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Sefton Council 

MEETING: CABINET
DATE: Thursday 11th January, 2018
TIME: 10.00 am
VENUE: Birkdale Room, Town Hall, Southport

DECISION MAKER: **CABINET**

Councillor Maher (Chair)
Councillor Atkinson
Councillor Cummins
Councillor Fairclough
Councillor Hardy
Councillor John Joseph Kelly
Councillor Lappin
Councillor Moncur
Councillor Veidman

COMMITTEE OFFICER: Ruth Harrison
Democratic Services Manager
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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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AGENDA

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 the Previous Meeting Minutes of the meeting held on 7 December 2017		(Pages 5 - 14)
* 4	Residential and Care Homes Working Group - Final Report Report of the Head of Regulation and Compliance	All Wards	(Pages 15 - 34)
5	Children and Adolescent Mental Health Working Group - Final Report Report of the Head of Regulation and Compliance	All Wards	(Pages 35 - 72)
6	Programme of Meetings – 2018/19 Municipal Year Report of the Head of Regulation and Compliance	All Wards	(Pages 73 - 94)
* 7	Tender for Park & Ride Bus Service Report of the Head of Regulation and Compliance	All Wards	(Pages 95 - 100)
* 8	Provision of Agency Staff Report of the Head of Commissioning Support and Business Intelligence	All Wards	(Pages 101 - 106)

* 9	Procurement of an Electronic Case Management System Report of the Director of Social Care and Health	All Wards	(Pages 107 - 116)
* 10	Procurement on behalf of the Liverpool, Knowsley, Sefton and Wirral Regional Adoption Agency(RAA) Report of the Head Children's Social Care	All Wards	(Pages 117 - 122)
* 11	Council Tax Reduction Scheme 2018/19 & Council Tax Base 2018/19 Report of the Head of Corporate Resources	All Wards	(Pages 123 - 148)
* 12	Revenue and Capital Budget Plan 2017/18 – 2019/20 Report of the Head of Corporate Resources	All Wards	(Pages 149 - 162)

THE "CALL IN" PERIOD FOR THIS SET OF MINUTES ENDS AT 12 NOON ON THURSDAY, 21 DECEMBER 2017. MINUTE NO. 96 (5) IS NOT SUBJECT TO CALL-IN

CABINET

MEETING HELD AT THE COMMITTEE ROOM, TOWN HALL, BOOTLE ON THURSDAY 7TH DECEMBER, 2017

PRESENT: Councillor Maher (in the Chair)
Councillors Atkinson, Cummins, Fairclough, Hardy,
John Joseph Kelly, Lappin, Moncur and Veidman

90. APOLOGIES FOR ABSENCE

No apologies for absence were received.

91. DECLARATIONS OF INTEREST

In accordance with Paragraph 9 of the Council's Code of Conduct, the following declaration of personal interest was made and the Member concerned remained in the room during the consideration of the item:

Member	Minute No.	Nature of Interest
Councillor Fairclough	Minute No. 95 – Revenue and Capital Budget Update – Treasury Management 2017/18 – Position to October 2017	His employer is referred to in the report

92. MINUTES OF THE PREVIOUS MEETING

Decision Made:

That the minutes of the Cabinet Meeting held on 2 November 2017 be confirmed as a correct record.

93. THE DEVELOPMENT OF FAMILY WELLBEING CENTRES

The Cabinet considered the report of the Director of Social Care and Health in relation to the Development of Family Wellbeing Centres. The report referred to Council approval in March 2017 of the proposed development of locality working in light of community feedback gathered in recent years and extensive research into early intervention prevention models. As part of this work the Director of Social Care and Health had worked with others to develop a draft strategic approach for Family Wellbeing Centres, taking into consideration Children Centres, Family Centres, School Readiness funding and the childcare subsidy. The report provided an update including the public consultation feedback, an

Agenda Item 3

CABINET- THURSDAY 7TH DECEMBER, 2017

equalities analysis and presented options considered and discounted and recommendations for consideration and decision.

In developing the proposals relating to locality working and the proposed Family Wellbeing approach the Council had actively listened to the views of the community and the recommendations in the report reflected this. The community clearly supported the principles of the 0-19 Family and Wellbeing approach and Officers would progress the implementation of this strategic approach, subject to Cabinet considering the information in the report. However, the community did not support the development of three 0-19 Family Wellbeing Centres, and the recommendations in this report take account of this feedback.

If the recommendations were to be approved how the change was implemented would be explored and reviewed within the Council and with the Head Teachers and Governing bodies. The potential decisions and changes if approved were:

- The three 0-19 Family Wellbeing centres not being developed, and early help being wholly delivered by the Children Centres
- Seaforth not being relocated
- A new funding methodology to be introduced in 2018 that considered:
 - The reach (geography) that Family and Children Centre management were responsible for thereby impacting on their budgets
 - All early help being within Children Centres
 - A possible impact on the number and type of activities taking place
 - A possible reduction in opening hours for a number of Family and Children Centres
 - Management and staffing
- Officers would work with Health colleagues to look at the potential development of Health and Wellbeing Centres

As the locality model developed and the 0-19 strategic approach was implemented the Council and partners would continue to explore future opportunities. The Council was keen to work with partners to ensure that positive approaches were put in place that would help all members of our community to live happy and healthy lives, with positive approaches in place for those that needed that bit of extra support from time to time.

In the future and once current service delivery had been redesigned and the duplication of current Council activity removed, a more integrated model with NHS partners could be reconsidered; as through existing work it was clear that they had an ambition to explore the development of Health and Wellbeing Centres.

Prior to determining a course of action in respect of the development of Family Wellbeing Centres the Cabinet:-

CABINET- THURSDAY 7TH DECEMBER, 2017

- (1) was advised that the Overview and Scrutiny Committee (Children's Services and Safeguarding) had pre-scrutinised this matter at its meeting held on 5 December 2017 and had noted the report;
- (2) watched a video produced by Netherton Children's Centre that offered the views of users of the Centre;
- (3) received a presentation from Dwayne Johnson, Director of Social Care and Health that updated on:-
 - the engagement and consultation process
 - details of the proposals
 - the public response and key consultation themes
 - how the proposals were revised following consultation responses
 - financial aspects of the proposals
 - practicalities associated with the proposals relating to locality working and alterations to reach areas; managing the new offer; a commissioned model; and alignment with the Council Locality Model
 - the next steps to be undertaken which included meetings with all Head Teachers to discuss the Council decision and the development of revised specification within context of the new funding formulae; meetings with Trade Unions and staff to keep them informed; keeping the public informed; keeping Overview and Scrutiny Committee informed; and the anticipated implementation of the full plans in Spring/Summer 2018; and
- (4) was advised by Dwayne Johnson, Director of Social Care and Health about the following matters:-
 - (A) that since the expiration of the consultation exercise a petition had been received (out of date) signed by local residents urging the Council to keep open the Springwell Park Children's Centre;
 - (B) that in connection with Section 6.9 of the report that highlighted the proposed timescale linked to the removal of the Childcare subsidy, the report stated that Seaforth Children's Centre (Sand Dunes) was in receipt of £121,000 childcare subsidy and that this would be removed from April 2018. However, this should read that the subsidy has ceased from April 2017. Sand Dunes Nursery had identified that providing childcare was not financially viable, based on the cost of provision and the number of people accessing the facility. They therefore gave notice to the Local Authority that they were ceasing to offer childcare provision to parents in March 2017. As a result the school had also

Agenda Item 3

CABINET- THURSDAY 7TH DECEMBER, 2017

implemented a staffing review to reflect that they would only provide support for 2 — 4 year old children; and

- (C) that since the publication of the report Freshfield School had requested an alternative model be considered to that presented and outlined in section 6.3 of the report. This would see Freshfield operating separately to First Steps (Kings Meadow and Farnborough). Subject to consideration today, Cabinet were asked to recommend that any variation to distribution of funding to be agreed by the Cabinet Member - Children, Schools and Safeguarding. The most significant change would be made to the three centres mentioned above though a smaller change of no more than £3,000 would apply to the remaining seven Children's Centres.

Decision Made:

That:

- (1) it be noted that Cabinet has taken account of the Vision Outcomes Framework at paragraph 1.6 of the report, in considering the recommendations in this report;
- (2) it be noted that Cabinet has considered and taken account of community feedback, risks, and equality reports when considering the options and recommendations;
- (3) the principles, as described at paragraph 3.6 to the report, for a 0-19 Family Wellbeing approach, as described at paragraph 6.3 to the report be approved;
- (4) all existing Children and Family centres remain open in their current locations; and that the offer is revised to take account of the extended age range (0-19 year olds). The funding for the Family, Children centres and School Readiness will be contained within a new funding methodology identified in paragraph 7.4 to the report which will in many cases reduce budgets, which will in turn potentially impact on activity delivery and opening hours;
- (5) the Council explore its ambition to work with health and all partners to deliver Health and Wellbeing centres within the context of locality working;
- (6) the funding methodology be refreshed on a biennial basis (every two years), using updated information;
- (7) the management oversight of all Family and Children centres sitting within Council control be approved;
- (8) the Council Officers continue to engage with schools on the

CABINET- THURSDAY 7TH DECEMBER, 2017

implementation of the approved change;

- (9) it be noted that the Health and Wellbeing Executive Group, with Officers, will consider opportunities for the formation of Health and Well Being Centres in Sefton that would potentially see the community able to access Health and Council services in shared locations;
- (10) the schedule of childcare subsidy removal, and the further consultation with Head Teachers and governors as shown at paragraph 6.9 to the report be approved;
- (11) the commencement of all appropriate activity as detailed, including for example, consultation with Head Teachers, governors, employees and engagement with partners and contractual changes be approved and that subject to discussions the new arrangements are to be introduced by the end of July 2018;
- (12) it be noted that officers will comply with agreed HR policies, with particular attention to staffing, equalities and procedures including relevant consultation with Trade Unions and reports to the Cabinet Member - Regulatory, Compliance and Corporate Services; and that Officers may be permitted to implement change as required after appropriate procedures;
- (13) authority be delegated to the Cabinet Member - Children, Schools and Safeguarding in consultation with the Director for Social Care and Health, for future decisions relating to the implementation of this recommended change and biennial changes to the methodology; and
- (14) in connection with the alternative model suggested by the Freshfield Centre and referred to in (4) (C) above the Cabinet Member - Children, Schools and Safeguarding be authorised to approve any variation to the distribution of funding.

Reasons for the Decision:

Council decisions over the last 6 years have centred on the priority given to our most vulnerable people and those core services that communities expect to see delivered. The Council has a proven track record of engagement, consultation, listening and considering feedback in the decision making process. The recommendations in this report take account of community and partner feedback, the Council's Core Purpose and seek to protect the most vulnerable, shift focus towards prevention and ensure equity of funding across Children's, Family Centres and School Readiness. Only such a strategic approach can mitigate the demand and financial pressures that will continue to be faced by the Council.

Agenda Item 3

CABINET- THURSDAY 7TH DECEMBER, 2017

The Council is at a point where doing more of the same or trying to do more of the same with less money is going to fail children, young people, families and the communities.

Alternative Options Considered and Rejected:

Maintaining the status quo is not an option due to demographic and budgetary pressures and the lack of a transparent funding methodology.

There have been a number of alternative proposals submitted by schools, Family and Children centres and members of the public. These have given the Council additional useful suggestions and have been considered, however they, for the most, did not consider borough wide need nor provide the equity that a funding methodology provides. In developing the methodology Officers considered the suggestions made but not the centre focused suggestions that were given. The options considered are listed within the report at paragraph 5.4 and rejected including:

- Proposal consulted on - Move to three Family Wellbeing Centres with additional complementary bases
- Continue with current funding allocation methods

94. PRELIMINARY FLOOD RISK ASSESSMENT REVIEW

Further to Minute No. 27 of the meeting of the Overview and Scrutiny Committee (Regeneration and Skills) held on 7 November 2017 the Cabinet considered the report of the Head of Locality Services – Commissioned on the Preliminary Flood Risk Assessment Review (PFRA).

The report indicated that the Flood Risk Regulations 2009 (FRR 2009) required each Lead Local Flood Authority (LLFA) to complete a PFRA and identify Flood Risk Areas (FRA) for local flood risk, primarily surface water runoff, groundwater and ordinary watercourses; that in Sefton this was completed in 2011; that FRR 2009 required a review of the PFRA on a 6 year cycle to be coordinated by the Environment Agency; that LLFAs must therefore submit their draft reviews to the Environment Agency by 22 June 2017 to enable the Environment Agency to undertake an internal review and request any changes; and that Sefton Council's draft review was submitted to the Environment Agency in April 2017.

The report also identified that the Environment Agency provided a self-assessment template to be completed by each LLFA and Sefton's completed template was attached to the report as a background paper; that the September 2012 significant flood event report, investigated as required by the Flood and Water Management Act 2010, was contained in annex 1 of the review attached to the report as background paper; and that overall there had been little change to the 2011 PFRA (also attached to the report as a background paper) following the review with much of the understanding remaining unchanged or with minor amendments. There

CABINET- THURSDAY 7TH DECEMBER, 2017

had, however, been improvements or confirmation of understanding particularly in respect of Sefton's future flood information and the following pieces of work have contributed to our understanding:-

- Sefton Council PFRA desktop study 2013 to improved understanding of initial PFRA assessment and flood risks.
- Modelling of catchments in Formby, Maghull and Seaforth/Litherland.
- Groundwater monitoring locations across Sefton.
- Sefton Council Local Plan. The plan identified flood risks on development sites.

The report concluded by detailing future developments that the PFRA review would feed into the update of Sefton's Flood and Coastal Erosion Risk Management Strategy 2015-2018, which was currently underway; that the PFRA review would feed into the review of the Environment Agency's Flood Risk Management Plans that operated at a catchment wide scale; that Sefton would continue to seek funding to improve the situation for residents and communities at risk of flooding or coastal erosion; and that Sefton would continue to review and update its understanding of flood risk.

Decision made:

That the review of the Preliminary Flood Risk Assessment prior to submission to the Environment Agency be approved.

Reasons for the decision:

The assessment has been completed following guidance documents provided by Defra and the Environment Agency and reflects our best available knowledge.

Alternative options considered and rejected:

To not undertaking the review would but this would mean that Sefton Council would fail to undertake a duty in the Flood Risk Regulations 2009, with the likelihood that the Environment Agency would undertake the review without any local input and could impose actions upon Sefton Council.

95. REVENUE AND CAPITAL BUDGET UPDATE - TREASURY MANAGEMENT 2017/18 - POSITION TO OCTOBER 2017

The Cabinet considered the report of the Head of Corporate Resources that provided Members with a review of the Treasury Management activities undertaken to 31 October 2017 which allowed monitoring against the Treasury Management Policy and Strategy statement approved by Cabinet and Council in March 2017. The report was the second of the ongoing quarterly monitoring reports provided to Audit and Governance Committee, whose role was to carry out scrutiny of treasury management

Agenda Item 3

CABINET- THURSDAY 7TH DECEMBER, 2017

policies and practices.

Decision Made:

That:

- (1) the Treasury Management update to 31 October 2017 be noted;
- (2) the effects of decisions taken in pursuit of the Treasury Management Strategy be noted; and
- (3) the implications of changes resulting from regulatory, economic and market factors affecting the Council's treasury management activities be noted.

Reasons for the Decision:

To ensure that Members are fully appraised of the treasury activity undertaken to 31 October 2017 and to meet the reporting requirements set out in Sefton's Treasury Management Practices and those recommended by the CIPFA code.

Alternative Options Considered and Rejected:

There were no alternative options considered.

96. REVENUE AND CAPITAL BUDGET PLAN 2017/18 – 2019/20

The Cabinet considered the report of the Head of Corporate Resources that informed of the current forecast revenue outturn position for the Council for 2017/18 as at the end of October; the current forecast on Council Tax and Business Rates collection for 2017/18; and the current position of the Capital Programme including an additional request to include a section 106 scheme.

Decision made: That

- (1) the forecast deficit outturn position of £1.790m as at the end of October 2017 be noted and the development of a remedial action plan as set out within the report, with the aim of delivering a balanced in year budget and establish a sustainable position for future years be approved;
- (2) the progress to date on the achievement of approved Public Sector Reform savings for 2017/18 be noted;
- (3) the forecast position on the collection of Council Tax and Business Rates for 2017/18 be noted;
- (4) the current progress in the delivery of the 2017/18 Capital Programme and forecast outturn position for the year be noted;

CABINET- THURSDAY 7TH DECEMBER, 2017

and

- (5) Council be recommended to approve the inclusion of an additional section 106 scheme in the Capital Programme relating to the installation of a new path in the Netherton and Orrell Ward, as outlined in paragraph 6.9 of the report.

Reasons for the Decisions:

To ensure that the Cabinet is informed of the forecast outturn position for the 2017/18 revenue and capital budgets as at the end of October 2017 and to provide an updated forecast of the outturn position with regard to the collection of Council Tax and Business Rates; and to seek approval for an additional scheme financed from Section 106 monies, to be included within the Capital Programme.

Alternative Options Considered and Rejected:

No alternative options were considered.

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Agenda Item 4

Report to:	Overview and Scrutiny Committee (Adult Social Care and Health) Cabinet	Date of Meeting:	Tuesday 9 January 2018 Thursday 11 January 2018
Subject:	Residential and Care Homes Working Group – Final Report		
Report of:	Head of Regulation and Compliance	Wards Affected:	All Wards
Cabinet Portfolio:	Cabinet Member – Adult Social Care		
Is this a Key Decision:	Yes	Included in Forward Plan:	Yes
Exempt / Confidential Report:	No		

Summary:

To formally present the final report of the Residential and Care Homes Working Group.

Recommendations:

Overview and Scrutiny Committee (Adult Social Care and Health)

That the following recommendations be supported and commended to the Cabinet for approval:-

Cabinet

That the following recommendations be approved:-

1. That the Head of Commissioning Support and Business Intelligence be requested to:-
 - (a) Consider proposals for fee levels, both in the current and next two financial years, in order to provide more stability for Providers with the proviso that such proposals are made within available resources and in line with previously agreed delegations in relation to the setting of Adult Social Care fees.
 - (b) Give further consideration to paying Providers gross, as opposed to net of Service User financial contributions, for care placements.
 - (c) Establish a strategic group consisting of Adult Social Care and Commissioning officers, Providers and interest groups to:

Agenda Item 4

- (i) Assess future demands and needs, including those relating to other service areas such as Extra Care housing;
 - (ii) Ensure co-operative and collaborative working takes place;
 - (iii) Share good practice; and
 - (iv) Ensure that “working in silos” does not occur.
- (d) Ensure joint working is continued between Commissioning, Adult Social Care and the Sefton Clinical Commissioning Groups, particularly with respect to joint quality, safeguarding and monitoring of services.
- (e) Explore the potential to implement revised methods of monitoring care home services, including the use of Information Technology to record quality, performance and market capacity information.
- (f) Continue to work as part of the Liverpool City Region to standardise approaches to information sharing, monitoring and contractual approaches.
- (g) Continue to seek information from Providers, such as details of costs and charges, in order for the Council to better understand the care home market.
- (h) Implement the decision to commission an external organisation to deliver the Quality Improvement Team service, as approved by the Cabinet at its meeting on 7 September 2017.
- (i) Continue to monitor and revise procedures, as necessary, relating to issues such as home closures, in order to improve working practices and implement any lessons learnt.
- (j) Review documentation given to Service Users, Families, Carers and Advocates on topics such as paying, charging for services and needs assessment processes.
2. That the Senior Democratic Services Officer be requested to liaise with relevant officers in order to ensure that the Overview and Scrutiny Committee (Adult Social Care and Health) receives a six-monthly monitoring report, setting out progress made against each of the recommendations outlined above.

Reasons for the Recommendation(s):

The Working Group has made a number of recommendations that require approval by both the Overview and Scrutiny Committee (Adult Social Care and Health) and the Cabinet.

Alternative Options Considered and Rejected: (including any Risk Implications)

No alternative options were considered. The Overview and Scrutiny Committee (Adult Social Care and Health) established the Working Group to review residential and care homes and the Working Group has performed this task.

What will it cost and how will it be financed?

(A) Revenue Costs

There are no financial implications arising for the Council as a direct result of this report. However, if consideration is being given to the payment of Providers gross, as opposed to net of Service User financial contributions, for care placements then the financial implications of doing so must form part of this consideration as this potentially would increase the risk of bad debts to the Council.

(B) Capital Costs

Not applicable

Implications of the Proposals:

<p>Resource Implications (Financial, IT, Staffing and Assets):</p> <p>Not applicable</p>
<p>Legal Implications:</p> <p>Under the 2014 Care Act, the Council has a duty to manage and shape the current and future local care home market.</p>
<p>Equality Implications:</p> <p>There are no equality implications</p>

Contribution to the Council's Core Purpose:

<p>Protect the most vulnerable: Residential and care homes provide care for some of the most vulnerable members of our communities.</p>
<p>Facilitate confident and resilient communities: By providing good quality care, residential and care homes can contribute towards the facilitation of more confident and resilient communities.</p>
<p>Commission, broker and provide core services: The Council has a duty to manage and shape the current and future local care home market.</p>
<p>Place – leadership and influencer: The Council has a role in providing strong leadership and influencing Providers to work towards the provision of good quality care, which is in the best interests of Sefton and its residents.</p>
<p>Drivers of change and reform: The Council has a duty to manage and shape the current and future local care home market.</p>
<p>Facilitate sustainable economic prosperity:</p>

Agenda Item 4

Not applicable.
Greater income for social investment: Not applicable.
Cleaner Greener Not applicable.

What consultations have taken place on the proposals and when?

(A) Internal Consultations

The Head of Corporate Resources (FD.4897/17) and Head of Regulation and Compliance (LD.4181/17) have been consulted and any comments have been incorporated into the report.

The total value of the fee uplift in 2017/18 is £5.0m. This will be funded via £2.9m from within existing provisions allocated within the Medium Term Financial Plan and also through an allocation of £2.1m from the additional Social Care Funding / Improved Better Care Fund (iBCF) for fee increases, as approved by Cabinet on 7th September 2017. In considering this increase Members are asked to note that as this funding is one-off and reduces year on year, there will be a future years' pressure within the MTFP in order to support this increase.

With regard to 2018/19 and 2019/20 further analysis will be required to evaluate the any proposed increases against funding and affordability for the Council as defined within its MTFP. As stated the one off resources that are supporting the Council's Adults Social Care Budget at present, offer no long term security or sustainability and policy decisions from central government in respect of this funding will inevitably have an impact on future fee increases. The current MTFP provision in both 2018/19 and 2019/20 for provider fee increases is £2.9m. Any requirement in excess of this sum would require revision to the MTFP to ensure the financial sustainability of the Council is maintained.

(B) External Consultations

A number of external organisations and Providers have been consulted on during the course of the review and are listed within the Final Report.

Implementation Date for the Decision

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

Contact Officer:	Debbie Campbell
Telephone Number:	0151 934 2254
Email Address:	debbie.campbell@sefton.gov.uk

Appendices:

The following appendices are attached to this report:-

- Final Report of the Residential and Care Homes Working Group

Background Papers:

There are no background papers available for inspection.

Agenda Item 4

1. Introduction/Background

- 1.1 At its meeting on 28 June 2017 /06/17 the Overview and Scrutiny Committee (Adult Social Care and Health) established a Working Group to review the topic of residential and care homes. (Minute No. 12 (3) refers).
- 1.2 Terms of reference for the Working Group were as follows:-
 - Current and future population needs, demand and market supply;
 - The Council's "market shaping" duties
 - Key risks within the market in relation to meeting the needs of all people in Sefton who need care and support (whether arranged or funded by the state, by the individuals themselves, or in other ways).
 - Recommendations to shape Sefton's approach to commissioning services and shaping the local market in the future.
- 1.3 The Final Report is attached for consideration
- 1.4 The Committee is requested to support the recommendations produced by the Working Group and commended them to the Cabinet for approval.
- 1.5 The Cabinet is requested to approve the recommendations.

**OVERVIEW AND SCRUTINY COMMITTEE
(Adult Social Care and Health)**



**RESIDENTIAL AND CARE HOMES
WORKING GROUP**

**FINAL REPORT
OCTOBER 2017**

Overview
& Scrutiny



Overview & Scrutiny



**'Valuing
Improvement'**

www.sefton.gov.uk
scrutiny@sefton.gov.uk

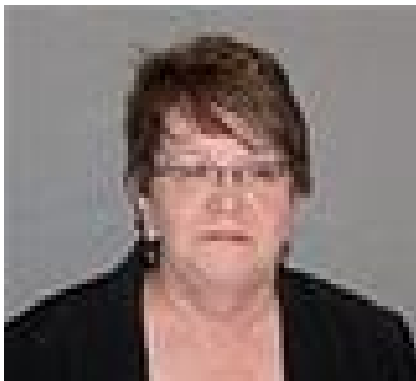
LEAD MEMBER'S INTRODUCTION

I am pleased to introduce this Overview and Scrutiny Report into Residential and Care Homes.

Against the background of the 2014 Care Act, the Council now has a duty to manage and shape the current and future local care home market, an issue important to all of us, particularly in view of the high aging population within the Borough. The Working Group was set up to look at care provided to residents of Sefton in residential and care homes within the Borough.

The Working Group has sought the views of Providers, Regulators and Commissioners in Sefton in establishing the main issues concerning the local residential and care home market.

I would like to thank everyone who took part in interviews and submitted information that helped inform the Working Group. I am grateful to the Working Group Members for their commitment and efforts in looking at this issue. Finally I would like to thank our support officers for their assistance and professional support provided to the Working Group and for producing this final report.



Councillor Linda Cluskey
Lead Member of the Residential and Care Homes Working Group

Overview and Scrutiny Committee
(Adult Social Care and Health)

Agenda Item 4

DEFINITIONS

Care Homes

Care homes offer accommodation and personal care for people who may not be able to live independently. Some homes also offer care from qualified nurses or specialise in caring for particular groups such as younger adults with learning disabilities. Care home places can be funded publicly but many people pay for their own care.

Residential Care Homes

Residential care homes range in size from very small homes with few beds to large-scale facilities and offer care and support throughout the day and night. Staff employed by the home concerned help residents with personal care such as washing, dressing, meal time support and support with using the toilet.

Nursing Homes

This type of home will normally offer the same type of care as residential ones but with the addition of 24 hour medical care from a qualified nurse.

For the purpose of the review, the Working Group did not focus on care provided to children, rather Members focused on adult care and care received by older people in particular.

RESIDENTIAL CARE IN SEFTON

At the time of drafting this report there are some 40 nursing homes and some 65 residential homes within Sefton.

BACKGROUND TO REVIEW

From April 2015 the Care Act 2014 came into effect, requiring local authorities to manage and shape the current and future local care home market. Local authorities now have responsibilities to all people receiving care, regardless of whether they, or the local authority, pay for that care, or whether it is funded in any other way.

At its meeting on 28 June 2016, the Overview and Scrutiny Committee (Adult Social Care and Health) considered its work programme for 2016/17 and resolved that a Working Group be established during 2016/17, to review residential and care homes.

MEMBERSHIP OF WORKING GROUP

The Committee appointed Councillors Linda Cluskey, Lynne Thompson and Roger Hutchings, advisory member from Healthwatch Sefton, at its meeting on 28 June 2016.

TERMS OF REFERENCE AND OBJECTIVES

The Working Group has undertaken a review on the current care market within Sefton, and considered:-

- Current and future population needs, demand and market supply;
- The Council's "market shaping" duties
- Key risks within the market in relation to meeting the needs of all people in Sefton who need care and support (whether arranged or funded by the state, by the individuals themselves, or in other ways).
- Recommendations to shape Sefton's approach to commissioning services and shaping the local market in the future.

Through the gathering and consideration of data, information and evidence, either from existing sources or through specific interviews, the Working Group has:-

- Reviewed the strategic needs assessment and predictions for the future regarding population needs.
- Reviewed the current number of residential and nursing home beds.
- Identified key issues and challenges within the care home market.
- Considered evidence available in relation to likely future supply.
- Considered evidence available in relation to good practice.

MEETINGS OF WORKING GROUP HELD

Details of Working Group meetings are as follows:-

Date	Activity
• 21 October 2016	Scoping & discussion of issues.
• 17 November 2015	Interview of witness from the Care Quality Commission and consideration of a report on the Market Overview.
• 5 December 2016	Interview of witnesses from Sefton Pensioners Advocacy Centre and Age Concern.
• 11 January 2017	Interview of witness from the Care Homes



Agenda Item 4

Association and consideration of information submitted by Healthwatch Sefton.

