <p>Improve disabled access in transport and all infrastructure, within the bounds of legislation</p> <p>Encourage access to affordable housing and good housing standards, including policies around affordable rents, affordable heating, and energy efficiency</p> <p>Ensure the Health and Wellbeing Strategy/Plan works with other relevant co-terminous plans, such as Seton’s Local Plan</p> <p>Support businesses to encourage growth, including policies around lower business rates</p> <p>Raise awareness and create demand for fruit and vegetable co-operatives and mobile shops, supported by capacity and education</p> <p>Encourage and support access to leisure and sports facilities throughout the Borough and continued active participation in sports</p> <p>Provide career advice and setting up entrepreneurial networking and raise awareness that volunteering is an activity in itself</p> <p>Encourage and assist with credit union development, and offer advice on all money matters</p> <p>Support people outside of the labour market with relevant advice</p> <p>Work to reduce perceptions of Anti-Social Behaviour, gang and gun crime, maintain Police foot patrols, and manage impacts of incidents to make the community feel safe, especially during the hours of darkness</p> <p>Progress and implement Sefton’s Local Plan and Sefton’s Economic Strategy</p>

	<p>Maintain the quality of park and open spaces, encouraging public usage, involvement and ownership and ensure actions of the Carbon Management Plan and good local environmental quality are maintained</p> <p>Work to ensure integrated working to deliver the objectives and outcomes for children and young people as described in the South Sefton and Southport and Formby Clinical Commissioning Groups 'Everyone Counts - Planning for Patients' and the Integrated Commissioning Plan for Health and Wellbeing in Sefton.</p>
<p>What will be the outcomes</p>	<p>The appropriate infrastructure is in place to improve opportunity, maintain health and wellbeing and the quality of life for all</p> <p>There will be improved access to services and information for all, including leisure facilities, parks and open spaces</p> <p>There will be opportunities to access new skills, training enterprise, employment and progression</p> <p>There is infrastructure and investment is in place to improve opportunity, maintain health and wellbeing and quality of life for all</p> <p>There will be access to high quality housing across Sefton.</p>

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Strategic Objective: Build capacity and resilience to empower and strengthen communities

<p>We want to...</p>	<p>Support residents to make choices for their own lives, by commissioning and delivering the most effective services to support capacity and resilience of our Communities</p>
<p>What the Sefton Needs Assessment told us</p>	<p>Since 2008 Sefton Council have commissioned an independent market research survey which looks at levels of community cohesion within each of areas that make up the Borough. Major headline results from the surveys reveal:</p> <p>Across Sefton as a whole almost 80% of residents surveyed say they are either very or fairly satisfied with their local community as a place to live. Despite the current financial situation across the Borough and the reductions in some services as result, this has improved slightly from 77% when the survey began.</p> <p>Across Sefton 60% of residents say they would get involved in sorting out a local issue if asked to do so by a local organisation. However, despite a willingness to get involved in sorting out local problems only 44.6% of Sefton residents feel they can have an influence in the decision making process for issues affecting their local areas</p> <p>Further, there are clear differences in feelings of belonging, with the more deprived areas in the South of the Borough showing significantly lower levels, with feelings of belonging ranging than other areas - from a little over half of residents in Litherland and Ford to almost three quarters in Formby</p>
<p>What you told us was important to you through consultation and engagement</p>	<p>Services provided from Children’s Centres which support vulnerable families and children, in particular those in the poorest neighbourhoods, affordable childcare and promote friendships and relationships</p> <p>Provide help for local people to help keep their streets clean</p> <p>Combat social isolation through access to local services, accessible information and support networks</p> <p>Accessible community information and support is needed for people leaving prison and their families, families on benefits and the impact of welfare reform, carers, people with disabilities, for people for whom English is not their first language and to support people to manage their own conditions</p> <p>Ensure people feel safe to go out at night, especially in some parts of</p>

	<p>the Borough through effective policing and reassurance</p> <p>Provide and promote services to “give people a voice”</p>
<p>What we are seeking to do</p>	<p>Support Voluntary Community Services infrastructure, and seek alternative sources of funding and new ways of working with the Sector</p> <p>Work to ensure effective signposting services are available and delivered on a collaborative basis</p> <p>Support actions that give greater access on digital inclusion and ensure digital inclusion services are available in community clinics, schools, libraries and across a wide range of VCF venues</p> <p>Develop Workforce Charters to help staff focus on their own and their community’s Health and Wellbeing needs</p> <p>Maximise the use of “Digital marketing”, most notably for older and vulnerable residents</p> <p>Explore the way primary care works by improving access to primary care through a good skill mix on offer in practices and the extended primary care team</p> <p>Explore the potential to pilot within one locality a new model of Primary Care</p> <p>Work to ensure effective actions on tackling Social Side Isolation, including support for provision of older residents clubs/services, support services for carers, prisoners and residents whose English is not their first language</p> <p>Work with the partner organisations to reduce incidents of individual loneliness by identifying those at risk and promoting support networks or design new ones in association with service users.</p> <p>Work to reduce perceptions of Anti-Social Behaviour, gang and gun crime, maintain Police foot patrols, and manage impacts of incidents to make the community feel safe, especially during the hours of darkness</p>

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	<p>Encourage intergenerational projects and diversionary activities for young people to strengthen community cohesion</p> <p>Support the further development potential of community and voluntary sector assets and providers</p> <p>Create access to employment services and training, including community based “apprenticeship” style programmes for young people, and support for older people re-accessing employment opportunities</p> <p>Work to ensure integrated working to deliver the objectives and outcomes for children and young people as described in the South Sefton and Southport and Formby Clinical Commissioning Groups ‘Everyone Counts - Planning for Patients’ and the Integrated Commissioning Plan for Health and Wellbeing in Sefton.</p>
<p>What will be the outcomes</p>	<p>There will be stronger communities involved in and responsible for their own wellbeing and of the wider community with reduced dependency on services</p> <p>There will be Improved access to services and information for all, including leisure facilities, parks and open spaces</p> <p>The value of clean, safe, healthy environments in promoting health and wellbeing will be recognised</p> <p>The health benefits of borough wide activities through parks, the coast and countryside will be valued, encouraged and promoted</p> <p>Increase the physical and emotional health and wellbeing of all residents</p> <p>There are clean safe environments and quality of place</p>

Conclusion

The nature of the health and wellbeing issues referred to in this Strategy can only be addressed through well coordinated, collaborative action. Action is required at the level of the individual taking responsibility for his or her health and wellbeing to the best of their ability through to jointly commissioned services providing a “whole system” response to complex health and social care needs. Alongside its focus on health inequalities this strategy is also highlighting the importance of ensuring that the wider determinants of health, and the cause of ill health, are taken into account when commissioning services. The five steps to wellbeing and the recognition of the social value that commissioned services can bring are crucial to promoting and maintaining the health and wellbeing of young and older people alike. It is appropriate that this is recognised and reflected in commissioning intentions.

The Health and Wellbeing Board will seek to hold commissioners to account on the extent to which the strategic objectives for Health and Wellbeing defined within this Strategy are reflected in commissioning plans, and performance managed as appropriate. What we need to be able to do is judge whether commissioners are commissioning the right things, and where they are not be bold enough to decommission, stop or commission new things.

This Strategy will be reviewed on an annual basis and local people, partners and providers of services will be involved in this review.

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Appendix One

Broad Commissioning Model for Health and Wellbeing

The Health and Wellbeing Board endorses a commissioning model that systematically draws on the intelligence available from a number of sources. The Board expects commissioners, in finalising commissioning plans, to have addressed the following key questions:

- How healthy is the community relative to reliable benchmarks?
- What information has been considered and assessed in respect of the efficiency of health and social care services and their effectiveness in delivering the right care that avoids duplication and promotes integration of health and social care services?
- What does it cost and are we maximising value for money with the best selection of acute and community interventions?
- How do we compare with other areas in terms of outcomes, productivity and value for money?
- Are provider services providing the services that were commissioned and are they performing to plan?
- What improvements could be made through service and pathway redesign?
- What do service users tell us about the impact, effectiveness and value of our services?
- What are our future plans and are health, social care and council service objectives in alignment?

Appendix Two

Sefton's Health and Wellbeing Board

The Sefton Health and Wellbeing Board was formed in shadow form in June 2011, and on 1st April 2013 became a formal Committee of Sefton Council. The membership of Sefton's Health and Wellbeing Board is (as of 1st April 2013):

Councillor Ian Moncur, Cabinet Member for Children, Schools, Families, Sefton Council (Chair)

Councillor John Kelly, Sefton Council

Councillor Paul Cummins, Cabinet Member for Older People and Health, Sefton Council

Dr. Niall Leonard, Chair, NHS Southport and Formby Clinical Commissioning Group

Dr. Clive Shaw, Chair, NHS South Sefton Clinical Commissioning Group

Fiona Clark, Chief Officer, NHS South Sefton and NHS Southport and Formby Clinical Commissioning Groups

Colin Pettigrew, Director of Young People and Families, Sefton Council

Robina Critchley, Director of Older People, Sefton Council

Janet Atherton, Director of Public Health, Sefton Council

Phil Wadeson, Local Area Finance Director, Merseyside Commissioning Board

Chair of Healthwatch, Sefton (Subject to references)

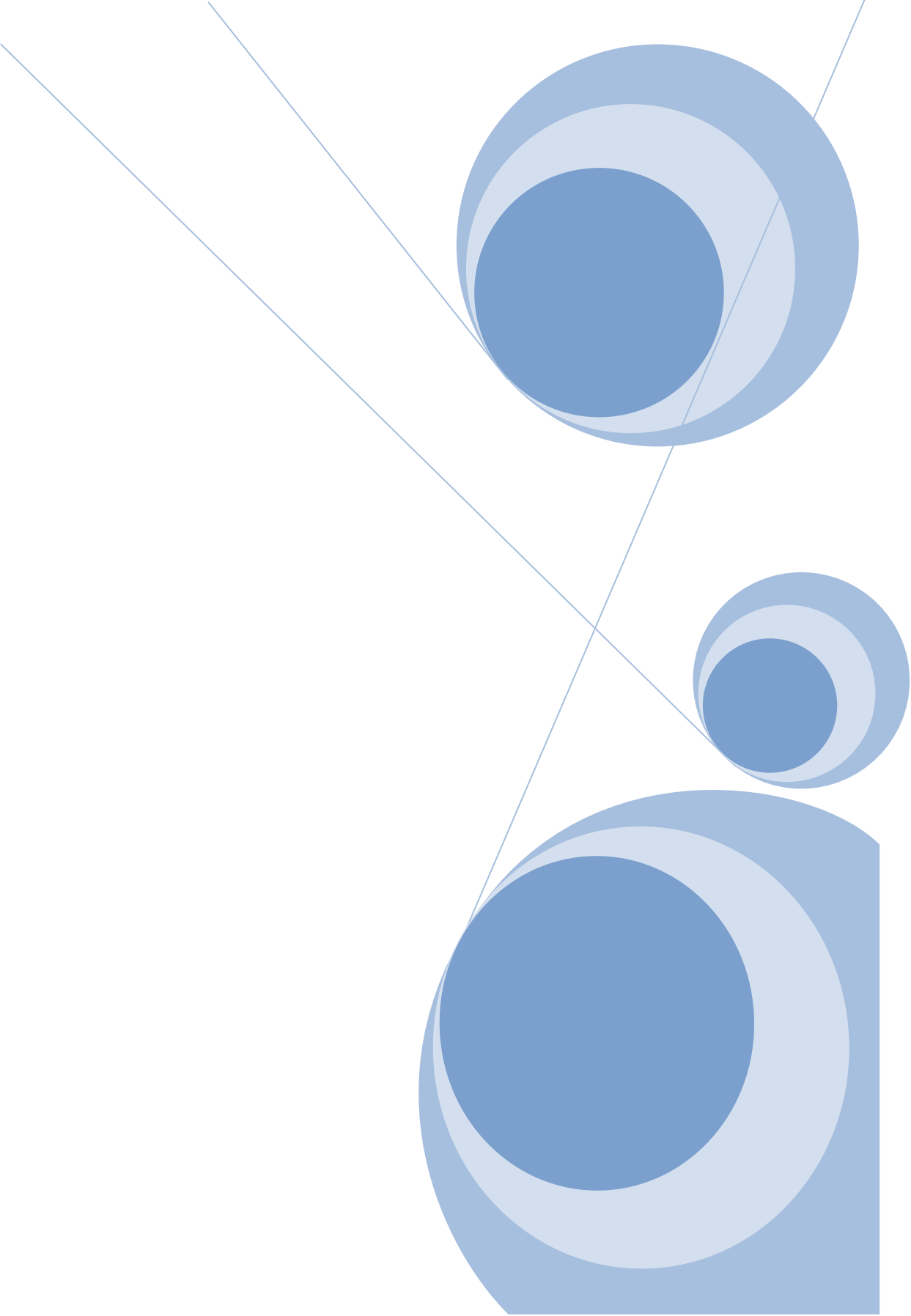
The Shadow Board recognised the contribution played by Paul Acres, representative of NHS Merseyside, Margaret Carney, Chief Executive and Peter Morgan, Strategic Director of People, Sefton Council who, as of 31st March 2013, stood down from the Shadow Board, to enable the newly formed Board to take effect.

