



**To: Members of the Cabinet**

## ***Notice of a Meeting of the Cabinet***

**Tuesday, 26 May 2015 at 2.00 pm**

**Rooms 1&2 - County Hall, New Road, Oxford OX1 1ND**

*Joanna Simons*

Joanna Simons  
Chief Executive

May 2015

**Contact Officer: Sue Whitehead**  
**Tel: (01865) 810262; E-Mail: [sue.whitehead@oxfordshire.gov.uk](mailto:sue.whitehead@oxfordshire.gov.uk)**

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### **Membership**

#### ***Councillors***

Ian Hudspeth	<i>Leader of the Council</i>
Rodney Rose	<i>Deputy Leader of the Council</i>
Mrs Judith Heathcoat	<i>Cabinet Member for Adult Social Care</i>
Nick Carter	<i>Cabinet Member for Business &amp; Customer Services</i>
Melinda Tilley	<i>Cabinet Member for Children, Education &amp; Families</i>
Lorraine Lindsay-Gale	<i>Cabinet Member for Cultural &amp; Community Services</i>
David Nimmo Smith	<i>Cabinet Member for Environment</i>
Lawrie Stratford	<i>Cabinet Member for Finance</i>
Hilary Hibbert-Biles	<i>Cabinet Member for Public Health &amp; the Voluntary Sector</i>

*The Agenda is attached. Decisions taken at the meeting  
will become effective at the end of the working day on  
unless called in by that date for review by the appropriate Scrutiny Committee.  
Copies of this Notice, Agenda and supporting papers are circulated  
to all Members of the County Council.*

*Date of next meeting: 23 June 2015*

## Declarations of Interest

### The duty to declare.....

Under the Localism Act 2011 it is a criminal offence to

- (a) fail to register a disclosable pecuniary interest within 28 days of election or co-option (or re-election or re-appointment), or
- (b) provide false or misleading information on registration, or
- (c) participate in discussion or voting in a meeting on a matter in which the member or co-opted member has a disclosable pecuniary interest.

### Whose Interests must be included?

The Act provides that the interests which must be notified are those of a member or co-opted member of the authority, **or**

- those of a spouse or civil partner of the member or co-opted member;
- those of a person with whom the member or co-opted member is living as husband/wife
- those of a person with whom the member or co-opted member is living as if they were civil partners.

(in each case where the member or co-opted member is aware that the other person has the interest).

### What if I remember that I have a Disclosable Pecuniary Interest during the Meeting?.

The Code requires that, at a meeting, where a member or co-opted member has a disclosable interest (of which they are aware) in any matter being considered, they disclose that interest to the meeting. The Council will continue to include an appropriate item on agendas for all meetings, to facilitate this.

Although not explicitly required by the legislation or by the code, it is recommended that in the interests of transparency and for the benefit of all in attendance at the meeting (including members of the public) the nature as well as the existence of the interest is disclosed.

A member or co-opted member who has disclosed a pecuniary interest at a meeting must not participate (or participate further) in any discussion of the matter; and must not participate in any vote or further vote taken; and must withdraw from the room.

Members are asked to continue to pay regard to the following provisions in the code that *"You must serve only the public interest and must never improperly confer an advantage or disadvantage on any person including yourself"* or *"You must not place yourself in situations where your honesty and integrity may be questioned....."*

Please seek advice from the Monitoring Officer prior to the meeting should you have any doubt about your approach.

### List of Disclosable Pecuniary Interests:

**Employment** (includes *"any employment, office, trade, profession or vocation carried on for profit or gain"*.), **Sponsorship, Contracts, Land, Licences, Corporate Tenancies, Securities.**

For a full list of Disclosable Pecuniary Interests and further Guidance on this matter please see the Guide to the New Code of Conduct and Register of Interests at Members' conduct guidelines. <http://intranet.oxfordshire.gov.uk/wps/wcm/connect/occ/Insite/Elected+members/> or contact Glenn Watson on (01865) 815270 or [glenn.watson@oxfordshire.gov.uk](mailto:glenn.watson@oxfordshire.gov.uk) for a hard copy of the document.

**If you have any special requirements (such as a large print version of these papers or special access facilities) please contact the officer named on the front page, but please give as much notice as possible before the meeting.**

# AGENDA

## 1. **Declarations of Interest**

- guidance note opposite

## 2. **Apologies for Absence**

## 3. **Minutes (Pages 1 - 8)**

To approve the minutes of the meeting held on 21 April 2015 (**CA3**) and to receive information arising from them.

## 4. **Questions from County Councillors**

Any county councillor may, by giving notice to the Proper Officer by 9 am two working days before the meeting, ask a question on any matter in respect of the Cabinet's delegated powers.

The number of questions which may be asked by any councillor at any one meeting is limited to two (or one question with notice and a supplementary question at the meeting) and the time for questions will be limited to 30 minutes in total. As with questions at Council, any questions which remain unanswered at the end of this item will receive a written response.

Questions submitted prior to the agenda being despatched are shown below and will be the subject of a response from the appropriate Cabinet Member or such other councillor or officer as is determined by the Cabinet Member, and shall not be the subject of further debate at this meeting. Questions received after the despatch of the agenda, but before the deadline, will be shown on the Schedule of Addenda circulated at the meeting, together with any written response which is available at that time.

## 5. **Petitions and Public Address**

## 6. **Addressing the Council's Future Challenges (Pages 9 - 16)**

*Cabinet Member: Finance*

*Forward Plan Ref: 2015/032*

*Contact: Claire Phillips, Senior Policy & Performance Officer Tel: (01865) 323967*

Report by Chief Finance Officer and Head of Policy (**CA6**)

It is timely, following the General Election, to take stock of both the council's financial position and its policy priorities, reflecting both local drivers and what we now know of

the national context.

In particular it is clear that local government will face further reductions in funding over the course of this parliament to deliver the savings required by the UK government to reduce the deficit. At the same time we face rising demand for adult and children's social care, in part as a result of our growing population.

We need to consider what will be required for the council to respond to these challenges, building on the approach that has been taken over the past five years.

Cabinet are asked to consider the issues set out in this paper and consider any changes to our financial and corporate strategy that are required at this time.

***The Cabinet is RECOMMENDED to consider the issues set out in this paper and consider any changes to our financial and corporate strategy that are required at this time.***

## **7. The Council's Response to the Findings of the Serious Case Review for Children A-F and Further Action Taken in Response to Child Sexual Exploitation in Oxfordshire (Pages 17 - 34)**

*Cabinet Member:* Children, Education & Families

*Forward Plan Ref:* 2015/017

*Contact:* Hannah Farncombe, Safeguarding Manager Tel: (01865) 815273

Report by Director for Children's Services (**CA7**)

The report, sets out the council's response to the findings in the serious case review, which have been accepted in full, and also provides a summary of the action that the council has taken since 2010 when Operation Bullfinch was launched.

***The Committee is RECOMMENDED to note the Council's response to the findings of the Serious Case Review into Children A-F, published in March 2015; and the further actions in progress.***

## **8. Support for Children Looked After and Leaving Care into Employment, Education & Training (Pages 35 - 50)**

*Cabinet Member:* Children, Education & Families

*Forward Plan Ref:* 2015/012

*Contact:* Tan Lea, Early Intervention Manager (Central) Tel: (01865) 815902

Report by Director for Children's Services (**CA8**)

The report draws Cabinet's attention to the Education, Training and Employment Strategy for children who are looked after and leaving care and seeks approval for it .

***The Cabinet is RECOMMENDED to approve the strategy***



## **9. Supported Transport Programme Public Consultation - Transport Hub & Subsidised Bus Services (Pages 51 - 58)**

*Cabinet Member:* Environment

*Forward Plan Ref:* 2014/161

*Contact:* Josephine Elliott, Programme Manager (Supported Transport) Tel: 07920 084242

Report by Director for Environment & Economy (**CA9**).

This report outlines proposals to deliver £6.25m of savings from the Council's supported transport services by 2017/18. It's estimated that £3.69m of this can be delivered through greater efficiency, brought about by the introduction of a new Transport Hub. We propose to deliver the remaining £2.56m by reducing subsidies to commercial bus operators, while prioritising services used by older people and people with disabilities. If Cabinet permission is granted, this proposal will be subject to a full 12-week public consultation beginning in mid-June, at which point a consultation document including further details will be released.

***The Cabinet is RECOMMENDED to:***

- (a) Note progress with making efficiencies through the introduction of the 'Transport Hub', and plans to make further such efficiencies; and***
- (b) Grant permission to consult on the proposals outlined in the paper.***

## **10. Provision of HR and Finance Services by Hampshire County Council (Pages 59 - 64)**

*Cabinet Member:* Deputy Leader

*Forward Plan Ref:* 2015/020

*Contact:* Graham Shaw, Deputy Director for Environment & Economy – Customer Services Tel: 07939 069084

Report by Chief Finance Officer and Chief Human Resources Officer (**CA10**).

In July 2014, Cabinet agreed to join the Hampshire partnership as an operational partner for the provision of back office support services through their Integrated Business Centre with an expected go-live date of 1 July 2015. The report updates Cabinet on the progress to date, confirms the services transferring and the savings that will be achieved both as a direct result of the partnership and those that are achieved as a consequence of the partnership.

***The Cabinet is RECOMMENDED to note the progress made in joining the Hampshire partnership as an operational partner for the provision of back office support services with a confirmed go-live date of 1 July 2015.***

## 11. **England's Economic Heartland - Tri-Counties Prospectus** (Pages 65 - 78)

*Cabinet Member:* Leader

*Forward Plan Ref:* 2015/031

*Contact:* Sue Scane, Director for Environment & Economy Tel: (01865) 816399

Report by Director for Environment & Economy (**CA11**)

In December 2014 the Leaders of the three County Councils set out their proposal for a Tri-County Strategic Alliance. With a population of 1.9m and an economy valued at £46.6bn the area of Oxfordshire, Buckinghamshire and Northamptonshire is an economic powerhouse that rivals any other outside of London. We are an area that is at the heart of science and technology innovation in the UK, one whose market focus is global. the commitment made by the three County Council leaders at Silverstone was in recognition of the fact that in order to continue to prosper there is a need for strategic leadership targeted at addressing barriers to economic growth.

The new Government's commitment to devolution provides the opportunity to seek a new Growth Deal through which we can implement a new delivery model: one that brings together a range of powers, responsibilities and resources in a way previously unseen.

The emerging framework for our proposition has the flexibility to be extended to adjoining areas where there is common cause. At the same time the framework explicitly recognises that whilst partners chose to work together on strategic issues, they retain their own identity and their roles and responsibilities in local issues. We have set out the framework for our proposition in a new brochure – which is being promoted as 'England's Economic Heartland'

The reports sets out engagement and work to date and seeks agreement to the next steps.

***The Cabinet is RECOMMENDED to:***

- (a) endorse the engagement and work that has taken place with Oxfordshire/Buckinghamshire/Northamptonshire County Councils and the Local Enterprise Partnerships;***
- (b) agree to the formation of a Strategic Leaders Board comprised of the three County Councils and three Local Enterprise Partnerships with the remit to:***
  - i) Take forward the engagement and work in order to develop specific proposals that address the barriers to economic growth***
  - ii) Enter into initial dialogue with the Government in respect of seeking devolution of powers, funding and accountability for functions that support economic growth; and***
- (c) agree that a further report be submitted to Cabinet and Local Enterprise***

***Partnership Boards once this further work has been undertaken.***

## **12. Help to Live at Home - Home Care Business Case (Pages 79 - 94)**

*Cabinet Member:* Adult Social Care

*Forward Plan Ref:* 2015/017

*Contact:* Shaun Bennett, Commercial Services/Market Development Manager Tel: 07917 211068

Report by Director of Adult Social Services (**CA12**)

The current model of home care in Oxfordshire will not be able to deliver the capacity and capability required to meet future needs, as providers do not have the security of future business to employ sufficient care staff.

The intention is to develop a new model of home care that will enable people to maximise their independence. The model will involve the following:

- Contracting with a smaller number of providers that supply the Council's commissioned services (i.e. in the region of 10 providers across the county, but no more than 15) so that the level of future business can be assured;
- Approving a small number of providers to work within each of the five geographical localities, which will mitigate the risk of any provider going into liquidation or being placed on safeguarding alert as we don't purchase from providers where they have been 'red' rated (i.e. up to 5 providers within each locality with some working across more than one locality);
- Use of sub-contracting, where appropriate, to ensure that the existing capacity within the home care market is effectively utilised and to encourage the participation of Small and Medium Sized Enterprises (SMEs);
- Adopting flexible cost and volume contracts which guarantee business based on actual delivery, with the option of increasing volume on the same terms;
- Developing outcomes based support plans to enable service users to acquire independent living skills to become more independent, where possible;
- Developing a simple incentivisation model (i.e rewarding providers for delivering outcomes which enable people to become more independent);
- Developing a long list of home care providers as part of the eMarket place, which can be used by those with a Direct Payment and self-funders and which will meet the expectations of the Care Act 2014 to facilitate and shape the wider care market.

***It is RECOMMENDED that Cabinet agrees the proposed Oxfordshire model for home care.***

### 13. Section 75 Agreement (Pages 95 - 132)

*Cabinet Member:* Adult Social Care

*Forward Plan Ref:* 2015/004

*Contact:* Benedict Leigh – Strategic Commissioner – Adults Tel: (01865) 323548

Report by Director of Adult Social Services (**CA13**).

The purpose of this report is to seek approval for variations to the legal agreement under Section 75 of the NHS Act 2006 that governs the existing formal joint working arrangements and pooled budgets between Oxfordshire Clinical Commissioning Group and Oxfordshire County Council from April 2015 onwards.

The report sets out

How the variations to the pooled budget agreement would better support the delivery of Health & Wellbeing Board targets, and support the joint response to national and local strategic challenges.

How the pooled budget agreement will monitor and assure the impact of the Better Care Fund and outcomes based contracting for mental health and older people and ensure compliance with the requirements of the Care Act 2014.

How the pooled budget agreement would support the development of effective integrated commissioning in Oxfordshire.

***The Cabinet is RECOMMENDED to***

- (a) ***approve the proposed changes to the pooled budget arrangements with Oxfordshire Clinical Commissioning Group, including changes to the Section 75 Agreement for All Client Groups (as set out in Annex 1) to reflect this, subject to the inclusion of any necessary changes in the text as agreed by the Director OF Adult Social Services after consultation with the Cabinet Member for Adult Social Care***
- (b) ***approve the permanent virement of £0.657m into the Physical Disability Pool in respect of physical disability client contribution budgets as discussed by the physical disability JMG***
- (c) ***RECOMMEND to County Council the permanent virement of £5.481m into the Learning Disability Pool in respect of learning disability client contribution budgets as discussed by the learning disability JMG; and***
- (d) ***Delegate authority to the Chief Finance Officers of Oxfordshire County Council and Oxfordshire Clinical Commissioning Group to agree and implement technical changes in the accounting treatment for the Better Care Fund.***
- (e) ***Cabinet is asked to approve a reduction in the contribution to the Older people's pool by £0.53m and a temporary virement of this amount to the Council's Strategic Measures budget.***

## 14. Equalities - Annual Update (Pages 133 - 156)

*Cabinet Member:* Deputy Leader

*Forward Plan Ref:* 2015/005

*Contact:* Alison Finnimore, Senior Policy Officer Tel: (01865) 815214

Report by Head of Policy (**CA15**)

Oxfordshire County Council is committed to making Oxfordshire a fair and equal place in which to live, work and visit. We want our services to effectively meet the needs of all local residents, including those in rural areas and areas of deprivation. We also aim to ensure that our staff are equipped with the knowledge and skills to meet the diverse needs of customers, that our services are accessible, and to encourage supportive and cohesive communities through our service delivery.

These goals are integral to the work of the council and are ones that we aim to meet regardless of the requirements presented in legislation. The obligations under the Equality Act 2010 present us with an opportunity to highlight examples of our on-going activity in relation to these goals and reinforce our commitment to them.

In 2012 we launched our Equality Policy setting out how we meet our obligations under the Equality Act 2010. In January 2013 and 2014 we published our annual updates on our progress. Both documents can be read here: <http://www.oxfordshire.gov.uk/cms/public-site/equality-and-cohesion>. A third annual update is included in this report in Annex 1.

We have also refreshed the actions against which we are measuring our progress, to ensure that we are reflecting the work of all our service areas and the priorities of the council, as set out in the latest Corporate Plan and directorate Business Strategies. These new actions are the focus of Annex 2.

The council is also required to show it has an adequate evidence base for its decision making. We hold extensive data sets about the Oxfordshire population, which are publically available, on Oxfordshire Insight: <http://insight.oxfordshire.gov.uk/cms/>

***The Cabinet is RECOMMENDED to agree to the new Equality Policy Actions for 2015/16 (Annex 2)***

## 15. Staffing Report - Quarter 4 - 2014 (Pages 157 - 162)

*Cabinet Member:* Deputy Leader

*Forward Plan Ref:* 2014/192

*Contact:* Sue Corrigan, County HR Manager Tel: (01865) 810280

Report by Chief Human Resources Officer (**CA16**)

This report provides an update on staffing numbers and related activity during the

period 1 January 2015 to 31 March 2015. Progress is also tracked on staffing numbers since 31 March 2014 as we continue to implement our Business Strategy.

***The Cabinet is RECOMMENDED to:***

- (a) note the report; and***
- (b) confirm that the Staffing Report meets the requirements in reporting and managing staffing numbers.***

## **16. Forward Plan and Future Business (Pages 163 - 164)**

*Cabinet Member: All*

*Contact Officer: Sue Whitehead, Committee Services Manager (01865 810262)*

The Cabinet Procedure Rules provide that the business of each meeting at the Cabinet is to include “updating of the Forward Plan and proposals for business to be conducted at the following meeting”. Items from the Forward Plan for the immediately forthcoming meetings of the Cabinet appear in the Schedule at **CA16**. This includes any updated information relating to the business for those meetings that has already been identified for inclusion in the next Forward Plan update.

The Schedule is for noting, but Cabinet Members may also wish to take this opportunity to identify any further changes they would wish to be incorporated in the next Forward Plan update.

***The Cabinet is RECOMMENDED to note the items currently identified for forthcoming meetings.***

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## CABINET

**MINUTES** of the meeting held on Tuesday, 21 April 2015 commencing at 2.00 pm and finishing at 2.35 pm

### Present:

**Voting Members:**

- Councillor Ian Hudspeth – in the Chair
- Councillor Rodney Rose
- Councillor Mrs Judith Heathcoat
- Councillor Nick Carter
- Councillor Melinda Tilley
- Councillor Lorraine Lindsay-Gale
- Councillor David Nimmo Smith
- Councillor Lawrie Stratford
- Councillor Hilary Hibbert-Biles

**Other Members in Attendance:**

- Councillor Liz Brighthouse (Agenda Item 7)
- Councillor Jean Fooks (Agenda Item 5)
- Councillor Nick Hards (Agenda Item 6)
- Councillor Phillips (Agenda Item 4)

### Officers:

Whole of meeting	Joanna Simons (Chief Executive); Sue Whitehead (Chief Executive's Office)
Part of meeting	
Item	Name
6	Kathy Wilcox, Corporate Finance
7	Claire Phillips, Chief Executive's Office

*The Committee considered the matters, reports and recommendations contained or referred to in the agenda for the meeting, together with a schedule of addenda tabled at the meeting, and decided as set out below. Except insofar as otherwise specified, the reasons for the decisions are contained in the agenda, reports and schedule, copies of which are attached to the signed Minutes.*

### 30/15 MINUTES

(Agenda Item. 3)

The Minutes of the meeting held on 17 March 2015 were approved and signed.

### 31/15 QUESTIONS FROM COUNTY COUNCILLORS

(Agenda Item. 4)

Councillor Phillips had given notice of the following question to Councillor Hibbert Biles:

'I am disappointed to note in the Business Management and Monitoring Report Q3 that all Public Health indicators are below target. How long is the Cabinet Member going to tolerate this situation and when can we expect targets to be met in the following areas ?

- % of Primary School children classed as obese in Year 6

- % of people offered a health check who have taken up the offer-

Number of people who have received a health check that were identified as high cardiovascular risk

- Support 3800 people to become "4 week quitters per annum

- Number of opiate users who left drug treatment successfully who do not represent for treatment again within 6 months as a percentage of the total number of non-opiate users in treatment-

Number of non-opiate users who left drug treatment successfully who do not represent again within 6 months as a percentage of the total number of non-opiate users in treatment'

Councillor Hibbert Biles replied:

"The Cabinet Member does not tolerate the situation, but has deliberately approved ambitious targets through the Health and Wellbeing Board to help the many organisations who are responsible to take a serious approach to Public Health issues and so keep an upward pressure on improvement.. The red targets should therefore be seen as the cabinet's fearless determination to tackle these problems head -on. The truth is that either Oxfordshire is already successful compared with elsewhere or is taking vigorous and successful action to improve the health of local people.

For example:

Childhood obesity: Oxfordshire already is well ahead of the national average and obesity is low (16.9% compared with 19.1%). Obesity is everyone's business and all individuals, families and organisations have a role to play. The target is deliberately ambitious to encourage partners such as schools and District councils to continue to play their part. We have worked closely with schools to make sure that a very high proportion of our children are weighed and measured each year, and we believe that this thoroughness makes Oxfordshire's figure slightly higher than in authorities where more children opt out of the test.

Health checks: we have the best performance on health checks in the Region and outstrip national performance (48.3% for Oxfordshire compared to 47.5% for Thames Valley and 46.4% for England). We pay general practices to carry out these checks and we keep the target ambitiously high to get the best performance from general practice and so give the people of Oxfordshire the best value for money. Oxfordshire has used an innovative approach to monitoring these contracts and is a leader on the national stage.

Smoking cessation: There has been a national trend which has shown a 20% fall in successful quitters across the board In 2014/15 and the numbers of smoking quitters in Oxfordshire followed this trend.. We were not complacent



about this however and so we have let a new ambitious contract from the 1st April 2015, and expect to see improvements from the new service provider who won the contract. In short, we saw a national problem which was reflected locally and have taken the proper action to improve matters.

Opiate and non-opiate abstinence. The Council inherited this service from the NHS when performance was very poor indeed. Since the service has been under Council management, it has been completely overhauled and as a result, performance is steadily improving. As part of this programme of improvement, we have just successfully concluded a major initiative to re-let the main contract for adult services and the new service started on the 1st April 2015. We have kept the target deliberately high as a statement of ambition and to show our commitment to service improvement.”

Supplementary: With regard to childhood obesity Councillor Phillips welcomed that a high proportion of our children are weighed and measured each year and asked having found out the position what happened next. Councillor Hibbert Biles replied that they continued to be weighed and measured.

### **32/15 PETITIONS AND PUBLIC ADDRESS**

(Agenda Item. 5)

The following petitions were submitted:

A petition from Mr Rob Whitty, resident of Wolvercote requesting a sound barrier is finally installed between Wolvercote and the A34.

A petition from Ms Harriet Milles, resident of Wolvercote & Councillor Jean Fooks requesting traffic calming in Wolvercote Green.

The following requests to speak had been agreed:

Item 6 - Councillor Nick Hards, Shadow Cabinet Member for Finance

Item 7 – Councillor Liz Brighouse, Chairman Performance Scrutiny Committee.

### **33/15 2014/15 FINANCIAL MONITORING & BUSINESS STRATEGY DELIVERY REPORT - FEBRUARY 2015**

(Agenda Item. 6)

Cabinet had before them a financial report on revenue and capital spending against budget allocations, including virements between budget heads.

Cabinet were advised of an amendment set out in the addenda of the introduction of the pre-application charging for highways advice set out in Part 4 and Annex 7b to 1 July 2015.

Councillor Nick Hards, Shadow Cabinet Member for Finance, welcomed the reduction in the overspend to £1.2m although noted that use of reserves was a one-off measure. He highlighted the measures taken to reduce the deficit and queried how this would impact on services such as Children's Centres and home to school transport. There would be an on-going issues with services that were not statutory and there would need to be meaningful discussions with the next government. Councillor Hards highlighted a number of individual matters referred to in the report including: the good news on the home support package set out in paragraph 26; the correct use of the parking reserve account; the sensible approach taken to monies received for specific purposes as set out in paragraph 77 and recognition of the one-off set up costs of the Hampshire Partnership.

Councillor Stratford, Cabinet Member for Finance responded to the comments made and recognised the challenge for services and in particular for Children, Education & Families. He had asked that the Council look at the impact of measures taken on the front line services.

Councillor Stratford introduced the contents of the report and advised that it was his expectation that there would be a further reduction in the overspend once the end of year figures were available.

Councillor Judith Heathcoat, Cabinet Member for Adult Social Care paid tribute to the hard work of staff in Social and Community Services.

Following a question from Councillor Carter, Cabinet Member for Business and Customer Services in relation to paragraph 79 on schools revenue balances, Cabinet was advised of the ongoing work looking at the baances held. It was noted that the position was very complex with reserves held for a number of reasons.

**RESOLVED:** to:

- (a) note the report and annexes;
- (b) approve the return of £0.640m Supplementary Estimate relating to the Severe Weather Recovery Grant as set out in paragraph 64;
- (c) approve the creation of the Government Initiatives Reserve and the contribution of £0.840m as set out in paragraph 77;
- (d) approve the write off part of the developer contribution as set out in paragraph 69;
- (e) approve the changes to fees and charges set out in Part 4 and Annex 7a and 7b, subject to the introduction of the pre-application charging for highways advice being amended to 1 July 2015;
- (f) approve the changes to the Capital Programme set out in Annex 8c;

- (g) approve the release of £3.9m to expand the Broadband programme and to contractually commit to the construction of the revised programme as set out in paragraph 97; and
- (h) Approve allocation of £2.450m Local Growth Fund capital funding as a contribution towards the construction of stages 1 and 2 of the Wantage Eastern Link Road by the developer of the Crab Hill development as set out in paragraphs 98 to 100.

### **34/15 CABINET BUSINESS MANAGEMENT & MONITORING REPORT FOR QUARTER 3**

(Agenda Item. 7)

Cabinet had before them a report that detailed performance for quarter three (2014-15) for the Cabinet to consider. The report is required so that the Cabinet can monitor the performance of the Council in key service areas and be assured that progress is being made to improve areas where performance is below the expected level.

Councillor Brighouse, Chairman of the Performance Scrutiny Committee reported on the discussions held at a meeting of the Performance Scrutiny Committee on 26 March, a note of which is attached as an annex to the minutes.

Councillor Rose introduced the contents of the report noting that the targets were stretching but that with regard to the fire and rescue service emergency response times (paragraph 21) their response to the recent fire at The Randolph Hotel in central Oxford had been exemplary.

Cabinet Members highlighted individual areas of performance within their areas of responsibility.

Following discussion of the performance reported in the dashboards it was:

**RESOLVED:** to note the performance reported in the dashboards.

### **35/15 DELEGATED POWERS OF THE CHIEF EXECUTIVE - APRIL 2015**

(Agenda Item. 8)

**RESOLVED:** to note the executive decision taken by the Chief Executive under the specific powers and functions delegated to her under the terms of Part 7.4 of the Council's Constitution– Paragraph 6.3(c)(i):

<i>Date</i>	<i>Subject</i>	<i>Decision</i>	<i>Reasons for Urgency</i>
11 March 2015	Request for Exemption from the Contract Procedure	Approve an exemption from tendering with the Council's Contract Procedure Rules in	To ensure continuity of service provision whilst options for future service delivery are considered..

	Rules – Request in relation to the provision for the extraction of data from GP Practice Medical Notes to manage activity data for public health services in GP primary care settings	respect of the continuation of the procurement data service from Central Southern Commissioning Support Unit for a period of 12 months from 1 April 2015 at a cost of £58,993.	
11 March 2015	Request for Exemption from the Contract Procedure Rules – Champion Recruitment	Approve an exemption from tendering with the Council's Contract Procedure Rules in respect of a 12 month interim contract with Champion Recruitment for the supply of temporary agency staff, with a value of c£5 million.	To ensure continued provision of the service and to provide the necessary time for the County Council to consider its future resourcing strategy and needs, and to put in place the appropriate procurement strategy.

### 36/15 FORWARD PLAN AND FUTURE BUSINESS

(Agenda Item. 9)

The Cabinet considered a list of items for the immediately forthcoming meetings of the Cabinet together with changes and additions set out in the schedule of addenda.

**RESOLVED:** to note the items currently identified for forthcoming meetings.

..... in the Chair

Date of signing ..... 2015

**ANNEX**

**Summary of Points Raised at Performance Scrutiny Committee -  
Business Management Monitoring Report for the Third Quarter 2014/15**

**Background**

The report was previously considered by Performance Scrutiny Committee on 26 March 2015.

**Focus of discussions at Performance Scrutiny**

- Session focused on E&E performance, with Sue Scane attending to answer committee questions. The main discussion was around the performance of Section 106 monies.
- Members were not assured that the directorate had sufficiently transparent and effective processes in place to monitor the collection and use of S106 monies.
- Their main concern being to ensure that OCC make best use of all S106 negotiations and then that all agreed money is both collected and spent appropriately.
- There was also brief discussion around the success of the Broadband project and around the number of apprenticeships that are being offered through OCC, Skanska and Carillion.

**Key Actions**

- Sue Scane agreed to consider a greater locality focus within the management of S106 and to look at the availability of information at a parish level.
- The Committee called for, and the directorate agreed to provide, a detailed S106 report to a future meeting (June). The paper will focus on providing an understanding of the central process, assurance that the process is effective and transparently reported, outlining the communication channels for members regarding S106.

**Additional Information**

- Members raised concerns about the performance around the timeliness of visits and reviews for looked after children and children on child protection plans. This will be looked at in more detail when CEF is the focus of the meeting. In the meantime the service is providing a briefing for committee members to outline the investigation, and the outcomes of those investigations, that take place when visits/reviews are late.
- There was also a brief discussion around educational attainment and the gap in attainment that opens significantly between KS2 and KS4. This has been referred to the Education Scrutiny Committee for further scrutiny.
- The final concern that members raised was around the increased waiting time for adult social care assessments and what happens to people waiting, in terms of intermediate care provision. The service is preparing a briefing note to committee members to answer this question.

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Division(s): NA
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## **CABINET – 26 MAY2015**

### **Addressing the Council's Future Challenges**

#### **Joint Report by the Head of Policy and the Chief Finance Officer**

#### **Introduction**

1. It is timely, following the General Election, to take stock of both the council's financial position and its policy priorities, reflecting both local drivers and what we now know of the national context.
2. In particular it is clear that local government will face further reductions in funding over the course of this parliament to deliver the savings required by the UK government to reduce the deficit. At the same time we face rising demand for adult and children's social care, in part as a result of our growing population.
3. We need to consider what will be required for the council to respond to these challenges, building on the approach that has been taken over the past five years.

#### **Background**

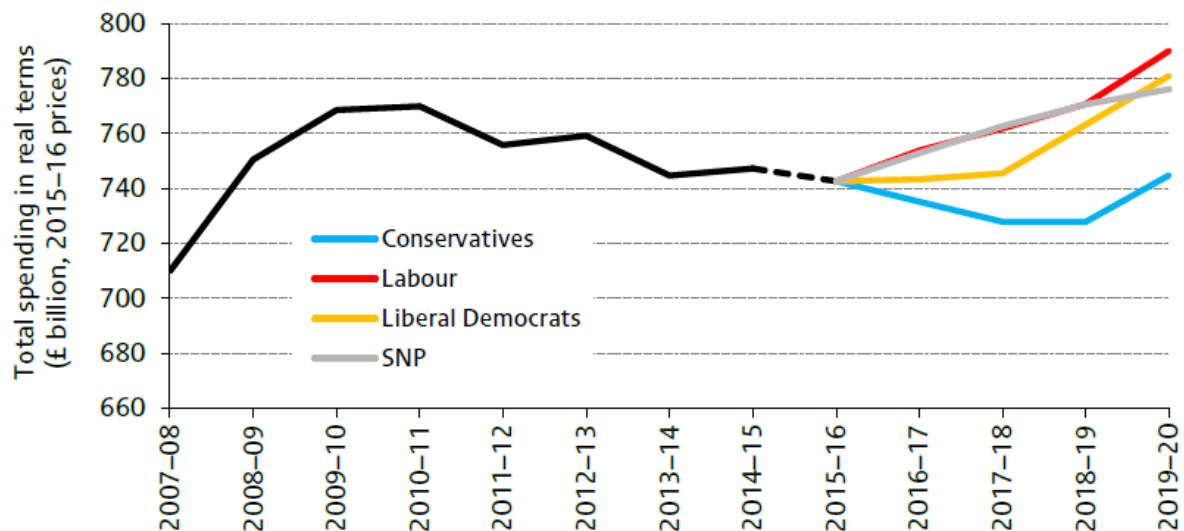
#### **The Council's Current Financial Position**

4. Since 2010 the Council has had to address large reductions in funding. This has stemmed from two main factors:
  - A 40% reduction in our main government grant (Revenue Support Grant) between 2010 and 2018.
  - Our ability to raise funding locally has been severely constrained by limitations in increasing council tax above 1.99% per year. This means that, factoring in inflation, we will receive less money from Council Tax in 2017 than we did in 2009.
5. These issues have been made more difficult because we are already one of the lowest funded local authorities: average government funding for county and unitary councils per head every year is £571 but in Oxfordshire it is only £286.
6. Since 2010 the council has changed significantly. We remain an organisation that seeks to be a 'leader of place', with big ambitions for our economy and shaping the Oxfordshire we want for our residents, whilst also delivering essential public services, particularly to the most vulnerable. Yet financial pressures have meant we have also had to take steps to withdraw from certain areas, and deliver services in different ways.

7. Since 2010/11 the council has made £204million of savings. These savings have been driven by directorate and corporate business strategies that were first launched in 2010 and articulated our approach, seeking to protect front line services as far as possible, and minimise disruption and loss of quality or customer satisfaction. Details of our approach in the period 2010-15 are set out in Annex 1.
8. Delivering savings of such magnitude has been a significant challenge, but the council's solid approach to financial management puts it in a relatively strong position going forward. We have been prudent in our approach to addressing pressures and despite concerns about overspending earlier in the year have ended the current financial year in a balanced position.
9. Despite the significant savings that have been achieved, the Council remains a substantial organisation, with a revenue budget in 2015/16 of £575m and capital programme in 2015/16 of £127m.

### Impact of the General Election

10. On the 7<sup>th</sup> May 2015, the Conservatives won a majority in the House of Commons, and although the majority is small this does mean that we should have a clear idea of the direction of travel over the next five years.
11. We know that the Conservatives' plans imply a reduction in borrowing over the next parliament of 5.2% of national income, which would result in a surplus of 0.2% of national income by 2018/19. As they have pledged not to increase taxes, this means substantial spending reductions.



*Profiles for total spending compared (real terms, 2015/16 prices) [taken from IFS Briefing Note BN170]*

12. We will not know the details of these savings until a potential emergency Budget, and/or the next spending review (which is expected in the autumn) ahead of the Local Government Settlement in December 2015. However, according to the Institute for Fiscal Studies, assuming that the Conservative



government finds the social security savings and revenues from tax avoidance that they have targeted, total departmental spending would need to be cut by 7.1% between 2014/15 and 2018/19. Departmental spending would fall to its lowest level in real terms since 2003/04.<sup>1</sup>

13. Significantly for local government, however, the NHS, foreign aid and schools budgets are to be protected (and in some cases, increased). The Institute for Fiscal Studies predict that 'other' departmental spending looks to be facing cuts of 17.9% between 2014/15 and 2018/19.<sup>2</sup>
14. We have already built significant grant reductions into the Medium Term Financial Plan aligned with the last spending review, and have assumed that Revenue Support grant will reduce to zero by 2022/23. However, there was a clear indication in the Chancellor's most recent Budget in March 2015 that the Revenue Support Grant will be reduced to zero sooner. The outcome of the election points to greater devolution of powers and responsibility, with far less money from central government to fund services.
15. We know that there will continue to be limitations on the ability to raise Council Tax beyond a particular level but we do not know at what rate. Assuming the referendum level remains at 2% (as it has been for the past few years), would introduce a further £6 million pressure into our Medium Term Financial Plan.
16. In 2018/19 Conservative plans are for total government spending to increase in line with inflation. From 2019/20, assuming a surplus has been achieved, spending will then grow in line with GDP.