- 31 January 2017 Consideration of information submitted by the Sefton Clinical Commissioning Groups.
- 6 March 2017 Interview of witness from Sefton Carers' Centre and consideration of an update on joint working.
- 15 June 2017 Consideration of a report on progress and provisional findings regarding the market oversight exercise.
- 24 July 2017 Interview of witness Provider rated "Outstanding" by the Care Quality Commission.
- 2 October 2017 Consideration of the "Market Oversight Analysis for Residential and Nursing Sectors" Report by independent consultants RedQuadrant and consideration of key findings/conclusions.

In addition, Working Group Members undertook site visits to residential and care homes, as follows:-

- 31 January 2017 Site visit to Willows Nursing Home, Birkdale and Connell Court, Southport
- 1 February 2017 Site visit to James Page Nursing Home, Maghull and Kyffin Taylor House, Maghull

BACKGROUND DOCUMENTS

Working Group Members considered the following documents during the course of their review:-

1. "Social Care for Older People: Home Truths" - report, published jointly with the King's Fund and Nuffield Trust.
2. "Review of the NHS-funded Nursing Care Rate in England" - report published by the Department of Health.
3. A report of the Head of Commissioning Support and Business Intelligence on Sefton Residential and Nursing Care - Market Overview
4. "Briefing on Enter and View of Residential and Care Homes" – report submitted by Healthwatch Sefton



5. “Market Oversight Analysis for Residential and Nursing Sectors” Report by independent consultants RedQuadrant.

KEY WITNESSES

Care Quality Commission

Working Group Members met with the Inspection Manager Adult Social Care, Liverpool North and Sefton, of the Care Quality Commission for discussions and to ask questions regarding the inspection of residential and care homes within the Borough.

Sefton Pensioners’ Advocacy Centre

Working Group Members met with the Director, Sefton Pensioners’ Advocacy Centre (SPAC) for discussions and to ask questions regarding the work of the Advocacy Centre.

Age Concern

Working Group Members met with the Sefton Manager and Head of Services of Age Concern, Liverpool and Sefton for discussions and to ask questions regarding the work of the Organisation.

Care Homes Association

Working Group Members met with a representative of the Care Homes Association for discussions and to ask questions regarding the work of the Organisation.

Healthwatch Sefton

Working Group Members received a written submission from Healthwatch Sefton regarding the work of Healthwatch Sefton on residential and care homes.

Clinical Commissioning Groups

Working Group Members received a written report submitted jointly from NHS South Sefton Clinical Commissioning Group and the NHS Southport and Formby Clinical Commissioning Group (CCG), regarding the work of the CCGs on residential and care homes.

Provider who achieved an “Outstanding” rating by the Care Quality Commission

Agenda Item 4

Working Group Members met with a Provider who had recently achieved an “Outstanding” rating by the Care Quality Commission for discussions and to ask questions regarding the achievements by the Provider.

KEY FINDINGS AND CONCLUSIONS

1. Financing of care and the setting of fee levels remains an on-going concern for both service users and Providers alike, particularly in terms of providing stability for Providers of care.
2. There is on-going debate as to whether local authorities should pay net or gross financial contributions towards service users.
3. There is a need for a strategic group, led by the Council, to drive quality improvements in care homes and also improvements in Care Quality Commission ratings (CQC) and for the Council to:
 - (a) Assess future demand and need for care, this being a requirement of the Care Act
 - (b) Strive towards great co-operation and collaborative working between both the Council and individual care Providers;
 - (c) Share good practice; and
 - (d) Encourage a move away from silo working.
4. Particularly in respect of quality, safeguarding and the monitoring of services, the Council needs to continue joint working with the Clinical Commissioning Groups.
5. Innovative methods of monitoring care home services and recording quality, performance and market capacity information need to be explored, which could include the use of Information Technology.
6. Information sharing, monitoring, together with contractual approaches, is increasingly occurring within the Liverpool City Region and this should be encouraged in order to better standardise a joint approach.
7. The Council has a duty to understand and shape the care home market under the Care Act. In order to better inform this understanding, more information is required from Providers, such as details of costs, charges, etc.
8. At its meeting held on 7 September 2017, the Cabinet approved the commissioning of an external organisation in order to deliver the Quality Improvement Team service.



9. The closure of any care homes is always regrettable as it causes stress and anxiety for service users and their families and places an additional pressure on the remaining market. This tends to occur where homes have received a rating from the CQC of “Requires Improvement” or “Inadequate”. There have been 8 home closures within Sefton in the preceding 18 months. Procedures and working practices related to such closures need to be subject to on-going revision and any lessons learnt need to be implemented.
10. Documentation provided to Service Users, Families and Carers on topics such as paying, charging for services and needs assessment processes can be confusing and at times misleading. Such documentation needs to be reviewed.
11. There is usually a standard recommendation within all Working Group Final Reports for a six-monthly monitoring report, setting out progress made against each of the recommendations. Such a report should be submitted to the Overview and Scrutiny Committee (Adult Social Care and Health) in due course.

ACKNOWLEDGEMENTS AND THANKS

In producing this report on residential and care homes, acknowledgements and thanks are attributed to the following individuals for their time and input:-

- *The Inspection Manager Adult Social Care, Liverpool North and Sefton, Care Quality Commission;*
- *The Director, Sefton Pensioners’ Advocacy Centre (SPAC);*
- *Sefton Manager and Head of Services, Age concern, Liverpool and Sefton;*
- *Representatives of the Care Homes Association;*
- *The Manager and staff at Willows Nursing Home, Birkdale;*
- *The Manager and Staff at Connell Court, Southport;*
- *NHS South Sefton Clinical Commissioning Group and NHS Southport and Formby Clinical Commissioning Group;*
- *The Manager and staff at James Page Nursing Home, Maghull;*
- *The Manager and staff at Kyffin Taylor House, Maghull;*
- *Representatives of Sefton Carers’ Centre;*



Agenda Item 4

- *The Provider, Rosebank Care Home, Southport;*
- *Peter Moore, Head of Commissioning Support and Business Intelligence,*
- *Tina Wilkins, former Head of Adult Social Care;*
- *Neil Watson Commissioning Officer, Commissioning Support and Business Intelligence; and*
- *Debbie Campbell, Senior Democratic Services Officer.*

Thanks must also go to the Members of the Working Group who have worked hard and dedicated a great deal of time to this review, namely:-



***Councillor Linda Cluskey
(Lead Member)***



Councillor Lynne Thompson



***Roger Hutchings
Advisory Member
Healthwatch Sefton***

RECOMMENDATIONS

1. That the Head of Commissioning Support and Business Intelligence be requested to:-
 - (a) Consider proposals for fee levels, both in the current and next two financial years, in order to provide more stability for Providers with the proviso that such proposals are made within available resources and in line with previously agreed delegations in relation to the setting of Adult Social Care fees
 - (b) Give further consideration to paying Providers gross, as opposed to net of Service User financial contributions, for care placements.
 - (c) Establish a strategic group consisting of Adult Social Care and Commissioning officers, Providers and interest groups to:
 - (i) Assess future demands and needs, including those relating to other service areas such as Extra Care housing;
 - (ii) Ensure co-operative and collaborative working takes place;
 - (iii) Share good practice; and
 - (iv) Ensure that “working in silos” does not occur.
 - (d) Ensure joint working is continued between Commissioning, Adult Social Care and the Sefton Clinical Commissioning Groups, particularly with respect to joint quality, safeguarding and monitoring of services.
 - (e) Explore the potential to implement revised methods of monitoring care home services, including the use of Information Technology to record quality, performance and market capacity information.
 - (f) Continue to work as part of the Liverpool City Region to standardise approaches to information sharing, monitoring and contractual approaches.
 - (g) Continue to seek information from Providers, such as details of costs and charges, in order for the Council to better understand the care home market.
 - (h) Implement the decision to commission an external organisation to deliver the Quality Improvement Team service, as approved by the Cabinet at its meeting on 7 September 2017.

Agenda Item 4

- (i) Continue to monitor and revise procedures, as necessary, relating to issues such as home closures, in order to improve working practices and implement any lessons learnt.
 - (j) Review documentation given to Service Users, Families, Carers and Advocates on topics such as paying, charging for services and needs assessment processes.
2. That the Senior Democratic Services Officer be requested to liaise with relevant officers in order to ensure that the Overview and Scrutiny Committee (Adult Social Care and Health) receives a six-monthly monitoring report, setting out progress made against each of the recommendations outlined above.



Overview & Scrutiny



For further Information please contact:-

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Senior Democratic Services Officer

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Sefton Council 



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Agenda Item 5

Report to:	Overview and Scrutiny Committee (Children's Services and Safeguarding) Cabinet	Date of Meeting:	5 December 2017 11 January 2018
Subject:	Children and Adolescent Mental Health Working Group - Final Report		
Report of:	Head of Regulation and Compliance	Wards Affected:	(All Wards);
Portfolio:	Cabinet Member for Children's Services and Safeguarding		
Is this a Key Decision:	Yes	Included in Forward Plan:	Yes
Exempt / Confidential Report:	No		

Summary:

To formally present the final report of the Children and Adolescent Mental Health Working Group.

Recommendation(s):

The Overview and Scrutiny Committee (Children's Services and Safeguarding) be requested to commend the report and recommendations to the Cabinet for approval.

The Cabinet be requested to approve the following recommendations:-

- (1) That the Clinical Commissioning Group for both Southport and Formby and South Sefton be requested to issue a statement to Alder Hey expressing concerns regarding all waiting times within the referral into CAMHS process and notifying them that unless improvements are made within a reasonable timescale (6 months) then notice will be given to terminate the contract;
- (2) That the Head of Schools and Families in consultation with the Head of Children's Social Care be requested to investigate with all sectors of schools and colleges the feasibility of providing Emotional Health and well-being training to nominated staff working in Sefton's Schools;
- (3) That the Head of Schools and Families in consultation with the Head of Children's Social Care be requested to work with the Head Teachers Associations to investigate establishing an Emotional health and well- being mentoring scheme;

Agenda Item 5

- (4) That the Head of Children's Social Care in consultation with Sefton CVS, be requested to provide a comprehensive list of all voluntary and charity groups that work with emotional health and wellbeing, publishing the list on the website, the Councils website and disseminating the information to all Schools throughout the Borough, signposting individuals to all the groups available;
- (5) That MerseyCare be requested to investigate setting up a transitional arrangement in the Borough for outreach facilities for CAMHS ages 16 – 19 years (25 years for Looked After Children);
- (6) That the Head of Schools and Families in consultation with the Head of Children's Social Care be requested to work with the Head Teachers Associations to consider incorporating Emotional Health and well-being into the Personal and Social Education Curriculum.
- (7) That the Head of Regulation and Compliance be requested to approach Alder House with a view to extending an invitation to all Members of the Overview and Scrutiny Committee (Children's Services and Safeguarding) to attend a site visit to Alder House;
- (8) That the Director of Social Care and Health in consultation with the Head of Children's Social Care be requested to work in collaboration with the Clinical Commissioning Group for both Southport and Formby and South Sefton, be requested to identify and release funds to Emotional Health and well – being specifically Tier 1 and Tier 2 to invest in Early Intervention and Prevention;
- (9) That the Chief Officer for both South Sefton and Southport and Formby Clinical Commissioning Groups be requested to notify the Head of Regulation and Compliance of the re-aligned budget allocation for Children and Adolescent Mental Health Services in Sefton as a result of Recommendation (8) above;
- (10) That the Chief Officer for both South Sefton and Southport and Formby Clinical Commissioning Groups be invited to a future Meeting of the Overview and Scrutiny Committee (Children's Services and Safeguarding) to present its budget allocation for Children and Adolescent Mental Health Services in Sefton;
- (11) That the Head of Schools and Families in consultation with the Head of Children's Social Care be requested to provide an annual update in relation to the implementation of recommendations to the Overview and Scrutiny Committee (Children's Services and Safeguarding); and
- (12) That the Cabinet be requested to refer the Children and Adolescent Mental Health Services Final Report to the Health and Wellbeing Board for information and comment.

Reasons for the Recommendation(s):

The Working Group has made a number of recommendations that require approval by the Cabinet.

Alternative Options Considered and Rejected: (including any Risk Implications)

No alternative options were considered. The Overview and Scrutiny Committee (Children's Services and Safeguarding) established a Working Group to review the Children and Adolescent Mental Health Service in Sefton and the Working Group has performed this task.

What will it cost and how will it be financed?

(A) Revenue Costs

There are no additional costs to the Council as a result of this report. The Children's Integrated Commissioning Group (chaired by the Head of Children's Social Care) which includes representation from the two CCGs in Sefton, will look at mapping future commissioning requirements for CAMHS Early Help, and this will include associated funding availability.

(B) Capital Costs

N/A

Implications of the Proposals:

Resource Implications (Financial, IT, Staffing and Assets):

The majority of recommendations are in relation to collaborative working and would require Officer capacity to address.

The financial funding requested had been allocated by Government to Clinical Commissioning Groups to be spent on CAMHS, Working Groups Members are seeking assurances that the money allocated in this area is spent on CAMHS.

Legal Implications:

Equality Implications:

The recommendations within the report seek to improve equality of services throughout the Borough

Agenda Item 5

Contribution to the Council's Core Purpose:

Protect the most vulnerable: The recommendations within the report aim to protect the most vulnerable individuals within Sefton.
Facilitate confident and resilient communities: Signposting of Services as detailed in the recommendations within this report should help to facilitate confident and resilient communities.
Commission, broker and provide core services: The research undertaken by the Working Group and detailed in the report challenges the commissioning arrangements that are currently in place.
Place – leadership and influencer: N/A
Drivers of change and reform: Early Intervention and Prevention strategies are invest to save mechanisms that could lead to less individuals accessing the service.
Facilitate sustainable economic prosperity
Greater income for social investment:
Cleaner Greener: N/A

What consultations have taken place on the proposals and when?

(A) Internal Consultations

The Head of Corporate Resources (FD 4956/17.....) and Head of Regulation and Compliance (LD.4241/17....) have been consulted and any comments have been incorporated into the report.

(B) External Consultations

Implementation Date for the Decision

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

Contact Officer:	Ruth Harrison
Telephone Number:	Tel: 0151 934 2042
Email Address:	ruth.harrison@sefton.gov.uk

Appendices:

The Final Report of the Children and Adolescent Mental Health Working Group is attached to this report.

Background Papers:

There are no background papers available for inspection.

1. Introduction/Background

1.1 At its meeting held on 12 July 2016 the Overview and Scrutiny Committee (Children's Services and Safeguarding) established a Working Group to review the Children and Adolescent Mental Health Services (CAMHS) across Sefton.

1.2 The Terms of Reference for the Working Group were as follows

- Clarify the regulatory and policy framework for commissioned CAMHS service.
- Clarify the extent of the provision of these services and ascertain the availability for Children and Young people in Sefton in terms of capacity, referrals and quantitative service data.
- Clarify the process by which referrals are expected to be made who can make a referral and how, received and the process for how the referrer is communicated with and what is communicated.
- Clarify criteria by which a referral is screened at first point of contact. This in particular to understand how risk is assessed and managed in early stage of referral to point of treatment.
- To understand the plans put in place for discharge.
- Understand the route back to support.
- Collect the experiences of Children and Young People and in particular explore the experience for Children and Young People with additional needs.
- Ascertain the beneficial outcomes that could be attributed as a result of access to commissioned CAMH services.
- Review the provision of CAMHS against the emerging Children and Young People Emotional Health and Wellbeing Strategy.
- Report to Cabinet on its findings.

1.3 The Final report is attached for consideration and has been agreed by the following Members of the Working Group; Councillors Hands (Lead Member), Bennett, Keith, Spencer and Webster and Advisory Group Member Miss Libby Kitt (Healthwatch).

1.4 The Overview and Scrutiny Committee (Children's Services and Safeguarding) is requested to commend the report and its recommendations to the Cabinet for approval.

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Sefton Council 

**OVERVIEW AND SCRUTINY COMMITTEE
(Children's Services and Safeguarding)**



**CHILDREN AND ADOLSCENT
MENTAL HEALTH
WORKING GROUP**

**FINAL REPORT
November 2017**

Overview
& Scrutiny



Overview & Scrutiny



**‘Valuing
Improvement’**

www.sefton.gov.uk
scrutiny@sefton.gov.uk

Lead Member's Introduction

When we, with our colleagues from O&S Health, started this review I don't think any of us envisaged the complexity of the subject. The issues at times were quite worrying as we gathered more information and the subject became more challenging. I am very grateful to the Working Group for the incredible amount of hard work they have put in and their keenness to see the job done.

Officers from the Council, Clinical Commissioning Groups and Alder Hey gave their time to help the review. I personally would like to thank them for their time and contributions. A special thanks to all those parents we interviewed, and who sent in written statements, along with special thanks to the MAD Group, the working group found that they were most informative.

The Working Group were concerned that the Council and the CCG's still did not have a detailed contract for our CAHMS provision despite the PCT undertaking back in 2011 to set one up.

Finally a special word of thanks to our Support Officer, Ruth Harrison, and her colleagues who have worked very hard over and above the call of duty to enable us to undertake this review.



**Councillor R. Hands,
Lead Member,
Overview and Scrutiny Committee
(Children's Services and Safeguarding).**

Agenda Item 5

1.0 Glossary of Terms

The Working Group came across many terms that professionals use to describe children in need under the Children Act 1989. Below are simple definitions of the most common:

CAMHS – The Children and Adolescent Mental Health Service.

Looked after children – these are children who are looked after by Sefton Council through a care order made by a court or by agreement with their parent(s), whether in a residential home, with other members of their extended family or with foster carers. Some may be placed outside the area of the local authority but will still remain the responsibility of Sefton Council. These are the children for whom the council is corporate parent.

Fast Allocations – These are cases that are given clinical priority for the waiting lists they are patients usually presenting as a risk to themselves.

Pending – These are cases that have been written to, to clarify if they still wish to be seen and the service are awaiting a response.

The Common Assessment Framework (CAF) – is a voluntary process, common to all children's services, to help identify a child's needs as early as possible and agree what support is appropriate. It engages the support of other agencies.

Pastoral Support Programme (PSPs) – useful to help pupils better manage their behaviour. A PSP will normally involve a number of interventions.

Commissioning –Where a body, such as the local authority, delegates the provision of a service to a 3rd party, including the funding for the service.

BICS – Brief Intervention Consultation Services. A tier 2 service where practitioners offer consultation to families or outreach services to identify severe or complex needs which may require more specialist interventions at a different tier.

Multi-Disciplinary Team – Representatives from different agencies meet to put strategies in place.

3rd Sector – Organisations that are non-profit making and non-governmental, that undertake social activity.

CAPA Model –Choice and Partnership Approach.

PHSE – Personal, Social and Health Education

SDQ – Strengths and Difficulties Questionnaires



2.0 INTRODUCTION – CHILDREN AND ADOLESCENT MENTAL HEALTH SERVICES (CAMHS) REVIEW

The then Overview and Scrutiny Committee (Children's Services) undertook a review of CAMHS, in 2010. The Final Report with the exception of one recommendation, due to the financial implications, was agreed by the Cabinet on 18 August 2011.

The Overview and Scrutiny Committee received update reports in relation to the implementation of those recommendations and whilst the majority of recommendations had been implemented satisfactorily some hadn't. Outstanding concerns in relation to Children transitioning from Children's Services into Adult Services in terms of being admitted onto wards that were inappropriate for young adults and also geographical service delivery relating to the inequality of referral waiting times and thereon after appointment times.

The Overview and Scrutiny Committee (Children's Services and Safeguarding) met on 12 July 2016 and agreed to establish a Working Group to investigate the outstanding concerns in order that improvements could be suggested and a partnership solution arrived at.

2.1 Membership

Minute No. 6 of the meeting of the Overview and Scrutiny Committee (Children's Services and Safeguarding) held on 12 July 2016, sets out the nominated Membership of the CAMHS Working Group, as follows:-

Councillors Bennett, Hands, Keith, Spencer and Webster and Ms. Libby Kitt, Healthwatch Representative.

Councillor Hands was appointed Lead Member of the Working Group.

2.2 Terms of Reference of the Review

- Clarify the regulatory and policy framework for commissioned CAMHS service.
- Clarify the extent of the provision of these services and ascertain the availability for Children and Young people in Sefton in terms of capacity, referrals and quantitative service data.
- Clarify the process by which referrals are expected to be made who can make a referral and how, received and the process for how the referrer is communicated with and what is communicated.
- Clarify criteria by which a referral is screened at first point of contact. This in particular to understand how risk is assessed and managed in early stage of referral to point of treatment.
- To understand the plans put in place for discharge.
- Understand the route back to support.



Agenda Item 5

- Collect the experiences of Children and Young People and in particular explore the experience for Children and Young People with additional needs.
- Ascertain the beneficial outcomes that could be attributed as a result of access to commissioned CAMH services.
- Review the provision of CAMHS against the emerging Children and Young People Emotional Health and Wellbeing Strategy.
- Report to Cabinet on its findings.

2.3 Meetings / Site Visits

The following meetings have taken place:-

Date	Meeting
8 September 2016	Scope Review
11 October 2016	Drafting of Questions for Witness
10 November 2016	Information gathering
5 December 2016	Interviewing Witnesses
13 December 2016	Interviewing Witnesses
17 January 2017	Cancelled by Witness
19 January 2017	Interviewing Witnesses
17 February 2017	Interviewing Witness
15 March 2017	Interviewing Witness
21 March 2017	Interviewing Witnesses
6 October 2017	Interviewing Witnesses

3.0 BACKGROUND

- 3.1 The Working Group examined the Children and Young People Emotional Health and Wellbeing Strategy that had been developed with Seftons Young Advisors and the Making a Difference (MAD). The Working Group also considered National Policy; Five to Thrive5 Programme; No Health without Mental Health 2011, Future in Mind; Local Transformation Plans; The Five Year Forward View for Mental Health and Mental Health and Behaviour in Schools, a synopsis is detailed below.

National Policy Context

Five to Thrive5 programme

This programme promotes five activities, in order to give children the best start in life. Success of Five to Thrive is founded on the fact that it is not a rigid, one-size-fits-all programme. Rather, an array of resources, tools and training content is available to help tailor a strategy that best fits with local needs and aims. Central to the Five to Thrive approach is the set of five key activities:

Respond · Cuddle · Relax · Play · Talk



These are our 'building blocks for a healthy brain'. They are drawn from research into the key processes of attachment and attainment that forge bonds between young children and their carers. Crucially, they are designed to support positive feedback processes, enabling practitioners to observe and reinforce positive interaction between parents and their children.

No Health without Mental Health 2011

The government strategy for mental health captures the ambition to mainstream mental health in England and gives emphasis to the notion that mental health is everyone's business, as demonstrated by the subtitle 'a cross government mental health outcomes strategy for people of all ages'. A firm emphasis is placed on early intervention to stop serious mental health issues developing, particularly amongst children and its six key objectives detail how:

- More people will have good mental health.
- More people with mental health problems will recover.
- More people with mental health problems will have good physical health.
- More people will have a positive experience of care and support.
- Fewer people will suffer avoidable harm.
- Fewer people will experience stigma and discrimination.

Future in Mind.

In March 2015 the Department of Health and NHS England produced a taskforce report. The task force considered ways to make it easier for children, young people, parents and carers to access help and support when needed and to improve how children and young people's mental health services are organised, commissioned and provided.

Key themes, core principles and requirements fundamental to creating a system that properly supports the emotional wellbeing and mental health of children and young people were identified. In summary, the themes are:

- A. Promoting resilience, prevention and early intervention.
- B. Improving access to effective support – a system without tiers.
- C. Care for the most vulnerable.
- D. Accountability and transparency.
- E. Developing the workforce.

Local Transformation Plans

In August 2015 guidance was issued to CCGs about developing for children & young people's mental health and wellbeing. Over the next 5 years, a significant amount of additional money will be made available to flow via CCG's to support transformation programmes. Accessing this funding is dependent on demonstrating "strong local leadership and ownership at a local level through robust action planning and the development of publically available Local Transformation Plans for Children and Young People's Mental Health and Wellbeing." These plans will be based on the 2015 Department of Health and NHS England taskforce report 'Future in Mind'. What



Agenda Item 5

is included should be decided at a local level in collaboration with children, young people and their families as well as commissioning partners and providers.

Key objectives of the investment are:

1. Build capacity and capability across the system.
2. Roll-out the Children and Young People's Improving Access to Psychological Therapies programme.
3. Develop evidence based community Eating Disorder services for children and young people.
4. Improve perinatal care.

Objectives, actions and investment plans have been developed by bringing together current strategies and priorities and through further discussion with stakeholders. Investment was released for plans fully assured by NHS England in late 2015/16. This investment supports realistic and viable plans to spend investment within a financial year. Such expenditure must make direct and tangible contributions to the development and implementation of any plan and/or meaningful and immediate improvements in local service delivery, some of the activity may be non-recurrent.

The Five Year Forward View for Mental Health.

In February 2016 NHS England published This report from the independent Mental Health Taskforce to the NHS found half of all mental health problems have been established by the age of 14, rising to 75 per cent by age 24. One in ten children aged 5 – 16 has a diagnosable problem such as conduct disorder (6 per cent), anxiety disorder (3 per cent), attention deficit hyperactivity disorder (ADHD) (2 per cent) or depression (2 per cent). Children from low income families are at highest risk, three times that of those from the highest. Those with conduct disorder - persistent, disobedient, disruptive and aggressive behaviour - are twice as likely to leave school without any qualifications, three times more likely to become a teenage parent, four times more likely to become dependent on drugs and 20 times more likely to end up in prison. Yet most children and young people, the report finds, get no support. Even for those that do the national average wait for routine appointments for psychological therapy was 32 weeks in 2015/16. It recognised that a small group need inpatient services but, owing to inequity in provision, they may be sent anywhere in the country, requiring their families to travel long distances. The report went on to detail that children and young people are a priority group for mental health promotion and prevention

Counselling in Schools

In February 2016, A Blueprint for the Future was published by the Department of Education. This advice is non-statutory, and has been produced to help school leaders set up and improve counselling services in primary and secondary schools. It provides practical, evidence-based advice informed by experts on how to ensure school based counselling services achieve the best outcomes for children and young people. It also sets out the Government's expectation that over time we would expect to see all schools providing access to counselling services. It is equally relevant for schools with counselling services and those that currently have no access to them. It reflects views of children and young people on counselling, as well



as those of schools. It recognises that effective counselling is part of a whole school approach to mental health and wellbeing.

The future expectations are

- The mental health and wellbeing of children and young people is everyone's business. The benefits to the individual and to society in preventing problems from arising, and intervening early where they do, are significant. For schools this can result in improved attainment, attendance, reductions in behavioural problems, as well as happier, more confident and resilient pupils.
- The current extent of counselling provision in schools, alongside a range of other interventions and support programmes for pupils, makes it clear that many schools already recognise the value of making counselling services available in school settings. Schools have adopted a wide variety of approaches, and prioritised this within their existing funding, whether through the Dedicated Schools' Grant, or in some cases, the Pupil Premium.
- While in some cases school based counselling services may have been introduced to address problems with access to services outside of schools, it is clear that they are not only an established part of the school landscape, but play a significant role in overall provision of mental health services for children and young people.
- There is a strong expectation is that, over time, all schools should make counselling services available to their pupils. In line with the Government's wider approach to schools, allowing schools autonomy to make their own decisions about how to use their funding in the best interests of their pupils, we are not requiring this. But this guidance sets out the issues schools will want to consider where they do not have services in place.
- For the many schools that already have counselling services in place, the priority is to address the areas for development identified above. We want to support schools to ensure that the services they offer are of high quality, delivering value for money and improved outcomes for children and young people. This guidance draws on the direct experience of schools, the views of children and young people about counselling, and advice from an expert group drawn from key organisations.⁸ Many of these organisations have produced more detailed guidance and research which is referenced at the end of this document, and which schools may also wish to draw on in developing their services.
- The policy affirms that counselling is likely to be most effective where it is delivered as part of a whole school commitment to improving mental health and wellbeing. Some of the whole school actions will be focused on
 - Improving wellbeing and resilience
 - Raising awareness of mental health through the curriculum
 - Promoting staff health and wellbeing
 - Reducing the stigma around mental health
 - Interaction with the pastoral system



Agenda Item 5

- Leadership role

Mental Health and behaviour in schools.

In March 2016, the Department of Education published advice for school staff This non-statutory advice clarifies the responsibility of the school, outlines what they can do and how to support a child or young person whose behaviour - whether it is disruptive, withdrawn, anxious, depressed or otherwise - may be related to an unmet mental health need.