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The role of the Health and Wellbeing Board is to:

- encourage integrated working between commissioners of health services, public health and social care services.
- encourage those who provide services related to wider affects of health, such as housing, to work closely with the Health and Wellbeing Board.
- lead on the Joint Strategic Needs Assessment (JSNA) and Joint Health and Wellbeing Strategy (JHWS) including involving users and the public in their development.
- be involved throughout the process as Clinical Commissioning Groups develop their commissioning plans and ensure that they take proper account of the Joint Health and Wellbeing Strategy when developing these plans.

The Board also undertook a formal role in authorising and establishing Clinical Commissioning Groups. Completed in early 2013.



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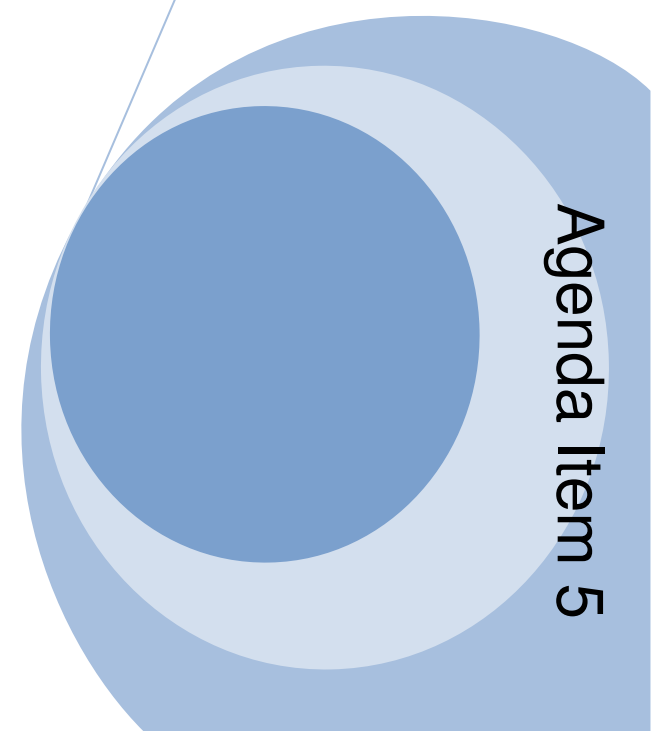
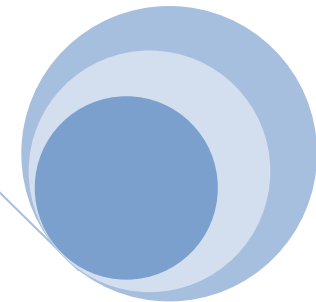
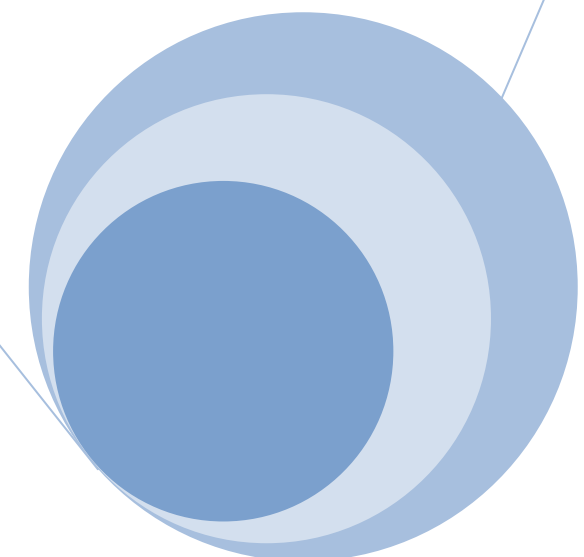
Sefton's Health and Wellbeing Strategy 2013 - 2018

Equality Analysis Report

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March 2012



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Section One : Introduction

The Equality Act 2010

In order to meet equality legislation public bodies have to consider Section 149 of the Equality Act 2010:

A public authority must, in the exercise of its functions, have due regard to the need to –

- (a) Eliminate discrimination, harassment, victimisation and any other conduct that is prohibited by or under this Act;*
- (b) Advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it;*
- (c) Foster good relations between persons who share a relevant protected characteristic and persons who do not share it.*

Protected Characteristics

Equality Law (Equality Act 2010) is clear that there are particular characteristic intrinsic to an individual against which it would be easy to discriminate. Section 149 (the Public Sector Equality Duty) lists the goals of the act and the characteristics, known as ‘protected characteristics’ against which we have to test for discrimination. These characteristics are gender, race/ ethnicity, religion and belief, sexual orientation, age, gender reassignment, pregnancy and maternity and disability.

Tackling Inequalities

The Marmot review; 'Fair Society, Healthy Lives', published in 2010, confirmed that health inequalities result from social inequalities and that action is required across all the wider determinants. The review identified the need for action to focus on reducing the gradient in health by focusing on those most in need.

In Sefton we have a strong commitment to promoting equality, tackling disadvantage and improving the life chances of our residents. We are aware that many factors combine to affect the health and wellbeing of individuals and communities. While health care services have an impact, other factors such as where people live, income, education, life experiences, behaviours and choices, along with relationships with friends and family, all have a considerable impact.

Sefton's Joint Health and Wellbeing Strategy

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The development and publication of the Health & Wellbeing Strategy is a statutory duty under the Health and Social Care Act 2012. The purpose of the Strategy is to inform commissioning decisions across local services focussing on the needs of service users and communities based on evidence provided in the Sefton Strategic Needs Assessment (also known as the Joint Strategic Needs Assessment, JSNA).

Local authorities, Clinical Commissioning Groups (CCGs) and the NHS Commissioning Board will need to take the Sefton Strategic Needs Assessment and Joint Health & Wellbeing Strategy into account when producing commissioning plans so that their plans are fully aligned with the jointly agreed priorities in the Joint Health and Wellbeing Strategy.

The Health & Wellbeing Strategy has been agreed by the Shadow Health & Wellbeing Board in March 2013.

The Shadow Health and Wellbeing Board, as a local authority committee from April 1st 2013, must show due regard to the Equality Act 2010 and demonstrate through the process of producing, publishing and updating both the Sefton Strategic Needs Assessment and the Joint Health and Wellbeing Strategy how it meets the Public Sector Equality Duty. This equality analysis report is part of that process.

How we developed the Health and Wellbeing Strategy for Sefton

In July 2012 the Shadow Health and Wellbeing Board published the Sefton Strategic Needs Assessment (also known as the Joint Strategic Needs Assessment). Throughout the summer and early autumn a wide range of engagement and consultation events took place with local communities, partners, voluntary, community and faith sector and other stakeholders to test out the validity of what the Strategic Needs Assessment was telling us about Sefton.

This engagement and consultation informed the setting of the overall strategic priorities outlined in this Draft Joint Health and Wellbeing Strategy.

The full report on the outcomes of the consultation and engagement can be found at www.sefton.gov.uk

Following this first stage of consultation, draft strategic objectives were developed and a second phase of consultation took place between November 2012 – February 2013 to feedback on the findings of the Strategic Needs Assessment consultation and to seek views on the draft strategic objectives.

Strategic Objectives

The Shadow Health and Wellbeing Board for Sefton have defined the following strategic objectives for Health and Wellbeing in Sefton. These have been developed through both understanding the needs of the population and what the public, community organisations and groups, commissioners and providers of services told us during the consultation and engagement process.

The strategic objectives for Health and Wellbeing in Sefton are:

- ensure all children have a positive start in life
- support people early to prevent and treat avoidable illnesses and reduce inequalities in health
- support older people and those with long term conditions and disabilities to remain independent and in their own homes
- promote positive mental health and wellbeing
- seek to address the wider social, environmental and economic issues that contribute to poor health and wellbeing
- build capacity and resilience to empower and strengthen communities

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 Seeking to address the objectives set out above, and to ensure that our work, and that of our wider partners, is holistic and consistent (both in delivery and commissioning), the following set of principles have been adopted by Sefton’s Shadow Health and Wellbeing Board :

We will....

- build on the many assets and resources that are available, including social value
- enable early intervention and prevention through robust arrangements for identifying those with needs, and predicting those whose needs may emerge due to changes in national policy such as the Welfare Reform and the Troubled Families programme
- address health inequalities and equity of access to narrow the gap between different neighbourhoods and communities
- secure value for money and consistency in the quality of care and support

- tackle the wider determinants that contribute to ill health
- demonstrate integrated health and social care service solutions, including the wider contribution other Council departments and partners can play
- deliver discernible improvements to the agreed defined outcomes in this Strategy
- make good use of existing strategic partnerships to address complex health and social care issues
- use the authority of the Health and Wellbeing Board to enable and encourage partners to work together

Section Two: Identifying Impacts across Protected Characteristics

In considering the impact of the Joint Health and Wellbeing Strategy, the following analysis has been undertaken across the Strategic objectives:

Protected characteristic	What the Strategic Needs Assessment and consultation told us	Linked Strategic Objective(s)	Next Steps
<p>Gender</p> <p style="writing-mode: vertical-rl; transform: rotate(180deg);">Page 88</p>	<ul style="list-style-type: none"> • The Sefton Strategic Needs Assessment highlighted the difference in the average life expectancy for men and women. At a Sefton level the average life expectancy for men is 77 years and for women 82 years. The assessment also identified significant differences to life expectancy depending on where you live. The average life expectancy for men living in Church Ward is 71 years and for women in Linacre Ward 75.7 years. • Breastfeeding rates for Sefton, whilst improving, are still comparatively low. Both initiation and duration rates are strongly linked to deprivation. • Births to non British born mothers are rising, particularly for polish and Latvian born mothers. 	<ul style="list-style-type: none"> • Ensure all children have a positive start in life • Support people early to prevent and treat avoidable illnesses and reduce inequalities in health • Support older people and those with long term conditions and disabilities to remain independent and in their own homes 	<p>Feedback from the consultation and engagement process has been provided to the Shadow Health and Wellbeing Board to be considered when developing the Joint Health and Wellbeing Strategy and Action Plan</p>