### **Likely future financial context for Oxfordshire**

17. In an Oxfordshire context we know that we need to consider some significant financial challenges:
18. Firstly we have a further £88 million savings to deliver that are identified in the council's Medium Term Financial Plan from 2015/16 to 2017/18. We have already built significant grant reductions into the Medium Term Financial Plan aligned with the previous spending review, with revenue support grant reducing to zero by 2022/23.
19. Secondly, going into the 2016/17 planning round, we know therefore that there are a few financial issues we already need to address. Significantly these are:
  - Expected need to reduce the Council Tax increase from 3.0% to 2.0% (and possibly further reductions) for both 2016/17 and 2017/18, giving rise to a pressure of £2.9m in 2016/17 and a further £3.1m in 2017/18
  - Adding future years to the medium term plan. It is estimated that each year added to the plan gives rise to a pressure of approximately £9.5m

<sup>1</sup> Post-election Austerity: Parties' Plans Compared, IFS Briefing Note BN170

<sup>2</sup> Post-election Austerity: Parties' Plans Compared, IFS Briefing Note BN170  
<http://www.ifs.org.uk/uploads/publications/bns/BN170.pdf>

20. It is clear from the national approach laid out above that we are likely to face very significant further cuts, and it is quite likely that the scale of these will exceed what we have addressed to date.
21. Meanwhile we can take stock of some more general possibilities:
- Following the 2010 general election, an emergency budget was announced within a month which led to in year specific grant reductions of £11m across both revenue and capital as well as the termination of the Building Schools for the Future Programme. Clearly elements of our current capital programme could be similarly at risk this time.
  - Reviewing the specific grants expected for 2015/16, there is a potential for some general grant funding (business rates top up for example) that could be cut without any direct link to service delivery. A reduction in these could be in the range of £2m to £6m.
  - As set out in paragraph 13 above, there is a likelihood of a faster cut in Revenue Support Grant than seen over the last five years. It is estimated that a quicker reduction in grant could give rise to a pressure of £16 million over the period 2016/17 to 2020/21.
22. The total of these potential additional pressures on the revenue budget alone over the period 2016/17 to 2020/21 is in the order of £50m to £60m. When added to the savings in the existing Medium Term Financial Plan the savings required will be around £140m.

### **Managing the rising demand for services**

23. As well as tackling a tough financial climate we also need to be aware of and respond to the changing needs of our local population including significant increases in demand for many services, which will put further pressure on shrinking budgets. For example:
- Oxfordshire's total population is forecast to grow by 93,000 (14%) in the next 15 years, from 655,000 residents in 2011, to 748,000 in 2026 (based on pre-Strategic Housing Market Assessment figures). In particular we face increasing costs from the growing number of older people - the numbers of residents aged 85 or above is forecast to increase by 61% between 2011 and 2026;
  - We need to address the pressures resulting from a growing number of vulnerable children needing support from the state.

### **The Council's Ambitions**

24. For the past few years Oxfordshire County Council has had a clear ambition for a 'Thriving Oxfordshire'. This is where local residents and businesses in the county can flourish and means having:
- A Thriving Economy – with small businesses starting, existing small businesses growing, and large businesses choosing to locate here, creating good jobs for local people. A strong economy makes everything else possible.

- Thriving People and Communities – where residents are empowered to help themselves and can contribute to what happens locally, and where everyone can make informed decisions about their health and wellbeing.
  - A Safety Net – where we support and safeguard some of the county's most vulnerable residents, focusing on those we have a duty to consider, such as older people, disabled adults, and children. We must ensure these residents are aware of, and are easily able to access, the services and care to which they are entitled.
25. The council has already articulated in the Corporate Plan the need to make the transition to being an organisation that:
- Prioritises work we are required to do by legislation, regulation or government policy
  - Has a concentrated focus on prevention and early intervention
  - Ultimately provides a vital safety net for the most vulnerable people in our communities who we have a duty to support.
26. Whilst much of the future is undoubtedly challenging there are clearly also opportunities, for example we are at a pivotal point in developing a new relationship between citizens and the state. We therefore have an opportunity to explore citizen's rights and responsibilities in the context of a smaller state, with the foundations of increased digital connectivity. We will continue to help people to help themselves, whether directly or with the support of others such as the voluntary and community sector.
27. The Cabinet is asked to consider whether they continue to support the council's current ambition and overarching strategic approach to achieve a Thriving Oxfordshire or whether a different approach is needed.

### **Key policy issues**

28. In terms of policy, the Conservative Manifesto outlined a number of commitments. On a national scale these include:
- Increasing NHS budgets by £8 billion
  - Delivering 30 hours a week free childcare
  - £6.9 billion on research infrastructure
  - Funding 3 million new apprenticeships
  - Extending 'right to buy' to housing associations
29. The Queen's Speech, which is expected on 27th May, is likely to make the direction of travel clearer in terms of the government's short term legislative programme, and the council will need to carefully consider the content when it becomes available.
30. At the county council level, relevant policies that may have an impact in Oxfordshire could include:
- Continued 'deal-based' devolution Full implementation of the Care Act reforms

- More house-building and potentially more local control over planning and green belt protection.
- Continued growth in free schools and academies
- Ensuring “a good primary place” for every child
- The creation of regional adoption agencies
- A continuation of the work to overhaul how police, social services and other agencies work together to protect vulnerable children.

### **How the county council plans to respond to the future challenges**

31. Oxfordshire County Council is determined to get onto the front foot in preparing for the significant challenges we will face over the next parliament, and has been working on this agenda for sometime. We are already redefining our role and, working with our partners and communities, we know that a further significant step change in how services are delivered will be essential if the council is to be relevant to residents and fit for purpose in 2020.
32. It is important to state clearly that the county council must continue to meet its legal obligations, for example, in providing services for vulnerable people to meet their eligible care needs. However in the future it is likely that we may be unable to afford to maintain all of our current services, and there may be the need to reduce or stop some provision altogether, or deliver these in different ways.
33. We are committed to an ambitious growth agenda for the county, and know that Oxfordshire has a key role to play in helping drive the national recovery. Working with partners, this now has real momentum and we must maintain our prominent role in putting Oxfordshire on the map as a thriving and innovative place. In order to do this we must be a modern and efficient council, and build new partnerships such as the alliance with Buckinghamshire and Northamptonshire, called the Economic Heart of England.
34. Over the summer we will publish a new overarching Business Strategy which will articulate to our staff and to our residents the approach we plan to take. This will include a clear message that the organisation needs to be as flexible and adaptable as possible to respond to the demands put on us by national government, the changing needs of our communities and what this means in terms of our changing role.
35. The theme of adaptation will also be applied methodically and strategically to all decisions the council makes about the work we do. In particular we will focus on those areas that cut across all departments of the council and can drive the business to deliver change. Examples of the work under discussion include:
  - a. A move to a fully ‘going digital’ approach to how we do business

- b. Tackling demand management in a systematic way so that prevention and early intervention continue to reduce take up of more expensive intensive services
  - c. Close scrutiny and reassessment of how we commission services across the county, embedding commercial awareness into our practices, and fast-tracking market development in the county
  - d. An on-going review of the use of our assets, including our properties, to enable the council to fully move to an agile model of working
  - e. Prioritising those major projects where the greatest levels of savings are required and ensuring the resources are available to support their delivery
36. Over the summer we will meet with staff to discuss what this means for them, how they can support the council in achieving its refocused goals, and how they can be empowered to adapt and contribute to the changing shape of the council.
37. The county council delivers essential services to communities across the county and will continue to do so. By taking this proactive approach we can future-proof these services as far as possible and continue to work towards a Thriving Oxfordshire.

### **Financial and Staff Implications**

38. There are no direct implications identified as a result of this report, however, as the report makes clear in paragraph 17, we are likely to face very significant reduced budgets from central government and these will have implications for the Cabinet to consider going forward.

### **Equalities Implications**

39. There are no direct implications identified as a result of this report, however, any implications that result in the future will be fully considered as part of our duties under the Equalities Act 2010.

### **RECOMMENDATION**

40. **The Cabinet is RECOMMENDED to consider the issues set out in this paper and consider any changes to our financial and corporate strategy that are required at this time**

MAGGIE SCOTT  
Head of Policy

LORNA BAXTER  
Chief Finance Officer

Contact Officer: Maggie Scott, Head of Policy, 01865 816081  
May 2015

## **Annex 1 Approach to delivery of savings 2010-15**

1. Some examples of the changes that have occurred since 2010 include:
  - Streamlining services and processes across the board to make them as efficient as possible, for example creating a customer service centre, and more recently working in partnership with Hampshire county council on a new approach to delivery of back office HR and finance processes;
  - A 40% reduction in management posts and 25% reduction in overall staff numbers;
  - A new model for the library service, with over 20 libraries now run in partnership with local communities;
  - A new model of provision for home support services;
  - A reduction in the number of county councillors and associated support costs;
  - Reducing our role in direct provision of universal youth services, and through our Big Society fund, working with local communities to develop different locally owned approaches;
  - Re-let large contracts, with appropriate and innovative partnership style models, for large areas of our work, including Carillion for property services; Skanska for transport services and Viridor for waste services;
  - Supported schools in the transition to academy status, 25 out of 34 Oxfordshire secondary schools now have academy status, with a further four in the process of converting.
  - We have welcomed public health services return to local government, and these services are now being delivered through a new locally commissioned approach, delivering better value for money and better able to respond to local need.
  - Responded to a new policy approach to growth by focusing relentlessly, with partners, on driving the local economy as a key plank in the national recovery as well as being very much in the interests of local people. Through the Local Enterprise Partnership we have been successful in accessing significant resourcing to support infrastructure development despite the funding constraints that we have faced locally.
  - More broadly we have also re-scoped our relationships with key local partners including the local health services, local universities, Thames Valley Police, district councils, the voluntary sector and others, to ensure that we work together as effectively as possible to deliver for local residents.

Division(s): All
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## **CABINET – 26 MAY 2015**

### **The council's response to the findings of the Serious Case Review of Children A-F and further action taken in response to Child Sexual Exploitation in Oxfordshire**

#### **Report by Director for Children's Services**

#### **Introduction**

- 1 Child sexual exploitation is among the most serious and challenging issues that Oxfordshire County Council has faced. This report sets out the council's response to the recommendations in the serious case review, and also provides a summary of the action that the council has taken since 2011 when Operation Bullfinch was launched.
- 2 Bullfinch was a joint police and council operation, concluding in May 2013 when seven men were found guilty of a total of 59 counts including rape and facilitating child prostitution. They were sentenced to a total of 95 years in prison.
- 3 The Serious Case Review (SCR) of children A-F was commissioned by the Oxfordshire Safeguarding Children Board (OSCB) following the conclusion of the trial. The review was published on 3<sup>rd</sup> March 2015 and identifies that there was a systemic multi agency failure in the period before Operation Bullfinch.
- 4 The council accepts all recommendations from the review and takes full responsibility for its role in what went wrong.
- 5 The council has apologised to the victims and their families, and deeply regrets that the abuse was not stopped sooner.
- 6 The capability to tackle child sexual exploitation has been transformed in Oxfordshire since Operation Bullfinch. This has been made possible by a far greater understanding of this form of abuse, strong leadership and ensuring that resources have been made available to undertake the action that is required.
- 7 Action since 2011 is set out in detail in the report. in summary it includes:
  - Multi agency specialist team (Kingfisher) - social workers, police, health - low caseloads - preventing, protecting, disrupting, prosecuting. Active caseload of 70.
  - 10 trials leading to convictions
  - 60 disruption notices issued

- Multi Agency Safeguarding Hub - single front door for referrals to children's social care
- 7,500 front line multi-agency staff trained
- 18,000 children seen age-appropriate dramas in school since 2013 and further 12,000 planned for 2015
- Screening tool rolled out and in use by professionals - 300+ completed
- Investment - 80% real terms increase in investment in children's social care in past decade, council resourcing of Operation Bullfinch investigation cost £3m+
- Intensive approach to victim support
- Working closely with district councils, who have lead roles on licencing, housing, community safety, multi-agency patrols
- New approach to dealing with missing children
- New placement strategy - 4 new children's homes being built to keep most vulnerable children in county, ongoing recruitment of foster carers, multi-agency co-ordinated placement support tailored to CSE.

- 8 The council is not complacent. We know that there is still more to do and we will continue to develop our approach and learn as best practice is further developed. We are also keen to continue to share our experience and learning with other places, including those areas that do not think that they have a problem. Our experience has been that if you don't go looking for this abuse you will not find it.

## Scale and Context

- 9 Police and social workers have identified 373 Oxfordshire children who have been, or are strongly suspected of being, victims of child sexual exploitation over a 15 year period (1999 to 2014). This is not an estimated number. It relates to known children who have been interviewed as part of Operation Bullfinch, or the specialist Kingfisher team has worked with - or in some cases both.
- 10 The total number of children who have been worked with by Kingfisher since its start in November 2012 to December 2014 is 255. The majority are girls but increasingly more boys are being identified as victims of CSE. The total number of boys who have been worked with by the team is 43 (17%).
- 11 Kingfisher, our multi-agency specialist child sexual exploitation team is working with approximately 70 children at any one point. We are working with the police to tackle historic cases.
- 12 Since April 2013 closer partnership working has led to ten trials for child sexual exploitation in Oxfordshire, with 15 men being convicted of related crimes and sentenced to over 45 years in prison and more sentences pending:

3 victim witnesses,	1 defendant	found guilty and awaiting sentence
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6 victim witnesses	1 defendant,	pleaded guilty and sentenced to 10 years in prison
1 male victim witness	1 defendant	sentenced to 32 month in prison
2 victim witnesses	1 defendant,	sentenced to 8 years in prison
1 victim witness	2 defendants	each sentenced to 27 month in prison
1 victim witness,	1 defendant,	sentenced to 3 years in prison
1 victim witness	1 defendant	sentenced to 6 weeks in prison and financial compensation
1 victim witness	1 defendant (3 charged, 2 had charges withdrawn)	sentenced to 14 years in prison
1 victim witness	1 defendant	2 convictions, sentenced to 20 months in prison for each conviction
8 victim witnesses	7 defendants of whom 5 were convicted	16 convictions, awaiting sentence

- 13 A number of significant further investigations are also well underway that are expected to result in further arrests and charges shortly. Our work to date has involved victims from all geographic areas of the county; it is not limited to any one particular area.

### **Learning and Recommendations from the Serious Case Review**

- 14 The Council accepts all learning and recommendations from the review and takes full responsibility for its role in what went wrong. The council has apologised to the victims and their families, and deeply regrets that the abuse was not stopped sooner.
- 15 In 2014 the SCR panel members who were senior representatives from the agencies worked together for 3 days to glean the learning from the detailed analysis of each of the six girls (A-F) and their histories. This event exposed the underlying vulnerabilities of children to exploitation and the complexity of their needs in the looked after system. The learning has fed into a pilot programme to improve work with neglected children, the development of the Multi-Agency Safeguarding Hub (MASH) and the Placement Strategy.
- 16 At the beginning of January 2015, Children's Social Care staff and managers who had had historical involvement with the children at the centre of the SCR attended six workshops to review and learn from an independent appraisal of the practice in each case. These were attended by 60 people. These were challenging and reflective sessions which enabled staff to review the cultural

attitudes of the pre-Bullfinch period, their own practice and the systemic issues within the directorate at the time.

- 17 These were followed by 14 learning events in January and February for 400 staff and managers in Children's Social Care and Early Intervention covering the learning for children's services practitioners in the following core activities:
  - Assessment, Decision-Making & Planning
  - Child Protection & Safeguarding
  - Looked After Children
  - Missing Children
  - Working with Children & Young People
  - Working Together
  - Leadership & Management
- 18 The Education & Learning (E&L) Service has led regular briefings for Chairs of Governors and Head Teachers and two joint learning sessions for E&L managers and Head Teachers reviewing the SCR findings and learning for schools and education services. This has led to greater understanding of the risks associated with school absence linked to exclusions and poor attendance. The E&L Service continues to challenge schools on their safeguarding of vulnerable children, particularly in regard to their management of emotional and behavioural issues. The council has also developed and promoted a model policy for schools on the management and transfer of records.
- 19 The SCR sets out a series of 'learning points' for all professionals in all agencies. The OSCB is holding two multi-agency large-scale learning events in March and May 2015. These will cover the key themes of:
  - Missed opportunities
  - What was missing organisationally in Oxfordshire?
  - Knowledge
  - Escalation
  - Tolerance
  - Staff attitudes and rigour
  - Investigations
  - Going missing
  - Impact of ethnicity
- 20 The SCR makes a number of recommendations to the OSCB. These ask the OSCB to seek assurance from the agencies that they have implemented improvements and tested their impact. The OSCB has set timescales for the agencies to report their progress.
- 21 The recommendations are:  
The Board should (if it has not done so already):
  - i. Ask each member agency to review its escalation procedures, and provide assurance to the Board that they are understood and complied with

- ii. Review the interrelationships with other multi-agency partnerships, such as District Community Safety Partnerships and the County Safer Community Partnership, to ensure there is mutual clarity about each other's roles and appropriate cross-representation
- iii. Ask each agency to provide evidence of its supervision policies and how the agencies ensure they are effective
- iv. Be assured that the lessons from this Review and IMRs are embedded in OSCB and single agency training
- v. Ensure that the messages from victims and their families given to this review are embedded in training
- vi. Seek evidence that minutes of multi-agency meetings are clear about ownership, have consistent titles, and can be seen by their content and appearance to be of high value
- vii. Seek assurance from TVP about progress on recording crime relating to sexual offences
- viii. Seek assurance from OCC that there is appropriate access to the necessary range of LAC placements
- ix. Ensure that reports on missing children statistics for the Board are fully interrogated to identify any emerging patterns
- x. Seek assurance from Oxfordshire County Council that there are good arrangements for the transfer of information between schools about child vulnerability, and that decisions around exclusion from school and its management (risk assessments and plans) take into account that the behaviour is or may be related to exploitation
- xi. Seek assurance from NHS bodies, including general practice, that staff include the consideration that consent has been eroded through exploitation when assessing a child's ability to consent to treatment and that referrals to statutory agencies will be made appropriately
- xii. Seek assurance from all member agencies that staff are aware of the guidance around consent to sexual activity, and relationships
- xiii. Continue to undertake rigorous multi-agency case audits where CSE is suspected

22 The Council accepts the recommendations and will report to Performance Scrutiny and Cabinet on their implementation as well as reporting to OSCB. The relevant County Council services which are working on the recommendations are Children's Social Care, Early Intervention, Education and Learning, Youth Offending Service, Adult Social Care, Public Health.

23 The serious case review sets out three recommendations for national consideration:

- i. The DfE should review 'Working Together' 2013 to ensure it gives sufficient weight to investigation and disruption aspect of safeguarding children at risk from CSE
- ii. Relevant government departments should consider the impact of current guidance on consent to ensure what seems to be the ever-lower age at which a child can be deemed to consent (for example to

treatment) and attitudes to underage sex are not making it easier for perpetrators to succeed

- iii. With a significant proportion of those found guilty nationally of group CSE being from a Pakistani and/or Muslim heritage, relevant government departments should research why this is the case, in order to guide prevention strategies.

The council agrees with the review author that child sexual exploitation is a national issue and these are crucially important issues and would welcome a national response to these issues.

## **Government response to the Serious Case Review**

- 24 On 3<sup>rd</sup> March 2015, the Department for Education, the Home Office and the Department of Health sent a formal response to Maggie Blyth, the Independent Chair of OSCB.
- 25 The letter acknowledged the seriousness of the exploitation suffered by the children and their families and commended their bravery in contributing to the SCR.
- 26 The letter acknowledged the improvements made collectively and individually by the local authority, police and health services and the OSCB's role in co-ordinating.
- 27 The government has proposed that the OSCB leads a piece of work to assure the government and the public that the reforms to services are evidenced in good practice. This work will also be used to contribute to a centre of professional expertise on what works.
- 28 Sophie Humphreys has been appointed by the government to work alongside the OSCB to support this work.
- 29 The OSCB has worked with the County Council and Thames Valley Police to draw up the terms of reference and these were approved on 11<sup>th</sup> March 2015 at a meeting between Maggie Blyth and the Dept for Education.
- 30 This piece of work is called "*The Impact of Multi-Agency Work to Tackle CSE in Oxfordshire: the Oxfordshire Safeguarding Children Board Stocktake.*"

## **Summary of Actions and Impact**

- 31 Although it has taken two years for the SCR to be published, the County Council and our partners have not waited for the outcome of the review before implementing improvements to services. A summary of developments and the impact they are having is set out as follows:

*Children's Voices: their views of whether services have changed*

- 32 Some of the girls working with the Kingfisher team helped make a DVD which was shared in September 2014 at a major event hosted by the County Council. A selection of their views of the services are transcribed below:
- 33 **On proactivity and support:** *"Someone was involved with CSE and she mentioned my name to them. So Kingfisher came and found me, they came and spoke to me and asked me some questions about certain people."*
- 34 **On building trust to get special help, three views:** *"I started talking to my social worker more, started having 1-1 time with her and then I went on the Kingfisher team" ... "I got put in foster care and I quickly got close to my foster carer. Then I got closer to my social worker and I started telling her more on a 1-1 sort of thing" ... "I feel like they [Kingfisher] are my family and they like me for me. I just get on with everyone, it's a nice environment and everyone is nice and stuff."*
- 35 **On the skill needed to engage potential victims:** *"I got told it [the Kingfisher team] was for girls who were being exploited. I didn't think I was being exploited. I thought I was in trouble for things I hadn't done or anything and then the more they talked about things the more I realised I was in a wrong situation. The more they talked about it [exploitation] happening to other people the more I wanted to let them know that things were actually happening to me."*
- 36 **On advice for social workers:** *"Just wait. Different people trust people quickly and others take long to trust people. Just wait until they get used to you. You shouldn't just assume stuff."*
- 37 And from another girl: *"This woman [a social worker] came to my house and talked to me for about ten minutes and asked lots of questions, then they talked to my parents a lot. The social worker came to see me at school. She kept asking me questions and trying to talk to me but at first I didn't talk back. It was like she was talking to a brick wall at first. It was very hard because I wouldn't give out any information about my friends."* The girl went on to say, *"It was nice to have the company of the social worker, to have someone come and see me, to talk to me and be interested in what I was doing on a daily basis."*
- 38 **On the balance between caring and controlling:** *"I just felt she [the social worker] was really there for me, as if she was a friend. It was like having a mum, a mum who cared... but someone who would leave you alone at the same time, someone that wasn't in your face but was there."*

#### *Effective joint working:*

- 39 **Kingfisher Team** was established in 2012 as a co-located multi agency team focusing on child sexual exploitation. It consists of social workers, police, Oxford City Council, local health services and other specialist workers including drugs and alcohol teams, the voluntary sector (Barnardo's) and

others including those focusing on the BME community and working with parents. The team has worked with over 200 children and has an active caseload of around 70 at any one time, and prevents abuse through awareness raising and protecting children at risk, disruption and prosecution of perpetrators. Social workers have small caseloads enabling intensive and persistent work with children to build trusting relationships and support disclosure.

- 40 **The Multi Agency Safeguarding Hub** was launched in 2014. It provides a single front door from universal services and the public for all referrals to children's social care. Includes children's social care, Thames Valley Police, city and district council staff and health professionals, enables sharing of information and more effective action at the point of referral. The team will also start handling referrals to adult social care in 2015, enabling further integration and intelligence sharing across this boundary. Over the first four months of operation the Multi Agency Safeguarding Hub dealt with 4,592 enquiries of which 1,337 resulted in formal assessments.
- 41 **Work with Schools** has been intensive involving headteachers and chairs of governors, as well as children and teachers to help them understand this issue and what to do if they are worried. The Kingfisher team now leads monthly multi-agency discussions with schools and other agencies in their local areas to raise awareness and enable intelligence gathering on children of concern. We have recognised the risks that children face when they are not in school and have a new attendance and behaviour policy that strengthens our approach to children who are not attending school.
- 42 We have worked closely with **Oxford City Council and the other district councils in Oxfordshire**, including briefings for their members and management teams, and through regular meetings with their Chief Executives. These councils have a key role in alcohol licencing and taxi and private hire licencing, as well as being housing authorities and leading community safety activity at the local level.
- 43 We use **multi agency patrols** to identify people and premises of concern and disrupt activity creatively where child sexual exploitation evidence alone is not strong enough. For example we have used trading standards, health and safety and fire safety to close down premises (2 guesthouses and 1 pub), and undertaken raids for drugs and underage drinking. We also work with the police to use abduction notices and other tactics to disrupt activity. To date 60 abduction notices have been issued as part of disruption tactics.
- 44 We take a **strategically aligned approach** between the Oxfordshire Safeguarding Children Board, Health and Wellbeing Board and Oxfordshire Safer Communities Partnership, Police and Crime Commissioner, city and district councils and community safety partnerships and others.
- 45 We are strengthening arrangements between the Safeguarding Children Board and Community Safety Partnerships, with children's social care managers now members of the community safety partnerships in their

respective District Council areas. We are developing a protocol in place to ensure that the Oxfordshire Safer Communities Partnership works effectively alongside the Safeguarding Children Board and are using both boards to deal with key issues such as child sexual exploitation, female genital mutilation and the 'Prevent' agenda, therefore gaining multi-agency co-operation.

### *Leadership:*

- 46 Oxfordshire has firm and committed political and managerial leadership with absolute determination to tackle this issue head on. No excuses.
- 47 There has been a cross party approach by senior politicians, with no political football.
- 48 Councillors, led by the Lead member for Children's services, have played a critical role in shaping and challenging our approach. This has included two major reports to the County Council Cabinet, regular discussion by Political Group Leaders, and several briefings for county and city and district councillors. Our main performance committee has also been involved, receiving the chair of the safeguarding board's annual report and developing appropriate performance metrics to hold services to account.
- 49 A cross party member group was established in 2013 and has tightened members' roles in relation to safeguarding assurance processes.
- 50 Elected members sit on the Corporate Parenting Panel which receives an annual report on the safeguarding of looked after children, listens to the Children In Care Council and visits residential children's homes.
- 51 Political decision making has supported increasing resourcing to children's social care despite major budget pressures.
- 52 Action has been driven by the Chief Executive and Director of Children's services.
- 53 We have taken every opportunity to share our learning with others, raising national issues that need national solutions, sharing what we have found works with other professionals and learning from them.
- 54 The serious case review identifies concerns about escalation processes within the council. We have significantly strengthened requirements for escalation, with a new 'Need to Know' policy and training for senior managers. A monthly 'Need to Know' report is collated and reviewed by the Lead member, Chief Executive and Director of Children's Services.

### *Resourcing:*

- 55 Tackling child sexual exploitation is expensive. We have faced a significant financial burden but resourcing of child protection is regarded as non-negotiable, with strong commitment from politicians across all parties.

- 56 The budget for children's social care has increased by over £20m over the last ten years, an increase of 80% in real terms, despite huge cuts in other areas.
- 57 The county council spent in excess of £3m during Operation Bullfinch on social work and other support to the investigation.
- 58 In 2013/14 county councillors agreed an additional £1.4m to enable the recruitment of an additional 21 child protection social workers. The costs of the Kingfisher team are now in our base budget.
- 59 We also face significant increased demand for child protection services - in 2014 there was a 24% increase in referrals; and a 10% increase in numbers of children on child protection plans and coming into care. In part these increases were due to increased awareness of child sexual exploitation and the legacy of abuse and neglect in making children vulnerable to exploitation.

*Professional practice:*

- 60 Through our contribution to the Serious Case Review we have identified a huge amount of learning for our managers and practitioners. Four hundred and fifty staff have been involved in fourteen learning events working on difference practice themes.
- 61 7,500 multi-agency front line staff have been trained to understand the warning signs and use new screening tools to identify children at risk, working with the Kingfisher team where they have concerns. By December 2014 327 screening tools have been completed and presented to the Kingfisher team by a wide range of agencies, including schools.
- 62 We spend a lot of time listening to victims and their families and learning what works best to help prevent, protect and disrupt, ensuring that our practice reflects what they tell us.
- 63 Highly intensive and proactive approach to victim support – e.g. getting disclosures from children working with the Kingfisher team can take 12 months of intensive work, for the Bullfinch trial we provided 24 hour a day 7 days a week support from one social worker for four months while the trial was underway.
- 64 Work with parents now has a greater focus through training of staff and supervisors and the deployment of dedicated staff to work with parents in the Kingfisher team. Tight agreements are struck with all parents to ensure missing episodes of children who are of concern are immediately reported to the police.
- 65 We have a new approach (with the police) to missing children - led by a senior manager and a new Missing Persons Panel that meets monthly to review all children who have gone missing more than twice in a 90 day period, and take



strong action as required. Multi-agency performance reporting on missing episodes has been improved and is scrutinised quarterly by the Oxfordshire Safeguarding Children's Board. In addition we have very high expectations of school attendance and attainment, ensuring that social workers are immediately aware if a child fails to attend school, and that immediate action is taken.

- 66 Adults and children's services are working closely together at a strategic level, including establishing a joint team in the on-going Bullfinch investigation to support now adult victims. A joint business unit for the adults and children's safeguarding boards is being set-up with a single strategic safeguarding partnerships manager post that will oversee the work of both boards and ensure common agendas are identified and acted on.
- 67 We have applied learning from tackling child sexual exploitation to other areas of our work – e.g. new models for children on the edge of care, a new placement strategy, a new approach to neglect and adolescence
- 68 We seek to avoid out of county placements for our most vulnerable children; Four new children's homes are being built in Oxfordshire, including one to support vulnerable girls facing child sexual exploitation. We are also improving the packages of support that are available to support children to keep their placements. This involves more integrated work with mental health, schools and youth offending services.
- 69 We recognise that many young people facing child sexual exploitation are affected by substance misuse problems, we have therefore focused on new drug and alcohol services education programmes for children and re-commissioned integrated services for adults
- 70 We are working across organisational boundaries with city and district councils on housing, guest houses, licensed premises, taxis. Safeguarding training and licensing requirements have been introduced. The county's local authority designated officer works closely with the city and district councils to ensure all concerns and allegations about taxi drivers and licensees are thoroughly investigated and licences are permanently revoked where appropriate.
- 71 Oxfordshire has been selected as one of the national pilot areas for 'See Me Hear Me' by the Office of the Children's Commissioner. This is a comprehensive strategic and practice framework for child sexual exploitation that places the child's voice at the heart of the work.
- 72 Oxfordshire is also a national pilot area for the Home Office's trafficking programme which entails the use of advocates from Barnardo's to support and maintain contact with children who are known or suspected to have been victims of trafficking.
- 73 The school health nursing service has been re-commissioned by Public Health and nurses are now in post in every secondary school. Together with pastoral teams and primary adolescent mental health services they are strengthening

the direct provision to children with emotional, behavioural and sexual health needs in secondary schools.

- 74 Public Health have re-commissioned sexual health services and have been robust in their contract monitoring requirements in respect of the safeguarding screening of children presenting for contraception and genito-urinary treatment.

### *Culture, attitude, beliefs*

- 75 In the past children were wrongly treated as wayward teenagers – now we know that persistence and relationship-building is what makes the difference. A thorough understanding of the impact of grooming permeates our whole approach, and is particularly evident in the Kingfisher team who will work relentlessly over many months with girls and boys to gain their trust.
- 76 In the period before 2010 the pull of grooming and the power of the abusers was not recognised and understood. Girls were seen as sexually active with “boyfriends” when they should have been seen as children unable to consent. Practice has changed. Children are treated as children and social workers know they must build trusted relationships and keep children engaged however challenging their behaviour.
- 77 We have run a series of learning events for staff, including addressing use of language and its importance in direct work with children and in the way it is recorded.
- 78 We have updated our practice guidance on consent and this is made available to all agencies and schools, making clear that children cannot consent and that children over the age of 16 who are groomed are not consenting to being exploited. We supported the 2013/14 campaign led by Oxford City Council, challenging young people to be clear about consent and sexual boundaries.
- 79 We have also worked with local health providers providing training and guidance for staff about sexual activity for children under 18.
- 80 We are also focusing on perpetrators and the need for a robust approach to safeguarding their families and children.

### *Awareness raising*

- 81 We now have awareness raising activity underway on a huge scale, covering children, parents, schools, front line professionals, communities, hotels, taxi drivers, housing associations and others.
- 82 Since 2013, 18,000 children have seen age-appropriate drama workshops, to help them understand the risks and know what to do if they are worried about themselves or friends. This is ‘Chelsea’s Choice’, shown to years 8 and 9 (13-14yrs). The third year of ‘Chelsea’s Choice’ is in schools and hubs across March and April 2015, bringing the total up to 27,000. ‘Somebody’s Sister,

Somebody's Daughter' is being rolled out to children in years 10 and above (15+yrs), from summer 2015; and the 'Values versus Violence' programme has been piloted in Oxford City schools for primary school aged children as part of Personal, Social and Health Education (PSHE), and it will be extended across the county.

- 83 **'Everybody's business'** we know that professionals alone cannot stop child sexual exploitation. We need everyone to understand the signs of grooming and take action when they have concerns. We have worked with local councillors, the local media and other local stakeholders to roll out this message. In September 2014 we held an event with the police for 150 local community stakeholders including representatives from voluntary, community and faith groups and local councillors.

### *Community engagement*

- 84 Safeguarding guidance has been given to all parish, town, district and county councillors, encouraging them to be the 'eyes and ears' at a local level and know how to report concerns.
- 85 The serious case review makes clear that ethnicity was not a factor in the handling of children A-F, but we recognise that there are similarities with what appears to be a national pattern of street grooming cases disproportionately involving men of Pakistani heritage. We agree with the findings of the serious case review that urgent research is needed to understand why this is the case.
- 86 Whilst it is critically important that our work does not focus on only one community, we think that this pattern must be acknowledged and we are working with those affected communities to tackle this crime together. This is being done through on-going work with families, young people and faith groups, by ourselves, and through work led by the police and the voluntary sector. This is addressing issues that may contribute to involvement in criminal activity including sexual exploitation and other issues.
- 87 In October 2014 the county council and the police ran a Safeguarding Conference for the Oxford Pastors Forum which is the network for all the independent churches. This is predominantly Black Caribbean and African Churches. Muslim organisations were also invited and representatives attended. The conference focussed on trafficking and child sexual exploitation as well as other forms of abuse.
- 88 The Local Authority Designated Officer (LADO) has led work with the Oxfordshire Mosques and their linked Madrassas on safeguarding children and have worked to ensure safeguarding arrangements are in place including DBS checks, basic training and a safeguarding policy.

### *Independent accountability*

- 89 Ofsted inspection in 2014 rated the council's children's services as 'good' and referred to 'high quality' work by the Kingfisher Team on tackling child sexual

exploitation with consistently high use of the screening tool and 'excellent' awareness raising.

- 90 An independent child protection consultant produced a detailed and thorough Independent Management Report looking at all social care cases. Learning has been acted upon and this document has been made available to the Department for Education.
- 91 The handling of the Bullfinch cases by social workers have been reviewed for negligence or professional misconduct and independently reviewed by an employment barrister. A report on all practising social workers has been sent to the Health and Care Professional Council (HCPC) for verification.
- 92 The Kingfisher team were the 2014 winners of the outstanding achievements award for children's services by the Municipal Journal (MJ).

### *Sharing practice and supporting the development of national policy*

- 93 We have been on a steep learning curve, and have been keen to share our learning widely to help others tackle this issue effectively both nationally and at the local level.
- 94 In 2014 we held a learning event for 300 social workers and safeguarding practitioners from across the country and the police held a similar event for police and criminal justice professionals.

## **Broader Lessons and National Implications**

- 95 Key lessons that we have learnt are set out below. We are sharing these issues widely, attempting to help others tackle child sexual exploitation effectively.

