



**Cabinet  
Tuesday, 10 November 2015**

**ADDENDA**

**4. Questions from County Councillors (Pages 1 - 6)**

Attached.

**5. Petitions and Public Address (Pages 7 - 8)**

Attached.

**6. Public Consultation Report - Supported Transport (Subsidised Buses and Dial-A-Ride) (Pages 9 - 10)**

The comments and recommendation of the Performance Scrutiny Committee is attached.

**8. Staffing Report - Quarter 2 - 2015 (Pages 11 - 12)**

Replacement Annex attached.

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## CABINET – 10 NOVEMBER 2015

### ITEM 4 – QUESTIONS FROM COUNTY COUNCILLORS

Question received from the following Member:

#### **Question from Councillor Susanna Pressel to Councillor Hilary Hibbert Biles**

“Councillor Biles gave the following answer to a supplementary question from me in Council on 8 September (page 28 on the agenda of our last Council meeting):

"I think children's centres do promote oral health but in actual fact it is the responsibility of the NHS not this Council. We are a monitoring organisation." Please could you tell me if this is correct?

The latest Public Health Annual Report in its section on oral health says that the local authority "has an emphasis on prevention". It gives a long list (page 55 to 56) of what we do, with much of the work being in pre-school settings, so I'm puzzled by the Cabinet member's statement. I hope this work won't be lost if the children's centres are closed.”

#### **Answer**

“On 1st April 2013 the statutory responsibility for the commissioning of commissioning dental epidemiology transferred from the NHS to local government.

The dental public health functions of LAs are described in regulations and include a statutory requirement to provide or secure provision of oral surveys. The statutory instrument states that:

*A local authority shall provide, or shall make arrangements to secure the provision of, the following within its area—*

#### *Oral health surveys to facilitate—*

- i. the assessment and monitoring of oral health needs,*
- ii. the planning and evaluation of oral health promotion programmes,*
- iii. the planning and evaluation of the arrangements for provision of dental services as part of the health service, and*
- iv. where there are water fluoridation programmes affecting the authority's area, the monitoring and reporting of the effect of water fluoridation programmes.*
- v. The local authority shall participate in any oral health survey conducted or commissioned by the Secretary of State under paragraph 13(1) of Schedule 1 to the 2006 Act (powers in relation to research etc.) so far as that survey is conducted within the authority's area.*

Domain 4 (Healthcare public health and preventing premature mortality) of the Public Health Outcomes Framework includes an indicator relating to “tooth decay in children aged 5.” Continued local dental epidemiology survey provision will be required for the monitoring of this indicator.

Oxfordshire County Council have a requirement to provide a capacity to collect dental epidemiology (surveys) which help inform on the local oral health of the population. This information can help NHS England in understanding the need for dental services locally.

In April 2015 OCC let a contract to Community Dental Services CIC for the collection of dental epidemiology, thus meeting the Council’s statutory requirement. The County Council collect data in line with the National Dental Intelligence Programme which provides a scientifically robust methodology and allows comparability of local data with regional and national data.

All Dental Services are commissioned by NHS England, which does include an element of oral health promotion in these contracts. Oral health promotion is on the same footing as providing dental services which is a clear NHSE responsibility.

OCC does not have a statutory obligation to deliver oral health promotion.”

**Question from Councillor Glynis Phillips to Councillor Hilary Hibbert Biles**

“Does the Cabinet Member for Public Health and the Voluntary Sector share the Association of Directors of Public Health 'deep concern and disappointment' about the Tory governments' £200m cut to non-NHS public health budget which will result in a 6.2% reduction to Oxfordshire's budget and explain what this cut means for the county's Public Health services?”

**Answer**

“Yes, the cut to the non-NHS public health grant is disappointing. Our Government has to make difficult choices in all areas of public spending. Prudent management of the Public Health grant by the County Council means that we plan to make this reduction without impact on front-line services.”

**Question from Councillor John Howson to Councillor Melinda Tilley**

“To ask the cabinet member the cost of non SEN home to school transport contracts in Oxfordshire for the summer and autumn terms of 2015 compared with the same periods in 2014 and the same figures for SEN transport? Within these figures, how much is due to in-year pupil arrivals that could not be placed within statutory walking distance of a school?”

**Answer**

See attached Annex.

**Question from Councillor Roz Smith to Councillor Nick Carter**

"Delays with the start of the building project at Windmill School are well documented. Would the cabinet member agree that lessons have been learnt regarding the lack of early communication from Carillion, and continuing communication that lead to unnecessary stress and wasted time?"