Protected characteristic	What the Strategic Needs Assessment and consultation told us	Linked Strategic Objective(s)	Next Steps
Age	<ul style="list-style-type: none"> • There are 900+ children on Sefton’s voluntary disabled children’s register • Alcohol rates for young people are higher than average. • There has been little change in the percentage of low, and very low, birth weight babies over the last decade. • Sefton has the highest proportion of residents aged over 65 and over 75. The population is projected to increase by 15,000 by 2035, the majority being aged over 65 years. • The overall health and wellbeing of a child, young person or adult is greatly influenced by where they live. <p>Young people told us that the following are important to them:</p> <ul style="list-style-type: none"> • Leisure - more youth facilities are needed across the borough. They would like the skate park in Southport to be improved and young people in Southport value the Coast. Across the borough young people value parks 	<ul style="list-style-type: none"> • Ensure all children have a positive start in life • Support people early to prevent and treat avoidable illnesses and reduce inequalities in health • Support older people and those with long term conditions and disabilities to remain independent and in their own homes • Seek to address the wider social, environmental and economic issues that contribute to poor health and wellbeing • Build capacity and resilience to empower and strengthen communities 	<p>Feedback from the consultation and engagement process has been provided to the Shadow Health and Wellbeing Board to be considered when developing the Joint Health and Wellbeing Strategy and Action Plan</p>

- **Community Information & Support** - Young people would like to do more active things, but often don't know about facilities, e.g. bikes/skating/swimming/football. The cost of hiring sports complexes, i.e. football pitches is also a barrier
- **Work and Training** – young people need experience to get a job but it is difficult to get experience
- Important to give children and young people a **positive start**
- Good to find out illness early before it gets too late or too critical
- **Support the elderly**
- Youth centres **open more** and more activities to keep off the streets
- **Safer communities**
- Better use of buildings and involving young people in renovating them to help **develop skills**
- Support and **investment** for young people's futures

Children in care and care leavers told us:

- **Housing** - Good quality affordable housing

is important as young people move into accommodation at a young age. Keeping tenancies is not always possible without support. Experience of poor quality housing which was damp.

- **Work and Training** – lack of appropriate training for the jobs that are available. People are being trained for jobs that are not there
- **Wellbeing & Health** – The importance of healthy food and vegetables, but healthy food is not cheap. Free fruit and vegetables would help. More Walk in Centres are needed – they are more likely to be used than GP surgeries as the hours are more flexible. Found it difficult to access the existing walk-in centres from Southport as transport was poor
- **Choice & Control** - Young People are being listened to but this needs to happen consistently. Services need to signpost young people to the correct services straight away... not ‘passed from pillar to post’
- **Community Information & Support** - Support financially for first-time/young parents with rent and childcare costs for young parents that are living alone or to enable young people to get their own

	<p>home</p> <p>Older people told us what is important to them:</p> <ul style="list-style-type: none"> • Transport – Older people use public transport to access services and to socialise. In some areas of the Borough (Maghull), services finish at 6.00pm, which means it is difficult to get back from social events or doctors appointments. Bus passes are also very important to enable people to travel to socialise, shop and attend services. • Health – Walk in Centres are valued, but there is a need for one in Southport and Maghull. It is difficult to get out of hours appointments and public transport to Litherland is very poor • Carers – There are ‘hidden carers’. Practitioner’s need to be more aware of Carers and their status in order to offer support/signpost if required • Prevention services – Early identification and interventions to help increase life expectancy and quality of life - not just clinical – five steps to wellbeing – start early • Duplication of services – services should be provided in the community but better coordination of services is needed to avoid 		
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	<p>duplication</p> <ul style="list-style-type: none">• Access to services – Getting a GP appointment is hard. The cost of dental services for older people is too high. There also needs to be more communication and consultation about relocating services. People are being sent to Aintree for hospital appointments, but public transport is poor• Community Information & Support – Need to cater for older people who are socially isolated and facing financial hardship, but also continue to provide opportunities for those that are active and well. Men are more likely to be socially isolated. Essential support mechanisms are befriending and signposting.		
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Protected characteristic	What the Strategic Needs Assessment and consultation told us	Linked Strategic Objective(s)	Next Steps
<p style="writing-mode: vertical-rl; transform: rotate(180deg);">Page 94</p> <p>Disability</p>	<ul style="list-style-type: none"> • Sefton has slightly higher than average levels of diagnosed long term conditions. • The gap between life expectancy and disability life expectancy is higher than for England, meaning males spend 14 years living in poor health and females spend 17 years. • There are estimated to be between 1,200 and 5,000 adults residents in Sefton with a learning disability and it is expected this will increase slightly. • It is estimated that that 13,000 people aged 16 – 64 have a moderate disability and 4,000 have a severe physical disability. • The number of older people (65+) with moderate or severe visual impairment (able to be registered partially sighted or blind) is predicted to rise by approximately 25% in the next 15 years. <p>People with disabilities told us what is important to them:</p> <ul style="list-style-type: none"> • Avoiding social isolation - value the services used and the opportunities to 	<ul style="list-style-type: none"> • Support older people and those with long term conditions and disabilities to remain independent, and in their own homes • Seek to address the wider social, environmental and economic issues that contribute to poor health and wellbeing • Build capacity and resilience to empower and strengthen communities • Support people early to prevent and treat avoidable illnesses and reduce inequalities in health 	<p>Feedback from the consultation and engagement process has been provided to the Shadow Health and Wellbeing Board to be considered when developing the Joint Health and Wellbeing Strategy and Action Plan</p>

- socialise and meet up with friends. Would like more opportunities to socialise on evenings and weekends
- **Enjoying Independence** - transport and travel is important to have independence. Having a bus pass is essential for this. More travel planning is needed.
 - **Support with some daily tasks** – help to understand bills, bills from service providers, more support for people with complex needs
 - **Accessing health services** – value health checks, but consistent standards of service are needed. Waiting times for appointments and to see practitioners could be improved
 - **Value opportunities to do work experience and voluntary work** – would like to do more
 - **Value emergency services** - particularly Fire Service for fire checks, but mostly Police for hate crime awareness and E-cards
 - **Choice & Control** – able to make some decisions and choices, but would like to do this more
 - **Pleased that they have received feedback** from the first consultation exercise

	<ul style="list-style-type: none"> • Liked the way the information was presented to them by the same people who they engaged with for the first consultation exercise • Happy to see their comments in the report and feedback documents and that their comments are being considered by people who make decisions • Happy in general with the emerging objectives in the strategy • Aware that the strategy is an important document and the priorities are priorities for Sefton wide • Understood the relationship going forward • Would like to remain involved and be consulted in the future 		
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Protected characteristic	What the Strategic Needs Assessment and consultation told us	Linked Strategic Objective(s)	Next Steps
Race/ Ethnicity	<ul style="list-style-type: none"> • Only 3.5% of Sefton’s population were estimated to be from a black or minority ethnic background in 2009 compared with only 1.6% in the 2001 census. • Births to non British born mothers are rising, particularly for polish and Latvian born mothers. • Whilst there is no up to date needs assessment of the gypsy and traveller community of Sefton health service studies found members of this community have poorer health outcomes than those living in the poorest settled communities. <p>Our equality networks told us what is important to them:</p> <ul style="list-style-type: none"> • Community Information & Support - Access to information and services for people with disabilities and for those whose English is not their first language • Support for people who are lesbian, gay, bisexual and transgender – for adults and young people, including hate crime 	<ul style="list-style-type: none"> • Ensure all children have a positive start in life • Support people early to prevent and treat avoidable illnesses and reduce inequalities in health • Seek to address the wider social, environmental and economic issues that contribute to poor health and wellbeing • Build capacity and resilience to empower and strengthen communities 	<p>Feedback from the consultation and engagement process has been provided to the Shadow Health and Wellbeing Board to be considered when developing the Joint Health and Wellbeing Strategy and Action Plan</p> <p>Further feedback will be sought to enhance our understanding of the needs and wellbeing outcomes of our diverse communities</p>

	<p>Childcare – needs to be accessible and affordable</p> <ul style="list-style-type: none"> • Wellbeing & Health - services that are provided from within Children Centre’s are valued <p>Older People – access to services and information, networks, social isolation</p> <p>Young People from the Traveller Community told us:</p> <ul style="list-style-type: none"> • They enjoyed living in the area, but sometimes got bored. • When off the Traveller’s site, they took part in a range of activities including going to the park, visiting relatives and going to the swimming baths • The young people felt that they were part of the Formby, Ainsdale and Southport community • They didn’t enjoy going to school as they said they get bullied. • They visit the doctors when they are not well and they go for their injections. • The young people were concerned that some of the park equipment on the site wasn’t fixed • They were happy that new slabs (pitches) will be available 		
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	<ul style="list-style-type: none">• The young people enjoyed the after school club		
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Protected characteristic	What the Strategic Needs Assessment and consultation told us	Linked Strategic Objective(s)	Next Steps
Religion or Belief	<ul style="list-style-type: none"> 84% of Sefton residents defined themselves as Christian in the 2001 census. Only 1.02% of Sefton residents defined themselves as having another religion or belief in the 2001 census. 	<ul style="list-style-type: none"> Promote positive mental health and wellbeing Build capacity and resilience to empower and strengthen communities 	<p>Further feedback will be sought to enhance our understanding of the contribution faith communities can make to good health and wellbeing, including mental wellbeing.</p>
Sexual orientation	<ul style="list-style-type: none"> There is currently a gap within the Sefton Strategic Needs Assessment of the needs of lesbian, gay and bi-sexual people. Feedback from EMBRACE, the local network for gay, lesbian and bisexual people indicate that they experience disadvantage, loneliness and hate crime. Support for people who are lesbian, gay, bisexual and transgender – for adults and young people, including hate crime is currently a gap 	<ul style="list-style-type: none"> Promote positive mental health and wellbeing Seek to address the wider social, environmental and economic issues that contribute to poor health and wellbeing Build capacity and resilience to empower and strengthen communities 	<p>Feedback from the consultation and engagement process has been provided to the Shadow Health and Wellbeing Board to be considered when developing the Joint Health and Wellbeing Strategy and Action Plan</p> <p>Further feedback will be sought to enhance our understanding of the needs and wellbeing outcomes of gay,</p>

Protected characteristic	What the Strategic Needs Assessment and consultation told us	Linked Strategic Objective(s)	Next Steps
Gender Re-assignment	<ul style="list-style-type: none"> • There is currently a gap within the Sefton Strategic Needs Assessment of the needs and health and wellbeing outcomes of transgendered people. • Feedback from In Trust, the local network for transgendered people indicate that they experience disadvantage, loneliness and hate crime. • Support for people who are lesbian, gay, bisexual and transgender – for adults and young people, including hate crime is currently a gap 	<ul style="list-style-type: none"> • Promote positive mental health and wellbeing • Seek to address the wider social, environmental and economic issues that contribute to poor health and wellbeing • Build capacity and resilience to empower and strengthen communities 	<p>lesbian and bi-sexual people.</p> <p>Feedback from the consultation and engagement process has been provided to the Shadow Health and Wellbeing Board to be considered when developing the Joint Health and Wellbeing Strategy and Action Plan</p> <p>Further feedback will be sought to enhance our understanding of the needs and wellbeing outcomes of transgendered people.</p>