### *Understanding the issue and having the right mindset*

- 96 Safeguarding is Everyone's Business - This means that keeping children safe is not just an issue for social workers and other front line workers but requires responsibility to be taken at a broader societal, managerial and political level. Public awareness, particularly about the signs of grooming, is critical and currently a gap. This mind set is also needed at the national level and across the country.
- 97 Understanding grooming - The abuse that was described in the Operation Bullfinch trial by the victims is known as 'street grooming'. This involves offenders deliberately targeting their young victims, often initially providing them with affection, alcohol, drugs and gifts before isolating them from existing friends and family networks and then subjecting them to extreme violence, sexual abuse and trafficking. Children often become 'trapped' by their abusers and can struggle to articulate what is happening to them.

- 98 Complexity – The nature of this type of grooming means that you can't 'just tackle it'. It takes immense time and skills to develop effective relationships with victims so that they are able to disclose what is happening and in addition these cases are often very complex, involving multiple victims and perpetrators in a tangled web that takes time to understand.
- 99 Child sexual exploitation is happening everywhere - If it isn't actively sought it will not be uncovered. This requires different skills – police officers to act more like social workers, social workers to act more like detectives. Local politicians and Police and Crime Commissioners to be questioning of children's services and police about missing children and ensuring that robust processes are in place locally.
- 100 Mainstream but get the balance right – Tackling child sexual exploitation is now a mainstream activity in Oxfordshire. The number of children subject to child protection plans has risen sharply in Oxfordshire, in keeping with a national trend. Neglect and emotional abuse are by far the biggest safeguarding issues for Oxfordshire's children. Getting the balance right in terms of resourcing and managerial attention is a challenge.

### *Multi agency working*

- 101 *Effective partnership working must become the norm* - In Oxfordshire we have established a Multi-Agency Safeguarding Hub and have a specialist child sexual exploitation team known as Kingfisher. Both are joint teams with the police and other partners, and enable effective sharing of intelligence and information to protect children.

### *Resourcing*

- 102 *Pressures* - Tackling child sexual exploitation at a time where year on year demand for children's and adults' services has increased by over 20% whilst public sector spending is being severely reduced is a very serious challenge. Since 2010 the council has lost over 40% of the funding we get from government, and there are significant constraints on our ability to raise additional income.
- 103 The county council alone has spent over £8m+ on CSE since the start of Operation Bullfinch. We are fortunate that councillors of all political persuasions have prioritised children's services over other more universal services, and as a consequence the council has doubled its spend on children's services over the past seven years. Despite this, demand continues to outstrip available resourcing and we are currently forecasting an overspend in children's services of £7m this financial year.
- 104 *Complexity* - The complexity and entrenched nature of child sexual exploitation can mean that to keep victims safe they are placed for periods of a few months in secure units. We have had 3 such cases at a cost of over £1m per year.

- 105 *Historic cases* - Historic cases - The potential scale of tackling historic cases ('cold cases') presents a challenge to resources in both children and adult services. There are imperatives to this work linked to the possibility of current risks presented by former alleged abusers and the legacy of harm for former victims.

### **Next steps**

- 106 The key priorities further to the SCR are:
- To implement the recommendations in all relevant Council services and demonstrate good impact on safeguarding within the timescales set by the OSCB
  - To make further reports to Performance Scrutiny and Cabinet, as appropriate, which demonstrate that the recommendations have been implemented to good effect
  - To work together with the Independent Chair of the OSCB and Sophie Humphreys to produce the 'Stocktake' Report by June 2015 to the satisfaction of the government.

### **RECOMMENDATION**

- 107 **The Committee is RECOMMENDED to note the Council's response to the findings of the Serious Case Review into Children A-F, published in March 2015; and the further actions in progress.**

JIM LEIVERS

Director for Children, Education and Families

Annex - At its meeting on 26 March 2015, the Performance Scrutiny Committee considered the report, and a note of their comments is attached

Contact Officer: Hannah Farncombe, Interim Head of Service, Safeguarding & YOS

March 2015

**CABINET – 26 MAY2015****The council's response to the findings of the Serious Case Review of Children A-F and further action taken in response to Child Sexual Exploitation in Oxfordshire****Statement to Cabinet from the Performance Scrutiny Committee**

At its meeting on 26 March 2015, the Performance Scrutiny Committee considered the report, before Cabinet on 26 May 2015, that outlines the council response to the serious case review.

The Committee considered the recommendations made by the serious case review and reviewed the actions taken by the council since 2010. They examined the sufficiency of those actions to meet the recommendations that have been laid out.

This statement is presented to Cabinet in order that they can take the opinion of the performance scrutiny committee into account when considering the Oxfordshire County Council response to the serious case review.

Overall the committee were satisfied that the response outlined appeared to be sufficient. However, there were several areas where the committee felt that more work would be required.

Firstly, that there is an urgent need to give further consideration to supporting the lead member more with their safeguarding responsibility. For example, referring to paragraph 54 of the report and the Need to Know report, concern was expressed that this was to be shared only with the Lead Member. It was suggested that this was a heavy burden for one councillor and it would be better for there to be some support from other councillors. The committee felt that it was crucial to improve resilience and accountability. In addition, the committee felt it was essential that members in a significant role, i.e. the lead member, receive appropriate training.

Members highlighted the importance of the Corporate Parenting Panel, whose role and visibility needed to be strengthened.

Lastly, the role of scrutiny was discussed. There is a need to further strengthen the role of scrutiny to enable them to provide robust assurance that the council's actions in relation to vulnerable children are sufficient, particularly in relation to the early identification of possible concerns. The committee undertook to take forward a plan around the information that should be regularly reported, enabling them to fulfil their responsibility.

The committee also identified issues that would need to be taken forward by other scrutiny committees. The Education Scrutiny Committee will include scrutiny of work around perpetrators. The Joint Health and Overview Scrutiny Committee will take up issues around sexual consent and health indices.

The committee would urge the Cabinet to ensure that further action is taken to address their concerns in these areas.

**Cllr Liz Brighthouse**  
**Performance Scrutiny Committee Chairman**

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Division(s): All
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## **CABINET - 26 MAY 2015**

### **Education, Training and Employment Strategy: Putting Looked After and those Leaving Care First**

**Report by Director of Children's Services**

#### **Introduction**

1. The strategy has been developed in response to what the national picture tells us about the life chances of looked after children and those leaving care; what the local data tell us in Oxfordshire; recommendations from the 2014 OFSTED inspection in Oxfordshire; internal reviews; learning from past practice; and most importantly young people in Oxfordshire have contributed their ideas and experiences.
2. The strategy, a copy of which is at Annex 1, outlines the key priorities for Oxfordshire to improve the life chances of these vulnerable groups and to ensure they access the highest quality education, training and employment opportunities. It also supports the council to meet its corporate parenting responsibilities.
3. At Annex 2 are examples of actions within the wider action plan that will underpin the strategy.

#### **Financial and Staffing Implications**

4. The resources to deliver the strategy are all within the existing budgets for Children, Education and Families and Environment and Economy and there are no additional staffing implications.

#### **Legal Implications**

5. There are no legal implications and the strategy assists the council to meet its statutory duties.

#### **Equality and Inclusion Implications**

6. The strategy is predicated on the importance of ensuring equality of access to education, training and employment for our most vulnerable children and young people in care and who are leaving care. The views of children and young people have helped to inform the development of this work. The report does not raise additional equality issues.

## **Communication and Partnership Working**

7. The successful delivery of the strategy requires a high level of commitment throughout the council and strong partnership across wider external partners.

## **RECOMMENDATION**

8. **The Cabinet is RECOMMENDED to approve the strategy**

JIM LEIVERS

Director for Children's Services

Background papers: None

Contact Officer: Tan Lea, Early Intervention Manager (01865 815902)

May 2015



# **Education, Employment and Training Strategy: Putting Looked After Children and those Leaving Care First**

**Children Education & Families  
Environment & Economy**

**Published: April 2015  
Review Date: April 2016**

## 1. Summary

Care Leavers in Oxfordshire report that Education, Employment and Training (EET) can give *“aspiration, a reason to ‘look up’ and motivation and provides meaningful engagement towards economic independence”*.

The strategy sets out the pathway for improving the EET participation and attainment of Looked After Children and Leaving Care (LAC/LC), enabling them to reach their full potential. The strategy and related action plan aim to make significant improvements and reach aspirational targets by 2017.

The strategy has been developed in response to what the national picture about the life chances of LAC/LC; what the local data tells us in Oxfordshire in comparison with their peers; recommendations from the OFSTED safeguarding inspection in Oxfordshire; internal reviews and learning from past practice. Most importantly, young people in Oxfordshire have contributed their ideas and experiences.

The successful delivery of this strategy requires a commitment throughout the council and strong partnership across wider external partners.

## 2. Vision

Our vision is that all young people over 16 who are looked after or care leavers will be engaged in Education, Employment or Training commensurate with their ability and aspirations, and be making significant progress towards recognised career ambitions.

In order to achieve this Vision, all professionals involved in supporting LAC/LC need to focus on the timely provision of appropriate services and pay special attention to the key transition points in a young person's journey.

## 3. Objectives

- By the age of 21, the achievement of LAC/LC is in line with the overall cohort (*Schools and Learning Service*).
- 100% of LAC/LC aged 16-18 years participate in learning and compliant with their Raising Participation Age duty (*Schools and Learning Service*).
- 85% of care leavers 18+ are in education, employment or learning (*Schools and Learning Service*).
- The destination of 100% of LAC/LC is known post 16 and these are tracked to 25<sup>th</sup> birthday (*Children's Social Care*).
- All LAC/LC 16 – 19 who are NEET receive regular support (every 30 days) to move into EET (*Schools and Learning Service*).

- All LAC/LC up to their 25<sup>th</sup> birthday who have been NEET 3 months or more receive targeted support to support their move to EET (*Schools and Learning Service*).
- All professionals working with care leavers are clear about the range of opportunities available to young people and know how to get the specialist knowledge needed to guide them (*Children's Social Care*).
- All LAC/LC receive high quality Careers Education Information Advice and Guidance in schools or college from school years 8 – 13 (*Schools and Colleges/Children's Social Care*).
- 22% of care leavers in year 14 move into higher education and sustain their courses in line with their peers (*Schools and Learning Service*).
- There is sufficient local provision for learning, training and employment and providers understand the general needs of LAC/LC and the specific needs of those young people with an Education, Health and Care plan (*Economy and Skills*).
- All care leavers are accommodated in housing suitable for their needs that provides a stable base from which they can access EET (*Children's Social Care*).

#### **4. Why We Must Take Strong Action**

##### **4.1 Local Oxfordshire drivers**

Closing the Gap - LAC/LC are less likely to obtain good GCSEs. For 2013 leavers passes at A\* - C for English and Maths for the overall cohort is 54.6% and for LAC/LC, 7.7%.

13% LAC eligible for 6 months for Pupil Premium obtained 5A\*-C GCSEs incl. English and Maths compared with 15% nationally only 6% eligible for 12 months for Pupil Premium obtained 5A\*-C GCSEs incl. English and Maths compared with 12% nationally.

LAC/LC are far more likely to be Not in Education, Employment or Training (NEET). In February 2015 3% of the 16 – 19 cohort were NEET compared with and 20.3% for LAC/LC.

LAC/LC are less likely to remain in learning. In February 2015, for the general cohort 82.2% of young people in school years 12- 14 were 'in learning' whilst for LAC/LC this was 68.8%.

LAC/LC are for less likely to be compliant with the Raising Participation Age (RPA) duty to participate in learning up to their 18<sup>th</sup> birthday. In February 2015, 91.6% of the overall age group were participating in learning whilst for LAC/LC this was 77.8%.

LAC/LC are more likely to have additional vulnerabilities. November 2014 data shows that 42.7% of LAC/LC, 16years - 25<sup>th</sup> birthday, have an SEN statement or Education, Health and Care plan and 3.1% are young parents.

At 10 January 2015 there were 373 care leavers in Oxfordshire aged 16 to 25, 71 of these are Unaccompanied Asylum Seeking Children (UASC).

In May 2014 Ofsted highlighted that the *"Proportion of care leavers who are not in education, employment or training (NEET) has increased and is significantly higher than the proportion for all young people in Oxfordshire"*.

## 4.2 National drivers

LAC/LC are four times more likely to have a mental health disorder (National Care Advisory Council).

LAC/LC are five times less likely to achieve five good GCSEs, eight times more likely to be excluded from school and less likely to go onto University (National Care Advisory Council).

One in five homeless young people are care leavers (DfE 2007).

Children who go missing and/or are in care are at a heightened risk of sexual exploitation (Child Exploitation and Online Protection Centre 2011).

Care Leavers are four times more likely to commit suicide in adulthood (ITV 2013).

A third of children, young people and adults who died in custody between January 2011 and December 2014 had been in care or living away from family ('Stolen Lives and Missed Opportunities' Inquest and Barrow Cadbury Trust Report March 2015).

Statutory duties (see appendix 1).

## 5. ***What Young People tell us...***

Young people recognise the importance of education and learning and it has been identified as a key priority by the Children in Care Council (CiCC):

*"Importance of EET as this is what gives aspiration, a reason to 'look up' and motivation".*

*"EET as important protective factor in future life, provides economic independence, meaningful engagement".*

Key issues identified by Looked After Children and those Leaving Care:

While at school

- Ensure young people know who to go to for support, including meeting the designated teacher for looked after children;
- Support young people to be active players in their education plan, including helping them choose their GCSE options and career path;
- Encourage young people to achieve their dreams and aspirations. Celebrate their achievements and give encouragement and support if they don't succeed.

While at college, work placements and apprenticeships

- Ensure young people know who is there to help and support them;
- Ensure staff are aware of confidentiality issues and respond sensitively to any issues;
- Provide learning mentors to support young people and who, with the consent of a young person, will speak to tutors/employers if someone needs help and support;
- Ensure young people have access to computers, if needed;
- Give good advice and help with budgeting, debts and life skills;
- Provide support if it all goes wrong and stay with the young person until they are more settled.

#### While at work

- Develop good practical opportunities for young people entering employment, such as apprenticeship, taster sessions, etc.;
- Ensure there is practical support and mentors when necessary
- Give good advice and help with budgeting, debts and life skills;
- Provide advice and support, or signpost, so young people can update their CV/Skills for employability;
- Never give up on a young person until they are settled and sorted.

### **6. Challenges**

Oxfordshire is home to internationally acclaimed establishments for academic and educational opportunities and is a vibrant area of growth and employment opportunity. This is not matched in the life opportunities and experience of many looked after children and those leaving care.

- Ensure the educational experience of LAC is aspirational including a positive and proactive multi-agency response from the very outset;
- Ensure children who may come into care later experience the same level of support;
- Increase the range of alternative educational provision to ensure that resources meet a range of need;
- Improve and enhance Careers Information Advice and Guidance and deliver this earlier;
- Provide a wider range of post 16 provision.

### **7. Opportunities**

- Oxfordshire's initiative to make it the most Foster Friendly County in the Country creates an opportunity to enhance the training and support of Foster Carers to ensure they are best placed to support the best outcomes for their children and young people.
- The re-commissioned Housing Pathway creates opportunities to ensure that housing provision better meets need, providing a solid base for effective learning.
- The investment in edge of care/homelessness interventions, therapeutic support and the new residential provision allows us to keep our most vulnerable closest and build local capacity to support with EET activities.
- The changed statutory duties for schools on Careers Information, Advice and Guidance (CEIAG) provide opportunities to ensure there is a strong foundation for EET support.

- The development of the Oxfordshire 100% Participation Strategy to drive forward improvements in overall numbers of young people in EET.

## **8. Strategic Priorities**

The following priorities have been identified to drive the strategy. These priorities are developed further in the action plan that accompanies this document.

### **Priority 1: Ownership and Commitment**

Aim: To ensure that all key managers, Elected Members and staff in Oxfordshire County Council understand their and others role and responsibilities and the responsibility of others for raising the aspirations and achievement of Looked After Children and those Leaving Care.

### **Priority 2: Enhancing Data consistency**

Aim: To ensure that data is accurate and consistent and that detailed analysis is used to inform actions relating to participation, progression and achievement.

### **Priority 3: Growing the market**

Aim: To ensure that there is a high quality and wide range of alternative education provision and post 16 opportunities for all vulnerable groups.

### **Priority 4: Preparation for the transition from school**

Aim: To ensure better support within schools for LAC during transitions at Key Stages 4 and 5, and at the end of Key Stage 5.

To enhance the Careers Education Information Advice and Guidance (CEIAG) framework and support schools in offering this at an earlier point.

### **Priority 5: Post-school support**

Aim: To ensure support is in place for care leavers once they have left school or college so they are able to take advantage of and sustain learning and employment opportunities.

### **Priority 6: Targeted Support for Vulnerable groups of LAC/LC**

Aim: To put in place targeted support for the most vulnerable groups including those with disabilities and those not participating in learning to ensure they are offered a suitable place in learning.

### **Priority 7: Sufficiency and accessibility of EET provision**



Aim: To develop relevant and appropriate provision that meets the needs of care leavers in the local labour market.  
To ensure training providers and employers understand the specific needs of care leavers and the local 'market' has sufficient openings for this group.

**Priority 8: Earlier identification of risk of NEET**

Aim: To ensure robust processes are in place to track all children looked after and young people leaving care so those at risk of NEET, or who are NEET, are identified at an early stage enabling targeted support to be put in place.

**Priority 9: Improve Communication**

Aim: To maintain strong links across all OCC services who have a responsibility for supporting LAC/LC to achieve in EET.

**9. Conclusion**

Our Looked After Children and Care Leavers all need aspiration, a reason to look up and motivation to achieve. Within Oxfordshire they must be able to access the highest quality education, training and employment opportunities. This goal can be achieved by addressing the nine priorities set out in the strategy. Elected Members are asked to endorse these priorities and support the partnership approach which will be required to achieve them.

## Appendix 1: Statutory Duties

Local authorities have many statutory responsibilities relating to the education and training of young people aged over 16, including the need to:

- Secure sufficient suitable education and training provision for all young people aged 16-18. (*Education Act 1996*)
- Make support available to young people that encourages and enables them to participate in education and training and make arrangements to identify young people who are not participating. (*Education and Skills Act 2008*)
- Schools to secure independent careers guidance for pupils in years 8-13. (*Education Act 2011*)
- Ensure 16-17 year olds receive an offer of a suitable place in post 16 education. (*Statutory Guidance 2012*)
- Must make arrangements to identify 16 and 17 year olds who are not participating in education or training, i.e. maintain a tracking system. Putting in place robust arrangements to identify young people who are not engaged in education or training or who have left provision enables local authorities to offer support as soon as possible. (*Education and Skills Act 2008*)
- Track the destinations of young people in Years 12 – 14 and up to 25 for young people with learning difficulties/disabilities using a Client Caseload Information System (CCIS). (*Education and Skills Act 2008*)
- Must promote the effective participation in education and training of 16 and 17 year olds in their area with a view to ensuring that those persons fulfil the duty to participate in education or training. (*Education and Skills Act 2008*)
- Identification, engagement and participation of young people with a Learning Disability Assessment. (*Statutory Guidance, March 2013*)

In addition to their EET responsibilities for all children aged over 16, a local authority has further responsibilities which relate specifically to care leavers. These are wide ranging and cover:

- the importance of using the Pathway Planning process to develop career aspirations and ambitions
- the need to work with partners to address the employment, education and training needs of care leavers in the area, including joint work with Integrated Youth Services/Connexions and Careers Advisers
- improving the employability of care leavers, by ensuring they get access to work experience, apprenticeship and other training and employment opportunities
- ensuring appropriate financial support is in place
- supporting placement stability and planning future accommodation needs

(*The Children Act 1989 guidance and regulations. Volume 3: planning transition to adulthood for care leavers. Revision date: January 2015*)

Around 70 per cent of children looked after and leaving care have some form of Special Educational Needs and Disability (SEND), and many of these will have an Education, Health and Care Plan (EHC). Therefore the *Special educational needs and disability code of practice: 0 to 25 years* (Department for Education, Department of Health, July 2014) has particular relevance to this group. The responsibilities set

out under this guidance are broad and cover local authorities, schools and post-16 institutions, including:

- schools to ensure the implications of the child being both looked after and having SEN are fully understood by the relevant school staff
- local authorities must promote the educational achievement of the children they look after, regardless of where they are placed
- post-16 institutions to admit a young person if the institution is named on an EHC plan
- use best endeavours to secure the special educational provision the young person needs, whether or not the students have EHC plans.

## Appendix 2: Definitions

All Appeal Rights Exhausted (ARE)	An Unaccompanied Asylum Seeking Child whose application, and appeal, for asylum has been refused. They have no legal right to remain in the UK, but as a looked after child or care leaver the local authority continues to have some responsibilities towards them until they return to their country of origin.
Care leaver	Overarching term for young people aged 16 and over, who have been in care for a qualifying period of time and who are either still in care, or have left care. The local authority has responsibility to care leavers until they are 25. Within legislation, the term care leaver is broken down into four different categories: <i>Eligible child</i> <i>Relevant child</i> <i>Former relevant child</i> <i>Qualifying child</i>
Careers Education, Information Advice and Guidance (CEIAG)	Services intended to assist people of any age and at any point throughout their lives to make educational, training and occupational choices to manage their careers. Career guidance helps people to reflect on their ambitions, interests, qualifications and abilities. It helps them to understand the labour market and education systems, and to relate this to what they know about themselves. Comprehensive career guidance tries to teach people to plan and make decisions about work and learning. Career guidance makes information about the labour market and about educational opportunities more accessible by organising it, systematising it and making it available when and where people need it.
Children in Care Council (CiCC)	Oxfordshire's Children in Care Council (CiCC) is a group of children and young people who are, or have been, in care. They help to make sure services are doing the best they can for all children and young people in care and care leavers
Designated Teacher	Each school must have a designated teacher for looked after children. Their role is to ensure that the needs of individual looked after children are met.
EET	Education, Employment or Training
Eligible child	Young person aged 16 or 17, who is still looked after, and meets the criteria for becoming a care leaver. The criteria are that <i>they were in care for a total of 13 weeks or more since they were 14, including some point when they were 16 or 17.</i>
Former relevant child	Young person aged 18-21 who was previously Eligible

	or Relevant, ie <i>they were in care for a total of 13 weeks or more since they were 14, including some point when they were 16 or 17.</i>
In care	See Looked after child.
Information, Advice and Guidance (IAG)	<b>Exploring ideas &amp; options about post 16 education, employment or training</b>
Looked after child (LAC)	A child aged under 18 who is in the care of local authority. The local authority has a 'Corporate Parenting' responsibility to ensure the wellbeing of the child.
NEET	Not in Education, Employment or Training. Is used to refer to a young person who is not involved in any of these activities.
Participating ( in learning)	A young person is considered to be participating if they remain in learning (in school, college, training or work with learning). Under the Raising Participation Age legislation all young people up to 18 years must be in learning
Qualifying child	A young person who was been looked after between the ages of 14 - 18, including some point when they were 16 and 17 years, but for less than 13 weeks. They are entitled to a limited service from the local authority.  Note - if the care period was less than 13 weeks and the child was under the age of 16, they are not qualifying children. Note - if an <i>eligible</i> or <i>relevant</i> child returns home successfully for 6 months, while under the age of 18 they become qualifying children.
Raising Participation Age (RPA)	The age to which all young people in England are required to continue in education or training has increased. The change was introduced in 2 stages: <ul style="list-style-type: none"> <li>• pupils who left year 11 in summer 2013 had to continue in education or training for at least another year until June 2014</li> <li>• pupils who left year 11 in summer 2014 or later have to continue until at least their 18th birthday</li> </ul> This does not mean young people must stay in school. They will be able to choose from: <ul style="list-style-type: none"> <li>• full-time education (e.g. at a school or college)</li> <li>• an apprenticeship or traineeship</li> <li>• part-time education or training combined with one of the following: <ul style="list-style-type: none"> <li>○ employment or self-employment for 20 hours or more a week</li> <li>○ volunteering for 20 hours or more a week</li> </ul> </li> </ul>
Relevant child	Young person aged 16 or 17 who is no longer looked after but meets the criteria for becoming a care leaver,

	<i>ie they were in care for a total of 13 weeks or more since they were 14, including some point when they were 16 or 17.</i>
Personal Advisor	The person from within Children's Social Care who is the lead worker for the care leaver. They have a responsibility to remain in contact with them, offer support, advice, and in some instance financial support, on all aspect of their lives.
Pathway Plan	These are the plans that are developed by the care leaver and their Personal Advisor which set out how the support needs of the care leaver will be met to prepare them for living independently.
Unaccompanied Asylum Seeking Child (UASC)	A child aged under 18 who is seeking asylum and arrived in the UK without their parents and other family members. These children become looked after by the local authority.
Virtual School	Under legislation each local authority must have a Virtual Head teacher for looked after children. They lead work within the Virtual School which aims to raise the achievements and aspirations of looked after children by working in partnership with schools.

**Annex 2****Examples of Actions within wider Action Plan**

The Education, Employment and Training strategy outlines the key priorities for Oxfordshire to improve the life chances of vulnerable children and to ensure they access the highest quality education, training and employment opportunities. It also supports the council to meet its corporate parenting responsibilities.

An action plan to accompany the strategy is currently being developed. Examples of actions within the action plan include:

**1. Ownership and Commitment**

- Ensure a strategic group from Children Social Care, Early Intervention, the Virtual School, Special Educational Needs and Disabilities and Schools and Learning meets quarterly to review progress and detail additional action.
- Work with the Children in Care Council to identify issues, consider progress and ensure dissemination to looked after children and those leaving care across the county.

**2. Ensuring Data consistency**

- Create accurate reports from Frameworki for care and pathway plans
- Ensure reports going internally and externally to the Department for Education are consistent across all data systems using Child Care Information Services (CCIS) as the key system for reporting.

**3. Growing the Market**

- Map the provision that fulfils the identified gaps for looked after children – identify any gaps or barriers to access.

**4. Preparation for transition from school**

- Ensure discussion with schools about implementation of this agenda in their institution and support them to develop a plan for implementing actions.
- Work with school Information Advice and Guidance (IAG) leads and Designated teachers to understand the need for excellent Careers Education, Information, Advice and Guidance (CEIAG) for looked after children and those leaving Care.

**5. Post School Support**

- Ensure looked after children and those leaving care are followed up after gaining an Education, Employment or Training (EET) placement and supported to sustain their participation.

**6. Targeted support for vulnerable groups of Looked After Children/ Leaving Care**

- Provide reporting to show additional vulnerabilities – Special Educational Needs and Disabilities, teenage parents, young carers, homeless etc.
- Ensure links are made with colleagues responsible for other areas of vulnerability – Youth Offending Service, Young Carers etc.

**7. Sufficiency and accessibility of Education, Employments or Training provision**

- Ensure training providers understand the different needs of looked after children and those leaving care and sufficient provision is in place.
- Work with schools to consider the appropriateness of their sixth form provision given delayed attainment.

**8. Earlier identification of risk of Not in Education, Employment or Training (NEET)**

- Ensure all looked after children and those leaving care who are Not in Education, Employment or Training are tracked every 30 days (once a month), and those who are in Education Employment or Training every two months to ensure timeliness of support

**9. Improve communication**

- Put in place communication links to lessen the potential for looked after children and those leaving care getting different messages from different professionals.

April 2015



Division(s):
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## **CABINET – 26 May 2015**

### **SUPPORTED TRANSPORT PUBLIC CONSULTATION**

#### **Report by Director for Environment & Economy**

#### **Introduction**

1. The Council's budget for Supported Transport for 2015/16 is just over £30m and will be spent on a range of 'supported transport' services including:
  - Home to school transport for children with special educational needs (SEN) and mainstream schooling
  - Subsidised bus services
  - Adult social care transport (older people, learning disabled, mental health)
  - Children's social care transport
  - Community transport support
  - Concessionary fares
  - Dial a ride
2. As part of the 2014/15 budget the Council agreed to save around £3.6m by reviewing all of the above transport services with a view to better integrating them.

Under new proposals put forward in the 2015/16 service and resource planning round it was agreed that an additional £2.65m of gross savings should now be targeted in supported transport – bringing the total savings required from these services to £6.25m by 2017/18. This paper sets out how we intend to realise these savings.

#### **savings through efficiency – the Transport Hub**

3. Following an extensive review of our current supported transport provision, we are now in the process of implementing a new Transport Hub; a 'single front door' for all supported transport services in Oxfordshire. The Hub will be a single team which deals with all requests for supported transport services in a coordinated and fair way. It will ensure people are allocated transport according to their needs; supporting those who are judged as capable to use existing public transport or a suitable voluntary sector provider, while protecting those who are not with specialist, bespoke services. Not only does this improve how we allocate our available resources, it also ensures that the whole process for accessing supported transport is now more simple and straightforward

4. Statutory services are services which the Council has a legal duty to provide to people who are entitled to them, according to legislation. Crucially, the creation of the Hub enables us to realise savings to our statutory services through greater efficiency, which makes up the majority of the £30m supported transport budget. This is because the Hub allows us to be smarter and more efficient in how we commission and allocate transport, providing economies of scale as well as a better overview of the Council's total supported transport network, so that we can continue to fulfil our legal obligations and meet people's needs but at lower cost to the tax payer.
5. Indeed the benefits of this new approach are already being realised. Throughout 2014/15 we've been running a 'Route Efficiency Programme'; an on-going process of route-by-route assessment of the home to school transport network, which applies the principles of the Hub in order to reduce expenditure while continuing to meet people's needs. This process has already delivered £630K of savings against our £6.25m target, and has enabled us to prove the validity of our assumptions, as well as refine our approach when making changes.
6. In total, we've estimated that implementing the Transport Hub will deliver savings of **£3.69m** (including the £630K already saved) through efficiency alone, drastically reducing the amount that needs to be withdrawn from non-statutory services.
7. In addition, the creation of the Transport Hub has also created opportunities to undertake initiatives which will underpin the delivery of these savings including:
  - a) **Supporting community transport:** the Council has always sought to proactively support voluntary sector transport in Oxfordshire. With the Hub now increasingly looking to the sector to provide more journeys for our lower need users, we will be protecting and enhancing our investment in community transport in order to ensure there's sufficient capacity to meet this additional demand. Indeed we've already improved our offer of support to the sector, and are currently in the process of allocating funds to schemes which will grow its capacity significantly.
  - b) **Wheels to work:** We're supporting the set up and delivery of a community sector 'Wheels-to-Work' pilot scheme, to provide young people with a means to travel independently to their employment, education or training. Initially the scheme will be run as a pilot in the Vale district in 2015/16, but if proven sustainable it could be extended to the rest of the County in the future.
  - c) **Independent travel training:** we've recruited travel trainers to support people to use less dependent forms of transport. These trainers will identify and work

with user groups who traditionally would have automatically been put on high-cost forms of transport (such as some children with SEND on taxis) but who with training could learn to use public transport or a voluntary provider. Not only does this help to reduce costs, it also provides people who may not otherwise have had the opportunity, the chance to gain the necessary skills and confidence to travel more independently as part of their day-to-day lives.

## **Proposals to deliver savings from non-statutory services**

8. Whilst we've estimated that the Transport Hub will deliver efficiency savings of **£3.69m**, there remains **£2.56m** which will need to be found through reductions to non-statutory services and these are:

- Subsidised bus services
- Dial a ride

### ***Subsidised Bus Services***

9. Currently there are over 100 subsidised bus services in Oxfordshire, which are used by 15% of bus passengers across the county. Subsidised bus services are publically subsidised bus services operated by private bus companies under contract, serving areas where private operators have chosen not to provide a service because it is not commercially viable for them to do so.

## **The Council's legal duty**

10. The Council's legal duty in relation to subsidised bus services is outlined in the Transport Act 1985, Section 63(1)(a), which explains that local transport authorities must:

*“secure the provision of such public passenger transport services as the council consider it appropriate to secure to meet any public transport requirements within the county which would not in their view be met apart from any action taken by them for that purpose.”*

11. In essence, this means that the Council must 1) identify public transport requirements which would not otherwise be met and then 2) once identified, secure what is appropriate. It does not mean that the Council is obliged to subsidise services.
12. However, under Section 63(8), the Council has a duty to have regard to the transport needs of members of the public who are elderly or disabled when exercising the s63(1) duty referred to above.

13. Under Section 88, in exercising/performing our functions with respect to securing provision of public passenger transport services the Council must cooperate with:
- (i) other authorities exercising/performing those functions;
  - (ii) other local authorities, in relation to expenditure on transport for the purposes of or in connection with the exercise/performance of their education and/or social care functions, so as to secure, in the interests of the ratepayers in our areas, best value for money from our expenditure, taken as a whole.
14. Under Section 92, in the exercise and performance of our functions in relation to agreements providing for service subsidies, the Council must have regard to the interests of the public and of persons providing public passenger transport services in our area.
15. As part of this process, Councils are entitled to take into account the funds that are available to them.

## **Our proposal**

16. Given that we are now in a position where we need to make savings of £2.56m from non-statutory supported transport services, it is appropriate that we revisit which subsidised bus services we should prioritise and why.
17. While all subsidised services are of value and significance to the communities they serve, we believe that it's the Council's first duty to protect our most vulnerable public transport users – in line with our overall corporate commitment to provide a 'safety net' of support and resources for our most vulnerable residents.
18. We therefore propose to consult on a proposal which prioritises the subsidised bus services traditionally used by the county's more vulnerable public transport users - older people and people with disabilities – who live in rural areas and who tend to journey at 'off peak' times (weekday 09:30-16:00) using their concessionary bus passes. This could be for medical appointments, shopping trips or social visits
19. The aim of the proposal is to continue to provide these individuals with a way to access services and maintain their independence during the day. Not least because social isolation is known to compound the difficulties and problems faced by older people and people with disabilities; but also because it is very unlikely that these services will ever be taken up on a purely commercial basis, given the relatively low number of passengers which travel on them.
20. In addition to this main proposal for prioritising subsidised bus services, we also propose to continue subsidising bus services which transport statutorily entitled

children to school, where it has been identified that it would be cheaper in total for the Council to do so than provide separate dedicated school transport.

21. Through negotiations with bus operators we would aim to get the best possible deal for Oxfordshire. In some instances this might mean reducing the frequency of services rather removing them altogether, in order to maintain coverage.

### **Alternative models**

22. In developing the proposal for consultation a number of alternative models were considered. These were prioritising 'services running at 'peak' hours during weekdays (06:30-09:30 in the morning, and 16:00-19:00 in the evening) and prioritising services which run in the evening and at the weekend, which are commonly used by people to access leisure activities.
23. In contrast to off peak services, peak hour services are usually far more expensive in terms of their total contract cost because their provision often requires purchase of additional vehicles by operators. In addition, peak hour services are more likely to become commercialised in the event that a subsidy is removed (although this is by no means guaranteed) because they run at times and along routes which are often extremely popular and well used by local residents.
24. Information on these alternative models and the rationale for why they were not selected will be set-out in the consultation.

### ***Dial a ride***

25. Dial a ride is the other non-statutory supported transport service the Council currently provides.
26. Currently 220 people across Oxfordshire use the dial a ride service. 198 of which are self -assessed as being able to walk, while the remaining 22 require a wheelchair. The majority of the journeys made using the service (roughly 60%) are for shopping trips, and the median average journey distance is 2 miles. Dial a ride cannot be used for getting to hospital appointments.
27. We also know that the majority of the services' users hold concessionary bus passes, and of those who are able to walk, just under 80% are within 400m walking distance of a bus stop. Evidence suggests that many of the people classed as 'walkers' would be able to travel using public transport if necessary, and historically Dial a Ride eligibility criteria haven't been applied/enforced.
28. Dial a ride users pay an annual subscription fee of £5. This contrasts with people going to Council day centres, who have to pay £5 per journey. In light of this inconsistency, as well as the fact that the service uses specialist transport

resources which arguably would be better allocated towards higher need SEN users travelling to school, we think a new approach is needed.

## **Our proposal**

29. Our proposal is to continue to work with community transport groups across the county to try and develop schemes which can meet similar needs to those which dial a ride currently serves. We will no longer be able to afford to fund Dial a Ride as a Council provided service. The Dial a Ride service in Oxford City is now provided by the Charity Aspire and we will look to extend this arrangement to other parts of the County. However the funding we will offer to the Voluntary and Community Sector will be one off 'pump prime' funding' to set up or extend their existing scheme.