**Answer**

As with all our building projects we are always learning lessons and seeking to improve the way they are taken through from inception to completion. Schools provide an added complexity due to;

1. the fact that there is an additional link between the school and its governors and the council and;
2. the delivery timetable is more rigid due to school term dates.

The council is working closely with Carillion to improve communications with schools and they have changed their structure to reflect this need.

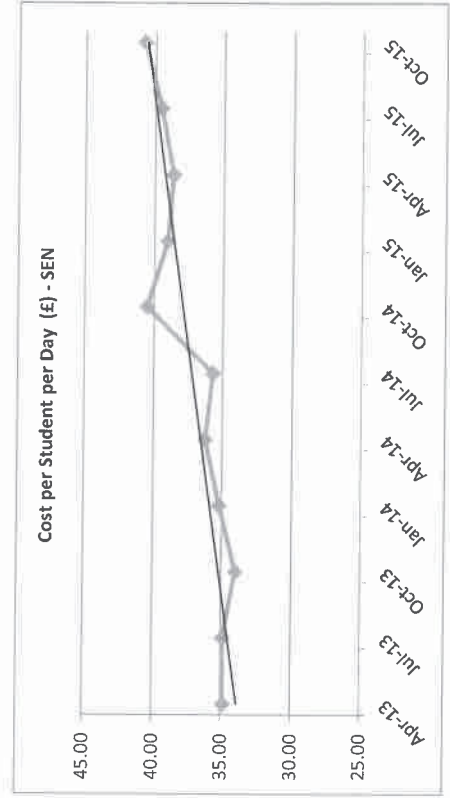
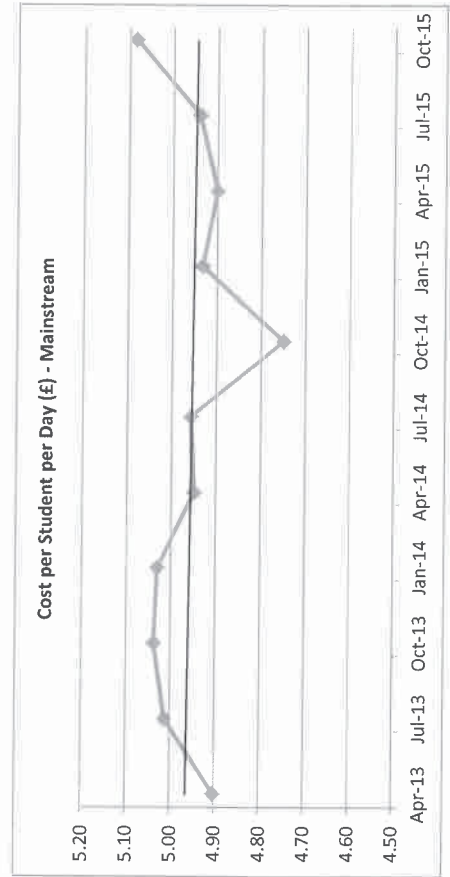
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ROUTE EFFICIENCY PROGRAMME  
HOME TO SCHOOL TRANSPORT CONTRACTS: NUMBER OF STUDENTS CARRIED AND DAILY COST PER STUDENT

ALL STUDENTS

MAINSTREAM STUDENTS				SEN STUDENTS			
Month	Number of students carried	Overall cost per day (£)	Cost per student per day (£)	Month	Number of students carried	Overall cost per day (£)	Cost per student per day (£)
Apr-13	10227	79957	7.82	Apr-13	996	34703	34.84
Jul-13	10279	86566	8.42	Jul-13	1172	40912	34.91
Oct-13	10174	82757	8.13	Oct-13	1087	36975	34.02
Jan-14	10266	87862	8.56	Jan-14	1200	42249	35.21
Apr-14	10348	85817	8.29	Apr-14	1106	40079	36.24
Jul-14	10308	86910	8.43	Jul-14	1164	41578	35.72
Oct-14	10215	85906	8.41	Oct-14	1045	42346	40.52
Jan-15	10215	91252	8.93	Jan-15	1198	46771	39.04
Apr-15	10126	93124	9.20	Apr-15	1289	49818	38.65
Jul-15	10064	94198	9.36	Jul-15	1286	50834	39.53
Oct-15	9594	93737	9.77	Oct-15	1226	51184	41.75

Source: Transport contract data recorded in ONE system, report TCON001  
Data is for month end, except July which is at month start  
Prepared by James Drew, Nov 2015



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## CABINET – 10 NOVEMBER 2015