Protected characteristic	What the Strategic Needs Assessment and consultation told us	Linked Strategic Objective(s)	Next Steps
Pregnancy and Maternity	<ul style="list-style-type: none"> • More than 35% of babies born in Sefton live in the poorest areas of the borough. • Breastfeeding rates for Sefton, whilst improving, are still comparatively low. Over half of the mothers living in the poorest areas who start breastfeeding are not breastfeeding at 6 – 8 weeks. • Births to non British born mothers are rising, particularly for polish and Latvian born mothers. • There has been little change in the percentage of low, and very low, birth weight babies over the last decade. <p>Parents and Carers told us what is important to them:</p> <ul style="list-style-type: none"> • Wellbeing & Health – Services in Children Centres support parents, providing affordable childcare 	<ul style="list-style-type: none"> • Ensure all children have a positive start in life • Seek to address the wider social, environmental and economic issues that contribute to poor health and wellbeing 	<p>Feedback from the consultation and engagement process has been provided to the Shadow Health and Wellbeing Board to be considered when developing the Joint Health and Wellbeing Strategy and Action Plan</p>

	<ul style="list-style-type: none">• Wellbeing & Health - Children Centres are important for friendships and relationships• Welfare Reform - The “bedroom tax” is also an issue as there is not sufficient one bedroom accommodation available locally and there is little or no possibility for “downsizing” without moving out of the area, although Social Landlords are offering info and support as well as the Citizens Advice Bureau. There appears to be a more transient population and because of this community spirit is harder as people do not “invest” in their local community. It is vital, therefore, that places like Children’s Centres continue to offer support to families.		
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Section Three: Advancing equality of opportunity and fostering good relations between people and communities

The Sefton Strategic Needs Assessment identifies key messages relating to the prevalence of need by gender, disability, age and other identified characteristics including disability. This information, combined with the feedback from the consultation and engagement process, has informed the setting of the strategic objectives within the Joint Health and Wellbeing Strategy for Sefton. This information will help the Shadow Health and Wellbeing Board to tailor services to address the health and wellbeing needs of communities through commissioning strategies that advance equality of opportunity and foster good relations between people and communities.

Section Four: Conclusion

Sefton Strategic Needs Assessment and the consultation and engagement feedback reports contain evidence and insight relating to different groups of people within the community. They have informed the development of the Joint Health and Wellbeing Strategy for Sefton and Action Plan. The Board will seek to gather further evidence relating to specific characteristics where there are current gaps in our understanding.

This information will be fed into the development of commissioning strategies in the future. Commissioning strategies will include an equality impact assessment in order to comply with the public sector equality duty. The Board will use the Strategy to hold commissioners to account to improve outcomes.

The Strategy will have an annual review which will be based on updated information from the Sefton Strategic Needs Assessment and feedback from the public. Sefton Council, Sefton's Clinical Commissioning Groups, Sefton Council for Voluntary Services and Cheshire and Merseyside Commissioning Support Group will continue to work together to ensure that opportunities remain open to patients, service users, stakeholders, providers, elected members and the wider public continue to have the opportunity to comment and input

into the way that the Health and Wellbeing Services are delivered in Sefton. Twice yearly stakeholder events will also be organised to continuously keep ensure that everyone has the opportunity to be involved.

Section Five: Action Plan

What	When	Who
Communications Plan for launch of Joint Health & Wellbeing Strategy and Equality Analysis Report	March 2013	Sefton Strategic Needs Assessment Planning Group
Publish Final Equality Analysis Report	April 2013	Sefton Health and Wellbeing Board
Stakeholder event	October 2013	Sefton Health and Wellbeing Board
Gather further feedback or evidence on the gaps of our understanding as identified in the Equality Analysis Report and identify how relevant evidence has been used to understand the potential equality impacts and update the Equality Analysis Report.	March 2014	Sefton Strategic Needs Assessment Planning Group
Review of the Equality Analysis Report.	March 2014	Head of Business Intelligence and Performance, Sefton Council

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Report to: Cabinet Member –
Regeneration & Tourism
Cabinet

Decision Made: 14 January 2013

Date of Meeting: 28 March 2013

Subject: The REECH Project, Green Deal Go Early Project and REECH
Into Business Bid

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/Summary

To provide Members with further information on the:-

1. The REECH Project
2. The Green Deal Go Early bid that was submitted to Liverpool City/DECC as part of the current REECH Project,
3. The REECH into Business bid that was submitted to DCLG on 4th January 2013 as part of the new call for proposals under Priority 1 of the current North West Operational Programme, and to seek

Cabinet approval for:-

4. In principle agreement for Sefton Council to be the Accountable body for the REECH into Business Project

Recommendation(s)

It is recommended that:-

Cabinet Member for Regeneration and Tourism:-

1. Note the success in securing funding for the Green Deal Go Early project,
2. Note the submission of the 'REECH into Business' bid,
3. Agree that a tendering exercise be undertaken to facilitate the development of the Low Carbon Economy Team in becoming Green Deal Energy Assessors,

Cabinet to:-

4. Should the "REECH into Business" bid be successful, agree, in principle, that Sefton Council will be the Accountable Body for this sub-regional project and that the Head of Corporate Legal Services be authorised to execute any necessary legal agreements with the DCLG and any other delivery partners; and
5. Subject to 4 above, that the remit of the REECH Steering Group (Chaired by Cllr Ian Maher) be extended to include the REECH into Business Project.

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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		/	
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: To enable actions to be taken in progressing the REECH, Green Deal Go Early, and the REECH into Business projects.

What will it cost and how will it be financed?

The REECH Project – there are no additional costs as a result of any changes introduced since the project was conceived in January 2011.

Green Deal Go Early Project – This is a capital-intensive project with all costs being met from external resources.

REECH into Business – Should this bid be successful there will be no financial implications on Sefton's core budgets. The cost of the delivery team will be met from Economic Development Reserves, ERDF funding and other external organisations.

Green Deal Energy Assessors – the cost of Low Carbon Economy Team becoming Energy Assessors for SMEs will be met from Economic Development Reserves.

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:

There is no impact on Service Delivery as a result of this report.

What consultations have taken place on the proposals and when?

The Head of Corporate Finance & ICT (FD 2046/13) has been consulted and has no comments on this report because the contents of the report are for information and have no direct financial implications for the Council.

The Head of Corporate Legal Services (LD 1363/13) has been consulted and any comments have been incorporated into the report.

Are there any other options available for consideration?

Not to progress the recommendation would mean Sefton business and residents would not be able to benefit from the opportunities that these three projects would generate.

Implementation Date for the Decision

Following the expiry of the "call-in" period for the Minutes of the Cabinet Member Meeting

Contact Officers: Mo Kundi
Tel: 0151 934 3447
Email: mo.kundi@sefton.gov.uk

Background Papers:

None

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1.0 Introduction

1.1 In December 2012, Cabinet Member considered a report entitled 'The REECH Project – Interim Changes, Go Early Green Deal Project & New ERDF Call', and agreed to note:-

- The continued progress to date in delivering the REECH contracted schemes,
- The progress in delivering outputs against the contracted output targets,
- The change control submitted to DCLG, which in addition to the proposals agreed by the Steering Group at its 14th September and 14th December 2012 meetings included:-
 - i). amendment of Liverpool Mutual Homes scheme to include Waldgrave Road Liverpool in lieu of air source heating at Portland Gardens and the allocation of £131,360 ERDF to the scheme,
 - ii). a name change of one of the project match funders from Plus Dane Group to Plus Dane Merseyside,
 - iii). the use of the £157,792.50 uncommitted ERDF to be matched with DECC 'Go Early Green Deal' funding, and the transfer of £31,196 from REECH capital funding to revenue to facilitate the Green Deal Energy assessments,
 - v). the extension of the project end date from 31st December 2013 to 31st June 2014 to allow completion of the Supply Chain development and Business Assistance,
 - vi). procedural changes to the way private sector leverage will be captured,
 - vii). the inclusion of one additional property within Plus Dane's Bootle Solar Scheme and the allocation of an additional £1,750 to the proposal.

1.2 The Cabinet Member for Regeneration and Tourism also:-

- Agreed that the Sefton Go Early Green Deal project should be progressed as outlined in paragraphs 1.9 to 1.12 of that report,
- Agreed that legal and contractual agreements be entered into with Liverpool City Council as the accountable body for the Go Early Green Deal project, and where necessary with other delivery partners,
- Agreed that necessary tendering exercise be undertaken to procure Green Deal Energy Assessors,
- Agreed that necessary tendering exercise be undertaken to procure a select of contractors to undertake physical works identified in energy assessments,
- Agreed that a bid be submitted to DCLG under the new ERDF call as outlined in paragraphs 1.13 to 1.15 of that report, and that a further report be submitted outlining all financial and legal implications, and

- That outcomes of all tenders be reported back to Cabinet Member Regeneration & Tourism together with details of scheme funding once all approvals have been received.

2.0 Current Position

The REECH Project

- 2.1 I am pleased to report that following the REECH Steering Group meeting on 14th December 2012, the Department for Communities and Local Government has now formally agreed all the change controls requested, and at the same time has agreed not to claw back any uncommitted ERDF REECH funding.
- 2.2 It should be noted that changes approved by the REECH Steering Group and DCLG include the extension of the REECH Project to June 2014, and the use of the £157,792.50 uncommitted REECH ERDF to be matched with DECC 'Go Early Green Deal' funding. The notes of the 14th December 2012 REECH Steering Group meeting are attached as Annex A to this report.

Green Deal Go Early Project

- 2.3 Liverpool City Council, who will be acting as the Accountable body for all Department for Climate Change (DECC) funded LCR bids, received confirmation on 19th December 2012 that DECC has agreed the final bid submission made by Liverpool City on behalf of its LCR partners.
- 2.4 The precise details of what would constitute Sefton's element of the bid and funding will not be available until Liverpool City Council Cabinet has agreed to accept and act as the Accountable body, which is expected to be in January 2013. Unfortunately the end date for the completion of the project remains as 31st March 2013.
- 2.5 Notwithstanding the above, and as previously agreed by the Cabinet Member, tendering exercises are currently underway to procure both Green Deal Energy Assessors, and specialist Green Deal contractors to undertake any recommended physical works.

REECH into Business Bid

- 2.6 The REECH into Business bid was formally submitted on Friday 21st December 2012. The overall objective of the project is to get businesses up to and 'over the line', at which they can take advantage of the low carbon opportunities available to them. Thereby speeding-up the eventual take-up of low carbon technologies by SMEs to enable them to control their cost base from fluctuations in energy, vehicle fuel and water costs, thereby improving their competitiveness and growth.