## **Financial and Staff Implications**

30. The financial savings implications of this paper are discussed above. Initial implementation costs of statutory savings via the Transport Hub will be funded through current base budgets. Further statutory and non-statutory savings implementation costs, possibly including system integration, will be costed post public consultation and funding options will be determined. A structure and process review of the Transport Hub will take place over summer 2015 and whilst there is no foreseen reduction in posts, staff roles and responsibilities may change.

## **Equalities Implications**

31. The Supported Transport Programme seeks to ensure that equality and diversity are considered throughout the development of its proposals, specifically by engaging with stakeholders and user groups, so that the potential impact of changes on groups with protected characteristics is fully understood. A detailed Service and Communities Impact Assessment will be published alongside the consultation, if Cabinet grant permission to consult.

## **Consultation**

32. We propose to run a 12-week consultation starting in mid-June that will be widely publicised. A consultation document, feedback form and supporting information will be provided. Wherever possible, we will be encouraging people to complete the feedback form online.
33. The council has commissioned the expert skills of Oxfordshire Rural Community Council (ORCC) to support the delivery of the consultation and to prepare a report of the feedback received. ORCC will help the council to organise consultation meetings and will provide other ways for people to have their say. ORCC will also help the council to carry out outreach work to ensure we capture the views of vulnerable service users.

**RECOMMENDATION**

**34. The Cabinet is RECOMMENDED to:**

- (a) note progress with making efficiencies through the introduction of the 'Transport Hub', and plans to make further such efficiencies; and
- (b) grant permission to consult on the proposals outlined in the paper.

SUE SCANE

Director for Environment & Economy

Background papers: None

Contact Officer: Alexandra Bailey, Service Manager, Business Development and Supported Transport; Tel: 07768 027257

May 2015

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## **CABINET – 26 MAY 2015**

### **PROVISION OF HR AND FINANCE SERVICES BY HAMPSHIRE COUNTY COUNCIL**

#### **Report by the Chief Finance Officer and the Chief HR Officer**

#### **Introduction**

1. In July 2014, Cabinet agreed to join the Hampshire partnership as an operational partner for the provision of back office support services through their Integrated Business Centre with an expected go-live date of 1<sup>st</sup> July 2015. This report sets out the progress to date, confirms the services transferring and the savings that will be achieved both as a direct result of the partnership and those that are achieved as a consequence of the partnership.

#### **Progress to date**

2. Since September 2014 work has been progressing with Hampshire & Deloitte to 'on-board' to the partnership. The initial stage of the project was the 'fit-gap' analysis which identified where there was a match or a gap in process between Hampshire and Oxfordshire services to be provided through the partnership arrangement. Through this process it was identified that some services or parts of services originally in-scope for transfer were either not undertaken by Hampshire or could not be delivered in a way that benefited Oxfordshire. The table at Annex 1 sets out what services were originally in scope and the services which have now been agreed to transfer in July.
3. Maintained schools in Oxfordshire will be able to purchase HR and Finance services provided by Hampshire through Oxfordshire County Council from July 2015. All maintained schools in Oxfordshire have now signed up for these services. Hampshire also developed an HR and Finance offer for Oxfordshire academies. Academies would contract directly with Hampshire for these services but they have chosen not to. As a consequence academies will need to secure these services from the market. To ensure the change is managed carefully, Oxfordshire has offered an extension of current services to academies until 31<sup>st</sup> December 2015.

#### **Project and Partnership Governance**

4. The project governance is effected through an on-boarding project board which comprises senior officers from Hampshire, Deloitte and Oxfordshire. The board is responsible for making strategic and operational decisions, monitoring project progress and addressing identified risks, The project team is also drawn from the three organisations and they are responsible for delivery of eleven workstreams from the design phase, through build and test phases and finally the deploy phase.

5. The existing Hampshire partnership is legally underpinned by an unincorporated public to public partnership. This enables each public body to jointly deliver and share the benefits of shared services between themselves. As a partnership rather than a commercial outsourcing, the expectation is that all partners (including Oxfordshire County Council) will collaborate and work together for the good of the partnership. Oxfordshire will join the partnership through a joint working agreement, retaining influence on the partnership through an operational forum which provides a basis for consultation and the exercise of influence in the management of the overall joint working arrangements.
6. The joint working agreement includes:
  - a. Governance arrangements
  - b. Service standards and performance measures
  - c. Role and responsibilities of each partner in the process steps for each service area
  - d. Apportionment of costs, benefits and liabilities
7. A number of reserved matters are also being agreed which will ensure Oxfordshire is able to influence any proposals in relation to the partnership which might affect Oxfordshire's fundamental interests. These are currently being negotiated and will form part of the joint working agreement.
8. Oxfordshire is working closely with Hampshire to develop a performance management framework, based on financial and non-financial measures being collected as part of the governance arrangements above.

## **Change Management & Business Readiness**

9. Managers and staff across the Council and in maintained schools will be using new tools and related processes that are operated by the Integrated Business Centre from July 2015. These tools maximise the use of self-service and digital delivery which is beyond the current self-service offering. For schools staff and particular areas of the Council such as the Integrated Transport Unit and Children's Home Support, this will be the first time that they will have had the opportunity to use online employee self-service. All areas will have greater manager self-service for HR, Finance and Procurement.
10. A comprehensive business readiness programme has been running since January 2015 focused on preparing all areas for the changes. This includes 30 council manager briefings and 18 schools leadership & governor seminars across Oxfordshire, walking future IBC service users through the changes. There is a network of 15 Change Champions representing all areas of the Council, who are acting as local experts and advisors on the ground. Concerns raised around specific service impacts have been captured and responded to so that follow up sessions are tailored accordingly.

11. There are four large scale process briefing events planned in early June 2015 with an expected turnout of around 1000 staff and there will be an e-learning course covering the changes around procurement and recruitment specifically. Weekly messaging will commence in May 2015 to all staff about key points they need to be aware of as we move towards go-live. From July 2015 'super-users' will be located in key locations, they will add an additional layer of support alongside the Customer Interaction Centre in Winchester. From September 2015 monthly face-to-face training will be run for those managers who are finding the technical and behavioural changes particularly difficult.

### **Financial Implications**

12. The report to Cabinet in July 2014, set out that the Medium Term Financial Plan (MTFP) included savings for Oxfordshire Customer Services of £3m. Of this, the target saving for HR and Finance through externalisation was £0.681m. At that time, the HR/Finance savings set out in the full business case were within the range expected from the market and the target saving was expected to be achieved by joining the partnership.
13. One off transitional costs identified in July 2014 were expected to be in the region of £6m, which were considered broadly similar to costs incurred if alternative business models, such as an outsourcing, were adopted. Transitional costs are still expected to be around £6m, however they cannot be confirmed until after July as any staff that are redeployed between now and then will reduce the redundancy cost.
14. As set out in paragraph 2, the scope of services actually transferring to Hampshire is less than originally envisaged, at least in the first instance. As a result of this, the level of direct savings has also reduced from the original business case. Savings of £0.670m will be achieved relating to the provision of HR and Finance services.
15. However, additional savings are expected to be made from a reduced management team (£0.200m) and in relation to those services now out of scope, lean reviews are expected to generate savings equivalent to those that would be expected under the partnership (£0.155m). It is appropriate therefore to consider these savings alongside the direct savings. Offsetting these additional savings is an increased cost of ICT (£0.220m) which relates predominately to the annual contribution each partner makes to future proofing ICT infrastructure. In total therefore, savings directly and indirectly relating to the transfer to Hampshire total £0.805m. The partnership also facilitates the vacation of Unipart House and enables the savings already in the MTFP of £0.759m to be achieved.
16. To reflect the impact of changes to the scope of services being transferred to the partnership and to reflect the impact of including savings relating to the service management team and the lean reviews, the savings target in the Medium Term Financial Plan was increased to £0.716m. This is directly

comparable to the saving of £0.805m which will be achieved. As the partnership commences in July, part year savings will be made in 2015/16 with a full year impact from 2016/17.

17. In addition to the financial benefits of joining the partnership, there are also some key non-financial benefits. From July 2015, the Council will no longer be running SAP for HR and Finance which means that there will be no future licence liability for the Council. Also, with an increasing number of schools converting to academies, the ability to sustain back office services was increasingly unviable. Furthermore, additional self-service functionality was needed for the Council and for maintained schools and this will be delivered by joining the partnership and avoids further substantial investment from Oxfordshire. Joining the partnership therefore provides 'future-proofing' of these services.
18. There is still an expectation that further savings will be achieved from the partnership over time through the addition of new partners and further process improvements.

### **Staffing Implications**

19. Staff consultation was undertaken from January to March 2015. Generally, staff in services in scope for transfer to the partnership would TUPE to Hampshire County Council employment and be based in the Integrated Business Centre in Winchester. The exception to this is the Schools HR and Finance services which will remain contractually based in Oxfordshire, located at Abbey House. The expectation is that the majority of their time will be spent in Oxfordshire maintained schools. Given the distance from Winchester and various changes to terms and conditions, there was no requirement for employees to TUPE to Hampshire. As part of the consultation, staff were required to confirm if they intended to transfer to Hampshire.
20. A total of 11 staff (9.16 fte) in the Schools Finance team will transfer to Hampshire County Council. Staff who have chosen not to transfer are at risk of redundancy and will be given a severance package if it is not possible to redeploy them. Vacancies across the council, as they occur, are being made available as redeployment opportunities for staff that are at risk of redundancy.
21. Currently, a total of 79 staff (67.45 fte) will be redundant on 30<sup>th</sup> June 2015. The total cost, excluding estimated pension strain costs is £1.321m. This figure will reduce if staff take up redeployment before that date.

### **Risk Management**

22. The last report to Cabinet in July 2014 set out some risks specific to the Hampshire partnership which are relevant to be updated now.

23. The partnership works on a cost share basis. In July 2014 it was not clear how cost increases would be controlled. The mechanism for controlling cost increases is now covered in the proposed Deed of Accession which aims to protect Operational Partners from 'disproportionate impact'. In addition all matters relating to changes to levels of financial contribution will be approved in the setting of the annual budget in accordance with the Governance Protocol.
24. At the time of the report in July 2014, the Hampshire IBC had been operational for less than four months, so a track record of service delivery was not available. The Operating model has now been live for just over 12 months during which time all new partners have on-boarded on time, commencing with Hampshire County Council in April 2014, 500+ Hampshire Schools in July 2014, Hampshire Fire & Rescue in August 2014 and Hampshire Constabulary and Police & Crime Commissioner in November 2014.
25. The experience to date has indicated that 'on-boarding' is a significant change programme which affects the whole organisation and the adoption of the new model by the organisation and its suppliers has been shown from the partners who have on-boarded to date to take around six months to embed. The expectation is similar for Oxfordshire.
26. In accordance with the project timetable, systems and user testing is still in progress and matters arising are being risk assessed in order to prioritise project resources both pre and post project go-live. The most significant project risk in the run up to and just after go-live is resourcing. This is being monitored closely by the Oxfordshire project board.

## **RECOMMENDATIONS**

27. The Cabinet is **RECOMMENDED** to note the progress made in joining the Hampshire partnership as an operational partner for the provision of back office support services with a confirmed go-live date of 1 July 2015.

**LORNA BAXTER**  
**CHIEF FINANCE OFFICER**

**STEVE MUNN**  
**CHIEF HR OFFICER**

Background papers: Cabinet: 15 October 2013 – Item 8; 15 April 2014 – Item 8;  
15 July 2014 – Item 11

Contact Officers: Lorna Baxter, Chief Finance Officer  
Tel: (01865) 323971  
Steve Munn, Chief HR Officer  
Tel: (01865) 815191  
Graham Shaw, Deputy Director, OCS  
Tel: (01865) 797228

May 2015

## **Annex 1**

### **Services originally in scope for partnership with Hampshire**

#### **Finance**

Technical Team (Tax)  
Finance Service Desk  
Banking & Control  
Accounts Payable  
Income Team  
Central Buying Team  
Specialist Payments (part)

#### **HR**

Pay & Employment Information (Directorates)  
Payroll Control  
Data Management & Reporting  
Resourcing  
HR Vetting & DBS  
Learning & Development Administration  
HR Advice & Helpdesk

#### **Education Support Service**

Pay & Employment Information (Schools)  
Schools Finance  
Schools HR

### **Services confirmed in scope for partnership with Hampshire**

#### **Finance**

Technical Team (Tax)  
Finance Service Desk  
Banking & Control (part) (bank reconciliation query resolution not in scope)  
Accounts Payable  
Income Team (part) (Adult Social Care debt query resolution and legal work relating to debtor chasing not in scope)  
Central Buying Team (part) (Setting up of vendors & catalogues, sourcing, tendering & contract management plus strategic procurement out of scope)

#### **HR**

Pay & Employment Information (Directorates)  
Payroll Control  
Data Management & Reporting (part) (Reporting out of scope)  
Resourcing  
HR Vetting & DBS  
Learning & Development Administration

#### **Education Support Service**

Pay & Employment Information (Schools)  
Schools Finance  
Schools HR

Division(s):
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## **CABINET – 26 MAY 2015**

### **ENGLAND'S ECONOMIC HEARTLAND - TRI-COUNTIES PROSPECTUS**

**Report by Director for Environment and Economy**

#### **Introduction**

1. In December 2014 the Leaders of the three County Councils set out their proposal for a Tri-County Strategic Alliance. This set out at a high-level the benefit to be derived from harnessing the economic potential of the area by taking a co-ordinated approach to planning for and delivery of strategic infrastructure.
2. With a population of 1.9m and an economy valued at £46.6bn the area of Oxfordshire, Buckinghamshire and Northamptonshire is an economic powerhouse that rivals any other outside of London. We are an area that is at the heart of science and technology innovation in the UK, one whose market focus is global. Our economic success complements the opportunities presented by the Northern Powerhouse: both are central to the UK economy becoming the most prosperous major economy.
3. There are two distinctive driving forces in the global economy that are central to our future economic success:
  - The ever increasing need to be recognised and known as an area that is business friendly and offers excellent differentiated services that puts it apart from others;
  - The creation of an eco-system that encourages technology enabled innovation by entrepreneurs to provide end-user focused services and products.

#### **Context**

4. We have inherent advantages – including location, core infrastructure, and the availability of skills – that have served us well to date. However, if we are to be a 'hot house' that delivers accelerated economic growth in a competitive global environment then more needs to be done. In this context there are two key imperatives:
  - The first is to become recognised as a serious destination for the new economy industries and companies and their employees, families and supply chains;

- The second is to ensure that our significance to the long-term success of the UK economy is acknowledged by Government.
5. The commitment made by the three County Council leaders at Silverstone was in response to this challenge. It was recognition of the fact that in order to continue to prosper there is a need for strategic leadership targeted at addressing barriers to economic growth.
  6. Now more than ever before we need to make sure that public sector investment in physical infrastructure is properly aligned towards delivering a single set of priorities, that investment in education, skills and training is even better aligned and more responsive to local needs, and that through our own activities we become more effective and efficient as enablers of growth.
  7. At the same time, there is a clear commitment – in the wake of the Scottish referendum – of the new Government’s willingness to enter into Growth Deals that devolve both powers and funding from Whitehall as part of their focus on accelerating economic growth.
  8. The Government’s commitment to devolution provides the opportunity to seek a new Growth Deal through which we can implement a new delivery model: one that brings together a range of powers, responsibilities and resources in a way previously unseen.
  9. The success of our economy – and we are consistently a net contributor to the national Exchequer even during the austerity years – is fuelled by our unique combination of scientific and cultural assets, an entrepreneurial spirit and our leadership in the ‘great technologies’ of the future: big data, space, robotics, synthetic biology, regenerative medicine and advanced materials.
  10. The productivity of our businesses and workforce is 30% higher than that of traditional city-regions. As part of the wider South East, investment in new jobs generates a 40% higher return than elsewhere in the UK. Our economic success comes not from having a single dominant city at the heart of a wider area rather it comes from our network of innovators and entrepreneurs working in clusters that are inter-connected. Our new Growth Deal needs to be bespoke, reflecting the complexity of our science and technological innovation based economy.
  11. Whilst our economic model is different to the traditional one that has driven public sector investment in the past, our track record shows it is one that competes very successfully in global markets. We now want to build upon our success in the first round of Local Growth Fund deals. We have previously set out an evidenced based case for being ambitious in our growth plans and identified the potential for our economy to grow 20% by 2020; an additional £9bn of wealth for the economy every year. The investment we’ve secured so far will contribute towards delivering our ambition, but more needs to be done if we are to realise our full potential towards ensuring the UK is most prosperous major economy.



12. Just because we can demonstrate our economic potential is no guarantee it will be realised. We need a strong, strategic voice: to champion our needs within Government and to provide the clarity and certainty that gives confidence to the private sector to invest. The new Government is committed to greater devolution of powers and funding. The significance of our economy is such that we need to working with the new Government to agree a new Growth Deal that will set out how we can build upon that commitment to realise our ambition.

### **Developing the Proposition Framework**

13. The work undertaken since the start of the New Year has been focused on a number of discrete themes that are themselves grounded in the evidence base that underpins the individual Strategic Economic Plans. The themes have been:
- Strategic planning
  - Transport and Digital Infrastructure
  - Economic Development
  - Funding and Finance
14. These initial explorative discussions have been taken forward on a collaborative basis by officers from the County Councils and the Local Enterprise Partnership, under the guidance of the Leaders and Cabinet Members from each County Council and the Chairmen of the Local Enterprise Partnerships.
15. In those discussions we have been looking at opportunities to:
- Strip away duplication and improve the efficiency with which investment is made in infrastructure and service delivery, so that we are able to make faster, more agile decisions whilst at the same time reducing the cost of public services to local residents
  - Use our strategic leadership to look across investment programmes – both locally and nationally – so that we have a single set of priorities that ensure the investment programmes of national agencies are truly aligned with local needs
  - Simplify the number of funding streams and mechanisms wherever possible so that we reduce the time (and cost) it takes to develop proposals, get them delivered on the ground faster and reduce the cost of administration
  - Provide greater certainty for private sector investors thereby encouraging them to commit sooner to investments with greater certainty on their costs

- Ensure that a greater proportion of the benefits of accelerated growth are retained locally for reinvestment to the benefit of the local community and businesses, as well as generating additional revenue for UK plc.
16. Our activity has involved a series of informal conversations with officials in Government departments (HMT, DfT, BIS, CLG), government agencies (HCA and Highways England) and public transport operators. The response has been consistently supportive of our initiative and welcoming of the ambition that lies behind it.
  17. The informal discussions have served to reinforce the view that devolution arrangements are likely to continue to be made on a case-by-case basis as set out in the Conservative manifesto. The northern city-regions' influence in shaping the debate will continue to be very significant, and we need to ensure that the significance of our economy is understood within the new Government. What is also likely is the pace at which the devolution agenda is moving will continue to quicken particularly in those areas that have the strategic leadership arrangements in place: the devolution of NHS funding to Greater Manchester being one example.
  18. To date the focus of our activity has been on developing the broad framework of a proposition, and testing the rationale that underpins it. Interestingly, even though we are at an early stage, other areas have expressed an interest in seeing how our approach might be extended to them. The emerging framework is being developed in such a way that it will have the flexibility to be extended to adjoining areas where there is common cause.
  19. Such is the nature of any economy there will continue to be a need to work closely with adjoining local authorities and Local Enterprise Partnerships where there are service delivery and investment opportunities that require joint working.
  20. And our framework explicitly recognises that whilst partners chose to work together on strategic issues, they retain their own identity and their roles and responsibilities in local issues.
  21. We have set out the framework for our draft proposition in a new brochure – which is being promoted as 'England's Economic Heartland' (Annex 1).

## **Engagement and Work Moving Forward**

22. Building on the work to date further work is being taken forward still focused around the same core themes:
  - a) Strategic planning – work has already started on preparing a single sub-national infrastructure and economic development framework that brings together our work on Local Transport Plans and Strategic Economic Plans with the ambition that this will in due course become a material consideration in the determination of independent economic regulators responsible for regulated infrastructure services

- b) Transport and Digital Infrastructure – work is underway to develop the framework for the proposed Transport Infrastructure Forum, a new body that will provide leadership by joining up transport infrastructure and service planning activities across the area, together with an outline proposition for a range of new and innovative transport interventions designed to stimulate growth and support regeneration.
  - c) Economic Development – work is underway to develop opportunities for collaborative working on business support, innovation, employment and skills and wider growth issues where this delivers improved effectiveness and efficiency
  - d) Funding and Finance – building on the output from the other work streams, work is underway to identify those areas of expenditure currently controlled by Government and its agencies for which we will want to enter into a discussion about their devolution
23. In taking this work forward we will develop the detail of our new delivery model and in doing so we will look to engage with a broader range of interests and stakeholders across the area.
24. At the same time we will continue to engage with Government departments, meaning that the development of the new delivery model will be a more dynamic process, reflecting the pace at which the devolution debate is progressing and the bespoke nature of any deal.
25. Quickly establishing a stronger strategic voice for the area will enable us to increase our influence in a number of arenas, including but not limited to:
- Sub-national discussions focused on the relationship between London, the South East and East of England
  - Longer term planning processes associated with the strategic road network and rail infrastructure
  - Providing leadership in national studies such as the A428/A421 Expressway
  - Ensuring the planning and implementation of improvements to nationally significant transport corridors criss-crossing the area properly take into account local needs
26. We will work closely with the Local Planning Authorities to ensure that the preparation of the sub-national infrastructure and economic development plan supports their ambitions for growth

## **Financial Implications**

27. Central to our new delivery model is certainty of funding with the ambition being to secure a Government commitment in the form of a Growth Deal that will provide the area with a five-year settlement that incorporates all growth

related funding streams which the Alliance would invest in accordance with the priorities set out in the single infrastructure and economic development framework.

28. The certainty created as a consequence of a 5-year Growth Deal would enable the Alliance to use the funding available to leverage additional investment in partnership with the private sector, thereby accelerating delivery of our economic potential. Delivery certainty would be further strengthened by a five-year indicative allocation for subsequent years.
29. In this respect we are looking for the same degree of certainty that infrastructure companies such as Network Rail and Highways England enjoy.
30. Based on the work undertaken to date it is clear that the move towards a strategic approach on transport planning and delivery offers opportunities for the partners to share resources on a more regular basis. In effect we would be creating a pool of expertise that enables efficiencies in delivery to be realised, whilst at the same time sharing that expertise more widely.
31. In this respect our approach is similar to that being adopted to support delivery of the National Infrastructure Plan where expertise in the delivery of projects is being retained and used to the benefit of subsequent projects. Our model may look to take this approach further by seeking placement of Whitehall expertise within our delivery team.
32. In addition our ambition to secure 100% retention of the increase in business rates receipts locally (over and above an agreed base-line) would provide funding for investment in our agree priorities. Potentially this would lead to a transfer of risk from Whitehall to the Alliance but the area would benefit through the flexibility this would bring. The devolution of powers and accountability from Whitehall to the Alliance would be an essential part of mitigating the potential impact of the transfer of risk.

### **Establishing the Strategic Leaders Board**

33. The work to date has been undertaken by officers under the guidance of the Leaders and Cabinet Members from the County Councils and the Chairmen of the Local Enterprise Partnership.
34. This paper maps out a series of on-going activity through which the detail of the new delivery model will be developed. This paper also highlights the importance of engaging early with the new national Conservative administration in order to set out how through the devolution of powers, funding and accountability from Whitehall we can contribute to the Government's ambition for the UK to be the most prosperous major economy.
35. It is proposed that for the next six months a Strategic Leaders Board is formally established. Initially comprising the Leaders of the County Councils (supported by Cabinet Members as appropriate) and the Chairmen of the Local Enterprise Partnerships, the Board will be responsible for overseeing

the current programme of work and for engaging Government in respect of a potential deal for devolution.

36. The Strategic Leaders Board will be responsible for developing a proposal that would subsequently need to be considered in detail by each of the partners: the Board could not make a commitment on behalf of any partner. If appropriate the Strategic Leaders Board could invite additional partners to join their discussions where that involvement will help in the detailed development of the proposal. The need for longer-term governance arrangements would have to be considered as part of this process and would need to be considered by each partner at the appropriate time.
37. Individual partners would receive regular updates on the work of the Strategic Leaders Board and a formal review of progress would be presented to each partner in six months.

### **Next Steps: Investing in Success**

38. The original document 'A Shared Approach to Driving Prosperity' set out, at a high level, the benefit to be derived from harnessing the economic potential of the Tri-County area by taking a co-ordinated approach to planning for and delivery of strategic infrastructure.
39. The work that has taken place subsequently has reinforced the importance of making the funding available to us work harder, of getting the best return for our investment and in ensuring our decision making is timely. It has shown that we need to deliver better outcomes as a consequence of our investment and the critical importance of achieving that in partnership with the private sector: it means we need a new delivery model.
40. The Strategic Alliance demonstrates a commitment by the partners to do all we can do to continue to contribute to the success of the UK economy in a global market that is increasingly competitive. Missing an investment heartbeat means having to invest more simply to make up lost ground.
41. Our new delivery model offers the potential for a new Growth Deal that will achieve both a transformation in the way we deliver services that enable economic growth and enable the UK Government to devolve powers, funding and accountability from Whitehall.

## **RECOMMENDATION**

**The Cabinet is RECOMMENDED to:**

- (a) endorse the engagement and work that has taken place with Oxfordshire/Buckinghamshire/Northamptonshire County Councils and the Local Enterprise Partnerships;**
- (b) agree to the formation of a Strategic Leaders Board comprised of the three County Councils and three Local Enterprise Partnerships with the remit to:**
  - a) Take forward the engagement and work in order to develop specific proposals that address the barriers to economic growth**
  - b) Enter into initial dialogue with the Government in respect of seeking devolution of powers, funding and accountability for functions that support economic growth; and**
- (c) agree that a further report be submitted to Cabinet and Local Enterprise Partnership Boards once this further work has been undertaken.**

SUE SCANE

Director of Environment and Economy

Contact Officer: Sue Scane, Director of Environment and Economy

Tel: 01865 816399

May 2015



# England's Economic Heartland

At the Heart of Science  
and Technology Innovation



# Why England's Economic Heartland?

England's Economic Heartland – covering Buckinghamshire, Oxfordshire and Northamptonshire – is at the **heart of the UK's global competitiveness in science and technology based innovation.**

We are home to world-class centres of expertise that thrive on the output of academic and commercial research. Our economic success is fuelled by our unique combination of **scientific and cultural assets**, an **entrepreneurial spirit** and our **leadership in the 'great technologies'** of the future: big data, space, robotics, synthetic biology, regenerative medicine, advanced materials and high performance engineering.

We are a **£46.6bn economy**: a net contributor to the Exchequer. The **productivity** of our businesses and workforce is **30% higher** than that of traditional city-regions. As part of the wider South East, investment in new jobs generates a **40% higher return** than elsewhere in the UK.

Our potential for growth offers the opportunity for **at least another 135,000 new jobs** in the period to 2020, supported by the delivery of new homes.

Our **ability to compete successfully in global markets is dependent upon transport and digital connectivity**: our competition when it comes to retaining business and attracting inward investment is global not elsewhere in the UK. Local connectivity enables collaborative working by our network of innovators and entrepreneurs: the foundation of our science and innovation clusters. International connectivity enables those clusters to continue to be globally competitive.

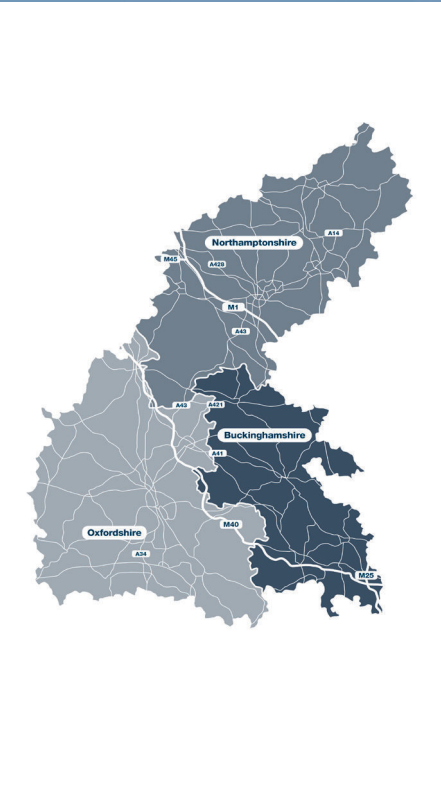
Growth on this scale will deliver an **additional £9bn of wealth per annum** for re-investment locally and across the UK - a **20% increase** in our economy.

England's Economic Heartland has been formed by the **County Council Leaders and the Local Enterprise Partnership Chairmen** to ensure that we deliver our commitments to invest in the enablers of growth – the physical infrastructure, the investment in people – to create confidence amongst the private sector to invest.

We will deliver but we want to do more. We believe that our capability to accelerate the delivery of economic growth would be enhanced through the devolution of powers, accountability and funding from Government to the Strategic Alliance.

Our track record demonstrates that accelerated investment delivers greater returns faster and more efficiently. Through our Alliance we share common cause to deliver accelerated economic growth as a means of achieving our ambition to be the **'Smartest Place on the Planet'**.

**We are inviting Government to invest in us and help us realise our ambition.**



# Our Asset Base: Built upon the 'Great Technologies'

Our highly skilled and productive workforce lead the way when it comes to the innovation and technology clusters that are shaping the future globally:

- The **University of Oxford** is one of the world's great centres of cutting-edge research in science and technology
- Silverstone is at the heart of the UK's **High Performance Technology** network that supports not just F1, but also the defence, aerospace, construction and renewables sectors
- Science Vale, Oxfordshire, is the **largest concentration of research and development activity in Western Europe**, with Harwell the home of the UK's space technologies
- Our **life-science** experts in the fields of bio-science, medical technology and pharmaceuticals account for **6% of the world market sales in the UK**
- Pinewood's world-leading reputation in **creative industries** place it at the heart of a sector that contributes **7% of the UK's Gross Domestic Product**
- **Telecoms and ICT** is one of the fastest growing sectors - with international bases sitting alongside a cluster of small, agile and fast-growing companies driving innovation in global markets
- Northamptonshire is at the **heart of the UK logistics sector** – the focus for distribution centres serving the UK's southern ports and through which the bulk of the UK's imports arrive. Onward distribution across the rest of the UK is made possible by being geographically at the centre of the UK's strategic infrastructure networks.

Fuelled by our leadership in the 'great technologies' of the future, our collective ambition is to look beyond our current success and raise our levels of productivity to match those of our global competitors, effectively leading the UK to higher levels of productivity.

To achieve that we need to be able to respond to the needs of businesses faster and with greater agility.

Now more than ever before we need to make sure that public sector **investment in physical infrastructure is aligned** to deliver a single set of priorities, that **investment in education, skills and training is even better aligned and more responsive to local needs**, and that through our own activities we become more **effective and efficient as enablers of growth.**





# Strategic Leadership

Our alliance as England's Economic Heartland has been formed to implement **a new delivery model**: one that builds upon foundations already in place so that we can move quickly. Our aim is to:

- Strip away duplication and remove inefficiencies, enabling the strategic leadership to make faster, more agile decisions
- Use our strategic leadership to look across the investment programmes – both locally and nationally – to determine a single set of priorities
- Simplify funding streams wherever possible so that we reduce the time (and cost) it takes to develop proposals and get them delivered on the ground
- Provide greater certainty for private sector investors thereby encouraging them to commit sooner to investments with greater confidence on their costs
- Use the benefits of accelerated growth to reinvest in local businesses and communities as well as generating additional revenue for UK plc.

In setting up our **Leaders Board – comprising the County Council Leaders and Local Enterprise Partnership Chairmen** – we have made the initial step required to take this agenda forward.

Through the Leaders Board our aim is to have **a single conversation** on matters of strategic importance. We are reaching out to those with an interest in accelerating economic growth to become involved and help shape the implementation of our new delivery model.

As we move forward **the Leaders Board will evolve** as agencies and organisations, nationally and locally, express an interest in becoming partners in our activities.

## Connectivity: infrastructure for economic growth

Connectivity – both locally and internationally – is critical for economic growth. Technology is increasing the expectations of end-users – both businesses and individuals alike. Our businesses tell us that in order to compete more effectively in global markets we need to be better at planning and delivering a truly integrated transport system. And so it becomes ever more essential to adopt a system approach to the future development of our transport infrastructure and services.

As an alliance we will prepare a single **strategic infrastructure framework** through which the investment programmes of key agencies can be aligned to deliver our common goal: accelerated economic growth that is sustainable for the longer-term. A single set of priorities will provide both clarity and confidence for investors as we work together to realise our economic potential.

England's Economic Heartland is criss-crossed by a number of transport corridors that are central to realising our ambitions for growth, as well as being of significance for the UK.

### North-South Corridors:

- **A34/A43/'the electric spine'** – linking the south coast ports with the UK's distribution networks, as well as being central to the Oxfordshire Knowledge Spine and the Northamptonshire Arc
- **West Coast Main Line/Chiltern Main Line/M40** – 'investment in the Chiltern Line will see the first new rail connection between London and a major city (Oxford) in over a century, whilst the M40 corridor links major development opportunities: the opening of HS2 will create opportunities along the West Coast Main Line in the medium term.

### East-West Corridors:

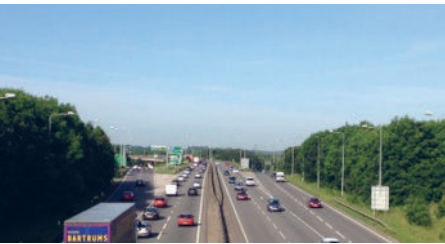
- **Great Western Main Line/Crossrail** – Crossrail services will result in a step-change in connectivity along the Thames Valley through Buckinghamshire and Oxfordshire, with the Western Rail Access to Heathrow project to follow
- **East-West Rail/A421/A428 Expressway** – rail services will be re-introduced in 2019, and with the Expressway study to follow, the strategic importance of this corridor continues to increase
- **A14/M1** – via the logistics facilities in Northampton, linking the east coast ports with the UK distribution networks.

We see the investment in these corridors as **opportunities to support economic growth and enable the delivery of new jobs and homes**. And we will continue to work closely with the Local Planning Authorities to ensure that our leadership on transport infrastructure complements their ambitions.

We are already talking with the national delivery agencies – Highways England, Network Rail – and with the major public transport operators across England's Economic Heartland. The response has consistently been supportive and welcoming the ambition of our new delivery model.

We will set up a **Transport Infrastructure Forum** as part of our new delivery model: one that provides leadership by joining up transport infrastructure and service planning activities across England's Economic Heartland. We will work with the national agencies and operators to shape the Forum and implement a new approach to delivery.

With **Government's assistance** the Forum's effectiveness would be substantially enhanced were it to have the same powers as London when it comes to public transport. Devolution of funding will enable the Forum to champion the implementation of a system approach to investment in transport. And our ability to innovate in the management of our local road network to meet local needs would be enhanced if we were free from Government approval and/or sanction.





# Connectivity: Digital Infrastructure

Digital connectivity consistently tops our business surveys as the most requested intervention required – regardless of location and business sector. It is an enabling technology for service transformation for both private and public sectors.

We are already working with the 5G Innovation Centre at the University of Surrey but we want, and need, to do more. With **Government’s assistance** we will work with industry to ensure that our businesses have access to the digital infrastructure that enables them to realise their potential.

# A Skilled, Flexible Workforce: Meeting Local Needs

Business is all about people. Our labour market is more dynamic than ever before, with business needs constantly evolving. Such is the nature of the market that the lines between skills, careers and job support have become blurred to the extent that we need a new approach that enables skills and training investment to be tailored to the individual.

Across England’s Economic Heartland we are responding to the needs of businesses by:

- Improving our market intelligence – so that we can help ensure providers meet local employment needs
- Promoting a skills system that is more responsive to the needs of local employers – working with the local provider network to deliver it
- Encouraging the development of a more effective local system of careers advice and guidance – working with local employers, schools, colleges and providers
- Continuing to develop the number and range of apprenticeship opportunities available – particularly within the key employment sectors for the local economy
- Providing a reference point for future skills needs – to keep abreast of the innovation and skills needs of the future and to support the sector with innovation including future capital investment.