The key points are that

- In order to help their pupils succeed, schools have a role to play in supporting them to be resilient and mentally healthy. There are a variety of things that schools can do, for all their pupils and for those with particular problems, to offer that support in an effective way.
- Where severe problems occur schools should expect the child to get support elsewhere as well, including from medical professionals working in specialist CAMHS, voluntary organisations and local GPs.
- Schools should ensure that pupils and their families participate as fully as possible in decisions and are provided with information and support. The views, wishes and feelings of the pupil and their parents/carers should always be considered.
- Schools can use the Strengths and Difficulties Questionnaire (SDQ) to help them judge whether individual pupils might be suffering from a diagnosable mental health problem and involve their parents/carers and the pupil in considering why they behave in certain ways.
- There are resources available to help school staff support good mental health and emotional wellbeing. The PSHE Association has produced guidance and lesson plans to support the delivery of effective teaching on mental health issues. In addition, MindEd, a free online training tool, provides information and advice for staff on children and young people's mental health and can help to sign post staff to targeted resources when mental health problems have been identified.
- Schools should consider if their pupils would benefit from the offer of school counselling services. The Department for Education has published advice on how to set up and improve schools counselling services. Additionally, Counselling MindEd, which is part of MindEd, is also available to support the training and supervision of counselling work with children and young people.
- There are things that schools can do – including for all their pupils, for those showing early signs of problems and for families exposed to several risk factors – to intervene early and strengthen resilience, before serious mental health problems occur.
- Schools can influence the health services that are commissioned locally through their local Health and Wellbeing Board – Directors of Children's Services and local Healthwatch are statutory members.



- There are national organisations offering materials, help and advice. Schools should look at what provision is available locally to help them promote mental health and intervene early to support pupils experiencing difficulties. Help and information about evidence-based approaches is available from a range of sources.

4.0 WORKING GROUP APPROACH

- 4.1 Sefton Council in partnership with Sefton Clinical Commissioning Group for South Sefton and Southport and Formby, commissions Alder Hey Children's Hospital to provide a CAMH Service to Sefton as a whole. The Overview and Scrutiny Committee (Children's Services and Safeguarding) made a decision to review the Service as a result of some of the same concerns raised back in 2010 when the original review was undertaken regarding alleged unacceptable referral waiting times, discrepancies regarding funding and inconsistent provision of service across the Borough (inconsistent and fragmented support).
- 4.2 The Working Group felt that improving the mental health and psychological well being of all those Children and Young People who live within the borough of Sefton should be at the heart of this review.
- 4.3 Consequently it was agreed by Members that the review would explore the views of service users, providers of the service, the commissioners, Head Teachers Association and Voluntary Groups who provide support as well as exploring the background information provided about the service.
- 4.4 The following paragraphs will give some essential background information to the service.

5.0 WHAT IS EMOTIONAL WELLBEING AND MENTAL HEALTH?

- 5.1 "All children and young people face problems from time to time. Most manage well, but some find it difficult to cope or do not get the support they need to feel safe, happy and confident. Estimates suggest that mental health problems affect approximately one in ten children (figures drawn from a survey conducted in 2004 which looked only at people aged 5 to 15 years, so is likely to underestimate the current position for children and young people of all ages).

If a child or young person is feeling distressed or troubled, they may express their unhappiness in a number of ways, for example:-

- not sleeping, having nightmares;
- becoming disruptive in class;
- becoming sad and depressed;
- trying to harm themselves;
- getting fussy about food or cleanliness, or developing eating problems;
- having trouble making friends or finding relationships at home difficult;



Agenda Item 5

- becoming fearful and resentful;
- getting into fights and becoming aggressive;
- feeling “invisible”.

We want to help children and young people feel confident, make friends, form trusting relationships with adults, enjoy their own company and deal with the setbacks that everyone faces from time to time”. (Keeping Children and Young People in Mind)

- 5.2 Growing up can be a happy, joyful and exciting experience. It can also be hard and, at times, confusing and upsetting. The way in which opportunities and challenges are faced and resolved depends upon the balance between resilience and vulnerability factors within children themselves, their parents and carers, families and wider communities.
- 5.3 **The Council commissions a vital service that providers need to ensure is accessible by appropriate signposting.**

6.0 CHILDREN AND ADOLESCENT MENTAL HEALTH SERVICE - THE FRAMEWORK

- 6.1 Child and Adolescent Mental Health Services (CAMHS) deliver services in line with a four-tier strategic framework (tiers 1 to 3 local, tier 4 regional) which is now widely accepted as the basis for planning, commissioning and delivering services. Although there is some variation in the way the framework has been developed and applied across the country, it has created a common language for describing and commissioning services.

Most children and young people with mental health problems will be seen at Tiers 1 and 2. However, it is important to bear in mind that neither services nor people fall neatly into tiers. For example, many practitioners work in both Tier 2 and Tier 3 services.

Similarly, there is often a misconception that a child or young person will move up through the tiers as their condition is recognised as more complex. In reality, some children require services from a number (or even all) of the tiers at the same time.

The model is not intended as a template that must be applied rigidly, but rather as a conceptual framework for ensuring that a comprehensive range of services is commissioned and available to meet all the mental health needs of children and young people in an area, with clear referral routes between tiers.

- 6.2 Sefton currently commissions CAMHS services for Sefton from Alder Hey. As well as Tier 2 and 3 services, Sefton has specialist teams for Learning Difficulties and/or Learning Disabilities (LD), which work solely with youngsters who have severe and complex needs. A review dedicated to this cohort of Service Users has been established.
- 6.3 **Tier 1** – CAMHS at this level are provided by practitioners who are not mental health specialists, working in universal services; this includes GPs, health



visitors, school nurses, teachers, social workers, youth workers, voluntary agencies and 3rd sector agencies. Practitioners will be able to offer general advice and treatment for less severe problems, contribute towards mental health promotion, identify problems early in a child's development, and offer referrals to more specialist services if required.

- 6.4 **Tier 2** – Practitioners at this level tend to be CAMHS specialists working in community and primary care settings in a uni-disciplinary way (although many will also work as part of Tier 3 services). For example, this can include primary mental health workers, psychologists and counsellors working in GP practices, paediatric clinics, schools and youth services. Practitioners offer consultation to families and other practitioners, outreach services to identify severe or complex needs which require more specialist interventions, assessment (which may lead to treatment at different tier), and training to practitioners at Tier 1. Sefton Tier 2 service is known as BICS (Brief Intervention and Consultation Service).
- 6.5 **Tier 3** – This is usually a multi-disciplinary team or service working in a community mental health clinic or child psychiatry outpatient service, providing a specialised service for children and young people with more severe, complex and persistent disorders. Team members are likely to include child and adolescent psychiatrists, social workers, clinical psychologists, community psychiatric nurses, child psychotherapists, occupational therapists, art, music and drama therapists.
- 6.6 **Tier 4** – These are essential tertiary level services for children and young people with the most serious problems. Sefton currently commissions such services through the Strategic Health Authority at a regional level, via the Countess of Chester Hospital NHS Foundation Trust and services include day teams, highly specialised outpatient teams and in-patient units. Serving more than one district or region these include secure adolescent units, eating disorders units, specialist neuro-psychiatric teams (e.g. for children who have been the victims of serious abuse). There is also a unit based at Alder Hey Hospital that operates differently to that of the Countess of Chester Hospital.

7.0 INTERVIEWING WITNESSES

- 7.1 At their first meeting, Working Group Members scoped the review. This meant that they set out clear aims and objectives for the review and listed all key witnesses they would invite to interview. At that time the Working Group met to draft a guide to the lines of enquiry that should be followed when questioning key witnesses.
- 7.2 Witnesses' evidence has been referred to within the following paragraphs in relation to findings and evidence.
- 7.3 The following witnesses were interviewed:-



Agenda Item 5

- Ms. Debbie Fagan and Mr. Peter Wong, Clinical Commissioning Group for South Sefton and Southport and Formby Clinical Commissioning Groups
- Sefton Council - Director of Social Care and Health, Mr. Dwayne Johnson and the Head of Children's Social Care, Ms. Vicky Buchanan.
- Sefton – Making A Difference Group (MAD) along with Ms. Karen Gray, Corporate Parenting and Participation Officer.
- Services Users (Parents) also received written evidence
- Fiona Taylor, Chief Officer for South Sefton and Southport and Formby Clinical Commissioning Groups; and
- Representatives from Alder Hey.

The Working Group invited VENUS to attend a Meeting but unfortunately the representative had to cancel at the last minute. The Working Group also approached the Head Teachers Association and SASH but unfortunately never received a response.

7.4 The following statements will give a flavour and snap shot of what some key witnesses felt about CAMHS :-

There needs to be more early intervention at Tier one and two to avoid escalation into the more complex Tiers.

The experience never worked for me, I had therapy on and off for years at Waterloo 3 TC. The waiting times were too long. It would have been more beneficial to meet away from a building maybe by going out for a walk or doing something rather than meeting in a clinical setting.

The service never asked for direct feedback from service users.

I had various issues that I blocked out, I went into care and had to get on with it, I was never signposted to CAMHS or to any Voluntary Groups available. Having access to such services could have helped me come to terms with the events that I was going through.

My mum passed away when I was 17 and I was referred to Parenting 2000, this was of help. I went for bereavement counselling and I was told I was too optimistic. Looking back it would have been really helpful to have had a mentor in School. Two Children I know had mentors in School and they valued them.



I was 16 when I fell pregnant. My Mother kicked me out of the family home. There was a lack of continuity in terms of the support I received. I was diagnosed with depression and anxiety and so the baby was living with its Dad. I was transitioning from Child Services to Adult Services and Merseycare kept cancelling my appointments and if the appointments were kept it would be a different person so I had the ordeal of telling my story over and over, I found this emotionally draining. In my opinion there is a gap in the availability of specific services for 18 – 25 year old Looked After Children.

I found it more beneficial working with my key worker, it was more therapeutic.

“It would be beneficial to have a Leaving Care Mentor for ages 18 – 25”

“Post 18 years – I worry that they don’t receive the emotional support that they may require”

CAMHS – No cohesive approach, no intervention for early years, North and South divide. There needs to be a Borough Wide Service that interacts and recognises emotional well-being early on in a child’s development.

Parents Story:

“I have had a long battle trying to get a CAMH Service for my Daughter. I had problems getting her into School, it got to crisis point and she ran away from home. My G.P. referred her to CAMHS, at the assessment they stated that my case wasn’t an appropriate case for CAMHS. There wasn’t any support from the School. Each time there was an issue I had to phone the Police and they aren’t equipped to deal with Children who have emotional difficulties. My Daughter threatened my Son and I with a knife, the CAMHS crisis team weren’t working as it was a Bank Holiday. After that incident the CAMH Service undertook an assessment but they refused to offer the care at home and my Daughter wouldn’t engage in a clinical setting so she was discharged. In total 9 appointments were made with the Social Worker who never attended. I found it upsetting when I was offered a parenting course, like it was my parenting that had failed my Daughter. Ultimately I felt like I had no support or help from the CAMH Service, Social Worker or School”

Agenda Item 5

Parents Story:

“I feel like everything is down to me, I feel isolated with no help. I complained to the responsible Officer for Schools in the Council. The School stated that my child didn't meet the criteria for additional help, I've been asking for help since my child was 5 years old and is now 10 years old”.

Parents Story

“My Daughters journey with CAMHS began when she was 6 years old, the School nurse referred her to CAMHS after she had a meltdown over the Christmas period and was threatening to kill herself. We had 6 sessions and then she was discharged. My Daughter found it difficult to maintain friendships, she had to go through little routines before doing the everyday things. At home she was displaying anxiety issues. Well Young People (WYP) have been brilliant in supporting her and the family in the transition to High School. A learning mentor was assigned to her at the age of 14, she was always tearful, any breaks in routine were barriers. She started self-harming, I made arrangements through the SEAS project for my Daughter to see a Counsellor who worked with my Daughter but she was still self-harming. As a family we sort out a private psychologist in Manchester who stated that my Daughter had a Social Communicative Disorder. My Daughter will be 18 soon and so will not be able to access the CAMH Service. It would be helpful if the Service went up to age 25 for all. I believe that the transitioning will be with Merseycare but I am not sure what the plan is. I knew that my Daughter had issues and it would have been more helpful if we'd been believed all those years ago instead I was told it was a parenting issue.”

Parents Story:

“My Son is nearly 18 years old, we went through some bad times. My Ex Partner had issues which meant that they were bouncing off one another”.

“There was no continuity with assigned Social Workers”.

“He went to one particular place which didn't cater for his needs”.

“Signposting to services was poor and needs to be improved with an explanation of what services are available”.



I believe you would like info about people's experiences of CAMHS in Sefton.

Ours has been disgraceful. Our so-called case manager decided he knew better than a multitude of other professionals including the top paediatrician on Merseyside, refused to read my child's history, failed to understand or 'believe in' PDA, failed to communicate, offered nothing of any use, failed to even keep proper notes of sessions, and then blatantly lied about it.

When I put in a complaint about his lack of support he chose to go against all professional advice, and put in a vindictive social services referral accusing me of inventing my child's difficulties for my own gain. (Munchausen's by Proxy, which is actually a lot rarer than PDA, perhaps if he'd bothered to educate himself he would have known that.) This happened at the end of March 2016, on the VERY LAST day of his contract with Sefton, after he had not actually seen my son since May 2015.

This was disgusting unprofessional behaviour from someone in a position of trust, and he abused that trust. He acted like a spoiled child and in my opinion should be struck off as unfit to work with vulnerable families.

I am still waiting for the complaint to be properly investigated by the Health Ombudsman as Alder Hey's response was 'poor timing'. This does not come anywhere near close to an adequate response.

I hope lessons have been well and truly learnt, and that CAMHS educate themselves about autism and other conditions. I am aware that some staff have recently attended PDA training, this is a start, but not enough on its own.

We are now seen by Liverpool CAMHS, but still yet to receive any useful help.

Agenda Item 5

Healthwatch complaints:

- 1) 6 month wait for daughter to be seen at CAMHS. Daughter is 13 years old and suicidal and self harming. The school have referred her in. Mum has said the school have been brilliant with her but she has no support at home. Mum has phoned Alder Hey to see if they have a crisis team but they have said if she goes in it would have to be through A&E and referred again from there. Mum stated if she took her daughter into A&E she would be able to hide it anyway. Mum stated this is affecting the whole family and she has a 15 year old son who is doing exams this year but he is so worried about his sister.
- 2) Having trouble with where to go with her son, who is 11, and has extreme behavioural problems. Has been for a general physical check up at Alder hey after referral from GP. Was then sent to CAMHS. CAMHS refused to continue as there was a 'chaotic home environment' - this seemed unfair because this chaos was being caused by her son who they were supposed to be helping. Has been trying to get him proper help for years but still getting nowhere - a social worker has got involved and pushed for him to be seen by CAMHS again. he is getting older now and has hit her & been violent over the years, she feels it's getting worse. Is on a waiting list for CAMHS but feels the process has been very long and difficult.
- 3) Referred to CAMHS by paediatrician. Has been referred to Liverpool CAMHS for assessment, due to a complaint which is ongoing with Sefton CAMHS. However after the assessment in Liverpool, he will be sent back to Sefton CAMHS - feels this isn't right. Due to CAMHS for Merseyside being funded by Alder Hey, all are interlinked. Wants to come away from the places being complained about and make an individual funding request to get him transferred to Lancashire CAMHS, given this would be less physical distance from their house than Liverpool.
- 4) Waiting too long with little support. I have had trouble finding mental health support for my son, who is 11 and has behavioural problems. He has been for a general physical check up at Alder hey after being referred by a GP. Was then sent to CAMHS – was going okay but then CAMHS refused to continue the treatment. This is unfair because CAMHS are involved because we needed the support. For years I wanted him to have proper help and support from mental health clinicians but we still haven't achieved this. A social worker became involved and pushed for him to be seen by CAMHS again. As he is older now and has been violent over the years, it is crucial we get some consistent support in place. My son is now on a CAMHS waiting list. This whole process has been very long and difficult.



7.5 The Working Group concluded its work by interviewing representatives from Alder Hey, who stated that its priority was to provide the best services to Children and Young people with a view to, as far as possible, ensure that Sefton was an area whose Children and Young People were emotionally well.

7.5.1 Members of the Working Group were keen to follow up concerns raised by key witnesses in relation to the transition arrangements. It was highlighted that concerns raised back in 2010 when the initial review took place were still apparent.

7.5.2 The representatives from Alder Hey stated that they were working with MerseyCare to make the transitioning experience a smooth one and referred to the following improvements that had already been incorporated:-

- Transition Step by Step Guide.
- Transition Planning Checklist.
- CAMHS discharge and transfer of care referral template.

7.5.3 Representatives from Alder Hey provided the following information/evidence

(A) Sefton CAMHS vision

Through excellent clinical leadership create an environment in which staff are valued and empowered to provide high quality compassionate care.

To provide child, family focussed, effective, evidence based, efficient, high quality and safe interventions for children and young people with serious mental health difficulties and complex emotional and behavioural difficulties.

Encourage clinicians to be creative and innovative to provide an accessible, fair inclusive service including the hard to reach populations.

Work together with children and families in an honest and transparent way.

Create a nice, clean, bright, friendly, safe and containing environment from where clinicians will work and from where care will be delivered.

(B) Service Transformation CYP-IAPT

Sefton CAMHS (Alder Hey) is the lead agency for the Sefton Improving Access to Psychological Therapies Partnership for Children and Young People (CYP-IAPT) NHS England driven initiative for service transformation with 4 key concepts:

Participation – Sefton CAMHS has a young person and parent participation group and links/works in partnership with a Sefton-wide participation group to ensure an

Agenda Item 5

active service user voice flourishes in Sefton and in particular with regard to Mental Health.

Routine Outcomes – we are working towards producing regular outcome reporting and increasing our pre and post data in line with IAPT ideals. Please see recent data later in the report.

Access (including self-referral) – We accept self-referrals and work with our partner agencies and commissioners to offer easier and quicker access to service when needs suggest these services are required.

Training for Evidence Based Programmes – 50% of our current staff have been facilitated to access CYP IAPT training programmes and we offer supervision and support to our Partnership to enable their employees to access these training packages.

(C) Service Delivery

Sefton CAMHS Activity Data:
October 2016-August 2017

Referrals: All referrals for planned care are received via the SPA. Not all referrals into the service are appropriate. In these instances we try wherever possible to re-direct referrals to the most appropriate agency/service that can meet the specific needs of the child.

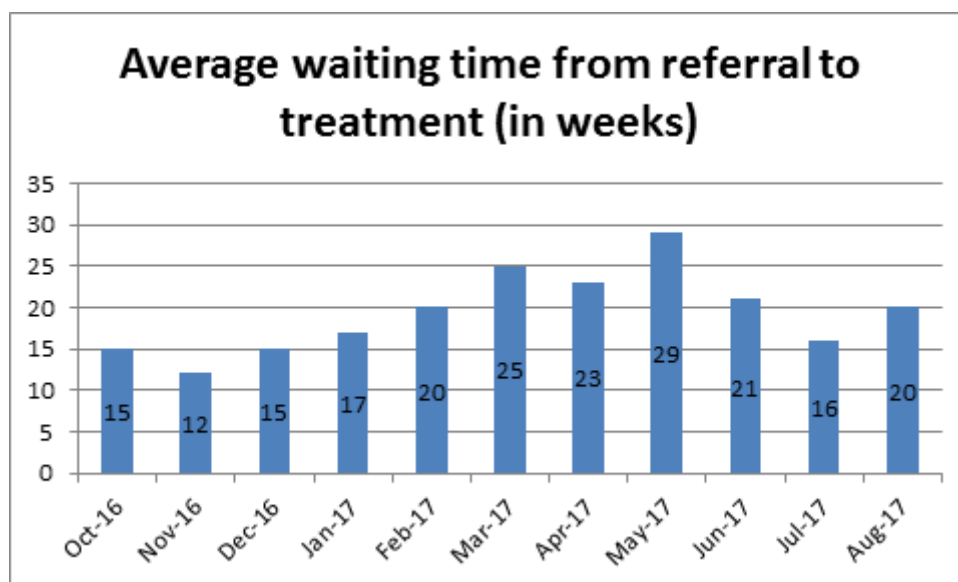
	Referrals Received	Accepted for Assessment
Mar-16	104	69
Apr-16	87	64
May-16	135	98
Jun-16	111	85
Jul-16	94	65
Aug-16	79	61
Sep-16	144	101
Oct-16	114	79
Nov-16	140	96
Dec-16	116	78
Jan-17	133	77
Feb-17	159	80
Total	1416	953

Comparison with neighbouring provider 5BP NHS Trust (this data is from 2016 figures as unable to make comparison for 2017 as lack of data available)



	Alder Hey	5BP (data from local transformation plan)
Referrals Received	1372	1137
Assessments Undertaken	974 (71%)	734 (65%)
Conversion to treatment	409 (42%)	204 (28%)
Average Wait referral to assessment	14	30
Average Wait assessment to treatment	52.5	58
Average wait referral to treatment	66.5	88
Service Caseload	528	298

Of the cases assessed (offered a Choice appointment) an average of 42% go on to treatment. This is based on a comprehensive assessment of need and mutual agreement between the child/family and the clinician.



There are no national waiting times target from CAMHS and access and waiting times for CAMHS is an issue nationally. As you will see from the graphs above, waiting times for our service had decreased significantly until June this year. At that time disinvestment from the local authority, staff sickness and staff leaving had a negative impact. Waits have increased and we have an action plan to bring waits down.

We anticipate national wait times will have a 12 week referral to treatment target and we hope to be compliant with these waiting times when they are introduced.

Agenda Item 5

(D) Providing a safe service

Risk Assessment and Management:

All referrals received are triaged by Single Point of Access (SPA) staff using a clinical risk screening tool. Referrals identified as urgent are seen within a maximum of 2 weeks and those deemed 'routine' will be placed on the routine waiting list (currently 16 weeks). The clinical risk tool is re-visited at both Choice Appointment (Assessment) and again at commencement of treatment. Young people requiring emergency treatment are seen the same day via the Emergency Department.

The image shows two screenshots of the CAMHS Clinical Risk Screen tool. The top screenshot displays the 'Clinical Risk Screen' section, which includes fields for Date, Start time, and Comment. It also features a table for 'Referral criteria' with columns for 'Yes', 'No', and 'Comment'. The criteria listed are Behaviour difficulties, Anxiety symptoms, Mood disturbance, Sleep disturbance, Eating difficulties, Self-harm/Self-injurious behaviour, and Perceptual abnormalities. The bottom screenshot displays the 'Self Harm' section, which includes a table for 'Current behaviour' with columns for 'Yes', 'No', and 'Not known'. The criteria listed are suggests risk of suicide, Previous suicide attempts, Serious intent expressed or indicated eg. dangerous method, Expression of concerns from friend or relative, Current feelings of hopelessness/helplessness, Carers unable/unwilling to keep child safe, Previous incidents of self-harm, History in family/peer group of self-harm, Current problems with alcohol or substance mis-use, Concerns about major mental illness, and Any other issues.

Our Single Point of Access is staffed by highly skilled and experienced mental health nurses (RMN's) and mental health practitioners (MHP's). In addition there is a named Consultant of the Day to provide senior medical overview and support.



(E) Staffing

Category	Sefton Specialist		Single Point of Access (Sefton and Liverpool)	
	WTE	Amount	WTE	Amount
Administration	6.8	8	6.7	7
Clinical Staffing	20.4	24	14.78	15
Medical Staffing	2.4	3	2	3
Managerial	2	2	1.5	2
Total	30.3	37	24.98	27

Clinical Staffing comprises:

- Clinical Psychologists
- Psychotherapists
- Nursing
- Family Therapists
- Mental Health Practitioners (social workers, other therapists)

Medical Staffing comprises Consultant Child & Adolescent Psychiatrists

All staff are required to maintain registration with their core professional bodies and receive robust clinical and managerial supervision to ensure clinically safe practice.

(F) Governance

All clinical staff are offered at least 1.5 hours of clinical supervision per month. This is consistent with professional guidelines. In addition, more junior staff are offered additional supervision (band 5 keyworkers offered weekly supervision, band 6 staff offered 2-3 weekly supervision).

Within Sefton CAMHS there are 3 multi-disciplinary teams (MDT). Each MDT meets weekly for 2 hours. During these meetings any children/young people who are at risk are discussed to review risk management strategies and clinically review the intervention. We also discuss any children/young people where progress is not being made, to review whether any additional work should be offered. Children/young people who are new to the service are discussed and the formulation/treatment plan reviewed. Successful outcomes are also shared.

In addition to the weekly MDTs, we hold a weekly staff meeting. This rotates between staff well-being, business, special interest groups and Continuing Professional Development (CPD). Recently, CPD topics have included incident reporting, information governance and transition.

Our Head of Quality provides a monthly quality update which includes information on incidents reported, PALS/complaints and friends and family feedback. Any actions arising are recorded and a plan developed to meet the needs.

Agenda Item 5

(G) Clinical Outcomes & Quality Measures

Routine Outcome Measure:

Number of cases discharged from January – June 2017. N= 226

1. RCADS & SDQ

Number of cases with at least one T1 measure	145 (64%)
Number of cases with a paired outcome measure	49 (22%)

2. RCADS

Number of cases with T1 measure	132 (58%)
Number of cases with T2 measure	44 (20%)

Subscale	Average Score		
	T1	T2/T3	% Change
Total Anxiety Scale	50	31.85	33%
Total Internalising Scale	63.0	41	34.5%

3. SDQ

Number of cases with T1 measure	70 (62.5%)
Number of cases with T2 measure	35 (16%)

Subscale	Average Score		
	T1	T2/T3	% Change
Total Difficulties	18.4	11.5	38.4%
Total Impact	5.4	1.8	60%

(H) Experience of Service Questionnaire:

Recently we completed a week long dip test for parent and young person experiences of our service using the Experience of Service Questionnaires. 28 questionnaires were completed by parents and 12 by children and young people. The qualitative findings were as follows:

For Parents:

100% of parents reported that the person who saw them listened to them and was easy to talk to.

100% of parents reported that they were treated well by the service and that the help they received was good.



97% of parents reported that the person they saw knew how to help them.

91% of parents reported that they were given enough explanation about the treatment and that professionals were working together. The rest of the parents reported that this was partly true.

89% of parents reported that their views were taken seriously and 86% of parents reported that they would recommend the service to a friend. Again the other parents reported that this was partly true.

Only 80% of parents felt that the appointments were easy to get to and the facilities were comfortable.

Only 74% of parents reported that the appointments were at a convenient time.

For young people:

100% of young people reported that their views were taken seriously and that they were treated well by the people who saw them.

100% of young people reported that they had enough explanation of their treatment and the people who saw them were working together.

100% of young people said that the appointments were easy to get to.

100% of young people reported they would recommend the service to a friend and that the help they received was good.

95% of young people reported that the person they saw knew how to help them and the person they saw listened to them.