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- 2.7 The project will provide SMEs with a combined assessment of their energy, vehicle fuel and water cost base, and a report showing how installing low carbon technologies can reduce these costs. Although energy will be the common denominator, by integrating the assessments with vehicle fuel and water the overall savings to business can be both maximised and locate the capital cost needed to install the technologies within the SME's business planning cycle and projected time-scaled investment programme.
- 2.8 The energy assessments will need to be undertaken by qualified assessors accredited by STROMA certification (or other similar body), thus enabling the assessment reports to be compliant with Green Deal and Carbon Trust routes into supplier / installer networks. The energy assessors will also undertake the initial cost of water assessments, but it will be left to the SME whether they wish to follow up with the utility company for more verification. The vehicle fuel assessment will be undertaken by some of the energy assessors with expertise in this area, and the connection of the SME to more detailed information will be made.
- 2.9 To cement interest and commitment to make the required investment, events will be held during the course of the project for SMEs across sectors, and for SMEs within specific target groups. Initial events will follow the publicity campaign and be geared to raising interest and awareness of –
- Energy costs and how to reduce them
 - Electric vehicle charging points and alternative fuel vehicles
 - Minimising utility bills
 - Sources of financial support
 - Sign-posting to superfast broadband roll out
 - Developing Climate Change Mitigation and Adaptation plans
- 2.10 Following the above, Energy Assessments will then be undertaken, after which follow on events will be designed to concentrate on the 'installation to savings' process and the economic and business case. The events will break down the remaining barriers to the implementation of energy efficiency measures in SMEs identified in the LCR Sustainable Energy Action Plan – financial barriers, transaction costs, lack of information, poorly aligned incentives, regulatory. The interest of SMEs will be tested for an LCR specific 'over the line' service that will provide advice and a structure for implementation of as seamless an installation process as possible. It will include an 'advocates programme' where business leaders of the business case for low carbon technologies will evidence the benefits to other businesses. It will also introduce the remaining crucial element of post-installation behaviour change, essential to ensure the maximum benefit is gained by the business from their investment.

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2.11 Businesses are confused on how best to maximise the opportunities presented by low carbon technologies. They know they need to do something but don't know how to go about it. This project will commence the development of an 'over the line' service structure, which would include –

- Devising tender briefs for works
- Investment planning and signposting
- Finance options & coordination
- Establishing a selective list/framework of advisors
- Establishing a selective list/framework of installation providers
- Establishing behaviour change monitoring/evaluation
- An advocates programme
- Provision of project management where needed

2.12 Where possible, the project will target SMEs in the following sectors, most of which are prominent in the various economic strategies for the LCR –

- Energy intensive and/or manufacturing SMEs – rebalancing the economy
- Food & drink sector – a designated Energy Intensive Industry (EII)
- Low carbon sector – energy efficiency supply chain and broader LCGES
- Logistics firms – focusing on 'multiple drop, defined route' distribution within the LCR; connection to SuperPort
- Export-oriented – likely greater links to superfast broadband need and SuperPort
- SMEs in supply chains – of large corporates, and specific markets
- Clusters within defined geographical locations – industrial estates and access routes

2.13 These target sectors support the energy, fuel & water package, and creates greater synergy with the concurrent roll out of superfast broadband across the LCR (BDUK – Merseyside Connected), capitalising on the motivation towards future awareness of opportunities and market trends. Energy cuts across all targets but particularly energy intensive, low carbon and supply chain targets; fuel potentially relates more to the logistics sector; water can apply to all; and superfast broadband to export and supply chain targets in relation to tendering for contracts.

2.14 The submission made on the 4th January 2013 is a first stage of the bidding process. As the table shows below, should our first stage be successful, then stage 2 submission would need to be made by 22nd February 2013.

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The time table for submissions and consideration of bids is as follows:-

W/C 26 th Nov	Launch of Call
4 th Jan 2013 (by noon)	Electronic Stage 1 signed application forms to be submitted to DCLG
11 th Jan 2013	Completion of Prioritisation exercise by LCR LEP
25 th Jan 2013	Subject to IPG endorsement, Stage 1 initial outcome advised to applicants
22 nd Feb 2013 (by noon)	Successful Stage 1 applicants to submit Stage 2 signed applicant forms
5 th April 2013	Subject to PMSC endorsement, IPG approval Stage 2 outcome advised to applicants
1 st May 2013	For planning purposes only: This is the required activity start date following final endorsement and contracting with successful applicants
30 th June 2015	Project activities end date

3.0 Financial Implications

The REECH Project

- 3.1 There are no additional financial implications as a result of any changes introduced in the project since its conception in January 2011.

Green Deal Go Early Project

- 3.2 As indicated above the precise detail of Sefton's element of the Green Deal Go Early project, and therefore the funding being made available by LCC/DECC is still very uncertain. However, based on the original bid that was submitted to LCC, costs and funding sources are as follows:-

(a) Summary Analysis of proposed scheme cost

	2012/13 £	2013/14 £	2014/15 £	Future Years £	Total £
Land / Buildings					
Works (Capital)	237,719				
Works (Revenue)	31,153				
Fees incl. staffing	6,000				
Contingency					
Total	274,872				

(b) Summary of Internal and external funding requirements:**

Funding Source		2012/13	2013/14	2014/15	Future Years	Total
		£	£	£	£	£
1.	Sefton Capital					
2.	Sefton Revenue					
3.	Ext Funding (specify)					
3a)	DECC	183,250				
3b)	ERDF	35,749				
3c)	ECO/Private via OVH	22,500				
	OVH	33,373				
	Total	274,872				

- 3.3 As can be seen from the two tables above, the Green Deal Go Early is a capital-intensive project, with no call on Sefton's core revenue or capital budgets. The Green Deal Go Early project will draw down uncommitted ERDF funding from the REECH Project, and will be delivered by the Low Carbon Economy Team, which is also delivering the REECH Project.

REECH into Business Project

- 3.4 Tables below show the proposed cost of the REECH into Business project, together with funding sources.

(a) Summary Analysis of proposed scheme cost and phasing over project life:

	2013/14	2014/15	2015/16	Future Years	Total
	£	£	£	£	£
Staffing	183,053	328,946	117,273		629,272
Other Running Premises		15,000	5,000		20,000
Other revenue	34,375	26,125	4,000		64,500
Total	217,428	370,071	126,273		713,772

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(b) Summary of Internal and external funding requirements:

Funding Source		2013/14	2014/15	2015/16	Future Years	Total
		£	£	£	£	£
1.	Sefton Revenue (From Economic Development Reserves)	70,627	143,506	52,753		266,886
2.	Sefton Capital					
3.	Ext Funding (specify)					
3a)	Private (to be confirmed)	21,154	23,077	5,769		50,000
3b)	Other Local Authorities (to be confirmed)	16,933	18,452	4,615		40,000
3c)	ERDF	108,714	185,036	63,136		356,886
	Total	217,428	370,071	126,273		713,772

3.5 Again, should the project be successful, there will be no financial implications on Sefton's core budgets. Appropriate processes will be put in place (as usual) to ensure compliance with the terms and conditions of the scheme, in order that there are no unforeseen financial implications for the Council.

3.6 Should the above match contribution from the private sector / other local authorities not be received, the project would be adjusted accordingly. This will ensure that the Council does not need to put in any core financial budgetary support.

4.0 Legal Implications

4.1 Sefton Council is already the Accountable body for the sub-regional REECH Project, which is successfully being delivered. In the case of the Green Deal Go Early Project, Liverpool City Council would be the Accountable body for all LCR based Go Early Projects. Sefton as one of the delivery bodies for the project would need to enter into a legal contract in order to draw down funds. This is not new as Sefton is already delivering the Business Support 4.2 project and the Stepclever Legacy project under similar legal contract with Liverpool City Council.

4.2 In the case of REECH into Business, it is recommended that Sefton Council will, in principle, act as the Accountable body, and will need to enter into a legal contract with DCLG, and any other delivery bodies. The details of this will be considered at a future Cabinet meeting. should the project bid be successful.

5.0 Summary

- 5.1 The REECH Project is successfully being delivered, and with the latest change control agreements concluded with DCLG it is anticipated that some 90% of the capital expenditure will be committed by March 2013.
- 5.2 The Green Deal Go Early is a slight variation of the REECH Project in that some of the activity will be focused on local SMEs as opposed to RSL property. The aim of the project is test the Green Deal 'Golden Rule' Framework on SMEs in order to better understand the issues and challenges. The funding will enable 25 Energy Assessments of local SMEs to be undertaken and then green technologies to be introduced on 5 SME properties.
- 5.3 One of the main challenges facing the Green Deal Go Early project is the lack of Green Deal credited energy assessors who can under take energy assessments on SME buildings. This is very critical to the delivery of both the Green Go Early Project and the REECH into Business project, if it is successful. It is therefore proposed that Low Carbon Economy Team undertake the necessary tendering exercise in order to become Green Deal Energy Assessors for SMEs, the cost of which will be met from Economic Development reserves.

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Annex A



REECH STEERING GROUP

Minutes of Meeting 14th December 2012 Bootle Town Hall

Present

Ian Maher	Sefton MBC	Chair
Mo Kundi	Sefton MBC	
Ed Kingsley	Wirral MBC	
Paul Dickson	Liverpool City Region LEP	
Sharon McCarthy	Network for Europe	
Bill Taylor	Fusion 21	
Karen Locke	Liverpool CC	

In Attendance

Frank Egerton	REECH Initiative
Paula Lowrey	REECH Initiative
Nicky Owen	REECH Initiative

Apologies

Andy Churchill	Network for Europe
Helen Marsh	Fusion 21
Chris Birkett	St Helens MBC
Steph Byrne	Knowsley MBC
Wendy Salisbury	Halton BC
Tony Mousdale	Liverpool CC
Stephen Evans	REECH Initiative
Jo Doyle	REECH Initiative

1.0 Introduction and Welcome

1.1 The Chair welcomed those attending and introductions were made.

2.0 Minutes

2.1 The Minutes of the previous meeting (14th September 2012) were agreed. There were no matters arising that were not covered by the agenda.

3.0 Reports

3.1 Item 1 REECH Initiative – Progress Report

3.1.1 FE spoke through the report. All contracted schemes are on target.

3.1.2 By the end of December 2012 approx 1,600 properties will have been retrofitted. 8 carbon reduction measures will have been installed and 10,198 tonnes of CO₂ will have been saved (over the lifetime of the REECH Initiative).

3.1.3 The spend forecast for December is estimated at £4.14million.

3.1.4 The Steering Group previously agreed to Regenda and Your Housing becoming Delivery Partners. The Steering Group also agreed funding for 2 schemes from Liverpool Mutual Homes (LMH). These have been submitted to DCLG as a change control.

3.1.5 DCLG has been unable to agree to the proposed changes stating that the REECH Project has already delivered sufficient amounts of EWI works, and that there is no justification for funding further such works. REECH have held 2 meetings with DCLG and whilst progress has been made, DCLG are still unhappy with what they say is regular re-profiling of the project. There is also a perception that Green Deal could deliver what REECH does.

3.1.6 PD contributed advising that he has done a lot of lobbying behind the scene, and during the last ERDF Technical Panel meeting ensured that a couple of the REECH Delivery Partner were in attendance to provide evidence on the merit of continuing the REECH Project. At risk was the LMH EWI allocation. However meetings went well and funding will now be retained.

3.1.7 MK asked the Chair that PD be thanked for all his hard work, and this be officially noted in the minutes. The Chair and the Steering Group also gave their thanks.

3.1.8 The LMH Portland Gardens scheme will still be doing EWI. However a combined heat and power plant may be installed at a later date, so installation of air source heat pumps would be superseded. Instead they would like to retain the money to carry out a pilot scheme in Waldgrave Road. The properties here have technical issues that could be remedied by the installation of EWI.

3.1.9 This request from LMH was put into the change control without Steering Group approval due to the timescale required for the change control approval.

3.1.10 Plus Dane would like retrospective approval for 1 additional property in the Sefton Solar scheme.

3.1.11 REECH have submitted a bid under the LCR Green Deal Go Early banner, which has been successful. Whilst the scale and size of the successful bid has not made public by DECC, the bid is for energy assessments and retrofitting works in SME business premises and energy assessments in One Vision and Crosby Housing stock.

3.1.12 The deadline for defrayed expenditure is 31st March 2013. There are no further details available at present. Due to the tight timescale procurement documents are currently being drawn up.