Through the Leaders Board we are developing a **federated approach that will simplify the offer to businesses and individuals**, and **deliver that more efficiently**.

With **Government’s assistance** we believe a federated Local Enterprise Partnership structure offers the basis for **devolution of funding** currently channelled through national agencies such as the Skills Funding Agency, the National Apprenticeship Service, the National Careers Service and Job CentrePlus.



# Accelerating Delivery: Place Based Investment Programme

Uncertainty over the delivery of enabling infrastructure continues to be one of the most significant barriers to the implementation of planning consents – for both new jobs and homes. Timely delivery of enabling infrastructure is also a concern of our local communities.

Through the Leaders Board we will **prioritise our strategic investment needs** so that funding is targeted in the most effective and efficient way. We will use our prioritisation to shape future bids for funding to Government and other external sources.

We are already talking to the Homes and Communities Agency (HCA) to understand **how we can integrate our activity with theirs. We believe that there is scope to unlock** greater value from public sector assets through greater co-ordination of our investments and that there is scope for co-ordinated use of our statutory powers to be more effective in enabling private sector investment.

We are continuing to use the opportunities provided by initiatives such as our two Enterprise Zones to encourage new investment. We are continuing to use innovative funding mechanisms, such as the Northamptonshire Rolling Infrastructure Fund, to raise investment funds locally.

However we believe that the full potential of a place based investment programme will only be realised **if Government were to invest in us** by:

- Providing a 5-year funding settlement and indicative allocation for the subsequent 5 years – enabling the Alliance to maintain momentum across economic cycles
- Consolidating the current financial incentives, initiatives and competitions in support of growth within the 5-year funding settlement
- Providing flexibility in funding across financial years within the 5-year settlement
- Enabling a greater proportion of the financial benefits of additional growth to be retained locally for reinvestment, over and above the 5-year settlement.

The certainty created by having a 5-year funding settlement will enable us to leverage additional investment in partnership with the private sector, thereby accelerating delivery of economic growth.

We believe that the potential pay back from accelerated growth allows a new perspective to be taken on the benefit of investment in infrastructure: one that needs a **new dialogue with Government that will ultimately lead to more effective public sector investment** enabled by our commitment to service transformation.

# Investing in Future Success

Success lies in making our money work harder, in getting the best return for our investment and in ensuring our decision making is timely. It means delivering better outcomes as a consequence of our investments and achieving that in partnership with the private sector: it **requires a new model for delivery**.

We face very real **threats to our economic success**: threats that come as a consequence of the pressures on our infrastructure arising from past success and of the relentless strides being made by our global competitors.

England’s Economic Heartland is our commitment to do all we can to **improve our competitive advantage in a global economy that is increasingly competitive**. Missing an investment heartbeat means having to invest more simply to make up lost ground. We are determined to realise our ambition to be **the ‘Smartest Place on the Planet’**: **we invite Government to invest in us and help make it reality**.





**Contact:** Martin Tugwell, Programme Director | 07775 913125 | [martintugwell@hotmail.com](mailto:martintugwell@hotmail.com)



**Buckinghamshire**  
Thames Valley LOCAL ENTERPRISE  
PARTNERSHIP  
THE ENTREPRENEURIAL HEART OF BRITAIN



**OXFORDSHIRE**  
COUNTY COUNCIL



**Northamptonshire**  
County Council



**Northamptonshire**  
Enterprise Partnership

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Division(s): All
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## **CABINET – 26 May 2015**

### **HELP TO LIVE AT HOME – HOME CARE BUSINESS CASE**

#### **Report by Director of Adult Social Services**

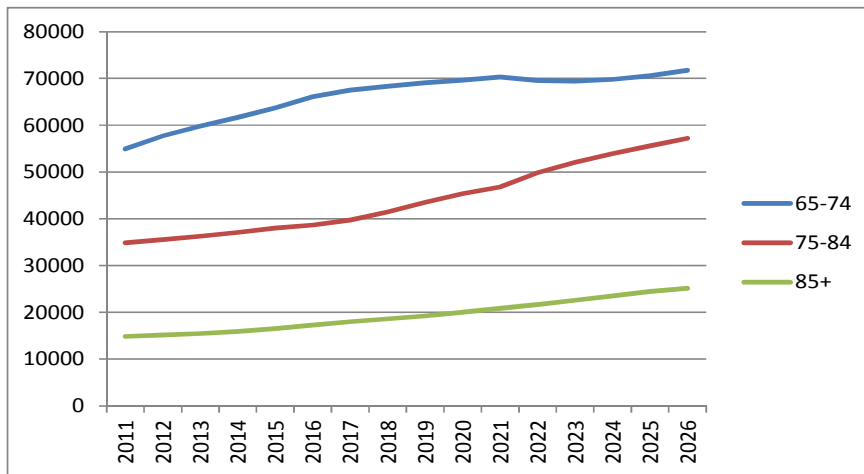
#### **Introduction**

1. The County has 72 home care providers on an Approved Provider List. The number of home care providers has developed in response to the personalisation agenda and a commitment to offer people a range of providers to meet their needs. This care can be purchased privately, with a direct payment, or through a spot purchase arranged by the Council.
2. However, individual spot purchasing does not give the Council sufficient leverage on providers to deliver fast and responsive services, as well as services with a consistent level of quality. Nor does it give providers sufficient assurance of on-going business to encourage them to attract more people into social care by employing staff on permanent contracts.
3. The County has developed a workforce strategy, in partnership with other agencies, which indicates that the number of care workers will need to grow by about 750 every year for the next 10 years to keep pace with the growing numbers of people requiring care.
4. In response to the above the Council has commissioned interim block contracts, using the suppliers on the Council's existing Approved Provider List, pending a longer term arrangement. Altogether nine providers have been awarded the contract across twelve contract localities in Oxfordshire. There were no interested providers for two other localities. The interim block contracts will guarantee 80% of new business within each locality to those providers that have been awarded contracts. The remaining 20% of business will be awarded on a spot basis to the other providers on the Approved Provider List.

#### *Business Need*

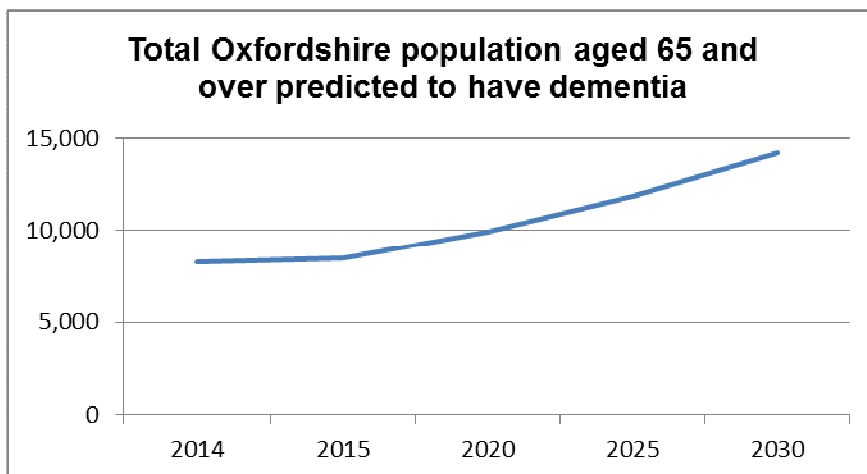
5. The population in Oxfordshire is ageing (see table below) and the County needs to increase the capacity and capability of home care services for the following reasons:
  - Home care can enable people to remain living at home longer and prevent people needing to move to a care home;
  - Home care can prevent people being admitted to hospital;
  - Home care can provide appropriate discharge from hospital so that people are cared for at home.

**Population projections in the county for age bands 65-74, 75-84, 85 and over  
2011-2026**



**Source: Projections by Oxfordshire Observatory/Insight**

6. Furthermore projections of the prevalence of dementia in the older Oxfordshire population (aged 65 and over) estimate that from a 2014 baseline estimate of 8,229 there is likely to be a 21% increase by 2020 and a 72% increase by 2030 (see table below) . Home care can provide an important alternative to a care home, provided that the staff have sufficient skills to address these needs and appropriate assistive technology is put in place.



**Source: POPPI: Dementia UK prevalence rates have been applied to ONS population projections of the 65 and over population to give estimated numbers of people predicted to have dementia to 2030**

7. The current model of home care in Oxfordshire will not be able to deliver the capacity and capability required to meet future needs as providers do not have the security of future business. As a consequence two workshops were held to develop a new model of home care to respond to future needs. The outcomes of these workshops have informed reports to senior management and relevant politicians. They have endorsed the approach outlined in the paragraphs below.

8. The aims and vision of the new model for home care have been agreed as follows:
  - Keeping people living independently at home;
  - Preventing avoidable admissions to hospital and residential care;
  - Providing a responsive and reliable service;
  - Promoting choice and control (choice over outcomes rather than over provider);
  - Creating a bridge to health care and community support;
  - Promoting physical and mental well-being;
  - Equipping the workforce with the necessary skills;
  - Providing a generic service that is not client group specific, but has a focus on meeting individuals' unique set of requirements/needs;
9. The future home care model will be based on the achievement of outcomes. Essentially these outcomes will either be maintenance outcomes (helping people to remain at home and preventing institutional care) or developmental outcomes (either short term outcomes or outcomes which improve independence over time). It has been recognised that the future home care service will need to have an ethos running throughout of helping people become as independent as possible.
10. The intention is to develop incentives for providers to reduce the level and length of care packages over time, for those who can be enabled to become more independent. A number of models have been explored that incentivise outcomes including those for Wiltshire, Devon and Windsor and Maidenhead.
11. Workforce development is an important issue for the future of home care. The Council's workforce programme has worked in partnership with the Oxfordshire Association of Care Providers, and others, to promote the care sector as a career and help providers recruit and retain staff. A workforce strategy has been developed by the County with an implementation plan to increase the capacity and capability of the workforce.
12. The introduction of an outcomes based approach will need to be supported through the training and development of staff so that they can address the needs of those who have dementia, adopt an enabling approach, provide end of life social care and can install and use assistive technology.
13. In conclusion a new model needs to be developed to meet the future business need for home care in Oxfordshire, which is as follows:
  - Contracting with a smaller number of providers that supply the Council's commissioned services (i.e. in the region of 10 providers across the county, but no more than 15) so that the level of future business can be assured;
  - Approving a small number of providers to work within each of the five geographical localities, which will mitigate the risk of any provider going into liquidation or being placed on safeguarding alert (i.e. up to 5 providers within each locality with some working across more than one locality);

- Use sub-contracting, where appropriate, to ensure that the existing capacity within the home care market is effectively utilised and to encourage the participation of Small and Medium Sized Enterprises (SMEs);
  - Adopting flexible cost and volume contracts which guarantee business based on actual delivery;
  - Developing outcomes based support plans to enable service users to acquire independent living skills to become more independent, where possible;
  - Developing a simple incentivisation model (i.e. rewarding providers for delivering outcomes which enable people to become more independent);
  - Developing a long list of home care providers as part of the eMarket place, which can be used by those with a Direct Payment and self-funders and which will meet the expectations of the Care Act 2014 to facilitate and shape the wider care market.
14. The model has been discussed by senior officers in the Council as well as Members and this approach has been endorsed. The Business Case has been approved by the Joint Management Group, which governs the budget for home care.

#### *Overview*

### **Strategic Case**

15. The Oxfordshire Joint Strategic Needs Assessment (2014 report) highlighted that the proportion of older people is likely to continue increasing and this will have implications for service demand. In fact the report found that demand for adult social care has been increasing at a faster rate than even that which would be expected by population growth, suggesting that previously unmet need is coming forward.
16. The current estimates of needs and services in Oxfordshire are as follows:

<b>Category of Need</b>	<b>Number</b>
Older People whose activity of daily living are limited a lot	24,000
People receiving long term support managed by the local authority	4,000
Estimate of older people receiving intensive (50 hours plus) informal care from a family or friend	5,700
Older People self-funding care home placements	2,100
Older People self-funding care at home	3,400
Needs currently met (local authority; informal; private)	15,200 (63%)
<b>Potential unmet need which could come forward</b>	<b>37% (8,800)</b>

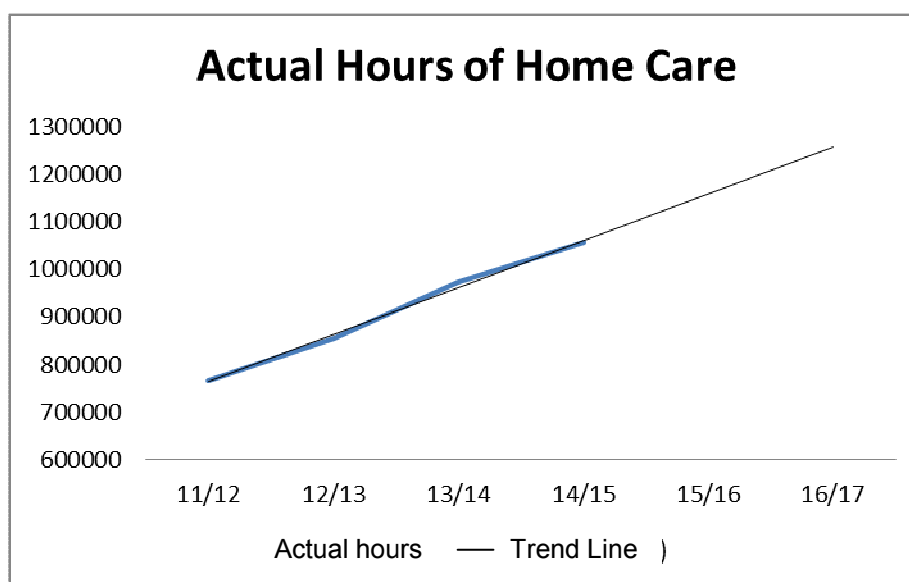


**Source: Oxfordshire Joint Strategic Needs Assessment 2014**

17. To address current and future needs the Council will need to adopt a different approach to the commissioning of home care services so that the market can respond to the growth in needs as well develop the skills required. Furthermore, the introduction of the Care Act 2014 will result in the Council taking new responsibilities for addressing the needs of self-funders.

**Financial Case**

18. Oxfordshire County Council spent £19,923,380 on home care during 2013/14 and purchased 1,053,314 hours. The number of people receiving home care arranged by the Council rose by 6.6% in 2011/12, a further 12% in 2012/13, 14% in 2013/14 and a 4% rise in the first 6 months of 2014/15. Those supported by a direct payment rose by 53% in 11/12; 19% in 12/13 and 11% in 13/14. Since April 2011 the number of people receiving home care arranged by the council has risen from 1485 to 2142, with those in receipt of a direct payment rising from 732 to 1473. This represents a 63% increase in people receiving home care in three and a half years.
19. In addition the average size of home care packages is increasing (in terms of hours). This means that costs are rising despite the hourly rate stabilising. The table below shows the projected number of hours based on a trend analysis. This trend shows that by the end of 16/17 the number of home care hours will increase to about 1.22m resulting in a cost to the Council of approximately £23,600,000.



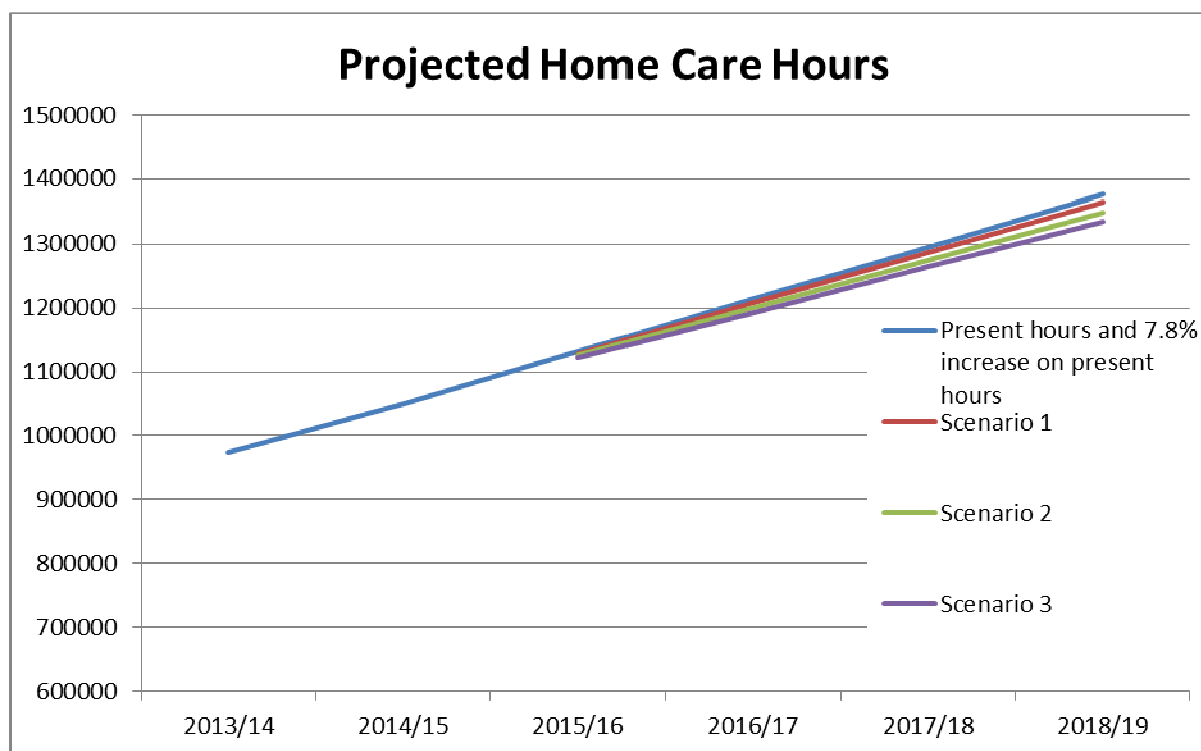
**Source: Performance & Information team Joint Commissioning**

20. The business case is based on the following:
- Incentives to reduce the size and length of care packages through an outcomes based approach;

- As a consequence of the above reducing the rate at which overall home care costs increase over time;
  - Keeping people living at home and reducing the number of people who are placed in care homes and who are admitted to hospital;
  - Reducing the costs of residential care as a result of keeping more people living at home;
  - Potentially delivering lower hourly rates, than those currently paid, based on a competitive process of reducing the number of providers from 72 to about 10;
  - Giving providers greater security so that they can employ care staff on guaranteed hours contracts, thus reducing staff turnover and enabling them to invest in learning and developing to deliver an enabling approach.
21. The Wiltshire model provides evidence that care packages can substantially reduce through the introduction of an outcomes based approach, although this service also incorporated reablement. The Wiltshire model shows how outcomes linked to incentives can encourage providers to find creative solutions for clients in their own communities.
22. Some high level modelling has been carried out to illustrate the potential benefit of the new approach in Oxfordshire. Using Adult Social Care data the percentages of all home care packages that decreased, stayed the same, or increased were identified. A number of scenarios were tested, which involved reducing care packages that fell into the 'decreased' or 'static' bands, on the basis that an outcomes based approach would result in these service users becoming more independent. These scenarios were as follows:

<b>Scenario 1</b>	The 104 packages that decreased during the year could be decreased by a further <b>10%</b> as a result of an outcomes based approach.
<b>Scenario 2</b>	In addition to scenario 1, <b>10%</b> of the 412 reviewed static packages could be decreased by a third as a result of an outcomes based approach.
<b>Scenario 3</b>	In addition to scenario 1, <b>20%</b> of 412 reviewed static packages could be decreased by a third as a result of an outcomes based approach.

23. The outcomes of these scenarios are shown in the chart below. This approach not only reduces the costs of home care to the Council, but it also enables staffing capacity to be moved from those who re-gain independent living skills to those who require care services.



24. The Council will not reward providers for what would have happened anyway. Therefore the Council will not agree incentives for care packages which reduce as a result of a social care review. Nor will the Council agree incentives for packages which would ordinarily reduce for other factors (i.e. the difference between the care that is planned and that which is delivered). The Council will only agree an incentive where the provider enables an individual to become more independent, as a result of achieving outcomes in a care plan.
25. The Council anticipates that at least 10% of all care packages can be defined as 'developmental'. An exercise conducted by Windsor and Maidenhead defined 15% of their care packages as developmental. There is clear evidence that there are some individuals who, following reablement (which supports a service user for up to six weeks following a crisis such as hospital admission), need a longer period of time to become more independent. The key interventions involve supporting people to do things for themselves rather than becoming dependent on a care worker doing things for them.
26. Although the competitive process should result in lower hourly rates it is difficult to predict whether such a decrease will be achieved, particularly as the County will require travel time and travel costs to be included. A report on the funding of home care across the UK (UK Home Care Association) found that Oxfordshire has the highest hourly rates in the UK. Oxfordshire has low levels of unemployment and high housing costs, which impact on the cost of the care workforce.

## **Preferred Option**

27. Three options were considered by the Business Case, which were as follows:
- Do nothing
  - In source home care
  - Outcomes based framework of suppliers
28. The preferred option is to develop an outcomes based framework of suppliers as it will enable service users to become as independent as possible and improve their well-being. Furthermore the other two options would cost more over time.

## **Economic Case**

29. The economic case is based on the introduction of incentives so that providers reduce the size and length of care package through an outcomes based approach, resulting in lower overall costs to the Council. The Council will support providers by guaranteeing them a volume of business, subject to delivery, so that care staff can be employed on guaranteed hours contracts thus giving greater certainty over capacity. Furthermore, the Council will contract providers to pay staff travel time and travel costs, as well as ensure a minimum level of training.
30. Home care will also divert people from moving into a care home, through adopting preventative interventions. This may involve individuals moving into extra care housing instead of a care home. Therefore, the home care service should reduce the level of expenditure on care homes.

## **Commercial Case**

31. The commercial case suggests that an outcomes based framework agreement is the preferred option to reduce the rate at which home care costs to the Council are projected to increase. The initial cost and volume contracts, under the framework agreement, will be for three years to give providers some security over future business. A further call off could be introduced after three years enabling providers to have a total of six year's business from the framework agreement, subject to performance.
32. The Electronic Time Management System commissioned by the Council will be used to monitor the contract. The Council intends to introduce an outcomes module as part of this system, which will enable the achievement of outcomes for each service user to be reported by the care worker. The Placement Team can carry out validation visits to service users to check whether these outcomes have been achieved.

*Opportunities for Innovation and/or Collaboration with Others*

33. An innovative outcomes based approach is being proposed to deliver future home care services in Oxfordshire, moving away from the existing time and task approach. There will be incentives for providers to achieve independent living outcomes for service users. The County is currently considering incentivisation options, with the aim of introducing an approach that is easily understood and simple to administer.

<b>Children Education and Families</b>	There is an opportunity to collaborate with Children Education and Families and include home care suppliers for children (as a separate 'Lot'). Currently the Approved Provider List includes home care for children, but it has not been well used. Discussions have taken place with Children Education and Families to generate interest from the market and develop processes for better utilisation of these services.
<b>Other Local Authorities</b>	Oxfordshire has been exploring opportunities for collaboration with neighbouring authorities, in particular Buckinghamshire and Northamptonshire. Discussions have already taken place with both authorities. Buckinghamshire is due to re-commission their home services and introduce new contracts from March 2016. Although it may not be possible to jointly commission home care services it should be possible to work jointly to align the commissioning processes and develop the market.
<b>Providers and service users</b>	Oxfordshire has undertaken a programme of engagement with the provider sector to understand their concerns and to obtain feedback on how to improve the capacity and capability of the care market. The County is also undertaking an engagement process with groups of service users or those who represent service users. Oxfordshire is working closely with Oxfordshire Association of Care Providers, which has been established with grant aid from the Council, to support the care sector.
<b>Health</b>	The Clinical Commissioning Group is involved in the Project Group for the Help to Live at Home service. The intention is that Continuing Health Care funding will fund those service users who require delegated health care tasks. Care workers will received training for these tasks in accordance with the Shared Care protocol, which is a document sets out health care tasks that can be delegated to care workers.

*Benefits*

34. The benefits of the preferred option are as follows:
- As a result of having fewer providers the Council can guarantee a certain level of business and enable providers to employ staff on guaranteed hours to deliver the capacity required;
  - To ensure sufficient capacity to deliver services the Council will encourage sub-contracting arrangements;

- Through having a relationship with fewer providers the Council will be able to develop and shape the future care market more effectively;
  - Incentives will help providers move to an outcomes based approach as it will be in their interests to introduce such a change;
  - Ultimately the overall costs of home care should not increase at the same rate as the current model, as people will become independent more quickly;
  - Through having a relationship with fewer providers the Council has the opportunity of supporting these providers to identify the training needs of their workforce and to increase capacity to meet future demand.
35. There are also considerable benefits for service users, including;
- Enabling them to become as independent as possible and lead a more fulfilling life;
  - Engaging service users with other support services including local community services as well as other support available locally e.g. good neighbours;
  - Reducing the costs of care for those that make a financial contribution to their care package.

*Critical Success Criteria*

36. The critical success factors for the preferred option are as follows:
- Generating the level of capacity needed for the future, particularly in rural areas.
  - Meeting enhanced response targets to start or restart urgent care packages within 24 hours, as well as planned care packages within 48 hours.
  - Reducing the length and intensity of care packages, where individuals have developmental needs.
  - Preventing people moving into care homes by providing a responsive community alternative.
  - Reducing the number of non-elective admissions to hospital.
  - Reducing the overall cost projections for care packages under the current model.

*Tolerances and Constraints/Risks*

37. The main constraint involves changing a culture where care staff work on the basis of a task and time approach, to that where staff work on the basis of outcomes. This change will require staff to develop new ways of working. As the Council will be contracting with fewer providers it will be easier to communicate the new approach. However, there are a large number of care workers to train in this new way of working and the resources available for such training may be limited.
38. The strategic risks are as follows:
- The Council may be unable to meet its statutory requirements due to only having a few providers
  - Insufficient resources to train staff to deliver an enabling approach

39. The operational risks are as follows:
- Too few providers to deliver the capacity required (this could be mitigated through sub-contracting)
  - Risks where the selected providers become financially unviable or are suspended due to safeguarding issues

#### *Social Value*

40. The procurement of the service will involve an assessment of social value that a provider could offer. Social value will form one of the award criteria for the contract. Providers will have an opportunity to include proposals such as the use of apprenticeships, sub-contracting with Small and Medium sized Enterprises or other aspects that may enhance the social value of their bids.
41. The procurement of the home care service itself is intended to add social value, as an outcomes based approach will enable people to live more fulfilling lives and will help to reduce isolation by linking people into community services.

#### *Affordability*

42. In assessing affordability it will be necessary to take account of the impact of home care on the whole system. Home care, including home care provided within an extra care housing setting, can prevent people from moving into a care home as well as prevent non-elective admissions to hospital. The prevention of admissions to care homes will have a direct impact on the spend from the pooled budget, whilst the spend on hospital admissions sits outside the pool.
43. Over the past three years the number of admissions to care homes has increased, and is likely to continue to do based on population forecasts, showing nearly a 40% projected increase over the next 10 years of people aged 85 or above.

Admissions	Residential Care Homes	Nursing Homes
2011-12	240	311
2012-13	237	345
2013-14	259	367

Data sourced from OCC Performance & Information team – Joint Commissioning

44. An outcomes based home care service has the potential to reduce the length and intensity of a care package. If the number of admissions to care homes can be reduced by 10% each year then savings of £1.1m p.a could be generated.
45. This analysis does not include the benefits to the health system, in particularly delaying or preventing, admissions and speeding up discharge. A home care services which is based on outcomes and incentivisation should motivate

providers to take steps to prevent client 'falls', as well as promote the installation of assistive technology. Also dementia training will enable care workers to identify dementia earlier and understand what steps need to be taken. The reduction of costs to the health service may be considerable.

## **5. Commercial Aspects**

### *Outcomes Based Specification*

46. The service specification will require home care to deliver personal outcomes for service users. There will be two types of outcomes:
  - Developmental outcomes
  - Maintenance outcomes
47. The service specification will include key performance indicators for both these outcomes. The key performance indicators relating to developmental outcomes could include the reduction of and length of time for care packages. The key performance indicators relating to maintenance outcomes could include the proportion who end up in residential care and are admitted to hospital.
48. The Council is currently carrying out work to incorporate outcomes into the social care assessment forms. These outcomes may be a mixture of predetermined outcomes and free text outcomes related to the needs of service users.

### *Sourcing Options*

49. As the Council wants to contract with fewer providers, a framework agreement provides the most flexible arrangement in terms of procurement. The Council intends to enter into a framework agreement with selected providers and then call off services using a cost and volume contract. The intention is to guarantee providers business, subject to delivery.
50. The selected providers will be called off from the framework agreement for a minimum number of hours within each locality. This approach will enable the Purchasing Team to deploy the capacity in the most efficient way so that productivity is increased (i.e. reduce the amount of travel time). The Council is currently exploring the most appropriate IT system to effectively manage the scheduling of care packages with providers to increase productivity.
51. The proposed Lots for the framework agreement are shown below (based on District/City Council boundaries). There is a separate Lot for home care provided within an Extra Care Housing setting, as some providers only supply this type of service. There is also a Lot for home care for CEF, where it is estimated that there is a demand for 3 or four providers working across the County specifically with children.



	<b>Zone 1</b>	<b>Zone 2</b>	<b>Zone 3</b>	<b>Zone 4</b>	<b>Zone 5</b>
<b>Home care (adults)</b>	Up to 5	Up to 5	Up to 5	Up to 5	Up to 5
<b>Extra care housing</b>	Up to 10 providers				
<b>CEF</b>	3 or 4 providers				

52. Some capacity could be reserved for mini-competitions where there are highly complex packages for certain individuals requiring a high intensity of staffing. Where this is the case the Council would carry out a mini-competition with providers in the relevant zone.
53. One of the problems with a conventional framework agreement is that providers are fixed for the term of the framework, unlike a dynamic purchasing system (where providers can be refreshed). The home care market can change over time, with excellent providers becoming less effective and businesses going into liquidation. The Council will have the ability to suspend providers from the framework agreement and, where necessary, terminate the agreement. However this will impact on the capacity of the framework agreement.
54. Therefore, it is proposed that the Council procures a dynamic framework agreement. This is a hybrid arrangement whereby an individual Lot can be opened up to the market, should the number of providers reduce. This may not happen that often, but will allow the Council the ability to refresh individual 'Lots' without needing to retender the whole framework agreement.
55. This approach has been discussed with legal services who consider that such an approach falls within the new 'light touch' EU regime that covers social care. More detailed work will need to be carried out with legal services, including the process for refreshing the framework agreement.

#### *Payment Mechanisms*

56. Providers will be paid on the actual hours that are delivered against the contracted number of hours set out in the call off order placed. Providers will be able to submit different hourly rates for each locality to take account of the variations in the employment market across the County.
57. In addition providers will receive an incentive where individuals achieve their outcomes and become more independent. The Council is also considering the use of penalties, where a care provider does not pick up a package in the required timescale.

#### *Risk Allocation and Transfer*

58. Although some authorities have transferred the risk of incentives to providers (for example an 80% upfront payment, with a further 20% payment related to

the achievement of outcomes), this arrangement will not be appropriate for Oxfordshire. The analysis of the care market in Oxfordshire shows that there is very little appetite to increase capacity, unless there is guaranteed work at very little risk to the provider. Although penalties could be introduced for non-performance, this market would not respond favourably should financial risks be shared in relation to the achievement of outcomes.

### *Contract Length*

59. Providers will be contracted onto the framework agreement for a four year term, with an option to extend for another two years. The initial cost and volume contracts will be called off for three years to give providers some security over future business. At the end of the three year term the Council could have an option of extending the contracts for further three years, only for those that have performed effectively during the term of the initial call off.

### *Staffing Implications*

60. There are unlikely to be TUPE implications due the fact that most care staff are employed on zero hours contracts (Skills for Care data shows 53% of the workforce). Furthermore, we have been advised that due to the fragmented nature of the work those that are employed on guaranteed hours are unlikely to create TUPE implications.

## **Equalities Assessment**

61. There has been a Service and Community Impact Assessment carried out for the implementation of the proposed framework. This assessment has identified that the majority of existing service users will not be adversely affected by any changes. There is likely to be a positive impact, as existing and new service users will be supported to maximise their independence and well-being.

### Implementation Timescales

<b>Tasks</b>	<b>Dates</b>
Joint Management Group	February 2015
Commercial Services Board	February 2015
Soft Market Testing	January - May 2015
Project Group Meetings	January - July 2015
Development of tender documents	March - July 2015
Tender process	July-September 2015
Evaluation	October 2015
Award	December 2015
Contract start	April 2016

**RECOMMENDATION**

62. It is recommended that Cabinet agrees the proposed Oxfordshire model for home care

JOHN JACKSON  
Director of Adult Social Services

Contact Officer: Shaun Bennett: Commercial Services and Market Development  
Manager

May 2015

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Division(s):
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## **CABINET – 26 MAY 2015**

### **SECTION 75 AGREEMENT WITH OXFORDSHIRE CLINICAL COMMISSIONING GROUP FOR 2015 – 2016**

#### **Report by Director of Adult Social Services**

#### **Introduction**

1. The purpose of this report is to seek approval for variations to the legal agreement under Section 75 of the NHS Act 2006 that governs the existing formal joint working arrangements and pooled budgets between Oxfordshire Clinical Commissioning Group and Oxfordshire County Council from April 2015 onwards.
2. This is a standard annual process that updates the agreement between Oxfordshire Clinical Commissioning Group and Oxfordshire County Council in respect of the pooled budgets.
3. The report sets out
  - (a) How the variations to the pooled budget agreement would better support the delivery of Health & Wellbeing Board targets, and support the joint response to national and local strategic challenges.
  - (b) How the pooled budget agreement will monitor and assure the impact of the Better Care Fund and outcomes based contracting for mental health and older people and ensure compliance with the requirements of the Care Act 2014.
  - (c) How the pooled budget agreement would support the development of effective integrated commissioning in Oxfordshire

#### *Background*

4. Section 75 of the National Health Services Act 2006 contains powers enabling NHS Bodies to exercise certain local authority functions and for local authorities to exercise various NHS functions. This in turn enables better integration of health and social care, leading to a better experience and outcomes for patients and service users.
5. Oxfordshire County Council has an existing agreement under Section 75 with Oxfordshire Clinical Commissioning Group to pool resources and deliver shared objectives, often referred to as “pooled budgets”. This agreement covers services for Older People, people with Physical Disabilities, people with Learning Disabilities, and people with Mental Health needs. The appendices to that agreement set out how the pooled budgets operate.
6. The current agreement runs until March 2016 and stipulates that the schedules should be revised and agreed annually. There are a number of areas that should be reviewed as part of the annual review

- (a) The level of contribution each organisation makes
  - (b) The way that risk is shared
  - (c) The performance of the pooled budgets in terms of meeting its key performance indicators
7. Internal audits carried out within both the County Council and Oxfordshire Clinical Commissioning Group have also identified a number of areas in relation to delegation of decision-making and clarity of administrative arrangements that require a number of detailed changes to improve governance
8. The parties are also proposing variations to the existing joint working arrangements, to ensure even greater integration of health and social care, best use of resources, and improved outcomes for the people of Oxfordshire.

### **Delivery of key strategic objectives**

#### *Health & Wellbeing Board Objectives*

9. The Joint Health and Wellbeing strategy 2012/2016<sup>1</sup> has identified three key priorities for adult health and social care
- Priority 5:** Living and working well: Adults with long-term conditions, physical disabilities, learning disabilities or mental health problems living independently and achieving their full potential
- Priority 6:** Support older people to live independently with dignity whilst reducing the need for care and support
- Priority 7:** Working together to improve quality and value for money in the Health and Social Care System
10. Although predominantly these pools cover adult services the mental health pooled budget supports the delivery of the four key priorities for children and young people through children and adolescent mental health services
- Priority 1:** Giving all children a healthy start and enabling them to stay healthy into adulthood
- Priority 2:** Narrowing the gap for the most disadvantaged and vulnerable groups
- Priority 3:** Keeping all children and young people safe
- Priority 4:** Raising achievement for all children and young people
11. The pooled budgets are required to support the delivery of these local priorities as well as ensuring that Oxfordshire delivers its national targets. The rewritten schedules of the section 75 agreement outline how each budget addresses these priorities and outline a series of outcomes that the budget is aiming to deliver.