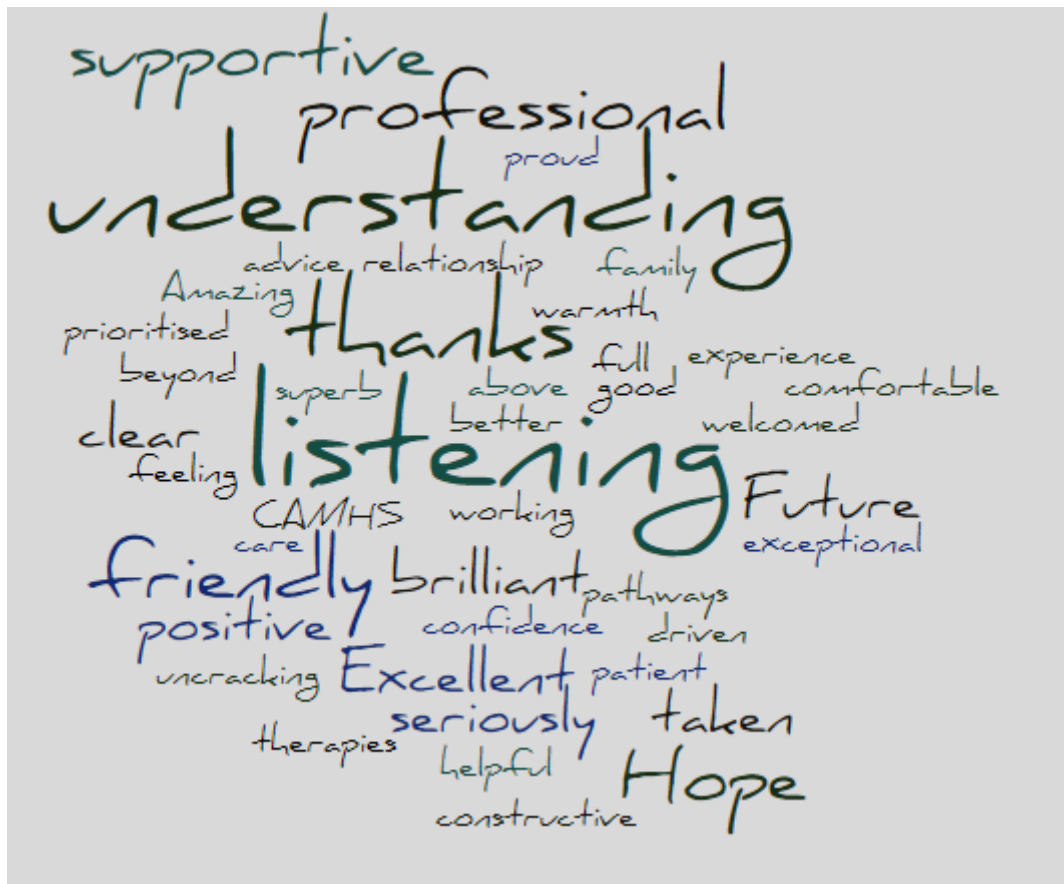
94% of young people reported the facilities were comfortable.

50% of young people reported it was totally true that the person was easy to talk to, 35% said this was partially true.

73% of young people said appointments were at a convenient time.

From the written responses that were given we were able to enter the words into a programme which provided a pictorial representation. The larger words are those mentioned more often. The larger the font the more that word or them featured in the written feedback on the questionnaires.

Agenda Item 5



- 7.5.5 Members of the Working Group acknowledged that the unacceptable appointment waiting times were not unique to Sefton and this was a National issue however Members were concerned that there didn't seem to be any improvements made since the initial review in 2010.
- 7.5.6 Whilst interviewing key expert witnesses it was apparent from them that there is a clear commitment and genuine passion to provide the best possible service to the children and young people of Sefton.
- 7.5.7 There didn't seem to be any positive feedback from the majority of key witnesses regarding CAMHS which contradicts the survey undertaken by Alder Hey, detailed analysis above. The same frustrations that were raised by Sefton's service users in 2010/2011 were evident and they were in relation to waiting times, missed/cancelled appointments and processes. Pre and after-care were highlighted as being just as important.

8.0 FINDINGS/CONCLUSIONS

- 8.1 In 2010/11 a Working Group of Members appointed from the then Overview and Scrutiny Committee (Children's Services) undertook a review, investigating CAMHS. It was disappointing to learn that issues with regards delayed waiting times for those requiring accessing to CAMHS had not improved. Evidence received from parents, young adults (representatives from the MAD group), Clinical Commissioning Group representatives and representatives from Alder Hey illustrate this. Working Group Members felt that they were left with no other alternative than to suggest that the Clinical Commissioning Group for South Sefton and Southport and Formby be requested to issue a statement to Alder Hey expressing concerns regarding all waiting times within the referral into the CAMHS process (Reference Recommendation 1)
- 8.2 During the investigation and interviewing key witnesses it became apparent that there seemed to be an alleged knowledge gap in teachers understanding Children who are emotionally challenged. An invitation was sent to the Head Teachers Association to attend a meeting of the working group, unfortunately a response to that invitation wasn't received. Members of the Working agreed that some training should be provided to key staff in Schools in order that the signs of emotionally challenged children could be picked up early and a mentoring scheme introduced – early intervention and prevention is key to preventing Children and Young People escalating into the more complex areas of CAMHS. (Reference Recommendations 2 and 3)
- 8.3 Throughout the investigation the lack of quality signposting with an explanation of services available was echoed. Working Group Members were surprised to hear of support groups available that were unknown to them. Members of the Working Group felt that if they didn't know of some of the services available then neither would the majority of residents. (Reference Recommendation 4)
- 8.4 Representatives from the Making A Difference (MAD) group referred to the transition arrangements into adult services as being poor with weak joined up working. The representatives from Alder Hey had made reference to some changes that have been made however Members of the Working Group agreed that a gap remained in transition for all Children and Young People including Looked After Children. (Reference Recommendation 5)
- 8.5 There is a wide recognition of the vital role that schools play in supporting the mental health of their pupils. From tackling bullying, to identifying the early signs of mental health problems, to promoting wellbeing through all aspects of school life, schools are well placed to support children and young people with their social, emotional and mental wellbeing. Positive relationships between staff and pupils are also important, as teachers may be among the first adults

Agenda Item 5

to notice the signs that a child or young person's mental health is deteriorating.

Drawing on evidence received, Members of the Working Group agreed that social stigma associated with mental health (emotional wellbeing) issues still existed. Members were keen to see Schools promote health, emotional and wellbeing in educating Children and Young People from an early age. There was a view that this could also provide opportunities for Early Intervention and Prevention measure to be put in place which could prevent issues escalating. (Reference Recommendation 6)

- 8.6 The Lead Member, Councillor Hands wrote to the Rt Hon Norman Lamb raising concerns with regards funding that had been released to be used for children's mental health issues. The response received was:

"The final Coalition budget secured an additional £1.25bn for children's mental health funding, to be spread over five years (i.e. £250 million a year).

However, in the first year of the programme (2015-16), only £143m was released by the Government. This was broken down as follows:

- £75m - Clinical Commissioning Groups
- £21m - Health Education England
- £15m - Perinatal care (£11m underspend)
- £12m - Improving Access to Psychological Therapies programme
- £10m - Hospital beds
- £5m - Administrative costs for NHS England (£4m) and Department of Health (£1m)
- £2m - Improving care for young people in the justice system
- £2m - Joint programme with Department for Education to improve services in schools
- £1m - Support for children with learning disabilities in long-term care

In the second year of extra funding (2016-17), research by the charity Young Minds revealed that only 50% of CCGs increased their CAMHS spend by as much as their additional government funds. The other half are using some or all of the extra money for other priorities. Part of the difficulty is that the funding has not been ring-fenced and is included as part of the CCG's baseline allocation. As a result, it is thought that some of this money is being diverted to keep other services afloat".

Working Group Members agreed that the funds released to Clinical Commissioning Groups to be used for children's mental health should be used for just that. Members urge the Director of Social Care and Health in consultation with the Head of Children's Social Care to work in collaboration with the Clinical Commissioning Groups for South Sefton and Southport and Formby to release funds to the CAMH Service and more specifically Tier 1 and Tier 2 to invest in Early Intervention and Prevention, without delay. (Reference Recommendations 8 and 9)



- 8.7 Members of the Working Group requested the representatives from the Clinical Commissioning Groups for South Sefton and Southport and Formby to provide a detailed analysis of how funding was spent in relation to CAMHS. Unfortunately this information has yet to be provided. (Reference Recommendations 8, 9 and 10)

9.0 ACKNOWLEDGEMENTS AND SUPPORTING INFORMATION

- 9.1 The Working Group is grateful to all those witnesses and other persons who have assisted with research, provided and shared information and given up time to attend interviews.
- 9.2 The Working Group would like to take this opportunity to thank Members, Officers and Partner Organisations who are all working hard to provide CAMHS across the Borough.
- 9.3 During the process of this review, the Working Group has gathered a substantial amount of information and data, which has been invaluable in helping it to form its conclusions and recommendations.
- 9.4 Any background information that has been gathered so far is available on request from Ruth Harrison, Overview and Scrutiny Officer (telephone 0151 934 2042 e-mail: ruth.harrison@sefton.gov.uk)



Agenda Item 5

RECOMMENDATIONS

- (1) That the Clinical Commissioning Group for both Southport and Formby and South Sefton be requested to issue a statement to Alder Hey expressing concerns regarding all waiting times within the referral into CAMHS process and notifying them that unless improvements are made within a reasonable timescale (6 months) then notice will be given to terminate the contract;
- (2) That the Head of Schools and Families in consultation with the Head of Children's Social Care be requested to investigate with all sectors of schools and colleges the feasibility of providing Emotional Health and well-being training to nominated staff working in Sefton's Schools;
- (3) That the Head of Schools and Families in consultation with the Head of Children's Social Care be requested to work with the Head Teachers Associations to investigate establishing an Emotional health and well-being mentoring scheme.
- (4) That the Head of Children's Social Care in consultation with Sefton CVS, be requested to provide a comprehensive list of all voluntary and charity groups that work with emotional health and wellbeing, publishing the list on the website, the Councils website and disseminating the information to all Schools throughout the Borough, signposting individuals to all the groups available;
- (5) That Merseycare be requested to investigate setting up a transitional arrangement in the Borough for outreach facilities for CAMHS ages 16 – 19 years (25 years for Looked After Children);
- (6) That the Head of Schools and Families in consultation with the Head of Children's Social Care be requested to work with the Head Teachers Associations to consider incorporating Emotional Health and well-being into the Personal and Social Education Curriculum.
- (7) That the Head of Regulation and Compliance be requested to approach Alder House with a view to extending an invitation to all Members of the Overview and Scrutiny Committee (Children's Services and Safeguarding) to attend a site visit to Alder House;
- (8) That the Director of Social Care and Health in consultation with the Head of Children's Social Care be requested to work in collaboration with the Clinical Commissioning Group for both Southport and Formby and South Sefton, be



requested to identify and release funds to Emotional Health and well – being specifically Tier 1 and Tier 2 to invest in Early Intervention and Prevention;

- (9) That the Chief Officer for both South Sefton and Southport and Formby Clinical Commissioning Groups be requested to notify the Head of Regulation and Compliance of the re-aligned budget allocation for Children and Adolescent Mental Health Services in Sefton as a result of Recommendation (8) above;
- (10) That the Chief Officer for both South Sefton and Southport and Formby Clinical Commissioning Groups be invited to a future Meeting of the Overview and Scrutiny Committee (Children’s Services and Safeguarding) to present it’s budget allocation for Children and Adolescent Mental Health Services in Sefton;
- (11) That the Head of Schools and Families in consultation with the Head of Children’s Social Care be requested to provide an annual update in relation to the implementation of recommendations to the Overview and Scrutiny Committee (Children’s Services and Safeguarding); and
- (12) That the Cabinet be requested to refer the Children and Adolescent Mental Health Services Final Report to the Health and Wellbeing Board for information and comment.

Overview & Scrutiny



For further Information please contact:-

Ruth Harrison

Senior Democratic Services Officer

0151 934 2042

ruth.harrison@sefton.gov.uk

Sefton Council 



Agenda Item 6

Report to: Cabinet
Council

Date of Meeting: 11 January 2018
25 January 2018

Subject: Programme of Meetings – 2018/19 Municipal Year

Report of: Head of Regulation and Compliance

Wards Affected: All

**Is this a Key Decision? No
Plan?**

**Is it included in the Forward
No**

Exempt/Confidential

No

Purpose/Summary

To seek approval of a Programme of Meetings for the 2018/19 Municipal Year.

Recommendations:

Cabinet

That the Programme of Meetings for the Cabinet, Public Engagement and Consultation Panel, Sefton Safer Communities Partnership and the Health and Wellbeing Board for 2018/19 as set out in Annexes A and D of the report be approved; and

Council

That

1. the Programme of Meetings for the Council, Member Briefing Sessions; Regulatory Committees; and Overview and Scrutiny Committees for 2018/19 as set out in Annexes B and C of the report be approved; and
2. the Programme of Meetings for the Cabinet, Public Engagement and Consultation Panel, Sefton Safer Communities Partnership and the Health and Wellbeing Board for 2018/19 as set out in Annexes A and D of the report be noted.

Reasons for the Recommendation:

To enable the business of the Council and its various Committees/bodies to be conducted during the 2018/19 Municipal Year.

What will it cost and how will it be financed?

(A) Revenue Costs

None.

(B) Capital Costs

None.

Agenda Item 6

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"/>

Contribution to the Council's Core Purpose

Protect the most vulnerable: Not applicable
Facilitate confident and resilient communities: Not applicable
Commission, broker and provide core services: Not applicable
Place – leadership and influencer: The Programme of Meetings for 2018/19 will be published on the Council's website for the benefit of the residents of Sefton and the wider 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.
Drivers of change and reform: Not applicable
Facilitate sustainable economic prosperity: Not applicable
Greater income for social investment: Not applicable
Cleaner Greener: Not applicable

What consultations have taken place on the proposals and when?

The Head of Corporate Resources (FD 4872/17) has been consulted and notes there are no direct financial implications arising from this report.

The Head of Regulation and Compliance (LD 4156//17) is the author of this report.

The Chief Executive, the Head of Communities, the Head of Health and Wellbeing, the Head of Regeneration and Housing and the Head of Corporate Resources have been consulted.

Are there any other options available for consideration?

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

Implementation Date for the Decision

In respect of the Programme of Meetings for the Cabinet, Public Engagement and Consultation Panel, Sefton Safer Communities Partnership and the Health and Wellbeing Board the implementation date will be upon the expiry of the call-in period of the minutes of the Cabinet meeting.

In respect of the Programme of Meetings for the Council, Member Briefing Sessions; Regulatory Committees; and Overview and Scrutiny Committees 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 2018/19 Municipal Year.

1.2 The following annexes are attached to the report:

- Annex A - Programme of Meetings for the Cabinet in 2018/19
- Annex B - Programme of Meetings for the Council, Members' Briefing Sessions and Regulatory Committees in 2018/19
- Annex C - Programme of Meetings for the Overview and Scrutiny Committees in 2018/19
- Annex D - Programme of Meetings for the Public Engagement and Consultation Panel, Sefton Safer Communities Partnership and the Health and Wellbeing Board in 2018/19.

1.3 Similar to the arrangements put in place last year once the programme of meetings are approved, an "in-house" diary will be produced for Members of the Council.

Agenda Item 6

2. Programme of Meetings 2018/19

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

- 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 28 February 2019.
- Council will not meet on the same day as Cabinet.
- Members' Briefing Sessions to be held at 5.00 p.m. prior to the five Ordinary Council Meetings.
- No meetings will be held:
 - In the period between Christmas and New Year (Dec 2018/Jan 2019)
 - In April 2019 except for the meetings of the Planning Committee, Cabinet and Council.
- As far as possible no meetings will be held during the school half term holiday weeks.
- The venues for all meetings alternate between Bootle and Southport Town Halls.
- Cabinet Meetings to be held on a Thursday at 10.00 a.m. The first meeting to be held on 24 May 2018.
- 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 Working Groups established on an ad hoc basis.
- Special meeting of the Overview and Scrutiny Committee (Regulatory, Compliance and Corporate Services) to be held on 12 February 2019 to scrutinise the Cabinet budget process.
- Overview and Scrutiny Management Board to meet 5 times per year, commencing at 4.30 p.m.
- Licensing and Regulatory Committee to meet quarterly 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.
- Health and Wellbeing Board to meet 4 times per year.
- The dates for the Public Engagement and Consultation Panel, which are not public meetings are included in the Corporate Calendar.

3. Calendar of Meetings

3.1 A copy of the Calendar of Meetings for 2018/19 and associated annexes are attached.

ANNEX A
METROPOLITAN BOROUGH OF SEFTON
PROGRAMME OF CABINET MEETINGS - 2018/2019

Meeting	Day	Time	Venue	2018								2019					
				May	June	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	
CABINET	Thur.	10.00 a.m.	B	24		26				4		6		7	7		23
			S		21			6		1		10	14		4		

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. - 2018/2019

Meeting	Day	Time	Venue	2018								2019						
				May	June	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	June	
COUNCIL	Thur.	6.30 p.m.	B	17←					20				24	28→			16↓ Tue	
			S	15↑			19				15					25		14°
MEMBERS' BRIEFING SESSIONS Prior to each Ordinary Council Meeting	Thur.	5.00 p.m.	B						20				24					
			S				19				15					25		
AUDIT AND GOVERNANCE COMMITTEE	Wed.	3.00 p.m.	B		27				12									
			S									5			20			
DEALS (FOR PERSONNEL ISSUES) - as and when required	Thur.	-																
PLANNING AND REGULATORY COMMITTEE	Mon.	6.30 p.m.	B		18								7					
			S						10							18		
LICENSING SUB-COMMITTEE - as and when required			B															
			S															
PLANNING COMMITTEE	Wed.	6.30 p.m.	B	↑30		4	29			17		12		6	27			
			S		6		1	26		14			16		6	24		
PLANNING VISITING PANEL	Mon	10.00 a.m.	B		4	2/30	28 Tues	24	15	12	10	14	4	4 25	23 Tues			
PAY AND GRADING COMMITTEE – as and when required																		

↑ Annual Meeting 2018/19 - commences at 6.00 p.m. (Tuesday)
 ← Adjourned Annual Meeting - Appointment of Committees etc. for 2018/19
 → Budget Meeting
 †Mandatory Planning Committee

° Annual Meeting 2019/2020 - commences at 6.00 p.m. (Tuesday) (Venue to be determined)
 ↓ Special Meeting - Appointment of Committees etc. for 2019/2020

ANNEX C
METROPOLITAN BOROUGH OF SEFTON
PROGRAMME OF MEETINGS FOR OVERVIEW AND SCRUTINY COMMITTEES - 2018/2019
(Tuesday)

Meeting	Venue	2018								2019				
		May	June	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May
OVERVIEW AND SCRUTINY COMMITTEE (Adult Social Care) (6.30 p.m.) (Tue)	B		26				16					26		
	S					4				8				
OVERVIEW AND SCRUTINY COMMITTEE (Regulatory, Compliance and Corporate Services) (Tue) (6.30 p.m.)	B					11				15	*12			
	S		12				30					5		
OVERVIEW AND SCRUTINY COMMITTEE (Regeneration and Skills) (6.30 p.m.) (Tue)	B			3					6			12		
	S					18				22				
OVERVIEW AND SCRUTINY COMMITTEE (Children's Services Safeguarding) (6.30 p.m.) (Tue)	B					25				29				
	S		19						13			19		
OVERVIEW AND SCRUTINY MANAGEMENT BOARD (4.30 p.m.) (Tue)	B		26			25			6		15		12	
	S													

* Special meeting to consider Budget proposals.

ANNEX D
METROPOLITAN BOROUGH OF SEFTON
PROGRAMME OF MEETINGS FOR PARTNERSHIP MEETINGS- 2018/2019

Meeting	Day	Time	Venue	2018								2019				
				May	June	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May
PUBLIC ENGAGEMENT AND CONSULTATION PANEL ^	Fri	10.00 a.m.	B	18		13		14		16		18		15		
			S													
SEFTON SAFER COMMUNITIES PARTNERSHIP	Thu	10.00 a.m.	B		14			13			13			14		
			S													
HEALTH AND WELLBEING BOARD	Wed.	2.00 p.m.	B		13			19			12			13		
			S													

Meetings video conferenced to Southport Town Hall

Agenda Item 6

SEFTON COUNCIL CALENDAR OF MEETINGS 2018/19

MAY 2018		
TUE	1	
WED	2	
THU	3	COUNCIL ELECTIONS
FRI	4	
SAT	5	
SUN	6	
MON	7	MAY BANK HOLIDAY
TUE	8	
WED	9	
THU	10	
FRI	11	
SAT	12	
SUN	13	
MON	14	
TUE	15	6.00 ANNUAL COUNCIL (VENUE TO BE DETERMINED)
WED	16	
THU	17	6.30 ADJOURNED ANNUAL COUNCIL (B)
FRI	18	10.00 PUBLIC ENGAGEMENT AND CONSULTATION PANEL (B)
SAT	19	
SUN	20	
MON	21	
TUE	22	
WED	23	
THU	24	10.00 CABINET (B)
FRI	25	
SAT	26	
SUN	27	
MON	28	SPRING BANK HOLIDAY SCHOOL HALF-TERM HOLIDAY WEEK
TUE	29	
WED	30	6.30 MANDATORY PLANNING COMMITTEE TRAINING SESSION (B)
THU	31	
MAY 2018		

Agenda Item 6

JUNE 2018		
FRI	1	
SAT	2	
SUN	3	
MON	4	10.00 PLANNING VISITING PANEL (B)
TUE	5	
WED	6	6.30 PLANNING COMMITTEE (S)
THU	7	
FRI	8	
SAT	9	
SUN	10	
MON	11	
TUE	12	6.30 OVERVIEW AND SCRUTINY (REGULATORY, COMPLIANCE AND CORPORATE SERVICES) (S)
WED	13	2.00 HEALTH AND WELLBEING BOARD (B)
THU	14	10.00 SEFTON SAFER COMMUNITIES PARTNERSHIP (B)
FRI	15	
SAT	16	
SUN	17	
MON	18	6.30 LICENSING AND REGULATORY (B)
TUE	19	6.30 OVERVIEW AND SCRUTINY (CHILDREN'S SERVICES AND SAFEGUARDING) (S)
WED	20	
THU	21	10.00 CABINET (S)
FRI	22	
SAT	23	
SUN	24	
MON	25	
TUE	26	4.30 OVERVIEW AND SCRUTINY MANAGEMENT BOARD (B) 6.30 OVERVIEW AND SCRUTINY (ADULT SOCIAL CARE) (B)
WED	27	3.00 AUDIT AND GOVERNANCE (B)
THU	28	
FRI	29	
SAT	30	
JUNE 2018		

Agenda Item 6

JULY 2018		
SUN	1	
MON	2	10.00 PLANNING VISITING PANEL (B)
TUE	3	6.30 OVERVIEW AND SCRUTINY (REGENERATION AND SKILLS) (B)
WED	4	5.00 PLANNING TRAINING SESSION (B) 6.30 PLANNING COMMITTEE (B)
THU	5	
FRI	6	
SAT	7	
SUN	8	
MON	9	
TUE	10	
WED	11	
THU	12	
FRI	13	10.00 PUBLIC ENGAGEMENT AND CONSULTATION PANEL (B)
SAT	14	
SUN	15	
MON	16	
TUE	17	
WED	18	
THU	19	5.00 MEMBERS' BRIEFING (S) 6.30 COUNCIL (S)
FRI	20	
SAT	21	
SUN	22	
MON	23	
TUE	24	
WED	25	
THU	26	10.00 CABINET (B)
FRI	27	
SAT	28	
SUN	29	
MON	30	10.00 PLANNING VISITING PANEL (B)
TUE	31	
JULY 2018		

Agenda Item 6

AUGUST 2018		
WED	1	5.00 PLANNING TRAINING SESSION (S) 6.30 PLANNING COMMITTEE (S)
THU	2	
FRI	3	
SAT	4	
SUN	5	
MON	6	
TUE	7	
WED	8	
THU	9	
FRI	10	
SAT	11	
SUN	12	
MON	13	
TUE	14	
WED	15	
THU	16	
FRI	17	
SAT	18	
SUN	19	
MON	20	
TUE	21	
WED	22	
THU	23	
FRI	24	
SAT	25	
SUN	26	
MON	27	SUMMER BANK HOLIDAY
TUE	28	10.00 PLANNING VISITING PANEL (B)
WED	29	5.00 PLANNING TRAINING SESSION (B) 6.30 PLANNING COMMITTEE (B)
THU	30	
FRI	31	
AUGUST 2018		

Agenda Item 6

SEPTEMBER 2018		
SAT	1	
SUN	2	
MON	3	
TUE	4	6.30 OVERVIEW AND SCRUTINY (ADULT SOCIAL CARE) (S)
WED	5	
THU	6	10.00 CABINET (S)
FRI	7	
SAT	8	
SUN	9	
MON	10	6.30 LICENSING AND REGULATORY (S)
TUE	11	6.30 OVERVIEW AND SCRUTINY (REGULATORY, COMPLIANCE AND CORPORATE SERVICES) (B)
WED	12	3.00 AUDIT AND GOVERNANCE (B)
THU	13	10.00 SEFTON SAFER COMMUNITIES PARTNERSHIP (B)
FRI	14	10.00 PUBLIC ENGAGEMENT AND CONSULTATION PANEL (B)
SAT	15	
SUN	16	
MON	17	
TUE	18	6.30 OVERVIEW AND SCRUTINY (REGENERATION AND SKILLS) (S)
WED	19	2.00 HEALTH AND WELLBEING BOARD (B)
THU	20	5.00 MEMBERS' BRIEFING (B) 6.30 COUNCIL (B)
FRI	21	
SAT	22	
SUN	23	
MON	24	10.00 PLANNING VISITING PANEL (B)
TUE	25	4.30 OVERVIEW AND SCRUTINY MANAGEMENT BOARD (B) 6.30 OVERVIEW AND SCRUTINY (CHILDREN'S SERVICES AND SAFEGUARDING) (B)
WED	26	5.00 PLANNING TRAINING SESSION (S) 6.30 PLANNING COMMITTEE (S)
THU	27	
FRI	28	
SAT	29	
SUN	30	
SEPTEMBER 2018		

Agenda Item 6

OCTOBER 2018		
MON	1	
TUE	2	
WED	3	
THU	4	10.00 CABINET (B)
FRI	5	
SAT	6	
SUN	7	
MON	8	
TUE	9	
WED	10	
THU	11	
FRI	12	
SAT	13	
SUN	14	
MON	15	10.00 PLANNING VISITING PANEL (B)
TUE	16	6.30 OVERVIEW AND SCRUTINY (ADULT SOCIAL CARE) (B)
WED	17	5.00 PLANNING TRAINING SESSION (B) 6.30 PLANNING COMMITTEE (B)
THU	18	
FRI	19	
SAT	20	
SUN	21	
MON	22	SCHOOL HALF-TERM HOLIDAY WEEK
TUE	23	
WED	24	
THU	25	
FRI	26	
SAT	27	
SUN	28	
MON	29	
TUE	30	6.30 OVERVIEW AND SCRUTINY (REGULATORY, COMPLIANCE AND CORPORATE SERVICES) (S)
WED	31	
OCTOBER 2018		

Agenda Item 6

NOVEMBER 2018		
THU	1	10.00 CABINET (S)
FRI	2	
SAT	3	
SUN	4	
MON	5	
TUE	6	4.30 OVERVIEW AND SCRUTINY MANAGEMENT BOARD (B) 6.30 OVERVIEW AND SCRUTINY (REGENERATION AND SKILLS) (B)
WED	7	
THU	8	
FRI	9	
SAT	10	
SUN	11	REMEMBRANCE SUNDAY
MON	12	10.00 PLANNING VISITING PANEL (B)
TUE	13	6.30 OVERVIEW AND SCRUTINY (CHILDREN'S SERVICES AND SDAFEGUARDING) (S)
WED	14	5.00 PLANNING TRAINING SESSION (S) 6.30 PLANNING COMMITTEE (S)
THU	15	5.00 MEMBERS' BRIEFING (S) 6.30 COUNCIL (S)
FRI	16	10.00 PUBLIC ENGAGEMENT AND CONSULTATION PANEL (B)
SAT	17	
SUN	18	
MON	19	
TUE	20	
WED	21	
THU	22	
FRI	23	
SAT	24	
SUN	25	
MON	26	
TUE	27	
WED	28	
THU	29	
FRI	30	
NOVEMBER 2018		

Agenda Item 6

DECEMBER 2018		
SAT	1	
SUN	2	
MON	3	
TUE	4	
WED	5	3.00 AUDIT AND GOVERNANCE (S)
THU	6	10.00 CABINET (B)
FRI	7	
SAT	8	
SUN	9	
MON	10	10.00 PLANNING VISITING PANEL (B)
TUE	11	
WED	12	2.00 HEALTH AND WELLBEING BOARD (B) 5.00 PLANNING TRAINING SESSION (B) 6.30 PLANNING COMMITTEE (B)
THU	13	10.00 SEFTON SAFER COMMUNITIES PARTNERSHIP (B)
FRI	14	
SAT	15	
SUN	16	
MON	17	
TUE	18	
WED	19	
THU	20	
FRI	21	SCHOOL CHRISTMAS BREAK
SAT	22	
SUN	23	
MON	24	COUNCIL OFFICES CLOSED
TUE	25	CHRISTMAS DAY
WED	26	BANK HOLIDAY
THU	27	COUNCIL OFFICES CLOSED
FRI	28	COUNCIL OFFICES CLOSED
SAT	29	
SUN	30	
MON	31	COUNCIL OFFICES CLOSED
DECEMBER 2018		