3.1.14 BT stated that consultation is currently underway on new PAS2030 criteria. New measures have been incorporated into Green Deal, and a new guide to Green Deal will be published early in the New Year. There is lots of detail still to be sorted out but it would be worth REECH and Fusion 21 putting

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on some business seminars in late January/early February. Training for Green Deal Business assessors is not available until January.

3.1.15 There is a current call under Objective 1 priority 1.3 for projects looking at energy assessments, energy management, waste management and climate change adaptation. REECH will submit a bid by the deadline of 3rd January 2013.

3.1.16 The intention is for unallocated REECH ERDF to be used to match against the Go Early business support element. This requires a small transfer of REECH funding from capital to revenue. Also looking to extend the REECH Initiative to 30th June 2013. No additional funding is required.

3.1.17 The report provided a 'snapshot' local contractors currently working on the REECH Initiative. This number is expected to increase as the Initiative continues. One success story is Thexton Properties Ltd. They attended the Meet the Buyer and EWI events that REECH held and are now working on the Castlefields project.

3.1.18 Delays with DCLG agreeing the REECH change control documentation have delayed the Your Housing scheme significantly and this means that it is not possible to have a signed off employment and skills plan before the contract is signed. REECH and Fusion 21 will assist them with their plans.

3.1.19 The following recommendations were agreed:

- i. the continued progress to date in delivering the REECH contracted schemes,**
- ii. the progress in delivering outputs against the contracted output targets,**

endorse the change control submitted to DCLG which in addition to the proposals agreed by the Steering Group at its September 2012 meeting includes:

- amendment of Liverpool Mutual Homes scheme to include Waldgrave Road Liverpool in lieu of air source heating at Portland Gardens and the allocation of £131,360 ERDF to the scheme,**
- a name changes of one of the project match funders from Plus Dane Group to Plus Dane Merseyside,**
- the use of the £157,792.50 uncommitted ERDF to be as matched with DECC 'Go Early' funding,**
- the transfer of £31,196 ERDF capital funding to revenue.**
- the extension of the project end date from 31st December 2013 to 31st June 2014 to allow completion of the Supply Chain development and Business Assistance.**
- procedural changes to the way private sector leverage will be captured.**

iii. The inclusion of one additional property within Plus Dane's Bootle Solar Scheme and the allocation of an additional £1,750 to the proposal.

iv. Support in principle the development and submission of a bid under the new ERDF call as outlined in paragraph 6.0.

v. The Steering Group thanked Paul Dickson for his hard work and support in ensuring that no ERDF funding taken from the REECH Project

vi. The Steering Group agreed to waive the requirements to have the employment and skills plans signed off before the contract signed in the case of Your Housing scheme only with the caveat that the plans will be signed off a maximum of 3 months after the contract being signed.

3.2 Item 2 REECH Initiative – Complementary Activity

3.2.1 The REECH Initiative will review in early 2013 the complementary activity that has taken place in year ending 2012 with a report then being prepared to either the March or June Steering Group meeting.

3.2.2 As well as working on the REECH Initiative Thexton Properties Ltd are also working with the Cheshire ERDF funded energy project. EcoVis are another company that attended the REECH EWI event and have gained work on both the Four Acre and the Newton Helena schemes.

3.2.3 Alsecco has been running weekly EWI sessions for local companies at Fusion 21. The aim is to have more advanced session in 2013. Local people have also benefited from work taking place through the REECH Project.

3.2.4 Various activities have taken place as part of community engagement and behavioural change strand, including a lot of activity with young people.

3.2.5 Under evaluation and dissemination the REECH Initiative is engaging with ENWORKS on an ERDF Technical Assistance Project.

3.2.6 Fusion 21 are hoping that when the solid wall insulation framework is retendered in 2 years time then more local companies will in a position to bid within it. EK stated that Titan is also working on a Wirral CESP project. PD stated that the facts and figures about local companies are very useful.

3.2.7 The following recommendations were noted:

- i. the continued progress to date in delivering complementary wrap-around activity linked to the capital retrofitting.
- ii. the proposed review of REECH Complementary Activity.

3.3 Item 3 REECH Activity – Behavioural Change Study

3.3.1 It has been more difficult to get completed questionnaires for T1 than was originally anticipated. Because of this the funding available for phase 2 is not sufficient to complete the study adequately.

3.3.2 Liverpool John Moores University have requested an additional £10,200 from REECH, matched against their own funding, to complete the study.

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3.3.3 The T1 draft report was tabled. Steering Group members have been requested to provide comments on this draft report to NO by Friday 18th January 2013. A copy of the report will be available on the Members area of the REECH website.

Action: ALL to get comments back to NO.

3.3.4 The following recommendations were agreed:

- **The Steering Group agreed the increase in funding required to enable LJMU to complete the Study.**
- **The Steering Group noted the progress on the Behavioural Change Study.**

3.4 Item 4 REECH Initiative – Financial Claim 7 – Q3-2012

3.4.1 Claim 7 was completed and submitted on time but at this time payment has not been received from DCLG.

3.4.1 The report was noted.

3.5 Item 5 REECH Initiative – Marketing and Communications

3.5.1 NO spoke through the report. Updated display boards were available to view.

3.5.2 Issue 35 of 'Carbon Action News' contained an article on REECH. This can be accessed at www.can.uk.net/magazine.php

3.5.3 Photos were tabled showing some of the work that has taken place to date. These will be available on the Members area of the REECH website.

3.5.4 **The Steering Group noted the report.**

3.6 Item 6 REECH Initiative – Evaluation Report

3.6.1 FE presented the report on behalf of SE. The response rate to the task 2 survey is already better than was achieved in Task 1, and EST is continuing to push for additional responses. A report on Task 2 will be brought to the March Steering Group.

3.6.2 The number of companies now on the REECH business database has increased significantly since Task 1 due to effort of officers in REECH team.

3.6.3 The following recommendations were approved:

- **Note progress to date regarding Energy Saving Trust evaluation**
- **Note the response of the REECH team to the EST Task 1 recommendations**

4.0 Any Other Business

None.

5.0 Date and Time of Next Meeting

Friday 15th March, 10am, Bootle Town Hall

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Report to: Cabinet **Date of Meeting:** 28th March 2012

Subject: Notice of Motion: Financial Malpractice

Report of: Director of Corporate Commissioning **Wards Affected:** All

Is this a Key Decision? No **Is it included in the Forward Plan?** No

Exempt/Confidential No

Purpose/Summary

At the Council meeting held on 22nd November, a motion moved by Councillor McKinlay on financial malpractice was referred to the Cabinet for consideration in accordance with Chapter 4, paragraph 84 (Motions on expenditure) of the Council's Constitution.

Recommendation(s)

That

- (1) the work being undertaken within the Borough on financial inclusion be noted; and
- (2) the Council's procurement processes be reviewed and reported to the Audit and Governance Committee at such time when the European Commission has finalised the procurement directives to include aspects of social value.

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		√	

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Reasons for the Recommendation:

To respond to a motion referred by the Council

What will it cost and how will it be financed?

(A) Revenue Costs

There are no costs incurred by this recommendation.

(B) Capital Costs

There are no costs incurred by this recommendation.

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 type="checkbox"/>
3. Equality Implication identified and risk remains	<input type="checkbox"/>

Impact on Service Delivery:

None at this time.

What consultations have taken place on the proposals and when?

The Head of Corporate Finance and ICT (FD2108/13) and Head of Corporate Legal Services (LD1424/13) have been consulted and have no comments on the report.

Are there any other options available for consideration?

The Cabinet is required to consider the content of the Motion.

Implementation Date for the Decision

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

Contact Officer: Andrea Watts, Head of Governance and Civic Services

Tel: 0151 934 2030

Email: andrea.watts@sefton.gov.uk

Background Papers:

There are no background papers available for inspection.

1. Introduction/Background

1.1 At the Council meeting held on 22nd November 2012, the Council considered a motion moved by Councillor McKinlay and resolved as follows:

1.1.1. That in accordance with Rule 84 of the Council and Committee Procedure Rules (Motions on Expenditure), the following Motion be 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:

1.1.2. "Financial Malpractice:

This Council recognises that taxation is an investment that enables the public and private sectors ability to do business and that tax evasion and avoidance are dysfunctional for the workings of a healthy economy. We condemn unethical business practice such as tax evasion, tax avoidance through loopholes, the activities of the offshore secrecy industry and the international financial malpractice operated by multinational companies. These actions significantly contributed to the banking crisis and continue to siphon millions of pounds in flight capital out of the UK economy each day. We believe such activities are immoral and little more than economic crimes against the citizens of the UK, furthermore, they contribute to the growing wealth of the undeserving rich at the expense of and the impoverishment of middle and lower income working people. The UK deficit could be significantly reduced if such financial malpractice could be controlled, this fact exposes the Coalition governments ideologically driven weapon of choice 'austerity' as little more than a convenient smokescreen to embed economic liberalism and reduce the size of the state. We call on national and local government to act to stop immoral financial malpractice.

1.1.3. We call on the National Government to:

Seek international agreement on cross border taxation and the control of multinational transfer pricing and support the European Union's initiatives to introduce a financial transactions tax;

Re- introduce legislation on Usury to prevent the charging of excessive rates of interest;

Introduce effective regulation of the financial services sector, including democratic control of the offshore industry and the activities of the City of London Corporation; and

Introduce an effective General Anti-Abuse Rule to prevent tax evasion and dysfunctional tax avoidance.

1.1.4. Sefton Council will:

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Enhance /reaffirm its commitment to ethical business practice to include a more robust approach to the assessment of ethical business practice as part of the local implementation of social value/procurement legislation.”

1.2 This report deals with paragraph 1.1.4 as set out above. A letter has been sent to HM Treasury on the matters set out in paragraph 1.1.3 above.

2.0 The Public Services (Social Value) Act 2012

2.1 The Public Services (Social Value) Act 2012 applies to public services contracts (including those with an element of supply of goods or works) and encourages public bodies to “think socially” when they are procuring. When awarding contracts, the Act requires contracting authorities in England (and some in Wales) to look beyond the price and quality of the services to be provided, consider the social impact of the award of the contract and consider what the benefit is to the local area and community in terms of its economic, social and environmental well-being.

2.2 The Act does not provide any derogation from the basic procurement principles and it does not require or permit the award of contracts in favour of local suppliers where there is no objectively justifiable basis for doing so on the basis of the evaluation criteria and methodology in question. However, what it does do is bring to the forefront of public authorities’ procurement processes the need to consider the outcome of a procurement holistically and not in isolation in terms of, for example, price alone.

2.3 Examples given in the guidance which accompanies the Act of where there can be additional scores available at evaluation stage include:

- a proposal for a mental health service to be provided by an organisation which actively employs people with a history of mental health problems to help deliver the service; thereby achieving an “added value” benefit to the community through access to work, social inclusion and a reduction in local unemployment;
- a contract between a housing Arms Length Management Organisation and a private sector repairs company requires them to provide greater social value by promoting careers in construction and trades to local schools, a commitment to targeting young people for employment and the long term unemployed – the social value comes from the creation of local jobs and raising the career aspirations of local pupils;
- a proposal for NHS consultation events to be run by a patient group. The group can use its profits to increase beneficial activities in the local community and is not required to distribute those profits to shareholders.

2.4 The Act suggests, but by no means expressly states, that it is within the gift of the public body to include higher scoring criteria for such social benefits. It is likely that this will only ever be justifiable where it is appropriate and directly linked to the subject matter of the contract.