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<sup>1</sup> Oxfordshire's Joint Health & Wellbeing Strategy 2012 – 2016 (Final Version July 2012, Amended July 2013)

12. Delivery of the Health & Wellbeing Board priorities is supported by a number of joint commissioning strategies that are either already under review or are due for review in the coming year.
  - (a) Learning Disabilities: A jointly developed strategic plan is under consultation and a new strategic approach to commissioning will be in place from March, with reshaped services due to start in January 2016.
  - (b) Child and Adolescent Mental Health: The current commissioning strategy ends in 2016 and a review and redesign process is already underway and due for completion by the end of 2015.
  - (c) Mental Health: The current strategy expires in March 2015. A review and redesign process is underway.
  - (d) Physical Disability: The current strategy expires in March 2016
  - (e) Carers: The current strategy expires in 2015 and a refresh is in progress
  - (f) Older People: The current strategy expires in March 2016
  - (g) Autism: The current strategy expires in 2017
  - (h) Information and Advice: The current strategy is under review and a new strategy is due by July 2015.
13. The Health and Wellbeing Board priorities are also due to be refreshed during 2015/2016.
14. It is Oxfordshire County Council and Oxfordshire Clinical Commissioning Group intention to review these strategies alongside each other and in the light of any changes to the Health & Wellbeing Board priorities. We will use this review to establish clear outcome measures that assure the delivery of these joint strategies.
- Implementation of the Oxfordshire Better Care Fund*
15. It is a national requirement that a mechanism is developed to host, monitor and assure delivery of schemes within the Better Care Fund.
16. It is proposed that the Better Care Fund is hosted within the Older Peoples Pooled Budget as a separate line within the budget. The Older Peoples' Joint Management Group will receive regular reports against
  - (a) Spend against the Better Care Fund
  - (b) Implementation of the 11 schemes within the Better Care Fund
  - (c) Performance of those schemes
17. The management of the Better Care Fund will be overseen by the newly established System Resilience Group which comprises the Chief Officers and Medical Directors of OCC, OCCG, Oxford University Hospitals Trust, Oxford Health NHS Foundation Trust, primary care and key partners in the independent sector.
18. Reports to the Older Peoples' JMG received in relation to the Better Care Fund as set out in paragraph 18 will be copied to and form the basis of the reports to the System Resilience Group. Those voting members from the JMG who sit on the System Resilience Group will be mandated to

- (a) Represent the JMG in the monthly System Resilience Group and ensure that the objectives of the pooled budget are enabled in the wider health and social care system
- (b) Ensure that the requirements of the wider System Resilience Group are represented in the JMG discussions and that the pooled budget supports wider system transformation through the delivery of the Better Care Fund
- (c) Make appropriate interim decisions to support the delivery of the BCF as approved by JMG and in line with the delegation protocols set out at Appendix One

*Implementation of outcomes based contracting for Mental Health*

19. The development of outcomes based contracting for mental health is wholly within scope of the Mental Health Pooled Budget. The outcomes based contract is planned to commence in April 2015 and will be managed by Oxfordshire Clinical Commissioning Group on behalf of the parties. Oxfordshire County Council may be a signatory to the contract.
20. The outcomes based contract performance will be reported into the mental health JMG which will have oversight of the impact and quality performance of this innovative contracting approach.

*Development of outcomes based contracting for Older People*

21. The development of outcomes based contracting for older people is partly within scope of the Older Peoples Pooled Budget. The outcomes based contract is under development and will be managed by Oxfordshire Clinical Commissioning Group on behalf of the parties. Oxfordshire County Council may be a signatory to the contract.
22. The outcomes based contract performance will be reported into older people JMG which will have oversight of the impact and quality performance of this innovative contracting approach.

*Supporting the development of integrated commissioning*

23. There have been several benefits derived from the joint commissioning arrangements that have been facilitated by the s75 pooled budget agreement:
  - (a) The development of the single integrated outcomes based contract for mental health services
  - (b) The response to the Transforming Care programme and local concerns that is in development in the Learning Disability Big Plan
  - (c) The decision to move to joint purchasing arrangements and integrated care teams within the Older People's pooled budget
24. However, there remain some blocks to the potential of the pooled budget approach:
  - (a) The focus on risk share management as opposed to the development of a single commissioning fund for older people
  - (b) The impact of services that are commissioned outside of the pooled budgets, but which impact upon them, or to which the pooled budget need to have a more defined relationship



25. There are a number of these key external dependencies:
- (a) Acute health care commissioned by OCCG. Services commissioned from the Older People's pooled budget in particular are both impacted by issues in the urgent care system and need to support the performance of that system.
  - (b) Services commissioned by OCC (Public Health), especially in relation to health promotion, drug and alcohol services which impacts especially on mental health pooled budget commissioned services
  - (c) Services for children and young people with disabilities and/or special educational needs (including up to 25 years old).
  - (d) Services for Looked After Children and those on the edge of care.
  - (e) General needs housing provision and services for homeless people commissioned by both Oxfordshire Clinical Commissioning Group, Oxfordshire County Council, and District Councils
  - (f) Primary care services commissioned by NHS England, and services co-commissioned between NHS England and Oxfordshire Clinical Commissioning Group
  - (g) Specialist health services commissioned by NHS England that impact on the performance of services commissioned from the pooled budgets: e.g. impact of forensic services on Learning Disability or Mental Health
26. This model of commissioning fragments care pathways. The principle of integrating commissioning would be to ensure that the system can collectively commission for better outcomes for Oxfordshire residents and deliver better value for the public purse."This fragmentation also puts additional administrative costs (particularly back-office costs) into the system.
27. During 2015/16 Oxfordshire County Council and Oxfordshire Clinical Commissioning Group will be looking to develop a greater level of integration. Any proposals that impact on the current pooled budget would be subject to formal agreement re variations.
28. In the interim there are a number of proposals within the current paper that are designed to support the development of a more integrated approach.

### **Proposed Changes to the Pooled Budget agreement for 2015/16**

29. The existing agreement sets out the mechanisms by which the contributions from the Oxfordshire County Council and Oxfordshire Clinical Commissioning Group are managed and used. It details the aims and objectives of the pooled funds, the services that will be commissioned, the governance arrangements and agreement between the partners for management and contractual arrangements.
30. The schedules to the agreement are in *Appendix One*. These have been rewritten to provide greater clarity about pool eligibility, about service scope

and nature, and about pool management and governance, including delegation. The key changes are set out below

31. An integrated purchasing approach will be developed by the Partners. This will focus on care homes, and home support services. All purchasing of these services will be carried out by a single purchasing team, using County Council procedures and financial assurance.

*Financial decision making*

32. The respective Joint Management Groups are responsible for the allocation of budget to cost centres. Budget holders are responsible for delivering the agreed strategy within their allocated budget.
33. The pooled budget manager retains an overview of the combined budget and performance situation and this will be reviewed in detail at a Pooled Budget Officers Group on a monthly basis.
34. The move to full risk share arrangements mean that decisions to spend beyond budget have implications for both organisations. This means that exceptional decisions for expenditure which contribute to strategic direction but have not been budgeted for will be taken jointly.
35. Any decisions which will cause expenditure to exceed budget should be agreed by both Oxfordshire County Council and Oxfordshire Clinical Commissioning Group through Joint Management Group meetings on the advice of the Pooled Budget Officers Group, and will need to be within the Oxfordshire County Council and Oxfordshire Clinical Commissioning Group Financial Procedure Rules.
36. Urgent decisions which need to be taken outside Joint Management Group meetings (e.g. to support the management of urgent issues across the wider health and social care system) will be confirmed by email from the voting members in each organisation to the pooled budget manager.
37. The requirement to meet statutory duties and keep people safe means that overspends on care packages (in either health and/or Adult Social Care) can arise due to demand above forecast levels.
38. Such decisions cannot wait until Joint Management Group meetings to be determined, so it is anticipated that Joint Management Groups will give advance approval to a level of commitment of spend above budget in these areas. A decision on virement of budget or remedial action will then be taken at the following Joint Management Group meeting.
39. Any overspends will need to be offset by underspends elsewhere, and Joint Management Groups will consider and approve virements to move the funding between budgets to reflect this within Oxfordshire County Council and Oxfordshire Clinical Commissioning Group Financial Procedure Rules. The finance report to Joint Management Group meetings will include recommendations on virements.

40. The Council has delegated greater responsibility for managing expenditure on individual purchasing to staff who are taking the day to day operational decisions. The Council's commissioning budgets will continue to be held by staff in the Joint Commissioning Team. The Clinical Commissioning Group will have arrangements in place to oversee the management of the budgets they are responsible for. The combined position for operations, social care commissioning and health commissioning will be brought together at the monthly Pooled Budget Officers Group
41. The Pools will now be operated through the budget holders (whether Commissioning or Operations staff) with responsibility sitting at that Service Manager level. There will be an expectation that all budget holders manage within the budget allocated to them, including the health budgets, in line with the strategy agreed by the respective Joint Management Group.
42. The pooled budget manager for each pool will retain oversight of the pool as a whole and retain responsibility for the submission of finance and performance reports to Joint Management Group meetings. They will be responsible for chairing the Pooled Budget Officers Group and ensuring there is a clear understanding of finance, performance and risk across health and social care.
43. In exceptional circumstances one party may choose to agree expenditure at its own risk, without seeking prior agreement of the other party. In these circumstances the decision to commit this money with one partner taking 100% of the financial risk will be made clear in writing to the pool manager. A decision on risk-sharing may then be taken at a subsequent Joint Management Group meeting

*Performance*

44. The Pooled Budget Officers Group has developed a framework for reporting on activity and performance that standardises the approach across the pooled budgets which will be used to assure JMG regarding the management of financial risk and the delivery of our strategic objectives.
45. During 2015-16 this Group will continue to develop this framework to improve integrated reporting that maps the outcomes and costs for people across those services commissioned from pooled budgets.

*Contract management and quality*

46. The internal audit carried out for OCCG has identified a number of issues relating to the governance around delegated authority arising from the lead commissioner arrangements.
47. The main principle is that the lead commissioner holds the pooled budget and will commission and contract for the necessary health or social care services on behalf of the other party.
48. This leads to a number of changes and clarifications as follows:

- (a) The delivery of social care functions for adults with mental health needs will be incorporated in the single outcomes based contract for mental health. The actual functions will be carried out in accordance with the s75 NHS Act Provider agreement between OCC and Oxford Health NHS Foundation Trust which will be aligned to the contract and form part of it as a document relied upon. OCC will be a signatory to the outcomes based contract and will support OCCG with the assurance re the delivery of social care functions.
- (b) Placements of people funded by Continuing Healthcare and via the budget to support the rehabilitation of people living with acquired brain injury are contracted through OCC. OCCG will support OCC in the delivery of these contracts by commissioning case management for people supported by these budgets, and by supporting the quality monitoring function in relation to healthcare needs.
- (c) The present consultation on the Learning Disability Big Plan proposes that people living with learning disability might receive their health care within mainstream services. If this is borne out then arrangements may have to be developed for OCCG to contract for those services on behalf of the pooled budget
- (d) In the interim, OCC continues to commission specialist health services for people living with learning disability. OCCG will support OCC in the quality monitoring function in relation to those services.

*Supporting more integrated approaches to commissioning*

- 49. Oxfordshire County Council has produced three market position statements (care homes, home support services, and extra care housing)<sup>2</sup>. These set out current purchasing practices, the understanding of demand, and how that demand may change in the short to medium term. We also outline current trends and our plans for commissioning across all service user groups.
- 50. It is the intention of Oxfordshire County Council and Oxfordshire Clinical Commissioning Group to produce joint market position statements for care homes and home support in 2015 / 2016 and to adopt a joint purchasing approach. This approach should both support greater efficiency particularly in relation to Continuing Healthcare expenditure, and begin to address the challenge of developing and retaining a local carer workforce with the skills and flexibility that enables more people to live successfully in the wider community.
- 51. The parties will explore further opportunities for the delivery of more integrated approaches to commissioning during 2015/16.

**Risks**

- 52. Failure to agree new arrangements would significantly impact on both partners ability to ensure appropriate services are commissioned to meet people's needs across all client groups.

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<sup>2</sup> [www.oxfordshire.gov.uk/cms/public-site/information-providers](http://www.oxfordshire.gov.uk/cms/public-site/information-providers)

53. Failure to work together to develop and deliver coherent joint commissioning strategies will result in the failure to achieve financial efficiencies and better performance across the whole system.
54. The Learning Disability pooled budget shows a significant overspend and detailed operational plans have been developed to address this and manage overall reduction in spend in this pool over the next three years. This process is governed by a Joint Oxfordshire County Council and Oxfordshire Clinical Commissioning Group Commissioning/Savings Board that reports to the JMG and is chaired by the Cabinet Member for Adult Social Care.

### **Financial and Staff Implications**

55. The full financial implications to the Council are set out in the draft agreement, in particular Schedule 3. The Councils financial contribution will be amended from that set out in the budget agreed by Council on 17<sup>th</sup> February 2015.
56. It is proposed that the Physical Disability Pool and Learning Disability Pool will now include the County Council client contribution budgets. This mirrors the current agreement within the Older People Pool and Mental Health pool. There is no additional risk to the County Council from this proposal. Cabinet is asked to approve the permanent virement of the Client Contribution budget for Physical Disability of £0.657m into the Physical Disability Pool. Cabinet is asked to recommend to Council to approve the permanent virement of the Client Contribution budget for Learning Disability of £5.481m into the Learning Disability Pool.
57. The Older People Pool contributions have moved considerably from the previous year due to the inclusion of the Better Care Fund and Funding in relation to the Care Act. The Clinical Commissioning Group and the County Council have agreed to reduce the risk each party is exposed to by excluding the expenditure associated with these changes from the risk share. This means that the County Council is responsible for expenditure on the Care Act and the Clinical Commissioning Group is responsible for the Better Care fund expenditure.
58. Accounting for the Better Care Fund is complicated and not fully resolved. It is proposed that technical changes to budgets arising from changes in accounting should be delegated to the Chief Finance Officers for Oxfordshire County Council and Oxfordshire Clinical Commissioning Group.
59. Although the County Council agreed their contributions in February, the Clinical Commissioning Group agree contributions to a later timescale. This means that more recent information can now be used in setting the contributions. The Outturn on the Older People pool is an underspend of £0.8m. Based on this, there has been agreement to jointly reduce the contribution to the Older People pool by £1m. This reduces the County Council contribution by £0.53m. The reduction will be held in the Council's contingency budget which is to cover possible rising demand in Social Care as outlined in the Chief Finance Officer's report to Council on February 17<sup>th</sup>.

Cabinet is asked to approve a reduction in the contribution to the Older people's pool by £0.53m and a temporary virement of this amount to the Strategic Measures.

## **Equalities Implications**

60. In line with the Council's Equality Policy 2012-2016, a Service and Community Impact Assessment has been completed to consider the implications of the Section 75 Agreement for all client groups.
61. There are not considered to be any direct implications of this agreement on individuals, communities, staff or providers of services as the agreement does not vary significantly from previous agreements and is essentially a mechanism for the delivery of joint commissioning strategies.
62. These joint commissioning strategies are all developed following significant consultation with clients, the public, providers and organisations involved in the commissioning and delivery of services. In most cases they are specifically targeted at improving outcomes for more vulnerable people, and each has its own impact assessment.
63. Similarly, individual impact assessments are completed for all commissioning activity, service changes and contracts awarded linked to the development and delivery of the joint commissioning strategies. Where appropriate, the outcomes of these assessments are reported to Cabinet to inform decision-making on new policies, contracts and service changes.

## **RECOMMENDATION**

64. **The Cabinet is RECOMMENDED to**
  - (a) **approve the proposed changes to the pooled budget arrangements with Oxfordshire Clinical Commissioning Group, including changes to the Section 75 Agreement for All Client Groups (as set out in Annex 1) to reflect this, subject to the inclusion of any necessary changes in the text as agreed by the Director of Adult Social Services after consultation with the Cabinet Member for Adult Social Care**
  - (b) **approve the permanent virement of £0.657m into the Physical Disability Pool in respect of physical disability client contribution budgets as discussed by the physical disability JMG**
  - (c) **RECOMMEND to County Council the permanent virement of £5.481m into the Learning Disability Pool in respect of learning disability client contribution budgets as discussed by the learning disability JMG**
  - (d) **Delegate authority to the Chief Finance Officers of Oxfordshire County Council and Oxfordshire Clinical Commissioning Group to**

**agree and implement technical changes in the accounting treatment for the Better Care Fund**

- (e) Cabinet is asked to approve a reduction in the contribution to the Older people's pool by £0.53m and a temporary virement of this amount to the Council's Strategic Measures budget.**

JOHN JACKSON  
Director of Adult Social Services

Contact Officer: Benedict Leigh, Strategic Commissioner (Adults)

February 2015

## Annex One: Revised Section 75 Schedules

### Schedule 1

#### The Pooled Funds

1. The four pooled budgets are set out below and are intended to deliver the Oxfordshire Health and Wellbeing Board Priorities for specific care groups. The Health and Wellbeing Board has developed and published a Joint Health and Wellbeing strategy covering 2015/2016 which guides the joint commissioning work of Oxfordshire County Council and Oxfordshire Clinical Commissioning Group.
2. This has identified three key priorities for adult health and social care
  - **Priority 5:** Living and working well: Adults with long-term conditions, physical disabilities, learning disabilities or mental health problems living independently and achieving their full potential
  - **Priority 6:** Support older people to live independently with dignity whilst reducing the need for care and support
  - **Priority 7:** Working together to improve quality and value for money in the Health and Social Care System

#### A OLDER PEOPLE POOLED FUND

1. The Older People Pooled Fund shall consist of contributions from Oxfordshire County Council and Oxfordshire Clinical Commissioning Group to commission services for older people.
2. Oxfordshire County Council shall be the Host Partner for the Older People Pooled Fund. The Services delivered shall be the social care services and specialist health services for older people as more particularly described in Schedule 2.
3. Oxfordshire County Council shall be the Lead Commissioner for some elements of these Services and the Oxfordshire Clinical Commissioning Group shall be the Lead Commissioner for other elements of these Services. The division of responsibility for the commissioning of these Services is set out in Schedule 2.
4. The aim of the Older People Pooled Fund is to use resources efficiently to commission a range of health and social care services which enable older people to live independent and successful lives that are healthy and personally and socially fulfilling.
5. The Older People Pooled Fund will be used for commissioning a range of services for all client groups where the majority of users are older people (for example support for carers, equipment, reablement). See Schedule 2 for more detail.



**B LEARNING DISABILITY POOLED FUND**

1. The Learning Disability Pooled Fund shall consist of contributions from Oxfordshire County Council and Oxfordshire Clinical Commissioning Group to commission services for adults with learning disabilities
2. Oxfordshire County Council shall be the Host Partner for the Learning Disability Pooled Fund and shall act as Lead Commissioner for social care services and specialist health services for adults with a learning disability as more particularly described in Schedule 2.
3. The aim of the Learning Disability Pooled Fund is to use resources efficiently to commission a range of health and social care services which enable adults with learning disabilities to live healthy, active lives in their local communities.

**C MENTAL HEALTH POOLED FUND**

1. The Mental Health Pooled Fund shall consist of contributions from Oxfordshire County Council and Oxfordshire Clinical Commissioning Group to commission specialist and targeted mental health services for children and young people, and mental health and well-being services for adults aged 16 and above with functional mental health problems .
2. Oxfordshire Clinical Commissioning Group shall be the Host Partner for the Mental Health Pooled Fund and shall act as Lead Commissioner for social care services and specialist health services for children, young people and adults over the age of 16 with mental health needs as more particularly described in Schedule 2
3. From time to time the mental health pool commissions individual social care packages of care including placement in residential accommodation. These interventions are commissioned by the Oxfordshire Clinical Commissioning Group as lead commissioner on behalf of Oxfordshire County Council. Oxfordshire Clinical Commissioning Group shall conduct the procurement process for such care packages in consultation with Oxfordshire County Council but the contracts associated with such care packages shall be held and managed by the Oxfordshire County Council in line with the Fair Access to Care charging regulations
4. The aim of the Mental Health Pooled Fund is to use resources efficiently to commission a range of health and social care services which achieve better outcomes for people of all ages living with mental health problems.

**D PHYSICAL DISABILITY POOLED FUND**

1. The Physical Disability Pooled Fund shall consist of contributions from Oxfordshire County Council and Oxfordshire Clinical Commissioning Group to commission services for adults with physical disabilities

2. Oxfordshire County Council shall be the Host Partner for the Physical Disability Pooled Fund and shall act as Lead Commissioner for social care services and some health services for adults with a physical disability as more particularly described in Schedule 2.
3. The aim of the Physical Disability Pooled Fund is to use resources efficiently to commission a range of health and social care services which enable adults with physical disabilities to live healthy, active lives in their local communities.

## Schedule 2

### The Services

All Services may be purchased through individual spot contracts, block contracts, framework contracts, personal budgets or Direct Payments.

#### 1. Area Covered

- 1.1 Patients and service users may be referred if they are the responsibility of Oxfordshire Clinical Commissioning Group or Oxfordshire County Council's Social & Community Services, being people ordinarily resident in the County of Oxfordshire and/or registered with a general practice that is part of Oxfordshire Clinical Commissioning Group.
- 1.2 From time to time, there may be prospective Clients who seek referral or are referred by other professionals who are not resident within the area of Oxfordshire County Council as not all of the Oxfordshire Clinical Commissioning Group boundaries are within the Oxfordshire County Council boundary. In those cases, they will be dealt with on a case by case basis through negotiation with the neighbouring Local Authority and Clinical Commissioning Group and according to existing national guidelines on district of residency and delegation of NHS functions.
- 1.3 It should be noted that while some patients in Thame and Shrivenham fall outside the boundaries of Oxfordshire Clinical Commissioning Group, they are within the Oxfordshire County Council administrative boundary and Social & Community Services funding for these areas is provided within the current Pool.

#### 2. Eligibility

- 2.1 All prospective Clients shall be assessed under the Integrated/Joint Assessments Process. Without prejudice to the Integrated/Joint Assessments Process, the following individuals will be eligible for services purchased by the Council:
  - 2.1.1 Any Person who meets the National Framework for Continuing Health Funding Criteria for adults/older people (introduced on 1 October 2007)
  - 2.1.2 Any person who meets the Funded Nursing Care ('FNC') criteria as laid down by the Department of Health from time to time
  - 2.1.3 Any person who does not need to be in an acute NHS and community beds but cannot return home for any reason and requires a temporary stay in a residential or nursing home
  - 2.1.4 Any person who meets the criteria for intermediate care as agreed from time to time
  - 2.1.5 Any person who has identified health care tasks undertaken by care workers as part of their care package as set out in the shared care protocol
  - 2.1.6 Persons assessed as having eligible needs under the Care Act criteria as agreed from time to time

- 2.2 Each pool is predominantly for people for a specific care group (as set out below).
- 2.3 In addition, there are small but significant numbers of people who do not fully meet the eligibility definition for each pool but who are eligible for an assessment from Oxfordshire County Council because of a combination of factors which render them vulnerable. There are also people with multiple issues that may render them eligible for support from more than one pool.
- 2.4 In the case of both these groups where it is deemed by Oxfordshire County Council and Oxfordshire Clinical Commissioning Group that a particular service is best placed to meet the needs of this group, assessment and social care services may be provided and purchased by the pool.
- 2.5 The best fit decision will take into account the needs of the individual, and the services best placed to meet those needs.
- 2.6 The decision about which pool is the best fit for any individual shall be taken by the Pool Manager, in consultation with either Strategic Commissioner Adults, Oxfordshire County Council (in the case of the Mental Health Pool) or Programme Manager Mental Health and Joint Commissioning, Oxfordshire Clinical Commissioning Group (in the case of Older People, Learning Disability, and Physical Disability Pools).
- 2.7 Older people*
- 2.7.1 This pool is predominantly for the provision of services to adults over the age of 65.
- 2.7.2 Many of the services commissioned from this pool are for all adult age clients but the majority of people benefiting from the services thus commissioned will be over the age of 65, including prevention and early support, information and advice, reablement, equipment and assistive technology.
- 2.7.3 Support for carers is commissioned from this pool for adults of all ages and children and young people.
- 2.8 Learning Disability*
- 2.8.1 This pool is predominantly for the provision of services to adults who have learning disabilities. People receiving services under this pool will usually present with
- A significantly reduced ability to understand new or complex information, to learn new skills (impaired intelligence), with
  - A reduced ability to cope independently (impaired social functioning),
  - Which started before adulthood, with a lasting effect on development.
- 2.9 Mental Health*
- 2.9.1 This pool is predominantly for the provision of services to adults aged 18-65 (but see 2.9.3 below) who meet the thresholds for care as defined in

the mental health care clusters, whether mild to moderate anxiety and depression (clusters 1-3), moderate to severe anxiety and depression (clusters 4-7), personality disorders (cluster 8) and psychoses (clusters 10-17). This will include those people who have a mental health problem in a co-morbid presentation with other conditions (such as autism, drugs or alcohol problems, physical health problems).

- 2.9.2 In addition people receiving services under section 117 of the Mental Health Act (1983) will also be funded from this pool. Where individuals falling under the remit of section 117 are the responsibility of Oxfordshire Clinical Commissioning Group but not of Oxfordshire County Council then only identifiable health needs will be funded from the pool.
- 2.9.3 The responsibility for social care needs will sit with the appropriate local authority. It will be the responsibility of the lead commissioner to negotiate this.
- 2.9.4 The mental health pool also commissions services for adults living with autism and leads on the delivery of the Autism Strategy
- 2.9.5 In addition the pool also funds targeted and specialist child and adolescent mental health services. These services:-
- target particular groups at risk of experiencing mental health problems
  - and provide specialist services to children and young people with complex, severe and / or persistent needs.

## *2.10 Physical Disability*

- 2.10.1 This pool is predominantly for the provision of services for adults between the ages of 18 and 64 who have a physical disability in line with the definition set out in the Equality Act 2010.
- 2.10.2 A person has a disability if:
- they have a physical or mental impairment
  - the impairment has a substantial and long-term adverse effect on their ability to perform normal day-to-day activities
- 2.10.3 For the purposes of the Act, these words have the following meanings:
- 'substantial' means more than minor or trivial
  - 'long-term' means that the effect of the impairment has lasted or is likely to last for at least twelve months (there are special rules covering recurring or fluctuating conditions)
  - 'normal day-to-day activities' include everyday things like eating, washing, walking and going shopping
- 2.10.4 This pool hosts the rehabilitation budget that is designed to support people recover when they have received an acquired brain injury. This health budget is deployed where there is a prospect of rehabilitation. Support from this budget continues until the service user achieves a level of independence or until there is no further prospect of improvement in their rehabilitation. In the latter case the service user may be supported from social care and/or alternative health commissioned services. Decisions under this heading are made by a dedicated panel jointly chaired by the partners.

### **3. Financial Assessment of Clients**

- 3.1 People receiving social care services through any of the Pooled Funds will receive a financial assessment and be charged in line with the Care Act 2013. There is no charge for NHS funded health provision.
- 3.2 The Joint Management Groups will be consulted about any changes to the charging policy.

### **4. Carers**

- 4.1 Carers are entitled to a carers' assessment in line with the Care Act 2013.

### **5. Market development and purchasing approach**

- 5.1 Market Position Statements will be developed by the Partners in consultation with service users, carers and other significant stakeholders. Market Position Statements will set out the current market and future needs of the population of Oxfordshire, and will inform the development and maintenance of a range of services to deliver the aims and objectives of the Joint Commissioning Strategies. This will help to maximise independence as far as possible, and assist people to lead independent lives with the minimum support necessary to maintain a reasonable quality of life.
- 5.2 An integrated purchasing approach will be developed by the Partners. This will focus on care homes, and home support services. All purchasing of these services will be carried out by a single purchasing team, using County Council procedures and financial assurance.

### **6. Contracts and quality**

- 6.1 The details of the Service will be specified in Service Contracts entered into by Oxfordshire County Council or where relevant the Oxfordshire Clinical Commissioning Group. These will include contracts to purchase 100% NHS health care.
- 6.2 Where health services are commissioned through the pools then the clinical quality of the service remains the responsibility of Oxfordshire Clinical Commissioning Group. Oxfordshire County Council will provide such information as is requested to support the assurance of clinical quality carried out by Oxfordshire Clinical Commissioning Group
- 6.3 Where social care services are commissioned through the pool then the quality of the service will be the responsibility of the partner contracting for the service. This responsibility can be delegated to either partner through formal agreement at the appropriate Joint Management Group
- 6.4 The parties will agree the performance and quality management and reporting processes for those contracts commissioned across the pooled budgets and

ensure that this information is made available via the respective joint management groups

## **A OLDER PEOPLE POOLED FUND**

This Schedule describes the Services to be provided to people eligible for support from the fund (as defined above).

Oxfordshire County Council will be the Lead Commissioner for the following Services:

- Prevention and early support services
- Information and advice services
- Support to carers
- Intermediate care
- Reablement
- Residential Care
- Nursing Care (Nursing Homes)
- Respite care
- Long-stay care in a registered or non-registered setting
- Other services designed to substitute for, or reduce the need for admission to, acute or long-stay care
- Support at home
- Personal Budgets, direct payments and brokerage
- Day Opportunities and transport
- Equipment and assistive technology
- Dementia support
- Support to people following a stroke
- Support to people with a sensory impairment
- Locality teams
- Hospital teams
- Sensory impairment

Oxfordshire Clinical Commissioning Group will be the Lead Commissioner for the following services:

- Community Rehabilitation
- Falls Service
- Aphasia (communication service)
- Community Hospitals
- Community and District Nursing
- Hospital at Home
- Care Homes Support Service
- Podiatry
- Home Oxygen Assessment Service
- Emergency Multidisciplinary Units
- Single Point of Access for Rehabilitation and Care (SPARC)
- Healthier at Home (Interface Medicine)
- Acute inpatient beds for older adults



- Support for older people with mental health needs in hospitals and their community including day services
- End of life care
- Support for people following a stroke
- Night services
- Supported Hospital Discharge Service
- Heart failure
- Respiratory Pulmonary rehabilitation
- Palliative Care (Hospices & Bereavement services and community matrons)
- Non-Emergency Patient Transport

Many of the services commissioned from this pool are for all adult age clients, including prevention and early support, information and advice, reablement, equipment and assistive technology. Support for carers is commissioned from this pool for adults of all ages and children and young people.

## **B LEARNING DISABILITY POOLED FUND**

This Schedule describes the Services to be provided to people eligible for support from the fund (as defined above).

All those community-based assessment and health and social care services that aim to meet the needs of people with a learning disability

Those physical and mental health services based in hospital that are designed to help people living with a learning disability return to the community with the maximum level of independence

Personal budgets in social care and health

Housing and housing support services for people with a learning disability

Employment services

Other services as may be necessary to meet eligible needs

These services and the outcomes they should meet are described in more detail in *The Big Plan; A Joint Commissioning Strategy for Adults with Learning Disabilities 2015-18* produced by Oxfordshire County Council and Oxfordshire Clinical Commissioning Group

## **C MENTAL HEALTH POOLED FUND**

This Schedule describes the Services to be provided to people eligible for support from the fund (as defined above).

All those community-based assessment and health and social care services that aim to meet the needs of people with mental health problems

Those physical and mental health services based in hospital that are designed to help people living with a mental health problem return to the community with the maximum level of independence

Personal budgets in social care and health

Housing and housing support services for people with mental health problems

Employment services

Other services as may be necessary to meet eligible needs

**Diagnostic and other services for people living with autism**

These services and the outcomes they should meet are described in more detail in the commissioning strategy *Better Mental Health in Oxfordshire* produced by Oxfordshire County Council and Oxfordshire Clinical Commissioning Group.

**D PHYSICAL DISABILITY POOLED FUND**

This Schedule describes the Services to be provided to people eligible for support from the fund (as defined above).

All those community-based assessment and health and social care services that aim to meet the needs of people with physical disability

Those physical and mental health services based in hospital that are designed to help people living with a physical disability return to the community with the maximum level of independence

Personal budgets in social care and health

Housing and housing support services for people with physical disability

Employment services

Rehabilitation services for people living with Acquired Brain Injury

Other services as may be necessary to meet eligible needs

These services and the outcomes they should meet are described in more detail in A *Joint Physical Disability Commissioning Strategy for Oxfordshire 2012-15* produced by Oxfordshire County Council and Oxfordshire Clinical Commissioning Group

**Schedule 3****Financial Resources****Purchase Contracts**

The details of the Service will be specified in Service Contracts entered into by Oxfordshire County Council or where relevant Oxfordshire Clinical Commissioning Group. These will include contracts to purchase 100% NHS health care.

**A OLDER PEOPLE POOLED FUND****1 Older People's Pooled Budget Contributions 2015-16**

Older People	Oxfordshire County Council	Oxfordshire Clinical Commissioning Group	Total
	£'000	£'000	£'000
Older People	69,600	112,247	181,847
Equipment	1,125	2,711	3,836
<b>Total</b>	<b>70,725</b>	<b>114,958</b>	<b>185,683</b>

The risk share is calculated at Gross expenditure rather than the net contribution shown in the table above. The Council's income target for Contribution Income ("Income Target") is therefore added to the net contribution to arrive at the Gross contribution for Risk Share purposes.

In addition the risk share is adjusted such that the County Council manages the risk of the Care Act funding and Oxfordshire Clinical Commissioning Group manage the risk for the Better Care Fund. The risk share is therefore as per the table below:

**2 Older People's Pooled Budget Risk Share 2015-16**

Risk Share	OCC	OCCG
	£'000	£'000
Contribution to OP Pool excluding. Care Act & Better Care Fund	68,462	90,285
add back income	- 18,956	
Risk shared contributions	87,418	90,285
% risk share (incl equipment)	49	51

**3 Timing of Payments**

Oxfordshire County Council and Oxfordshire Clinical Commissioning Group will make monthly payments to the pooled fund and to each other for services commissioned on their behalf, subject to receipt of an invoice, unless agreed otherwise. Contributions from Oxfordshire Clinical Commissioning Group to the County council will be paid monthly, one month in advance at the request of the Clinical Commissioning Group for all Pools

**B LEARNING DISABILITY POOLED FUND****1 Learning Disability Pooled Budget Contributions 2015/16**

Learning Disability	Oxfordshire County Council	Oxfordshire Clinical Commissioning Group	Total
	£'000	£'000	£'000
Learning Disability	68,472	13,083	81,555
<b>Total</b>	<b>68,472</b>	<b>13,083</b>	<b>81,555</b>

The risk share is calculated at Gross expenditure rather than the net contribution shown in the table above. The Council's income target for Contribution Income ("Income Target") is therefore added to the net contribution to arrive at the Gross contribution for Risk Share purposes. The risk share is therefore as per the table below:

**2 Learning Disability Pooled Budget Risk Share 2015-16**

	Risk Share	
Risk Share	OCC	OCCG
	£'000	£'000
Contribution to LD Pool	68,472	13,083
add back income	- 5,481	
Risk shared contributions	73,953	13,083
% risk share	85	15

**3 Timing of Payments**

Oxfordshire County Council and Oxfordshire Clinical Commissioning Group will make monthly payments to the pooled fund and to each other for services commissioned on their behalf, subject to receipt of an invoice, unless agreed otherwise. Contributions from Oxfordshire Clinical Commissioning Group to the County council will be paid monthly, one month in advance at the request of the Clinical Commissioning Group for all Pools

**C MENTAL HEALTH POOLED FUND****1 Mental Health Pooled Budget Contributions 2015/16**

Mental Health	Oxfordshire County Council	Oxfordshire Clinical Commissioning Group	Total
	£'000	£'000	£'000
Mental Health*	8,812	39,845	48,657
<b>Total</b>	<b>8,812</b>	<b>39,845</b>	<b>48,657</b>

The risk share is calculated at Gross expenditure rather than the net contribution shown in the table above. The Council's income target for Contribution Income

("Income Target") is therefore added to the net contribution to arrive at the Gross contribution for Risk Share purposes. Pending the agreement of the OBC contract, the risk share remains as per 2014-15. This means that the risk on the County Council Social Care support packages is borne by OCC only.