Agenda Item 6

JANUARY 2019		
TUE	1	NEW YEAR'S DAY
WED	2	
THU	3	
FRI	4	
SAT	5	
SUN	6	
MON	7	6.30 LICENSING AND REGULATORY (B)
TUE	8	6.30 OVERVIEW AND SCRUTINY (ADULT SOCIAL CARE) (S)
WED	9	
THU	10	10.00 CABINET (S)
FRI	11	
SAT	12	
SUN	13	
MON	14	10.00 PLANNING VISITING PANEL (B)
TUE	15	4.30 OVERVIEW AND SCRUTINY MANAGEMENT BOARD (B) 6.30 OVERVIEW AND SCRUTINY (REGULATORY, COMPLIANCE AND CORPORATE SERVICES) (B)
WED	16	5.00 PLANNING TRAINING SESSION (S) 6.30 PLANNING COMMITTEE (S)
THU	17	
FRI	18	10.00 PUBLIC ENGAGEMENT AND CONSULTATION PANEL (B)
SAT	19	
SUN	20	
MON	21	
TUE	22	6.30 OVERVIEW AND SCRUTINY (REGENERATION AND SKILLS) (S)
WED	23	
THU	24	5.00 MEMBERS' BRIEFING (B) 6.30 COUNCIL (B)
FRI	25	
SAT	26	
SUN	27	
MON	28	
TUE	29	6.30 OVERVIEW AND SCRUTINY (CHILDREN'S SERVICES AND SAFEGUARDING) (B)
WED	30	
THU	31	
JANUARY 2019		

Agenda Item 6

FEBRUARY 2019		
FRI	1	
SAT	2	
SUN	3	
MON	4	10.00 PLANNING VISITING PANEL (B)
TUE	5	
WED	6	5.00 PLANNING TRAINING SESSION (B) 6.30 PLANNING COMMITTEE (B)
THU	7	10.00 CABINET (B)
FRI	8	
SAT	9	
SUN	10	
MON	11	
TUE	12	6.30 OVERVIEW AND SCRUTINY (REGULATORY, COMPLIANCE AND CORPORATE SERVICES) BUDGET MEETING (B)
WED	13	
THU	14	10.00 CABINET (BUDGET) (S)
FRI	15	
SAT	16	
SUN	17	
MON	18	SCHOOL HALF-TERM HOLIDAY WEEK
TUE	19	
WED	20	
THU	21	
FRI	22	
SAT	23	
SUN	24	
MON	25	
TUE	26	6.30 OVERVIEW AND SCRUTINY (ADULT SOCIAL CARE) (B)
WED	27	
THU	28	6.30 BUDGET COUNCIL (B)
FEBRUARY 2019		

Agenda Item 6

MARCH 2019		
FRI	1	
SAT	2	
SUN	3	
MON	4	10.00 PLANNING VISITING PANEL (B)
TUE	5	6.30 OVERVIEW AND SCRUTINY (REGULATORY, COMPLIANCE AND CORPORATE SERVICES) (S)
WED	6	5.00 PLANNING TRAINING SESSION (S) 6.30 PLANNING COMMITTEE (S)
THU	7	10.00 CABINET (B)
FRI	8	
SAT	9	
SUN	10	
MON	11	
TUE	12	4.30 OVERVIEW AND SCRUTINY MANAGEMENT BOARD (B) 6.30 OVERVIEW AND SCRUTINY (REGENERATION AND SKILLS) (B)
WED	13	2.00 HEALTH AND WELLBEING BOARD (B)
THU	14	10.00 SEFTON SAFER COMMUNITIES PARTNERSHIP (B)
FRI	15	10.00 PUBLIC ENGAGEMENT AND CONSULTATION PANEL (B)
SAT	16	
SUN	17	
MON	18	6.30 LICENSING AND REGULATORY (S)
TUE	19	6.30 OVERVIEW AND SCRUTINY (CHILDREN'S SERVICES AND SAFEGUARDING) (S)
WED	20	3.00 AUDIT AND GOVERNANCE (S)
THU	21	
FRI	22	
SAT	23	
SUN	24	
MON	25	10.00 PLANNING VISITING PANEL (B)
TUE	26	
WED	27	5.00 PLANNING TRAINING SESSION (B) 6.30 PLANNING COMMITTEE (B)
THU	28	
FRI	29	
SAT	30	
SUN	31	
MARCH 2019		

Agenda Item 6

APRIL 2019		
MON	1	
TUE	2	
WED	3	
THU	4	10.00 CABINET (S)
FRI	5	
SAT	6	
SUN	7	
MON	8	SCHOOL SPRING HOLIDAY
TUE	9	
WED	10	
THU	11	
FRI	12	
SAT	13	
SUN	14	
MON	15	
TUE	16	
WED	17	
THU	18	
FRI	19	GOOD FRIDAY
SAT	20	
SUN	21	EASTER SUNDAY
MON	22	EASTER MONDAY
TUE	23	10.00 PLANNING VISITING PANEL (B)
WED	24	5.00 PLANNING TRAINING SESSION (S) 6.30 PLANNING COMMITTEE (S) 5.00 MEMBERS' BRIEFING (S) 6.30 COUNCIL (S)
THU	25	
FRI	26	
SAT	27	
SUN	28	
MON	29	
TUE	30	
APRIL 2019		

Agenda Item 6

MAY 2019		
WED	1	
THU	2	COUNCIL ELECTIONS
FRI	3	
SAT	4	
SUN	5	
MON	6	MAY BANK HOLIDAY
TUE	7	
WED	8	
THU	9	
FRI	10	
SAT	11	
SUN	12	
MON	13	
TUE	14	6.00 ANNUAL COUNCIL (VENUE TO BE DETERMINED)
WED	15	
THU	16	6.30 ADJOURNED ANNUAL COUNCIL (B)
FRI	17	
SAT	18	
SUN	19	
MON	20	
TUE	21	
WED	22	
THU	23	10.00 CABINET (B)
FRI	24	
SAT	25	
SUN	26	
MON	27	SPRING BANK HOLIDAY SCHOOL HALF-TERM HOLIDAY WEEK
TUE	28	
WED	29	
THU	30	
FRI	31	
MAY 2019		

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Agenda Item 7

Report to:	Cabinet	Date of Meeting:	11 January 2018
Subject:	Tender for Park & Ride Bus Service		
Report of:	Head of Regulation and Compliance	Wards Affected:	(All Wards);
Portfolio:	Cabinet Member - Regulatory, Compliance and Corporate Services		
Is this a Key Decision:	Yes	Included in Forward Plan:	Yes
Exempt / Confidential Report:	No		

Summary:

To seek Cabinet approval to invite tenders through the appropriate procurement route for the provision of a park and ride bus service for Southport.

Recommendation(s):

That Cabinet:

1. Approves the tender process to procure the provision of a park and ride bus service as outlined in the report.
2. Authorises the contract period of 5 years from 1st August 2018.
3. Gives delegated authority to the Head of Regulation and Compliance to award the Contract resulting from the procurement in consultation with the Cabinet Member Regulatory, compliance and Corporate Services.

Reasons for the Recommendation(s):

To allow the continued delivery of the Southport Park and Ride Service which is an important part of the parking offer in Southport.

Alternative Options Considered and Rejected: (including any Risk Implications)

Not to award a contract which would mean no park and ride service was provided for in Southport.

Agenda Item 7

What will it cost and how will it be financed?

(A) Revenue Costs

At this stage it is not anticipated that the currently approved budget provision in respect of the cost of delivering the service we will require adjustment following this process.

A variety of lots offering different levels of service will be advertised to ensure that the cost of the service remains within or below the budget envelope.

(B) Capital Costs

Implications of the Proposals:

Resource Implications (Financial, IT, Staffing and Assets):
Legal Implications: The size of the contract is such that it requires an OJEU compliant procurement process to be adhered to.
Equality Implications: There are no equality implications. (Please delete as appropriate and remove this text)

Contribution to the Council's Core Purpose:

Protect the most vulnerable: not applicable
Facilitate confident and resilient communities: not applicable
Commission, broker and provide core services: The service will continue to be delivered as part of the overall parking offer in Southport .
Place – leadership and influencer: not applicable
Drivers of change and reform: not applicable
Facilitate sustainable economic prosperity: The service will help provide a low cost, accessible means of parking for employees and customers of Southport town centre.
Greater income for social investment: not applicable
Cleaner Greener: The service will result in fewer cars entering the town centre

What consultations have taken place on the proposals and when?

(A) Internal Consultations

The Head of Corporate Resources (FD.4977/17) and Head of Regulation and Compliance (LD.4262/17) have been consulted and any comments have been incorporated into the report.

(B) External Consultations

Not Applicable

Implementation Date for the Decision

Immediately following the Committee meeting.

(Please delete as appropriate and remove this text)

Contact Officer:	Dave Marrin
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Appendices:

There are no appendices to this report

Background Papers:

There are no background papers available for inspection.

Agenda Item 7

1. Introduction/Background

- 1.1 The current contract for the provision of a park and ride service in Southport was due to expire on 31st March 2018.
- 1.2 For some time representations have been made for the service to serve Ocean Plaza and it is suggested that lots be included in the tender for the provision of such a service.
- 1.3 However, in order for such a service to be provided it would be necessary to change the whole method of operation of the park and ride service. Currently, a fee is paid by motorists to park and passengers travel on the service by showing the parking ticket to the bus driver. No cash changes hands.
- 1.4 If the service is to pick up at other places then a separate fare (£1 per person per journey) would have to be charged to people boarding at these points. If a separate fare is charged then just as with any other local service, Merseytravel would ask the operator (Sefton Council) to accept concessionary travel passes and Sefton Council cannot refuse this request.
- 1.5 Discussions are still on-going with Merseytravel about how this would work in practice. This includes if and how Sefton would be reimbursed for concessionary passes and if other Merseytravel passes (TRIO, Saveaway, etc) should also be accepted on the service.
- 1.6 The discussions with Merseytravel have also included concerns that if concessionary passes are accepted on the service and if “free” parking remains available on the route, then this may reduce the usage of the park and ride car park and have a consequent impact on income.
- 1.7 If the option to operate differently than at present is pursued, then it does increase the financial risk to the Council. Officers are currently able to predict usage and income based on previous years performance. However, with a new service, taking individual fare paying passengers and with concessionary fares income not known, there can be less certainty about income levels. This risk will be taken into account during the tender process, with an option being included to allow the Council to amend the service during the contract period
- 1.8 Other matters for consideration for any change to the Service are;
 - Route to be taken
 - Capacity of the Service
 - Frequency of the Service
- 1.9 In view of the complexities involved in any change and to allow discussions with Merseytravel to continue, the contract expiry date of the current service has been extended to 31st August 2018

2.0 Procurement Process

2.1 It is proposed that the process to be followed will be an open competition through the North West Opportunities portal 'The Chest'.

2.2 An Invitation To Tender (ITT) document will be created and issued to all providers who express an interest. A number of assessment criteria will be developed in order to determine Contractors' ability to deliver a contract of this nature. These will include

- Provision of Suitable Vehicles
- Provision of Trained Staff
- Maintenance Facilities
- Ability to supply replacement vehicles in case of breakdown

2.3 Tenders will subsequently be invited and assessed using a 'cost/quality' methodology on the basis of 80% cost, 20% quality.

2.4 In view of the above and in addition to the suggestion for a service to serve Ocean Plaza, whilst bearing in mind the current budget situation, it is likely that lots will be sought for:

- The current level of service
- A reduced service level for Sundays, particularly during the winter period
- The service to serve Ocean Plaza
- The service to serve Ocean Plaza but at a reduced service level for Sundays, particularly during the winter period
- The service to serve Ocean Plaza on a twelve months trial basis with the option to revert back to the existing service if required

3.0 The Way Forward

3.1 It is suggested that

- Officers continue with discussions with Merseytravel around the details of operation and in particular on concessionary fares
- Subject to the agreement of the Cabinet Member - Regulatory, Compliance and Corporate Services, that tenders be sought on the options indicated in 2.4 above
- Delegated authority be granted to the Head of Regulation and Compliance, in consultation with the Cabinet Member – Regulatory, Compliance and Corporate Services, to award the Contract resulting from the procurement.

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Agenda Item 8

Report to:	Cabinet	Date of Meeting:	11 January 2018
Subject:	Provision of Agency Staff		
Report of:	Head of Commissioning Support and Business Intelligence, Head of Corporate Resources	Wards Affected:	(All Wards);
Portfolio:	Cabinet Member - Regulatory, Compliance and Corporate Services		
Is this a Key Decision:	Yes	Included in Forward Plan:	Yes
Exempt / Confidential Report:	No		

Summary:

To seek approval to award a contract for the supply of Agency Workers, from 1st February 2018, for an initial period of 3 years with the option to extend for a further period of 1 year.

Recommendation(s):

That Cabinet:

1. Agrees Sefton Council's continued participation in the collaborative supply arrangement with other Liverpool City Region authorities, to ensure we maximise purchasing power on a common category of spend within the region.
2. Agrees to procure Agency workers through the new Agency Worker Framework via Matrix SCM, as negotiated by Eastern Shires Purchasing Organisation (ESPO).
3. Reinforces the requirement that all service areas utilise the new Framework, under a call off with Matrix SCM, for the supply of Agency Workers, so as to provide visibility of spend and scope for continuous improvement and value for money efficiency gains.

Agenda Item 8

Reasons for the Recommendation(s):

There is an ongoing need to employ Agency Workers in some service areas, to ensure sufficient capacity is available for those services to be provided safely and effectively.

In December 2016 Cabinet agreed to utilise the one year extension option within the existing contract for the provision of Agency Workers, in order to facilitate collaborative work by Liverpool City Region (LCR) authorities, including pre-procurement analysis and options appraisal, ahead of an anticipated joint procurement of a new service to replace the current Framework Agreement at the end of its full contract term (31st January 2018).

The options have now been appraised, including existing Framework Agreements and a separate full OJEU collaborative procurement process, with the recommended option being identified as the one that provides the most economically advantageous.

Alternative Options Considered and Rejected: (including any Risk Implications)

The options appraisal is presented in paragraphs 1.3 to 1.6 of the report.

What will it cost and how will it be financed?

(A) Revenue Costs

The cost of employing Agency Workers, when required, is covered from within existing budgets.

(B) Capital Costs

None

Implications of the Proposals:

Resource Implications (Financial, IT, Staffing and Assets):
Legal Implications:
Equality Implications: There are no equality implications

Contribution to the Council's Core Purpose:

Protect the most vulnerable: Employment of Agency Workers is necessary, on occasions, to ensure sufficient capacity to provide safe and effective services protecting the most vulnerable (e.g. Adult Social Care and Children's Social Care).

Facilitate confident and resilient communities: N/A
Commission, broker and provide core services: Employment of Agency Workers is necessary, on occasions, to ensure sufficient capacity, so as to provide safe and effective core services (e.g. Adult Social Care, Children’s Social Care, Street Scene services).
Place – leadership and influencer: N/A
Drivers of change and reform: Employment of Agency Workers is necessary, on occasions, to ensure sufficient capacity, to enable change and reform of services without diverting resources from day to day service delivery.
Facilitate sustainable economic prosperity: N/A
Greater income for social investment: N/A
Cleaner Greener Employment of Agency Workers is necessary, on occasions, to ensure sufficient capacity, so as to provide safe and effective street Scene services.

What consultations have taken place on the proposals and when?

(A) Internal Consultations

The Head of Corporate Resources (FD4961/17) and Head of Regulation and Compliance (LD4246/17) have been consulted and any comments have been incorporated into the report.

(B) External Consultations

Consultation has taken place with Procurement Officers and HR Officer from the Liverpool City Region

Implementation Date for the Decision

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

Contact Officer:	Lynda Mitchell
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Appendices:

There are no appendices to this report

Background Papers:

Agenda Item 8

There are no background papers available for inspection.

1.0 Introduction/Background

- 1.1 In 2014 the Merseyside Procurement Partnership, an informal procurement partnership of Merseyside authorities, accessed the Eastern Shires Purchasing Organisation (ESPO) Framework, MSTAR1, and made a direct award to Matrix SCM for the provision of a Neutral Vendor Managed Service for Agency Workers. The current contract ends on 31st January 2018.
- 1.2 The current Framework Agreement has enabled the delivery of the required service and the supplier has performed satisfactorily. Use of the Framework has resulted in greater visibility of spend through management information provided, and has also included additional elements for safeguarding vulnerable adults and children, with specified documents (i.e. DBS documents, candidate's photographs and qualifications available on-line for managers to verify prior to the potential candidate being accepted).
- 1.2 Over the past 12 months Halton Borough Council have led a review of Agency Worker provision on behalf of the Liverpool City Region (LCR) authorities and the pre-procurement of a collaborative contract for agency worker supply to LCR Authorities.
- 1.3 An options appraisal has been conducted, and the following options considered;
 - Option 1 Do Nothing
 - Option 2 Direct Award to a single provider accessing the Yorkshire Purchasing Organisation (YPO) framework – Ref: 00569 HR Services and Solutions
 - Option 3 Direct Award to a single provider accessing the Eastern Shires Purchasing Organisation (ESPO) framework – Ref: 653F Managed Services for Temporary Agency Resources (MSTAR2)
 - Option 4 Award the contract as a result of conducting a mini competition with the nominated providers on the ESPO or YPO framework
 - Option 5 Undertake a new tendering process from scratch on behalf of Liverpool City Region
- 1.4 Option 1 presents a risk of increased cost per placement as current rates could not be guaranteed beyond the end of the current contract.
- 1.5 Option 2, 4 and 5 do not deliver new savings and in addition carry the risk of additional cost were the provider to change as a result of the procurement process.
- 1.6 Option 3 was assessed as being the most economically advantageous, identifying savings of £104,790 across the Liverpool City Region, based on active placements at 20th June 2017.

- 1.7 The ESPO Framework is compliant with the Public Contract Regulations 2015.
- 1.8 The ESPO Framework is open for access by the Liverpool City Region authorities, via a direct award option within Lot 1: Neutral Supply Chain Management, which has 7 shortlisted providers. The preferred supplier is the incumbent provider, Matrix SCM, for the reasons set out in 2.4 and 2.5 below.

2.0 Financial Implications

- 2.1 The value of Sefton's call-off from the agency contract in 2016/2017 was £1.7m per annum.
- 2.2 Financial risk is minimised by awarding the contract within a pre-negotiated Framework and, as part of the pre-procurement process Halton Borough Council has carried out a financial assessment on the preferred supplier and has confirmed that they are a financially viable organisation.
- 2.3 Subject to Cabinet's decision, the new contract would be implemented as a corporate contract for the provision of Agency Workers. As such, the Council's Contract Procedure Rules would require all officers to utilise the contract for the employment of any Agency Workers (CPR 1.2.5). Any officer wishing to employ Agency Workers from alternative non-contracted suppliers would need agreement to Waive this particular rule, in accordance with the Waiver Procedure set out in the CPR, including a sound business case for doing so. This enables visibility of spend and scope for continuous improvement and value for money efficiency gains.
- 2.4 During the negotiations, Matrix SCM have agreed to honour existing fees for the duration of the new Framework period in addition to working with each Council to further reduce supplier profit margins and introduce a strategy targeting long term workers by implementing a tenure discount for any worker who has been in post for 52 weeks or more.
- 2.5 The Matrix SCM solution has already been successfully implemented in all 6 authorities and so there is a benefit of not having to implement a whole new solution, which will therefore not only save time and resource, but also ensure the continuity of supply and service remains uninterrupted.

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Agenda Item 9

Report to:	Cabinet	Date of Meeting:	11 January 2018
Subject:	Procurement of an Electronic Case Management System – for Contracted Domiciliary Care Providers		
Report of:	Director of Social Care and Health	Wards Affected:	(All Wards);
Portfolio:	Cabinet Member - Adult Social Care		
Is this a Key Decision:	Yes	Included in Forward Plan:	Yes
Exempt / Confidential Report:	No		

Summary:

The purpose of this report is to seek approval to commence a procurement exercise for provision of an Electronic Case Management (ECM) System for utilisation by contracted Lead Domiciliary Care Providers.

The report also details the proposed procurement approach under Liverpool City Region (LCR) joint working arrangements and the linkage to the new Domiciliary Care contracts.

Recommendation(s):

Cabinet to;

1. Approve the commencement of a procurement exercise for the provision of an Electronic Case Management (ECM) System for a period of three years.
2. Cabinet to delegate the following decisions to the Director Social Care and Health, in consultation with the Cabinet Member Adult Social Care;
 - a. Agreeing the specification for the ECM system;
 - b. Agreeing the specific procurement process (i.e. whether to utilise an existing contract framework, or for Sefton to undertake its own process to procure the system);
 - c. The approach to be taken to funding 'open access' to the ECM system (as detailed in Section 5.5) (i.e. whether Sefton Council meets the costs or the successful ECM System supplier will be able to directly charge Service Users, Families etc. for access to the system); and
 - d. The awarding of the 'contract' following the tender evaluation exercise

Agenda Item 9

Reasons for the Recommendation(s):

On 8th June 2017 Cabinet approved the commencement of a procurement exercise for Domiciliary Care services, from 1st May 2018, via Liverpool City Region joint commissioning. This process is currently being conducted jointly with Knowsley Metropolitan Borough Council.

The new contracts awarded will encompass a more outcome based model of service and will ensure a greater focus on the delivery of a quality service to Service Users.

It has been identified that the implementation of an Electronic Case Management system can support these aims by ensuring that there is better monitoring of service delivery, such as visit durations and activities conducted during those visits, thus ensuring that any complaints and issues raised can be fully investigated as the system will be able to provide real-time and verified information.

The system can also support future service delivery changes such as revising payment process and mechanisms to Providers, and wider strategic work such as analysing service delivery trends and needs.

The system will be purchased by Sefton Council for contracted Domiciliary Care Providers to implement during their initial three-year contract term. Following this the Providers will be required to fund the system for any additional period should their contract be extended.

Alternative Options Considered and Rejected: (including any Risk Implications)

The following options were considered and rejected;

1. **Contractually obliging Providers to purchase and pay for the system** – this option was rejected as it has been identified that it will be more cost effective for Sefton Council to purchase the system as opposed to Providers purchasing it who would then request an increase to their fee level. In addition, by purchasing the system Sefton Council and Knowsley Council can ensure that the same system is operated across all Providers, thus ensuring a consistency in the type of data being recorded, which can then be used to analyse trends across both Sefton and the LCR and be used to inform wider strategic work such as the quantification of the current and future demand for services. The purchasing of the system reiterates the Authorities commitment to investing in the Domiciliary Care sector and supporting providers to deliver quality services.
2. **Maintaining the Status Quo** – this was not considered a viable option as within the new Domiciliary Care contracts and service model there is a commitment to implement such a system in order to deliver the wider aims of improving the quality and monitoring of the commissioned services. At present it is difficult to effectively monitor services as this requires analysis of paper records, for example where concerns are raised concerning late/missed visits.

What will it cost and how will it be financed?

(A) Revenue Costs

Market analysis has identified that annual costs associated with an Electronic Case Management service, is likely to be in the region of £30,000 - £40,000 per annum. Therefore the cost for the initial three-year Domiciliary Care contract period will be £90,000 - £120,000.

Definitive costs will be identified as part of any procurement exercise and following the awarding of the new Domiciliary Care contracts as market analysis has identified that costs for the system will vary dependent on how many Domiciliary Care Providers the system supplier will be required to work with and how many Service Users each Providers delivers services to. The information will only be collated once the Domiciliary Care tender has been completed and contracts have been awarded.

It is proposed that the ongoing costs associated with procuring the system will be met via efficiencies/economies realised within Domiciliary Care budgets as the data that will be generated will be used to inform re-assessments of Service Users to ascertain if the level of commissioned care is needed or for example if the care package can be reduced as the Service User has become more independent and that this is evidenced through the Provider delivering less care historically. Thus it is anticipated that this will be cost neutral to the Council. In the event that these costs cannot be met via this approach, the costs will be met from existing budgets.

(B) Capital Costs

None

Implications of the Proposals:

Resource Implications (Financial, IT, Staffing and Assets):
Legal Implications: The Care Act Statutory Guidance 2014 and subordinate legislation and statutory guidance.
Equality Implications: The equality Implications have been identified and mitigated.

Contribution to the Council's Core Purpose:

Protect the most vulnerable: The Electronic Case Management System will ensure there is improved monitoring of service delivery and ensure that services meet identified needs and Providers are
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Agenda Item 9

delivering what they have been commissioned to deliver. The data can also be used to support investigations into complaints such as late or missed visits.

There is also potential for the system to be accessed by the families/advocates of Service Users so that they can see real-time information on the care their family member is receiving.

Facilitate confident and resilient communities:

There is potential for the system to be accessed by the families/advocates of Service Users so that they can see real-time information on the care their family member is receiving.

Commission, broker and provide core services:

The system will support the implementation of the new Domiciliary care contracts and new service delivery model as it will be used to inform contract monitoring of services and the data recorded can be used during analysis work on the current and future demand for services and therefore future commissioning requirements.

Place – leadership and influencer:

Drivers of change and reform:

Implementing the system will support the aim of moving to more electronic methods of recording and analysing service delivery.

Facilitate sustainable economic prosperity:

Greater income for social investment:

Cleaner Greener

The system will ensure that records are held electronically, thus dramatically reducing the need for Providers to have paper records in place – for example log books in Service Users homes for staff to record when they have arrived/left and what care tasks they have conducted during visits.

What consultations have taken place on the proposals and when?

(A) Internal Consultations

The Head of Corporate Resources (FD.4962/17.) and Head of Regulation and Compliance (LD.4247/17....) have been consulted and any comments have been incorporated into the report.

The implementation of the system has also been raised at the Public Consultation and Engagement Panel as part of wider discussions regarding the future Domiciliary Care contracts.

(B) External Consultations

Consultation has also taken place with LCR colleagues and Providers regarding the implementation of such a system as part of wider discussions regarding the future Domiciliary Care contracts.

Implementation Date for the Decision

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

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Appendices:

There are no appendices to this report

Background Papers:

None

1. Introduction/Background

- 1.1 Existing Domiciliary Care contracts were awarded from 1st April 2012 and on 22nd June 2016 Cabinet approved the extension of these contracts until 30th April 2018 in order to support joint commissioning of future contracts with Knowsley Metropolitan Borough Council under Liverpool City Region (LCR) arrangements.
- 1.2 The re-tendering exercise for the new contracts is currently taking place and it is envisaged that new contracts will be awarded by late January 2018 to commence on 1st May 2018. The tender exercise encompasses bidders stating whether they wish to be a Lead Provider or a Pseudo Dynamic Purchasing System (PDPS) ‘Spot’ Provider. Lead Providers will be required to accept all care package referrals and PDPS ‘Spot’ Providers are those Providers which the Authorities may utilise if the Lead Provider is unable to accept a particular care package referral.
- 1.3 As part of this re-tendering exercise potential bidders have been advised in the *Invitation to Tender* that the Authorities (Sefton and Knowsley) will be purchasing an Electronic Case Management (ECM) system for Lead Providers to implement.
- 1.4 As part of the evaluation of tender submissions from bidders to be Lead Providers, they will be evaluated on various factors, including their ability and plans for the implementation of the ECM system.
- 1.5 The commitment to purchase an ECM system has been made as both Sefton Council and Knowsley Metropolitan Borough Council have identified that there is a need to modernise service delivery arrangements and move towards more

Agenda Item 9

technological service solutions. At present services delivered are not fully recorded electronically and there is still a reliance on the use of paper records, for example log books in Service Users homes for Providers care staff to manually record details of their visits. This in turn causes issues when such records have to be analysed if concerns and complaints are raised regarding services delivered.

- 1.6 The future contracts also encompass the implementation of a new service specification which has a greater focus on Providers delivering a more outcome focussed approach and an ECM system will support this new model as the data can be used to inform re-assessments of Service Users with respect to ascertaining if the level of care commissioned is actually still required.

2. The Electronic Case Management System (ECM)

- 2.1 In the new contracts successful bidding Providers will be required to have in place Electronic Call Monitoring. This is essentially a system for the recording of visits and involves the care staff logging when they have arrived at a Service Users home and when they have left. When delivering the current service the care staff will typically rely on a paper copy of the Service Users care and support plan which will detail their preferences and the care tasks to be conducted.
- 2.2 An ECM system builds on the Call Monitoring system as it encompasses the Service Users care and support plan being recorded and updated electronically.
- 2.3 In addition to the above, there is also scope for any such ECM system to be able to be accessed by Service Users families, carers and advocates in order for them to look at the services being provided. This will seek to provide them with assurances regarding the care being provided.