### ITEM 5 – PETITIONS AND PUBLIC ADDRESS

#### Public Address

The Leader of the Council has agreed the following requests to address the meeting:-

Item	Speaker
Item 6 – Public Consultation Report – Supported Transport (Subsidised Buses and Dial-a-Ride)	<p>Cllr Roy McMillan, Chairman of South Stoke Parish Council (3 mins)</p> <p><b>Mr Hugh Jaeger, Chair of Bus Users Oxford and a Director of Bus Users UK (3 mins)</b></p> <p>Cllr Roz Smith ) <b>Cllr Susanna Pressal*</b> ) local Cllr Kieron Mallon )councillor <b>Cllr Laura Price</b> ) 5 mins Cllr Steven Curran, Shadow Cabinet Member for Environment (5 mins) <b>Cllr Liz Brighthouse, Chairman of Performance Scrutiny Committee (5 mins)</b></p> <p>* Will be submitting a petition</p>

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## CABINET – 10 NOVEMBER 2015

### PUBLIC CONSULTATION REPORT – SUPPORTED TRANSPORT (SUBSIDISED BUSES AND DIAL-A-RIDE)

#### Comments from the Performance & Scrutiny Committee

##### Background

At its meeting on 5 November the Performance & Scrutiny Committee considered the feedback from the public consultation and the report to Cabinet on 10 November in order for the committee to give their views on the proposals to be considered by Cabinet.

The Committee AGREED: that the following views be passed to Cabinet for consideration and Cabinet be RECOMMENDED to support proceeding with reducing bus subsidies by £2.3m rather than £3.7m and to support updating the methodology to include additional criteria for the rurally isolated and deprived areas.

##### Focus of discussion at Committee

- Further consideration was needed on the dial-a –ride proposals on a number of grounds:
  - Concerns over the level of consultation and engagement with users and in particular whether the focus groups referred to in the report had been held;
  - Questions over whether the impact assessment and mitigation were sufficiently robust with concrete measures in place. Reference was made to the powerful assessment that users were within 400 yards of a bus stop and most could walk. It was noted that this was a self-assessment provided by users and was not provided in relation to this piece of work and therefore it was possible that its use could be challenged.
  - The Aspire pilot was seen as an aspirational alternative rather than a concrete proposal to mitigate the impact. More work was needed to ensure it was extendable to rural areas.
  - Access for the frail elderly to do their own shopping was of value to their overall well-being and could impact on costs to the local authority if they become isolated. Any proposals should actively involve adult social care
- The Committee noted from their own experience talking to users and with regard to comments from ORCC that people may be willing to pay more and asked that this be considered. In particular bus operators should be urged to consider fare increases prior to cutting currently subsidised routes altogether.
- The Committee heard that it was not possible to legally require payment for concessionary passes and asked that Cabinet be urged to pursue this with Government and in the meantime the Committee supported measures to encourage voluntary payments for concessionary passes or individual journeys.
- There was some discussion of the methodology and concern that the complexity of how some services were provided (with one bus doing a number of different routes) could make a service as a whole unviable if part was withdrawn. Some Members felt that there was no possible way to choose which subsidies to remove. The Committee emphasised the need to treat people fairly and that decisions be based on detailed information.
- The Committee considered how services might work in future and noted the opportunities to engage with operators to find new more integrated models of provision. There was some optimism that some services would remain even where the subsidy was lost. There was strong support for future market testing.



STAFFING REPORT 30 SEPTEMBER 2015

<b>DIRECTORATE</b>	<b>FTE Employed at 30 September 2015</b>	<b>Changes in FTE Employed since 31 March 2015</b>	<b>Cost of Agency Staff * £</b>
<b>CHILDREN, EDUCATION &amp; FAMILIES</b>	1203.80	-14.75	975,731
<b>PUBLIC HEALTH</b>	21.70	0.22	8,905
<b>SOCIAL &amp; COMMUNITY SERVICES</b>	701.05	-30.40	658,505
<b>COMMUNITY SAFETY</b>	345.76	-27.11	0
<b>ENVIRONMENT &amp; ECONOMY</b>	392.23	-92.44	229,267
<b>OXFORDSHIRE CUSTOMER SERVICES</b> (excluding Cultural Services)	372.60	-174.50	278,368
<b>CHIEF EXECUTIVE'S OFFICE</b>	315.50	51.30	202,865
<b>CULTURAL SERVICES</b>	217.04	-8.32	0
<b>TOTAL</b>	<b>3569.68</b>	<b>-296.00</b>	<b>2,353,641</b>

Please note: 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.

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