2.5 It remains to be seen whether this will have any practical effect. It applies only to services contracts but does fit well with the Localism Act 2011 which contains provisions to encourage community participation in service provision where there are clear benefits to the public body for doing so.

2.6 When the new procurement directives are finalised by the European Commission there is likely to be wider scope to incorporate social and community benefits into procurement processes (in particular, selection and award criteria) and this is the first step to a regime which actively encourages these considerations.

3.0 Financial inclusion in Sefton

3.1 The Corporate Commissioning and Neighbourhood Coordination Department operate a Financial Inclusion sub-group which includes officers of the Council and partners from bodies such as, Citizens Advice Sefton and Arvato. This sub-group is part of the Council's wider Welfare Reform Group, which is looking at ways of mitigating the potential impacts of welfare reform.

3.2 Work undertaken so far by the Department includes a partnership event where the Council and its partners offered residents of the area free benefits checks, free employment advice, RSL advice and also advice from the Council if required and attendance at events to hand out information leaflets and give advice on illegal money lending and credit unions.

3.3 An event was held in February 2013 in partnership with the National Illegal Money Lending team. A theatre group provided three days of activities on the theme of illegal money lending to school children. Other activities and advice sessions also took place for the event which offered people some real support and advice if they were in any financial difficulties.

3.4 Finally, the Department has had discussions with Sefton Credit Union involving how the credit union may be able to offer short term crisis loans to people and how they could assist people to manage universal credit through good budgeting and responsible spending.

4.0 Government Action on Payday loans

4.1 The Office of Fair Trading (OFT) final report on payday sector compliance found evidence of problems throughout the lifecycle of payday loans, from advertising to debt collection, and across the sector, including by leading lenders that are members of established trade associations. Particular areas of non-compliance included:

- lenders failing to conduct adequate assessments of affordability before lending or before rolling over loans
- failing to explain adequately how payments will be collected
- using aggressive debt collection practices
- not treating borrowers in financial difficulty with forbearance

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- 4.2 The OFT also uncovered evidence suggesting that the payday loans market is not working well in other respects and that irresponsible lending in the sector may have its roots in the way competition works.
- 4.3 The OFT believes that fundamental problems with the operation of the payday market go beyond non-compliance with the law and regulations. It believes that a full investigation by the Competition Commission is needed to identify lasting solutions to make this market serve its customers better.
- 4.4 As a result of the review, the fifty leading lenders, each of which was inspected, have been given 12 weeks to address the specific concerns the OFT identified with each of their businesses or risk losing their licence.

5.0 Government Response

- 5.1 The Government are concerned about the evidence and scale of consumer detriment identified in the Bristol Report and the evidence of widespread non-compliance by payday lenders identified in the OFT Report.
- 5.2 In response they plan to transfer the regulation of consumer credit from the OFT to the Financial Conduct Authority (FCA) from in April 2014. The transfer will, for the first time, bring conduct of business regulation under a single financial services regulator. This will end confusion for consumers, remove unnecessary duplication for many firms, and create a single strategic regulatory view across retail financial services. The FCA will have tough, responsive and dynamic powers to tackle emerging problems in credit markets quickly and effectively from April 2014.
- 5.3 The Parliamentary Under-Secretary of State for Business, Innovation and Skills also announced that:
- The OFT will clamp down now on irresponsible practices and in some cases blatant non-compliance by payday lenders;
 - The OFT is consulting on a provisional decision to refer the payday lending market to the Competition Commission;
 - The Government will begin immediate work with industry and regulators to clamp down on advertising of payday loans;
 - The Government are strongly pressing for the industry to improve compliance with payday lending codes and to put in place new provisions within the codes in specific areas of concern, notably continuous payment authority; and
 - The Financial Services Authority (FSA) has committed to prioritise action on payday lending as soon as it takes on the regulatory responsibility in April 2014. During the rest of this year, it will consider whether there are gaps in the regulation of payday lending that need to be addressed by the FCA from April 2014 and will turn existing OFT guidance into rules that are binding on firms.

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- The Government have decided not to place a cap on the total cost of credit. They believe that a cap would not be the best solution now to the problems that have been identified by the Bristol report and the OFT payday compliance review. The Bristol report's findings indicate that such a cap could reduce access to credit, reduce the supply of credit and weaken competition. It could also lead lenders to shift more to charges which fall outside the cap and to optional fees which are generally less transparent to consumers. However, the Government recognise that a cap might be appropriate at some point in the future. This is why they have provided the FCA with specific powers to impose a cap on the cost and duration of credit, should they deem it appropriate once they take over the responsibility for consumer credit in April 2014.
- The Government has committed to further investment to March 2015 to support the credit union sector to provide financial services, including affordable credit, for up to one million more consumers on lower incomes in a way that will enable credit unions to modernise expand and become financially sustainable, and save low income consumers up to £1 billion in loan interest repayments by March 2019.

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Agenda Item 8

Report to: Cabinet **Date of Meeting:** 28th March 2013

Subject: Selection of the Mayor and Deputy Chair for 2013/14

Report of: Director of Corporate Commissioning **Wards Affected:** All

Is this a Key Decision? No **Is it included in the Forward Plan?** No

Exempt/Confidential No

Purpose/Summary

To consider the selection of a Mayor and Deputy for the Municipal Year 2013/14.

Recommendation(s)

The Cabinet is invited to consider the nomination of Mayor and Deputy for 2013/14 and to select the Members to be nominated to that Office at the Annual Council Meeting on 9 May 2013.

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:

It is a statutory requirement for the Council to appoint a Mayor and Deputy. Part 1, s3 (1) of the Local Government Act 1972 requires each principal Council to appoint a Mayor. Under Part 1, s5 (1) each principal Council is required to also appoint a Deputy.

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What will it cost and how will it be financed?

(A) Revenue Costs

The appointment has no cost implications. Allowances are not payable for the Deputy Chair position.

(B) Capital Costs

Implications:

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

Legal Sections 3-5 of the Local Government Act 1972 (as amended) refer.	
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:

What consultations have taken place on the proposals and when?

The Head of Corporate Finance (FD2221/13) has been consulted and has no comments to make on this report as there are no financial consequences to the appointments being made.

The Head of Corporate Legal Services (LD1537/13) have been consulted and any comments have been incorporated into the report.

Are there any other options available for consideration? There are no further options for consideration.

Implementation Date for the Decision

Immediately following the Annual Council Meeting on 9th May 2013.

Contact Officer: Andrea Watts

Tel: 0151 934 2030

Email: andrea.watts@sefton.gov.uk

Background Papers:

There are no background papers available for inspection.

1. Introduction/Background

- 1.1 Members will recall that for the 2012/13 Municipal Year, a Deputy Chair (Councillor Maureen Fearn) was appointed by the Council to fulfil the statutory requirements set out in the Local Government Act 1972.
- 1.2 The Cabinet needs to consider the nominations of a Member and Deputy to serve in the 2013/14 Municipal Year, in order to offer advance notice to the Members likely to be elected and to enable the necessary personal arrangements to be put in hand. The formal election can only take place at the Annual Meeting.
- 1.3 An early nomination is not, of course, a guarantee of election in May as it is possible for alternative nominations to be made at any time up to and including the date of the Annual Meeting.
- 1.4 In practice, however, this would be outside the arrangements agreed by the Council with regards the Selection and Nomination Procedure.

SELECTION CRITERIA

- 1.5 Criteria is in place for the Deputy Mayor (but not the Mayor) as follows, although this does not apply to the position of Deputy Chair:
 - Annual rotation between the three main Political Groups on the Council;
 - Selection to be on the basis of seniority of the Member in the Group (flexibility to be afforded within the Group making the nomination);
 - A Member nominated as Deputy Mayor elect, should have served on the Council for a minimum of one full term (four years)
 - The Member selected as Deputy Mayor elect should not be up for election immediately after serving as Deputy Mayor;
 - A Member may serve as Mayor more than once;
 - A Member must be prepared to agree to undertake the role of Mayor as defined in the approved role profile and should meet, or be willing to meet, the requirements in the approved person profile.

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Agenda Item 9

Report to: Cabinet
Council

Date of Meeting: 28 March 2013
18 April 2013

Subject: Programme of Meetings – 2013/14 Municipal Year

Report of: Director of Corporate Commissioning

Wards Affected: All

Is this a Key Decision? No

Is it included in the Forward Plan?
No

Exempt/Confidential

No

Purpose/Summary

To provide details of the Programme of Meetings for the 2013/14 Municipal Year.

Recommendations: That

Cabinet

1. The Programme of Cabinet Meetings for 2013/14 as set out in Annex A of the report be approved;
2. the Council be recommended to give approval to the Programme of Meetings for the Council, Member Briefing Sessions and Regulatory Committees; Overview and Scrutiny Committees and Area Committees for 2013/14 as set out in Annexes B, C and D of the report; and
3. the Programme of Meetings for the Strategic Leadership Team, Public Engagement and Consultation Panel, Sefton Borough Partnership Operations Board and Sefton Safer Communities Partnership for 2013/14 as set out in Annex E of the report be noted.

Council

1. The Programme of Meetings for the Council, Member Briefing Sessions and Regulatory Committees; Overview and Scrutiny Committees and Area Committees for 2013/14 as set out in Annexes B, C and D of the report be approved;
2. it be noted that if the Council Elections are combined with the European Parliamentary Elections in June 2014, then a further report will be submitted to the Council to recommend fresh dates for the Annual and Adjourned meetings of the Council in June 2014; and
3. the Programme of Meetings for the Cabinet, Strategic Leadership Team, Public Engagement and Consultation Panel, Sefton Borough Partnership Operations Board and Sefton Safer Communities Partnership for 2013/14 as set out in Annexes A and E of the report be noted.

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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		√	
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:

To enable the business of the Council and the various Committees to be conducted during the 2013/14 Municipal Year.

What will it cost and how will it be financed?

(A) Revenue Costs

None.

(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:

Legal	
Human Resources	
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:

The Programme of Meetings for 2013/14 will be published on the Council's website for the benefit of the residents of Sefton and general public. This will raise awareness of the Council's political management system and allow the opportunity for the public to engage in the Council's democratic processes.

What consultations have taken place on the proposals and when?

The Head of Corporate Finance (FD 2215/13) has been consulted and notes there are no direct financial implications arising from this report.

Head of Corporate Legal Services (LD.1531/13.) have been consulted and has no comments on the report

Are there any other options available for consideration?

No. The Council has to produce a timetable of meetings.

Implementation Date for the Decision

Immediately following the Council meeting.

Contact Officer: Paul Fraser
Tel: 0151 934 2068
Email: paul.fraser@sefton.gov.uk

Background Papers:

There are no background papers available for inspection.

1. Introduction/Background

1.1 The Council is required to establish a Programme of Meetings for the 2013/14 Municipal Year.

1.2 The following annexes are attached to the report:

- Annex A - Programme of Meetings for the Cabinet in 2013/14
- Annex B - Programme of Meetings for the Council, Members' Briefing Sessions and Regulatory Committees in 2013/14
- Annex C - Programme of Meetings for the Overview and Scrutiny Committees in 2013/14
- Annex D - Programme of Meetings for the Area Committees in 2013/14
- Annex E - Programme of Meetings for the Strategic Leadership Team, Sefton Borough Partnership Operations Board, Public

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Engagement and Consultation Panel and Sefton Safer Communities Partnership in 2013/14.