3. The Benefits of the ECM System

- 3.1 The implementation of the ECM has been identified as offering the following benefits;
 - 3.1.1 **Improved Monitoring of Service Delivery** – by having an ECM system both Service Providers and the Local Authority will be able to see real-time information on services being delivered. This information can therefore be used to deal with any quality issues identified. Currently if issues are identified (such as missed or late care visits) then the processes to investigate such issues are laborious and time consuming, as they involve Providers and Sefton Council staff having to check paper records. By having an ECM system in place the processes will be simpler as the Provider will be able to quickly run reports from the system detailing what services have / have not been delivered. In addition, any ECM system procured will encompass Service User Care and Support Plans being held and updated electronically.
 - 3.1.2 **Reduced reliance on paper records** – existing systems for the recording of visits and care tasks completed are antiquated as they rely on paper

records being completed. The ECM system will reduce this and therefore also offer environmental benefits.

- 3.1.3 **Supports the new model of service** – the new Domiciliary Care contracts will require Providers to adopt a more enabling approach which seeks to ensure that Service Users continue to maintain and improve their independence. This includes the Providers adopting a Trusted Assessor role whereby they will have the flexibility to reduce care packages, if it is felt that the current level of care is no longer required as the Service user has become more independent. The ECM system will support this role as the Provider will be able to review the data to see if Service Users are typically not requiring certain care tasks to be conducted and/or the frequency and duration of current care visits can be amended. They can then discuss the reduction of care packages
- 3.1.4 **Additional Investment into the Domiciliary Care Sector** – whilst fee levels have been increased, the purchasing of an ECM system for Providers heralds additional investment into the sector as well as supporting Providers to effectively deliver their contracts.
- 3.1.5 **Supports Strategic Needs Analysis Work** – by having such a system Sefton Council will be able to use the data for work on analysing and projecting current and future needs as it will detail what services people are actually receiving and what care tasks are required. This information can then be used to inform future commissioning work. As the system will be procured jointly with Knowsley Council, then wider demographic trends and data can also be compared.
- 3.1.6 **Improved Information for Service Users, Carers, Families and Advocates** – it is envisaged that any ECM system procured will also have the ability to be viewed by Service Users and their carers / families / advocates. This will enable them to see real-time information on the care being provided and therefore assist with providing them with assurance, for example if relatives do not live close to their family member who is receiving care.

4. The Implementation of the ECM System

- 4.1 The new Domiciliary Care contracts will be in place from 1st May 2018, and will be for an initial term of three years. As part of the current tender exercise for these contracts prospective bidders have been advised that should they be awarded a contract then they will be provided with an ECM system by the Authorities and they will be required to implement the system within three months of receiving it.
- 4.2 The implementation of the system will be done as a phased approach, once they have received the system they will require around three months to fully go-live with the system as they will need to transfer/create all current Care and Support Plans onto the system which will take this period of time to achieve.

5. The Procurement of the ECM System

Agenda Item 9

- 5.1 The procurement exercise is being conducted by Sefton Council on behalf of both Sefton and Knowsley Council, who will also be implementing the system in line with the current joint commissioning exercise for the new Domiciliary Care contracts, which Knowsley Council are leading on from a procurement perspective.
- 5.2 The ECM System will initially be purchased and provided to the successful PDPS Lead Providers by the councils in the initial three year contract term. After this, it is expected that full financial and operational responsibility for the system will be borne by the providers. Operational costs e.g. phones and tablets will be met in full by the Provider from the outset of the contract.
- 5.3 As part of the tender exercise ECM System suppliers will be advised that it will not be the intention of the Authorities to enter into a direct contractual relationship with them, principally with respect to the licences required to operate the system. Instead, the suppliers will be advised that they will be required to supply the system and licences to the Domiciliary Care Providers directly. These Providers will then pay for the system and invoice the Authorities for the costs incurred. This approach will be taken as it creates a direct relationship between the ECM System Supplier and the Domiciliary Care Providers which will therefore simplify future arrangements after the initial three year period that the Authorities are funding the system for.
- 5.4 If approval is given by Cabinet to commence the procurement exercise then Sefton Council Officers will work with Knowsley Council and LCR partners to develop a service specification for tenderers to subsequently bid on. As detailed in section 3.1.6, the specification will include ensuring that any ECM system procured has the ability to be viewed by Service Users, Carers, Families and Advocates.
- 5.5 Market testing has been conducted and it has been identified that should the proposed functionality detailed in Section 5.4 above be implemented (known as 'open access') then Sefton Council would need to decide whether or not the costs associated with accessing the system would be borne by Sefton Council or whether the successful ECM System Supplier would charge those interest groups directly to access the system. Definitive costs regarding this will be gathered during any tender exercise in order to then inform decisions on whether such costs will be borne by Sefton Council.
- 5.6 Initial market testing has also been conducted with respect to ECM system contractual frameworks in place, operated by other Local Authorities, that Sefton Council could potentially utilise to procure any system through. Should Cabinet give approval to procure the system, then further analysis with Procurement Team colleagues will take place in order to decide whether or not such existing arrangements provide the best option for Sefton.
- 5.7 Any tender exercise, or mini-competition using an existing framework agreement, will encompass evaluating bids based on the most economically advantageous tender. The assessment of quality will be based on questions formulated regarding the system and how it will meet desired aims and outcomes.

- 5.8 If the successful bidders in the current Domiciliary Care re-tendering exercise, referred to at paragraph 1.2, already have an ECM system in place and can therefore offer added value to the services they are bidding on, a procurement exercise for an ECM system may not be required. If this were to be the case Officers would advise Cabinet accordingly.

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Agenda Item 10

Report to:	Cabinet	Date of Meeting:	11 January 2018
Subject:	Procurement on behalf of the Liverpool, Knowsley, Sefton and Wirral Regional Adoption Agency		
Report of:	Head of Children's Social Care	Wards Affected:	(All Wards);
Portfolio:	Cabinet Member - Children, Schools and Safeguarding		
Is this a Key Decision:	Yes	Included in Forward Plan:	Yes
Exempt / Confidential Report:	No		

Summary:

The purpose of this report is to seek Cabinet approval to make contractual arrangements and the future procurement of statutory adoption related provision on behalf of the Regional Adoption Agency, known as 'Adoption in Merseyside' (AIM), following Sefton being recently nominated as Lead Commissioner for the RAA by the RAA Strategic Board .

Recommendation(s):

Cabinet is recommended to:

1. Note that Sefton has been nominated as the lead commissioner for the new Regional Adoption Agency (Strategic Board) to procure a range of service contracts on behalf of the RAA.
2. Authorise Sefton to procure a range of service contracts on behalf of the RAA on behalf of all participating authorities of the RAA, for future purchasing of statutory adoption activity that all parties have agreed should be procured externally from 1st April 2018. – 31st March 2020
3. Delegate authority to the Head of Children's Social Care in consultation with the Cabinet Member – Children, Schools and Safeguarding, to approve the resulting post procurement contract award.
4. Note that if any of the current service staff within the existing service contracts under TUPE have an entitlement to LGPS pensions, Cabinet authorises officers to enter into arrangements to ensure that the new service provider enters into an admissions agreement and bond in relation to the affected staff.

Reasons for the Recommendation(s) and Background:

Members will be aware of the establishment of Regional Adoption Agencies (RAA) across the Country to enable the process of adoption for Looked after Children to be streamlined and made more efficient through partnership working. Sefton are working in partnership with three other neighbouring Local Authorities, namely, Liverpool; Knowsley

Agenda Item 10

and Wirral to form one of the new Regional Adoption Agencies, and work is advanced towards this new Agency being in place and operational from April 2018.

The new agency will be called AIM – Adoption in Merseyside, and in the interim, a Strategic Board has been established to determine the operational details of the RAA and to determine how it will operate. This includes staffing and who will be hosting the new joint service; and includes managing operational contracts to ensure more efficient procurement of bought in services across all four Authorities, on behalf of the RAA

The AIM RAA staffing model is still in development and there are final details of partnership working still to conclude in the New Year. However, the Strategic RAA Board has agreed recently for Sefton to take the lead in commissioning new adoption service contracts on behalf of the RAA.

This report is therefore seeking Cabinet approval to enable Sefton's commissioning officers to act on behalf of the RAA for the future purchasing of statutory adoption activities for the period 1st April 2018 to 31st March 2020 (2 years) and to commence immediately, a process of procurement for these services, which will involve drawing down existing budgets from across each Local Authority in the RAA.

Currently there are a range of service contracts across all four partners that have been extended until March 31st 2018, and all of these have exhausted the number of extensions permitted..

There are some currently contracted adoption activities, such as Letterbox and Lifebook's, which it is anticipated, would be delivered internally within the new RAA, but it is proposed that procurement of additional activity such as access to records, counselling for birth parents and letterbox is developed within the existing budget to ensure the capacity to meet the RAA's demand. This is mirrored in existing RAAs where parallel commissioning arrangements are in place.

Alternative Options are Considered and Rejected:

The Strategic RAA Board have considered a number of options for delivery of adoption services including a further extension of existing contracts; Spot purchase activities from 1st April and deliver services mostly in-house. None of these options has proven viable or provide adequate market stability. The favoured option is to procure a single contract. with flexibility to meet the demands of the evolving Regional service.

What will it cost and how will it be financed?

(A) Revenue Costs

Based on 2016/17 actual costs and number of placements, the regional anticipated annual cost for the additional activities to be procured externally is around £173,000 p.a. based on known spending levels by Authority :

Liverpool £98,000
Knowsley £17,000
Sefton £30,000
Wirral £28,000

The procured contract will be within the existing budget of £173,000 p.a. which represents the maximum value for adoption contracts available across the four Partner Authorities. The contract will be held in the name of Sefton MBC but with named Local Authorities included within the contract itself. Sefton Council will charge each Authority for the level of support they have agreed to purchase on an annual basis.

It is anticipated that through this new partnership arrangement services will be procured in a more cost effective way which will provide better value for money.

(B) Capital Costs

None

Implications of the Proposals:

Resource Implications (Financial, IT, Staffing and Assets):

Although there is risk attached to the procurement as gathering usage data from all areas has been problematic; this risk will be mitigated through:

- Shared ownership of the contract by four local authorities
- Structure of the contract in regard to utilising a mixture of block and spot purchasing

Every endeavour will be made to keep costs within the level of available resources across the 4 Local Authorities. In the unlikely event that costs may exceed available budgets, further consultation maybe required to reach agreement as to how these may be accommodated from within the overall RAA resources before proceeding

Legal Implications: Schedule 3 of the Public Contract Regulations 2015 applies which means that this proposed procurement falls under the Light touch regime. The procurement process will need to be carried out in accordance with the Council's Contract Procedure rules.

Equality Implications:

There are no equality implications

Contribution to the Council's Core Purpose:

Protect the most vulnerable:

The key aim of the AIM RAA is to:

- Match children who have adoption as their plan with an adoptive family which meets their needs in a timely manner.
- Ensure all those affected by adoption receive the information, support and advice they need to understand the adoption journey.
- Ensure families are well prepared, enabled and supported to care for children with plans for adoption.
- The Merseyside RAA will focus on improving the child's journey through the adoption process and look to deliver high standards of practice across all four local

Agenda Item 10

<p>authority areas, leading to better outcomes for the children and adopters. Sefton's children and adoptive families will benefit from having a focused service which does not have to manage the competing needs of other services to children and families within the local authority.</p>
<p>Facilitate confident and resilient communities: Not applicable</p>
<p>Commission, broker and provide core services: Commissioning is increasingly recognised as the primary mechanism for delivering better outcomes, while using resources more effectively. Sefton is developing a Commissioning Strategy for children in care and this will ensure that the principles that steer effective commissioning which will have a positive influence on improving outcomes. As part of this strategy Sefton Commissioning will become more proactive in order to ensure ongoing quality and compliance.</p> <p>For those children in our care a happy stable home life and successful placement supports the achievement of all other outcomes. Good commissioning is crucial in raising the quality of placement provision, allowing good providers to flourish and providing an incentive for those who perform poorly to focus on improvement.</p>
<p>Place – leadership and influencer: Not applicable</p>
<p>Drivers of change and reform: Not applicable</p>
<p>Facilitate sustainable economic prosperity: Not applicable</p>
<p>Greater income for social investment: Not applicable</p>
<p>Cleaner Greener Not applicable</p>

What consultations have taken place on the proposals and when?

(A) Internal Consultations

The Head of Corporate Resources (FD 4967/17.) and Head of Regulation and Compliance (LD.4252/17....) have been consulted and any comments have been incorporated into the report.

(B) External Consultations

Consultation has been undertaken with all of the participating local authorities. The providers have been kept informed and a further engagement meeting will be held in week beginning 8th January 2018

Implementation Date for the Decision

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

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Appendices:

There are no appendices to this report

Background Papers:

There are no background papers available for inspection.

1. Introduction/Background

Members will recall that on 25th May 2017 approval was given for Sefton to become a member of the RAA. Since then much work has been undertaken by a Strategic Board of the RAA to ensure that there is a smooth transition to the Agency commencing work formally on 1 April 2018. One aspect of the work that Sefton has been nominated the lead to conduct is to procure a range of service contracts on behalf of the RAA.

In June 2015 the Department for Education (DfE) published a White Paper that proposed local authorities should create Regional Agencies by 2020 (Regionalising Adoption- June 2015). The White Paper set out an expectation that local authorities should form firm proposals, in partnership with their voluntary partners, to align adoption services into a Regional Adoption Agency (RAA). The Government commitment to this approach was developed further in the Education and Adoption Act 2016 which give the government the power to direct a local authority to enter into a RAA if it has not done so by the end of 2017

Contract Overview and Recommendations

All adoption contracts across the four partner Authorities have been extended until March 31st 2018. All providers have received clear communication regarding the development of the contract across the RAA.

Contract Arrangements

It is proposed that the following contracts will be the subject of this procurement

Letterbox

Letterbox is a way of parents and adoptive parents and children keeping in touch. Currently 3 out of the 4 authorities deliver this service internally. It is proposed that Letterbox is to be delivered within the teams structure, based on the numbers of adoptions per year this would require approximately 600 contacts annually. Some capacity would be included within the commissioned provider to ensure the capacity of the RAA met regional need.

Access to records – Intermediary Services.

Adopted adults and birth relatives are assisted to obtain information in relation to the adoption, where appropriate, and contact is facilitated between an adopted adult and their birth parents if that is what both parties want.

Agenda Item 10

Currently all 4 authorities commission in full or part this activity. The contractual cost does vary, but better value could be gained by commissioning a single contract on behalf of the RAA. There is an expectation that the full contract value will be transitioned into the RAA, and a process to start procurement of these services as soon as possible is therefore considered necessary.

It is anticipated that a new contract would be commissioned by Sefton, on behalf of the RAA, around Access to Records; Support for birth parents and some Letterbox activity.. This would need to be awarded within the budgets and current spending (or lower) as identified in the Revenue costs above.

It is considered that part of such a contract would be fixed, in terms of price and delivery, whilst it is envisaged that some aspects would be spot purchased, based on a fixed rate, as necessary.

Sefton commissioning officers are therefore seeking Member's agreement to commence a process early in 2018 to procure a new contract for these services on behalf of the RAA in the capacity of lead commissioner, to be awarded within current budget levels and under usual contractual procedures.

2. Proposed Procurement

2.1 It is proposed to offer the service for a 1 year period, with options to extend for up to 1 year. The contract will include break for convenience clauses, which will allow the Council to serve notice to terminate the contract on the yearly anniversary of the contract. The notice period will be 6 months from service of the notice to terminate.

2.2 The anticipated value of the contract should it run for the maximum length of 2 years would be less than £450,000. Under Schedule 3 of the Public Contract Regulations 2015 this falls under the Light touch regime so the Procurement isn't captured under the full regulations. We will carry out a Procurement process that is in line with the Council's Contract Procedure rules

2.3 It is proposed that the basis of evaluation will utilise the MEAT (Most Economically Advantageous Tender) approach taking into consideration a balance between Quality and Cost.

2.4 Sefton Council will lead the procurement on behalf of the RAA Strategic Board.

2.5 It is proposed that the Head of Children's Social Care in consultation with Cabinet member for Children, Schools and Safeguarding , to approve the resulting post procurement contract award.

Report to:	Cabinet Council	Date of Meeting:	11 January 2018 25 January 2018
Subject:	Council Tax Reduction Scheme 2018/19 & Council Tax Base 2018/19		
Report of:	Head of Corporate Resources	Wards Affected:	(All Wards);
Portfolio:	Cabinet Member - Regulatory, Compliance and Corporate Services		
Is this a Key Decision:	Yes	Included in Forward Plan:	Yes
Exempt / Confidential Report:	No		

Summary:

This report provides Cabinet with details of the consultation proposing various options for revising the existing Council Tax Reduction Scheme and makes recommendations to revise the scheme accordingly for 2018/19. The report also recommends an updated Council Tax Base for Sefton Council and each Parish Area for 2018/19.

The proposed changes do not affect any person of state pension credit age.

Recommendation(s):

Cabinet

- (1) That Cabinet notes the contents of the Council Tax Reduction Scheme 2017/18 review.
- (2) That Cabinet note the outcomes of the consultation process and the Equality Impact Assessment (EIA) both of which have informed the recommendations for the Council Tax Reduction Scheme 2018/19.
- (3) That Cabinet agree to revise the existing Council Tax Reduction Scheme as indicated in Section 5(Options 1 to 6) of this report, with effect from 1 April 2018, and for this to be recommended to Full Council on 25 January 2018.
- (4) That Cabinet delegate to the Head of Corporate Resources consideration and implementation of any minor textual changes to the Council Tax Reduction Scheme 2018/19.
- (5) That Cabinet recommends that Council approves the Council Tax Base for 2018/19 for Sefton Council and each Parish Area as set out in Annex A.

Agenda Item 11

Council:

- (1). That Council approves the recommendation to revise the existing Council Tax Reduction Scheme for 2018/19 as indicated in Section 5 (Options 1 to 6) of this report with effect from 1 April 2018.
- (2). Council approves the Council Tax Base for 2018/19 for Sefton Council and each Parish Area as set out in Annex A of the report.

Reasons for the Recommendation(s):

Council Tax Reduction Scheme

Each financial year the Council must consider whether to revise or replace its Council Tax Reduction Scheme. The Council must approve and adopt the 2018/19 Council Tax Reduction scheme by the 31st January 2018 to take effect from 1st April 2018.

Any decision to revise or replace the scheme would require compliance with statutory provisions in accordance with The Local Government Finance Act 2012 (Chapter 17), schedule 4.

There are two major drivers for changing the Council Tax Reduction Scheme (CTR) in 2018/19. Firstly, Government are making significant welfare reform changes between April 2016 and April 2019 and secondly the Full Service roll out of Universal Credit from October 2017. As the CTR Scheme operates within these frameworks, these changes will have an impact upon the operation and cost of the Council's local scheme.

As a result of these changes the Council has reviewed its local scheme with the following key objectives:-

- Align key welfare reform changes to the CTR scheme;
- Maintain fairness, consistency and at the same time cost of the CTR scheme;
- Work more effectively with Universal Credit, recognising that UC makes provision for children, disability, housing and caring responsibilities;
- Deliver administrative efficiencies where possible in support of the scheme.

Council Tax Base

In accordance with the Local Authorities (Calculation of Council Tax Base) (England) Regulations 2012, the Council is required to set a tax base for both Sefton Council and for each Parish Area for 2018/2019.

Alternative Options Considered and Rejected: (including any Risk Implications)

The Council could choose not to make any revisions to the current scheme. However, by maintaining the current scheme and not bringing it in line with key welfare reform changes would have an impact on the working age claimants, in particular those claiming Universal Credit. In addition, keeping the current scheme will have software and administrative implications.

What will it cost and how will it be financed?

(A) Revenue Costs

Council Tax Reduction Scheme 2018/19

Section 5.0 of this report proposes a number of options for change to the current Council Tax Reduction Scheme. The financial impact of each of the proposals is highlighted in the report.

Council Tax Base 2018/19

Changes to the Council’s tax base will have an impact on the level of Council Tax income transferred from the Collection Fund to the Council’s General Fund in 2018/19. It will also impact on the amounts due to the Police and Crime Commissioner, and the Fire and Rescue Service in the year.

When calculating the tax base it has been assumed that any changes to the current Council Tax Reduction Scheme will be offset by claimant reductions in 2018/19.

The following table shows the impact of the changes to the tax base based on the Band D Council Tax levels set for 2017/18:

Council Tax Income	Sefton Council £000	Police & Crime £000	Fire & Rescue £000	Total £000
Budget 2017/18	117,826	13,594	6,089	137,509
Forecast 2018/19	-119,312	-13,765	-6,166	-139,243
Increase (-) / Decrease (+)	-1,486	-171	-77	-1,734

(B) Capital Costs

There are no capital costs.

Implications of the Proposals:

Resource Implications (Financial, IT, Staffing and Assets):

The proposed options will deliver administrative efficiencies where possible in support of the scheme.

Agenda Item 11

Legal Implications:

By Section 5 of Schedule 1A of the Local Government Finance Act 1992 (as amended by the Local Government Finance Act 2012) for each financial year each billing authority must:-

- a. Consider whether to revise its Council Tax Reduction Scheme or to replace it with another scheme
- b. Make any revision to its scheme, or any replacement scheme, no later than 31st January in the financial year preceding that for which the revision or replacement is to have effect.
- c. If any revision to a scheme, or any replacement scheme, has the effect of reducing or removing a reduction to which any class of person is entitled, the revision or replacement must include such transitional provision relating to that reduction or removal as the authority thinks fit.
- d. Before revising its scheme or making a replacement scheme, an authority must:
 - i. Consult any major precepting authority which has power to issue a precept to it.
 - ii. Publish a draft scheme in such manner as it thinks fit and
 - iii. Consult other such persons as it considers are likely to have an interest in the operation of the scheme.

Equality Implications:

The equality implications have been identified and mitigated.

Contribution to the Council's Core Purpose:

Protect the most vulnerable: the options proposed will help maintain fairness, consistency and easier for the customer to understand.
Working more effectively with Universal Credit full-service implementation - aligns the provision for children, disability housing and caring responsibilities.

Facilitate confident and resilient communities: Not applicable

Commission, broker and provide core services: Not applicable

Place – leadership and influencer: Not applicable

Drivers of change and reform: Not applicable

Facilitate sustainable economic prosperity: help people out of financial hardship and support people into work.

Greater income for social investment: Not applicable

Cleaner Greener: Not applicable

What consultations have taken place on the proposals and when?

(A) Internal Consultations

There has been a 6 week public consultation on the draft proposals. Ongoing consultations have taken place with key officers from the Strategic Leadership Team and Cabinet Member for Regulatory, Compliance and Corporate Services, to also include the wider issues and impact from the Welfare Reform.

The Head of Corporate Resources (FD4978/17) and Head of Regulation and Compliance (LD4263/17) have been consulted and any comments have been incorporated into the report.

(B) External Consultations

A public consultation ran for 6 weeks from 27th September 2017 to 10th November 2017. A summary report of the findings can be found at appendix B of this report.

The consultation questionnaire, background information and case study information was sent directly to a number of key stakeholders, partners and community organisations, asking for their comments. The Council received no comments from its Major Precepting Bodies about the proposed changes and other comments received are incorporated into the consultation report (see Annex B).

Publicity about the consultation was shared as follows:

- Local press
- Sefton website, Sefton Intranet and Twitter
- The borough's libraries (posters and hard copies of consultation documents).
- TV screens, Gov. Radio in the One Stop Shops
- Contact centre telephone message queues.
- Internal Council departments including Welfare Rights; Housing Benefit; Housing Options team.
- Housing associations operating in the borough, including One Vision Housing.
- Flyers/Mailshot with landlord's housing benefit payment schedules
- Voluntary sector organisations including the Sefton Citizens Advice Bureau.

The information was also available at a Sefton CVS Stakeholder event on the 19th October 2017 and to 12 members of the public at a focus group at Strand by me on 1st November. Information was also given to the Sefton Partnership for Older Citizens meeting held on Thursday 9th November 2017.

At the CVS Stakeholder Event, partner organisations were directed to the on line survey and most took a hard copy as well. The Easy Read documents and case study posters were particularly popular due to the vulnerability of the service users of those voluntary organisations present at the event.

The focus group at Strand by me event looked at the survey and the options. Comments and questions from the group were focused around whether people with mental health and stigma are going to be affected and whether people would still be able to pay

Agenda Item 11

Council Tax over a 10 month period. Three members of the group also raised issues connected to their personal circumstances.

Following an Improving Information Group session held at Formby Library on 7 November 2017 a member of the group was later assisted by a Council Welfare Officer in completing a survey over the phone. Comments about the easy read supporting information document were that some of the detail had been taken out and people who have no knowledge of the system in general would have found the consultation confusing.

At the Sefton Partnership for Older Citizens meeting, the feedback received was in general positive. There was some confusion as to why there were different options. People thought that they could only vote for 1 option and that the survey should have been worded differently. Some commented that it was unfair to apply a minimum income level for self-employed (option 3) and disagreed in reducing the period that a person can be absent from Great Britain (option 4). Other than those 2 comments everyone at that meeting seemed happy with the proposals.

Implementation Date for the Decision

Following the expiry of the “call-in” period for the Minutes of the Cabinet recommendation to Council and approval by Council 25 January 2018.

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Appendices:

The following appendix is attached to this report:
Appendix A: Council Tax Base Report 2018/19

The following documents can be reviewed by the following link:

www.sefton.gov.uk/counciltaxconsultation

Consultation findings.

Interim Equality Impact Assessment

Equality Analysis report

Background Papers:

There are no background papers available for inspection.

1. Introduction/Background

1.1 Local Council Tax Reduction Scheme.

1.2 Local Council Tax Reduction replaced Council Tax Benefit (CTB) with effect from the 1 April 2013. The Council Tax Reduction Scheme is a discount awarded to those on a low income to help towards the cost of their council tax bill. It is based on a person's household and income. The local scheme rules only apply to

working age council tax payers. Pensioners are protected by legislation and must be provided with the level of council tax support specified by the Government.

1.3 The total grant of £24.2m transferred to the Council, Police and Crime Commissioner, and Fire Service in 2013/14 to fund the local scheme was £3.0m (11%) lower than had previously been provided to fund council tax benefit in 2012/13. As a result, the Council had to introduce changes to the national default council tax support scheme in order to ensure that the local council tax support scheme was cost neutral. As the Council was unable to alter the pensioner scheme rules, the saving requirement was met by reducing the level of support provided to working age claimants and through technical changes to empty property discounts.

1.4 The Council must review and agree a Council Tax Reduction Scheme (CTRS) each year. The CTRS for 2018/2019 must be agreed by full Council by 31 January 2018.

2. **Review of the Local Council Tax Reduction Scheme 2016/17**

2.1. Areas Covered by the Scheme Review

In order to satisfy the requirement to review the Council Tax Reduction Scheme the following key areas were evaluated:

- Claimant caseload
- Scheme expenditure.
- Impact on the most vulnerable claimants.
- Welfare reform changes including Universal credit roll out.
- Council Tax collection
- Attachment of Benefits.
- Review of scheme principles.
- Council Tax Exceptional Hardship fund

2.2 Claimant Caseload

2.3 The table below shows the caseload data at 31 September 2017 compared to caseload data at the end of each year since the Council Tax Reduction Scheme was introduced in 2013/14.

Year	Date	Pensioners	Working Age	Total	Change
2013/14	03.04.14	14,655	16,025	30,680	n/a
2014/15	01.04.15	13,925	15,349	29,274	-1,406
2015/16	31.03.16	13,206	14,886	28,092	-1,182
2016/17	31.03.17	12,541	14,524	27,065	-1,027
2017/18	30.09.17	12,328	14,359	26,687	-378

The working age caseload can be split further:

Agenda Item 11

Year	Date	Employed	Other	Total	Change
2013/14	03.04.14	2,874	13,151	16,025	n/a
2014/15	01.04.15	2,748	12,601	15,349	-676
2015/16	31.03.16	2,504	12,382	14,886	-463
2016/17	31.03.17	2,193	12,331	14,524	-362
2017/18	30.09.17	2,062	12,297	14,359	-165

2.4 **Pensioner Claimants:** Since the initial implementation of the scheme in 2013/14 the number of Pensioner Claimants has declined in every year. The total change in pensioner claimant numbers between 2013/14 and 2016/17 was -2,114, which is reduction of -14.4%. Pensioner claimant numbers have continued to fall in 2017/18.