## 2 Mental Health Pooled Budget Risk Share 2015-16

Risk Share	OCC	OCCG
	£'000	£'000
Contribution to MH Pool	8,812	39,845
add back income	- 54	
less Social Care spend	- 1,545	
Risk shared contributions	7,321	39,845
% risk share	16	84

## 3 Timing of Payments

Oxfordshire County Council and Oxfordshire Clinical Commissioning Group will make monthly payments to the pooled fund and to each other for services commissioned on their behalf, subject to receipt of an invoice, unless agreed otherwise.

## D PHYSICAL DISABILITY POOLED FUND

### 1 Physical Disability Pooled Budget Contributions 2015/16

Physical Disability	Oxfordshire County Council	Oxfordshire Clinical Commissioning Group	Total
	£'000	£'000	£'000
Physical Disability	11,370	7,345	18,715
<b>Total</b>	<b>11,370</b>	<b>7,345</b>	<b>18,715</b>

Pending the agreement of the OBC contract, the risk share remains as per 2014-15. This means that the risk on the County Council Social Care support packages is borne by OCC only. The risk share is therefore as per the table below:

### 2 Physical Disability Pooled Budget Risk Share 2015-16

Risk Share	OCC	OCCG
	£'000	£'000
Contribution to PD Pool	11,370	7,345
add back income	- 657	
Risk shared contributions	12,027	7,345
% risk share	62	38

## 3 Timing of Payments

Oxfordshire County Council and Oxfordshire Clinical Commissioning Group will make monthly payments to the pooled fund and to each other for services

commissioned on their behalf, subject to receipt of an invoice, unless agreed otherwise. Contributions from Oxfordshire Clinical commissioning Group to the County council will be paid monthly, one month in advance at the request of the Clinical Commissioning Group for all Pools

## **Schedule 4**

### **Governance and Joint Management Group**

#### **Section 1 – Provisions common to all Joint Management Groups**

##### **1. Deputies and Quorums**

- 1.1 The Joint Management Group shall comprise members who can vote and make decisions (“Voting Members”) and members who may attend meetings but who have no decision-making power and may not vote (“Non-voting Members”).
- 1.2 Each Voting Member of the Joint Management Group will have a deputy nominated in writing by the relevant Partner who may attend meetings on behalf of that Voting Member. Such deputies will have authorisation from the respective Partners to take any actions that the Voting Member is authorised to take. Such deputies should be appropriately briefed and with sufficient authority to fulfil the same role and be able to make similarly informed decisions on behalf of the organisation they represent as the Voting Member for whom they are deputising. In exceptional circumstances an alternative deputy will be allowed subject to this being confirmed in writing by one of the Voting Members of the Partner for whom the deputy will act to the Pool Manager prior to or at the start of the meeting and being agreed by the other Partner. Such alternative deputies will have authorisation from the respective Partners to take any actions that the Voting Member is authorised to take.
- 1.3 Meetings will only be considered quorate if there are 2 Voting Members/deputies attending from each of the Partners SAVE for the Older People Pooled Fund where such number shall be 3.
- 1.4 Each named representative assigned to a role specified in paragraphs A2.1, A2.2, B1.1, B1.2, C1.1, C1.2, D1.1 and D1.2 and/or the role itself may be changed by the body which is being represented by written notification to the other Partners.

##### **2. Role of Joint Management Group**

The role of the Joint Management Group shall be:

##### ***Strategy and Governance***

- a. deliver the commissioning strategies through the Commissioning Intentions agreed annually by the Partners
- b. report progress against key outcomes within the Oxfordshire Health and Wellbeing Strategy to the Adults Health and Social Care Board and the Health and Wellbeing Board.
- c. work with Healthwatch Oxfordshire to ensure the involvement of service users and carers in the development and delivery of commissioning strategies and intentions.

- d. review the operation of this Agreement and consider its renewal subject to the terms of any existing contractual commitments under the management of the Council or CCG in its role as Lead Commissioner on behalf of the Partners.
- e. review and consult on commissioning strategies and intentions, and revise this agreement as appropriate
- f. annually and formally agree the annual contribution made by each Partner.
- g. annually and formally agree Commissioning Intentions for the Pooled Fund.

### ***Finance***

- h. Receive monthly finance reports from the Pool Manager as set out in this Schedule.
- i. Agree such variations to this Agreement from time to time as it sees fit.
- j. Review and agree annually revisions to this agreement as required.
- k. Agree a scheme of financial management with the Pool Manager.
- l. Set such protocols and guidance as it may consider necessary to enable the Pool Manager to approve expenditure from the Pooled Funds.
- m. Agree urgent decisions which will cause expenditure to exceed budget, including to meet statutory duties, outside of meetings where necessary with decisions on virement of budget or remedial action then to be taken at the next Joint Management Group meeting.
- n. Agree a budget for urgent care related services to be held by the pooled budget manager, which will also be used for meeting winter pressures.

### ***Performance***

- o. Receive monthly performance reports from the Pool Manager
- p. Consider progress on key objectives as outlined in this agreement and consult further where necessary.
- q. Approve the monthly, quarterly and annual reports on outcomes as appropriate from the Pool Manager to be submitted by the Joint Management Group to the Partners for information.
- r. report on progress to stakeholders through the relevant programme or partnership board

### ***Risk***

- s. monitor the appropriate reports quarterly to assess any risk that expenditure might exceed the contributions to the Pooled Fund and that where there is such a risk ensure actions are put in place to address the overspend.
- t. review risks quarterly in relation to delivery of objectives, performance of commissioned services, and reputation of the Partners in relation to the Pooled Budget
- u. review any other risks quarterly relating to the performance of this agreement
- v. review annually the overspend and underspend provisions of Clause 8 and Schedule 3 of the Agreement.

## **3. Role of Pool Manager**

The Pool Manager shall:

- 3.1 submit monthly finance and performance reports to the Joint Management Group;



- 3.2 submit monthly, quarterly and annual reports on finance and performance to the Joint Management Group for approval and submission to the Partners;
- 3.3 prepare an annual budget and commissioning intentions for approval by the Joint Management Group;
- 3.4 be responsible for the management of the Pooled Fund on a day-to-day basis; and
- 3.5 report to the Joint Management Group immediately any forecast overspend / underspend on Pooled Funds and submit an action plan to bring the budget back into balance or seek guidance from the Joint Management Group on actions to achieve balance.
- 3.6 be responsible for chairing the Pooled Budget Officers' Group meetings, and ensuring there is a clear understanding of risk, performance and finance across health and social care

#### **4. Joint Management Group Support**

- 4.1 The Joint Management Group will be supported by officers from the Council and the OCCG from time to time and they may be involved in assisting the Joint Management Group in implementation of the aims, objectives and intended outcomes set out at Clause 3 and as specified in Schedule 1 and performance targets as agreed by the Joint Management Group.

#### **5. Meetings**

- 5.1 The Joint Management Group will meet at least once a year.
- 5.2 Joint Management Group members will receive an agenda and accompanying reports and papers at least 5 working days before each meeting.
- 5.3 However, it is recognised that on occasions and dependent on dates of meetings it may not always be possible to produce financial reports this far in advance, in which case they will be circulated as far in advance of the meeting as possible.
- 5.4 Joint Management Group members will be provided with Finance and Performance Reports on a monthly basis, and these will be circulated to members irrespective of whether a meeting is taking place that month.

#### **6. Decision Making**

- 6.1 All decisions of the Joint Management Group:
  - a. shall be made at quorate meetings of the Joint Management Group;
  - b. shall be made by those Voting Members present (or their deputies if appointed pursuant to paragraph 1 above); and
  - c. shall require their unanimous consent.

- 6.2 Where there is disagreement between the Partners regarding an element of the Services the Lead Commissioner for such element shall have discretion to take such action or inaction as it decides in accordance with its obligations under this Agreement.
- 6.3 All decisions shall be recorded in writing. Minutes of the meetings to include all decisions made shall be kept and copied to the Joint Management Group members by the Pool Manager within 14 days of every meeting.
- 6.4 The views of those in attendance will be taken into account for all of the work of the Joint Management Group including decision making. These views will be recorded in the minutes of the meeting. This will include agreement or disagreement to the decisions made by Voting Members.

## **7. Confidentiality**

- 7.1 From time to time the Joint Management Group will be discussing both financially and commercially sensitive information and personal client and carer information. It is important that all members of the Joint Management Group and all other attendees are clear that they must treat the information as confidential and that they must discuss and use such information outside the Joint Management Group only where it is appropriate to do so in order for them to fulfil their obligations.

## **Section 2 – Pool-specific provisions for each Joint Management Group**

### **A OLDER PEOPLE POOLED FUND**

#### **A1 Meetings and reporting**

A1.1 At least one meeting of the Joint Management Group shall be held in public.

A1.2 The Joint Management Group shall provide regular reports on progress to the Council Cabinet and Clinical Commissioning Group Governing Body.

#### **A2 Joint Management Group Membership**

A2.1 The membership of the Joint Management Group with voting rights will be as follows:-

*Oxfordshire County Council:*

Cabinet Member for Adult Social Care  
Deputy Director for Joint Commissioning  
Chief Finance Officer

*Oxfordshire Clinical Commissioning Group:*

Chief Executive Officer or Clinical Chair  
Director of Commissioning and Partnerships  
Chief Finance Officer

A2.2 In Attendance: (Non-Voting)

*Oxfordshire County Council:*

Deputy Director for Adult Social Care  
Adult Social Care Finance Business Partner  
The Strategic Commissioner for Adults, as the pool manager

*Oxfordshire Clinical Commissioning Group:*

Programme Manager Mental Health and Joint Commissioning  
Assistant Chief Finance Officer  
Clinical Lead for Older People  
GP Locality Commissioner  
GP Provider

Director of Adult Social Services, Oxfordshire County Council and Director of Strategy & Transformation Oxfordshire Clinical Commissioning Group

*Provider Representatives:*

Oxfordshire Association of Care Providers – Chief Executive  
Oxford Health NHS Foundation Trust - Chief Operating Officer  
Oxford University Hospitals NHS Trust - Director of Clinical Services

*Other representatives:*

District Council Representative

Healthwatch Oxfordshire representative

Service user and carer representatives, including Older People Partnership Board representative(s)

Voluntary and independent sector representatives

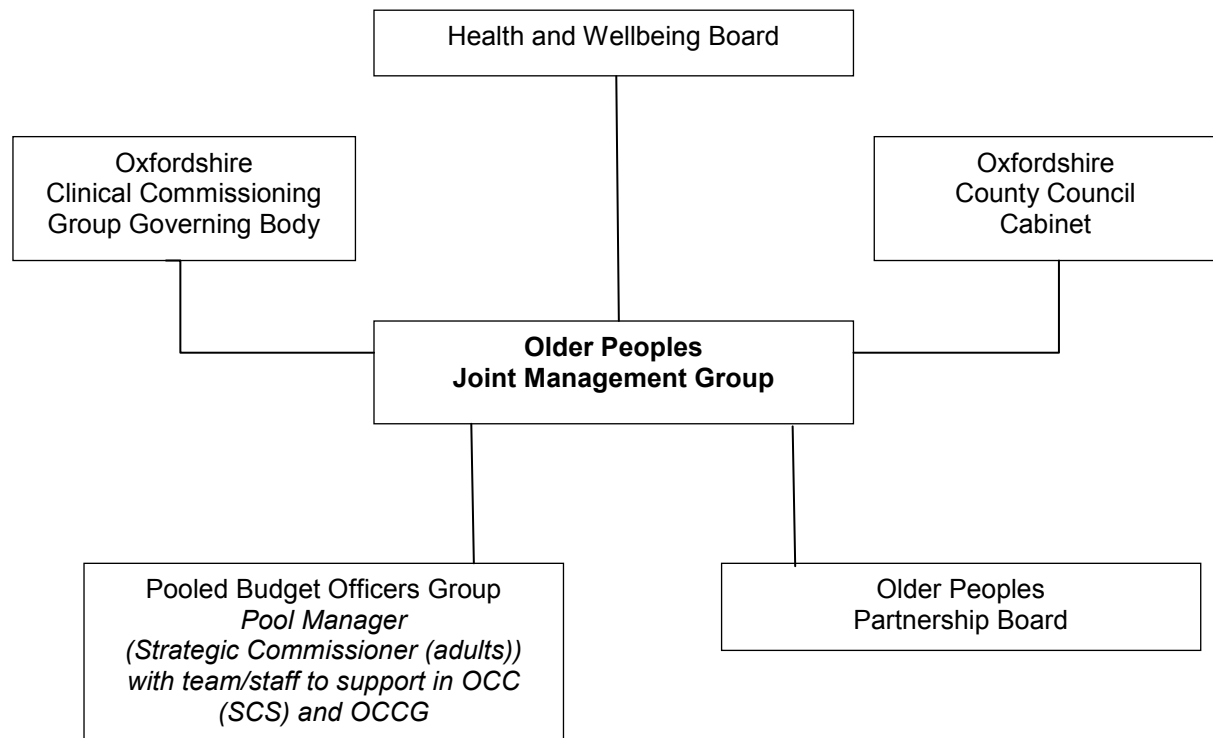
Others may be invited where JMG consider this appropriate.

### A3 Chair

The meetings will be chaired by the Cabinet Member for Adult Social Care and by the nominated deputy if absent unless otherwise agreed by the Partners.

### A4 JMG Relationship to Other Bodies

#### Governance framework diagram



## **B LEARNING DISABILITY POOLED FUND**

### **B1 JMG Membership**

B1.1 The membership of the JMG with voting rights will be as follows:-

*Oxfordshire County Council:*

Deputy Director for Joint Commissioning

Social and Community Services Finance Business Partner

*Oxfordshire Clinical Commissioning Group:*

Director of Commissioning and Partnerships

Chief Finance Officer

B1.2 In Attendance: (Non-Voting)

*Oxfordshire County Council:*

Strategic Commissioner for Adults

*Oxfordshire Clinical Commissioning Group:*

Programme Manager Mental Health and Joint Commissioning

Clinical Lead for Learning Disabilities

*Other representatives:*

Representative(s) from the Learning Disability Partnership Board

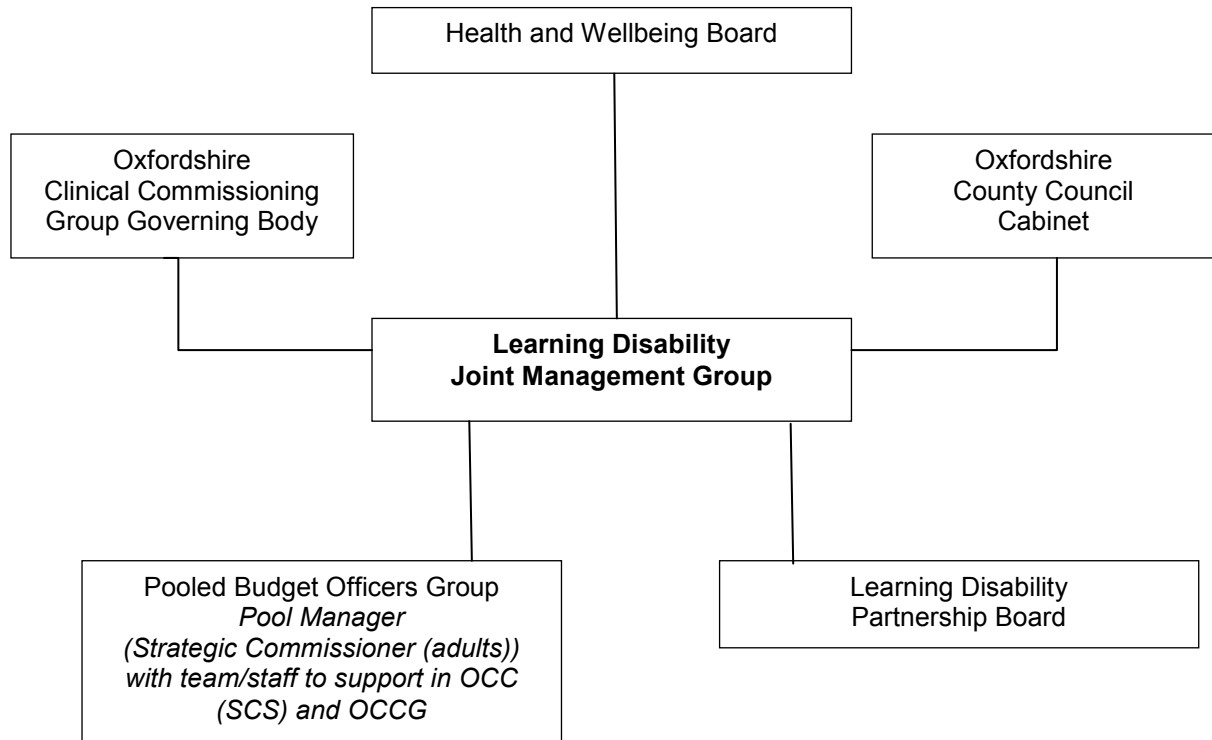
Any change to representatives from the Learning Disability Partnership Board will be confirmed to the Pool Manager by the Partnership Board.

Others may be invited where JMG consider this appropriate.

### **B2 Chair**

The meetings will be chaired by Deputy Director Joint Commissioning (or successor in title) and by their nominated deputy if absent unless otherwise agreed by the Partners.

### **B3 JMG Relationship to Other Bodies**



## **C MENTAL HEALTH POOLED FUND**

### **C1 JMG Membership**

C1.1 The membership of the JMG with voting rights will be as follows:-

*Oxfordshire County Council:*

Deputy Director for Joint Commissioning

Social and Community Services Finance Business Partner

*Oxfordshire Clinical Commissioning Group:*

Director of Commissioning and Partnerships

Chief Finance Officer

C1.2 In Attendance: (Non-Voting)

*Oxfordshire County Council:*

Strategic Commissioner for Adults

Strategic Commissioner for Children and Young People

*Oxfordshire Clinical Commissioning Group:*

Programme Manager Mental Health and Joint Commissioning

Clinical Lead for Learning Disabilities

*Other representatives:*

Carers from the Carers Reference Group

Service user representative

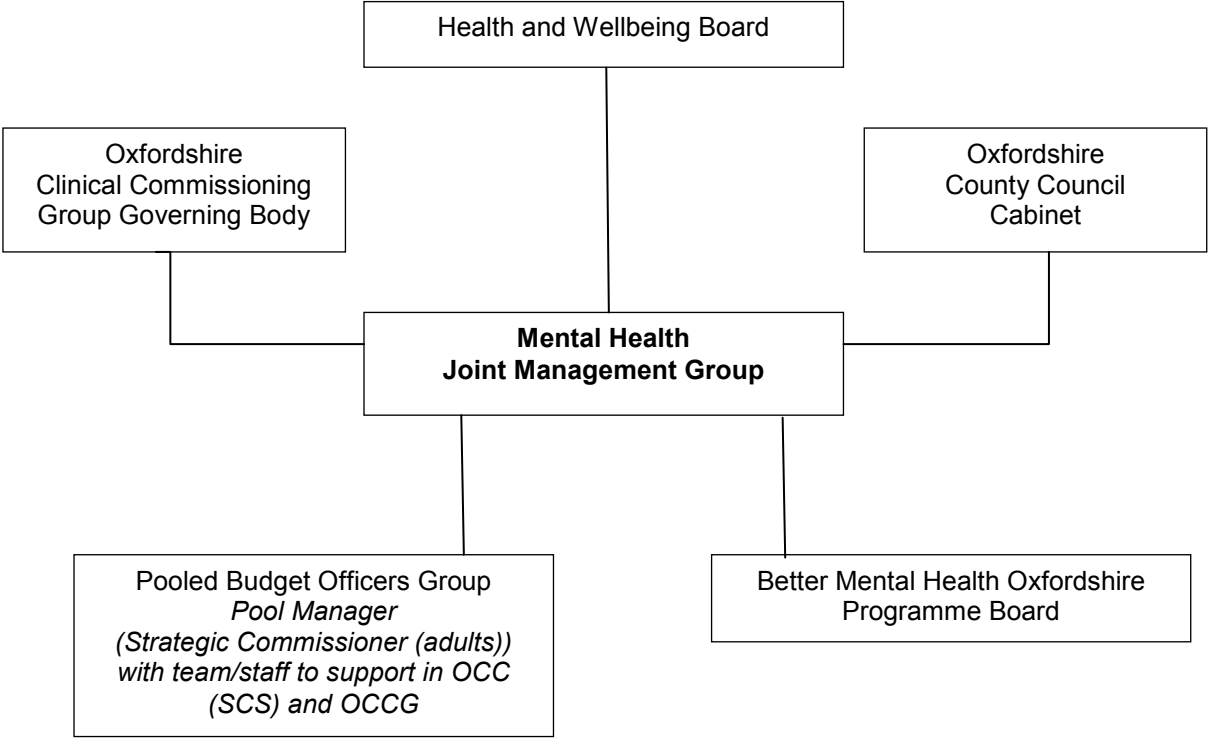
Children and Young People representative

Others may be invited where JMG consider this appropriate.

### **C2 Chair**

The meetings will be chaired by the Director of Commissioning and Partnerships, Oxfordshire Clinical Commissioning Group (or successor in title) and by their nominated deputy if absent unless otherwise agreed by the Partners.

### **C3 JMG Relationship to Other Bodies**





## **D PHYSICAL DISABILITY POOLED FUND**

### **D1 JMG Membership**

D1.1 The membership of the JMG with voting rights will be as follows:-#

*Oxfordshire County Council:*

Deputy Director for Joint Commissioning

Social and Community Services Finance Business Partner

*Oxfordshire Clinical Commissioning Group:*

Director of Commissioning and Partnerships

Chief Finance Officer

D1.2 In Attendance: (Non-Voting)

*Oxfordshire County Council:*

Strategic Commissioner for Adults

*Oxfordshire Clinical Commissioning Group:*

Programme Manager Mental Health and Joint Commissioning

Clinical Lead for Physical Disability

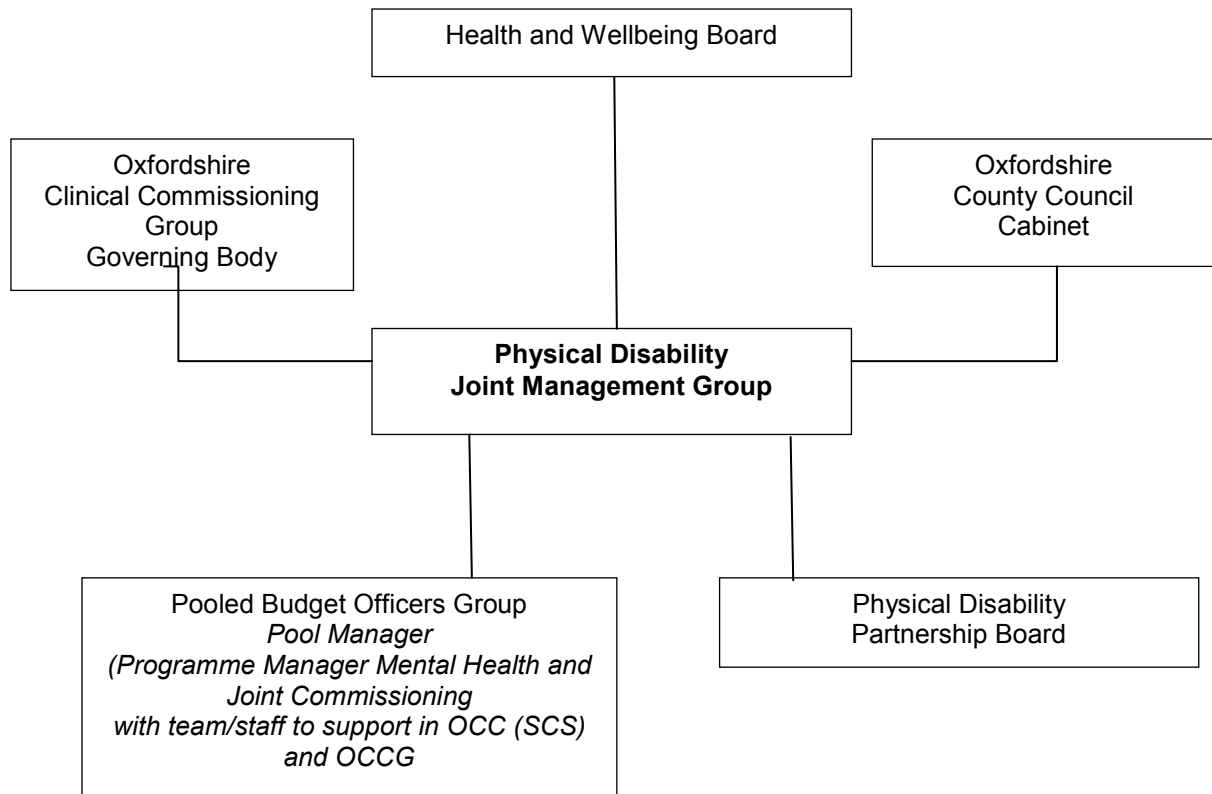
*Other representatives:*

Representative of the Physical Disability Partnership Board

Any change to representatives from the Physical Disability Partnership Board will be confirmed to the Pool Manager by the Partnership Board. Others may be invited where JMG consider this appropriate.

### **D2 Chair**

The meetings will be chaired by Deputy Director Joint Commissioning (or successor in title) and by their nominated deputy if absent unless otherwise agreed by the Partners.

**D3 JMG Relationship to Other Bodies**

Division(s): NA
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## **CABINET – 26 May 2015**

### **Equalities: Annual Update**

#### **Report by Head of Policy**

#### **Introduction**

1. Oxfordshire County Council is committed to making Oxfordshire a fair and equal place in which to live, work and visit. We want our services to effectively meet the needs of all local residents, including those in rural areas and areas of deprivation. We also aim to ensure that our staff are equipped with the knowledge and skills to meet the diverse needs of customers, that our services are accessible, and to encourage supportive and cohesive communities through our service delivery.
2. These goals are integral to the work of the council and are ones that we aim to meet regardless of the requirements presented in legislation. The obligations under the Equality Act 2010 present us with an opportunity to highlight examples of our on-going activity in relation to these goals and reinforce our commitment to them.
3. In 2012 we launched our Equality Policy setting out how we meet our obligations under the Equality Act 2010. In January 2013 and 2014 we published our annual updates on our progress. Both documents can be read here: <http://www.oxfordshire.gov.uk/cms/public-site/equality-and-cohesion>. A third annual update is included in this report in Annex 1.
4. We have also refreshed the actions against which we are measuring our progress, to ensure that we are reflecting the work of all our service areas and the priorities of the council, as set out in the latest Corporate Plan and directorate Business Strategies. These new actions are the focus of Annex 2.
5. The council is also required to show it has an adequate evidence base for its decision making. We hold extensive data sets about the Oxfordshire population, which are publically available, on Oxfordshire Insight: <http://insight.oxfordshire.gov.uk/cms/>

#### **Background**

6. The Equality Act 2010 sets out nine protected characteristics which, taken together, include everybody in the country. We all share some or all of these characteristics and it is an offence to use any of them as an excuse to treat people unfairly. These protected characteristics are:
  - Age
  - Disability

- Gender reassignment
  - Marriage and civil partnership
  - Pregnancy and maternity
  - Race, including ethnic or national origins, colour, or nationality
  - Religion or belief, including the lack thereof.
  - Sex
  - Sexual orientation
7. The Act places specific obligations on public bodies. Section 149 sets out the Public Sector Equality Duty. Under this duty, all public bodies, including Oxfordshire County Council must have due regard to the need to:
- Eliminate unlawful discrimination, harassment and victimisation and other conduct prohibited by the Act.
  - Advance equality of opportunity between people who share a protected characteristic and those who do not.
  - Foster good relations between people who share a protected characteristic, and those who do not.
8. The Public Sector Equality Duty requires public bodies:
- a) To consider how the decisions that they make, and the services they deliver, affect people who share different protected characteristics and publish information to demonstrate that they have done this. At Oxfordshire County Council we use Service and Community Impact Assessments (SCIAs) to review the potential impact of new and updated policies and service delivery decisions on groups that share the nine protected characteristics and on rural communities and areas of deprivation. The SCIAs produced as part of the 2014/15 budget setting process can be found on Oxfordshire County Council's website here: <https://www.oxfordshire.gov.uk/cms/content/service-and-community-impact-assessments-scias-201415>
  - b) To publish information to demonstrate it has considered how its activities as an employer affect people who share different protected characteristics. This is available at: <http://www.oxfordshire.gov.uk/cms/content/fairness-and-equality-work> .
  - c) To set specific, measurable equality objectives and publish these, along with an equality policy. These are set out below. We have to report at least annually on our progress, and we have to revise our objectives every four years. In our *Equality Policy 2012-17*, we set ourselves the following objectives:
    - 1. Understanding the needs of individuals and communities
    - 2. Providing accessible, local and personalised services, including to rural areas and areas of deprivation
    - 3. Supporting thriving and cohesive communities
    - 4. Promoting a culture of fairness in employment and service delivery

9. These key equality objectives align closely with the council's overall strategic objectives, as set out in the council's Corporate Plan. This helps to ensure that our work on equality and diversity is embedded within service planning and supports our commitment to making equalities integral to everything we do.

### **Financial and Staff Implications**

10. None

### **Equalities Implications**

11. None

### **RECOMMENDATION**

12. **The Cabinet is RECOMMENDED to agree to the new Equality Policy Actions for 2015/16 (Annex 2)**

MAGGIE SCOTT  
Head of Policy

Background papers: Oxfordshire County Council's Equality Policy 2012/2017  
<https://www.oxfordshire.gov.uk/cms/public-site/equality-and-cohesion>

Contact Officer: Alison Finnimore, Senior Policy Officer  
May 2015

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## ANNEX 1

### Equality Policy – Action Plan 2014/15 – report on progress

The council is required to set and publish specific, measurable equality objectives. We have to report at least annually on our progress against these, and we have to revise our objectives every four years.

In our *Equality Policy 2012-17*, we set ourselves the following objectives:

1. Understanding the needs of individuals and communities
2. Providing accessible, local and personalised services
3. Supporting thriving and cohesive communities
4. Promoting a culture of fairness in employment and service delivery

For each objective we identified a number of actions which were intended to build on achievements and address areas where improvement was needed in our performance. This is our annual report against those actions.

#### Council-wide Actions

Action	Objective	Update
Ensure the content of the Joint Strategic Needs Assessment contains access to ever-richer data on groups with protected characteristics or facing inequalities of outcome or access and make it publicly available on the JSNA website. (Produced by the Chief Executive's Office, commissioned by the Public Health directorate.)	1	<p>The Joint Strategic Needs Assessment (JSNA) provides data on groups with protected characteristics, and which may face inequalities in health and wellbeing outcomes.</p> <p>The published <a href="#">JSNA annual summary report</a> for 2015 includes data on:</p> <ul style="list-style-type: none"> <li>• Deprivation</li> <li>• Race and ethnicity</li> <li>• Religion and belief</li> <li>• Language (<i>new this year</i>)</li> <li>• Rurality (<i>new this year</i>)</li> <li>• Sexual orientation</li> <li>• Marriage and civil partnership (<i>new this year</i>)</li> <li>• Pregnancy and maternity (<i>new this year</i>)</li> <li>• Disability</li> </ul>

		<ul style="list-style-type: none"> <li>• Armed forces personnel</li> <li>• Carers</li> </ul> <p><a href="#">Interactive JSNA dashboards</a> on the Oxfordshire Insight website allow a more detail exploration of the data, including on:</p> <ul style="list-style-type: none"> <li>• Deprivation</li> <li>• Ethnicity</li> <li>• Religion</li> <li>• Mothers' country of birth (<i>updated this year</i>)</li> </ul> <p>The <a href="#">JSNA data directory</a> and <a href="#">JSNA publications directory</a> provide access to a range of additional web-based information, including relevant research reports and health profile tools. These resources were refreshed with the launch of the 2015 JSNA and are kept updated on an on-going basis.</p>
<p>Ensure that Service and Community Impact Assessments (SCIAs) are produced for all new and updated policies and service delivery decisions. In particular we will assess all budget proposals to consider the impacts of any potential changes on groups with protected characteristics.</p> <p>(A SCIA is a review of the potential impact of policies and is intended to ensure the diverse needs of our individuals and communities in Oxfordshire are met. We assess the impact of decisions on any relevant community, but with particular emphasis on groups that share the protected characteristics in the Equality Act 2010.)</p>	1	<p>21 Service and Community Impact Assessments were written to sit alongside the budget proposals in December 2014 to address their potential impact on individuals or communities. Additionally, a cross cutting Service and Community Impact Assessment was produced summarising the potential cumulative impact of the proposals, including on groups with protected characteristics.</p> <p>Service and Community Impact Assessments form an important part of how we develop policies and make decisions. They are produced for every service change proposal, ensuring that consideration is given to the impact on groups with protected characteristics. Each directorate has a lead officer who is responsible for monitoring Service and Community Impact Assessments and ensuring they are updated as policies are implemented and services delivered throughout the year.</p>
<p>Continue to enhance the focus on 'locality working', ensuring officers and members work together to listen to and understand local needs. This includes a continuation of the councillor community budget scheme, where councillors have a fund for projects that matter most to their local community.</p>	2	<p>There are nine localities in the county council. These localities align with the council's electoral divisions and provide a forum in which members' views on local issues, needs and services can be shared with officers and enable them to influence services. In the past year these groups have met four times and had a wide variety of agenda items covering highways infrastructure, adult social care provision, schools places and performance and broadband roll out. This has informed policy development and established positive ways of working between officers and councillors that allow input from a local perspective.</p> <p>Through the councillor community budget scheme over 300 grants were allocated to a variety of groups, including community associations and voluntary</p>



		<p>organisations, schools, town and parish councils, residents associations, social enterprises and museums.</p> <p>A wide range of projects were awarded funding under the programme, including: repairs and refurbishment work to village halls and community centres; purchasing of equipment for schools, youth clubs, playgrounds and after school clubs; day activities for the most vulnerable members of the community; youth engagement and outreach programmes; festivals and community events; support for carer; and small infrastructure projects.</p> <p>Oxfordshire Fire &amp; Rescue Service have and foster very close locality links via their stations but in particular via the Station Managers and the Fire Risk Managers for the District Council areas.</p>
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### Children, Education and Families

Action	Objective	Update
Review and monitor the access and engagement of fathers in services, including Early Intervention and Children's Social Care, and identify ways to improve access and targets for improvement where necessary.	3	<p>Engagement of fathers is considered as part of the assessment, planning and review process in both Children's Social Care and Early Intervention and proactive steps are taken to engage and take views and wishes into account, where appropriate to the needs of the child.</p> <p>The role of fathers is carefully considered during any Court Proceedings when planning for the child's future.</p> <p>Where a need has been identified, Children's Centres have dedicated sessions for fathers to promote engagement with services and to support their parenting.</p>
Take action to identify and agree plans and measures to address gaps in educational attainment levels between children from different backgrounds and who share protected characteristics (for example, looked after children, some black and minority ethnic groups, and some children with special educational needs, including children and young people with Autistic Spectrum Disorders).	3	<p>The restructuring of the Vulnerable Learners Service has been completed. The four areas of Education and Learning are clearly focused on outcomes for young people and have a better understanding of what each does to achieve this. All posts are filled and the focus is firmly on raising achievement of all vulnerable pupils.</p> <p>Ofsted training has been delivered for a number of colleagues who work in Children's Social Care so that national expectations are shared and understood.</p> <p>A "Closing the Gap" strategy is in development with contributions from colleagues across Children, Education and Families and Children's Social Care.</p>