- 1.3 The Council of the European Union has announced that the European Parliamentary Elections will be held from 22-25 May 2014. Local elections in England will therefore be held on 22 May 2014 (combined with the European election). Accordingly the Annual and Adjourned meetings of the Council will be held on 29 May and 3 June 2014 respectively.
- 1.4 The Council, at its Budget Meeting held on 28 February 2013, approved options to reduce the number of Overview and Scrutiny Committees from 4 to 2; to reduce the number of Area Committees from 7 to 3; and to reduce the frequency of meetings of both the Overview and Scrutiny and Area Committees. These options are currently being consulted upon and the outcome of the consultation process will be reported to Council on 18 April 2013.
- 1.5 Once the programme of meetings have been approved, an “in-house” diary will be produced for Members of the Council.

2. Programme of Meetings 2013/14

2.1 The key principles of the Programme of Meetings are as follows:

- Annual Council Meeting (Election of Mayor) to be held at 6.00 p.m. on Thursday, 9 May 2013. Venue to be based on the preferred location for the Mayor Elect. This may be subject to change – see paragraph 1.3 above.
- Adjourned Annual Council Meeting (Appointment of Cabinet and Committees) to be held on **Tuesday, 14 May 2013**, in the week after the Annual Council Meeting. This will give the Political Groups more time to determine the Membership of Committees etc. This may be subject to change – see paragraph 1.3 above.
- Five Ordinary Council Meetings to be held every 8 weeks on a Thursday commencing at 6.30 p.m. plus the Budget Council Meeting to be held on 27 February 2014.
- Other than on 27 February 2014, (the date of Budget Council), Council will not meet on the same day as Cabinet. Cabinet will meet in weeks 2 and 6 of an eight week meeting cycle with the Council Meeting in week 8.
- Members’ Briefing Sessions to be held at 5.00 p.m. prior to the Adjourned Annual Council Meeting and the six Ordinary Council Meetings.
- No meetings will be held:
 - In the period from 29 April 2013 until the Adjourned Annual Council Meeting except for the Annual Council Meeting (Election of Mayor) pending the appointment of the Cabinet and Committees for 2013/14.
 - In the period between Christmas and New Year (Dec 2013/Jan 2014).
 - In April 2014 except for the meetings of the Planning Committee, Cabinet and Council.
- The venues for all meetings (other than Area Committees and Area Partnerships) alternate between Bootle and Southport Town Halls.
- As far as possible no meetings will be held during the school half term holiday weeks.
- Cabinet Meetings to be held every 4 weeks on a Thursday at 10.00 a.m. (one per month except for January and February 2014 Budget proposals). The first meeting to be held on 23 May 2013, in the week following the Adjourned Annual Council meeting.

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- Planning Committee to meet every four weeks on a Wednesday, commencing at 6.30 p.m.
- Planning Visiting Panel to meet 2 days prior to each meeting of the Planning Committee to undertake site visits as agreed by the Committee.
- Each of the 4 Overview and Scrutiny Committees to meet bi monthly, 5 times during the year commencing at 6.30 p.m. – the main Overview and Scrutiny work will be done by the Working Groups to be established on an ad hoc basis.
- Special meeting of the Overview and Scrutiny Committee (Performance and Corporate Services) to be held on 18 February 2014 to scrutinise the Cabinet budget recommendation.
- Overview and Scrutiny Management Board to meet 5 times per year, commencing at 4.30 p.m.
- Licensing and Regulatory Committee to meet every 8 weeks on a Monday commencing at 6.30 p.m.
- Meetings of the Licensing Sub-Committee to be convened as and when required.
- Audit and Governance Committee to meet every quarter (4 meetings per year) on a Wednesday commencing at 3.00 p.m. in order to meet statutory requirements etc.
- Pay and Grading Committee to be convened as and when required.
- Each Area Committee to meet bi-monthly, 5 times during the year, except for Crosby and Southport which will meet 6 times during the year.
- The meetings of each Area Committee commence at 6.30 p.m. except for the Formby Area Committee which commences at 7.00 p.m. The meetings will be held at local venues.
- For the first time the dates of the Health and Wellbeing Board are included in the Corporate Calendar.
- The dates of the Leaders Group Meetings, Strategic Leadership Team and Sefton Borough Partnership Operations Board which are not public meetings have been included for completeness, as it aids corporate planning of the decision making process.
- The dates for the Public Engagement and Consultation Panel, which are not public meetings are also included in the Corporate Calendar.

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ANNEX A
METROPOLITAN BOROUGH OF SEFTON
PROGRAMME OF CABINET MEETINGS - 2013/2014

Meeting	Day	Time	Venue	2013								2014				
				May	June	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May
CABINET	Thur.	10.00 a.m.	B		20		15		10		5	30	27		17	
			S	23		18		12		7		16	13	27		15

Key to Venues:

B - Bootle Town Hall

S - Southport Town Hall

ANNEX B
METROPOLITAN BOROUGH OF SEFTON
PROGRAMME OF COUNCIL, MEMBERS' BRIEFING SESSIONS AND REGULATORY COMMITTEE MEETINGS ETC. - 2013/2014

Agenda Item 9

Meeting	Day	Time	Venue	2013								2014						
				May	June	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	June	
COUNCIL	Thur.	6.30 p.m.	B	9↑ 14←Tue					5						6→		29°	3↓ Tue
			S		27						21		23				24	
MEMBERS' BRIEFING SESSIONS Prior to each Ordinary Council Meeting	Thur.	5.00 p.m.	B	14					5								13	
			S		27						21			6		17		
AUDIT AND GOVERNANCE COMMITTEE	Wed.	3.00 p.m.	B		26							11						
			S						25						26			
APPEALS (FOR PERSONNEL CASES) - as and when required	Thur.	-																
NSING AND REGULATORY COMMITTEE	Mon.	6.30 p.m.	B		3				23				13					
			S			29					18				10			
NSING SUB-COMMITTEE - id when required			B															
			S															
PLANNING COMMITTEE	Wed.	6.30 p.m.	B		5/12	24		18		13		8		5	23			
			S		26		21		16		11			5		2	14	
PLANNING VISITING PANEL	Mon (*Tue)	9.30 a.m.	B		3/24	22	19	16	14	11	9	6	3	3/31	*22	12		
PAY AND GRADING COMMITTEE – as and when required																		

↑ Annual Meeting 2013/14 - commences at 6.00 p.m. (Venue to be determined)
 ← Adjourned Annual Meeting - Appointment of Committees etc. for 2013/14 (Tuesday)
 → Budget Meeting

° Annual Meeting 2014/2015 - commences at 6.00 p.m. (Venue to be determined)
 ↓ Special Meeting - Appointment of Committees etc. for 2014/2015 (Tuesday)

ANNEX C
METROPOLITAN BOROUGH OF SEFTON
PROGRAMME OF MEETINGS FOR OVERVIEW AND SCRUTINY COMMITTEES - 2013/2014
(All Tuesday)

Meeting	Venue	2013								2014				
		May	June	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May
OVERVIEW AND SCRUTINY COMMITTEE (Health and Social Care) (6.30 p.m.) (Tue)	B	21	18				29					4		
	S					3				7				
OVERVIEW AND SCRUTINY COMMITTEE (Performance and Corporate Services) (Tue) (6.30 p.m.)	B					10				14	*18			
	S		11					5				11		
OVERVIEW AND SCRUTINY COMMITTEE (Regeneration and Environmental Services) (6.30 p.m.) (Tue)	B	28							12			18		
	S					17				21				
OVERVIEW AND SCRUTINY COMMITTEE (Children's Services) (6.30 p.m.) (Tue)	B					24				28				
	S		25					19				25		
OVERVIEW AND SCRUTINY COMMITTEE (Management Board) (4.30 p.m.) (Tue)	B	21					15				27			
	S					27				7				

Special meeting to scrutinise the Cabinet Budget recommendation

ANNEX D
METROPOLITAN BOROUGH OF SEFTON
PROGRAMME OF MEETINGS FOR AREA COMMITTEES 2013/2014

Meeting	Day	Time	Venue	2013								2014				
				May	June	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May
CROSBY	Wed.	6.30 p.m.	①	22	-	10	-	4	30	-	-	15	-	12	-	-
FORMBY	Thur.	7.00 p.m.	②	-	-	4	-	12	-	7	-	9	27	-	-	-
LINACRE AND DERBY	Mon.	6.30 p.m.	③	-	17	-	-	2	-	4	-	6	-	3	-	-
LITHERLAND AND FORD	Wed.	6.30 p.m.	④	-	19	-	-	11	-	6	-	29	-	19	-	-
ST. OSWALD AND NETHERTON AND ORRELL	Thur.	6.30 p.m.	⑤	-	13	-	-	19	-	28	-	16	-	13	-	-
SEFTON EAST PARISHES	Thur.	6.30 p.m.	⑥	-	20	-	-	26	-	-	5	30	-	20	-	-
SOUTHPORT	Wed.	6.30 p.m.	⑦	15	-	17	-	25	-	20	-	22	-	26	-	-

ies:

- ① Crosby Area Committee - Alternates between - SING Plus, Cambridge Road, Seaforth / St. Stephen's Church Hall, St. Stephen's Road, Hightown / United Reformed Church Hall, Warren Road, Blundellsands/ Crosby Lakeside Adventure Centre, Cambridge Road, Waterloo
- ② Formby Area Committee - Formby Professional Development Centre, Park Road, Formby
- ③ Linacre and Derby Area Committee - Bootle Town Hall, Oriel Road, Bootle
- ④ Litherland and Ford Area Committee - Alternates between - Goddard Hall, Stanley Road, Bootle / Ford Lane Community Centre, Ford Lane, Litherland
- ⑤ St. Oswald and Netherton and Orrell Area Committee - Alternates between Netherton Activity Centre, Glovers Lane, Netherton / Bootle Day Centre, Linacre Lane, Bootle / Netherton Park Neighbourhood Centre, Chester Avenue
- ⑥ Sefton East Parishes Area Committee - Alternates between Maghull Town Hall, Hall Lane, Maghull / Old Roan Methodist Church, Altway, Aintree / Lydiate Primary School, Lambshear Lane / Melling Primary School, Wheeler Drive
- ⑦ Southport Area Committee - Southport Town Hall, Lord Street, Southport

ANNEX E
METROPOLITAN BOROUGH OF SEFTON
PROGRAMME OF MEETINGS FOR LEADERS GROUP, STRATEGIC LEADERSHIP TEAM
AND SEFTON BOROUGH PARTNERSHIP MEETINGS- 2013/2014

Meeting	Day	Time	Venue	2013								2014				
				May	June	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May
STRATEGIC LEADERSHIP TEAM	Thur	2.00 p.m.	B	9/23	6/20	18	1/15/29	12/26	10/24	7/21	5/19	2/16/30	13/27	13/27	10/24	
			S			5										
STRATEGIC LEADERSHIP TEAM AND HEADS OF SERVICE	Fri.	9.00 a.m.	B		9	5	2	6	4	1	6	10	7	7	4	9
			S													
SEFTON BOROUGH PARTNERSHIP OPERATIONS BOARD	Tues.	2.30 p.m.	B		11	16		17		19		21		18		
			S													
PUBLIC ENGAGEMENT AND CONSULTATION PANEL ^	Fri	10.00 a.m.	S	17		12		20		15		17		14		
			B													
SEFTON SAFER COMMUNITIES PARTNERSHIP	Thu	10.00 a.m.	B		13			19			12			6		
			S													
HEALTH AND WELLBEING BOARD	Wed.		B			24 (9.00 am)	21 (2.00 pm)		30 (2.00 pm)			22 (2.00 pm)		19 (2.00 pm)		
			S	22 (12.30 pm)												

^ Meetings video conferenced Bootle Town Hall

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