2.5 **Scheme Expenditure**

The following table shows the Council Tax Reduction Scheme Expenditure reported in the Revenue Outturn Return compared to the mid-year estimate for 2017/18:

Year	Source	Pensioners £000	Working Age £000	Total £000	Change £000
2013/14	RO Return	13,305	9,907	23,212	n/a
2014/15	RO Return	12,152	10,364	22,516	-696
2015/16	RO Return	11,895	9,760	21,655	-861
2016/17	RO Return	11,540	10,559	22,099	+444
2017/18	Estimate	12,656	9,876	22,532	+433

Notes:

- 2013/14: Split of Pensioner and Working age costs included an estimated split on ceased cases so may not provide an accurate basis for comparison.
- 2016/17: The increase in the total cost included the impact of the reduction in claimant contribution, from 20% in 2015/16 to 16% in 2016/17 and the Council Tax increase of 3.69% in year.
- 2017/18 Estimate: Total cost has been split pro-rata to the amounts reported in the CTB Return 2017.

Council Tax Base Return Data

The following table shows a snapshot of Council Tax Reduction Scheme expenditure analysed based on weekly payments recorded in early October as reported in the Council Tax Base Return:

Year	Source	Pensioners £000	Working Age £000	Total £000	Change £000
2013	CTB Return	12,602	10,214	22,816	n/a

2014	CTB Return	12,491	10,260	22,751	-65
2015	CTB Return	11,991	10,033	22,024	-727
2016	CTB Return	12,503	9,918	22,421	+397
2017	CTB Return	12,579	9,816	22,395	-26

2.6 Impact on the most vulnerable claimants

The scheme implemented for 2017/18 continues to address the Council's priorities to minimise the impact on the most vulnerable, by seeking to strike a balance between dealing with Council priorities whilst supporting the financially vulnerable. The Council, having recognised the impact on communities, has introduced a range of mitigating actions, including:

- Provision of an Exceptional Hardship Fund (see Section 2.11)
- Maintenance of core aspects of the Government Housing Benefit scheme that provides additional assistance where there are children, disability and caring responsibilities.
- Council Tax collection – 12 month instalment payments continues to be offered to council tax payers.
- Enforcement action – a sensitive approach was adopted to take into account the potential vulnerability of Council Tax support claimants. Processes and correspondence continue to be reviewed and court costs were minimised to external charges only. Customers are sign posted for debt advice and appointments can be arranged with Sefton Citizen Advice for advice on budgeting skills.
- Before cases are referred to Enforcement Agent Companies a vetting stage has been introduced and cases are dealt with under a separate debt recovery process to minimise potential increases in debt.
- A new role has been created within the Revenues team to monitor vulnerability issues and identify areas for improved processes. For example care leavers, also the issue of severe mental impairment, ensuring there is an effective communication process in place to provide awareness.

2.7 Welfare Reform Changes

The Government have implemented a series of welfare reform changes aimed at cutting the cost of welfare payments and providing more incentives to work. These changes have had an impact on a number of claimants and the value of the council tax reduction for claimants.

The scheme has been reviewed against the changes to the national Housing Benefit Scheme and Pensioner Council Tax Reduction Scheme.

The table below provides a summary of the key welfare reform changes considered for the CTRS 2018/19:

Summary of Key Welfare Reform Changes 2018/19

Key to abbreviations used:

- CTR – Council Tax Reduction
- DWP – Department for Work and Pensions
- ESA – Employment and Support Allowance
- GB – Great Britain
- HB – Housing Benefit
- LA – Local Authority
- UC – Universal Credit
- WLM – We Love Manchester

Description of the Government Welfare Reform	Who will be affected	Impact for CTR	Other comments
Assessed Income Period- for 6 months.	Customers where they or their partner are on UC and one of them is working	<p>By setting an assessed income period it means CTR entitlement will <u>not</u> need to be recalculated each month, revised CTR letters and Council Tax bills will not need to be sent out each month and Council Tax recovery / payments will not be delayed each time a new bill is issued and customers will not be confused receiving new documentation payment plans each month.</p> <p>Implementing this change will mean their will savings in Administration, Notifications/ Bills, Postage & Customer contact and it should assist in Council Tax collection.</p>	<p>Each month UC is recalculated based on actual earnings in the previous month; this means the revised notifications are sent to the LA for CTR assessments for all fluctuations in earnings regardless of how much. Some people's earnings change by pennies each month.</p> <p>As at 14/11/2017 there were 1328 CTR claims where they are on UC, of which, 303 (22%) have employed earnings. As UC full service is rolled out further this number is expected to increase to approx. 40%.</p>
Apply a minimum income floor for all CTR claims where they have been self-employed for more than 12 months	Non passported, working aged CTR claimants who have been self-employed for more than a year where their income is less than 35 hour at minimum wage	CTR would be calculated based on National Living Wage reducing entitlement generating savings to the CTR scheme. As at 14/11/2017, there were 592 live CTR claims where the claimant, partner or a non-dependant is self-employed.	Whilst we hold the data for number of self-employed claimants we currently do not hold data in order to determine how many of claimants have been in business for more than 12 months. This will require a manual process.
Temporary absence rules for Housing Benefit (HB) and Council Tax Reduction (CTR) for Pensioners for those leaving the	Anyone who leaves GB for a period of over 4 weeks (previously 13 weeks).	Savings for the CTR scheme are likely to be fairly low in financial terms as in most cases it would rely on the customer or other agency letting the LA know this had happened.	<p>This was effective for HB from 28th July 2016 and for pensioners (CTR) claimants from 1st April 2017</p> <p>The 4 week period can be extended by 4 weeks if absence is linked to death of close</p>

country for more than 4 weeks.			relative or to 26 weeks in certain other specified circumstances
Reform of Bereavement benefits Bereavement support payment is disregarded for all other DWP benefits, including Housing Benefit	Anyone under state pension age who loses their spouse on or after 6/4/2017, whether they have children or not	If this is replicated and disregarded for CTR the cost will be minimal as there were only 2 live CTR claims as at 15/11/2017 which would cost the LA £480 a year in total	Current CTR scheme had to be approved by Council by 31/1/2017, but details of new system of bereavement benefits were only made public in March 2017 (too late to include in 2017/8 CTR scheme).
New ESA claimants from 3/4/2017 who are put in the Work Related Activity Group will only get same as JSA recipients	Anyone found to have limited work capability. HB rules have been amended so that their HB entitlement is not made more generous than what they would have received before the change in rules	Not replicating the change could lead to additional CTR of up to £5.81 per week (£303 a year) but the likely numbers of claimants affected will be low due partly to the impending roll-out of Full Digital UC from October 2017	In September 2017 no one is affected from April 2017 in our current caseload.
Replicate Income / Capital disregard rules for money received from WLM / London Emergency fund etc.	Any people affected by the terror attacks.	Income/Capital not taken into account.	

2.8 Council Tax Collection

Department for Communities & Local Government national data for 2016/17 indicated that Council Tax collection rates remain high (97.2% average in year), however, £2.8 billion of debt remained uncollected (all years) at 31 March 2017.

Sefton Council Tax Collection 2016/17

The table below shows the amount of Council Tax billed and collected during 2016/17:

Recorded at 31 March 2017	Liability Raised £000	Received In Year £000	Collection Rate %
CTRS Cases - Working Age	3,592	2,555	71.1%
CTRS Cases - Pensioner Age	1,770	1,777	100.4%
Other Council Tax Payers	129,523	125,554	96.9%
Total	134,885	129,886	96.3%

The total collection rate has fallen from 97.2 % in 2012/13 before Council Tax support was localised, to 96.2% in 2013/14, 96.3% in 2014/15, 96.2% in 2015/16 and 96.3% in 2016/17. This is despite the proactive work officers have undertaken with people affected by the Council Tax Reduction Scheme.

Sefton Council Tax Collection 2017/18

At the beginning of November 2016 the collection rate was 48.6%, at the beginning of November 2017 the rate has increased to 48.9%.

2.9 Attachment of Benefits (AOB)

Since the introduction of the Council Tax Reduction Scheme in April 2013 the number of working age Council Tax support claimants falling into arrears grew. One recovery option open to the Council in respect of benefit claimants is to apply for an attachment of benefits (AOB) via the courts. Under this option the Court can require a payment of up to £3.70 per week to be made by the DWP directly from the claimant's benefits in order to meet Council Tax arrears.

Payments by AOB do provide some certainty to both the Council and the debtor, For the Council, the payments do guarantee regular income from the debtor. For the debtor there is the security of knowing that a debt is being paid by a deduction from their benefit.

AOB is not a perfect solution to the problem of growing debt for the following reasons:-

- An AOB cannot be applied without first having taken the debtor to court to

Agenda Item 11

obtain a Liability Order. Due to the need to follow the correct legislative timeline for obtaining a Liability Order, payment by AOB cannot commence until part way through the year. Typically for a bill issued in March the first payments would not be made by the DWP until August of the same year.

- Many debtors have arrears outstanding for multiple years Council Tax. An AOB can only be used to collect one debt at a time. In addition current legislation does not allow the Council to take any other form of debt recovery (e.g. use of Enforcement Agents) whilst an AOB is in place. In an attempt to mitigate this, people on AOB have been issued letters asking them to contact the Council for advice, to make alternate payment arrangements or seek financial advice from Sefton Citizen Advice. However, this initiative met with only a few people contacting the Revenue Service to make arrangements to pay.
- Collection of Council Tax debt by way of AOB is not the highest priority of debt administered by the DWP. Therefore, the level of recovery will be affected when people have multiple debts e.g. rent and energy debts are given a higher priority.
- Many new claimants for Council Tax Reduction have already accrued debts before an AOB can be considered.
- At the commencement of the scheme the maximum deduction of £3.70 was lower than the minimum weekly Council Tax charge for all property bands. The minimum contribution of 20% towards the Council Tax was greater than the amount that could be collected within the year by AOB. This created a problem of debt being carried forward to the following year. Therefore, whilst debt payments are being collected regularly the amount of debt at the end of each year kept growing.

To try and break the cycle of debt the Council Tax Reduction Scheme was amended with effect from 1st April 2016 to reduce the minimum contribution rate to 16% from a minimum 20% contribution at the commencement of the scheme. This rate was calculated so that the AOB payment of £3.70 per week was more than would be due from Council Tax for the majority of claimants.

Below is a snapshot of the amount of debt being recovered under AOB and the amount of debt still waiting recovery by AOB

	As at 01.04.16	As at 01.04.17	As at 31.10.17
AOB in Payment	£927,049	£890,256	£961,880
No. of Cases	5,847	5,395	5,492
AOB Pending	£2,292,812	£2,632,588	£3,296,146
No. Of Cases	9,809	11,496	14,605

Cases in payment will take an estimated 47 weeks to clear all years, assuming circumstances remain unchanged from the 31.10.17

Cases pending the payment of AOB will not commence recovery until other priority or older Council Tax debts are paid.

2.10 **Scheme Principles**

Principle	(CTRS) Scheme working for non-pensioner claimants?
The Council will continue to support work incentives	<p>Yes – The council continues to operate a system which disregards certain amounts of money from customers earnings through employment (and self-employment) when calculating entitlement.</p> <p>This results in some additional support to those customers receiving Universal Credit (UC) who are in low paid work, following the removal of UC work allowances from April 2016</p>
The Council will continue to recognise the additional needs of our most vulnerable residents.	<p>Yes – The council continues to make additional allowances and give additional support to those receiving certain DWP sickness benefits, disability benefits and benefits for Carers when calculating entitlement.</p> <p>Additionally, the Council continues to disregard certain disability benefits as income when calculating entitlement</p> <p>Procedures were reviewed for the collection of non-payment of Council Tax to ensure non-disproportionate impact on the most vulnerable households. Also financial budgeting skills and advice is made available to all claimants.</p> <p>The Council Tax Exceptional Hardship Fund is available to those in the greatest financial need with fair and transparent criteria for awards.</p>

Agenda Item 11

<p>The Council will continue to recognise the additional needs of families with children</p>	<p>Yes – Child Benefit and Child Maintenance payments are not taken into account as income when calculating entitlement to CTRS.</p> <p>Additional allowances are given when calculating entitlement for where there is a disabled child in the family.</p> <p>The CTRS scheme also mirrors provisions in the Housing Benefit scheme by taking child care costs into account for low income working families</p> <p>The Council will continue to include the Family Premium when calculating the Council Tax reduction. This was removed for all new housing benefit claims from May 2016.</p> <p>The Council has also chosen not to mirror the changes made to Housing Benefit which restrict the amount of support given to families with more than 2 children within its CTR scheme.</p>
<p>The Council supports households staying together to make better use of housing in Sefton and reduce homelessness.</p>	<p>Yes - The amount of Council Tax Reduction taken away from a customer when other adults live in the household (known as a non-dependant deduction), was reduced in 2013 and still remains at those lower levels.</p>
<p>The Council will continue to have due regard to the Armed Forces Covenant</p>	<p>Yes – War Disablement and War Widows pensions in calculating CTRS, including any Armed Forces compensation in accordance with the covenant is disregarded. This also includes the service attributable element of the armed forces pension could also be disregarded as income when calculating entitlement.</p>

2.11 Council Tax Exceptional Hardship Fund (EHF)

A key feature of the local Council Tax Reduction scheme was the creation of an exceptional hardship fund with an annual budget of £150,000 to help mitigate hardship issues for vulnerable working age council tax reduction scheme claimants. The fund is used to reduce council tax bills when an individual is judged to be facing particular hardship. The fund is administrated within a set of agreed policies and procedures approved by Cabinet Member for Regulatory, Compliance and Corporate Services.

For the purposes of administration, the decision to grant any reduction in liability is considered under any one of three categories, which includes “Exceptional Financial Hardship - for Council Tax payers who have qualified for support under the Local Council Tax Reduction Scheme but who are still

experiencing severe financial hardship”.

The Policy replaced the Council Tax Exceptional Hardship Scheme that has been in place since April 2013. That scheme was introduced by the Council to mitigate against potential issues that may have arisen as a consequence of the abolition of Council Tax Benefit and the introduction of the Local Council Tax Reduction Scheme.

The following is a breakdown of awards for period 01.04.2017 – 31.10.2017

- 998 claimants received an award
- Total Amount Awarded = £91,009
- Average award £91.19
- Average length of award = 6 months
- 571 claimants receiving an award have received an award previously
- 248 claimants have received an award on 3 or more occasions
- 102 claimants have received an award on 5 or more occasions
- Highest number of awards = 8
- 421 claims have been refused

3. Summary of local Council Tax Reduction Scheme Review 2017/18

- 3.1 From its inception in April 2013, the local Council Tax Reduction scheme has delivered financial support to a significant number of vulnerable residents.
- 3.2 The number of claimants eligible for support has reduced in each year since 2013/14. The number of claimants has continued to reduce in 2017/18. By 31 September 2017 the number of claimants had reduced to 26,687 (12,328 pensioner age and 14,359 working age).
- 3.3 The forecast cost of the scheme has increased by £0.433m (2.0%) in 2017/18 to £22.532m (at 30/09/17). This is due to the impact of an average council tax increase of 4.5% and the offsetting impact of a reduction in claimant numbers.
- 3.4 Welfare Reform Changes introduced since 1 April 2017 are expected to increase the cost of providing council tax support in 2018/19. The financial impact will depend on the number of claimants affected and any amendments made to the scheme.
- 3.5 Council tax in year collection rates fell by 1% to 96.2% in 2013/14 after the replacement of council tax benefit with the local council tax support scheme. The collection rate has remained at a similar level since with a collection rate of 96.3% being achieved in 2016/17.
- 3.6 There are signs that the Council's collection rate has improved in 2016/17 (+0.1%), however, outstanding debt subject to attachments to benefits (AOB) and AOB pending have continued to increase.
- 3.7 The Exceptional Hardship Fund continues to operate within budget whilst helping mitigate the impact of the CTRS on the most vulnerable council tax payers.

Agenda Item 11

4. Equality Impact Assessment

The Department for Communities and Local Government issued a report in February 2014 reminding local authorities of their key duties when deciding on Local Council Tax Reduction Schemes:

Public Sector Equality Duty (The Equality Act 2010)

Duty to mitigate the effects of child poverty (The Child Poverty Act 2010)

The Armed Forces Covenant

Duty to prevent Homelessness (The Housing Act 1996)

A detailed equality assessment was undertaken and published as part of the design and implementation of CTRS for 2013/14. This assessment has been reviewed in the context of the proposed options for 2018/19 and found there was no disproportionate impacts as the mitigating actions put in place for the 2013/14 scheme remained.

The addendum to the original assessment is available on the Council Website to review. <http://smbc-modgov-01/mglIssueHistoryHome.aspx?lId=42533>

An Interim Equality Impact Assessment was undertaken as part of the consultation and engagement process on the proposed changes to the 2017/18 Council Tax Reduction Scheme. The outcomes of the consultation and engagement are contained in the “Consultation Report on the proposed changes to the Sefton Council Local Council Tax Reduction Scheme 2018-19”, which can be viewed on the following link www.sefton.gov.uk/counciltaxconsultation together with the Interim Equality Impact Assessment and the Equality Analysis Report based on the proposed revisions to the current scheme.

5. Proposed revisions to 2017/18 local Council Tax Reduction Scheme for 2018/19

A number of proposed changes to the Council Tax Reduction Scheme 2017/18 went out to consultation on 27 September 2017. The scheme proposals will align key welfare reform changes maintaining fairness, consistency and recognising that Universal credit makes provision for children, disability, housing and caring responsibilities. Each of the options for change are outlined below.

Option 1– Applying a fixed income period to avoid multiple changes in circumstances.

The roll out of Universal Credit is now a particular key factor that needs to be taken into account when looking at the CTR Scheme for 2018/19. Many people in low-paid work with fluctuating earnings will see their monthly Universal Credit payment vary and, as things stand, this will lead to monthly changes to the level of CTR with further implications for Council Tax payment dates and liability orders. Currently 40% of UC case load is in receipt of earned income.

Commentary	<p>This option will allow the authority to set ‘assessment periods’ during which any changes in universal credit (UC) entitlement will not be actioned.</p> <p>Traditionally fixed periods of this sort have been 6 months (previously used within Family Credit).</p> <p>The assessment period will only relate to earned income and the UC award.</p> <p>If there is a change in household and capital – the claim would be reassessed.</p> <p>The fixed period approach cannot be made to the pension age CTR scheme which is prescribed by Central Government.</p>
Recommendation following consultation	<p>Yes – mitigation included in the Equality Analysis Report</p>
Additional Information	<p>Fixed Period Assessments</p> <p>This option will enable the authority to calculate or recalculate a person’s entitlement to Council Tax Reduction every 6 months. Currently, every change to a person’s income or capital will potentially generate a change in their Council Tax Reduction leading to changes in their Council Tax instalments.</p> <p>By fixing the assessment period, this will avoid multiple changes, be less confusing, avoid the constant recalculations of Council Tax instalments and will aid administration.</p> <p>The benefit of this is:</p> <ul style="list-style-type: none"> • It is a clear and simple change to the current scheme; • It is administratively simple and will potentially make administrative savings; and • It may benefit some applicants as changes that may decrease Council Tax Reduction for a person would not be taken into account until the new assessment period. <p>The drawbacks of doing this are:</p> <ul style="list-style-type: none"> • It may disadvantage some applicants as changes that may increase Council Tax Reduction for a person would not be taken into account until the new assessment period.

Agenda Item 11

<p>Revenue Implications</p>	<p>The financial impact of the proposed change is difficult to assess as it will depend on the number of individual changes in income that would have impacted on CTRS awards and whether there are more CTRS claimants gaining an advantage or a disadvantage in terms of the amount of CTRS discounts that would have been awarded.</p> <p>The proposed change will result in a saving in administration costs as the number of assessments will be reduced as a result of this change.</p>
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Option 2 - Application of a Minimum Income Floor for Self Employed cases in line with Universal Credit approach

<p>Commentary</p>	<p>The Minimum Income Floor (MIF) has been introduced by a number of authorities in line with the introduction of Universal Credit. It sets an 'income floor' or minimum income level after the person has been in business for 12 months.</p> <p>If their income does not reach the MIF, then the MIF is used as their income. It is normally based on 35hrs x National Minimum Wage / National Living Wage (as appropriate). Exceptions to MIF include where:</p> <ul style="list-style-type: none"> • There are caring responsibilities; • Disablement; or • Where the claimant also undertakes employment as an employed earner.
<p>Recommendation following consultation</p>	<p>Yes – mitigation included in the Equality Analysis Report</p>
<p>Additional Information</p>	<p>Using a set income for self-employed earners after 1 year's self-employment</p> <p>In order to align Council Tax Reduction with Universal Credit, the Council proposes to use a minimum level of income for those who are self-employed. This would be in line with the National Living Wage (or National Minimum Wage if you are under 25) for 35 hours worked per week. Any income above this amount would be taken into account based on the actual amount earned. The income would not apply for a designated start-up period of one year from the start of the business.</p> <p>The benefits of this are:</p> <ul style="list-style-type: none"> • The treatment of income for self-employed applicants for Council Tax Reduction will be brought

	<p>broadly into line with Universal Credit;</p> <ul style="list-style-type: none"> • It should encourage self-employed working age applicants to expand their business. <p>The drawback of this is:</p> <ul style="list-style-type: none"> • Where a working age applicant is self-employed and continues to run a business where their income is below the minimum living wage level, the Council will assume they earn at least the minimum level (based on a 35-hour week, regardless of the hours they work).
Revenue Implications	<p>The financial impact of the proposed change is difficult to assess. It is expected to reduce the cost of the CTRS as those self-employed claimants earning less than the minimum income level would receive a lower level of CTRS discount.</p> <p>There will also be a saving in administration costs as the number of assessments will be reduced as a result of this change.</p>

Option 3 - Amending the Temporary Absence rules for working age CTR in line with changes made to Housing Benefit and Council Tax Reduction for Pension Age cases

Commentary	<p>Housing Benefit (working age and pension age) and CTR (pension age) rules have been amended so that temporary absence from Great Britain will end entitlement to either benefit or reduction if it is more than 4 weeks.</p> <p>The Housing Benefit rules were changed in 2016 and CTR (pension age) rules were changed from April 2017.</p> <p>This change will bring the working age CTR scheme into line with the other benefits / reduction. It will be effective from 1st April 2018 and cannot be retrospectively applied.</p>
Recommendation following consultation	<p>Yes – mitigation included in the Equality Analysis Report</p>
Additional Information	<p>The benefits of doing this are:</p> <ul style="list-style-type: none"> • The treatment of temporary absence will be brought into line with Housing Benefit; • It is seen as fair; and • There are exceptions for certain occupations including the armed forces and mariners.

Agenda Item 11

	<p>The drawback of this is:</p> <ul style="list-style-type: none"> • If a person is absent from Great Britain for a period which is likely to exceed 4 weeks, their Council Tax Reduction will cease from when they leave the country. They will need to re-apply on return
Revenue Implications	<p>Savings to the CTR scheme are likely to be fairly small as the number of claimants absent from Great Britain for more than 4 weeks is expected to be low and in most cases the Council would have to rely on the customer or other agency letting the Council know this has happened.</p>

Option 4 – Amend CTR to disregard Bereavement Support payments in line with changes to Housing Benefit

Commentary	<p>A minor amendment which would allow the Council Tax Reduction scheme for working age to disregard the new Bereavement Support payment. This will replicate the changes in Housing Benefit which took effect from April 2017.</p> <p>Failure to make the change would mean that any payment received would be taken into account as income within the CTR scheme.</p>
Recommendation following consultation	<p>Yes – mitigation included in the Equality Analysis Report</p>
Additional Information	<p>The benefit of this is:</p> <ul style="list-style-type: none"> • It brings the working age Council Tax Reduction Scheme in line with Housing Benefit changes made by Central Government; and • The change will be fairer to applicants who have recently lost a partner <p>The drawbacks of doing this:</p> <ul style="list-style-type: none"> • It is expected to be cost neutral.
Revenue Implications	<p>Bereavement Support payments replaces bereavement allowance and widowed parents allowance which are disregarded in the current CTR Scheme so the financial impact is expected to be broadly cost neutral. There could be a saving in the long-term as the new bereavement support payments are paid for a shorter period.</p>

Option 5 – Amending CTR to not grant ESA Work Related Activity Component for all new ESA claims in line with the changes to Housing Benefit.

Commentary	<p>From 3rd April 2017, new Employment and Support Allowance claimants who fail to be treated under the Work Related Activity Group will not get the Work Related Activity Component (WRAC). Existing Work Related Activity Group claimants will continue to get the component as will all Support Group cases (who receive the Support Component), whether they are new claimants or not.</p> <p>The removal of the ESA WRAC will require the working age Council Tax Reduction scheme to be amended to ensure that no component is granted within the Council Tax Reduction applicable amounts. The change would only take effect from 1st April 2018.</p>
Recommendation following consultation	<p>No – The Council has chosen not to mirror the changes made to Housing Benefit as a consequence of the changes to ESA from April 2017, in the CTR scheme. Further details are in the Equality Analysis Report</p>
Additional Information	<p>The benefits of the Council doing this are:</p> <ul style="list-style-type: none"> • The treatment of ESA will be brought into line with Housing Benefit • It avoids additional costs to the Council Tax Reduction scheme. • Persons receiving ESA will not experience any reduction in Council Tax Reduction. <p>The drawbacks: Some new CTRS claimants will receive a lower level of discount, but the likely number of claimants affected is expected to be very low following the roll out of Universal Credit.</p>
Revenue Implications	<p>This change is likely to result in a small cost saving as a result of removing the assumed income premium in the CTRS calculations in-line with the actual ESA awards. Currently no one in Sefton would be affected by this change.</p>

Option 6 – Treatment of payment from the We Love Manchester Emergency Fund and London Emergencies Trust.

Commentary	<p>On 20 June 2017 the Government issued guidance to Local Authorities on the treatment for the purposes of local Council Tax Reduction schemes of payments made from the charitable fund which has been established to provide financial assistance to victims and relatives affected by the attacks that occurred in Manchester on 22 May and in London of 22 March and 3 June.</p>
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Agenda Item 11

	Local Authorities are encourage to consider using their discretionary powers to disregard fully payments awarded from both funds to those injured or bereaved as a result of these incidents when assessing eligibility or their schemes.
Recommendation following consultation	Yes – mitigation included in the Equality Analysis Report
Additional Information	<p>The benefits of the Council doing this are:</p> <ul style="list-style-type: none"> • Persons receiving payments awarded from both funds to those injured or bereaved will not experience any reduction in Council Tax Reduction. • It brings the working age Council Tax Reduction Scheme in line with Housing Benefit changes made by Central Government; and the prescribed Council Tax Reduction Scheme for pension age claimants <p>The drawbacks of doing this are the low cost to the Council for the CTR scheme.</p>
Revenue Implications	The cost to the CTR scheme is expected to be low as the number of CTR claimants in Sefton receiving payments from these funds is expected to be small.

ANNEX A

SETTING THE COUNCIL TAX BASE FOR 2018/19

1. Setting the Council Tax Base

- 1.1 The Council Tax Base is the link between the Council's budget and the level of Council Tax. The tax base will be used to calculate the Council Tax in Sefton, once the Council's budget has been agreed. The Council is required to calculate its own tax base as well as the tax base for each parish council within its boundary and have them approved by the 31 January 2018.
- 1.2 The calculation of the Council Tax Base takes into account many factors such as the rate of new building and the trends in people living on their own (Sole Occupier Discount).
- 1.3 The tax base calculation assumes a collection rate of 98.25% in 2018/19, which is unchanged from 2017/18. This reflects long-term collection rates.

2. Council Tax Base for Sefton Council in 2018/19

- 2.1 The tax base for 2018/19 is 82,939.5 Band D equivalent dwellings for Sefton Metropolitan Borough Council. This is an increase of 1,032.7 in comparison with the tax base for 2017/18. An analysis of the changes between the 2017/18 and the 2018/19 tax base is provided in the table below:

Tax Base for Sefton Council		Band D Equivalents		
		2017/18	2018/19	Change
H	Dwellings on the Banding List	109,899.0	110,342.6	443.6
Q	<u>Exemptions and Discounts</u>			
	Exempt Dwellings	-1,895.8	-2,007.1	-111.3
	Disabled Persons Reductions	-151.9	-152.6	-0.7
	Sole Occupier & Status Discounts	-9,919.3	-9,930.6	-11.3
	Empty Property – Discounts	-283.4	-281.5	1.9
	Total	-12,250.4	-12,371.8	-121.4
E	Empty Homes Premium	260.5	254.9	-5.6
J	Adjustments	-658.8	-647.0	11.8
Z	Council Tax Support Scheme	-13,891.7	-13,169.0	722.7
B	Collection Rate Adjustment	-1,458.8	-1,477.2	-18.4
	MOD Properties	7.0	7.0	0.0
	Council Tax Base	81,906.8	82,939.5	1,032.7

Agenda Item 11

2.2 The main reason for the changes in the tax base are:

Dwellings on the Banding List: The number of properties on Banding List has increased by 550 (0.4%) in the year.