		<p>The current meeting framework is being reviewed to ensure that both services work together towards improved outcomes for all our vulnerable youngsters.</p> <p>Attendance of pupils at school is key to keeping all children safe. There is a heightened awareness of this across teams but tighter workings are needed across services and ICT systems used by schools mean it is a challenge for the Local Authority to have an overview of attendance.</p> <p>The impact of the development of additional provision for excluded pupils across the county has been mixed. Work is going on in the city to extend provision for primary aged excluded/vulnerable to exclusion pupils.</p>
Review the equality of access to Early Intervention and Children's Social Care for black and minority ethnic groups (including those from gypsy, Romany, and traveller groups), and identify ways to improve access and targets for improvement.	2	<p>Access to Early Intervention Services are monitored for black and minority ethnic groups and a specific review of access to services by gypsy, Romany, and traveller groups was undertaken across Early Intervention Service in 2014/15, including examples of specific interventions and support. Services are targeted at these groups where the need has been identified, and Early Intervention Services are an active member of the PREVENT strategy – this is the strategy to prevent radicalisation, especially in relation to safeguarding vulnerable adults and children.</p> <p>The specific action in relation to Children's Social Care was to monitor level of complaints from people of black and minority ethnic background. The level of complaints remains in-line with historical levels and continues to be monitored</p>

### Social and Community Services' Actions

Action	Objective	Update
<p>Increase the use of the Shared Lives service by older people.</p> <p>(Shared Lives is a scheme where adults of any age who need care and support are offered the chance to stay in a Shared Lives carer's home, or, alternatively, to be supported in their own home by a Shared Lives carer.)</p>	3	<p>A number of people who benefit from the Shared Lives service are over 65, mainly people who have enduring mental health issues or a learning disability. The service also supports people in the early stages of dementia. Work continues to enable people use the service in line with demand.</p> <p>The Shared Lives Team held a celebration event on 14 October 2014 at County Hall to say thank you to the Shared Lives carers who make the scheme such a success. The event was part of Shared Lives week which ran in October 2014 to encourage other people to participate.</p>

Ensure all staff in Integrated Mental Health Teams are trained in relation to Independent Mental Capacity Advocacy and Independent Mental Health Advocacy	2	<p>Oxford Health, who we commission to deliver mental health services in Oxfordshire, run the following mandatory training for staff. They achieve 98-100% compliance with attendance at this training:</p> <ul style="list-style-type: none"> <li>• Mental Capacity Act</li> <li>• Mental Capacity and the Mental Health Act</li> <li>• Mental Health Act for new starters and refresher training</li> </ul>
Improve information available for service users and carers when choosing new services	2	<p>We continue to improve and update our website working closely with partners such as Carers Oxfordshire and the Community Information Network provided by Age UK Oxfordshire.</p> <p>Via the Community Information Network we have introduced local advisers across the county to improve the dissemination of information and advice about the range of social care and the support services available and to help people to access them. The networks rolled out across the county in 2014 with clear locality plans supporting the development of local strategies. This includes outreach work to ensure that information on local services and support is available to people who do not use the internet.</p> <p>Over the coming year we will be investing in and improving our online services directory, through the development and launch of an Information and Advice strategy. This will inform our future approach to commissioning these services, ensuring they respond to the needs of service users and carers that will be identified via a public consultation.</p>

## Public Health

Action	Objective	Update
Ensure services commissioned by the Public Health Directorate contain specifications that detail the need for services to be locally accessible and personalised.	2	<p>Major contracts that have been procured in 2014-15 include the contract for Drugs and Alcohol Treatment Services, Smoking Cessation and Oral Health Promotion. The services to be delivered through each of these contracts was specified in detail. For example, substance misuse treatment services will now be delivered on a more diverse locality basis across the county. The Oral Health promotion service will pick up the priorities identified in the Oral Health Needs Assessment carried out by Public Health England.</p>

Continue the countywide Thriving Families programme, Oxford's Breaking the Cycle programme, and Banbury's Brighter Futures programme to bring a range of agencies together to improve outcomes in the most deprived communities of Oxfordshire.	3	The programmes to address inequalities are continuing and there have been some good outcomes. For example, the Thriving Families programme was one of the first in the country to complete phase 1 by claiming 100% success with the target number of families. In Oxford and Banbury the Breaking the Cycle / Brighter Futures programmes have, for example, seen reduction in the number of young people NEET and the identification of volunteers to be trained as health champions from local communities. Food poverty work is also being planned in both areas.
<p>Conduct Health Equity Audits to ensure that services are fairly accessible to the whole population and that all ethnic groups are able to access services</p> <p>(A Health Equity Audit (HEA) is a review procedure, which examines how health determinants, access to relevant health services, and related outcomes are distributed across the population, relative to need.)</p>	4	<p>The procurement of Drugs and Alcohol services included extensive consultation with stakeholders and clients, as well as the family and carers of clients. This highlighted issues of geographical access which were taken into consideration in specifying the locations for delivery of the new service which will include Locality Hubs in Banbury, Witney, Didcot and Oxford, with outreach and mobile services in addition.</p> <p>An updated Equity Audit of the NHS Health Check update showed that the service offered is equitable across age, sex, deprivation and ethnic minority group, but that targeted work needed to be carried out with groups who are less likely to take up the offer such as men in younger age-groups. A number of GP practices were found to be not participating in delivering the service at the time of the audit.</p> <p>A very detailed piece of work to assess the quality of delivery of NHS Health Checks in primary care has resulted in near -universal coverage across the county. The non-participation of some GP practices in previous years has been addressed In addition there has been targeted promotion of the service to enable those who have not been attending to get more information and understand the benefits of taking up the offer of an NHS Health Check.</p>

## Environment and Economy

Action	Objective	Update
Ensure equality and diversity are considered throughout the development of proposals for the Supported Transport Programme, specifically by engaging with stakeholders and user groups, so that the potential impact of changes on groups with protected characteristics is fully understood.	1	Changes to supported transport have to date focussed on Home to School Transport and ensuring that our statutory obligation is met as efficiently as possible. Systematic consultation takes place with affected service users and schools when changes to transport are proposed and implemented, and Service and Community Impact Assessments are prepared.

(Supported transport includes home to school transport, subsidised buses, and transport to day centres, along with various other forms of direct or indirect provision.)		<p>Oxfordshire County Council plan to launch an Integrated Transport Hub in Autumn 2015. This Hub will improve our supported transport offer by:</p> <ul style="list-style-type: none"> <li>• serving as a single 'front door' for all supported transport needs</li> <li>• ensuring transport is allocated fairly, according to need</li> <li>• giving users more control and choice, making it easier and simpler to get transport</li> <li>• guaranteeing value for money</li> <li>• generating efficiencies by commissioning and allocating supported transport as a 'whole system' rather than in silos</li> <li>• Offering innovative new solutions to the traveling public (e.g. access to Community Transport and Wheels-to-Work schemes)</li> </ul> <p>A public consultation on the hub will be launched in 2015 and will include targeted events/meetings and feedback opportunities with all stakeholder groups. We will continue to factor in the needs of protected groups as proposals are developed, including by updating the Service and Community Impact Assessment.</p> <p>So far, discussions have been held at a number of meetings including Older People's Partnership Board, Oxfordshire Rural Community Council's Community Transport Advisory Group and Member Locality meetings. These groups will be kept informed as proposals develop.</p> <p>As part of our general assessment of supported transport we are also undertaking a County wide needs analysis and user criteria analysis of our non-statutory supported transport provision. This analysis is on-going and any proposed changes to supported transport services would involve a public consultation.</p>
Ensure equality and diversity is integrated into the culture of the Customer Service Centre by embedding it within the behaviour and attitudes of staff, as well as the routine policies, procedures and practices of the service.	4	<p>All Customer Service Centre staff have a formal Induction - which includes an introduction to the policies that relate to Equality and Diversity.</p> <p>All staff complete the Respect for People eLearning course when they start with Oxfordshire County Council and are required to take an annual refresher.</p>

Continue to expand the number of apprenticeship opportunities to create entry level posts for young people, including those from disadvantaged backgrounds such as those leaving care, non-school attendees and Young Carers.	4	<p>We have continued to recruit apprentices within a climate of budget and staff recruitment reductions.</p> <p>As we increasingly commission and work with partners to deliver services in Oxfordshire, the number of apprentices we employ directly is decreasing - we have therefore developed and shared via Oxfordshire Apprenticeships an 'employer toolkit' to support other employers with best practice in recruiting and managing apprentices (including supporting apprentices from disadvantaged backgrounds).</p> <p>Despite the recruitment freeze at the end of 2014/15, we are continuing to support the creation of appropriate apprenticeship opportunities. Our completion rates have remained good and apprentices are supported with seeking employment when their apprenticeship finishes.</p> <p>We have continued to provide entry level opportunities to young people from disadvantaged backgrounds. For example, we employed two care leavers on apprenticeships last year with one successfully completing and the other leaving to take on permanent employment. We also employed a young carer, a young woman with mental health needs who had been a young person not in education, employment or training (NEET) and a young man with a learning difficulty - all have completed and achieved employment.</p> <p>The Council is tackling under-representation of young people in our workforce under section 159 of the Equality Act 2010 and for this reason a number of our apprenticeship vacancies are only open to individuals aged between 16 and 24 years old.</p>
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### Fire and Rescue Service

Action	Objective	Update
Encourage applications from members of underrepresented groups by continuing to hold initiatives such as 'have a go' days for potential recruits, mentoring support for candidates close to reaching the required assessment standards, and producing targeted recruitment materials.	4	The Fire and Rescue Service continue to support the recruitment of under-represented groups and continue to ensure that all our recruitment and selection processes do not discriminate. We have not recruited for whole time fire fighter positions for the last 12 months, but work with local communities when recruiting for On-Call Firefighters. We have carried out recruitment specifically in Henley and Wheatley to support our crewing, and recruitment campaigns have been very successful in these areas.

		<p>In 2014/15 we had 10 female applicants. Four of them have since become On Call (Retained) Firefighters and two of the 10 are still in the system undergoing testing.</p> <p>We have 40 female Firefighters in total currently, which is 5.94% of the overall operational workforce.</p> <p>In the first nine months of 2014/15 four applications to become On Call Firefighters were received from males in ethnic groups.</p> <p>There are 17 On Call Firefighters who are from black or ethnic minority groups which is 5.04% of the On Call staff.</p>
<p>Deliver four case studies outlining how FRS is actively delivering against the objectives in its Equality and Inclusion strategy. The strategy incorporates the Equality Framework for Fire and Rescue Services, the County Council Equality Policy and the Equality Act 2010 general and specific duties.</p> <p><b>The case studies will be scrutinised by our internal Employment and Equality group, chaired by the Deputy Chief Fire Officer and they will be published at least annually on the county council's website.</b></p>	4	<p>This was completed as part of the Operational Assurance process and we provided these as evidence of the FRS commitment to Equality and Diversity.</p> <p>The case studies can be found on the county council website here: <a href="http://www.oxfordshire.gov.uk/cms/content/equality-and-inclusion">www.oxfordshire.gov.uk/cms/content/equality-and-inclusion</a></p>

## Community Safety

Action	Objective	Update
Further develop and maintain the Community Safety Information Management System (part of Oxfordshire Insight) so that it provides readily accessible data on a range of different groups and communities in relation to crime.	1	<p>The Oxfordshire Safer Communities Partnership (OSCP) provides strategic direction for activity to prevent crime and create safer communities across Oxfordshire. A core role for the partnership is to collaborate and pool resources effectively to support victims of crime and anti-social behaviour, support communities so that they feel safe and reduce offending. Our activity over the past year has included supporting:</p> <ul style="list-style-type: none"> <li>- the training of our county-wide Domestic Abuse champions which is built on understanding the needs of victims from a diverse range of backgrounds:</li> </ul>

		<ul style="list-style-type: none"> <li>- victims of hate crime through funding the Stop Hate UK support and referral service; and</li> <li>- the development and delivery of local activity to increase awareness of child sexual exploitation.</li> </ul> <p>All of our activity includes the consideration of inclusivity and access to Oxfordshire services by minority and vulnerable groups. In addition, we have continued to improve our community safety evidence base through the development of our annual county-wide strategic intelligence assessment (SIA) which includes data on victims of crime, such as hate crime, domestic abuse and human exploitation. The assessment is analysed by geography and by different equality groups, where available, and is available on the Oxfordshire Insight website (under Community Safety).</p> <p>Due to the need to manage resources efficiently the Community Safety Information Management System is being integrated within Oxfordshire Insight, the county-wide data website. This restructuring will enable community safety information to be linked to the relevant sections of the Joint Strategic Needs Assessment with data on crime and community safety being presented by equalities groups and communities, where available.</p>
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### Gypsy and Traveller Service

Action	Objective	Update
Form a Multi-Agency Gypsy & Traveller Networking Group with practitioners from different sectors and professions who work with Gypsies and Travellers in Oxfordshire, to share knowledge and understanding of each-others services, and provide improved services to children, young people and families living on Travellers sites and unauthorised encampments in Oxfordshire.	3	<p>The Multi-Agency Gypsy &amp; Traveller Networking Group continues to meet regularly to share information amongst professionals working with gypsies and travellers to assist in the development of strong support services. This group's meetings are facilitated by the Gypsy and Traveller Service.</p> <p>During 2014/15 the Gypsy and Traveller Service commenced support for the Thames Valley Police Community Placements programme. Through this programme, trainee Police Officers spend time with the Service and visit traveller sites managed by the County Council. The aim of this programme is to build awareness of gypsy and traveller culture and foster stronger relationships between gypsy and traveller families and the Police.</p>

### Trading Standards



Action	Objective	Update
Ensure that people living in sheltered accommodation receive and understand consumer education and information services, especially regarding scams and other forms of financial abuse	2	<p>In 2014/15 over 50 consumer education and advice events were delivered mainly relating to scams and financial abuse. In addition the service piloted an intervention programme aimed at victims of financial abuse (predominantly older people). Through this programme over 100 potential postal scams victims were visited. Of these, 20 were found to be actual victims and in need of follow up work and one severe case of financial abuse was uncovered which is being progressed through the courts.</p> <p>Support was also arranged for 34 doorstep crime victims through simple solutions, such as 'call blockers' (technology that screens telephone calls and blocks calls from unwanted or unknown numbers) and door cameras.</p>
Ensure that people living in those localities where evidence suggests the awareness of Trading Standards services is low, but the need of services may be high, have a greater understanding of how to report concerns and access assistance.	2	The localities identified through research were targeted in the preparation and promotion of projects such as the electric blanket testing campaign. Focussed work was also undertaken in communities affected by the sale of 'legal highs', particularly where the open availability of these products would increase use by young people.

### Chief Executive's Office

Action	Objective	Update
Analyse and share data from the 2011 Census to build up the most accurate picture of the diversity of the county's residents	1	<p>The Research and Intelligence Unit has published a range of briefings that explain clearly and in detail what the 2011 Census reveals about the diversity of Oxfordshire's residents. From an equalities perspective, this analysis sits alongside other evidence about the diversity of the local population rather than replacing it, since the Census does not report data relevant to all groups/aspects of the population specified in the Equality Act 2010.</p> <p>Some of the key briefings are:</p> <ul style="list-style-type: none"> <li>• <a href="#">November 2014 newsletter</a>, summarising available data for individual equalities themes.</li> <li>• "<a href="#">Focus on Equalities</a>" (November 2013) – summaries the Census data for individual equalities themes, where available</li> </ul>

		<p>The characteristics that the 2011 Census data has covered most robustly are: “age”; “race”; “religion or belief”; “marriage and civil partnership”; and “sex” (although the Census conflated the distinction between an individual’s gender and their biological sex). There have been additional bespoke analyses and briefings on these topics.</p> <p>2011 Census provided some evidence about the “disability” characteristic, through a question about how much a person’s physical activity is limited, as well as informal care giving/receiving. Bespoke briefings on this topic have also been produced.</p> <p>Characteristics for which the 2011 Census does not provide data are: “sexual orientation”; “pregnancy and maternity”; and “gender reassignment”.</p>
Continue to ensure that Oxfordshire Voice Citizens’ Panel, our resident’s panel, is broadly representative of the makeup of the county to ensure it is balanced to reflect age, gender, ethnicity and disability.	1	<p>The Oxfordshire Voice Citizens’ Panel was significantly refreshed at the start of 2014 and its membership was reduced in size to 2,000. Two surveys were carried out with the panel at the end of 2014 that have highlighted areas for further refreshment. During 2015 we will address the ongoing representativeness of the Oxfordshire Voice Citizens’ Panel by refreshing the panel on a rolling basis.</p>
Ensure equality of access to the Registration service for people committing to a same-sex marriage.	4	<p>Same Sex Marriage came into force on 13 March 2014, and the first same-sex marriages in Oxfordshire took place on 29 March 2014. Since then, a number of couples have celebrated their marriage in Oxfordshire.</p> <p>The Registration Service participated in Oxford Pride 2014 to promote equal marriage, and our brochure ‘Oxfordshire, the place to marry’ has been reissued to include same-sex couples. We have also reviewed our ceremony to ensure it is inclusive and appropriate for same-sex marriages.</p>
Continue to support the military community in the county, including veterans and reservists, and ensure equality of access to services, particularly around issues of health and wellbeing and education.	3	<p>Support to the military and the communities in which they reside have continued with positive links between the bases and the local councillor military champions.</p> <p>Signing of the Corporate Covenant in September demonstrated the council’s commitment to employing more reservists, encouraging other businesses to also pledge their support. The Civilian Military Partnership continues to meet twice yearly with sub groups for health and wellbeing and education to ensure the aims of the community covenant are met. Health &amp; Wellbeing group ensure that military personnel and families are not disadvantaged and have access to the same services as others including identifying need as part of the JSNA. The</p>

		Education group have focused on encouraging schools to be inclusive of military children and the challenges they face, simplifying the admissions process for in term admissions, and accommodating the re-basing of families from Germany.
In addition to ensuring all staff have completed the mandatory 'Respect for People' eLearning course, to also encourage all employees to access further learning and development opportunities to increase their awareness and understanding of equality and diversity issues.	4	The council regularly promotes the Respect for People eLearning course, not only for new starters but encouraging all staff to do the course as a refresher every year or two. This last year we have also run Equality Act essential training for managers and Mental Health workshops to raise awareness and understanding.
Ensure any organisational or employment changes are handled with a well-mannered approach to diversity by completing service and community impact assessments for all changes to ensure no group is disproportionately affected and monitoring statistics for redundancy.	4	Family friendly and Flexible Working policies have all been reviewed in 2014/2015 and each time diversity is considered as appropriate. Impact assessments are carried out for all major organisational change projects.
Continue to encourage people from diverse backgrounds to apply for roles at the council, and do more to increase awareness of the support available to staff and guidance for managers to ensure that reasonable adjustments are made where appropriate.	4	<p>Due to the recruitment freeze at the end of 2014/15 and the internal first approach which has been adopted there has been less external recruitment this year. Adverts have been placed in specialist disability press and the council successfully passed the annual assessment to continue to sign up to the Disability Two Ticks commitment. Recruitment and selection training continues to cover equality requirements.</p> <p>The HR department monitors the characteristics of staff leaving the organisation and the reasons for their departure, and presents their findings in the annual 'Equality in the Workplace' report. The most recent edition can be downloaded: <a href="https://www.oxfordshire.gov.uk/cms/sites/default/files/folders/documents/aboutyourcouncil/plansperformancepolicy/equality/EqualityReport.pdf">https://www.oxfordshire.gov.uk/cms/sites/default/files/folders/documents/aboutyourcouncil/plansperformancepolicy/equality/EqualityReport.pdf</a></p>

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## ANNEX 2

### Equality Policy – Action Plan 2015/16

The council is required to set and publish specific, measurable equality objectives. We have to report at least annually on our progress against these, and we have to revise our objectives every four years.

In our *Equality Policy 2012-17*, we set ourselves the following objectives:

1. Understanding the needs of individuals and communities
2. Providing accessible, local and personalised services
3. Supporting thriving and cohesive communities
4. Promoting a culture of fairness in employment and service delivery

For each objective we identified a number of actions which were intended to build on achievements and address areas where improvement was needed in our performance.

#### Council-wide Actions

Action	Objective
Ensure the content of the Joint Strategic Needs Assessment contains access to ever-richer data on groups with protected characteristics or facing inequalities of outcome or access and make it publicly available on the JSNA website. (Produced by the Chief Executive's Office, commissioned by the Public Health directorate.)	1
Ensure that Service and Community Impact Assessments (SCIAs) are produced for all new and updated policies and service delivery decisions. In particular we will assess all budget proposals to consider the impacts of any potential changes on groups with protected characteristics.  (A SCIA is a review of the potential impact of policies and is intended to ensure the diverse needs of our individuals and communities in Oxfordshire are met. We assess the impact of decisions on any relevant community, but with particular emphasis on groups that share the protected characteristics in the Equality Act 2010.	1

Continue to enhance the focus on 'locality working', ensuring officers and members work together to listen to and understand local needs.	2
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### Children, Education and Families

Action	Objective
Take action to identify and agree plans and measures to address gaps in educational attainment levels between children from different backgrounds and who share protected characteristics (for example, looked after children, some black and minority ethnic groups, and some children with special educational needs, including children and young people with Autistic Spectrum Disorders).	3
Ensure equality and diversity are considered throughout the service redesign, including the integration of Children's Social Care and Early intervention Services, so that the potential impact of changes on groups with protected characteristics is fully understood and acted upon if necessary.	1

### Social and Community Services' Actions

Action	Objective
Increase the use of the Shared Lives service by older people.  (Shared Lives is a scheme where adults who need care and support are offered the chance to stay in a Shared Lives carer's home, or, alternatively, to be supported in their own home by a Shared Lives carer.)	3
Ensure all staff in Integrated Mental Health Teams are trained in relation to Independent Mental Capacity Advocacy and Independent Mental Health Advocacy	2
Improve information available for service users and carers when choosing new services	2

## Public Health

Action	Objective
Ensure services commissioned by the Public Health Directorate contain specifications that detail the need for services to be locally accessible and personalised where appropriate.	2
Continue the countywide Thriving Families programme, Oxford's Breaking the Cycle programme, and Banbury's Brighter Futures programme to bring a range of agencies together to improve outcomes in the most deprived communities of Oxfordshire.	3
Conduct Service and Community Impact Assessments (and Health Equity Audits* if needed in addition to any Service and Community Impact Assessments) to ensure that services are fairly accessible to the whole population and that all ethnic groups are able to access services  (*A Health Equity Audit (HEA) is a review procedure, which examines how health determinants, access to relevant health services, and related outcomes are distributed across the population, relative to need.)	4

## Environment and Economy

Action	Objective
Ensure equality and diversity are considered throughout the development of proposals for the Supported Transport Programme, specifically by engaging with stakeholders and user groups, so that the potential impact of changes on groups with protected characteristics is fully understood.  (Supported transport includes home to school transport, subsidised buses, and transport to day centres, along with various other forms of direct or indirect provision.)	1
Ensure equality and diversity is integrated into the culture of the Customer Service Centre by embedding it within the behaviour and attitudes of staff, as well as the routine policies, procedures and practices of the service.	4

Ensure equality and diversity are considered throughout the development of proposals for the Local Transport Plan, specifically by engaging with stakeholders and user groups.	1
Continue to develop and expand the opportunities for work placement and apprenticeships across the county, particularly targeting those from disadvantaged backgrounds such as those leaving care, non-school attendees and Young Carers.	4

### Fire and Rescue Service

Action	Objective
We will ensure that all of our priority projects are assessed for any adverse impact on all community groups and that a positive outcome is achieved for all members of the community who live, work and travel within Oxfordshire.	4
As a result of our 365 alive vision Oxfordshire County Council Fire and Rescue Service has reduced the number of deaths due to accidental fires and road accidents in the home by 425 in the last eight years and we will continue to build on this work through the use of our risk reduction modelling and our CRMP planning process to target vulnerable individuals at risk and reduce deaths by an additional 6% above the overall target by 2018.	2
We will continue to engage with young people in vulnerable areas through our youth engagement programmes with the aim of increasing our safety messages by 20% each year.	3

### Gypsy and Traveller Service

Action	Objective
Continue to host trainee Police Officers on the Thames Valley Police Community Placements programme to help build awareness of gypsy and traveller culture and foster stronger relationships between gypsy and traveller families and the Police.	3



## Trading Standards

Action	Objective
Ensure that tailored support packages are provided to increase personal safety for vulnerable people protecting them from risks to their safety and wellbeing in their home, including scams and other forms of financial abuse	2

## Chief Executive's Office

Action	Objective
Continue to ensure that Oxfordshire Voice Citizens' Panel, our resident's panel, is broadly representative of the makeup of the county to ensure it is balanced to reflect age, gender, ethnicity and disability.	1
Continue to support the military community in the county, including veterans and reservists, and ensure equality of access to services, particularly around issues of health and wellbeing and education.	3
In addition to ensuring all staff have completed the mandatory 'Respect for People' eLearning course, to also encourage all employees to access further learning and development opportunities to increase their awareness and understanding of equality and diversity issues.	4
Ensure any organisational or employment changes are handled with a well-mannered approach to diversity by completing service and community impact assessments for all changes to ensure no group is disproportionately affected and monitoring statistics for redundancy.	4
Continue to encourage people from diverse backgrounds to apply for roles at the council, and do more to increase awareness of the support available to staff and guidance for managers to ensure that reasonable adjustments are made where appropriate.	4
Continue to expand the number of apprenticeship opportunities to create entry level posts for young people, including those from disadvantaged backgrounds such as those leaving care, non-school attendees and Young Carers.	4

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## CABINET – 26 MAY 2015

### STAFFING REPORT – QUARTER 4 2014/15

Report by Chief HR Officer

#### Introduction

1. This report provides an update on staffing numbers and related activity during the period 1 January 2015 to 31 March 2015. Progress is also tracked on staffing numbers since 31 March 2014 as we continue to implement our Business Strategy.

#### Current numbers

2. The establishment and staffing numbers (FTE) as at 31 March 2015 are 4295.92 establishment; 3865.68 employed in post. These figures exclude the school bloc. Although reduced in number over the full year, the establishment figures have increased this quarter due to work being carried out in preparation for the move to Hampshire.
3. We continue to monitor the balance between full time and part time workers to ensure that the best interests of the Council and the taxpayer are served. For information, the numbers as at 31 March 2015 were as follows - Full time 2763 and Part time 2267. This equates to the total of 3865.68 FTE employed in post.
4. The changes in both establishment and staffing numbers since 31 March 2014 are shown in the table below. A breakdown of movements by directorate for this financial year is provided at Annex 1.

	FTE Employed	Establishment FTE
Reported Figures at 31 March 2014 – Non-Schools	3966.53	4361.10
Changes	-100.85	-65.18
Reported Figures at 31 March 2015 – Non-Schools	3865.68	4295.92

## Quarter 4 Update

5. We remain committed to redeploying displaced staff wherever possible via our Career Transitions Service. This is getting more difficult as staffing numbers reduce across the Council. There were three redeployments this quarter.
6. Following the implementation of the vacancy freeze in November 2014, a more rigorous procedure was introduced during December as a step to help with the budget position. This includes a review of all vacancies, as well as casual, agency and interim appointments. Only essential frontline social care posts have been exempted. All other posts where it is deemed that recruitment is essential need approval from Directorate Leadership Teams before being released. In addition, managers are being asked to consider alternatives to recruitment and make the best use of the resources they already have where the work has to continue.
7. We recognise that operational services are critical and cannot be left without any cover. Prudent use of agency staff is therefore deployed to ensure continuity of service. In common with all employers, the council deploys agency staff as cover for instances of maternity leave, illness and short-term gaps in recruitment when a permanent member of staff has left the council and their permanent replacement is not due to arrive until sometime after. The cost of agency staff this quarter was £1,628,147 down slightly from the previous quarter. A breakdown of spend on agency staff by service area is attached at Annex 2.
8. We will continue to track progress during the year ahead. As at 31 March 2015 the position is as below:
  - **Establishment FTE** down from 4361 to 4296 – 1.49% reduction
  - **Staff employed FTE** down from 3966 to 3866 – 2.52% reduction

## Accountability

9. Staffing numbers continue to be monitored rigorously. All new posts are reviewed by the Chief HR Officer on a weekly basis and Deputy Directors are required to check and confirm staffing data for their services on a quarterly basis with appropriate challenge provided by the relevant HR Business Partner.

## Recommendation

10. The cabinet is RECOMMENDED to:
  - (a) note the report; and
  - (b) confirm that the Staffing Report meets the requirements in reporting and managing staffing numbers.

STEVE MUNN  
Chief HR Officer

Contact Officer: Sue James, HR Officer, 01865 815465.

28 April 2015

DIRECTORATE	Total Established Posts at 31 March 2015	Changes to Establishment since 31 March 2014	FTE Employed at 31 March 2015	Changes in FTE Employed since 31 March 2014	Vacancies at 31 March 2015	Cost of Agency Staff * £
CHILDREN, EDUCATION & FAMILIES	1405.11	-11.66	1218.55	-73.37	84.15	523,558
PUBLIC HEALTH	24.88	-1.00	21.48	-1.43	2.00	1,294
SOCIAL & COMMUNITY SERVICES	821.58	9.20	731.45	-2.06	51.40	118,655
COMMUNITY SAFETY	389.42	-6.52	372.87	-14.72	12.68	43,566
ENVIRONMENT & ECONOMY	537.78	20.83	484.67	6.22	38.49	538,880
OXFORDSHIRE CUSTOMER SERVICES	594.74	-135.37	547.10	-63.67	13.00	289,050
CHIEF EXECUTIVE'S OFFICE	285.57	62.32	264.20	52.55	8.41	113,144
CULTURAL SERVICES	236.84	-2.98	225.36	-4.37	8.81	0
<b>TOTAL</b>	<b>4295.92</b>	<b>-65.18</b>	<b>3865.68</b>	<b>-100.85</b>	<b>218.94</b>	<b>1,628,147</b>

Please note: The vacancies plus the FTE employed will not always be equivalent to the Establishment. Where employees are absent eg on maternity leave or long term sick and have been temporarily replaced, both the absent employee and the temporary employee will have been counted.

\* This figure does not necessarily bear a direct relationship with vacant posts.

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Directorate	Service	Spend £	Change from previous quarter £	Types of Posts Covered
Children, Education & Families	Education & Early Intervention	221,421	16,427	Project Support, Social Workers, Supply cover, Hub Workers.
Children, Education & Families	Childrens Social Care	336,012	50,732	Residential Workers, Administration, Social Workers
Children, Education & Families	Central Costs	874	-8,505	PA
Children, Education & Families	Schools Agency included in Q1 in error	-34,749	-34,749	N/A
<b>Total Children Education &amp; Families</b>		<b>523,558</b>	<b>23,905</b>	
Public health	LA Commissioning Responsibilities	1,294	-6,523	Data Analyst
<b>Total Public Health</b>		<b>1,294</b>	<b>-6,523</b>	
Social & Community Services	Adult Social Care	113,496	-47,550	Social Workers, Day Centre Workers
Social & Community Services	Joint Commissioning	5,159	-5,020	Consultation
<b>Total Social &amp; Community Services</b>		<b>118,655</b>	<b>-52,570</b>	
Community Safety	Community Safety	23,296	723	Data Analysis
Community Safety	Fire and Rescue & Emergency Planning	20,271	9,690	Registry, Emergency Planning
<b>Total Community Safety</b>		<b>43,566</b>	<b>10,414</b>	
Environment & Economy	Strategy & Infrastructure	252,107	13,188	Admin, Engineer, Transport Planner, Project Workers, Planning Officers, GIS Mapping
Environment & Economy	Commercial	286,773	-97,174	Facilities, Admin, Drivers
<b>Total Environment &amp; Economy</b>		<b>538,880</b>	<b>-83,986</b>	
Oxfordshire Customer Services	Management Team	0	-15,090	N/A
Oxfordshire Customer Services	Education Support Services	117,347	110,614	Not known
Oxfordshire Customer Services	ICT	336	336	Training Admin
Oxfordshire Customer Services	Business Development	62,988	-2,615	Project Workers
Oxfordshire Customer Services	Customer Service Centre	76,674	-29,650	Customer Service Advisors
Oxfordshire Customer Services	HR	512	-2,112	Not known
Oxfordshire Customer Services	Operational Finance	25,043	4,222	Income, Finance Staff
Oxfordshire Customer Services	Pension, Procure to Pay	6,149	-417	Pensions Administrators
<b>Total Oxfordshire Customer Services</b>		<b>289,050</b>	<b>65,289</b>	
Chief Executive's Office	Human Resources	31,736	-13,139	Media & Comms
Chief Executive's Office	Corporate Finance & Internal Audit	59,028	28,716	Accountant, Procurement
Chief Executive's Office	Legal Services	14,378	-1,436	Solicitors
Chief Executive's Office	Governance	-19	742	N/A
Chief Executive's Office	Policy	8,021	-1,985	Support
<b>Total Chief Executive's Office</b>		<b>113,144</b>	<b>12,897</b>	
Cultural Services	Library Service	0	-623	N/A
<b>Total Cultural Services</b>		<b>0</b>	<b>-623</b>	
<b>Grand Total All Directorates</b>		<b>1,628,147</b>	<b>-31,198</b>	

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Division(s): N/A
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## CABINET – 26 MAY 2015

### FORWARD PLAN AND FUTURE BUSINESS

#### Items identified from the Forward Plan for Forthcoming Decision

#### Topic/Decision

#### Portfolio/Ref

#### Cabinet, 23 June 2015

- **Appointments 2015/16**  
To consider member appointments to a variety of bodies which in different ways support the discharge of the Council's Executive function.

Cabinet, Leader  
2015/041
- **Recommendations of the Early Intervention Cabinet Advisory Group (CAG)**  
To seek approval of the recommendations.

Cabinet, Children, Education & Families  
2015/022
- **Provisional 2014/15 Revenue and Capital Outturn**  
To consider the 2014/15 outturn report and agree the treatment of any budget under or overspends.

Cabinet, Finance  
2015/001
- **Novation of Health Visitor Contract**  
To ratify the approach being taken to novate the Health Visiting contract in line with the transfer of commissioning responsibility for 0-5 public health services to local authorities from the 1 October 2015.

Cabinet, Public Health & the Voluntary Sector  
2015/040

#### Deputy Leader, 1 June 2015

- **Oxfordshire Fire & Rescue Service - Collaboration Across Thames Valley Blue Light Services**  
To seek approval of the contents of the proposed Memorandum(s) of Understanding (MOU('s)) and the collaborative Blue Light Services approach.

Deputy Leader,  
2015/037

To request that the Deputy Leader signs the MOU('s) on behalf of the Cabinet of Oxfordshire County Council and direct the Chief Fire Officer to continue with further collaboration.

## Cabinet Member for Children, Education & Families, 15 June 2015

- **National Citizen's Service (NCS) - Contract for 2015-18** Cabinet Member  
To seek agreement of the contract between OCC and The for Children,  
Challenge Network for delivery of the NCS programme 2015-18. Education &  
Families,  
2015/039

## Cabinet Member for Cultural & Community Services, 22 June 2015

- **Archive Service Forward Plan and Policies for Collections Management & Development; Collection Care & Conservation; and Access** Cabinet Member  
The Archive Service is currently applying for accreditation under for Cultural &  
The National Archives Accreditation Scheme which is the UK Services,  
2015/003  
standard for archives. It defines good practice and identifies  
agreed standards, thereby encouraging development. In order  
to gain Accreditation, the Service's Forward Plan, and policies  
for Collections Management & Development; Collection Care &  
Conservation; and Access must be approved by its governing  
body. This report seeks that approval.

## Cabinet Member for Environment, 18 June 2015

- **Proposed Puffin Crossing - Cumnor Hill** Cabinet Member  
To seek approval of the proposals. for Environment,  
2014/115
- **Proposed Variation of Charges for Residents Permits and On-Street Pay & Display Spaces** Cabinet Member  
To seek approval of the proposals. for Environment,  
2014/200
- **Proposed Amendments to Residents Parking Scheme - Abingdon** Cabinet Member  
To seek approval to proceed. for Environment,  
2013/017
- **Proposed 20mph Speed Limit - High Street, Shrivenham** Cabinet Member  
To seek approval of the proposals. for Environment,  
2015/008
- **Proposed Disabled Parking Places - Various Locations Throughout the County** Cabinet Member  
To seek approval of the proposals. for Environment,  
2015/009