Exempt Dwellings: The number of dwellings subject to a specific exemption (Codes A to W) has increased by 138 (5.8%). This includes increases in the number of unoccupied dwellings owned by a charity (Class B), unoccupied dwellings which were previously the sole or main residence of a person who has moved into a hospital or care home dwellings (Class E), dwellings occupied by students (Class N), and dwellings occupied by persons who are severely mentally impaired (Class U).

Council Tax Support Scheme (CTRS): The number of claimants has continued fall in 2017/18. The amount included in the 2018/19 tax base is based on the forecast cost recorded on 7 December 2017. The 2017/18 tax base included an adjustment adding 187 Band D equivalents (worth approximately £300,000) to allow for the impact of welfare reforms announced by the DWP. This adjustment has not been included in the 2018/19 tax base as these costs are expected to be offset by further reductions in claimant numbers.

3. Council Tax Base in Parish Areas for 2018/19

3.1 There are also new tax base figures for each parish area in 2018/19. The following table provides details of the new tax base for each parish compared to 2017/18:

Tax Base for Parish Areas	Band D Equivalents		
	2017/18	2018/19	Change
Parish of Aintree Village	2,019.2	2,037.0	17.8
Parish of Formby	9,054.2	9,125.5	71.3
Parish of Hightown	846.6	864.6	18.0
Parish of Ince Blundell	163.6	162.6	-1.0
Parish of Little Altcar	322.9	330.9	8.0
Parish of Lydiate	2,037.3	2,047.8	10.5
Parish of Maghull	6,492.2	6,545.4	53.2
Parish of Melling	980.6	999.6	19.0
Parish of Sefton	231.2	236.5	5.3
Parish of Thornton	762.7	763.2	0.5

3.2 The tax base calculation for each of the parish areas is based on the same assumptions made in the calculation for Sefton Metropolitan Borough Council.

Agenda Item 12

Report to:	Cabinet	Date of Meeting:	11 January 2018
Subject:	Revenue and Capital Budget Plan 2017/18 - 2019/20		
Report of:	Head of Corporate Resources	Wards Affected:	(All Wards);
Portfolio:	Corporate Resources		
Is this a Key Decision:	Yes	Included in Forward Plan:	Yes
Exempt / Confidential Report:	No		

Summary:

To inform Cabinet of: -

- i) The current forecast revenue outturn position for the Council for 2017/18 as at the end of November. This forecast will be informed by the latest analysis of expenditure and income due to the Council, in addition to the progress in delivering approved savings;
- ii) The current forecast on Council Tax and Business Rates collection for 2017/18; and
- iii) The current position of the Capital Programme.

Recommendation(s):

Cabinet is recommended to:-

- i) Agree that further actions will be considered to deliver a balanced in-year budget which is currently forecasting a financial year-end deficit position of £1.721m;
- ii) Agree the progress to date on the achievement of approved Public Sector Reform savings for 2017/18;
- iii) Agree the forecast position on the collection of Council Tax and Business Rates for 2017/18; and
- iv) Agree the current progress in the delivery of the 2017/18 Capital Programme and the forecast outturn position for the year.

Reasons for the Recommendation(s):

To ensure Cabinet are informed of the forecast outturn position for the 2017/18 revenue and capital budgets as at the end of November 2017 and to provide an updated forecast of the outturn position with regard to the collection of Council Tax and Business Rates.

Alternative Options Considered and Rejected: (including any Risk Implications)

None

What will it cost and how will it be financed?

Agenda Item 12

(A) Revenue Costs

Any under-achievement of the approved revenue budget savings for 2017/18 will need to be financed from within any surplus identified within other areas of the 2017/18 budget, or from the Council's general balances.

The current financial position on approved Public Sector Reform savings indicates that approximately £1.891m of 2017/18 savings are at risk of not being achieved in the year. Due to anticipated net underspends elsewhere within the budget a deficit position for the year of £1.721m is currently forecast.

(B) Capital Costs

The Council's capital budget in 2017/18 is £28.159m. As at the end of November 2017, expenditure of £9.109m has been incurred and a full year outturn of £23.770m is currently forecast.

Implications of the Proposals:

Resource Implications (Financial, IT, Staffing and Assets): Should the forecast deficit position for 2017/18 (£1.721m) be realised at the year end, the Authority would have to utilise reserves in order to finance the shortfall.
Legal Implications: None
Equality Implications: None

Contribution to the Council's Core Purpose: A sustainable revenue and capital budget will enable the delivery of the Councils core purpose as set out below

Protect the most vulnerable:
Facilitate confident and resilient communities:
Commission, broker and provide core services:
Place – leadership and influencer:
Drivers of change and reform:
Facilitate sustainable economic prosperity
Greater income for social investment:
Cleaner Greener:

What consultations have taken place on the proposals and when?

(A) Internal Consultations

The Head of Corporate Resources (FD 4979/17) and Head of Regulation and Compliance (LD 4264/17) have been consulted and any comments have been incorporated into the report.

(B) External Consultations

None

Implementation Date for the Decision

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

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Appendices:

The following appendix is attached to this report:

Appendix A – PSR Savings 2017/18 – Current Forecast Achievement

Background Papers:

There are no background papers available for inspection.

Agenda Item 12

- 1.1 At Budget Council in March 2017, Members approved a 3 year budget package that would seek to address the funding shortfall of £64m that had been reported throughout 2016. Following a review of all financial assumptions and the proposals contained within the Framework for Change programme, savings of £24.922m were identified that would need to be delivered in 2017/18. This position included a number of measures that were approved to phase the delivery of the Public Sector Reform savings over the course of the 3 year period.
- 1.2 This report therefore presents an assessment of the forecast revenue outturn position for 2017/18 and the latest position on the achievement of the agreed Public Sector Reform savings for 2017/18 (£4.573m) (Section 3).
- 1.3 The report also outlines the current position regarding other key income streams for the Authority, namely Council Tax and Business Rates, as variations against expected receipts in these two areas will also affect the Council's financial position in future years (Sections 4 and 5).
- 1.4 An updated position with regard to the 2017/18 Capital Programme is also provided as at the end of November (Section 6).

2. Budget Plan 2017/18 – 2019/20

- 2.1 As stated the Council's three year budget package requires a further £64m of savings to be made in the period 2017/18 to 2019/20 in addition to that delivered in previous years. The Council has identified the Framework for Change programme as the delivery vehicle for the achievement of these savings, taking into account the Public Sector Reform programme, service budget options and the strategic investment and economic growth workstreams.
- 2.2 This programme of activity, the scale of the financial challenge facing the Council over the 3 years and the level of transformation required, (as set out in the Framework for Change) means that the Council will need to continually manage the risks presented from both a service delivery and financial sustainability point of view.
- 2.3 Members will recall that in the Medium Term Financial Plan update provided earlier in the financial year, it was assessed that there would be no change in central government policy in respect of local government funding. Following the Chancellor of the Exchequers recent budget this position has been confirmed and as a result the current assumptions remain within the 3 year financial plan with no long term sustainable funding solutions being offered by central government in relation to Adult Social Care and Children's Social Care in particular. As a result the Council remains in a very difficult financial position in both the short and medium term due to the severity of the funding reductions it faces.

3. Summary of Forecast Outturn Position as at the end of November 2017

- 3.1 The forecast outturn position as at the end of November shows a net overspend of £1.721m (0.85% of the Council's net budget). This forecast highlights a slight improvement of £0.069m to that reported as at the end of October. Should this

position continue to the financial year end, any deficit would require the utilisation of reserves.

- 3.2 At the end of November 2017, a forecast financial position on approved Public Sector Reform savings indicates that approximately £1.891m of 2017/18 savings are highlighted as “red” i.e. at risk of not being achieved in the year (a marginal improvement from £1.909m reported in October). Full details of the progress on all Public Sector Reform projects are provided at Appendix A.
- 3.3 Due to anticipated net underspends elsewhere within the budget a net deficit position for the year of £1.721m is currently forecast. This is shown in the table below:

	Budget	Forecast Outturn	Variance	Position previously reported
	£m	£m	£m	£m
<u>Services</u>				
Strategic Management	2.923	2.939	0.015	(0.051)
Strategic Support Unit	3.827	3.815	(0.012)	0.011
Adult Social Care	87.070	86.197	(0.873)	(0.816)
Children's Social Care	27.225	28.349	1.124	1.010
Communities	10.347	10.222	(0.124)	(0.116)
Corporate Resources	5.365	5.030	(0.335)	(0.294)
Health & Wellbeing	23.380	23.195	(0.185)	(0.076)
Inward Investment and Employment	2.643	2.768	0.125	0.114
Locality Services - Commissioned	18.336	17.898	(0.439)	(0.260)
Locality Services - Provision	9.640	10.674	1.035	0.820
Regeneration and Housing	4.532	4.363	(0.168)	(0.214)
Regulation and Compliance	3.655	3.229	(0.426)	(0.398)
Schools and Families	25.307	25.671	0.363	0.430
<u>Total Service Net Expenditure</u>	224.250	224.350	0.100	0.160
Public Sector Reform Savings not allocated to services	(1.831)	(0.230)	1.601	1.601
Reversal of Capital Charges	(13.376)	(13.376)	0.000	0.000
Council Wide Budgets	(2.483)	(2.463)	0.020	0.029
Levies	31.555	31.555	0.000	0.000
General Government Grants	(34.932)	(34.932)	0.000	0.000
<u>Total Net Expenditure</u>	203.183	204.904		

Agenda Item 12

Forecast Year-End Deficit			1.721	1.790

3.4 The key changes to the outturn position in the latest monitoring period are :-

- **Health and Wellbeing** – The forecast net surplus has increased by £0.109m. This is mainly due to a one off refund for NNDR for Crosby Lakeside following settlement, of a long standing case, with the Valuation Office. There is also an anticipated underspend on the smoking and sexual health service.
- **Children's Social Care** – The variation between October and November is largely down to an increase in high cost residential agency placements £0.160m. In addition, there are some small reductions to a back-pay calculation involving residential staff pay costs (£-0.030m); along with an increase in some staff vacancies (£-0.016m).
- **Locality Services Commissioned** – The increase in surplus this month of £0.178m is due to increased Transport & Highway Infrastructure (TH&I) income of £0.087m along with TH&I Supplies & Services savings of £0.034m and increased savings of £0.057m on Green Infrastructure Services. In addition to these savings there is an aim to achieve a further saving of £0.069m on Highway Maintenance and once this is more certain it will be included in the savings figures.
- **Locality Services Provision** – The increase in overspend of £0.215m is mainly due to a lower expectation of Cemeteries & Crematoria and Security Service income.

3.5 As stated previously, this report reflects the financial position for the Council eight months into the financial year and as such will be subject to change over the final four months. As has been reported the key risks facing the Council remain the demand led pressure in both Adult's and Children's Services and the potential impact of winter weather conditions.

3.6 Whilst the current forecast is an estimate at this stage and there are a number of key risks facing the council between now and the end of the year, it is noted that in previous years when adverse positions have been reported, work has been undertaken to bring the final position back to within budget. This will be particularly important in the current year to not only minimise any calls on central balances but also ensure that the Council starts the next financial year from a sustainable position.

3.7 Within the previous monitoring report, it was advised that a remedial action plan would be developed to support the current year's budget. To date approximately £1m has been identified that will support this position from a full review of all outturn forecasts, income sources and central budgets. Thus at this stage the net budget requires a further £0.7m to be identified based upon the current forecast. Work is continuing within SLB to identify this funding in addition to controlling where possible current expenditure and income. Progress on this work will continue throughout the financial year in order to minimise any deficit on the final budget position. In

addition work is ongoing to ensure that in accordance with the Councils MTFP and Framework for Change programme that a sustainable budget will be set for 2018/19 that takes account of these in year variations

4. Council Tax Income – Update

- 4.1 Council Tax income is shared between the billing authority (Sefton Council) and the two major precepting authorities (the Fire and Rescue Authority, and the Police and Crime Commissioner) pro-rata to their demand on the Collection Fund. The Council's Budget included a Council Tax Requirement of £118.748m for 2017/18.
- 4.2 The forecast outturn position for the Council at the end of November 2017 is a surplus of £0.662m, a change of £0.184m from the October position. This variation is primarily due to:-
- Gross Council Tax Charges in 2017/18 being higher than estimated at -£0.038m;
 - Council Tax Reduction Scheme discounts being lower than estimated at - £0.057m;
 - Exemptions and Discounts (including a forecasting adjustment) being higher than estimated at -£0.0.89m.
- 4.3 Due to Collection Fund regulations, the Council Tax surplus will not be transferred to the General Fund in 2017/18 but will be carried forward to be distributed in future years.

5. Business Rates Income – Update

- 5.1 Since 1 April 2013, the Council has retained a share of Business Rates income. The Council's share has increased from 49% in 2016/17 to 99% in 2017/18 as a result of its participation in the Liverpool City Region Business Rates 100% Retention Pilot Agreement. The Government's share of business rates has reduced from 50% in 2016/17 to 0% in 2017/18; however, they continue to be responsible for 50% of the deficit outstanding at the 31 March 2017. The Fire and Rescue Authority retain the other 1%.
- 5.2 The Council's Budget included retained Business Rates income of £62.955m for 2017/18. Business Rates are subject to appeals which can take many years to resolve. Settlement of appeals can have a significant impact on business rates income making it difficult to forecast accurately.
- 5.3 The forecast outturn position for the Council at the end of November 2017 is a deficit of £0.445m on Business Rates income which is a reduction of £0.120m from the October position. This is largely due to an increase in the gross charge on rateable properties.
- 5.4 Due to Collection Fund regulations, the Business Rates deficit will not be transferred to the General Fund in 2017/18 but will be carried forward to be recovered in future years.

Agenda Item 12

6. Capital Programme 2017/18

6.1 The approved capital budget for 2017/18 is £28.159m.

6.2 As at the end of November, expenditure of £9.109m (32.3%) has been incurred within the approved Capital Programme.

6.3 As part of the monthly review project managers are now stating that £23.770m will be spent by year end. This would result in an under spend on the year of £4.389m on the whole programme with an overall delivery rate of 84.4%. This is summarised below as follows:-

2017/18 Full Year Budget	Actual Expenditure as at November 2017	Forecast Actual Expenditure	Full Year Budget Variance
£m	£m	£m	£m
28.159	9.109	23.770	4.389

6.4 In order to achieve the revised forecast of £23.770m, expenditure of £14.661m will need to be incurred between now and the end of the year (within the last 4 months). Based on current expenditure levels, it is considered that this forecast is ambitious however historically a significant level of expenditure is incurred in the last 3 months of the year therefore careful monitoring will be required to support this over the next quarter.

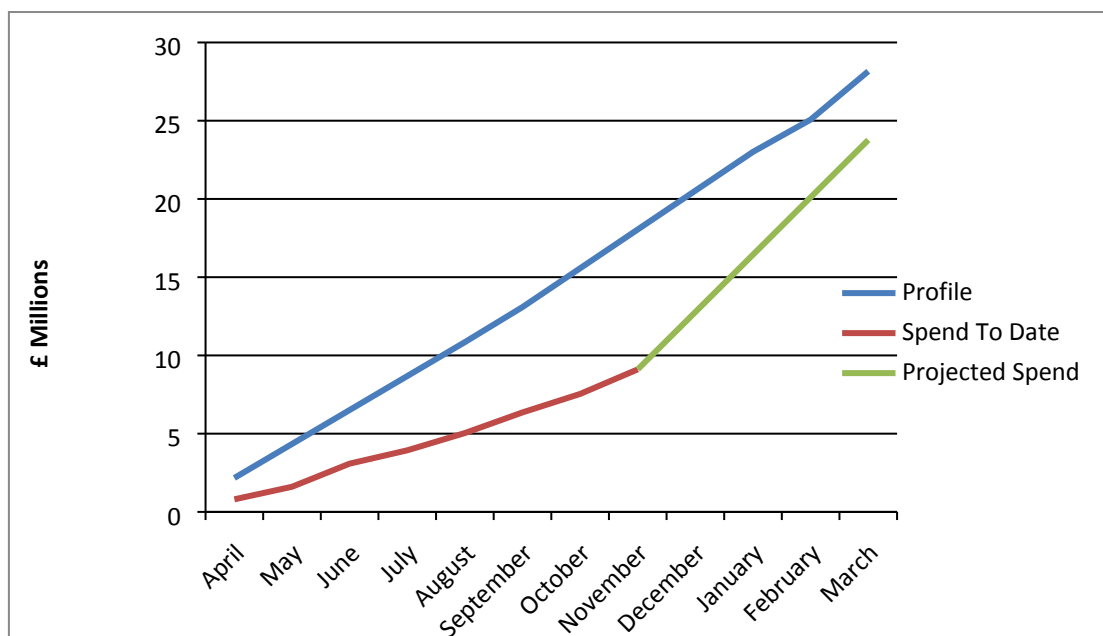
6.5 Key Variations on Overall Programme

It can be seen from the current forecast position that approximately £4.389m of expenditure will not be delivered in the current year. The key variations to this forecast are as follows:-

Scheme	Key Variation £'m	Explanation
Potential Overspends Identified (key items)		
M58 Junction 1 Improvements	-0.260	Scheme re phased with slight increase in expenditure in Year 1. No change in overall cost of the scheme.
Resources to be carried forward into next year (key items)		
Vehicle Replacement Programme	1.610	A request will be made to re phase this budget in order to meet actual vehicle replacement requirements.

Adult Social Care – Better Care Fund Allocation Balance	1.068	A request will be made to re-phase this budget that will be used for wider social care capital projects.
Flood Defence – CERMS 2016/21 Sefton	0.300	A request will be made to re phase this budget as the required surveys to support the project have been delayed due to difficulties in capturing the required information.
Crosby Lakeside – High Ropes	0.244	A request will be made to re-phase this budget as the scheme has been delayed pending heritage assessment and planning.
Adult Social Care IT Infrastructure	0.161	A request to re-phase this budget will be made due to delays in the scheme.
Crosby Library	0.345	Funding requested to be carried forward
Maghull Leisure Centre	0.181	This balance is held to fund additional car parking funded by prudential borrowing. A request will be made to re-phase this budget.
Total	3.909	

6.6 The graph below therefore shows the 2017/18 Capital Programme expenditure to date against the profiled budget.



6.7 A service by service breakdown of expenditure, forecast actual expenditure and full year budget variation as at November 2017 is shown in the following table:

Agenda Item 12

	Full Year Budget	Expenditure to Date	Expenditure to Date as a % of Budget	Forecast Actual Expenditure to Date	Full Year Budget Variation To Date
	£m	£m	%	£m	£m
Corporate Resources	0.498	0.096	19.3	0.414	0.084
Previous Year Schemes	0.498	0.096	19.3	0.414	0.084
Locality Services – Commissioned	8.309	2.919	35.1	8.155	0.154
<u>New Schemes 2017/18</u>					
STEP Schemes.	0.410	0.000	0.0	0.410	0.000
LTP – New Schemes	1.880	1.236	65.7	1.880	0.000
Previous Year Schemes	6.019	1.683	28.0	5.865	0.154
Locality Services – Provision	2.471	0.154	6.2	0.843	1.628
Previous Year Schemes	2.471	0.154	6.2	0.843	1.628
Regeneration and Housing	1.287	0.872	67.8	1.236	0.051
Previous Year Schemes	1.287	0.872	67.8	1.236	0.051
Regulation and Compliance	0.015	0.006	40.0	0.015	0.000
Previous Year Schemes	0.015	0.006	40.0	0.015	0.000
Health & Wellbeing	1.271	0.229	18.0	0.832	0.439
<u>New Schemes 2017/18</u>					
Renovation of Changing Facilities at Bootle and Dunes.	0.349	0.224	64.2	0.349	0.000
Netherton Activity Centre Fitness Suite Refurb	0.150	0.000	0.0	0.150	0.000
Previous Year Schemes	0.772	0.005	0.6	0.333	0.439
Adult Social Care	2.339	0.620	26.5	0.998	1.341
<u>New Schemes 2017/18</u>					
Integration of Health & Social Care IT Systems	0.040	0.000	0.0	0.000	0.040
Approved Better Care	1.418	0.000	0.0	0.350	1.068

Agenda Item 12

Funding					
Previous Year Schemes	0.881	0.620	70.4	0.648	0.233
Schools and Families	5.292	2.036	38.5	5.139	0.153
<u>New Schemes 2017/18</u>					
Great Crosby Primary Phase 3 increase half a form.	0.217	0.170	78.3	0.217	0.000
Linaker Primary Temp Class.	0.150	0.087	58.0	0.114	0.036
Linacre Primary Refurb Class.	0.170	0.107	62.9	0.170	0.000
Waterloo Primary Fire Alarm.	0.050	0.004	8.0	0.050	0.000
Previous Year Schemes	4.705	1.668	35.5	4.588	0.117
Communities	2.330	0.542	23.3	1.791	0.539
Previous Year Schemes	2.330	0.542	23.3	1.791	0.539
Inward Investment & Employment	1.947	0.439	22.5	1.947	0.000
<u>New Scheme 2017/18</u>					
Southport Pier Refurbishment	1.947	0.439	22.5	1.947	0.000
Total New Schemes 2017/18	6.781	2.267	33.4	5.637	1.144
Total Previous Year Schemes	18.978	5.646	29.8	15.733	3.245
Disabled Facilities Grant	2.400	1.196	49.8	2.400	0.000
Total Capital Programme	28.159	9.109	32.3	23.770	4.389

NB Previous Years Programme includes additional resources approved for previously approved schemes and associated approved resources that were phased over a number of years.

6.8 Financing of the 2017/18 Capital Programme

	Budget
	£m
Government Grants*	21.179
Borrowing	3.185
S106	1.884

Agenda Item 12

Contribution	1.885
Capital Receipt	0.026
TOTAL	28.159

*Includes capital receipts used to supplement government grants as detailed below.

Within the funding profile for schemes approved in 2016/17 it was assumed that £1.5m of capital receipts will be generated. As at the end of March 2017, £0.791m has been received leaving a balance due of £0.709m. As at the end of November 2017 £0.246m has been received leaving a balance required of £0.463m. It is anticipated that a further £0.472m of receipts will be received by 31 March 2018.

Analysis of 2017/18 Public Sector Reform Savings

APPENDIX A

	Project Phasing			Total Saving (£'m)	Saving Analysis 2017/2018		
	2017/18 £'m	2018/19 £'m	2019/20 £'m		Red £'m	Amber £'m	Green £'m
PSR1- Most Vulnerable							
Looked After Children Reform Programme	-	-	0.539	0.539	-	-	-
Acute wrap around services	0.275	0.275	-	0.550	-	0.024	0.299
	0.275	0.275	0.539	1.089	-	0.024	0.299
PSR2- Locality Teams and Personalisation							
Locality teams	1.000	8.000	-	9.000	0.389	-	0.611
Personalisation and asset based approach	0.300	1.000	1.700	3.000	-	-	0.300
	1.300	9.000	1.700	12.000	0.389	-	0.911
PSR4- SEND & Home to School Transport							
All age disability pathway	-	0.443	0.444	0.887	-	0.055	0.055
Home to School Transport	-	0.365	0.365	0.730	-	-	-
	-	0.808	0.809	1.617	-	0.055	0.055
PSR5- Education Excellence Everywhere							
Traded School Improvement Service	0.318	0.319	-	0.637	-	-	0.318
	0.318	0.319	-	0.637	-	-	0.318
PSR6- Commercialisation, Traded Services & Income							
Sefton Arc	0.021	0.356	0.419	0.796	-	0.021	-
Commercial Fleet Management	0.028	0.028	-	0.056	-	-	0.028
Crosby Lakeside Adventure Centre	0.064	-	0.122	0.186	0.064	-	-
Atkinson	0.074	0.270	0.070	0.414	-	-	0.074
Tourism	-	0.110	0.225	0.335	-	-	-
School Meals	0.100	0.200	-	0.300	-	-	0.100
Building Cleaning (alternative delivery model)	0.250	-	-	0.250	0.250	-	-
Building Control	0.183	0.183	-	-	-	-	0.183
	0.720	0.781	0.836	2.337	0.314	0.021	0.385
PSR7- Environment							
Integration of Land Asset Management Services	0.450	0.445	-	0.895	-	-	0.450
Car Parking	-	0.250	-	0.250	-	-	-
	0.450	0.695	-	1.145	-	-	0.450
PSR8- Assets & Property Maximisation							
Operational efficiency, Agile and lean, Re-designation, Uplift in yield, Facilities Management Services	0.503	1.538	1.259	3.300	0.503	-	-
	0.503	1.538	1.259	3.300	0.503	-	-
PSR9- ICT and Digital							
Council ICT	-	-	1.950	1.950	-	-	-
ICT staffing reductions	-	-	0.689	0.689	-	-	-
Transactional Services staff reductions	-	-	0.800	0.800	-	-	-
Customer Interface (includes One Front Door approach)	-	0.300	-	0.300	-	-	-
	-	0.300	3.439	3.739	-	-	-
PSR10- Commissioning and Shared Services							
Integration of resources	0.130	0.130	-	0.260	-	-	0.130
SMBC Contract Review	0.353	0.220	0.143	0.716	0.240	-	0.113
LCR Procurement	0.125	0.500	0.875	1.500	0.125	-	-
Shared Services	-	-	0.250	0.250	-	-	-
Contract Compliance Audit (potential for a mix of one off and re)	0.399	0.133	-	0.532	0.399	-	-
	1.007	0.983	1.268	3.258	0.764	-	0.243
Total PSR	4.573	14.699	9.850	29.122	1.891	0.021	2.661

Comments Relating to the 2017/2018 Financial Year
No saving due in 2017/18 Saving will be overachieved in 2017/18
£0.611m of the in year £1m target has been achieved. The remaining balance of £0.389m is at present showing as at risk due to further consultation that is required with regard to subsidy and staffing proposals in the Early Intervention and Prevention programme Saving will be achieved within the Adults & Social Care budget
A saving of £0.055m has been achieved in advance of 2018/19 No saving due in 2017/18
Savings in respect of £0.170m School Improvement, £0.070m Governor Services and £0.050m School Admissions are all on target to be delivered.
Sales target expected to be achieved by the end of the financial year. One off saving achieved from the procurement of Tachograph works and equipment. The permanent saving will need to be rephased into financial year 2018/19 and may be positively influenced by increased take-up of Tachograph calibration. Project on hold pending development of the Crosby Coastal Park Plan and Supplementary Planning Document and subsequent consultation. On target. Saving identified through staff vacancies. No saving target in 2017/18, business plan to achieve targeted savings in 2018/19 and 2019/20 is being developed. On target. Increase in price will achieve saving alongside increasing sales. Targeted saving in 2017/18 unachievable due to the time needed to implement reduction in posts and for pay protection period. Specific service budgets will need to be reduced to realise the overall saving. Confidence of achieving the saving is high however it is difficult to track as this is demand lead. It is expected that by the end of Q3 the service area will know exactly what will be achieved this year (+/-). A new levy to be introduced in Q4 should encourage developers to have planning applications agreed before then in order to reduce their costs.
£0.450m of savings is identified. There is a potential for an overachievement of savings which will be reported within Services as part of the budget monitoring process. No saving due in 2017/18
This saving will need to be rephased into 2018/19 and 2019/20.
No saving due in 2017/18 No saving due in 2017/18 No saving due in 2017/18 No saving due in 2017/18
There is a delay in the implementation of these savings due to the time required to identify staff in scope and develop and consult on a new structure. The 2017/18 saving has been met through staff vacancies. Saving achieved on the reprocurement of the printing contract £0.100m, along with a dividend payment from YPO. Remaining savings will be harvested when contracts have been renewed, but at the present time and until tendered, it is unknown which contracts will generate the required saving. This saving has been rephased into 2019/20 due to delays in progress being made across the city region. No saving due in 2017/18 An LGA bid submitted to support delivery of this workstream, which has recently been approved. Saving unlikely to be achieved in 2017/18 and has been rephased into 2019/20.

Project deliverables will not meet agreed outcomes	Red
Project deliverables are not currently at the required standard but plans are in place to improve	Amber
Project deliverables will meet agreed outcomes	Green

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